

## ORIGINAL RESEARCH—PSYCHOLOGY

## Affective and Cognitive Determinants of Women's Sexual Response to Erotica

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### ABSTRACT

**Introduction.** The specific cognitive–affective mechanisms involved in the activation and regulation of the subjective and genital components of sexual arousal are not fully understood yet.

**Aim.** The aim of the present study was to investigate the contribution of self-reported thoughts and affect to the prediction of women's subjective and genital responses to erotica.

**Methods.** Twenty-eight sexually functional women (mean age = 32, SD = 6.29) were presented with sexually explicit and nonexplicit romantic films. Genital responses, subjective sexual arousal, state affect, and self-reported thoughts were assessed.

**Main Outcome Measures.** Vaginal pulse amplitude was measured using a vaginal photoplethysmograph. Subjective sexual arousal, thoughts, and affective responses were assessed through self-report scales.

**Results.** Correlations between subjective and physiological sexual arousal were low ( $r = -0.05$ ,  $P > 0.05$ ). Self-reported thoughts and affect were significant predictors of subjective sexual arousal. The strongest single predictor of subjective arousal was sexual arousal thoughts (e.g., “I'm getting excited”) ( $\beta = 0.63$ ,  $P < 0.01$ ). None of the cognitive or affective variables predicted women's genital responses.

**Conclusions.** Overall, results support the role of cognitive (self-reported thoughts) and affective dimensions in women's subjective sexual arousal to erotica and, consistent with previous findings, suggest that subjective and physiological sexual arousal may be impacted by different processes. **Vilarinho S, Laja P, Carvalho J, Quinta-Gomes AL, Oliveira C, Janssen E, and Nobre PJ. Affective and cognitive determinants of women's sexual response to erotica. J Sex Med 2014;11:2671–2678.**

**Key Words.** Sexual Arousal; Genital Response; Self-Reported Thoughts; Affect; Psychophysiology, Vaginal Photoplethysmography

### Introduction

Although a growing body of literature emphasizes the importance of affect and cognitions in sexual response [1–8], the specific cognitive–affective mechanisms involved in the activation and regulation of the subjective (self-report) and genital (physiological) components of sexual arousal are still not fully understood [7,8]. Barlow's model of sexual functioning [9] is one of the

most comprehensive attempts to integrate the impact of cognitive–affective factors on the sexual responses of both sexually functional and dysfunctional individuals. According to this model, sexually healthy individuals tend to respond with positive affect and focus on sexual cues, whereas individuals with sexual problems tend to focus their attention to nonrelevant nonsexual stimuli and are more likely to experience negative affect during sexual activity. Although this model was

initially developed for men, various aspects of the model have also been tested in and found relevant to sexual response patterns in women [10–12].

Some researchers have used questionnaire (instead of psychophysiological) methods to study aspects of Barlow's model [13–16]. For example, Nobre and Pinto-Gouveia [2–4,6,17], using a self-report measure of automatic thoughts, found that individuals with sexual dysfunction presented more negative thoughts and emotions during sexual activity when compared with sexually healthy individuals. Other studies, using student samples, have examined the content of self-reported thoughts that may interfere with sexual enjoyment and functioning [15,18]. This research has led to the identification of four categories of distracting thoughts: thoughts related to one's sexual performance, to one's body image, to possible emotional consequences of the sexual activity, and to other consequences of the sexual activity (e.g., pregnancy). Furthermore, these studies revealed that regardless of thought category, the frequency of nonerotic thoughts and the anxiety they evoked were positively associated with sexual problems.

More recently, in a community sample of men and women in long-term relationships [19], women, as compared with men, were more likely to report body image concerns and thoughts about the physical consequences of the sexual activity. Again, higher frequencies of such nonerotic thoughts were found to be associated with stronger sexual problems. Moreover, greater negative affect in anticipation and during sexual activity was associated with a higher frequency of nonerotic thoughts, and higher levels of anxiety in response to non-erotic thoughts were associated with greater difficulty in dismissing the thoughts.

Taken together, this body of research suggests that a range of negative and nonerotic thoughts can interfere with sexual response. In contrast, much less is known about the role of positive thoughts in men and women's sexual experiences. Furthermore, although the effects of attention [20,21], distraction [22], and body awareness [23] on sexual response have been studied using experimental and psychophysiological methods, experimental research on the impact of thoughts or specific thought content on sexual response is lacking.

Regarding emotions and mood states, findings have been mixed. Some studies have found a negative association between depressed affect and sexual arousal [13,24–27]. Other studies, however,

have found that negative affect can be positively associated with genital response [8,28]. The literature is equally mixed on the role of positive emotions in sexual response. Some studies [25,29] found that positive affective states are associated with higher levels of subjective sexual arousal. Others [30] have found that the induction of positive affect did not influence women's subjective or genital sexual responses. Additionally, in a cross-sectional study [13] it was found that low positive affect was a strong predictor of sexual response. Wiegel et al. [31], in an expansion of Barlow's model [9] proposed that positive and negative affect may have independent roles. Consistent with this, Peterson and Janssen [8] found that although positive affect was strongly and positively related to subjective sexual response, ambivalent affect (involving a combination of positive and negative affect) was also associated with higher levels of subjective sexual arousal and desire.

The interpretation of the findings of research on the effects of mood and emotions on sexual response is complicated by the fact that many studies have reported different findings for genital responses and subjective sexual arousal. Sex researchers have yet to arrive at a consensus on how to best define sexual arousal and how to weigh its subjective vs. physiological response components [32,33]. Low levels of concordance between subjective and objective measures of sexual arousal are common in women and even more so in women with sexual dysfunction [12]. Despite the lack of significant differences in physiological sexual arousal responses to erotic materials between women with and without sexual dysfunction, Morokoff and Heiman [34] found that those with sexual dysfunction rated their subjective sexual arousal as significantly lower. Moreover, according to the cognitive models of sexual response, the low concordance between subjective sexual arousal and genital responses may be expected to be associated with the experience of negative affect while watching conventional, commercially available erotica (typically used in psychophysiological studies) [35,36].

In sum, the literature reveals that cognitive and emotional determinants play an important role in sexual experiences. Most of the current studies in this area, however, have been conducted using clinical samples or with sexual problems in mind. Moreover, although attention has been devoted to cognitive processes and emotional responses in and out of laboratory settings, few experimental data exist regarding men and women's thoughts in

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