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COMPENDIUM OF  
**GENDER SCALES**



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**GENDER SCALES**

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# Introduction: A Compendium of Gender Scales

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The identification of appropriate gender-related measures is important for developing and evaluating interventions that aim to promote positive health outcomes by addressing the gender norms that function as barriers to health.

Gender has been posited as a gateway factor to behaviors that affect health outcomes and health status. While gender norms and power dynamics between men and women have been studied in context of HIV and gender-based violence, less is known about their role in contraceptive use and their influence on reproductive health behaviors. C-Change (Communication for Change) has been exploring the impact of gender on family planning and the validity of current gender scales in predicting contraceptive use.

## WHAT IS A SCALE?

A scale is a numerical score aggregating multiple indicators believed to reflect an underlying concept. Because there is no single “gold standard” for measuring gender norms, gender attitudes, women’s empowerment, and other aspects of gender, researchers often use multiple measures. Using a single measure is not possible because gender operates in multiple spheres and has many facets. When a single measure is preferred, a scale combining several items creates a more valid measure than any single scale item used alone.

## WHY A COMPENDIUM OF GENDER SCALES?

In March 2010, C-Change convened a working group of researchers with expert knowledge of gender scales to review those scales in current use. The participants identified scales that measure adherence to gender norms and reviewed how they have been used to measure the success of interventions in changing these norms.

The working group enthusiastically supported the creation of an online compendium of gender scales. They saw the value of making it easily accessible by health and development practitioners, who may want to use these tools to assess gender-related attitudes and beliefs and evaluate their interventions. Scales selected for the compendium have all been tested for their ability to measure gender attitudes and predict behaviors of interest, such as gender-based violence and partner reduction. The scales include those developed by working group participants as well as other scales they identified.

The compendium is not exhaustive. It does not encompass all scales appropriate for studying gender and health outcomes, and it does not identify which scale is best for a specific study or evaluation.

## WHICH GENDER SCALES ARE INCLUDED?

The following gender scales are included in this compendium:

1. Couple Communication on Sex
2. Women's Empowerment
3. Gender Beliefs
4. Gender Equitable Men
5. Gender Norm Attitudes
6. Gender Relations
7. Household Decision-Making
8. Sexual Relationship Power

## WHAT TYPE OF INFORMATION IS PROVIDED FOR EACH GENDER SCALE?

Each gender scale in this compendium includes the following information, when available:

**Scale objective:** The purpose of the scale

**Type(s) of behavior or outcomes predicted:** Behaviors or outcomes the scale aims to predict (such as gender-based violence)

**Types of items the scale includes:** Domains for the items in the scale

**Number of items and subscales:** Number of items in the scale and number of subscales, if any

**Scoring procedures:** Procedures followed for scoring response options to scale items

**Psychometrics used:** Types of statistical approaches used to construct the items in the scale, such as internal consistency (the extent to which items in a scale are correlated with one another or measure the same thing) and factor analysis (a method that reduces a large number of variables or factor to a smaller number)

**Type(s) of statistics used to test predictive validity:** Which statistics, if any, were used to test how well the scale predicts the behavior it aims to predict

**Used with women/used with men:** Whether the scale has been used with one or both genders

**Country/countries where tested or applied:** Locations where the scale was tested or adapted

**Additional information:** Relevant information not otherwise covered, including definitions and more information on the construction of the scale

**Source:** Citations on the development of the scale and/or its adaptation or modification





# Couple Communication on Sex Scale

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# Couple Communication on Sex Scale

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## SCALE OBJECTIVE

To measure the extent of sexual communication within couples

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

Women's empowerment to decide when to have sex and refuse sex

## TYPES OF ITEMS INCLUDED

- Communication with partners about when to have sex
- Opinions regarding sexual desires
- Level of comfort in talking about sexual relationships with partners

## NUMBER OF ITEMS AND SUBSCALES

4 items

## SCALE ITEMS

- Can you communicate with your partner about when to have intercourse?
- Can your partner communicate with you about when to have intercourse?
- Does your partner take into account your opinion regarding your sexual desires?
- Do you feel comfortable talking with your partner about your sexual relationship?

## SCORING PROCEDURES

Each item was scored on a 3-point scale: 1 = never; 2 = sometimes; 3 = always. Scores were summed with a summated range between 4 and 12.

## PSYCHOMETRICS USED IN SCALE CONSTRUCTION

Estimates of internal consistency (Cronbach's alpha):

- Women's pretest: alpha = .61
- Women's post-test: alpha = .65
- Men's post-test: alpha = .58

## USED WITH WOMEN

Yes (N=602)

## USED WITH MEN

Yes (N=361)

## COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED

Guatemala

## SOURCE(S)

Leon, F, R Lundgren, and C Vasquez. *Couple communication on sex scale*. Institute for Reproductive Health, Georgetown University. Draft manuscript.



# Women's Empowerment Scale

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# Women's Empowerment Scale

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## SCALE OBJECTIVE

To measure women's empowerment, defined as the ability to exercise agency and acquire resources within a context of gender inequality.

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

Current contraceptive use

## TYPES OF ITEMS INCLUDED

- Women's mobility
- Women's freedom from family domination
- Women's economic security and contribution to family support

## NUMBER OF ITEMS AND SUBSCALES

18 items, 3 subscales

## WOMEN'S MOBILITY SUBSCALE ITEMS

- Have you ever been to the bazaar?
- Have you ever been there alone?
- Have you ever been to the hospital/clinic/doctor?
- Have you ever gone there alone?
- Have you ever gone to the cinema?
- Have you ever gone there alone?
- Have you ever gone outside the village?
- Have you ever gone there alone?

## SCORING PROCEDURES

Each respondent was given 1 point for each place she had visited and an additional point if she had ever gone there alone. The scale ranged from 0 to 8 and was employed as a continuous variable.

## FREEDOM FROM FAMILY DOMINATION SUBSCALE ITEMS

Have any of the following happened to you in the past 12 months?

- Husband/other family member took your money when you didn't want him to.
- Husband/other family member took your land/jewelry/poultry/livestock when you didn't want him to.
- Husband/other family member prevented you from visiting your parents.
- Husband/other family member prevented you from working outside the home.

## SCORING PROCEDURES

A woman was classified as "empowered" and coded as 1 if she said that none of these things had happened to her. The category "not empowered," was coded as 0.

## **ECONOMIC SECURITY AND CONTRIBUTION SUBSCALE ITEMS**

- Do you, in your own name, own any land, your homestead land, or your house?
- Do you yourself own any productive assets (for example, cattle or sewing machine)?
- Do you have any cash savings?
- Have you ever used your savings for business or money-lending?
- Of your total household expenses, what proportion is met through your own earnings?

## **SCORING PROCEDURES**

Two variables were used in an earlier analysis. Economic security was based on a scale from 0 to 4. One point was assigned for each of the following: if a woman owned her house or homestead land; owned any productive asset; had her own cash savings; and her savings were ever used for business or money-lending. A woman with a score of 2 or better was classified as empowered. Contribution to family support measured whether the respondent said she provided all, most, half, or some of her family's support, as opposed to very little or none.

Because preliminary analyses indicated that economic security and contribution to family support were closely related, the two variables were combined into one. Women were coded as 1 if they had positive scores on economic security, contribution to family support, or both. Women who did not have positive scores on either variable were coded as 0. Several combinations of dummy variables were tried, but these variables worked as well or better than several more complex configurations.

## **PSYCHOMETRICS USED IN SCALE CONSTRUCTION**

None

## **TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY**

Logistic regression

## **USED WITH WOMEN**

Yes

## **USED WITH MEN**

No

## **COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED**

Bangladesh

## **ADDITIONAL INFORMATION**

The construction of the scale was based on a literature review; ethnographic interviews and observation; and interviews with staff of credit programs, women's groups, and NGOs. Mobility, the first subscale, intends to tap into women's agency, while the second subscale, women's freedom from family domination, more accurately represents a lack of agency or ability to exercise agency. The third subscale, women's economic security, is meant to tap into two related aspects of empowerment: women's resources and their capacities. These scales are intended to be culture-specific. Specific items in each of them should be reviewed and adapted before attempting to use them in a new setting.

## **SOURCE(S)**

Schuler, SR, SM Hashemi, and AP Riley. 1997. The influence of changing roles and status in Bangladesh's fertility transition: Evidence from a study of credit programs and contraceptive use. *World Development*, 25(4): 563–75.





# Gender Beliefs Scale

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# Gender Beliefs Scale

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## SCALE OBJECTIVE

To measure traditional and more progressive beliefs about gender roles

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

HIV-risk behavior (e.g., multiple sexual partners)

## NUMBER OF ITEMS AND SUBSCALES

8 items

## SCALE ITEMS

Response options for these items were: strongly agree, agree, disagree, and strongly disagree.

- Men have many lovers because it is in their nature to do so.
- Men have lovers to get energy that enables them to satisfy their primary partners.
- Women these days say that they need to have more than one sex partner.
- Men feel ashamed of their wives and want young lovers to take around to their friends.
- If men do not have lovers their friends laugh at them.
- Women who are financially independent do not want to commit themselves to one relationship.
- The families of young people who work do not want them to get married because they are afraid to lose their income.
- Men often force women in subtle ways to have sex with them, even if they do not want to.

## SCORING PROCEDURES

Response categories for scale items were scored so that high scores represented more progressive beliefs about gender roles and low scores represented more traditional beliefs.

## PSYCHOMETRICS USED IN SCALE CONSTRUCTION

Estimate of internal consistency (Cronbach's alpha) = .73

## TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY

Multivariate logistic regression

## USED WITH WOMEN

Yes

## USED WITH MEN

Yes

## COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED

South Africa

## SOURCE(S)

Latka, M, A Meyer-Weitz, K Fielding, P Kruger, T Mogwere, and GC Churchyard. 2009. Factors associated with concurrent sexual partnering and condom use are not the same: Results from a representative household survey in Rustenburg, South Africa. Poster, 4th South Africa AIDS Conference.





# Gender Equitable Men (GEM) Scale

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# Gender Equitable Men (GEM) Scale

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## SCALE OBJECTIVE

To measure attitudes toward gender norms in intimate relationships or differing social expectations for men and women

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

- Condom use
- Contraceptive use
- Multiple sexual partners
- Partner violence

## TYPES OF ITEMS INCLUDED

- Violence
- Sexual relationships
- Homophobia
- Domestic chores and daily life
- Reproductive health and disease prevention

## NUMBER OF ITEMS AND SUBSCALES

24 items

2 subscales: equitable and inequitable

The number of items varies in different country applications of the GEM Scale. For example, the India adaptation had 15: 11 original items and 4 new items specific to the country. The Ethiopian adaptation had 24 items, 18 original and 6 new. It is listed below.

## VIOLENCE DOMAIN ITEMS

- There are times when a woman deserves to be beaten.
- A woman should tolerate violence to keep her family together.
- It is alright for a man to beat his wife if she is unfaithful.
- A man can hit his wife if she won't have sex with him.
- If someone insults a man, he should defend his reputation with force if he has to.
- A man using violence against his wife is a private matter that shouldn't be discussed outside the couple.

## SEXUAL RELATIONSHIPS DOMAIN ITEMS

- It is the man who decides what type of sex to have. Men are always ready to have sex.
- Men need sex more than women do.
- A man needs other women even if things with his wife are fine.
- You don't talk about sex, you just do it.
- It disgusts me when I see a man acting like a woman.
- A woman should not initiate sex.
- A woman who has sex before she marries does not deserve respect.

## REPRODUCTIVE HEALTH AND DISEASE PREVENTION DOMAIN ITEMS

- Women who carry condoms on them are easy.
- Men should be outraged if their wives ask them to use a condom.
- It is a woman's responsibility to avoid getting pregnant.
- Only when a woman has a child is she a real woman.
- A real man produces a male child.

## DOMESTIC CHORES AND DAILY LIFE DOMAIN ITEMS

- Changing diapers, giving a bath, and feeding kids is the mother's responsibility.
- A woman's role is taking care of her home and family.
- The husband should decide to buy the major household items.
- A man should have the final word about decisions in his home.
- A woman should obey her husband in all things.

## SCORING PROCEDURES

Each of the above items was scored on a 3-point scale, where 1 = agree, 2 = partially agree, and 3 = do not agree. High scores represent high support for gender equitable norms. Certain items were reverse scored if a high score would reflect low support for gender equity. Responses to each item were summed.

The continuous scores were used "as is" or were re-coded into various formats for different types of analyses and interpretations. As one coding option, the continuous GEM Scale was split into three equal parts: high, moderate, and low support for equitable gender norms. Typically, analyses have tested the associations between the GEM Scale and variables such as condom use, contraceptive use, and partner violence. GEM Scale scores have also been compared before and after an intervention.

## PSYCHOMETRICS USED IN SCALE CONSTRUCTION

- Factor analysis
- Estimate of internal consistency (Cronbach's alpha) = .81

Estimates of internal consistency vary in different country applications. For the Indian adaptation of the GEM Scale, alpha = .75. For the Ethiopian adaptation, alpha = .88

## TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY

- Chi-square tests
- Logistic regression
- Spearman correlation

## USED WITH WOMEN

Yes

## USED WITH MEN

Yes

## COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED

- Brazil
- China
- Ethiopia
- India
- Kenya
- Tanzania
- Uganda

## ADDITIONAL INFORMATION

Findings suggest the GEM Scale is a sensitive and cross-culturally relevant tool that has good predictive validity. The “inequitable” subscale is more consistently reliable than the “equitable” subscale. Adaptations in multiple contexts have worked well. Items that relate to homosexuality have often been removed in adaptations of the scale.

## SOURCE(S)

Barker, G, M Nascimento, J Pulerwitz, C Ricardo, M Segundo, and R Verma. 2006. Engaging young men in violence prevention: Reflections from Latin America and India. In *Combating gender violence in and around schools*. F Leach and C Mitchell, eds. Trowbridge, UK: Cromwell Press.

Barker, G, M Nascimento, M Segundo, and J Pulerwitz. 2004. How do we know if men have changed? Promoting and measuring attitude change with young men. In *Gender equality and men*. S Ruxton, ed. Oxford UK: Oxfam.

Middlestadt S, J Pulerwitz, G Nanda, K Acharya, and B Lombardo. 2007. Gender norms as a key factor that influences SRH behaviors among Ethiopian men, and implications for behavior change programs. Draft manuscript.

Pulerwitz, J, and G Barker. 2008. Measuring attitudes toward gender norms among young men in Brazil: Development and psychometric evaluation of the GEM Scale. *Men and Masculinities* 10:322—338.

Pulerwitz, J, G Barker, M Segundo, and M Nascimento. 2006. “Promoting more gender-equitable norms and behaviors among young men as an HIV/AIDS prevention strategy.” *Horizons Final Report*. Washington, DC: Population Council.

Verma R, J Pulerwitz, V Mahendra, et al. 2006. Challenging and changing gender attitudes among young men in India. *Reproductive Health Matters* 14 (28):1–10.

Verma, R, V Mahendra, J Pulerwitz, G Barker, J Van Dam, and S Flessenkaemper. 2005. From research to action: Addressing masculinity and gender norms. *Indian Journal of Social Work* 65(4): 634—54.



# Gender Norm Attitudes Scale

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# Gender Norm Attitudes Scale

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## SCALE OBJECTIVE

To measure egalitarian beliefs about male and female gender norms

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

- Condom use
- Depression
- Anxiety

## TYPES OF ITEMS INCLUDED

- Belief in and promotion of equity for girls and women
- Belief in maintaining the rights and privileges of men

## NUMBER OF ITEMS AND SUBSCALES

14 items

2 subscales

## RIGHTS AND PRIVILEGES OF MEN SUBSCALE ITEMS

Respondents were asked if they agreed or disagreed with each item.

- It is important that sons have more education than daughters.
- Daughters should be sent to school only if they are not needed to help at home.
- The most important reason that sons should be more educated than daughters is so that they can better look after their parents when they are older.
- If there is a limited amount of money to pay for tutoring, it should be spent on sons first.
- A woman should take good care of her own children and not worry about other people's affairs.
- Women should leave politics to the men.
- A woman has to have a husband or sons or some other male kinsman to protect her.
- The only thing a woman can really rely on in her old age is her sons.
- A good woman never questions her husband's opinions, even if she is not sure she agrees with them.
- When it is a question of children's health, it is best to do whatever the father wants.

## EQUITY FOR GIRLS SUBSCALE ITEMS

- Daughters should be able to work outside the home after they have children if they want to.
- Daughters should have just the same chance to work outside the homes as sons.
- Daughters should be told that an important reason not to have too many children is so they can work outside the home and earn money.
- I would like my daughter to be able to work outside the home so she can support herself if necessary.

## SCORING PROCEDURES

On the rights and privileges of men subscale, less agreement with men having more rights and privileges than women reflects a more egalitarian perspective. Reverse scoring was used for the equity for girls subscale, with 1 representing a traditional response and 2 an egalitarian response. Scores were computed as the mean of individual items, expressed as a continuum from traditional beliefs (on the lower end) to egalitarian beliefs. Higher scores on both of the subscales indicated more egalitarian beliefs.

### **PSYCHOMETRICS USED IN SCALE CONSTRUCTION**

- Factor analytic techniques
- Estimate of internal consistency (alpha) = .70 (Subscale 1: Rights and privileges of men)
- Estimate of internal consistency (alpha) = .67 (Subscale 2: Equity for girls)

### **TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY**

- Bivariate analysis
- Multivariate hierarchical regression

### **USED WITH WOMEN**

Yes

### **USED WITH MEN**

No

### **COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED**

Egypt

### **SOURCE(S)**

Waszak, C, JL Severy, L Kafafi, and I Badawi. 2000. Fertility behavior and psychological stress: The mediating influence of gender norm beliefs among Egyptian women. *Psychology of Women Quarterly* 25:197–208.







# Gender Relations Scale

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# Gender Relations Scale

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## SCALE OBJECTIVE

To measure equity and power within intimate relationships

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

Use of a modern contraceptive method

## TYPES OF ITEMS INCLUDED

- Attitudes towards gender roles and expectations
- Decision-making around sex and reproduction
- Household decision-making
- Violence
- Communication

## NUMBER OF ITEMS AND SUBSCALES

23 items

2 subscales

## EQUITY SUBSCALE ITEMS

- Men need sex more than women do.
- You don't talk about sex, you just do it.
- It is a woman's responsibility to avoid getting pregnant.
- A man should have the final word about decisions in his home.
- Men are always ready to have sex.
- A woman should tolerate violence to keep the family together.
- A man needs other women even if things with his wife are fine.
- A man can hit his wife if she will not have sex with him.
- A couple should decide together if they want to have children.
- Changing diapers, giving the kids a bath, and feeding the kids is a mother's responsibility.
- A woman can suggest using condoms just like a man can.
- A man should know what his partner likes during sex.
- A man and a woman should decide together what type of contraceptive to use.
- A real man produces a male child.
- Men and women should share household chores.
- A woman should not initiate sex.

## POWER SUBSCALE ITEMS

- My partner has more say than I do about important decisions that affect us.
- I am more committed to this relationship than my partner is.
- A woman should be able to talk openly about sex with her husband.
- My partner dictates who I spend time with.
- When my partner and I disagree, he gets his way most of the time.
- I feel comfortable discussing family planning with my partner.
- I feel comfortable discussing HIV with my partner.

## **SCORING PROCEDURES**

Participants were read each item and asked whether they agreed, disagreed, or were unsure. Each positive response was coded as 1 and each negative and unsure response was coded as 0. The scales were created by summing items within each scale. A higher score on the equity subscale indicated more equitable attitudes toward gender roles. A higher score on the power subscale indicated more perceived personal agency or power in a relationship.

## **PSYCHOMETRICS USED IN SCALE CONSTRUCTION**

Factor analysis

## **TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY**

Bivariate and logistic regression

## **USED WITH WOMEN**

Yes (N = 1200)

## **USED WITH MEN**

Yes (N = 600)

## **COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED**

- Ethiopia
- Kenya

## **ADDITIONAL INFORMATION**

Items were derived from the GEM Scale and SRPS (scales 4 and 8 in this compendium). Study findings showed that the GEM Scale and SRPS, originally developed separately for men and women, can be used to collect data from both. Gender differences are evident in how questions are answered and in the relative importance of power and equity in influencing contraceptive use.

Increased power appears to be associated with increased contraceptive use for men and for some women, while more gender-equitable attitudes have a greater influence in shaping contraceptive use among women than men. Additional qualitative research is needed to address how subscale items are perceived and the extent to which they capture local understandings of gender norms and behaviors. Further work with larger sample sizes is also needed to confirm findings, since existing samples may not have sufficient statistical power to detect differences in contraceptive use across the elements of power and equity.

## **SOURCE(S)**

Stephenson, R, D Bartel, and M Rubardt. 2010. Constructs of power and equity and their association with contraceptive use among African men and women. Draft manuscript.





# Household Decision-Making Scale

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# Household Decision-Making Scale

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## SCALE OBJECTIVE

To measure women's household decision-making, as perceived by couples, men alone, and women alone

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

Contraceptive use

## TYPES OF ITEMS INCLUDED

Decision-making related to purchases and to visiting friends and relatives

## NUMBER OF ITEMS AND SUBSCALES

3 items

## SCALE ITEMS

- Who usually makes decisions about making major household purchases?
- Who usually makes decisions about making purchases for daily household needs?
- Who usually makes decisions about visits to family or relatives?

## SCORING PROCEDURES

Responses were scored between 1 and 4: 1 = respondent; 2 = spouse/partner; 3 = respondent and spouse/partner jointly; 4 = someone else.

## PSYCHOMETRICS USED IN SCALE CONSTRUCTION

Estimates of internal consistency:

- Wives: alpha = .71
- Husbands: alpha = .50
- Husbands and wives: alpha = .67

## TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY

Multivariate logistic regression

## USED WITH WOMEN

Yes

## USED WITH MEN

Yes

## COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED

12 countries in Africa, Asia, Europe, and Latin America

## ADDITIONAL INFORMATION

Items were derived from couples' datasets in demographic and health surveys (DHS)—for example, DHS couples re-code data for Ethiopia, Tanzania, and Kenya. Women's household decision-making power reliably predicts contraceptive use in countries with low scores on the gender-related development index (GDI).

## SOURCE(S)

Leon, F, and J Foreit. 2009. Developing women's empowerment scales and predicting contraceptive use: A study of 12 countries' demographic and health surveys (DHS) data. Draft manuscript.



# Sexual Relationship Power Scale (SRPS)

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# Sexual Relationship Power Scale (SRPS)

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## SCALE OBJECTIVE

To measure power within sexual relationships

## TYPE(S) OF BEHAVIOR OR OUTCOMES PREDICTED

- Sexual and physical violence
- Intimate partner violence
- Condom use
- Partner infidelity

## TYPES OF ITEMS INCLUDED

- Relationship control
- Decision-making dominance

## NUMBER OF ITEMS AND SUBSCALES

23 items; 2 subscales

### RELATIONSHIP CONTROL SUBSCALE ITEMS

- If I asked my partner to use a condom, he would get violent.
- If I asked my partner to use a condom, he would get angry.
- Most of the time, we do what my partner wants to do.
- My partner won't let me wear certain things.
- When my partner and I are together, I'm pretty quiet.
- My partner has more say than I do about important decisions that affect us.
- My partner tells me who I can spend time with.
- If I asked my partner to use a condom, he would think I'm having sex with other people.
- I feel trapped or stuck in our relationship.
- My partner does what he wants, even if I do not want him to.
- I am more committed to our relationship than my partner is.
- When my partner and I disagree, he gets his way most of the time.
- My partner gets more out of our relationship than I do.
- My partner always wants to know where I am.
- My partner might be having sex with someone else.

### DECISION-MAKING DOMINANCE SUBSCALE ITEMS

- Who usually has more say about whose friends to go out with?
- Who usually has more say about whether you have sex?
- Who usually has more say about what you do together?
- Who usually has more say about how often you see one another?
- Who usually has more say about when you talk about serious things?
- In general, who do you think has more power in your relationship?
- Who usually has more say about whether you use condoms?
- Who usually has more say about what types of sexual acts you do?



### **SCORING PROCEDURES**

Each of the 23 items in the two subscales was scored on a 4-point Likert scale, with 1 = strongly agree, 2 = agree, 3 = disagree, and 4 = strongly disagree. High scores represent high sexual relationship power. Certain items were reverse-scored if high scores would reflect low sexual relationship power. Scores for the two subscales were calculated separately, then combined into the SRPS.

### **PSYCHOMETRICS USED SCALE CONSTRUCTION**

- Factor analysis
- Estimate of internal consistency (alpha) = .84

### **TYPE(S) OF STATISTICS USED TO TEST PREDICTIVE VALIDITY**

- Mantel-Haenszel chi-square test for trend
- Logistic regression

### **USED WITH WOMEN**

Yes

### **USED WITH MEN**

Yes

### **COUNTRY OR COUNTRIES WHERE TESTED OR APPLIED**

- China
- Jamaica
- South Africa
- Thailand
- United States
- Zimbabwe

### **ADDITIONAL INFORMATION**

SRPS appears to be a useful measure for relationship power, including for youth and different ethnicities and cultures. It has demonstrated good predictive validity and internal consistency, though sometimes has appeared to be more relevant for women than for men. The relationship control subscale has been sometimes more internally consistent than the decision-making dominance subscale.

### **SOURCE(S)**

Pulerwitz, J, SL Gortmaker, and W DeJong. 2000. Measuring sexual relationship power in HIV/STD research. *Sex Roles* 42(7/8): 637–660.



# Related Information

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## Useful websites

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[www.popcouncil.org/Horizons/ORToolkit/toolkit/gender.htm](http://www.popcouncil.org/Horizons/ORToolkit/toolkit/gender.htm)

[www.k4health.org/toolkits/igwg-gender](http://www.k4health.org/toolkits/igwg-gender)

## Working group participants, March 2010

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[www.c-changeproject.org](http://www.c-changeproject.org)