

## Correlates of Female Sexual Functioning: Adult Attachment and Differentiation of Self

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DOI: 10.1111/jsm.12561

### ABSTRACT

**Introduction.** Female sexual functioning is affected by a range of factors including motivation, psychological well-being, and relationship issues. In understanding female sexual dysfunction (FSD), there has been a tendency to privilege diagnostic and medical over relationship issues.

**Aim.** To investigate the association between women's experience of intimacy in close relationships—operationalized in terms of attachment and degree of differentiation of self—and FSD.

**Methods.** Two hundred thirty sexually active Australian women responded to an invitation to complete a set of validated scales to assess potential correlates of sexual functioning.

**Main Outcome Measures.** The Female Sexuality Function Index, the Experiences in Close Relationships Scale, the Differentiation of Self Inventory, as well as a set of study-specific questions were subject to hierarchical multiple regression analyses.

**Results.** Relational variables of attachment avoidance and to a lesser degree, attachment anxiety were associated with FSD. Participants with lower levels of differentiation of self were more likely to report sexual difficulties. The inability to maintain a sense of self in the presence of intimate others was the strongest predictors of sexual problems. A history of sexual abuse in adulthood and higher levels of psychological distress were also associated with sexual difficulties.

**Conclusions.** The findings provide support for a relational understanding of female sexual functioning. Attachment avoidance, attachment anxiety, and degree of differentiation of self are shown to be associated with sexual difficulties. The findings support the need to focus on relational and psychological factors in women's experience of sex. **Burri A, Schweitzer R, and O'Brien J. Correlates of female sexual functioning: Adult attachment and differentiation of self. J Sex Med 2014;11:2188–2195.**

**Key Words.** Female Sexual Function; Attachment; Differentiation of Self; Sexual Dysfunction; Sexual Abuse

### Introduction

The most common female sexual dysfunctions (FSD) described in the literature primarily relate to desire, arousal, orgasm, and sexual pain [1]. Cross-national epidemiological studies indicate that the prevalence rates of FSD vary somewhere between 8% and 78%, depending upon the ways in which the phenomenon is explored and sample composition [2–6]. While this variation in prevalence rates may reflect existing differences between

populations, the discrepancies are also thought to be due to methodological issues within the research [7]. Current research suggests that the etiology of FSD is multifactorial. Interpersonal factors such as relationship dissatisfaction [8], poor sexual communication [9] as well as psychological factors such as depression, anxiety and stress [2,10] and medical factors such as physical illness [2,11,12] have been implicated in the etiology of sexual problems.

Attachment and differentiation of self are two concepts that are postulated to dictate how women

manage intimacy in significant relationships. Bowlby's theory of attachment suggests that the intimate bonds that a child forms with their caregivers become the blueprint for future relationships [13]. Differentiation of self refers to one's ability to be close to others while maintaining a sense of self in close relationships [14]. Although both theories are rooted in the early stages of life, they are highly relevant to intimate relationships in later life [9] and have impact on various aspects of an individual and her/his functioning in later life. In spite of the relevance of these concepts in the establishment of satisfying bonds, there is a general paucity of studies investigating the association between women's sexual functioning and attachment anxiety and avoidance, and to the best of our knowledge, no research has investigated the association between differentiation of self and sexual functioning.

### Aims

The current study endeavored to improve the clinical conceptualization of FSD by gaining a better understanding of the association between relational factors and women's experience of sexual difficulties. More specifically, the study examined the relationship between women's attachment anxiety, attachment avoidance, and degree of differentiation of self (as an operationalization of intimacy) and their experience of sexual difficulties.

### Method

#### *Sample and Recruitment*

The sample consisted of a community convenience sample of women who self-identified as being over 18 years and had been sexually active at least once in their lives. Recruitment took place via e-mail advertisement addressed to students in undergraduate and graduate programs in psychology and on social Internet platforms such as Facebook. Additionally, a snowball effect was utilized as associates of the researcher were approached to participate in the study and forward the e-mail to other potential participants who were then asked to forward the e-mail utilizing a snowballing-type methodology.

The invitation then specified a link for completing the survey online.

The cross-sectional online survey was conducted from May to November 2012. On the initial welcome page, respondents were notified

that their consent to participate would be inferred by their decision to click the "Next" button, which started the questionnaire. No identifying information was obtained.

Of the initial 300 women who began the questionnaire, only 231 completed it, resulting in a dropout rate of 23%. One person did not meet the inclusion criteria of minimum age, resulting in a final sample of 230 women. The study was approved by the University Human Research Ethics Committee (Approval Number 1100001497) and all participants provided informed consent.

### Measures

For the assessment of sexual functioning, attachment, differentiation of self, and the covariates (i.e., history of abuse and personal distress) a set of standardized and validated questionnaires were used. Demographic and background information such as age, level of education, sexual orientation, current relationship status, relationship duration, and number of children was collected using study-specific self-constructed questions.

#### *Female Sexual Functioning*

The Female Sexual Function Index (FSFI) is a multidimensional self-report instrument for the assessment of female sexual function during the past 4 weeks [15]. The 19 questionnaire items address desire, arousal, lubrication, orgasm, pain, and sexual satisfaction. The questionnaire can be administered to women across a wide age range, including peri- and postmenopausal women. Responses to all other items were recorded on a six-point Likert-type rating scale, which included an option to indicate that no sexual activity was attempted. The measure yields six domain scores and a total score that is composite of all domains. Thus, the total FSFI score is indicative of overall sexual functioning. Details on response options, domain score computation and domain factor weights can be found in Rosen et al. [15]. The initial and following FSFI validation studies showed a high degree of internal consistency (Cronbach's  $\alpha$  values of 0.82 and higher), and excellent psychometric properties, including good reliability, high test-retest reliability for each domain ( $r = 0.79$ – $0.86$ ) and good construct validity [15].

#### *Adult Attachment*

The short form of the Experiences in Close Relationships Scale is a 12-item self-report measure of

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