

EXTENDED SUMMARY: Influence of cognitions on female sexual pleasure

Introduction

In recent years a very high prevalence of female sexual dysfunctions has been found, around 40% of women say they have suffered some dysfunction (Reinisch, 1991 citado en DSM-V, 2013). Different studies have been carried out on anorgasmia, hypoactive sexual desire, vaginismus and dyspareunia, which reveal different prevalences depending on multiple factors such as age, sex education, associated discomfort and, duration and severity of symptoms. However, only 20% of women ask for psychological attention (Cabello, 2010).

These disorders can occur due to organic causes, but in many cases, the most determining factors are those psychological. In most women with some sexual dysfunction is observed an inadequate sexual education, what creates negative beliefs that hinder the enjoyment of sex (Nobre y Pinto-Gouveia, 2008). Just as low self-esteem can also be a predisposing factor in the development of sexual dysfunctions (Calado, Lameiras y Rodríguez, 2003).

Objective and hypothesis

For these reasons, a study has been carried out with the objective of estimating the role of beliefs about sexuality and the self-esteem of women in their sexual satisfaction. The hypothesis proposed is that dysfunctional sexual beliefs and low self-esteem diminish the satisfaction of women in their sexual relationships.

Method

- Participants

A total of 686 university women participated, aged between 18 and 64 years old (SD = 4.33). Of which 499 (72.74%) have not suffered any sexual dysfunction, 63 (9.18%) hypoactive sexual desire, 18 (2.62%) aversion to sex, 41 (5.98%) vaginismus and 65 (9.48%) have suffered anorgasmia.

- Materials

First, an adaptation of the female version of the Sexual Dysfunctional Beliefs Questionnaire (SDBQ) questionnaire developed by Nobre, Gouveia & Gomes (2003) was administered. The SDBQ collects dysfunctional sexual beliefs that act as predisposing factors of the development of sexual dysfunctions. For the subsequent statistical analysis these beliefs have been divided into scales: conservatism (scores between 7-32), self-image (scores between 3-15) and negation of affect (scores between 6-18).

Secondly, the scale of sexual self-esteem collected in the Multidimensional Sexuality Questionnaire (MSQ) created by Snell, Fisher and Walters (1993) was used.

And finally, the New Sexual Satisfaction Scale (NSSS) developed by Stulhofer, Busko and Brouillard (2010). This scale contains different aspects of the sexual response of the subject and the couple.

- Process

The procedure used to collect the data has been to disseminate through different social networks the link that contained the three named scales. Once the participants gave their informed consent, they proceeded to complete it voluntarily and anonymously. For the study, the request of the Deontological Commission was processed. The results were analyzed statistically through the SPSS 23 program, performing descriptive, correlational and regression analyzes.

Results

The results obtained from the answers to the questionnaires mentioned reflect that between 30 and 40% of the women in the sample do not have confidence in themselves as sexual partners and are not satisfied either with the quality or with the frequency of their sexual activity

It is observed that there is a correlation between greater satisfaction and higher self-esteem, while in relation to sexual beliefs we find a greater satisfaction when minor is conservatism, less is the negation of affect and better is self-image.

36% of the variance that explains sexual satisfaction is related to higher self-esteem, greater affection and better self-image.

Conclusion

The proposed hypothesis is fulfilled, dysfunctional sexual beliefs and low self-esteem have a negative impact on a woman's sexual satisfaction. In addition, a notable percentage of the participants show dissatisfaction with their sexual response and low levels of self-esteem, variables that could favor the appearance of sexual dysfunctions as indicated by Nobre and Pinto-Gouveia (2008).

The limitations presented by this study come from the relative homogeneity of the sample. 75.36% of the women questioned are between 20 and 25 years old, and all of them are university students. It is expected that with a sample of older women and with a lower level of studies the results will vary.

The proposal for future research would be to correct the limitations mentioned and include other variables that may influence the development of dysfunctional sexual beliefs such as the type of culture or the religiosity of the person. The psychological intervention of sexual dysfunctions should be adapted taking into account the self-esteem in their therapies and promoting the teaching of satisfactory sexual practices. This type of intervention would help women to enjoy their sexuality more and break the taboo that continues to be female sexual pleasure.

References

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