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ORIGINAL ARTICLE

An abridged Spanish version of Sexual Double Standard Scale: Factorial structure, reliability and validity evidence

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KEYWORDS

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Abstract

Background/Objective: Sexual double standard (SDS) has long been associated to several dimensions of sexual health. Therefore the assessment of SDS is relevant and requires self-reported measures with adequate psychometric properties. This study aims to adapt the Sexual Double Standard Scale (SDSS) into heterosexual Spanish population and examine its psychometric properties. **Method:** Using quota incidental sampling, we recruited a sample of 1,206 individuals (50% women), distributed across three groups based on their age (18-34, 35-49 and 50 years old and older). **Results:** We performed both, Exploratory Factor Analysis and Confirmatory Factor Analysis. An abridged version was yielded, consisting of 16 items distributed into two factors (Acceptance for sexual freedom and Acceptance for sexual shyness). A second-order factor structure was also adequate, which facilitates the use of a global index for SDS. Reliability, based on internal consistency and temporal stability was good, for both the factors and for the second-order factor. Evidence of validity is also shown and reported. **Conclusions:** This adapted version of the SDSS is reliable and valid. The importance for its use to estimate the prevalence of both traditional and modern forms of this phenomenon is discussed.

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PALABRAS CLAVE

Doble estándar sexual;
Sexual Double Standard Scale;
fiabilidad;
validez;
estudio instrumental

Versión abreviada española de la Sexual Double Standard Scale: estructura factorial, fiabilidad y evidencias de validez

Resumen

Antecedentes/Objetivo: El doble estándar sexual (DES) se ha asociado a distintas dimensiones de la salud sexual, por lo que su evaluación es relevante y requiere de instrumentos con adecuadas propiedades psicométricas. Se plantea la adaptación a población heterosexual española de la Sexual Double Standard Scale (SDSS) y examinar sus propiedades psicométricas. **Método:** Mediante un muestreo incidental por cuotas se obtuvo una muestra de 1.206 sujetos (50% mujeres), distribuidos en tres grupos en función de la edad (18-34 años, 35-49 años y 50 años o más). **Resultados:** Mediante Análisis Factorial Exploratorio y Análisis Factorial Confirmatorio se consiguió una versión de 16 ítems distribuidos en dos factores (Aceptación de la libertad sexual y Aceptación del recato sexual), cuya combinación en un factor de segundo orden permite obtener un índice global de doble estándar sexual. La fiabilidad de consistencia interna y test-retest es óptima, tanto para los dos subfactores como para el factor de segundo orden, y sus medidas presentan adecuados índices de validez. **Conclusiones:** Esta versión adaptada de la SDSS es fiable y válida. Se discute su importancia para detectar la prevalencia de DES tradicional y de expresiones más modernas de este fenómeno.

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The Sexual Double Standard (SDS) refers to the social rewarding and praise that men receive, not women, when they are sexually active in their heterosexual interactions (Fasula, Carry, & Miller, 2014; Milhausen & Herold, 2002). Individuals with a greater endorsement of traditional SDS assume more sexual freedom to men than to women in some contexts and related to sexual behaviors (e.g., sex before marriage, sex with multiple sexual partners, sexual debut at early ages, casual relationships without commitment, or playing an active role in sex). On the other hand, less adhesion to SDS leads to a greater acceptance of equality between both sexes (Crawford & Popp, 2003; García-Cueto et al., 2015; Sierra, Rojas, Ortega, & Martín Ortiz, 2007).

A better knowledge regarding the prevalence of SDS is of interest in both clinical and psychosocial viewpoints. Previous research has shown that SDS is associated with sexual victimization (Eaton & Matamala, 2014; Sierra, Bermúdez, Buela-Casal, Salinas, & Monge, 2014; Sierra, Monge, Santos-Iglesias, & Salinas, 2011), sexual aggression (Eaton & Matamala, 2014; Llor-Estebán, García-Jiménez, Ruiz-Hernández, & Godoy-Fernández, 2016; López-Ossorio, González Álvarez, Buquerín Pascual, García Rodríguez, & Buela-Casal, 2017; Moyano, Monge, & Sierra, 2017; Sierra, Gutiérrez-Quintanilla, Bermúdez, & Buela-Casal, 2009), greater risk of sexually transmitted infections (Bermúdez, Castro, Gude, & Buela-Casal, 2010; Bermúdez, Ramiro, Sierra, & Buela-Casal, 2013; Fasula et al., 2014), and lower sexual satisfaction (Haavio-Mannila & Kontula, 2003; Santos-Iglesias et al., 2009).

From a psychosocial viewpoint, it is likely to find a relationship between higher endorsement of SDS and individuals' predisposition to accept gender inequality. The patriarchal system promotes a masculine structural power (Sidanius, 1993) which establishes which sexual scripts or social representations of sexual behavior are considered

normative in a given culture (Simon & Gagnon, 2003), and intrapsychic maps, providing directions about how to feel, think, and behave in particular situations. Individuals determine the type of sexual behaviors that are appropriate according to their own experiences and the assimilation of dominant heterosexual sexual scripts (Simon & Gagnon, 2003). Therefore, in a private sphere, the SDS is a useful mechanism to expand the control and maintenance of patriarchy (Holland, Ramazanoglu, Sharpe, & Thomson, 2004), while the traditional SDS would serve to maintain a dominant paternalism (Glick & Fiske, 2011) through the belief that men must play an active role (vs. a passive women) in sexual encounters. The construct Social Dominance Orientation (SDO; Pratto, Sidanius, Stallworth, & Malle, 1994) is defined as an individual characteristic that reflects the degree to which someone desires that his or her own group dominates and be superior over an out-group. Considering that a greater adhesion to SDS indicates a positive attitude towards masculine dominance regarding sexual behaviors, the SDS and SDO should be related. Low scores of SDO are associated with positive attitudes towards equality between men and women (Lippa & Arad, 1999), however, high scores of SDO are associated with negative attitudes towards women's rights (Pratto et al., 1994), hostility toward women (Sibley, Wilson, & Duckitt, 2007), endorsement of traditional gender roles (Christopher & Wojda, 2008), belief that men should initiate sex (Rosenthal, Levy, & Earnshaw, 2012) and that women should tolerate abuse and sexual insinuations without complaining (Russell & Trigg, 2004).

During the last decades, the reported prevalence of SDS has been widely variable. Several explanations could be drawn, such as ideological changes, the use of different methodologies or sociocultural characteristics (Bordini & Sperb, 2013; Crawford & Popp, 2003; Wells & Twenge, 2005). Overall, between 1943 and 1999, sexual behavior and sexual

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