

ORIGINAL RESEARCH

Genital Image, Sexual Anxiety, and Erectile Dysfunction Among Young Male Military Personnel

Sherrie L. Wilcox, PhD, CHES,* Sarah Redmond, BA,† and Teaniese L. Davis, PhD‡

*Center for Innovation and Research on Veterans & Military Families (CIR), School of Social Work, University of Southern California, Los Angeles, CA, USA; †Department of Psychology, University of California Irvine, Irvine, CA, USA;

‡Department of Psychology, Morehouse College, Atlanta, GA, USA

DOI: 10.1111/jsm.12880

ABSTRACT

Introduction. More than a third of young military personnel report experiencing some level of erectile dysfunction (ED). Preoccupation with body image, particularly genitals, is a distraction that can influence sexual anxiety (SA) and sexual functioning problems (SFPs), particularly ED.

Aims. This study assessed the relationships between male genital self-image (MGSI), SA, and ED in a sample of male military personnel age 40 or younger.

Methods. Data were from a larger study on SFPs in military populations. This sample consisted of 367 male military personnel age 40 or younger. Hierarchical regression analyses and process modeling using mediation analysis were performed to examine the effects of MGSI on ED with SA as an intermediate variable. We predicted that SA would mediate the relationship between MGSI and ED.

Main Outcome Measures. ED severity was assessed with the International Index of Erectile Function. MGSI was assessed using the MGSI Scale. SA was assessed with the SA subscale of the Sexual Needs Scale.

Results. As hypothesized, greater satisfaction with MGSI was predictive of significantly lower SA ($F[8, 352] = 4.07$, $P = 0.001$) and lower ED ($F[8, 352] = 13.20$, $P = 0.001$). Lower levels of SA were predictive of lower levels of ED ($F[8, 354] = 21.35$, $P < 0.001$). Additionally, results also revealed a significant indirect effect of MGSI on ED through SA ($b = -0.07$, standard error = 0.03, confidence interval = $[-0.14, -0.02]$, $P < 0.05$), indicating mediation of MGSI on ED via SA.

Conclusions. This study underscores the complex etiologic basis of SFPs, particularly ED, and highlights the importance of considering psychologic contributors to ED, such as SA and MGSI. Strategies aimed at reducing SA may be useful in improving ED in young military populations and are worth considering as complements to strategies that improve SFPs. **Wilcox SL, Redmond S, and Davis TL. Genital image, sexual anxiety, and erectile dysfunction among young male military personnel. J Sex Med 2015;12:1389–1397.**

Key Words. Erectile Dysfunction; Genital Self-Image; Military Personnel; Sexual Anxiety; Sexual Dysfunction

Introduction

Recent research has indicated that sexual functioning problems (SFPs), including problems with sexual desire, sexual arousal, penile erection, ability to reach orgasm, and satisfaction with orgasm, are common in military populations [1,2]. Erectile dysfunction (ED) in particular is typically presented in older men, but has been increasing in

prevalence in young (i.e., age 40 or younger) military populations. More than a third of young military personnel have reported ED symptoms [2]. Rates of ED are as high as 15.7% in individuals without posttraumatic stress disorder (PTSD) and more than 80% in male veterans with PTSD [3,4]. Since 2004, the rate of ED in military populations has been increasing and has nearly doubled from 2004 to 2013 [1].

ED is a complex problem that can have both physical and psychologic etiologies. Although the physical factors that lead to ED have promising treatments [5], the psychologic factors associated with ED are multifaceted and require more research. Military populations are particularly vulnerable to ED and other SFPs because of various potential risk factors, including exposure to trauma, immersion in a masculine culture, and high daily performance demands [6–11]. The military is also a competitive, male-dominated environment that emphasizes physical fitness and appearance. These factors have the potential to affect body and genital image perceptions and satisfaction.

Perceptions of the Self, Sexual Anxiety (SA), and SFPs

Recent research has suggested that negative body image perceptions and SA can increase the risk of various SFPs [12–15]. Body image is a multifaceted phenomenon that involves self-evaluation of one's body and the relative importance of one's appearance [16,17]. In recent years, the importance of physical appearance has become more comparable for both genders [18]. Although the majority of research on body image has focused on women, recent research has documented that men are also vulnerable to experiencing dissatisfaction with their body and physical appearance [19–22].

Men and women focus on their unique gender-relevant physical characteristics that affect overall body image satisfaction [17,23]. For men, evaluation of body image often incorporates various parts of the body, including genitals, which is a focus area for self-consciousness [23]. In fact, many men place great importance on their genitals as part of their overall body image satisfaction [12,13]. Although research has indicated that the majority of men report dissatisfaction with their penis size [13], genital image satisfaction goes beyond penis size and few studies have taken into account other aspects of genital self-image [12]. Specifically, genital self-image should also incorporate appearance of genitals, genital functioning, and comfort level when genitals are seen by health-care providers and sexual partners [24].

Perceptions of body image and genital self-image can negatively affect the ability to be physically intimate. Perceptions of the genitals are closely connected to comfort with body image and are related to SFPs [15,17,22]. For example, Cash and colleagues [23] found that more anxious or avoidant body image is associated with less positive sexual functioning. Early research has indicated

that individuals with a more positive perception of their genitals, particularly penis size, are more likely to report experiencing more sexual activity enjoyment and more favorable sexual functioning [25]. Similar research with college students found that participants with positive genital self-image and positive perceptions of their partners' genitals engaged in more frequent and enjoyable sexual activities [26]. Moreover, recent research has focused on the impact of overall body image on sexual functioning and found that body image satisfaction can influence quality of sexual life [15,17,22]. However, it is still important to specifically consider the relationship between genital self-image and sexual quality of life.

Genital self-image is associated with SA. Specifically, individuals with low genital self-image experience greater SA and subsequently greater sexual dysfunction [27]. Not surprisingly, general body satisfaction is negatively associated with anxiety about exposing parts of the body during sexual activity [27]. Early research has suggested the importance of SA as a predisposing factor for sexual dysfunction in men [28].

Overall, research has suggested important effects of genital self-image and SA on sexual functioning. Despite the prevalence of SFPs in military populations, most of the research in this area has focused on college populations. This is the first known study to assess genital self-image, SA, and ED in a young military population. This study focused on the psychologic factors that predict ED in military personnel, specifically genital image and SA. This study focused on young military personnel because of this group's high rate of reported SFPs and exposure to risk factors [2].

Aims

The primary aim of this study was to examine the relationship of SA with male genital self-image (MGSI) and ED in a sample of military personnel and to explore the potential mediating effect of SA. To this end, we specifically tested the following hypotheses:

Hypothesis 1. Greater satisfaction with MGSI will be predictive of lower levels of (i) SA and (ii) ED.

Hypothesis 2. Lower levels of SA will be predictive of lower levels of ED.

Hypothesis 3. SA will mediate the effect of MGSI on ED.

Download English Version:

<https://daneshyari.com/en/article/4269635>

Download Persian Version:

<https://daneshyari.com/article/4269635>

[Daneshyari.com](https://daneshyari.com)