orientation than with the male orientation. Sixty-one percent of men registered equal levels of agreement with both statements.

Fifteen percent of men registered stronger agreement with the statement that it is a man’s responsibility to make decisions about contraception than with the statement that it is a woman’s responsibility to make these decisions. This is significantly higher than the 7% who indicated greater agreement with the statement that it is a woman’s responsibility, and is consistent with recent research examining the perceptions of male adolescents. Seventy-eight percent of respondents reported an egalitarian orientation on this measure.

Shown below are the weighted percentage distributions of responses to the two composite measures of men’s perceptions:

<table>
<thead>
<tr>
<th>Measure</th>
<th>Female oriented</th>
<th>Egalitarian oriented</th>
<th>Male oriented</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decisions about sex</td>
<td>22.7%</td>
<td>59.8%</td>
<td>17.5%</td>
</tr>
<tr>
<td>Contraception</td>
<td>6.5%</td>
<td>78.2%</td>
<td>15.2%</td>
</tr>
</tbody>
</table>

A very high proportion of men (87%) strongly agreed with the statement that men have the same responsibility as women for the children they father, a finding that is also consistent with prior research with adolescents. An additional 8% of men indicated that they somewhat agreed with the statement. In contrast, 5% of men disagreed with the statement or were neutral (not shown).

**Decisions About Sex**

Table 2 (page 224) presents the standardized probabilities derived from the multinomial logit analysis of the composite measure on decisions about sex. Men’s race, age and prior marital history had no significant impact on the relative scoring of the male and female orientations. Hispanic origin, in contrast, had a large impact. Specifically, Hispanic men were substantially more likely than non-Hispanic men to have a male-dominant scoring pattern (.20 vs..10). They were also less likely than other men to endorse a female-dominant scoring pattern (probabilities of .20 and .36, respectively).

Cohabiting males were more likely than either married men or single men with a regular partner to have a female-dominant scoring pattern (.43 vs .36 and .35 respectively) and were less than one-half as likely to exhibit a male-dominant scoring pattern. Education was negatively related to the likelihood of scoring the two orientations equally (.61 for men with eight years of education compared with .48 for men with 16 years of education) and was positively related to the likelihood of scoring the male orientation higher: The probability that men with 16 years of education indicated greater agreement with the male orientation was twice that of the probability among those with only eight years of education (.14 vs .06). Nonetheless, for all levels of education, men with nonegalitarian perceptions were more likely to endorse a female than a male orientation.

Among religious subgroups, Conservative Protestants had the highest probability of scoring both orientations equally (.66) and the lowest probability of having a female-dominant scoring pattern (.24). For other Protestants, this pattern was reversed: These men had a probability of .55 of scoring both orientations equally, compared to a probability of .36 of having a female-dominant response pattern. Catholics were the least likely to have a male-dominant scoring pattern (.08), and those men whose religion was categorized as “other or none” were the most likely to have this pattern (.12).

Whether a man’s partner was Hispanic had no significant impact on his scoring patterns. However, partner’s previous marriage did influence the pattern of scores. Men with a previously married partner were less likely than men with a never-married partner to score both orientations equally (.49 compared with .55) and were more likely to have a female-dominant scoring pattern (.43 compared with .36). Men with highly educated partners were more likely than those with less educated partners to score the measures equally and less likely to exhibit a male-dominant scoring pattern. The effects of partner’s religion were not statistically significant.

**Decisions About Contraception**

Table 2 also presents results of the analysis of the composite contraceptive responsibility measure. Black men were significantly more likely than white men to have a female-dominant scoring pattern (.16 vs .06) and were less likely than white men to have a male-dominant scoring pattern (.11 vs .19). Hispanic origin, in contrast, was associated with an elevated probability of egalitarian scoring and a reduced likelihood of either a male-dominant or female-dominant scoring pattern.

Older age was associated with a less egalitarian scoring pattern: The probability of scoring the two measures equally was .80 at age 20 compared with .67 at age 40. This was due primarily to an increase in the likelihood of female-dominant scoring among older men. A prior marriage was associated with an increased likelihood of having an egalitarian scoring pattern and with a decreased likelihood of a male-dominant scoring pattern. Currently married and cohabiting men were more than twice as likely as unmarried, noncohabiting men to have a female-dominant