

**The Associations Among Adult Attachment, Relationship Functioning, and
Sexual Functioning**

by

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Submitted in partial fulfilment of the requirements for the degree of

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Abstract

Romantic relationships are a central component in the lives of most individuals. It is therefore important to better understand the dimensions of relationship quality, and the different factors associated with a positive partnership. Adult attachment has been associated with various aspects of romantic relationships including relationship satisfaction, intimacy, communication, commitment, and conflict. Similarly, research suggests that adult attachment is associated with sexual dysfunction, sexual satisfaction, sexual frequency, sex guilt, and sex anxiety. However, the empirical research has been limited by inadequate gender comparisons, non-representative samples, and conceptualizing the variables in unidimensional ways. The current investigation was conducted to address these shortcomings, and extend our insight into the various ways that men and women experience their romantic relationships. Therefore, the study aimed to examine the associations among adult attachment and multiple aspects of relationship functioning and sexual functioning for a range of partnerships (i.e., married, de facto, dating, heterosexual, homosexual, and bisexual partnerships). This aim was achieved through analysing online self-report measures of attachment (anxious and avoidant), relationship functioning (relationship satisfaction, intimacy, communication, commitment, and conflict), and sexual functioning (sexual dysfunction, sexual satisfaction, sexual frequency, sex guilt, and sex anxiety) in a sample of 511 individuals (123 males and 388 females). However, there were not sufficient numbers of participants to separate this into the different types of partnerships. Participants were aged between 19 and 77 ($M = 26.86$ years, $SD = 9.58$ years). It was predicted that greater attachment anxiety and avoidance would be negatively associated with relationship satisfaction, intimacy, communication, and commitment, and positively associated with relationship conflict for all types

of partnerships, with no expected gender differences. Moreover, it was predicted that greater attachment anxiety and avoidance would be positively related to sexual dysfunction, sex guilt and sex anxiety, and negatively related to sexual satisfaction and sexual frequency for all types of partnerships, with no expected gender differences. The results indicated that both hypotheses were partially supported. Specifically, a series of hierarchical multiple regressions indicated that anxiously attached men experienced higher levels of commitment to their partner, although they remained dissatisfied with their relationship, and experienced higher levels of sexual dysfunction and sex anxiety. Moreover, anxiously attached women experienced higher levels of commitment and sexual desire to their partner, although they remained dissatisfied with both their relationship and with sex, and experienced higher levels of sex anxiety. In contrast, avoidant men had lower levels of intimacy in their relationships. Additionally, avoidant women were dissatisfied with both their relationship and with sex, had lower levels of intimacy, commitment, and orgasm, and higher levels of sex anxiety. The implications of these findings for understanding the nature of romantic bonds in adulthood are discussed. The limitations of the current thesis and recommendations for future research are also considered.

Keywords: adult attachment, relationship functioning, sexual functioning

CHAPTER 1

Introduction and Overview of Thesis

Introductory Overview

Romantic relationships play an important role in the lives of most individuals and have significant implications for psychological health and well-being (Halford, 2011; Watson, Hubbard, & Wiese, 2000). Individuals who are satisfied with their romantic relationships tend to experience increased life satisfaction and general happiness (Hazan & Shaver, 1994). Conversely, relationship dissolution and dissatisfaction can elevate the risk for psychological and physical health problems in both partners (Prigerson, Maciejewski, & Rosenheck, 1999). It is therefore important to better understand the dimensions of relationship quality, and the different factors associated with a positive relationship.

Since the seminal work by Bowlby (1969), attachment theory has become one of the prominent theoretical frameworks to explain romantic bonds in adulthood (Rholes & Simpson, 2004). Attachment theory postulates that the nature and quality of an individual's romantic relationships are influenced by affective events that occurred between an infant and his or her primary caregiver in childhood (Hazan & Shaver, 1994). Specifically, adult patterns of attachment have been shown to be consistently associated with various aspects of romantic relationships including relationship satisfaction, intimacy, communication, commitment, and conflict (Mikulincer & Shaver, 2007a). However, while much is known about these constructs, the research is largely oriented towards married populations or

university samples (Vangelisti & Perlman, 2006). Therefore, these relationship outcomes are unclear in non-traditional romantic partnerships and with individuals of various ages. Moreover, past research has predominately examined adult attachment within the context of singular relationship domains (e.g., satisfaction) (Kane et al., 2007; Mikulincer & Shaver, 2007a). As a result, there is less information about the interrelationships between attachment and a broader range of relationship variables.

There is also a paucity of research exploring the associations between attachment and sexual functioning. The limited literature suggests that attachment orientations are differentially associated with sexual dysfunctions, sexual satisfaction, sexual frequency, sex guilt, and sex anxiety (Birnbaum, 2007; Mikulincer & Shaver, 2007a).

Although attachment theory provides an important framework to understand the dynamic nature of romantic relationships (Hazan & Shaver, 1994), the interrelationships among adult attachment, relationship functioning, and sexual functioning are not well understood. Indeed, the empirical research has been limited by inadequate gender comparisons (Butzer & Campbell, 2008), non-representative samples (Birnbaum, 2007), and conceptualizing the variables in unidimensional ways (Birnbaum, Reis, Mikulincer, Gillath, & Orpaz, 2006). Therefore, the relationships among these three interconnected components of human experience have yet to be comprehensively investigated.

Prior research is further limited by not examining the broad dimensions of romantic relationships within a comprehensive theoretical framework (Haning et al., 2007; Litzinger & Gordon, 2005). It is necessary to have an understanding of

the multifaceted way adult attachment is linked to different emotions and behaviours in romantic relationships, and how it is related to the expression of sexuality in different partnerships. This research will extend the current literature and provide important insights into the different experience of romantic bonds in adulthood. Therefore, this thesis aims to examine the associations among adult attachment and multiple aspects of relationship functioning and sexual functioning for a range of partnerships (i.e., married, de facto, dating, heterosexual, homosexual, and bisexual partnerships).

Overview of Thesis Chapters

This thesis is divided into 11 chapters. Chapters 2 to 4 explore the theoretical and empirical literature on adult attachment, relationship functioning, and sexual functioning in adulthood. Chapters 5 to 7 examine the interrelationships between adult attachment, relationship functioning, and sexual functioning. Chapter 8 introduces the current research, and provides an overview of the main aim and hypotheses. Chapters 9 and 10 present the methodology and empirical results of the current study. Finally, Chapter 11 presents a discussion of the results in the context of past empirical research. A summary of each of these chapters is presented below.

In Chapter 2, the theoretical and empirical literature on attachment theory is evaluated. It examines how different patterns of attachment developed in infancy persist into adulthood influencing thoughts, feelings, and behaviours in close relationships (Hazan & Shaver, 1994). The chapter concludes with a rationale for attachment theory providing an important framework to better understand the dynamic nature of romantic relationships.

Chapter 3 discusses relationship functioning and justifies the selection of five fundamental variables to examine the experience of romantic partnerships. Each dimension (i.e., relationship satisfaction, intimacy, communication, commitment, and conflict) is discussed, and shortcomings of past empirical research are considered. The chapter concludes with a summary for examining these constructs using valid and reliable measures and with representative populations.

Chapter 4 introduces five variables to conceptualize sexual functioning in adult romantic relationships (i.e., sexual dysfunction, sexual satisfaction, frequency, sex guilt, and sex anxiety) and examines the limitations in past research. Moreover, the sexual response cycle and its three major dimensions (i.e., desire, arousal, and orgasm) are discussed. The chapter concludes with a rationale for examining these dimensions within a comprehensive theoretical framework.

Chapter 5 examines the past theoretical and empirical literature between adult attachment and the five components of relationship functioning (i.e., relationship satisfaction, intimacy, communication, commitment, and conflict). Moreover, it discusses the current associations between adult attachment (i.e., anxious and avoidant) and each relationship variable, and considers the shortcomings of past research. The chapter concludes with a summary for examining these variables collectively to enhance our understanding of different relationship experiences and outcomes.

Chapter 6 evaluates the relatively limited literature between adult attachment (i.e., anxious and avoidant) and the five dimensions of sexual functioning (i.e., sexual dysfunction, sexual satisfaction, frequency, sex guilt, and

sex anxiety). The chapter considers the limitations in past empirical research and concludes with a summary for examining these dimensions within a comprehensive theoretical framework.

Chapter 7 discusses the interrelationships among adult attachment, relationship functioning, and sexual functioning and discusses the limitations of past empirical research. The chapter concludes with a rationale for collectively examining these three constructs to better understand the quality of romantic relationships in adulthood.

Chapter 8 provides a summary of the past theoretical and empirical literature on attachment, relationship functioning, and sexual functioning and provides a rationale for overcoming the current methodological limitations. The chapter concludes with an overview of the main aim and hypotheses of the current study.

Chapter 9 presents the methodology of the current study. It provides a description of the participants, describes the instruments that were employed, and concludes with a discussion of the study's procedure.

Chapter 10 illustrates the empirical results of the current study as they relate to the main aim and hypotheses. Additionally, it examines the interrelationships among these three constructs (i.e., adult attachment, relationship functioning, and sexual functioning) separately for men and women.

Finally, Chapter 11 presents a discussion of the results in the context of past empirical research. Moreover, it describes the limitations of the current study and provides directions for future research. The chapter concludes with a discussion of the theoretical and clinical implications of the findings.

CHAPTER 2

Attachment Theory

Chapter Overview

This chapter introduces the concept of attachment theory. Particular emphasis is given to reviewing the literature on attachment in childhood, and the continuity of these attachment bonds into adult romantic relationships. The three different behavioural systems (i.e., attachment, caregiving, and sex) are explained, and the conceptualization of attachment theory in adulthood (i.e., secure, anxious, and avoidant) is defined. The chapter briefly discusses the measurement of attachment in romantic relationships, and concludes with a rationale for attachment theory providing an important framework to better understand the dynamic nature of romantic relationships.

Introduction to Attachment Theory

Attachment theory posits that early interactions occurring between an infant and their primary caregiver (usually the mother) lead to an attachment relationship which is enduring across the lifespan (Bowlby, 1969). It is theorized that these early attachment relationships instil expectations and beliefs that subsequently shape relational cognitions and behaviours with romantic partners in adulthood (Bowlby, 1969; Butzer & Campbell, 2008).

Attachment in Childhood

According to Bowlby (1969), infants are born with an evolved series of attachment behaviours designed to ensure proximity to their primary caregiver (attachment figure) for the purposes of protection, exploration, and emotion regulation (Obegi & Berant, 2009). Separation from an attachment figure will likely

evoke angry protest, clinging and despair, culminating eventually in grieving and emotional detachment (Johnson & Zuccarini, 2010). Through continued infant-caregiver interactions, children develop internal working models regarding the expected availability and responsiveness of their attachment figure, and whether the self is judged as being worthy of support and protection (Hazan & Shaver, 1994).

Building upon Bowlby's theory, researchers have identified three patterns of attachment among infants related to variations in caregiver warmth and responsiveness (Ainsworth, Blehar, Waters, & Wall, 1978). Mothers who provide infants with consistent care and emotional support tend to have securely attached children, manifested in affiliative and exploratory behaviours. These children consistently use their mothers as a secure base to alleviate anxiety and distress (Bogaert & Sadava, 2002). In contrast, mothers inconsistent in their care through overprotective and inattentive behaviours tend to have anxiously attached children, who are less exploratory and make inconsistent attempts to secure caregiver support. Finally, mothers unresponsive to their infant's needs tend to have avoidantly attached children, who do not seek support and actively avoid their mothers when distressed (Ainsworth et al., 1978; Stephan & Bachman, 1999).

These attachment patterns are thought to reflect systematic differences in the child's internal working models of self and others (Collins, Cooper, Albino, & Allard, 2002). These models then persist into adulthood, operating automatically and unconsciously to influence cognitive, affective, and behavioural response patterns in close relationships (Kane et al., 2007).

Continuity of Attachment Relationships

The continuity of attachment patterns across the lifespan has been supported by longitudinal research. Mikulincer and Shaver (2007a) conducted a review of 36 studies that examined the stability of attachment patterns, and found that, on average, 70% of the participants received the same attachment style classification at different time points (ranging from 1 week to 25 years). Individual attachment patterns can be altered due to major changes in family environment or updates to working models during adulthood as a result of new attachment-relevant experiences (Grossmann, Grossmann, & Waters, 2005). Moreover, intervening relationship experiences (i.e., with friends, romantic partners, or family members) may alter working models away from those formed in early parent-infant relationships. This may explain the remaining 30% of variance not accounted for in Mikulincer and Shaver's review. Therefore, empirical evidence supports the notion that adult attachment patterns remain relatively stable from infancy to adulthood.

Same-sex Relationships and Adult Attachment

Bowlby's collaborative partner Mary Ainsworth (1985) noted that same-sex romantic attachments are likely to function in the same manner as opposite-sex attachments (Mohr, 2008). Whilst the literature is limited, it has been found that insecurely attached individuals (whether heterosexual, homosexual, or bisexual) are less satisfied in their romantic relationships (Mikulincer & Shaver, 2007a) and have more negative sexual experiences (Butzer & Campbell, 2008; Mohr, 2008). This suggests that homosexual and bisexual relationships are more similar than different to heterosexual relationships with respect to relationship quality (Kurdek, 2005b; Peplau & Fingerhut, 2007).

Measurement of Attachment Theory

Attachment theory has generated two major lines of research based on slightly different conceptualizations and assessments of individual differences (For a review, see Rholes & Simpson, 2004). The first line of research follows the trajectory of developmental psychologists (Ainsworth et al., 1978), who used observational techniques to classify parent-infant pairs (P. R. Shaver & Mikulincer, 2002). This was subsequently extended by employing clinical interviews to examine an individual's early childhood relationships with each parent (Main, Kaplan, & Cassidy, 1985) and one's current adult romantic relationship (Crowell et al., 2002). The second line of research was initiated by social psychologists (Hazan & Shaver, 1987), who applied Bowlby's ideas to the study of adult romantic relationships and developed self-report measures suitable for use in experiments and surveys (Shaver & Mikulincer, 2002). Although both lines of research examine secure and insecure strategies of affect regulation, and can be used to classify individuals into categories similar to those identified by Ainsworth and her colleagues (1978), researchers have only found modest to moderate associations between the two kinds of measures (Crowell et al., Shaver & Mikulincer, 2002).

Adult Romantic Attachment

Attachment in adult relationships are expected to fulfil the same basic functions outlined by Bowlby (1969) in the infant-caregiver relationship (Hazan & Shaver, 1987). A key difference is the integration of three behavioural systems: attachment, caregiving, and sex (P. Shaver, Hazan, & Bradshaw, 1988). The attachment behavioural system introduced above is active in infancy and involves proximity seeking to promote protection from behavioural and psychological harm

(Hazan & Shaver, 1994). The caregiving behavioural system is activated in early childhood and involves providing comfort and responding to individual needs (Mikulincer & Goodman, 2006). These two systems are active in most relationships. However, the sexual mating behavioural system involving sexual attraction and gratification is proposed as being the primary motive for developing romantic bonds in adulthood (Mikulincer & Goodman, 2006).

Mikulincer and Shaver (2003) introduced a model specifying the activation and operation of the adult attachment system. When attachment figures are judged as available and responsive, a sense of “felt security” is developed, encouraging the formation of close affectional bonds with others (Butzer & Campbell, 2008). If attachment figures are judged as being consistently unresponsive or unavailable, insecurities and doubts predominate, leading to the activation of one or both secondary attachment strategies (Birnbaum et al., 2006). Under a hyperactivating strategy, the attachment figure is judged as inconsistently available and attachment behaviours become heightened and intense, expressed as anxious clinging or aggression to obtain attention and care (Johnson & Zuccarini, 2010). When the attachment figure is judged as consistently unavailable, deactivating strategies are employed, in which attachment needs and emotions are suppressed and self-reliance is learned (Obegi & Berant, 2009).

Adult attachment patterns reflect those identified in earlier developmental periods (i.e., secure, avoidant, and anxious). Two orthogonal dimensions define individual differences in adult attachment: attachment-related avoidance and attachment-related anxiety. These dimensions are based on proposed internal working models and secondary attachment strategies described above (Obegi & Berant, 2009). Avoidantly attached individuals have a negative model of others as

unreliable, strive to maintain emotional and behavioural independence, and rely on deactivating strategies to deal with relational threats (Birnbaum et al., 2006; Mikulincer & Shaver, 2007a). Anxiously attached individuals have a negative model of self as unworthy, worry about being rejected or abandoned, and rely on hyperactivating strategies to secure their partner's support and protection (Mikulincer & Shaver, 2007a). Individuals who score high on either or both of these dimensions are insecurely attached. By contrast, individuals scoring low on both dimensions are securely attached and maintain a positive working model of their own worth in relationships, and of others' trustworthiness and availability (Mikulincer & Shaver, 2007a).

Measuring adult attachment has been a subject of debate (Collins & Read, 1990). Although several categorical models of attachment have been created and employed in research (Bartholomew & Horowitz, 1991), they have been criticized for their reduced power and precision to accurately identify individual attachment differences (Brennan & Shaver, 1995). Hence, many researchers now argue that assessing attachment patterns along different continua produces stronger, more lucid results (Brennan & Shaver, 1995; Rholes & Simpson, 2004; Wei, Russell, Mallinckrodt, & Vogel, 2007).

Despite some contradictory evidence (Shi, 2003), gender differences have been noted between the different attachment patterns. Del Giudice (2011) conducted a meta-analysis on 113 samples ($N = 66,132$) and found that males experienced greater attachment avoidance and less attachment anxiety than females. Such trends are consistent with stereotypical gender-role theories, in which females are more likely to express clingy and dependant behaviours, whereas

males are more likely to avoid intimacy and withdraw (Vogel, Wester, Heesacker, & Madon, 2003).

Chapter Summary

In summary, different patterns of attachment developed in infancy (i.e., secure, anxious, and avoidant) persist into adulthood influencing thoughts, feelings, and behaviours in close relationships (Hazan & Shaver, 1994). Hence, attachment theory provides an important framework to better understand the dynamic nature of romantic relationships in adulthood.

CHAPTER 3

Relationship Functioning

Chapter Overview

This chapter discusses relationship functioning and justifies the selection of five fundamental variables to examine the experience of romantic relationships. Each dimension (i.e., relationship satisfaction, intimacy, communication, commitment, and conflict) is discussed, and shortcomings of past empirical research are considered. The chapter concludes with a rationale for examining these constructs using valid and reliable measures and within a comprehensive theoretical framework.

Introduction to Relationship Functioning

Romantic relationships are a central aspect of the lives of most individuals, and are important predictors of life satisfaction and well-being (Halford, 2011; Kamp Dush & Amato, 2005). There are a myriad of relationship variables that have been theoretically and empirically investigated (Cooper & Sheldon, 2002). However, it is important to select the dimensions that are relevant to both males and females, and for various types of romantic relationships (Vangelisti & Perlman, 2006). Specifically, there are five constructs (i.e., relationship satisfaction, intimacy, communication, commitment, and conflict) that have been consistently examined (Cooper & Sheldon, 2002), and identified as collectively fundamental to the analysis of romantic relationships (Vangelisti & Perlman, 2006). Consequently, these basic properties of relationship functioning were selected for investigation.

Relationship Satisfaction

Relationship satisfaction has been the dominant variable in the study of romantic relationships (Cooper & Sheldon, 2002). The term satisfaction has been poorly defined in the literature, and the definitions that exist are not theoretically derived (Graham, Diebels, & Barnow, 2011). Conceptual confusion has resulted in a number of terms such as happiness, adjustment, and quality being used interchangeably to refer to satisfaction (Vangelisti & Perlman, 2006). However, relationship satisfaction is thought to reflect an individual's subjective, global evaluation of their romantic partnership (Vangelisti & Perlman, 2006).

Despite several exceptions (e.g., the Perceived Relationship Quality Components Inventory: Fletcher, Simpson, & Thomas, 2000; the Relationship Assessment Scale: Hendrick, 1988), most of the instruments used to measure relationship satisfaction (e.g., the Marital Opinion Questionnaire: Huston & Vangelisti, 1991; the Kansas Marital Satisfaction Scale: Schumm, Nichols, Schectman, & Grigsby, 1983) have focused on marriage, and consequently the research is largely oriented to married populations (Vangelisti & Perlman, 2006). This limits the generalizability of the results in other partnerships, such as with dating or homosexual couples. Moreover, other instruments (e.g., the Marital Adjustment Scale: Locke & Wallace, 1959) have been criticized for using a variety of response formats, thus compromising their reliability and validity (Graham et al., 2011).

With such caveats in mind, basic trends in relationship satisfaction research indicate that dissatisfied couples communicate less and show higher levels of negative behaviours such as criticism, defensiveness, and disengagement (For a review, see Gottman & Notarius, 2000). Gender differences have been identified

that suggest that males in marital relationships tend to experience greater satisfaction than females (Corra, Carter, Carter, & Knox, 2009). However, other research suggests that marital satisfaction is similar for both men and women (Kurdek, 2005a). Research which clarifies this association with both marital and non-traditional partnerships needs to be completed.

Intimacy

Intimacy is significantly related to the formation, maintenance, and dissolution of romantic relationships (Vangelisti & Perlman, 2006). There are several definitions of intimacy which vary greatly and often reflect the perspective adopted by the researcher (Hook, Gerstein, Detterich, & Gridley, 2003). However, intimacy can be conceptualized as a subjective sense of connectedness resulting from interpersonal processes involving self-disclosure and partner responsiveness (Vangelisti & Perlman, 2006). Specifically, five components have been identified as encompassing the nature of intimacy in romantic relationships: emotional, social, sexual, intellectual, and recreational (Hook et al., 2003).

Several widely used intimacy measures (e.g., the Miller Social Intimacy Scale: Miller & Lefcourt, 1982) assess intimacy as a single construct, in which higher scores indicate a higher experience of intimacy (Årseth, Kroger, Martinussen, & Bakken, 2009). However, as intimacy is largely recognized as a multidimensional construct, qualitative differences may be overlooked with this approach. Hence, measures assessing the five distinct components of intimacy have been created and employed in intimacy research (e.g., the Personal Assessment of Intimacy in Relationships: Schaefer & Olson, 1981).

Gender differences in intimacy have been identified, indicating that females tend to place greater emphasis on love, affection, and emotional sharing than males (Hook et al., 2003). However, other studies have failed to replicate such findings, and instead have found that females experience greater sexual (McCabe, 1999) and recreational (Greeff & Malherbe, 2001) intimacy in their relationships. Further research is necessary to elucidate the links between the components of intimacy and gender.

Communication

Although communication is a prominent feature of romantic relationships, it has not been clearly defined within the literature. This may be because relationship quality and communication are inextricably linked (Vangelisti & Perlman, 2006). The literature suggests that communication sustains relationships, and in turn, relationships impact patterns of communication (Vangelisti & Perlman, 2006). This makes it difficult to isolate communication as a subtopic of relationships, as it subsumes a range of behavioural expressions. However, relationship communication can be conceptualized as the means by which people create and maintain romantic relationships, along with a set of skills or skill deficits that contribute to relationship adjustment (Burlison, Metts, & Kirch, 2000).

Despite the difficulties with conceptualizing and assessing relationship communication, many studies often employ the Communication Patterns Questionnaire (Christensen & Heavey, 1990) to evaluate communication in marital relationships (Ghering, 2008; Gordon, Baucom, Epstein, Burnett, & Rankin, 1999). Therefore, there is limited literature regarding communication in non-traditional partnerships. Moreover, many researchers argue that communication should not be investigated in isolation (Vangelisti & Perlman, 2006). However, a large portion of

the literature examines relationship communication alongside satisfaction alone, and so the interaction of communication with other relationship dimensions, is less well understood (Cooper & Sheldon, 2002).

In both cross-sectional and longitudinal research, communication has been empirically related to relationship quality, with the research indicating that poor communication is associated with relationship instability and dissatisfaction (Filsinger & Thoma, 1988; Litzinger & Gordon, 2005). No consistent gender differences have been identified by the limited number of studies that have explored these associations (Johnson et al., 2005).

Commitment

There is significant diversity in the theoretical foundation and conceptualization of relationship commitment (Adams & Jones, 1999). However, it can be conceived as a dynamic, motivational process based on cognitive and affectional appraisals of one's relationship, and its situational context at a given time (Joel, MacDonald, & Shimotomai, 2011).

Factors such as relationship satisfaction level, extent of emotional and monetary investments and potential partner alternatives, are central to commitment research (Vangelisti & Perlman, 2006). Therefore, many researchers argue that commitment should not be conceived as a unidimensional construct, but instead be evaluated by its different components (Adams & Jones, 1999). Consequently, the measurement of commitment has varied greatly according to theory and research focus. Some instruments assess dedication and perceived constraints (e.g., the Commitment Inventory: Stanley & Markman, 1992) and others measure investment contributions (e.g., the Investment Model Scale: Rusbult, Martz, &

Agnew, 1998). Most of the research has focused on marriage, as this union is considered the main expression of commitment in relationships (Vangelisti & Perlman, 2006). However, exploring commitment in different types of partnerships can extend researchers understanding of this important construct.

Research suggests that positivity, openness and assurance, are positively related to relationship commitment (Dailey, Hampel, & Roberts, 2010). Additionally, the research consistently suggests that females are more personally committed to their romantic relationships than males (Adams & Jones, 1999).

Conflict

Interpersonal conflict involves disagreement, which is manifest in incompatible or opposing behaviours or viewpoints (Laursen & Hafen, 2010). A degree of conflict is seen as a normative component of relationships, and it is suggested that the way conflict is handled is more important than the amount of conflict itself (Vangelisti & Perlman, 2006).

The assessment of relationship conflict has varied, with some scales measuring conflict management and perspectives (e.g., the Conflict Tactics Scale: Straus, 1979) and others measuring conflict in parental relationships (e.g., the O'Leary-Porter Scale: Porter & O'Leary, 1980). Indeed, relationship conflict has been largely investigated with either married couples or university samples (Vangelisti & Perlman, 2006), and so there is limited literature regarding the type and degree of conflict in other types of partnerships. However, it is generally recognized that poorly managed conflict is related to relationship dissatisfaction and divorce (Clements, Stanley, & Markman, 2004). Gender differences indicate that when conflict arises, females tend to move towards conflict resolution whereas

males attempt to end discussions quickly and exhibit withdrawal behaviours (Christensen & Heavey, 1990).

Chapter Summary

In summary, satisfaction, intimacy, communication, commitment, and conflict are fundamental to the experience of romantic relationships. Shortcomings in the literature have been identified, namely, that a large portion of the research has focused on married populations or university samples. Consequently, the nature of these variables in non-traditional partnerships is less well established. Further, using valid and comprehensive measures of each of these constructs will assist in our understanding of the interrelationships between these variables. Another aspect of romantic relationships significantly related to the aforementioned constructs and essential to relationship quality, is sexual functioning (Byers, 2005; Haning et al., 2007; Litzinger & Gordon, 2005).

CHAPTER 4

Sexual Functioning

Chapter Overview

This chapter introduces five variables to conceptualize sexual functioning in adult romantic relationships. Each dimension (i.e., sexual dysfunction, sexual satisfaction, frequency, sex guilt, and sex anxiety) is discussed separately, and the limitations of past empirical research are evaluated. Moreover, the sexual response cycle and its three major dimensions (i.e., desire, arousal, and orgasm) are discussed. The chapter concludes with a rationale for examining these dimensions with representative populations and within a comprehensive theoretical framework.

Introduction to Sexual Functioning

Sexuality is an integral part of most romantic relationships and is associated with other relational aspects such as satisfaction, conflict, and love (Fletcher, 2002). There is an extensive range of variables that can be employed to measure specific components of sexuality (Vangelisti & Perlman, 2006). However, sexual dysfunction, satisfaction, and frequency are considered fundamental to sexual functioning (Petersen & Hyde, 2010). Dysfunction impacts a large proportion of the population (DeRogatis & Burnett, 2008), and satisfaction and frequency can influence overall relationship quality regardless of gender, sexual orientation, or relationship status (McNulty & Fisher, 2008). Additionally, it is important to not only identify how these variables are differentially associated with relationship experiences, but also to understand the underlying psychological factors that are linked to sexual functioning. Specifically, sex guilt and sex anxiety are important elements to the study of sex in relationships, as they can impact individual

cognitions and emotions (Janda & O'Grady, 1980; Wincze & Carey, 2001). Consequently, these basic components (i.e., dysfunctions, satisfaction, frequency, guilt, and anxiety) were selected for investigation to gain a comprehensive understanding of sexual functioning in romantic partnerships.

The Sexual Response Cycle

Understanding the normal physiological sequence of male and female sexual response is necessary for a well-informed understanding of sexual function and dysfunction (Resnik, 2008). The human sexual response cycle, first developed by Masters and Johnson (1966) and subsequently refined by Kaplan (1977), comprises three major dimensions (i.e., desire, arousal, and orgasm). Desire represents an individual's current level of sexual interest, characterized by sexual fantasies and desire to have sex (Resnik, 2008). Arousal includes a subjective sense of sexual pleasure accompanied by a physiological response in the form of penile erection in males and vaginal lubrication in females (Resnik, 2008). Orgasm is characterized by intense pleasure sensations lasting anywhere from a few seconds to minutes. Physiologically, involuntary muscle contractions occur, leading to ejaculation for men and muscular contractions of the vaginal muscles in females (Resnik, 2008; Sewell, 2005). Although the model has been criticized for employing a non-representative sample during development (Tiefer, 1991) and doubts have been raised regarding whether the model is applicable for females (Basson, 2000), it is still recognized as an appropriate way in which to conceptualize human sexual response (Levin, 2008; Sewell, 2005).

Sexual Dysfunction

The Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2013), conceptualizes sexual dysfunction as arising from

an impairment or disturbance in one of the aforementioned stages of sexual response. Although estimates are varied (ranging from 10-30%), sexual dysfunctions are considered highly prevalent worldwide (DeRogatis & Burnett, 2008) and are influenced by a variety of biological, social, and psychological factors (McCabe et al., 2010).

Sexual desire disorders in both males and females involve diminished or absent feelings of sexual interest, absent sexual thoughts or fantasies, and scarce or absent motivation for sexual arousal. They include sexual aversion disorder (persistent avoidance of sexual activity) and hypoactive sexual desire disorder (deficient or absent sexual fantasies and desire for sexual activity) (Hatzimouratidis & Hatzichristou, 2007).

Sexual arousal disorders include male erectile disorder (consistent inability for a man to attain and/or maintain a penile erection sufficient for sexual activity) and female sexual arousal disorder (inability to attain or maintain adequate lubrication in response to sexual excitement until completion of sexual activity) (Hatzimouratidis & Hatzichristou, 2007).

Orgasmic disorders include male and female orgasmic disorder (delay of orgasm following normal excitement and sexual activity) and premature ejaculation (ejaculation with minimal sexual stimulation before or shortly after penetration and before the person wishes it) (Hatzimouratidis & Hatzichristou, 2007). All the dysfunctions are thought to cause significant distress to both the individual and their partner (Wincze & Carey, 2001).

Identifying which components are fundamental to the measurement of sexual dysfunctions has been problematic. Some instruments measure sexual drive (e.g., the Derogatis Interview for Sexual Functioning: Derogatis & Melisaratos,

1979), other instruments measure orgasm alone (e.g., the Golombok-Rust Inventory of Sexual Satisfaction: Rust, Bennun, Crowe, & Golombok, 2010), and other instruments measure desire, arousal, and orgasm collectively (e.g., the Female Sexual Function Index: Rosen, 2000). Variations in the assessment of sexual dysfunctions has resulted in different prevalence estimates which can affect prevention and treatment planning (DeRogatis & Burnett, 2008). Hence, it is necessary that the instruments selected to investigate sexual dysfunctions incorporate items which encompass all components of sexual functioning and are relevant to both males and females in different types of relationships.

There is limited literature regarding the comorbidity of sexual dysfunctions (Nobre, Pinto-Gouveia, & Gomes, 2006). However, research indicates a significant overlap between sexual disorders, specifically, female dysfunctions. Female sexual arousal disorders are strongly associated with sexual desire and orgasmic disorders (Bancroft, Graham, & McCord, 2001; Giles & McCabe, 2009). In males, there are associations between erectile dysfunction, hypoactive sexual desire disorder, and premature ejaculation (Nobre et al., 2006; Rosen, 2000). Such findings suggest that the presence of one sexual dysfunction has significant psychological and behavioural implications which can impact other areas of sexual functioning.

Sexual Satisfaction

Sexual satisfaction can be defined as the degree to which an individual is satisfied or content with their sexual activity, whether within a current relationship or in general (Petersen & Hyde, 2010). The measurement of sexual satisfaction has varied and often lacks a theoretical base (Vangelisti & Perlman, 2006). This is because defining which factors constitute a satisfactory sex life is dependent on the focus adopted by the researcher (Brody & Costa, 2009). Some instruments are

categorical (Davison, Bell, LaChina, Holden, & Davis, 2009), others are dimensional (e.g., the Golombok-Rust Inventory of Sexual Satisfaction: Rust et al., 2010), and some are gender specific (e.g., the Sexual Satisfaction Scale for Women: Meston & Trapnell, 2005). Moreover, most of these instruments have been developed for heterosexual relationships, and so there is little research measuring sexual satisfaction with homosexual couples.

The literature indicates that sexual satisfaction is significantly related to general well-being (Davison et al., 2009) and relationship stability (Yabiku & Gager, 2009). A recent survey in 27 countries found that sexual dissatisfaction is widespread, with 58% of females and 57% of males reporting that they are not completely satisfied with their sex life (Mulhall, King, Glina, & Hvidsten, 2008). Instead, differences lie in perspectives of what involves sexually satisfying behaviour. Research indicates that females like to engage in sexual activities involving love and intimacy, whereas males like to engage in sexual activities that are more arousal focused (Hatfield, Sprecher, Pillemer, & Greenberger, 1988; McCabe, 1999). Therefore, although sexually satisfying behaviours vary according to gender, the global experience of sexual satisfaction and dissatisfaction is similar in both males and females.

Sexual Frequency

The role of sexual frequency in romantic relationships is an important area of study, as research identifies this variable as the second most problematic issue in young married couples (Risch, Riley, & Lawler, 2003; Yabiku & Gager, 2009). Sexual frequency is typically assessed by asking the participant to report a numerical estimate of the number of times they have had intercourse with their partner over the past 30 days (McNulty & Fisher, 2008).

Gender differences have been noted, in that the ideal sexual frequency for males is greater than for females (Simms & Byers, 2009). However, two meta-analyses by Oliver and Hyde (1993) and Petersen and Hyde (2010) found very small gender differences for intercourse frequency and concluded that men and women are more similar than different in terms of sexuality. Further research is required to better understand the relationship between gender and sexual frequency. Moreover, most of the research investigates sexual frequency with married populations and uses penile-vaginal intercourse to gauge its expression (McNulty & Fisher, 2008; Meltzer & McNulty, 2010). Other sexual frequency behaviours, such as oral-genital stimulation (i.e., oral sex), warrant further research because various aspects of sexual frequency may be expressed differently. Similarly, exploring such behaviours in marital and non-marital unions is necessary, as different results may be found.

Sex Guilt

Sex guilt is characterized as a generalised expectancy for self-mediated punishment for violating, or the anticipation of violating, standards of proper sexual conduct (Mosher & Cross, 1971). This behaviour is then manifested by resistance to sexual temptation and disrupting cognitive-processes in sex-related situations (Mosher & Cross, 1971). The measurement of sex guilt has been fairly consistent within the literature, as a majority of studies employ the Mosher Forced Choice Guilt Inventory (1966) or its variations and revisions, to identify the unique experience of sex guilt (Gerrard & Gibbons, 1982; Joffe & Franca-Koh, 2001). This instrument possesses adequate psychometric properties (Woo, Brotto, & Gorzalka, 2011) and is rated on a dimensional scale, allowing researchers to assess the degree of sexual guilt experienced.

Several studies have found that higher sex guilt is associated with lower levels of sexual functioning (Darling, Davidson, & Passarello, 1992; Woo et al., 2011). Gender differences have been reported, indicating that females experience higher levels of sexual guilt than males (Petersen & Hyde, 2010). Consequently, most of the research has focused on either females or university populations (Wayment & Aronson, 2002; Woo et al., 2011). Further research in both married and dating partnerships is necessary to clarify the role of sex guilt in romantic relationships.

Sex Anxiety

Although sex anxiety is not adequately defined within the literature (Sharifzadeh, 2011), it can be conceptualised as the generalised expectancy for nonspecific external punishment for the violation of, or the anticipation of violating, perceived standards of acceptable sexual behaviour (Janda & O'Grady, 1980). Sex anxiety differs markedly from sex guilt. Sex guilt relates to how individuals evaluate themselves, whereas sex anxiety concerns how individuals feel they are being evaluated by their sexual partner and how they feel during the sexual act (Janda & O'Grady, 1980). Sex anxiety has been measured as a component of a larger scale of sexual functioning (e.g., the Mosher Forced Choice Guilt Inventory: Mosher, 1966), and through specific sex anxiety instruments (e.g., the Sex Anxiety Inventory: Janda & O'Grady, 1980).

Although the literature is limited, it is suggested that sex anxiety is associated with sexual dysfunction and decreased sexual satisfaction (Wincze & Carey, 2001). Gender differences have been noted, indicating that females tend to experience greater sexual anxiety than males (Petersen & Hyde, 2010). In order to

expand the empirical literature regarding sexual anxiety, further research with males and females in different types of partnerships is required.

Chapter Summary

In summary, sexual dysfunction, satisfaction, frequency, guilt, and anxiety are important components of sexuality in romantic relationships (McConaghy, 1993). Limitations in research have been noted regarding lack of theory, non-representative samples, and inconsistent measurements (Vangelisti & Perlman, 2006). Hence, assessing these dimensions within an established theoretical framework such as attachment theory, and with representative populations in different partnerships (i.e., heterosexual, homosexual, and bisexual), may provide significant insight into the nature of romantic bonds in adulthood.

CHAPTER 5

Attachment and Relationship Functioning

Chapter Overview

This chapter examines the past theoretical and empirical literature between adult attachment and the five components of relationship functioning (i.e., relationship satisfaction, intimacy, communication, commitment, and conflict). Moreover, it discusses the associations between adult attachment (i.e., anxious and avoidant) and each relationship variable, and considers the shortcomings of past research. The chapter concludes with a rationale for examining these variables collectively to enhance our understanding of different relationship experiences and outcomes.

Introduction to Attachment and Relationship Functioning

A large body of research indicates that the way individuals think, feel and interact in their romantic relationships, is dependent on variations in adult attachment (Li & Chan, 2012; Mikulincer & Goodman, 2006). Despite such strong empirical links, most of the literature examines attachment within the context of singular relationship domains (e.g., satisfaction) (Kane et al., 2007). As a result, there is less information about the interrelationships between attachment and a broader range of relationship variables. Although an exhaustive analysis is beyond the scope of this thesis, attachment patterns have been investigated in the context of relationship satisfaction, intimacy, communication, commitment, and conflict.

Attachment and Relationship Satisfaction

Attachment theory posits that relationship satisfaction is likely to increase as partners become reliable sources of closeness and support. In contrast,

relationship dissatisfaction reflects attachment-related insecurities (Mikulincer & Shaver, 2007a). This notion has been supported by empirical research (Mikulincer & Shaver, 2007a; Pepping & Halford, 2012). Mikulincer and Shaver summarised the findings of 42 studies on attachment and satisfaction in dating relationships. Generally, less secure people (whether anxious, avoidant, or both) reported lower levels of satisfaction with their romantic relationships. This association persisted despite variations in measurement and differences in sexual orientation (Mikulincer & Shaver, 2007a; Mohr, 2008). Research examining adult attachment and relationship satisfaction between couples has found significant actor and partner effects. Specifically, insecure spouses (i.e., both anxious and avoidant) tend to report more spousal negativity and dissatisfaction in their romantic relationships (Butzer & Campbell, 2008; Feeney, 2002).

However, research on married populations presents less consistent findings and seems to depend on the way attachment is measured. The majority of studies that employ self-report measures of attachment have found that insecure spouses report less marital satisfaction than secure spouses (Mikulincer & Shaver, 2007a). Conversely, some studies employing interview methods have failed to find such associations (Dickstein, Seifer, Albus, & Magee, 2004; Wampler, Shi, Nelson, & Kimball, 2003). Although method variance (e.g., self-report or interview) may account for some of the discrepancy, other studies using interview methods have found lower marital dissatisfaction among insecure spouses (Alexandrov, Cowan, & Cowan, 2005; Treboux, Crowell, & Waters, 2004). Therefore, despite some inconsistencies, insecure attachment (assessed by self-report or interview methods) appears to be related to lower satisfaction in marital, dating, and homosexual partnerships (Mikulincer & Shaver, 2007a). Of note, most of the studies employ

cross-sectional designs. Therefore, the direction of these relationships is unknown. However, even longitudinal research consistently suggests that insecure attachment predicts subsequent decreases in relationship satisfaction (Davila, Karney, & Bradbury, 1999).

In Mikulincer and Shaver's (2007a) summary of 100 studies examining attachment and satisfaction in both dating and marital relationships, no consistent gender differences were found. Therefore, attachment insecurities and relationship dissatisfaction appear to be significantly linked, irrespective of gender.

Attachment and Intimacy

According to attachment theory, securely attached individuals are comfortable with closeness and affection, likely resulting in greater levels of intimacy (Vangelisti & Perlman, 2006). In contrast, insecurely attached individuals may experience less intimacy, but for differing reasons. Avoidantly attached individuals tend to prefer interpersonal distance, which is likely to interfere with their intimacy behaviours and responsiveness (Pistole, 1994). Conversely, anxiously attached individuals tend to fear abandonment, which may increase their demands for intimacy and promote clinging behaviours to such an extent that it makes their partner withdraw (Pistole, 1994).

Empirical research consistently suggests that securely attached individuals report greater intimacy in their relationships than either avoidantly or anxiously attached individuals (Årseth et al., 2009). This pattern is found whether attachment is assessed through self-report or interview methods, or whether intimacy is assessed by cross-sectional or longitudinal designs (Collins et al., 2002; Mikulincer & Shaver, 2007a). However, several studies report no significant associations

between attachment and relationship intimacy (Crowell et al., 2002; Treboux et al., 2004). Of note, these latter studies used the Triangular Love Scale (TLS; Sternberg, 1986) as a measure of intimacy, which has been criticised for its highly correlated factors and inadequate model fit (Whitley, 1993). Therefore, the measure of intimacy may have influenced the results obtained.

There is limited literature regarding gender differences in attachment and intimacy. Feeney (1999) suggested that anxiously attached females and avoidantly attached males experience the most difficulty with regulating intimacy in their romantic relationships. However, more research is needed before any definitive conclusions can be made.

Attachment and Relationship Communication

Attachment theory suggests that open and comfortable relationship communication is a reflection of secure attachment, and can be undermined by attachment insecurity (Mikulincer & Shaver, 2007a). Avoidantly attached individuals are less interested in creating affectionate interactions and have difficulty expressing their feelings (Mikulincer & Shaver, 2007a). Conversely, anxiously attached individuals have difficulty attending accurately and consistently to their partner's emotions due to their own preoccupation with rejection (Mikulincer & Shaver, 2007a).

Empirical research (using both quantitative and qualitative methods) indicates that secure attachment is related to constructive communication in romantic relationships (Vangelisti & Perlman, 2006). By contrast, avoidant attachment is related to less emotional expression, less nonverbal behaviour during conversation, and less use of affectionate language (Feeney, 1999; Guerrero, 1996).

Additionally, anxious attachment is related to greater demands and distress during dyadic communication (Fitzpatrick, Fey, Segrin, & Schiff, 1993). Such patterns have been supported by longitudinal research (Collins et al., 2002). However, other research has found that anxious attachment is related to greater control of negative emotions (Feeney, 1999). This may reflect a reluctance to express neediness due to fears that their partner will abandon them. However, there are notable methodological limitations within the research. Namely, most of the literature is centred on married populations, so there is less information regarding the nature of these dimensions in dating and homosexual partnerships (Vangelisti & Perlman, 2006).

Gender research indicates that couples in which the husband was avoidantly attached or the wife was anxiously attached, reported more destructive levels of communication (Feeney, 1994). Such findings suggest that insecure attachment, combined with traditional gender roles, can influence communication in relationships (Mikulincer & Shaver, 2007a). However, more research is needed to identify whether such results generalize to other partnerships.

Attachment and Relationship Commitment

Attachment theory posits that avoidantly attached individuals prefer self-reliance and emotional distance, whereas anxiously attached individuals fear abandonment and express clingy behaviours, which are likely to interfere with relationship commitment (Mikulincer & Shaver, 2007a).

The literature consistently indicates that self-reported insecure attachment is related to lower levels of commitment in both dating and married populations (Adams & Jones, 1999). These patterns are found whether cross-sectional or

longitudinal designs are employed (Kirkpatrick & Davis, 1994). Despite these associations, research employing the Adult Attachment Interview (AAI: as referenced in Mikulincer & Shaver, 2007a) which measures childhood attachment patterns, failed to replicate these findings (Paley, Cox, Burchinal, & Payne, 1999; Schmitt, 2002). However, other studies using different interview measures of attachment (e.g., Current Relationship Interview: as referenced in Mikulincer & Shaver, 2007a), have found that securely attached individuals report greater commitment in their romantic relationships compared to their insecure counterparts (Treboux et al., 2004). This suggests that there are significant differences between the assessment of adult romantic and parent-child attachment patterns (Mikulincer & Shaver, 2007a). Therefore, despite some inconsistencies, insecure attachment appears to be significantly related to lower commitment in romantic relationships.

There is limited research examining gender differences in attachment and commitment. However, it is suggested that avoidant males and anxious females experience the lowest levels of commitment compared to the other attachment groups (Kirkpatrick & Davis, 1994).

Attachment and Relationship Conflict

Theoretically, the experience of conflict for avoidantly attached individuals is likely to be perceived as a threat to their independence and lead to deactivating strategies (Rholes & Simpson, 2004). Conversely, conflict for anxiously attached individuals may trigger fears of being abandoned and lead to hyperactivating strategies (Rholes & Simpson, 2004). This notion has been supported by empirical research. Securely attached individuals are able to communicate openly during conflict and are willing to compromise to reach resolutions (Brassard, Lussier, & Shaver, 2009). In contrast, avoidantly attached individuals tend to withdraw during

conflict, and display more contempt during conflictual interactions (Brassard et al., 2009; Mikulincer & Shaver, 2007a). On the other hand, anxiously attached individuals react to conflict with intense emotions, are more verbally aggressive, and employ more coercive behaviours (Brassard et al., 2009; Mikulincer & Shaver, 2007a). Such associations have also been found in longitudinal research (Feeney, 1994).

Interestingly, Bouthillier, Julien, Dubé, Bélanger, and Hamelin (2002) failed to replicate the above findings. However, it is suggested that this was a result of sample representation and differences in behavioural coding schemes (Mikulincer & Shaver, 2007a). Therefore, despite some discrepant evidence, it is generally recognised that insecure attachment (assessed by self-report or interview methods) is related to more negative behaviours (either by withdrawal for avoidant individuals or verbal aggression for anxious individuals) during conflict in both married and dating partnerships.

The literature suggests that there are no consistent gender differences between attachment and conflict (Mikulincer & Shaver, 2007a). Therefore, insecure attachment and conflict behaviours appear to be significantly related, irrespective of gender.

Chapter Summary

In summary, variations in adult attachment appear to consistently shape individual experiences in romantic relationships (Vangelisti & Perlman, 2006). Specifically, the pervasive worry associated with anxious attachment and the emotional distancing associated with avoidant attachment, is related to relationship satisfaction, intimacy, communication, commitment, and conflict in romantic

partnerships (Mikulincer & Shaver, 2007a). Although such areas have been extensively explored, there are still gaps within the literature. Namely, the use of inadequate instruments and non-representative samples has yielded inconsistent findings. Further, there is insufficient research on gender differences. Indeed, the interrelationships between these relationship domains and attachment theory require further research. Further, examining attachment within the context of sexual functioning may provide additional insight into the nature of romantic relationships.

CHAPTER 6

Attachment and Sexual Functioning

Chapter Overview

This chapter introduces the sexual behavioural system of adult attachment and explains sexual hyperactivation and deactivation strategies. Moreover, it evaluates the relatively limited literature between adult attachment (i.e., anxious and avoidant) and the five dimensions of sexual functioning (i.e., sexual dysfunction, sexual satisfaction, frequency, sex guilt, and sex anxiety), and considers the limitations in past empirical research. The chapter concludes with a rationale for examining these dimensions within a comprehensive theoretical framework.

Introduction to Attachment and Sexual Functioning

There is robust evidence linking adult attachment to various aspects of romantic relationships (Mikulincer & Shaver, 2007a). However, research investigating the link between attachment and sexuality is more limited (Stephan & Bachman, 1999). As sexual functioning is a defining feature of most romantic relationships, attachment theory may be particularly relevant for understanding its nature and expression (Bogaert & Sadava, 2002). Most of the prior research focuses on attachment and sexual attitudes or behaviours (Butzer & Campbell, 2008). There is a paucity of research examining the interrelationships between attachment and a more comprehensive range of sexual functioning variables (e.g., dysfunctions, satisfaction, frequency, guilt, and anxiety).

Attachment and Sexual Behaviour

Attachment theory posits that sexuality is determined by an inborn sexual behavioural system, and both general and distinct expressions of sexual behaviour reflect the activation and functioning of this system (Mikulincer & Shaver, 2007a). Empirical research indicates that the attachment and sexual behaviour systems have a reciprocal relationship, as attachment styles shape the way sexual interactions are experienced (Birnbaum, 2007).

Specifically, sexual behaviour is closely linked with romantic love, and a sexual partner is often viewed as an attachment figure and a target of caregiving (Mikulincer & Shaver, 2007a). However, gratifying sexual interactions can be undermined by sex-related concerns. Smooth functioning of the sexual system involves the mutual coordination of both partners' sexual motives and behaviours. Dysfunctions of the sexual system reflect those identified for the attachment system, involving hyperactivating and deactivating strategies (Mikulincer & Shaver, 2007b). Sexual hyperactivation (typically characteristic of anxious attachment) involves effortful attempts to encourage a partner to have sex, placing significant value on the importance of sex within a relationship, and adopting a hypervigilant stance towards perceived sexual rejection. In contrast, sexual deactivation (typically characteristic of avoidant attachment) involves inhibition of sexual desire, avoidant attitudes towards sex, distancing from a partner who is interested in sex, and inhibition of sexual arousal and orgasmic joy (Mikulincer & Shaver, 2007b). Therefore, the attachment and sexual behavior systems can impact sexual function and dysfunction within romantic relationships.

Securely attached individuals have a positive view of themselves and others, which may create a more stable and satisfying foundation for sexual

engagement (Brassard, Shaver, & Lussier, 2007). In contrast, insecurely attached individuals may experience lower levels of arousal, pleasure and satisfaction, but for varying reasons (Brassard et al., 2007). Avoidantly attached individuals have a negative view of others and experience discomfort with closeness, which may interfere with emotional intimacy and sensitivity in sexual situations. Moreover, they are likely to perceive love and sex as distinct components (Mikulincer & Shaver, 2007a). In contrast, anxiously attached individuals have a negative model of self and fear abandonment, which may evoke an ambivalent approach to sexual relationships, whereby sex is used as a means to alleviate relational insecurities. Moreover, their compulsive need for intimacy may cause them to equate sex with romantic love, and view sexual activity as a reflection of relationship quality (Mikulincer & Shaver, 2007a).

Attachment and Sexual Dysfunction

The relationship between adult attachment and sexual dysfunction has been inadequately explored. However, Birnbaum (2007) found that anxiously attached females experienced less sexual arousal, intimacy and orgasm, compared to securely attached females. Similarly, avoidantly attached females experienced less sexual intimacy, arousal, and excitement. Recent studies on female sexuality suggest that anxious and avoidant attachment are associated with lack of orgasm (Cohen & Belsky, 2008) and sexual pain (Granot, Zisman-Ilani, Ram, Goldstick, & Yovell, 2011; Stephenson & Meston, 2010). Specifically, Cohen and Brody (2011) found that anxious attachment was associated with fewer vaginal orgasms and avoidant attachment had a non-significant trend towards fewer vaginal orgasms.

Such results are in agreement with the theoretical foundations of attachment theory. Anxiously attached individuals may enter sexual activity with relational apprehensions and intruding thoughts, thereby experiencing less pleasurable sexual encounters (Birnbaum, 2007). In contrast, avoidantly attached individuals may find close sexual relationships uncomfortable or unrewarding due to their general discomfort with intimacy (Mikulincer & Shaver, 2007a). However, the findings of these studies were gender-specific and cannot be generalised to the experience of males.

Additionally, Brassard, Lussier, and Shaver (2009) found that anxious and avoidantly attached males and females experienced more sexual problems (e.g., with erection or lubrication) in their romantic relationships, compared to their securely attached counterparts. However, the specific sexual dysfunctions were not differentiated, and assessment was by categorical (yes or no) methods. Hence, the conceptualization and measurement of 'sexual problems' was incomplete. Further research exploring attachment and sexual dysfunctions with valid and comprehensive instruments is necessary, as it may facilitate treatment planning and monitoring.

Attachment and Sexual Satisfaction

Theoretically, insecure attachment is likely to result in less satisfying sexual experiences. This notion has been consistently supported by empirical research in married, dating, and homosexual partnerships (Butzer & Campbell, 2008; Davis et al., 2006; Fricker & Moore, 2002). However, anxious and avoidantly attached individuals differ in the specific aspects of sex that cause dissatisfaction (Mikulincer & Shaver, 2007a). Specifically, Davis et al. (2006) found that anxiously attached people score higher on questions evaluating emotional

dissatisfaction during sex (e.g., “I would like to have my partners be more romantic”). This provides evidence that such individuals closely relate sex with love (Mikulincer & Shaver, 2007a). Conversely, avoidantly attached individuals score higher on questions evaluating the physical aspects of sex (e.g., “I’m dissatisfied with the physical enjoyment I get out of sex”). These findings reflect the tendency to distance emotions from sex, and sexual activity is viewed as uncomfortable and unrewarding (Mikulincer & Shaver, 2007a).

Gender differences in attachment and sexual satisfaction have yet to be investigated. Such research may extend the literature by providing significant insight into the interrelationships between these variables.

Attachment and Sexual Frequency

Anxious and avoidant attachment is empirically related to sexual frequency in differing ways. Research consistently suggests that avoidant attachment is negatively associated with the frequency of sexual intercourse in adolescence (Tracy, Shaver, Albino, & Cooper, 2003), young adults (Bogaert & Sadava, 2002), and in married or cohabiting unions (Brassard et al., 2007). Such findings suggest that avoidantly attached individuals experience discomfort with intimacy and have less sexual intercourse even in committed relationships (Mikulincer & Shaver, 2007a).

Similarly, anxious attachment is related to less frequent sexual intercourse in males (Feeney, Noller, & Patty, 1993), suggesting that the persistent worry associated with this attachment style may inhibit male sexual activity. Among females, the literature remains inconsistent, with Brassard et al. (2007) finding no main effects between anxious attachment and sexual frequency. Instead, partner

interaction effects were observed such that anxious females with avoidant partners had lower rates of sexual frequency and if both partners were anxious than higher rates of sexual frequency were found. Further research is needed to elucidate the links between adult attachment style, gender, and sexual frequency.

Attachment and Sex Guilt

The research between attachment and sexual guilt is limited. However, Birnbaum (2007) found that anxiously attached females experienced higher levels of sexual guilt and shame, compared to securely attached females. Theoretically, anxiously attached individuals are preoccupied with rejection and abandonment, which may increase their experience of negative feelings (Mikulincer & Shaver, 2007a). However, other studies have found that both anxiously attached males and females reported higher rates of erotophilia, which involves less experience of sex guilt and more positive feelings towards sex (Bogaert & Sadava, 2002). This may be because anxiously attached individuals use sex as a means to achieve emotional intimacy and alleviate relational insecurities (Birnbaum, 2007).

In contrast, it has been found that avoidantly attached individuals are relatively erotophobic, which is characterised by expressions of guilt and fears about sex (Tracy et al., 2003). Sex may elicit such negative affect because avoidantly attached individuals feel uncomfortable with intimacy and attempt to distance themselves from affectionate interactions (Mikulincer & Shaver, 2007a). However, Birnbaum (2007) found no significant association between sex guilt and avoidant attachment in a sample of females. Further research using specific measurements of sex guilt is required, to clarify the inconsistent evidence and extend the empirical research.

Attachment and Sex Anxiety

The relationship between attachment and sex anxiety has received little empirical attention. However, Davis et al. (2006) found that anxious and avoidant attachment was significantly related to higher levels of sexual anxiety in both males and females in different partnerships, and of different sexual orientations. Such results are theoretically consistent with the persistent worry experienced by anxiously attached individuals, and the discomfort with intimacy characteristic of avoidantly attached individuals, which may evoke feelings of anxiety (Mikulincer & Shaver, 2007a). However, more empirical research is needed to extend these findings and to identify whether any gender differences exist between these associations.

Chapter Summary

In summary, adult attachment is related to various aspects of sexual functioning (Mikulincer & Goodman, 2006; Mikulincer & Shaver, 2007a). However, the literature is relatively limited and inconsistent. Overall, it seems that avoidant attachment is associated with a negative construal of sex, whereas anxious attachment is associated with an ambivalent approach to sex, in which negative feelings coexist with intense desires for intimacy (Mikulincer & Shaver, 2007a). Indeed, the multifaceted nature of sexual functioning has yet to be studied within the context of attachment theory. Further research with adults in different types of partnerships, of different sexual orientations, and using valid and reliable instruments, is necessary to extend the existing literature. Moreover, examining gender differences may facilitate additional insight into the links between attachment and sex, and the implications this has in understanding romantic relationships.

CHAPTER 7

Attachment, Relationship Functioning, and Sexual Functioning

Chapter Overview

This chapter discusses the interrelationships among adult attachment, relationship functioning, and sexual functioning and discusses the limitations of past empirical research. The chapter concludes with a rationale for collectively examining these three constructs to better understand the quality of romantic relationships in adulthood.

Empirical Findings on Attachment, Relationship Functioning, and Sexual Functioning

Empirical research consistently suggests that relationship quality is inextricably linked to sexual functioning (Vangelisti & Perlman, 2006), and attachment orientations can shape the way individuals construe their romantic relationships (Mikulincer & Goodman, 2006). However, limited literature has collectively examined the nature of adult attachment, relationship functioning, and sexual functioning in romantic partnerships. Nonetheless, the few studies that have explored these dimensions indicate patterns of association.

Birnbaum et al. (2006) examined the contribution of adult attachment to the experience of sexual intercourse and relationship quality. It was reasoned that because anxiously attached individuals tend to have sex to meet needs of affection and security (Tracy et al., 2003), they may rely on sexual interactions to interpret their relationship quality. Conversely, because avoidantly attached individuals tend to dismiss the relational components of love (Mikulincer & Goodman, 2006), they may experience sexual activity and relationship quality as distinct components. To

test these hypotheses, 50 heterosexual cohabiting couples completed daily diary measures of interactions with their partner for 42 days. It was found that the links between sexual experiences and perceived relationship quality was stronger for anxiously attached individuals, and weaker for avoidantly attached individuals. Anxiously attached males appraised relationship quality by the act of sexual intercourse the previous day. In contrast, anxiously attached females appraised relationship quality by the feelings they experienced during sex the previous day. However, both anxiously attached males and females used sex to gauge the quality of their relationship. Avoidantly attached individuals inhibited the effects of both positive and negative sexual experiences on daily relationship interactions, such that couples with highly avoidant partners were less affected by relational sex. There were no notable gender differences.

Overall, Birnbaum et al.'s (2006) findings suggest that anxiously attached individuals, particularly females, translate feelings about sex into feelings about their relationship in general. Conversely, avoidantly attached individuals differentiate sex from other aspects of romantic love. However, this study was limited by using direct penile-vaginal intercourse to examine sexual interactions. By using more comprehensive measures which encompass a range of sexual functioning elements, such as oral sex and sexual satisfaction, different factors of results may be found. Moreover, exploring these associations in different types of partnerships, such as with homosexual couples, may facilitate additional insight into the experience of romantic relationships in the general population.

Extending this study, Birnbaum (2007) explored the associations between insecure attachment, sexual functioning, and relationship satisfaction. Ninety-six heterosexual females completed self-report measures of attachment, sex, and

relationship satisfaction. It was found that anxious attachment was significantly associated with relational and sexual dissatisfaction, with sexual satisfaction mediating the link between relationship satisfaction and anxious attachment. Therefore, anxiously attached females relied on sexual satisfaction to assess the quality of their relationship. In contrast, there were no significant associations between avoidant attachment and sexual or relational satisfaction. These findings contradict research which suggests that avoidant attachment is inversely related to sexual satisfaction (Butzer & Campbell, 2008) and relationship satisfaction (Mikulincer & Shaver, 2007b). However, the avoidantly attached females in the current study were older ($M = 44.95$ years) and involved in highly committed relationships. Hence, these females may have perceived their relationship as more functional and satisfactory than other avoidantly attached females typically employed in research, who are generally younger and in less committed relationships (Birnbaum, 2007; Mikulincer & Shaver, 2007a). These results indicate that avoidantly attached individuals may end their partnerships before they reach the phase of extreme relational or sexual dissatisfaction. This is congruent with past research which suggests that avoidantly attached individuals exit their relationships as soon as they become dissatisfied and anxiously attached individuals are likely to remain in dissatisfying relationships due to fears of separation (Mikulincer & Shaver, 2007a). However, further research examining both males and females in different types of partnerships is necessary to clarify the inconsistent research.

Butzer and Campbell (2008) examined self-reported attachment, sexual satisfaction, and relationship satisfaction in 116 heterosexual married couples. They extended Birnbaum et al.'s (2006) study by investigating what individuals in

marital relationships felt about their sexual relationship in general, as opposed to focusing on perceived relationship quality following a particular sexual interaction. It was found that anxiously attached individuals showed higher levels of marital satisfaction when their sexual satisfaction was also high. Such results are consistent with previous research suggesting that because anxiously attached individuals are sensitive to cues that denote support or rejection, they rely on their sexual experiences to assess overall relationship quality (Mikulincer & Shaver, 2007a). In contrast, avoidantly attached individuals reported lower levels of marital satisfaction, regardless of their levels of sexual satisfaction. Such results are in line with research suggesting that avoidantly attached individuals are dissatisfied with their romantic relationships (Mikulincer & Shaver, 2007a) and tend to engage in sex for self-enhancing reasons, extraneous to their relationship (Birnbaum & Reis, 2006). There were no gender differences within these results.

Although this study extended prior research, several shortcomings were apparent. Namely, the scope of sexual functioning and relationship functioning was limited by measurements of satisfaction alone. Moreover, these relationships were only investigated in married populations, therefore different results may be found in dating or homosexual partnerships.

Chapter Summary

In summary, there is limited empirical research exploring the interrelationships among adult attachment, relationship functioning, and sexual functioning. However, the literature suggests that both anxious and avoidant attachment are associated with the way an individual interprets and responds in their sexual and relational interactions (Mikulincer & Shaver, 2007a). There are limitations to the conclusions that can be drawn from these past associations due to

the narrow conceptualization of sexual functioning and relationship functioning. Moreover, the samples are restricted by age-range, gender, or relationship status. There is also a lack of gender comparisons. Indeed, addressing these methodological issues may not only resolve the inconsistent research, but may extend our understanding of the associations among adult attachment, relationships, and sex.

CHAPTER 8

The Present Study

Summary of Previous Research

Empirical research consistently indicates that different patterns of attachment developed in infancy persist into adulthood and influence the way individuals interpret and respond in their sexual and relational interactions (Hazan & Shaver, 1994). Given that the nature of romantic relationships has an important bearing on quality of life (Vangelisti & Perlman, 2006), it is important that its central characteristics are explored in greater depth.

Specifically, the fear of rejection experienced by anxiously attached individuals, and the discomfort with intimacy experienced by avoidantly attached individuals, is associated with satisfaction, intimacy, communication, commitment, and conflict in romantic relationships (Mikulincer & Shaver, 2007a). However, most of the research examines attachment within the context of a specific relationship domain (e.g., satisfaction) (Kane et al., 2007). Therefore, the links between these central relationship dimensions and adult attachment have yet to be collectively investigated. Moreover, a large portion of this research has focused on married populations or university samples (Mikulincer & Shaver, 2007a; Vangelisti & Perlman, 2006). Consequently, the way these variables are related in other partnerships, such as with dating or homosexual couples, is less well established. Additionally, there is insufficient research on gender differences (Rholes & Simpson, 2004), and the use of inadequate instruments has yielded inconsistent findings (Mikulincer & Shaver, 2007a).

Similarly, the literature between attachment and sexual functioning is limited, and tends to focus on sexual attitudes or behaviours (Butzer & Campbell, 2008). However, research indicates that both anxious and avoidant attachment are differentially related to sexual dysfunctions, satisfaction, frequency, guilt, and sexual anxiety (Birnbaum, 2007; Davis et al., 2006; Mikulincer & Shaver, 2007a). Despite these empirical trends, the literature is relatively limited and inconsistent. Moreover, the research is confounded by employing inadequate instruments and samples which mostly comprise married couples or females (Mikulincer & Shaver, 2007a).

Although attachment theory provides an important framework to understand the dynamic nature of romantic relationships (Hazan & Shaver, 1994), relatively little attention has been given to the interrelationships among adult attachment, relationship functioning, and sexual functioning. The few studies that have explored these dimensions have been limited by non-representative samples, a lack of gender difference comparisons, and conceptualizing the variables in unidimensional ways (Birnbaum, 2007; Birnbaum & Reis, 2006; Butzer & Campbell, 2008). Indeed, the current literature has been relatively simplistic in the way it has explored the nature of these variables. Future research needs to reflect the complexity of these domains by encompassing their broad components.

Specifically, although prior research has looked at aspects of these associations, it is limited by not comprehensively examining all the components of romantic relationships within a theoretical model. It is necessary to have an understanding of the multifaceted way adult attachment is linked to different emotions and behaviours in romantic relationships, and how it is related to the expression of sexuality in various partnerships. Addressing this gap would constitute a significant

contribution to the psychological literature. Moreover, it is important that the samples adequately represent different age groups, different partnerships, and different sexual orientations to ensure the results can translate to the general population. Further, the use of psychometrically sound instruments can elucidate the inconsistent findings, and research on gender differences is also needed to expand the existing literature. The current research is investigating relationship functioning and sexual functioning at the individual level. However, the dynamic of a romantic partnership can impact various components of relationship quality, as described in chapters 5, 6, and 7.

Future research which addresses these methodological limitations can contribute valuable knowledge to the fields of attachment, relationship functioning, and sexual functioning. Moreover, it can facilitate additional insight into the reasons why individuals think and behave differently in their partnerships, and the implications this has for understanding various relationship experiences. This may assist clinicians with developing specific treatment plans for individuals and couples experiencing relationship distress or discord. Hence, future research to evaluate these areas of interest is warranted.

Aims and Hypotheses

The current study aims to examine the associations among adult attachment, relationship functioning, and sexual functioning for a range of relationships (i.e., married, de facto, dating, homosexual, and bisexual partnerships).

Two major hypotheses were proposed for this research. It is predicted that:

- (1) Greater relationship satisfaction, intimacy, communication, and commitment will be negatively associated with attachment anxiety and

avoidance, and relationship conflict will be positively related to attachment anxiety and avoidance for all types of partnerships, with no expected gender differences.

- (2) Greater sexual dysfunction, sexual guilt and sexual anxiety will be positively related to attachment anxiety and avoidance, and sexual satisfaction and sexual frequency will be negatively related to attachment anxiety and avoidance for all types of partnerships, with no expected gender differences.

CHAPTER 9

Method

Participants

The initial sample comprised 518 individuals aged 18 years and over. Upon screening the data, cases with extreme scores on one or more variables were detected and deleted. Specifically, three multivariate outliers ($\chi^2 > 49.80$) and four univariate outliers (one case for relationship satisfaction and three cases for sexual frequency determined by $z \pm 3.3$) were removed. The final sample consisted of 511 individuals, 123 males and 388 females. Participants were aged between 19 and 77 ($M = 26.86$ years, $SD = 9.58$ years) with 2 unrecorded data points. Relationship length varied in duration from three months to 49 years ($M = 4.38$, $SD = 6.11$). Inclusion criteria for selection were fluency in English, aged 18 years and over, and the experience of a current or past romantic relationship.

Materials

Demographic and Background Questionnaire. The questionnaire consisted of seven questions regarding basic demographic information such as age, gender, and sexual orientation. Additionally, it included questions related to relationships such as relationship status and relationship duration. All items were scored categorically (see Table 10.1 for the sample descriptive statistics).

Experiences in Close Relationships Scale – Short Form (ECR-S; Wei et al., 2007). The ECR-S is a short form of Brennan, Clark and Shaver's (1998) Experiences in Close Relationships Questionnaire (ECR). The ECR-S consisted of 12 self-report items which measured individual differences on two dimensions: six

items for anxious attachment (e.g., “I need a lot of reassurance that I am loved by my partner”) and six items for avoidant attachment (e.g., “I try to avoid getting close to my partner”). All items were rated on a 7-point scale ranging from 1 (strongly disagree) to 7 (strongly agree). Subscale scores were computed for each dimension (anxiety and avoidance) and ranged from 12 to 84. Higher scores indicated greater attachment anxiety or avoidance. According to Wei et al. (2007), the ECR-S has adequate internal consistency, with Cronbach alpha coefficients ranging from .77 to .88 for both dimensions. Discriminate validity was demonstrated with significant positive correlations of .33 for the anxiety subscale and .31 for the avoidance subscale with the Depression, Anxiety and Stress scale, an analogous measure (Wei et al., 2007). In the current study, the Cronbach alpha coefficient was .72 for the anxiety subscale and .79 for the avoidance subscale.

Relationship Assessment Scale (RAS; Hendrick, 1988). The RAS is a seven item self-report measure of relationship satisfaction (e.g., “In general, how satisfied were you with your relationship?”). All items were rated on a 5-point scale ranging from 1 (unsatisfied) to 5 (extremely satisfied) and total scores were calculated by averaging all item responses, including two that were reverse-scored. Scores for this dimension ranged from 7 to 35, and higher scores indicated greater relationship satisfaction. This measure has adequate internal consistency, with a Cronbach alpha coefficient of .91 (Vaughn & Matyastik Baier, 1999). Convergent validity has been demonstrated with significant positive correlations of .84 with the Dyadic Adjustment Scale, a comparable measure of relationship satisfaction (Vaughn & Matyastik Baier, 1999). In the current study, the Cronbach alpha coefficient for overall relationship satisfaction was .87.

Personal Assessment of Intimacy in Relationships (PAIR; Schaefer & Olson, 1981). The PAIR is a 36 item self-report questionnaire measuring relationship intimacy in five areas: emotional, social, sexual, recreational, and intellectual. The current study combined the five subscales to form a global intimacy scale which utilized 24 items (e.g., “My partner listens to me when I need someone to talk too”). All items were rated on a 5-point scale ranging from 1 (strongly disagree) to 5 (strongly agree). Scores for this dimension ranged from 24 to 120, and higher scores indicated greater levels of relationship intimacy. This measure has adequate internal consistency, with Cronbach alpha coefficients of .70 and above for the five different domains (Schaefer & Olson, 1981). Moreover, Schaefer and Olson (1981) reported satisfactory convergent and discriminant validity. In the current study, the Cronbach alpha coefficient for overall intimacy was .90.

Communication Patterns Questionnaire – Short Form (CPQ-SF; Christensen & Heavey, 1990). The CPQ-SF is a short version of the Communication Patterns Questionnaire (CPQ; Christensen & Sullaway, 1984). It consisted of 11 self-administered items that measured marital communication patterns in three main areas: demand/withdraw and criticize/defend, positive communication, and destructive communication. The current study adapted the questionnaire to eight items that measured communication in married, dating, and homosexual partnerships (e.g., “When issues or problems arise, both partners avoid discussing the problem”). The three subscales were combined to create a global communication scale. All items were rated on a 9-point scale ranging from 1 (very unlikely) to 9 (very likely) and scores ranged from 11 to 99. Higher scores indicated greater levels of negative communication. Futris, Campbell, Nielsen, and Burwell

(2010) found good internal consistency of the scale, with Cronbach alpha coefficients ranging from .61 to .83. Moreover, convergent validity was demonstrated with significant positive correlations between .39 to .45 with the Revised Dyadic Adjustment Scale (RDAS), which measures related constructs (Futris et al., 2010). In the current study, the Cronbach alpha coefficient for the global negative communication scale was .86.

Investment Model Scale (IMS; Rusbult et al., 1998). The IMS is a self-administered 36 item questionnaire measuring commitment level in romantic relationships across four different domains: satisfaction level, quality of alternatives, investment size, and commitment level. The current study used the 6 global items to measure overall commitment level in romantic relationships (e.g., “I want our relationship to last for a very long time”). All items were rated on a 9-point scale ranging from 0 (disagree completely) to 8 (agree completely). Scores ranged from 0 to 54, and higher scores indicated greater commitment to the relationship. High internal consistency has been found, with Cronbach alpha coefficients ranging from .91 to .95 for commitment level (Rusbult et al., 1998). Additionally, convergent validity was demonstrated with significant associations to other measures reflecting positive couple functioning (e.g., dyadic adjustment, trust level, inclusion of other in the self) (Rusbult et al., 1998). In the current study, the Cronbach alpha coefficient for overall commitment level was .92.

Ineffective Arguing Inventory (IAI; Kurdek, 1994). The IAI is an 8 item self-report measure of conflict in romantic relationships (e.g., “Our arguments are left hanging and unresolved”). All items were rated on a 5-point scale ranging from 1 (strongly disagree) to 5 (strongly agree). Scores ranged from 8 to 40, and higher scores indicated greater conflict in the relationship. According to Kurdek (1994),

the IAI has adequate internal consistency with Cronbach alpha coefficients ranging from .86 to .89. Moreover, discriminant validity has been found with significant negative correlations with global relationship satisfaction (-.62 to -.71) (Kurdek, 1994). In the current study, the Cronbach alpha coefficient for relationship conflict was .91.

Sexual Frequency. This questionnaire consisted of three self-report items regarding the frequency of sexual intercourse, performing oral sex, and receiving oral sex within the past four weeks. Scores ranged from 0 to 135, and higher scores indicated greater sexual frequency. In the current study, the Cronbach alpha coefficient was .84 for the sexual frequency scale.

Revised Mosher Guilt Inventory (MGI-R; Janda & Bazemore, 2011). The MGI-R is a short-form of Mosher's (1966) Forced-Choice Guilt Inventory. The MGI-R consisted of 10 self-administered items measuring sex guilt in romantic relationships (e.g., "When I have sexual dreams I try to forget them"). All items were rated on a 7-point scale ranging from 0 (not at all true) to 6 (extremely true for me) and ranged from 0 to 60. Higher scores indicated a greater experience of sex guilt. This measure has adequate internal consistency, with a Cronbach alpha coefficient of .82 (Janda & Bazemore, 2011). Additionally, convergent validity was indicated with significant correlations of .61 with the Non-acceptance of Sexuality Scale, an analogous measure (Janda & Bazemore, 2011). In the current study, the Cronbach alpha coefficient for sex guilt was .74.

Sex Anxiety Inventory (SAI; Janda & O'Grady, 1980). The SAI is a self-administered 25 item questionnaire measuring sexual anxiety in romantic relationships (e.g., "I feel nervous about initiating sexual relations"). All items were

forced-choice format, with one alternative representing an anxiety response and the other alternative representing a non-anxiety response. Each sex anxiety response is scored as 1 point, resulting in a possible range of scores from 0 to 25. Janda and O'Grady (1980) reported adequate internal consistency, with Cronbach alpha coefficients of .86. Moreover, concurrent validity has been demonstrated by using the scale to predict self-reported sexual experiences of both men and women (Janda & O'Grady, 1980). In the current study, the Cronbach alpha coefficient for sex anxiety was .79.

Female Sexual Function Index (FSFI; Rosen et al., 2000). The FSFI is a 19 item self-report questionnaire measuring female sexual function across six domains: two items for desire, four items for arousal, four items for lubrication, three items for orgasm, three items for satisfaction, and three items for pain (e.g., "Over the past four weeks, how often did you feel sexually aroused during sexual activity or intercourse?"). All items were rated on either a 5 or 6-point scale ranging from 0 or 1 (almost never or never) to 5 (almost always or always) and ranged from 0 to 95. Higher scores indicated healthier sexual functioning. The FSFI has good internal consistency, with Cronbach alpha coefficients of .82 and higher (Rosen et al., 2000). Discriminant validity has been demonstrated by the FSFI being able to differentiate between women with and without a diagnosis of female orgasm disorder and hypoactive sexual desire disorder (Rosen et al., 2000). In the current study, the Cronbach alpha coefficients were .84 for desire, .90 for arousal, .93 for lubrication, .95 for orgasm, .93 for sexual satisfaction, and .96 for pain.

International Index of Erectile Function (IIEF; Rosen et al., 1997). The IIEF is a 15-item self-administered questionnaire measuring male sexual function across five domains: six items for erectile function, two items for orgasmic

function, two items for sexual desire, three items for intercourse satisfaction, and two items for overall sexual satisfaction (e.g., “Over the past four weeks, how often were you able to get an erection during sexual activity?”). All items were rated on a 6-point scale ranging from 0 (almost never or never) to 5 (almost always or always) and ranged from 0 to 75. Higher scores indicated healthier sexual functioning. The IIEF demonstrated adequate internal consistency, with Cronbach alpha values of .73 and higher (Rosen et al., 1997). Moreover, convergent validity has been identified, with significant positive correlations between independent clinician ratings of male sexual functioning (Rosen et al., 1997). In the current study, the Cronbach alpha coefficients were .89 for erectile function, .75 for orgasmic function, .85 for desire, .87 for intercourse satisfaction, and .90 overall sexual satisfaction.

Procedure

Ethics approval was obtained from the Deakin University Human Research Ethics Committee (DUHREC) before recruitment or data collection commenced (see Appendix A). Men and women were required to be over 18 years of age and involved in a romantic relationship (of any sexual orientation) or had experienced a romantic relationship for three or more months in the past.

Participant recruitment was achieved through advertising the study as an investigation of romantic bonds in adulthood and posting the questionnaire link on a number of social media websites, in addition to health and research organization websites (see Appendix B for the recruitment notice and Appendix C for a list of websites). The study was also featured in a number of local and national Australian newspapers and an electronic student newsletter in early 2012 (see Appendix D for

Press Release). The use of the Internet allowed for diversity in the study sample, with individuals from numerous countries able to participate.

All the measures were digitized and uploaded to an independent on-line survey website together with the demographic questions (see Appendix E) and the plain language statement (see Appendix F). Participants were informed of the purpose of the study and no monetary reimbursement was offered. Consent was implied by the participants deciding to complete the survey after reading the plain language statement. Completion of the measures took approximately 30 minutes. In order to ensure participant confidentiality and anonymity, no names or other identifying information were requested.

CHAPTER 10

Results

Chapter Overview

In this chapter, the results of the thesis are presented. The chapter begins by providing an overview of the descriptive and preliminary analyses employed to treat the data. Following this, a series of hierarchical multiple regressions were conducted to examine the relationships between anxious and avoidant attachment, relationship functioning, and sexual functioning for men and women. These analyses evaluated the hypotheses outlined at the end of chapter 8. The chapter concludes with a summary of the main findings from the current study.

Participants

In addition to gender, age, and relationship duration outlined above, descriptive statistics on marital status, sexual orientation, and relationship status are reported for the participants in Table 10.1.

Descriptive and Preliminary Analyses

Data analyses were performed using the Statistical Package for Social Sciences (SPSS) for Windows, Version 20.0. Randomly occurring missing values accounted for less than 5% of items in all scales. As such, the expectation maximization method was employed to iteratively replace the missing values within the data set (Tabachnick & Fidell, 2007). Internal consistency was examined for all measures and found to be acceptable ($\alpha > .7$), except for two scales (DeVellis, 1991). Specifically, items 4 and 7 for the relationship satisfaction variable ($\alpha = .16$ before deletion and $.87$ after deletion) and item 13 for the female sexual arousal

variable ($\alpha = .64$ before deletion and $.90$ after deletion) were removed as they reduced the reliability of these scales.

Table 10.1

Descriptive Statistics of Participants in the Sample (N = 511)

| Variable | Males n (%) | Females n (%) |
|---|-------------|---------------|
| <i>Marital Status - Heterosexual</i> | | |
| Single | 30 (27.8%) | 54 (16.1%) |
| Dating | 42 (38.9%) | 173 (51.5%) |
| Married | 16 (14.8%) | 43 (12.8%) |
| de Facto | 16 (14.8%) | 59 (17.6%) |
| Divorced | 2 (1.9%) | 5 (1.5%) |
| Separated | 0 | 2 (.6%) |
| Widowed | 1 (.9%) | 0 |
| <i>Relationship status - Heterosexual</i> | | |
| In a Relationship | 73 (67.6%) | 267 (79.5%) |
| Not in Relationship | 35 (32.4%) | 68 (20.2%) |
| <i>Marital Status - Bisexual</i> | | |
| Single | 2 (28.6%) | 7 (20.6%) |
| Dating | 0 | 13 (38.2%) |

| | | |
|----------|-----------|-----------|
| Married | 2 (28.6%) | 5 (14.7%) |
| de Facto | 3 (42.9%) | 8 (23.5%) |
| Divorced | 0 | 1 (2.9%) |

Relationship status - Bisexual

| | | |
|-----------------------|-----------|------------|
| In a Relationship | 6 (85.7%) | 25 (73.5%) |
| Not in a Relationship | 1 (14.3%) | 9 (26.6%) |

Marital Status - Homosexual

| | | |
|----------|-----------|------------|
| Single | 4 (66.7%) | 0 |
| Dating | 1 (16.7%) | 11 (78.6%) |
| Married | 0 | 1 (7.1%) |
| de Facto | 1 (16.7%) | 2 (14.3%) |

Relationship status - Homosexual

| | | |
|-----------------------|-----------|-----------|
| In a Relationship | 2 (33.3%) | 14 (100%) |
| Not in a Relationship | 4 (66.7%) | |

Assumptions of normality were investigated by calculating descriptive statistics and z-scores for all the variables. Examination of skewness and kurtosis indicated that eight of the variables were positively skewed and four were negatively skewed (z skew greater than +/-3.29). Tabachnick and Fidell (2007)

suggest that with large sample sizes, the standard error for skewness decreases and consequently, skewness is likely to be significant even with minor deviations from normality. Hence, given the large sample size of the current study, the non-normal distribution of the variables was not concerning. Means, standard deviations, skewness, and kurtosis values for all variables are displayed in Table 10.2.

Residual scatterplots, Mahalanobis distances, and normal probability plots were generated to evaluate the assumptions relevant to multiple regression. Results demonstrated that the assumptions of normality, linearity, homoscedasticity, multicollinearity, and independence of residuals were satisfactory for all variables.

In order to determine whether there was significant differences between participants currently in a relationship compared to those reporting on a past romantic relationship, a one-way ANOVA was conducted between the two groups for the relationship and sexual functioning variables. The results indicated that there was a statistically significant effect between the two groups for relationship satisfaction $F(1, 507) = 143.30, p < .05$, intimacy $F(1, 507) = 72.30, p < .05$, negative communication $F(1, 507) = 34.57, p < .05$, commitment $F(1, 507) = 114.93, p < .05$, and conflict $F(1, 507) = 81.51, p < .05$. However, there was no significant differences between the two groups for sexual frequency $F(1, 507) = 1.02, p > .05$, sex guilt $F(1, 507) = .03, p > .05$, and sex anxiety $F(1, 507) = .01, p > .05$. The differences between the groups were not substantial enough to affect the final results, and so all participants were included in the analysis as a single sample.

Table 10.2

Means, Standard Deviations, Z Skew and Z Kurtosis Values for Adult Romantic Attachment, Relationship Functioning, and Sexual Functioning

| Variable | <i>M</i> | <i>SD</i> | <i>Z</i> | <i>Z Kurtosis</i> | <i>α</i> |
|---------------------------------|----------|-----------|----------|-------------------|----------|
| | | | Skew | | |
| <i>ECR-S</i> | | | | | |
| Avoidance | 14.41 | 6.33 | 6.42 | .11 | .79 |
| Anxiety | 22.35 | 7.07 | 2.63 | -1.41 | .72 |
| <i>Relationship Functioning</i> | | | | | |
| Satisfaction | 19.97 | 4.21 | -8.15 | 1.18 | .87 |
| Intimacy | 87.89 | 15.57 | -4.60 | -.77 | .90 |
| Communication | 31.37 | 13.42 | 2.29 | -2.92 | .86 |
| Commitment | 39.61 | 11.14 | -14.58 | 8.54 | .92 |
| Conflict | 19.15 | 8.03 | 5.42 | -2.37 | .91 |
| <i>Sexual Functioning</i> | | | | | |
| Frequency | 18.37 | 19.02 | 19.32 | 29.66 | .84 |
| Guilt | 20.18 | 9.18 | 3.89 | .05 | .74 |

| | | | | | | |
|----------------------|-------------------|-------|-------|-------|-------|-----|
| | Anxiety | 33.04 | 4.23 | 4.91 | .57 | .79 |
| <i>FSFI (Female</i> | | | | | | |
| <i>Only) N = 388</i> | | | | | | |
| | Desire | 5.27 | 4.84 | -1.19 | 39.77 | .84 |
| | Arousal | 11.23 | 6.78 | 3.51 | 21.11 | .90 |
| | Lubrication | 16.39 | 11.37 | 2.73 | 38.92 | .93 |
| | Orgasm | 9.59 | 8.42 | -2.39 | 22.55 | .95 |
| | Satisfaction | 11.05 | 6.50 | -1.53 | 15.09 | .93 |
| | Pain | 11.39 | 15.42 | -.10 | 46.10 | .96 |
| <i>IIEF (Male</i> | | | | | | |
| <i>Only) N = 123</i> | | | | | | |
| | Erectile Function | 24.93 | 6.92 | -6.29 | 2.63 | .89 |
| | Orgasm | 7.49 | 3.05 | -3.38 | .29 | .75 |
| | Desire | 7.62 | 1.99 | -2.69 | .57 | .85 |
| | Intercourse | 9.62 | 4.82 | -2.29 | .31 | .87 |
| | Satisfaction | | | | | |
| | Overall | 6.93 | 2.73 | -.65 | -.93 | .90 |
| | Satisfaction | | | | | |

Note. $N = 511$. ECR-S = Experiences in Close Relationships Scale-Short Form; FSFI =

Female Sexual Functioning Index; IIEF = International Index of Erectile Function.

MANOVA for Sexual Orientation on the Relationship and Sexual Functioning Variables

For the following analyses, males and females were analyzed separately because different scales were used to evaluate sexual dysfunction between the groups. A one-way between-groups multivariate analysis of variance (MANOVA) was performed to explore the differences between sexual orientation on the relationship and sex variables for males. The independent variable was sexual orientation (heterosexual, homosexual, and bisexual). The dependant variables were anxious and avoidant attachment, relationship satisfaction, intimacy, communication, commitment, conflict, sexual frequency, sex guilt, sex anxiety, and male sexual dysfunction. The results indicated that there was a statistically significant difference between sexual orientation on the combined dependant variables, $F(13, 109) = 1.58, p < .05$; partial eta squared = .18. Pillai's trace was interpreted for significance as Tabachnick and Fidell (2007) suggested that with unequal sample sizes, this statistic is more robust than Wilks' Lambda. Post-hoc analyses were conducted, and an inspection of the mean scores indicated that the heterosexual males ($M = 19.20, SD = 4.01$) reported higher levels of relationship satisfaction than the homosexual ($M = 14.83, SD = 6.18$) and bisexual ($M = 17.29, SD = 5.79$) males.

A second MANOVA was performed to explore the differences between sexual orientation on the relationship and sex variables for females. The independent variable was sexual orientation (heterosexual, homosexual, and bisexual). The dependant variables were anxious and avoidant attachment, relationship satisfaction, intimacy, communication, commitment, conflict, sexual frequency, sex guilt, sex anxiety, and female sexual dysfunction. The results

indicated that there was a statistically significant difference between sexual orientation on the combined dependant variables, $F(14, 373) = 3.43, p < .001$; partial eta squared = .13.

Post-hoc analyses were conducted, and an inspection of the mean scores indicated that bisexual females ($M = 14.37, SD = 7.6$) reported lower levels of sex guilt than the heterosexual ($M = 21.59, SD = 9.16$) and homosexual ($M = 21.49, SD = 10.54$) females. Moreover, homosexual females ($M = 36.43, SD = 4.54$) reported higher levels of sex anxiety than the heterosexual ($M = 33.54, SD = 4.08$) and bisexual females ($M = 31.58, SD = 3.85$). Finally, homosexual females reported lower levels of female sex pain ($M = 5.93, SD = 6.32$) than the heterosexual ($M = 11.87, SD = 4.27$) and bisexual ($M = 10.40, SD = 5.21$) females. Consequently, sexual orientation was controlled in relevant analyses by placing it into Step 1 of each subsequent hierarchical multiple regression.

MANOVA for Gender on the Relationship and General Sexual Functioning Variables

A one-way between-groups MANOVA was performed to explore the effect of gender on the relationship functioning variables. The independent variable was gender and the dependant variables were relationship satisfaction, intimacy, communication, commitment, and conflict. The results indicated that there was a statistically significant effect of gender on the combined dependant variables, $F(5, 505) = 5.41, p < .001$; partial eta squared = .05.

When the results of the dependant variables were considered separately, all five variables reached statistical significance using the Bonferroni adjusted alpha level of .01. For relationship satisfaction, $F(1, 509) = 11.11, p < .001$; partial eta squared = .02, females reported higher levels ($M = 20.32, SD = 4.13$) than males ($M = 18.88, SD = 4.29$). For intimacy, $F(1, 509) = 19.43, p < .001$; partial eta

squared = .04, females reported higher levels ($M = 89.57$, $SD = 15.69$) than males ($M = 82.60$, $SD = 13.97$). For negative communication, $F(1, 509) = 12.14$, $p < .001$; partial eta squared = .02, males reported higher levels ($M = 35.00$, $SD = 12.12$) than females ($M = 30.21$, $SD = 13.62$). For commitment, $F(1, 509) = 16.99$, $p < .001$; partial eta squared = .03, females reported higher levels ($M = 40.73$, $SD = 10.47$) than males ($M = 36.06$, $SD = 12.42$). Lastly, for conflict, $F(1, 509) = 11.26$, $p < .001$; partial eta squared = .02, males reported higher levels ($M = 21.25$, $SD = 7.89$) than females ($M = 18.49$, $SD = 7.97$).

A second MANOVA was performed to examine the effect of gender on general sexual functioning. The independent variable was gender and the dependant variables were sexual frequency, sex guilt, and sex anxiety. The results indicated that there was a statistically significant effect of gender on the combined dependant variables, $F(3, 507) = 7.81$, $p < .001$; partial eta squared = .04. When the results of the dependant variables were considered separately, only two of the variables reached statistical significance using the Bonferroni adjusted alpha level of .017. For sex guilt, $F(1, 509) = 9.39$, $p < .001$; partial eta squared = .02, females reported higher levels ($M = 20.88$, $SD = 9.32$) than males ($M = 17.99$, $SD = 8.41$). Similarly, for sex anxiety, $F(1, 509) = 16.31$, $p < .001$; partial eta squared = .03, females reported higher levels ($M = 33.46$, $SD = 4.17$) than males ($M = 31.72$, $SD = 4.15$). There was no significant difference for sexual frequency, $F(1, 509) = 2.44$, $p > .05$.

Correlations Among Attachment, Relationship Functioning and Sexual Functioning for Men and Women

Two-way Pearson product moment correlation coefficients were calculated to explore the association among adult attachment, relationship functioning, and sexual functioning. Two correlation matrices, which separate males and females,

are presented in Table 10.3 and 10.4. Cohen (1992) criteria was employed to assess the strength of relationships such that a significant correlation of $r \geq .1$ was considered small, $r \geq .3$ was considered medium, and $r \geq .5$ was considered a large effect.

For males, Table 10.3 indicated that avoidant attachment had a medium negative relationship with relationship satisfaction, intimacy and commitment, and a medium positive relationship with negative communication and conflict. Additionally, avoidant attachment had a small positive relationship with sex guilt. In contrast, anxious attachment had a medium negative relationship with relationship satisfaction and intimacy, a medium positive relationship with negative communication, and a small positive relationship with conflict. Moreover, anxious attachment had a medium positive relationship with sex anxiety, a medium negative relationship with erectile function, and a small negative relationship with sexual satisfaction and overall sexual satisfaction.

A number of associations were identified between relationship functioning and sexual functioning for males. Specifically, relationship satisfaction had a small positive relationship with erectile function, sexual desire and sexual satisfaction, and a medium positive relationship with overall sexual satisfaction. Intimacy had a small negative relationship with sex anxiety, a small positive relationship with sexual satisfaction, and a medium positive relationship with overall sexual satisfaction. Additionally, negative communication had a small positive relationship with sex guilt and sex anxiety, and a small negative relationship with overall sexual satisfaction. Commitment had a small positive relationship with sex anxiety. Finally, conflict had a small positive relationship with sex guilt and a medium negative relationship with overall sexual satisfaction.

For females, Table 10.4 indicated that avoidant attachment had a large negative relationship with relationship satisfaction, intimacy and commitment, and a medium positive relationship with negative communication and conflict. This is consistent with the findings for avoidantly attached males, although the correlations are larger for females. Moreover, avoidant attachment had a small negative relationship with sexual desire, arousal, lubrication, orgasm and sex pain, a small positive relationship with sex anxiety, and a medium negative relationship with sexual satisfaction. This is inconsistent with the findings for avoidantly attached males, whereby only sex guilt was found to be significant.

Nonetheless, the correlations between avoidant attachment and sexual functioning across genders are small. In contrast, anxious attachment had a medium negative relationship with relationship satisfaction and intimacy, and a medium positive relationship with negative communication and conflict. This is consistent with the findings for anxiously attached males. Additionally, anxious attachment had a small positive relationship with sex anxiety and a small negative relationship with sexual satisfaction. This is consistent with the findings for anxiously attached males, although no sexual dysfunction variables were significant for females.

A number of associations were identified between relationship functioning and sexual functioning for females. Relationship satisfaction had small positive relationships with sexual frequency, sexual desire, arousal, lubrication, orgasm and sex pain, a small negative relationship with sex anxiety, and a medium positive relationship with sexual satisfaction. Intimacy had a small positive relationship with sexual frequency, sexual desire, lubrication, orgasm and sex pain, a medium positive relationship with arousal, a small negative relationship with sex anxiety, and a large positive relationship with sexual satisfaction. Further, negative communication had a small negative relationship with sexual frequency, sexual desire, arousal, lubrication, orgasm and sex pain, a small positive relationship with sex anxiety, and a medium negative relationship with sexual satisfaction. Commitment had a small positive relationship with sexual frequency, sexual desire, arousal, orgasm, and a medium positive relationship with sexual satisfaction. Finally, conflict had a small negative relationship with sexual frequency, sexual desire, arousal, lubrication, orgasm and sex pain, a small positive relationship with sex anxiety, and a medium negative relationship with sexual satisfaction.

Hierarchical Multiple Regressions Between Adult Attachment and the Relationship and Sexual Functioning Variables

Eight separate hierarchical multiple regressions (HMR) were conducted to determine the extent to which anxious and avoidant attachment style was predicted by each of the relationship and sexual functioning variables, separately for men and women. In order to control for sexual orientation, this variable was entered in Step 1 of the analysis, and the relationship or sexual variables were entered in Step 2. Tables 10.5 to 10.12 display the unstandardized regression coefficients (B), the associated standard error ($SE B$), the standardized regression coefficients (β), and adjusted R^2 for each analysis.

Anxious Attachment and Male Relationship Functioning

The extent to which relationship functioning (satisfaction, intimacy, communication, commitment, and conflict) predicted anxious attachment in males was measured. Sexual orientation was entered in Step 1 and the five relationship functioning variables were entered in Step 2. The results are presented in Table 10.5.

Table 10.5 shows that for model 1, sexual orientation explained .1% of the variance, $F(1, 119) = .14, p > .05$. This percentage increased significantly when the five relationship variables were included, with model 2 explaining an additional 22% of the variance in anxious attachment after controlling for sexual orientation, $R^2 \text{ change} = .22, F \text{ change}(5, 114) = 6.47, p < .001$. After entry of the relationship variables in Step 2, the total variance explained by the model was 22.2% (adjusted $R^2 = .18$), $F(6, 114) = 5.42, p < .001$. In the final model, relationship satisfaction ($\beta = -.36, p < .01$) was negatively related and commitment ($\beta = .31, p < .01$) was positively related to anxious attachment.

Table 10.5

*HMR Analysis Predicting Anxious Attachment in Males from Relationship**Functioning Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>T</i> | Adjusted <i>R</i> square | <i>F</i> change |
|---------------------------|---------------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Anxious Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .47 | 1.23 | .04 | .38 | -.01 | .14 |
| Step 2 | Sexual Orientation | -.76 | 1.14 | -.06 | -.67 | .18 | 6.47*** |
| | Relationship Satisfaction | -.58 | .21 | -.36 | -2.7** | | |
| | Intimacy | -.11 | .06 | -.23 | -1.76 | | |
| | Negative Communication | -.03 | .08 | -.06 | -.40 | | |
| | Commitment | .17 | .06 | .31 | 3.05** | | |
| | Conflict | .06 | .12 | .07 | .49 | | |

** $p < .01$. *** $p < .001$.

Anxious Attachment and Female Relationship Functioning

The extent to which relationship functioning (satisfaction, intimacy, communication, commitment, and conflict) predicted anxious attachment in females was evaluated. Sexual orientation was entered in Step 1 and the five relationship functioning variables were entered in Step 2. The results are presented in Table 10.6.

Table 10.6 shows that for model 1, sexual orientation explained 0% of the variance, $F(1, 382) = .02, p > .05$. This percentage increased significantly when the five relationship variables were included, with model 2 explaining an additional 20% of the variance in anxious attachment after controlling for sexual orientation, $R^2 \text{ change} = .20, F \text{ change}(5, 377) = 18.38, p < .001$. After entry of the relationship variables in Step 2, the total variance explained by the model was 19.6% (adjusted $R^2 = .18$), $F(6, 377) = 15.32, p < .001$. In the final model, relationship satisfaction ($\beta = -.23, p < .01$) was negatively related and commitment ($\beta = .28, p < .001$) was positively related to anxious attachment.

Table 10.6

*HMR Analysis Predicting Anxious Attachment in Females from Relationship**Functioning Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>T</i> | Adjusted <i>R</i> square | <i>F</i> change |
|---------------------------|---------------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Anxious Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .08 | .62 | .01 | .13 | -.00 | .02 |
| Step 2 | Sexual Orientation | .62 | .57 | .05 | 1.09 | .18 | 18.38*** |
| | Relationship Satisfaction | -.40 | .15 | -.23 | -2.73** | | |
| | Intimacy | -.07 | .04 | -.16 | -1.86 | | |
| | Negative Communication | .06 | .04 | .11 | 1.39 | | |
| | Commitment | .19 | .04 | .28 | 4.40*** | | |
| | Conflict | .11 | .08 | .12 | 1.43 | | |

** $p < .01$. *** $p < .001$.

Avoidant Attachment and Male Relationship Functioning

The extent to which relationship functioning (satisfaction, intimacy, communication, commitment, and conflict) predicted avoidant attachment in males was assessed. Sexual orientation was entered in Step 1 and the five relationship functioning variables were entered in Step 2. The results are presented in Table 10.7.

Table 10.7 shows that for model 1, sexual orientation explained .2% of the variance, $F(1, 119) = .18, p > .05$. This percentage increased significantly when the five relationship variables were included, with model 2 explaining an additional 31% of the variance in avoidant attachment after controlling for sexual orientation, R^2 change = .31, F change (5, 114) = 10.02, $p < .001$. After entry of the relationship variables in Step 2, the total variance explained by the model was 31% (adjusted $R^2 = .27$), $F(6, 114) = 8.39, p < .001$. In the final model, intimacy ($\beta = -.32, p < .05$) was negatively related to avoidant attachment.

Avoidant Attachment and Female Relationship Functioning

The extent to which relationship functioning (satisfaction, intimacy, communication, commitment, and conflict) predicted avoidant attachment in females was measured. Sexual orientation was entered in Step 1 and the five relationship functioning variables were entered in Step 2. The results are presented in Table 10.8.

Table 10.7

*HMR Analysis Predicting Avoidant Attachment in Males from Relationship**Functioning Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>t</i> | Adjusted <i>R</i> square | <i>F</i> change |
|----------------------------|---------------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Avoidant Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .50 | 1.17 | .04 | .43 | -.01 | .18 |
| Step 2 | Sexual Orientation | -.61 | 1.02 | -.05 | -.60 | .27 | 10.02*** |
| | Relationship Satisfaction | -.09 | .19 | -.06 | -.46 | | |
| | Intimacy | -.15 | .06 | -.32 | -2.55* | | |
| | Negative Communication | .12 | .07 | .22 | 1.71 | | |
| | Commitment | -.10 | .05 | -.19 | -1.95 | | |
| | Conflict | -.09 | .11 | -.11 | -.77 | | |

* $p < .05$. *** $p < .001$.

Table 10.8 shows that for model 1, sexual orientation explained .6% of the variance, $F(1, 382) = 2.30, p > .05$. This percentage increased significantly when the five relationship variables were included, with model 2 explaining an additional 42% of the variance in avoidant attachment after controlling for sexual orientation, R^2 change = .42, F change (5, 377) = 54.12, $p < .001$. After entry of the relationship variables in Step 2, the total variance explained by the model was 42% (adjusted $R^2 = .41$), $F(6, 377) = 45.75, p < .001$. In the final model, relationship satisfaction ($\beta = -.24, p < .001$), intimacy ($\beta = -.31, p < .001$), and commitment ($\beta = -.19, p < .001$) were negatively related to avoidant attachment.

Anxious Attachment and Male Sexual Functioning

The extent to which sexual functioning (frequency, guilt, anxiety, erectile function, orgasm, desire, sexual satisfaction, and overall satisfaction) predicted anxious attachment in males was evaluated. Sexual orientation was entered in Step 1 and the eight sexual functioning variables were entered in Step 2. The results are presented in Table 10.9.

Table 10.9 shows that for model 1, sexual orientation explained .1% of the variance, $F(1, 119) = .14, p > .05$. This percentage increased significantly when the eight sex variables were included, with model 2 explaining an additional 23% of the variance in anxious attachment after controlling for sexual orientation R^2 change = .23, F change (8, 111) = 4.23, $p < .001$. After entry of the sex variables in Step 2, the total variance explained by the model was 24% (adjusted $R^2 = .17$), $F(9, 111) = 3.78, p < .001$. In the final model, sex anxiety ($\beta = .37, p < .001$) was positively related and erectile function ($\beta = -.44, p < .01$) was negatively related to anxious attachment.

Table 10.8

*HMR Analysis Predicting Avoidant Attachment in Females from Relationship**Functioning Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>t</i> | Adjusted <i>R</i> square | <i>F</i> change |
|----------------------------|---------------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Avoidant Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .82 | .54 | .08 | 1.52 | .00 | 2.30 |
| Step 2 | Sexual Orientation | .96 | .42 | .09 | 2.29* | .41 | 54.12*** |
| | Relationship Satisfaction | -.36 | .11 | -.24 | -3.33*** | | |
| | Intimacy | -.12 | .03 | -.31 | -4.40*** | | |
| | Negative Communication | .02 | .03 | .05 | .75 | | |
| | Commitment | -.11 | .03 | -.19 | -3.47*** | | |
| | Conflict | -.04 | .06 | -.05 | -.66 | | |

* $p < .05$. *** $p < .001$.

Table 10.9

*HMR Analysis Predicting Anxious Attachment in Males from Sexual Functioning**Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>t</i> | Adjusted <i>R</i> square | <i>F</i> change |
|---------------------------|--------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Anxious Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .47 | 1.23 | .04 | .38 | -.01 | .14 |
| Step 2 | Sexual Orientation | -.23 | 1.17 | -.02 | -.20 | .17 | 4.23*** |
| | Sexual Frequency | -.05 | .04 | -.11 | -1.09 | | |
| | Sex Guilt | -.02 | .08 | -.03 | -.29 | | |
| | Sex Anxiety | .60 | .16 | .37 | 3.76*** | | |
| | Erectile Function | -.41 | .14 | -.44 | -2.96** | | |
| | Orgasm | .06 | .26 | .03 | .22 | | |
| | Sexual Desire | .54 | .36 | .15 | 1.52 | | |

| | | | | |
|--------------|------|-----|------|------|
| Sexual | .38 | .23 | .26 | 1.64 |
| Satisfaction | | | | |
| Overall | -.24 | .29 | -.09 | -.83 |
| Sexual | | | | |
| Satisfaction | | | | |

** $p < .01$. *** $p < .001$.

Anxious Attachment and Female Sexual Functioning

The extent to which sexual functioning (frequency, guilt, anxiety, desire, arousal, lubrication, orgasm, sexual satisfaction, and pain) predicted anxious attachment in females was assessed. Sexual orientation was entered in Step 1 and the nine sexual functioning variables were entered in Step 2. The results are presented in Table 10.10.

Table 10.10 shows that for model 1, sexual orientation explained 0% of the variance, $F(1, 382) = .02, p > .05$. This percentage increased significantly when the nine sex variables were included, with model 2 explaining an additional 11% of the variance in anxious attachment after controlling for sexual orientation R^2 change = .11, F change (9, 373) = 4.99, $p < .001$. After entry of the sex variables in Step 2, the total variance explained by the model was 11% (adjusted $R^2 = .08$), $F(10, 373) = 4.49, p < .001$. In the final model, sex anxiety ($\beta = .28, p < .001$) and sexual desire ($\beta = .22, p < .001$) were positively related to anxious attachment, and sexual satisfaction ($\beta = -.29, p < .001$) was negatively related to anxious attachment.

Table 10.10

HMR Analysis Predicting Anxious Attachment in Females from Sexual Functioning Variables

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>t</i> | Adjusted <i>R</i> square | <i>F</i> change |
|---------------------------|--------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Anxious Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .08 | .62 | .01 | .13 | -.00 | .02 |
| Step 2 | Sexual Orientation | -.00 | .64 | .00 | -.00 | .08 | 4.99*** |
| | Sexual Frequency | .01 | .02 | .04 | .67 | | |
| | Sex Guilt | -.07 | .05 | -.09 | -1.34 | | |
| | Sex Anxiety | .48 | .12 | .28 | 4.12*** | | |
| | Sexual Desire | .85 | .24 | .22 | 3.52*** | | |
| | Arousal | .18 | .20 | .10 | .88 | | |
| | Lubrication | -.13 | .12 | -.09 | -1.06 | | |
| | Orgasm | .03 | .11 | .02 | .29 | | |

| | | | | |
|--------------|------|-----|------|----------|
| Sexual | -.55 | .14 | -.29 | -3.96*** |
| Satisfaction | | | | |
| Sex Pain | .05 | .10 | .03 | .51 |

*** $p < .001$.

Avoidant Attachment and Male Sexual Functioning

The extent to which sexual functioning (frequency, guilt, anxiety, erectile function, orgasm, desire, sexual satisfaction, and overall satisfaction) predicted avoidant attachment in males was evaluated. Sexual orientation was entered in Step 1 and the eight sexual functioning variables were entered in Step 2. The results are presented in Table 10.11.

Table 10.11 shows that for model 1, sexual orientation explained .2% of the variance, $F(1, 119) = .18, p > .05$. This percentage increased significantly when the eight sex variables were included, with model 2 explaining an additional 10% of the variance in avoidant attachment after controlling for sexual orientation, R^2 change = .10, F change (8, 111) = 1.57, $p > .05$. After entry of the sex variables in Step 2, the total variance explained by the model was 10% (adjusted $R^2 = .03$), $F(9, 111) = 1.41, p > .05$.

Avoidant Attachment and Female Sexual Functioning

The extent to which sexual functioning (frequency, guilt, anxiety, desire, arousal, lubrication, orgasm, sexual satisfaction, and pain) predicted avoidant attachment in females was assessed. Sexual orientation was entered in Step 1 and the nine sexual functioning variables were entered in Step 2. The results are presented in Table 10.12.

Table 10.11

HMR Analysis Predicting Avoidant Attachment in Males from Sexual Functioning Variables

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>t</i> | Adjusted <i>R</i> square | <i>F</i> change |
|----------------------------|--------------------|----------|-------------|---------|----------|--------------------------|-----------------|
| <i>Avoidant Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .50 | 1.17 | .04 | .42 | -.01 | .18 |
| Step 2 | Sexual Orientation | .58 | 1.20 | .05 | .48 | .03 | 1.57 |
| | Sexual Frequency | .08 | .04 | .21 | 1.85 | | |
| | Sex Guilt | .15 | .08 | .20 | 1.84 | | |
| | Sex Anxiety | .03 | .17 | .02 | .18 | | |
| | Erectile Function | .22 | .14 | .25 | 1.55 | | |
| | Orgasm | -.11 | .26 | -.06 | -.43 | | |
| | Sexual Desire | -.02 | .37 | -.01 | -.05 | | |

| | | | | |
|----------------|------|-----|------|--------|
| Sexual | -.51 | .24 | -.37 | -2.15* |
| Satisfaction | | | | |
| Overall Sexual | -.11 | .30 | -.04 | -.36 |
| Satisfaction | | | | |

* $p < .05$.

Table 10.12 shows that for model 1, sexual orientation explained .6% of the variance, $F(1, 382) = 2.30, p > .05$. This percentage increased significantly when the nine sex variables were included, with model 2 explaining an additional 16% of the variance in avoidant attachment after controlling for sexual orientation, R^2 change = .16, F change (9, 373) = 8.15, $p < .001$. After entry of the sex variables in Step 2, the total variance explained by the model was 17% (adjusted $R^2 = .15$), $F(10, 373) = 7.60, p < .001$. In the final model, sex anxiety ($\beta = .24, p < .001$) positively related to avoidant attachment, and orgasm ($\beta = -.18, p < .01$) and sexual satisfaction ($\beta = -.33, p < .001$) were negatively related to avoidant attachment.

Analyses of High and Low Anxious Attachment and Relationship Variables for Men and Women

A one-way between-groups multivariate analysis of variance (MANOVA) was performed to explore the difference between high and low anxious attachment (1.5 standard deviations above and below the mean) on the relationship variables. The independent variables were gender and anxious attachment (high and low). The dependant variables were relationship satisfaction, intimacy, communication, commitment, and conflict. The results indicated that there was a statistically significant effect for anxious attachment, $F(5, 505) = 7.14, p = .001$; partial eta squared = .07, on the combined dependant variables.

Table 10.12

*HMR Analysis Predicting Avoidant Attachment in Females from Sexual
Functioning Variables*

| Predicted Variable | Predictor | <i>B</i> | <i>SE B</i> | β | <i>T</i> | Adjusted <i>R</i> square | <i>F</i> change |
|----------------------------|-----------------------|----------|-------------|---------|----------|-----------------------------|-----------------|
| <i>Avoidant Attachment</i> | | | | | | | |
| Step 1 | Sexual Orientation | .82 | .54 | .08 | 1.52 | .00 | 2.30 |
| Step 2 | Sexual Orientation | 1.02 | .53 | .10 | 1.90 | .15 | 8.15*** |
| | Sexual Frequency | .00 | .02 | .00 | .02 | | |
| | Sex Guilt | -.07 | .04 | -.11 | -1.67 | | |
| | Sex Anxiety | .35 | .10 | .24 | 3.61*** | | |
| | Sexual Desire | .19 | .20 | .06 | .94 | | |
| | Arousal | .17 | .17 | .11 | 1.02 | | |
| | Lubrication | .04 | .10 | .03 | .35 | | |
| | Orgasm | -.24 | .09 | -.18 | -2.74** | | |

| | | | | |
|--------------|------|-----|------|----------|
| Sexual | -.55 | .12 | -.33 | -4.74*** |
| Satisfaction | | | | |
| Sex Pain | .03 | .08 | .02 | .31 |

** $p < .01$. *** $p < .001$.

However, there were no significant effects for gender.

Post-hoc analyses indicated that when the dependant variables were considered separately, four variables (i.e., relationship satisfaction, intimacy, negative communication, and conflict) reached statistical significance using the Bonferroni adjusted alpha level of .01. For relationship satisfaction, $F(2, 508) = 23.82$, $p = .001$, individuals high in anxious attachment ($M = 16.32$, $SD = 4.04$) reported lower levels of satisfaction than individuals low in anxious attachment ($M = 21.89$, $SD = 4.21$). For intimacy, $F(2, 508) = 27.84$, $p = .001$, individuals high in anxious attachment ($M = 73.93$, $SD = 15.75$) reported lower levels of intimacy than individuals low in anxious attachment ($M = 97.29$, $SD = 11.69$). For negative communication, $F(2, 508) = 19.78$, $p = .001$, individuals high in anxious attachment ($M = 40.71$, $SD = 14.91$) reported greater levels of negative communication than individuals low in anxious attachment ($M = 22.18$, $SD = 9.93$). Lastly, for conflict, $F(2, 508) = 20.46$, $p = .001$, individuals high in anxious attachment ($M = 25.35$, $SD = 8.55$) reported greater levels of conflict than individuals low in anxious attachment ($M = 14.79$, $SD = 5.09$).

The intention was to include the same analysis for avoidant attachment (high and low). However, there were zero participants who met the criterion of 1.5

standard deviations above or below the mean for low avoidant attachment. Therefore, it was not possible to complete this comparative analysis.

Overall Summary of Findings

In summary, the results of the current study indicated that anxiously attached men experienced higher levels of commitment to their partner, although they remained dissatisfied with their relationship, and experienced higher levels of sexual dysfunction and sex anxiety. Moreover, anxiously attached women experienced higher levels of commitment and sexual desire to their partner, although they remained dissatisfied with both their relationship and with sex, and experienced higher levels of sex anxiety. In contrast, avoidant men had lower levels of intimacy in their relationships. Additionally, avoidant women were dissatisfied with both their relationship and with sex, had lower levels of intimacy, commitment, and orgasm, and higher levels of sex anxiety.

CHAPTER 11

Discussion

Chapter Overview

Romantic relationships are an important element in the lives of most individuals and have significant implications for their psychological health and well-being (Watson et al., 2000). Empirical research consistently demonstrates that a major factor that impacts on sexual and relational experiences is the pattern of attachment that develops in infancy and then persists into adulthood (Mikulincer & Goodman, 2006). Consequently, attachment theory has become one of the prominent theoretical frameworks to examine the core dimensions of romantic relationships. However, there has been limited research on the interrelationships among adult attachment, relationship functioning, and sexual functioning. The research has been limited by inadequate gender difference comparisons (Butzer & Campbell, 2008), non-representative samples (Birnbaum, 2007), and conceptualizing the variables in unidimensional ways (Birnbaum et al., 2006).

The current investigation was conducted to address these shortcomings, and extend our insight into the different ways that men and women experience their romantic relationships. The study aimed to examine the associations among adult attachment and multiple aspects of relationship functioning and sexual functioning for a range of partnerships (i.e., married, de facto, dating, homosexual, and bisexual partnerships). This aim was achieved through analysing online self-report measures of attachment (anxious and avoidant), relationship functioning (relationship satisfaction, intimacy, communication, commitment, and conflict), and sexual

functioning (sexual dysfunction, sexual satisfaction, sexual frequency, sex guilt, and sex anxiety) in a sample of 511 individuals (123 males and 388 females).

It was predicted that greater attachment anxiety and avoidance would be negatively associated with relationship satisfaction, intimacy, communication, and commitment, and positively associated with relationship conflict for all types of partnerships, with no expected gender differences. Moreover, it was predicted that greater attachment anxiety and avoidance would be positively related to sexual dysfunction, sex guilt and sex anxiety, and negatively related to sexual satisfaction and sexual frequency for all types of partnerships, with no expected gender differences. The current study intended to look at these associations for males and females with different sexual orientations and relationships, although the sample sizes were small for some of these groups. Therefore, it was necessary to combine the different relationship types and sexual orientation and only examine the nature of the associations in males and females. The results indicated that both hypotheses were partially supported.

This chapter presents a discussion of the main findings from the study reported in Chapter Nine, and considers this within the context of attachment theory and previous empirical research. Additionally, gender differences in the relationship and sexual functioning variables are discussed. The extent to which the results supported the hypotheses developed in Chapter Seven is also considered. The chapter concludes with an evaluation of the study limitations, recommendations for future research, and study implications.

Sexual Orientation Differences in Relationship Functioning and Sexual Functioning

Although the different relationship types were combined for all subsequent analyses, it is important to discuss the findings between sexual orientation, relationship functioning, and sexual functioning. Specifically, heterosexual men experienced higher levels of relationship satisfaction than homosexual or bisexual men. Past empirical research has found that homosexual and bisexual individuals experience more frequent relationship dissolution (Kurdek, 1998) and less relationship stability (Kurdek, 2005b) than heterosexual individuals. It may be argued that married dyads experience social, religious, and legal barriers to ending their relationship, whereas cohabiting couples (whether gay, lesbian, or heterosexual) do not. Moreover, homosexual and bisexual individuals are less likely to have children (Kurdek, 2005b), thereby removing another significant barrier to dissolution. Therefore, levels of relationship satisfaction may be higher in heterosexual men because they are not experiencing relationship instability and dissolution as frequently as homosexual and bisexual men. However, there were no other significant differences between sexual orientation and relationship functioning in men. These results are consistent with past empirical research which suggests that homosexual and bisexual relationships are more similar than different to heterosexual relationships with respect to relationship functioning (Kurdek, 2005b; Peplau & Fingerhut, 2007). Moreover, there were no significant differences in sexual functioning for men of different sexual orientations. It is important to note that this may be an artefact of the small number of gay ($N = 6$) and bisexual ($N = 7$) males compared to lesbian ($N = 14$) and bisexual ($N = 34$) females in the current

sample. Future research investigating the associations between sexual orientation and sexual functioning in males is necessary.

There were no significant differences across sexual orientation and relationship functioning for women, which is in line with past findings (Kurdek, 2005b; Peplau & Fingerhut, 2007). Instead, the differences between the groups were across the sexual functioning domain. Bisexual women experienced lower levels of sex guilt than homosexual and heterosexual women. There is no past research between sexual orientation and sex guilt, although there is literature which examines guilt and sexual orientation more generally. Research by Hequembourg and Dearing (2013) found that bisexual individuals experienced lower levels of guilt-proneness than homosexual individuals. Moreover, empirical research has found that bisexual individuals have higher levels of sexual activity, fantasy, and erotic desire than homosexual and heterosexual individuals (Lippa, 2007; Schmitt, 2002). It may be argued that because bisexual individuals engage in sex with both heterosexual and homosexual individuals, they are more open with their sexual expression and are less likely to feel guilty about their sexual experiences.

Moreover, homosexual women experienced higher levels of sex anxiety than heterosexual and bisexual women. Although there is no past literature which examines sexual orientation and sex anxiety, there are other studies which concern anxiety and sexual orientation more generally. Specifically, past research has found that homosexual individuals experience more stress and anxiety symptoms than heterosexual individuals (Meyer, 2013). Moreover, lesbians are significantly more likely to experience discrimination based on their sexual orientation and not be accepted by their families compared to bisexual and heterosexual women (Kaiser Family Foundation, 2001). Therefore, homosexual women may experience higher

levels of sex anxiety because they are subject to greater societal judgement which may make them apprehensive about their sexual activities.

Finally, homosexual women experienced lower levels of sex pain than heterosexual and bisexual women. Empirical research suggests that lesbians have sex less frequently than gay, bisexual, and heterosexual individuals (Peplau & Fingerhut, 2007; Peplau & Garnets, 2000). Peplau and Fingerhut (2007) suggest that gender socialization (discussed below) may lead women to repress and ignore their sexual feelings, and that this effect is heightened in a relationship with two female partners. Therefore, they have lower levels of sex pain because they are engaging in sexual intercourse less frequently than heterosexual and bisexual individuals.

Gender Differences in Relationship Functioning and Sexual Functioning

Prior to considering the hypotheses, gender differences for the relationship and sexual functioning variables are discussed. For the relationship functioning variables, women experienced greater relationship satisfaction, intimacy, and commitment than men. Conversely, men reported higher levels of negative communication and conflict than women.

These findings are consistent with social structure theories (Eagly, 1987), which assert that gendered patterns of childhood socialization govern the behaviour of men and women in adulthood (for a review, see Eagly & Wood, 1999). As a result, women are encouraged to act as caregivers and to therefore value relationships and emotional closeness with others (Kurdek, 2005a; Vogel et al., 2003). In contrast, men are encouraged to be agentic, resulting in behaviours that

foster autonomy, self-reliance, and emotional distance (Kurdek, 2005a; Vogel et al., 2003).

In the present study, females reported higher levels of relationship satisfaction than males. This is incongruent with past empirical research which has identified greater relationship satisfaction in males (Corra et al., 2009) or no significant gender differences (Kurdek, 2005a). However, these previous studies were conducted with marital dyads. Therefore, for individuals in a range of partnerships (i.e., marital, dating), women are generally more satisfied with their romantic relationships than men. As social theorists suggest, women are more relationship-oriented than men and have greater interpersonal skills (Eagly & Wood, 1999; Kurdek, 2005a). This may impact their perceived relationship experiences, thereby increasing their level of satisfaction (Vangelisti & Perlman, 2006). Additionally, it was found that women were more intimate and committed in their romantic relationships than men. These results support previous empirical research which has identified greater levels of intimacy (Greeff & Malherbe, 2001; Hook et al., 2003) and commitment (Adams & Jones, 1999) in females. Specifically, traditional female roles may positively influence motivation to maintain their romantic partnership, and the value they place on intimate connections (Vangelisti & Perlman, 2006).

Past empirical research has identified no consistent gender differences for communication (Johnson et al., 2005) and conflict (Vangelisti & Perlman, 2006). However, in the current study it was found that men reported greater conflict and negative communication in their romantic relationships than women. These results are not surprising when considering the available literature on gender differences and patterns of communication. Specifically, it has been found that men are more

likely to end discussions quickly and withdraw, whereas women move more readily towards conflict resolution (Christensen & Heavey, 1990; Heyman, Hunt-Martorano, Malik, & Slep, 2009). Moreover, these findings are in agreement with the socialised role of men as assertive and emotionally distant (Vogel et al., 2003).

For the sexual functioning variables, women experienced greater sex guilt and sex anxiety than men, which is the same pattern of results found by Petersen and Hyde (2010). Theoretically, both dimensions share similarities, as they can both be conceptualised as negative attitudes towards sex and inhibit sexual behaviour (Janda & Bazemore, 2011). It may be argued that these findings reflect the persistence of the sexual double standard (for a review, see Crawford & Popp, 2003). In many social settings, women are judged more harshly than men for initiating sexual activity and having casual sex (Vangelisti & Perlman, 2006). This may contribute to women experiencing negative feelings, such as apprehension and guilt regarding sexual interactions.

In contrast, there were no significant gender differences for sexual frequency. This is inconsistent with past empirical research, which suggests that the ideal sexual frequency for males is greater than females (Simms & Byers, 2009). However, two meta-analyses by Oliver and Hyde (1993) and Petersen and Hyde (2010) found very small gender differences for intercourse frequency and oral sex, and concluded that men and women are more similar than different in terms of sexual expression. This is in line with the gender similarities hypothesis (Hyde, 2005), which suggested that men and women are very similar for most, but not all, psychological variables including sexual behaviours and attitudes. The current findings extend this notion and suggest that the frequency of sexual intercourse and oral sex is similar for both men and women.

Adult Attachment and Relationship Functioning

It was predicted that greater attachment anxiety and avoidance would be negatively associated with relationship satisfaction, intimacy, communication, and commitment, and positively associated with relationship conflict for all types of partnerships, with no expected gender differences. This hypothesis was partially supported, and the findings for each variable are discussed below.

Adult Attachment and Relationship Satisfaction

The regression analysis indicated that anxious attachment was negatively associated with relationship satisfaction for men and women. These findings are in line with Mikulincer and Shaver's (2007a) review of 42 studies on adult attachment and relationship satisfaction in both homosexual and heterosexual relationships. Specifically, it was found that insecurely attached individuals (whether anxious, avoidant, or both) reported lower levels of relationship satisfaction. This is theoretically consistent with the underpinnings of anxious attachment, and suggests that attachment injuries (e.g., experiencing a partner as unavailable or rejecting) can cause significant relationship dissatisfaction (Mikulincer & Shaver, 2007a).

For avoidant attachment, the correlation analysis found a negative association with relationship satisfaction for both men and women. However, when the regression was conducted including other variables in the analysis, avoidant attachment was negatively associated with relationship satisfaction for females but not for males. This is inconsistent with past empirical research (Feeney, 2002; Treboux et al., 2004). In fact, the literature suggests that while anxious and avoidant attachment are equally predictive of women's dissatisfaction, avoidance rather than anxiety appears more consistently related to relationship satisfaction in men (Mikulincer & Shaver, 2007a). However, it may be argued that avoidant attachment

detracted from women's relationship satisfaction because it is inconsistent with the female role of desiring close relationships and emotional closeness with others. However, this is consistent with the male role of independence and emotional distance, thereby not impacting their satisfaction levels. Therefore, the findings of the current study indicate that insecure attachment and traditional gender roles can undermine relationship satisfaction in romantic partnerships, particularly for women.

Adult Attachment and Intimacy

The correlation analysis found a negative association between anxious attachment and intimacy for males and females. However, when all of the other variables (i.e., satisfaction, communication, commitment, and conflict) were included within the regression, there were no significant relationships identified. These findings are at variance with past empirical research (Årseth et al., 2009; Mikulincer & Shaver, 2007a). In contrast, the regression analysis found that avoidant attachment was negatively related to intimacy in both males and females, supporting past literature (Mikulincer & Shaver, 2007a) and clarifying contradictory results which have found no significant relationships (Crowell et al., 2002; Treboux et al., 2004).

In this study, the disparate results identified for anxious and avoidant attachment may lie within the theoretical framework of adult attachment. Specifically, avoidantly attached individuals are uncomfortable with closeness and interdependence, which may reduce their intimate behaviours and responsiveness (Mikulincer & Shaver, 2007a). However, anxiously attached individuals have an intense need for closeness and exhibit hyperactivating behaviours to secure their partner's love, thereby not impacting the level of intimacy they experience

(Mikulincer & Shaver, 2007a). This notion is supported by several studies which, contrary to prediction, have found negative relationships between intimacy and avoidance and no significant associations between intimacy and anxiety (Collins et al., 2002; Whiffen, Kerr, & Kallos-Lilly, 2005; You & Malley-Morrison, 2000). Therefore, avoidant attachment appears to be more pervasively linked to intimacy because it interferes with both intimacy-promoting behaviours and desires for proximity and affection. However, intimacy is not problematic for anxiously attached individuals because of their strong needs for love and security (Mikulincer & Shaver, 2007a).

Adult Attachment and Negative Communication

The correlation analysis found that both anxious and avoidant attachment were positively related to negative communication for males and females. However, when all of the other relationship variables (i.e., satisfaction, intimacy, commitment, and conflict) were included within the regression equation, there were no significant relationships identified. These results are inconsistent with theoretical and empirical research which suggests that avoidantly attached individuals are less emotionally expressive (Feeney, 1994) and anxiously attached individuals exhibit more distress in dyadic communication (Fitzpatrick et al., 1993). However, these past studies have investigated these relationships amongst marital dyads. Moreover, the association between adult attachment and negative communication has often been examined without the inclusion of other relationship variables. Therefore, although links between adult attachment and communication have been identified (Mikulincer & Shaver, 2007a), the association may not be robust when other relationship variables are also considered.

Adult Attachment and Commitment

The regression analysis indicated that anxious attachment was positively associated with commitment in both males and females. These findings are at variance with the hypothesis and past empirical research (Mikulincer & Shaver, 2007a). However, as anxiously attached individuals fear separation and abandonment (Hazan & Shaver, 1994), they may overemphasize the value of commitment in their partnerships. This argument is supported by research from Mikulincer and Erev (1991), which found that anxiously attached individuals were more likely to desire highly committed relationships than avoidantly attached individuals. Moreover, Senchack and Leonard (1992) found that anxiously attached males acquired marriage licenses much sooner (19 months relationship duration) than secure (49 months) and avoidantly attached (46 months) males. This tendency to commit early in their romantic relationships may be perceived as intrusive by their partner and deter them from committing themselves to a potential difficult and unsatisfying relationship. In turn, this may frustrate anxiously attached individual's core needs of proximity and stability (Mikulincer & Shaver, 2007a). Therefore, the lack of commitment identified in the literature may reflect discrepant ideals regarding security and stability, rather than an unwillingness to invest in their romantic relationships.

In contrast to the above findings, the correlation analysis found a negative association between avoidant attachment and commitment for both men and women. However, when all of the other relationship variables (i.e., satisfaction, intimacy, communication, and conflict) were included within the regression equation, avoidant attachment was negatively related to commitment for females with no significant prediction being found for males. The findings for women

support previous empirical research (Adams & Jones, 1999; Mikulincer & Shaver, 2007a), suggesting that the emotional distance and independence which is characteristic of avoidantly attached individuals, interferes with their ability to commit themselves in a relationship (Mikulincer & Shaver, 2007a). However, the non-significant prediction identified for males is inconsistent with the hypothesis and past literature. It may be argued that the female role's emphasis on emotional closeness and interdependence exacerbates (or is exacerbated by) avoidant attachment because it is not consistent with their traditional gender roles. However, the current finding is consistent with the male role of self-reliance and emotional distance, thereby not impacting their commitment levels. Therefore, the findings of the current study indicate that commitment in romantic partnerships is more associated with avoidant attachment in females than for males.

Adult Attachment and Conflict

The correlation analysis found that both anxious and avoidant attachment were positively related to conflict for males and females. However, when all of the other relationship variables (i.e., satisfaction, intimacy, communication, and commitment) were included within the regression equation, there were no significant relationships identified. These results contrast with past literature which suggests that insecurely attached individuals experience greater difficulty with managing interpersonal conflict than securely attached individuals (Mikulincer & Shaver, 2007a). However, these findings may be an artefact of using self-report measures of conflict and adult attachment, whereas most past research has employed observational methods. Moreover, the association between adult attachment and conflict has often been examined without the inclusion of other relationship variables, which could further explain the discrepant findings. As

previously mentioned, although links between adult attachment and conflict have been found (Mikulincer & Shaver, 2007a), the association may not be as robust when other relationship variables are also considered.

High and Low Analyses for Anxious Attachment and Relationship Functioning

To further explore the relationships between adult attachment and relationship functioning, the extreme ends (high and low) of the attachment dimensions were analysed with the participants' responses on the relationship variables (i.e., satisfaction, intimacy, communication, commitment, and conflict). Specifically, individuals who were high in anxious attachment experienced lower levels of relationship satisfaction and intimacy and higher levels of negative communication and conflict than individuals who were low in anxious attachment. These findings provide further evidence for the results outlined above.

The intention was to conduct the same analysis for avoidant attachment. However, there were no participants who fell within the low avoidant range and so the analysis could not be completed. This suggests that all participants exhibited some degree of avoidant behaviour, with neither males nor females scoring 1.5 standard deviations below the mean. However, these findings could be an artefact of the low sample of avoidantly attached individuals ($M = 14.41$, $SD = 6.33$) compared to anxiously attached individuals ($M = 22.35$, $SD = 7.08$). This made it more difficult to identify individuals scoring low on avoidant attachment. Moreover, it may be argued that the nature of some items (e.g., "I usually discuss my problems and concerns with my partner" and "I turn to my partner for many things including comfort and reassurance") made it difficult to score extremely low on the avoidant attachment dimension when in a romantic relationship.

Specifically, individuals may have a greater tendency to limit communicating every concern with their partner which is characteristic of avoidant attachment, rather than fear of abandonment and rejection, which is characteristic of anxious attachment (Mikulincer & Goodman, 2006).

Summary

An illustration of the results between insecure attachment and relationship functioning for both men and women is presented in Figures 11.1 to 11.4. In summary, adult attachment is related to different components of romantic relationships (Mikulincer & Goodman, 2006). However, both anxious and avoidantly attached individuals differ substantially in the nature of their relationship functioning. Specifically, the current study indicated that anxiously attached men and women exhibit greater commitment to their partner, although they remain dissatisfied with their romantic relationships. This pattern of results suggest that anxiously attached individuals have an ambivalent approach to relationships, whereby strong desires for love and stability may not be met by their partner, which aggravates their attachment needs and impacts relationship satisfaction. In contrast, avoidantly attached men experience less intimacy and avoidantly attached women experience less satisfaction, intimacy, and commitment in their romantic relationships. It may be argued that romantic relationships are more difficult to experience for avoidant women because avoidant attachment is not consistent with the female role of desiring close relationships. However, this is consistent with the male role of independence and emotional distance, thereby not impacting their relationship encounters.

The current study did not identify any relationships between insecure attachment, communication, and conflict. However, these findings may be

explained by examining the nature of these two variables. Specifically, communication and conflict can be conceptualized as broad components of interpersonal functioning that relate to the individuals' interactions with both their romantic partner and with others (e.g., family, friends, and colleagues). Therefore, it may be argued that they do not represent the same level of closeness within a dyad when examined with other relationship variables, thereby having less impact on insecure attachment. Instead, satisfaction, intimacy, and commitment may be viewed as core components of relationship functioning because they are directly relevant to a romantic partner and represent greater levels of emotional closeness. Thus, in a regression equation, these variables explain the variance in relationship satisfaction and there is no variance left over to be explained by communication and conflict. These findings extend our insight into the interrelationships between adult attachment and romantic relationships for men and women in a range of partnerships (i.e., married, de facto, dating, homosexual, and bisexual).

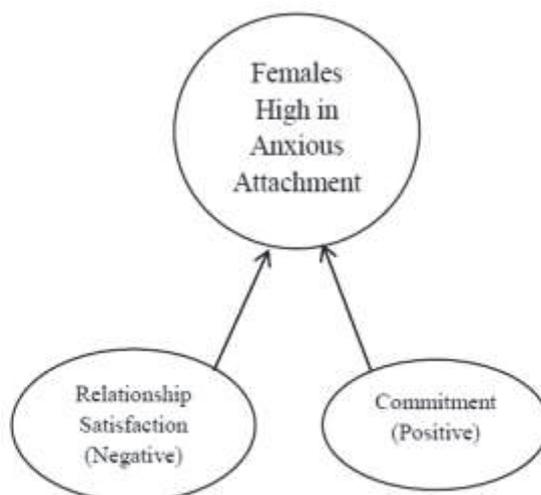


Figure 11.1. Summary of the main findings between females high in anxious attachment and the relationship functioning variables.

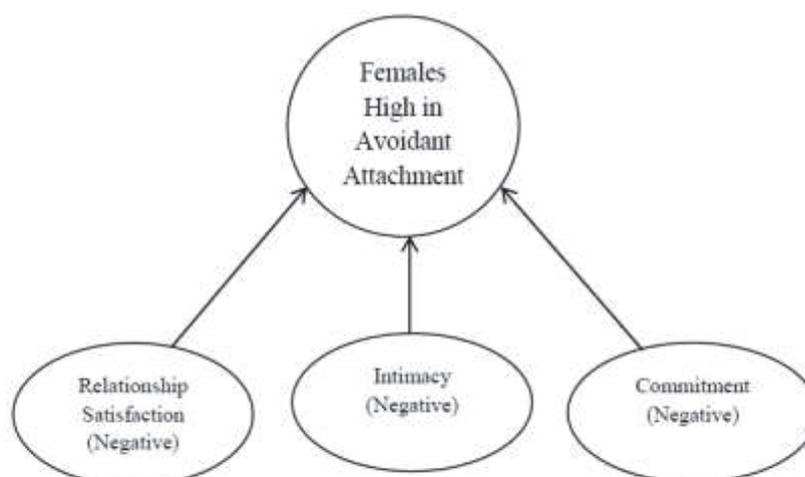


Figure 11.2. Summary of the main findings between females high in avoidant attachment and the relationship functioning variables.



Figure 11.3. Summary of the main findings between males high in anxious attachment and the relationship functioning variables.

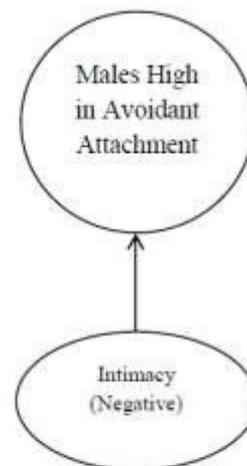


Figure 11.4. Summary of the main findings between males high in avoidant attachment and the relationship functioning variables.

Adult Attachment and Sexual Functioning

It was predicted that greater attachment anxiety and avoidance would be positively related to sexual dysfunction, sex guilt and sex anxiety, and negatively related to sexual satisfaction and sexual frequency, with no expected gender differences. This hypothesis was partially supported, and the findings for each variable are discussed in turn.

Adult Attachment and Sexual Dysfunction

For males, there was a negative association between anxious attachment and erectile function. This suggests that anxiously attached men experience greater difficulty attaining and maintaining an erection long enough to complete sexual intercourse (Hatzimouratidis & Hatzichristou, 2007). This is in line with Brassard, Shaver, and Lussier's (2007) findings that anxiously attached males experienced greater sexual problems in their partnerships. Theoretically, anxiously attached individuals are likely to engage in sexual activity with relational apprehensions and intruding thoughts, thereby experiencing greater difficulty with sexual encounters (Birnbaum, 2007; Mikulincer & Goodman, 2006). The current study extends our understanding by identifying the specific sexual dysfunction that is associated with anxious attachment. However, no associations were found for anxious attachment and the other male sexual dysfunction variables. Moreover, there were no significant relationships between avoidant attachment and sexual dysfunction. These results are at variance with the hypothesis and past empirical research (Brassard et al., 2007). However, when closely examining the descriptive statistics (means and standard deviations) of the male sexual dysfunction variables, the 123 males who participated in the current study fell within the "no dysfunction" to "mild dysfunction" range. Therefore, these findings may be an artefact of the low

levels of sexual dysfunction in the sample. Future research examining these associations with a larger sample of males may extend these findings.

Contrary to prediction, females who were anxiously attached experienced greater sexual desire in their romantic partnerships. Theoretically, anxiously attached females typically employ sexual hyperactivating strategies and may have greater sexual interest to establish proximity to their partner and fulfil unmet needs of security (Mikulincer & Shaver, 2007a). Consistent with this proposal, Birnbaum et al. (2006) found that anxiously attached individuals express strong desires for their partner's emotional involvement during sexual activity. Moreover, empirical research suggests that anxiously attached individuals have higher rates of sexual intercourse (Brassard et al., 2007), equate sex with romantic love (Mikulincer & Goodman, 2006), and have sex to reduce insecurity and foster intimacy (Davis, Shaver, & Vernon, 2004; Schachner & Shaver, 2004).

In contrast, the correlation analysis found that avoidant attachment was negatively related to sexual desire, arousal, lubrication, orgasm, and pain for women. However, when all of the sexual dysfunction variables were included within the regression equation, significance was only identified for orgasm; women who were avoidantly attached experienced lower rates of orgasm in their partnerships. These findings are in line with past empirical research (Cohen & Belsky, 2008) and suggest that sexual deactivating strategies typically employed by avoidantly attached women, impact their experience of orgasm in their romantic relationships.

Adult Attachment and Sexual Satisfaction

For anxious and avoidant attachment, the correlation analysis found a negative association with sexual satisfaction for both men and women. However, when the regression was conducted including the other sex variables in the analysis (i.e., sexual dysfunction, sexual frequency, sex guilt, and sex anxiety), anxious and avoidant attachment were negatively associated with sexual satisfaction for females but not for males. These results are incongruent with past empirical research (Butzer & Campbell, 2008; Davis et al., 2006; Fricker & Moore, 2002).

It may be argued that the female role's emphasis on desiring close relationships exacerbates (or is exacerbated by) insecure attachment. Specifically, the preoccupation with rejection and abandonment which is characteristic of anxious attachment may aggravate traditional female roles of emotional closeness with others. This may make it more difficult for them to relax during sex, thereby making sex less satisfying for anxiously attached women (Mikulincer & Shaver, 2007a). In contrast, the discomfort with closeness and negative model of others characteristic of avoidant attachment may detract from women's sexual satisfaction because it is inconsistent with the female role of desiring close relationships, thereby resulting in less satisfying sexual experiences for women (Mikulincer & Shaver, 2007a). However, the male role's emphasis on independence and emotional distance may encourage the detachment between interpersonal apprehensions (related to anxious or avoidant attachment) and sex for men, thereby not impacting their level of sexual satisfaction (Mikulincer & Goodman, 2006). Therefore, the findings of the current study indicate that insecure attachment and traditional gender roles can undermine sexual satisfaction in romantic partnerships, particularly for women.

Adult Attachment and Sexual Frequency

The correlation analysis found that avoidant attachment was negatively related to sexual frequency in females. However, when all of the sex variables (i.e., sexual dysfunction, sexual frequency, sex guilt, and sex anxiety) were included within the regression equation, there were no significant associations for both anxious and avoidant attachment and sexual frequency in males and females. These results are inconsistent with the hypothesis and past empirical research (Bogaert & Sadava, 2002; Brassard et al., 2007). It is important to note that the non-significant associations identified between these variables may reflect the measurement of sexual frequency as a numerical estimate, which included both sexual intercourse and oral sex. Perhaps using a more sophisticated instrument of sexual frequency may have yielded different results. Further research to elucidate these links is necessary.

Additionally, some empirical research suggests that the association between insecure attachment and sexual frequency is dependent on the specific attachment combination within a dyad. Brassard et al. (2007) found that a woman's anxious attachment did not significantly predict sexual frequency if her partner was low in anxiety. Similarly, a man's avoidant attachment did not significantly predict sexual frequency if his partner was low in avoidance. Therefore, in order to interpret the findings in relation to adult attachment and sexual frequency in a more meaningful way, it is important to also have information on partner attachment style.

Adult Attachment and Sex Guilt

The correlation analysis found that avoidant attachment was positively related to sexual guilt in males. However, when all of the sex variables (i.e., sexual dysfunction, sexual frequency, sex guilt, and sex anxiety), were included within the

regression equation, there were no significant relationships for both anxious and avoidant attachment and sex guilt in males and females. These findings are inconsistent with the hypothesis and previous empirical research (Tracy et al., 2003). They may be explained through the theoretical underpinnings of anxious and avoidant attachment. Specifically, Bogaert and Sadava (2002) found that anxiously attached men and women reported higher rates of erotophilia, which involves less experience of sex guilt and more positive feelings towards sex. It may be argued that anxiously attached individuals use sex to fulfil their strong desires for love and security, thereby not impacting their experience of sex guilt in romantic partnerships. This notion is supported by empirical research which suggests that anxiously attached individuals tend to have sex to meet needs of affection and intimacy (Tracy et al., 2003). Therefore, they may not experience the negative apprehensions associated with sex guilt because they are using sex as a means of establishing proximity to their partner (Birnbaum, 2007).

Additionally, Birnbaum (2007) found no significant association between sex guilt and avoidant attachment in a sample of females and concluded that avoidantly attached individuals are more concerned with the relational aspects of sexuality. Supporting this notion, empirical research has found that avoidantly attached individuals are motivated by non-relational goals during sexual activity (Davis et al., 2004; Schachner & Shaver, 2004) and are likely to engage in relatively emotion-free sex in the context of casual, short-term relationships (Birnbaum, 2007; Brennan & Shaver, 1995). This suggests that the physical expression of sex may not foster negative feelings of sex guilt in avoidantly attached men and women.

Adult Attachment and Sex Anxiety

The regression analysis indicated that anxious attachment was positively associated with sex anxiety for both men and women. These findings are congruent with research conducted by Davis et al. (2006), suggesting that both anxious and avoidantly attached individuals experience greater levels of sex anxiety in married, dating, and homosexual partnerships. Theoretically, the fears of abandonment characteristic of anxious attachment may increase anxiety regarding sex and sexual performance.

For avoidant attachment, the regression equation found a positive association with sex anxiety for females, but not for males. Therefore, the discomfort with intimacy characteristic of avoidant attachment impacts the experience of sexual anxiety for women (Mikulincer & Shaver, 2007a). It may be argued that the male role's emphasis on emotional distance coupled with the tendency for avoidantly attached individuals to view love and sex as distinct components, encourages the detachment between interpersonal apprehensions and sex for men (Mikulincer & Goodman, 2006).

Summary

An illustration of the results between insecure attachment and sexual functioning for both men and women is presented in Figures 11.5 to 11.7. There was no model for avoidant attachment in males and sexual functioning because there were no significant relationships found. In summary, types of adult attachment are related to various components of sexual functioning (Mikulincer & Shaver, 2007a). However, both anxious and avoidantly attached individuals differ substantially in their orientations towards sex. Specifically, the current study identified that anxiously attached men experienced higher levels of sex anxiety and

erectile problems in their romantic relationships. In addition, anxiously attached women experienced higher levels of sexual desire, although they had lower levels of sexual satisfaction and higher levels of sex anxiety. This ambivalent approach to sex which is characteristic of anxiously attached women and not men, may be explained by the female role's emphasis on valuing close relationships. Specifically, anxiously attached women's strong desires to establish love and security may be perceived as unmet by their partner, which reduces sexual satisfaction and increases sex anxiety. In contrast, men are socialized to be independent and emotionally distant, which may not influence anxiously attached men's desire for sex. However, anxious attachment can still negatively impact male sexual functioning.

In contrast, there were no significant relationships between avoidant attachment and sexual functioning for men. Moreover, avoidantly attached females had lower levels of sexual satisfaction, orgasm, and higher levels of sex anxiety. It may be argued that sexual functioning is less problematic for avoidant men because avoidant attachment is consistent with the male role of emotional distance. This may encourage them to readily separate emotions from sex, which limits the impact their attachment style has on sexual functioning. However, it may be harder for avoidant women to make this separation because females are socialised to desire intimacy and relationships, thereby impacting their experience of sex to a greater degree. These findings extend our insight into the interrelationships between adult attachment and sexual functioning for men and women.

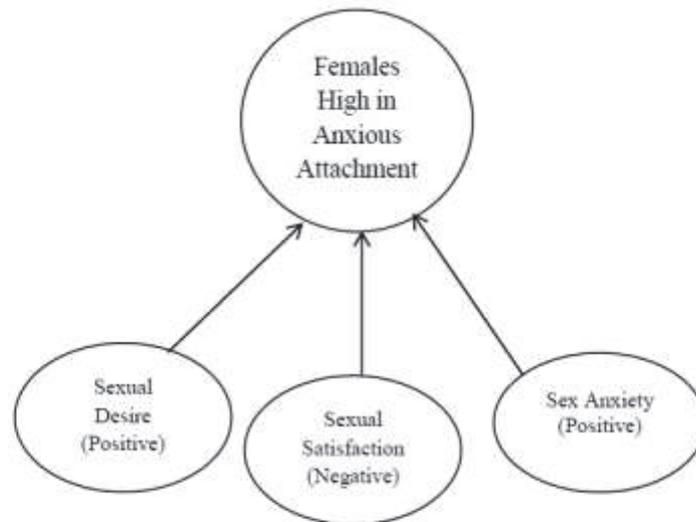


Figure 11.5. Summary of the main findings between females high in anxious attachment and the sexual functioning variables.

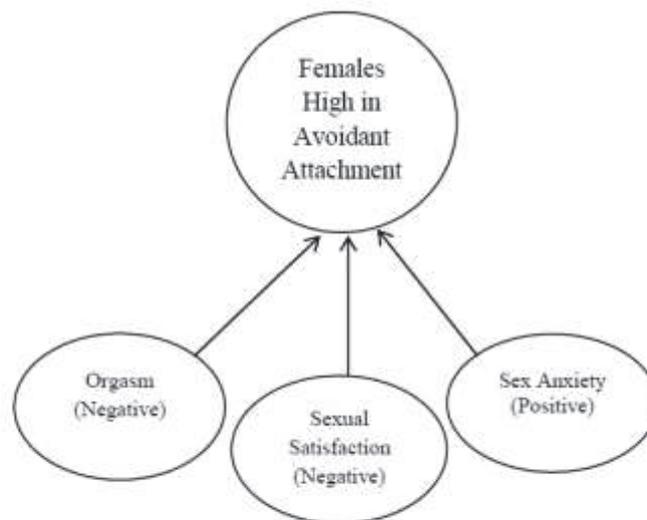


Figure 11.6. Summary of the main findings between females high in avoidant attachment and the sexual functioning variables.

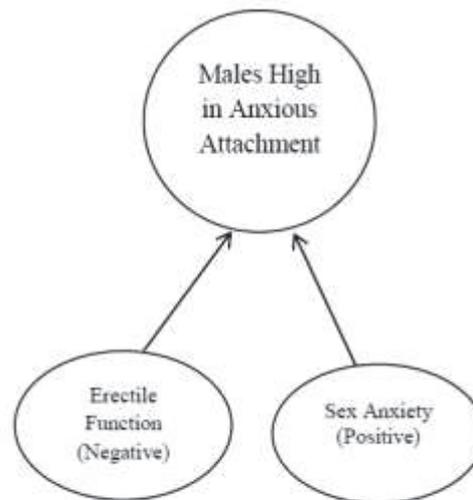


Figure 11.7. Summary of the main findings between males high in anxious attachment and the sexual functioning variables.

Limitations and Directions for Future Research

Despite efforts to extend the knowledge in this area and overcome the methodological problems associated with past research, there were limitations to this project. Firstly, the study relied solely on self-report measures and may have resulted in participants biasing their responses due to social desirability (Stone et al., 2000). Moreover, the study included individuals both in a current relationship or having experienced a past romantic relationship, and this retrospective reporting may be influenced by a variety of recall biases. Fraley and Shaver (1997) argued that relationship research should be conducted using a multi-method approach, which includes behavioural observations. Additionally, not including both couple members in the research was another significant limitation, as there are multiple combinations of attachment patterns that can impact the experience of romantic relationships and sex between dyads.

The findings of this study were limited by the small sample size of male participants with sexual dysfunction. This shortcoming prevented more detailed analyses of the association between insecure attachment and sexual dysfunction in

males. This may have contributed to the non-significant associations identified. Moreover, this study recruited a small number of participants who were homosexual and bisexual. Increasing response rates may have allowed more comprehensive analysis of the interrelationships between adult attachment, relationship functioning, and sexual functioning for different sexual orientations.

Although having the questionnaire online was an advantage and allowed access by men and women nationally, this method of data collection also presented several limitations. Namely, there were no specific questions regarding ethnicity or education, therefore it was not possible to determine whether the sample was representative of the Australian population. There was also no means of tracking the response rate from the online questionnaire, as no record was kept regarding the number of people accessing the website and then proceeding to complete the measures.

Another limitation was the use of individual items for sexual frequency that had not undergone rigorous psychometric validation. This may have compromised reliability and validity estimates and may explain some of the inconsistencies with the past empirical data and the current non-significant associations. Future research should consider using psychometrically validated measures of sexual frequency.

Moreover, the cross-sectional nature of the study and the statistical analyses employed do not allow for any causal inferences to be drawn between the variables. Future research using longitudinal study designs would provide important insights into the degree of causality between the variables.

Implications

The current study has a number of implications for research into romantic relationships. Firstly, the results have contributed valuable knowledge into the nature of the associations between adult attachment, relationship functioning, and sexual functioning in adulthood. Despite the importance of romantic relationships being established in theoretical and empirical research (Vangelisti & Perlman, 2006), the broad dimensions of romantic partnerships have not previously been examined within a comprehensive theoretical framework. The current study has demonstrated that attachment insecurities place individuals at risk for relationship distress and dissatisfaction. Specifically, the current study validates past literature that anxious and avoidant attachment can negatively impact both relationship functioning and sexual functioning in adulthood. Moreover, the study highlights the importance of examining both relational and sexual factors in empirical research to provide a comprehensive account of romantic bonds.

The current study has identified the specific areas within romantic relationships that are most problematic to each attachment type for men and women. Therefore, if individuals are experiencing relationship difficulties, the therapist can use the attachment framework from the outset to inform the process of therapeutic treatment. Specifically, the current findings demonstrate that anxiously attached men experienced higher levels of commitment to their partner, although they remained dissatisfied with their relationship, and experienced higher levels of sex anxiety and sexual dysfunction. Moreover, anxiously attached women experienced higher levels of commitment and sexual desire to their partner, although they remained dissatisfied with both their relationship and with sex, and experienced higher levels of sex anxiety. In contrast, avoidant men had lower levels

of intimacy in their relationships. Additionally, avoidant women were dissatisfied with both their relationship and with sex, had lower levels of intimacy, commitment, orgasm, and higher levels of sex anxiety. Therefore, avoidant attachment appears to be more pervasively associated with negative experiences of relationships and sex for both men and women. In contrast, anxious attachment is linked with an ambivalent approach to relationships whereby aversive feelings coexist with strong desires for sex and security, particularly for women (Mikulincer & Shaver, 2007a). These findings demonstrate that the experience of romantic relationships is different for men and women who are anxiously or avoidantly attached, and highlights the significance of socialised gender roles to the expression of insecure attachment.

The current findings can support the therapist in formulating problems, delineating treatment goals and establishing therapeutic pathways for couples experiencing relationship difficulties, particularly within the sexual areas. This can then guide the process of understanding and repairing distressed adult relationships. Moreover, the current study highlights the components that are most associated with insecure attachment and provides a coherent theoretical base to explain the different ways that anxious and avoidantly attached individuals relate to their partner, cope with the unresponsiveness of attachment figures, express relationship distress, and carry internal working models that lead to a predictable series of thoughts and behaviours that impacts their romantic partnerships.

This study was able to examine the factors that are associated with the way individuals experience their romantic relationships. This can assist clinicians to develop new insights into understanding the critical variables that influence effective couple functioning. The different attachment profiles can be used to

understand the dynamic ways that insecurities can negatively impact the experience of romantic relationships. Moreover, the attachment paradigm can be used as a therapeutic tool to assist with both case formulation and the development of therapeutic goals, particularly for individuals experiencing relationship or sex problems. These findings can be used by the therapist during the psychoeducation component of treatment to assist anxious and avoidant individuals to increase their self-awareness into how their attachment style is negatively associated with the way they construe their relational experiences and how this impacts their behaviours. By providing insight into the way attachment processes are linked to relationship distress and discord, the efficacy of therapeutic treatment can increase.

The research has significant implications for relationship counselling, particularly when individuals are experiencing sexual problems. Specifically, the therapist can integrate the attachment framework to increase awareness on how specific thoughts and behaviours contribute to the development of sexual problems (e.g., erectile dysfunction or low sexual desire in women) and determine how the problems can be addressed therapeutically. Additionally, the therapist can support the individual to modify maladaptive schemas that are specific to their attachment style and pursue strategies that encourage positive relationship outcomes and sexual experiences. This reinforces the need for research to continue examining sexual functioning concomitantly with adult attachment. In doing so, the complex processes of romantic relationships can be more clearly understood.

Conclusion

In conclusion, this study examined the interrelationships among adult attachment, relationship functioning, and sexual functioning for men and women. The findings indicated that both anxious and avoidant attachment are differentially

related to various components of relationships and sex, and that these associations are different for both men and women. This study makes a significant contribution to our knowledge of the multifaceted way adult attachment is linked to different emotions and behaviours in romantic relationships, and how it is related to the expression of sexuality in different partnerships. This information is valuable for clinicians and relationship researchers, as it contributes to evidence-based practice in the field of romantic relationships. Hence, attachment theory provides a promising theoretical framework for future research into relationships and sexuality in adulthood.

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APPENDICES

APPENDIX A
ETHICS APPROVAL

Human Ethics Research



Office of Research Integrity

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Memorandum

To: Prof Marita McCabe
School of Psychology

cc: Ms Christina Stefanou

From: Deakin University Human Research Ethics Committee (DUHREC)

Date: 01 September, 2011

Subject: 2011-169

The associations among adult attachment, relationship functioning and sexual functioning
Please quote this project number in all future communications

The application for this project was considered at the DU-HREC meeting held on 29/08/2011. Approval has been given for Miss Christina Stefanou, under the supervision of Prof Marita McCabe, School of Psychology, to undertake this project from 29/08/2011 to 29/08/2015.

The approval given by the Deakin University Human Research Ethics Committee is given only for the project and for the period as stated in the approval. It is your responsibility to contact the Human Research Ethics Unit immediately should any of the following occur:

- Serious or unexpected adverse effects on the participants
- Any proposed changes in the protocol, including extensions of time.
- Any events which might affect the continuing ethical acceptability of the project.
- The project is discontinued before the expected date of completion.
- Modifications are requested by other HRECs.

In addition you will be required to report on the progress of your project at least once every year and at the conclusion of the project. Failure to report as required will result in suspension of your approval to proceed with the project.

DUHREC may need to audit this project as part of the requirements for monitoring set out in the National Statement on Ethical Conduct in Human Research (2007).

Human Research Ethics Unit
research-ethics@deakin.edu.au
Telephone: 03 9251 712

APPENDIX B

Recruitment Notice



Wanted: Participants to Complete Fast Survey on Romantic Relationships

Men and Women over 18 years currently in a relationship (any sexual orientation) or who have experienced a past relationship for 3 or more months to complete an anonymous, fast, ONLINE questionnaire.

It investigates the way individuals think and behave in their relationships (communication, satisfaction, sexual interactions, conflict, and intimacy).

No writing is required; it is all tick the box response format. It should take approximately 30 minutes to finish.

To complete, please visit: www.relationshipsandsex.com.au

This research project can benefit all individuals, but we need your help.

APPENDIX C

List of Websites for Recruitment

Recruitment Record

Advertisements were placed on the following websites during January to July, 2012:

<https://www.facebook.com/>

http://psych.hanover.edu/research/exponnet_submit.html

<http://www.onlinepsychresearch.co.uk/>

www.socialpsychology.org

<http://www.psychsplash.com/contact/>

<http://www.whe.org.au/newsite/index.html>

<http://www.all-about-psychology.com/psychology-research-participants.html>

www.research@in-mind.org

<http://forums.about.com/n/pfx/forum.aspx?folderId=5&nav=post&webtag=ab-psychology>

<http://www.fogster.com/listing.php?id=347067>

<http://www.classifiedads.com/volunteer-ad12008176.htm>

www.gumtree.com.au

www.craigslist.com.au

APPENDIX D

Press Release

Sex in Our Relationships

Deakin University research has shown that being too needy or not needy enough in a relationship can result in sexual issues.

Ms Christina Stefanou is conducting her doctoral research with Deakin's School of Psychology under the supervision of Professor Marita McCabe and is looking at the connection between relationship style and sexual functioning.

Preliminary results from the experiences of the 127 people who have taken part in the study so far demonstrate the strong links between relationship style and sexual dysfunction in both men and women.

“The preliminary analysis showed that individuals who fear rejection or abandonment and value intimacy to such an extent that they become overly dependent on their partner, had higher levels of sexual dysfunction (i.e., with sexual arousal, lubrication, orgasm, and sexual satisfaction in women, and erectile function, orgasm, intercourse satisfaction, and overall sexual satisfaction in men),” Ms Stefanou said.

“Similarly, individuals who experience discomfort with closeness and find it difficult to depend on their partner also had higher levels of sexual dysfunction (i.e., with sexual desire, arousal, lubrication, orgasm, pain, and sexual satisfaction in women, although no relationships were found with dysfunction in men).

“These findings suggest that rather than simply treating the symptoms of sexual dysfunction, treatment strategies may be more effective if they considered the psychological characteristics that impact on sexual behaviour within relationships.”

Ms Stefanou's study is ongoing and if you would like to complete the questionnaire, please visit www.relationshipsandsex.com.au

APPENDIX E
QUESTIONNAIRES

- E.1: Introduction to Online Questionnaire
- E.2: Demographic and Background Questionnaire
- E.3: Experiences in Close Relationships Scale – Short Form (ECR-S)
- E.4: Relationship Assessment Scale (RAS)
- E.5: Personal Assessment of Intimacy in Relationships Scale (PAIR)
- E.6: Communication Patterns Questionnaire – Short Form (CPQ-SF)
- E.7: Investment Model Scale (IMS)
- E.8: Ineffective Arguing Inventory (IAI)
- E.9: Sexual Frequency
- E.10: Revised Mosher Guilt Inventory (MGI-R)
- E.11: Sex Anxiety Inventory (SAI)
- E.12: Female Sexual Function Index (FSFI)
- E.13: International Index of Erectile Function (IIEF)

APPENDIX E.1

This study aims to investigate differences in the way individuals think, feel, and behave in their romantic relationships. Dimensions that will be explored include communication, satisfaction, sexual interactions, conflict, and intimacy for individuals in all types of relationships. This research will enhance our understanding of romantic bonds in adulthood, and guide clinicians treating individuals and couples that experience relationship distress or discord.

We hope that you can be a part of this study.



APPENDIX E.2**Demographic and Background Details**

Please take the time to answer the following background questions

1. What is your gender?
 - a. Male
 - b. Female

2. What is your age? _____ Years

3. What is your sexual orientation?
 - a. Heterosexual
 - b. Homosexual
 - c. Bisexual

4. Are you currently in a romantic relationship?
 - a. Yes
 - b. No

5. Have you experienced a past romantic relationship?
 - a. Yes
 - b. No

6. What is the approximate length of you and your partners' relationship? If you are not in a current romantic relationship, please provide information on your last relationship
_____ Years (or Months)

7. What is your current relationship status?
 - a. Married
 - b. De facto
 - c. Dating
 - d. Divorced
 - e. Widowed
 - f. Single

For all the following questions, please answer each item in reference to your current romantic relationship or your most recent past relationship (for longer than 3 months duration).

APPENDIX E.3

The following statements concern how you feel in your ROMANTIC RELATIONSHIPS. Some questions relate to your current romantic relationship (or most recent romantic relationship) and others relate to romantic relationships in general. Respond to each statement by indicating how much you agree or disagree with it. Please read each statement carefully, and select the number that corresponds to the number on the scale.

| | | | | | | |
|----------------------|----------|----------|-------------------|----------|----------|-------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Disagree Strongly | | | Neutral/ Mixed | | | Agree Strongly |

| Item # | | Disagree Strongly | Neutral | Agree Strongly |
|--------|--|----------------------|-----------------------|-------------------|
| 1 | It helps to turn to my romantic partner in times of need. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 2 | I need a lot of reassurance that I am loved by my partner. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 3 | I want to get close to my partner, but I keep pulling back. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 4 | I find that my partner(s) don't want to get as close as I would like. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 5 | I turn to my partner for many things, including comfort and reassurance. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 6 | My desire to be very close sometimes scares people away. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 7 | I try to avoid getting too close to my partner. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 8 | I do not often worry about being abandoned. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 9 | I usually discuss my problems and concerns with my partner. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 10 | I get frustrated if romantic partners are not available when I need them. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 11 | I am nervous when partners get too close to me. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |
| 12 | I worry that romantic partners won't care about me as much as I care about them. | 1 | 2 - 3 - 4 - 5 - 6 - 7 | |

APPENDIX E.4

Please select the number for each item which best answers that item for you.

How well does your partner meet your needs?

| | | | | |
|--------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Poorly | | Average | | Extremely well |

In general, how satisfied are you with your relationship?

| | | | | |
|-------------|---|---------|---|---------------------|
| 1 | 2 | 3 | 4 | 5 |
| Unsatisfied | | Average | | Extremely satisfied |

How good is your relationship compared to most?

| | | | | |
|------|---|---------|---|-----------|
| 1 | 2 | 3 | 4 | 5 |
| Poor | | Average | | Excellent |

How often do you wish you hadn't gotten in this relationship?

| | | | | |
|-------|---|---------|---|------------|
| 5 | 4 | 3 | 2 | 1 |
| Never | | Average | | Very often |

To what extent has your relationship met your original expectations:

| | | | | |
|---------------|---|---------|---|------------|
| 1 | 2 | 3 | 4 | 5 |
| Hardly at all | | Average | | Completely |

How much do you love your partner?

| | | | | |
|----------|---|---------|---|-----------|
| 1 | 2 | 3 | 4 | 5 |
| Not much | | Average | | Very much |

How many problems are there in your relationship?

| | | | | |
|----------|---|---------|---|-----------|
| 5 | 4 | 3 | 2 | 1 |
| Very few | | Average | | Very many |

APPENDIX E.5

Please select the number for each item which best answers that item for you.

My partner listens to me when I need someone to talk too

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

I can state my feelings without him/her getting defensive

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

I often feel distant from my partner

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

My partner can really understand my hurts and joys

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

I feel neglected at times by my partner

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

I sometimes feel lonely when we're together

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

We enjoy spending time with other couples

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

We usually 'keep to ourselves'

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

We have very few friends in common

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

Having time together with friends is an important part of our shared activities

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

Many of my partners' close friends are also my close friends

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

My partner disapproves of some of my friends

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

My partner helps me clarify my thoughts

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

When it comes to having a serious discussion it seems we have little in common

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

I feel 'put-down' in a serious conversation with my partner

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

I feel it is useless to discuss some things with my partner

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

My partner frequently tries to change my ideas

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

We have an endless number of things to talk about

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

We enjoy some recreational activities

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

I share in very few of my partners' interests

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

We like playing together

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

We enjoy the out-of-doors together

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

We seldom find time to do fun things together

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

I think that we share some of the same interests

1 2 3 4 5
Strongly Disagree Neutral Strongly Agree

APPENDIX E.6

Please select the number for each item which best answers that item for you.

| When issues or problems arise, how likely is it that... | | Very Unlikely | Neutral | Very Likely |
|---|---|-----------------------------------|---------|-------------|
| 1 | Both partners avoid discussing the problem | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 2 | Both partners try to discuss the problem | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 3 | One partner tries to start a discussion while the other partner tries to avoid a discussion | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| During a discussion of issues or problems, how likely is it that... | | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 4 | Both partners express feelings to each other | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 5 | Both partners blame, accuse, or criticize each other | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 6 | Both partners suggest possible solutions and compromises | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 7 | One partner pressures, nags, or demands while the other partner withdraws, becomes silent, or refuses to discuss the matter further | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |
| 8 | One partner criticizes while the other partner defends themselves | 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 | | |

APPENDIX E.7

Please select the number for each item which best answers that item for you.

| | | Disagree Completely | Neutral | Agree Completely |
|---|---|------------------------|-----------------|---------------------|
| 1 | I want our relationship to last for a very long time | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |
| 2 | I am committed to maintain my relationship with my partner | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |
| 3 | I would not feel very upset if our relationship were to end in the near future | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |
| 4 | I feel very attached to our relationship – very strongly linked to my partner | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |
| 5 | I want our relationship to last forever | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |
| 6 | I am oriented towards the long-term future of my relationship (for example, I imagine being with my partner several years from now) | 0 - | 1 - 2 - 3 - 4 - | 5 - 6 - 7 - 8 |

APPENDIX E.8

Below are descriptions of the kinds of arguments people in relationships are likely to experience. Select the number that indicates how much you agree that each statement fits your relationship.

1. By the end of an argument, each of us has been given a fair hearing.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

2. When we begin to fight or argue, I think, "Here we go again."

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

3. Overall, I'd say we're pretty good at solving our problems.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

4. Our arguments are left hanging and unresolved.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

5. We go for days without settling our differences.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

6. Our arguments seem to end in frustrating statements.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

7. We need to improve the way we settle our differences.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

8. Overall, our arguments are brief and quickly forgotten.

| | | | | |
|-------------------|---|---------|---|----------------|
| 1 | 2 | 3 | 4 | 5 |
| Strongly Disagree | | Neutral | | Strongly Agree |

APPENDIX E.9

1. Approximately how many times over the past month have you had sexual intercourse? _____
2. Approximately how many times over the past month have you performed oral sex on your partner? _____
3. Approximately how many times over the past month have you received oral sex from your partner? _____

APPENDIX E.10

Please select the number for each item which best answers that item for you.

| | Not at all true | Neutral | Extremely true of (for) me |
|--|--------------------|---------|-------------------------------|
| 1. Masturbation helps one feel eased and relaxed. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 2. Sex relations before any significant commitments are good, in my opinion. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 3. Unusual sex practices don't interest me. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 4. When I have sexual dreams I try to forget them. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 5. "Dirty" jokes in mixed company are in bad taste. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 6. When I have sexual desires I enjoy them like all healthy human beings. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 7. Unusual sex practices are dangerous to one's health and mental condition. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 8. Sex relations before any significant commitments help people adjust. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 9. Sex relations before any significant commitments should not be recommended. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |
| 10. Unusual sex practices are all right if both partners agree. | 0 | 1 | 2 - 3 - 4 - 5 - 6 |

APPENDIX E.11

Please select one alternative that comes closest to describing your feelings about each question

1. Sex before any significant commitment to a partner
 - a. Is OK if everyone agrees
 - b. Can be damaging
2. Sex
 - a. Can cause as much anxiety than pleasure
 - b. On the whole is good and enjoyable
3. Masturbation
 - a. Causes me to worry
 - b. Can be a useful substitute
4. After having sexual thoughts
 - a. I feel aroused
 - b. I feel jittery
5. When I engage in petting
 - a. I feel scared at first
 - b. I thoroughly enjoy it
6. Initiating sexual relationships
 - a. Is a very stressful experience
 - b. Causes me no problem at all
7. Oral sex
 - a. Would arouse me
 - b. Would terrify me
8. I feel nervous
 - a. About initiating sexual relations
 - b. About nothing when it comes to members of the opposite sex
9. When I meet someone I'm attracted to
 - a. I get to know them
 - b. I feel nervous
10. When I was younger
 - a. I was looking forward to having sex
 - b. I felt nervous about the prospect of having sex
11. When others flirt with me
 - a. I don't know what to do
 - b. I flirt back
12. Group sex
 - a. Would scare me to death
 - b. Might be interesting
13. If in the future I committed cheated on my partner
 - a. I would probably get caught
 - b. I wouldn't feel bad about it
14. I would
 - a. Feel too nervous to tell a dirty joke in mixed group
 - b. Tell a dirty joke if it were funny
15. Dirty jokes
 - a. Make me feel uncomfortable
 - b. Often make me laugh

16. When I awake from sexual dreams
 - a. I feel pleasant and relaxed
 - b. I feel tense
17. When I have sexual desires
 - a. I worry about what I should do
 - b. I would do something to satisfy them
18. If in the future I cheated on my partner
 - a. It would be nobody's business but my own
 - b. I would worry about my spouse's finding out
19. Buying a pornographic book
 - a. Wouldn't bother me
 - b. Would make me nervous
20. Casual sex
 - a. Is better than no sex at all
 - b. Would make me nervous
21. Sex before any significant commitment to a partner
 - a. Is sometimes scary
 - b. Can damage one's career
22. Sexual advances
 - a. Leave me feeling tense
 - b. Are welcomed
23. When I have sexual relations
 - a. I feel satisfied
 - b. I worry about being discovered
24. When talking about sex in mixed company
 - a. I feel nervous
 - b. I sometimes get excited
25. If I were to flirt with someone
 - a. I would worry about his or her reaction
 - b. I would enjoy it

APPENDIX E.12

THIS NEXT QUESTIONNAIRE IS TO BE COMPLETED ONLY BY FEMALES;

These questions ask about your sexual feelings and responses during the past 4 weeks. Please answer the following questions as honestly and clearly as possible. Your responses will be kept completely confidential. In answering these questions the following definitions apply:

Definitions:

Sexual activity can include caressing, foreplay, masturbation and vaginal intercourse.

Sexual intercourse is defined as penetration (entry) of the vagina.

Sexual stimulation includes situations like foreplay with a partner, self-stimulation (masturbation), or sexual fantasy.

TICK ONLY ONE ITEM PER QUESTION.

Sexual desire or interest is a feeling that includes wanting to have a sexual experience, feeling receptive to a partner's sexual initiation, and thinking or fantasizing about having sex.

1. Over the past 4 weeks, how **often** did you feel sexual desire or interest?

- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

2. Over the past 4 weeks, how would you rate your **level** (degree) of sexual desire or interest?

- Very high
- High
- Moderate
- Low
- Very low or none at all

Sexual arousal is a feeling that includes both physical and mental aspects of sexual excitement. It may include feelings of warmth or tingling in the genitals, lubrication (wetness), or muscle contractions.

3. Over the past 4 weeks, how **often** did you feel sexually aroused ("turned on") during sexual activity or intercourse?

- No sexual activity
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

4. Over the past 4 weeks, how would you rate your **level** of sexual arousal ("turn on") during sexual activity or intercourse?

- No sexual activity
- Very high
- High
- Moderate
- Low
- Very low or none at all

5. Over the past 4 weeks, how **confident** were you about becoming sexually aroused during sexual activity or intercourse?

- No sexual activity
- Very high confidence
- High confidence
- Moderate confidence
- Low confidence
- Very low or no confidence

6. Over the past 4 weeks, how **often** have you been satisfied with your arousal (excitement) during sexual activity or intercourse?

- No sexual activity
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

7. Over the past 4 weeks, how **often** did you become lubricated ("wet") during sexual activity or intercourse?

- No sexual activity
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

8. Over the past 4 weeks, how **difficult** was it to become lubricated ("wet") during sexual activity or intercourse?

- No sexual activity
- Extremely difficult or impossible
- Very difficult
- Difficult
- Slightly difficult
- Not difficult

9. Over the past 4 weeks, how often did you **maintain** your lubrication ("wetness") until completion of sexual activity or intercourse?

- No sexual activity
- Almost always or always

- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

10. Over the past 4 weeks, how **difficult** was it to maintain your lubrication ("wetness") until completion of sexual activity or intercourse?

- No sexual activity
- Extremely difficult or impossible
- Very difficult
- Difficult
- Slightly difficult
- Not difficult

11. Over the past 4 weeks, when you had sexual stimulation or intercourse, how **often** did you reach orgasm (climax)?

- No sexual activity
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

12. Over the past 4 weeks, when you had sexual stimulation or intercourse, how **difficult** was it for you to reach orgasm (climax)?

- No sexual activity
- Extremely difficult or impossible
- Very difficult
- Difficult
- Slightly difficult
- Not difficult

13. Over the past 4 weeks, how **satisfied** were you with your ability to reach orgasm (climax) during sexual activity or intercourse?

- No sexual activity
- Very satisfied
- Moderately satisfied
- About equally satisfied and dissatisfied
- Moderately dissatisfied
- Very dissatisfied

14. Over the past 4 weeks, how **satisfied** have you been with the amount of emotional closeness during sexual activity between you and your partner?

- No sexual activity
- Very satisfied
- Moderately satisfied
- About equally satisfied and dissatisfied
- Moderately dissatisfied
- Very dissatisfied

15. Over the past 4 weeks, how **satisfied** have you been with your sexual relationship with your partner?

- Very satisfied
- Moderately satisfied
- About equally satisfied and dissatisfied
- Moderately dissatisfied
- Very dissatisfied

16. Over the past 4 weeks, how **satisfied** have you been with your overall sexual life?

- Very satisfied
- Moderately satisfied
- About equally satisfied and dissatisfied
- Moderately dissatisfied
- Very dissatisfied

17. Over the past 4 weeks, how **often** did you experience discomfort or pain during vaginal penetration?

- Did not attempt intercourse
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

18. Over the past 4 weeks, how **often** did you experience discomfort or pain following vaginal penetration?

- Did not attempt intercourse
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (less than half the time)
- Almost never or never

19. Over the past 4 weeks, how would you rate your **level** (degree) of discomfort or pain during or following vaginal penetration?

- Did not attempt intercourse
- Very high
- High
- Moderate
- Low
- Very low or none at all

APPENDIX E.13

**THIS NEXT QUESTIONNAIRE IS TO BE COMPLETED ONLY BY
MALES;**

International Index of Erectile Dysfunction

These questions ask about the effects your **erection** problems have had on your sex life, over the past 4 weeks. Please answer the following questions as honestly and clearly as possible. In answering these questions, the following definitions apply:

Definitions:

Sexual activity includes intercourse, caressing, foreplay and masturbation

Sexual intercourse is defined as vaginal or anal penetration of the partner (you entered the partner)

Sexual stimulation includes situations like foreplay with a partner, looking at erotic pictures, etc.

Ejaculate is defined as the ejection of semen from the penis (or the feeling of this)

Mark ONLY one circle per question:

1. Over the past 4 weeks, how often were you able to get an **erection** during sexual activity?

- No sexual activity
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

2. Over the past 4 weeks, when you had **erections** with sexual stimulation, how often were your **erections** hard enough for penetration?

- No sexual stimulation
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

Questions 3, 4 and 5 will ask about **erections** you may have had during sexual intercourse.

3. Over the past 4 weeks, when you attempted sexual intercourse, how often were you able to penetrate (enter) your partner?

- Did not attempt intercourse
- Almost always or always
- Most times (much more than half the time)

- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

4. Over the past 4 weeks, during sexual intercourse, how often were you able to maintain your **erection** after you had penetrated (entered) your partner?

- Did not attempt intercourse
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

5. Over the past 4 weeks, during sexual intercourse, how difficult was it to maintain your **erection** to completion of intercourse?

- Did not attempt intercourse
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

6. Over the past 4 weeks, how many times have you attempted sexual intercourse?

- No attempts
- 1-2 attempts
- 3-4 attempts
- 5-6 attempts
- 7-10 attempts
- 11 or more attempts

7. Over the past 4 weeks, when you attempted sexual intercourse how often was it satisfactory for you?

- Did not attempt intercourse
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

8. Over the past 4 weeks, how much have you enjoyed sexual intercourse?

- No intercourse
- Very highly enjoyable
- Highly enjoyable
- Fairly enjoyable

- Not very enjoyable
- Not enjoyable

9. Over the past 4 weeks, when you had sexual stimulation or intercourse how often did you ejaculate?

- Did not attempt intercourse
- Almost always or always
- Most times (more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

10. Over the past 4 weeks, when you had sexual stimulation or intercourse how often did you have the feeling of orgasm or climax (with or without ejaculation)?

- No sexual stimulation or intercourse
- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

Questions 11 and 12 ask about sexual desire. Let's define sexual desire as a feeling that may include wanting to have a sexual experience (for example, masturbation or intercourse), thinking about having sex or feeling frustrated due to a lack of sex.

11. Over the past 4 weeks, how often have you felt sexual desire?

- Almost always or always
- Most times (much more than half the time)
- Sometimes (about half the time)
- A few times (much less than half the time)
- Almost never or never

12. Over the past 4 weeks, how would you rate your level of sexual desire?

- Very high
- High
- Moderate
- Low
- Very low or none at all

13. Over the past 4 weeks, how satisfied have you been with your overall sex life?

- Very satisfied
- Moderately satisfied
- About equally satisfied and dissatisfied

Moderately dissatisfied

Very dissatisfied

14. Over the past 4 weeks, how satisfied have you been with your sexual relationship with your partner?

Very satisfied

Moderately satisfied

About equally satisfied and dissatisfied

Moderately dissatisfied

Very dissatisfied

15. Over the past 4 weeks, how do you rate your confidence that you can get and keep your **erection**?

Very high

High

Moderate

Low

Very low

APPENDIX F

Plain Language Statement



PLAIN LANGUAGE STATEMENT AND CONSENT FORM

TO: Participant

| |
|---------------------------------|
| Plain Language Statement |
|---------------------------------|

Date: Version 1, 12th July 2011

Full Project Title: The Associations Among Adult Attachment, Relationship Functioning, and Sexual Functioning.

Principal Researcher: Professor Marita McCabe

Student Researcher: Ms Christina Stefanou

The Plain Language Statement and Consent Form is 4 pages long. Please make sure you have read and understood all the pages.

1. Your Consent

Males and females aged 18 to 65 who are currently involved in a romantic relationship, or have had a romantic relationship for 3 or more months, are invited to take part in this research project.

This Plain Language Statement contains detailed information about the research project. Its purpose is to explain to you as openly and clearly as possible all the procedures involved in this project so that you can make a fully informed decision whether you would like to participate.

Please read this Plain Language Statement carefully. Feel free to ask questions about any information in this document. You may wish to discuss the project with a relative or friend or your local health worker. Feel free to do this.

Once you understand what the project involves and if you agree to take part in it, you will be asked to complete the following online questionnaire. Your consent will be indicated by electronically submitting your responses, following completion of the questionnaire, to the researchers' anonymous database.

You may print a copy of the Plain Language Statement to keep as a record.

2. Purpose and Background

The purpose of this project is to investigate the associations among different attachment orientations, various aspects of relationship functioning (satisfaction, intimacy, communication, commitment, and conflict), and various aspects of

sexual functioning (dysfunctions, satisfaction, frequency, guilt, and anxiety). The intended outcome is to provide a better understanding of the way individuals think and behave differently in their romantic relationships. This project is being conducted by a postgraduate student as part of the Doctor of Psychology (Clinical) degree at Deakin University, Burwood.

A total of 500 males and females will participate in this project.

Previous research has shown that the way individuals are attached in their romantic relationships, can impact the nature and quality of these relationships. However, there is little research on the multifaceted way adult attachment is associated with different emotions and behaviors in romantic relationships, and how it is related to the expression of sexuality in different partnerships (e.g., sexual dysfunction).

Males and females aged 18-65 that are currently in a romantic relationship (i.e., married, de facto, dating, homosexual, and bisexual) for 3 months or more, or have experienced a past romantic relationship for 3 months or more, are invited to participate in this research project because it is important to understand the factors which contribute to the difference experience of romantic relationships in adulthood, in order to provide appropriate intervention and treatment in the clinical field.

3. Procedures

Once you have understood and consented to partake in the research, you will be asked to fill out an online questionnaire, which will take approximately forty minutes to complete. You will be asked questions about the way you feel and behave in your romantic relationships, and your sexual and relationship experiences and attitudes. The following are examples of statements and questions to which you will be asked to respond:

- *It helps to turn to my romantic partner in times of need*
- *Over the past 4 weeks, how much have you enjoyed sexual intercourse?*
- *After having sexual thoughts, I feel aroused*

Once you have completed the questionnaire, you can submit your responses electronically and they will be sent anonymously to the researcher's database. You are reminded not to include any personal information that could identify you in your questionnaire responses.

You will be invited to provide a contact e-mail if you wish to participate in a follow-up study. The e-mail address does not need to be your personal e-mail address, and so anonymity will still be maintained. If a follow-up study is conducted, approximately 12 questions will be emailed to you online, and you can e-mail them back once they are complete. The questions will have the same content as the first study, and will just explore some of the associations in greater depth.

4. Possible Benefits

Possible benefits include having a better understanding into the reasons individuals think and behave differently in their romantic partnerships, therefore influencing the way clinical interventions/treatments are formulated and operationalized. It cannot be guaranteed that you will receive any direct benefits from this project.

5. Possible Risks

It is possible, but unlikely that you may experience a low level of discomfort regarding the sensitive nature of the questions being asked. If you do experience anxiety or stress whilst completing the questionnaire, it is recommended that you contact your General Practitioner for counseling and referral. In addition, Lifeline Australia provides 24-hour telephone counselling. This service is available to anyone, anywhere in Australia. Phone: 13 11 14 Email: www.lifeline.org.au

If you feel uncomfortable to a degree that you do not wish to partake further in the study, you can choose to not submit your answers without the risk of incurring any consequences.

Please note that there may be additional unforeseen or unknown risks.

6. Privacy, Confidentiality, and Disclosure of Information

Any information obtained in connection with this project is anonymous, and therefore cannot be used to identify you. Only the researchers will have access to responses to the questionnaire, which will remain strictly confidential. To maintain confidentiality, please ensure that you do not attach your name or any other information that could identify you when you provide the completed questionnaire. While the researchers cannot guarantee the complete security of information transmitted through the internet, individual participants will not be identifiable from completion of the anonymous questionnaire.

Your anonymous responses from this questionnaire will be stored within a locked file within the School of Psychology at Deakin University for a minimum of six years after any publication arising. After this period, all files will be destroyed. Again, only the researcher will have access to these data.

It is intended that the results will be used as part of the thesis requirements of the Doctorate of Psychology (Clinical) degree. A report of the study may also be submitted for publication. However, in any publication, information will be provided in such a way that individual participants cannot be identified as only aggregated data will be reported.

7. Results of Project

Due to the confidential and anonymous nature of the responses participants give in this study, it will not be possible to inform you of the results when the research project is completed. However, if you would like a summary of the results, this

can be supplied if you e-mail Christina Stefanou towards the end of 2012 (please refer to the e-mail address at the end of this Plain Language Statement).

8. Participation is Voluntary

Participation in any research project is voluntary. If you do not wish to take part, you are not obliged to. If you decide to take part and later change your mind, do not submit your responses to the questionnaire.

Your decision whether to take part or not to take part will not affect your relationship with Deakin University.

A member of the research team will be available to answer any questions you have about the research project. You can ask for any information that you would like. Complete the questionnaire only after you have had a chance to ask your questions and have received satisfactory answers.

9. Ethical Guidelines

This project will be carried out according to the *National Statement on Ethical Conduct in Human Research* (2007) produced by the National Health and Medical Research Council of Australia. This statement has been developed to protect the interests of people who agree to participate in human research studies.

The ethics aspects of this research project have been approved by the Human Research Ethics Committee of Deakin University.

10. Complaints

If you have any complaints about any aspect of the project, the way it is being conducted or any questions about your rights as a research participant, then you may contact:

The Manager, Office of Research Integrity, Deakin University, 221 Burwood Highway, Burwood Victoria 3125, Telephone: 9251 7129, Facsimile: 9244 6581; research-ethics@deakin.edu.au

Please quote project number [2011-0331].

11. Reimbursement for Your Costs

There will be no financial reimbursement for your participation in this project.

12. Further Information, Queries, or Any Problems

If you require further information, wish to withdraw your participation, or if you have any problems concerning this project (for example, any side effects), you can contact the principal researcher, Professor Marita McCabe (marita.mccabe@deakin.edu.au) or the student researcher, Christina Stefanou (cstefanou@deakin.edu.au).