Sexual Health and Reproductive Empowerment for Young Adults (SHREYA) Scale

Instructions: Each of the following statements may or may not apply to you. Please rate how true each statement is for you.

Note: You don't need to have ever had sex or currently have a sexual partner to answer this survey. If you are unsure about how to answer any items, please give your best guess.

	Not at all true	A little true	Moderately true	Very true	Extremely true
If I had a romantic partner, I would feel comfortable talking about whether or not I want to have children with them.					
If I had a sexual partner, I would feel comfortable telling that person if I wanted to use a method to protect against infection or pregnancy, even when they didn't want to.					
If I had a romantic partner, I would feel comfortable voicing disagreements with them.					
I can freely choose if I get married.					
I can freely choose who I marry.					
I have the power to control if and when I have children.					
I have a parent/guardian who would help me with my problems and troubles if I needed.					
I have a parent or guardian who accepts me as I am.					
I have a parent or guardian who trusts me to make the right decisions.					
I have a parent/guardian who helps me achieve my goals in life.					
I am able to do the things I want to do without worrying about my safety.					
Walking down the street, I feel like my body is my own.					

	Not at all true	A little true	Moderately true	Very true	Extremely true
I do not feel afraid that I will be forced to do something sexually when I don't want to.					
I feel safe in my current living situation.					
I like myself.					
I am worthy of love.					
I know my body well.					
My body belongs to me.					
I can imagine what my future will be like.					
I have an idea of how I can eventually reach my goals.					
My sexual needs or desires are important.					
I think it would be important to focus on my own pleasure as well as my partner's during sexual experiences.					
I expect to enjoy sex.					