

Reproductive Autonomy Scale

Ushma Upadhyay, PhD, MPH
Advancing New Standards in Reproductive Health (ANSIRH)
Bixby Center for Global Reproductive Health
University of California, San Francisco
1330 Broadway, Suite 1100
Oakland, CA 94612
(510) 986-8928 (office)
(410) 404-4103 (mobile)
upadhyayu@obgyn.ucsf.edu

Citation: Upadhyay, U. D., Dworkin, S. L., Weitz, T. A., & Foster, D. G. (2014).
Development and validation of a reproductive autonomy scale. *Studies in family
planning*, 45(1), 19-41.

Reproductive Autonomy Scale

The next questions are about you and your main partner or a recent sexual partner. The questions ask about who has the most say in different types of decisions. “Most say” means if there was a disagreement, the person who would have final say. If you have more than one partner, think about your main partner. If you don’t have a partner, think about a previous partner. If you have not had to make any of the following decisions, please think about who would have the most say in the decision. For these questions, please select one of the following response choices:

- My sexual partner (or someone else such as a parent or mother in-law/father in-law)
- Both me and my sexual partner (or someone else such as a parent or mother in-law /father in-law) equally
- Me

Decision-making Index

	My partner	Both me and my partner	Me
1. Who has the MOST say about whether you use a method to prevent pregnancy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Who has the MOST say about which method you would use to prevent pregnancy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Who has the MOST say about when you have a baby in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. If you became pregnant but it was unplanned, who would have the MOST say about whether you would raise the child, seek adoptive parents, or have an abortion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The next questions are about you and your main or a recent sexual partner. For these questions, please select one of the following response choices:

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree

Coercion subscale

	Strongly disagree	Disagree	Agree	Strongly Agree
5. My partner has stopped me from using a method to prevent pregnancy when I wanted to use one.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My partner has messed with or made it difficult to use a method to prevent pregnancy when I wanted to use one.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. My partner has made me use a method to prevent pregnancy when I did not want to use one.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If I wanted to use a method to prevent pregnancy my partner would stop me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. My partner has pressured me to become pregnant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Communication subscale

	Strongly disagree	Disagree	Agree	Strongly Agree
10. My partner would support me if I wanted to use a method to prevent pregnancy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. It is easy to talk about sex with my partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. If I didn't want to have sex I could tell my partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. If I was worried about being pregnant or not being pregnant I could talk to my partner about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. If I really did not want to become pregnant I could get my partner to agree with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Citation: Upadhyay, U. D., Dworkin, S. L., Weitz, T. A., & Foster, D. G. (2014). Development and validation of a reproductive autonomy scale. *Studies in family planning*, 45(1), 19-41.