Menstrual & Hygiene Equity for Greater Boston:
The Intervention, Impacts, and Solutions

Pilot Program: Year III

Final Report by Hope & Comfort
August 2022

Generously supported by Combined Jewish Philanthropies' The Miriam Fund
# Table of Contents

Executive Summary 3  
Introduction 4  
**Period Poverty and Hygiene Insecurity** 5  
  Public Policy and Menstrual Equity 6  
  Relationship Between Hygiene Insecurity + Period Poverty 7  
Overview of Pilot Program: Year I & Year II 7  
**2021-22 Program Structure: Year III** 8  
  Demographics 8  
  Year III Participating Pilot Partner Organizations 9  
  The Survey 10  
**Personalized Menstrual & Hygiene Kit** 11  
  Menstrual Products 11  
  Hygiene Products 12  
**The Numbers at a Glance: Year Three** 14  
  Menstrual Products Distributed 14  
  Hygiene Products Distributed 14  
**Survey Results: Needs, Barriers, & Program Impacts** 15  
  Lack of Access to Period Products 15  
  Financial Barriers 16  
  Alternatives & Makeshift Solutions 18  
  Menstrual Stigma & Shame 19  
  School Attendance 20  
  Extracurricular Activities 21  
  Menstrual Products in Schools 21  
  Menstrual Education & Knowledge 22  
  Social Activities 23  
  Self-Esteem 24  
  Mental & Physical Health 24  
**Program Successes & Suggested Improvements** 27  
  High Youth Satisfaction 27  
  Overall Participant Feedback 28  
  Overall Partner Feedback 30
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key Take-Aways &amp; Next Steps</td>
<td>31</td>
</tr>
<tr>
<td>What Can You Do?</td>
<td>32</td>
</tr>
<tr>
<td>References</td>
<td>33</td>
</tr>
<tr>
<td>Acknowledgments</td>
<td>34</td>
</tr>
</tbody>
</table>
Executive Summary

Period poverty is defined as a lack of access to period products such as pads, tampons, and pantiliners that are essential for managing one's monthly menstrual cycle, often due to financial and other access-related constraints. There is a dearth of research and programs to support access to menstrual products in the United States, and no studies known to us on the impacts of period poverty in the Greater Boston area specifically. This report serves to fill that gap with a body of stories and data to inform policies and programming that address period poverty and hygiene insecurity for youth in need.

In the third and final year of Hope & Comfort’s Menstrual + Hygiene Equity pilot program to address hygiene insecurity and period poverty, we served 165 youth menstruators by providing essential hygiene products including soap, deodorant, shampoo, dental products, and period products in a personalized monthly kit, as well as gathering insights from participating youth through surveys to better understand their lived experiences of menstruation and hygiene insecurity, their challenges, and their product preferences.

The results of our survey showed widespread unmet need for period products and structural barriers to access including financial, societal, and social barriers. This had real and serious consequences for our youth participants including missing school, extracurricular, and social activities, lowered self-esteem, stress, and physical discomfort.

100% of survey respondents said they would feel more comfortable and confident if they always had the period and hygiene products they needed.

89% of participants said that receiving period and hygiene products from Hope & Comfort had improved their self-esteem.

However, offering free, reliable, and personalized hygiene and period products to youth through Hope & Comfort’s pilot program allowed participants to have easy access to the products they needed, reduced their stress, made them feel more self-assured in school, and improved their overall health. The benefits and successes of this program were evident in both the data collected and shared throughout this report, and in the stories and feedback shared from both our participants and our partners. All our stakeholders reported high levels of satisfaction with the program and suggested ways to further expand our offerings to a wider group of youth in need.

As we work toward systemic change to combat the root causes of period poverty and hygiene inequity, Hope & Comfort remains committed to providing high quality menstrual and hygiene products in a dignified manner to young people and families in need across Greater Boston and beyond.
Introduction

Hope & Comfort is a Needham-based 501(c)3 nonprofit organization with a mission to provide essential hygiene products to support and improve the health, self-esteem, and hygiene education of youth and families in need across Greater Boston and beyond.

With the generous support of a grant from The Miriam Fund, a program of Combined Jewish Philanthropies (CJP) in Boston, Hope & Comfort completed a three-year pilot program for youth in Greater Boston who identify as menstruators with the goals of: 1) Understanding the experience of hygiene and menstrual insecurity and, 2) Providing a free and reliable source of period and hygiene products to youth in need.

Over the three years, the program has grown significantly from 55 diverse participants in year one to 165 participants in year three. It has also evolved to respond to ongoing client feedback and meet rising demand — including responding to the unique challenges brought on by the COVID-19 pandemic. Through it all, the pilot program’s core model and intervention has remained consistent and high impact — an anonymous monthly survey to gather insights on youths’ needs, challenges, and experiencing surrounding menstruation and hygiene, and a monthly distribution of personalized hygiene and menstrual products.

The following report details the culminating program year three (2021-22) and, where applicable, draws comparisons and conclusions across all pilot program years. The voices of participating youth are centered to illustrate key findings, trends, and themes drawn from our quantitative and qualitative data analysis. Although the program has expanded significantly from year one, Hope & Comfort recognizes that the results of the surveys are still reflective of a relatively small population and does not necessarily represent the views of all youth menstruators. That said, the findings outlined in the following sections play an instrumental role in learning about youths’ lived experiences with period poverty as we continue to build effective programing to address hygiene insecurity, work to foster widespread awareness towards change, and ultimately strive towards systemic solutions.
To the best of our knowledge, there are no studies to date exploring period poverty and the unmet need for menstrual products in the Greater Boston area. We believe this report is poised to serve as a foundational set of findings, upon which we hope a growing body of data, storytelling, and research related to menstrual equity in the U.S. will help to raise awareness, fuel advocacy efforts, and drive quality improvements for programming which engages anyone who menstruates.

**Period Poverty & Hygiene Insecurity**

Across the globe, there is growing recognition of the inequities faced by those who menstruate, particularly low-income women and girls. Period poverty refers to a lack of access to period products, education, and hygiene facilities to manage monthly menstruation, due to financial and other access-related constraints.¹ Detrimental to health, dignity, and equity, period poverty intersects with larger systems of oppression—including economic inequality and sexism—and helps to perpetuate the nearly-universal stigma and shame that surrounds menstruation.

Period poverty is the lack of access to period products, education, and hygiene facilities to manage monthly menstruation due to financial and other access-related constraints.

While much attention has focused on low-income countries largely in the Global South where menstruators often lack access to basic hygiene, clean water, and/or waste management, the United States is not immune to period poverty. In fact, 16.9 million people who menstruate in the U.S. are living in poverty, and a 2019 survey showed that nearly two thirds of low-income women from a large U.S. city could not afford menstrual products within the last year.² Nearly half of those same respondents said they had to choose between buying food and period products, and many resorted to makeshift solutions including toilet paper, rags, and diapers.³

Yet, period poverty is more than a financial strain. Not having the resources to manage one's period also takes a physical, emotional, and mental toll. Rationing disposable products or using insufficient alternatives can have negative health consequences ranging from irritation and discomfort to reproductive tract infections,⁴ greater susceptibility to sexually transmitted infections, and—in some rare cases—a life-threatening condition called toxic shock syndrome.⁵ Research also points to the mental health consequences associated with lack of access to period products. A recent study of college-aged women in the U.S. found that students who had experienced period poverty in the last year reported higher rates of depression when compared with those who had not.⁶

Young menstruators are particularly impacted by period poverty due to the onset of puberty and widespread lack of health education and barriers to accessing products. In a national survey of 1,000 teen menstruators, two-thirds of students felt stress due to a lack of access to period products, and 1
in 5 teen menstruators in the U.S. had struggled to afford period products. These challenges were compounded by feelings of shame and embarrassment, as well as lack of education and support from schools. Nearly 4 out of 5 teens felt they needed more in-depth education around menstrual health, and 64% felt that society taught them to be ashamed of their periods.\textsuperscript{7}

The above data shows the national scope of period poverty and highlights two critical points related to Hope & Comfort’s work. First, the research summarized in this section—while incredibly valuable and instructive—represents the bulk of the research that has been conducted on this issue in the U.S. There is truly a dearth of studies that investigate the nuanced impacts of period poverty in this country, and even fewer resources that center the voices of those experiencing it. Filling this gap is the driving force behind the current report. Secondly, the limited data that is available nationally supports Hope & Comfort’s pilot program experiences and findings. The negative impacts of period poverty are wide-ranging, significant, and have real and lasting impacts on menstruator’s lives, particularly the lives of adolescents and young adults in low-income households.

**Public Policy & Menstrual Equity**

Current U.S. laws and policies make the challenge of accessing period and hygiene products even greater for those with low incomes. Thirty-three states view period products as luxury items and impose sales tax (also known as a “tampon tax” or “pink tax”),\textsuperscript{5} while groceries and medications are tax-exempt in most states. This draws a clear distinction between what goods are considered necessities in the eyes of most state lawmakers. Very few states and local jurisdictions require period products to be supplied in public schools, despite considerable research linking absenteeism to lack of access to menstrual products.

Additionally, period products are not covered by government assistance programs—including the Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Women, Infants, and Children program (WIC), or Medicaid—and thus must be paid for out-of-pocket, even by those with very low or no income. Furthermore, the laws governing these programs prohibit participants from trading or selling their food stamps for money or other products. This not only adds to financial hardship and stress for individuals, but also highlights the deep structural inequities and lack of systemic solutions to the widespread issue of period poverty.
Relationship Between Hygiene Insecurity + Period Poverty

**Hygiene Insecurity is the lack of access to basic hygiene products, such as soap, deodorant, dental products, and menstrual products which are essential for health, self-esteem, and dignity.**

Period poverty is a subset of the broader issue of hygiene insecurity. Hygiene insecurity is defined as the lack of access to basic hygiene products such as soap, deodorant, and dental products, as well as period products, which are essential for health, self-esteem, and dignity. Like period products, hygiene products are also excluded from public assistance programs including SNAP and WIC, are not reimbursed by health insurance, and are not covered by other federal, state, or local safety net programs.

Hope & Comfort strives to alleviate hygiene insecurity by providing high-quality hygiene products to youth and families in need in Greater Boston and beyond. In collaboration with our 250+ partner organizations, we distributed over 2 million hygiene products in 2021 alone. Because of our core focus on hygiene access and our growing cadre of community partners, Hope & Comfort is uniquely positioned to address both the acute need for menstrual and hygiene products and to explore the lived experiences of hygiene insecurity and period poverty in the Greater Boston area through this Menstrual + Hygiene Equity pilot program.

**Overview of Pilot Program: Year I & Year II**

In *year one* (2019-20), Hope & Comfort launched the pilot program with the Waltham Boys and Girls Club, serving *55 youth* engaged with their programming. Year one focused heavily on deep-dive, relational, and phenomenological research. To that end, the Hope & Comfort team conducted 20, 60-minute, one-on-one interviews with menstruating youth in need from the Greater Boston area combined with collecting monthly survey data from the 55 youth who participated in our hygiene + menstrual product distributions. The outcomes, lessons learned, and feedback from year one helped to shape the pilot’s future growth and improvements. Click here to read the *Year I* report.

*Year two* (2020-21) expanded the program reach to an additional 6 youth-serving organizations, for a total of *7 participating community partner organizations* and *128 youth* participants. We made greater product customization possible in year two by adding survey options for preferred types and brands, as well as the opportunity to request additional products to share with households due to increased need during the COVID-19 pandemic. Over the course of year two, Hope & Comfort distributed more than *750 menstrual + hygiene kits* and gathered baseline data and insights on the barriers to accessing period products and the impact on youth’s educational and social-emotional well-being. Click here to read the *Year II* report.
Program year three (2021-22) further expanded the pilot program to serve **165 youth menstruators** from **9 partner organizations**. 7 of the 9 partners were returning organizations, and 2 were new pilot partners (added after the program year launched). The staggered start dates for new partners as well as varying levels of youth participation each month contributed to some variability in the population size used to calculate the percentages throughout the report. However, for most of the program year, the core participants remained the same and the figures below reflect the total number of youth served.

**Demographics**

Criteria for youth participation was: (a) Identifying as someone who menstruates; (b) Currently receiving services at one of our participating partner organizations (which, in turn, verified that the participating youth was low-income, as all of Hope & Comfort’s partners are vetted to ensure they reach our target population); (c) Having active email address to receive the monthly survey; and (d) Being between the ages of 11 and 25 at the start of program enrollment. **Age:** Most of the youth we served fell between the ages of 11 and 19, with a higher percentage than previous years identifying as **younger adolescents** ages 11 and 12 (Figure A). Young adults, ages 20-25, accounted for the smallest percentage of survey respondents.

**A. Ages of participants**

**Race/Ethnicity:** In year three, we modified the racial categories and allowed participants to choose more than one race or ethnicity or write in a response in recognition that not everyone fits neatly into a single category. Like previous years, the majority of participants self-

---

**A 2021 survey found that Black & Hispanic menstruators were more likely to report struggling to afford menstrual products than White respondents.** 8
identified as Black, Indigenous, or People of Color (BIPOC)—37% Black/African, 26% Hispanic/Latinx, 4.1% Asian, 2.1% Native American/Indigenous. Another 26% identified as Caucasian/White, and 4.1% opted to not disclose their race (Figure B). A slightly higher number of participants identified as Black/African this year, whereas year two had a higher percentage of Hispanic/Latinx survey respondents. The large number of youth of color enrolled in the program also reflects racial inequities in access to resources and the disproportionate impact of poverty on BIPOC individuals, families, and communities.

**Gender:** We did not ask participants to disclose their genders, only to confirm that they identified as someone who menstruates. We use gender-neutral language in our communications and throughout this report to be inclusive of transgender and non-binary youth who menstruate and who often face additional stigma. We strive to respect the range of identities we serve, while also recognizing that period poverty is a gendered issue that disproportionately impacts those who identify as female, girls, and/or women.

### Year III Participating Pilot Partner Organizations

Hope & Comfort carries out its mission in **partnership**, utilizing a network of youth-serving and community-based organizations to distribute our products to children, youth, and families. This pilot program relied heavily on the involvement of our participating partner organizations and their staff to recruit and retain participants and to coordinate monthly product deliveries.
The Survey

Each month, participants were sent an online survey with questions about their experiences accessing period and hygiene products, the challenges they faced, and their thoughts, emotions, and lived experiences with respect to all aspects of menstruation and period poverty. Participants used these same surveys to order personalized hygiene products (soap, deodorant, shampoo, toothpaste, toothbrushes, and occasionally other personal care items) and period products (pads and/or tampons in preferred styles and absorbencies).

The response rate in year three varied month-to-month, averaging 53 responses per month with a high of 75 responses in October 2021 (Figure C). Over half of the 165 participants completed the surveys only once or twice within the program year, while others requested products every month they were enrolled, indicating differing levels of need (on the client level) and engagement (both on the client and on the partner level).

The fluctuating and sometimes-lower response rate partially coincided with the beginning of the school year, when participants were still being recruited by program staff, and during school breaks when students were less active in school-year programming. There was also some expected attrition due to participants moving, dropping out of the program, or forgetting to complete the surveys, as well as some mid-year staff turnover at partner organizations that may have delayed communication with participants. The organizations with the highest response rates had a dedicated staff member who provided frequent reminders to their participants and often assisted them to fill out the surveys or held time during their regular programming to complete them. This underscores the importance of collaborating with partner organizations who are actively engaged with Hope & Comfort’s work, and/or illuminates an opportunity for Hope & Comfort to look for ways to reduce barriers and the burden on staff given that partner capacity is finite.

Shortly after the surveys were submitted, Hope & Comfort created individual order forms for each program participant. The warehouse ‘pick sheet’ was an efficiency implemented in year three to help streamline the kit packing process for warehouse staff. It greatly improved the accuracy and efficiency for our warehouse team, who used the coded forms to pack personalized menstrual and hygiene kits.
The completed orders were either picked up by the partner at our warehouse directly or delivered by a team of Hope & Comfort transportation volunteers to each of our partner organizations, where they were then distributed to participants.

**Personalized Menstrual & Hygiene Kit**

Customization was a core tenant of this pilot program, and partners and participants alike identified the high degree of choice as a strength that set this program apart. By allowing youth to select the products, brands, and styles that worked best for them, we not only learned more about their preferences, needs, and desires, but allowed Hope & Comfort to center the youth’s dignity and diverse preferences.

**Menstrual Products**

**D. % Period products ordered by type**

<table>
<thead>
<tr>
<th>Type</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tampons - Reg</td>
<td>6.4%</td>
</tr>
<tr>
<td>Tampons - Super</td>
<td>6%</td>
</tr>
<tr>
<td>Pantiliners</td>
<td>16.1%</td>
</tr>
<tr>
<td>Pads - Super</td>
<td>31.2%</td>
</tr>
<tr>
<td>Pads - Reg</td>
<td>40.3%</td>
</tr>
</tbody>
</table>

**Type:** Every month, participants could select two kinds of period products from the following options: **regular tampons, super tampons, regular pads, super/overnight pads,** and/or **pantiliners.** The most frequently requested product types all three years were regular pads and super pads (Figure D). In year three in particular, as compared to years one and two, there was an overwhelming preference for pads (all kinds) over tampons (all kinds).

**Brands:** Participants were also able to select from a list of preferred brands or write in their brand preference, and could indicate as many brands as they liked. The most common brand selections in year three for period products were: **Always (33.5%)**, followed by **U by Kotex (20.9%), Carefree (13.8%), Playtex (9.2%),** and **Tampax (7.2%).** Nearly **12%** of participants indicated “no preference” for menstrual product brands (Figure E). In addition to increasing participant choice, brand information
was useful data for Hope & Comfort to focus our bulk product orders and in-kind donation solicitation.

**Donations:** We were grateful to have received generous donations of organic cotton pads from Aunt Flow that we introduced in the kits mid-year. After trying the products, many youth began to specifically request Aunt Flow pads (3.9%). While this was a comparatively low request percentage, this statistic is skewed by the fact that Aunt Flow products were introduced late into the pilot. We are thrilled to be working with such collaborative and generous partners and would be remiss not to include this special acknowledgment for their outstanding work as a part of this pilot and an ally in the menstrual equity movement.

**Hygiene Products**

Along with period products, each monthly kit also included soap, one shampoo, one deodorant, toothpaste, and a toothbrushes. All the items were packaged in a discrete drawstring bag and assigned a kit code to protect participants’ privacy and anonymity.

**Product Preferences:** Participants could write in preferred brands and select from a list of product styles for their hygiene products, which included sensitive skin, textured hair/sulfate free shampoo, natural products, and masculine, feminine, and unisex products where applicable (such as for deodorant, which is typically marketed as a gendered product). By far the most popular brand request for soap, deodorant, and shampoo was Dove, and the most frequently requested product types were for sensitive skin and textured hair, accounting for more than half of all responses per month. Many participants also wrote in requests for “Black” or curly hair products, including the
popular brands **Shea Moisture** and **Aussie Curls**, which target textured hair types. Based on the demographics of our participants and the large percentage of youth of color we serve, we approached differing needs and cultural preferences with sensitivity, particularly around the significant area of haircare.

Each month, we also included a rotating monthly “comfort item.” These included Chapstick, hair ties, nail polish, and other goodies. Participants could also write-in requests for items not included in our regular distributions. When available, we made every effort to fill those requests and be responsive to individual needs.

**Additional Products and Rising Need:** In year two, at the height of the COVID-19 pandemic, we added a new survey section in which participants could request additional products to share with their households. This came in direct response to rising need driven by the pandemic and its myriad impacts, which disproportionately burdened the already-vulnerable families we reach and served to further constrain their finite resources. We carried this opportunity to request additional products into year three based on sustained, heightened demand amongst our client populations. The overwhelming majority of year three participants requested at least one additional item for their household each month, and most requested multiples of all the core hygiene products offered: soap (up to 2 extra), toothpaste (1 extra), toothbrushes (up to 4 extra). These results speak to the ongoing economic insecurity felt by low-income households in Greater Boston.

**Packing Menstrual & Hygiene Kits**
The Numbers at a Glance: Year Three

630 Menstrual + Hygiene Kits
25,000+ Menstrual Products
1,500+ Bars of Soap
2,000+ Toothbrushes
1,100+ Tubes of Toothpaste

Menstrual Products Distributed

<table>
<thead>
<tr>
<th>Pantiliners</th>
<th>Regular Pads</th>
<th>Super Pads</th>
<th>Regular Tampons</th>
<th>Super Tampons</th>
<th>Total Menstrual Products</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,050+ items</td>
<td>10,150+ items</td>
<td>7,850+ items</td>
<td>1,600+ items</td>
<td>1,500+ items</td>
<td>25,000+ items*</td>
</tr>
</tbody>
</table>

*These numbers are based on the average number of individual menstrual products included in a pack, which vary slightly, along with the frequency of requests for specific menstrual product types. Each month youth could select two of the same menstrual product types or two different menstrual product types (pads/tampons, absorbencies, brands, etc.) which is also reflected in these figures.

Hygiene Products Distributed

<table>
<thead>
<tr>
<th>Soap</th>
<th>Shampoo</th>
<th>Deodorant</th>
<th>Toothpaste</th>
<th>Toothbrushes</th>
<th>Conditioner</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,500+ bars</td>
<td>630 bottles</td>
<td>630 sticks</td>
<td>1,110+ tubes</td>
<td>2,000+ brushes</td>
<td>65 Requests*</td>
</tr>
</tbody>
</table>

*Conditioner was not a core hygiene product included in the kits, but it was the most frequently requested additional item that youth asked for along with lotion, floss, and sunscreen (in order of frequency).
Survey Results: Needs, Barriers, & Program Impacts

Lack of Access to Period Products

Through our monthly surveys, we first sought to understand participants’ baseline needs and access to period products before enrolling in the pilot program to gauge the real impact of our intervention.

We asked participants how often they ran out of period products prior to receiving their menstrual + hygiene kits from Hope & Comfort. The results show a range of need, but in both year two and year three over 71% of survey respondents reported they “Always,” “Often,” or “Sometimes” ran out of period products before our intervention (Figure F). Acknowledging the ongoing health and economic impacts of the COVID-19 pandemic, we also asked youth if COVID-19 had made it harder for them to access hygiene and period products. Last year, results were clear; the pandemic made it harder, if not impossible, to get the hygiene and period products they needed. In year three, given the later stage of the pandemic, the results were mixed. However, the majority of participants said that COVID-19 had some impact on their family’s ability to meet their basic hygiene needs noting three major themes—economic impacts, lack of supplies in the stores, and fear of COVID-19 exposure. Many youth reflected on these challenges stating, in their own words:

“Me ha afectado porque mi mama se ha quedado sin trabajo y es dificil a veces comprar producto para mi menstruación por el dinero.” // “It has affected me because my mother has been without work and it’s sometimes difficult to buy menstrual products due to the money.”

“It’s not super uncommon for us to go to the store and for it to be out of stock of hygiene or period products. They run out a lot faster since so many people stockpile.”

“My guardian is elderly and has multiple health issues and we weren’t able to get out as much, so it was harder to get them.”
We also asked participants where they would usually get their period products outside of this program. Some said they would get them from another organization (6.5%) or at school (6.5%), while others said they would get them from friends (9%) or at home from a parent or guardian (29%). The majority (71%) said that, without this program, they would have to buy them at a store (Figure G). However, as the next section illustrates, purchasing products was not always possible or easy for youth. In fact, for the populations we serve, the need to purchase these products often required difficult trade-offs, forcing families to choose between essentials such as hygiene/menstrual products, food, rent, utilities, and other pressing necessities.

**Financial Barriers**

The average menstruator has their period for 40 years of their life and spends an average of $9 a month on period products, a cost which can vary widely depending on the type of products, menstrual flow, length of a person’s cycle, and geographic location within the US. Over a lifetime, this amounts to at least $5,000 spent on period products alone – not accounting for inflation nor the additional costs associated with menstruation such as clean underwear and pain relievers. For youth and families living in poverty, even a small additional monthly expense can put a strain on tight household budgets and represent a significant barrier to access, often resulting in trade-offs or the need for makeshift solutions.

In their words:

“There was a point in time where I was short on money due to getting paid bi-weekly at my job. I had just started my period but needed to buy a cab for work to make it on time. I had to sacrifice using the money to afford feminine [period] products. Not only did this make me late because I had to take the bus due to a shortage of money, it was also a huge inconvenience because I hardly was able to make it a priority.”
When we asked participants how often they worried about meeting all their basic needs like food, clothing, and hygiene products, nearly 60% reported “All the time,” “Often,” or “Sometimes” (Figure H).

Additionally, over 14% of respondents said they needed to sacrifice something else, including food, clothes, and school supplies, to purchase period products in the past, and almost 12%, said they had gone without another essential item to purchase hygiene products. One youth stated, “This [trade-off] made me feel frustrated because I couldn’t get everything I needed at the same time, and I had to wait until I could afford to buy it.” Another reflected the sacrifices in quality and preference they sometimes make: “It depends on if I have enough money for the type of period products that I wanted to use. If not, I would have to buy a cheaper one [product] … to have enough.”

When asked what they or their families would spend the money on if they never had to worry about buying hygiene or period products, the most common responses were food and clothing, followed by household bills, school supplies, transportation, and savings for college. However, the implications of period poverty extend far beyond household finances. Youth also identified economic insecurity as a major stressor and cause of anxiety.

To better understand how Hope & Comfort’s intervention relieved financial pressures, we asked participants in the last month of the program year if receiving hygiene and period products had reduced financial stress for them or for their households. Almost 89% of respondents said “Yes” (Figure I). Youth were expressive about the financial impacts of the program:
“My family doesn’t have to worry about spending the money on my products and are able to use the extra money for additional food for my family.”

“So many things are so expensive now, and that doesn’t exclude period products. Usually, I would have to spend a lot of money to make sure me and my family have what they need for the month at the very least. But having these products through Hope & Comfort has really lightened the financial stress I would’ve had to face.” – Participant

“Oh my goodness yes! It’s something I am grateful to not have to budget for and I’m glad you provide the opportunity for me to share this stress relief with my family by providing extra products.”

Clearly, providing free menstrual products each month helped to eliminate financial barriers to accessing period products, but is also alleviated stress and allowed families to prioritize other basic needs. In this way, Hope & Comfort’s intervention succeeded in comprehensively relieving one critical item in families’ budgets, freeing up critical resources for other necessities.

Alternatives & Makeshift Solutions

When youth ran out of period and hygiene products but could not afford to purchase more, many resorted to insufficient alternatives. 50% of survey respondents said they had used a makeshift solution when they ran out of period products.

In their words:
“[I used] rags, cut out diapers – it’s all we had at the time.”

The most common alternatives utilized, in order of frequency, were toilet paper, paper towel, and fabric or rags. Other individuals noted using inadequate or undignified substitutes, such as having to use a thin pantiliner even for heavy menstrual flows, or using a sock or diaper that they already had at home. Not only are these alternatives not designed to manage menstruation and may be unhygienic, but using them also caused undue stress, shame, and distraction for youth.

When asked how using makeshift period solutions made them feel, youth consistently noted feelings of discomfort, worry, embarrassment, insecurity, and anxiety. Fear of leaking through their clothes was the most referenced concern associated with alternatives to period products.

In their words:
“I was uncomfortable and worried that I would bleed through my underwear.”

Emergency alternatives were not limited to period products. 49% of participants also said they had run out of the hygiene products prior to Hope & Comfort’s intervention. The most common response
was running out of shampoo and using soap to wash their hair instead, or vice versa — using shampoo as soap to wash one’s body. However, many youth reported that they simply couldn’t complete their hygiene routines when they ran out of products or just used water to bathe. One respondent said, “I’ve run out of all [hygiene products] before—I wouldn’t wash my hair if I ran out of hair products. The one time I ran out of toothpaste, I used castile soap.” These examples highlight the resourcefulness of our clients, as well as the severe unmet need for essential hygiene products that no young person should have to shoulder. At Hope & Comfort, we believe that not only is hygiene a right, but that everyone deserves access to products that are safe, dignified, and appropriate for their individual needs.

### Menstrual Stigma & Shame

In her book, Period End of Sentence: a New Chapter in the Fight for Menstrual Justice, author Anita Diamant writes, “Stigma is the public face of menstrual shame.”

Despite being a normal bodily function and a signal of health and fertility for nearly 26% of the global population, menstruation is often stigmatized around the world as dirty and taboo.

Terms like “feminine hygiene products” which denote cleanliness and ignore trans and nonbinary menstruators, coupled with a lack of education and lack of period products as public goods, all perpetuate this stigma and deepen the silence surrounding period poverty.

---

In their words:

“For some reason there’s always been this sense of shame associated with my period. Especially when I’m in school, my instinct is to hide everything, and if I need a product, to carefully conceal it as skillfully as I can.”

Pilot program participants also felt this stigma about menstruation. Over half of survey respondents — **58%** — agreed that the topic was **taboo** or had a negative association with periods in our society, and **27%** of participants reported they had been **teased** or felt **embarrassed** about their periods. When asked for an example, one participant powerfully articulated her experience and perspective stating:

“I have been teased by all walks of people, in every age of life, by boys and men who claim periods are gross. Even by some of the girls I’ve encouraged to partake in this survey. I know not to be ashamed about my period, but sometimes it’s hard to not feel embarrassed when it’s a group of people who all agree it’s gross or should be kept private. Sure, it comes from a lack of general education and from a society built by men passing down oppressive rhetoric, but
sometimes pushing back the period stigma is tiring so it’s just, choose to hide, or avoid the conversation by ignoring your period entirely.”

Menstrual stigma and shame can create additional barriers to accessing menstrual products by making it less likely for youth to ask questions or ask for help. The monthly surveys served as a conversation starter for many participants and a space for honest reflection on their experiences of menstruation.

**School Attendance**

Menstrual equity advocates often point to negative educational outcomes related to lack of access to period products and the gendered disparities in educational attainment for girls after puberty in many settings. To add to this knowledge base, Hope & Comfort explored whether menstruators’ school attendance and/or participation in extracurricular activities in the Greater Boston area was impacted by period poverty, including digging into the circumstances surrounding missing class and recreation time as a result of hygiene insecurity.

In year two and year three, we asked participants, “Have you ever missed school or left class early because you didn’t have the period products you needed?” Both years, approximately 20% of the survey respondents said “Yes” (Figure J). Of those who responded "Yes," over 50% mentioned bleeding through clothes or the fear of leaking because they did not have access to period products as their primary reason for skipping school or leaving class early. They stated:

“I had to leave school because I have an unpredictable period and pads weren’t accessible in school causing blood to run in my pants.”

“I couldn’t go to class because it [my period] was so heavy and I had no products. I had to wait until it lightened up.”

A 2021 study conducted by Thinx and PERIOD found that 4 in 5 menstruating U.S. teens had either missed class time or know someone who missed class time because they did not have period products.¹²
**Extracurricular Activities**

Lack of access to period products in school can also affect youth’s ability to attend or enjoy social and recreational activities outside of the classroom.

When asked, “Have you ever missed an extracurricular activity because you didn’t have the period products you needed?” over 16% of respondents said “Yes” they had.

In year three, students frequently mentioned missing sports practices and games, school clubs, and leaving gym class early because they didn’t have period products with them. In year two, 36% of program participants noted that they were more likely to miss activities such as sports, clubs, and events when they didn’t have the hygiene and period products they needed.

While most respondents had thankfully not missed school or extracurricular activities due to their periods, for those who did, the effects may be cumulative and the consequences for overall learning, academic success, physical activity, and social connections can be meaningful.

**Menstrual Products in Schools**

Our regional data on school and extracurricular attendance bolsters the many arguments for schools to provide free period products. As of July 2022, 17 states and Washington D.C. have passed legislation to ensure students who menstruate have access to free period products while at school. However, despite the introduction of multiple bills, Massachusetts has yet to pass a law requiring their schools to stock menstrual products. The I AM bill, An Act to Increase Access to Disposable Menstrual Products in Prisons, Homeless Shelters and Public Schools was re-introduced in the 192nd Massachusetts Legislature.
In their words: “I think every single school, whether it’s Boston Public or a charter school or private schools—each bathroom should be fully stocked with woman [period] products for all students.”

When asked “If period products were available at your school for free, would you use them?” almost all responses were affirmative; 37% said “Yes, all the time” and 50% said “Yes, sometimes—in an emergency” (Figure K). When asked to explain their responses, the most prominent themes were that periods can be unpredictable, thus having accessible and free period products at school would be “one less thing to worry about.” Respondents also noted convenience and quality as factors in whether they would use menstrual products provided at school. Along with making products available, schools must consider the placement of dispensers, gender-neutral spaces, privacy, and the quality of the products when implementing such policies.

**Menstrual Education & Knowledge**

Menstrual education as a part of accurate and comprehensive health education is another key component in the fight for menstrual equity. Unfortunately, lack of knowledge around puberty and menstruation is still widespread, and only 17 states require that sexual health education content be medically accurate. In a 2019 survey of a thousand U.S. teens, 76% reported they were taught more about the biology of frogs than the biology of the female body.12

In their words: “I felt scared and uncomfortable the first time I had my period. I wasn’t exactly sure how I was supposed to feel and if what I was going through was normal or ‘supposed’ to happen.”

introduced in 2019 and, if passed, would have provided access to free menstrual products to all menstruating individuals in homeless shelters, prisons, and public schools, grades 6-12.15 Interventions and research like ours are critical for supporting policy efforts to advocate for menstrual equity legislation by providing the real experiences, numbers, and narratives needed to move legislators and their constituents to action.
Similarly, many of our program participants reported feeling unprepared and surprised by their first period. The most prominent qualitative themes related to menarche were fear, embarrassment, surprise, shock, and confusion. Thankfully, all but one survey respondent reported they had a trusted person or resource in their life with whom they could talk about their period. 67% said they would go to a parent or guardian with questions, 28% would talk to a friend or a peer, and just a few participants said they would look to another resource for information like the internet.

As of now, Massachusetts schools are not required by the state to provide sexual health education. Instead, the state leaves it up to each individual school district to decide what—if any—content to provide to their students. This can lead to wide disparities in quality of the education and discrepancies in knowledge, including the basic facts of menstruation and reproduction. Efforts to combat period poverty must also include menstrual education—coupled with access to preferred products—to empower young people with both the knowledge and resources to care for their changing bodies.

In their words: “I was shocked but prepared after telling my mom I had gotten it. She not only gave me advice on how to react and prepare, but she also gave me the ‘talk’ about what this means regarding my body.”

Social Activities

In addition to missing school and extracurricular activities, period poverty can also impact social and emotional well-being. We asked participants to quantify the number of times they had avoided social or after-school activities because they did not have the period products they needed. Responses showed that nearly half of survey respondents had missed a social activity within the last year because they did not have a pad or tampon. While many youth had not missed activities (27%), those most deeply impacted by period poverty—with the lowest income and/or those with the least social supports—were missing 3 or more social activities a year (24% of respondents) due to lack of access to period products (Figure L). Over time, this can have severe implications for a young person’s relationships, sense of self, and overall social-emotional development.
**Self-Esteem**

Many participants described experiencing **low self-esteem** when they couldn’t access the products needed to manage their menstruation or to look and feel their best. This also limited some participants' engagement in social activities and made them more withdrawn. They explained:

“Without access to hygiene products, I feel stressed and anxious heading to activities and spend time feeling self-conscious instead of actually enjoying.”

“I can’t do my best if I’m worrying about how I’m going to maintain my personal hygiene. I think self-esteem is a big portion of it.”

At the end of the program year, we asked participants if receiving period and hygiene products from Hope & Comfort had improved their self-esteem. **89%** responded “Yes.” As explained in their own words:

“Receiving products has helped my self-esteem because I am able to feel confident in my own skin knowing that I don’t have to worry about where my products are coming from.”

“I say this [yes] because it makes me feel like I am coming into womanhood which is amazing.”

“Hope & Comfort has introduced me to comfortable pads that make me feel good and that allow me to feel more comfortable with my period.”

Self-esteem, especially among adolescents, is integral for healthy social-emotional development. High self-esteem has been shown to be a protective factor against myriad negative mental health outcomes, and our research shows that reliable access to hygiene and period products bolsters self-esteem in significant ways.17

**Mental & Physical Health**

A recent study of U.S. undergraduate college students found a significant association between period poverty and standard measures of depression. Among the menstruators in this study who experienced period poverty every month, over 68% reported symptoms consistent with moderate or severe depression.2 This is a disturbing finding, and one that should be taken into consideration by those seeking to address the increase in mental health diagnosis among young people in this country.

Although Hope & Comfort did not conduct clinical mental health assessments, we sought to better understand the pilot program’s impacts on mental health by asking participants to rank how often
they felt anxious or stressed about having enough period products as well as their level of stress about their personal hygiene (how they look, smell, and feel) before receiving their monthly menstrual + hygiene kits from Hope & Comfort.

**M. Frequency of stress related to lack of access to period products before pilot program**

- Never: 7.4%
- Almost Never: 9.5%
- Sometimes: 42.6%
- Often: 25.9%
- Very Often: 14.8%

**N. Frequency of stress about lack of access to overall hygiene products before pilot program**

- Never: 7.3%
- Almost Never: 16.4%
- Sometimes: 41.8%
- Often: 16.4%
- Very Often: 18.2%

**In their words:** “Well it’s certainly improved my mental health. I worry less about not having what I need when my period comes. It improves my physical health as using safe products and being clean does. In terms of my overall health, having and being able to use what I need has been extremely helpful.”

The results for both overall hygiene products (shampoo, deodorant, dental products, etc.) and period products were concerning and similarly high. 83% of respondents felt anxious or stressed “Very often,” “Often” or “Sometimes” about not having the period products they needed (Figure M) and 76% of participants reported feeling anxiety and stress about their personal hygiene “Very Often,” “Often,” or “Sometimes” prior to enrolling in the pilot program (Figure N).

On the final survey, we asked participants if receiving hygiene and period products from Hope & Comfort each month had improved their overall health. Over 93%
of survey respondents said “Yes,” that receiving monthly products had improved their overall health. Not a single participant reported “No” (Figure O).

In their written responses, youth noted physical improvements including greater cleanliness, better oral hygiene, and “taking care of myself physically more,” as well as reduced stress and worry about running out of necessary products.

Participants reflected:

“The toothpastes I received helped my siblings and I brush our teeth and keep them healthy.”

“I feel more confident, clean, and healthy, and overall happy with my body.”

Our survey results show that ensuring access to necessary period and overall hygiene resources is essential for the physical, mental, and emotional well-being of young people in Greater Boston, particularly for those contending with other forms of systemic marginalization including economic insecurity and structural racism.

A pilot program partner picks up kits at Hope & Comfort’s warehouse
High Youth Satisfaction

Just as we centered youth voice in our analysis of their menstrual and hygiene needs and barriers, we view our youth participants as the most important judges of the pilot program’s overall success.

As one measure of success, we asked participants to rank on a scale from 1-5 (1 = it never met my needs, 5 = it always met my needs) how well the monthly period and hygiene products met their needs each month. The results were very similar to year two, with over 86% of participants in year three selecting 4 or 5, indicating that the program always met their needs (Figure P).

As a proxy measure for youth satisfaction, we also asked participants, on a scale from 1-5 (1 = I would never recommend this program, 5 = I would definitely recommend this program), how likely are you to recommend this program to others? The results were overwhelmingly positive, with over 90% of survey respondents selecting 5 and the remaining participants choosing 4 or 3 (Figure Q).

On the final program year survey, we also asked youth to rate their overall experience participating in the program on a scale from 1-5 (1 = very negative, 5 = very positive). 95% of participants rated their experience as a 4 or 5, very positive (Figure R).
As a follow-up, we asked youth what their favorite part about participating in the program was. Youth expressed their appreciation by stating:

“Your [Hope & Comfort’s] generosity!”

“Of course receiving the products I need, but I also greatly enjoyed filling out these surveys and being able to thank those who read them.”

“My favorite part was the different choices of brands of the products and that my preference choice was always met.”

Together these figures and written responses from youth reflect a high level of satisfaction with the pilot program and serve as a critical indicator of overall program success.

**Overall Participant Feedback**

In response to constructive feedback from previous program years, we made efforts to expand our product offerings in year three. To understand which products best met youths’ needs and where to place our emphasis in terms of product purchasing and requests for donations, we asked year three participants which products included in the kits were most helpful to them (Figure S).

Respondents could select as many products as applied. The most frequently selected products were **period products** (pads and tampons). The other hygiene products in the kit were ranked relatively similarly, with a slightly higher number of participants selecting deodorant and soap. Overall, these results confirmed that the core products offered through the pilot program were of high priority to our participants.
On the final year three survey, we asked participants, “How can we improve this program to better meet your needs?” By far the most common response was, “Nothing!” However, there were some other themes that emerged, including:

- **More hair products**, specifically conditioner

  “My only suggestion is that it was great to get shampoo, but conditioner would be great as well. Especially for those with curly and coily hair.”

- **Greater variety** of products to choose from

  “More diverse products for individuals, more natural products, period products that reduce cramps.”

- **Increased volume of period products**

  “The only thing is I would ask for is one more set of pads. Sometimes we run out of product if my period is heavy. I would give up one of the beauty products for an extra set of pads!”

- **Improvements to the delivery side**, including a request for notifications when the kits had arrived at the partner organization site.
“I feel like maybe you can be more efficient with the delivery of the products. A couple of months ago, I hadn’t received a package in over a month.”

These suggestions are validating, as they are ones that touch upon areas of Hope & Comfort’s work that we are already targeting for improvements and expansion. We look forward to enhancing our future programming with an eye towards these client-driven suggestions.

**Overall Partner Feedback**

After the close of program year three, we also reached out to our participating partner organizations to solicit feedback from their staff. Our partners also reported high satisfaction, ease of participation, and positive impacts, including:

“Having the choice to say what products they were looking for really made a difference.”

“I also wanted to add how grateful we are for this partnership! This year's class of participants are majority middle school-aged youth. Most of them were timid about having conversations about puberty, their menstrual cycle, and hygiene. After a few rounds of bag distributions, I have had girls pull me aside for questions revolving around the changes they are experiencing!”

“You all made it really easy for us.”

Partners’ constructive feedback mainly centered on improved access for a wider population of students. Staff expressed gratitude for bi-lingual communication in Spanish with their participants, and encouraged us to expand our language offerings whenever possible as well as to explore mass texting for sending surveys and reminders. They noted that not all participants have access to internet in their homes which can pose a barrier and that, in general, youth are much more responsive via text than over email. These suggestions are again in line with improvements Hope & Comfort has identified as possible areas of growth for future, high-touch programming like this one.
Key Take-Aways & Next Steps

As evidenced through the voices and experiences of youth menstruators in Greater Boston, period poverty is a significant problem with deep and reverberating consequences for the health and well-being of young people. Our 165 pilot program participants faced numerous individual and structural barriers to accessing period products including financial barriers, lack of accessibility in public spaces, and negative societal attitudes toward menstruation which resulted in missed class time, reduced participation in social and extracurricular activities, and negative consequences for self-esteem and physical and mental well-being.

The good news, and what our pilot has shown, is that a simple intervention—providing youth with free, high-quality period and hygiene products in a consistent and dignified manner—can combat many of these negative outcomes. Youth and partners alike reported high satisfaction with the pilot program, which filled an important unmet need for period and overall hygiene products and prioritized the individual preferences, privacy, and dignity of the participants. Youth effusively expressed their gratitude each month writing thank you notes on their surveys such as:

“As I do say every month, thank you so much! I can't speak for everyone, but you guys [Hope & Comfort] have certainly saved me more times than I can count. What you guys do is a blessing, and it is much appreciated. I am very grateful.”

“I am thankful for all your efforts. I greatly appreciate all who helped make this happen.”

“I just wanted to say thank you I know that last month was the last survey, this is a very good program and I really appreciated all the extra items that I received last month thank you so much!”

“Gracias por la ayuda.” // “Thank you for the help.”

As Hope & Comfort continues to scale up to address growing demand for both hygiene and menstrual products, we will also continue to seek ways to increase participant choice, expand access to our programming (including language access and technological improvements), and finding more efficient, impactful, and dignified ways to meet the ever-evolving needs of the clients and communities we serve. Sadly, the demand for the products we provide has never been higher. We estimate that there are two million people in Massachusetts alone experiencing hygiene insecurity. As we also advocate for systemic, sustainable change in tandem with ever-growing product distributions, we are more dedicated than ever to addressing period poverty and hygiene insecurity at scale in Greater Boston and beyond.
What Can You Do?

Addressing period poverty and stigma requires commitment and engagement at all levels. We are often asked, “What can I do?” On a practical level, here are some suggested actions—big and small—that you can take as you consider your role and responsibility in the menstrual equity movement. Pro tip: Print out this page and share it with your friends, family, colleagues, and changemakers in your community!

**Individual Actions**

- Practice using inclusive and non-stigmatizing language.
- Normalize periods — talk openly with the young people in your life about menstruation and the natural processes of puberty and reproduction.
- Make a monetary donation to an organization like Hope & Comfort in your area that provides menstrual and hygiene products to those in need.
- Organize a menstrual and hygiene product drive. (See https://hopeandcomfort.org/get-involved/host-a-drive/ for more information.)
- Start or join a menstrual equity initiative at your school, college, or place of work.

**Organizational Actions**

- Talk to the menstruators you work with and/or serve to explore whether their needs are being met.
- Build period products into your budget, put menstrual products in the bathrooms at your office or workplace, or include them at food pantries, clothing closets, and other social service sites.
- Build partnerships with like-minded organizations (e.g. Aunt Flow and Hope & Comfort) to mutually reinforce one-another’s missions.
- Continue to collect and share data on the needs and experiences of those who menstruate.

**Systemic Actions**

- Remove sales tax on period products and other essential hygiene items.
- Require period products to be provided in public schools, universities, jails, prisons, and homeless shelters
- Allow public benefits to be used to purchase necessary hygiene items including period products and personal care items like soap and toothpaste.
Acknowledgments

Hope & Comfort is thankful for the participants, staff, and partner organizations who contributed to the success of this pilot, and is especially grateful for the youth who shared so openly and honestly about their experiences, needs, fears, challenges, and aspirations.

Hope & Comfort would also like to extend a special thanks to Alexandra Carter, the project manager, expert consultant, and lead writer of this report; Angie Marshall, the former project manager who led the pilot program through years one and two; the team at Hope & Comfort’s warehouse headquarters (past and present) who provided critical leadership, including Jeff Feingold, Abby MacDonald, Sean Manning, and Pat Flaherty for their critical leadership, logistics, and executional support; and Rebecca Cohen, who led the proposal process.

We also give our deepest thanks to The Miriam Fund members as well as The Miriam Fund/CJP staff team, especially Beth Tauro and Alex Gaston for their longstanding support of this project.

Additional thanks go to program participating organizations:

- Waltham Boys and Girls Club: Anna Sebunnya and Caitlyn Garcia
- Charlestown Coalition: Mswati Hanks and Phenice Zawatsky
- Waltham Partnership for Youth: Magali García-Pletsch and Olivia Spelman
- Hyde Square Task Force: Rebecca Kamins
- Beacon Academy: Gretchen Warland
- YouthConnect: Kevan Barton and Carolyn McCrosson
- RAW Art Works: Guelmi Espinal and Kaitlyn Farmer
- School on Wheels: Michael Lombo
- South Boston Neighborhood House: Caitlyn Murphy

We also acknowledge with appreciation current and former Hope & Comfort Board, Advisors, staff, and volunteers, particularly those who were direct contributors to this pilot project over the years, including:

- Abby MacDonald
- Alexandra Carter
- Angela Marshall
- Jeff Feingold
- Loren Feingold
- Pat Flaherty
- Thea Ene
- Sean Manning
- Jesse Mattleman
- Ruby Rayner-Haselkorn
- Betsy Rosen