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ORAL ABSTRACTS

Gender Nonconformity and Autism: An examination of children with and without mental health diagnoses

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Background and Objectives/Hypotheses

Recent literature suggests gender nonconformity (GNC) and autism spectrum disorder (ASD) are associated in clinical populations. No prior study, however, that has examined this link in a nonclinical sample although both GNC and ASD symptoms are prevalent in the general population. Further, due to our limited knowledge about the relationship between GNC and other clinical diagnoses, it is unclear whether GNC is uniquely associated with ASD. The goal of the present study was to investigate GNC in relation to: (1) symptoms of ASD among children without a mental health diagnosis (i.e., nonclinical sample) and (2) ASD and other clinical diagnoses.

Method

Parents or caregivers (96% maternal report) of children ages 6-to-12 years ($N = 2445$; 51% boys) completed an online parent-report questionnaire. Focal measures included any previous mental health diagnosis, GNC (Gender Identity Questionnaire for Children), and six domains of ASD symptoms (Children's Social Behaviour Questionnaire). Several additional measures were gathered and statistically controlled as necessary (e.g., demographics, general behavioral and emotional problems).

Results

Among children without a clinical diagnosis, GNC was positively associated with ASD symptoms; stereotyped behaviours and difficulties with social orienting were the two categories of ASD symptoms underpinning this association. Furthermore, elevated levels of GNC were associated with clinical diagnosis of ASD ($p < .001$), sensory processing disorder (SPD; $p < .05$), and oppositional defiant disorder (ODD; $p < .05$), respectively.

Conclusions

The present study adds to a growing literature by demonstrating that ASD symptoms and GNC are associated in a nonclinical sample. Subsequent analyses revealed that this link might be due to symptoms associated with deficits in social orienting as well as stereotyped behaviours and hypersensitivity to sensory stimuli. Additionally, elevated GNC was documented among children diagnosed with ASD, SPD, or ODD suggesting that GNC may not be unique to only ASD. Clinicians should be aware of these links, as it may be important for understanding the developmental processes underlying gender variance in children and determining appropriate clinical management strategies.

Evaluation of a Perinatal Sexuality Training: Preliminary Findings for Perinatal Healthcare Professionals and Paraprofessionals

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Background and Objectives/Hypotheses

During the transition to parenthood, the sexuality of future and new parenting couples is greatly affected. These parents must adapt for the wellbeing and stability of their couple and family. A majority of them need information and support in the face of intimate and sexual changes. Perinatal sexuality, however, is rarely addressed by healthcare professionals and paraprofessionals mainly due to a lack of knowledge and training on the subject. To address the critical need for sexoperinatal education, this postdoctoral project has developed, implemented and evaluated three training programs, including one for professionals (nurses, midwives) and paraprofessionals (doulas) in perinatal health.

Method

Participants completed three steps: 1) pre-test with online questionnaires on training needs, attitudes, knowledge and current practice in perinatal sexuality; 2) a two-hour webinar (interactive online training) with theoretical and practical content, followed by an online satisfaction assessment; 3) posttests with the same questionnaires one and two months after the training. Recruitment began in January 2017 and continues through to September 2017; all participants who have completed the 2-month post-test will be included in the preliminary analysis, which is more than 50 participants at this time. To compare and observe the evolution of attitudes, knowledge and current practice over time (pre-test, 1-month posttest, 2-month posttest), repeated-measure ANOVAs will be conducted with the SPSS software. Descriptive analyses will also be conducted (for participants' descriptions, needs and practices) and qualitative data (open-ended questions) will be the subject of a thematic content analysis with QDA Miner software.

Results

These preliminary analyses will provide a sociodemographic description of the participants and identify their initial needs for training in perinatal sexuality. Results will allow identifying whether training has had a positive, negative or neutral impact on perinatal sexual attitudes, knowledge and practice among practitioners in the short (1 month) and medium terms (2 months). More specifically, findings on attitudes will describe comfort, openness, sense of competence, beliefs and values related to perinatal sexuality. Practice-related findings will include the intent and the perceived utility of adopting the behavior, the comfort with the behavior, and self-efficacy according to twelve aptitudes (e.g., initiating discussion, discuss, question, inform, answer questions, propose solutions, evaluate, refer). For each endorsed practice, details will be provided on the timing, frequency, patients involved and topics covered; reasons for not endorsing a practice will also be provided. Finally, perceived barriers to sexoperinatal practice will be presented.

Conclusions

After receiving a brief training in perinatal sexuality, professionals and paraprofessionals will be able to intervene more adequately and more frequently on this topic with their patients, thus fulfilling the information and support needs of the parenting couples during the transition to parenthood. This study is aimed at promoting the sexual and marital wellbeing of the couple and, by extension, the wellbeing of the family, as well as the training of sexual health professionals for ultimately promoting adapted access to collaborative, ongoing and sustainable sexual health services for Quebecers.

A Narrow View: The Conceptualization of Sexual Problems in Human Sexuality Textbooks

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Background and Objectives/Hypotheses

In this presentation, we aim to explore the construction of sexual problems in current North American human sexuality textbooks. Drawing on feminist and critical discourse frameworks, we focus on identifying the dominant as well as the absent/marginalized discourses involved in defining and conceptualizing sexual problems.

Method

We used critical discourse analysis to examine 16 human sexuality textbooks from major North American publishers. The textbooks were predominantly introductory/survey human sexuality texts with publications dates between 2011 and 2017. The most recent editions were used so as to identify current discourses of sexuality.

Results

Medical discourse emerged as the principal discourse with respect to labelling as well as defining sexual distress. In particular, the *American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders* was utilized extensively in defining sexual problems. Alternative conceptualizations, such as the *New View of Women's Sexual Problems*, were included marginally and peripherally.

Conclusions

We argue that current constructions of sexuality knowledge reinforce rather than challenge the existing hegemonic discourses of sexuality. The overrepresentation of biomedical discourses and the underrepresentation of alternative conceptualizations regarding sexual distress have implications for the understanding of sexual difficulties and human sexuality. For example, if students of human sexuality learn primarily from university-level textbooks, they may approach sexuality knowledge as objective rather than shaped by culture, power, and language. Furthermore, students' subjective experiences as well as their general understanding of sexual distress can become uncritically intertwined with the institutionally privileged and legitimized biomedical discourse of sexual distress.

Men's and Women's Use and Creation of Online Sexually Explicit Materials Including Fandom-Related Works

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Background and Objectives/Hypotheses

The Internet has been highly influential in shaping the modern technological era and subsequently the production of and access to online sexually explicit materials (SEM). Online SEM research has focused on graphic forms and negative consequences, particularly by adolescents. Less graphic forms and non-clinical adult use are not as well represented in the literature. Fandom—the realm of fans sharing a common interest—also has adapted to the Internet. However, the sexual content in fanworks (i.e., fan-created material such as stories and art) also has been overlooked. This study examined the use and creation of online SEM by a non-clinical adult population.

Method

Participants (N = 824) completed measures assessing demographic information, experiences using and creating online SEM, and measures of related sexual attitudes. The survey was compiled using Checkbox Survey®, an online tool used to construct and host Internet-based surveys. It was then advertised to workers on Amazon's MTurk®, a crowdsourcing website connecting organizations to individuals who work on their own schedule at a place of their choosing. Participants took 15 minutes on average to complete the survey, and received \$1.00 USD compensation for completing the survey, in line with payment guidelines for surveys of this length.

Results

Most participants reported using online SEM at home (98.6%), while alone in a private place (87.9%). Participants reported using online SEM by themselves (68.5%), with an appreciable minority (26.8%) reporting using online SEM both by themselves and with a partner. Online SEM was typically accessed for free (97.0%) and from open websites (94.9%).

Use of online SEM was widely reported by all participants (79.4%), with men (87.8%) indicating more use than women (67.5%). As expected, few participants reported creating online SEM (3.6% of men, 4.9% of women). Men and women reported similar levels of preferred sexual explicitness in the online SEM they use (mean = 3.6 on a 5-point scale). Fanworks were used equally by men (14.3%) and women (14.7%), although women (3.2%) were somewhat more likely to create fanworks than were men (1.5%). Fandom-related online SEM use was predicted only by more permissive sexual attitudes (one of eight predictors).

Conclusions

Online SEM use is widespread, occurring primarily at home, alone, and in private. Online SEM is typically accessed for free from open websites. Fanworks are used by a substantial minority, with men and women reporting similar levels of fandom activity.

This research updates our understanding of gender differences in online SEM use, and provides insights into the extent to which social norms governing gendered behaviour in the sexual realm may operate in the largely anonymous sphere of online life. It also explores experiences with fandom-related online SEM, contributing invaluable information about a vast but heretofore unknown area of sexual life.

The Psychophysiology of Sexual Prejudice: Is It In Us All?

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Background and Objectives/Hypotheses

Although there have been many recent advancements in LGBTQ civil rights, there has also been an increase in anti-gay hate crimes, many of which specifically target same-sex couples expressing affection in public. This paradoxical occurrence may be related to same-sex couples feeling more comfortable sharing affection in public now that public sentiment has turned in their favour, yet this increase in visible same-sex PDA may simultaneously be drawing out those intent on responding violently to same-sex affection.

Method

The current study sought to examine responses to viewing same-sex public displays of affection (PDA) differ as a function of sexual prejudice levels through examining physiological reactions and emotional expressions. Participants (n = 140) in the current study viewed six different slideshows depicting same-sex PDA, mixed-sex public PDA, everyday items, and disgusting images. Participants' electrodermal activity (EDA), heart rate reactivity (HRV), salivary alpha amylase (sAA), and facial expressions were monitored while they viewed the slideshows. Prior to viewing the slideshows, participants also completed an online survey with measures of sexual prejudice included (e.g., old-fashioned and modern homonegativity).

Results

A series of paired-samples t-tests were performed to assess for differences in sAA levels across the six slideshows. Results indicated that participants, regardless of levels of sexual prejudice, produced stronger sAA responses to images of male same-sex couples kissing and disgusting images than they did to images of everyday items. Conversely, independent samples t-tests comparing mean EDA during each slideshow indicated that those high in sexual prejudice had a significantly lower EDA response to same-sex kissing than participants lower in sexual prejudice. HRV data and facial expression analysis is still underway, but will be completed by August 2017.

Conclusions

The results of the current study suggest that all individuals, not just highly sexually prejudiced individuals, may experience a physiological response similar to disgust when witnessing a male same-sex couple kissing. The results also indicate that in the case of EDA, a decrease in EDA, rather than an increase, may be indicative of a disgust response to male same-sex kissing. Facial expression analysis will be used to test this potential explanation. The possibility of a socialized disgust response to same-sex public displays of affection will be discussed.

Not the Condom Police: Challenges and strategies for Ontario outreach workers talking about HIV transmission risk

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Background and Objectives/Hypotheses

Communication of risk is essential to end HIV transmission. Outreach workers are instrumental to directly inform those most at risk. Communication can be made less effective due to low health literacy levels, and stigma in clients and communities can sometimes increase the challenge of effective HIV risk communication. In order to surmount these obstacles, it is essential to understand the most effective means to communicate HIV risk and to explore the challenges outreach workers face, as well as how they may tailor their messages about HIV risk to the unique needs of different groups of people (e.g. low health literacy).

Method

Literature reviews of HIV risk communication articles were conducted examining effective interventions for improving client health literacy and strategies for communicating about HIV. Focus groups were conducted with outreach workers (N = 20) who work with at-risk populations in Ontario, including: gay, bisexual and other men who have sex with men (GBMSM); street involved people; people who inject drugs (PWID); African, Caribbean, and Black (ACB) communities; indigenous groups, and women. Audio recordings from focus groups were transcribed and a thematic analysis was conducted using NVivo. A follow-up survey is currently being conducted to reach a larger sample of Ontario outreach workers to ensure the congruency of the themes and to collect additional information about this population.

Results

The literature review highlighted the importance of providing information that contextualizes HIV risk. For instance, information about the causes and consequences of HIV creates a sense of personal relevance which makes risk information easier for clients to remember and understand. Analysis of focus group data reveal the following emergent themes (among others): stigma as a barrier for effective HIV risk communication and the use of tailored approaches to meet clients' unique needs and goals. One of the more effective strategies outreach workers employ is using their language and tone to create judgement-free spaces that work to build trust and comfort in their clients. However, outreach workers may need training to assess the literacy levels of their clients, including diverse strategies to communicate effectively with clients who do not understand the outreach workers' initial approach.

Conclusions

The results provide unique insights into the communication of HIV risk conducted by outreach workers in Ontario: the challenges, the successes, and the opportunities for improvements. These findings will help inform policy, program planning, and the evaluation of resources needed to support people living with and at risk for HIV.

Sexual Pain and Female Genital Cutting: Application of Pain Response Conceptual Frameworks

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Background and Objectives/Hypotheses

Female Genital Cutting (FGC) commonly occurs in 28 countries throughout Africa and the Middle East --- many women from these countries immigrate to North America. There is evidence that North American healthcare providers are not fully prepared to treat circumcised women or understand the cultural nuances related to the experience of circumcision, particularly as it relates to sexual health. Somali refugees continue to seek refuge in North America at high rates and represent one of several ethnic groups who will need healthcare that takes into account FGC. FGC is common in Somalia - with most recent prevalence rates at 98%.

Method

This presentation will be a review of research findings regarding: types of FGC, sexual pain following FGC, theories that may be applied to address pain and how they could be adapted to FGC and sexual pain. Particular attention will be paid to the Somali population as an example.

Results

The World Health Organization has outlined four types of FGC. Some women undergo the most extreme form (Type III), including the majority of Somali women. Type III involves infibulation - which includes the removal of the clitoris sometimes, and always includes cutting the inner labia and sewing together the outer labia, thus leaving only a small opening.

FGC can result in chronic medical and sexual complications, including a 1.5-fold increase in risk of sexual pain. Forty percent of Somali American circumcised women have reported pain with vaginal intercourse and 52% reported that FGC had a negative impact on their sexual lives.

Three conceptual models that utilize a biopsychosocial approach, integrating biological, psychological, and cultural considerations will be adapted and discussed: (1) Fear-avoidance pain response; (2) Endurance pain response; (3) Resilience pain response
These pain response models have been applied primarily to chronic back/headache pain in Western populations.

Conclusions

Despite evidence that pain may result from FGC, empirical and conceptual research on FGC and sexual pain lags behind other pain research (e.g., back or headache pain, vulvodynia). This presentation address how existing conceptual frameworks can be adapted to this population. The aims are to: (1) to promote optimal healthcare for circumcised women that will foster healthier intimate relationships (2) help clinicians and researchers understand how women can replace maladaptive cognitions and behaviors with more adaptive responses (3) spark future theory-based research in refugee populations living with FGC in North America.

Predicting Mother-Adolescent Sexual Communication Using the Integrative Model of Behavioural Prediction

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Background and Objectives/Hypotheses

Researchers have shown repeatedly that many parents do not communicate adequately with their children about sexuality. Yet, more extensive parent-child sexual communication is associated with various positive outcomes. Our understanding of why parents are not more active in their adolescents' sexual health education is limited because researchers have not identified factors that uniquely predict the extent of parent-child sexual communication across time and/or the underlying mechanisms. Our goal was to enhance our understanding of factors and mechanisms associated with the extent of parents' sexual communication with their young adolescents based on the integrative model of behavioral prediction (IMBP).

Method

Participants were 303 mothers of young adolescents who completed a survey at Time 1 and Time 2 (six months later). The Time 1 survey assessed background characteristics, skills, attitudes about the outcomes of sexual health discussions, perceptions of social norms, self-efficacy, sexual communication intentions, and extent of sexual communication with their adolescent. The Time 2 survey assessed extent of sexual communication with their adolescent between Time 1 and Time 2. At Time 1, these mothers were 40 years old on average. Similar percentages of mothers were reporting on a daughter (53%) and on a son (47%). About half of these adolescents were in grade 6 (54%) and grade 7 (46%). To recruit the sample, we sent survey packages for parents to 11 schools in rural and urban communities. Teachers distributed the sealed packages to students in Grades 6 and 7 and requested that they take them home to their parents.

Results

At Time 1 and Time 2, mothers, on average, reported talking about the 12 topics between *in general terms only* and *in some detail*. A path analysis showed that, in keeping with predictions based on the IMBP, after accounting for the correlations among the four predictors and sexual communication at Time 1, mothers' attitudes were significantly related to the extent of their sexual communication directly and indirectly; mothers' comfort and self-efficacy were significantly related to the extent of their sexual communication indirectly; and mothers' perceptions of social norms were not related directly or indirectly to the extent of their sexual communication. Mothers' intentions were directly related to their communication behaviour. This model accounted for moderate amount of variance in intention ($R^2 = .29$) and sexual communication at Time 2 ($R^2 = .43$).

Conclusions

Consistent with previous research, mothers on average did not talk extensively with their young adolescent about sexual health topics despite evaluating their comfort, self-efficacy, attitudes, and attitudes of others positively. The results support the utility of the IMBP framework as an effective conceptualization of factors associated with the extent mothers engage in sexual communication with their young adolescent. They also identify intentions as one mechanism by which these relationships may occur. Because comfort, attitudes, and self-efficacy are modifiable personal characteristics, our findings have implications for increasing mothers' sexual communication with their young adolescents, something that mothers (and fathers) want.

Figuring it Out: How Young Women and Men Work Toward Resolving Problems Reaching Orgasm

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Background and Objectives/Hypotheses

Emerging research indicates that many young people experience problems related to sexual functioning and, for some, the corresponding pleasure derived from sex (Akre et al., 2014). Almost all (84%) of young women (N=144; 16-21 years) reported symptoms over two years indicative of sexual problems; anorgasmia was the most common (59%; O'Sullivan et al., 2014). Half (53.5%) reached clinical levels of distress. Men report learning quickly how to recognize feelings of arousal that lead to orgasm (Brotto & Luria, 2014). Objective: To explore how this learning takes place among young people and how anorgasmia is effectively resolved for some.

Method

A qualitative exploratory study was conducted to gain a contextual understanding of young women and men's perceptions of orgasm difficulty for themselves and their partners. A convenience sample of 53 heterosexual, sexually active Canadian adolescents (18-21 years) participated in semi-structured individual interviews, which were audio-recorded and transcribed verbatim, then anonymized. All transcript data related to orgasm experiences were subjected to conduct directed content analysis (Hsieh & Shannon, 2005). Extant theory plays a role in content analysis by suggesting concepts of interest to guide the scope of inquiry and the initial coding scheme. Sexual Script Theory (Simon & Gagnon, 1984, 1987, 2003) informed the design of the current study.

Results

Many women reported having difficulty experiencing an orgasm during partnered sex most of the time, whereas few men reported such difficulty. Most men reported achieving orgasm 100% of the time during partnered sex, consistent with existing research, but many men reported having difficulty with reaching orgasm too quickly, often defined as reaching orgasm before their female partner did. Whereas some women reported that anorgasmia was distressing, they usually reported that it did not take away from their overall sexual enjoyment, citing other priorities, such as intimacy, and the importance of their partner's own orgasm. When female orgasm did not occur, male partners often were upset or distressed, with participants citing reasons such as emasculation, or "failure." Where anorgasmia was successfully resolved, it usually took place in the context of a relationship where partners encouraged experimentation, taking their time, and being able to talk openly about orgasms.

Conclusions

Our findings elucidate factors that contribute to orgasm difficulty, as well as the efforts young people take to learn how to overcome it. Rarely was professional advice sought; young people took it upon themselves to generate solutions. In particular, our findings demonstrate the contextual nature of sexual problems, and the meaning of orgasm difficulty when it occurs during sex with another. We can understand this process in terms of rejecting some sociocultural scripts (e.g., roles depicted in pornography), modifying interpersonal scripts within a relationship to find better ways forward, and adjusting intrapsychic scripts to guide future interactions and partnerships.

A qualitative study of the psychosocial trajectories of late emerging adult female virgins

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Background and Objectives/Hypotheses

Sexual initiation is a normative life transition, occurring for most in adolescence. The more one undertakes this transition out of sync with one's peers, the more likely they are to experience challenges. Recent studies have highlighted stigma associated with virginity in emerging adulthood, but more research is needed to understand the range of experiences of late virginity. Using a sample of 11 female virgins in their mid-to-late twenties, this study explores psychological, social, and sexual experiences of the virgin identity; definitions of virginity; and implications for clinical and sexual education interventions.

Method

An exploratory qualitative study is currently being conducted in Montreal with English-speaking participants aged 24-29 years old who identify as female and heterosexual. Participants were recruited through posters in public spaces, social media, and snowball sampling. Exclusion criteria are having religion as a primary reason for their virginity, and having had at least one experience of penile-vaginal penetration. Eleven semi-structured interviews lasting approximately 90 minutes have been conducted so far, and included questions on virginity, family, peers, romantic relationships, sexual education, internet usage, and support. A questionnaire with sociodemographic questions and validated measures of self-esteem, sexual subjectivity, and life satisfaction was also completed. Content analysis is being conducted using a four-step inductive approach (i.e., preparation of the data, thorough reading of data, category identification, and revision and refinement of categories) supported by NVivo. A coding grid has been developed using a team coding approach that includes inter-rater reliability testing.

Results

Preliminary analyses revealed three significant and recurring themes across participants: (1) emotional experiences (i.e. feelings of shame associated with virginity at their age; impatience to find the right partner; breakdown of hope for virginity loss); (2) social experiences (i.e. anticipation and experiences of rejection and unwillingness from potential partners to engage); and (3) changes in reason for maintaining virginity (i.e. distancing from parental expectations to wait until marriage). Participants varied in terms of sexual experience from no individual or partnered experience to experience of most sexual activities. Most participants (n=10) defined virginity loss for themselves and others as penile-vaginal penetration.

Conclusions

Participants' definitions of virginity loss match most existing research on heterosexual virginity. The diversity in sexual experience also reflects findings that some virgins are sexually active, earning the label of "technical virgins," while others are not. Participants' emotional and social experiences support findings that, among three cultural scripts for virginity (as a gift, a process, a stigma), emerging adults are more likely to adopt the stigma script as they advance in age. This study provides further insight into the ways stigma manifests internally and socially. Implications for interventions with emerging adult virgins and sexual health professionals will be discussed.

The relationship between sexual responsiveness and sexual exclusivity in phallometric profiles

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Background and Objectives/Hypotheses

Some individuals exhibit relatively exclusive sexual interests, as they have sexual interests in certain types of people or activities, whereas others are relatively non-exclusive and show a less discriminating pattern of response. There is limited research on factors associated with exclusivity versus non-exclusivity. In one study, high sex drive was associated with greater sexual response towards preferred gender (Lippa, 2006), but in another high sex drive was associated with a broader range of paraphilic interests (Dawson, Bannerman, & Lalumière, 2016). We examined if the degree of overall sexual responsiveness during phallometric testing was associated with sexual exclusivity in gender/age interests.

Method

A sample of 2,943 males (84% had committed a sexual offence) underwent a comprehensive sexological assessment. Men participated in a clinical interview where they reported on their gender and age interests. They also underwent volumetric phallometric testing, which provided a measure of sexual arousal to stimuli that varied by gender (male or female) and sexual maturity (prepubescent children, pubescent children, and sexually mature adults). During phallometric testing, overall level of responsiveness was assessed via the output index (OI), calculated from the three highest responses during phallometric testing, irrespective of stimulus category.

Results

The OI will be used as a measure of sexual responsiveness and the standardized phallometric responses to each sexual stimuli will be used to assess pattern of gender and age interests. We are currently investigating different statistical approaches to capture the degree of exclusivity in phallometric profiles. The data will be analyzed well ahead of the CSRF conference.

We hypothesize that the OI index will be negatively associated with the degree of exclusivity for age interest, but positively associated for gender interest. We will also conduct analyses only utilizing those who admit to sexual interest in children to see if the hypotheses are still supported-results could be impacted by individuals attempting to fake during phallometric testing. We will also examine the relationship between OI and self-reported gender and age interest.

Conclusions

The implications of the present findings for the field of sexology and forensic psychology will be discussed (for example, implications for our understanding of hypersexuality). We will also discuss future research that we are conducting within this program of research to examine the relationship between high sex drive and sexual exclusivity across multiple stimulus dimensions.

Pre- and Perinatal Factors and Childhood Gender Expression

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Background and Objectives/Hypotheses

Childhood gender nonconformity (GNC) refers to marked cross-gender behaviour and identity. Previous research demonstrated links between marked GNC in clinical samples and several pre/perinatal factors including: handedness, birth order, birth weight, and premature birth. The present study investigated whether these factors are associated with more subtle variation in childhood gender expression in a large community sample.

Method

Parents/guardians of 2245 children ages 6-12 years old (56.04% boys) were recruited via Facebook and other online advertisements to complete an online parent-report survey. Parent-report measures included the Gender Identity Questionnaire for Children (GIQC) to assess the child's GNC, the child's handedness (i.e., right or non-right), birth order (i.e. numbers of older and younger brothers and sisters), whether the child was born premature (i.e., prior to 37 weeks gestation), and the child's birth weight.

Results

In comparison to right-handed children, both non-right-handed boys and girls had significantly higher GNC scores. There were no significant associations between birth order and GNC for girls; however, GNC in boys was positively correlated with number of older brothers and negatively correlated with number of younger brothers. For both boys and girls, there were no associations between GNC and other factors identified as being of potential importance in previous research. These included only child status, premature birth, and birth weight.

Conclusions

In this community sample, consistent with previous clinical research, elevated GNC was associated with non-right-handedness in boys and girls, and higher fraternal birth order in boys. In contrast to clinical studies, girls did not exhibit an association between birth order (e.g., only child status) and GNC. Other factors associated with GNC in previous clinical research were also not associated with GNC in the current sample. Thus, handedness and birth order appear to be robust predictors of even subtle variation in GNC, whereas the other factors examined here may only predict marked levels of GNC as examined in previous clinical research.

Characteristics of nonconsensual sexual experiences explain heterogeneity in the sexual schemas of women

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Background and Objectives/Hypotheses

Nonconsensual sexual experience (NSE) characteristics have been central to the methods of operationalizing NSEs, with the majority of research focusing on samples with homogeneous NSEs (e.g., only penetrative NSEs). Yet, NSEs vary from the developmental stage of onset to the act of the NSE. The current study examined the relationship between various NSE characteristics (e.g., age of onset, type of NSE, NSE self-identification etc.) in the sexual self-schemas of women. We predicted that NSE characteristics would have a larger effect on the sexual self-schemas of women with NSE onset prior to their first consensual sexual experience.

Method

Females-identified participants with a history of NSEs ($N = 481$) were recruited through Amazon's *Mechanical Turk* to complete an online survey of their nonconsensual sexual experiences, followed by a writing task where they reflectively wrote about their sexuality. The essays were analyzed using Meaning Extraction Method (MEM), a computerized text analysis that factor analyzes word presence for quantitatively derived themes (Chung & Pennebaker, 2008). Multiple regression analyses were then used to assess the relationship between the derived schema themes and characteristics of the NSEs.

Results

Analyses revealed nine themes from the essays: virginity, openness, erotophilia, NSEs, romantic, sexual activity, warmth, relationships, and reflection. For women with NSE onset prior to their first consensual sexual experience, the identification of the NSEs with sexual violence labels, the presence of force, and the perception of the NSEs as traumatic all had significant relationships with their sexual self-schemas. For women with NSE onset after their first consensual sexual experience, NSE identification and the presence of penetration seemed to play small roles in their sexual self-schemas.

Conclusions

NSE characteristics seemed more relevant to the sexual self-schemas of women without consensual sexual experiences at the time of their first NSEs. Yet, the characteristics accounted for only small amounts of variance in the sexual self-schemas. Discerning nuances in the relationships between various NSE characteristics and sexual outcomes can assist in the methodological decisions we make in operationalizing NSE. The minimal effect sizes of the NSE characteristics in sexual self-schemas provides some

A Multilevel Meta-Analysis of Global Self-Esteem and Sexual Health Variables

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Background and Objectives/Hypotheses

Sexuality and self-esteem represent two of the oldest topics in psychology. Many sexuality-related variables (e.g., condom use, experiences of sexual pain, sexual satisfaction) can be understood as sexual health elements (Bean et al., 2002; WHO, 2006), and there is a considerable, albeit disconnected, literature in which sexual health variables have been studied alongside self-esteem. Existing reviews of this literature (e.g., Baumeister et al., 2003; Cole, 1997; Goodson et al., 2006), however, are limited by narrow focus, small samples of effects, and subjective or biased synthesizing techniques. We therefore conducted a comprehensive meta-analysis of the association between self-esteem and sexual health.

Method

We searched both *psycINFO* and *PubMed* for topically relevant articles, as well as conducting backward and forward searches, alongside listserv solicitations for unpublished data and email solicitations for incompletely reported data. Our final meta-analytic sample consisted of 679 correlations from 263 studies (total $N = 194,704$) across a wide-range of sexual health variables (e.g., safe sex, sexual permissiveness, sexual function). We coded both sample-level (e.g., gender, sexual orientation, and age of participants) and variable-level (e.g., internal consistency of measures, artificial dichotomization of measures, domain of sexual health) qualities, in order to facilitate theory-driven and methodological-driven moderator analyses. We pre-registered our hypotheses, exploratory research questions, and data analysis plan on the Open Science Framework (<https://osf.io/8yc3d/>).

Results

Many articles in our sample contained multiple relevant correlations. We therefore used a multilevel meta-analysis approach (Cheung, 2015a, 2015b) in order to model both between-sample and within-sample variability in correlations between self-esteem and sexual-health variables. Our synthesis produced three different meta-analytic estimates: (1) a “naïve” estimate (entailing no corrections made to effect sizes); (2) an “optimistic” estimate (effect sizes were corrected for unreliability and artificial dichotomization); and (3) a “pessimistic” estimate (effect sizes were corrected for potential publication bias).

Our analyses suggest that across our sample of correlations, there is a weak, but reliable, positive association between self-esteem and sexual health variables (*naïve* $r = .12$, 95% CI: .09, .15) and that both “optimistic” and “pessimistic” corrections did not affect this estimate much. Results of moderator analyses suggest that correlation magnitude depends on a number of characteristics (e.g., gender, domain of sexual health) that vary between and within samples.

Conclusions

Results of our meta-analytic synthesis support some theoretical accounts of sex and self-esteem, while challenging others. Yet, overall, the strength of association between self-esteem and sexual health variables appears weaker than many would intuitively expect. Our findings should help sexuality researchers, clinicians, and educators alike to better discern when self-esteem might be relevant to attend to within a given domain of sexuality. Future research on the self-esteem and sexual health link would benefit from more frequent experimental approaches and diversity in measurement for global self-esteem; our meta-analytic estimates should help researchers anticipate sample size needs for these pursuits moving forward.

Holy Grail or Nice Option: The Meaning of Penile-Vaginal Intercourse in “Unconsummated” Relationships

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Background and Objectives/Hypotheses

To date, there has been limited research on the phenomenon of individuals in heterosexual relationships who are unable to have penile-vaginal intercourse (PVI), commonly referred to as unconsummated relationships. Previous research has focused primarily on sexual dysfunction causes, such as erectile dysfunction and vaginismus. Little is known about the experiences of individuals in these relationships, or of the meaning they place on PVI and the inability to engage in this sexual activity. The objective of this study was to understand the lived experience of individuals in heterosexual relationships who have been unable to have PVI despite wanting to do so.

Method

The study included semi-structured interviews with 17 individuals from the United States and Canada. Participants were in heterosexual relationships, unable to have PVI despite wanting to do so for 6 months or longer. The reason for the inability to have PVI could not be choice (such as for religious reasons) or a purely physical impairment (such as injury to the genitals or cancer treatment). Participants were recruited through venues that might be visited by individuals seeking help for the inability to have PVI, primarily sex therapists and pelvic floor physical therapists across Canada and the United States. Interviews were transcribed and coded for themes.

Results

Data analysis revealed a range of experiences, both positive and negative, in relation to the inability to have PVI. Participants expressed mixed feelings about sex and PVI, with many describing a sense of missing out from the inability to have PVI, but also expressing that sex is not the most important aspect of the relationship. Some participants viewed PVI as equal to sex, or at least an essential component of sex. For some, PVI was seen as a more mutual and intimate sexual activity that would add significantly to their sex life. Other participants described PVI as something that they would like to experience, but did not think it would significantly change their sex life or relationship.

Conclusions

The inability to have PVI is experienced as both positive and negative by individuals in heterosexual relationships. For some, PVI is seen as essential or equal to sex, while others view it as an appealing option. The results suggest that researchers should consider the language they use to describe sexual activity. For example, the term “sex” may be interpreted as synonymous with PVI and this activity may not accurately represent a person’s sex life. Therapists working with this population should explore the meaning to their clients of sex in general and PVI specifically. More research is needed on this topic.

Sexual Histories of Male Adolescents Who Have Sexually Offended

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Background and Objectives/Hypotheses

This study will examine the sexual experiences of adolescents who have sexually offended. Most of the literature regarding adolescents who have sexually offended focuses exclusively on the adolescents' coercive sexual behaviour, leaving a gap in our knowledge about the broader sexual histories of this population. In the meta-analysis conducted by Seto and Lalumière (2010), only nine of 59 studies examined conventional sexual experiences among their samples of adolescents who had sexually offended. One sexuality-related variable that is emphasized in this literature is sexual abuse history; however, it has rarely been examined in relation to normative sexual experiences within this population.

Method

Archival data from 170 male adolescents aged 12-18 charged with committing a sexual offense will be analyzed. All participants underwent a court-ordered clinical assessment between 2001-2015. As part of the standard assessment battery, participants were asked to complete the Sexual History Form-Revised (SHF; Kaufman, 1994), a 53-item self-report measure that asks adolescents to rate how often they have engaged in a variety of consensual or non-consensual sexual activities. The measure also asks adolescents to rate how often they have engaged with pornography (e.g., looking at and/or taking nude pictures), and how often they have engaged in atypical sexual behaviours (e.g., voyeurism and/or flashing genitals). Other variables included in the analyses include participant age and history of sexual abuse. These will be used to test specific hypotheses outlined in the Results section.

Results

Data have been collected and are ready for analysis. A preliminary examination of the data has revealed that a large proportion of participants did not endorse any SHF items. Given this, the analytical strategy is to dichotomize each item as either "ever experienced" or "never experienced". The frequency of endorsement for each item will then be calculated and plotted to examine sexual behaviour patterns. Based on the broader childhood sexual abuse literature (e.g., Roller et al., 2009), it is hypothesized that participants with a history of sexual abuse will endorse a greater number of SHF items overall compared to those without. Based on previous models of normative adolescent sexual behaviours (e.g., Vasilenko et al., 2015), it is hypothesized that older participants will endorse a greater number of conventional SHF items but will not differ in terms of the number of atypical SHF items endorsed compared to younger participants.

Conclusions

Study findings will contribute to the contextualization of coercive sexual behaviour within normative adolescent sexual development. Examining the relationship between a history of sexual abuse and conventional sexual experiences will also add to our understanding of how sexual abuse shapes the broader sexual experiences of adolescents who have sexually offended. Finally, study findings will help highlight the importance of discussing and fostering healthy sexuality among adolescents who have sexually offended, which is considered a critical component of rehabilitation for this population (ATSA Adolescent Practice Guidelines, 2017).

Community-Based Participatory Research: Opportunities for Human Sexuality Research in Canada

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Background and Objectives/Hypotheses

Community-based participatory research (CBPR) is championed as a best practice to meaningfully impact health, but has not been widely used within sexuality research. CBPR approaches may be used by researchers working with communities they are not a part of (i.e. “outsiders”) in order to meaningfully engage people with lived experiences from communities of interest (i.e. “insiders”). CBPR has been shaped by discussions about the equitable involvement of marginalized communities, as exemplified in the First Nations OCAP® (Ownership, Control, Access and Possession) research principles. We sought to review CBPR principles and best practices to inform greater uptake in Canadian sex research.

Method

This theory paper provides an overview of CBPR resources, including a brief history of the methodological approaches used in Canada. It examines existing and emerging policy and funding mechanisms encouraging CBPR research in Canada.

This paper problematizes current concepts and proposes novel ways of incorporating reflexivity within CBR. It illustrates how dichotomous notions of “insiders” and “outsiders” oversimplify the complex, and often overlapping, relationships between researchers and the communities they work with. Further, it interrogates definitions of, and assumptions about, the people who are, or are not, included within certain communities.

This paper employs an intersectional framework to illustrate the ways identities and social locations impact CBPR processes and knowledge production. It draws on practical examples of community-based research projects with various populations in different geographic settings and scopes to illustrate best practices, potential pitfalls, and opportunities for the enrichment of knowledge production and translation.

Results

Interdisciplinary approaches, which are common in human sexuality research, are well suited to CBPR. Principles associated with CBPR can be endorsed, adopted and integrated to varying degrees within research projects providing a flexible framework for researchers. Advancements in participatory arts-based methodologies such as photovoice and bodymapping further opportunities for CBPR use in this field.

Examples of best practices include greater involvement and meaningful engagement of community members throughout the entire research process (i.e. from conceptualization of the research question to development of research outputs), equitable compensation of community members in recognition of their time and contributions of their lived experience, and integrated knowledge translation approaches.

The value of CBPR approaches are becoming increasingly recognized and encouraged, for example, via the Strategy for Patient Oriented Research (SPOR) by the Canadian Institutes for Health Research. CBPR may also help settler researchers’ contribute to reconciliation and decolonization efforts with Canada’s indigenous peoples.

Conclusions

The use of CBPR within human sexuality research in Canada is nascent. Given changing research, social, and political landscapes, the consideration of CBPR approaches is timely. Many resources are available to support researchers interested in adopting CBPR approaches. Greater attention to positionality and reflexivity by researchers will maximize the value of CBPR approaches in human sexuality research. If the inherent challenges and barriers to CBPR are appropriately navigated then community members, community allies, sexuality educators and health practitioners, academics, and researchers may benefit from enriching experiences and produce research results that better improve our understanding and advancements of human sexuality.

Dating without the binary: How non-binary people approach and navigate romantic and sexual relationships

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Background and Objectives/Hypotheses

Exploring emotional and physical intimacy is a common experience of most emerging adults (Arnett, 2000), yet little is known about the romantic and sexual relationships of non-binary people when heterosexual scripts persist and have remained virtually unchanged over the years (Sakaluk et al., 2014). While scripts for men and women in heterosexual relationships (Gagnon & Simon, 1973), and to some degree for gay and lesbian partnerships (Savin-Williams, 1996), research findings apply to people who identify within the gender binary. This study explores the scripts young, non-binary people draw from and/or create when they approach and navigate romantic and sexual relationships.

Method

Participants (N=100) were recruited electronically via social media and community services and queer groups to complete an online, qualitative study about the dating and sexual experiences of people who identify outside the gender binary. A snowball sampling technique was used to facilitate communication with people from this minority and marginalized group (given that the researchers are cis-gendered). Along with some demographic questions, participants were asked to respond to several open-ended questions about their dating, sexual, and relationship experiences: Where (from whom) they received information; what information they received; how they used or acted upon this information; and any challenges they experienced along the way. An open-ended approach was used so that the voices of this marginalized group could be heard and shared, thereby providing some alternatives to the heteronormative and gender-normative scripts that dominate Western culture.

Results

Participants all identified as non-binary. They also were primarily Canadian residents, with European and British Isles backgrounds, and at least some post-secondary education. The qualitative data were analyzed using thematic analysis (Braun & Clarke, 2006). The main themes that emerged from this dataset include:

Information Sources (where/who): Main sources of information identified were schools, media, and significant people. That said, respondents underscored how the information did not apply well to their identities (heteronormative and binaried).

Content (what): Themes of relationships, sex, and identity exploration were prevalent and their complexities are unpacked in the presentation.

Information Use (how): The content helped to inform participants' expectations, behaviours, and process of self-understanding.

Challenges: The main themes of being misunderstood and safety are explored here.

Heterosexual expectations and ideologies permeated participants' experiences; thus, a rejection of these norms and a process of replacement were central to participants' script construction and use.

Conclusions

This study provided an opportunity for the voices of non-binary people to be heard relative to an area of research in which they have been underrepresented or absent. Data are used to offer preliminary ideas on the scripts that non-binary youth have accessed, accommodated, and sometimes created to help them navigate the dangerous terrain for minority and marginalized groups that comprises the normative society in which we live. The scripting process for youth who identify outside the binary is compared to that of gay and lesbian youth (Savin-Williams, 1996) when scripts for sexual minorities were absent or just emerging.

Grinding Against HIV Discourse: A Critical Exploration of Transmission Risk among Users of Mobile Gay Cruising App

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Background and Objectives/Hypotheses

Men who have sex with men (MSM) continue to have the highest incidence of HIV compared to any other group in Canada. New technologies, such as Grindr, a GPS enabled social networking application has changed the way MSM connect for sexual encounters. At present, there is limited research on how technologies contribute to the rise in HIV. The goal of this project was to gain a deeper understanding of the role of Grindr in risk management regarding STBIs and to explore the way Grindr is shaping MSM's identities and sexual practices to inform efforts aimed at reducing new infections.

Method

Post-structural, and queer theories were used to inform this project. Employing a critical ethnographic methodology, 16 male-identifying Grindr users and 4 sexual healthcare professionals were recruited and participated in semi-structured face-to-face interviews. The interviews were audio-recorded and transcribed verbatim. Final themes were identified collaboratively between the researchers after an independent coding process.

Results

Eight major themes were identified from Grindr users describing the sexual space of Grindr constructed identities, how sexual encounters were facilitated and negotiated, how STI risks were minimized, and how Grindr shaped and is shaped by its users providing new possibilities to them. Three main themes emerged from the interviews with the health professions, including lack of knowledge, the challenges faced of the changing landscape of STI prevention, and implications of technology to their work.

Conclusions

Overall, findings suggest that a unique situation exists within Halifax, Nova Scotia where MSM are increasingly using mobile technologies to connect sexually while health professionals are unequipped to fully understand and overcome the challenges with the rapidly changing community. It is recommended that health promotion activities are adapted to incorporate such apps as part of on-going efforts to reduce new HIV and STI infections.

Behavioural and Emotional Problems in Gender-Nonconforming Children: A Community-Based Study

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Background and Objectives/Hypotheses

Gender nonconformity (GNC) refers to cross-gender behavior and/or identification. There is growing clinical, research, and societal interest in the psychological well-being of children who exhibit GNC. Most research on this issue comes from clinic-based studies of children who experience gender dysphoria; these studies consistently suggest GNC in children is associated with elevated behavioural and emotional problems. It is not clear, however, whether these problems are elevated due to GNC or because clinic-based samples tend to be at greater risk. The present study examines GNC and behavioural and emotional problems a community-based sample of children without previous mental health diagnoses.

Method

Parents reported on their children, ages 6-12 years, via an online survey (N = 1719). GNC and behavioural and emotional problems were reported using the Gender Identity Questionnaire for Children (GIQC) and Child Behavior Checklist (CBCL), respectively; these measures were commonly used in previous clinic-based studies. Other measures examined demographic variables and variables hypothesized to be responsible for the link between GNC and lowered psychological well-being among GNC children (i.e., family mental health history, parental attitudes toward GNC, poor peer relations).

Results

Of the total sample, 42 (2.4%) children showed GNC levels comparable to those typically observed among children seen clinically for gender dysphoria. Of these 42 children, 9 (21.4%) showed clinical range CBCL scores, which is a significant elevation compared to expectations for a nonclinical community sample. CBCL scores were then analyzed as a continuous variable using linear regression. Analyses showed GNC and gender interacted such that CBCL scores were particularly elevated among boys who exhibited GNC. This elevation was mediated by poor peer relations.

Conclusions

By using the GIQC and CBCL, this study provided data comparable to those reported in clinic studies of children experiencing gender dysphoria. GNC comparable to that seen in clinic gender dysphoria samples appears to be evident among a substantial minority of children from the community. These children experience elevated mental health risk at a rate that is consistent with rates seen in clinic samples. GNC appears to be a mental health risk factor for children in the wider community, particularly among boys, and poor peer relations appear to be a key mediating circumstance.

DATA BLITZ ABSTRACTS

Love the One You're With: Monogamy Maintenance in the Face of Relationship Threat

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Background and Objectives/Hypotheses

Monogamy is a near universal expectation in committed romantic relationships in Western societies (Treas & Giesen, 2000), and is typically defined as sexual and emotional exclusivity to one partner. Despite strong sanctions against infidelity, one-fifth of U.S. adults report sexual infidelity in their current relationships (Mark, Janssen, & Milhausen, 2011). Infidelity can have a devastating impact on romantic relationships (DeMaris, 2013); yet, potentially protective factors facilitating monogamy are relatively unknown. This is the first set of results in a program of research identifying and characterizing monogamy maintenance (MM) strategies used when interacting with an attractive alternative partner.

Method

Across two studies, U.S. adults were recruited using a crowdsourcing site (Mechanical Turk) to complete an anonymous survey addressing infidelity (Experiences with Infidelity Questionnaire), monogamy expectations (Monogamy Expectations Questionnaire), a range of other relationship measures, as well as the Monogamy Maintenance Inventory (MMI), designed for the current line of research. All participants received monetary compensation for their participation. Data from Study One (N=369; M age=32.8, 46.3% male, 77.6% Caucasian) were subject to exploratory factor analysis, and the resulting factors were confirmed via CFA using a second sample (N=287; M age=34.5, 50.2% male, 77% Caucasian).

Results

The majority (94.8 and 87.5%) in both samples used at least one MM strategy during an episode of strong attraction to or by a potential alternative partner; most used multiple MM strategies. Three distinct MMI factors were identified: Proactive Avoidance (maintaining physical and emotional distance), Relationship Enhancement (strengthening sexual and material bonds to primary relationship), and Threat Management (cognitive strategies to minimize attention to other). Mann-Whitney U tests explored group differences in MMI use. Those in relationships in which monogamy was not fully expected used more Relationship Enhancement strategies (Md=1) than those in relationships where full monogamy was expected (Md=.5). Participants used more Threat Management strategies when experiencing reciprocated attraction (Md=3) than unreciprocated (Md=1). Spearman's rho was calculated to examine associations between relationship experience and MMI use. Uses of Proactive Avoidance and Threat Management strategies were positively correlated to the number of past relationship partners ($r_s=.17$ and $.13$, $p_s<.05$).

Conclusions

The current line of research is among the first to explore the agentic role of a 'tempted' partner in protecting their primary relationships. Individuals are sensitive to levels of relationship threat that their attraction to others poses, and employ a range of strategies to help ensure their adherence to exclusivity. The types of strategies used vary in the types of relationship vulnerability targeted, and may range in degrees of effectiveness. In particular, Threat Management appears to be a "last-ditch" effort when attempting to avoid engaging in infidelity. These findings have important research and clinical implications for relationship maintenance and longevity.

Getting intimate: Associations between intimacy and sexual and relational adjustment among couples coping with female sexual interest/arousal disorder

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Background and Objectives/Hypotheses

Women with Female Sexual Interest/Arousal Disorder (SIAD) report decreased quality of life and sexual and relationship satisfaction compared to healthy controls. Women report that interpersonal factors such as a partner's sexual difficulties and poor sexual compatibility contribute to their low desire, however prior studies rarely included both members of the couple affected by SIAD. Among women with other sexual difficulties such as genito-pelvic pain, greater relational and sexual intimacy is associated with more positive sexual and relational well-being. This study examined the associations between relational and sexual intimacy and sexual and relationship adjustment for women with SIAD and their partners.

Method

Recruited through online, print and radio/podcast ads, women reporting difficulties with desire and arousal were diagnosed via a clinical, semi-structured clinical interview. Using an online cross-sectional survey, both members of 51 couples completed self-report, standardized measures of relational and sexual intimacy, sexual desire, sexual satisfaction, sexual functioning, frequency of sexual behaviors, and relationship satisfaction. Sexual intimacy was measured as the extent to which a person reported disclosure between them and their partner, and their perception of empathic responding (feeling understood and accepted) from their partner during or just after sexual activity. Relational intimacy was measured as the extent to which a person reported their partner as responding empathically in general in their relationship (feeling understood, cared for and accepted by their partner). The Actor-Partner Interdependence Model guided the analyses to account for the non-independence of the dyadic data, and relational and sexual intimacy were considered in the same model.

Results

When women with SIAD reported more sexual intimacy, they and their partners reported more sexual satisfaction and higher frequency of sexual activity, and partners only reported significantly higher dyadic sexual desire. Partners' sexual intimacy was also associated with their own higher frequency of sexual activity. When women reported higher relational intimacy, they reported significantly higher sexual functioning, higher relationship satisfaction, but lower frequency of sexual activity. Similarly, when partners reported feeling more relational intimacy, they reported significantly higher sexual satisfaction and relationship satisfaction.

Conclusions

Greater intimacy is associated with better sexual and relationship adjustment for both members of the couple. It is possible that feeling understood, cared for and accepted may promote enhanced communication and closeness, resulting in higher sexual couple and relationship satisfaction for women with SIAD and their partners. Promoting relational and sexual intimacy may represent a beneficial clinical target by facilitating couples' capacity for empathic disclosure and responding, key components of intimacy.

Talking sexy –but is anyone listening? Perceived partner responsiveness moderates the associations between sexual talk and sexual and relationship well-being

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Background and Objectives/Hypotheses

In the first study examining sexual talk during sexual activity, more mutualistic talk (i.e., focusing on sharing the experience with one's partner) was associated with higher sexual and relationship satisfaction, whereas more individualistic talk (i.e., focusing on one's own sexual experience) was associated with higher sexual satisfaction only. Greater perceived partner responsiveness—interpreting a partner's responses as understanding, validating, and caring—has also been linked to greater sexual and relationship well-being. We expected that perceiving a partner as responsive to sexual talk will strengthen the positive associations between sexual talk and sexual and relationship well-being, compared to perceiving less responsiveness.

Method

Sexually active participants ($N = 326$; 182 female, 143 male, 1 intersex) in committed romantic relationships were recruited via Amazon Mechanical Turk and completed standardized online measures assessing sexual satisfaction, sexual functioning, sexual distress, and relationship quality. Participants also completed measures of their own talk during sexual activity (Jonason et al., 2016; adapted) and how responsive (i.e., validating, willingness to make behavioral changes) they felt their partner was to their sexual talk.

Results

When a partner was perceived to be more responsive to sexual talk, use of more mutualistic talk (versus less) was associated with greater sexual satisfaction and functioning, and less sexual distress. However, when a partner was perceived to be less responsive, use of more mutualistic talk was associated with more sexual distress, and for men (but not women) poorer sexual functioning. Engaging in more mutualistic talk was also associated with greater relationship quality, however this association was not moderated by perceived partner responsiveness.

When a partner was perceived to be more responsive, use of more individualistic talk (versus less) was associated with less sexual distress, and for women (but not men) greater sexual functioning. However, when people perceived their partner to be less responsive, use of more individualistic talk was associated with less sexual satisfaction and relationship quality, more sexual distress, and for women (but not men) poorer sexual functioning.

Conclusions

Findings suggest that using more mutualistic and individualistic talk is beneficial for sexual well-being when a partner is perceived as responsive to this talk, but may be detrimental when partners are perceived as less responsive. In general, using more mutualistic talk appears to be beneficial to relationship quality, whereas more individualistic talk appears to be detrimental, particularly when partners are perceived as less responsive. Mutualistic talk may enhance intimacy by directing attention to the couple as a whole (enhancing sexual and relationship well-being), whereas the self-focused nature of individualistic talk may neglect the couple experience—possibly damaging the romantic relationship.

The Role of Mode of Delivery in Physiological Sexual Arousal Following Childbirth

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Background and Objectives/Hypotheses

In the 1960's, Masters and Johnson documented decreased lubrication, delayed vasocongestive reactions, and a reduction in the vividness of colour change in the labia minora of postpartum women—indicators of lower sexual arousal—as compared to nulliparous women for up to three months postpartum. These characteristics suggest that women who have recently experienced childbirth exhibit less evidence of physiological sexual arousal than nulliparous women; however, these data were based on six postpartum women, all of whom underwent vaginal birth. The goal of the current study was to compare genital blood flow between postpartum and nulliparous women.

Method

Three groups of women were recruited from the community: postpartum women who had a vaginal birth ($N = 7$); postpartum women who had a Caesarean section ($N = 5$); and nulliparous age-matched control women ($N = 9$). Postpartum women were within 24 months of their first birth. Laser Doppler Imaging (LDI) was used to measure blood flow to the vulva during a nature film (baseline) and erotic film (arousal). Participants were asked to rate their subjective sexual arousal during and after the films. In addition, participants completed validated questionnaires assessing sexual function, depression, fatigue, body image, and relationship satisfaction.

Results

Preliminary analyses revealed that there was an effect of group on vulvar blood flow, after controlling for baseline blood flow. Post-hoc analyses suggest that blood flow to the vulva was lower during the erotic film in the vaginal group compared to the Caesarean section group and control group. Groups did not differ in subjective sexual arousal ratings, nor did they differ on any of the validated measures. These analyses are preliminary as data collection is ongoing.

Conclusions

The results of this study suggest that women who have a vaginal birth may experience lower levels of genital sexual arousal for up to two years postpartum compared to women who have had a Caesarean section and age-matched control women. Groups did not differ on subjective sexual arousal ratings or other indices of sexual function. The results of the current study add to the growing literature on postpartum sexuality. As we collect more data, differences within the vaginal birth group will be investigated, specifically with respect to genital trauma during childbirth.

Longitudinal associations between postpartum sexual distress, sexual satisfaction, and relationship satisfaction in a sample of first-time mothers

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Background and Objectives/Hypotheses

Sexual concerns are common after the birth of a child, but the proportion of new mothers who experience sexual distress is unknown. Sexual distress refers to negative emotions about one's sex life, such as guilt, frustration, or embarrassment. In non-postpartum samples, sexual distress is linked with lower sexual and relationship satisfaction. As such, mothers who experience greater sexual distress may be at increased risk for negative sexual and relationship outcomes over time. This study examined the prevalence of sexual distress at three- and six-months postpartum, and the associations between sexual distress, and sexual and relationship during this period.

Method

First-time mothers ($n = 186$, M age = 29.8 years) were recruited from a hospital ultrasound clinic for a larger longitudinal study examining physical and psychosocial functioning in pregnancy and postpartum. Women completed well-validated online measures assessing sexual distress, sexual satisfaction, and relationship satisfaction at three- and six-months postpartum. Structural equation modeling in AMOS was used to test a model that included three predictor variables (sexual distress, sexual satisfaction, and relationship satisfaction at three-months postpartum) and three outcome variables (sexual distress, sexual satisfaction, and relationship satisfaction at six-months postpartum).

Results

Overall, 38% and 33% of women met the clinical cut-off score for sexual distress at three- and six-months postpartum, respectively. The model had good fit, $\chi^2(1) = 10.77$, $p < .01$, CFI = .98. Sexual distress at 3-months postpartum was associated with lower sexual satisfaction ($\beta = -.34$, $p < .001$) and relationship satisfaction ($\beta = -.20$, $p < .01$) at six months postpartum. However, the reverse associations were not significant: sexual satisfaction ($\beta = -.06$, $p < .29$) and relationship satisfaction ($\beta = -.08$, $p < .11$) at three-months postpartum did not predict sexual distress at six-months postpartum.

Conclusions

Sexual distress is common during the first six-months postpartum. Women who reported higher sexual distress at three-months postpartum were less likely to be satisfied with their sexual and romantic relationship three-months later. We found no support for an association between earlier sexual and relationship satisfaction and later sexual distress, suggesting that sexual distress may be a risk factor for poorer sexual and relationship well-being over time. Health care providers working with new mothers should ask about women's feelings of worry, guilt or other negative emotions relating to their sexuality, and direct women to appropriate resources (e.g., counselling) if necessary.

When thoughts during sex are no longer sexual: Examining body image concerns during sexual activity

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Background and Objectives/Hypotheses

The "attentional interference pathway" posits that self-focused monitoring during sex interferes with one's ability to attend to the pleasurable and erotic aspects of the sexual experience. Specifically, negative expectations and distorted beliefs surrounding sex lead to increased anxiety during sexual experiences. Research suggests that body image concerns are associated with lower quality of the sexual experience. Our study extends past research by 1) examining the degree to which individuals attend to their body image concerns during sexual activity and 2) the level of intrusiveness associated with thoughts around body-image concerns, compared to other types of non-erotic thought.

Method

Participants (N = 134, 56.8% women) were recruited using Amazon's Mechanical Turk. Participants were required to be in a long-term committed relationship to participate. Participants completed a questionnaire designed to assess non-erotic thoughts during the most recent sexual encounter (Purdon & Holdaway, 2006). Specifically, participants were asked to list up to ten non-erotic thoughts that they experienced during their last sexual encounter, along with their subjective distress (i.e., anxiety and frequency) associated with each thought. These thoughts were then coded as body image related thoughts or non-body image related thought.

Results

Because the data (e.g., non-erotic thoughts) are nested within participants, we used multilevel modelling to test the within-person associations of body-image related thoughts and distress of non-erotic thoughts. Preliminary results revealed that participants reported experiencing more distress over their body-image related thoughts than the other non-erotic thoughts they reported ($\gamma = 3.34$, SE = 1.18, $p = 0.005$). The model also controlled for the number of thoughts that each participant reported. We will also be examining the prevalence of body image thoughts during sexual encounters, compared to other types of non-erotic thoughts. These analyses are underway.

Conclusions

Our findings are the first to examine body image concerns during sexual activity at the event level. Results highlight that for those who do have body image related thoughts during their sexual encounters, these thoughts are intrusive and anxiety provoking compared to their other non-erotic thoughts. Furthermore, results also support a specific attentional interference pathway for body image concerns. Limitations and future directions will also be discussed.

Are We Comparing Oranges to Tangerines? Invariance Analyses and How Across-Group Comparisons May Not Be Indicating what you Think They Are.

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Background and Objectives/Hypotheses

In sexuality research, self-report measures are often used to assess aspects of human sexuality. When comparing across groups, however, researchers often assume that the measures assess the same latent variable(s) for all groups. Yet, measurement invariance must be established prior to comparing members of different groups in order to conclude that across-group differences are due to true differences and not differences in psychometric properties (Cheung & Rensvold, 2002). The current study will review measurement invariance using sample sexuality measures.

Method

As a part of a larger study, participants (N = 951) in same-gender and mixed-gender relationships (n = 118 males with a male partner, n = 236 males with a female partner, n = 485 females with a male partner, n = 112 females with a female partner) completed measures of sexual communication, partner responses to sexual problems, body exposure anxiety during sexual activities, and sexual satisfaction.

Results

There are many different ways to examine measurement invariance to determine if the measure holds similar meaning across groups. For the current study, we selected four commonly recommended levels for assessing invariance across groups: configural, metric, scalar, and latent mean (Chen, 2008; Schmitt & Kuljanin, 2008). Following this approach, we examined measurement invariance in four consecutive tests, with each one imposing increasingly stringent constraints on the measurement model (Cheung et al., 2002). Using this protocol, apart from body exposure anxiety during sexual activities, all measures were valid for comparisons across males and females in same-gender and mixed-gender relationships. Body exposure anxiety demonstrated measurement invariance for comparisons within gender across relationship type (same- versus mixed-gender) but not between males and females.

Conclusions

The results emphasize the importance of assessing measurement invariance when conducting across-group comparisons. Although many of the measures held for across-group comparisons, body exposure anxiety during sexual activities did not, suggesting that body exposure anxiety is conceptually interpreted differently between men and women. The results of the study suggest that some aspects of sexuality cannot be compared between males and females; as such, future research should examine measurement invariance for other measures of sexuality. Furthermore, research on sexual health should examine measurement invariance across different clinical populations and control groups when conducting comparative analyses.

Prevalence and Predictors of Dyspareunia and Genito-Pelvic Pain in Women 18-24 Weeks Pregnant

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Background and Objectives/Hypotheses

There is limited understanding of the types of genital and pelvic pain that women experience during pregnancy, and whether there are differences in the predictors of dyspareunia (pain during intercourse) and other types of genito-pelvic pain (GPP). Prior research suggests differential predictors of these pain types postpartum, however, this has not been examined in pregnancy. This information is important for understanding the functional impairments women may experience during pregnancy, and identifying potential risk factors. This study aimed to describe the prevalence of GPP and dyspareunia in women 18-24 weeks pregnant, in addition to examining psychological predictors of these pain types.

Method

As part of a larger longitudinal study on pain and sexuality in pregnancy and postpartum, women 18-24 weeks pregnant completed an online survey assessing pain during intercourse and GPP on a visual analogue scale of 0 (no pain) to 10 (worst pain). They also completed measures of sexual distress, depressive symptoms, and pain catastrophizing. All women completed the measure of GPP and the predictors ($n = 712$), however only a subset of women completed the measure of dyspareunia ($n = 320$). Binary logistic regressions were conducted to assess whether the aforementioned variables predicted the presence of GPP and dyspareunia (vs. no pain), and linear regressions were conducted to test whether the predictors were associated with greater intensity of GPP and dyspareunia at 18-24 weeks pregnant.

Results

Of the women who completed measures of both GPP and dyspareunia ($n = 320$), and as indicated by a score greater than or equal to 1 on the visual analogue scales, 6 (1.9%) women reported GPP alone, 183 (57.2%) women reported dyspareunia alone, 27 (8.4%) women reported both pain types, and 104 (32.5%) women reported no pain. For the binary logistic regression models, the overall models were significant indicating that the predictors together distinguished between those with and without GPP ($F(3)=18.64, p < .05$) and dyspareunia ($F(3) = 29.67, p < .05$). Greater depressive symptoms and sexual distress each uniquely predicted the presence of both GPP and dyspareunia. The linear regression model for dyspareunia was also significant ($F(3) = 8.58, p < .05$), however only sexual distress was a unique predictor of greater pain intensity during intercourse. The model predicting intensity of GPP was not significant.

Conclusions

This study is the first to assess and compare the prevalence and predictors of dyspareunia and GPP in pregnancy. Findings suggest that a large portion of women experience dyspareunia in pregnancy and exhibit differential predictors compared to those who report only GPP, highlighting the importance of assessing these pain types separately. The association between sexual distress and depressive symptoms and both pain types at 18-24 weeks pregnant suggests potential risk factors for pain during pregnancy. Findings improve our understanding of the risk factors for dyspareunia and GPP, which may have consequences for postpartum genital pain.

I'll tell you what I want, what I really, really want: Using self- versus researcher-selected sexual films to elicit subjective sexual arousal in women and men

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Background and Objectives/Hypotheses

Non-academic sources (e.g., *Pornhub's Year in Review*, *A Billion Wicked Thoughts*) have suggested that there is substantial variability in porn preferences within and between genders. Despite this, sexual arousal study participants are typically presented with standardized sexual films that are selected by researchers, which likely results in a subset of participants receiving suboptimal stimulation. Although the ecological validity of sexual arousal studies could be improved if participants were allowed to self-select sexual films, only one study has investigated the feasibility and utility of individualized film selection in women, with mixed results. Further refinement of the self-selection paradigm is needed.

Method

Self-identified women ($n = 23$) and men ($n = 21$) were presented with two neutral and four sexual films. Two of the sexual films were researcher-selected for previous sexual arousal research with men or women (*researcher-selected for women*, *researcher-selected for men*). The other two sexual films were self-selected by the participant from a bank of 20 film clips chosen from categories found on popular pornography websites (e.g., pornhub.com, youporn.com). Based on their review of the 20 film clips, participants selected one film that they found most sexually arousing (*self-selected optimal*) and one film that they found least sexually arousing (*self-selected non-optimal*). Participants viewed the six films in a randomized order while they continuously rated their subjective sexual arousal (SSA) using a handheld remote and rated their affective responses (e.g., anxiety, boredom, disgust, interest, relaxation) after each film.

Results

Women and men were expected to exhibit the greatest SSA in response to the self-selected optimal film, followed by the researcher-selected film for the same gender, the researcher-selected film for the other gender, the self-selected non-optimal film, and then the neutral films. For women, the researcher-selected film for women elicited greater SSA than the researcher-selected film for men and the researcher-selected film for men elicited greater SSA than the self-selected non-optimal film. Interestingly, the self-selected optimal film elicited a similar degree of SSA as the researcher-selected film for women. For men, the self-selected optimal film elicited greater SSA than the researcher-selected film for men and the researcher-selected film for women elicited greater SSA than the self-selected non-optimal film; however, the two researcher-selected films elicited similar degrees of SSA. Affective responses to the film types will be discussed.

Conclusions

This study is the first to examine the feasibility and utility of using self-selected sexual films to elicit SSA in women and men. The self-selection paradigm revealed substantial variability in the choices that women and men made for the optimal and non-optimal film categories. Findings suggest that for women, the continued use of researcher-selected films made for women may be suitable whereas for men, self-selection of sexual films maximizes SSA. The potential effects of researcher- versus self-selected sexual films on genital response as well as on the relationship between SSA and genital response (i.e., sexual concordance) will be considered.

It is not only about function! Assessment of sexual distress with four standardized scales

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Background and Objectives/Hypotheses

Sexual distress has become an important aspect of sexual health since it was included as a diagnostic criterion for sexual dysfunction. Different measures of sexual distress exist. Some of them assess distress associated to sexual function, whereas others assess sexual distress independent of function. This is an important differentiation as patients and clinical groups often complain about additional concerns beyond sexual function. The purpose of this study was to compare four measures of sexual distress (two function-related and two general scales) and examine how they relate to sexual dysfunction and the experience of additional sexual concerns.

Method

The final sample was composed of 332 men (Age M = 44.8, SD = 16.3). The majority were heterosexual (78%) and sexually active (89%), and 34% had a sexual dysfunction. They completed an online survey including background and health questionnaires, the International Index of Erectile Function, two function-related distress scales, the Sexual Concerns Inventory-Male (SCIM) and the Expanded Prostate Cancer Index Composite-Sexual Bother (EPIC-SB), and two versions of the sexual distress scale, the Sexual Distress Scale (SDS-12 and SDS-13). They also completed a qualitative question asking about sexual problems or concerns relating to their sexual relationship/life that were not captured by the IIEF.

Results

Of the 125 men that completed the qualitative question, 23% indicated having complaints or problems not captured by the IIEF. More sexually dysfunctional men (41%) than functional men (16%) reported additional concerns ($z = 2.91$, $p < .01$). Half of these concerns were related to relationship/partner issues (e.g., relationship stress, differences in levels of sexual desire) and one third were related to other sexual problems (e.g., unable to hold orgasm, small perceived genital size, HIV status).

The four questionnaires performed similarly when men with and without sexual dysfunction were compared. However, the EPIC-SB produced more skewed scores and discriminated better between these two groups. Regarding the experience of additional concerns, between-group differences were found on both versions of the SDS. After controlling for sexual function, men with additional sexual concerns scored higher on the SDS than men not reporting additional concerns. The SCIM and EPIC-SB did not capture these differences.

Conclusions

Men with and without sexual dysfunction have complaints about very different aspects of their sexual relationships that are not just related to sexual function. This indicates that sexual distress can mean very different things in people's sexual relationships and lives. Although function-related distress measures seem to work well to discriminate sexually functional and dysfunctional men, they do not appear to capture a wide enough variety of sexual concerns. Choosing an assessment instrument that reflects a particular conceptualization of sexual distress can have a great impact on research and intervention results. Recommendations about what instruments to use will be provided.

How emotional are you? Exploring emoji use in young adults

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Background and Objectives/Hypotheses

The use of emojis (and emoticons) have become commonplace given the rise of computer-mediated communication (CMC; e.g., texting, online messaging systems). Despite the growing popularity of emojis, there has been little research conducted to explore who uses emojis, how emojis are used, and what types of emojis are used – especially in romantic and/or sexual contexts.

Method

Participants ($N = 693$) were recruited for an online survey via social media (e.g., Facebook, Instagram, Twitter). On average, participants were 23.6 years old, with 90% of the sample under the age of 30 years. Participants were queried about: relationship history (e.g., number of sexual partners), relationship status, use of dating technologies, emoji use, emoticon use, frequency of sexting, the types of sexually suggestive emojis used, and their most recent emoji use overall.

Results

All participants reported using emojis; 82% of participants reported using emojis in both their text messaging and social media posts. The median and mode for number of texts sent per day was 50. Participants were more likely to have used emojis more recently ($M = 13$ hours ago) in comparison to emoticons ($M = 40$ hours ago); nearly 50% of the sample reported using an emoji within the past 90 minutes. Approximately 77% of the sample reported having ever sent sexts. Of these, 55% reported that emojis appear sometimes, often, or always in their sexts and 53% reported that emoji use has lead to sexting. When asked which emojis were most recently used in sexts, participants reported using the smirk face as a smiley emoji and the tongue as a pictorial emoji.

Conclusions

The rise of modern technologies (e.g., smartphone dating sites, social networking sites), including emoji use, is influencing dating and sexual scripts in tangible ways. Emojis are commonly used to convey additional emotional information in various forms of CMC and appear to be rather ubiquitous. Examining exactly how and why emojis are used in romantic and/or sexual communication may help us further understand individuals who appear to be more 'emojional' (Garcia, 2015) than others.

Anxiety and perceived pain levels of women with and without genital pain in response to pain-related images

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Background and Objectives/Hypotheses

Graded motor imagery (GMI) has been successfully used in physiotherapy as a way to train patients to envision performing pain-causing activities without pain, although it has not yet been applied to genital pain. The goal of GMI is to reduce patient anxiety and to rehearse the activities mentally without pain. The present study was designed as a first step in developing GMI protocols for genital pain patients. The goal of the present study was to determine whether women with penetration-related genital pain would experience more anxiety and anticipated pain when viewing images showing genital pain-related stimuli.

Method

Women with and without penetration-related genital pain were recruited for an online study via Mechanical Turk, targeted Facebook ads, and through pelvic floor physiotherapists. Participants responded to questions about their demographics, sexual function, genital pain, and chronic pain. Then participants were shown a series of 33 images in a random order that fell into the following categories: sitting (soft, anterior focus, posterior focus), walking, running, lifting heavy objects, insertion of a tampon, implied gynecological exam, implied vaginal sexual penetration, actual gynecological exam (with speculum or fingers inserted), and actual vaginal sexual penetration. Participants ranked each image on how anxiety-provoking it was to look at (viewing anxiety), how anxiety provoking it would be if they were the woman in the image (anticipated anxiety), and how much pain (anticipated pain) they would experience if they engaged in that activity.

Results

All participants reported the highest levels of viewing anxiety, anticipated anxiety, and anticipated pain when viewing the gynecological images (both implied and actual; all means in the 3.5-6 range on a scale of 0-9) compared to all other types of images (*ps* all < .001, Cohen's *ds* all greater than 0.6). Compared to women without genital pain, women who self-reported penetration-related genital pain had higher levels of viewing anxiety, anticipated anxiety, and anticipated pain in response to images of sitting (all categories), walking and running (*ps* ranged from .04 - .007, *ds* ranged from .2-1.2). They also reported higher levels of anticipated pain for implied (*p* = .01, *d* = 0.7) and actual sexual penetration (*p* = .04, *d* = .3) compared to women without this pain.

Conclusions

Women with penetration-related genital pain reported higher levels of pain and anxiety to most of the expected stimuli. The next step is to develop a GMI protocol that can be used to determine if women's anticipated and actual pain levels can be reduced through imagery, similar to what has been seen in other GMI therapies designed for pain patients. Such protocols may also be useful for non-pain patients who also expressed high levels of anxiety about gynecological exams.

Is the Latent Structure of Pedophilia Similar to That of Other Sexuality Constructs?

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Background and Objectives/Hypotheses

The objective of this presentation is to present findings from a taxometric analysis of pedophilia and to compare these results to findings from other taxometric analyses of sexuality constructs. Specifically, results from the current project will be compared to previous taxometric work examining hypersexuality, sexual sadism, and other paraphilias. Given the low estimated base rate of pedophilia in the adult male population (approximately 1 %; Seto, 2013) and the extreme perceived deviance of pedophilic behaviour, it has been suggested that pedophilia is a taxonic construct; however, this is inconsistent with most psychopathology research.

Method

Taxometric analyses were conducted using a sample of 2,227 men who admitted to and/or were charged with a sexual offence in Canada. All participants had been assessed at a large Sexual Behaviors Clinic between 1995-2011. Three indicators were used in the analyses. The first indicator is a measure of self-reported pedophilic interest. Participants were asked to rank their level of sexual interest for both males and females in the following categories: under 6 years old, 6-10 years old, and 11 years old. The second indicator is a pedophilia index that was calculated based on volumetric phallometry scores used to assess sexual interest. The third indicator is the total score of the Revised Screening Scale for Pedophilic Interests (SSPI-2; Seto et al., 2015). As per best practice guidelines in taxometric analysis, these indicators reflect unique facets of the construct of pedophilia (Ruscio, Haslam, & Ruscio, 2006).

Results

The results of the taxometric analyses support a dimensional latent structure of pedophilia. Taxometric analyses were conducted in the R environment using the taxometric package developed by Ruscio (2014). Three procedures were used: mean-above-minus-below-a-cut (MAMBAC), maximum eigenvalue (MAXEIG), and latent mode factor analysis (L-Mode). Each indicator included in the analyses was considered valid and exceeded the recommended threshold of Cohen's $d \geq 1.25$ (Meehl, 1995). Comparisons curve fit index (CCFI) values were used to make determinations about the results. CCFI values range from 0 (indicative of dimensional structure) to 1 (indicative of categorical structure), with values between .40 and .60 considered ambiguous and difficult to interpret (Ruscio, 2014). The CCFI value for MAMBAC was .31, for MAXEIG was .29, and for L-Mode was .39. The mean CCFI value for all procedures was .33. Overall, CCFI values support a dimensional underlying structure of pedophilia.

Conclusions

The current findings add support to the position that pedophilia is a dimensional construct. This is consistent with previous taxometric analyses of pedophilia (e.g., Mackaronis et al., 2011). Study findings are also consistent with Mokros and colleagues (2014) who found that sexual sadism is a dimensional construct and with Walters and colleagues (2011) who found that hypersexuality is a dimensional construct. Taken together, these results suggest that sexuality constructs, even those considered atypical, are dimensional in nature. The implications of this conclusion will be discussed.

A qualitative prospective study of casual sexual relationships' development among heterosexual, French-speaking emerging adults aged 18 to 25 in Quebec (Canada)

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Background and Objectives/Hypotheses

Previous research on emerging adults has documented various types of casual sexual relationships (CSRs). From one-night stands to friends with benefits, research has shown how these relationships vary in terms of motivation, sexual behavior, self-disclosure, and emotional involvement. However, CSRs have mostly been studied and compared at one particular point in time or without consideration for their development. Thus, our objective was to describe the experiences and representations that shape the development of CSRs.

Method

Data were drawn from an ongoing qualitative longitudinal prospective study aimed at exploring the development of CSRs in a homogeneous sample of single, heterosexual, and French-speaking adults aged 18 to 25 living in the metropolitan region of Montreal (Quebec, Canada). Participants were purposefully sampled to ensure that various types of CSRs were represented. Over a period of three months, ten participants (seven women, three men) took part in three semi-structured interviews to examine the development of the CSRs they experienced within this time frame. Timelines were elaborated for each CSR. Interview and timeline data were analysed using symbolic interactionist and grounded theory perspectives through open coding.

Results

Preliminary analyses revealed two main categories: getting along and building ties. Getting along first involved consider partners as physically attractive enough to have sex. First sex needed to be "good enough" to consider having sex again. Getting along meant simplicity, and having fun and good sex. Small talk about everyday life and basic self-disclosure, while considered superficial, were necessary to get acquainted. Having interests and values in common was necessary to get along and to consider building friendship or romantic ties. Building ties involved partners getting to know each other by engaging in each other's interests, sharing more intimate information, and further discovering each other sexually. Building ties also involved being able to discuss anything and being upfront on issues and wants. Partners checked on each other's well-being, and provided comfort and support in difficult times. Potential romantic partners also described missing each other and then falling in love.

Conclusions

Studies have rarely taken a close look at experiences and representations that characterize the development of CSRs among emerging adults. Yet, results show that partners' evaluation of how they get along during their first interactions influence the way CSRs will develop. Having "good enough" first sex leads to wanting more sex. Having meaningful things in common was foundational to building friendship and romantic ties. Examining CSRs' development underlines the notion that, to better understand CSRs in the present, researchers should investigate how they came to be. Future studies would benefit from examining CSRs beyond cross-sectional data.

Emotional experiences associated with late virginity: Qualitative findings from the multi-sources project DiverJe

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Background and Objectives/Hypotheses

Social clock theory stipulates that there is an ideal age for each normative life transition. As such, off-time transitioners are more likely to be stigmatized. In the sexuality domain, there is evidence that early sexual onset is associated with lower psychosocial functioning, but only recently has research begun to examine the challenges associated with late sexual onset and the stigma experienced by adult virgins. Little is known about the gendered emotional experiences of late virgins. This study examines the diversity of emotional experience of virgins in their twenties and their needs for sex education and intervention.

Method

A multi-sources research project (DiverJe) on late virginity is currently being conducted in Montreal. Qualitative data has been collected through 90-minute semi-structured individual interviews conducted with 26 adults (58% males, M age = 24) who self-identify as virgins and heterosexual. Participants were recruited mostly through social media. Interviews have been transcribed and vertically coded prior to categorization. In addition, five virtual spaces addressing adult virginity were sampled, selected based on language, free membership, relevance, and level of recent interactions between participants. Consent was provided by all webmasters before extracting content. Content analysis is being conducted using a 4-step inductive approach (i.e., preparation of the data, thorough reading, category identification, revision and refinement of categories). A team coding approach is being used to refine the hybrid coding grid, and to reach an inter-rater reliability kappa above 80%, calculated on the independent coding from two assistants of 10% randomly selected material.

Results

Preliminary findings reveal that adult virgins experience diverse and mitigated emotions. First, the "virgin label" can be difficult to live with (i.e. shame, feelings of deviating from social norms, and of being stigmatized and discriminated; "I know that I shouldn't feel like it, but it's kind of shameful to have to tell that, say, that you're a virgin at 25. I mean when I was 18 it was still kind of cute.") Second, being an adult virgin can be a challenging daily reality (i.e. distress, emotional emptiness, worries about never losing virginity, dread and self-exclusion; "I'm a 26 year old male virgin and quite frankly I'm done with it. I'm sick of being depressed, anxious, shy, and alone.") Third, there is a will to keep their heads up (i.e. pride, hope, acceptance). Both agreeable and aversive emotional experiences coexist within the same individuals and seem to alternate with time.

Conclusions

This study contributes to our current body of knowledge on the diverse emotional experiences associated with off-time sexual transitions from the standpoint of adult virgins. Our findings reveal that the reality of virginity in adulthood lacks visibility, is often stigmatized, and associated with feelings of shame, self-exclusion and with the perception of "being the only one". The clinical and applied implications of these findings will be discussed.

POSTER ABSTRACTS

Coming to Love Oneself: The Relationship between Sexually Explicit Media and Body Image

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Background and Objectives/Hypotheses

Unrealistic beauty standards pervade the media and exposure is linked to negative body image (Bair et al., 2012). Previous research on media links to body image has typically focused on magazine and television exposure (Bury et al., 2016). Far less is known about the impact of sexually explicit media (SEM) on body image, but indications suggest that SEM use has a negative impact (Cranney, 2015; Peter & Valkenburg, 2014). This study explored links between SEM use and aspects of body image (body satisfaction, self-esteem, comfort being nude, and genital self-image) among young adults-the heaviest consumers of SEM (Pornhub.com, 2015).

Method

North American young adults (N=406; ages 19-30; 53.9% female) were recruited through a crowdsourcing website (Mechanical Turk®). Participants completed anonymous online surveys assessing exposure of four types of SEM (Peter & Valkenburg, 2009), perceived realism of the SEM (Peter & Valekenburg, 2006), self-esteem (Rosenberg, 1965), body satisfaction (Garner et al., 1983), comfort with being nude (Weinburg & Williams, 2010), and attitudes about their genitals (Herbenick et al., 2011, 2013). Hayes PROCESS was used to test the indirect effect of SEM exposure through perceived realism on each of the components of body image: body satisfaction, self-esteem, comfort being nude, and genital self-image. All were compensated monetarily for their participation.

Results

Participants had moderate levels of SEM exposure (M = 3.10, SD = 1.44, 3 = 1-3 times a month) and perceived SEM to be moderately realistic (M = 9.25, SD = 4.18). Contrary to findings from previous research, SEM had a positive indirect effect on each of the components of body image: body satisfaction (CI: .1546-.8304), self-esteem (CI: .1730-.6115), comfort being nude (CI: .0038-.0463), and genital self-image (CI: .0533-.3098). Greater exposure to sexually explicit media predicted greater perceived realism, which in turn predicted a more positive body image. Each mediation model was run again separately for men and women. Two gender differences emerged: SEM only had an effect on genital self-image for men and comfort being nude for women.

Conclusions

In contrast to previous research demonstrating negative links between media exposure and body image (Cranney, 2015; Peter & Valkenburg, 2014), higher levels of SEM exposure had a positive indirect effect on body image. Perhaps SEM actors model comfort with their bodies as they engage in sexual activity, reassuring individuals of the range of body types. Alternately, individuals who are more comfortable with their bodies may seek out SEM more frequently. Further research is needed to clarify the relationships among SEM, perceived realism, and body image.

The Content and Correlates of Couples' Sexual Issues

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Background and Objectives/Hypotheses

In contrast to the large body of research that has examined sexual disorders (e.g., Dunn, Jordan, Croft, Assendelft, 2002), we know little about how sexual difficulties play out in romantic relationships. While sexual issues rank among the top problems reported by couples (Sanford, 2003), few studies provide a descriptive account of couples' sexual problems. This study explored which issues partners identify as their top sexual problems. Next, we investigated partners' agreement on their sexual problems and whether agreement is associated with satisfaction outcomes. Finally, we examined whether more severe sexual problems correlate with lower sexual and relationship satisfaction.

Method

A community sample of cohabiting or married heterosexual couples (N=117) completed our lab study. To be eligible to participate, both members of a couple had to complete the study. After consenting to participate, partners were separated and then completed the Sexual Problems Questionnaire (SPQ; Rehman, Fallis, & Dawson, 2014) which lists 28 common sexual issues and asks participants to rate the extent to which each issue is causing a problem in the relationship. After completing the SPQ, participants were asked to rank the top three most important sexual issues in their relationship from those listed in the SPQ. Finally, each partner completed the Global Measure of Sexual Satisfaction (Lawrance & Byers, 1995) and the Quality of Marriage Index (Norton, 1983).

Results

The most frequently reported sexual issues were 1) Frequency of Sexual Relations (M: 13%; F: 12%), 2) Sexual Initiation (M & F: 11%), and 3) Showing Interest in Sex (M & F: 8%). These issues were also rated as the most problematic sexual issues by men (Mfreq = 3.70; Minitiate = 3.64; Minterest = 3.57) and women (Mfreq = 3.78; Minitiate = 3.62; Minterest = 3.61). As expected, greater issue severity was associated with lower sexual and relationship satisfaction for men ($r_{\text{Sev.RelSat}} = -.48, p < .01$; $r_{\text{Sev.SexSat}} = -.60, p < .01$) and women ($r_{\text{Sev.RelSat}} = -.37, p < .01$; $r_{\text{Sev.SexSat}} = -.63, p < .01$). In total, 61% of couples agreed on at least 1 of their top sexual issues, whereas 39% did not agree on any top sexual issues. We are currently analyzing the data to examine the relationship between partner agreement and sexual and relationship satisfaction.

Conclusions

The current study sought to integrate relationship and sex research by exploring couples' most problematic sexual issues. We found that most couples have the greatest difficulty with issues surrounding sexual interest, initiation, and frequency. Results also showed that a small majority of couples agree on their top sexual issues and that sexual issue severity is a critical factor relating to couples' sexual and relationship satisfaction. It is hoped that this research will help clinicians to better understand the content and correlates of couples' presenting issues in a therapy setting.

Are some paraphilic interests healthier than others: Sexual functioning and relationship satisfaction among individuals with paraphilic interests in a community sample.

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Background and Objectives/Hypotheses

Despite increasing concern about the pathologizing of paraphilic interests, little is known about the functioning of those with paraphilic interests in their sexual and romantic relationships. Further, although research has indicated that paraphilias may be associated with problematic behaviours and functioning, including sexual violence, much of this research has focused on clinical populations. To contribute to the small literature relating to paraphilic interests in non-clinical populations, this study examined associations between a variety of paraphilic interests (e.g., sadism, pedophilia, exhibitionism) and sexual and relationship functioning (i.e., sexual satisfaction and pain, perceptions of sexual consent, and relationship satisfaction).

Method

Survey data were collected from a community sample of 646 individuals (men $n = 358$, women $n = 282$, other $n = 4$) across Canada and the United States using Amazon's Mechanical Turk, an online crowdsourcing marketplace. Participants between the ages of 19 and 30 ($M = 26$, $SD = 3.68$) were asked to complete a 45-minute survey on early sexual experiences in exchange for \$2 USD. Participants completed a measure of paraphilic interests developed for use in community samples (Seto, 2012) and reported on various measures of sexual functioning, including the Sexual Consent Scale-Revised (Humphreys, 2009), and an adapted version of the Sexual Satisfaction Inventory (Whitley & Paulsen, 1975). Participants also rated their current relationship satisfaction if they indicated they were in a relationship ($n = 400$).

Results

Relationship satisfaction varied based on the paraphilic interest, with those with masochistic interests reporting more dissatisfaction in their current relationships, while those with pedophilic, hebephilic, or zoophilic interests reported ambivalence toward their current relationships. Self-reported sexual satisfaction also varied based on the paraphilic interests. Specifically, those who reported sadistic, fetishistic, or masochistic interests reported higher levels of sexual satisfaction, while those who reported zoophilic, exhibitionistic, or pedophilic interests reported lower levels of sexual satisfaction. Sexual pain was not reported by the majority who identified as having a paraphilic interest. Finally, many of the paraphilic interests assessed were associated with maladaptive perceptions of sexual consent. For example, while those who endorsed masochistic interests reported awareness of the importance of sexual consent, they also endorsed sexual consent norms (e.g., I believe it is enough to ask for consent at the beginning of a sexual encounter).

Conclusions

Results suggest that many paraphilic interests are not associated with relationship dissatisfaction and problems in sexual functioning, including sexual pain. However, despite this lack of negative associations, many individuals with various types of paraphilic interests reported some degree of maladaptive views toward establishing sexual consent. These maladaptive views toward the establishment of consent have the potential to result in misunderstandings of consent, and potentially incidence of unwanted sexual experiences. Implications and future directions will be discussed, including the importance of recognizing the lack of pathology among those with non-problematic paraphilic interests.

Distance makes the heart grow fonder: A scoping review of sexual and intimate long-distance relationships

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Background and Objectives/Hypotheses

Many romantic couples experience long-distance relationships (LDRs). Based on university samples, estimates indicate that approximately 25-50% of individuals are involved in a LDR at least once (Stafford, 2005). Although most studies focus on university-aged samples, attending university is not the only reason why couples engage in a LDR. Indeed, many individuals are in a LDR because of employment (e.g., military deployment, commuting). Furthermore, the extant research has focused primarily on relationship maintenance characteristics, whereas sexual intimacy has received less focus. The purpose of this presentation is to review the literature on sexual and intimate relationships in various types of LDRs.

Method

We conducted a review of the existing, peer-refereed, literature using the PsycINFO database. Search terms included: long distance relationships, long distance AND relation*, long distance AND relationship maintenance, long distance AND relationship satisfaction, long distance relationships AND sex, long distance AND sexual intimacy, long distance AND intimat*, commuter relationships, military couples, military AND relationship satisfaction, military AND romant*, military AND sexual intimacy, fly in fly out relationships.

Results

Current research indicates that LDR couples report being relatively satisfied with their relationships. Romantic idealization (i.e., viewing partner in an excessively positive light) emerged as an important LDR maintenance factor. Although communication strategies were frequently discussed in the LDR literature, strategies and their rationale varied depending on LDR relationship type. For example, topic avoidance emerged for military samples and was reported to occur because of fears of safety for deployed partners (Knobloch, Ebata, McGlaughlin, & Theiss, 2013). Conversely, topic avoidance was reported in university-based samples during their reunion period with their partner, and occurred because couples did not want to “dampen the mood” of the reunion (Sahlstein, 2006). Unlike relationship satisfaction and maintenance factors, sexual intimacy and sexual satisfaction has been less frequently studied in LDRs, with only two studies in the college-based LDR literature assessing sexual satisfaction (Dargie, Blair, Goldfinger, & Pukall, 2015; Kelmer, Rhoades, Stanley, & Markman, 2013).

Conclusions

Although relationship quality and sexual intimacy are intimately linked, the current research on LDRs has typically neglected the importance of focusing on sexual intimacy in LDRs. Furthermore, assessing sexual intimacy in multiple types of LDRs, such as college-based LDR, military couples, long-distance commuter couples, is particularly important given that sexual intimacy may vary across LDR type. Implications for clinical practice with various long-distance relationship types will be discussed.

Does the distance matter?: Perceptions of geographically close and long-distance relationships

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Background and Objectives/Hypotheses

Research assessing long-distance relationships (LDRs) has found that these individuals experience similar levels of satisfaction to those in geographically close relationships (GCRs). Yet, the media portrays LDRs as challenging and not worthwhile. What is not known is how individuals perceive LDRs. Perceptions are important, since they may impact behaviour, such as the decision to begin an LDR. Therefore, we compared perceptions of sexual and relationship satisfaction, and the likelihood of infidelity in LDRs and GCRs. We anticipated that participants would rate men and women in LDRs as lower on relationship and sexual satisfaction and more likely to engage in infidelity.

Method

Participants will be approximately 300 men and women from Canada and the United States between the ages of 18 and 30 years recruited using MechanicalTurk®, the online crowdsourcing website. They will complete an online survey where they will be randomly assigned to read one of two short vignettes describing a heterosexual couple, Mark and Jennifer, who has been dating for 2 years. The vignettes differ on only one factor: in the first vignette, the couple lives a 15 minute drive apart, in the second, the couples lives a 4.5 hour flight apart. Participants will then be randomly assigned to rate either Mark or Jennifer on their sexual satisfaction, relationship satisfaction, and the likelihood they would engage in extradyadic sexual activity.

Results

To test our hypotheses, a 2 (gender of target; Mark vs. Jennifer) by 2 (LDR vs. GCR) MANOVA will be conducted with relationship satisfaction, sexual satisfaction, and likelihood of infidelity as dependent variables. ANOVAs will be conducted to follow-up any significant effects. Our investigation is currently undergoing ethical review, after which it will be posted on MechanicalTurk® for data collection.

Conclusions

The results of this investigation will provide insight into how individuals perceive the sexual and romantic relationships of men and women in LDRs. Given the extant research suggesting that individuals in LDRs experience similar sexual and relationship satisfaction, and are similarly likely to engage in infidelity, it is our hope that the results of this study can be used to identify stereotypes and subsequently challenge potential negative stereotypes surrounding LDRs. Since LDRs are becoming increasingly common among young adults, it is important to promote accurate information about this unique relationship arrangement.

Wandering eyes: The impact of implied social presence on visual attention to erotic stimuli

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Background and Objectives/Hypotheses

The watchful eye of others often leads people to alter their behaviour by triggering normative or socially desirable behaviour. Since sexuality is generally considered a private and sensitive matter, its disclosure may cause discomfort for some. More specifically, with traditional gender roles suggesting men's dominance and women's submissiveness, women are socialized to inhibit expressions of sexual desire and pleasure. Eye tracking methodology has been used to demonstrate implied social presence and examine gaze patterns to erotic stimuli, but the effects of a broader social context on the distribution of visual attention remains unclear. This gap in knowledge warrants further exploration.

Method

In the present study, we examined the impact of an eye tracker (implied social presence) on women's distribution of visual attention. Using 30 sets of coloured pictures, we compared looking behaviour of 23 women ($M_{Age} = 21.52$, $SD = 4.33$) who were aware that their eyes were being monitored and 22 women ($M_{Age} = 20.09$, $SD = 1.97$) who lacked this knowledge. Each set was displayed for 10 seconds and contained a picture of a man and a picture of a woman appearing side by side. Half of the pairs contained erotic pictures depicting a naked man and a naked woman with visibly aroused genitals (e.g., erect penis and/or engorged vulva) and the other half contained non-erotic pictures depicting a man and a woman in casual clothing (e.g., runway models).

Results

As expected, women in the aware condition exhibited an equal distribution of their visual attention to male and female models. In the unaware condition, however, women not only fixated more on the male models but also had more fixations to the genital regions of the male models.

Conclusions

These results suggest that gendered sexual norms coupled with the need to manage self-presentation may influence women's sexual expressions. The present study corroborates findings that individuals are sensitive to having their eyes tracked and are willing and able to modulate their visual attention in response to this knowledge. Additionally, the present study presents a method to bypass inhibited displays of sexuality and investigate women's authentic sexual attentions. Further research is required to expand these findings and develop strategies to combat the suppression women face in society towards their sexual needs and desires.

Identifying the disruptions in the sexual response cycle of women with low sexual desire

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Background and Objectives/Hypotheses

Various models have been conceptualized to explain human sexual response and sexual dysfunction. While some models espouse a spontaneous type of sexual desire that leads to arousal (e.g., Masters and Johnson), other models emphasize responsive desire that emerges following sexual arousal (e.g., Basson's circular human sexual response cycle). Empirical data on the latter are minimal, however. The goal of the present study was to quantify where and how frequently women with low desire identified "breaks" in their circular sexual response cycles.

Method

A total of 44 women ($M_{age} = 38.70$) participating in a grant-funded treatment outcome study for low sexual desire completed a blank circular sexual response cycle on a worksheet. The researcher then counted how many participants identified a "break" at: reasons for sex, willingness to move forward with a sexual encounter based on these reasons, the stimuli and context that facilitate arousal, any biological and psychological factors that help or hinder becoming aroused, the extent to which the combination of "reasons", "stimuli", and "context" lead to the experience of sexual arousal, the extent to which sexual desire is felt due to awareness of sexual arousal, and the outcome of the sexual experience. Hand-written feedback was analyzed using conceptual content analysis.

Results

We identified breaks in every stage of the sexual response cycle worksheet; however, certain points had a higher frequency of breaks than others. Women were mostly likely to identify breaks at the part of the cycle that corresponded to biological and psychological factors that impact sexual arousal. Women were also more likely to indicate breaks at responsive desire compared to sexual arousal.

Conclusions

Overall, the findings indicate diversity in women's experiences with their low desire in the context of a circular sexual response cycle.

LGBT Health: An Exploratory Study of Nurse Practitioners' Perspectives

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Background and Objectives/Hypotheses

Individuals who identify as lesbian, gay, bisexual, and transgender (LGBT) may have health concerns specific to their sexual orientation/gender identity that may not be recognized by healthcare providers, and that may result in poorer health outcomes than for non-LGBT persons. A current gap in the literature is research that examines Nurse Practitioner (NP) practice as it relates to LGBT people. The purpose of this study is to explore NPs experiences with LGBT patients, and whether they believe they are adequately prepared to provide culturally competent health care that recognizes the diversity and complexity of this patient population.

Method

A qualitative exploratory study was conducted to examine in detail the practice experiences of NPs in providing primary healthcare to LGBT patients. Purnell's Model of Cultural Competence was used as the theoretical framework for the research. A convenience sample of 22 NPs was drawn from the registry of licensed NPs in New Brunswick, Nova Scotia, and Prince Edward Island. Data were collected via semi-structured individual interviews, which were audio-recorded and transcribed verbatim; brief measures of quantitative data were also collected for demographic purposes. Data analysis was conducted using NVivo.

Results

NPs are providing health care to LGBT patients in a variety of practice settings, with a primary focus on issues related to sexual health and wellness, and gender identity. Yet NPs overwhelmingly identify that they did not receive any education specific to LGBT health in their NP training programs. Despite the unique and specific health needs of members of the LGBT community, health care is generally being delivered based on the principle of 'treating everyone the same', often without recognition of the heightened risks associated with LGBT status. Lacking practice experience grounded in education, NPs are primarily relying on their interpersonal and communication skills in their therapeutic interactions with LGBT people.

Conclusions

Healthcare providers such as NPs have a key role in improving the health and well-being of LGBT people. However, they require education to ensure that they possess the knowledge and cultural competence necessary to meet the population health needs of members of the LGBT community. At present, NPs are almost entirely lacking LGBT-specific educational training from their training. This appears to affect the care they provide to LGBT patients, and could contribute to negative health outcomes. NPs would welcome continuing education opportunities as a means of increasing their knowledge and cultural competence in providing care to LGBT people.

Autoerotic Asphyxiation: A Review and Research Proposal to Explore Practitioner Characteristics

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Background and Objectives/Hypotheses

Autoerotic asphyxia involves heightening sexual arousal by deliberately inducing cerebral hypoxia (e.g., Martz, 2003). The majority of research on autoerotic asphyxia is from case reports on those who have died from the practice. Gaining insight into factors leading living practitioners to engage in autoerotic asphyxiation is crucial to understand key features of this population and how to minimize risk through possible treatment efforts. The purpose of this poster is to systematically summarize the literature on autoerotic asphyxiation and to share our research proposal for a study that we are conducting on those who engage in this practice.

Method

We conducted a systematic review of relevant case studies to summarize findings about this population and compare them to what is known about other types of paraphilias. We will share our efforts to collect anonymous online survey data from living practitioners through online forums in order to explore characteristics of this population. At the time of CSRF, we will have started collecting data. We will also collect data from a sample of people with masochism in order to compare those who engage in masochism only, those with autoerotic asphyxiation only, and those who engage in both practices. This comparison is important as autoerotic asphyxiation is currently listed as a subtype of masochism in the DSM-5, but it is unknown whether this is empirically supported. The survey will include questions on sexual interests and experiences, childhood experiences, sexual sensation seeking, and psychopathology and information about the practice (e.g., discovery of interest).

Results

Preliminary results from the systematic review suggested that a key finding in the current research is that bondage and transvestism are associated with autoerotic asphyxiation (e.g., Faccini & Saide, 2012). Furthermore, the vast majority of the case studies have looked at male practitioners and larger studies have confirmed that males predominantly engage in this behaviour (e.g., Byard & Winskog, 2012). We will also share our data collection efforts, challenges that we have experienced collecting the data, and any preliminary results.

Conclusions

There is a lack of research on autoerotic asphyxiation, particularly how these individuals may differ from those with masochism. As such, we expect that the systematic review will be useful in summarizing key characteristics of the population and how they may differ from those with masochism and other paraphilias. We will also share our data collection efforts and any preliminary results, which will increase our knowledge about this population. A better understanding of this population is crucial, as it will provide important information on strategies that clinicians may use to assess and treat these individuals if they present for treatment.

The availability of services and support for student sexual assault survivors at post-secondary institutions across Canada: An assessment of university websites as a gateway to support services.

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Background and Objectives/Hypotheses

The Canadian Federation of Students (2013) estimated that one in four women on university and college campuses across Canada report a sexual assault during their time at a post-secondary institution. Increasing pressure has been applied to post-secondary institutions in Canada to develop meaningful policies and procedures for working with sexual assault survivors and significant progress has been made toward this goal. Once a policy is created however what needs to be done next, to support post-secondary sexual assault survivors, is to ensure that it is easy for survivors to find out what on-campus support services are available.

Method

Students commonly use their electronics devices and search websites for support services. Based on this use of websites for finding support we asked the question of whether resources for sexual assault survivors on Canadian post secondary university campuses are easily found via the university websites. We assessed the top five hits for sexual assault for each university and categorized these hits as support services, news stories about recent sexual assault issues, research papers or stories by faculty, or other. We explored these websites three times over a seven month period to determine whether the website resources available to sexual assault survivors, via the top five website hits for sexual assault at each school, were stable over this seven month time period.

Results

We found that of the 57 schools surveyed seven did not have any mention of sexual assault or sexual assault services on their website. Several other schools had news stories as their top hits or returned an error message. Combined we found 28% of Canadian universities did not have clear links to services for sexual assault survivors via a search of their webpage. Upon redoing these searches three and six months later we found that for several of the schools their top hit for sexual assault had changed, usually in the form of a news story, research article or policy link which changes the ease of finding university resources for sexual assault survivors.

Conclusions

While universities are paying closer attention to the meaningful creation of policies and services to support survivors of sexual assault it is also important that links to support services be clearly available on university websites and that these links stay stable over time.

Variation in anxiety disorders among subgroups of the LGBTQ* Population: A critical review of the literature and suggestions for future research.

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Background and Objectives/Hypotheses

Mental health issues in the LGBTQ* community, specifically anxiety disorders, receive considerable media attention. It is not clear however in the media reports what sub-groups of the LGBTQ* population have the highest rates of anxiety disorders. Anxiety in LGBTQ* individuals is greater than in the general population, yet it is challenging to compare results between studies of anxiety in LGBTQ* individuals due to variations in study design and the instruments used for measuring anxiety and sexual/ gender identity across studies.

Method

To gain a better understanding of how the LGBTQ* subgroups uniquely experience anxiety we conducted a critical analysis of the literature to assess whether differences in anxiety have been reported for these subgroups. We conducted a detailed review of the literature using SCOPUS and PubMed. We searched for anxiety or anxiety disorders for each subgroup of the LGBTQ* acronym.

Results

We found 529 studies in total. Of these studies very few dealt specifically with anxiety disorders in LGBTQ* individuals. We expected to find the LGBTQ* community to be at greater risk for anxiety disorders than their heterosexual counterparts. This was confirmed by our analysis. Of the studies we did find very few studies compared sub-groups under the LGBTQ* umbrella, for differences in anxiety or mental health issues. We did find that individuals without a clear sexual orientation/ gender identity appeared to be most likely to report heightened levels of anxiety and mental health issues, compared to other respondents. In this poster presentation we will summarize the relevant literature and provide an overview of the various methodologies and research findings on anxiety for individuals in LGBTQ* subgroups.

Conclusions

We conclude that more research is necessary to understand the unique mental health and anxiety issues present in the various LGBTQ* subgroups. Furthermore, the use of standardized measures of anxiety, mental health wellness, sexual orientation and gender identity across research studies would be beneficial in understanding what different mental health issues each subgroup is facing. This data is highly beneficial for the development of strategies for ameliorating heightened anxiety in individuals that make up the LGBTQ* population.

The interplay between religiosity and empathy on dehumanization attitudes toward individuals in consensually non-monogamous relationships

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Background and Objectives/Hypotheses

Consensual non-monogamies (CNM) in contrast to monogamous relationships are relationship styles in which individuals engage in romantic and/or sexual relationships with more than one person at a time. The prevalence rate of CNM relationships is estimated at approximately 4 - 5% in North America. Multiple studies have found that misunderstandings, misconceptions, and negative attitudes exist towards individuals in CNM relationships. These studies include reports that religiosity is a factor that can influence whether an individual has a negative attitude toward individuals in CNM relationships.

Method

What is not known is whether this negative relationship between attitudes toward CNM individuals and religiosity can be mitigated by an increase in empathetic traits in individuals who score high on religiosity. What is also not known is whether the perception of individuals in CNM relationships as less human (more machine like or animalistic - referred to as dehumanization) by individuals high or low in religiosity can be altered by high scores on empathetic traits. A religiosity scale, and empathy scale, chosen based on previous literature supporting the validity of our surveys, were used. After completion of these surveys our undergraduate participants (over 300) were given definitions of polyamory, open, swinging and cheating relationships. To measure our participants perceptions of humanness in individuals in CNM relationships they subsequently completed a personality trait scale to indicate their perception of personality traits in individuals from CNM relationships.

Results

The findings of this study suggest that polyamory, open, swinging, and cheating relationships are attributed less humanness than monogamy, but there is no perceived difference in humanness between consensual and non-consensual non-monogamies. Perspective taking (a component of empathetic concern) in combination with levels of religiosity did have an impact on resulting levels of dehumanization, that is, participants with lower levels of religiosity rated the CNM relationships as more human when they were high in perspective taking, and those higher in religiosity did not dehumanize any relationships significantly differently, regardless of their level of perspective taking.

Conclusions

From this study we conclude that religiosity and empathetic concern have a complex relationship that influences whether dehumanization is present toward individuals in the four types of CNM relationships we studied.

Emotion Regulation in Couples Affected by Female Sexual Interest/Arousal Disorder

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Background and Objectives/Hypotheses

Female Sexual Interest/Arousal Disorder (SIAD) is associated with poor psychosexual wellbeing¹. Women's low desire and arousal impacts their sexual and romantic relationships, meaning there may also be consequences for their partner. Research suggests that women with clinically low sexual desire and arousal report more difficulties regulating negative emotion than controls¹, and effectively managing negative emotions predicts marital satisfaction over time². Thus, emotion regulation ability may be associated with women's (and partners') adjustment to SIAD. This study examined whether more difficulty regulating negative emotion was linked to poorer psychological, relational, and sexual wellbeing in couples affected by SIAD.

Method

Fifty women diagnosed with SIAD via a clinical interview and their romantic partners were recruited via flyers, online postings, and radio/podcast advertisements to complete an online cross-sectional survey. Both members of the couple independently completed the Difficulties in Emotion Regulation Scale, which assesses one's ability to cope with negative emotions, as well as their awareness and acceptance of negative emotions. Participants also reported on their levels of depression, anxiety, relationship satisfaction, sexual distress, and dyadic sexual desire. To account for the non-independence of the dyadic data, analyses were conducted using multilevel modeling guided by the Actor-Partner Interdependence Model.

Results

Women with SIAD who reported greater difficulties in emotion regulation reported more symptoms of depression and anxiety, and lower levels of relationship satisfaction. Partners of women with SIAD who reported greater difficulties in emotion regulation reported more symptoms of depression and anxiety and higher levels of sexual distress, but had female partners who reported higher levels of dyadic sexual desire.

Conclusions

Findings suggest that greater difficulty managing and modulating negative emotions may have consequences for the psychological, sexual, and relational wellbeing of both women with SIAD and their partners. Emotion regulation skills may, therefore, be an important target for interventions to help couples cope with SIAD. The finding that poorer emotion

Separation Anxiety and Gender Nonconformity in a Community Sample of Children

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Background and Objectives/Hypotheses

Previous research suggests childhood gender nonconformity (GNC; i.e., cross-gender behaviour) is associated with childhood separation anxiety (SA; i.e., distress related to separation from an attachment figure) in males. However, the association has only been examined in clinical samples of boys with extreme GNC or through retrospective studies in nonclinical samples of adults. Thus, the current study examined whether (1) findings from clinical studies of boys referred for GID/GD can be extended to nonclinical samples, (2) the SA-GNC association exists in girls, (3) SA is a unique internalizing problem associated with GNC, and (4) parental factors moderate the SA-GNC association.

Method

Parents and/or caregivers of boys (n = 892) and girls (n = 933) age 6-to-12 years completed an online parent-report questionnaire measuring GNC, SA, parental factors (i.e., parenting style, parent-child relationship, willingness to serve as an attachment figure, and attitudes towards gender stereotypes in children), general psychopathology, and demographic variables.

Results

Higher levels of GNC were associated with more SA in boys, even when statistically controlling for general psychopathology and demographic variables. There was no such association found for girls. Multiple regression analyses showed that authoritative parenting, closeness in the parent-child relationship, willingness to serve as an attachment figure, and liberal attitudes towards gender stereotypes in children moderated the GNC-SA association.

Conclusions

This study provides support for the notion that SA may be a particularly unique form of psychopathology related to GNC in boys in nonclinical samples. Additionally, it highlights the possibility of the importance of parental factors in protecting against SA in gender-nonconforming children. In light of these findings, gender-nonconforming children may benefit from clinician screenings that are specific to SA as well as parental intervention methods to assist in alleviating the distress associated with SA.

Throwing a hotdog down a hallway: What do nulliparous women *really* think will happen to their sex life after childbirth?

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Background and Objectives/Hypotheses

Media portray the post-vaginal birth vagina as being incompatible with satisfying sexual interactions, while Caesarean sections are depicted as a way of preserving the integrity and tightness of the vagina, maintaining one's sexuality intact. Although most research studies do not support these claims, it is unclear whether women tend to believe what they see and hear in media. The goal of the current study was to investigate nulliparous women's beliefs about the effects of mode of delivery on sexuality, and examine the characteristics of women who endorse beliefs congruent with those portrayed in media.

Method

Nulliparous women who indicated that they were interested in giving birth in the future ($N = 1428$) completed an online survey about preferences for and perceptions of childbirth. Participants were asked to provide their preferences for mode of delivery and rate their agreement with nine statements regarding the effects of mode of delivery on sexual function (e.g., "Having a C-section will prevent future sexual problems compared to having a vaginal birth"). A sum score was created with these nine items, with higher scores indicating greater endorsement of beliefs congruent with media depictions. Participants were asked to indicate how influential they believed different sources of childbirth information to be as well as complete the Attitudes Towards Women's Genitals Scale.

Results

Approximately 12% of women in the study indicated that they would prefer a Caesarean section as opposed to a vaginal birth. Agreement with statements about the effects of mode of delivery on sexual function ranged from 16% ("A partner will not like the look of my vulva after I have a vaginal birth") to 48% ("My vagina will be 'loose' after I have a vaginal birth"). Results of a multiple linear regression analysis indicated that the following participant characteristics were independently predictive of endorsing beliefs congruent with media portrayals of sex after childbirth: preferring a Caesarean section; identifying as heterosexual; having negative attitudes towards women's genitals; and learning about childbirth through media.

Conclusions

Many nulliparous women endorse beliefs about the effects of mode of delivery on sexual function that are congruent with those depicted in media, despite the fact that the majority of research studies do not support these portrayals. As the rates of Caesarean sections continue to increase worldwide—with some of these being at the women's request—providing nulliparous women with accurate information about childbirth is essential for making informed decisions about childbirth.

Assessing incarcerated men's interest in healthy sexual relationship programs. Do they want them?

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Background and Objectives/Hypotheses Research investigating sexual health based programs in adult prison inmates has primarily focused on HIV sexual risk prevention (Senkowski, Norris, McGaughey, & Branscum, 2016). The investigation/facilitation of healthy sexual relationships programming for adult male inmates has yet to be seen within Canadian prisons to date.

The two aims of the current analysis were to: a) determine whether adult male inmates in Canadian prisons perceive programs/services addressing healthy sexual relationships, prior trauma, and other sexual topics of interest/relevance, and b) understand what topics/issues related to healthy sexual relationships would be most advantageous for correctional programs and services.

Method

Incarcerated men (N = 74, Mean age = 35.84, range = 19-70) were asked to participate in a larger survey on sexual consent and boundary setting relating to their previous relationships. Data were collected at the Ottawa Carleton Detention Centre, and Maplehurst Correctional Complex. Participants were asked if a program/service within corrections addressing healthy sexual relationships and other sexual topics would be beneficial to themselves or others. Additionally, they were asked what services they would like to see offered, and whether programming on sexuality topics would be useful for either themselves, or their peers. Braun and Clarke's (2006) thematic analysis approach was used to analyze the qualitative responses.

Results

A total of 42 participants (57%) reported interest in programs/services on healthy sexual relationships and other sexual topics, 15 (20%) reported no interest, and 17 (23%) did not respond. Results indicate that topics such as consent, healthy sexual relationships, domestic violence, previous sexual conflicts, and safe sex/sexually transmitted infections are of high interest to the men in the study. Participants believe programs of this nature would allow for self-improvement upon release, improvement in healthy sexual relationships and allow for some inmates to express their sexuality more openly. Specific populations that inmates reported would benefit from these programs/services included young offenders, sex offenders, individuals with domestic violence history, and incarcerated LGBTQ individuals. Negative opinions toward implementing programs/services primarily focused on lack of interest among incarcerated men, prison culture not being able to embrace topics on sexual relationships in a mature way, as well as pamphlets being a potential alternative.

Conclusions

The data suggests that incarcerated men are not only open to programs/services targeting healthy sexual relationships but that the majority believe this type of programming would be beneficial to them and other specific incarcerated populations. Multiple themes emerged addressing possible topics for programs/services, as well as specific incarcerated populations that may benefit from these resources. Findings may be used to structure and implement programs targeted towards incarcerated men that in turn may lead to reduced recidivism rates for sexual and domestic violence offenders. Additionally, there is potential for programming to provide sexual empowerment for individuals with traumatic sexual histories.

Sex Education, Sexual Self-Esteem, Sexual Problems, and Future Distress: Is there a Disparity in the Quality of Home Education Provided to our Sons and Daughters?

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Background and Objectives/Hypotheses

Young people routinely deal with problems in sexual functioning; 79% of males and 84% of females (16-21 years) reported at least one problem over a two-year period (O'Sullivan et al., 2016). Sex education helps reduce negative health outcomes, such as unwanted pregnancies and STIs (Chin et al., 2012), yet research has not examined how sex education influences later sexual problems. This study assessed links between quality of home and school sex education and development of future persistent and distressing problems in sexual functioning. The role of sexual-self-esteem and self-disclosure in the development of these problems also were assessed.

Method

Adolescents were recruited from eight Eastern Canadian high schools. They were male ($n = 180$) and female ($n = 225$) between the ages of 16-21, primarily heterosexual (89.9%), Euro-Canadian (89.9%), and most spoke English as a primary language (93.5%). All were recruited in person or via online advertising from sites, such as Facebook®, as well as crowd funding sites (e.g., FusionCash®). Parental consent was obtained for minors to participate. Participants completed online measures assessing sexual functioning (Female Sexual Function Index--Rosen et al., 2000; International Index of Erectile Function--Rosen et al., 2000; Premature Ejaculation Diagnostic Tool--Symonds et al., 2007), sexual distress, sexual self-esteem, sexual self-disclosure, and quality of school and home sexual education. The same measures were completed at 6, 12, 18, and 24 months follow-up. Seventy-eight percent of the sample was retained across waves.

Results

Overall, adolescents provided an average quality rating of 3.55 on a scale of 1-5 for school sex education, and a quality rating of 2.87 on a scale from 1-5 for home sex education, with 1 indicating 'very poor' and 5 indicating 'excellent.' Logistic regression analyses revealed that high sexual self-esteem was related to fewer sexual problems for both male (OR = .90) and female (OR = .94) adolescents, but sexual self-disclosure was unrelated to either male or female's adolescent's sexual problems or distress. After controlling for sexual self-esteem, perceived quality of home sex education predicted fewer sexual problems (OR = .80), yet more distress about these problems (OR = 1.51), for male adolescents only. Home sex education was unrelated to sexual problem and distress among the female adolescents. No associations were found for school-based sex education and likelihood of reporting problems in sexual functioning for either male or female adolescents.

Conclusions

Interestingly, higher quality home sex education was associated with fewer problems in sexual functioning but more distress among male adolescents. This suggests that the sex education content we are providing sons may help reduce risk of onset but not equip them with the tools to deal with sexual issues should they arise. School sexual education appears to be unrelated to experiences of future problems, likely because most curricula do not address functioning in any form. High sexual self-esteem seems to operate as a protective factor against experiencing future sexual problems and distress.

The effect of shock-induced anxiety on women's sexual arousal

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Background and Objectives/Hypotheses

Anxiety has been shown to influence sexual arousal, but the direction of this effect varies. Some studies have found facilitatory effects, while others have found inhibitory effects. The goal of the present study was to examine mechanisms that explain the differing results. In particular, we were interested in the role of cortisol and dehydroepiandrosterone-sulfate (DHEAS) in moderating the relationship between anxiety and sexual arousal in women. Our hypotheses were 1) Shock-induced anxiety would decrease genital and psychological arousal compared to a control condition. 2) Cortisol would be negatively correlated with arousal, while DHEAS would be positively correlated with arousal.

Method

Participants ($N = 28$) engaged in a modified version of the Neutral-Predictable-Unpredictable (NPU) threat test (Schmitz & Grillon, 2012). They went through a training phase that included three shock conditions: neutral (No shock), unpredictable (anxiety) shock, and predictable (fear) shock. They were then divided into either a neutral or unpredictable shock (anxiety) condition for a test phase and watched an erotic video while their genital and psychological arousal were measured. Genital arousal was measured with a vaginal photoplethysmograph and psychological arousal was measured continuously and after the film. Anxiety was measured via eye-blink response to startle stimuli and self-report. Participants also provided salivary hormone samples throughout the study.

Results

Participants in the anxiety condition reported significantly lower psychological sexual arousal compared to the neutral condition. Contrary to expectations, participants in the anxiety condition had significantly higher genital arousal than the neutral condition. Cortisol levels were significantly negatively related to psychological arousal, but not genital arousal. DHEAS was not significantly related to genital or psychological arousal.

Conclusions

Overall the patterns in the data, suggest that anxiety lowers psychological sexual arousal while perhaps increasing physiological genital arousal. This replicates at least one previous study on the relationship between anxiety and sexual arousal and is consistent with the theory that increased sympathetic nervous system activation is beneficial for women's genital arousal. Additionally, the present study provides further support for the negative relationship between cortisol and sexual arousal.

A Qualitative Investigation of Sexual Consent Education and Initial Sexual Experiences

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Background and Objectives/Hypotheses

Although the topic of sexual consent is increasingly becoming an integral part of the public discourse surrounding sex and sexual education, little qualitative research has been done to provide contextual information on young people's perceptions of sexual consent education. This study examined young adults' perceptions of the presence or absence of education about sexual consent in their childhood and early adolescence. In particular, we focused on the context, content, perceived necessity, and consequences associated with the presence or absence of such education.

Method

Participants were 49 current or former students from New Brunswick universities and colleges who had previously endorsed at least one sexual experience prior to the age of 16 on an online survey of early sexual experiences and who had agreed to participate in the follow-up interview. Consistent with the sample from the online survey (N = 520), participants in the current sample were predominately females (79.5%) and Caucasian (80.0%), and the mean age was 19.9 years (SD = 3.0). Individuals completed semi-structured interviews broadly focused on the context, nature, and short and long-term consequences associated with sexual experiences during childhood and adolescence. Using a constant comparison process in a grounded theory approach (Corbin & Strauss, 2015), transcribed interviews were coded for themes regarding education of sexual consent.

Results

Many participants reported never explicitly engaging in conversations about sexual consent with parents or educators. Of those participants, some felt that such conversations would have helped them navigate their initial sexual experiences in a more adaptive manner. Some participants reported that although they had talked to parents and educators about sexual consent, they perceived such conversations to be too superficial or abstract in nature to inform their understanding of consent at the time, e.g. limited to "good touch" and "bad touch". Most participants who had engaged in open dialogue about sexual consent with parents or educators reported a greater understanding of sexual consent, which in turn, helped guide their initial sexual experiences. The majority of participants felt that sexual consent should be an important part of parent-child sexual communication and school sex education.

Conclusions

According to interviews with our participants, the topic of sexual consent is lacking in school sex education curricula and parent-child sexual communication. When informative, open, and frank, conversations about sexual consent can have a positive impact on sexual experiences of youth. Our participants suggested that such conversations should start at an early age and involve language that is specific and appropriate for the individual's developmental stage.

The SexFlex Scale: A Measure of Flexibility When Approaching Sexual Problems

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Background and Objectives/Hypotheses

During sexual activities, individuals often follow a sexual routine—a sexual script. What happens, though, when sexual preferences/activities go 'off-script'? Sexual problems, such as differences in sexual preferences, penetration difficulties, or pain, may interrupt an individual's preferred sexual script. Flexibility when these disruptions occur is thought to be important for maintaining sexual satisfaction (e.g., Barksey et al., 2006), however, there is a lack of empirical studies examining this relationship. Part of the reason for this lack of research is that there exists no measure of sexual script flexibility. The current study sought to develop a measure of sexual script flexibility.

Method

An initial item pool of 13 items was generated based on themes from the sexual scripts literature and components of the Coping Flexibility Scale (Kato, 2012). Three studies were conducted to examine the scales structure (Study One; $n = 483$ exploratory factor analysis, $n = 468$ confirmatory factor analysis), test-retest reliability (Study One Time Two; $n = 96$), and convergent and discriminant validity (Study Two; $N = 125$).

Results

An initial two-factor solution demonstrated good model fit ($RMSEA = .073$, $SRMR = .052$, $CFI = .96$). As one subscale showed inadequate reliability and validity in subsequent studies, a final single-factor solution was retained ($SRMR = .025$, $CFI = .098$, $RMSEA = .078$), resulting in a final 6-item scale. The 6-item scale had high internal consistency ($\alpha = .86-.90$) and moderate test-retest reliability ($r = .72$). Scores on this scale were moderately correlated to measures of related construct, and minimally correlated to measures of unrelated constructs.

Conclusions

This program of research provides preliminary evidence of the SexFlex Scale as a psychometrically sound measure of flexibility in response to sexual problems. Given that sexual scripts are multi-faceted, future research should broaden the SexFlex scale to assess other aspects of sexual scripts flexibility, such as sexual beliefs.

Mate Poaching and Relationship Quality: Is all Poaching Equal?

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Background and Objectives/Hypotheses

Mate poaching occurs when someone entices another into a sexual or romantic relationship whom he or she knows is already in an exclusive relationship. Poached relationships are lower in relationship quality than relationships not derived from poaching (Foster et al., 2014); those in non-poached relationships reported a greater improvement in quality over previous relationships than did those in poached relationships (Belu & O'Sullivan, 2017). But is all poaching equal? Objective: Examine whether mate poaching history influences perceived relationship quality. Hypothesis: Repeatedly initiating relationships (before ending ongoing ones) is linked to lower commitment, dissatisfaction, and higher appeal of alternatives.

Method

Adults (25-40 years of age; 55% female) in relationships derived from mate poaching (N = 343) were recruited from Mechanical Turk®, a crowdsourcing website, to complete an anonymous online survey. Mturk® workers are generally more representative than community, student, or traditionally-recruited online samples (Casler et al., 2013). The majority of participants were White (70%), followed by Black (9%), Hispanic (6%), South Asian (6%) and other (9%). Relationship duration ranged from 1 month to 264 months (M=58.4; SD=54.7). Participants completed measures assessing relationship characteristics, history of mate poaching, and current relationship quality: commitment (Rusbult et al. 1988), relationship satisfaction (Lawrance et al., 1992), sexual satisfaction (Lawrance et al., 1995), quality of alternatives (Rusbult et al., 1988) and infidelity (Thompson & O'Sullivan, 2016).

Results

Descriptive analyses revealed no differences in age or gender among those who were "repeaters" (either repeat poachers or targets) vs. "one-timers" (report only one occasion of poaching or being poached). However, one-timers reported that their current relationship was of longer duration than repeaters, $F(1,341)=5.88$, $p<.05$, $\eta_p^2=.02$. A MANOVA revealed that repeaters reported poorer quality relationships than did one-timers, $F(5,326)=7.63$, $p<.001$, $\eta_p^2=.11$, Pillai's trace=.11. Specially, those with a history of repeat poaching reported lower commitment to their current relationship and higher perceived quality of alternatives. In addition, those who reported a history of repeat mate poaching were more likely to report cheating on their partner in their current relationship than the one-timers, $X^2(1, N = 340) = 5.34$, $p < .05$. The two groups did not differ in terms of relationship or sexual satisfaction.

Conclusions

Among those reporting relationships derived from mate poaching, participants with a history of multiple mate poached relationships reported lower relationship quality in their current relationship than those whose current relationship was their only one derived from mate poaching. This finding suggests that there may be traits common to repeat poachers/poached (e.g., commitment style to relationships) that influence reported relationship quality. This study adds to a small but growing literature on mate poaching and relationship quality. The results will inform the practice of those working with individuals and couples in developing strong relationship skills and overcoming problems related to infidelity.

It's Not All Bad: Paraphilic Interests as Predictors of Sexual Satisfaction

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Background and Objectives/Hypotheses

Paraphilias encompass a broad scope of abnormal sexual interests, ranging from pedophilia to sadomasochism (BDSM). Identifying paraphilias under a single model may be inappropriate. Some paraphilic interests may be considered normal variations of sexuality. For example, studies have shown that BDSM practitioners are well-adjusted (Hébert & Weaver, 2014) and experience high levels of sexual satisfaction (Pascoal, Cardoso, & Henriques, 2015). However, little research has been conducted on the association between paraphilic interests and sexual satisfaction. It is expected generally that consensual paraphilias will be positively associated with sexual satisfaction, and that non-consensual paraphilias will be negatively associated with sexual satisfaction

Method

Data were collected from a community-based sample using Amazon Mechanical Turk, an online survey marketplace. Participants were 614 Canadian and American adults (335 men, 275 women, and 4 individuals with another specified gender identity), aged 19 to 30 ($M = 26.08$, $SD = 3.18$). Participants completed a demographic questionnaire, paraphilias scale, and sexual satisfaction scale. Factor analysis was conducted to reveal underlying dimensions of the paraphilias scale, and relevant subscales were created. Each factor was labelled according to the characteristics of the items underlying the factor. The first factor was labelled Most Atypical and was comprised of 10 items pertaining to the least prevalent paraphilias, including pedophilia, zoophilia, urophilia, hebephilia, scatophilia, and piquerism. The second factor was labelled Power and was comprised of 12 items pertaining to power and courtship disorders. The third factor was labelled Pleasure and was comprised of seven items pertaining to BDSM.

Results

5.6% of participants reported overall paraphilic interests. A significantly greater proportion of women than men reported arousal from the Pleasure subscale. Similar proportions of men and women reported arousal from the Most Atypical and Power subscales. Multiple regression was conducted and demonstrated that all three subscales explained a significant proportion of variance in sexual satisfaction, $F(3, 610) = 27.88$, $p < .001$, adjusted $R^2 = .12$. The Pleasure subscale was positively associated with sexual satisfaction, and the Most Atypical and Power subscales were negatively associated with sexual satisfaction. Hierarchical multiple regression was conducted to assess the importance of the subscales in predicting sexual satisfaction after controlling for the influence of current relationship satisfaction. The full model was statistically significant, and the addition of the paraphilia subscales to the prediction of sexual satisfaction led to a statistically significant increase in R^2 of .135, $F(3, 588) = 30.79$, $p < .001$.

Conclusions

Results suggest that specific paraphilias are either positively or negatively linked to sexual satisfaction. Paraphilias related to BDSM and pleasure were positively associated with sexual satisfaction and may be healthy variations in sexuality. Atypical paraphilias and paraphilias related to power were negatively associated with sexual satisfaction and may be considered problematic. Not only did the Most Atypical, Power, and Pleasure subscales predict sexual satisfaction, they improved the prediction of sexual satisfaction above relationship satisfaction alone. This suggests that an individual's paraphilic interests have a significant impact on their sexual satisfaction, above and beyond their relationship satisfaction. Implications will be discussed.

Power and Pleasure: Paraphilic Interests and Attitudes Toward Sexual Consent

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Background and Objectives/Hypotheses

Paraphilias encompass a broad scope of abnormal sexual interests, ranging from frotteurism to sadomasochism (BDSM). Many paraphilias can theoretically be divided into two groups according to whether or not they represent consensual sexual interests or non-consensual sexual interests (Giambi, 2015). For example, voyeurism, exhibitionism, and frotteurism, are generally non-consensual sexual interests. Alternatively, masochism, fetishism, and transvestism do not generally involve non-consensual interests. Although research has discussed the idea of looking at paraphilias in terms of consensuality, few studies have explored the association between specific paraphilic interests and attitudes toward establishing consent.

Method

Data were collected from a community-based sample using Amazon Mechanical Turk, an online survey marketplace. Participants were 614 Canadian and American adults (335 men, 275 women, and 4 individuals with another specified gender identity), aged 19 to 30 ($M = 26.08$, $SD = 3.18$). Participants completed a demographic questionnaire, paraphilias scale, and sexual consent scale. To examine potential predictors of attitudes regarding sexual consent, we used the positive attitude toward establishing consent (11 items) subscale from the Sexual Consent Scale (Humphreys & Brousseau, 2010). Based on factor analysis of the paraphilias scale, there were 3 subfactors created: (1) Most Atypical, which was comprised of 10 items pertaining to the least prevalent paraphilias, including pedophilia, zoophilia, and scatophilia; (2) Power, which was comprised of 12 items pertaining to power and courtship disorders; and (3) Pleasure, which included seven items pertaining to BDSM.

Results

5.6% of participants reported overall paraphilic interests. A significantly greater proportion of women than men reported arousal from the Pleasure subscale. Similar proportions of men and women reported arousal from the Most Atypical and Power subscales. Multiple regression was conducted and demonstrated that the Power and Pleasure subscales explained a significant proportion of variance in one's positive attitude toward establishing consent, $F(3, 610) = 24.33$, $p < .001$, adjusted $R^2 = .10$. The Pleasure subscale was positively associated with a positive attitude toward establishing consent. Alternatively, the Power subscale was negatively associated with a positive attitude toward establishing consent.

Conclusions

Results suggest that specific paraphilias are either positively or negatively linked to one's positive attitude toward establishing consent. Paraphilias related to BDSM and pleasure were positively associated with a positive attitude toward establishing consent. Paraphilias related to power and courtship disorders were negatively associated with a positive attitude toward establishing consent. This suggests that an individual's paraphilic interests have a significant impact on their attitudes toward establishing sexual consent with sexual partners. Some paraphilic interests may be problematic, as demonstrated by their negative association with a desire to establish sexual consent. Implications will be discussed.

Do You Speak Emoji? Exploring Emotional Aptitude and Emoji Use

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Background and Objectives/Hypotheses

Emojis are becoming increasingly popular within computer-mediated communication, yet very little empirical research is available on this modern phenomenon. The purpose of the current study was to investigate the unexplored relationship between emotional aptitude and emoji use in smartphone users. This study builds on existing emoji literature by not simply investigating the meanings or functional uses of emojis, but rather determining what type of person is more likely to use emojis based on their emotional aptitude.

Method

Participants ($n = 292$) from a larger study ($N = 695$) on modern communication completed measures of their general emoji use, as well as the Toronto Alexithymia Scale (TAS-20), which measures levels of emotional aptitude. The TAS-20 is comprised of three subscales: difficulty describing feelings, difficulty identifying feelings, and externally oriented thinking. In the present study, the difficulty describing feelings subscale was of particular interest as emojis are emotional tools and their use may indicate an increased ability of describing one's own feelings. Participants ($M = 23.6$ years old) were primarily heterosexual (81%) and White (80%).

Results

Overall, the participants were high emoji users. 94% of participants report incorporating emojis into their messages, with 87.5% having used an emoji within the last 24 hours and nearly half of the sample (45%) using one within the past hour. A one-way analysis of variance (ANOVA) was conducted with total alexithymia scores as the DV and the level of emoji use groups as the IV. The mean alexithymia scores of each group show the expected trend; high emoji users having the lowest alexithymia scores ($M = 43.37$, $SD = 10.64$) indicating higher emotional aptitude, moderate emoji users having slightly higher scores ($M = 46.01$, $SD = 9.90$), and non-users having the highest scores ($M = 50.4$, $SD = 10.25$) indicating lowest emotional aptitude. These differences between groups were significant ($F(2) = 3.508$, $p = 0.31$) with a small effect size ($h^2 = 0.024$). Post hoc analyses demonstrated no significant differences between groups.

Conclusions

The nearly universal reporting of emoji use indicates that this behavior has become extremely prevalent among smartphone users. Due to the widespread use of emojis, the group of 'emoji users' is highly heterogeneous; there is likely greater diversity within users than between users and non-users. As a result, few patterns emerged between participants' emoji use patterns and emotional aptitude levels. Future research should investigate the influence of emojis' universality and the potential impacts emoji use may have on computer-mediated communication (CMC). Emojis may add much needed non-verbal cues to CMC.

From 'It does nothing for me' to 'I can't function without it.' When, Why and for Whom Does Vaginal Penetration Become Important?

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Background and Objectives/Hypotheses

Past research on vulvar pain has indicated that variations in sexual scripts between same-sex and mixed-sex couples may play an important role in women's experiences of vulvar pain. To date, no research has specifically examined how the importance placed on vaginal penetration by women may differ as a function of relationship type or pain status. The current study sought to examine links between how women conceptualize the importance of vaginal penetration to their sex life and their experiences of vulvar pain.

Method

Single women, as well as women in same-sex and mixed-sex relationships (N=680) completed online questionnaires about their sexual functioning and their experiences of vulvar pain, while also rating the importance of vaginal penetration to their sex life and answering an open-ended question about the importance of vaginal penetration in their sexual lives.

Results

Women in mixed-sex relationships rated vaginal penetration as being significantly more important to their sex lives than both single women and women in same-sex relationships. Furthermore, although all three groups contained women with and without vulvar pain, only women in mixed-sex relationships demonstrated a statistically significant difference in importance ratings as a function of pain, such that women with pain rated vaginal penetration as being less important. Despite this difference, the ratings of importance among women with pain in mixed-sex relationships were still higher than the mean importance scores among women in same-sex relationships and single women. Potential explanations for these findings will be discussed by examining group differences in how women described the importance (or lack thereof) of vaginal penetration. For example, the rationales offered for the importance of penetration suggest that many women tie the importance of vaginal penetration to a partner's pleasure, rather than their own.

Conclusions

The current study highlights the contextual nature of sexual scripts, such that vaginal penetration is only rated as being highly important when the sexual relationship is between a woman and a man. The lack of high importance ratings from single women and women in same-sex relationships suggests that penetration, in and of itself, is of less importance in the absence of a male partner. Implications for clinicians and the treatment of women experiencing vulvar pain will be discussed.

"I think they're flirty and fun": An Exploratory Analysis of the Use of Sexual Emoji

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Background and Objectives/Hypotheses

With the advent of computer-mediated communication, the use of emoticons and emoji have become commonplace to convey context and emotion. However, few empirical studies have investigated the use of these symbols. The purpose of the present study was to identify what factors underscore the use of emoji and to examine specific emoji use, in particular, the use of emoji in sexual contexts (i.e., sexy emoji).

Method

Participants ($n = 276$) from a larger study ($N = 696$) on general emoji use were recruited via online platforms (i.e., Facebook, Instagram, Reddit). The mean age of participants was 24.11 years. Participants were administered a smart-phone based questionnaire querying three main topics: sexual history (measured via lifetime number of casual sexual partners), the big five personality traits (measured via the Fetzer Institute Big Five Inventory), as well as the use of both non-sexual and sexual emoji. Participants reported their use of emoji in sexually suggestive messages ("sexts") and the nature of their use of a variety of emoji. A total sexy emoji score was computed for each participant based on the frequency of use of the top five endorsed sexual emoji.

Results

Emoji use was found to surpass emoticon use; the mean time since last emoticon use was 101 hours, while the mean time since last emoji use was 29 hours. Additionally, participants reported that they include up to four times as many emoji in a message than emoticons. Emoji use was related to sending and receiving sexts; of individuals who have sent these messages, 53% report that use led to sexually suggestive behaviour and 54% report that emoji appear in their sexts sometimes, often, or always. The top five endorsed sexual emoji are the smirk face, wink face, drips, tongue, and eggplant. Number of casual sexual partners and extraversion scores were significantly associated with sexy emoji scores; $F(2, 219) = 9.18, p < .001, R^2_{\text{Adjusted}} = .069$, indicating that extraversion and number of casual sexual partners account for 6.9% of the variance in the use of sexual emoji.

Conclusions

This research provides exploratory data on the use of emoji in sexual contexts and documents current trends in emoji use. The use of emoji may be facilitating a shift in the initiation and nature of sexting. Further research may seek to determine if emoji use contributes to more contextually clear sexts and more frequent sexting interactions. Given the patterns underscoring the use of sexy emoji, investigating these symbols may enrich the understanding of both modern communication and the initiation of casual sexual relationships.

Emerging Adults' Experiences of Middle and High School Sexual Health Education in New Brunswick, Nova Scotia, and Ontario

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Background and Objectives/Hypotheses

Due to the many positive outcomes of Sexual Health Education (SHE), there is wide agreement across Canada that SHE should be provided in schools. However, various factors can impact students' perceptions of the quality of SHE that is taught. The goal of the current study was to provide information about SHE offered in middle and high schools in three Canadian provinces from the perspective of male and female emerging adults.

Method

Participants were 296 undergraduate students (91 men, 205 women) between the ages of 18 and 24 who had gone to both middle school and high school in New Brunswick, Nova Scotia, or Ontario and were currently attending one of two universities in Eastern Canada. University students rated the adequacy of which various sexual health topics were covered, their degree of interest in covered sexual health topics, the frequency of various teaching methods by instructors, their perceived overall quality of SHE, and the amount of knowledge obtained from outside sources (e.g., friends, family, Internet, porn, etc.).

Results

There were few differences between provinces. Almost all participants reported receiving SHE in middle school but about a quarter had not received SHE in high school. On average, participants rated SHE in middle school as *fair* and SHE in high school as *good*. However, participants rated most of the specified sexual health topics as *covered poorly* and *covered*. Participants reported that teachers used a variety of methods in the classroom, 6.8 of 9 possible methods on average. Multiple regression analyses showed that higher quality SHE was associated with better topic coverage, the extent to which the topics covered matched their interests, and the number of different methods used. Participants reported that peers were a more important source of sexual health information than was SHE. Overall, few gender differences were found, however, the men tended to rate the SHE they had received in middle school more positively than did the women.

Conclusions

The results point to a continued need to improve the quality of SHE provided in Canadian schools. Several suggestions will be presented based on these data including: more consistently offering SHE throughout high school, covering topics of student interest and improving teacher training. Improving these aspects of the curriculum should yield an increase in positive sexual health outcomes in young adults.

Sexual Problems or Just Bad Sex? Longitudinal Effects Sexual Satisfaction and Sexual Problems

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Background and Objectives/Hypotheses

The majority of couples in long-term relationships report experiencing at least one sexual problem. While past research has shown that greater problems are associated with lower sexual satisfaction, to our knowledge, no past work has examined whether sexual problems at Time 1 predict subsequent sexual satisfaction. In this study, we examined this relationship, with the goal of understanding how problems influence sexual satisfaction over time. Concurrently, we investigated how sexual satisfaction influenced the development of sexual problems. Specifically, we examined if high sexual satisfaction had a protective effect, and if lower satisfaction led to the development of problems.

Method

A sample of 113 couples (total N= 226), in long-term relationships, was recruited for a longitudinal study spanning 2 years. At both Time 1 and Time 2, participants completed measures identifying what sexual issues they had in their relationship, how severe each problem is, and a measure assessing their current sexual satisfaction. Data was analyzed using a time lagged actor-partner independence model.

Results

Our findings showed that men and women's sexual problems were moderately correlated with one another, and ratings were moderately stable over time, suggesting general agreement about problems. Similarly, sexual satisfaction was also correlated for men and women, and moderately stable over time. Our study replicated previous studies showing an association between sexual problems and sexual satisfaction. Over time significant actor effects were found, with sexual problems at Time 1 being a predictor of lower sexual satisfaction at Time 2. There were no significant partner effects of sexual problems. Sexual satisfaction did not show significant actor or partner effects on sexual problems.

Conclusions

The present study suggests that high sexual satisfaction does not protect against the development of sexual problem, and low satisfaction does not result in more problems. In contrast sexual problems were found to predict lower sexual satisfaction over time, highlighting the importance of addressing sexual concerns when they develop in order to preserve sexual well-being.

Sibling sex ratio and the fraternal birth order effect related to men's sexual orientation in the Add Health data: A re-analysis and extended findings

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Background and Objectives/Hypotheses

The fraternal birth order (FBO) effect refers to the finding that the number of older brothers that a man has increases his chance of being gay. The FBO effect has generally been well replicated; however, one instance of non-replication was by Francis (2008) using Waves I and III of the Add Health data. Blanchard (2014) proposed that a reason for the non-replication by Francis (2008) is due to not taking into account family size, which we have attempted to do in the current study. Also, we examined sibling sex ratio, which is a sibling characteristic related to the FBO effect.

Method

We used Waves I ($n = 20,745$), and IV ($n = 15,701$) of the Add Health data, consisting of adolescents who were followed longitudinally from 1994-1995 until 2008. Wave I data was used to compute numbers of full younger and older brothers and sisters from household roster information. For some analyses, half-siblings were included. Wave IV information about sexual orientation identity was used: men were categorized into exclusively gay, mostly gay, bisexual vs. mostly heterosexual, exclusively heterosexual. We used a metric computed by Blanchard (under review), called the older brother odds ratio (OBOR), more conventional regression analyses, and calculated the sibling sex ratio.

Results

We found that the OBOR ranged from 1.20 to 1.25, suggesting that being gay increases the odds that any given sibling will be an older brother by 20-25%. The sibling sex ratio (male siblings:female siblings) ranged from 138.5:100 to 153.7:100 for gay/bisexual men--higher than what is expected in the general population (106:100). For heterosexual men, the sibling sex ratio ranged from 110.9:100 to 112.1:100. Accordingly, we statistically controlled for number of younger brothers in logistic regression analyses, using modified proportions as per Blanchard (2014). Number of younger and older sisters were entered on step 2, but were not significant. Number of older brothers was marginally significant in the logistic regressions, such that gay men tended to have greater number of older brothers than heterosexual men. Number of younger brothers was generally not significant. The Add Health data has a high proportion of only-children (24.5-28.6%) and same age siblings (7.1%).

Conclusions

Despite these characteristics of the sample suggesting a low family size, and the small number of gay/bisexual men in the Add Health data, it is not surprising that we found a modest association between older brothers and sexual orientation in men. Thus, in contrast to Francis (2008), we have generally replicated the well-known FBO effect in this sample, but the finding is weak and small, likely due to characteristics of the sample. Thus, the sample is important in replications of the FBO effect. Finally, we propose explanations for the high sibling sex ratio effect in this sample of gay men.