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Roles of Attachment Styles and Identity Patterns in the Sexual Function and Sexual Self-Esteem of Iranian Married Women

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ABSTRACT

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Background & Objective: The present study aimed to investigate the associations of attachment styles and identity patterns with sexual self-esteem and sexual function in married women.

Materials and Methods: This correlational study was conducted on 200 married women aged 26-40 years in Mashhad, Iran. Data were collected using the Persian versions of revised adult attachment scale (RAAS), identity style inventory (ISI-6G), female sex function index (FSFI), and sexual self-esteem index for women-short form (SSEI-W-SF). Data analysis was performed in SPSS using Pearson's correlation-coefficient and multiple regression analysis.

Results: Attachment styles and identity patterns were significantly associated with the sexual function and sexual self-esteem of Iranian married women in Mashhad ($P < 0.05$). Anxious/ambivalent attachment style and normative identity pattern could predict sexual function to be 16% and 11%, respectively. Moreover, identity commitment could predict sexual self-esteem to be 8%. A significant correlation was also observed between sexual self-esteem and sexual function in the subjects.

Conclusion: According to the results, the attachment styles in the early years of life play a pivotal role in the identity development of married women, as well as their sexual function and sexual self-esteem.

Introduction

According to the World Health Organization (WHO), sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles, and relationships. It is influenced by the interactions of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious, and spiritual factors.

Healthy sexual function in women plays a key role in their sense of health and quality of life. Lack of knowledge or false information about sexuality may increase the vulnerability of individuals to sexual disorders. The systematic study of human sexual response and its functions was first conducted by Masters and Johnson (1996), who presented a four-stage model of physiological responses to sexual stimulation, including the excitement phase, plateau phase, orgasmic phase, and resolution phase. The latest theory of sexual function has been proposed by Rosen et al. (2000), who suggested six domains for female sexual function, including desire, arousal, lubrication, orgasm, global satisfaction, and pain.

Epidemiological studies in the United States, United Kingdom, and Sweden have indicated that approximately 40% of women aged 18-59 years have major complaints about their sexual life, and these complaints mostly concern low sex drive. Other common problems in this regard include difficulty in reaching orgasm, insufficient lubrication, and painful coitus (Segraves, 2003).

In a study focusing on the female sexual dysfunction (FSD) in Austrian women aged 20-80 years, the results demonstrated that 22% of the subjects had sexual desire disorders, 35% had arousal disorders, 39% had orgasmic problems, and 12.8% had pain disorders (Ponholzer et al., 2005). Another study investigating the FSD in Malaysian married women aged 18-70 years indicated the prevalence of lack of orgasms, low sexual arousal, lack of lubrication, sexual dissatisfaction, and sexual pain to be 59.1%,

60.9%, 50.4%, 52.2%, and 67.8%, respectively (Sidi et al., 2006).

Normal and abnormal characteristics of interpersonal relationships are largely influenced by the attachment styles of individuals. According to Hazan and Shaver (1987), attachments are the established relationships between lovers and spouses. Attachment is a relatively stable emotional bond, which is formed between the child and mother or other individuals who interact with the infant regularly (Papalia, 2002).

There are three main attachment styles, including secure attachment, insecure/avoidant attachment, and anxious/ambivalent attachment (Ainsworth, 1970). One of these attachment styles is established during infancy and childhood as part of an enduring set of social and mental models. Adults with the avoidant attachment style are characterized by a fear of intimacy, emotional highs and lows, and trust issues despite being close to others. Adults with anxious/ambivalent attachment style describe love as an obsession and have a desire to experience romantic relationships with emotional highs and lows, extreme sexual attraction, and jealousy (Hazan and Shaver, 1987).

Evidence suggests the significant association of attachment styles and marital satisfaction (Alexandrov et al., 2005; Banse, 2004; Meyers and Landsberger, 2002; Butzer and Campbell, 2008). Some studies have investigated the correlations between attachment styles and sexual behaviors and attitudes. According to the findings, secure attachment is associated with positive sexual experiences, including frequent and satisfactory sexual intercourse and having sex to express love to the romantic partner. On the other hand, insecure attachment is associated with negative sexual outcomes, such as less frequent and less satisfactory sexual intercourse and experiencing negative emotions during sex (Birnbaum, 2007; Brassard et al., 2007).

According to the literature, secure attachment style is based upon the belief that sex should occur in the context of relationships, having fewer partners, and low possibility of partaking in hook-ups and extradyadic relationships (Tracy et al., 2003). Avoidant attachment style has been associated with the greater acceptance of engagement in casual sex (Gentzler and Kerns, 2004). Anxious/ambivalent attachment style is associated with participation in unwanted sex (Gentzler and Kerns, 2004; cited in Sprecher, 2013). In a study conducted in Iran, a significant correlation was observed between sexual desire and the attachment styles in married women (Terimourpour et al., 2011).

Previous studies have suggested a link between identity patterns and sexual function. According to Erikson's theory of psychosocial development (1968), identity formation is associated with the successful resolution of identity crisis. This is followed by the intimacy crisis, which applies to the individuals who have not resolved their crisis of identity confusion and are likely to become isolated and avoid intimacy or make futile, desperate attempts at intimacy often with improbable or inappropriate partners (Berman et al., 2006). Although identity statuses have variable personality outcomes, the most preferred identity patterns are informational, normative, and diffuse/avoidant patterns as presented by Berzonsky (1988). Individuals with an informational identity pattern are positively associated with self-reflection, problem-focused coping efforts, a rational epistemic style, a high demand for cognition, cognitive complexity, planned decision-making, conscientiousness, experiential openness, and identity achievement (Berzonsky, 1990; Berzonsky and Neimeyer, 1994; Berzonsky and Sullivan, 1992).

Individuals with a normative identity pattern are agreeable and conscientious, while they also possess stable, foreclosed self-concepts (Berzonsky, 1990; Nurmi et al., 1997; Berzonsky and Kuk, 2000). Moreover, they are reported to be highly defensive and intolerant of ambiguity with a strong need for structure and cognitive

closure (Berzonsky and Kinney, 1995; Berzonsky and Kuk, 2000). Finally, individuals with a diffuse/avoidant identity pattern are reluctant to confront personal conflicts and decisions, and their behaviors tend to be dictated and controlled by situational demands and incentives (Berzonsky, 1990; cited by Berzonsky and Kuk, 2005).

The association of feministic identity patterns and self-esteem has been reported to be stronger in the women who have experienced sexual traumatic events compared to normal women (Kucharska, 2015). In a study conducted in Iran, significant correlations were denoted between identity patterns, gender roles, and marital satisfaction among married couples (Maaref et al., 2015).

According to Rogers' theory of personality (1959), self-esteem is defined as the perception of individuals toward themselves. Rogers believes that self-esteem is formed in early childhood based on the interaction of the child with the parents. Gaynor and Underwood (1995) describe sexual self-esteem as the tendency to value, as opposed to devalue, one's own sexuality, which enables the individual to approach, rather than avoid, sexual experiences with self and others (p. 334). Furthermore, Zeanah and Schwarz (1996) have defined sexual self-esteem as the affective reactions of individuals to their sexual thoughts, feelings, and behaviors (p.3).

Studies on self-esteem have indicated that individuals tend to evaluate different aspects of their personality variably (Markus and Wyrf, 1987; Harter, 1982). Experimental evidence in this regard suggests that body image (Franzoi and Herzog, 1986), self-efficiency judgments (Rosenthal et al., 1991), moral judgments (Mosher, 1979), and childhood sexual abuse (Finkelhor and Brown, 1985) constitute persistent feelings of sexuality.

According to Snell and Papini (1989), sexual self-esteem usually refers to the feelings of individuals about themselves as sexual beings, which may encompass sexual identity and sexual

acceptance. Adolescents with greater sexual self-esteem feel more assured in sexual situations and are more positive about their sexual activities compared to others (Hensel et al., 2011). According to Oattes and Offman (2007), young women with high sexual self-esteem place higher value on their sexual experiences than others, and are willing to discuss the issues regarding sexual relations, such as sexual satisfaction and emotions.

With this background in mind, the present study aimed to evaluate the associations of attachment styles and identity patterns with the sexual function and sexual self-esteem of married women in Iran based on the three attachment styles proposed by Ainsworth (1970) and three identity patterns proposed by Berzonsky (1988, 1990).

Materials and Methods

This correlational study aimed to investigate the associations between attachment styles, identity patterns, sexual function, and sexual self-esteem of Iranian married women. Participants were selected via convenience sampling and by visiting public places (parks, recreation and shopping centers) from among the married women in Mashhad, Iran. In total, 200 women were enrolled in the study. Several scales and questionnaires were used to assess the attachment styles, identity patterns, sexual self-esteem, and sexual function of the participants.

Revised Adult Attachment Scale (RAAS) (Collins and Read, 1990):

Revised adult attachment scale (RAAS) consists of 18 statements, and respondents should describe their feelings about romantic relationships by rating the statements based on a five-point Likert scale (1=Not at All, 5=Very Much). The scale contains three subscales of 'CLOSE', 'DEPEND', and 'ANXIETY', each of which are composed of six items. In the present study, we used the Persian version of RAAS.

Identity Style Inventory: A Revision with a Sixth-Grade Reading Level (ISI-6G) (Berzonsky, 1989):

The Persian version of the identity style inventory (ISI-6G) was used in the current research, consisting of 40 items and three subscales of informational, diffuse/avoidant, and normative identity styles, as well as identity commitment. Items in ISI-6G were scored based on a five-point Likert scale (1=Strongly Disagree, 5=Strongly Agree).

Female Sexual Function Index (FSFI):

The female sexual function index (FSFI) consists of 19 items to assess six dimensions of sexual function in women, including desire, arousal, lubrication, global satisfaction, and pain. Items in FSFI are scored based on a five-point Likert scale (score range: 0-5). Score zero indicates the absence of sexual activities within the past month. Total score of each dimension in FSFI is calculated by adding the scores of the items that comprise each domain and multiplying the sum by the domain factor. Total score of the scale is determined by adding the scores of the six dimensions. In the present study, we used the Persian version of FSFI.

Sexual Self-Esteem Index for Women (SSEI-W) (Zeanahand Schwarz, 1996):

Sexual self-esteem index for women (SSEI-W) is a questionnaire developed to measure the effective responses to sexual self-esteem in women. In the present study, we used the Persian version of the short form of SSEI-W, which has 32 items that are scored based on a six-point Likert scale (1=Strongly Disagree, 6=Strongly Agree). SSEI-W is composed of five subscales, including experiences/skills, attractiveness, control, moral judgment, and adaptiveness.

After selecting the instruments for the study, they were completed by the participants individually. To observe ethical considerations, a code was used to refer to the participants in all the questionnaires in order to preserve their personal information.

Data analysis was performed in SPSS using frequency, mean, standard deviation, Pearson's correlation-coefficient and linear regression.

Results

Preliminary Analyses

The majority of the participants (39.5%) were aged 31-35 years. The maximum length of marriage (11-15 years) was noted in 86 women (43%), most of whom (48.5%) had only one child (Table 1).

In the ISI-6G, mean score of informational identity pattern was 3.59±0.58, while it was 3.58±0.98 for the normative identity pattern,

3.1±0.87 for the diffuse-avoidant identity pattern, and 3.09±0.85 for identity commitment. In the RAAS, mean score of the secure attachment style was 4.19±0.62, while it was 3.09±0.84 for the insecure/avoidant attachment style, and 2.09±0.83 for the anxious/ambivalent attachment style. According to the results of the FSFI, mean score of sexual function was 2.96±1.23. In the SSEI-W, mean score of sexual self-esteem was 3.05±0.23 in the participants

Table 1. Baseline Characteristics of Participants

Variable	N	%
Age (year)		
26-30	65	32.5
31-35	79	39.5
36-40	56	28
Length of Marriage (year)		
1-5	33	16.5
6-10	60	30
11-15	86	43
>16	21	10.5
Number of Children		
1	97	48.5
2-3	59	29.5
4	21	10.5
>4	23	11.5

Research Hypotheses

Hypothesis One

Hypothesis one stated that there is a significant correlation between the attachment styles, sexual self-esteem, and sexual function of the married women. Participants were categorized into the three attachment styles of secure,

insecure/avoidant, and anxious/ambivalent based on the RAAS scores (Table 3). Pearson’s correlation-coefficient was used to examine the associations between the variables in this hypothesis, demonstrating significant correlations (P<0.05) (Table 2).

Table 2. Results of Pearson’s Correlation-Coefficient for Hypothesis One

Variable		Sexual Function and Sexual Self-Esteem
Attachment Styles	Secure	Pearson’s Correlation-Coefficient Sig. 0.64 0.02
	Insecure/Avoidant	Pearson’s Correlation-Coefficient Sig. 0.38 0.04
	Anxious/Ambivalent	Pearson’s Correlation-Coefficient Sig. 0.38 0.01

Hypothesis Two

Hypothesis two stated that the identity patterns, sexual self-esteem, and sexual function of the married women have significant correlations. Participants were categorized into the three identity patterns of informational, normative,

and diffuse/avoidant based on the ISI-6G scores. Pearson's correlation-coefficient test was carried out to assess the associations between the variables in this hypothesis, and significant correlations were observed ($P < 0.05$) (Table 3).

Table 3. Results of Pearson's Correlation-Coefficient for Hypothesis Two

Identity Patterns	Variable	Pearson's Correlation-Coefficient Sig.	Sexual Function	Sexual Self-Esteem
Identity Patterns	Informational		0.18 0.001	0.16 0.01
	Normative		0.23 0.001	0.29 0.001
	Diffuse/Avoidant		0.31 0.03	0.25 0.04

3.2.3. Hypothesis Three

Hypothesis three stated that the attachment styles could significantly predict the sexual function of the married women. Multiple regression analysis was carried out to examine the predictive ability of the attachment styles, and insecure/avoidant and anxious/ambivalent attachment styles were

analyzed via an equation. According to the results, the anxious/ambivalent attachment style was the strongest predictor of sexual functions in the women ($r = 0.33$; $P < 0.001$), which could explain the sexual function variance by 16% ($\text{Adj. } R^2 = 0.16$) (Table 4).

Table 4. Results of Multiple Regression Analysis for Hypothesis Three

Predictive Variables	Unstandardized Coefficients		Standardized β Coefficient	t	Sig.	r	Adj. R^2
	β	Std. error					
Insecure/Avoidant Attachment Style	0.19	2.1	0.21	4.01	0.001	0.31	0.7
Anxious/Ambivalent Attachment Style	0.12	2.1	0.11	5.32	0.001	0.33	0.16

Hypothesis Four

Hypothesis four stated that the identity patterns could significantly predict the sexual function of the married women. Multiple regression analysis was used to assess the predictive ability of the identity patterns, and diffuse/avoidant and normative patterns were analyzed via an

equation. According to the results, the normative identity pattern was the strongest predictor of sexual functions in the women ($r = 0.23$; $P < 0.001$), which could explain the sexual function variance by 11% ($\text{Adj. } R^2 = 0.11$) (Table 5).

Table 5. Results of Multiple Regression Analysis for Hypothesis Four

Predictive Variables	Unstandardized Coefficients		Standardized β Coefficient	t	Sig.	r	Adj. R^2
	β	Std. error					

Diffuse/Avoidant Identity Pattern	0.16	4.6	0.28	3.45	0.01	0.29	0.3
Normative Identity Pattern	0.12	3.09	0.11	4.09	0.01	0.23	0.11

Hypothesis Five

Hypothesis five stated that the identity patterns could significantly predict the sexual self-esteem of the married women. Multiple regression analysis was employed to examine the predictive ability of the identity styles, and the diffuse/avoidant pattern and identity

commitment were analyzed via an equation. The obtained results supported this hypothesis, indicating that identity commitment was the strongest predictor of sexual self-esteem ($r=0.17$; $P<0.001$), which could explain the sexual self-esteem variance by 8% ($\text{Adj. } R^2=0.8$) (Table 6).

Table 6. Results of Multiple Regression Analysis for Hypothesis Five

Predictive Variables	Unstandardized Coefficients		Standardized β Coefficient	t	Sig.	r	Adj. R^2
	β	Std. error					
Diffuse/Avoidant Identity Pattern	0.10	3.2	0.36	7.21	0.01	0.19	0.2
Identity Commitment	0.11	2.6	0.13	5.44	0.01	0.17	0.8

Hypothesis Six

Hypothesis six stated that there is a significant association between the sexual self-esteem and sexual function of the married women. Pearson's correlation-coefficient was carried out to

examine the associations between the variables in this hypothesis, and a significant correlation was observed ($P<0.05$) (Table 7).

Table 7. Results of Pearson's Correlation-Coefficient for Hypothesis Six

		Sexual Function
	Pearson's Correlation-Coefficient	0.12
Sexual Self-Esteem	Sig.	0.03
	N	200

Discussion

Satisfactory sexual relations in couples are one of the most important factors in the strengthening of families. Sexual desires and the quality of human sexuality are as complex as the living principle. Sexual activities and gender are crucial in marital life. Dissatisfaction with sexual intercourse could give rise to monumental challenges in the marital relationship, such as annoyance, jealousy, competition, revenge, sense of humiliation, and lack of confidence (Christopher and Sprecher, 2000).

According to the results supporting the first hypothesis of the present study, attachment

styles, sexual self-esteem, and sexual function had significant associations. Sexual function and sexual self-esteem could lead to satisfaction or dissatisfaction with life. Improving self-esteem is one of the major incentives for individuals to engage in sexual relations. In this regard, Feeney et al. (2000) has claimed that attachment dimensions are reliably correlated with various aspects of sexual attitudes and behaviors in late adolescence. For instance, the individuals who are highly anxious about their relationships may engage in high-risk sexual practices since they fear that non-compliance

with their partner's wishes may jeopardize their relationship. Moreover, Dhal et al. (2007) have confirmed the significant association of self-esteem and attachment styles in adolescents. The findings of the current research are consistent with the results obtained by Brassard et al. (2015), who reported the potential of sexual self-esteem as a mediator of the association between the attachment styles and sexual function in women.

According to the results supporting the second hypothesis of the present study, identity patterns, sexual self-esteem, and sexual function were significantly correlated among the married women. Furthermore, the results supporting the fourth hypothesis of the current research revealed that identity patterns were significantly associated with sexual function. This is in line with the findings of Kucharska (2015) and Maaref et al. (2015). In this regard, Kirpatrick (1999) has also declared that identity patterns have correlations with sexual function.

According to the results supporting the third hypothesis in the present study, there was a significant correlation between the attachment styles and sexual function in the married women; this is in congruence with the results obtained by Stefanou and McCabe (2012). According to the mentioned study, high levels of anxious/avoidant attachment are associated with poor satisfaction with sexual relations, increased sexual dysfunction, and variable sexual intercourse frequencies and motivations for sex.

In another study, Granota et al. (2010) suggested that women with more frequent physical complaints in various body areas and insecure attachment style were more susceptible to pain during intercourse compared to others. In this regard, our findings are consistent with the studies by Feeney et al. (2000), Birnbaum (2007), Brassard et al. (2007), Tracy et al. (2003), Gentzler and Kerns (2004), and Terimourpour et al. (2011).

According to the results supporting the fifth hypothesis of the present study, identity patterns

had a significant association with sexual self-esteem. Few studies have been performed in this regard. For instance, Mombini Nia (2014) investigated the correlations of identity patterns with the self-esteem and educational performance of male and female high school students in Iran, reporting that identity commitment and self-esteem were significantly correlated and could explain the educational performance of Iranian students. This is in line with the findings of the current research.

According to the results supporting the sixth hypothesis of the present study, there was a significant correlation between sexual self-esteem and sexual function in the married women. Similarly, Baumeister et al. (2003) have claimed that individuals with high self-esteem may engage in high-risk sexual activities more frequently than others, whereas negative sexual experiences and unwanted pregnancies might lower sexual self-esteem. This finding is consistent with the studies by Hensel et al. (2011) and Oattes and Offman (2007). Conversely, Visser et al. (2010) have stated that sexual behaviors are roughly uncorrelated with the self-esteem variables in both genders.

Conclusion

The present study aimed to investigate the correlations between attachment styles, identity patterns, sexual function, and sexual self-esteem in the Iranian married women aged 26-40 years. The evaluations were based on the three attachment styles proposed by Ainsworth (1970) and three identity patterns described by Berzonsky (1988). According to the obtained results, attachment styles and identity patterns were associated with the sexual function and sexual self-esteem of Iranian married women. In this regard, the insecure/avoidant and anxious/ambivalent attachment styles and avoidant and normative identity patterns could be the potential predictors of sexual function in Iranian married women. Moreover, identity commitment could predict sexual self-esteem.

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