

Sexual and Reproductive Wellbeing (SRWB) Measure Development Strategy

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INTRODUCTION

A population-level person-reported outcome measure (PROM) that captures people’s sexual and reproductive experiences in a comprehensive manner is vital to robustly evaluate the state of sex/sexuality and reproduction in the United States. This includes better understanding how structures, systems, and the range of fields and efforts enable optimal sexual and reproductive experiences for all people. To achieve this, we propose a measure of Sexual and Reproductive Wellbeing (SRWB) to assess whether people are achieving the sexual and reproductive lives they wish to have. This measure is grounded in Reproductive Justice (RJ) and Sexual and Reproductive Health Equity (SRHE) principles to uplift people’s autonomy, expand access, and address inequities. A universal measure of SRWB, at the core of policy, programs, practice, and research, will offer more nuanced, holistic, and complementary information to the existing ecosystem of measures.

SRWB is currently envisioned as a self-reported population-level measure administered via a questionnaire or other measurement instrument. It will be an overarching, standalone measure that is adaptable to different contexts. There will also be opportunities to create subsequent series of measures that could be group-specific, as determined through community testing and input.

In the first phase of this work, the Coalition to Expand Contraceptive Access (CECA), the National Birth Equity Collaborative (NBEC), and the University of San Francisco, Person-Centered Reproductive Health Program (UCSF) (the SRWB team) were charged with thinking creatively and comprehensively about the concept of SRWB and to set the stage for development of this novel measure, from both conceptual and methodological perspectives.

SRWB PROJECT APPROACH

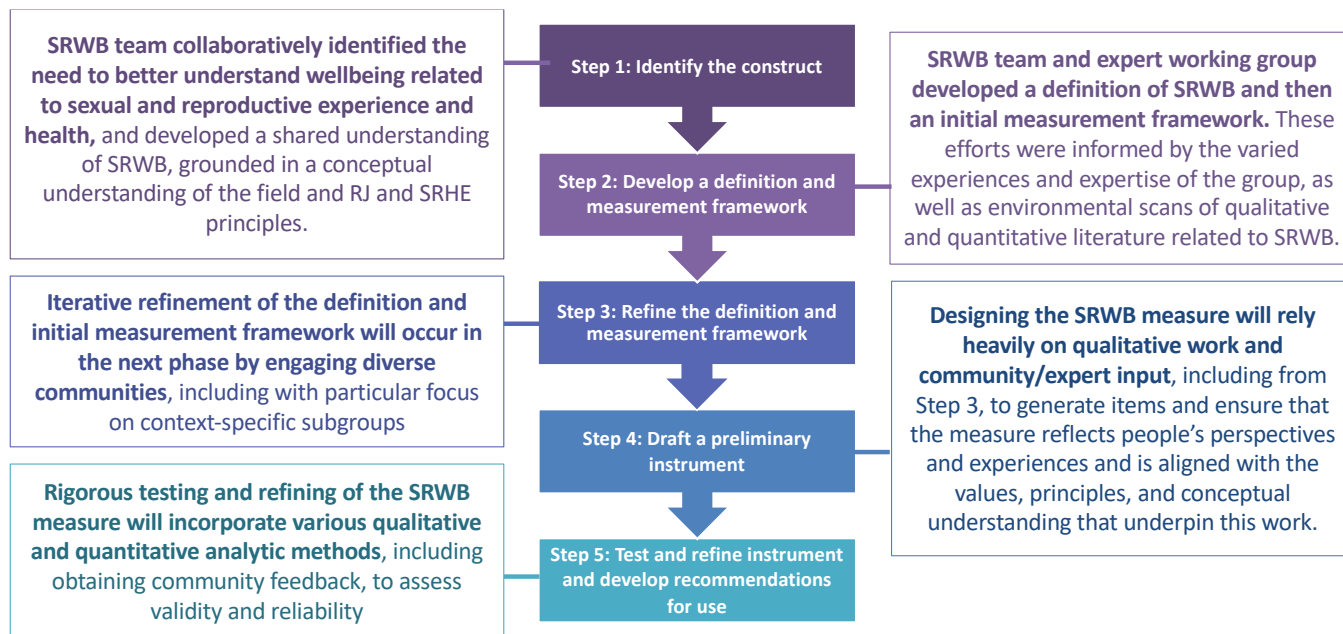
In the measure development process, a concept is defined, and then a measurement instrument is designed and rigorously tested for validity and reliability, eventually producing a refined instrument that measures the construct. To complete this project, the SRWB team customized an approach that follows traditional, methodologically rigorous, and innovative development processes. The team was intentional and critical about identifying opportunities to improve measure development—specifically enhancing stakeholder and community engagement and input—throughout the process, starting from conceptualization. The diagram on the following page outlines the SRWB measure development process, highlighting the unique facets of our approach, the progress to date, and areas of future work. Funding for the first phase of this work supported construct identification (**Step 1**), development of the definition and measurement framework (**Step 2**) and building the strategy for future measure development.

Key Terms and Definitions

Reproductive Justice was coined by a group of Black women in 1994 in recognition that the Women’s Rights Movement, led by and representing white women, lacked a lens that could more equitably fight for the needs of Black, Indigenous, and women of color, and other marginalized people. It can be defined as the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities.¹

Sexual and Reproductive Health Equity (SRHE) means that systems ensure that all people, across the range of age, gender, race, and other intersectional identities, have what they need to attain their highest level of sexual and reproductive health. This includes self-determining and achieving their reproductive goals. Government policy, healthcare systems, and other structures must value and support everyone fairly and justly.²

SRWB Measure Development Approach



For Step 1, the SRWB team collaboratively identified the need to better understand wellbeing within the specific context of sexual and reproductive experiences and health (SREH), as opposed to more disease- and problem-oriented SREH metrics. In this very early phase of the SRWB project, the SRWB team developed a shared understanding of the desired construct, SRWB, grounded in a conceptual understanding of the field and in RJ and SRHE principles.

For Step 2, the SRWB team convened a working group of community partners and experts to provide input and guidance around defining SRWB and the process to create a measure. This group was informed by their experiences and expertise, as well as environmental scans of the qualitative and quantitative literature related to SRWB conducted by the SRWB team. The SRWB team and partners worked together to build a definition and initial measurement framework of SRWB. The current phase of work concludes at this step of the process.

Steps 3, 4 and 5 will occur in the next phase(s) of work, pending future funding. This strategy was developed by the SRWB team, with support from the working group, to start to plan and guide the measure development process in the next phase(s). Completing **Steps 3, 4, and 5** will require additional qualitative work and community engagement. This will include obtaining feedback on the definition and measurement framework developed in **Step 2** and input on the item pool and final measure. Given the complexity and scope of SRWB, the SRWB team anticipates gathering more actionable insights through qualitative work, as community members will be able to react to the proposed definition, framework, items, and measure.

Principles for Defining and Developing a Measure of SRWB

To guide the development of a definition and measure, the SRWB team and working group identified and modeled the following principles at the outset of this effort. These principles, informed by environmental scanning efforts and expert input, were identified as key to centering RJ and SRHE and ensuring the process is inclusive, values-aligned, evidence-based, and does not reproduce the same harms as prior measurement approaches that can exacerbate coercion, discrimination, and inequitable constraints to wellbeing. These principles have been used to this point to define SRWB and it is intended for these principles to continue to be modeled as measure development continues.

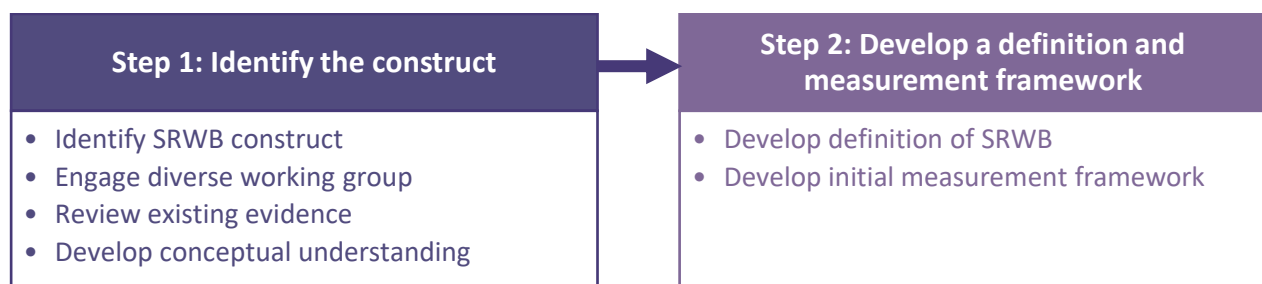
Principles for Defining and Developing a Measure of SRWB

1. **Center values of RJ and SRHE throughout this process:** Root this measure and the process in concrete values and goals, from the point of conceptualization through implementation.
2. **Define SRWB “in the eye of the beholder”:** Everyone has different lived experiences, desires, and stigmas and is impacted differently by policy and structural contexts. Incorporate how individuals understand and define their subjective wellbeing across the life course, while working toward a population-level measure.
3. **Rely on diverse community engagement:** Measure developers alone should not define wellbeing for all individuals. Develop an inclusive, validated definition and measure through community feedback and qualitative information gathering.
4. **Move away from negative definitions and toward a positive framing:** Several existing health-related concepts are defined in the negative, including by the absence of illness or problem. Focus SRWB on positive elements, emphasizing the outcome of wellbeing and key components along the pathway to achieving wellbeing.
5. **Reiterate the importance and unique contribution of holistic measures, like SRWB:** Frame why SRWB measurement is needed and its intended use as part of this process to emphasize the potential positive impacts and promote culture shift.
6. **Build from but do not be constrained by previous measurement approaches:** Measures have their limitations and risk being weaponized. It is important to consider both previous and innovative approaches to measure development to reimagine their value and utility and not recreate prior harms.

The remainder of this document describes the progress to date, summarizing the work completed in **Step 1** and **Step 2**, and proposes a process through which to eventually create a measure of SRWB.

PROGRESS TO DATE TO DEFINE AND PLAN A MEASURE OF SRWB

The SRWB team began by identifying the SRWB construct to help address the needs of and gaps in existing SREH measurement. A working group of diverse experts was then formed and convened to thoughtfully consider a definition and measure of SRWB over a series of meetings. In conjunction with working group discussions, the SRWB team conducted a scanning process of existing measures and qualitative assessments of SREH to better understand the current measurement space and efforts to move toward more holistic and nuanced constructs. Both the scans of the existing evidence and the working group’s analysis and discussion informed development of our conceptual understanding, definition, and initial measurement framework of SRWB.



Step 1: Identify the construct

Identify SRWB Construct. The SRWB team collectively recognized that the current approach to measuring the state of the nation’s sexual and reproductive outcomes is fragmented and doesn’t consider a full range of outcomes. Traditional and widely-used metrics like unintended pregnancy were never designed to understand the breadth of meaningful experiences in a person’s sexual and reproductive life. Instead, such measures have often perpetuated harmful and oppressive narratives that widen inequities. Improving sexual and reproductive outcomes and achieving equity requires a fundamental and holistic shift in how policymakers, clinicians, and the public understand and address these issues. New measures that can be used to better understand people’s sexual and reproductive experiences, health, and wellbeing and what interventions can improve them are sorely needed.

There has been increasing movement globally toward recognizing the value of both prioritizing and measuring wellbeing as a means of determining how well people’s health and social needs are met. In the context of SREH, the SRWB team understood that wellbeing may be conceptualized as the degree to which individuals have achieved the sexual and reproductive outcomes they wish to have, as well as their experience of achieving those outcomes – providing a new level and framing of SREH outcome measurement that has the potential to allow for epidemiological tracking of the extent to which structures and systems enable optimal sexual and reproductive experiences on a population level, as well as to allow for monitoring the impact of specific interventions on this outcome. At project inception, the team had a shared understanding of the desired construct, SRWB, to define and measure.

Engage Diverse Working Group. Centering the importance of diverse expertise, the SRWB team convened a group of experts and thought leaders to bring perspectives across a breadth of areas in measurement, research, clinical practice, advocacy, and policymaking. The working group was charged with supporting the SRWB team to review the evidence and history around SREH measurement, construct a definition and measurement framework of SRWB, and inform a strategy for future measure development. Members of the working group offered critical insight and feedback on and throughout the process and promoted the importance of culture shift in SREH measurement and measure development.

Review Existing Evidence. To better understand wellbeing within the context of SREH, including scanning the existing ecosystem of SREH and wellbeing measures and exploring understandings of SRWB, the team performed two environmental scans of SRWB-related quantitative and qualitative literature early in the project. In the [quantitative environmental scan](#), the team examined existing measures in sexual and reproductive health and health care, how measures relate to more holistic conceptualizations of SRWB, and how wellbeing is measured in the literature. In the [qualitative environmental scan](#), the team explored concepts broadly related to how people understand SRWB. Findings of both scans were shared and informed discussions with the working group, which helped shape the principles for and define SRWB. Key takeaways from both scans are summarized in the tables below.

Technical Areas of Working Group Participants

- Sexual and reproductive health
- Family planning
- Maternal and child health
- LGBTQ+ health
- Adolescent health
- Men’s health
- Reproductive justice
- Health equity
- Sexuality studies
- Abortion care
- STIs and HIV
- Parenting
- Disability
- Behavioral science
- Sociology
- Economics
- Epidemiology and biostatistics
- Demography
- Psychometrics

Key Takeaways from the Existing SRWB-Related Quantitative Literature

In summary, the quantitative scan found that existing measures:

- Prioritize clinical and public health objectives and frames, largely focusing on specific areas of care or diagnoses and problematizing individual behaviors and choices.
- Are limited to symptom inventories and psychological distress/disorders, even for more holistic conceptualizations.
- Are limited in scope and largely centered on the experiences of cis-women and heterosexual relationships, revealing the need for more inclusive measurement approaches that are informed by and incorporate the perspectives and experiences of people traditionally excluded, ignored, or underrepresented in research.
- Of overall wellbeing are incomplete and inconsistent.

Key Takeaways from the Existing SRWB-Related Qualitative Literature

Similarly, a number of key takeaways emerged from existing qualitative research, including that:

- Explorations of more subjective understandings of sexual and reproductive experiences are limited in scope and inclusivity, affirming the need for more inclusive approaches with thoughtful and intentional processes for deep qualitative and community-engaged work.
- SRWB is an individual experience, and a definition/measure should have broad applicability while accommodating that subjectivity.
- People’s understanding of their sexual and reproductive experiences and health often included and was impacted by socioecological factors, underscoring how these contexts can shape SRWB outcomes.

The SRWB-related qualitative research also revealed three themes, reflecting contributing factors to the quality of people’s sexual and reproductive lives, which informed the conceptual model and definition:

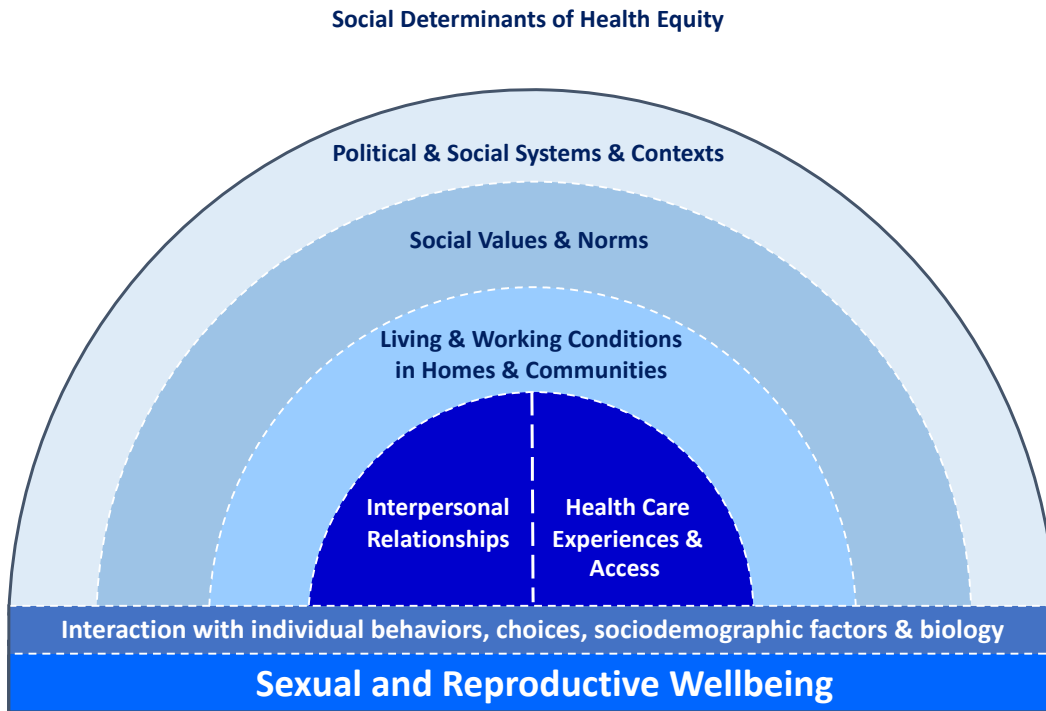
1. **Sexual and reproductive agency and autonomy:** factors needed to have and exercise agency and autonomy, including decision-making power, information, supports
2. **Person-centered sexual and reproductive care and services:** services, care, health interactions, and resources from knowledgeable and competent providers, who give respect and empathetic support
3. **Personal and interpersonal experiences:** freely exploring, developing, and expressing oneself, having optimal SREH, forming meaningful relationships in accordance with one’s desires and needs

Develop Conceptual Understanding. Based on these insights and the need to be clear about the contexts in which SRWB is embedded, the SRWB team drafted a conceptual model of SRWB (on the next page) with support from the working group. The conceptual model proposes the socioecological factors and context that constitute SRWB and influence people’s ability to achieve SRWB. This model was developed to help inform and anchor the definition, measurement framework, and eventual measure of SRWB. The included factors are informed by evidence from the environmental scans, as well as by the team and working group’s underlying understanding of sexual and reproductive health and experiences.

The SRWB team chose this graphic, an adaptation of a model developed by Braveman et al. for the Robert Wood Johnson Foundation, to illustrate how structural, social, and individual-level determinants directly and indirectly shape the outcome of SRWB. The social determinants of health equity are intentionally illustrated as a “sea” in which this model “swims” to demonstrate how systems of power and history pervade all societal structures, policies, practices, values, choices, and, ultimately, SRWB. Being explicit about the relationship between SRWB and these social determinants of health equity and the socioecological determinants included within the model helped ensure that the development of a definition of SRWB and its domains was informed by contextual factors.

SRWB CONCEPTUAL MODEL

Socioecological Determinants of Sexual and Reproductive Wellbeing



Adapted from Braveman et al., for RWJ Foundation; Commission to Build a Healthier America, www.commissiononhealth.org for the Sexual and Reproductive Wellbeing (SRWB) Measure Planning Project, January 2023

Social Determinants of Health Equity, e.g.:

- Racism, discrimination, and oppression
- Sexism and heterosexism
- Ableism
- Historical injustice

Political & Social Systems & Contexts, e.g.:

- Government systems, policies, programs, and resources
- Economic, healthcare, and education systems
- Private institutions and structures

Social Values & Norms, e.g.:

- Social, sexual, reproductive stigma
- Gender role expectations
- Values that align with freedom of choice and self-expression
- Cultural and community beliefs and traditions

Living & Working Conditions in Homes & Communities, e.g.:

- Local and social environment
- Housing stability
- Food security
- Educational systems and access
- Geography/zip code

Interpersonal Relationships, e.g.:

- Interpersonal racism and discrimination
- Social supports, networks, and connectedness
- Relationship history and status
- Family and parenting status

Health Care Experiences & Access, e.g.:

- Health insurance coverage
- Quality of health care and information
- Accessibility, affordability, availability, and knowledge of services and supplies
- Access to respectful and culturally-appropriate care

Individual behaviors, choices, sociodemographic factors, & biology, e.g.:

- Contraceptive use
- Choice of partners, marriage, and children
- Self-efficacy and agency to determine sexual and reproductive life and desires
- Role of individual identities, gender, sexuality, race, class, immigration status, employment status
- Biological factors

Step 2: Develop a definition and measurement framework

Develop Definition of SRWB. In this process, it was essential to build a formal definition that articulates the key concepts and overarching domains of SRWB, identifying the ultimate outcome of SRWB as well as essential factors along the pathway to achieving that outcome. The SRWB team and working group developed the definition below, informed by a variety of inputs, including existing evidence on people's experiences and understanding of their SRWB, socioecological factors that shape and comprise SRWB, existing SREH definitions and measures, working group discussions, and RJ and SRHE frameworks. The SRWB team and working group were intentional about creating a broad definition so that it can be applicable to people across the life course and regardless of context, preferences, or specific sexual and reproductive experiences.

The SRWB team envisions the definition to be taken up and considered by the broad SREH field and eventually the general population to begin changing how people think about sexual and reproductive outcomes, including their own sexual and reproductive outcomes. This definition is also an avenue through which to shape and direct the SREH narrative, policy, and practice.

SRWB is a state of complete physical, mental, and social fulfillment in all matters related to sex and reproduction, free of injustice, oppression, coercion, violence, and stigma and their consequences. This includes having:

- **Freedom and ability to control, act on, and not act on** one's sexual and reproductive decisions, desires, goals, and identities, including having comprehensive information, services, and supports, and not being hindered or harmed
- **Holistic and high-quality care** for one's sexuality and reproduction, free of judgement, bias, and coercion, that prioritizes personal needs and desires
- **Optimal sexual and reproductive outcomes in accordance with one's needs and desires**, including:
 - Attaining one's ideal state of sexual and reproductive health
 - Having the choice of if, when, and how to become a parent, and ability to do so
 - Having a pleasurable and safe sex life

Develop Initial Measurement Framework. The SRWB team developed an initial measurement framework of SRWB, below, resulting from the draft definition. The initial measurement framework distills the conceptual definition into an operational definition of SRWB or initial proposed measurement domains to guide measure development, including item generation.

Initial proposed measurement domains:

- #1. Satisfaction with your sexual and reproductive experiences
- #2. Agency, autonomy, and freedom from oppression in matters related to sexuality and reproduction
- #3. Experience of sexual and reproductive health care
- #4. One's ideal state of sexual and reproductive health
- #5. The choice of if, when, and how to become a parent, and ability to do so
- #6. A pleasurable and safe sex life

At this stage, the SRWB team sought to create a framework for a universal measure that may be assessed at the population-level, across several audiences uniformly, to drive policy, programs, and practice. The SRWB team focused on creating a broad measurement framework to allow each person to answer the items from their own experiences, without defining it for them. The final version of the SRWB measure may

diverge from this initial framework, as subsequent qualitative work and testing may shift domain organization, item inclusion, and more.

This approach also leaves room for further refinements and adaptations by future researchers during SRWB measure development. Group- and/or context-specific definitions, frameworks, and subsequently measures of SRWB may emerge from future community testing and input. The SRWB team and working group find it important to understand how SRWB fits into the ecosystem of existing and, potentially, new measures to provide more nuance and context to how SREH outcomes are interpreted.

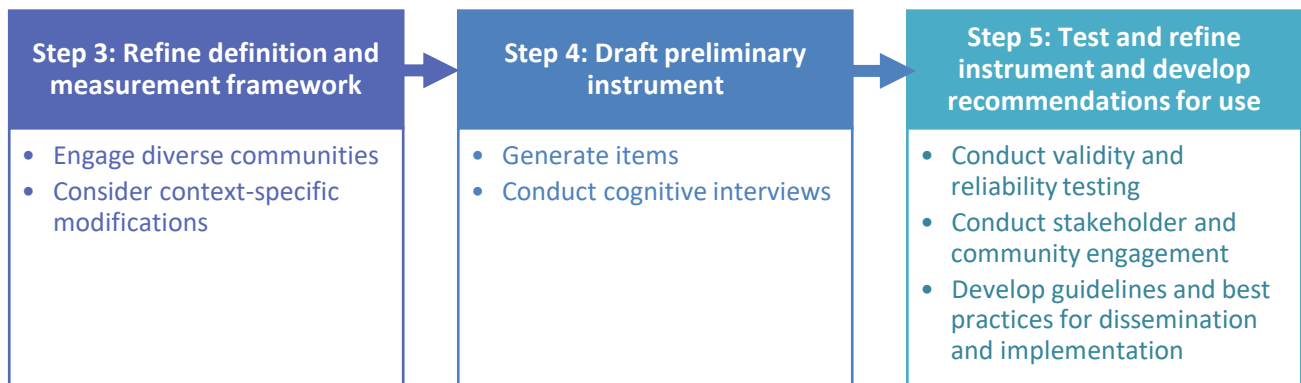
The process of creating these proposed domains resulted in a preliminary list of considerations and research questions, summarized below. The SRWB team integrated strategies for addressing these considerations and questions into the proposed measure development process, which will rely heavily on qualitative work and testing.

- What is the utility of, and should the framework include a global measure of SRWB (e.g., “Are you satisfied with your sexual and reproductive experiences?”)?
- Should the framework distinguish sex/sexuality and reproduction, and if so, how?
- How can we rigorously assess the validity and reliability of a universal measure that accommodates a broad range of subjectivities without overgeneralizing and losing meaning across different populations?

The current phase of work concludes with the development of the SRWB definition, initial measurement framework, and this proposed strategy for measure development. Described below is an approach for continued work in subsequent phases, including fielding and refining the definition and initial measurement framework.

PROCESS FOR CONTINUED MEASURE DEVELOPMENT

The SRWB team is committed to continuing the development of the SRWB measure, beginning with engaging communities in the work completed to date to develop both a universally applicable measure and a context-specific measure. Once the definition and measurement framework are fielded, refined, and finalized, the SRWB team will draft a preliminary instrument to measure SRWB for both contexts that will undergo rigorous and iterative testing and refinement.



Step 3: Refine the definition and measurement framework

Step 3 will focus on refining and finalizing the definition and measurement framework through intensive engagement of community participants and developing initial ideas for wording of items within measurement domains. Modeling the principles outlined above, the SRWB team will evaluate the extent to

which the definition and framework reflect and align with people's perspectives and experiences. This work will simultaneously focus on universally applicable definition and measure and explore SRWB within one specific context-specific testing in order to inform the potential development of a subgroup measure.

Engage Diverse Communities. The SRWB team will qualitatively engage with diverse communities to explore the definition and framework. The process will be diversity-focused, ensuring intentionality in defining, identifying, and engaging communities. The SRWB team will consider how granular to define communities and continuously assess potential assumptions to prevent unintentional exclusion. The wording/interpretation of the domains and questions will be iteratively explored through interviews and other stakeholder engagements.

Consider Context-Specific Modifications. The SRWB team will engage purposively with one context-specific group (e.g., trans-men or individuals with physical disabilities) to obtain insights into specific modifications and additions that may be considered to capture their specific perspectives and experiences. Learnings from these engagements will inform the development of a group-specific definition and framework.

Step 4: Draft a preliminary instrument

Step 4 will focus on constructing a draft quantitative measure of SRWB grounded in existing evidence and theory, preliminary qualitative data, and input from key stakeholders, including community participants. The SRWB team will also generate additional items to be added to and/or modified in the universal instrument for a specific context or subgroup.

Generate Items. Using the revised versions of the definition and measurement framework and insights obtained in **Step 3**, the SRWB team will begin to generate a pool of items corresponding to each domain for both the universal instrument and a modified context-specific instrument. These items will be created with guidance from the working group, which will include measurement and SREH technical experts and community members. The working group will also be involved in iterative refining of the item pool until the measure draft is ready to be fielded. The SRWB team aims to have at least one item per domain and will work to ensure that the measure and item wording are easily understandable across diverse populations, are responsive to and centering marginalized or minoritized groups, minimize respondent burden, and remain flexible to a broad range of analytical methods and subgroup or subscale analyses.

Conduct Cognitive Interviews. After item generation and refinement, the SRWB team will perform cognitive interviews with a representative sample of different populations, prioritizing historically minoritized and marginalized communities, with additional focus on the group for whom a context-specific definition has been created. Through open-ended questions, participants will share their impressions, perspectives, and experiences about the measure and items, as well as specific concepts related to SREH and wellbeing. Analysis of cognitive interview findings and reflections will be used to revise, as needed, and finalize the item pools. This process allows us to iteratively test items to optimize comprehension, equivalence, relative importance, clarity, and comprehensiveness, ultimately ensuring that important domains, concepts, or experiences have not been missed or misunderstood in the measure.

Step 5: Test and refine the instrument and develop recommendations for use

Step 5 will focus on conducting psychometric tests of the resulting item pools in a diverse population to produce a high-quality, usable measure of SRWB overall and a context-specific measure that includes additional items. In addition, the SRWB team will develop recommendations to facilitate implementation, including dissemination of materials and findings.

Conduct Validity and Reliability Testing. The SRWB team will evaluate the instrument's measurement properties in a cross-sectional study with a large, diverse participant pool that purposefully prioritizes or

oversamples historically marginalized or minoritized populations. Psychometric analyses of this data will determine the measure’s factor structure, refine the specific items to be included in the final measure, and assess this measure’s ability to measure SRWB with accuracy and across diverse populations or groups (a universal measure) and a specific group (group-specific measure).

Convergent and divergent validity analyses will be conducted using the final measure to assess its relationship with related measures of SREH and wellbeing. The SRWB team will test whether SRWB measure scores align with measures of similar constructs and, similarly, do not align with dissimilar constructs to demonstrate that the instrument does measure SRWB as intended. Similar analyses will be performed concurrently on the context-specific measure, which will consist of items included in the universal SRWB measure and additional, more specific items.

Conduct Stakeholder and Community Engagement. For face validity – an assessment of the extent to which the instrument measures SRWB – the SRWB team will conduct a stakeholder-engaged consensus building process (e.g., Delphi process). Including individuals with diverse expertise and lived experiences will help ensure that validity testing is representative of and relevant for all communities included in the dataset(s) and considered in the measure.

Develop Recommendations. To ensure that a wide range of potential stakeholders, including other SREH researchers, policymakers, public health programmers, and communities, can utilize this tool to collect data and better understand people’s SRWB, the SRWB team intends to develop detailed recommendations for dissemination and implementation of the SRWB measure, including but not limited to the following:

- How the questionnaire should be administered and by whom
- Populations and/or communities of interest
- Unit of analysis
- Guidelines on assessing data quality
- Guidelines on analytical tests and how their results should be used and interpreted at different levels and within the ecosystem of other SREH measures
- Guidelines for how findings should be reported out and back to communities and other stakeholders

MOVING FORWARD

SREH has traditionally been tracked using a disparate number of measures that are fragmented, have been criticized from both conceptual and methodological perspectives, and have gaps in assessing some realities of people’s sexual and reproductive state and experience. New and improved measures, like SRWB, can be used to better capture people’s own lived experiences of SREH. This effort to define and measure SRWB can help drive a fundamental and holistic shift toward person-centered metrics through documenting and sharing the work, engaging key partners, and fostering action.

Potential Impact

- Increase focus on values-aligned, holistic, and person-centered metrics at the core of policy, programs, practice, and research
- Disrupt historical measurement approaches and avoid reproducing the harms of prior measurement
- Better understand the extent to which structures, systems, and efforts enable optimal SREH
- Contribute to our ability to empirically assess, better understand, and more effectively address complex phenomena going forward

Documenting and Sharing the Work

The goal of the first phase of this project was to produce and disseminate a definition of SRWB and outline a strategy for developing and validating a measure of SRWB. From the start, the SRWB team thought creatively and comprehensively about a new concept of SRWB and how set the stage for a measure that is values-aligned. Taking the time to collectively develop a shared understanding of the SRWB as a concept, a definition, and initial measurement framework—within the CECA/NBEC/UCSF team and with great insight from the diverse Workgroup Members—is a rare opportunity. The process as well as the products should be documented and shared broadly. Potential outputs to help socialize this conceptual work include:

- **Quantitative and qualitative environmental scans** to summarize wellbeing within the context of SREH, including scanning the existing ecosystem of SREH and wellbeing measures and exploring more subjective understandings of SRWB. - *completed*
- **SRWB Measurement Development Strategy** to summarize the equity-informed principles guiding this work, project approach, progress to date, proposed measurement process, and next steps. - *completed*
- **Slide deck** to accompany the SRWB Measurement Development Strategy and inform briefings by Workgroup Members and others. - *completed*
- **Conference presentations, commentaries, research articles, or other opportunities** to share initial process and products, communicate how SRWB fits into the broader measurement ecosystem and broader context of social and political issues, and describe our collective efforts to disseminate and socialize this conceptual work.

Engaging Key Partners

Collaboration is key to creating a fundamental shift to person-centered metrics that center people’s values and preferences for SREH. The steps outlined above serve to both document the work and help increase credibility as it is shared broadly. Partner engagement is critical to the next phase of the measure development process, and for collectively co-creating a “SRWB narrative” designed to foster buy-in and support for measure dissemination and implementation. The SRWB team plans to:

- **Continue to engage interested working group members**, especially those that have aligned initiatives and work, throughout the measure development phases (steps 3-5) and during the dissemination and implementation phases.
- **Engage community members** in steps 3-5 to help refine and finalize the SRWB definition and measurement framework, provide feedback on the draft quantitative measure of SRWB, and participate in measure testing activities.
- **Working with measurement and other interested partners** to identify and develop additional metrics related to SRWB and to consider application of SRWB in other global contexts.
- **Build broader stakeholder support** by tailoring outreach efforts to different audiences, such as human rights advocates; federal partners, including those who manage national survey systems; and potentially less supportive groups.

Fostering Action

The work to further develop, disseminate, and implement this work can change how people think about sexual and reproductive outcomes, and shape and direct SREH narrative, policy, and practice. It must be grounded in a sexual and reproductive health equity framework and uphold principles of reproductive autonomy and justice. This includes ensuring these processes are inclusive, values-aligned, evidence-based, and does not reproduce the same harms as prior measurement approaches – or create new ones – that can exacerbate coercion, discrimination, and inequitable constraints to wellbeing.