

# Female Genital Self-Image and Sexual Dissatisfaction: The Role of Sexual Esteem and Partner Perceived Genital Dissatisfaction

Master thesis by Ieva Baršauskaitė

Supervisor: Femke van den Brink Student number: 4018257

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#### **Abstract**

Given the current cultural climate women are vulnerable for developing a dysfunctional view of their genitals in relation to their sexuality, which might affect their sexual experiences. The present study examined the associations between negative female genital self-image and sexual dissatisfaction, and the mediating role of sexual self-esteem. Additionally, the moderating role of partner perceived genital dissatisfaction in this mediation was explored. In a cross-sectional design, 218 women completed an online survey measuring genital self-image, perceived level of the partner's satisfaction with the genitals, sexual self-esteem, and sexual dissatisfaction. Data were analyzed using correlational analyses, a mediation analysis, and a moderated mediation analysis, with female genital self-image as the independent variable, sexual dissatisfaction as the dependent variable, sexual self-esteem as a mediator, and partner perceived genital dissatisfaction as a moderator. Results of the mediation analysis showed that, as predicted, negative genital self-image had an indirect effect on sexual dissatisfaction via sexual low self-esteem. Furthermore, a direct effect of negative genital self-image on sexual dissatisfaction was found. The moderated mediation analysis, however, did not confirm the role of partner perceive genital dissatisfaction as a moderator. These findings highlight the importance of genital self-image as a relevant part of body image in the context of sexual experiences.

Keywords: female genital self-image; sexual self-esteem; sexual dissatisfaction; partner perceived genital dissatisfaction

#### Introduction

Female genitals are often (mis)represented as sexually inadequate, disgusting, and shameful, and thus perfectible in order to make them more "fresh" and "youthful" (Braun & Wilkinson, 2001). From feminine hygiene products to Kegel exercises and cosmetic surgery, females are encouraged to attain a "perfect" and "fuckable pussy". The "ideal" and sexualized image of genitals is then reinforced by the media, most notably in pornography (Attwood, p. xiii-xxi, 2014). It appears that women, more than men, tend to be more dissatisfied with their genitals, especially when it comes to their color, length, pubic hair, and smell (Mullinax, Herbenick, Schick, Sanders, & Reece., 2015). Cultural and societal context thus has a major influence on the female experience of their genitals (Braun & Wilkinson, 2001). Media and social interactions facilitate the learning and internalization of the idea that female body is an object to be used and looked at by male observers (Fredrickson & Roberts, 1997). The body is viewed in a fragmented way and different body are judged separately and unequally: "I love my hair, but my privates stink" (Fudge & Byers, 2017a). Consequently, given the cultural climate women may develop a dysfunctional view of their genitals in relation to their sexuality (Braun & Wilkinson, 2001), which can be detrimental to their sexual experiences (Schick, Calabrese, Rima, & Zucker, 2010).

The way women perceive and experience different aspects of their genitals, such as appearance, odor, and functionality, has been conceptualized as genital self-image (Herbenick et al., 2011). The work of Masters and Johnson (1970) provides a mechanism through which women's attitudes towards their genitals might affect their sexual satisfaction. The authors theorized that anxiety about sexual performance can disrupt the sexual response. While Masters and Johnson's (1970) primary focus was sexual dysfunction, their work can be used in a broader context of sexual satisfaction (Van den Brink, 2017). Sexual satisfaction has been conceptualized as a subjective evaluation of one's satisfaction with their sex lives (Pinney, Gerrard, & Denney, 1987), thus including the whole spectrum of possible experiences of sexuality. The process that fuels the anxiety during sexual activity is called spectatoring: a woman starts to bring her attention towards her body parts, her appearance, and/or her adequacy of sexual functioning from the outsider's perspective. According to Barlow's (1986) model, negative cognitions about one's appearance caused by spectatoring lead a person to focus on non-erotic or performance-related cues instead of

arousal-related ones, which results in that person being distracted during sexual activity. Subsequently, the autonomous nervous system is activated producing a negative emotional state – increasing anxiety (Barlow, 1986). As a consequence, the ability to be "present" during sexual activity and the experience of sexual arousal are impaired, resulting into sexual dissatisfaction. Thus, this framework suggests that two sets of negative cognitions can cause cognitive distraction resulting into sexual dissatisfaction: negative cognitions about bodily appearance, such as negative thoughts about one's genitals, and negative cognitions regarding the adequacy of personal sexual functioning during sexual activity – sexual self-esteem (i.e. an individual's confidence in themselves as a sexual partner; Wiederman & Allgeier, 1993).

Results of previous empirical studies support the association between negative female genital image and sexual dissatisfaction (Algar et al., 2011; Berman, Berman, Miles, Pollets, & Powell, 2003). Negative feelings towards one's genitals may cause discomfort and enhance self-consciousness during intimate situations (Habke, Haritt, & Flett, 1999). Similarly, genital appearance dissatisfaction has been associated with more spectatoring during sexual activity (i.e. greater genital-image self-consciousness) and consequently sexual dissatisfaction (Schick et al., 2010). Moreover, findings from previous studies suggest that sexual self-esteem could play a role in mediating the relationship between genital selfimage and sexual dissatisfaction. It has been shown that the subjective evaluation of one's appearance and attractiveness influence sexual esteem (Wiederman & Hurst, 1998). Accordingly, negative genital self-image has been associated with lower sexual esteem (Amos & McCabe, 2016). In fact, Schick et al. (2010) established the mediating role of sexual esteem in the relationship between genital self-image and sexual satisfaction, where negative genital image predicted lower sexual esteem and, in turn, greater sexual dissatisfaction. The association between low sexual esteem and sexual dissatisfaction has been shown separately as well (Ménard & Offman, 2009).

The aforementioned theoretical framework (Masters & Johnson, 1970) suggests that the unwanted attention brought towards the genitals and the adequacy of sexual performance is by virtue from the outsider's perspective. The perceived opinion of a romantic partner (the outsider) therefore becomes an important point of reference of self-evaluation during sexual activity (Felson, 1985, as cited in Holt & Lyness, 2007). The phenomenon of how

other's opinion of us influences our self-image has been referred to as reflected appraisal (Tantleff-Dunn & Gokee, 2002 as cited in Holt & Lyness, 2007). Previous research has shown that women's beliefs about how their partner viewed them were associated with their self-image (Holt & Lyness, 2007), sexual esteem, and sexual satisfaction (Weaver & Byers, 2013). Given that genital self-image is a part of global body-image, it is not surprising that perceived partner's attitudes towards genitals would accordingly influence one's genital image. Indeed, perceived partner's negative opinions about one's genitals have been identified as a factor negatively affecting female's genital image (Fudge & Byers, 2017a). These results suggest that perceived partner's negative opinion about one's genitals affect both genital self-image and sexual esteem. Given that genital self-image and sexual esteem are related (Schick et al., 2010), perceived partner dissatisfaction with one's genitals may strengthen the link between negative genital image and sexual esteem, resulting into greater sexual dissatisfaction compared to perceived partner's satisfaction or more neutral attitudes regarding one's genitals.

In a nutshell, based on Masters and Johnson's (1970) and Barlow's (1986) model of sexual dysfunction and previous research (Schick et al., 2010), negative female genital self-image as well as low sexual esteem contribute to the cognitive distraction and increased anxiety in sexual functioning through the process of self-monitoring, resulting into sexual dissatisfaction. Specifically, results from previous studies suggested that low sexual esteem serves as a mediator in the relationship between genital self-image and sexual dissatisfaction. Furthermore, perceived partner's negative opinions about one's genital negatively affect genital self-image (Fudge & Byers, 2017a), sexual esteem, and sexual satisfaction (Weaver & Byers, 2013), possibly strengthening the link between negative genital image and sexual dissatisfaction via sexual esteem.

#### **Present study**

The present study investigated the relationships between female genital self-image, sexual esteem, partner perceived genital dissatisfaction, and sexual dissatisfaction in women. First, based on the associations of female genital self-image and sexual esteem with sexual dissatisfaction found in previous studies (e.g., Herbenick et al., 2011; Schick et al., 2010), it was expected that a more negative female genital image and low sexual esteem would be

associated with more sexual dissatisfaction. Second, based on previous findings (Amos & McCabe, 2016; Ménard & Offman, 2009; Schick et al., 2010; Wiederman & Hurst, 1998), it was expected that sexual esteem would mediate the relationship between the female genital image and sexual dissatisfaction. Specifically, it was expected that negative genital self-image would be associated with lower sexual esteem which, in turn, would be related to greater sexual dissatisfaction.

Finally, based on previous research (Fudge & Byers, 2017a; Holt & Lyness, 2007), it was hypothesized that perceived partner's genital dissatisfaction would moderate the link between female genital image and sexual esteem. The strength of the relationship between genital self-image and sexual esteem would depend on the perceived partner's genital satisfaction in a way that the more negative view a woman holds about her partner's perception of her genitals, the more strongly her sexual esteem will be affected by her own negative genital image. In other words, it was expected that perceived partner's dissatisfaction with one's genitals strengthens the link between negative genital image and sexual esteem, which results into greater sexual dissatisfaction compared to perceived partner's satisfaction or more neutral attitudes regarding one's genitals. The proposed hypotheses are summarized schematically in Figure 1.

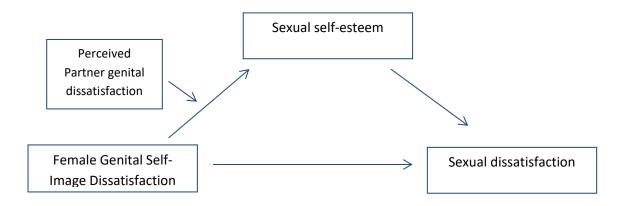


Figure 1. The hypothesized relationship between genital self-image satisfaction and sexual satisfaction through sexual esteem, and the moderated role of perceived partner's genital dissatisfaction.

#### Method

#### Participants and Procedure

Participants for this study were recruited via the Internet. The questionnaire was distributed via the website of Utrecht University and social media. Criteria for participation were female gender, 18 years old or older, currently involved in a romantic relationship, and sexually active within that relationship. The program Lime Survey was used to create the online questionnaire. Upon opening the link, the participants first read a short description of the survey, completed the informed consent form, and passed a control question for their eligibility. The questionnaire measured female genital self-image, sexual self-esteem, perceived partner's genital dissatisfaction, and sexual dissatisfaction Finally, the participants answered demographic questions regarding their age, education, sexual orientation, and the length of the current romantic relationship. On average, it took 30 to 45 minutes to complete the survey.

The final sample of this study consisted of 218 participants. Age ranged from 18 to 48 years  $(M=24.05,\ SD=4.47)$ . Highest level of education (completed or current) was lower secondary school in 0.5% (n=1), higher secondary school in 5% (n=11), lower vocational education in 0.5% (n=1), higher vocational education in 5.5% (n=12), and university in 88.5% (n=193) of the participants. In the total sample, 79.8% (n=174) were heterosexual, 1.4% were homosexual (n=3), 17.4% (n=38) bisexual, and 1.4% indicated "other" sexual orientation (n=3). The duration of the current relationship was less than six months in 12.4% (n=27), between six and twelve months in 9.6% (n=21), between one and two years in 24.8% (n=54), and longer than two years in 53.2% (n=116) of the participants.

#### Measures

#### Female Genital Self-Image

Female Genital Self-Image was measured using the Female Genital Self-Image Scale (FGSIS; Herbenick et al., 2010). Seven items were used to evaluate participants' attitudes towards their genitals (e.g. "I am satisfied with the appearance of my genitals"). The responses were measured on a 4-point Likert scale, where 1 = strongly disagree and 4 = strongly agree. Items were recoded if appropriate and averaged so that higher scores indicated a more negative genital self-image. The FGSIS has been reported to have high reliability and good validity (Herbenick et al., 2010). In the current study, the Cronbach's alpha was  $\alpha = .83$ .

#### Sexual Esteem

The Sexual Esteem Scale (SES; Snell & Papini, 1989) was used to measure participants' sexual self-esteem. Participants were asked to evaluate 10 items (e.g., "I am confident about myself as a sexual partner.") on a 5-point Likert scale, where 1 = definitely disagree and 5 = definitely agree. Higher scale scores indicated greater sexual esteem. The scale has shown high reliability ( $\alpha$  = .92) and validity (Snell & Papini, 1989). In this study the Cronbach's alpha was  $\alpha$  = .93.

#### Partner Perceived Genital Dissatisfaction

To assess the perception of partner's dissatisfaction with one's genitals the modified Female Genital Self-Image Scale was used (Herbenick et al., 2010). Six out of seven items from the original FGSIS scale were rephrased focusing on the partner's perception of the genitals (e.g. "I feel positively about my genitals" was transformed to "My partner feels positively about my genitals"). One item ("I feel comfortable letting a healthcare provider examine my genitals.") was excluded due to its lack of relevance. Respondents were asked to evaluate 6 items (e.g. "My partner thinks my genitals smell fine") and rate them on a 4-point Likert scale, where 1 = stongly disagree and 4 = stronlgy agree. Items were recoded if appropriate and averaged so that higher scores indicated greater partner perceived genital dissatisfaction. Cronbach's alpha for the modified scale was  $\alpha = .86$ .

#### Sexual Dissatisfaction

Sexual Satisfaction Scale for Women (SSS-W; Meston & Trapnell, 2005) was used to assess participants' level of sexual dissatisfaction. Participants were asked to evaluate 30 items about their contentment, communication, compatibility, relational, and personal concerns, in the context of their sex lives (e.g. "I often feel something is missing from my present sex life."). The responses were measured on a 5-point Likert scale, where 1 = strongly disagree and 5 = strongly agree. Items were recoded if appropriate and averaged so that higher scores indicated more sexual dissatisfaction. The scale has shown to have good reliability ( $\alpha$  = .94) and validity (Meston & Trapnell, 2005). In the current study, Cronbach's alpha was  $\alpha$  = .92.

#### Statistical Analysis

All statistical analyses were performed using IBM SPSS Statistics version 24. First, bivariate associations between the study variables were measured using Pearson correlation

coefficients. Second, using the Hayes' PROCESS macro plug-in (Hayes, 2013), a mediation analysis was conducted with female genital self-image as an independent variable, sexual self-esteem as a mediator, and sexual dissatisfaction as the dependent variable (Model 4, Hayes, 2013). The mediation analysis estimates the total, direct, and indirect effects of female genital self-image on sexual dissatisfaction. The total and direct effects were determined using a stepwise multiple regression analysis in which female genital self-image and sexual dissatisfaction were entered in the first step and sexual self-esteem in the second step. The total effects refer to the relationship between female genital self-image and sexual dissatisfaction (first step), and direct effects refer to the same relationshipp while controlling for sexual self-esteem (second step). The indirect effect of female genital self-image on sexual dissatisfaction through sexual self-esteem and its significance was estimated by means of bootstrap analysis with 5000 bootstrap samples and bias-corrected 95% confidence intervals. The absence of value 0 within these confidence intervals indicated significance of the mediating role of the sexual self-esteem (i.e., the indirect effect). Third, the moderated-mediation analysis was conducted with female genital self-image as an independent variable, sexual self-esteem as a mediator, perceived partner's genital dissatisfaction as a moderator, and sexual dissatisfaction as the dependent variable (Model 7, Hayes, 2013). The indirect effect of female genital self-image on sexual dissatisfaction through sexual self-esteem, moderated by perceived partner's genital dissatisfaction, was calculated using bootstrap analysis (similar to the mediation analysis). All coefficients will be reported in an unstandardized form.

#### **Results**

Bivariate associations between negative genital self-image, sexual self-esteem, perceived partner's genital dissatisfaction, and sexual dissatisfaction

The means and standard deviations of the study variables, as well as the results of the correlation analyses, are presented in Table 1. As expected, a more negative genital self-image and low sexual esteem were both associated with more sexual dissatisfaction. Also, partner perceived genital dissatisfaction was associated with more negative genital self-image and greater sexual dissatisfaction, as well as negatively associated to sexual esteem.

**Table 1.** Means, standard deviations, and bivariate correlations between study variables (*N*=218)

| Variable                              | М    | SD   | Min. | Max. | 1     | 2    | 3     | 4 |
|---------------------------------------|------|------|------|------|-------|------|-------|---|
| 1 Genital Self-Image <sup>a</sup>     | 1.96 | 0.55 | 1    | 4    | -     | -    | -     | - |
| 2 Sexual Esteem <sup>b</sup>          | 3.71 | 0.89 | 1.10 | 5    | 43**  | -    | -     | - |
| 3 Partner Perceived                   | 1.53 | 0.48 | 1    | 3    | .44** | 31** | -     | - |
| Genital Dissatisfaction <sup>c</sup>  |      |      |      |      |       |      |       |   |
| 4 Sexual Dissatisfaction <sup>d</sup> | 1.98 | 0.59 | 1.10 | 3.53 | .29** | 39** | .28** | - |

*Note.* <sup>a</sup> Scale range: 1-4, higher scores indicated more negative genital self-image; <sup>b</sup> Scale range: 1-5, higher scores indicate higher sexual esteem; <sup>c</sup> Scale range: 1-4, higher scores indicate greater perceived partner's genital dissatisfaction; <sup>d</sup> Scale range: 1-5, higher scores indicate greater sexual dissatisfaction.

Total, direct, and indirect effects of negative genital self-image on sexual dissatisfaction through sexual self-esteem

The results of mediation analysis of the relationship between negative genital self-image and sexual dissatisfaction through sexual esteem are displayed in Table 2.

**Table 2.** Results of the stepwise regression analysis with sexual dissatisfaction as outcome: Total and direct effects of negative genital self-image and sexual esteem on sexual dissatisfaction

| Predictors  | B step 1 | B step 2 |  |
|---|----------|----------|--|
| Step 1: adj. R <sup>2</sup> = .08, F(1, 216) = 19.28*** | .31***   | .15*     |  |
| Negative genital self-image                             |          |          |  |
| Step 2: $R^2$ = .17, $F(2, 215)$ = 22.78***             |          | 22***    |  |
| $\Delta R2 = .09$ , $\Delta F(1, 215) = 24.21***$       |          |          |  |
| Sexual esteem   |          |          |  |

Note. B's in step 1 represent total effects of negative genital self-image on sexual dissatisfaction. B's in step 2 represent direct effects of genital dissatisfaction on sexual dissatisfaction. \*p<.05, \*\*p<.01, and \*\*\*p<.001

<sup>\*</sup>p<.05, \*\*p<.01, and \*\*\*p<.001

The regression analysis revealed a significant total effect (step 1) and direct effect (step 2) of genital self-image on sexual dissatisfaction. Moreover, a significant direct effect (step 2) of sexual esteem on sexual dissatisfaction was found. Seventeen percent of the variance in sexual dissatisfaction could be explained. Furthermore, the bootstrap analyses revealed a significant indirect effect of negative genital self-image on sexual dissatisfaction via sexual esteem, .16, BCa 95% CI [.09, .23]. In line with the hypothesis more negative genital self-image was related to lower sexual esteem, which in turn, was related to to greater sexual dissatisfaction.

## Moderated-mediation analysis with partner perceived genital dissatisfaction as moderator

In contrast with the expectation, the results of the moderated-mediation analysis showed that partner perceived genital dissatisfaction was not a significant moderator in the relationship between genital self-image and sexual esteem (genital self-image x partner perceived genital dissatisfaction, B = .16, p = .39). Also, the level of partner perceived genital dissatisfaction did not have a significant effect on the strength of the indirect effect of negative genital self-image on sexual dissatisfaction via sexual esteem (Table 3).

**Table 3.** Indirect effects of negative genital self-image on sexual dissatisfaction through sexual esteem at specific values of the moderator (partner perceived genital dissatisfaction)

| Moderator                                 |          | Sexual dissatisfaction      |      |      |  |  |
|---|----------|-----------------------------|------|------|--|--|
|   | Level    | Conditional indirect effect | LLCI | UCLI |  |  |
| Partner perceived genital dissatisfaction | High     | .12                         | .09  | .24  |  |  |
|   | Moderate | .14                         | .08  | .21  |  |  |
|   | Low      | .15                         | .06  | .21  |  |  |

*Note.* The index of moderated mediation (.-04, BCa 95% CI [-.12, .04]); LLCI and UCLI correspond to bootstrapping lower and upper level confidence interval.

#### **Discussion**

The present study examined the relationship between female genital self-image and sexual dissatisfaction, and the role of sexual esteem and partner perceived genital dissatisfaction. In line with theory and previous study results (Ålgars et al., 2011; Berman et al., 2003; Schick et al., 2010), and as expected, negative genital self-image was related to more sexual dissatisfaction. In addition, this relationship was mediated by low sexual esteem. These results highlight once again the importance of genital self-image as a relevant part of body image in the context of sexual experiences. While genital self-image is a relatively new area of research in the context of sexual satisfaction - the first scale to measure female genital self-image was developed only 15 years ago (Berman et al., 2003) - the implications of negative attitudes towards one's genitals on sexual experiences are univocally detrimental. This research replicates previous findings (e.g., Schick et al., 2010) of the relationship between genital self-image and sexual dissatisfaction via sexual esteem and expands them by incorporating a broader measure of genital self-image. The female-specific scale used in the current study (FGSIS, Herbenick et al., 2010) accounts for various aspects related to genital self-image, such as odor, functionality, and appearance, while the measures used previously (e.g., Vulva Appearance Satisfaction Scale used in Schick et al. (2010) were limited to the appearance satisfaction.

Furthermore, the results also showed a significant direct effect between genital self-image and sexual dissatisfaction. The relationship between the two variables remained significant when controlling for sexual esteem. Naturally, other factors than sexual esteem are likely to explain the link between genital self-image and sexual dissatisfaction. For example, previous research (Herbenick et al., 2011) has shown that women with more negative genital image engage less in various sexual and health behaviors, such as vibrator use, masturbation, and self-examination. Moreover, lower scores on the FGSIS were also related to lower scores on all subscales of the Female Sexual Functioning Index measuring domains of sexual function such as sexual arousal, orgasm, satisfaction, pain. It is possible that women who have a more negative genital image are less likely to engage in sexual behaviors and with their sexuality, and have relatively lower levels of sexual functioning, thus impacting their sexual satisfaction. However, this explanation remains hypothetical, needing further investigation.

Lastly, while partner perceived genital satisfaction was positively associated with all study variables, its role as a moderator in the relationship between genital self-image and sexual esteem was not confirmed. Specifically, the strength of the relationship between genital self-image and sexual esteem was not dependent on the level of partner perceived genital dissatisfaction, as indicated by the non-significant interaction effect. Also, partner perceived genital dissatisfaction did not significantly impact the strength of the indirect effect of genital dissatisfaction on sexual satisfaction via sexual esteem. This finding indicates that partner perceived genital dissatisfaction does not moderate neither the relationship between genital self-image and sexual esteem, nor the relationship between female genital self-image and sexual dissatisfaction via sexual esteem. Given that there are few studies dealing with partner perceived attitudes specifically related to genitals, further research should investigate what role and to what extent does perceived partner's dissatisfaction with genitals have in relation to genital self-image and sexual dissatisfaction.

In this study, females rated their genital self-image consistently lower when compared to the ratings of perceived partner's genital dissatisfaction. This finding is in line with previous research showing that overall, males tend to rate female genitals more favorably than females rate their own genitals (Mullinax et al., 2015). Therefore, when it comes to partner perceived attitudes, females in this study replicated the actual male-female difference in attitudes. Given this gap between females' own and partner perceived genital dissatisfaction, and the influence genital self-image has on the sexual esteem and sexual satisfaction, it seems important to promote more positive attitudes towards female genitals. There remains a part of our culture that downgrades females' genital self-image and an open and public conversation about this topic should be encouraged. Moreover, scientific discourse about female sexuality should become more accessible to general population, since there is a demand coming from the community (as experienced by me while conducting this research).

Overall, these results underscore the importance of female genital self-image in sexual context. Genitals, more than before, have become a part of the public domain and consequently genital self-image is more malleable to external influences such as media (Braun & Wilkinson, 2001). Given the growing importance of physical appearance and social comparison on social media in our study population, the millennials (Schokkenbroek, 2016),

it is important to address its negative consequences on female genital image, sexual esteem and sexual satisfaction.

#### Limitations

The present study had several limitations. Firstly, the study sample was highly homogenous – mostly young (mean age 24 years) and highly educated heterosexual females. While some previous research has shown that there are no significant differences with regards to genital self-image for different age groups (Fudge & Byers, 2017b), other research has identified that older women have a more negative genital self-image (Berman & Windecker, 2008) and a higher prevalence of sexual dysfunction (Lewis et al., 2004). Therefore, it is possible that current results would be amplified in a more representative sample.

Secondly, the scale used for partner perceived genital dissatisfaction has not been validated or used before. In fact, previous research explored partner perceived opinions of genitals only through qualitative methods (Fudge & Byers, 2017a). Moreover, using a dyadic design would accommodate other possible interpersonal factors that influence sexual experiences, such as partner communication, intimacy, and relationship quality (Back et al., 2011).

Lastly, given the cross-sectional nature of this study, direction of causality could not definitely be determined. Longitudinal research designs are preferable to assess change in variables over time and to ensure a better validity of a mediation analysis (Hayes, 2015).

#### Conclusion

This study examined the relationship between female genital self-image and sexual dissatisfaction in females, additionally investigating the influence of sexual self-esteem and partner perceived genital dissatisfaction in a moderated mediation model. The results indicated a significant direct effect of negative female genital self-image and a significant indirect effect of negative female genital self-image via sexual esteem on sexual dissatisfaction. However, the results did not support the hypothesis of partner perceived genital dissatisfaction as a moderator. With genitals gaining more presence in the public domain, genital self-image becomes more susceptible to external influences from media. Therefore, it is important to promote a positive female genital image to avoid the negative consequences on sexual self-esteem and sexual satisfaction.

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