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Insecure Attachment Predicts Poor Sexual Communication Among Emerging Adults

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Sexual communication significantly predicts sexual satisfaction within adult romantic relationships (Byers, 2011). Further, research has demonstrated that relationship satisfaction and relationship outcomes are positively influenced by sexual satisfaction (Anderson, 2012). Research regarding interest in promoting long-term romantic relationships should target sexuality-related concerns in romantic partners. Sexuality research grounded in attachment theory has provided promising results. Attachment theory hypothesizes that individuals develop an attachment style based on early life experiences with their caregiver(s). These styles strongly predict how individuals respond to loved ones, including romantic partners (Bell & Ainsworth, 2023). Research also suggests insecurely attached individuals struggle with effective communication in a plethora of domains, including sex. The current study investigated the association between attachment style and sexual communication in emerging adults (ages 18-25). Participants ($N = 352$) were sexually active undergraduate students from the University of Tennessee at Knoxville. The participants were either involved in a sexual relationship (e.g., hooking up) or in an exclusive romantic relationship (e.g., dating). Participants (84.9% female, 13.6% male, 1.4% gender diverse) completed an online survey measuring attachment style (i.e., anxious and avoidant attachment) and sexual communication. Results indicated that participants with an anxious attachment style engaged in worse sexual communication ($r = .238, p < 0.001$) while participants with an avoidant attachment style engaged in better sexual

communication with their partner ($r = .150$, $p = 0.327$). Interventions may target sexual communication skills among emerging adults with insecure attachment styles to enhance sexual satisfaction and subsequently, relationship satisfaction.

1.0 CHAPTER 1 INTRODUCTION

Emerging adulthood is a crucial period for sexual development. The literature defines emerging adulthood as a time of in-between adolescence and adulthood where individuals experience self-exploration (Arnett, 2014). Emerging adulthood reflects a distinct developmental period that is especially relevant for the exploration of romantic relationships. During this time, young adults are working to further understand their wants and needs in a romantic partner, which have begun to transform since adolescence. More specifically, individuals in this age group tend to question the function of their romantic relationships, often seeking to understand the qualities they value in a partner as well as the communication patterns that make them feel validated. Individuals often consider what alternative romantic and sexual partners could look like. This kind of reflection on romantic relationships is critical for enhanced intimacy with current and future partners (Roels & Janssen, 2022).

A key factor within sexual development is the ability to engage in effective communication with a romantic partner about a variety of sexual topics. This skill allows for emotional vulnerability, a feeling of empowerment, and the ability to make informed decisions for the relationship's future (Anderson, 2012). Further, research has identified that effective dyadic communication about sex strongly predicts enhanced sexual satisfaction and relationship satisfaction (Byers, 2011; Davis et al., 2006; Khoury & Findlay, 2014). This kind of effective sexual communication requires trust and intimacy, and subsequently allows for the open discussion of sexual preferences, thus promoting better sex and relationship outcomes. Notably, several studies have examined the association between attachment style and sexual communication. Avoidantly attached adults often avoid engaging in sexual communication due to their dislike of vulnerability (Gouveia et al., 2016). Similarly, anxiously attached individuals often avoid sexual communication as they fear it could cause a conflict in their relationship. (Davis et al., 2006). These kinds of sexual communication patterns have significant consequences, as both anxiously and avoidantly attached individuals often experience sexual and relational dissatisfaction (Byers, 2011). Decreased sexual and relationship satisfaction can lead to infidelity among partners, negative mental health symptoms, poor communication in non-sexual domains, or termination of the relationship (Generous, 2017).

While research has examined the relationship between attachment style and sexual communication, few studies have considered these associations along with the context of emerging adulthood as a key developmental period. Research considering sexual communication in this population would be critical, as

findings would likely allow us to understand how to effectively enhance sexual and relationship satisfaction for these young adults. This study, in examining sexual communication among insecurely attached emerging adults, hopes to aid in the development of skill-based interventions addressing ineffective sexual communication. These interventions would likely impact relational outcomes for young adults, including relationship termination or partner infidelity.

2.0 CHAPTER 2 LITERATURE REVIEW

2.1 Attachment Theory

The developmental theory of attachment was proposed by John Bowlby in the mid-1900s (Bowlby, 1969/1982, 1973). Since then, attachment theory has been a driving theory in psychological studies throughout the lifespan (Bell & Ainsworth, 2023; Holmes, 2014; Main et al., 1985). Attachment theory describes the inner workings of relationships that children develop with their caregivers and subsequently demonstrate through interactions with their significant other. These attachment styles are primarily based on children's early experiences with that caregiver (Bell & Ainsworth, 2023; Kurth, 2013). Attachment styles may grow or develop with a person over time; however, all individuals will maintain an attachment style over their lifespan (Pinquart et al., 2012). Secure attachment style develops from the feelings of being protected, nurtured, and cared for consistently by a caregiver (Ainsworth et al., 2014). When a caregiver provides minimal or no support to a child when they perform need signals, an insecure attachment style can develop (Bretherton, 1985; Rothbaum et al., 2002; Segrin & Jiao, 2021).

According to Bowlby's attachment theory, insecure attachment has two dimensions: avoidant and anxious attachment (Brennan & Shaver, 1995).

Avoidant attachment results from a lack of caregiver protection, care, and attention toward the child during their early developmental years. These interactions cause a child to be avoidant of intimacy and nearly independent (Dujardin et al., 2016). Anxious attachment results from a caregiver meeting a child's basic needs inconsistently. In turn, their child will show both clinging and resenting behaviors towards the caregiver (Dujardin et al., 2016). Attachment styles are developed in early childhood; however, they often follow the individual through life and can influence relationships into adulthood. Bartholomew & Horowitz (1991) further developed Bowlby's developmental theory of attachment by outlining a 4-figure model that describes adult attachment styles. These styles

include secure (secure) attachment style, preoccupied (anxious) attachment style, and fearful or dismissing (avoidant) attachment style.

Importantly, attachment styles grow and change over time for individuals.

Healing from or having a traumatic experience involving a romantic partner or caregiver can influence one's attachment style (Groh et al., 2014). For example, an individual may be securely attached and enter into a romantic relationship with an emotionally abusive partner. After leaving that relationship, that individual may experience a more anxious attachment to future romantic partners due to their traumatic experience (Groh et al., 2014). That being said, in general, attachment styles are reflected as they were in childhood, and they subsequently influence engagement with parents and romantic partners (Groh et al., 2014; Pinquart et al., 2013). Research has demonstrated that attachment styles often influence individual feelings toward sex and sexuality in romantic relationships in adulthood (Busby et al., 2020; Holmes, 2014; Péloquin et al., 2014; Tucker et al., 2022). Attachment styles have also been demonstrated to predict relationship satisfaction and outcomes (Coflin et al., 2022). Further, attachment styles are strong predictors of sexual communication in adult relationships which impacts sexual satisfaction and relational satisfaction (Byers & Demmons, 2010; Cupach & Comstock, 1990).

2.2 Sexual Communication in Emerging Adult Relationships

Sexual communication significantly impacts experiences of sexual satisfaction and relationship satisfaction in romantic relationships among emerging adults (Byers & Demmons, 2010; Cupach & Comstock, 1990; Gouveia et al., 2016). Sexual communication is defined as the disclosure of likes and dislikes of sexual practices. It often extends to discussions of sexual health (i.e. disclosure around sexually transmitted diseases and reproductive organ health) as well as past sexual experiences (i.e. sexual experiences with past partners) (Byers, 2011; Byers & Demmons, 2010; Cupach & Metts, 1992). The operationalization of sexual communication first involves determining the frequency and quality of the communication. Researchers often measure how many times sexual topics are discussed between partners as well as how partners subsequently act and respond when talking about sexual topics (Anderson, 2012; La France, 2010).

Additionally, because engaging in sexual communication increases feelings of intimacy, sexual partners often increase their communication about other non-sexual topics (Anderson, 2012). These effects, however, can also depend on other factors in the relationship such as attachment styles of the partners, cultural

beliefs, sexualities of partners, and communication patterns of the family (Anderson, 2012; Generous, 2017; Gouveia et al., 2016).

Research has determined that higher levels of sexual communication, including information about personal sexual fantasies, health variables, and contraception, between partners predicts greater sexual satisfaction and overall relationship satisfaction (Cupach & Metts, 1992; Byers, 2011; Byers & Demmons, 2010; Anderson, 2012). Several theories surrounding the ways in which sexual communication enhances intimacy as well as relationship and sexual satisfaction have been proposed. For instance, Byers (2011) explores the instrumental and expressional pathway originally put forth by Cupach & Metts (1991). Cupach & Mett's original theory proposed that these pathways lead to higher sexual satisfaction and higher relational satisfaction. Byers (2011) looks at these pathways and examines their implications through the lens of sexual self-disclosure between partners.

The instrumental pathway identifies how an increase in sexual communication skills leads to an increase in sexual satisfaction. The theory specifically proposes that sexual communication results in an increased knowledge of one's partner's sexual likes and dislikes. This communication is useful for creating a satisfying "sexual script" which leads to increased levels of sexual satisfaction (Byers, 2011, pp. 22). A general understanding of one's sexual desires and fantasies increases the frequency of those acts during sex, thus benefitting the desires of one or more partners (Anderson, 2012). The disclosure of sexual fantasies can help sexual partners struggling with feelings of boredom and dissatisfaction. On the other hand, enacting a preferred sexual fantasy can increase sexual communication as it enhances trust and feelings of intimacy between partners (Anderson, 2012).

Sexting is another method of engaging in sexual communication with a partner. Sexting often provides a different and more individualized sense of sexual satisfaction. Attachment style is known to impact the communication of sexual desires over the phone, especially when accompanied by sexual imagery. Notably, sexual images are sent more often by a securely attached individual, while verbal descriptions are more likely sent from an anxious or avoidantly attached person (Currin et al., 2022; Lee, 2018).

Relationship satisfaction is also said to result from high levels of sexual communication between partners. The expressive pathway captures this phenomenon and conceptualizes it as a cycle. Partners who regularly talk about their sexual desires and dislikes tend to be more open and vulnerable with each

other. This, in turn, promotes intimacy and closeness between partners, which results in higher levels of sexual satisfaction (Anderson, 2012; Byers, 2011; Cupach & Comstock, 1990; Cupach & Metts, 1992). Having knowledge about a partner's sexual wants and desires also increases the willingness to share one's own desires and fantasies. Sexual fantasies themselves have been shown to increase intimacy in sexual settings. Trust and discretion are key, as individuals must trust their partner will support the fantasy, rather than exploit it. In turn, this trust can promote confidence and appreciation within the relationship (Anderson, 2012). If sexual communication is not occurring between sexual partners, sexual satisfaction is likely to decrease. This can have severe implications including infidelity and even eventual termination of the relationship (Generous, 2017).

2.3 Anxious Attachment and Sexual Communication

Anxious attachment, also known as ambivalent attachment, is one of the two types of insecure attachment based on John Bowlby's attachment theory (Brennan & Shaver, 1995). Anxious attachment develops in childhood from one's needs not being met either on a consistent basis or not at all by a parent or caregiver. A child with these experiences often feels overly attached and yet resentful towards the caregiver (Dujardin et al., 2016; McNeil et al., 2018). Anxious attachment manifests in adulthood as well. Oftentimes, partners with anxious attachment become overly attached to the other and require reassurance constantly (McNeil et al., 2018). Anxiously attached individuals can also be resentful towards their partner if their needs are not prioritized. Individuals who are highly anxiously attached often fail to receive their desired amount of emotional intimacy (Davis et al., 2006). In addition, anxiously attached individuals are more likely to engage in risky behavior as a way to avoid conflict with a partner. For instance, these individuals may be more willing to refrain from condom use on behalf of their partner's preferences rather than ask for safer sex (Tucker et al., 2022).

In the sexual domain, anxiously attached individuals have distinct characteristics when engaging in sexual communication. Due to their reluctance to become close with a partner, usually out of fear of losing that partner, anxiously attached individuals may refrain from authentic expression of their sexual likes and dislikes (Gouveia et al., 2016). When communicating with their partner, especially about a sexual topic, anxiously attached individuals may only mention thoughts or opinions that they know will appeal to their partner, in hopes of avoiding any kind of conflict. Other anxiously attached individuals tend to have inhibited communication as a result of sexual anxiety, as these individuals experience discomfort when engaging in sexual communication (Davis et al.,

2006; Gouveia et al., 2016). Due to their reluctance to communicate fully and authentically with a partner about sexual topics, anxiously attached individuals tend to have lower sexual satisfaction in their relationships. Byer's (2011) instrumental and expressive pathways outline the benefits of sexual disclosure in regard to both relational and sexual satisfaction. According to Byers (2011), a long-term relationship benefits from having more emotional intimacy and a co-created pleasurable sexual script. If individuals are unable to communicate with a partner about sexual matters, their sexual satisfaction and in turn their relational satisfaction will suffer. Importantly, other studies have suggested that anxious attachment may not be as closely linked to difficulty with sexual communication, as demonstrated by Davis et al., 2006 and Gouveia et al., 2016.

Anxiously attached individuals have a range of communication skills and behaviors, and it is feasible that these skills are either negative or insignificant to assist with effective communication. However, McNeil et al. (2018) found that anxious attachment had no significant effects on sexual disagreements in romantic relationships. This is inconsistent with prior research suggesting anxious attachment style is linked with ineffective sexual communication (Davis et al., 2006; Khoury & Findlay, 2014). The surprising results of McNeil et al., (2018) may be due to the methodology of the study. This study used an observational method. A video recording device was used to record participants while they talked about sexual conflict in their relationship with their partner. This method was unlikely to pick up on inhibited sexual communication, as anxiously attached individuals likely engaged in higher rates of communication, due to feeling pressured and potentially threatened by the observational method of the study (McNeil et al., 2018).

Additional studies have also indicated that anxiously attached individuals frequently have negative reactions to partners, such as hostility or resentment, when negotiating a sexual conflict (Simpson et al., 1996). A sexual conflict typically involves talking to a partner about a bad sexual experience that occurred, or asking a partner to change something they do during sex. Anxiously attached individuals tend to be more subservient and less dominant in these situations as they have a fear of losing their partner. Further, anxiously attached individuals are often more vulnerable to the stress associated with negative interactions with their partner, even when there is no anger present from the confronting partner (McNeil et al., 2018; Simpson et al., 1996). In summary, individuals with an anxious attachment show high levels of anxiety at the thought of being abandoned by their partner. This anxiety can increase during sexual communication, as there is the risk of a verbal disagreement or sexual conflict. Thus, anxiously attached individuals often prioritize a partner's sexual needs as well as refrain from

engaging in sexual communication and voicing their preferences to avoid any conflict.

2.4 Avoidant Attachment and Sexual Communication

Avoidant attachment is the other dimension of insecure attachment introduced by John Bowlby's theory of attachment (Brennan & Shaver, 1995). Avoidant attachment is typically developed in childhood when one feels unprotected, not helped, or not attended to by a caregiver. Avoidantly attached children are often independent and avoidant of emotional intimacy (Dujardin et al., 2016). Avoidant attachment often presents in adulthood and is commonly associated with low levels of support seeking behaviors in relationships as well as fewer displays of warmth towards a significant other (McNeil et al., 2018).

Avoidantly attached individuals do not desire closeness within a relationship and actively avoid feelings of vulnerability and intimacy (Byers, 2011; Dujardin et al., 2016; Gouveia et al., 2016; McNeil et al., 2018). Avoidant individuals may often perceive their partner as less responsive and supportive of them due to biased perceptions created in childhood (Bonache et al., 2017). Further, previous research indicates that avoidantly attached individuals are more likely to engage in risky sexual behavior depending on partner type. For example, avoidantly attached individuals will choose to wear a condom for steady partners yet opt to have condomless sex with casual partners. Notably, avoidantly attached individuals tend to have fewer sexual partners during their lifetime (Tucker et al., 2022).

Avoidantly attached individuals, like anxiously attached individuals, have distinct patterns of sexual communication. Prior research suggests that avoidantly attached individuals most often engage in ineffective patterns of sexual communication. For example, avoidantly attached individuals frequently avoid situations that involve vulnerability due to their discomfort around intimacy. This avoidance subsequently reduces their ability to authentically self-disclose and can inhibit sexual communication, which often requires a great deal of vulnerability (Gouveia et al., 2016). Further, due to their early caregiver interactions, avoidantly attached individuals have a biased perception of others. Avoidantly attached individuals may hold the core belief that their romantic partners will not respond to their needs. These beliefs can interfere with the development of a more truthful representation of their romantic partners (Gouveia et al., 2016; Simpson et al., 1996). Overall, research indicates that avoidantly attached individuals rarely engage in effective sexual communication because of their discomfort in sharing emotions with others, fear of emotional and physical intimacy, and distorted view

of partner support (Davis et al., 2006; Gouveia et al., 2016; McNeil et al., 2018; Simpson et al., 1996).

Avoidantly attached individuals tend to avoid communication within vulnerable domains, including sex. Avoidantly attached individuals, because of their discomfort with intimacy, experience an increased stress response when discussing topics related to sex. This stress response is worsened if the conversation is brought up randomly by a partner (McNeil et al., 2018). When avoidantly attached individuals do engage in a discussion around sexual preferences, they often experience anxiety due to the vulnerability associated with the conversation (McNeil et al., 2018). During a conversation where authentic self-disclosure is imperative, such as a conversation about sexual likes, dislikes, or conflict, the distress experienced by avoidantly attached individuals can create a barrier between partners and further impact their ability to engage in sexual communication (Gouveia et al., 2016). The instrumental and expressive pathway outlined by Byers (2011) delineates the benefits of sexual disclosure on relationship and sexual satisfaction. The pathways also showcase the importance of intimacy and how having a more pleasurable sexual script will benefit the relationship long term (Byers, 2011). If individuals avoid conversations about sex, their sexual and relationship satisfaction suffers. This is often the case for avoidantly attached individuals. Additionally, avoidantly attached individuals may often avoid engaging in sexual communication because they do not think they will experience an increase in sexual satisfaction from that sexual communication (McNeil et al., 2018). Overall, avoidantly attached individuals experiencing discomfort with intimacy and vulnerability, often refrain from engaging in sexual communication. This inhibition has substantial negative implications on their sexual satisfaction.

2.5 Current Study

The current study aims to investigate the association between insecure attachment styles and sexual communication patterns in emerging adult romantic relationships (ages 18-25). The current study first hypothesizes that increased levels of anxious attachment will predict worse sexual communication among emerging adults. This hypothesis is supported by Davis et al., (2006), who found attachment anxiety to be significantly linked with relationship concerns and in turn, be associated with inhibited sexual communication. Additional studies have determined that anxiously attached individuals often engage in ineffective sexual communication patterns that negatively influence relationships and sexual satisfaction. More specifically, Byers (2011) found that anxiously attached individuals often experienced decreased levels of relationship satisfaction due to

their tendency to engage in inhibited sexual communication. Even further, Khoury and Findlay (2014) determined that, in long-term relationships, anxious attachment, avoidant attachment, and inhibited sexual communication were seen to be significant predictors of sexual dissatisfaction.

The current study also hypothesizes that increased levels of avoidant attachment will predict worse sexual communication among emerging adults. Prior research indicates that avoidantly attached individuals engage in less effective sexual communication and in turn experience worse sexual satisfaction and relationship satisfaction. Moreover, avoidant attachment has been found to be negatively associated with love for a partner and relationship satisfaction, two variables strongly linked to inhibited sexual communication (Davis et al., 2006). These observed patterns of communication are often attributed to avoidantly attached individuals' discomfort with intimacy and vulnerability (Byers, 2011; Davis et al., 2006).

Notably, the current study aims to investigate the association between both forms of insecure attachment and sexual communication among emerging adults. This is a strength of the study, as prior research on attachment style and sexual communication has often neglected with the context of emerging adulthood. Most research has focused on investigating attachment style and sexual communication among a general sample of adults, aged 18-65 (e.g., Khoury & Findlay, 2014) or has utilized a sample of individuals, including teenagers, all under the age of 30 (e.g., Davis et al., 2006). While prior research indicates that insecure attachment predicts ineffective sexual communication among a general sample of adults, these findings are not specifically generalizable to emerging adulthood. Since university students often utilize college to engage in sexual exploration (Hetherington et al., 1991), it is important to understand how insecure attachment during this developmental period can predict ineffective sexual communication patterns. Therefore, the current study aims to investigate the association between insecure attachment styles and sexual communication patterns among emerging adults in hopes of extending prior findings on insecure attachment and inhibited sexual communication.

3.0 CHAPTER 3 MATERIALS AND METHODS

3.1 Procedure and Participants

Data for this study was collected from 352 undergraduate students enrolled at the University of Tennessee, Knoxville. Before data collection began, this study received approval from the Institutional Review Board (IRB) at the University of Tennessee, Knoxville (UTK). For data collection purposes, the study was registered to the UT Department of Psychology's Research Experience Program (SONA) platform. The SONA platform encourages undergraduate students to participate in research, offering class credit in exchange for participation in online or in person research studies.

To participate in this study, participants were first required to fill out an eligibility form inquiring about their sexual or relationship status on SONA (see *Appendix A*). All participants were at least 18 years of age and involved in either a sexual or romantic relationship. All participants were sexually active in their relationship. Participants who did not meet eligibility criteria were unable to proceed with study questionnaires. After consenting to the study, participants completed the study questionnaires (see *Appendix B – D*). After completion of study questionnaires, the participants received one online research credit toward their research requirements for their course. All participants were recruited from a public state university in the southeastern United States.

3.2 Measures

3.2.1 Study Eligibility Form

The form was created for the research study to ensure that participants were in either a sexual relationship (e.g., hooking up, friends with benefits) or in a romantic relationship.

3.2.2 Demographics

The demographic questionnaire is a 28-item measure created for the research study that inquired about participants' age, class standing, major, gender identity, sexual orientation, race, ethnicity, past and current religious affiliation, political affiliation, socioeconomic status, relationship status, and campus involvement.

3.2.3 Experiences in Close Relationships – Revised Questionnaire

The Experiences in Close Relationships – Revised Questionnaire (ECR-R) is a self-report measure comprised of 36 items (Fraley et al., 2011). The scale questions about how participants feel within emotionally intimate relationships. Participants were asked to rate on a 7-point Likert scale how strongly they agree or disagree (1 = *Strongly Disagree*, 7 = *Strongly Agree*) with a statement after reading another statement relating oneself to one's partner. Several negatively worded statements were reverse coded and then items 1-18 and 19-36 were summed and averaged. This provided one indicator of Attachment Anxiety (items 1-18) and Attachment Avoidance (items 19-36). Each indicator was scored on a scale of 18-126 with a higher score indicating insecure attachment. Examples of items on the Attachment Avoidance scale include "I am nervous when partners get too close to me" and "I prefer not to show a partner how I feel deep down." Examples of items on the Attachment Anxiety scale include "I worry a lot about my relationships" and "My desire to be very close sometimes scares people away." The ECR-R has shown good internal and test-retest reliability for both avoidant and anxious scales. The scale also shows strong construct validity. Overall, the ECR-R scale and its subscales provide good psychometric properties and a highly reliable self-report measure of adult romantic attachment ($\alpha = 0.934$) (Fairchild & Finney, 2006; Fraley et al., 2011; Sibley & Liu, 2004).

3.2.4 Dyadic Sexual Communication Scale

The Dyadic Sexual Communication Scale (DSC) is a 13-item self-report measure (Catania, 1998; Alizadeh et al., 2020). Participants read a list of statements about discussing sex with one's partner. Participants then rated, on a 6-item Likert scale, how much they agree or disagree (1 = *Strongly Disagree*, 6 = *Strongly Agree*) with each statement. Possible statements include "My partner and I never seem to resolve our disagreements about sexual matters" or "My partner and I have never had a heart-to-heart talk about our sex life together." The scale assesses participant's perceptions of their sexual communication with their partner. Higher scores show more effective sexual communication. The DSC shows adequate psychometric properties such as good test-retest reliability, good internal consistency, and good discriminant validity ($\alpha = 0.87$) (Catania, 1998).

4.0 CHAPTER 4 RESULTS AND DISCUSSION

4.1 Results

4.1.1 Descriptive Statistics

We examined all descriptive statistics and correlations of study variables using Statistical Package for the Social Sciences (SPSS) Version 27.0. The average age of participants was 18.78 years. The participants were, also on average, second-year students in their first semester ($M = 1.48$ years at university), and predominantly female (84.9% identified as female [$N = 299$], 13.6% male [$N = 48$], 1.4% gender diverse [$N = 5$]). Additionally, most participants self-identified as White (91.50%, $N = 322$), then Hispanic/Latino (5.10%, $N = 18$), then Asian American (3.40%, $N = 12$), then Black (3.10%, $N = 11$), then Biracial/Multiracial (3.10%, $N = 11$) and finally, Native American (1.40%, $N = 5$). The majority of participants identified as heterosexual (88.40%, $N = 311$), while the remaining participants identified as bisexual (8.20%, $N = 29$), queer (2.30%, $N = 8$), gay (1.70%, $N = 6$), lesbian (0.60%, $N = 2$), and pansexual (0.60%, $N = 2$).

Study participants reported relatively equivalent levels of anxious attachment ($M = 3.18$) when compared to avoidant attachment ($M = 3.11$). Class year was assessed to determine if age of emerging adult influenced their sexual communication patterns. The class year of study participants was positively associated with worse sexual communication ($r = 0.166$, $p < 0.001^{**}$). In addition, higher scores on anxious attachment ($r = 0.238$, $p < 0.001^{**}$) and avoidant attachment ($r = 0.0150$, $p < 0.001^{**}$) are significantly associated with worse sexual communication.

Table 1. Descriptive Statistics and Correlations for Study Variables

Variable	<i>M (SD)</i>	1.	2.	3.	4.	5.
1. Class Year	1.48 (0.92)	--				
2. Gender Identity	1.02 (0.17)	.022	--			
3. Anxious Attachment	3.18 (1.35)	-.009	.061	--		
4. Avoidant Attachment	3.11 (1.17)	.055	-.040	.428**	--	
5. Sexual Communication	40.05 (5.14)	.166**	.007	.238**	.150**	--

Note.

** $p < 0.001$, * $p < 0.05$

4.1.2 Hypothesis Testing

The results of the hierarchical linear regression demonstrate that anxious attachment significantly predicts worse sexual communication ($b = .212$, $t(351) = 3.727$, $p < .001$). Conversely, avoidant attachment did not significantly predict whether study participants engaged in better or worse sexual communication ($b = 0.061$, $t(351) = 0.981$, $p = 0.327$). Importantly, insecure attachment correlated with a significant variance in sexual communication scores ($R^2 = .053$, $F(2, 351) = 9.442$, $p < .000$).

Table 2. Hierarchical Linear Regression of Sexual Communication on Insecure Attachment

Sexual Communication	Estimate	SE	<i>p</i>
Fixed Effects			
Anxious Attachment	0.212	0.237	< 0.001
Avoidant Attachment	0.061	0.272	0.327

4.2 Discussion

The purpose of this study was to determine how insecurely attached emerging adults engage in sexual communication. The current study hypothesized that 1) increased levels of anxious attachment would predict poorer sexual communication among emerging adults and 2) increased levels of avoidant attachment would predict poorer sexual communication among emerging adults.

4.2.1 Anxious Attachment Style

The current study's conclusions support the first study hypothesis, as anxiously attached emerging adults engaged in poorer sexual communication with their sexual partner. According to prior research, the tendency of anxiously attached emerging adults to engage in poor sexual communication may be a consequence of their innate fear of losing their partner as well as the higher rates of anxiety they experience when engaging in sex (Davis et al., 2006). Further, anxiously attached adults' motivation to keep the peace in the relationship may result in reluctance to engage in truthful self-disclosure around sexual likes/dislikes (Gouveia et al., 2016). These anxiously attached individuals are less likely to authentically self-disclose and more likely to tolerate any unwanted sexual behaviors due to a fear of conflict when bringing it up with their partner (Simpson et. al., 1996).

The results of this study are in line with prior research concluding that anxiously attached adults, in general, are likely to engage in poorer sexual communication (Byers, 2011; Davis et al., 2006; Gouveia et al., 2016; Khoury & Findlay, 2014). However, this study replicates those general findings in a specific sample of emerging adults. Study findings are particularly important, as many emerging adults utilize this time of their life for sexual exploration, often with multiple partners. When navigating sexual domains, particularly during a time of exploration, sexual communication is key for consent negotiation, as well as sexual satisfaction. Study findings ultimately suggest that anxiously attached emerging adults lack effective sexual communication skills. This communication deficit increases the likelihood that anxiously attached emerging adults experience sexual encounters with negative effects on their mental health or future relationships, as these adults may be at greater risk for experiencing sexual coercion. Future work should develop interventions designed to enhance sexual communication skills for anxiously attached emerging adults. The interventions may lead to an improvement in the sexual and relationship satisfaction experienced by these adults.

4.2.2 Avoidant Attachment Style

The current study's conclusions did not support the second study hypothesis. This study indicates that avoidant attachment is not significantly associated with sexual communication with one's partner. A number of prior studies found that avoidantly attached individuals engaged in poorer sexual communication. The researchers suggested this is due to their reluctance to engage in vulnerable conversations with a partner (Davis et al., 2006; Khoury & Findlay, 2014). Additionally, previous researchers have suggested that avoidantly attached individuals often experience a distaste for intimacy which in turn decreases their willingness to engage in sexual communication (McNeil et al., 2018).

The unexpected current study findings could be attributed to the types of relationships study participants were engaging in. Notably, the current study included emerging adults who were having sex in several different relational contexts (e.g., hooking up with friends, having sex with their exclusive romantic partner). Therefore, it is possible that within the study sample, avoidantly attached study participants were likely to engage in sexual relationships (e.g., hookups) and committed romantic relationships. Hookups are often characterized by decreased emotional intimacy and vulnerability, thus creating a relational context that appeals to avoidantly attached individuals. When considering the rise of hookup culture among emerging adults, it may be that avoidantly attached individuals have developed a higher tolerance for the discussion of sexual topics, as they have had more opportunities to practice, and have similar goals (e.g., sexual satisfaction) as their partner in that context.

Future research should consider separating out groups of avoidantly attached emerging adults based on the kinds of relationships they are in, as avoidantly attached individuals who are hooking up may be better at sexual communication compared to those who are in a romantic relationship.

4.3 Limitations

One major limitation to this study is the limited generalizability of the data due to the demographics of study participants. The majority of participants were white, heterosexual, cisgender women. Thus, the generalizability of study findings to a diverse population is limited. If replicated on a more diverse range of individuals, for example homosexual or non-white individuals, it is possible the results would differ. Future research should intentionally sample diverse emerging adults so that subsequent study findings are more generalizable and reflective of the current sociocultural world and determine if findings would operate differently among other sociocultural groups.

This study did not collect data from dyads and instead collected data from individuals in relationships. This is a major limitation of this study given that sexual communication takes place between two people. The current study only collected data from one-half of any given partnership, thus introducing several possible confounds into the study. For instance, a study participant may be securely attached, but engage in poorer sexual communication with an insecurely attached partner. The converse may also be true; a study participant may be insecurely attached but able to engage in sufficient sexual communication with a securely attached partner. However, these kinds of partnered effects can only be speculated on, rather than investigated, because of the study methodology.

Another limitation of this study surrounds the study eligibility criteria. Individuals in all kinds of relationships (e.g., friends with benefits, exclusive romantic partners) were included in the study for the sake of power in our data analysis; the only inclusion criteria were that participants be sexually active. Notably, the type of relationship that individuals choose to engage in could influence their pattern of responding to study measures, as perhaps those who are having sex with a committed romantic partner are more skilled at engaging in sexual communication compared to those who are hooking up with new partners. The converse could be true as well, individuals in sexual relationships without a committed partner may be more skilled at engaging in sexual communication. The current study did not consider these differences.

One final major limitation is that this study did not consider any other variable that could be impacting the relationship between insecure attachment and sexual communication. There are likely other variables impacting this relationship. For example, the study took place in Tennessee, a southern state in America. In this region, many individuals identify as Christian, a religion with several messages about what contexts are appropriate, versus inappropriate, for sexual behavior. Christianity also values monogamy and parenthood. It may be that study participants who were raised Christian, and identify as Christian, are more likely to be securely attached (due to positive early caregiver experiences) yet unable to

engage in sufficient sexual communication due to religious messaging. Future studies should consider other variables that may explain the relationship between insecure attachment and sexual communication.

4.4 Implications

Prior research has demonstrated that poor sexual communication is linked to poor sexual satisfaction and in turn, decreased relationship satisfaction. Poor relationship satisfaction can lead to relationship termination or infidelity within the relationship (Generous, 2017). Clinicians and researchers should focus on improving individuals' and couples' experiences of sexual satisfaction to improve relationship outcomes.

Interventions designed to improve sexual satisfaction should consider incorporating broad education around sexual consent and refusal, as well as communication skills necessary to consent/refuse and talk about pleasurable sex. These interventions could be particularly useful for insecurely attached emerging adults due to their propensity for sexual development and exploration. Communication techniques could include instruction and role plays around the content and tone of verbal communication, promoting attention, and developing non-verbal communication behaviors and gestures. Interventions designed to improve sexual communication might improve emerging adults' future committed romantic relationships in addition to their current sexual relationships. Additionally, interventions around sexual communication could shape emerging adults' understanding of sexual consent, and sexual refusal. Previous studies show many women believe intercourse is not qualified as sexual assault due to consenting after significant pressure (Burkett and Hamilton, 2012). Interventions around sexual communication could improve communication skills necessary for pleasurable sex within relationships.

Another possible implication of this research pertains to clinical domains.

Previous research has shown that in close to half of couples seeking therapy, at least one partner reported a sexual dysfunction (Emond et al., 2021). Clinicians working with couples may consider discussing sexual communication strategies in session. Research suggests that 1) anxiously attached emerging adults are more likely to engage in poorer sexual communication, 2) avoidant attachment has no significant predictions of sexual communication, and 3) poor sexual communication generally has worse relational and sexual outcomes (Generous, 2017; Gouveia et al., 2016). Due to this research, clinicians who educate couples, where at least one partner is insecurely attached, around sexual communication skills should continue to do so for the couple's benefit

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APPENDICES

Appendix A

Study Eligibility Form

Are you currently involved in a sexual relationship (e.g., hooking up, friends with benefits) or in an exclusive romantic relationship (e.g., dating, engaged)?

- ☐ Yes
- ☐ No

Appendix B

Demographics

1. Please use the following formula to create an alphanumeric code. Please use no spaces:
 - a. The LAST FOUR digits of your cell phone number (946-722-1398 = 1398)
 - b. The FIRST LETTER of your first name (e.g., Kate = K)
 - c. The FIRST TWO LETTERS of the city/town you were born in (Nashville = NA)
 - d. The FIRST LETTER of your middle name (e.g., David = D) If you have no middle name, please use X
 - e. Example: 1398KNADYour alphanumeric code: _____
2. How old are you? _____
3. What is your class standing?
 - a. First year
 - b. Second year
 - c. Third year
 - d. Fourth year
 - e. Fifth year
4. Have you declared a major? _____ Yes _____ No
5. If yes, what is it? _____
6. What is your gender? _____
7. Which statement best describes your gender?
 - a. My sex assigned at birth aligns with my gender identity (e.g., assigned male at birth and identify as a man)
 - b. My sex assigned at birth does not aligns with my gender identity (e.g., assigned male at birth and identify as a woman)
 - c. Prefer to self-describe _____
8. Which of the following best describes your sexual orientation? (Check all that apply)
_____ Gay
_____ Lesbian
_____ Straight
_____ Bisexual
_____ Queer
_____ I prefer to describe myself as _____
9. Are you an international student? _____ Yes _____ No
If YES
What country are you from? _____

Which of the following best describes your racial/ethnic background?

- ☐ White/Caucasian
- ☐ Asian
- ☐ Black/African
- ☐ Native/Indigenous
- ☐ Biracial/Multiracial
- ☐ I prefer to describe myself as: _____

10. FOR PEOPLE FROM THE US: Which of the following best describes your racial/ethnic background? (Check all that apply)

- ☐ White/Caucasian
- ☐ Asian
- ☐ Black/African
- ☐ Native/Indigenous
- ☐ Biracial/Multiracial
- ☐ I prefer to describe myself as: _____

11. What religious affiliation were you raised in? (Check all that apply)

- ☐ Protestant
- ☐ Baptist
- ☐ Catholic
- ☐ Jewish
- ☐ Muslim
- ☐ Buddhist
- ☐ None
- ☐ Other: _____

12. What is your current religious affiliation? (Check all that apply)

- ☐ Protestant
- ☐ Baptist
- ☐ Catholic
- ☐ Jewish
- ☐ Muslim
- ☐ Buddhist
- ☐ None
- ☐ Other: _____

13. How important is religion in your life?

- a. Very important
- b. Somewhat important
- c. Not too important
- d. Not at all important
- e. Prefer not to answer

14. How would you describe your political views?

- a. Conservative

- b. Moderate
 - c. Liberal
 - d. Prefer to self-describe: _____
 - e. Prefer not to answer
15. What is the highest level of schooling either of your parents completed?
- a. Some high school
 - b. High school graduate
 - c. Technical school
 - d. Some college
 - e. College graduate
 - f. Graduate school
16. Are you currently employed?
- a. Yes
 - b. No
17. If yes, how many hours do you work in typical week?
- a. Fewer than 10
 - b. 11-20
 - c. 21-30
 - d. More than 30
18. If yes, do you work:
- a. On campus?
 - b. Off campus?
19. Which of the following best describes your current living situation?
- a. On campus (residence hall)
 - b. Off campus (within 5 miles of campus)
 - c. Off campus (more than 5 miles from campus)
20. Which of the following best describes your living situation? (Check all that apply)
- _____ Living alone
 - _____ Living with students
 - _____ Living with non-student roommates
 - _____ Living with parents/guardians/relatives
 - _____ Living with spouse
21. If you were born in the U.S., what is the zip code of your hometown? If you were not born in the U.S., in what country were you born? If you indicated that you are in a romantic relationship, how long have you been dating your current partner(s)? _____
22. Which of the following best describes your sexual/romantic relationship status?
- a. I am currently involved in one sexual relationship and am not in an exclusive romantic relationship.

- b. I am currently involved in more than one sexual relationship and am not in an exclusive romantic relationship.
 - c. I am currently involved in one exclusive romantic relationship.
 - d. I am currently involved in more than one romantic relationship.
- 23. Depending on the response selected above (each question corresponds respectively to the answer choice above) ...
 - a. How long have you been involved with your current sexual partner?
 - b. How long have you been involved with your primary sexual partner?
 - c. How long have you been dating your partner?
 - d. How long have you been dating your primary partner?
- 24. If you indicated you are involved in multiple sexual or romantic relationships, how many sexual or romantic partners do you have?

- 25. Are you sexually active (e.g., engaging in acts involving contact with the vulva, clitoris, vagina, anus, penis, or testicles between one or more consenting people for the purpose of sexual pleasure) with your current partner?
 - a. Yes
 - b. No
- 26. Do you have any children?
 - a. Yes
 - b. No
- 27. Please briefly describe any differences in identity between you and your partner(s) (e.g., race, ethnicity, sexual orientation, gender identity, socioeconomic status, age, religious background).

- 28. Are you a military veteran or active-duty member?
 - a. Yes
 - b. No
- 29. If yes, which of the following best describes your experience?
 - a. U.S. military veteran or active-duty member
 - b. Military veteran or active-duty member serving a country other than the U.S.
 - c. Current or former member of the U.S. National Guard or Reserves
 - d. Current or former member of the U.S. National Guard or Reserves or similar in a country other than the U.S.
 - e. Current member of the U.S. ROTC
 - f. Other (please specify): _____
- 30. What campus activities are you involved in? (Check all that apply)

- _____ Academic or professional organization
- _____ Campus activities or event attendance
- _____ Intramural or club sports
- _____ Community service/service-learning
- _____ Greek-letter organization
- _____ Cooperative organizations (co-ops)
- _____ Honor society
- _____ Intercollegiate athletics
- _____ Internships
- _____ Leadership or mentoring program
- _____ Multicultural organization
- _____ On-campus employment
- _____ Orientation leader
- _____ Performing arts
- _____ Political activism
- _____ Recreation or wellness group
- _____ Religious or spiritual group
- _____ Research with faculty
- _____ Residential life (security, desk attendant, resident assistant)
- _____ Student government
- _____ Student media (yearbook, newspaper, radio)
- _____ Study abroad
- _____ Other student club
- _____ Other (please specify): _____
- _____ Prefer not to answer

Appendix C

Experiences in Close Relationships – Revised Questionnaire

The statements below concern how you feel in emotionally intimate relationships. We are interested in how you generally experience relationships, not just in what is happening in a current relationship. Respond to each statement by circling a number to indicate how much you agree or disagree with the statement.

RESPONSE FORMAT

- 1 = Strongly Disagree
- 2 = Disagree
- 3 = Slightly Disagree
- 4 = Neither Agree or Disagree
- 5 = Slightly Agree
- 6 = Agree
- 7 = Strongly Agree

1. I'm afraid that I will lose my partner's love.
2. I often worry that my partner will not want to stay with me.
3. I often worry that my partner doesn't really love me.
4. I worry that romantic partners won't care about me as much as I care about them.
5. I often wish that my partner's feelings for me were as strong as my feelings for him or her.
6. I worry a lot about my relationships.
7. When my partner is out of sight, I worry that he or she might become interested in someone else.
8. When I show my feelings for romantic partners, I'm afraid they will not feel the same about me.
9. I rarely worry about my partner leaving me.
10. My romantic partner makes me doubt myself.
11. I do not often worry about being abandoned.
12. I find that my partner(s) don't want to get as close as I would like.
13. Sometimes romantic partners change their feelings about me for no apparent reason.
14. My desire to be very close sometimes scares people away.

15. I'm afraid that once a romantic partner gets to know me, he or she won't like who I really am.
16. It makes me mad that I don't get the affection and support I need from my partner.
17. I worry that I won't measure up to other people.
18. My partner only seems to notice me when I'm angry.
19. I prefer not to show a partner how I feel deep down.
20. I feel comfortable sharing my private thoughts and feelings with my partner.
21. I find it difficult to allow myself to depend on romantic partners.
22. I am very comfortable being close to romantic partners.
23. I don't feel comfortable opening up to romantic partners.
24. I prefer not to be too close to romantic partners.
25. I get uncomfortable when a romantic partner wants to be very close.
26. I find it relatively easy to get close to my partner.
27. It's not difficult for me to get close to my partner.
28. I usually discuss my problems and concerns with my partner.
29. It helps to turn to my romantic partner in times of need.
30. I tell my partner just about everything.
31. I talk things over with my partner.
32. I am nervous when partners get too close to me.
33. I feel comfortable depending on romantic partners.
34. I find it easy to depend on romantic partners.
35. It's easy for me to be affectionate with my partner.
36. My partner really understands me and my needs.

Appendix D

Dyadic Sexual Communication Scale

Now, you are going to read a list of statements different people have made about discussing sex with their primary partner. As you read each one, please tell me how much you agree or disagree with it.

RESPONSE FORMAT

1 = Strongly Disagree

2 = Disagree

3 = Slightly Disagree

4 = Slightly Agree

5 = Agree

6 = Strongly Agree

1. My partner rarely responds when I want to talk about our sex life.
2. Some sexual matters are too upsetting to discuss with my sexual partner.
3. There are sexual issues or problems in our sexual relationship that we have never discussed.
4. My partner and I never seem to resolve our disagreements about sexual matters.
5. Whenever my partner and I talk about sex, I feel like she or he is lecturing me.
6. My partner often complains that I am not very clear about what I want sexually.
7. My partner and I have never had a heart-to-heart talk about our sex life together.
8. My partner has no difficulty in talking to me about his or her sexual feelings and desires.
9. Even when angry with me, my partner is able to appreciate my views on sexuality.
10. Talking about sex is a satisfying experience for both of us.
11. My partner and I can usually talk calmly about our sex life.
12. I have little difficulty in telling my partner what I do or don't do sexually.
13. I seldom feel embarrassed when talking about the details of our sex life with my partner.

