RESEARCH

The role of cognitive distraction on female orgasm☆

M. Cuntim [a],[1],*, P. Nobre [b]

[a] *Universidade de Trás-os-Montes e Alto Douro, UTAD, Quinta dos Prados 5000-911, Vila Real, Portugal*
[b] *Universidade de Aveiro, Aveiro, Portugal*

Summary Distraction or interference in the cognitive processing of erotic stimulus plays an important role in the development of sexual dysfunctions or difficulties (Geer and Fuhr, 1976). The aim of this study was to evaluate negative automatic thoughts presented during sexual activity. A total of 191 women from the general population answered to a set of questionnaires assessing orgasm function, automatic thoughts during sexual activity and cognitive distraction. The orgasm function was measured by the Female Sexual Function Index (IIEF, Rosen et al., 2000), automatic thoughts were measured by the Sexual Modes Questionnaire (Nobre and Pinto-Gouveia, 2008), and cognitive distraction by the Cognitive Distraction Scale (Dove and Wiederman, 2000). Findings indicated that lack of erotic thoughts during sexual activity was the best predictor of women's sexual difficulties. Sexual abuse thoughts, failure and disengagement thoughts, partner's lack of affection, sexual passivity and control, and lack of erotic thoughts were significantly higher in women with orgasm difficulties compared to sexually healthy women. The results are supported by the literature indicating that cognitive distraction from the erotic thoughts is strongly associated with orgasmic dysfunction.
© 2011 Published by Elsevier Masson SAS.

Introduction

Female orgasm corresponds to a variable and brief peak of intense pleasure that creates a change of the conscious state that is usually followed by relief of sexual tension and rhythmic contractions of the perineum muscles, reproductive organs, posterior vaginal walls and sphincter (APA, 2000; Meston et al., 2004).

In this sense, orgasmic disorders are characterized by a delay or difficulty, which may be persistent or recurrent, or an absence of orgasm following a normal sexual excitement phase. Due to the many types of sexual responses in women, the clinician should consider this failure as something significant, and the person's age and situation in which it occurred should also assessed (APA, 2000; Hatzimouratidis and Hatzichristou, 2007).

Distraction or interference with cognitive processing of erotic material can play an important role in the development of sexual difficulties or dysfunctions. Related to distraction is attention: the more distracted the individual is regarding stimulation the less attention is paid to it (Geer and Fuhr, 1976). These concepts can be projected towards the context of sexual activity. That is, if the individual does not focus on the sexual stimuli, ''satisfactory'' sexual response will be harder to achieve.

One of the cognitive factors that influence sexual response is the automatic thoughts. The study of automatic thoughts is one of the most common areas of research in the field of cognitive therapy (Beck, 1967; cited by Nobre and Pinto-Gouveia, 2008). In fact, this dimension is the best observable variable of the cognitive system. According to Beck (1967), automatic thoughts or cognitions are images produced by the subjects as a result of a cognitive schema or belief that is activated at a particular moment. Furthermore, automatic thoughts reflect the most central structural contents of the cognitive system.

Dove and Wiederman (2000) conducted a study that sought to explore women's cognitive distraction during sexual interactions and the relation that distraction may have with variables such as self-esteem, self image, satisfaction, orgasm consistency and orgasm faking. Satisfaction with body image and self-focused attention were also considered in the study. The results showed that performance and distractions in women cannot be separated and, therefore, the sensorial focus may not work as well in women as in men. For example, if a woman becomes anxious because of being naked in front of a partner, the focus on the sensations of a massage done by that intimate partner may not be a plausible alternative. She may be distracted by concerns on what her body is like for her partner during the massage and during sexual activity. In sum, women who reported high cognitive distraction during sexual activity with a partner also reported relatively less self-esteem, less sexual satisfaction, less consistent orgasms, and greater willingness to fake an orgasm (Dove and Wiederman, 2000).

In summary, cognitive distraction from erotic cues is strongly associated with female sexual dysfunction and to orgasm difficulties (Nobre and Pinto-Gouveia, 2008), particularly when it concerns body image distraction, the most specific predictor of this disorder (Dove and Wiederman, 2000; Meana and Nunink, 2006; Wiederman, 2000).

Methods

The aim of this study was to evaluate automatic negative thoughts present during sexual activity that may act as cognitive distractions causing difficulty in reaching orgasm. The purpose was to analyse the differences in automatic thoughts during sexual activity between groups of women with and without difficulties in terms of reaching orgasm (as measured by the female sexual functioning index [FSFI]).

Hypotheses

H1. Women with difficulties in reaching orgasm have more negative automatic thoughts during sexual activity compared to sexually healthy women.

H2. Negative automatic thoughts associated with (1) thoughts of sexual abuse, (2) thoughts of failure and withdrawal, (3) thoughts of lack of affection, (4) thoughts of passivity, (5) lack of erotic thoughts, and (6) low body self-image have a greater association with lower levels of orgasm.

H3. Women with difficulties in reaching orgasm score significantly higher in the Cognitive Distraction Scale (Dove and Wiederman, 2000), compared to sexually healthy women.

Participants and procedures

The sample was composed of 191 sexually active women with an age average of 33 (SD = 10.27), ranging between 18 and 59 years old. With regard to marital status, most women were married (49.7%) and 42.7% of them have had more than 15 years of education. All participants signed an informed consent form before completing the questionnaires.

Measures

Social demographic survey
This questionnaire inquired about the participants' age, marital status, educational qualifications, partner, sexual orientation, history of sexual abuse, religiosity, etc.

Female Sexual Function Index (FSFI)
A questionnaire consistent of 19 Lickert-type items, specifically designed to assess six different dimensions of female sexual function: sexual interest/desire, arousal, lubrication, orgasm (items 11, 12 and 13), sexual satisfaction and sexual pain. The measure demonstrated adequate validity ($r = .79 - .86$) and reliability (Cronbach $\alpha = .82$) (Wiegel et al., 2005; Nobre, 2002).

Cognitive Distraction Scale (CDS)
The cognitive distraction questionnaire was developed by Dove and Wiederman (2000) and evaluates, in 20 Lickert-type items, body appearance and sexual performance distractions. This questionnaire consists of only one factor as the internal consistency of the merged two initial factors was relatively high ($r = .83$).

Sexual Modes Questionnaire (SMQ)
Measure that consists of three subscales: automatic thoughts, emotional response and sexual response. The subscale of automatic thoughts, which was used in this study, consists of 33 items that assess verbal thoughts and images presented during sexual activity (Nobre, 2006).

Results

Automatic thoughts and orgasm difficulties

Correlational analyses indicated a statistically significant association between the Orgasm factor and the lack of erotic thoughts ($r = -.167$, $P < .05$), suggesting that orgasm and lack of erotic thoughts are inversely correlated to the extent that the higher the lack of erotic thoughts, the lower the level of orgasm.

A Multivariate Analysis of Covariance (MANCOVA) was carried out to compare the automatic thoughts during sexual activity between women with and without difficulties in reaching orgasm — the independent variable were the two groups (group 1: orgasm difficulty/group 2: no orgasm difficulty) and the dependent variables were the different dimensions of the automatic thoughts scale. The results indicated statistically significant effects on almost all automatic thoughts considered. Women ''with orgasm difficulties'' had significantly more thoughts of sexual abuse ($P < .001$),