Sexual Relationship Scripts:

Adapting a Card-sort Technique for use with a Semi-Literate Population in a Developing Country



Studying Sexual Relationships: 3 Key Challenges

- Limited to landmark events first sex, relationship start and end, marriage, pregnancy
- Few aggregate studies ask about about subjective attitudes: ideals, expectations, or regrets
- It is difficult to design interactive, respondentdriven methods for use with semi-literate populations.



Relationship Scripts Methodology

Pioneered in Add Health

- > 17 cards
- Asked about Ideal and Realized Relationships



> We brought it to Malawi

- > Added illustrations
- Generated locally specific set of steps
- Asked about expectations, regrets, and gender differences in ideals



Tingapangitse chinkhoswe.

Tsogolo la Thanzi ("Healthy Futures")



- Balaka, Southern Malawi
 - + Rapidly urbanizing town

+ Ages 15-24

Longitudinal design

- + began June 2009
- 4 month intervals
- + Follow-up waves 1-5: 84.8%

> Wave 5: N= 2,392

- We exclude 248 "never in relationship" and 648 male partners (non-random RDS)
- + Our sample: 1,752

Developing the Instrument

Developing Preliminary Set of Relationship Cards





Tingayambe kukhala limodzi.



Tingagonane.

Developing the Instrument

Developing Preliminary Set of Relationship Cards	Training the Survey Team	
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Developing the Instrument

Developing Preliminary Set of Relationship Cards Training the Survey Team	Pilot Study
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Relationship Steps

Social Embeddedness	Emotional Intimacy
I would see less of my friends to spend more time with him.	We would meet somewhere to chat in private.
I would meet his parents.	He would give me a present.
He would meet my parents.	I would give him a present.
I would tell close friends that we are a couple.	We would go out together alone, holding hands.
We would attend to a community event together.	We would have a traditional wedding .
Physical Intimacy	Marriage and Family Formation
We would go for VCT.	We would pay the chief to register our marriage.
We would talk about contraception.	We would have a religious wedding.
We would kiss.	We would start living together.
We would have sex.	l would get pregnant.
We would touch each other's genitals.	We would decide to get married.
We would touch each other's chest.	

Sample Illustrations



Prompts

Think about your current relationship or your most serious past relationship.		
Realized Sequence	Take out steps that have never happened to you.	
	Arrange the remaining cards in order on the table according to how they happened with this partner.	
Regrets	If you could change one thing about this sequence, what would it be? (Options: Add, Move, or Delete 1 card)	
Expectations	What do you expect will probably happen with this partner in the future?	
Think about your closest friend or relative. Imagine you are giving them advice about a new relationship.		
Ideal Sequence	Take out steps that you would not want to happen to them.	
	Arrange the remaining cards in order on the table according to what you would want to happen with this partner.	
	What would you change if you were giving advice to someone of the opposite gender?	

Scattered Experiences, Patterned Ideals

Placement of HIV Testing, Sex, and Religious Marriage Random Sample of 300 Married Respondents

Lived Experience



Ideal Sequence



Difference between Proportion in Ideal and Actual Sequences



Ideals as Anchors for Relationship Experiences

Margaret Frye^a and Jenny Trinitapoli^b

American Sociological Review

Frye and Trinitapoli, American Sociological Review, 2015

- Using optimal matching, we measure the distance between ideal and experienced relationship sequences.
 - Low distance: congruent ideals and experiences
 - High distance: discrepant ideals and experiences

Frye and Trinitapoli,

American Sociological Review, 2015

- Congruence between ideals and experiences predicts relationship wellbeing in 4 ways:
 - Expressions of love and support
 - Communicating about important matters
 - Lower perceived likelihood of contracting HIV in future
 - Lower perceived likelihood of relationship dissolution.

Frye and Trinitapoli,

American Sociological Review, 2015

- congruence is predicted by:
 - Higher socioeconomic status
 - Shared ideals between husbands and wives

Research article

Awareness and perceived fairness of option B+ in Malawi: a population-level perspective

Sara Yeatman^{§1} and Jenny Trinitapoli²



- In 2011, Malawi introduced Option B +, which prioritized HIV+ pregnant women for ART regardless of their immune status.
- shift in policy
 - away from prioritizing the sickest
 - towards a universal test-and-treat approach.

- In 2015, TLT reinterviewed a sample of women from the original study and used a new card sort module to ask:
- Which groups do Malawians think are prioritized for access to ART?
- Who do Malawians think should be prioritized, under ideal conditions?

Card Sort 2: Administration of ART to HIV Positive Individuals



- Remember, all of these people have HIV.
- I'd like you to think about the situation in the Balaka clinics right now.
- tell me whether you think this person would:
 definitely get ARVs from the clinic now
 - maybe get ARVs from the clinic
 - probably not get ARVs.



- Next, put the the six cards in order, from the person you think is most likely to get ART from the clinics first to the person who you think will receive them last.
- Sometimes what actually happens in clinics isn't what we think should happen. If it were up to you, how do you think ARVs should be distributed? Imagine a world where there are still shortages but you are the one deciding how to distribute ARVs in the most fair way. Who do you think should be the first to receive them and who should be last?

Only 30.7% of women and 22.1% of men accurately assessed the policy.



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Conclusions

- This is a promising method to deepen our knowledge about:
 - Sequential processes
 - Ideals
- It requires extensive piloting and training of interviewers to successfully implement
- It is therefore best suited for longitudinal surveys like this one.

Thank you.

Please email me with any questions: mtfrye@umich.edu

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