

BEHAVIOR

## Unprotected Intercourse and One-Night Stands: Impact of Sexual Excitation, Sexual Inhibition, and Atypical Sexual Arousal Patterns on Risky Sexual Behaviors in Women



Julia Velten, DiplPsych,<sup>1</sup> Saskia Scholten, DiplPsych,<sup>1</sup> Cynthia A. Graham, PhD,<sup>2</sup> and Jürgen Margraf, PhD<sup>1</sup>

### ABSTRACT

**Introduction:** Associations among sexual excitation, sexual inhibition, atypical sexual arousal patterns, and risky sexual behaviors have been reported in studies involving men and women. To date, longitudinal studies have not evaluated the predictive value of these propensities for future sexual behaviors in women.

**Aim:** To investigate associations among sexual excitation, sexual inhibition, atypical sexual arousal patterns, and potentially risky sexual behaviors in women.

**Methods:** Overall, 2,214 women (mean age = 30.65 years, standard deviation = 9.91 years) participated in a baseline Web-based survey. The 1- and 2-year follow-up surveys included 396 and 382 participants, respectively. Correlational analyses and multiple linear regression analyses were conducted to analyze the relations between predictor and outcome variables.

**Main Outcome Measures:** Number of partners, number of one-time sexual encounters, and number of partners with whom no condoms were used during the 12-month periods before each of the three data assessment points.

**Results:** All five lower-order factors of sexual excitation showed positive correlations and all three lower-order factors of sexual inhibition showed negative correlations with outcomes at baseline and follow-up. Atypical sexual arousal patterns, the tendency to become aroused in unusual sexual situations, and the importance of relationship factors, such as trust, for sexual arousal were the strongest predictors for sexual behaviors at baseline. These variables also predicted the number of sexual partners and the number of one-night stands at follow-up.

**Conclusion:** The findings suggest that increased sexual arousal when experiencing negative mood might be a risk factor for potentially health-threatening sexual decisions and support the assumptions of the dual control model that sexual excitation is positively and sexual inhibition is negatively predictive of risky sexual behavior in women.

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**Key Words:** Sexual Excitation; Sexual Inhibition; Dual Control Model; Sexual Risk; Longitudinal

### INTRODUCTION

Engaging in sexual activities can be risky. Depending on the “where, when, and with whom” of sexual encounters, negative consequences include distressing emotions, such as shame or regret, unintended pregnancy, and sexually transmitted infections.<sup>1,2</sup> Psychological consequences of unprotected intercourse, casual

sex, or sex with multiple sexual partners are diverse. On the one hand, some women who have engaged in sex outside committed relationships do report greater levels of depressive symptoms, lower levels of psychological well-being, and feelings of regret<sup>3–5</sup>; on the other hand, most women also report that they felt quite happy and content with their most recent casual sex encounter.<sup>6</sup>

The dual control model of sexual response (DCM)<sup>7</sup> is a theoretical framework that could help explain why some individuals choose to engage in risky sexual behavior. According to this model, two relatively independent factors—sexual excitation (SE) and sexual inhibition (SI)—influence the occurrence of sexual arousal in a given situation. High levels of SE, especially when coupled with low SI, have been linked to risky sexual

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<sup>1</sup>Mental Health Research and Treatment Center, Ruhr-Universität Bochum, Bochum, Germany;

<sup>2</sup>Department of Psychology, University of Southampton, Southampton, UK  
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behaviors or decisions.<sup>8</sup> The first instrument developed to assess these factors in men was the Sexual Inhibition and Sexual Excitation Scales (SIS/SES).<sup>9,10</sup> The SIS/SES was adapted for use in women,<sup>11</sup> but it was unclear whether the instrument included all aspects of SE and SI that are relevant for women. Thus, the Sexual Excitation and Sexual Inhibition Inventory for Women (SESII-W)<sup>12</sup> was developed, informed by focus group data from women of diverse backgrounds and ages.<sup>13</sup>

Studies on the relation among SE, SI, and risky sexual behaviors were first conducted with men. When using the SIS/SES in a sample of 589 men who had sex with men, high inhibition of sexual response from the threat of negative consequences (SIS2) was associated with less frequent unprotected anal and oral sex, whereas a high propensity for SE was associated with more casual sex partners.<sup>14</sup> In a sample of 879 heterosexual men, SIS2 was negatively predictive of the number of sexual partners with whom no condoms were used and the number of lifetime one-night stands. SIS2 and SE were positively associated with the intention of having safer sex in future sexual encounters.<sup>15</sup> In a study of 310 students, sexual risk taking was assessed with the Sexual Risk Survey,<sup>16,17</sup> SE and SI in men and women were measured with the SIS/SES and SESII-W, respectively, and personality was measured with the NEO-Five-Factor Inventory.<sup>18</sup> For women, but not for men, higher SE and lower SI were associated with greater sexual risk taking. In men, but not in women, more general personality traits, such as higher extraversion or lower agreeableness, were associated with more frequent risk behaviors. When using the SESII-W in a sample of 701 young African-American women, higher levels of arousability, an SE factor, were associated with a larger number of sex partners, inconsistent condom use, and sex under the influence of drugs or alcohol.<sup>19</sup> A version of the SESII that was modified for use in men and women, the SESII-W/M,<sup>20</sup> was used in a sample of 1,301 heterosexual married adults. For men and women, higher arousability (SE factor) and lower relationship importance (SI factor) scores were associated with greater sexual compulsivity. For men, but not for women, inhibitory cognitions (SI factor) were associated with greater sexual compulsivity.<sup>21</sup>

Relations between mood and sexual interest have been studied in samples of homosexual and heterosexual men and of heterosexual women. Although most individuals report decreased interest in sexual activities when anxious or depressed, some show an “atypical” arousal pattern, with increased interest in sex when depressed or anxious.<sup>14,22</sup> Women with atypical sexual arousal patterns have reported greater levels of desire for sexual activities and a greater frequency of searching for sexual partners in bars.<sup>23</sup> Women who reported increased sexual arousal related to negative and to positive mood states, such as cheerfulness, also were more likely to regret their sexual choices afterward.<sup>23</sup>

## AIMS

The aim of the present study was to investigate the associations among SE, SI, atypical arousal patterns, and potentially

risky sexual behaviors in women using cross-sectional and longitudinal datasets. We also wanted to examine the assumptions of the DCM and test whether high SE and low SI are indeed predictive of riskier sexual behaviors. Our first hypothesis was that high levels of SE, low levels of SI, and increased arousal when depressed or when anxious or stressed would be associated with more sexual partners, more frequent one-night stands, and more sexual partners with whom no condoms were used at baseline. A second hypothesis was that SE, SI, and atypical arousal patterns also would predict future sexual behaviors assessed in two follow-up surveys that were conducted 1 and 2 years after the baseline assessment. In addition, we expected that past sexual behavior would be predictive of future sexual behavior (ie, there would be a relatively high temporal stability of sexual behaviors during the assessed period).

## METHODS

### Participants

All German-speaking women older than 18 years were eligible. Table 1 presents a summary of the sample characteristics.

To increase sample diversity, participants were recruited through multiple channels (eg, online discussion boards, university homepage, and flyers). In total, 2,214 women with an average age of 31 years (mean = 30.65 years, standard deviation [SD] = 9.91 years) were included in the data analyses. Most women reported being in a steady relationship (64.2%) and having no children (80.5%). Most were attending college (34.8%) or were employed full time (34.0%). Heterosexual orientation was reported by 71.6%, homosexual orientation by 13.4%, and bisexual orientation by 12.6% of women.

The survey was not initially designed as a longitudinal study and the participants received no incentives for providing their contact information. Nevertheless, 886 women in the baseline sample left their e-mail addresses and gave their consent to be recontacted. By October 2014, 396 women (44.7%) had completed the first follow-up, and by September 2015, 382 women (43.1%) had completed the second follow-up survey.

We assessed whether the three groups of women (women who participated only at baseline, those who completed baseline and one follow-up, and those who participated at baseline and two follow-ups) differed on any of the sociodemographic variables. All subsamples were comparable for age, partnership status, relationship duration, number of children, and current occupation. Group differences were found for sexual orientation ( $\chi^2_{4, 2,161} = 10.60, P = .031$ ) and education level ( $F_{2, 1,963} = 8.96, P < .001$ ). Post hoc t-tests showed that baseline-only participants had lower education levels compared with women who completed baseline and one follow-up ( $t_{1,687} = -2.00, P = .046$ ) and those who completed all three time points ( $t_{1,742} = -3.95, P < .001$ ). The relative proportion of heterosexual and bisexual participants did not differ across the three samples. However, the proportion of homosexual women

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