

# Thematic analysis and mapping of reproductive empowerment scales: a tool for family planning self-care programming and research

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## BACKGROUND / SIGNIFICANCE

The family planning field has seen increased conversations about self-care interventions and, linked to this, a resurgence of discussions on reproductive empowerment. Self-care spans a range of practices including self-awareness, self-testing, and self-management, and self-care interventions are tools that support self-care. A recent systematic review exploring the relationship between contraceptive self-care interventions and reproductive empowerment, however, found clear gaps in the evidence base on the relationship between self-care and reproductive empowerment. Furthermore, the review found inconsistencies in the use of validated reproductive empowerment measures.

## OBJECTIVE

To help family planning programs and researchers assess which validated reproductive empowerment scales fit their needs for family planning self-care programming.

## FINDINGS

The literature review identified five validated scales related to reproductive empowerment: The Reproductive Autonomy Scale, the Reproductive Empowerment Scale, the Contraceptive Self-Efficacy among women in sub-Saharan Africa scale (CSESSA), Index of women's and girls' empowerment in sexual and reproductive health (WGE-SRH), and the Sexual and Reproductive Empowerment Scale for Adolescents and Young Adults. The first four scales focus on women of reproductive age, while the last focuses on youth (15-24 years) of both genders.

We observed thematic similarities across the scales' items even though the authors of the scales used different labels for their constructs. Across our map, we found that items within the communication and decision-making domains are represented in all five scales, and that items from the partner influence domain are in three of the scales. Items measuring social support (from non-partners) are in two scales, and the rest of the domains are in only one scale.

**FIGURE 1. Map of Validated Reproductive Empowerment Scales by Domain Abbreviations: CSESSA, Contraceptive Self-Efficacy among women in sub-Saharan Africa; RH, reproductive health; WGE-SRH, Women's and Girls' Empowerment in Sexual and Reproductive Health**

DOMAINS	SCALES AND ASSOCIATED SUBSCALES					
	Reproductive Autonomy Scale	Reproductive Empowerment Scale	CSESSA	WGE-SRH		Sexual and Reproductive Empowerment Scale for Adolescents and Young Adults
<b>Communication</b>	• Communication	• Reproductive Health (RH) Partner Communication • RH Healthcare Provider Communication	• Husband/Partner Communication • Provider Communication	Exercise of Choice • Sex by choice (items: #1, 3) • Contraception by choice (items: #1, 3, 4) • Pregnancy by choice (item: #3)		• Comfort Talking with Partner
<b>Decision-Making</b>	• Decision-Making Index	• RH Decision-Making (items: #3, 4)	• Choosing and Managing a Method	Exercise of Choice • Sex by choice (item: #2) • Contraception by choice (item: #2) • Pregnancy by choice (items: #1, 2)		• Choice Of Partners, Marriage, and Children
<b>Partner Influence</b>	• Coercion	• RH Decision-Making (items: #1, 2)		Existence of Choice • Sex by choice • Contraception by choice (items: #1, 3, 5) • Pregnancy by choice (item: #1)	Exercise of Choice • Sex by choice (item: #4)	
<b>Social Support (non-partner)</b>		• RH Social Support				• Parental Support
<b>Family Planning Attitudes</b>				Existence of Choice • Contraception by choice (items: #2, 4) • Pregnancy by choice (item: #2)		
<b>Future Goals</b>						• Sense of Future
<b>Safety</b>						• Sexual Safety
<b>Self-Love</b>						• Self-Love
<b>Sexual Pleasure</b>						• Sexual Pleasure
<b>Social Norms</b>		• RH Social Norms				

## METHODS

We searched the peer-reviewed literature to identify existing scales that measure reproductive empowerment and understand how reproductive empowerment is conceptualized within those scales. We summarized five validated scales that measure reproductive empowerment-related concepts and conducted a thematic analysis. We first mapped the domains using the scale authors' labels. Next, we reviewed the content of the items within each domain (as described by the scale authors) to identify similarities or differences between the items. We created a map by thematically grouping the items within the five scales into ten domains that could be the focus for reproductive empowerment activities within FP programs.

- Communication:** Any item indicating an exchange of thoughts, words, or ideas either verbally or nonverbally by the interviewee to another person or to a group of people
- Decision making:** Any item referring to a potential choice being made by the interviewee about their childbearing; sex; marriage; family planning method use, type, and management; pregnancy; child-rearing; and abortion

**How to use the map:** Use our map (Figure 1) to identify the scale(s) and/or scale items to measure those specific constructs. This map serves as a tool to help narrow down the scales based on the program's theory of change. As an example, programs or studies interested in measuring women's contraceptive self-efficacy may want to use the CSESSA because it measures respondents' confidence in performing specific behaviors related to initiating, managing, and continuing use of contraception. However, if items measuring communication are already covered in your questionnaire by another scale, perhaps consider only using the CSESSA subscale "choosing and managing a method" to avoid redundancy and decrease respondent burden.

For additional information, see article in Global Health: Science and Practice using the link or QR code:  
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- Partner influence:** Any item indicating coercion or consequences by an interviewee's sexual partner over family planning method use, pregnancy, and sex
- Social support:** Any item indicating help given to an interviewee by family, friends, or other people in their community (excluding the interviewee's sexual partner)
- Family planning attitudes:** Any item indicating a personal gain or worry due to the use of family planning methods or spacing between pregnancies
- Future goals:** Any item indicating short-term or long-term plans for the interviewee
- Safety:** Any item indicating the interviewee feeling free of harm
- Self-love:** Any item indicating confidence, self-worth, and ownership of oneself
- Sexual pleasure:** Any item indicating feelings of enjoyment or fulfillment for the interviewee or their partner(s)
- Social norms:** Any item indicating societal values experienced by the interviewee through friends or family

## CONCLUSIONS / NEXT STEPS

Communication, decision-making, and partner-influence are the most measured domains among the scales we examined. However, measures of other reproductive empowerment domains are available and may be of interest to programs depending on their context and focus. Our map may be a useful resource for programs and researchers as a guide for when to use each scale and for those who want to focus on certain constructs within the broader concept of reproductive empowerment. Additionally, we hope to garner support from the family planning community to use existing, validated reproductive empowerment scales to generate comparable evidence and answer questions such as, "Are family planning self-care interventions empowering?" and, "Are self-care interventions more readily used by those who feel more empowered?"

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