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Cognitive-Affective Dimensions of Female Orgasm: The Role of Automatic Thoughts and Affect During Sexual Activity

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ABSTRACT

Background: Cognitive-affective factors contribute to female sexual dysfunctions, defined as clinically significant difficulties in the ability to respond sexually or to experience sexual pleasure. Automatic thoughts and affect presented during sexual activity are acknowledged as maintenance factors for these difficulties. However, there is a lack of studies on the influence of these cognitive-affective dimensions regarding female orgasm.

Aim: To assess the role of automatic thoughts and affect during sexual activity in predicting female orgasm occurrence and to investigate the mediator role of these variables in the relation between sexual activity and orgasm occurrence.

Methods: Nine hundred twenty-six sexually active heterosexual premenopausal women reported on frequency of sexual activities and frequency of orgasm occurrence, cognitive factors, and social desirability. Participants completed the Sexual Modes Questionnaire—Automatic Thoughts Subscale, the Positive and Negative Affect Schedule, and the Socially Desirable Response Set. Multiple linear regressions and mediation analyses were performed, controlling for the effect of covariates such as social desirability, sociodemographic and medical characteristics, and relationship factors.

Outcomes: The main outcome measurement was orgasm frequency as predicted and mediated by automatic thoughts and affect experienced during sexual activities.

Results: The presence of failure thoughts and lack of erotic thoughts during sexual activity significantly and negatively predicted female orgasm, whereas positive affect experienced during sexual activity significantly and positively predicted female orgasm. Moreover, negative automatic thoughts and positive affect during sexual activity were found to mediate the relation between sexual activity and female orgasm occurrence.

Clinical Implications: These data suggest that the cognitive aspects of sexual involvement are critical to enhancing female orgasm experience and can aid the development of strategies that contemplate the central role of automatic thoughts and of positive emotions experienced during sexual activity.

Strengths and Limitations: Data were not collected face to face, which constitutes a strength of this study, because it is known that social desirability is lower in self-administered online questionnaires compared with traditional paper-and-pencil questionnaires, particularly for more sensitive sexual issues. The fact that the sample was composed of heterosexual, premenopausal, and relatively young women demands some caution regarding generalization of the present results.

Conclusion: The findings support the contribution of cognitive and affective factors to female orgasmic functioning. It is recommended that future research confirm these findings with other samples, particularly clinical samples of women with orgasmic difficulties. Tavares IM, Laan ETM, Nobre PJ. Cognitive-Affective Dimensions of Female Orgasm: The Role of Automatic Thoughts and Affect During Sexual Activity. J Sex Med 2017;XX:XXX—XXX.

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Key Words: Female Orgasm; Automatic Thoughts; Affect; Predictors; Mediation; Cognitive-Affective

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INTRODUCTION

The psychophysiologic process of female orgasm is of a complex nature, being influenced by multiple factors, which include biological, physiologic, anatomic contributors, and psychosocial and relational aspects. 1-5 It is known that sexual activities, diverse as they might be regarding the genital focus of stimulation, generate a series of psychophysiologic responses that potentiate orgasm occurrence by eliciting vasocongestion and engorgement of the clitoral complex.⁵⁻⁷ Despite the growing interest and debate about the physiologic and anatomic determinants of women's orgasm, knowledge about the psychological aspects that might contribute to its occurrence is still needed. More specifically, there is a lack of studies that have investigated the influence of cognitive-affective factors on female orgasmic response, a dimension that has demonstrated a strong contribution to the maintenance of female sexual dysfunctions, 8-12 defined as clinically significant difficulties in the ability to respond sexually or to experience sexual pleasure.¹³ Regarding female orgasm in particular, it is still not clear how these variables could play a role in predicting its occurrence.

An initial approach to the cognitive-affective dimensions of sexual functioning was articulated by Masters and Johnson ¹⁴ through the concept of spectatoring, which refers to an intense surveillance and monitoring of one's own sexual performance during sexual interactions, rather than an involvement in the sensory aspects inherent to the sexual situation. In this way, individuals who have a strong self-focus during sexual interactions become distracted by thoughts about their own sexual performance, which in turn can affect sexual response by inhibiting sexual arousal and orgasm. ¹⁴

Barlow¹⁵ further developed the concept of spectatoring in the context of a causal model of cognitive-affective processes during sexual functioning. This model is characterized by the emphasis given to the interaction between physiologic activation and cognitive interference processes in the determination of functional vs dysfunctional sexual response. Deficits in sexual functioning from inhibited excitement are conceptualized as resulting from the inability to adequately decode sexually related stimuli (ie, erotic cues) that can induce arousal, that is, from experiencing cognitive interference. According to Barlow, sexually healthy individuals differ from individuals with sexual dysfunction in the attentional focus and in the affect presented in response to sexual performance cues (ie, implicit or explicit demands for sexual performance, leading to a public expectation of performance). Thus, individuals with sexual dysfunction would tend to focus on the threatening consequences of sexual failure rather than on the rewarding properties of sexual stimulation. This distraction leads to arousal of the autonomic nervous system, producing a negative emotional state and intensifying the previously existent attentional focus. Resulting from the interaction between this negative cognitive pattern and ensuing physiologic activation, difficulty in enhancing physiologic sexual arousal would occur and thus hinder sexual functioning. The

dysfunctional outcome of this sexual encounter is expected to prevent further involvement in future sexual interactions by individuals with sexual dysfunction. ^{15,16}

An association between cognitive distraction and decreased sexual arousal has been supported by data from several laboratory studies. 17-21 Also, in a study that investigated the role of cognitive distraction in women's sexual functioning, Dove and Wiederman²² found that attentional focus on sexual performance and physical appearance interferes negatively with women's orgasmic response, and that it constitutes the best predictor of these difficulties. Intimately related to cognitive distraction is the concept of automatic thoughts, whose role has been widely studied in cognitive therapy. 23 The dimension of automatic thoughts is considered the best observable variable of the cognitive system. According to Beck, 23 automatic thoughts or cognitions are images produced by individuals as a product of a cognitive schema or belief that is activated at a particular moment. Thus, automatic thoughts reflect the most central structural components of the cognitive system.

Concerning the type of automatic thoughts presented during sexual activity, women with sexual dysfunction were found to report significantly more failure and disengagement thoughts, lack of erotic thoughts, and sexual abuse thoughts compared with sexually healthy women. 12 In a study that focused specifically on orgasm difficulties in women, it was found that sexual abuse thoughts (ie, thoughts of being abused, disrespected, and even violated by the sexual partner), failure and disengagement thoughts (ie, thoughts of incapacity for sexual performance and lack of motivation to engage in sexual activity), partner's lack of affection (ie, thoughts of not being treated with care and affection by the partner during sexual activity), sexual passivity and control (ie, thoughts reflecting the idea that women must wait for the male's first step to not being seen as frivolous and to prevent eventual emotional harm), and lack of erotic thoughts significantly predicted orgasm difficulties in women.²⁴ These data reinforce the idea that distraction or interference with cognitive processing of erotic material can play an important role in the development of female orgasmic difficulties. Nevertheless, these conclusions were found in only one group of women and thus are in need of replication.

The affective response experienced by individuals during sexual activity also has been suggested as a central aspect in the maintenance of sexual dysfunctions. Various models of sexual dysfunction attribute an important role to affective responses experienced in a sexual context. Nobre and Pinto-Gouveia ^{9–12} proposed a conceptualization of sexual dysfunctions that encompasses an affective component dominated by typical emotions of depressed mood (sadness, disappointment, lack of pleasure, and satisfaction). Also, the cognitive-affective model of sexual functioning advanced by Barlow, ¹⁵ as discussed earlier, provides an additional way of understanding the impact of affective states. According to Barlow, individuals with sexual dysfunction would differ from sexually functional ones on the affect experienced during sexual activities

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