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Utilizing Qualitative and Quantitative Research Methods to Understand Women's Sexual Self-Views

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Utilizing Qualitative and Quantitative Research Methods To Understand Women's Sexual Self-Views

by

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Utilizing Qualitative and Quantitative Research Methods to

Understand Women's Sexual Self-Views

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Employing both qualitative and quantitative research methodologies, my dissertation project involved three phases aimed at examining women's sexual self-views. The primary aim of this research was to develop a comprehensive and multifaceted self-report measure of women's sexual self-views. Phase 1 began the investigation of women's sexual self-views through open-ended questions posed during qualitative interviews with a diverse sample of women varying among many demographic variables. The initial selection of items of the Women's Sexual Self-Views (WSSV) scale were derived from the transcripts of Phase 1 interviews. Phase 2 focused on the development of a valid instrument intended to tap the construct of women's sexual self-views and examined its association to potentially relevant variables, including sexual

iii

functioning status. Results from factor analyses highlighted discrete factors of women's sexual self-views which were labeled as: Positive Sexual Self-Views (12 items), Negative Internal/Affective Sexual Self-Views (6 items), Negative External/Behavioral Sexual Self-Views (5 items), Interpersonally-Relevant Sexual Self-Views (6 items), and Conservative Sexual Self-Views (5 items). The final version of the WSSV scale is a brief, 34-item measure of sexual self-views. Psychometric evaluation of the WSSV scale provided preliminary evidence of reliability and validity. The ability of the WSSV scale to differentiate between women with and without sexual concerns was demonstrated for the Positive Sexual Self-Views domain and the Negative Internal/ Affective Sexual Self-Views domain. That is, women with sexually difficulties had lower Positive Sexual Self-Views and higher Negative Internal/ Affective Sexual Self-Views as compared to sexually healthy controls. Phase 3 investigated the relationship between sexual self-views and memory for sexual information. Results provided initial evidence that participants performed better on sexually-relevant memory tasks which were consistent with their sexual self-views. I believe that the following study provides a deeper understanding of the cognitive factors involved in female sexual functioning and begins to provide a framework for understanding the role of memory in women's sexuality.

Table of Contents

List o	f Figuresx				
List o	f Appendicesxi				
Chap	ter 1: Introduction				
1.1	Introduction to the Study of the Self in Psychology1				
1.2	Self-Views or Self-Schemas				
1.3	Sexual Self-Views or Self-Schemas				
1.4	The Potential role of Sexual Self-Views in Women's Sexual Functioning				
	Status				
1.5	Memory, Self-Views and Sex				
Chap	ter 2: Present Study				
2.1	Introduction				
2.2	Phase 1: Qualitative Investigation				
	2.2.1 Grounded Theory				
2.3	Phase 2: Quantitative Investigation				
2.4	Phase 3: Memory and Sexual Self-Views24				
Chap	ter 3: Methods				
3.1	Phase 1: Initial Qualitative Interviews to Understand Women's Sexual Self-				
	Views				
	3.1.1 Overview of Experimental Design				
	3.1.2 Participants				
	3.1.3 Measures				

	3.1.4	Procedure			
3.2	Phase 2: Quantitative Methods to Derive a Valid Measure of Women's				
		Sexual Self-Schemas and Examination in Relation to Potentially Relevant			
		Variables, Including Sexual Functioning32			
	3.2.1	Overview of Experimental Design			
	3.2.2	Participants			
	3.2.3	Measures			
	3.2.4	Procedure			
		3.2.4.1 Online Data Collection			
		3.2.4.2 Participants Recruited from Undergraduate Research Pool39			
		3.2.4.3 Participants Recruited through the Female Sexual			
		Psychophysiology Laboratory40			
3.3	Phase	3: Sexual Self-Views and Memory41			
	3.3.1	Overview of Experimental Design41			
	3.3.2	Participants42			
	3.3.3	Measures			
	3.3.4	Experimental Stimuli			
	3.3.5	Procedure45			
Chap	ter 4: S	tatistical Analyses and Results			
4.1	Phase	1: Qualitative Interviews			
	4.1.1	Participants			
	4.1.2	Analyses53			

4.2	Phase 2: Scale Development				56
	4.2.1	Participants Recruited Online for Initial Scale Development			56
	4.2.2	Analyse	s		59
		4.2.2.1	Scale Con	struction	59
			4.2.2.1.1.	Initial Exploratory Factor Analysis	59
			4.2.2.1.2	Confirmatory Factor Analysis	62
		4.2.2	.1.3 Subfa	ctor Analysis	63
		4.2.2.2	Factor Into	ercorrelations	66
		4.2.2.3	Reliability	7	67
4.3	Phase 2, Part B: Validity of the WSSV Scale			68	
	4.3.1	Participants			68
	4.3.2	Analyse	s		70
		4.3.2.1	Convergen	t Validity	71
		4.3.2.2	Divergent	Validity	73
		4.3.2.3	Discrimina	nt Validity	75
		4.3.2.4	Examination	on of Potential Predictors of the WSSV Scale	78
			4.3.2.4.1	Predictors of the Positive Sexual Self-Views	
				Domain	79
			4.3.2.4.2	Predictors of the Negative Internal/ Affective	
				Sexual Self-Views Domain	80
			4.3.2.4.3	Predictors of the Negative External/ Behavior	al
				Sexual Self-Views Domain	81

			4.3.2.4.4	Predictors of the Interpersonally-Relevant Sexual	
				Self-Views Domain82	
			4.3.2.4.5	Predictors of the Conservative Sexual Self-Views	
				Domain	
4.4	Phase	3		84	
	4.4.1	Particip	ants	84	
	4.4.2	Data Ma	anagement ar	nd Reduction87	
	4.4.3	Order E	ffects	88	
	4.4.4	Examin	ation of the P	redictors of Performance on Memory Tasks88	
		4.4.4.1	Predictors of	of Performance on Memory Tasks for Story 188	
		4.4.4.2	Predictors of	of Performance on Memory Tasks for Story 290	
		4.4.4.3	Predictors of	of Performance on Memory Tasks for Story 391	
Chap	ter 5: E	Discussion	1		
5.1	Brief	Overview	of Dissertati	on Study93	
5.2	Comb	ining Qua	alitative and	Quantitative Research Methodologies93	
5.3	Discu	ssion of P	Phases 1 and 2	2: Development of the Women's Sexual Self-Views	
	(WSSV) Scale derived from Qualitative Data95				
	5.3.1	Discuss	ion of the Lir	mitations and Conclusions Drawn from Phases 1 and	
		2			
5.4	Discu	ssion of P	Phase 3: Inves	stigating the Role of Women's Sexual Self-Views in	
	Memo	ory for Se	xually-Releva	ant Information113	
	541	Discuss	ion of the Lir	nitations and Conclusions Drawn from Phase 3118	

5.5 Final Conclusions and Future Directions	120
Figures	124
Appendices	127
Appendix A: Sexual Self-Schemas Scale	127
Appendix B: Recruitment Flyer for Phase 1	128
Appendix C: Phase 1 Demographics Questionnaire	129
Appendix D: The Female Sexual Function Index	131
Appendix E: Phase 1 Sexual Experience Scale	134
Appendix F: Additional Questions Asked During Phase 1 Individual Qu	alitative
Interviews	135
Appendix G: Phase 2 Demographics Questionnaire	136
Appendix H: Young Schema Questionnaire-Short Form	137
Appendix I: Initial Version of the Women's Sexual Self-Views Scale	141
Appendix J: Phase 2 Online Advertisement	145
Appendix K: Cover Letter to Participate in Online Research Study	146
Appendix L: Phase 3 Demographics Questionnaire	149
Appendix M: Final Version of the Women's Sexual Self-Views Scale	150
Appendix N: Story Scale	152
Appendix O: Phase 3 Sexual Experience Questionnaire	153
References	154
Vita	173

List of Figures

Figure 1: Barlow's Model of Sexual Function	124
Figure 2: Overview of Experimental Design for Phases 1, 2 and 3 of Dis Study	
Figure 3: Overview of Experimental Design for Phase 3	126

CHAPTER 1: INTRODUCTION

1.1 Introduction to the Study of the Self in Psychology

Philosophers and theologians have long engaged in discourse on the topic of "the self" (for review, see Leary & Tangney, 2003). Despite these early forays into self-focused theories, the first detailed psychological discussion of the self did not appear until William James' publication, *Principles of Psychology* (1890), in his chapter titled "The Consciousness of the Self." Arguably, James legitimized the study of the self by proposing that the self underlies and affects all aspects of human behavior. Specifically, James stated that fundamental psychological processes (e.g., emotion, attention, perception, reasoning, will) could not be understood without reference to the nature and function of the self (Leary & Tangney, 2003), as the conditions of one's "invariably *personal*" mental life only become meaningful when examined in reference to the self (Markus, 1990).

Today, the topic of the self has emerged as a central area of many psychological investigations (for review, see Banaji and Prentice, 1994). Research investigations examining the nature of the self have uncovered many facets regarding the role of the self in human lives including, but not limited to, self-identity, self-awareness, self-esteem, self-image, self-recognition, self-consciousness, and self-concepts.

1.2 Self-View or Self-Schemas

Presently, the self is viewed as a multi-dimensional and multi-faceted set of structures which together play a critical role in organizing human behavior (Markus, 1990). These structures, which are often referred to as self-representations, self-concepts or self-schemas, contain specific cognitive and affective components based on an individual's unique past personal history.

In 1977, Markus first introduced the construct of self-schemas which she defined as "cognitive generalizations about the self, derived from past experience, that organize and guide the processing of self-referenced information contained in the individual's social experience" (p. 64). In Markus' landmark paper, it was proposed that self-schemas are derived in an attempt to integrate and understand one's behavior in a particular domain. Markus called attention to the concept that our own unique internal cognitive structures are most apparent when processing information about ourselves, as they directly influence both the input and the output of information. Specifically, self-schemas or self-views "function as selective mechanisms which determine whether information is attended to, how it is structured, how much importance is attached to it, and what happens to it subsequently." Self-schemata can include two different types of cognitive representations: (1) general information abstracted from repeated exposure to reoccurring events and, (2) information derived from a specific past event involving the individual.

Markus' (1977) assertion for the existence of self-schemata was based on evidence from two studies. In Study 1, 48 female students enrolled in an Introductory Psychology course completed self-rating scales which included the trait dimension of

"independence-dependence." Based on endorsements of trait adjectives, participants were classified as "Independents," "Dependents," or "Aschematics." That is, participants who indicated autonomy, perceived leadership, and non-conformity were identified as Independents, whereas participants who indicated cooperation and conformity were identified as Dependents. Participants who responded in the "middle range" of the independence-dependence continuum were identified as Aschematics. Subsequently, participants completed a series of three cognitive tasks designed to examine the influence of their self-schemata (regarding the independence-dependence dimension) on the processing of information about the self. In the first task, content and latency of selfdescriptions were assessed by presenting participants with a list of trait adjectives pertaining to independence and dependence and asking participants to indicate whether they felt these adjectives were self-descriptive. During the second task, participants were instructed to select self-descriptive adjectives and provide past behavioral evidence demonstrating these traits. Lastly, participants were given a list of behaviors demonstrating both "independent" behavior (e.g., "You speak up as soon as you have some comments on the issue being discussed") and "dependent" behavior (e.g., "You hesitate before commenting, only to hear someone else make the point you had in mind") and instructed to rate how likely they felt that they would behave in such ways. Results indicated that women who were categorized as Dependents were more likely to indicate dependent words as self-descriptive, responded to dependent words faster than independent words, provided more behavioral evidence for dependent words as compared to independent words, and reported higher likelihood ratings for dependent behavior as

Independents were more likely to indicate independent words as self-descriptive, responded to independent words faster than dependent words, provided more behavioral evidence for independent words as compared to dependent words, and reported higher likelihood ratings for independent behavior as compared to dependent behavior. Women categorized as Aschematics did not show significant differences in response latencies to independent vs. dependent words or in likelihood ratings for independent vs. dependent behaviors, and provided fewer examples of behavioral descriptions demonstrating dependent and independent behaviors.

In Study 2, participants from Study 1 were invited to a second experimental session scheduled approximately three weeks later. First, participants completed a fictitious test which they were told was a test of "suggestibility in everyday life." The purpose for inclusion of this test was to provide the opportunity for the experimenter to give feedback to participants which was intended to be incongruent with their self-schemata (as assessed during Study 1). Specifically, women previously categorized as Independents were given feedback indicating that they were suggestible (e.g., "quite susceptible to social influence," "quite likely to be influenced by others"), whereas women previously categorized as Dependents were given feedback indicating that they were not suggestible (e.g., "not receptive to the suggestions of others," "independent and concerned with making their own point"). Women previously categorized as Aschematics were randomly assigned to receive one of the two different types of feedback. Following feedback administration, content and latency of self-descriptions were assessed by again

presenting participants with a list of trait adjectives and instructing them to indicate whether they were self-descriptive. Results from this task indicated that women with clearly defined schemata (Independents and Dependents) were less willing to accept feedback as compared to women categorized as Aschematics. Additionally, individuals with schemata showed slower latencies for self-judgments after having received the feedback as compared to their responses in Study 1, whereas Aschematics did not show any significant differences in response latencies to self-judgments before and after receiving the feedback.

Markus (1977) argued that results from these two studies provided support for the premise that an individual's self-schemata directly affect one's attention and memory for self-referenced material. That is, participants responded more quickly to self-judgments which were consistent with their self-schemas, were able to report "easily retrievable" evidence of behaviors consistent with their self-schemas, and indicated more confidence in self-predictions of future behaviors consistent with their self-schemas. Additionally, results from these studies suggest that individuals are resistant to information which is "counterschematic," that is, information which is not consistent with their schemas in a particular domain. Further, Markus (1977) inferred that it is likely that self-schemas increasingly become more resistant with repeated or recurring experiences which reinforce one's self-views.

1.3 Sexual Self-Schemas or Self-Views

Many researchers have proposed that the "self" is multi-faceted (e.g. Carver & Scheier, 1981) and comprised of differing self-views within various domains of social knowledge depending upon the situation that an individual is in. Considering that sexual scenarios most likely represent a specific and salient aspect of one's life and oftentimes involve interpersonal social interactions, it is feasible that individuals specifically have sexual self-schemas or self-views. Given that each aspect of the self most likely contains its own unique and separate elements, it is important to study each facet of the self with an idiosyncratic and distinct approach and method of study.

In the first chapter of her book entitled, *Women's Sexualities* (2000), Ellison discussed the importance of a woman's sexual self by stating that "our sexual self is that aspect of who we are through which we experience and express our sexuality" (p. 13). Based on the assumption that all women have had distinct and personal past life experiences, both sexual and non-sexual, and that our sense of ourselves is derived from these past experiences, it is likely that women have their own unique sense of themselves as sexual beings.

In 1994, Andersen and Cyranowski proposed the construct of sexual self-schemas as basic beliefs about the sexual aspects of oneself and posited that a woman with a well defined sexual self-schema would refer to these cognitive representations as a "point of origin of information—judgments, decisions, inferences, predictions, and behaviors... about the current and future sexual self" (p. 1079). Andersen and Cyranowski developed and validated the Sexual Self-Schema Scale (SSSS) for women,

which has proven to be a valuable starting point for understanding the cognitive components of female sexuality. This scale was derived based on Galton's (1884) lexical hypothesis, which is the assumption that individual differences in human behavior are encoded as single terms in one's language. An initial list of 300 trait adjectives were rated by a sample of undergraduate women (n = 69) on their relevance to "the conceptualization of a sexual woman." The 100 highest rated adjectives and a random selection of an additional 70 adjectives were then rated by undergraduate women (n = 69, M age = 20 years) as self-descriptive (but not related to sexuality) and also rated by a sample of older women (n = 14, M age = 49 years) regarding their relevance in describing a sexual woman. The final scale was constructed by the elimination of items from the 170-word list based on the following criterion: (1) substantial differences in ratings between samples of women, (2) adjectives which reflected response biases of social desirability or negative affect, and (3) adjectives which correlated with positive affect or self-esteem. The remaining 50-item list of trait adjectives (with 10 additional "filler" items) was then administered along with several other scales to a group of undergraduate women (n = 221) to determine discriminant and convergent validity. Twenty-four items which correlated with affectivity and social desirability were eliminated resulting in the final 26-item scale. Responses of 387 undergraduate women to the remaining 26-items were submitted to a factor analysis which revealed three factors, which Andersen & Cyranowski labeled: (1) Passionate-Romantic factor, (2) Open-Direct factor, and (3) Embarrassed-Conservative factor (for final version of the SSSS, see Appendix A). The Sexual Self-Schema Scale (SSSS) initially represented a bipolar model

of sexual self-schemas with women either having a negative or a positive sexual selfschema (calculated by subtracting Factor 3 from the sum of Factors 1 and 2). However, Andersen and Cyranowski later acknowledged the existence of women who were aschematic or co-schematic. Further research investigating the implications of sexual self-schemata have found that there are consistent differences in women with differing sexual self-schemas (as assessed using the SSSS) including the cognitive processing of sexual or romantic information about the self (Cyranowski & Andersen, 2000), sexual problems in women receiving gynecological and breast cancer treatment (Andersen, Woods, & Copeland, 1997), patterns of romantic attachment (Cyranowski & Andersen, 1998), and physical attractiveness (Wiederman & Hurst, 1997). Additionally, two studies investigating sexual pain disorders have found evidence of differing sexual self-schemas for women with vaginismus (Reissing, Binik, Khalife, Cohen, & Amsel, 2003) and vulvar vestibulitis (Gates, 2001) versus controls. In recent dissertation research by Rushton (2003), the SSSS was investigated in relation to sexual behavior, attitudes toward sex, personality factors, and intimacy. Participants included both undergraduate women, as well as an older sample of women from the community (age range 18 – 66 years). Results indicated that younger women with more positive sexual self-schemas reported more sexual arousability, less sexual anxiety, and more positive attitudes toward sex as compared to younger women with more negative sexual self-schemas. Interestingly, however, these results did not hold up in the older age range of participants. Rushton suggested that the SSSS may be related more to the sexuality of young versus older women, and not a sensitive or appropriate measure for women over the age of 30.

While Andersen and colleagues have provided insight into a much needed understanding of the role of cognitions in sexual functioning, I believe the application of the SSSS to a clinical population of sexually dysfunctional women is limited by a number of factors. First, the SSSS was developed mainly on a population of undergraduate women. Thus responses drawn from this population most likely reflect emerging versus established sexual patterns. Another limitation of the SSSS is based on the use of trait adjectives to describe sexual self-schemata. It is possible that these adjectives tap a more general form of schemata and are not necessarily specific to the realm of sexual cognitions. The SSSS is also limited by the fact that it only provides for three factors (2 positive and 1 negative) of sexual self-schemata. Given that recent research has uncovered a multitude of variables known to affect sexual functioning and behavior (e.g., self-focused attention, body image concerns, past sexual abuse), it is feasible that there could be many more factors used to describe women's sexual self-schemas or self-views.

Utilizing a different approach than Andersen and Cyranowski (1994), Daniluk (1993) used both a feminist and qualitative approach to examine the meaning and experience of female sexuality. The aim of her research was to provide an "encompassing" meaning of female sexuality directly derived from women's discussions of their experiences with their sexuality in relation to their bodies, relationships, and in the larger context of the world. Daniluk (1993) utilized a group format in which women participated in 11 weekly sessions (2.5 – 3 hours each). The research question which guided the weekly sessions was "How do women experience their sexuality, and what meanings are associated with those experiences?" (Daniluk, 1993, p. 55). Participants

included 10 women recruited at a Canadian University and ranging in age from 30-66 years (M = 42.2 years). Although detailed demographic information was not clearly outlined, Daniluk stated that the sample included "relatively well-educated, psychologically integrated women who were successfully engaged in various artistic, educational, and occupational pursuits," and who were primarily Caucasian with European or American ancestry (p. 56). In the initial group sessions, participants were instructed to create a collage representing their sexual and reproductive history using various materials from magazines and newspapers. These collages were then used as stimuli to promote group discussions in which women would "tell their story." All 11 sessions were transcribed and coded using Colaizzi's (1978) method of phenomenological analysis. The goal of the analyses was to extract themes (both experiential and non-experiential) regarding female sexuality which were shared across participants in the group. Two categories of themes emerged from the data: 1) those which related to "major structural or institutional sources" which had been influential in defining participants' understanding of female sexuality, and 2) those which reflected events experienced by participants during development that had been defining in terms of their sexuality. Structural and/or institutional sources of information included: medicine and/or medical professionals, religion, sexual violence, and media. For the most part, these sources of information had been negative in that they had induced feelings of shame, guilt, fear, anger and inadequacy in the women who participated in the study. Sources of information which women reported had impacted the development of their sexual identity included: past sexual experiences or expression, reproduction, body

image, and intimate relationships. For most of the women in this study, early sexual experiences were viewed negatively as they were characterized by "secrecy, isolation, and ignorance." There were, however, a few of the women in the study who reported having early sexual experiences involving care and respect which, subsequently, had a positive impact on how they felt about sexual expression at the time of the study. Women described the menstrual cycle and their reproductive capability as both a liberating experience in which the ability to give life was "a fundamental source of identity and womanhood," but also as a confining source in which a woman's reproductive capacity serves as a "primary source of oppression" (p. 62). Both body image and intimate relationships had provided dichotomous influences on the development of the meaning of sexuality for women in this study. Specifically, many women discussed negative aspects of body image centered around feelings of inadequacy, as well as intimate relationships which had been painful, prompting feelings of vulnerability. Conversely, positive body image in some of the women had prompted feelings of self-love and self-acceptance, whereas positive intimate relationships had prompted feelings of validation, empowerment, and self-growth.

Although Daniluk's study provides for a rich and detailed understanding of potential sources which can influence the meaning women place on their sexuality, it does not seem to directly tap into how women describe themselves as sexual beings. However, given the aim of my dissertation research, I believe that it is critical to keep in mind the sources which have shaped the lives and sexuality of women outlined by Daniluk (1993). Limitations of Daniluk's study include the small sample size and lack of

a representative sample of women from varied demographic backgrounds. Although Daniluk initially believed that utilizing a group format would provide the ideal medium in which to explore female sexuality, in her discussion she suggests that this may have influenced the content and depth of material which was provided and discussed among group participants. Further, Daniluk stated that individual interviews with women of varying ethnicities, social economic status and sexual orientation could provide further information on themes critical to female sexuality.

1.4 The Potential Role of Sexual Self-Views in Women's Sexual Functioning Status

In her article titled, "The greening of sexuality and intimacy," Cairns (1990) discussed the relationship between women's views of themselves and their sexual and relationship functioning. Specifically, she stated that the largest barrier to both psychological and sexual intimacy for women results from an impaired sense of oneself. Based on this viewpoint, understanding the link between sexual self-views and sexual functioning would seem to be both a critical and fruitful endeavor for any clinician and/or researcher involved in women's sexual health.

Although the field of sex research has been criticized for a relative lack of definitive and verifiable models of female sexual dysfunction, Barlow and colleagues have proposed a model of sexual functioning (see Figure 2) based on research conducted with males that has often been applied to discussions of female sexual functioning (e.g., McCall & Meston, 2007). Based on findings from a number of laboratory studies, Barlow and colleagues have shown that men without sexual dysfunction respond to erotic cues

with positive affect, positive expectancies and perceived control of erectile response; whereas men with a history of sexual dysfunction respond to erotic cues with negative affect, negative expectancies and perceived lack of control of erectile response (Abrahamson, Barlow, & Abrahamson, 1989; Abrahamson, Barlow, Sakheim, Beck & Athanasiou, 1985; Barlow, 1986). Barlow and colleagues have explained these findings in terms of a positive feedback loop whereby expectancies are shaped by an individual's recollections of past sexual experiences. In this model, individuals with sexual dysfunction have responded unsuccessfully, whereas sexually healthy individuals have responded successfully in past sexual situations and, thus, approach sexual scenarios with expectancies and affective responses congruent with their past experiences. Given that this model is directly tied to past experiences, it seems plausible that one's sexual selfviews could be directly related to these cognitive aspects of sexual functioning (i.e., affect, expectancies, and perceived control). That is, both sexual functioning status and sexual self-views are drawn from memories of past experiences. Also relevant, in Markus' (1977) initial discussion of self-schemata, she emphasized that while selfschemas are based on past experiences and behavior, their involvement goes far beyond that of a "depository" role. Specifically, self-schemas provide a processing function by allowing individuals to think beyond information which is available in the current environment and are used "as a basis for future judgments, decisions, inferences, or predictions about the self" (p. 64). Considering Markus' comments are in line with Barlow's model of sexual dysfunction, it is possible that one's sexual self-views are not only tied directly to past experiences, but may also play a critical role in the development

and maintenance of sexual dysfunction. To date, little research has directly examined the possible role of sexual self-views in contributing to the development and/or maintenance of sexual difficulties in women.

1.5 Memory, Self-Views, and Sex

While it has been argued that a sense of self is a prerequisite for the formation of memory (e.g., Gennaro, 1992; James, 1890), it has also been purported that the ability to remember is critical to the formation of one's self-concept (e.g. Greenwald, 1981; Locke, 1731). Given that the concepts of memory and self are believed by many to be interdependent concepts, research investigating either of these areas should note the connection between the two. To date, no published studies have investigated the relationship between sexual self-views or schemas and memory for sexually-relevant information. Given that models of sexual functioning and the theoretical basis of self-views or self-schemas both rely on an individual's unique memory system, it would seem fruitful to investigate memory for sexual information in relation to sexual self-views

Considerable evidence exists suggesting that the processing of information, both encoding and retrieval, is facilitated by one's self-views (e.g., Fiske & Taylor, 1984; Taylor & Crocker, 1981). Self-schemas or self-views are developed through knowledge gained from past experiences, thus it can be ascertained that the more experience or exposure within a particular domain, the more likely it is for an individual to show greater memory ability relevant to this particular domain (Crocker, Fiske, & Taylor, 1984). That is, information which is deemed self-relevant is more likely to be processed

and/or remembered with greater efficiency than are other types of information which are not considered self-relevant (e.g., Markus, Crane, Berstein, & Silada, 1982; Markus & Smith, 1981). Using similar rationale, Bower, Black and Turner (1979) suggested that certain scripts which are acquired through an individual's unique experiences can enhance or facilitate memory for relevant details of a particular story (e.g., Mandler & Johnson, 1977). These conclusions would be consistent with the abundance of literature which has shown that people show superior memory for information which is congruent with their self-schemas versus information which is incongruent with their self-schemas (e.g. Epstein, 1973; Marcia, 1966).

One of the earliest attempts to provide empirical support for the role of the self in memory systems was research conducted by Rogers and colleagues (Kuiper & Derry, 1981; Rogers, 1981; Rogers, Kuiper, & Kirker, 1977) investigating what has become known as the self-reference effect (Kihlstrom, Beer, & Klein, 2003). This effect refers to people showing superior memory for information that pertains to their unique self-views. Rogers, Kuiper & Kirker (1977) provided evidence in support of the self-reference effect in a study investigating recall of trait adjectives judged to be self-descriptive. Participants evidenced greater recall for adjectives deemed to be self-descriptive as compared to semantic and structural tasks used in standard levels-of-processing experiments.

Although there has been much debate regarding the strength and validity of the self-reference effect (for review, see Symons & Johnson, 1997), evidence for this effect has been found in a variety of circumstances, including the classroom setting (Forsyth & Wibberly, 1993), consumer behavior (Burnkrant & Unnava, 1995; Krishnamurthy &

Sujan, 1999; Meyers-Levy & Peracchio, 1996; Sujan, Bettman, & Baumgartner, 1993), and cross-cultural research (Wagar & Cohen, 2003).

Given that the topic of sexuality often involves a salient and emotional component, it is likely that self-views are implicated in memories for sexual information. To date, studies investigating memory for sexual information have mainly focused on the memory systems of sexual abuse survivors (e.g., Bremner et al., 2003; Clancy, Schacter, McNally, & Pitman, 2000; Stein, Hanna, Vaerum, & Koverola, 1999;) and gender differences in memory (e.g., Bush & Geer, 2001; Geer & McClone, 1990; Kirsch-Rosenkrantz & Geer, 1991; McCall, Rellini, Seal, & Meston, 2007). In general, results from these studies provide evidence suggesting that women with a history of sexual abuse are more likely to demonstrate memory deficits as compared to women with no history of sexual abuse. Additionally, results examining gender differences suggest that men are more accurate in memories of erotic material (e.g., actual physical contact including oral sex and coitus), whereas women are more accurate in memories of romantic material (e.g., expressions of love or affection). Several studies have employed a diary-recall method to examine both individual and gender differences in recall of sexual information (e.g., Berk, Abramson, & Okami, 1995; Fortenberry, Cecil, Zimet, & Orr, 1997; Graham, Catania, Brand, Duong, & Canchola, 2003; Leigh, Gillmore, & Morrison, 1998). This methodology involves asking participants to keep a diary record of their own personal sexual experiences and later answer questions regarding these previously reported sexual experiences (e.g., 1-month, 2-months and/or 3-months). Results from these studies have been inconsistent, and some researchers have questioned

whether discrepancies between diary reports and later recall are in fact memory errors, or may instead be related to the response biases of participants (e.g., Graham et al., 2003). That is, given that these reports of sexual behavior are self-referenced, it is important to consider the possibility that many different variables (e.g., sex guilt, using drugs and alcohol during sexual encounters, positive attitudes towards sex) could influence one's reporting of sexual behavior at time of recall.

To my knowledge, few studies have examined individual differences in memory for sexual information. In one study, Lewis, Gibbons, and Gerrard (1986) examined the recall of both sexual and non-sexual information in relation to several variables, including sex guilt and sexual experience. Participants included 120 male and female undergraduates randomly selected from an undergraduate psychology research pool. Participants were presented with four vignettes each describing a moral dilemma (presented in counterbalanced fashion) and told that the purpose of the investigation was to examine decision making in different situations. Two of these vignettes specifically focused on sexual issues (e.g., premarital sex, reading erotic literature), and the other two vignettes focused on non-sexual issues (e.g., euthanasia, plagiarism). After reading each of the vignettes, participants completed a 20-item filler task (California Psychological Inventory, CPI; Gough, 1956) and answered questions regarding each vignette. Results indicated that sexually experienced individuals made fewer mistakes in recall of sexual information as compared to sexually inexperienced individuals. There were no group differences in recall of non-sexual information, and sex guilt was not specifically associated with memory recall, with the exception that women high in both sexual guilt

and sexual experience were more likely to report false positive incidences of sexual activity.

The present study aimed to examine the degree to which women's sexual selfviews play a role in memory for sexual information. Women with varied sexual selfviews completed memory tasks in response to sexually relevant information.

CHAPTER 2: PRESENT STUDY

2.1 Introduction

Faced with the complexities surrounding the construct of sexuality, the necessity to draw information from a combination of qualitative and quantitative measures has recently become more apparent (White, Russo, & Travis, 2001). In particular, adding quantitative measures derived from a qualitative investigation can be a powerful tool to investigate women's sexuality from both a cultural- and gender-sensitive model. Based on the idea that, as compared to experimental or quantitative methods, qualitative studies more thoroughly and feasibly lend themselves to contextually sensitive phenomena (Crawford & Popp, 2003), combining both qualitative and quantitative techniques in the present study will help to provide a more comprehensive understanding of how women view themselves as sexual beings.

2.2 Phase 1: Qualitative Investigation

In an attempt to construct a comprehensive picture of how women view and define themselves as sexual beings, individual qualitative interviews were conducted on a representative sample of women from varied demographic backgrounds. Interviews were based on grounded theory to explore women's views of themselves as sexual persons.

2.2.1 Grounded Theory

Qualitative studies based on Grounded Theory are often divided into phases or steps which are organized in a circular model whereby each step is assumed to consistently influence the other steps (Denzin & Lincoln, 1994). The accuracy with which the theory is representative of the phenomenon studied can be enhanced through a detailed check of the standards of rigor (Chiovitti & Piran, 2003). Techniques to enhance the standard of rigor that will be used in the present study are credibility, auditability and fittingness. Credibility refers to the faithfulness of the findings in their description of the phenomenon. Auditability is the ability of another researcher to follow the decisions made during the study. Fittingness pertains to the ability of the findings to be applicable to the experience of other people. Below, I delineate the methods that were implemented in the present study to ensure standards of rigor along with the description of each of the four steps of the present qualitative analysis.

Step 1, labeled "Researcher Formation," focused primarily on the researcher's understanding of her role in the study. During this phase, the researcher became aware of her background and cultural context by exploring her theories and beliefs regarding relevant topics, including female sexuality, self-schemas or self-views, and qualitative research. To facilitate this process, the researcher attended various on-line seminars dedicated to grounded theory (i.e., through the Grounded Theory Institute at http://www.groundedtheory.org/) and explored the literature regarding qualitative research and grounded theory (i.e., Basit, 2003; Fischer, 2006; Fontana & Frey, 1994; Franklin, 1997; Henwood & Pidgeon, 2003; Jayaratane & Stewart, 1991; Jones, 1991;

Luborsky, 1994; McGrath & Johnson, 2003; Mir, 2006; Rennie, 2006; Ryan & Bernard, 2004; Ryan & Bernard, 1994; Shah & Corley, 2006; Suddaby, 2006; Tolman and Szalacha, 1999). Moreover, the researcher kept a journal of her personal observations and thoughts throughout the study in an attempt to raise awareness on how her own personal thoughts and values might influence the interpretation of the data provided by participants. This technique is used to improve *credibility* and to address *auditability*. This phase was carefully monitored throughout the study.

Step 2, labeled "Theoretical Paradigm," was dedicated to the review of the literature on the phenomenon under investigation. During a literature review of sexuality studies, I found only one scale intended to tap into a woman's sexual self-view (SSSS, Andersen & Cyranowski, 1994), and this scale was not derived based on qualitative interviews with women. Given the limitations of this measure, the aim of the present study was to create a body of knowledge regarding women's views of themselves in sexual scenarios that will be available to both researchers and health professionals working in this field. The researcher attempted to continuously monitor the relevant literature throughout all phases of the project in order to improve the *credibility* of the results.

Step 3, labeled "Research Strategies," involved the decisions made by the researcher regarding specific strategies of inquiry and methodology employed in Phase 1 of the study. Methodology and strategies were chosen based on the information needed to answer the selected research objectives. In this study, individual semi-structured interviews were used to generate open-ended responses from women regarding how they

view themselves as sexual persons. This approach allowed the researcher to ask for clarification on certain responses/concepts introduced by the participant. In order to decrease social desirability pressure, participants were informed that they can choose to keep or destroy all or parts of their audio-recorded interviews. Individual rather than group interviews were chosen because sexuality is a sensitive topic and a group interview may be highly susceptible to social pressures (e.g., DeLamater & MacCorquodale, 1975). Another important aspect of this phase was in the selection of the sample. An attempt to select a representative sample of women from varied demographic backgrounds was made to improve the *auditability* and the *fittingness* of the theory generated from this study.

Step 4, labeled "Data Collection," was dedicated to developing the methodology employed for data collection. Interviews were recorded to ensure a detailed account of the specific language used by the participants, and hence to increase the theory's credibility. In order to provide a more comfortable environment for the participants, they were asked for permission to record the interview, were given the opportunity to listen to their tapes, and given the option of erasing all or specific parts of the interview if they felt uncomfortable with the information disclosed. A naïve research assistant (i.e., unaware of the identity of the participant) transcribed all the data. Line-by-line coding was used to analyze the data and weekly meetings with assistants and consultants were conducted to ensure that the themes identified were indeed deduced from the data and not created by extraneous theories or beliefs of the researchers. Also in an attempt to improve credibility, the researcher kept a journal of her observations and experiences that were

completed immediately after each interview. Data was continuously collected and questions posed by the researcher during the individual qualitative interviews were continuously modified accordingly (for more details, see Chapter 4).

2.3 Phase 2: Quantitative Investigation

In attempt to uncover the rich and multifaceted way in which women define themselves as sexual beings, the second phase of this systematic research plan will focus on the construction of a reliable and valid instrument intended to tap women's sexual self-views. The construction of this instrument which I titled the Women's Sexual Self-Views (WSSV) scale was the main purpose of the current series of studies. Thus, the information collected from the qualitative interviews in Phase 1 was used in the development of a comprehensive and valid questionnaire for quantifying women's sexual self-views. The items derived from the qualitative interview transcripts were administered to a large sample of women and factor analyzed to uncover the internal structure of women's sexual self-views. An additional aim of Phase 2 was to examine the convergent and divergent validity of the WSSV scale and to examine it's relation to women's sexual functioning status. In addition to being essential for research purposes, a questionnaire of this nature could provide an important tool for practitioners to better understand the sexual concerns of their female patients. The questionnaire and its psychometric properties will be made available to sex researchers and therapists through publication in a scientific journal.

2.4 Phase 3: Memory and Sexual Self-Views

Based on the theory that memories of past experiences that are associated with the self later become the foundation of one's self-identity, the aim of Phase 3 was to investigate the relationship between women's sexual self-views and memory for sexually relevant-information. Given that existing models of sexual functioning (e.g., Barlow, 1986) and the theoretical basis of self-schemas (i.e., Markus, 1977) are both clearly linked to an individual's unique memory system, it is likely that individuals selectively remember certain aspects of sexual scenarios. It is important to consider how differences in memory systems among women with varying sexual self-schemas influence both current and future sexual behavior. Phase 3 was conducted in an attempt to investigate the relationship between women's sexual self-views and memory for sexually relevant information. Additionally, Phase 3 included an examination of other potential predictors of memory for sexual information, including sexual functioning status, sexual experience, frequency of sexual behavior, and responses to sexual stimuli.

For an Overview of Experimental Design for Phases 1, 2 & 3 of Present Study, See Figure 2.

CHAPTER 3: METHOD

3.1 Phase 1: Initial Qualitative Interviews to Understand Women's Sexual Self-Views

3.1.1 Overview of Experimental Design

Phase 1 of the study involved individual qualitative interviews to understand how women describe their sexual self-views. This phase included a single experimental session in which participants came to the Female Sexual Psychophysiology Laboratory to complete individual qualitative interviews and subjective self-report measures.

Additionally, a subset of participants was invited to return to the laboratory to complete a second interview. The self-report measures completed by all participants consisted of a demographics questionnaire and questionnaires relevant to female sexuality. The individual qualitative interviews were intended to take approximately 45 minutes and were primarily conducted by the Principal Investigator. The sessions were approximately 90 minutes long and participants received \$20 for the completion of study procedures.

3.1.2 Participants

Participants were women aged 18 or older varying among many demographic variables. Participants were recruited from the Austin area community using fliers (see Appendix B) posted in various public locations and through local newspaper advertisements (e.g., The Austin American Statesman, The Austin Chronicle). Given the

qualitative nature of this phase of the study, the only inclusion criteria was that women were age 18 or older and were proficient in the English language. Participants were not eligible for inclusion in the study if they reported being under the age of 18 years and/or having a current diagnosis of schizophrenia or psychosis. These criteria were selected in an attempt to allow for a wide range of women to participate in this initial exploratory phase of the study. The criteria were few in order to provide for a diverse sample of women, therefore increasing the possibility of receiving a more varied range of responses which were used to develop a valid measure intended to tap a woman's sexual self-views in Phase 2 of the study. Prospective participants contacted the laboratory by telephone and spoke to the Principal Investigator and/or a trained female research assistant who provided information about the study.

Women who were interested in participating were scheduled for an appointment in the Female Sexual Psychophysiology Laboratory at the University of Texas. It was the intent of the Primary Investigator to recruit women with diverse demographic backgrounds and to recruit a sample of women with a wide age range (approximately age 18 through age 65). Specifically, an attempt was made to over-sample specific targeted minorities (i.e., lesbians, African-Americans, Asian-Americans, and Hispanics). In order to target specified minority groups, recruitment fliers were posted in a diverse range of locations and areas in the local community. Specific types of locations included public and university libraries, coffee shops and cafes, book stores, doctor's offices, churches, laundromats, manicure and hair care salons, gas stations, and grocery stores.

Additionally, in an attempt to recruit women who self-identified as lesbian or bisexual,

recruitment flier were also posted at the Waterloo Counseling Center, a community mental health agency which offers services to the gay, lesbian, bisexual, and transgender communities.

3.1.3 Measures

Phase 1 Demographics Questionnaire. In order to assess for basic demographic information, this questionnaire included questions on participant's age, level of education, annual income, ethnic heritage, country of birth, years of residency in the United States, religious affiliation, employment status (and type of employment if employed). The questionnaire also included questions which assessed for relationship status (and length of relationship if in current relationship), sexual orientation, whether they had children, and menopausal status. The question assessing sexual orientation was taken directly from Kinsey's original scale presented in the book, Sexual Behavior in the Human Male (1948). See Appendix C.

Female Sexual Function Index (FSFI; Rosen et al., 2000). The FSFI was included to assess for current levels of sexual functioning. The FSFI is composed of 19 items divided into factor-analytic derived subscales: desire (2 items), arousal (4 items), lubrication (4 items), orgasm (3 items), satisfaction (3 items), and pain (3 items). In a recent paper, Wiegel, Meston, and Rosen (2005) reported internal consistency within each subscale to reflect values in an acceptable range (Cronbach's alpha= 0.82 - 0.98). Rosen et al. (2000) reported inter-item reliability values within the acceptable range for sexually healthy women (Cronbach's alpha= 0.82 - 0.92), as well as for women with

diagnosed FSAD (Cronbach's alpha= 0.89 - 0.95). Test-retest reliabilities assessed using a four week interval ranged between Pearson's r = 0.79 - 0.86 (Rosen et al., 2000). Additionally, Wiegel et al. (2005) provided strong evidence of discriminant validity between women with and without sexual dysfunction for FSFI total score and each subscale score, although a high degree of overlap was present across various diagnostic groups. See Appendix D.

Phase 1 Sexual Experience Scale. A modified version of the Derogatis Sexual Experience Subscale (DSFI; Derogatis & Melisaratos, 1979) was used to assess for participant's sexual experience history. The scale included a list of 20 sexual activities (e.g., kissing, petting, masturbation, etc.) experiences and respondents indicate whether they have experienced these activities (i.e., yes/no). Additionally, questions were asked about age of first sexual intercourse and number of sexual partners. See Appendix E.

3.1.4 Procedure

The investigation of women's sexual self-views was conducted utilizing a qualitative approach in which female participants completed individual interviews with a trained female clinician. When the participant arrived at the female sexuality lab, she was shown the laboratory and given a review of the general experimental procedures. After this, informed consent was obtained from all participants. Participants were assured that their responses provided during the experimental session would be kept confidential. The laboratory room where participants completed all questionnaires and clinical interviews was a private, locked participant room to allow for privacy in a quiet environment. This

room included two couches and a large overstuffed chair to allow women to choose the most comfortable place for them to sit while participating in the study. After reading and signing the consent form, the female participants were given time to discuss with the female clinician any questions or concerns that they may have had before beginning the study. The female clinician then introduced the topics to be discussed during the recorded interview. Female participants were instructed to "brainstorm" for approximately 10-15minutes regarding their thoughts or responses to this topic before beginning the audiorecorded interviews. This period of time allowed for participants to think about their own unique responses and to formulate how they would respond during the recorded interview. The female clinician provided a clipboard with paper, markers, and pens to allow women to write or draw about their thoughts during this time. Specifically, women were told that they could "use the paper and pens to draw or write out their thoughts, or they may simply use this time to think inside their heads." After approximately 10 - 15minutes, the female clinician re-entered the room and asked the female participant if she was ready to begin the interview. Women were briefed with the following information prior to the interview in an attempt to increase their understanding of the study, facilitate rapport between the female clinician and the participant, decrease social desirability, and increase motivation and comfort-level in discussing and talking about sexual issues.

The aim of this interview is to help me better understand the different aspects of what define women's' views of themselves as sexual beings. I have enlisted your help to try to understand the way in which women experience their sexuality. If there are things that you do not feel like talking about- please do not hesitate to let

me know. Also, please know that in these interviews, there are no right or wrong answers to any of the questions that I will be asking. Women vary a great deal in their sexuality, therefore I am hoping to learn and understand about your own personal view on this topic. Although at times you may feel like certain things happen only to you and it may be embarrassing to talk to a stranger about certain things, I would like you to keep in mind that your voice and your experience are very important to me since I am sure that there are other women out there who are like you and I will be able to hear their voices through you. With that said, please feel free to tell me as much or as little about you as you want. Also, please feel free to stop or slow me at any point if you have questions or concerns. With your permission, I will record this interview because I want to be able to really hear every word that we will be saying. However, at the end of the interview you will be given the option to listen to the tape if you want to. If after listening to the tape, you decide that you would like to erase all or certain parts of the audio recording, you will have the right to do that. Finally, I want to ensure you that everything you tell me will be confidential meaning that all the information you give me will be kept private.

Qualitative interviews were guided by the following questions or queries:

- (1) "How would you describe yourself as a sexual person?"
- (2) "Are there specific qualities or concepts which really stand out to you as defining aspects of yourself as a sexual woman?"
- (3) "Are there other terms that you would use to describe other women as sexual

beings?"

(4) "How are your answers to these questions indicated in your past and present sexual experiences or relationships? And how do you think these qualities will be reflected in your future sexual experiences and relationships?"

Given the nature of qualitative research, interviews did not follow any specific or structured format. The trained female researcher provided the above questions as a loose framework to guide the interview. Depending on responses these initial questions, other questions posed to participants included:

- a) "How would you describe the ideal sexual woman?"
- b) "How would you describe yourself as a romantic partner?"
- c) "What does the word sexy mean to you and what do you think is sexy about you?"

When necessary, the interviewer asked for clarification on the material presented by the participants. Before moving on to a new question, the interviewer would ask if there was more about this subject that the participant would like to add even if not directly relevant to the question which was asked. Questions presented during these qualitative interviews were loosely modeled after the focused groups employed by Graham, Sanders, Milhausen, McBride (2003) to derive the female-version of the Sexual Excitation/ Inhibition Scale. Data was collected continuously and the questions posed during the interviews were continuously modified. To see a list of additional questions derived from the interview transcripts which are not listed above, see Appendix F. All female participants gave permission for their interviews to be audio taped and transcribed

verbatim for analysis. Additionally, none of the female participants opted to listen and/or delete their audio-recorded interviews after the completion of all study procedures.

After completion of the interview, participants were debriefed and given the opportunity to ask any questions from the female researcher. Each participant received \$20 for the completion of study procedures. Additionally, in order to give participants increased time to think about their responses to certain questions, a subset of participants (n = 4) were invited for a follow-up interview. These follow-up appointments included only the individual interview and were estimated to last approximately 45 minutes. Women were compensated an additional \$20 for completion of the follow-up appointment.

3.2 Phase 2: Quantitative Methods to Derive a Valid Measure of Women's Sexual Self-Views and Examination in Relation to Potentially Relevant Variables, Including Sexual Functioning

3.2.1 Overview of Experimental Design

Phase 2 of the study focused on the development of a questionnaire intended to tap women's sexual self-views. Based on interview transcripts and coding analyses of qualitative interviews conducted in Phase 1 of the present study, Phase 2 implemented the steps necessary for scale construction of a measure of women's sexual self-views. That is, the information derived based on the interview transcripts/coding were used to construct an initial draft of a measure intended to tap women's sexual self-views. This

measure and a demographics questionnaire was administered to a large sample of women recruited online and through the local community.

Additional questionnaires were administered to a subset of the overall sample of participants in this phase of the study (i.e., Phase 2 Validation Sample). That is, the Sexual Self-Schema Scale (SSSS; Andersen & Cyranowski, 1994) and the Young Schema Questionnaire (YSQ-S; Young, 1998) were administered to allow for an examination of the convergent and divergent validity from the scale being developed in the present study. Additionally, a questionnaire which assesses for sexual functioning status in women (FSFI; Rosen et al., 2000) was administered in order to allow for an examination of the relationship between sexual functioning and women's sexual self-views.

3.2.2 Participants

Participants were 2,336 women age 18 or older from varied demographic backgrounds. In order to increase the range and number of participants, women were recruited in a variety of ways, including: through online advertisements (n = 2058), through the undergraduate research pool at the University of Texas at Austin (n = 124), through the Female Sexual Psychophysiology Laboratory research participant pool (i.e., women who were and/or have participated in other research studies in the Female Sexual Psychophysiology Laboratory) (n = 21), as well as through contacts of the principal investigator and other researchers associated with the Female Sexual Psychophysiology Laboratory (n = 133). Consistent with Phase 1 of the present study, the only inclusion

criterion was that women were age 18 or older and proficient in the English language.

Participants were not eligible if they were under 18 years of age.

3.2.3 Measures

Phase 2 Demographics Questionnaire. In order to assess for basic demographic information, this questionnaire included questions on participant's age, ethnic heritage, region of residence, level of education, household annual income, current relationship status, sexual orientation, and whether the participant has children. See Appendix G.

Female Sexual Function Index (FSFI; Rosen et al., 2000). The FSFI was included to assess sexual functioning status. For details regarding the FSFI, see Phase 1 Measures and see Appendix D.

Sexual Self-Schema Scale (SSSS; Andersen & Cyranowski, 1994). The Sexual Self-Schema Scale (SSSS) is intended to be an unobtrusive measure of women's sexual self-schemas. The scale contains 26 trait adjectives and 24 filler adjectives which are rated on a 6-point scale ranging from "not at all descriptive of me" to "very descriptive of me." Two subscales labeled as positive sexual self-schemas were purported to represent, (1) a Passionate-Romantic attitude, and (2) an Open-Direct attitude. Additionally, there is one subscale purported to represent negative sexual schemas labeled as, (1) an Embarrassed/Conservative attitude. Test-retest reliability was good with total score values of r = 0.89 (2-week interval) and r = 0.88 (9-week interval). Cronbach's alpha values for the total score and individual factors were 0.82 (Full scale), 0.81 (Factor 1), 0.77 (Factor 2), and 0.66 (Factor 3; Andersen & Cyranowski, 1994). The total score of the SSSS indicated moderate to low correlations with measures of sexual guilt (r = -

0.16), lifetime sexual activities (r = 0.30), Sexual Arousability Inventory (r = 0.25), and number of love relationships (r = 0.32; Andersen & Cyranowski, 1994). For more information regarding development of this measure, see Chapter 1 and see Appendix A.

Young Schema Questionnaire – Short form (YSQ-S; Young, 1998). The YSQ-S was included to assess for participant's general schemas. The original Young Schema Questionnaire (YSQ) was first developed by Young and Brown (1990) and revised in 1994 (YSQ: 2nd edition; Young & Brown, 1994) to assess for early maladaptive schemas. Early maladaptive schemas are described as "extremely stable themes that develop during childhood, are elaborated throughout an individual's lifetime, and are dysfunctional to a significant degree" (Young, 1999, p. 9). The YSQ has been shown to have good convergent and discriminant validity (Schmidt, Joiner, Young, & Telch, 1995) and the factor structure of the YSQ broadly accords with Young's descriptions of maladaptive schemas (Lee, Taylor, & Dunn, 1999; Schmidt et al., 1995). Additionally, the YSQ has shown the ability to discriminate between patients with Axis I and Axis II disorders (Mihaescu et al., 1997). In 1998, Young presented a shortened version of the original 205-item YSQ (i.e., YSQ-S) and evidence has been provided indicating that the short and long forms of the YSQ produce equivalent results (Stopa, Thorne, Waters, & Preston, 2001; Waller, Meyer, & Ohanian, 2001). In the present study, the short version of the Young Schema Questionnaire (YSQ-S; Young, 1998) was included to measure 15 general schemas. The YSQ-S has 75 items which participants and participants respond to items using a 6-point rating scale (i.e., "1" = "Completely untrue of me" to "6" = "Describes me perfectly"). The YSQ-S includes items which assess for the following

schemas: emotional deprivation, abandonment, mistrust and abuse, social isolation/alienation, defectiveness or social undesirability, failure, dependence/ incompetence, vulnerability to harm or illness, enmeshment, subjugation, self-sacrifice, emotional inhibition, unrelenting standards, entitlement, and insufficient self-control/self-discipline. See Appendix H.

Women's Sexual Self-Views Scale (WSSV). The initial version of the Women's Sexual Self-Views (WSSV) scale was constructed based on the information derived from Phase 1 individual qualitative interviews in the present study. That is, following the transcription and coding of the individual interviews, an initial list of 303 self-descriptive terms and/or phrases were listed using a traditional questionnaire format in which women responded to the following prompt: "When I think of myself as a sexual person, the following description describes me." The rating scale used to answer these questions was modeled after Young Schema Questionnaire. That is, participants responded according to a 6-point rating scale with "1" = "completely untrue of me" and "6" = "describes me perfectly." Also consistent with the YSQ, participants were given the following additional instructions for completing this scale: "When you are unsure about how to respond to a certain item, try to base your answer on what you emotionally feel, not on what you think to be true. Choose the highest rating from 1 to 6 that describes you and write the number in the space after each item." See Appendix I.

3.2.4 Procedure

3.2.4.1 Online Data Collection

Participants who completed the questionnaires online were recruited through online advertisements (e.g., Appendix J) which were posted on various websites which offer free advertising (e.g., craigslist.com for multiple cities throughout the United States, various online newspaper and magazine websites). After viewing the online advertisements, women over the age of 18 who were interested in participating were instructed to click on a link which directed them to a online cover letter delineating the nature of the study procedures and provided for more detailed information about the research study (to view online cover letter, see Appendix K). After reading the cover letter, prospective participants were given the option of clicking on one of two separate links which read:

- I understand and meet the participation criteria outlined above. I would like to take part in the survey.
- 2. I do not wish to take part in the survey at this time **OR**, I do not meet the participation criteria outlined above.

Prospective participants who clicked on the second link were directed to a page thanking them for their interest in the study. Prospective participants who clicked on the first link were directed to the online surveys. This sample of participants completed the Phase 2 demographics questionnaire and the initial version of the Women's Sexual Self-

Views Scale (WSSV). Participants responded to the study questionnaires using a secure web site that was formatted to record responses to all of the questions. Online participation was able to take place remotely using any computer with internet access and a web browser. The researchers used a third party company (PsychData; www.psychdata.com) to design and host the survey and to provide a secure server and encryption technology. PsychData was founded in 2001 to provide internet-based social sciences research support. PsychData has provided web-based study support for researchers at a number of higher educational institutions including Boston University, Duke University, Ohio State University, Rice University, Stanford University, University of California - Los Angeles, University of Texas at Austin, and University of Washington. Participants were instructed to complete all of the questionnaires using a computer keyboard and mouse. Instructions appeared at the top of each page in order to explain to participants how to properly answer the online questionnaires. Following the completion of the online measures, participants were provided with an online debriefing form which included a study explanation and contact information should the participant desire further information about the study. Any contact initiated on the part of the participant was not connected to their survey responses. Next, participants were directed to a screen that provided them with a confirmation code. This code indicated that they had successfully completed the study. Participants were then given the option of sending an email to the research team's indicated email address (i.e.,

sexualselfviews@gmail.com) which included their confirmation code, first and last name, and mailing address. Participants' personal information and conformation code were not

linked to their corresponding data in any way. At the end of each month of data collection (5 months total), the principal investigator randomly selected one participant and awarded the winner \$50.

3.2.4.2 Participants recruited from undergraduate research pool

One hundred and twenty-four participants were recruited through an online system at the University of Texas that provides a list of research studies available for psychology students to participate in for mandatory research credit. The following conditions were required for female students to participate in this study:

- a) Students had to be age 18 or older,
- b) Students had to be enrolled in Psychology 301 during the Fall 2006 semester at the University of Texas at Austin,
- c) Students had to be fluent in the English language.

Exclusion criteria included: (a) under the age of 18; and/or (b) not fluent in the English language. Prospective female students who met inclusion criteria and who where interested in the study followed a link from the study registration webpage to an online cover letter delineating the nature of the experiment (very similar to the cover letter provided to participants recruited via the World Wide Web). This cover letter was shown to all participants before they began the study procedures. Subjects were not required to sign a consent form. After reading the cover letter, female students who were interested in participating completed the following questionnaires online: the Phase 2 demographics questionnaire, the initial version of the Women's Sexual Self-Views Scale (WSSV), the

Female Sexual Function Index (FSFI; Rosen et al., 2000), the Young Schema Questionnaire (YSQ-S; Young, 1998), and the SSSS (Andersen & Cyranowski, 1994). The only requirement for female participants interested in participating was completion of these questionnaires. Participants responded to the study questionnaires using the secure website, www.psychdata.com (for details, see above). Participants were not required to come into the Female Sexual Psychophysiology Laboratory. Completion of study questionnaires took approximately one hour. After completing the online surveys, participants were provided with a debriefing form which included an explanation of the study and contact information to receive further information. Each participant was awarded one hour of credit for their Psychology 301 research requirement.

3.2.4.3 Participants recruited through the Female Sexual Psychophysiology Laboratory

One hundred and fifty-four women were recruited through their association with the Female Sexual Psychophysiology Laboratory. That is, 19 women were recruited from the research participant pool (i.e., women who were and/or have participated in other research studies) and 131 women were recruited through contacts of the Principal Investigator and other researchers associated with the Female Sexual Psychophysiology Laboratory. Prospective participants were given a consent form which included information about the study. Women who were interested in participating and provided informed consent were given the option of completing the study procedures online or through paper and pencil questionnaires. Participants who opted to complete the

questionnaires online were given a secure web address which was linked to the online questionnaires hosted by www.psychdata.com. The protocol used for online data collection was the exact same as that used for online participant recruitment (see above). Participants who opted to complete the questionnaires using a traditional paper-and-pencil format were provided a self-addressed and stamped envelope containing the study questionnaires, a debriefing form that included an explanation of the study, contact information to receive further information, and instructions for entering the monthly raffle for \$50 (if interested). This sub-sample of women completed the following questionnaires: the Phase 2 demographics questionnaire, the initial version of the Women's Sexual Self-Views (WSSV) scale, the Female Sexual Function Index (FSFI; Rosen et al., 2000), the Young Schema Questionnaire (YSQ-S; Young, 1998), and the SSSS (Andersen & Cyranowski, 1994).

3.3 Phase 3: Sexual Self-Views and Memory

3.3.1 Overview of Experimental Design

Upon completion of Phase 1 and Phase 2 of the present study, Phase 3 examined the relationship between women's sexual self-views and memory for sexual information. Phase 3 also included an examination of other potential predictors of memory for sexual information, including sexual functioning status, sexual experience, and responses to sexual stimuli. In order to assess for sexual self-views, participants completed the Women's Sexual Self-Views Scale (WSSV) derived during Phase 1 and Phase 2 of the

present study. Additionally, participants read a series of three vignettes representing the different factors outlined by the WSSV and completed memory tasks in response to these vignettes.

3.3.2 Participants

Participants were 141 females recruited through the psychology department undergraduate research participant pool. All participants were recruited through an online system at the University of Texas that provides a list of research studies available for psychology students to participate in for mandatory research credit. The following conditions were required for female students to participate in this study:

- d) Students had to be age 18 or older,
- e) Students had to be enrolled in Psychology 301 during the Fall 2006 semester at the University of Texas at Austin,
- f) Students had to be fluent in the English language.

Exclusion criteria included: (a) under the age of 18; and/or (b) not fluent in the English language. Participants were blind to the nature of the study upon signing up to participate and no one dropped out of the study after learning about the nature and content of the study.

3.3.3 Measures

Phase 3 Demographics Questionnaire. In order to assess for basic demographic information, this questionnaire included questions on participant's age, ethnic heritage, level of education, relationship status, and sexual orientation. See Appendix L.

Women's Sexual Self-Views Scale (WSSV). The final version of the WSSV scale was included to assess for women's sexual self-views. This scale was constructed based on the information derived from Phase 1 individual qualitative interviews and results from the factor analyses of Phase 2. The final version of the WSSV is composed of 34 items divided into factoranalytic derived domains labeled as: Positive Sexual Self-Views (12 items); Negative Internal/ Affective Sexual Self-Views (6 items), Negative External/Behavioral Sexual Self-Views (5 items), Interpersonally-Relevant Sexual Self-Views (6 items), and Conservative Sexual Self-Views (5 items). The 34-items are listed using a conventional questionnaire format with each item presented as a brief descriptive statement to which respond to the following prompt: "When I think of myself as a sexual person, the following description describes me." The rating scale used to answer these questions was modeled after Young Schema Questionnaire. That is, participants responded according to a 6-point rating scale with "1" = "completely untrue of me" and "6" = "describes me perfectly." Also consistent with the YSQ, participants were given the following additional instructions for completing this scale: "When you are unsure about how to respond to a certain item, try to base your answer on what you emotionally feel, not on what you think to be true. Choose the highest rating from 1 to 6 that describes you and write the number in the space after each item." The WSSV scale demonstrated good reliability (Cronbach's alpha = 0.78 - 0.93) and validity. See Appendix M.

Female Sexual Function Index (FSFI; Rosen et al., 2000). The FSFI was included to assess sexual functioning status. For details regarding FSFI, see Phase 1 Measures and see Appendix D.

Story Scale (McCall, Rellini, Seal, & Meston, 2007). Subjective levels of sexual arousal and affect in response to reading the sexual vignettes were measured using the Story Scale. The measure is a modified version of Heiman and Rowland's (1983) audiovisual film scale. The scale consists of 12 items measuring subjective sexual arousal (4 items), positive affect (4 items), and negative affect (4 items). Participants rated each of the items on a 7-point Likert scale according to the degree to which they experienced the sensations while reading the vignettes. Subjective sexual arousal was defined by the following items: genital wetness or lubrication, any genital feelings, sexually aroused, and sexually turned-off (reverse-scored). See Appendix N.

Phase 3 Sexual Experience Scale. A modified version of the Derogatis Sexual Experience Subscale (DSFI; Derogatis & Melisaratos, 1979) was used to assess for participant's sexual experience history. The scale included a list of 20 sexual activities (e.g., kissing, petting, masturbation, etc.) experiences and respondents indicate whether they have experienced these activities (i.e., yes/no). See Appendix O.

3.3.4 Experimental Stimuli

Sexual Stories. The sexual stories were created in our laboratory and consisted of vignettes depicting a consenting heterosexual encounter, beginning with foreplay and including oral sex and intercourse. Three vignettes were constructed intended to represent

the three different domains of the Women's Sexual Self-Views Scale constructed based on information obtained during Phase 1 and Phase 2 of the present study. That is, Story 1 was written to depict a sexual situation involving a woman with Positive Sexual Self-Views, Story 2 was written to represent to depict a sexual situation involving a woman with Negative Sexual Self-Views, and Story 3 was written to represent both Interpersonally-Relevant and Conservative Sexual Self-Views. Specifically, many of the exact words and/or phrases of the items of the WSSV scale were included in the corresponding stories. Attempts were made to include approximately equal length of the stories (i.e., number of words), equal number of sentences, equal length of sentences within the stories, and to refrain from repeating words throughout the story. After the initial development of the three sexual stories, eleven coders reached unanimous agreement by correctly matching each story to the name of the factor from the WSSV scale that it was intended to reflect. Thus, it was assumed that each story clearly reflected the factor of the WSSV scale that it was intended to represent.

3.3.5 Procedure

Participants who were recruited through the psychology department's online system signed up for a single experimental session. During this single experimental session, female participants completed memory tasks in response to reading sexual stories (i.e., representing the three factors of the WSSV) and completing a series of questionnaires. The methods employed for the memory tasks in Phase 3 of the present study were loosely modeled after the well-validated Logical Memory subtest of the

Weschler Memory Scale-Third Edition (WMS-III; The Psychological Corporation, 1997) which also involves the presentation of a story and subsequent memory tasks relevant to the information presented in the stories. All sessions were administered in small groups with a female researcher available at all times to address any potential questions or concerns that arose during the completion of the study.

Upon arrival, the female researcher explained that the purpose of the study was to examine information obtained from cognitive tasks which would include explicit erotic content. Informed consent was then obtained and participants were separated into private participant computer rooms. Participants were assured that their responses provided during the experimental session would be kept anonymous and confidential. The laboratory room where participants completed the experimental tasks was a private, locked participant room to allow for privacy and a quiet environment. The participant room was equipped with a Dell Pentium computer with instructions posted on the monitor to prompt the participant during each step of the experimental procedure. After explaining the experimental procedure and instructing the participant on the use of the computer equipment, the female researcher left the room and instructed the participant to press the "space bar" on the computer to receive instructions for beginning the experiment. Subsequently, participants viewed instructional prompts on the computer monitor directing them through each step of the study while the female researcher was in an adjoining (but separate) room and available for questions. After following the initial instructional prompts, the participant was presented with one of the sexual stories (i.e., either 1, 2, or 3) on the computer screen. Instructions which appeared when the stories

were presented to the participants included the following prompt: "Read the following story from beginning to end one time. Read the information carefully, and at a continuous pace. When you have finished the story, press the space bar." The stories were presented in a counter-balanced order across all study participants. Participants were allowed unlimited time to read each story before completing questions in response to the story. After participants completed reading the story, they were instructed to again hit the "space bar" to continue on to the next task. After reading each story, participants completed the Story Scale to assess arousal and affective states in response to the reading each story. Next, participants completed recognition tasks in which: 1) they were presented with multiple choice questions regarding each of the story they had just read, and 2) they were presented with words and/or phrases and asked to indicate (yes or no) whether this had appeared in the story. The same sequence of events was repeated for the remaining two stories (depending on order of counterbalanced presentation of stories).

Following completion of all study procedures, female student participants were debriefed and given the opportunity to ask any questions that they may have had.

Additionally, students were given a 1-page explanation of the study and assigned 2-hour credits through the online 301 Psychology credit system. To view a flow diagram depicting the methodology for Phase 3, see Figure 3.

CHAPTER 4: STATISTICAL ANALYSES AND RESULTS

4.1 Phase 1: Qualitative Interviews

4.1.1 Participants

Participants were 32 females. Participants had a mean age of 34.98 years (SD = 11.8, range = 19-61 years). Race breakdown included 16 women who identified as Caucasian (50.00%), six women who identified as Hispanic (18.75%), four women who identified as Asian (12.50%), four women who identified as African-American (12.50%), one woman who identified as Native-American (3.13%), and one woman who identified as Arab (3.13%). Thirty (93.75%) of the women reported being born in the United States, one women reported being born in Spain (3.13%) and one in England (3.13%). In response to a question assessing for religious beliefs and/or affiliations, eleven women identified as Protestant (34.38%), five women identified as Catholic (15.63%), four women identified as Agnostic (12.50%), two woman identified as Jewish (6.25%), one woman identified as Buddhist (3.13%), and nine women reported "other" (28.13%). Educational history as self-reported by participants included: five women indicating having completed "high school/some college" (15.63%), 24 women indicating having completed college (75.00%), and three women indicating having completed an advanced degree (9.38%). The annual income of the 32 participants included: 13 women reporting less than \$25,000 (40.63%), 14 women reporting between \$25,001 to \$50,000 (43.75%), two women reporting between \$50,001 to \$100,000 (6.25%), and three women reporting

more than \$100,000 (9.38%). Fourteen of the women in our sample (43.75%) reported that they were not currently employed, while the other 18 women (56.25%) reported current employment. For women who were currently working, areas of employment included: three women working in administrative positions (9.38%), two women working in healthcare/medical (6.25%), one woman working in science and/or research (3.13%), two women working in education (6.25%), one woman working within the legal system (3.13%), two women working in retail (6.25%), two working within the service industry (6.25%), and five women working in "other" fields (15.63%).

Relationship status of the 32 participants included: nine women who were "currently married" (28.13%), 12 women who indicated "current involvement in a committed relationship, but not married" (37.5%), six women who were "dating, but not in a committed relationship" (18.75%), and five women who were "single, not currently dating" (15.63%). For those women who indicated current involvement in relationship, the average length of relationships was 28.59 months (SD = 25.85 months, range = 1-84 months). For sexual orientation, 12 of the participants indicated "exclusively heterosexual" (37.50%), 9 indicated "predominantly heterosexual with incident of homosexuality" (28.13%), 6 indicated "predominantly heterosexual with more than an incident of homosexuality" (18.75%), 2 indicated "equally heterosexual and homosexual" (6.25%), 1 indicated "predominantly homosexual with incident of heterosexuality" (3.13%), and 2 indicated "exclusively homosexual" (6.25%). Additionally, three women reported having been divorced (9.38%), ten women indicated having children (31.25%), and five women reported being post-menopausal (15.63%). Of the post-menopausal

women, two reported having had a hysterectomy (6.25%) and one reported currently receiving Hormone Replacement Therapy (HRT; 3.13%).

Table 1. Phase 1 Participant Characteristics (N = 32)

	M	SD
Age (in years)	34.98	11.8
Range	19-61	
Relationship Length (in months)	28.59	25.85
Range	1-84	
	N	%
Race		
Caucasian	16	50.00
Hispanic	6	18.75
African-American	4	12.50
Asian	4	12.50
Native-American	1	3.13
Arab	1	3.13
Country of Birth		
U.S.	30	93.75
England	1	3.13
Spain	1	3.13
Religion		
Christian (Protestant)	11	34.38
Christian (Catholic)	5	15.63
Agnostic	4	12.50
Jewish	2	6.25
Buddhist	1	3.13
Other	9	28.13
Education		
High school/Some College	5	15.63
College	24	75.00
Advanced degree	3	9.38
Annual Income		
Less than \$25,000	13	40.63
\$25,001 to \$50,000	14	43.75
\$50,001 to \$100,000	2	6.25
More than \$100,000	3	9.38
Currently Employed (% Yes) Type of Employment	18	56.25

Administration	3	9.38
Healthcare/Medical	2	6.25
Science/Research	1	3.13
Education	2	6.25
Legal/Law	1	3.13
Retail	2	6.25
Service Industry	2 5	6.25
Other	5	15.63
Relationship Status		
Currently married	9	28.13
Current involvement in a committed	12	37.50
relationship, but not married	12	31.30
Dating, but not in a committed	6	18.75
Relationship		10.75
Single, not currently dating	5	15.63
Have Children (% Yes)	10	31.25
Hysterectomy (% Yes)	2	6.25
Hormone Replacement Therapy (% Yes)	1	3.13
Post-Menopausal (% Yes)	5	15.63
Divorced (% Yes)	3	9.38
Sexual Orientation		
Exclusively heterosexual	12	37.50
Predominantly heterosexual	0	20.12
(incidentally homosexual)	9	28.13
Predominantly heterosexual	(10.75
(more than incidentally homosexual)	6	18.75
Equally heterosexual/homosexual	2	6.25
Predominantly homosexual	1	3.13
(incidentally heterosexual)	1	3.13
Exclusively homosexual	2	6.25

The sexual functioning status of participants in Phase 1 was assessed using the Female Sexual Function Index (FSFI). Wiegel et al. (2005) established clinical cut-off scores to classify women as sexually dysfunctional. Based on a combination of ROC-

curves and CART methodology, Wiegel et al. concluded that an FSFI Total Score of less than 26.55 correctly classified the majority of sexually dysfunctional women. Using these proposed cut-off scores, eight of the 32 women in the current sample fell within the clinical range for women with sexual dysfunction.

Table 2. FSFI Data for Phase 1 sample

	·
3.91	0.98
4.79	0.95
5.09	1.57
4.33	1.52
4.51	1.54
5.21	1.61
29.18	4.00
N	%
8	25.00
	5.09 4.33 4.51 5.21 29.18

Sexual experience history of participants in Phase 1 was assessed using a modified version of the Derogatis Sexual Experience Subscale (DSFI, Derogatis & Melisaratos, 1979). The number of activities which participants indicated (i.e., yes) that they had experienced was summed to represent an overall sexual experience score. In our sample of 32 women, the average number of the 20 possible sexual activities listed that participants indicated that they had previously engaged in was 16.83 (SD = 3.40, range 3 -20 activities). Additionally, the average age of first sexual intercourse was 17.57 years

(SD = 2.64, Range = 14-27 years) and the average number of sexual partners was 14.92 (SD = 19.79, Range 1- 100 partners).

Table 3. Descriptive Information regarding Sexual Experience in Phase 1 sample

	Mean	SD
Age of 1 st intercourse (in years) Range	17.57 14 – 27 years	2.64
Number of partners Range	14.92 1-100	19.79
Sexual Experience total score Range	16.83 3 – 20 activities	3.40

4.1.2 Analyses

Qualitative interviews were audio-recorded and transcribed verbatim for analyses. Interviews were recorded using a hand-held digital voice recorder (i.e., Olympus series DS digital recorder). The average length of the individual qualitative interviews was 43.18 minutes (SD = 27.87 minutes, range = 19 – 142 minutes). The DS digital recorder contained a built-in stereo microphone which provided for clear audio recordings. Utilizing a USB docking station and digital player software (i.e., Olympus DSS), MP3 audio files of the interviews were downloaded, archived, and edited on the researcher's computer. A commercially-available transcription kit (including a stereo headset and foot-pedal) was used by a female research assistant (blind to the participant's identity) to

type interview transcripts in Microsoft Word. After the initial transcription for each interview was completed, another female research assistant (also blind to the participant's identity) reviewed the audio recording and transcript to increase the likelihood that the transcripts accurately reflected the content discussed in the individual interviews. The average length of interview transcripts was 11.24 pages (SD = 7.55 pages; range = 4-35 pages) which translated to an average of 4,232.76 words per transcript (SD = 2,430.01 words, range = 861-12,644 words). All transcripts were formatted with double-spacing in 12-point Times New Roman font.

Following transcription of the interviews, the research team (which included the primary investigator, a graduate student research consultant, and two research assistants) utilized grounded theory to derive a list of items/responses which were subsequently used in the quantitative study employed in Phase 2 of this study. The specific steps of grounded theory which were utilized in the present study are discussed in detail in Chapter 2. Analysis of the interview transcripts was based on the guidelines provided by Morgan, Krueger, and King (1998), Helgeson, Shaver, and Dyer (1987), and Mikulincer and Segal (1990) in which each transcription was analyzed in detail by separate coders. That is, following transcription of the interviews, each transcript was distributed to the four members of the qualitative research team and individually coded. Thus, each narrative was first read all the way through by each member of the team. Next, the researchers re-read the transcripts and highlighted any phrase and/or words spoken by the research participants which they felt reflected an answer to the question of "How would you describe yourself as a sexual person?" At this point, all codes reflecting a single unit

of content identified by members of the qualitative research team were recorded verbatim and combined into an overall list of items (N = 905). The average number of codes per transcript was approximately 28 codes (SD = 13.95, range = 9-45 codes). Next, the combined list of codes/items was distributed to the four members of the research team. Each of the 905 items were then discussed and compared to the original transcripts by the research team during weekly meetings. In order for an item to be retained for the final list, inter-rater agreement had to be reached. Inter-rater agreement was determined when all four members agreed that an item was: (a) directly conveyed by the research participant, (b) answered the prompt: "When I think of myself as a sexual person, I research team congruent) on the 905 initial items was 88.62% resulting in a remaining 802 items. When disagreement was observed, the phrase/word was excluded from the final list. In the next phase of the initial scale development, frequency calculations were calculated for each remaining item on the list. That is, we calculated the number of women who provided a given item in their free responses provided during the individual interviews. If at least two participants (i.e., approximately 6%) gave a certain response, that item was retained for the final list. Following Helgeson et al.'s (1987) guidelines, this liberal inclusion criterion (i.e., 6%) was used in order to minimize the possibility of excluding important items provided by the female participants. On the basis of this process, an additional 98 items were omitted from the list. In the last step of the initial scale development, items which were repeated, similarly worded, and/or synonymous were condensed into single items. For example, "I am sexy" and "I feel sexy" were

combined into a single item. Additionally, items which were determined ambiguous or unclear were omitted. The final list consisted of 303 items which were listed in random order using a traditional questionnaire format, see Appendix I.

4.2 Phase 2: Scale Development

4.2.1 Participants Recruited Online for Initial Scale Development

Participants were 2,058 females. Participants had a mean age of 27.21 years (SD = 9.15, range = 18 - 82 years). Race breakdown included 1,619 Caucasian (78.67%), 198 Hispanic or Latino (9.62%), 105 Asian (5.10%), 78 Black or African-American (3.79%), 23 American Indian or Alaska Native (1.12%), 13 Native Hawaiian or Other Pacific Islander (.63%), and 22 women who did not report their racial/ethnic identity (1.07%). Given the nature of online data collection, a question was included which assessed for regional area in which participants lived. In the current sample, 1,068 women (51.90%) reported living in the southern United States, 353 women (17.15%) reported living in the western United States, 303 women (14.72%) reported living in the midwestern United States, 302 women (14.67%) reported living in the northeastern United States, and 32 women (1.55%) reported living outside of the United States. Educational history as selfreported by participants included: 33 women indicating having completed "some high school" (1.60%), 232 women indicating having graduated from high school (11.27%), 973 women indicating having completed "some college" (47.28%), 502 women identified as college graduates (24.39%), 75 women indicating having completed "some graduate

school" (3.64%), 200 women indicating having completed a Masters or Doctoral degree (9.72%), and 43 women who did not report their educational background (2.09%).

Relationship status of the 2,058 participants included: 392 women identifying as "single, not dating" (19.05%), 385 women identifying as "single, casual dating" (18.71%), 1,259 women reporting current involvement in a committed relationship (61.18%), and 22 women who did not indicate their relationship status (1.07%). Of the 2,058 female respondents, 1,604 (77.94%) indicated that they did not have children, 433 (21.04%) indicated that they did have children, and 21 (1.02%) did not report their parental status. For reported sexual orientation, 124 women identified as homosexual (6.03%), 1,437 women identified as heterosexual (69.83%), 419 women identified as bisexual (20.36%), 65 women reported being "unsure of their sexual orientation" (3.16%), and 13 women did not indicate their sexual orientation (0.63%).

The annual income of the 2,058 participants included: 415 women reporting earning less than \$25,000 a year (20.17%), 682 women reporting earning between \$25,001 and \$50,000 a year (33.14%), 560 women reporting earning between \$50,001 and \$100,000 a year (27.21%), 207 women reporting earning between \$100,001 to \$150,000 a year (10.06%), 158 women reporting earning over \$150,000 a year (7.68%), and 36 women who did not indicate their annual income (1.75%).

Table 4. Phase 2 Participant Characteristics (N = 2,058)

	M	SD
Age (in years)	27.21	9.15
	N	%
Race		
Caucasian	1619	78.67
Hispanic or Latino	198	9.62
Asian	105	5.10
Black or African-American	78	3.79
American Indian or Alaska Native	23	1.12
Native Hawaiian or Other Pacific Islander	13	0.63
Did not report their racial background	22	1.07
U.S. Region of Residence		
South	1068	51.90
West	353	17.15
Midwest	303	14.72
Northeast	302	14.67
Living outside of the U.S.	32	1.55
Education		
"Some High School"	33	1.60
High School Graduate	232	11.27
"Some College"	973	47.28
College Graduate	502	24.39
"Some Graduate School"	75	3.64
Masters or PhD degree	200	9.72
Did not indicate educational background	43	2.09
Annual Income		
Less than \$25,000	415	20.17
\$25,001 to \$50,000	682	33.14
\$50,001 to \$100,000	560	27.21
\$100,001 to \$150,000	207	10.06
Over \$150,000	158	7.68
Did not report income	36	1.75
Relationship Status		
Single, not dating	392	19.05
Single, casual dating	385	18.71
In a committed relationship	1259	61.18
Did not indicate relationship status	22	1.07
Parental Status		
Did not have children	1064	77.94
Did have children	433	21.04
Did not report parental status	21	1.02
Sexual Orientation		

Homosexual	124	6.03
Heterosexual	1437	69.83
Bisexual	419	20.36
Unsure	65	3.16
Did not report sexual orientation	13	0.63

4.2.2 Analyses

Following completion of online data collection, the Principal Investigator first downloaded all of the study data into SPSS from the Psychdata web site. The data was organized such that each participant's responses were grouped together, but no potentially identifying information (e.g., IP addresses) was included in the data file. Next, all data was scored appropriately for further analyses.

4.2.2.1 Scale Construction

Using SPSS, the data of the 2,058 female participants recruited online for Phase 2 was submitted to a random split to allow for the initial exploratory factor analysis (n = 1,558) and the follow-up confirmatory factor analysis (n = 500).

4.2.2.1.1. Initial Exploratory Factor Analysis

Responses from the randomly selected sample of 1,558 female participants to the 303-item scale derived based on Phase 1 interviews were submitted to the initial exploratory factor analysis based on principal components extraction followed by oblique rotation to simple structure via the Direct Oblimin method. Upon inspection of the corresponding scree plot, factors with eigenvalues exceeding a value of one were

examined to determine specific factors emerging from the data. Upon inspection of the corresponding screen plot, I extracted three factors with eigenvalues exceeding a value of one. All factor loadings were limited to values > .40. Factor 1 initially included 51 items which loaded greater than .40. Twenty-nine items were either combined into a single item or eliminated due to high inter-item correlations (>. 60), 6 items were eliminated for theoretical reasons, and 4 items were eliminated because they cross-loaded on two or more factors. Factor 2 initially included 44 items which loaded greater than .40. Twenty three items were either combined into a single item or eliminated due to high inter-item correlations (>.60), 5 items were eliminated for theoretical reasons, and 5 items were eliminated because they cross-loaded on two or more factors. Factor 3 initially included 40 items which loaded greater than .40. Twenty-one items were either combined into a single item or eliminated due to high inter-item correlations (>.60), 5 items were eliminated for theoretical reasons, and 3 items were eliminated because they cross-loaded on two or more factors. The resulting 34-item scale was labeled the Women's Sexual Self-Views (WSSV) scaled. See Appendix M.

Table 5. Initial Exploratory Factor Analysis (n = 1,558)

Item	Factor 1	Factor 2	Factor 3
Factor 1			
1. I am confident (e.g., I think that I am good	0.80		
in bed)			
2. I am comfortable with myself as a sexual	0.77		
Person			
3. I am satisfied and content	0.75		
4. I am open and receptive	0.72		
5. I am carefree and uninhibited	0.50		
6. I am engaging and involved in sexual	0.67		

Situations			
7. I feel desirable and appealing	0.65		
8. I am healthy and feel sexually-functional	0.71		
9. I am able to receive or feel pleasure from	0.55		
sexual situations			
10. I am exciting and interesting to my sexual	0.71		
Partners			
11. I consider myself a very sexual person	0.63		
(e.g., I have a high sex drive)			
12. I am communicative (e.g., I am comfortable	0.55		
discussing my sexuality)			
Factor 2			
1. I am confused or conflicted		0.60	
2. I am frustrated		0.58	
3. I feel used or objectified		0.53	
4. I feel disconnected or distracted		0.54	
5. I am worried or nervous		0.47	
6. I have sexual issues or hang-ups		0.45	
7. I am impulsive		0.41	
8. I engage in risky sexual behavior		0.40	
9. I am often aggressive or forceful in sexual		0.40	
Situations			
10. I draw attention to myself in a sexual way		0.44	
or I am an exhibitionist			
11. I am promiscuous		0.50	
Factor 3			
1. I am nurturing and/or caring			0.57
2. I am patient			0.41
3. I am thoughtful and considerate			0.54
4. I am understanding			0.50
5. I am affectionate			0.42
6. I am accommodating to my sexual partners			0.43
7. I am proper or moral			0.51
8. I am innocent and/or I feel sexually			0.49
Inexperienced			
9. I am private			0.40
10. I am respectable			0.45
11. I try to be a "good girl" or a "nice girl"			0.57

4.2.2.1.2. Confirmatory Factor Analysis

Based on the initial exploratory factor analysis results from 1,558 female participants, I expected that a confirmatory factor analysis would demonstrate a clear, three-factor structure. To evaluate this, using the data from the randomly selected sample of 500 women, a principal components analysis was conducted on the 34 items, extracting three factors, and rotating the factors to oblique simple structure via the Direct Oblimin method. Item loadings of the resulting three factors are presented below. Each of the three factors closely replicated those obtained from the initial factor analysis with the exception of two items from Factor 3 which cross-loaded onto Factor 1. That is, the items "I am nurturing and/or caring" and "I am understanding" from cross-loaded on Factor 1 and Factor 3 at greater that .40.

Table 6. Confirmatory Factor Analysis (n = 500)

Item	Factor 1	Factor 2	Factor 3
Factor 1			
1. I am confident (e.g., I think that I am good in bed)	0.83		
2. I am comfortable with myself as a sexual Person	0.70		
3. I am satisfied and content	0.81		
4. I am open and receptive	0.70		
5. I am carefree and uninhibited	0.63		
6. I am engaging and involved in sexual Situations	0.74		
7. I feel desirable and appealing	0.70		
8. I am healthy and feel sexually-functional	0.60		
9. I am able to receive or feel pleasure from sexual situations	0.44		
10. I am exciting and interesting to my sexual Partners	0.63		
11. I consider myself a very sexual person (e.g.	0.66		

I have a high sex drive)
12. I am communicative (e.g., I am comfortable discussing my sexuality)
0.58

Factor 2			
1. I am confused or conflicted		0.70	
2. I am frustrated		0.70	
3. I feel used or objectified		0.49	
4. I feel disconnected or distracted		0.61	
5. I am worried or nervous		0.57	
6. I have sexual issues or hang-ups		0.40	
7. I am impulsive		0.41	
8. I engage in risky sexual behavior		0.52	
9. I am often aggressive or forceful in sexual		0.42	
Situations		0.42	
10. I draw attention to myself in a sexual way		0.50	
or I am an exhibitionist		0.50	
11. I am promiscuous		0.50	
11. 1 am promiseuous		0.50	
Factor 3			
1. I am nurturing and/or caring	0.49		0.56
2. I am patient			0.41
3. I am thoughtful and considerate			0.54
4. I am understanding	0.50		0.50
5. I am affectionate			0.42
6. I am accommodating to my sexual partners			0.41
7. I am proper or moral			0.52
9. I am innocent and/or I feel sexually			0.59
Inexperienced			
9. I am private			0.41
10. I am respectable			0.49
11. I try to be a "good girl" or a "nice girl"			0.45

4.2.2.1.3. Subfactor Analysis

Additional factor analyses were conducted to examine potential subfactors within the three factors of the WSSV scale outlined above were conducted on the full Phase 2 sample (N = 2,058). The constituent items of each factor were submitted to a factor

analysis based on principal components extraction followed by oblique rotation to simple structure via the Direct Oblimin method. Upon inspection of the corresponding scree plot, factors with eigenvalues exceeding a value of one were examined to determine whether specific subfactors were emerging from the data.

Upon inspection of the corresponding screen plot, the 12 items in Factor 1 did not contain specific subfactors, therefore, it was determined that the items included in Factor 1 represented a single theme of women's sexual self-views. All 12 items in this factor were positively valenced, and thus this factor was appropriately labeled as Positive Sexual Self-Views.

Upon inspection of the corresponding screen plot, two subfactors emerged from Factor 2 (eigenvalues > 1) highlighting separate clusters of items within this factor. The first subfactor included six items (loading > .40) which were generally negative in valence and reflected internal feelings and/or affective states, and was thus labeled as Negative Internal/ Affective Sexual Self-Views. The second subfactor included five items (loading > .40) which were generally negative in valence and reflected external behaviors and was thus labeled as Negative External/Behavioral Sexual Self-Views.

Table 7. Subfactor Structure for Factor 2 of the WSSV Scale

	Subf	actors
Item	A	В
Negative Internal/ Affective Sexual Self-Views		
1. I am confused or conflicted	0.68	
2. I am frustrated	0.66	
3. I feel used or objectified	0.58	
4. I feel disconnected or distracted	0.66	
5. I am worried or nervous	0.59	
6. I have sexual issues or hang-ups	0.43	
Negative External/ Behavioral Sexual Self-Views		
1. I am impulsive		0.60
2. I engage in risky sexual behavior		0.57
3. I am often aggressive or forceful in sexual situations		0.55
4. I draw attention to myself in a sexual way or I am an		0.64
Exhibitionist		
5. I am promiscuous		0.52

Upon inspection of the corresponding screen plot, two subfactors emerged from Factor 3 (eigenvalues > 1) highlighting separate clusters of items within this factor. Specifically, the first subfactor included six items (loading > .40) which generally reflected sexual self-views in the context of a relationship, and was thus labeled as Interpersonally-Relevant Sexual Self-Views. The second subfactor included five items (loading > .40) which generally reflected reserved or conservative views and was thus labeled as Conservative Sexual Self-Views.

Table 8. Subfactor Structure for Factor 3 of the WSSV Scale

	Subfa	actors
Item	A	В
Interpersonally-Relevant Sexual Self-Views		
1. I am nurturing and/or caring	0.73	
2. I am patient	0.56	
3. I am thoughtful and considerate	0.73	
4. I am understanding	0.41	
5. I am affectionate	0.41	
6. I am accommodating to my sexual partners	0.65	
Conservative Sexual Self-Views		
1. I am proper or moral		0.35
2. I am innocent and/or I feel sexually inexperienced		0.64
3. I am private		0.42
4. I am respectable		0.67
5. I try to be a "good girl" or a "nice girl"		0.65

4.2.2.2 Factor Intercorrelations

Separate values to represent the different domains of the WSSV scale were scored by computing the average value of the responses to constituent items assigned to each factor. Intercorrelations among the resulting factors are presented in the table below. Of note, there was a significant inverse correlation (i.e., negative relationship) between Positive Sexual Self-Views and Negative Internal/ Affective Sexual Self-Views (r = .41). Also noteworthy, The Interpersonally-Relevant Sexual Self-Views were moderately correlated with Positive Sexual Self-Views (r = .62).

Table 9. Factor Intercorrelations

	Factor 1: Positive	Factor 2A: Factor 2B: Negative Internal/ Affective Behavioral		sitive Negative Internal/ Negative External/ Interpersonally-			Factor 3B: Conservative
Factor 1: Positive	1.00	-0.41**	0.46**	0.62**	-0.13**		
Factor 2A: Negative Internal/ Affective		1.00	0.14**	-0.12**	0.24**		
Factor 2B: Negative External/ Behavioral			1.00	0.15**	-0.26**		
Factor 3A: Interpersonally- Relevant				1.00	0.22**		
Factor 3B: Conservative	_				1.00		

^{**} Correlation is significant at the 0.01 level (two-tailed).

4.2.2.3 Reliability

Cronbach's coefficient alphas for the three factors (and the corresponding subfactors) of the WSSV scale are presented in the table below. The high Alpha Cronbach coefficient of each of these factors (range .71- .93) implies that the items within each factor represent single themes of women's sexual self-views.

Table 10. Factor Reliability of the WSSV Scale

Factors	N = 2058
Factor 1: Positive Sexual Self-Views	0.93
Factor 2A: Negative Internal/ Affective Sexual Self-Views	0.86
Factor 2B: Negative External/ Behavioral Sexual Self-Views	0.78
Factor 3A: Interpersonally- Relevant Sexual Self-Views	0.88
Factor 3B: Conservative Sexual Self-Views	0.71

4.3 Phase 2, Part B: Validity of the WSSV Scale

4.3.1 Participants

Participants were recruited through the undergraduate research pool and through the Female Sexual Psychophysiology Laboratory. Two hundred and seventy-eight females completed the Phase 2 demographics questionnaire, the WSSV scale, the FSFI (Rosen et al., 2000), the SSSS (Andersen & Cyranowski, 1994), and the YSQ-S (Young, 1998). The data from these participants was used to explore the convergent, divergent, discriminant, and predictive validity of the WSSV scale. In this sample, participants had a mean age of 32.13 years (SD = 7.12, range = 18-60 years). Race breakdown included 172 women who identified as Caucasian (61.87%), 50 women who identified as Hispanic or

Latino (17.99%), 46 women who identified as Asian (16.55%), 6 women who identified as Black or African-American (2.16%), and 4 women who identified as "other" (1.44%). Educational history as self-reported by participants included: 130 women indicating having graduated from high school (46.76%), 105 women indicating having completed "some college" (37.77%), 23 women indicating having completed their undergraduate degree (8.27%), 16 women indicating having completed a Masters or Doctoral degree (5.76%), and 4 women who did not report their educational background (1.44%).

Relationship status of the 278 participants included: 90 women identifying as "single, not dating" (32.37%), 68 women identifying as "single, casual dating" (24.46%), and 120 women reporting current involvement in a committed relationship (43.17%). Of the 278 female participants in this sample, 16 women (5.7%) indicated that they did have children. For reported sexual orientation, 9 women identified as homosexual (3.24%), 254 women identified as heterosexual (91.37%), 12 women identified as bisexual (4.32%), and 3 women reported being "unsure of their sexual orientation" (1.08%).

Table 11. Phase 2, Part B Validation Sample Participant Characteristics (N = 278)

	M	SD
Age (in years)	32.13	7.12
Range	18 -60	
_	N	%
Race		
White	172	61.87
Hispanic or Latino	50	17.99
Asian	46	16.55
Black or African-American	6	2.16
Other	4	1.44
Education		
High School Graduate	130	46.76
Some College	105	37.77
College Graduate	23	8.27
Master's or PhD degree	16	5.76
No Response	4	1.44
Relationship Status		
Single, not dating	90	32.37
Single, casual dating	68	24.46
In a committed relationship	120	43.17
Have Children (% Yes)	16	5.76
Sexual Orientation		
Homosexual	9	3.24
Heterosexual	254	91.37
Bisexual	12	4.32
Unsure	3	1.08

4.3.2 Analyses

Following completion of online data collection from this sample of 278 women, the Principal Investigator first downloaded all of the study data into SPSS from the Psychdata web site. The data was organized such that each participant's responses were grouped together, but no potentially identifying information (e.g., IP addresses) was

included in the data file. Subsequently, all paper-and-pencil data was entered into the same SPSS data file. Next, all data was scored appropriately for further analyses. That is, values were calculated for each domain and the total scores of the SSSS (Anderson & Cyranowski, 1994), for each sub-factor of the WSSV scale, and for the 15 domains of the YSQ-S (Young; 1998) intended to tap maladaptive schemas.

4.3.2.1 Convergent Validity

In an attempt to provide initial information about the validity of the WSSV scale, I examined it in relation to Andersen and Cyranowski's (1994) Sexual Self-Schema Scale (SSSS; see Appendix 1). Convergent validity was assessed by calculating relations between the different factors of the WSSV scale and the SSSS. Correlational results indicated a range in the relatedness of the different factors of the WSSV scale and the SSSS (range in Pearson's correlation coefficients = .05 to .69). Not surprisingly, several significant relationships did emerge. Most notably, the Positive Sexual Self-Views domain of the WSSV scale showed a strong positive relationship with the Romantic/ Passionate Self-Schemas domain of the SSSS; and a strong negative relationship with the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS. Additionally, the Negative External/ Behavioral Sexual Self-Views domain of the WSSV scale and the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS showed a negative correlation. As anticipated, the Conservative Sexual Self-Views domain of the WSSV scale and the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS showed a significant correlation as well. For discussion of convergent validity results,

and how the WSSV scale expands upon Andersen and Cyranowski's SSSS (1994), see pages 97-98.

Table 12. Convergent Validity

	SSSS Factors			
	Romantic/ Passionate	Open/ Direct	Embarrassment/ Conservatism	
WSSV Factors				
Factor 1: Positive Sexual Self-Views	0.69**	0.34*	-0.59**	
Factor 2A: Negative Internal/ Affective Sexual Self-Views	-0.31*	-0.18	0.25	
Factor 2B: Negative External/ Behavioral Sexual Self-Views	0.19	0.27	-0.52*	
Factor 3A: Interpersonally-Relevant Sexual Self-Views	0.37*	0.11	-0.19	
Factor 3B: Conservative Sexual Self-Views	-0.13	-0.05	0.41**	

^{*.} Correlation is significant at the 0.05 level (2-tailed).

^{** .} Correlation is significant at the 0.01 level (2-tailed).

4.3.2.2 Divergent Validity

In an attempt to provide initial information regarding the divergent validity of the WSSV scale, I examined it in relation to general maladaptive schemas. This was done by computing Pearson's correlation coefficients for the factors of the WSSV scale and the Young's Schema Questionnaire (YSQ-S; 1998). Correlational results indicated that, although the two scales are related, they clearly do not measure the same construct (range in Pearson's correlation coefficients = -0.02 to .44). Interestingly, the Negative Internal/ Affective Sexual Self-Views and Negative External/ Behavioral Sexual Self-Views domains of the WSSV scale, which clearly represent more negatively valenced sexual self-views, positively correlated with most of the domains of the YSQ-S, a problem-focused scale of maladaptive schemas. Conversely, the Positive Sexual Self-View domain of the WSSV scale reflected a negative relationship with most of the domains of the YSQ-S.

Table 13. Divergent Validity

	WSSV Scale domains					
	Factor 1: Positive Sexual Self-Views	Factor 2A: Negative Internal/ Affective Sexual Self-Views	Factor 2B: Negative External/ Behavioral Sexual Self-Views	Factor 3A: Interpersonally- Relevant Sexual Self- Views	Factor 3B: Conservative Sexual Self- Views	
YSQ-S Domains						
Emotional Deprivation	-0.02	0.20*	0.21*	0.06	-0.04	
Abandonment	0.01	0.31**	0.13	0.08	-0.01	
Mistrust/Abuse	-0.01	0.43**	0.21*	-0.11	-0.01	
Social Isolation	-0.11	0.24**	0.02	0.13	-0.06	
Defectiveness/ Shame	-0.09	0.30**	0.11	0.17	0.15	
Failure	-0.08	0.36**	0.25**	0.12	0.19*	
Dependence/ Incompetence	-0.19	0.23*	-0.03	0.04	0.21*	
Vulnerability to Harm & Illness	-0.24*	0.19*	-0.14	0.03	-0.01	
Enmeshment	-0.22*	0.14	-0.12	0.09	0.22*	
Subjugation	-0.13	0.23*	0.06	-0.01	0.11	
Self-Sacrifice	0.11	0.12	0.18	0.09	0.03	
Emotional Inhibition	-0.23*	0.42**	0.02	-0.11	0.17	
Unrelenting Standards	0.19	0.02	0.13	0.31**	0.03	
Entitlement	0.16	0.17	0.35**	0.14	-0.05	
Insufficient Self-Control	0.05	0.36**	0.29**	0.07	-0.11	

^{*}. Correlation is significant at the 0.05 level, **. Correlation is significant at the 0.01 level (2-tailed)

4.3.2.3 Discriminant Validity

The sexual functioning status of participants in the Validation Sample of Phase 2 was assessed using the Female Sexual Function Index (FSFI; Rosen et al., 2000). Wiegel et al. (2005) established clinical cut-off scores for the FSFI to classify women as sexually dysfunctional by establishing that an FSFI Total Score of less than 26.55 correctly classified the majority of sexually dysfunctional women. Using these proposed cut-off scores in our data set from participants from the Phase 2 Validation Sample of the present study, 102 women were categorized as sexually functional controls based on the criteria of: (1) scoring within the normal range of healthy controls on the FSFI (i.e., FSFI Total Score > 27.00); 176 women were categorized as having sexual difficulties or concerns based on the criterion of: (1) scoring within the range for women with sexual dysfunction on the FSFI (i.e., FSFI Total Score < 26.00). Multivariate ANOVAS verified significant differences in FSFI domain and total scores between women with sexual difficulties and sexually healthy controls. That is, women with sexual difficulties or concerns reported lower levels of desire, F(1, 277) = 59.55, p < .001; arousal, F(1, 277) = 187.35, p < .001; lubrication, F(1, 277) = 136.53, p < .001; orgasm, F(1, 277) = 128.04, p < .001; satisfaction, F(1,277) = 168.67, p = <.001; higher levels and frequency of pain associated with sexual activity, F(1, 277) = 53.15, p < .001; and overall FSFI total scores, F(1, 277) = 235.20, p < .001.

Table 14. FSFI Data by Group for Phase 2 Validation Sample

	Women with Sexual Sex Difficulties n = 176		p
		n = 102	P
FSFI Domain	M (SD)	M (SD)	
Scores			
Desire	3.25 (1.14)	4.39 (1.01)	<.001
Arousal	2.68 (1.51)	5.30 (1.09)	<.001
Lubrication	3.34 (1.84)	5.89 (0.93)	<.001
Orgasm	2.99 (1.72)	5.45(1.39)	<.001
Pain	2.57 (1.21)	4.71 (1.12)	<.001
Satisfaction	3.64 (2.71)	5.96 (1.36)	<.001
Total	18.64 (6.53)	31.20 (3.93)	<.001

The ability of the WSSV scale to differentiate between women with sexual difficulties and sexually healthy controls was assessed by comparing the mean responses of these two groups of women on each of the three factors of the WSSV scale. A between-group MANOVA comparing women with sexual difficulties and sexually healthy controls revealed significant differences between groups on the Positive Sexual Self-Views domain, F (5, 272) = 8.34, p = .005 and the Negative Internal/ Affective Sexual Self-Views domain, F (5, 272) = 12.39, p = .001. There were no significant differences between-groups for the Negative External/ Behavioral Sexual Self-Views domain, F (5, 272) = 0.14, p = .71, the Interpersonally-Relevant Sexual Self-Views domain, F (5, 272) = 2.50, p = .12, or the Conservative Sexual Self-Views domain, F (5, 272) = 0.71, p = .40. It is important to note that for all the domains of the WSSV scale, women with sexual difficulties or concerns had lower scores within the Positive, Interpersonally-Relevant, and Conservative Sexual Self-Views domain and higher scores

within the Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views domain; whereas sexually healthy controls had higher scores within the Positive, Interpersonally-Relevant, and Conservative Sexual Self-Views domain and lower scores within the Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views domain.

Table 15. Between-Group Differences of the WSSV Scale

	Sexually	Women		
	Healthy	with		
	Controls	Sexual	$\boldsymbol{\mathit{F}}$	\boldsymbol{P}
	(n = 102)	Difficulties		
		(n = 176)		
	M (SD)	M (SD)		
Positive Sexual Self-Views	4.17(0.79)	3.78(0.73)	8.34	0.005
1. I am confident (i.e., I think that I am good	3.86(1.46)	3.77(1.60)	0.54	0.003
In bed)	3.60(1.40)	3.77(1.00)		
2. I am comfortable with myself as a sexual	4.08(1.67)	3.99(1.50)		
Person	, ,	,		
3. I am satisfied and content	4.12(1.18)	4.02(1.27)		
4. I am open and receptive	4.57(1.10)	4.41(1.21)		
5. I am carefree and uninhibited	3.37(1.24)	3.13(1.23)		
6. I am engaging and involved in sexual	4.49(1.32)	4.21(1.30)		
Situations				
7. I feel desirable and appealing	4.18(1.26)	4.02(1.20)		
8. I am healthy and feel sexually-functional	4.40(1.23)	3.43(1.21)		
9. I am able to receive or feel pleasure from	4.26(1.89)	4.06(4.46)		
sexual situations				
10. I am exciting and interesting to my sexual partners	4.00(1.14)	4.10(1.32)		
11. I consider myself a very sexual person	3.28(1.64)	3.39(1.57)		
(i.e., I have a high sex drive)	` ,	. ,		
12. I am communicative (e.g., I am	3.80(1.66)	3.78(1.72)		
comfortable discussing my sexuality)	, ,			
Negative Internal/Affective				
Sexual Self-Views	2.12(0.78)	2.63(0.81)	12.39	0.01

1. I am confused or conflicted	2.24(1.38)	2.81(1.47)		
2. I am frustrated	2.18(1.34)	2.36(1.11)		
3. I feel used or objectified	2.20(1.28)	2.50(1.30)		
4. I feel disconnected or distracted	2.55(1.42)	2.92(1.44)		
5. I am worried or nervous	2.53(1.30)	2.99(1.42)		
6. I have sexual issues or hang-ups	2.03(1.15)	2.54(1.47)		
Negative External/Behavioral				
Sexual Self-Views	2.64(0.88)	2.64(0.92)	0.14	0.71
7. I am impulsive	3.41(1.42)	3.61(1.41)		
8. I engage in risky sexual behavior	2.33(1.64)	2.15(1.62)		
9. I am often aggressive or forceful in	2.10(1.13)	2.09(1.10)		
sexual situations	, ,	, ,		
10. I draw attention to myself in a sexual	2.14(1.18)	2.04(1.29)		
way or I am an exhibitionist				
11. I am promiscuous	1.66(1.05)	1.85(1.27)		
Interpersonally-Relevant				
Sexual Self-Views	4.58(0.80)	4.35(0.80)	2.50	0.12
1. I am nurturing and caring	4.49(1.19)	4.37(1.25)		
2. I am patient	3.90(1.45)	3.76(1.36)		
3. I am thoughtful and considerate	4.68(1.04)	4.54(1.19)		
4. I am understanding	4.68(1.17)	4.71(1.08)		
5. I am affectionate	4.81(1.14)	4.91(1.14)		
6. I am accommodating to my sexual	4.07(1.37)	4.16(1.19)		
Partners	,	,		
Conservative Sexual Self-Views	3.46(0.89	3.56(1.02)	0.71	0.40
7. I am proper or moral	4.37(1.30)	4.19(1.42)	0.71	0.40
8. I am innocent and/or I feel sexually	3.11(1.46)	3.34(1.61)		
Inexperienced	3.11(1.40)	3.34(1.01)		
9. I am private	3.88(1.31)	4.27(1.42)		
10. I am respectable	4.61(1.12)	4.64(1.01)		
11. I try to be a "good girl" or a "nice girl"	3.69(1.44)	3.94(1.55)		
11.1 try to oc a good giri or a filee giri	3.03(1.74)	3.37(1.33)		

4.3.2.4 Examination of Potential Predictors of the WSSV Scale

To begin examining potential predictors of how women scored on the different factors of the WSSV scale, hierarchical linear regression analyses were conducted for

each factor and subfactor of the WSSV scale. Three categories of predictors were examined: (1): Sexual Functioning Status (Sexually Healthy Controls vs. Women with Sexual Difficulties; (2) Relationship Status ("Single, not dating" vs. "Single, casual dating" vs. "In a committed relationship"); (3) Demographic Variables, including age, educational background, and having children (yes/no). Variables for Relationship status were dummy-coded for "Single, not dating" and "In a relationship."

4.3.2.4.1 Predictors of the Positive Sexual Self-Views Domain

A woman's relationship status, age, educational background and whether she had children were not significant predictors of the Positive Sexual Self-Views domain of the WSSV scale. Sexual Functioning Status significantly predicted Positive Sexual Self-Views. That is, women with sexual difficulties indicated lower scores for Positive Sexual Self-Views as compared to sexually healthy controls. Although, adding Step 2 (i.e., Relationship Status) and Step 3 (i.e., Demographic Variables) each added an increase in 4% of the variance explained by the model, this increase was not statistically significant and did not affect the significance of the Sexual Functioning Status finding.

Table 16. Hierarchical linear regression for the prediction of Factor 1: Positive Sexual Self-Views domain of the WSSV scale

		Statistical Test						
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	P
Predictor Variables								
Step 1	0.03		3.98					0.05
Sexual Functioning Status						-0.20	-1.99	0.05
Step 2	0.05	0.04	2.64	1.93	0.51			0.05
Sexual Functioning Status						-0.19	-1.91	0.05
Single, not dating						-0.23	-1.95	0.06
In relationship						-0.10	-0.85	0.40
Step 3	0.06	0.04	1.92	1.19	0.32			0.09
Sexual Functioning Status						-0.23	-2.19	0.03
Single, not dating						-0.21	-1.69	0.09
In relationship						-0.04	-0.34	0.74
Age						-0.09	-0.57	0.57
Education						-0.05	-0.41	0.68
Children						-0.09	-0.70	0.49

4.3.2.4.2 Predictors of the Negative Internal/ Affective Sexual Self-Views

A woman's age, educational background and whether she had children were not significant predictors of the Negative Internal/ Affective Sexual Self-Views domain of the WSSV scale. Sexual Functioning Status and Relationship Status both significantly predicted Negative Internal/ Affective Sexual Self-Views. Specifically, women with sexual difficulties indicated higher scores for Negative Internal/ Affective Sexual Self-Views as compared to sexually healthy controls. Further, women who identified their Relationship status as "In a relationship" had lower scores for the Negative Internal/ Affective Sexual Self-Views domain of the WSSV scale as compared to women who

reported being "Single, not dating" and "Single, casual dating." When Relationship Status was added, a significant increase of 12% in the variance explained was achieved. Adding Step 3 (i.e., Demographic Variables) did not significantly increase the variance explained by the model or affect the significant Sexual Functioning and Relationship Status findings.

Table 17. Hierarchical linear regression for the prediction of Factor 2A: Negative Internal/ Affective Sexual Self-Views domain of the WSSV scale

				Statis	stical Test			
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	p
Predictor Variables								
Step 1	0.06		7.93					0.01
Sexual Functioning Status						0.27	2.82	0.01
Step 2	0.17	0.12	7.93	7.44	< 0.01			< 0.01
Sexual Functioning Status						0.28	3.12	< 0.01
Single, not dating						-0.13	-1.24	0.22
In relationship						-0.40	-3.75	< 0.01
Step 3	0.17	0.03	4.55	1.13	0.34			< 0.01
Sexual Functioning Status						0.25	2.63	0.01
Single, not dating						-0.11	-1.08	0.29
In relationship						-0.37	-3.31	< 0.01
Age						-0.20	-1.46	0.15
Education						-0.01	-0.07	0.94
Children						0.09	0.73	0.47

4.3.2.4.3 Predictors of the Negative External/ Behavioral Sexual Self-Views Domain

Sexual Functioning Status, age, educational background and whether a woman had children were not significant predictors of the Negative External/ Behavioral Sexual Self-Views domain of the WSSV scale. Although, Relationship Status significantly predicted Negative External/ Behavioral Sexual Self-Views such that women who

identified as "Single, casual dating" had higher scores within this domain as compared to women who identified as "Single, not dating," Step 2 was not significant (p = 0.14) and did not did not significantly increase the variance explained by the model (i.e., Sig F Δ = 0.08). Further, the Relationship Status findings were no longer significant when the Demographic Variables were added into the third block of the model.

Table 18. Hierarchical linear regression for the prediction of Factor 2B: Negative External/Behavioral domain of the WSSV scale

	Statistical Test								
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	p	
Predictor Variables									
Step 1	-0.04		0.57					0.45	
Sexual Functioning Status						0.08	0.76	0.45	
Step 2	0.03	0.05	1.91	2.56	0.08			0.13	
Sexual Functioning Status						0.09	0.95	0.35	
Single, not dating						-0.24	-2.01	0.05	
In relationship						-0.23	-1.98	0.05	
Step 3	0.04	0.04	1.68	1.43	0.24			0.14	
Sexual Functioning Status						0.04	0.39	0.69	
Single, not dating						-0.22	-1.87	0.07	
In relationship						-0.19	-1.51	0.14	
Age						-0.11	-0.71	0.48	
Education						-0.15	-1.19	0.24	
Children						0.05	0.39	0.70	

4.3.2.4.4 Predictors of the Interpersonally-Relevant Sexual Self-Views Domain

None of the predictors submitted to hierarchical regressions were significant predictors of the Interpersonally-Relevant domains of the WSSV scale. That is, Sexual Functioning Status, Relationship Status, a woman's age, educational background and whether she had children did not significantly predict Interpersonally-Relevant Sexual

Self-Views. Further, Adding Step 2 (i.e., Relationship Status) and Step 3 (i.e., Demographic Variables) did not significantly increase the variance explained by the model.

Table 19. Hierarchical linear regression for the prediction of Factor 3A: the Interpersonally-Relevant domain of the WSSV scale

				Statistic	cal Test			
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	p
Predictor Variables								
Step 1	<.001		0.32					0.32
Sexual Functioning Status						-0.10	-1.01	0.32
Step 2	-0.02	.002	0.41	0.12	0.89			0.75
Sexual Functioning Status						-0.10	-0.98	0.33
Single, not dating						-0.02	-0.18	0.86
In relationship						0.03	0.29	0.77
Step 3	-0.04	.002	0.35	0.29	0.83			0.91
Sexual Functioning Status						-0.11	-1.09	0.28
Single, not dating						-0.01	-0.05	0.96
In relationship						0.06	0.51	0.61
Age						-0.07	-0.45	0.65
Education						-0.01	-0.09	0.93
Children						-0.03	-0.20	0.84

4.3.2.4.5 Predictors of the Conservative Sexual Self-Views Domain

Sexual Functioning Status, age, educational background and whether a woman had children were not significant predictors of the Conservative Sexual Self-Views domain of the WSSV scale. Although the combination of variables included in Step 2 significantly predicted Conservative Sexual Self-Views and added a significant increase in 8% of the variance explained by the model, none of the variables alone were significant predictors (i.e., non-significant β coefficients). Step 3 added an additional

significant increase in 8% of the variance explained by the model, in that Relationship Status significantly predicted Conservative Sexual Self-Views such that women who identified as "Single, not dating" had higher scores within this domain as compared to women who identified as "Single, casual dating" and "In a committed relationship."

Table 20. Hierarchical linear regression for the prediction of Factor 3B: the Conservative Sexual Self-Views domain of the WSSV scale

	Statistical Test									
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	p		
Predictor Variables										
Step 1	008		0.12					0.73		
Sexual Functioning Status						-0.03	-0.34	0.73		
Step 2	0.06	.08	3.14	4.65	0.01			0.03		
Sexual Functioning Status						-0.03	-0.33	0.75		
Single, not dating						0.20	1.74	0.09		
In relationship						-0.13	-1.18	0.24		
Step 3	0.11	.08	3.13	2.93	0.04			.008		
Sexual Functioning Status						-0.11	-1.13	0.26		
Single, not dating						0.22	2.00	0.05		
In relationship						-0.06	-0.48	0.63		
Age						-0.13	-0.88	0.38		
Education						-0.22	-1.79	0.08		
Children						0.05	0.37	0.72		

4. 4 Phase 3

4.4.1 Participants

Participants were 141 females recruited through a psychology department undergraduate research participant pool. Participants had a mean age of 18.95 years (SD = 3.15, range = 17-50 years). Race breakdown included 80 women who identified as

Caucasian (56.74%), 26 women who identified as Latina or Hispanic (18.44%), 26 women who identified as Asian (18.44%), 4 women who identified as Black or African-American women (2.84%), and 5 women who identified as "Other" (3.55%).

Educational history as self-reported by participants included: 104 women reporting having a high school diploma (73.76%), 20 women reporting having completed 1 year of college (14.18%), 9 women reporting having completed 2 years of college (6.38%), 4 women reporting having completed 3 years of college (2.84%), and 2 women reporting having completed 5 years of college (1.42%).

Relationship status of the 141 participants included: 51 women who identified as "single, not dating" (36.17%), 30 women who identified as "single, casual dating" (21.28%), and 60 women who reported current involvement in a committed relationship (42.55%). Sexual orientation included: two women who identified as homosexual (1.42%), 137 women who identified as heterosexual (97.16%), one woman who identified as bisexual (0.71%), and one woman who felt unsure of her sexual orientation (0.71%).

Sexual experience history of participants in Phase 3 was assessed using a modified version of the Derogatis Sexual Experience Subscale (DSFI, Derogatis & Melisaratos, 1979). The number of activities which participants indicated (i.e., yes) that they had experienced was summed to represent an overall sexual experience score. In our sample of 141 women, the average number of the 20 possible sexual activities listed that participants indicated that they had previously engaged in was 10.79 (SD = 5.12, range 0-

20 activities). Sexual Functioning Status of participants in Phase 3 was assessed using the FSFI (Rosen et al., 2000; See Appendix D).

Table 21. Phase 3 Participant Characteristics (N = 141)

	M	SD
Age (in years)	18.95	3.151
	N	%
Race		
Caucasian	80	56.74
Hispanic	26	18.44
Asian	26	18.44
African-American	4	2.84
Other	5	3.55
Education		
High School	104	73.76
1 year of college	20	14.18
2 years of college	9	6.38
3 years of college	4	2.88
4 years of college	2	1.42
Graduate School	2	1.42
Relationship Status		
Single, not dating	51	36.17
Single, casual dating	30	21.28
In a committed relationship	60	42.55
Sexual Orientation		
Homosexual	2	1.42
Heterosexual	137	97.16
Bisexual	1	.71
Unsure	1	.71
	M	SD
Sexual Functioning	-	
FSFI Desire	3.59	1.17
FSFI Arousal	3.32	1.58
FSFI Lubrication	4.13	1.76
FSFI Orgasm	3.57	1.66
FSFI Satisfaction	3.10	1.38
FSFI Pain	4.06	2.47

FSFI Total	22.51	5.80
Sexual Experience total score Range	10.79 0-20	5.12

4.4.2 Data Management and Reduction

All data obtained from the multiple choice recognition tasks and questionnaires in Phase 3 was automatically saved in separate Microsoft Excel data files for each participant (e.g., the computer program which was used to run this study automatically entered all of the participant's responses into Microsoft Excel). After completion of all data collection for Phase 3, data was transferred from Excel to SPSS and scored appropriately for further analyses.

Data derived from the multiple choice memory tasks presented after each of the sexual stories was converted to percent correct values for each story. That is, all multiple choice and recognition tasks were coded as correct or incorrect. Then, the number of correct responses was converted to a percent correct value for each story.

Subjective data derived from the Story Scale was converted to a single mean value for each variable. That is, each score was based on a average value of all questions included within each variable (e.g., positive affect was defined by four questions on the story scale, thus, scores for positive affect were based on the average value of these four questions).

4.4.3 Order Effects

In order to determine whether the order of story presentation significantly affected outcome variables of interest, initial 6-way (Order of Story Presentation) MANOVAS were conducted. Because story presentation order was not shown to affect percent correct on multiple choice memory tasks or responses to the Story Scale, this variable was excluded from further analyses.

4.4.4 Examination of Predictors of Performance on Memory Tasks

To begin examining potential predictors of how women performed on multiple choice memory tasks in Phase 3, hierarchical linear regression analyses were conducted for each Story (i.e., Story 1, 2, and 3). Three categories of predictors were examined: (1): Women's Sexual Self-Views (i.e., corresponding factor from the WSSV scale); (2) Reactions to the Story (i.e., data derived from Story Scale for each corresponding story); and (3) Sexuality Variables (i.e., sexual experience and sexual functioning). Sexual experience was represented by the Total Score obtained from the Phase 3 Sexual Experience Scale and sexual functioning was obtained from the Total Score of the FSFI.

4.4.4.1 Predictors of Performance on Memory Tasks for Story 1

Reactions to the story, sexual experience, and sexual functioning were not significant predictors of percent correct on memory tasks for Story 1 of Phase 3.

However, Factor 1 scores (i.e., Positive Sexual Self-Views domain) of the WSSV scale significantly predicted percent correct on memory tasks for Story 1 and accounted for

15% of the variance in memory performance for Story 1. That is, women with higher scores on the Positive Sexual Self-Views domain of the WSSV scale were more likely to perform better on memory tasks corresponding to Story 1. Although, adding Step 2 (i.e., Reactions to the Story) and Step 3 (i.e., Sexuality Variables) each added an increase in 13% of the variance explained in the model, this increase was not statistically significant and did not affect the significance of the WSSV Factor 1 finding.

Table 22. Hierarchical linear regression for the prediction of Percent Correct Multiple Choice for Story 1

	Statistical Test									
	R^2	R²∆	F	FΔ	Sig F∆	ß	T	P		
Predictor Variables										
Step 1	0.15		7.04					0.01		
WSSV Factor 1						0.42	2.65	0.01		
Step 2	0.21	0.13	3.24	1.81	0.17			0.03		
WSSV Factor 1						0.44	2.75	0.01		
Positive Affect						-0.07	-0.30	0.77		
Negative Affect						-0.19	-1.23	0.23		
Sexual Arousal						-0.22	-0.92	0.36		
Step 3	0.16	0.13	2.09	0.14	0.87			0.09		
WSSV Factor 1						0.44	1.99	0.05		
Positive Affect						-0.04	-0.17	0.89		
Negative Affect						-0.20	-1.18	0.25		
Sexual Arousal						-0.25	-0.99	0.33		
Sexual Experience						0.08	0.35	0.73		
FSFI Total Score						-0.10	-0.50	0.62		

4.4.4.2 Predictors of Performance on Memory Tasks for Story 2

Reactions to the story, sexual experience, and sexual functioning were not significant predictors of percent correct on memory tasks for Story 2 of Phase 3.

However, Factors 2A and 2B from the WSSV scale significantly predicted percent correct on memory tasks for Story 2 and accounted for 23% of the variance in memory performance for Story 2. That is, women with higher scores on the Negative Internal/Affective and Negative External/ Behavioral domains of the WSSV scale were more likely to perform better on memory tasks corresponding to Story 2. Adding Step 2 (i.e., Reactions to the Story) and Step 3 (i.e., Sexuality Variables) did not significantly increase the variance explained by the model or affect the significance of the WSSV Factor 2A and 2B findings.

Table 23. Hierarchical linear regression for the prediction of Percent Correct Multiple Choice for Story 2

_		Statistical Test									
	R^2	R²∆	F	FΔ	Sig F∆	ß	T	P			
Predictor Variables Step 1 WSSV Factor 2A WSSV Factor 2B	0.23		3.80		_	6.80 4.28	3.31 3.17	0.02 0.003 0.004			
Step 2 WSSV Factor 2A WSSV Factor 2B Positive Affect Negative Affect Sexual Arousal	0.32	0.16	3.27	2.21	0.11	5.77 3.57 0.07 -0.34 -0.35	2.89 2.67 0.39 -1.96 -2.05	0.02 0.008 0.01 0.70 0.06 0.06			
Step 3 WSSV Factor 2A WSSV Factor 2B Positive Affect Negative Affect Sexual Arousal Sexual Experience FSFI Total Score	0.26	0.003	2.27	0.06	0.94	5.89 3.60 0.05 -0.32 -0.33 0.06 0.02	2.75 2.53 0.27 -1.58 -1.69 0.27 0.11	0.06 0.01 0.02 0.79 0.13 0.11 0.79 0.91			

4.4.4.3 Predictors of Performance on Memory Tasks for Story 3

None of the predictors submitted to hierarchical regressions were significant predictors of percent correct on memory tasks for Story 3 of Phase 3. That is, WSSV Factors 3A and 3B (i.e., Interpersonally-Relevant and Conservative Sexual Self-Views), reactions to the story, sexual experience, and sexual functioning did not significantly predict performance on memory tasks for Story 3. Further, Adding Step 2 (i.e., Reactions

to the Story) and Step 3 (i.e., Sexuality Variables) did not significantly increase the variance explained by the model.

Table 24. Hierarchical linear regression for the prediction of Percent Correct Multiple Choice for Story 3

	Statistical Test								
	R^2	R²∆	F	FΔ	Sig F∆	ß	t	P	
Predictor Variables					<u></u> -				
Step 1	0.02		1.35					0.28	
WSSV Factor 3A						0.14	0.80	0.43	
WSSV Factor 3B						-0.25	-1.44	0.16	
Step 2	-0.02	0.06	0.89	0.62	0.61			0.50	
WSSV Factor 3A						0.10	0.57	0.57	
WSSV Factor 3B						-0.16	-0.80	0.43	
Positive Affect						0.16	0.66	0.51	
Negative Affect						-0.21	-1.01	0.32	
Sexual Arousal						-0.24	-0.99	0.33	
Step 3	-0.09	0.007	0.63	0.11	0.90			0.73	
WSSV Factor 3A						0.08	0.38	0.73	
WSSV Factor 3B						-0.09	-0.35	0.71	
Positive Affect						0.17	0.68	0.51	
Negative Affect						-0.19	-0.86	0.40	
Sexual Arousal						-0.25	-0.96	0.34	
Sexual Experience						0.12	0.34	0.74	
FSFI Total Score						0.008	0.03	0.97	

CHAPTER 5: DISCUSSION

5.1 Brief Overview of Dissertation Study

Employing both qualitative and quantitative research methodologies, my dissertation project involved three phases aimed at examining women's sexual self-views. Phase 1 began the investigation of women's sexual self-views through individual qualitative interviews. Phase 2 focused on the development of a valid instrument intended to tap the construct of women's sexual self-views, and examined it's association to potentially relevant variables, including sexual functioning status. The aim of Phase 3 was to investigate the relationship between women's sexual self-views and memories for sexual information.

5.2 Combining Qualitative and Quantitative Research Methodologies

Although qualitative and quantitative research methods are often positioned in opposition to each other, the aim of the present study was to demonstrate the utility of synergistically combining the two methods in the context of understanding women's sexual self-views. The debate on the importance and/or value, validity, and potential integration of qualitative and quantitative research paradigms has been ongoing for many years in the psychological literature (e.g., Cook & Reichardt, 1979; Jayaratne & Stewart, 1991; Tolman & Szalacha, 1999). Despite the ongoing discussion, a substantial amount of research combining qualitative and quantitative research methods has been conducted. This has been featured across many disciplines, including education (e.g., Goldfarb,

1995), epidemiology (e.g., Groenvold, Klee, Sprangers & Aaronson, 1997), sociology (e.g., Kaariainen, 1990), public health research (e.g., Fredrickson, Molgaard, Dismuke, Schukman, & Walling, 2004), chronic pain research (e.g., Laerum, Indahl & Skouen, 2006), medicine (e.g., Liu et al., 1998), AIDS research (e.g., Giami & Schiltz, 1996), substance abuse (e.g., Riehman, Bluthenthal, Juvonen, & Morral, 2003), and psychology (e.g., Bohanec, Urh, & Rajkovic, 1992; Debats & Drost, 1995). In Janet Shipley Hyde's article, "The Next Decade of Sexual Sciences: Synergy from Advances in Related Science" (2001), she states that "the most progress will be made by sex researchers who integrate qualitative and quantitative methods." Following Hyde's suggestion, several recent publications in the area of female sexuality have begun to use a combined qualitative and quantitative approach (e.g., Brehob, 2006; Greenberg, 2005; Kerr & Mathey, 2007; Milhausen, Reece, & Perera, 2006; McCall & Meston, 2006).

Phases 1 and 2 of this dissertation study employed an integrated design combining both qualitative and quantitative methods in a sequential approach. That is, Phase 1 involved an initial exploratory study in which qualitative interviews were conducted to explore how women define and/or describe their sexual self-views. Phases 2 and 3 utilized more quantitative methods; thus giving rise to the formulation of an instrument of women's sexual self-views and subsequently examining it in relation to memory for sexual information. Phases 1, 2 and 3 are discussed in greater detail in the following sections of this Chapter.

5.3 Discussion of Phases 1 and 2: Development of the Women's Sexual Self-View(WSSV) Scale derived from Qualitative Data

The aim of Phases 1 and 2 of this dissertation study was to develop a comprehensive, multifaceted, valid, and reliable self-report measure of women's sexual self-views. Phase 1 involved the initial generation of items based on individual qualitative interviews with 32 women from varying demographic backgrounds. Specifically, interviews involved an open-ended exploration of how women define themselves as sexual beings. To view a list of questions posed by the female researcher during interviews to elicit responses from female participants reflecting sexual selfviews, see the Methods section (Pages 30-31) and Appendix F. An initial list of 303 items was generated based on reductive coding of the individual interview transcripts. The 303 items (see Appendix I) were listed using a traditional questionnaire format with each item presented as a brief self-descriptive statement in which women responded to the following prompt: "When I think of myself as a sexual person, the following description describes me." Phase 2 involved the administration of this initial version of the Women's Sexual Self-View (WSSV) scale to 2,058 women. Data from this sample were submitted to an initial exploratory factor analysis, as well as a follow-up confirmatory factor analysis. The results of these two separate factor analyses provided support for three discrete factors highlighting both positively and negatively valenced sexual self-views. Additional factor analyses exploring potential subfactors within each of these three factors further delineated content distinctions of internal/affective, external/ behavioral, and relational components of women's sexual self-views. Thus, it was determined that

the assessment of women's sexual self-views utilizing the WSSV scale provides for a multidimensional conceptualization which incorporates behavioral, cognitive, emotional, and trait adjectives reflective of the different ways in which women view themselves in a sexual context.

Factor Analyses revealed that Factor 1 of the WSSV scale did not contain specific subfactors indicating that the 12 items included in this domain represented a single theme of women's sexual self-views. All 12 items in this factor were positively valenced, and therefore, this factor was appropriately labeled as Positive Sexual Self-Views. The items within this factor reflect a woman who likely possesses a positive orientation to her own sexuality. That is, a woman with an inclination to experience self-reflective positive emotions and cognitions in sexual contexts. A woman who endorses the items of the WSSV scale representing Positive Sexual Self-Views sees herself as a "confident" and "sexually-functional" individual who demonstrates an "open and receptive" attitude toward sexual experiences. Additionally, the 12 items within this factor reflect both interpersonal (i.e., "I am engaging and involved in sexual situations") and intrapersonal (i.e., "I am comfortable with myself as a sexual person") characteristics implicated in a woman's conceptualization of her sexual self.

Two subfactors emerged from subsequent factor analyses of the items within the second factor of the WSSV scale, thus highlighting separate clusters within this domain. More specifically, the first subfactor included six items which were negative in valence and reflected internal feelings and/or affective states, and was therefore, appropriately labeled as Negative Internal/ Affective Sexual Self-Views. The second subfactor included

five items which were also generally negative in valence and reflected external behaviors, and was therefore, appropriately labeled as Negative External/Behavioral Sexual Self-Views. Both of these factors reflect a woman who reports more negative associations to herself as sexual person. Interestingly, the items within the domain of Negative Internal/Affective Sexual Self-Views reflect intrapersonal thoughts/feelings (i.e., "I feel disconnected or distracted") indicative of a woman who experiences psychological distress in response to feeling sexual; whereas the items within the domain of Negative External/Behavioral Sexual Self-Views reflect a more interpersonal process involved in one's sexual self-views (i.e., "I am often aggressive or forceful in sexual situations").

Two subfactors emerged from subsequent factor analyses of the items within the third factor of the WSSV scale, thus highlighting separate clusters within this domain. More specifically, the first subfactor included six items which generally reflected relational or interpersonal interactions, and was therefore, appropriately labeled as Interpersonally-Relevant Sexual Self-Views. This factor reflects a woman with a highly-relational emphasis implicated in her sexual self-views. The emergence of this factor fits within the conceptual framework of theories which posit that a woman's "sense of personhood" is often grounded in her relationships with others (Miller, 1986). The second subfactor included five items which generally reflected a more reserved or conservative approach to sexuality, and was therefore, appropriately labeled as Conservative Sexual Self-Views. The items within this factor reflect a woman who possesses a more controlled, and thus less permissive approach to sexuality. The items within both the Interpersonally-Relevant and Conservative Sexual Self-Views domains

could be interpreted as reflective of traditional feminine stereotypes. That is, a woman who endorses these sexual self-views may have adopted a more traditional sex-role orientation, in which women are expected to demonstrate characteristics such as being nurturing and accommodating, as well as being "respectable" by playing the role of the "limit setting" for sexual interactions with their partners (Lips, 1981; Safilios-Rothschild, 1977).

Given the abundance of research which demonstrates a relationship between sexual functioning and/or behavior, and a woman's body image (e.g., Daniluk, 1993), it was not surprising that items reflecting body image emerged from the transcripts of Phase 1 qualitative interviews and were included on the initial 303-item version of the WSSV scale (e.g., "I am skinny," "I am comfortable with my body," and "I am pretty). However, when the responses of the 2,058 female participants from Phase 2 were submitted to two separate factor analyses, items which specifically reflected body image did not significantly load on the 3 factors of the WSSV scale. Further, a follow-up inspection of the factor analysis data and results did not indicate any additional factors with eigenvalues exceeding a value of one which included items reflecting "body-image" relevant concerns. These findings are consistent with studies by Reissing, Laliberte, and Davis (2005) and Wiederman and Hurst (1997). These studies found that women's sexual self-schemas (using Andersen and Cyranowski's SSSS, 1994) were unrelated to women's body attitudes (Reissing, Laliberte, & Davis, 2005) and general body dissatisfaction (Wiederman & Hurst, 1994). Future studies investigating the relationship between the different factors of the WSSV scale and validated measures of body image (e.g., Body

Attitudes Questionnaire (BAQ); Story, 1998) may add to the understanding of the relationship between body image and women's sexual self-views.

Psychometric evaluation of the WSSV scale provided preliminary evidence of both reliability and validity. Separate values representing the different domains of the WSSV scale (i.e., Positive Sexual Self-Views, Negative Internal/ Affective Sexual Self-Views, Negative External/ Behavioral Sexual Self-Views, Interpersonally-Relevant Sexual Self-Views, and Conservative Sexual Self-Views) were scored by computing the average value of the responses to constituent items assigned to each factor. As expected, there was a significant inverse correlation (i.e., negative relationship) between the Positive Sexual Self-Views domain and the Negative Internal/ Affective Sexual Self-Views domain (r = -.41). Also noteworthy, the Interpersonally-Relevant Sexual Self-Views domain was significantly correlated with the Positive Sexual Self-Views domain (r = .62). This relationship is not surprising given that most of the items within the Interpersonally-Relevant domain are generally positive in nature. Results from reliability analyses indicated high Cronbach's coefficient alphas for all of the domains represented by the WSSV scale (i.e., range .71- .93; see Results, Page 65); thereby confirming that the constituent items within each factor represent a specific theme of women's sexual self-views.

The WSSV scale was examined it in relation to Andersen and Cyranowski's (1994) Sexual Self-Schema Scale (SSSS) and Young's Schema Questionnaire (YSQ-S; 1998). Specifically, convergent validity was assessed by calculating relations between the different domains of the WSSV scale and the SSSS. Correlational results indicated that,

although the two scales are related, they clearly do not measure the same construct (range in Pearson's correlation coefficients = 0.05 to 0.69; see Results, Pages 68-69). Most notably, the Positive Sexual Self-Views domain of the WSSV scale showed a strong positive relationship with the Romantic/ Passionate Self-Schemas domain of the SSSS, r = .69; and a strong negative relationship with the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS, r = -.59. Additionally, the Negative External/Behavioral Sexual Self-Views domain of the WSSV scale and the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS showed a negative correlation, r = -.52. This relationship seems somewhat intuitive, as it is likely that women who experience embarrassment and/or conservatism regarding sexuality are less likely to engage in activities such as promiscuity or risky sexual behavior (which is represented by the Negative External/ Behavioral domain of the WSSV). As anticipated, the Conservative Sexual Self-Views domain of the WSSV scale and the Embarrassed/ Conservative Sexual Self-Schemas domain of the SSSS showed a significant correlation as well (r = .41). It is important to note that some of the components of women's sexual self-views tapped by the WSSV scale overlap with specific items of the existing SSSS. For example, although the SSSS includes only a list of trait adjectives (see Appendix 1), as opposed to a list of descriptive statements as in the WSSV scale; both assessment tools do include the terms "experienced" and "uninhibited." Despite this, I feel that the WSSV scale complements and expands upon Anderson and Cyranowski's (1994) existing SSSS by tapping other important aspects of women's sexual self-views, such as Interpersonally-Relevant Sexual Self-Views. Additionally, the WSSV scale has a broader range of negatively valenced

opposed to the SSSS's single negative factor of Embarrassment/ Conservatism. Another way in which the WSSV scale expands upon Andersen and Cyranowski's SSSS (1994) is that the list of descriptive statement includes not only trait adjectives, but also specific emotions, behaviors, and cognitions involved in women's sexual self-views. Lastly, the WSSV scale provides for an overt measure of a women's sexual self (i.e., the instructional prompt included in the WSSV scale specifically asks women about their sexual self-views, as opposed the instructional prompt included in the SSSS which asks about more general self-views). Further research is needed to provide empirical support establishing that the WSSV scale does, in fact, add to the ability to assess women's sexual self-views beyond existing tools.

In an attempt to provide initial information regarding the divergent validity of the WSSV scale, I examined it in relation to general maladaptive schemas. This was done by computing correlational coefficients for the different domains of the WSSV scale and Young's Schema Questionnaire (YSQ-S; Young, 1998). Correlational results indicated Pearson's correlation coefficients ranging from r = 0.01 to r = 0.42 (see Results, Pages 69-70). Interestingly, the Negative Internal/ Affective Sexual Self-Views domain of the WSSV scale reflected positive relationship with all of the domains of the YSQ-S, and the Negative External/ Behavioral Sexual Self-Views domain of the WSSV scale reflected positive relationships with most of the domains of the YSQ-S. Conversely, the Positive Sexual Self-View domain of the WSSV scale reflected a negative relationship with most of the domains of the YSQ-S. Given that the YSQ-S is a face-valid and "problem-

focused" scale intended to tap maladaptive schemas, it makes sense that it would have a positive correlation with more negatively valenced sexual self-views, and a negative correlation with more positively valenced sexual self-views.

Results examining the ability of the WSSV scale to differentiate between women with and without sexual problems were mixed across the different domains. That is, women with sexual difficulties indicated significantly lower values for the Positive Sexual Self-Views domain and significantly higher values for the Negative Internal/Affective Sexual Self-Views domain as compared to sexually healthy controls. The Negative External/ Behavioral Sexual Self-Views, the Interpersonally-Relevant Sexual Self-Views, and the Conservative Sexual Self-Views domains did not significantly differentiate between women with sexual difficulties and sexually healthy controls. However, it is worth noting that for all the domains of the WSSV scale, women with sexual difficulties had lower scores within the Positive, Interpersonally-Relevant, and Conservative Sexual Self-Views domain and higher scores within the Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views domain. Conversely, sexually healthy controls had higher scores within the Positive, Interpersonally-Relevant, and Conservative Sexual Self-Views domain and lower scores within the Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views domain.

The finding that women with sexual difficulties scored lower on the Positive Sexual Self-Views domain as compared to sexually healthy controls is consistent with findings reporting more sexual arousability, less sexual anxiety, and more positive

attitudes toward sex in women with more positive sexual self-schemas (Rushton, 2003). Given that the semantic representation of Positive Sexual Self-Views on the WSSV scale depicts a woman who indicates a behavioral and attitudinal openness to sexual experiences, associates positive affect, and feels confident in regard to her sexual self-views, it makes sense that sexually healthy controls would indicate higher values as compared to women with sexual difficulties for this domain of the WSSV scale.

Additionally, one would expect that individuals with sexual difficulties would certainly endorse lower values for the item included in this factor which specifically states "I am healthy and feel sexually functional" as compared to sexually healthy controls. Further, the finding that sexually healthy controls had higher scores for Positive Sexual Self-Views is consistent with evidence from the literature that a positive approach to sexuality (e.g., Barlow, 1986), as well as a certain level of receptivity and/or openness (Andersen, Cyranowski, & Espindle, 1999) play a role in one's overall level of sexual functioning.

The finding that women with sexual difficulties scored higher on the Negative Internal/ Affective Sexual Self-Views domain is consistent with findings of more negative sexual self-schemas in women experiencing sexual problems following cancer treatment (Andersen, Woods, & Copeland, 1997) and in women with sexual pain disorders (Gates, 2001; Reissing, Binik, Khalife, Cohen, & Amsel, 2003) as compared to healthy controls. The Negative Internal/ Affective Sexual Self-Views domain of the WSSV scale reflects a pattern of distressing cognitions and emotions related to feeling sexual. That is, in this pattern, women's sense of themselves as sexual beings is related to negative cognitions and affect. Although the finding that women with sexual difficulties

are more likely to indicate Negative Internal/ Affective Sexual Self-Views does not prove causality, one can certainly hypothesize on the sequence of psychological events which result in this relationship. That is, a self-exacerbating cycle encompassing such negative worries and emotions could negatively impact sexual functioning in several ways. For example, it could result in a subsequent decrease in sexual desire and/or interest, as well as the occurrence of interfering thoughts during sexual activity. Following this logic, these "self-negative" cognitions likely interfere with a woman's ability to "let go" in sexual scenarios, thereby inhibiting her ability to experience pleasure and/or enjoyment during sexual situations. Further research is needed to more closely examine the sequence of psychological events which occur in women experiencing sexual difficulties who endorse these negative sexual self-views. It is possible that negative sexual self-views may be a proximate cause relating to the development and/or maintenance of sexual difficulties. Alternatively, it is also a possibility that negative sexual self-views may be a result of a women's sexual dysfunction. An interesting idea for future research would be to employ a longitudinal prospective approach by administering the WSSV scale to women throughout the course of therapy for sexual difficulties. This would allow for an examination as to whether a therapeutic approach which aims to reconstruct a women's negative self-views may lead to changes in her sexual functioning status. This approach would be in line with Beck's (e.g., 1976) early theories of psychopathology suggesting that diagnostic conditions are characterized by habitual ways of thinking about one's self, and that these self-relevant negative schemas maintain a person's vulnerability to the condition. For example, patients with anxiety diagnoses might have schemas reflecting

threat and injury, whereas depressed patients might have schemas reflecting concerns of failure or rejection. Relevant to the present study and ideas for future research undertakings, it is possible that more negatively valenced sexual self-views provide a certain vulnerability resulting in subsequent sexual difficulties for women.

Although the Positive Sexual Self-Views and the Negative Internal/ Affective Sexual Self-Views domains of the WSSV did significantly differentiate between sexually healthy controls and women with sexual difficulties; women from these two groups did not differentially endorse Negative External/Behavioral Sexual Self-Views, Interpersonally-Relevant Sexual Self-Views, or Conservative Sexual Self-Views. One possible explanation for these null findings could be that these types of self-views are less important in determining a woman's sexual functioning status, and may be more implicated in other relevant domains, such as behaviors within romantic relationships and general attitudes regarding sexuality. This explanation is consistent with the position that the different perceptions an individual has about oneself are not all at the same level of "importance" (Allport, 1955; Combs & Snygg, 1959; Gordon, 1968; James, 1890; Marsh, 1986). That is, some facets are "very important and vital, while others are less important or even secondary within the whole *gestalt* which constitutes one's self-concept" (Marsh & Shavelson, 1985). These null findings could also be explained in relation to research examining differences in an individual's actual self-views and ideal self-views (e.g., Katz & Farrow, 2000). Results from these studies indicate that significant discrepancies between one's actual self-views and ideal self-views can lead to emotional distress. Drawing this into the present discussion, it is possible that the extent of differences

between a woman's actual sexual self-view and ideal sexual self in the domains of Negative External/ Behavioral Sexual Self-Views, Interpersonally-Relevant Sexual Self-Views, or Conservative Sexual Self-Views may be a greater predictor of a woman's overall sexual functioning.

A secondary analysis was conducted to examine whether specific individual characteristics of the women in our sample predicted WSSV domain scores. To begin examining potential predictors of how women scored on the different factors of the WSSV scale, hierarchical linear regression analyses were conducted for each domain of the WSSV scale. Three categories of predictors were examined: (1): Sexual Functioning Status; (2) Relationship Status; and (3) Demographic Variables, including age, educational background, and having children.

Factors which did predict scores on the WSSV scale included sexual functioning status and relationship status. Specifically, women with higher levels of sexual difficulties had lower Positive Sexual Self-Views and higher Negative Internal/ Affective Sexual Self-Views as compared to sexually healthy controls. Sexual functioning status did not predict Negative External/ Behavioral, Interpersonally-Relevant, and Conservative Sexual Self-Views. These findings are consistent with the discriminant validity analyses discussed above and in the Results chapter (see Pages 72-74).

Relationship status was related to Negative Internal/ Affective, Negative External/ Behavioral, and Conservative Sexual Self-Views. Specifically, women who indicated current involvement in a committed relationship had lower Negative Internal/ Affective Sexual Self-Views as compared to women who were single (i.e., "not dating" and "casual").

dating"). Women who indicated that they were "single, not dating" had higher scores on the Conservative Sexual Self-Views domain as compared to women who were "casually dating" or "in a relationship." A possible explanation for this finding is that a more conservative or reserved approach to sexuality could impose limitations on the potential of a woman's sexual expression, thereby resulting in a decreased likelihood of engaging in romantic relationships (i.e., casually dating or committed relationships). This would be consistent with Cyranowski's (1997) suggestion that one's self-views are "powerful regulators" of behavioral responding, as well as Andersen and Cyranowski's (1994) finding that more conservative sexual self-schemas were a deterrent to sexual and/or romantic behaviors. Additionally, women who indicated that they were "single, not dating" also had lower scores on the Negative External/Behavioral Sexual Self-Views domain as compared to women who were "casually dating" or "in a relationship." This finding could be related to the likelihood that women who indicate that they are "single, not dating" are involved in a relatively lower number of scenarios involving sexual activity as compared to women indicate their relationship status as "casually dating" or "in a relationship."

A women's age, having children and educational background did not predict scores on any of the domains of the WSSV scale. These finding are inconsistent with past research suggesting that having children (e.g., Daniluk, 1993) and age (e.g., Rushton, 2003) are linked to women's sexual self-views. One potential explanation for these discrepant findings could be related to a restricted range in our sample. In our sample, only about 6% of the women reported having children. It is possible that a larger

representation of women with children in our sample might have increased our understanding of differences in sexual self-views for women with and without children. Additionally, although the age range for women in our sample was from 18-60 years old, the mean age for women was 32 years which could be considered relatively young within the span of a woman's sexual development. Based on research indicating that significant changes occur in a women's self-concept (e.g., Nehrke, Hulicka, & Morganti; 1980) and in sexual functioning and behavior (e.g., Dello Buono et al., 1998) after age 60, it is possible that had we recruited women over the age of 60, we might have found agerelated differences in sexual self-views. Another point worth considering is related to the possible limitation of the methodology I employed to examine the relationship between age and sexual self-views. Specifically, although my sample included women ranging from age 18 to 60 years, it is possible that a more longitudinal approach which would allow for an examination of within-subject changes in sexual self-views might be more informative regarding age-related differences in self-views. In his book, Leahy (2003) states that "self-schemas are idiosyncratic," and that a longitudinal within-subject approach (as opposed to cross-sectional between-subject comparisons) is more likely to demonstrate or reflect shifting conceptualizations in one's self-views.

5.3.1 Discussion of the Limitations and Conclusions Drawn from Phases 1 and 2

Although I feel that qualitatively-driven assessment tools are particularly important in sexuality research and practice, it is also important to note the difficulty in "wholly" representing the women who participated in the Phase 1 individual qualitative

interviews of my dissertation research. After all 32 interviews were transcribed, I was faced with the task of coding almost 360 pages of interview transcripts. One of my challenges was to accurately reflect the complexity noted in these transcripts, as the use of reductive coding clearly can not capture the richness and/or nuances of each woman's responses to the interview questions.

A possible limitation of this dissertation research worth mention is that the sample of women used to investigate the relationship between the WSSV scale and sexual functioning status were not a true clinical sample. That is, sexual functioning status was determined based on the scores derived from the Female Sexual Function Index (FSFI; Rosen et al., 2000). Wiegel et al. (2005) established clinical cut-off scores for the FSFI Total Scores to classify women as sexually dysfunctional. Using these proposed cut-off scores in my data set, 102 women were categorized as sexually functional controls and 176 women were categorized as having sexual difficulties or concerns. Multivariate ANOVAS verified significant differences in FSFI domain and total scores between women with sexual difficulties and sexually healthy controls. That is, women categorized as having sexual difficulties reported lower levels of sexual desire, more difficulties with arousal, lubrication, and/or orgasm, lower levels of sexual satisfaction, and a higher frequency of pain associated with sexual activity as compared to women categorized as sexually healthy controls. Although these findings provide strong evidence supporting group differences in sexual functioning status, future studies investigating the role of women's sexual self-views should consider conducting DSM-IV-based clinical interviews to more effectively identify women with sexual dysfunction.

Another possible limitation is the absence of an analysis of test-retest reliability of the WSSV scale. Test-retest reliability can provide information about the stability of results over time (i.e., is a test reliable over time?). However, given the nature of data collection in Phase 2 of this dissertation research (i.e., online recruitment, anonymity of the female respondents), collecting retest data would have been difficult. Further, given that women's sexual self-views are likely impacted by several factors (e.g., relationship status, life circumstances), it is expected that they might change or shift over time. One of the limitations of test-retest reliability can be related to the nature of a given test. That is, if you are examining a test in which "growth or development are expected," although this test may in fact be very reliable, test-retest data would not accurately reflect this (Salkind, 2006). Analysis of Cronbach's coefficient alphas in the present study did demonstrate good internal reliability of the factors of the WSSV scale (range = 0.71 - 0.93).

Given that a large number of the female participants from Phase 2 were recruited via the internet and completed web-based questionnaires, a discussion of the validity of this data is certainly relevant. The growth of the internet and the exponential use of it during the past 15 years has provided for a wealth of new research opportunities. Not surprisingly, these opportunities have not come without skepticism and/or criticism.

Based on the speculation regarding the validity of conducting web-based studies,

Gosling, Vazire, Srivastava, and John (2004) conducted a study to empirically test the quality of data collected online. In this study, they evaluated established preconceptions regarding online data by comparing a large sample of internet respondents (N = 361,703) with 510 published studies which used more traditional samples (i.e., paper and pencil

methods). In general, Gosling and colleagues (2004) purported that the potential benefits of online data collection outweighed the limitations and/or concerns related to web-based designs. In my dissertation research, the efficiency of online data collection offered many practical benefits, including being relatively inexpensive and eliminating the need for data entry (and the subsequent concerns and/or errors involved with this).

Another incentive to utilizing the internet for data collection is that it allows researchers to obtain sample sizes that far exceed those obtained from more traditional approaches (Gosling et al., 2004). That was particularly true in the case of my dissertation research, as I was able to recruit 2,058 women to complete the online measures in a relatively short period of time (i.e., 5 months). Additionally, internet samples provide access to participants across geographic boundaries (Schmidt, 1997). Of the 2,058 women recruited online during Phase 2 of my study, 51.90% reported living in the southern United States, 17.15% reported living in the western United States, 14.72% reported living in the midwestern United States, 14.67% reported living in the northeastern United States, and 1.55% reported living outside of the United States. The opportunity to draw from women across the different regions of the United States likely increases the generalizability of my findings, particularly more so than had my sample included only women within the local Austin area.

Another concern with online data collection is regarding the validity of data gathered in this format. That is, whether this data is affected by "non-serious" responses (e.g. Azar, 2000; Buchanan, 2000) or the possibility that individuals might complete the questionnaire multiple times (Buchanan, 2000; Johnson, 2001). Following Johnson's

(2001) suggestions for screening for such concerns, online data collection was periodically (i.e., weekly) monitored in the present study. That is, the principal investigator downloaded the online responses each week and screened for participants who did not meet inclusion criteria (i.e., males) or who seemed to provide "non-serious" responses. Specifically, each online submission was screened for markers of "non-serious" responsiveness, including long strings of identical responses and/or large gaps within an individual response set. As suggested by Gosling et al. (2004), another strategy that I employed was the inclusion of a question at the beginning of the study (following the presentation of the cover page) in which participants were asked if they had completed the questionnaire before. If an online submission appeared to be a "non-serious" response or a participant indicated that they had previously completed the questionnaires, this data was eliminated from all further analyses.

One last consideration regarding online data collection is that this data may be affected by the anonymity of participants (e.g., Skitka & Sargis, 2005). That is, respondents may feel more comfortable disclosing personal information in online questionnaires as compared to "a less anonymous setting," such as a research laboratory (Levine, Ancill, & Roberts, 1989; Locke & Gilbert, 1995). Consistent with this, previous studies have found that participants are less likely to engage in socially desirable responding and survey satisficing when responding to web questionnaires as compared to telephone interviews (Chang & Krosnick, 2003) and paper-and-pencil questionnaires (Kiesler & Sproull, 1986; Richman, Kiesler, Weisband, & Drasgow, 1999). Additionally, reporting of stigmatized behaviors (i.e., drug use and sexual activity) has been shown to

increase as anonymity increases (Turner et al., 1998). This potential benefit of using webbased questionnaires is particularly relevant to the present study, as how a woman views herself as a sexual person is likely to be a private and personal manner for many women.

5.4 Discussion of Phase 3: Investigating the Role of Women's Sexual Self-Views in Memory for Sexually-Relevant Information

Phase 3 of this dissertation research was conducted in an attempt to investigate the relationship between women's sexual self-views and memory for sexually relevant information. Additionally, Phase 3 included an examination of other potential predictors of memory for sexual information, including sexual functioning status, sexual experience, and responses to sexual stimuli. To my knowledge, few studies have examined individual differences in memory for sexual information and no published studies have investigated the relationship between sexual self-views and memory for sexually-relevant information.

141 female participants completed recognition memory tasks in response to reading sexual stories intended to represent the three factors of the WSSV scale; Factor 1: Positive Sexual Self-Views, Factor 2: Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views, and Factor 3: Interpersonally-Relevant and Conservative Sexual Self-Views. I hypothesized that women would be more likely to remember information from the sexual stories that was consistent with their own sexual self-views. In order to examine potential predictors of how women performed on multiple choice memory tasks in Phase 3, hierarchical linear regression analyses were conducted for each Story (i.e., Story 1, 2, and 3). Three categories of predictors were examined: (1):

Women's Sexual Self-Views (i.e., corresponding factor from the WSSV Scale); (2) Reactions to the Story (i.e., reported positive affect, negative affect, and subjective sexual arousal data during each story); and (3) Sexuality Variables (i.e., sexual experience and sexual functioning). Sexual experience was represented by the Total Score obtained from the Phase 3 Sexual Experience Scale and sexual functioning was obtained from the Total Score of the Female Sexual Function Index (FSFI, Rosen et al., 2000).

Consistent with my hypotheses, Factors 1 and 2 of the WSSV scale significantly predicted performance on memory tasks in response to sexual stories consistent with these self-views. That is, women with higher Positive Sexual Self-Views performed better on memory tasks regarding a sexual story intended to depict a woman with positive sexual self-views; whereas women with higher Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views performed better on memory tasks regarding a sexual story intended to depict a woman with these negative sexual self-views. These findings are congruent with theories suggesting that the processing of information, both encoding and retrieval, is facilitated by one's self-views (e.g., Fiske & Taylor, 1984; Taylor & Crocker, 1981). That is, information which is deemed self-relevant is more likely to be processed and/or remembered with greater efficiency than information which is not considered self-relevant (e.g., Markus, Crane, Berstein, & Silada, 1982; Markus & Smith, 1981). These findings can also be considered in the context of the literature on the self-reference effect (Kihlstrom, Beer, & Klein, 2003; Kuiper & Derry, 1981; Rogers, Kuiper, & Kirker, 1977; Rogers, 1981). This effect refers to people showing superior memory for information that pertains to their unique self-views. Very similar to the

methodology and findings of the present research, Rogers, Kuiper, and Kirker (1977) found that participants evidenced greater recall for adjectives deemed to be self-descriptive.

Inconsistent with my hypotheses and the research discussed in the preceding paragraph, Factor 3 of the WSSV scale did not significantly predict performance on memory tasks in response to a sexual story consistent with these self-views. That is, participant's scores within the domains of Interpersonally-Relevant Sexual Self-Views and Conservative Sexual Self-Views were not associated with performance on memory tasks for Story 3 (which was intended to reflect a woman with these self-views). It is possible that this could be because Story 3 did not accurately reflect these domains of the WSSV scale. However, given that many of the exact words and/or phrases included in the items of these domains were included in Story 3, and that eleven coders reached unanimous agreement in correctly matching this story to the factors of the WSSV scale that it was intended to represent, this likely was not the case. Another possible explanation for these null findings could be related to the fact that the factors of the WSSV scale represented in Story 3 (i.e., Interpersonally-Relevant Sexual Self-Views and Conservative Sexual Self-Views) are not as clearly positively or negatively valenced in comparison to the factors represented by Story 1 (i.e., Positive Sexual Self-Views) or Story 2 (i.e., Negative Internal/ Affective and Negative External/ Behavioral Sexual Self-Views). Consistent with this logic, Lewis, Gibbons, and Gerrard (1986) suggested that sexual information which contains an affective or emotional component is likely more

"salient" for participants and facilitates performance on memory tasks in response to this type of information.

A woman's reactions to the stories (i.e., reported positive affect, negative affect, and subjective sexual arousal data during each story) and the sexuality variables included in our model (i.e., sexual experience and sexual functioning) did not predict memory performance on any of the Sexual Stories representing the different domains of the WSSV scale. These findings are inconsistent with research that has found an effect of arousal and/or affect on subsequent memory performance (e.g., Libkumen, Stabler, & Otani, 2004), however are consistent with findings from McCall, Rellini, Seal, and Meston (2007) in which the variables derived from the Story Scale were not related to performance on memory tasks in response to sexual-relevant stimuli. Given these null findings, one could assume that differences in the memory across the 3 sexual stories likely occurred independently of a participant's affective or emotional reactions to the stories. Additionally, sexual functioning status (i.e., FSFI Total Scores) was not related to performance on memory tasks. These findings are inconsistent with findings from McCall, Rellini, Seal, and Meston (2007) in which sexual functioning scores were related to performance on sexually-relevant memory tasks. A possible explanation for these discrepant findings could be related to a restricted range in my sample. In my Phase 3 sample, the variability of sexual functioning scores (as assessed by the FSFI Total Score; range: 10.60-35.00, mean: 22.51) were relatively low in comparison to those reported by other studies. For example, Wiegel et al. (2005) reported a mean value of 30.75 (SD = 4.80) for FSFI Total Scores in a sample of 244 sexually healthy controls. This low range

in variability is most likely attributable to the young age of my sample and could have impacted the results. Lastly, sexual experience (i.e., as assessed by the Phase 3 Sexual Experience Scale Total Score) was not related to performance on memory tasks in Phase 3 of this dissertation research. This is consistent with findings from McCall et al. (2007) in which sexual experience was not related to memory performance. Interestingly, however, McCall et al. found that frequency of sexual activity (i.e., sexual intercourse) was related to performance on sexually-relevant memory tasks. Although I did not collect information on the frequency of sexual activity in Phase 3 participants, it is possible that this could have been related to memory performance. The lack of a significant relationship between sexual experience and memory performance in Phase 3 of my dissertation research is in contrast with Lewis, Gibbons, and Gerrard's research (1986) which found that increased sexual experience was related to better performance on memory tasks involving sexual content. In this study, Lewis, Gibbons, and Gerrard (1986) utilized the Sexual Experience Questionnaire (SEQ; Gerrard & Gibbons, 1982), a 7-item scale that asks subjects to indicate the amount of experience that they have with specific sexual activities (e.g., premarital sex, heavy petting, viewing pornography, etc.). Using median split classifications, they labeled their participants as having either "high sexual experience" or "low sexual experience." 2 (high sexual experience vs. low sexual experience) X 2 (sexual vs. non-sexual recall performance) ANOVAs revealed significant group differences in the recall of sexual information, however no group differences were found for non-sexual information, such that participants in the "high sexual experience" group performed better on memory tasks containing sexual

information. Examining the relationship between sexual experience and sexually-relevant memory performance using this approach is somewhat in contrast to my dissertation study. That is, my aim wasn't necessarily to examine whether sexual experience predicted performance on sexual versus non-sexual task memory tasks, but more specifically whether sexual experience was implicated in performance of memory tasks for schema-consistent sexual information. One final consideration worth noting is that it is possible that the measure I used to assess sexual experience (i.e., an abbreviated form of the Derogatis Sexual Experience Scale; Derogatis & Melisaratos, 1979) was not an adequate measure of sexual experience in the Phase 3 sample of female participants. That is, the Phase 3 Sexual Experience Questionnaire may not have been sensitive enough to detect differences in participant's sexual experience as related to performance on memory tasks.

5.4.1 Discussion of the Limitations and Conclusions Drawn from Phase 3

A potential limitation of Phase 3 of this dissertation study is that demand characteristics could have played a role in participant's performance of recognition memory tasks. Once participants were oriented to the study, it was likely obvious that sexuality was a main focus of the experimenter's interest and this might have affected participant's responses. Social desirability could have impacted participant's responses in that the degree to which each participant found the information "socially appropriate" could have impacted how information regarding the sexual story was processed, the amount of rehearsal, and the likelihood of subsequent reporting during recognition tasks.

Another potential limitation of Phase 3 is the lack of a "control condition" in the investigation of the WSSV scale and memory for sexual information. The methodology of this phase involved female participants reading 3 sexual stories that reflected the different factors of the WSSV scale. That is, Story 1 was written to depict a sexual situation involving a woman with Positive Sexual Self-Views, Story 2 was written to represent to depict a sexual situation involving a woman with Negative Sexual Self-Views, and Story 3 was written to represent both Interpersonally-Relevant and Conservative Sexual Self-Views. Modifying the methodology in an attempt to address the relative lack of a "control condition" might have been to have participants read an additional story that did not include sexual content. A story of this nature would have allowed for an examination of the role of the WSSV scale and performance on memory tasks while controlling for the sexual content/nature of the story stimuli.

Despite these limitations, I believe that the results from the present study add to the literature investigating predictors of differences in memory for sexual information and provides initial information on the cognitive patterns of women with differing sexual self-views. That is, the significant findings that sexual self-views predicted memory performance on Stories 1 and 2 provided preliminary evidence for my Phase 3 hypotheses, which were based on research indicating that individuals show greater memory for information which is consistent with their self-schemas or self-views (e.g., Epstein, 1973; Marcia, 1966). Given that models of sexual functioning clearly rely on what an individual remembers about previous sexual scenarios, it would seem fruitful to understand individual differences in memory for sexual information and how these might

influence sexual behavior, as well as other potentially relevant factors (e.g., behaviors within intimate relationships). By utilizing the memory bias paradigm, the current study demonstrates the value of using methodologies derived from cognitive research to increase the understanding of female sexuality.

5.5 Final Conclusions and Future Directions

Many researchers have proposed that the "self" is multi-faceted (e.g. Carver & Scheier, 1981) and comprised of differing self-views within various domains of social knowledge depending upon the situation that an individual is in. Given that each aspect of the self most likely contains its own unique and separate elements, it is important to study each facet of the self with an idiosyncratic and distinct approach and method of study. Considering that sexual scenarios most likely represent a specific and salient aspect of one's life, the present research aimed to explore and understand differing sexual self-views in women.

The findings of the current research have many important clinical implications.

First, use of the WSSV scale can provide a well-delineated profile of women's sexual self-views. Therefore, clinicians and women with sexual concerns could use the WSSV scale to understand the cognitive and affective underpinnings of their sexual self-views. Given that the present research provided evidence of a significant relationship between both Positive Sexual Self-Views and Negative Internal/ Affective Sexual Self-Views with sexual functioning status, understanding these cognitive and affective views could potentially provide information regarding the sources of a woman's sexual difficulties.

Using this rationale, use of the WSSV scale in the rapeutic settings could prove beneficial by helping to identify negative sexual self-views which potentially contribute to the development and/or maintenance of sexual problems. That is, based on evidence which suggests a link between self-views and behavior (e.g., Markus, 1977) and models of sexual functioning which incorporate cognitive and affective components (e.g., Barlow, 1986), examining women's sexual self-views within a cognitive-behavioral framework would seem appropriate. To date, the use of a cognitive-behavioral approach has proven productive in sex therapy and research (e.g., Bass, 1985; Bergeron & Lord, 2003; Carey, 1998; Kaplan, 1979; McCabe, 2001; ter Kuile, van Lankveld, de Groot, Melles, Neffs, & Zandbergen, 2007; Wincze & Carey, 1991). The information derived from the WSSV scale could provide a starting point for patients and clinicians to identify specific areas to target in attempting to modify sexually-relevant cognitions. Thus, use of the WSSV scale could be used to develop tailored intervention plans for women seeking treatment for sexual difficulties. In order to more clearly understand the utility of the WSSV scale, more clinically-oriented research in which the WSSV scale is applied in therapeutic settings would be helpful.

It is the researcher's hope that results from the present research will provide a foundation for future research investigating the implications of women's sexual self-views including, schema or script-focused sex therapy outcomes and longitudinal research examining the plasticity and/or salience of women's sexual self-views and factors which influence it. Additionally, given the complex nature of a woman's sexual self-views, "there are likely numerous independent antecedent events that have

contributed to its manifestation" (Vickberg & Deaux, 2005), and future research which investigates factors that contribute to the development of a woman's sexual self-views could potentially provide information leading to a more "preventative" approach to the development of negative sexual self-views and corresponding sexual difficulties. Further, assessing the relationship between a woman's sexual self-views and her body image could prove to be an important focus in therapeutic settings; however, future research is needed to delineate the relationship between these two variables. Another idea for future clinically-relevant research utilizing the WSSV scale stems from Swann, Chang-Schneider, and McClarty's (2007) discussion of strategies for increasing the predictive validity of self-views. In particular and relevant to the discussion of the current dissertation research, Swann et al. (2007) assert that the predictive validity of self-views can be enhanced by examining the metacognitive aspects of self-views, such as the strength of one's self-views. Several measures exist which tap these constructs, including the clarity of self-concept (Campbell et al., 1996), the certainty of self-views (Swann & Ely, 1984), the importance one places on self-knowledge (Pelham, 1991), the accessibility of individual constructs (Higgins, King, & Mavin, 1982), and the extremity of one's self-schemas (Markus, 1977). Understanding these metacognitive aspects within the context of female sexuality would likely add to the understanding of the relationship between a woman's sexual self-view and her sexual functioning status. For example, the strength (e.g., certainty) of women's sexual self-views is likely to increase the predictive validity of the WSSV scale on sexual functioning status and future sexual behaviors.

I believe that findings from this dissertation research highlight the multifaceted nature of women's sexual self-views and contribute to a greater understanding of the cognitive components involved in female sexuality. The Women's Sexual Self-Views (WSSV) scale is a valid operationalization of women's sexual self-views, as it provides a semantic framework for assessing the cognitive representation of a woman's sexual self. Consistent with Markus & Wurf's (1987) assertion that self-concepts include not only personal characteristics, but feelings, behaviors, and roles; the different domains of the WSSV scale highlight both positive and negative intrapersonal, as well as interpersonal processes involved in women's sexual self-views. Phase 3 elaborated upon the investigation of women's sexual self-views by examining it in relation to memory for sexual information. This dissertation research provides evidence that there are systematic individual differences in women's sexual self-views and to some degree, these may predict memory for sexually-relevant information.

Figure 1. Barlow's Model of Sexual Function

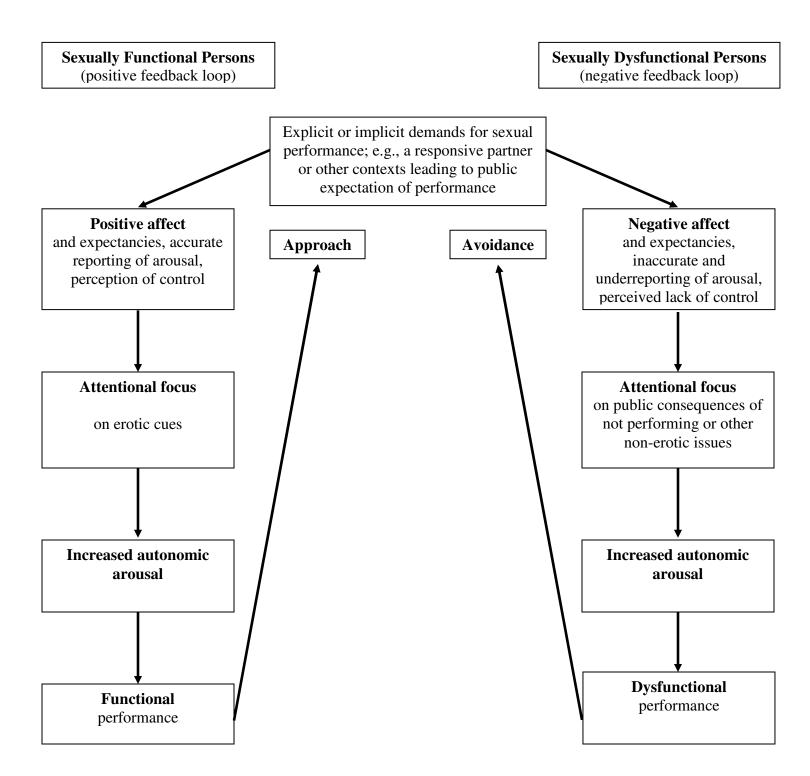


Figure 2. Overview of Experimental Design for Phases 1, 2, and 3 of Dissertation Study



Individual Qualitative Interviews

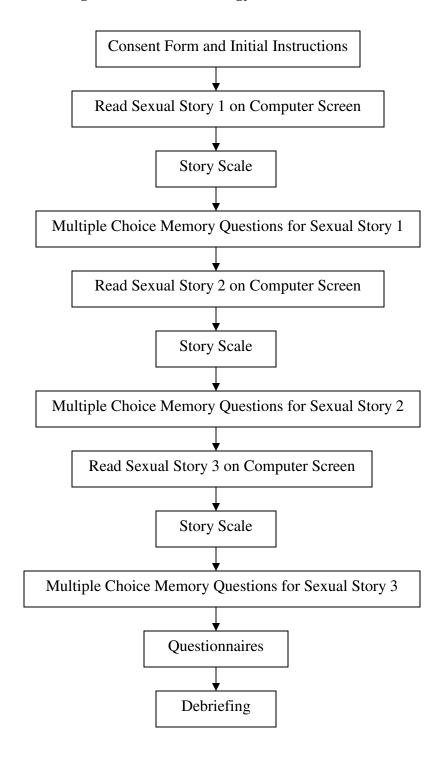
Phase 2:

Quantitative development of a scale assessing women's sexual self-schemas and examination of related variables (e.g. sexual functioning)

Phase 3:

Examination of the relationship between women's sexual self-schemas and memories for sexually-relevant information.

Figure 3. Flow diagram of the methodology for Phase 3



Appendix A

Sexual Self-Schemas Scale (SSSS)

Directions: Below is a listing of 50 adjectives. For each word, consider whether or not the term describes you. Each adjective is to be rated on a scale ranging from 0 = not at all descriptive of me to 6 = very much descriptive of me. Choose a number for each adjective to indicate how accurately the adjective describes you. There are no right or wrong answers. Please be thoughtful and honest.

Rating	Scal	le:

Not at all								Very
descriptive	0	1	2	3	4	5	6	descriptive

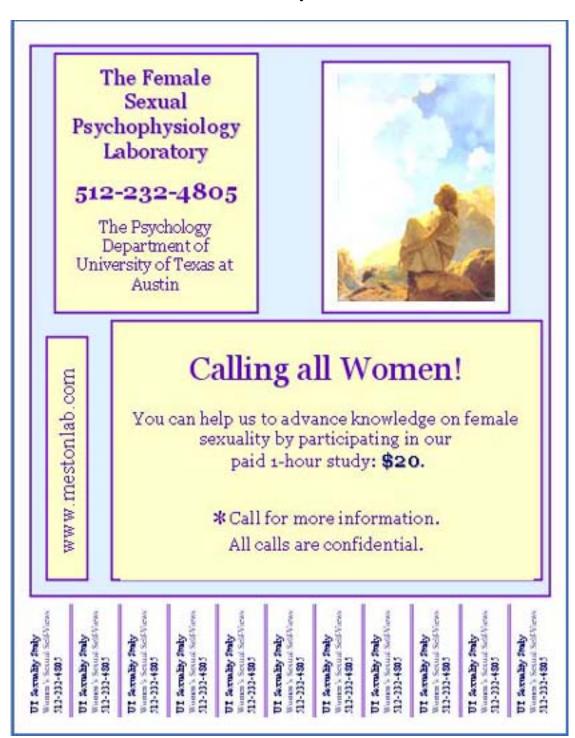
To what extent does the term _____ describe me?

Generous	0	1	2	3	4	5	6
Uninhibited	0	1	2	3	4	5	6
Cautious	0	1	2	3	4	5	6
Helpful	0	1	2	3	4	5	6
Loving	0	1	2	3	4	5	6
Open-minded	0	1	2	3	4	5	6
Shallow	0	1	2	3	4	5	6
Timid	0	1	2	3	4	5	6
Frank	0	1	2	3	4	5	6
Clean-cut	0	1	2	3	4	5	6
Stimulating	0	1	2	3	4	5	6
Unpleasant	0	1	2	3	4	5	6
Experienced	0	1	2	3	4	5	6
Short-tempered	0	1	2	3	4	5	6
Irresponsible	0	1	2	3	4	5	6
Direct	0	1	2	3	4	5	6
Logical	0	1	2	3	4	5	6
Broad-minded	0	1	2	3	4	5	6
Kind	0	1	2	3	4	5	6
Arousable	0	1	2	3	4	5	6
Practical	0	1	2	3	4	5	6
Self-conscious	0	1	2	3	4	5	6
Dull	0	1	2	3	4	5	6
Straightforward	0	1	2	3	4	5	6
Casual	0	1	2	3	4	5	6

Disagreeable	0	1	2	3	4	5	6
Serious	0	1	2	3	4	5	6
Prudent	0	1	2	3	4	5	6
Humorous	0	1	2	3	4	5	6
Sensible	0	1	2	3	4	5	6
Embarrassed	0	1	2	3	4	5	6
Outspoken	0	1	2	3	4	5	6
Level-headed	0	1	2	3	4	5	6
Responsible	0	1	2	3	4	5	6
Romantic	0	1	2	3	4	5	6
Polite	0	1	2	3	4	5	6
Sympathetic	0	1	2	3	4	5	6
Conservative	0	1	2	3	4	5	6
Passionate	0	1	2	3	4	5	6
Wise	0	1	2	3	4	5	6
Inexperienced	0	1	2	3	4	5	6
Stingy	0	1	2	3	4	5	6
Superficial	0	1	2	3	4	5	6
Warm	0	1	2	3	4	5	6
Unromantic	0	1	2	3	4	5	6
Good-natured	0	1	2	3	4	5	6
Rude	0	1	2	3	4	5	6
Revealing	0	1	2	3	4	5	6
Bossy	0	1	2	3	4	5	6
Feeling	0	1	2	3	4	5	6

Appendix B

Recruitment Flyer for Phase 1



Appendix C

Phase 1 Demographics Questionnaire

	How old are you?
2.	What is the highest level of education that you have completed?
	High School/GED
	College
	Graduate School/Professional Degree
	Other (please explain)
3a	. Are you currently employed?
	Yes
	No
]	b. If yes, how would you describe your current employment?
	Administration
	Education
	Engineering
	Finance
	Healthcare/Medical
	Law
	Management
	Service Industry
	Sales/Retail
	Science/Research
	Other(please specify)
4.	What is your individual annual income?
	Less than \$25,000
	\$25,001 to \$50,000
	\$50,001 to \$100,000
	More than \$100,000
5.	What is your main ethnic heritage?
	Caucasian
	African-American
	Native American
	Hispanic
	Asian
	Other (please explain)
6.	What country were you born in?
7.	What religious affiliation do you belong to?
	Christian (Protestant)
	Christian (Catholic)
	Hindu
	Jewish
	Muslim
	Buddhist
	Pagan
	Agnostic
	Atheist
	Other (specify)

8 . What is your current dating/marital relationship status?
Single
Dating
Engaged
Married
Separated
Divorced
9. How long have you been in your current relationship? (in months)
10a. Do you have any children?
Yes
No
b. If so, how many?
11. Have you experienced menopause?
Yes
No
12 . Have you had a hysterectomy?
Yes
No
13 . Are you receiving hormone replacement therapy?
Yes
No
14. Indicate your most likely sexual orientation.
Homosexual (attractions mainly for persons of <u>my own sex</u>)
Homosexual (with occasional heterosexual fantasies or experiences)
Heterosexual (with a bit of homosexual experience, or somewhat regular homosexual fantasie
Heterosexual (with possibly an occasional homosexual fantasy)
Heterosexual (<i>only</i> opposite sex attractions and fantasies)

Appendix D

The Female Sexual Function Index (FSFI)

INSTRUCTIONS: 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. In answering these questions the following definitions apply: Sexual activity includes intercourse, caressing, foreplay, and masturbation. Sexual intercourse is defined as penile penetration (entry) of the vagina. Sexual stimulation includes situations like foreplay with a partner, self-stimulation (masturbation), or sexual fantasy. CIRCLE ONLY ONE CHOICE PER QUESTION: Sexual desire or interest is a feeling that included 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, <u>how often</u> did
	you feel sexual desire or interest?

5 = Almost always or always

4 = Most times (more than half the time)

3 = Sometimes (about half the time)

2 = A few times (less than half the time)

1 = Almost never or never

2. Over the past 4 weeks, how would you 5 = Very high, rate your level (degree) of sexual desire 4 = High, or interest?

3 = Moderate,

2 = Low,

1 = Very low or none at all

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

5 = Almost always or always,

4 = Most times (more than half the time),

3 = Sometimes (about half the time),

2 = A few times (less than half the time),

1 = Almost never or never,N/A = No sexual activity

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

5 = Very high,

4 = High,

3 = Moderate

2 = Low.

1 =Very low or none at all, N/A = No sexual activity

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

5 = Very high confidence,

4 = High confidence,

3 = Moderate confidence,

2 = Low confidence,

1 = Very low or no confidence,N/A = No sexual activity

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

5 = Almost always or always

4 = Most times (more than half the time)

3 = Sometimes (about half the time)

2 = A few times (less than half the time)

1 = Almost never or never

- 7. Over the past 4 weeks, <u>how often</u> did you become sexually aroused (females—lubricated or "wet"; males—attained an erection) during sexual activity or intercourse?
- 8. Over the past 4 weeks, <u>how often</u> did you maintain your arousal (females—lubrication or "wetness"; males—erection) <u>until completion</u> of sexual activity or intercourse?
- 9. Over the past 4 weeks, how difficult was it to maintain your arousal (females–lubrication or "wetness"; males–erection) until completion of sexual activity or intercourse?
- 10. Over the past 4 weeks, when you had sexual stimulation or intercourse, <u>how</u> <u>often</u> did you reach orgasm (climax)?
- 11. Over the past 4 weeks, when you had sexual stimulation or intercourse, <u>how difficult</u> was it for you to reach orgasm (climax)?
- 12. Over the past 4 weeks, <u>how satisfied</u> were you with your ability to reach orgasm (climax) during sexual activity or intercourse?
- 13. Over the past 4 weeks, <u>how satisfied</u> have you been with the amount of emotional closeness during sexual activity between you and your partner?

- 5 = Almost always or always
- 4 = Most times (more than half the time)
- 3 = Sometimes (about half the time)
- 2 = A few times (less than half the time)
- 1 = Almost never or never N/A = No sexual activity
- 5 = Almost always or always
- 4 = Most times (more than half the time)
- 3 = Sometimes (about half the time)
- 2 = A few times (less than half the time),
- 1 = Almost never or never, N/A = No sexual activity
- 1 = Extremely difficult or impossible
- 2 = Very difficult
- 3 = Difficult
- 4 = Slightly difficult
- 5 = Not difficult
- N/A = No sexual activity
- 5 = Almost always or always
- 4 = Most times (more than half the time)
- 3 = Sometimes (about half the time)
- 2 = A few times (less than half the time)
- 1 = Almost never or never N/A = No sexual activity
- 1 = Extremely difficult or impossible,
- 2 = Very difficult,
- 3 = Difficult,
- 4 = Slightly difficult,
- 5 = Not difficult,
- N/A = No sexual activity
- 5 = Very satisfied
- 4 = Moderately satisfied
- 3 = About equally satisfied and dissatisfied
- 2 = Moderately dissatisfied
- 1 = Very dissatisfied
- N/A = No sexual activity
- 5 = Very satisfied
- 4 = Moderately satisfied
- 3 = About equally satisfied and dissatisfied
- 2 = Moderately dissatisfied
- 1 = Very dissatisfied
- N/A = No sexual activity

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

5 = Very satisfied

4 = Moderately satisfied

3 = About equally satisfied and dissatisfied

2 = Moderately dissatisfied

1 = Very dissatisfied

15. Over the past 4 weeks, <u>how satisfied</u> have you been with your overall sexual life?

5 = Very satisfied

4 = Moderately satisfied

3 = About equally satisfied and dissatisfied

2 = Moderately dissatisfied

1 = Very dissatisfied

16. Over the past 4 weeks, <u>how often</u> did you experience discomfort or pain <u>during</u> vaginal penetration?

1 = Almost always or always

2 = Most times (more than half the time)

3 = Sometimes (about half the time)

4 = A few times (less than half the time)

5 = Almost never or neverN/A = No sexual activity

17. Over the past 4 weeks, how often did you experience discomfort or pain <u>following</u> vaginal penetration?

1 = Almost always or always

2 = Most times (more than half the time)

3 = Sometimes (about half the time)

4 = A few times (less than half the time)

5 = Almost never or neverN/A = No sexual activity

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

1 = Very high,

2 = High,

3 = Moderate,

4 = Low,

5 = Very low or none at all,N/A = No sexual activity

Appendix E

Phase 1 Sexual Experience Scale

Have you experienced the following? 1. Kissing on the lipsY N N 2. Deep kissingY **3.** Exposure to erotic materials sold openly in newsstands......Y N N N **6.** Petting or caressing your partner's genitals to orgasm......Y N N **8.** Exposure to hardcore erotic materials......Y N **9.** Mutual oral stimulation of genitalsY N **10.** Renting a hardcore (sexually explicit) erotic videoY N 11. Anal intercourse Y N 12. Sexually stimulating your genitals when you are alone (with or without orgasm)Y N **13.** Downloading visual internet erotica (e.g., jpgs, mpegs)Y N **14.** Downloading written internet erotica (e.g., stories, letters)......Y N **15.** A sexual fantasy......Y N N 17. Petting or caressing a partner's genitals......Y N N N **20.** A partner orally stimulating your genitalsY N **21.** Vaginal intercourseY N If you have engaged in the following activities...... **22.** At *what age* did you first experience sexual intercourse? _____

23. How many partners have you had sexual intercourse with? _____

Appendix F

Additional Questions Asked During Phase 1 Individual Qualitative Interviews

- 1) How would you describe yourself as a woman?
- 2) What do you feel like is sexual about you?
- 3) When you are in a sexual situation, what are terms that you would use to describe yourself in those moments?
- 4) If somebody asked you, in a short paragraph to describe your sexual identity, how would you do that?
- 5) In a sexual scenario, how do you see yourself?
- **6)** How would you describe yourself in a sexual situation?
- 7) What makes you a sexual person?
- 8) Let's say somebody that you'd been in a relationship with or somebody that you'd had a sexual connection with was here now and I was to ask them how they would describe you as a sexual person, how do you think they would describe you?
- 9) When you say that you are a "really sexual person," what does being a sexual person mean to you?
- 10) You said you come across in a sexual way, could you tell me what that means?
- 11) When you say "I think of myself as a sexual person," what is a sexual person to you?
- **12)** How do you feel about yourself as a sexual person?
- 13) Are there other terms that you would use to describe other women as sexual beings that you wouldn't necessarily use to describe yourself?
- **14)** If you could describe your ideal sexual self, what would that look like?
- **15**) What about *you* makes you a sexual person?
- **16)** Can you think of certain words or phrases which describe your sexual identity?
- 17) When you think of yourself as like a sexual person, do you think that this view is distinct from how you just think of yourself as a person in general?

Appendix G

Phase 2 Demographics Questionnaire

1. What is your age?		
 2. Please indicate your race/ ethnicity: American Indian or Alaska Native: A person having origins in any of the original peoples of North, Central, or South America, and who maintains tribal affiliations or community attachment. Asian: A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent. Black or African American: A person having origins in any of the black racial groups of Africa. Native Hawaiian or Other Pacific Islander: A person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands. White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin. 		
3. In what region of the United States do you currently reside?		
Northeast Midwest South West		
4. What is the highest level of education that you have completed (i.e., 12 th grade, 1 year of college, Masters degree, etc.)?		
5. What is your family's annual income? Less than \$25,000 \$25,001 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$150,000 Over \$150,000		
6. What is your current relationship status? Single, not dating Single, casual dating In a committed relationship		
7. Do you have children? (circle one) YES NO		
8. How would you describe your sexual orientation (who you are sexually attracted to): Homosexual (attracted to members of the same sex) Heterosexual (attracted to members of the opposite sex) Bisexual (attracted to members of both sexes) I am unsure about my sexual orientation		

Appendix H

Young Schema Questionnaire- Short Form

INSTRUCTIONS:

Listed below are statements that a person might use to describe himself or herself. Please read each statement and decide how well it describes you. When there you are not sure, base your answer on what you emotionally **feel**, not on what you **think** to be true. Choose the **highest rating from 1 to 6** that describes you and write the number in the space before the statement.

RATING SCALE:

1 = Completely untrue of me 2 = Mostly untrue of me

3 = Slightly more true than untrue

4 = Moderately true of me

5 = Mostly true of me

1 Most of the time, I haven't had someone to nurture me, share him/herself with me, or care deeply about everything that happens to me.
2 In general, people have not been there to give me warmth, holding, and affection.
3 For much of my life, I haven't felt that I am special to someone.
4 For the most part, I have not had someone who really listens to me, understands me, or is tuned into my true needs and feelings.
5 I have rarely had a strong person to give me sound advice or direction when I'm not sure what to do.
6 I find myself clinging to people I'm close to, because I'm afraid they'll leave me.
7 I need other people so much that I worry about losing them.
8 I worry that people I feel close to will leave me or abandon me.
9 When I feel someone I care for pulling away from me, I get desperate.
10 Sometimes I am so worried about people leaving me that I drive them away.
11 I feel that people will take advantage of me.
12 I feel that I cannot let my guard down in the presence of other people, or else they will intentionally hurt me.

13.		It is only a matter of time before someone betrays me.
14.	-	I am quite suspicious of other people's motives.
15.		I'm usually on the lookout for people's ulterior motives.
16.		I don't fit in.
17.		I'm fundamentally different from other people.
18.		I don't belong; I'm a loner.
19.		I feel alienated from other people.
20.		I always feel on the outside of groups.
21.		No man/woman I desire could love me one he/she saw my defects.
22.		No one I desire would want to stay close to me if he/she knew the real me.
23.		I'm unworthy of the love, attention, and respect of others.
24.		I feel that I'm not lovable.
25.		I am too unacceptable in very basic ways to reveal myself to other people.
26.		Almost nothing I do at work (or school) is as good as other people can do.
27.		I'm incompetent when it comes to achievement.
28.		Most other people are more capable than I am in areas of work and achievement
29.		I'm not as talented as most people are at their work.
30.		I'm not as intelligent as most people when it comes to work (or school).
31.		I do not feel capable of getting by on my own in everyday life.
32.		I think of myself as a dependent person, when it comes to everyday functioning.
33.		I lack common sense.
34.		My judgment cannot be relied upon in everyday situations.
35.		I don't feel confident about my ability to solve everyday problems that come up.
36		Lean't seem to escape the feeling that something had is about to happen

37 moment.	_ I feel that a disaster (natural, criminal, financial, or medical) could strike at any
38	_ I worry about being attacked.
39	I worry that I'll lose all my money and become destitute.
	I worry that I'm developing a serious illness, even though nothing serious has been by a physician.
41 seem to.	I have not been able to separate myself from my parent(s), the way other people my age
42	My parent(s) and I tend to be over involved in each other's lives and problems.
	It is very difficult for my parent(s) and me to keep intimate details from each other, eeling betrayed or guilty.
44	I often feel as if my parent(s) are living through meI don't have a life of my own.
45	I often feel that I do not have a separate identity from my parent(s) or partner.
46	I think that if I do what I want, I'm only asking for trouble.
47	I feel that I have no choice but to give in to other people's wishes, or else they will retaliate or reject me in some way.
48	In relationships, I let the other person have the upper hand.
49 myself.	_ I've always let others make choices for me, so I really don't know what I want for
50 taken into	I have a lot of trouble demanding that my rights be respected and that my feelings be account.
51	I'm the one who usually ends up taking care of the people I'm close to.
52	I am a good person because I think of others more than of myself.
53	I'm so busy doing for the people that I care about, that I have little time for myself.
54	I've always been the one who listens to everyone else's problems.
55	Other people see me as doing too much for others and not enough for myself.
56	I am too self-conscious to show positive feelings to others (e.g., affection, showing I

57	I find it embarrassing to express my feelings to others.
58	I find it hard to be warm and spontaneous.
59	I control myself so much that people think I am unemotional.
60	People see me as uptight emotionally.
61	I must be the best at most of what I do; I can't accept second best.
62	I try to do my best; I can't settle for "good enough."
63	I must meet all my responsibilities.
64	I feel there is constant pressure for me to achieve and get things done.
65	I can't let myself off the hook easily or make excuses for my mistakes.
66 people.	I have a lot of trouble accepting "no" for an answer when I want something from other
67 people.	I'm special and shouldn't have to accept many of the restrictions placed on other
68	I hate to be constrained or kept from doing what I want.
69	I feel that I shouldn't have to follow the normal rules and conventions other people do.
70	I feel that what I have to offer is of greater value than the contributions of others.
71	I can't seem to discipline myself to complete routine or boring tasks.
72	If I can't reach a goal, I become easily frustrated and give up.
73 goal.	I have a very difficult time sacrificing immediate gratification to achieve a long-range
74	I can't force myself to do things I don't enjoy, even when I know it's for my own good.
75	I have rarely been able to stick to my resolutions.

Appendix I

Initial Version of the Women's Sexual Self-Views Scale

Instructions:

Below are listed a number of statements that could be used to describe how you view yourself as a sexual person. After reading each item, please respond according to the prompt:

"When I think of myself as a sexual person, the following describes me" using the rating scale below:

1 = Completely untrue of me 2 = Mostly untrue of me 3 = Slightly more true than untrue 4 = Moderately true of me 5 = Mostly true of me 6 = Describes me perfectly

When you are unsure about how to respond to a certain item, try to base your answer on what you emotionally **feel**, not on what you **think** to be true. Choose the **highest rating from 1 to 6** that describes you and write the number in the space after each item.

1. I am feisty.	24. I am sad.	47. I engage in risky sexual behavior
2. I am genuine.	25. I am classy.	48. I am selective.
3. I am typical.	26. I am rebellious.	49. I am moody.
4. I am close-minded.	27. I am rejected.	50. I am appreciative.
5. I am dramatic.	28. I am stubborn.	51. I am receptive.
6. I am intense.	29. I am motivated.	52. I am fun.
7. I am clean.	30. I am degraded.	53. I am asexual.
8. I am girly.	31. I am regretful.	54. I am flat.
9. I am polite.	32. I am subtle.	55. I am submissive.
10. I am repressed.	33. I am open.	56. I am proper.
11. I am fearless.	34. I am weak.	57. I am content.
12. I am respectable.	35. I am fake.	58. I am silly.
13. I am romantic.	36. I am thwarted.	59. I am "a tomboy."
14. I am risqué.	37. I am active.	60. I am compromising.
15. I draw attention to myself in a sexual way	38. I am creative.	61. I am affectionate.
16. I am troubled.	39. I am demanding.	62. I am peculiar.
17. I am communicative.	40. I am skinny.	63. I am ashamed.
18. I am robotic (i.e., I just go along with the motions)	41. I am conventional.	64. I am adventurous.
19. I am courageous.	42. I am "a giver."	65. I am crazy.
20. I am scandalous.	43. I am critical of my sexual partners	66. I am frustrating.
21. I am satisfied.	44. I am playful.	67. I feel sexually functional.
22. I am extreme.	45. I am private.	68. I am attractive.
23. I am friendly.	46. I think that I am good in bed.	69. I am self-sufficient.

Please respond according to the prompt:
"When I think of myself as a sexual person, the following describes me" using the rating scale below:

1 = Completely untrue of me

2 = Mostly untrue of me

3 = Slightly more true than untrue

4 = Moderately true of me

5 = Mostly true of me

_	T	
70. I am assertive.	100. I am celibate.	130. I am voyeuristic.
71. I am moral.	101. I am able.	131. I am nurturing.
72. I am capable.	102. I am imaginative.	132. I am raunchy.
73. I am downtrodden.	103. I am cheap.	133. I am "wishy-washy."
74. I am amazing.	104. I am innocent.	134. I am angry.
75. I am forceful in sexual situations.	105. I am impressive.	135. I am arousing.
76. I am inhibited.	106. I am easy.	136. I am sweet.
77. I am apologetic.	107. I am appealing.	137. I am misunderstood.
78. I am polyamorous.	108. I am healthy.	138. I am patient.
79. I am insightful.	109. I am fulfilled.	139. I am special.
80. I am "a listener."	110. I am adorable.	140. I am coy.
81. I am sensitive.	111. I am free.	141. I am self-respecting.
82. I am stimulating.	112. I am "a good girl."	142. I consider myself a very sexual person.
83. I am caring.	113. I am complimentary.	143. I am versatile.
84. I am cool.	114. I am soft.	144. I am "a taker."
85. I am altered.	115. I want "all or nothing."	145. I am willing.
86. I am involved in sexual situations	116. I am dirty.	146. I am wild.
87. I am deep.	117. I am an exhibitionist.	147. I am charged.
88. I am aggressive.	118. I am conflicted.	148. I am self-conscious.
89. I am accommodating.	119. I am exciting.	149. I am complicated.
90. I am safe.	120. I am youthful.	150. I am practical.
91. I am empty.	121. I am hopeless.	151. I feel desirable.
92. I am intimidating.	122. I am weird.	152. I am casual.
93. I am reactionary.	123. I am pushy.	153. I am cold.
94. I am lonely.	124. I am uncomfortable.	154. I am strong.
95. I am validated.	125. I am pretty.	155. I feel objectified.
96. I am possessive.	126. I am bold.	156. I am comfortable with myself as a sexual person
97. I am masculine.	127. I am timid.	157. I am compassionate.
98. I am conflicted.	128. I am promiscuous.	158. I am uptight.
99. I am limited.	129. I am eager to please.	159. I am a nice girl.

Please respond according to the prompt:
"When I think of myself as a sexual person, the following describes me" using the rating scale below:

1 = Completely untrue of me

2 = Mostly untrue of me

3 = Slightly more true than untrue

4 = Moderately true of me

5 = Mostly true of me

160. I am responsible.	190. I am stable.	220. I am interested in sex
161. I am manipulative.	191. I am unique.	221. I am nervous.
162. I am loving.	192. I am able to receive or feel	222. I feel exploited.
163. I am bitter.	pleasure from sexual situations. 193. "I know what I want."	223. I feel old.
164. I am supportive.	194. I am emotional.	224. I am a prude.
165. I am jealous.	195. I am consistent.	225. I am talented.
166. I am real.	196. I am slutty.	226. I feel used.
167. I am fair.	197. I am confused.	227. I am idealistic.
168. I feel distracted.	198. I am controlling.	228. I am honest.
169. I am careful.	199. I am "a talker."	229. I am progressive.
170. I am knowledgeable.	200. I am interesting to my sexual partners	230. I am conquered.
171. I feel guilty.	201. I am giving.	231. I am embarrassed.
172. I am mean.	202. I am intimate.	232. I am "a tease."
173. I am flirtatious.	203. I am obligated.	233. I am "too sexual."
174. I am orgasmic.	204. I am satiated.	234. I am monogamous.
175. I am feminine.	205. I am considerate.	235. I am infuriated.
176. I am fascinating.	206. I am spiritual.	236. I enjoy being pampered.
177. I am blunt.	207. I desire novelty.	237. I am negative.
178. I am foolish.	208. I am bubbly.	238. I am selfish.
179. I am unpleasant.	209. I am positive.	239. I am desperate.
180. I am vulnerable.	210. I am thoughtful.	240. I am depressed.
181. I am self-aware.	211. I am changing.	241. I am carefree.
182. I am shapely.	212. I am "like a porn star."	242. I am powerful.
183. I am uninhibited.	213. I am vulgar.	243. I am touchy-feely.
184. I am loyal.	214. I am androgynous.	244. I am judgmental.
185. I am attentive.	215. I am confident.	245. I am rational.
186. I am evolved.	216. I am fearful.	246. I am "the initiator."
187. I am comfortable with my body.	217. I am kinky.	247. I am independent.
188. I am loud.	218. I am inadequate.	248. I am a "square."
189. I desire variety.	219. I am understanding.	249. I am mushy.

Please respond according to the prompt:
"When I think of myself as a sexual person, the following describes me" using the rating scale below:

1 = Completely untrue of me

2 = Mostly untrue of me

3 = Slightly more true than untrue

4 = Moderately true of me

5 = Mostly true of me

250. I am goofy.	268. I am trusting.	286. I am loose.
251. I feel disconnected.	269. I am plump.	287. I am passionate.
252. I feel inexperienced.	270. I am cowardly.	288. I am guarded.
253. I am focused.	271. I am neat.	289. I am offensive.
254. I am frustrated.	272. I am spontaneous.	290. I am mysterious.
255. I am beautiful.	273. I am needy.	291. I have a high sex drive.
256. I am immature.	274. I am "too much."	292. I am concerned.
257. I am gentle.	275. I am private.	293. I am difficult.
258. I am fragile.	276. I am unhappy.	294. I feel comfortable discussing sexuality.
259. I am successful.	277. I am isolated.	295. I am horny.
260. I am hurt.	278. I am dormant.	296. I am overt.
261. I have sexual issues or hangups.	279. I am challenged.	297. I am respectful.
262. I am sexy.	280. I am maternal.	298. I am connected.
263. I am inclined.	281. I am generous.	299. I am a "fantasy maker."
264. I am boring.	282. I am engaging.	300. I am outgoing.
265. I am inspired.	283. I am impulsive.	301. I am worried.
266. I feel disrespected.	284. I am inventive.	302. I am intuitive.
267. I am unsure about my sexual orientation.	285. "I don't care about sex."	303. I am unsure about my gender identity.

Appendix J

Phase 2 Online Advertisement

Seeking Female Research Participants for Online Survey—Chance to Win \$50! Click below to find out more information

https://www.psychdata.com/surveys.asp?SID=10816

Hi, my name is Katie McCall and I am a graduate student of clinical psychology at the University of Texas. I am collecting data right now to examine how women think of and describe themselves as sexual beings. I am trying to develop a new scale to assess sexual self-views—information that will lead to a fuller understanding of female sexuality in qualitative terms. Eligibility requirements are female and at least 18 years old. The survey takes about 30 minutes to complete. Participation is completely confidential and participants will be entered in a monthly raffle with a chance to win \$50. There are no foreseeable risks associated with this study and you may withdraw from the survey at any point. If you would like to participate in this interesting and fruitful research opportunity, please click the following link:

https://www.psychdata.com/surveys.asp?SID=10816

If you have any questions or concerns about this study, please do not hesitate to contact me at kmccall@mail.utexas.edu or (512)232-4805. Thank you for your time and interest.

Katie McCall, M.A.

Appendix K

Cover Letter to Participate in Online Research Study

The University of Texas at Austin IRB # 2004-08-0086

You are being asked to participate in a research study. This page provides you with information about the study. Please read the information below before deciding whether or not to take part. Your participation is entirely voluntary and you can refuse to participate without penalty or loss. Completion and submission of the survey indicates your willingness to participate in the current study.

Title of Research Study:

Combining Qualitative and Quantitative Research Methods to Understand What Defines a Woman's Sexual Self-View

Principal Investigator(s) (include faculty sponsor), UT affiliation, and Telephone Number(s):

Katie McCall, M.A., Doctoral Candidate in Clinical Psychology, The University of Texas at Austin, 512-232-4805, kmccall@mail.utexas.edu

The Principal Investigator is being supervised by Cindy Meston, Ph.D., Associate Professor of Psychology, The University of Texas at Austin. Cindy Meston may be reached at 512-232-4644.

Funding source:

Dissertation Fellowship funded by the Social Science Research Council

What is the purpose of this study?

You are invited to participate in a study aimed at understanding how women define themselves as sexual persons. Approximately 2000 women will be completing the questionnaires included in this study.

What will be done if you take part in this research study?

If you choose to participate in this study, you will be asked to fill out 2 questionnaires, one which is about how you feel about yourself as a sexual person. This questionnaire includes questions that are of a very personal nature. You are free not to answer any questions that you do not wish to answer. The procedures described above will require approximately 20-30 minutes to complete. You will be free to decline participation at any point during the study. After completion of the online questionnaire, you will be directed to a screen that provides you with a confirmation code. This code indicates that you have successfully

completed the study. You will then be asked to send an email to the research team's indicated email address, including your confirmation code. Your personal information and conformation code will in no way be linked to your data. Each month the principal investigator will randomly select one participant and award the winner \$50. Winners will be notified through email.

What are the possible discomforts and risks?

Answering questions about your sexual activities may cause anxiety or embarrassment for some people. If participating in this study causes you concern or anxiety at any time, Cindy Meston, Ph.D, (512-232-4644) would be happy to talk with you.

If you wish to discuss the information above or any other risks you may experience, you may ask questions now or call the Principal Investigator listed on the front page of this form.

You should plan to complete the survey at some time when you will be alone so that others will not be able to see your responses.

What are the possible benefits to you or to others?

There are no direct benefits to you personally resulting from your participation in this study. The information we obtain in this study will add to our general knowledge for sexuality.

If you choose to take part in this study, will it cost you anything? No.

Will you receive compensation for your participation in this study?

You will be given the option to enter a monthly raffle with the possibility of winning \$50.

What if you are injured because of the study?

There are no significant risks of physical harm associated with the procedures in this study. However, if you are injured during participation, you will be responsible for your medical treatment. No payment can be provided in the event of injury or a medical problem while you are a participant in this study.

If you do not want to take part in this study, what other options are available to you?

Participation in this study is entirely voluntary. You are free to choose not to participate in the study, and your refusal will not influence current or future relationships with the University of Texas at Austin. You may withdraw from the study at any time. Your decision not to participate or your decision to withdraw during the study will not result in any penalty, academic or otherwise.

How can you withdraw from this research study and who should I call if I have questions?

If you wish to stop your participation in this research study for any reason, you should contact Katie McCall at (512) 232-4805. You are free to withdraw your consent and stop participation in this research study at any time without penalty or loss of benefits for which you may be entitled.

In addition, if you have questions about your rights as a research participant, please contact Lisa Leiden, Ph.D., Director, Office of Research Support and Compliance, (512) 471-8604.

How will your privacy and the confidentiality of your research records be protected?

If you choose to participate in this study, you responses in this experiment will be anonymous. This means that records of any responses you give during this study will not contain any identifying information (such as your names, UT identification, etc.). As such, your identity cannot be determined by anyone who has access to the records of your responses. All data will be marked with identification numbers and there will be no names or identifying information on any of your answers.

We will not record your IP address. The survey is administered through PsychData.com, a third party company that provides on-line data collection services to researchers at major universities throughout the country. In order to protect data and other sensitive information during transmission, PsychData uses Secure Socket Layer (SSL) 128-bit encryption technology, the same encryption technology that is used to protect credit card data and other privacy-sensitive transactions completed over the internet. Authorized persons from The University of Texas at Austin and the Institutional Review Board have the legal right to review your research records and will protect the confidentiality of those records to the extent permitted by law. Otherwise, your research records will not be released without your consent unless required by law or a court order.

If the results of this research are published or presented at scientific meetings, your identity will not be disclosed.

Will the researchers benefit from your participation in this study?

Your participation in this study will not directly benefit the researcher financially.

Please click on one of the following options to continue:

I understand and meet the participation criteria outlined above. I would like to take part in the survey.

I do not wish to take part in the survey at this time OR I do not meet the participation criteria outlined above.

Appendix L

Phase 3 Demographics Questionnaire

1.	What is your age?
2.	Please indicate your race/ ethnicity:
	American Indian or Alaska Native: A person having origins in any of the original peoples of North, Central, or South America, and who maintains tribal affiliations or community attachment. Asian: A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent.
	Black or African American: A person having origins in any of the black racial groups of Africa. Native Hawaiian or Other Pacific Islander: A person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.
	White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
	Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin.
3.	What is the highest level of education that you have completed (i.e., 12 th grade, 1 year of college, Masters degree, etc.)?
4.	What is your current relationship status?
	Single, not dating
	Single, casual dating
	In a committed relationship
5.	How would you describe your sexual orientation (who you are sexually attracted to):
	Homosexual (attracted to members of the same sex)
	Heterosexual (attracted to members of the opposite sex)
	Bisexual (attracted to members of both sexes)
	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

I am unsure about my sexual orientation

Appendix M

Final Version of the Women's Sexual Self-Views Scale

Instructions:

Below are listed a number of words/statements that could be used to describe how you view yourself as a sexual person. After reading each item, please respond according to the prompt:

"When I think of myself as a sexual person, the following describes me" using the rating scale below:

1 = Completely untrue of me 2 = Mostly untrue of me 3 = Slightly more true than untrue 4 = Moderately true of me 5 = Mostly true of me 6 = Describes me perfectly

When you are unsure about how to respond to a certain item, try to base your answer on what you emotionally **feel**, not on what you **think** to be true. Choose the **highest rating from 1 to 6** that describes you and write the number in the space after each item.

1.	I am confident (i.e., I think that I am good in bed).
2.	I am comfortable with myself as a sexual person.
3.	I am satisfied and content.
4.	I am open and receptive.
5.	I am carefree and uninhibited.
6.	I am engaging and involved in sexual situations.
7.	I feel desirable and appealing.
8.	I am healthy and feel sexually functional.
9.	I am able to receive or feel pleasure from sexual situations.
10.	I am exciting and interesting to my sexual partners.
11.	I consider myself a very sexual person (e.g., I have a high sex drive).
12.	I am communicative (e.g., I feel comfortable discussing my
	sexuality).
13.	I am confused or conflicted.
14.	I am frustrated.
	I feel used or objectified.
	I feel disconnected or distracted.
17.	I am worried or nervous.
18.	I have sexual issues or hang ups.
19.	I am impulsive
20.	I engage in risky sexual behavior.

21	_I am often aggressive or forceful in sexual situations.
22	_I draw attention to myself in a sexual way or I am an exhibitionist.
23	_I am promiscuous.
24	_I am nurturing and caring.
25	_I am patient.
26	_I am thoughtful and considerate.
27	_I am understanding.
28	_I am affectionate.
29	_I am accommodating to my sexual partners.
30	_I am proper or moral.
31	_I am innocent and/or I feel sexually inexperienced).
32	_I am private.
33	_I am respectable.
34	_I try to be a "good girl" or a "nice girl."

Appendix N

Story Scale

Please use the following scale to evaluate how you felt while reading the erotic story. Please answer honestly and carefully. On the scale, circle the number from 1 (not at all) to 7 (intensely) which best describes your experience.

While reading the previous story, I felt:

	Not at all						Intensely
1. Interested	1	2	3	4	5	6	7
2. Bored	1	2	3	4	5	6	7
3. Relaxed	1	2	3	4	5	6	7
4. Disgusted	1	2	3	4	5	6	7
5. Pleasure	1	2	3	4	5	6	7
6. Any genital feelings	1	2	3	4	5	6	7
7. Embarrassed	1	2	3	4	5	6	7
8. Sexually turned off	1	2	3	4	5	6	7
9. Sexually aroused or turned on	1	2	3	4	5	6	7
10. Guilty	1	2	3	4	5	6	7
11. Excited	1	2	3	4	5	6	7
12. Genital wetness or lubrication	. 1	2	3	4	5	6	7

Appendix O

Phase 3 Sexual Experience Questionnaire

Have you experienced the following?

1. Kissing on the lipsY	N
2. Deep kissingY	N
3. Exposure to erotic materials sold openly in newsstandsY	N
4. Petting or caressing of breasts (clothed)	N
5. Petting or caressing of breasts (nude)	N
6. Masturbation	N
7. Petting or caressing a partner's genitals	N
8. A partner petting or caressing your genitalsY	N
9. Petting or caressing your partner's genitals to orgasmY	N
10. A partner petting or caressing your genitals to orgasmY	N
11. Exposure to hardcore erotic materialsY	N
12. Orally stimulating a partner's genitalsY	N
13. A partner orally stimulating your genitalsY	N
14. Mutual oral stimulation of genitalsY	N
15. Renting a hardcore (sexually explicit) erotic videoY	N
16. Vaginal intercourseY	N
17. Anal intercourseY	N
18. Sexually stimulating your genitals when you are alone (with or without org	asm) N
19. Downloading visual internet erotica (e.g., jpgs, mpegs)Y	N
20. Downloading written internet erotica (e.g., stories, letters)Y	N

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173