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## Using the Provider Authoritarian Attitude Scale

Breakthrough RESEARCH

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# Using the Provider Authoritarian Attitude Scale

Healthcare providers' actions can significantly influence patients' experiences of care, their likelihood to adhere to provider recommendations, and alter patients' likelihood to re-engage with health services. The Breakthrough RESEARCH project, funded by the United States Agency for International Development, developed a set of measures to reflect authoritarian attitudes of providers. These measures were validated in three phases, including quantitative field testing and improvement of survey items using qualitative cognitive interviews. This process resulted in a reliable scale consisting of 14 items ( $\alpha = 0.8323$ )<sup>1</sup> reflecting authoritarian attitudes related to provider attitudes about clients, their professional roles, and gender roles, and can be applied across health areas.

This technical reference sheet provides information to monitoring, evaluation, and research practitioners on the resulting 14-item scale (in English and French on the next page) as well as instructions and resources for fielding and analyzing providers' authoritarian attitudes using these measures.

## Fielding and analyzing the Provider Authoritarian Attitude Scale

### Reverse coding in preparation for analysis

- To avoid bias that may occur from repeated questions asked in the same way, this scale comprises both positively and negatively framed questions. For this reason, in the analysis stage, the questions starred in the table on the next page should be reverse coded for analysis so that higher response option scores always correspond to more authoritarian attitudes.

### Analysis

- Cronbach's alpha can be used to report on the reliability of this 14-item scale in your sample population and context.
- Multi-item scales can be analyzed using mean scores or using summative scores.
- Mean score: To generate a mean score, create a variable that is the mean of the response items for each respondent. This results in a mean score with a potential range of 1–5. This score can be used in further analysis and

the interpretation easily maps onto the original Likert response options. In this case, you can analyze the mean outcome as a continuous variable using an ordinary least squares regression model or an ordered logistic regression model. A 1-unit increase in the outcome corresponds to a larger change in authoritarian attitudes for a mean score than when using a summative score. Some audiences may be less familiar with a scale mean score as compared to a summative score and this should be well explained in your methods section.

- Summative score: To create a summative score, create a variable that is the sum of the response items for each respondent. This results in a per-respondent scale score, with a potential range equal to the number of items multiplied by the number of response options (in this case, 14 items x 5 response options = a total potential score of 70). A 1-unit increase in the outcome, therefore, corresponds to a smaller change in authoritarian attitudes given the large range than when using a mean score. Analyzing this outcome as continuous assumes that a 1-unit equivalent is the same all along the range; if this seems implausible, the score can also be considered as an ordinal outcome and ordered logistic regression can be used.

## Recommendations for testing in new settings

When using this scale in a new setting, the survey items should first be reviewed for relevance to the local setting. It's recommended that you first pre-test these 14 items by conducting a few cognitive interviews to ensure that meaning is retained across setting well understood by respondents, particularly when translating to a different language. Cognitive interviewing involves administering the survey questions to the new target population and asking respondents to describe their thought process in coming to an answer. This enables the interviewer and researchers to identify areas of mismatch between respondent understanding and the intended meaning of questions and responses. Survey questions can then be adapted to fit the new context.

## More resources

A downloadable Stata do file is available [here](#).

A peer-reviewed manuscript about the use of this scale is currently under review. A link to the article will be added to this brief once the article has been accepted and published.

<sup>1</sup>Scale reliability is measured by Cronbach's alpha—measure of internal consistency, that is, how closely related a set of items are as a group.

## PROVIDER AUTHORITARIAN ATTITUDE SCALE ITEMS

	ENGLISH	FRENCH
1	Patients I care for are not capable of making good health decisions for themselves.	Mes patients dont je m'occupe ne sont pas assez capables pour prendre de bonnes décisions pour leur santé.
2	Patients I care for should appreciate my efforts when I care for them.	es patients doivent apprécier des efforts que je leur fournis quand je m'occupe d'eux.
3*	One should treat patients with respect even if they don't treat me with respect.	Il faut traiter les patients avec respect même s'ils ne me traitent pas avec respect.
4*	Patients must always respect providers, regardless of the quality of care they receive.	Les patients doivent toujours respecter les prestataires, quelle que soit la qualité des soins qu'ils prodiguent.
5*	My patients will put a lot of effort into improving their health if they are given the right information.	Mes patients fourniront beaucoup d'efforts pour améliorer leur santé si on leur donne les bonnes informations.
6	A provider's role is to diagnose patients and provide clinical care, not to teach patients how to improve their health and prevent disease.	Le rôle d'un prestataire est de diagnostiquer les patients et leur fournir des soins cliniques, et non pas d'apprendre aux patients comment améliorer leur santé et prévenir les maladies.
7*	I have the responsibility to ensure that patients have a say in their care.	J'ai la responsabilité de veiller à ce que les patients aient leur mot à dire sur les soins qu'ils reçoivent.
8*	It is important to listen to patients to ensure they understand their care.	Il est important d'écouter les patients pour s'assurer qu'ils comprennent les soins dont ils ont besoin.
9	My role as a provider is to resolve my patients' immediate medical problems, and nothing else.	Mon rôle en tant que prestataire est de résoudre les problèmes médicaux immédiats de mes patients seulement, sans m'occuper d'autre chose.
10*	When medications are given, it is important that I explain well to patients how they work and how it will benefit them.	Lorsque des médicaments sont administrés, il est important que j'explique bien aux patients comment ils agissent et en quoi cela va leur être bénéfique.
11	My job is to diagnose and treat patients, not to be a health educator for each patient.	Mon travail consiste à diagnostiquer et à traiter les patients, pas à être un éducateur de santé pour chaque patient.
12	A man should have the final say on decisions made in his home.	Un homme doit avoir le dernier mot sur les décisions prises chez lui.
13	A woman must obey her husband in everything.	Une femme doit obéir à son mari par rapport à tout.
14*	It is important for men to be present in their children's life, even if he isn't with their mother anymore.	Il est important qu'un père soit présent dans la vie de ses enfants, même s'il n'est plus avec la mère.

### Response options

The response options for these items are based on a 5-item Likert scale:

1 = Strongly disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly agree

\*Starred items should be reverse coded (more information on first page).

### Breakthrough RESEARCH

Breakthrough RESEARCH catalyzes social and behavior change by conducting state-of-the-art research and evaluation and promoting evidence-based solutions to improve health and development programs around the world. Breakthrough RESEARCH is a consortium led by the Population Council in partnership with Avenir Health, ideas42, Institute for Reproductive Health at Georgetown University, Population Reference Bureau, and Tulane University.

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