The Sexual Double Standard: Cultural Myth or Influential Script in Relation to the
Sexual Assertiveness of Men and Women in Two Generational Cohorts?

by

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Abstract

According to the sexual double standard (SDS), men and women are scripted to express differing levels of sexual assertiveness (SA). However, the effects of this script may be changing with fewer individuals directly implementing the SDS when making judgments about the sexual behaviour of others; yet most still believe in a societal SDS. Analysis was conducted on 339 heterosexual men and women of two age cohorts (18-25 and 35-42). Consistent with past findings, rates of belief in the SDS were higher than rates of implementation. Belief in the SDS predicted higher levels of SA in women of the older cohort only and implementation of the SDS did not predict levels of SA in any of the groups. The continued impact of the SDS on sexual behaviour is of interest to sex therapists and educators, as it has been known to influence sexual coercion, safer sex practices, and sexual satisfaction.

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The Sexual Double Standard: Cultural Myth or Influential Script in Relation to the Sexual Assertiveness of Men and Women in Two Generational Cohorts?

Society makes judgments on the sexual behaviours of individuals, forming cultural expectations about what appropriate sexual acts are within a given society (Crawford & Popp, 2003). Sexual scripting theory holds that we learn what is expected of us through specific, socially acceptable roles, known as sexual scripts (Simon & Gagnon, 1986). Expected behaviours can often be differentiated from one another by specific gender roles into which members of society are socialized (Faunce & Phipps-Yonas, 1978). For men and women, gendered scripts lead to differing sexual expectations, often termed the “sexual double standard” (SDS) (Wiederman, 2005), which is defined as differing standards of sexual permissiveness for men and women (Crawford & Popp, 2003). How an individual internalizes and implements these scripts will have an impact on their sexual behaviour (Simon & Gagnon, 1986).

The sexual double standard is a sexual script that is widely recognized by members of society (Milhausen & Herold, 2001), and puts restrictions on the accepted sexual behaviours of men and women (Reiss, 1956, 1960, 1969, 1995) resulting in specific sexual behaviours not being expressed due the fear of social judgment and/or rejection. Traditional sexual scripts and the sexual double standard have been found to lead to negative outcomes, such as the suppression of female sexuality (Wiederman, 2005), more risky sexual activity (Hynie et al., 1998; Bowled et al, 2004), and more sexual coercion (Byers & O’Sullivan, 1998; Krahe, 2000; Levant & Brooks, 1997), yet it is still a prevalent social norm in today’s Western culture (Crawford & Popp, 2003).

Some studies have found that women's desires have been shifting away from traditional sexual scripts, but the behaviours they express continue to follow the traditional roles (Lawance et al., 1996). This may be because social norms, such as sexual scripts, can be so pervasive and enduring in a given culture that most members of society act in accordance to the norms (Fazio & Roskos-Ewoldsen, 2005), regardless of the internal desire to act differently. This may result in women engaging in sexual behaviours scripted by the sexual double standard, even if they do not personally believe in it and wish to behave in ways incongruent to the script. For example, research has shown that women continue to be less instrumental and assertive in sexual situations compared to men, yet desire to express more of these traits (Lawance et al., 1996). The socialization of sexual behaviour remains strong (Dworkin & O'Sullivan, 2007), yet little is understood about the current role that the belief in a societal sexual double standard plays in determining gendered sexual behaviour, even for those men and women who wish to challenge this script.

The sexual double standard is a dynamic social phenomenon first described by Reiss in the 1950's (Reiss, 1956, 1960, 1969, 1995). At this time, he predicted that the sexual double standard would continue to change and eventually cease to exist as premarital sexual standards became more permissive (Reiss, 1969). Today, some researchers believe that social norms regarding sexual scripts have shifted (Dworkin & O'Sullivan, 2007) and that the sexual double standard may no longer be used by contemporary populations (Marks & Fraley, 2005). Indeed, a meta analysis of research on the sexual double standard over the past two decades indicates evidence of both a continuing sexual double standard, as well as a lack of evidence to support its continued

existence, playing a “now you see it, now you don’t phenomenon” (Crawford & Popp, 2003, p. 14).

Inconsistencies in the research on the existence of the sexual double standard may be due to the way in which the sexual double standard is measured. A distinction has been made between belief and implementation of the sexual double standard (Marks & Fraley, 2005). Believing in a societal sexual double standard (i.e. perceptions of others in society endorsing the sexual double standard) is assessed separately from the use, or implementation, of the sexual double standard when making judgments about others (Milhausen & Herold, 1999, 2001). Attitudes towards sexual behaviour, such as general beliefs about the norms of a culture, seem to be consistent with the sexual double standard; however, actual evaluations of sexual behaviour, such as real judgments made about specific people, no longer seem to be consistent with the sexual double standard (Marks & Fraley, 2005). This suggests that the sexual double standard is widely recognized as a script or norm of Western culture, but may not actually be used by most members of society when making judgments about others. This begs the question: What continues to perpetuate the belief in this sexual script and what is its continued impact, if any, on sexual behaviours?

Research thus far has focused on acknowledging the difference between belief and implementation of the sexual double standard, yet little research has been conducted that assesses the differential impact on sexual behaviour. It has been asserted that a lack of implementation of the sexual double standard indicates that it no longer exists (Marks & Fraley, 2005), and thus no longer impacts the sexual behaviour of men and women. Yet, even if rates of implementation of the sexual double standard are lower in our

culture than in the past (Marks & Fraley, 2005), some research suggests that the belief in a societal double standard is still high (Milhausen & Herold, 1999) and it is not known if this is sufficient to result in behavioural changes. Continued research in this area is important in gaining an understanding of how the sexual double standard and the differences between belief and implementation are impacting members of society in today's western culture.

Furthermore, little research has been conducted that examines whether the sexual double standard influences the sexual behaviour of individuals of differing age groups in similar or dissimilar ways. The majority of research on the sexual double standard has been conducted using relatively young or student samples (e.g. Aubrey, 2004; Boone & Lefkowitz, 2004; Jackson & Cram, 2003; Marks & Fraley, 2006; Milhausen & Herold, 2001), thus limiting understanding of potential age cohort affects of the sexual double standard and limiting generalizability. The sexual double standard is known to be a dynamic social phenomenon which changes with time (Reiss, 1969). Thus, different generational cohorts may experience the influence of the sexual double standard differently from one another. Older generations may continue to be influenced by the traditional scripts they were exposed to in their youth, whereas younger generations may only be exposed to the residual affects of the sexual double standard thus are able to resist and redefine their sexual scripts.

Generational influence may be conceptualized as an escalator, where generations enter on the escalator of time and continue along as they age, coexisting with one another, yet are situated at different places along the escalator (Plummer, 2010). Individuals are thought to be most impressionable to the norms and generational events that occur as they

enter the escalator in their youth because the social information they absorb during this time is new and novel (Plummer, 2010). Older generations, at the middle or the top of the escalator, continue to be influenced by current social norms in combination with the social information that they acquire over their lives; predominately in their youth. Older generations also pass down information to the newer generations about social norms that they uphold. That is, the generations are interacting and influencing one another all the time. Yet each generation holds a different place on the escalator and thus absorbs differing amounts of the newest social information and norms (Plummer, 2010). In terms of the sexual double standard as a social norm, older research consistently found results in support of endorsement of the sexual double standard (e.g., Donald, 1985; Geen & Sandos, 1983; Hynie & Lydon, 1995); yet more recent research is finding less evidence of the sexual double standard in younger samples (e.g., Marks & Fraley, 2005, 2006; Milhausen & Herold, 1999, 2001), thus it could be that the sexual double standard is more salient in older generations because it was a more predominant norm in the past. More research is needed to explore the relationship of belief and implementation of the sexual double standard on differing age groups to explore potential generational cohort affects.

One trait hypothesized to be impacted by the endorsement of traditional sexual scripts and the sexual double standard is sexual assertiveness (Greene & Faulkner, 2005). Sexual assertiveness is a broad construct of sexual behaviour that incorporates both sexual communication and initiation (Shafer, 1977), meaning it involves both the ability to disclose sexual preference and to make direct requests to initiate desired behaviours (Menard & Offman, 2009). According to the traditional sexual double standard, men are

scripted to be sexual initiators and women are scripted as the recipients of initiations (Byers, 1996). This traditional script has an impact on the level of sexual assertiveness that each gender is expected to express. Men are expected to initiate and guide sexual activity while women are expected to be passive and compliant with the initiation of sexual activity (Greene & Faulkner, 2005).

Gendered expectations of sexual assertiveness, reflective of the sexual double standard, are problematic because they maintain that women express lower levels of sexual assertiveness even though higher levels of this characteristic are linked to positive health outcomes. Higher levels of sexual assertiveness have been linked to positive outcomes such as greater marital and sexual satisfaction (Hurlbert, 1991) and greater sexual self-esteem (Menard & Offman, 2009); whereas sexual scripts that endorse lower levels of sexual assertiveness for women have been linked to negative outcomes such as sexual coercion (Byers, 1996) and difficulty communicating the desire to use safer sex practices (Bowleg et al., 2004). Therefore, continued influence of the sexual double standard on levels of sexual assertiveness is linked to harmful outcomes, supporting the need for a better understanding of how belief and implementation of the sexual double standard impacts sexual behaviour. This knowledge is relevant to practical applications, such as sex therapy and sex education, promoting safer sex practices and healthy sexuality.

The current investigation aims to provide an understanding of how belief and implementation of the sexual double standard influence sexual assertiveness for males and females of separate generational age cohorts. While most individuals no longer implement the sexual double standard (Marks & Fraley, 2006), there is still a mass belief

in a societal sexual double standard (Milhausen & Herold, 2001). The scripts of the sexual double standard divides appropriate levels of sexual assertiveness by gender with the expectation that men will demonstrate higher levels of sexual assertiveness and women will demonstrate lower levels. Also, older generations may be more likely to implement the sexual double standard at higher rates compared to younger individuals if cohort effects are present. Whether this remaining belief in the sexual double standard is sufficient to influence the sexual decision making of individuals, specifically in regards to differing levels of sexual assertiveness by gender and by age cohort, needs further investigation. In other words, does the sexual double standard still exist and is it impacting the sexual assertiveness of men and women of differing generational groups?

Sexual Scripting Theory

Scripts are socially constructed guidelines stipulating what constitutes normative behaviour (Alksnis et al., 1996). Simon and Gagnon (1986) were the first researchers to apply social scripting theory to sexuality. Sexual scripting theory states that societal influence is a major contributor to sexual norms, and that sexual behavior is not based solely on biological urges (Simon & Gagnon, 1986). Scripts are learned by observing examples of appropriate behaviour demonstrated by a member of the culture that has already learned and uses the appropriate script. Viewing the negative appraisal of inappropriate behaviours also demonstrates what behaviours are socially unacceptable. This vicarious learning can take place by observing peers, parents, or even strangers (Wiederman, 2005). The media is also an influential source in learning sexual scripts, as it gives individuals access to observable scripted behaviour that they may not be able to witness first hand (Aubrey, 2004). Sexual scripts that individuals are exposed to in their

youth may continue to influence individuals throughout their lives, as they are salient and long lasting. Returning to the analogy of the escalator of generations, the sexual scripting of the newest generations is primarily absorbed as they enter the escalator in their youth and will continue to exert influence of the sexual decision making of individuals as they age.

Sexual scripting theory suggests that the scripting of sexual behaviour occurs on three levels: the cultural scenario level, the interpersonal level and the intrapsychic level. The cultural scenario level is where collective meanings within the larger society express their influence on behavioural scripts (Simon & Gagnon, 1986). This is the level of the social norms of a culture (Markle, 2008). For example, the initiation of sexual behaviour being the duty of men (Byers, 1996) is a cultural notion of a gender specific sexual behaviour. The second level of sexual scripting theory is interpersonal scripts. At this level, the individual applies the cultural scenarios to their own behaviours and social contexts for specific situations (Simon & Gagnon, 1986). For example, when actually engaging in sexual activity with a partner in a heterosexual scenario, both the man and the woman expect and allow the man to initiate the sexual contact. Thus, scripts are defined at the cultural level and directly impact individual behaviours. At the third level, intrapsychic scripting is based on the individuals' internal desires. The intrapsychic level can be viewed as an internal dialogue (Simon & Gagnon, 1986), and this would include sexual fantasy (Markle, 2008). For example, when fantasizing about engaging in sexual activity with a partner the man would imagine himself in a position to lead or direct the sexual interaction. It is the combined influence at all three of these levels which leads individuals to internalize their scripts and comply with the sexual norms of society.

Sexual scripting theory has frequently been used as a theoretical framework for examining the sexual double standard (e.g., Aubrey, 2004; Markle, 2008; Milhausen & Herold, 1999, 2001). The sexual double standard is conceptualized in this research as a cultural script that defines the interpersonal scripts of individuals by designating appropriate levels of sexual behaviour by gender. Intrapsychic scripts are proposed to work within the individual as belief in, or implementation of, the sexual double standard. That is to say, whether or not the sexual double standard (cultural scenario script) has an impact on sexual assertiveness (interpersonal script) depends on how much someone believes in, or implements, the sexual double standard (intrapsychic script). Understanding these links will “allow insight into how individuals negotiate the cultural, interpersonal, and intrapsychic realms simultaneously” (Dworkin & O’Sullivan, 2007, pp.116). That is to say, how cultural norms such as the sexual double standard influence the thoughts and behaviours of individuals.

The Sexual Double Standard

Scripting of the sexual double standard. In Western culture, men and women make up two distinct subcultures that are socialized and scripted to behave differently from one another (Faunce & Phipps-Yonas, 1978). Specifically, men and women are evaluated differently for engaging in the same sexual behaviours. For example, there are differing standards of sexual permissiveness for men and women (Crawford & Popp, 2003). The result of this socialization is the sexual double standard, which is characterized by differing sexual expectations for each gender (Wiederman, 2005).

The scripting of the sexual double standard begins at a young age. As children, boys and girls are taught to feel differently about their bodies. Since male genitals are

more external in nature, they are more accessible and young boys must touch themselves more often for washing and urination (Wiederman, 2005). As a result, boys find the sexual pleasure in touching their genitals earlier than females, who are taught to be very careful and cautious with their genitals (Wiederman, 2005). Because of this difference, women tend to have less experience with masturbation at younger ages than males and they may not realize the physical pleasure that may be achieved through genital stimulation (Wiederman, 2005).

Most sexual education that young girls receive has to do with risk and warning of the dangers of sex, such as unplanned pregnancy, and not the physical pleasure it may bring (Tolman, 1994). Women are scripted to believe they must be protective of their sexuality to reduce the risks involved with sex, both physical and social (Byers, 1996). Thus, physical pleasure alone is not scripted as an incentive to engage in sexual activity. Indeed, mothers tend to discuss relationships and moral issues regarding sexuality more often with their daughters rather than their sons, indicating evidence that “there may be a sexual double standard at work for preschool children” (Martin & Luke, 2010, p. 289). Due to this gendered socialization, women tend to be more emotional and relational with regards to sexuality (Offman & Matheson, 2005) because traditionally, women have been scripted to be relationship centered when it comes to sexuality. This script involves expecting emotional closeness and intimacy with a partner before engaging in sexual behaviour.

Men are taught to endorse sexual scripts which support non-relational sex (Markle, 2008), which is the act of engaging in sexual behaviours for lust or physical release as the goal and with a lack of relational or emotional connection with the sexual partner (Levant

& Brooks, 1997). Thus men and women are sexually motivated for different reasons; men are more often sexually motivated by physical pleasure, while women are more often sexually motivated to be close or intimate with a partner (Hill & Preston, 1996). The result of this differential scripting is the sexual double standard which encourages sexual assertiveness for men and sexual “gate-keeping” for women.

Women are given the title of “sexual gate keeper” because there is a societal expectation that men will want to engage in sexual activity in an indiscriminant manner and that it is the responsibility of the women to be restrictive and make sexual choices for both genders (Wiederman, 2005). In terms of sexual assertiveness, men are scripted to be sexual initiators and women are scripted as the cautious recipients of initiations (Byers, 1996; Dworkin & O’Sullivan, 2007). This puts unrealistic pressure on both genders. Women are scripted to restrict not only their own sexual behaviours, but also those of men (Frith & Kitzinger, 2001), while men’s sexual accessibility is viewed to be “willing and ready” all of the time (Dworkin & O’Sullivan, 2007; Hartwick et al., 2007). These differing scripts cause the formation and maintenance of the sexual double standard, which endorses that what is acceptable for one gender, sexually, may not be acceptable for the other. These differing scripts may, in turn, impact on the sexual decision making of men and women in our culture.

Reiss (1956, 1960, 1969, and 1995) was one of the first researchers to recognize and study the sexual double standard. In his earlier work, Reiss focused on premarital sex and how it was viewed as immoral for all women, but acceptable for men. Later in his work, Reiss distinguishes between the traditional “orthodox” sexual double standard that permits premarital sex for men, but not women, and a “transitional” sexual double

standard that permits premarital sex for women but only within the context of a committed relationship (Crawford & Popp, 2003). Reiss argues that the newer version of the sexual double standard is growing in popularity and that premarital sexual standards are changing over time and becoming more permissive. Within his own career, Reiss redefines the sexual double standard, stating that it will continue to change and eventually cease to exist (Reiss, 1969).

Each generation tends to express varying attitudes towards sexuality to one another (Moreno, 2006). Over time, sexual attitudes, especially towards female sexuality, have become more permissive (Cram & Jackson, 2003). This may influence how individuals from differing generations may internalize or be impacted by traditional sexual scripts and the sexual double standard. Two generational cohorts that are of interest are Generation X and Generation Y, since they may have been differentially impacted by the sexual double standard. There is much variation in the birth years used to define these generations, however, for the purposes of this study, individuals of Generation X are loosely defined as being born between the years of 1960 and 1980, and are in their middle adulthood; whereas individuals of Generation Y are associated with the birth years from 1981 to the 1990s are currently in their youth or young adulthood (Patalano, 2008).

Generation X is sometimes equated to the AIDS generation (Plummer, 2010) as it was at this time that awareness of sexually transmitted infections such as HIV and herpes emerged (Moreno, 2006). Additionally, during the 1980s, there were increased rates of teen pregnancy and more awareness of sexual abuse (Moreno, 2006). There was a backlash of the sexual freedoms experienced by the preceding “baby-boomer” generation

of “free-love” and the sexual revolution (Moreno, 2006). It is because of these social trends that it is thought that individuals of Generation X experienced more sexually conservative views compared to the generation of their parents.

Generation Y has often been coined the “digital” generation because of the many technological advances that have occurred in recent years (Plummer, 2010). These technological advances have impacted sexuality because access to sexual material has increased via the internet through pornography, social networking sites, mobile phones (Plummer, 2010) and the media (Moreno, 2006). Additionally, individuals born in Generation Y come from more single parent homes and have more working mothers than any other generation (Moreno, 2006), perhaps changing perspectives of women’s roles. Trends have also been observed with individuals getting married at older ages than ever before. Because of this, premarital sexuality is now viewed as a norm by most youth and young adults (Moreno, 2006). There is also a trend of a younger mean age of first intercourse than in previous generations (Moreno, 2006). Taken together, these trends suggest evidence of more sexually permissive views for those in Generation Y.

Individuals are thought to be most impressionable to the norms and generational events that occur in their youth (Plummer, 2010), hence the sexual scripting that individuals absorb in their youth will likely be long lasting and remain salient in their intrapsychic scripting into adulthood. It is expected that individuals in the older Generation X are more likely to have had more conservative sexual scripting as youth and experience the influence of the sexual double standard more strongly to those of Generation Y, whom have grown up in a more sexually permissive society.

Defining and measuring the sexual double standard. Current research regarding the sexual double standard has been inconsistent; some studies have found evidence that indicates a continuing sexual double standard, whereas others have found that the sexual double standard ceases to exist (Crawford & Popp, 2003). Due to these inconsistent findings, some researchers suggest that "...the sexual double standard is more of a cultural illusion than an actual phenomenon" (Marks & Fraley, 2005, p.183) and is no longer applicable to today's cultural norms. Consequently, research regarding the sexual double standard has been focused on determining if the sexual double standard still exists (see Marks & Fraley, 2005; Milhausen & Herold, 1999). However, this research has not met consensus and still has not explained the role of the sexual double standard in current gendered sexual behaviour.

A possible explanation for the inconsistencies in research on the existence of the sexual double standard may be due to the method by which the sexual double standard is measured. Although quantitative studies infrequently find evidence supporting the continued existence of the sexual double standard, qualitative research that focuses on the subjective experiences of perceived social norms surrounding sexuality still find results that are consistent with the sexual double standard (Crawford & Popp, 2003). This may be because these qualitative studies are targeting the belief in the existence of a societal sexual double standard, whereas quantitative studies are focused on direct evidence of its implementation. When this distinction between belief and implementation of the sexual double standard is made, it becomes clear that many individuals may still consider it to exist (Milhausen & Herold, 1999); hence it is still a salient script for society.

In order to examine the distinction between belief in a societal sexual double standard and personal endorsement of such a double standard (implementation), researchers Milhausen & Herold (1999) conducted a study on 165 Canadian female university students from the ages of 18-25. Participants were asked to complete a questionnaire which included a series of open and closed-ended questions. Perceptions of a societal sexual double standard were measured by presenting the statement: “Is there a double standard for sexual behaviour (a standard in which it is more acceptable for a man to have had more sexual partners than a woman)?” to which 95% of the participants reported they definitely or probably agreed. This result indicated a strong belief in a social sexual double standard among the sample. Personal endorsement of the sexual double standard was measured using between-subjects design by having half of the participants’ judge the sexual behaviours of a male target and the other half a female target and then the responses were compared to one another. These evaluations of the sexual behaviours of fictional targets found little evidence of implementation of a traditional sexual double standard as the participants rated both male and female targets who had had many sexual partners negatively (Milhausen & Herold, 1999). Therefore, although individuals perceived a societal sexual double standard to exist at the cultural level, most implemented a single standard of sexual behaviour on a personal level (Milhausen & Herold, 2001). Hence, it seems that attitudes towards sexual behaviour, such as general beliefs about the norms of a culture, are consistent with the sexual double standard. However, actual evaluations of sexual behaviour, such as real judgments made about specific people, no longer seem to be consistent with the sexual double standard (Marks & Fraley, 2005). Therefore, the sexual double standard continues to be a known

cultural script at the cultural scenario level, yet only holds importance in some of the intrapsychic scripts of individuals. That is, the belief in a societal sexual double standard is a salient intrapsychic script, yet the continued implementation of the sexual double standard is not.

If the sexual double standard is not as commonly implemented by members of society, then why is it so widely supported in cultural beliefs? Evidence has been found that there is a confirmation bias in the processing of information that is consistent with the sexual double standard. Researchers Marks and Fraley (2006) recruited 223 male and female first year university students to complete an experiment to test for such a bias. The participants were given a one-page vignette that described either a fictional male or female target which gave equal numbers of positive and negative comments based on their sexual history and number of past sexual partners. After reading the vignettes, participants were asked to recall how many negative and positive comments were made about the target. As hypothesized, participants tended to recall more information that was consistent with the sexual double standard: more positive comments were reported for the male target (Cohen's $d = -.40$) and more negative comments were reported for the female target (Cohen's $d = .18$). These findings suggest information that is consistent with the sexual double standard is more easily and frequently recalled rather than negative cases, which is an indication of a mass cultural belief in the sexual double standard as a norm of society, even if it is not being implemented by society.

Further complicating the matter is the lack of consensus in the literature on how the construct of the sexual double standard is defined and measured. Some researchers have a very narrow definition, including only how an individual is evaluated based on the

number of sexual partners indicating their level of promiscuity (Marks & Fraley, 2005; Milhausen & Herold, 1999). Other researchers, however, use a more encompassing definition that includes various ways men and women are differently evaluated for the same sexual behaviour (Crawford & Popp, 2003; Donald, 1985; Faunce and Phipps-Yonas, 1978). Using a narrow definition of the sexual double standard may overlook double standards for other sexual behaviours other than heterosexual intercourse (Crawford & Popp, 2003), consequently missing out on potentially important findings. Today's society is more permissive of sexuality than in generations past and this may be reflected in a more varied set of beliefs regarding which behaviours are acceptable and for whom.

The use of a broad definition of the sexual double standard will allow for a more inclusive examination of the sexual behaviours that men and women are differentially evaluated on. Indeed, Milhausen and Herold (2001) recommended that future investigations go beyond traditional narrow definitions of the sexual double standard and consider using more diverse measurements and broad definitions of the sexual double standard. Therefore, this study will use a definition that includes differential evaluation for the number of sexual partners, sexual initiation, and extramarital sex (Donald, 1985) in order to evaluate the differing standards of sexual permissiveness for men and women (Crawford & Popp, 2003). This will be especially important when evaluating the sexual double standard of different age cohorts because, as sexual norms evolve, newer generations may consider more varied behaviours when making evaluations of what is permissible for each gender.

Since the sexual double standard is thought to be a social phenomenon which evolves as the norms of society evolve, individuals of different generational age cohorts may experience the influence of the sexual double standard uniquely. Most experimental research on the sexual double standard has used young student samples (Crawford & Popp, 2003), thus missing out on potentially valuable information about how the sexual double standard influences individuals of different generational groups. The current study aims to fill this gap in the literature by exploring potential generational cohort affects of the sexual double standard by using two separate age groups; one of individuals from Generation Y, currently in their young adulthood (18-25 years old) and one of individuals from Generation X, currently in their middle adulthood (35-42 years old). Additionally, a mixed student and community sample was recruited for this study to further improve the generalizability of the results to the public. By observing how two differing generations are impacted by the sexual double standard, results of this study may allow insight into how this social norm is evolving with time.

The two age cohorts were chosen as they have a large enough age gap to observe two distinct generational cohorts, yet are close enough to be aware of common language and trends in current Western culture. This is important because sexual language can change very drastically with time, making it difficult for much older generations to understand the vocabularies of the newest generations (Plummer, 2010).

“It is suggested that each generational group shares a unique set of beliefs, attitudes and values as a result of the powerful influence of historical events and conditions that each person experiences as they mature into adulthood” (Patalano, 2008, p. 4). Moreover, it has been documented that social norms regarding standards for females’

sexual permissiveness are becoming more liberal over time (Cram & Jackson, 2003), thus traditional sexual scripts such as the sexual double standard may be less influential to newer generations than they were in the past. Because differing generations will have different perspectives on the social norms in current culture, it may impact how they are affected by the traditional sexual scripts of the sexual double standard. The observation of cohort effects in this study may suggest that the sexual double standard is shifting with newer generations, as “there are no fixed norms but constantly emergent ones” (Plummer, 2010, p.169).

If the sexual double standard was a more salient sexual script in the past, I expect that it would have a stronger impact on the sexual behaviours of individuals in the older age cohort than those in the younger cohort. What needs further examination is how both belief and implementation of the sexual double standard together, using broader definitions for their assessment, impact the sexual behaviour of differing generational cohorts. This should allow a comprehensive investigation of how they are influencing society in the present culture adding to the current literature in this area.

Belief and Implementation of the Sexual Double Standard and its Impact on Sexual Assertiveness

Sexual assertiveness is a measure of sexual communication and initiation (Shafer, 1977), meaning it involves both the ability to disclose sexual preference and make direct requests to initiate desired behaviours (Menard & Offman, 2009). In practice, sexual assertiveness is the ability of an individual to go out and get what they want sexually and it is influenced by the cultural script of the sexual double standard (Wiederman, 2005). This measure goes beyond assessments of frequency and type of desired sexual behaviour

and assists in gaining an understanding of how the sexual double standard directly impacts the sexual behaviour of men and women.

Traditionally, the sexual double standard scripts men to be sexual initiators and women as sexual restrictors (O'Sullivan & Byers, 1992; Byers, 1996). This has an impact on the level of sexual assertiveness that each gender is expected to express (Greene & Faulkner, 2005). When traditional sexual scripts are followed, it would be expected that males would express higher levels of sexual assertiveness, as it is viewed as their responsibility to initiate contact in romantic relationships (Green & Sandos, 1983) and initiate sexual behaviours (Faunce & Phipps-Yonas, 1978; Hurlbert & Apt, 1994). For women, there are social proscriptions against their use of sexual assertiveness (Laumann & Mahay, 2002). For example, according to traditional sexual scripts, it is only acceptable for a woman to engage in sexual behaviour when she finally gives in to her partner's advances (Byers, 1996). Individuals even report more sexual pleasure from instances where the male partner initiated the sexual activity rather than the female partner (O'Sullivan & Byers, 1992). These examples support the salience of the sexual double standard in the intrapsychic and interpersonal scripts of individuals.

Women receive much negative appraisal for initiating sexual behaviour (Crawford & Popp, 2003). Studies have found that school aged girls, but never boys, were given negative labels or names if they demonstrated any assertiveness in regard to sexuality (Eder, Evans & Parker, 1995). This is also reflected in the media: in television programming men are typically cast as the sexual initiators and if women are cast in such a role there are more negative consequences depicted as a result (Aubrey, 2004). This is an example of the scripting to women that their sexual activities will hold more risk and

danger for them and aims to deter women from initiating sexual behaviour in their own lives (Aubrey, 2004).

Research has found that women tend to have a difficult time communicating their sexual desires and needs to their partners (Hurlburt, 1991). Sexual communication for the purpose of gaining more sexual pleasure has direct impact on the level of sexual satisfaction experienced (Menard & Offman, 2009), yet many women have difficulty with this type of communication. This may be due to the scripted focus of sexuality on male pleasure and orgasm (McCarthy & McCarthy, 1989) that leaves little room for female sexual pleasure (Hurlburt, 1991). Women also tend to have a more difficult time communicating with their sexual partners their wish to use safe sex practices such as condom use (Bowled et al, 2004), which has implications for women's sexual health (Bowled et al, 2004; Crawford & Popp, 2003; Hynie et al., 1998). These are examples of how the female relational sexual script teaches women to not to communicate their sexual needs, an example of lower sexual assertiveness, for both pleasure and protection; compromising the sexual safety of women.

Gender differences in sexual assertiveness are guided by the scripting of gendered expectations and the sexual double standard. Demonstrating lower levels of sexual assertiveness leaves individuals at a disadvantage, yet this is what traditional sexual scripts and the sexual double standard endorse for women. The current research project will aid in increasing awareness of the sexual scripts for sexual assertiveness, and may influence sex educators and therapists to encourage higher levels of sexual assertiveness for both men and women. Additionally, this investigation explores how both belief and

implementation of the sexual doubled standard independently influence levels of expressed sexual assertiveness of men and women.

Individuals' belief in a societal sexual double standard is thought to be independent of the way people actually evaluate one another, thus implement the sexual double standard (Marks & Fraley, 2005). Rates of belief in a societal sexual double standard are high, yet observed implementation of the sexual double standard is lower now than in the past (Marks & Fraley, 2005). That is to say, individuals themselves still believe in a societal sexual double standard (i.e. perceptions of others in society endorsing the sexual double standard), however they no longer seem to implemented the sexual double standard when making judgments on others (Milhausen & Herold, 1999, 2001). What is unknown is if this lasting belief in a societal sexual double standard is enough to wield continued impact on the sexual assertiveness of men and women of differing generational cohorts.

It has long been documented that social norms or beliefs about how one is expected to behave in a given situation has a powerful influence on behaviour as "people often behave as they believe others expect them to behave" (Fazio & Roskos-Ewoldsen, 2005, p. 46), and expectations or attitudes may be specific to generational cohorts (Carlos, 2006). Social norms of a society can restrict the behaviours of individuals to a point where they may act against their personal attitudes or beliefs regarding the situation. This is because social norms can be so evasive and widely held in a given culture that any member of society would behave similarity in a given situation (Fazio & Roskos-Ewoldsen, 2005). This may be the case with the sexual double standard and the traditional scripting of sexual assertiveness. Members of society may perceive that the

sexual double standard is a pervasive cultural norm/cultural scenario that most other members of society endorse (Milhausen & Herold, 2001) even if they do not endorse and implement it themselves. Belief in other's endorsement (i.e. belief in a societal sexual double standard) becomes enough to determine one's own behaviour.

Individuals at the intrapsychic level may still fear that the other members of society may judge *their* sexual behaviour according to a sexual double standard, and this may impact their levels of expressed sexual assertiveness in interpersonal interactions. Individuals may not want to act in a way that deviates from the norms of their culture (Fazio & Roskos-Ewoldsen, 2005), in this case the sexual double standard. Therefore, they may modify their sexual behaviours, such as sexual assertiveness, to remain within the limits of the sexual double standard for fear of judgment even when they themselves do not judge others. This relationship may also be held more strongly for individuals of older generations in which the traditional scripting of the sexual double standard and sexual assertiveness may have been more prominent.

Past research has focused on acknowledging the difference between belief and implementation of the sexual double standard but hasn't yet looked extensively at how they distinctively shape the scripting of sexual assertiveness for men and women of differing generational age cohorts; however, related research findings do support this link. For example, research has found that if a woman believes that her partner endorses the sexual double standard she will be less likely to provide a condom (Crawford & Popp, 2003) and women who provide a condom in sexual scenarios are evaluated more negatively than men who provide condoms (Hynie & Lydon, 1995). These findings are likely due to the belief that women will be judged as sexually promiscuous if they

demonstrate assertiveness by planning ahead to engage in sexual activity and providing a condom. This goes against the scripted notion of sexual assertiveness that a woman only “gives-in” to sexual advances and never initiates them (Byers, 1996), as she is the “sexual gate-keeper” and he is the initiator of all sexual behaviour (Wiederman, 2005), which is consistent with the sexual double standard. Furthermore, in a study on men in long term relationships, it was reported that men would prefer that their female partners demonstrate higher levels of sexual assertiveness by initiating sexual behaviour more often in order to share in the labour of initiation (Dworkin & O’Sullivan, 2007). However, when they were asked to explain why they still initiated majority of the time they said it was because of “natural gender differences” or because “I’m the man” and “she’s a girl” (Dworkin & O’Sullivan, 2007, p. 108). This demonstrates that some men desire a shift from traditional sexual scripts, yet the scripting of the sexual double standard may be so embedded in members of society that gender differences in sexual assertiveness is interpreted as innate rather than socially constructed.

Researchers have identified “scripted refusal” (Muehlenhard & McCoy, 1991) or “token resistance” (Krahe, 2000) as a function of sexual scripting and the sexual double standard. Women are scripted to refuse sexual advances so that they do not seem sexually promiscuous, which is judged more harshly for women according to the sexual double standard. Due to this, women have reported saying “no” when they meant “yes”, motivated by the need for social desirability (Muehlenhard & McCoy, 1991). This behaviour is rooted in the scripting of low levels of sexual assertiveness for women where they are discouraged from openly communicating their sexual desires. Muehlenhard & McCoy (1991) had 403 female first year university students respond to a

series of questionnaires including the Sexual Double Standard Scale which measured personal endorsement and perception of their sexual partners' endorsement of the sexual double standard. Participants admitted to saying "no" to sexual activity when in fact they did desire to engage sexually; which is "scripted refusal". Interestingly, women tended to engage in "scripted refusal" more often if they thought that their partner endorsed the sexual double standard, however their own endorsement of the sexual double standard did not affect their use (Muehlenhard & McCoy, 1991). In other words, if a woman felt her partner used the sexual double standard when making judgments about sexual behaviour she was more likely to use "scripted refusal" even if she herself did not endorse it. These findings have implications in terms of sexual assault, such as date rape, in that women may not be believed when they actually say no to sexual advances because it is assumed by the perpetrator that she is using "token resistance" (Byers, 1996). The gender difference in sexual initiation, thus sexual assertiveness, can lead to extremely negative behavioural consequences.

The above examples provide evidence to support the notion that individuals have modified their sexual behaviours in accordance with the sexual double standard based on perceptions that others surrounding them endorse this standard. This may indicate that the cultural belief of a societal sexual double standard alone may be sufficient to influence levels of sexual assertiveness independently of its implementation. Women may not feel they have the liberty to express higher levels of sexual assertiveness and men may feel pressure to continue to demonstrate higher levels of sexual assertiveness in order to be consistent with widely supported social norms. That is to say, whether or not the sexual double standard (cultural scenario script) has a continued impact on the sexual

assertiveness (interpersonal script) of men and women depends on if they believe in the sexual double standard (intrapsychic script) even if they do not implement it.

Furthermore, direct implementation of the sexual double standard is decreasing with time, yet the cultural belief that the sexual double standard still exists is still strong (Marks & Fraley, 2005). For the older generation, the sexual double standard may have been a more salient script at the time of their youth; accordingly this cohort is expected to both implement and believe in the sexual double standard demonstrating strong influence of their expressed levels of sexual assertiveness. For the younger generation, messaging regarding scripts of the sexual double standard may have been passed down to them; however it may have been less prominent as the role of the sexual double standard in society decreases. Therefore, it is thought that those in the younger generation will no longer implement the sexual double standard, yet it will still remain strong in their cultural beliefs. A belief in a societal sexual double standard may be important in its own right, and alone could influence their levels of sexual assertiveness because individuals may modify their sexual behaviours in accordance with the sexual double standard based on perceptions that others surrounding them endorse it. Due to this, it is expected that traditional scripting of sexual assertiveness will influence individuals of both age groups; however the older generation may be impacted more strongly than the younger generation.

Hypotheses

The sexual double standard is dynamic and changes as the norms of society change (Reiss, 1969). Current research is focused on the differences between the belief and implementation of the sexual double standard. What remains to be studied is the

influence of belief in and implementation of the sexual double standard on sexual behaviour (assertiveness) for men and women of unique generational age cohorts. It is predicted that implementation of the sexual double standard is decreasing with each generation, yet the belief in a societal sexual double standard is still high. It is also expected that the belief in and implementation of the sexual double standard will lead to lower levels of sexual assertiveness in women and higher levels in men; additionally, the belief in the sexual double standard alone will be enough to influence sexual assertiveness. It was thought that these relationships would impact the older age cohort more strongly than the younger age cohort as the sexual double standard may have been a more salient script in the past than now. Several hypotheses were formulated regarding the expected findings of this investigation:

1. a) It was predicted that belief and implementation of the sexual double standard are distinct constructs.
- b) Additionally, it is expected that participants would indicate a significantly higher level of the belief versus implementation of the SDS in both age cohorts.
- c) It was also predicted that the older age cohort will have significantly higher level implementation and belief of the SDS than the younger cohort.
2. a) It was predicted that there would be a significant relationship between belief and combined implementation of the SDS and Sexual Assertiveness (SA) moderated by gender.
- b) Specifically, for women there would be an inverse relationship (higher SDS related to lower SA) and for men a direct relationship (higher SDS related to higher SA) between belief and implement of SDS and SA.

- c) It was expected that this relationship would hold more strongly for those in the older generational cohort compared to the younger cohort.
3. a) It was predicted that belief in the SDS, independent of implementation, would significantly predict SA for both men and women.
- b) Specifically, for women there would be an inverse relationship (higher belief related to lower SA) and for men a direct relationship (higher belief related to higher SA) between belief of SDS and SA.
- c) Additionally, it was predicted that this relationship would be stronger in the older age cohort compared to the younger cohort.

Methods

Sample

Seven-hundred and four individuals participated in the survey with 416 participants fully completing the survey indicating a 41% drop out rate which is typical of long surveys (Wood et al., 2006). Thirty participants were removed from analysis because they identified a sexual orientation other than heterosexual (bisexual or homosexual) or because they identified as a gender other than male or female (e.g. transgender). Additionally, 23 participants were removed because they were not in the required age cohorts. Another 23 participants were removed due to missing data (see Missing Data Analysis), and 1 participant was removed for response bias.

The final sample comprised of 339 heterosexual individuals including 131 (38.6%) men, and 208 (61.4%) women. Two cohort groups were targeted during recruitment; a sample of 209 (74 men, 135 women) young adults of 18-25 years of age and 130 (57 men and 73 women) individuals in middle adulthood of 35-42 years of age. The sample was a

mix of student and community participants. The student sample was collected from Carleton University in Ottawa and the community sample of Canadian respondents was collected via the internet. Two versions of the survey were administered with 164 participants completing Survey 1 and 175 participants completing Survey 2.

Of those participants who specified their ethnic background, the participants identified as Caucasian (82%), African-Canadian/Black (2.7%), Asian/ Asian-Canadian (4.7%), Hispanic/Latino (0.5%), Middle Eastern (4.7%), or “other” (4.4%). All participants included in the final sample (100%) identified themselves as heterosexual. Participants were also asked to identify the highest level of education that they had completed. Participants reported “less than high school” (.9%), “high school diploma” (10.6%), “some university/college” (35.7%), “university/college degree” (39.8%), “MA or PhD” (8.6%), “professional degree” (2.4%) and “other” (1.8%).

Participants were asked to identify their current relationship status, and identified as “not currently dating, have never had a serious relationship” (5.3%), “not currently dating, have had a serious relationship in the past” (16.2%), “casually dating, have never had a serious relationship” (1.5%), “casually dating, have had a serious relationship in the past” (13.9%), “seriously dating, not living together” (19.2%), “seriously dating, living together” (20.1%), “married” (7.1%), “married with children” (12.7%), “separated/divorced” (3.5%). Some participants reported “not being currently sexual active” (16.2%), while others reported being “sexually active, but with no intercourse” (8%), but the majority of participants indicated that they were “sexually active with intercourse” (74.6%). Additionally, the majority of participants indicated that they would be answering the survey while reflecting on their “current sexual partner” (61.7%), while

some indicated that would response reflecting on their “most recent sexual partner” (19.2%), or their “sexual partners over the last 6 months” (15.3%).

Procedure

In order to recruit a community sample, recruitment advertisements were posted throughout the Ottawa-Carleton area with links to the online survey attached (See Appendix B), including at community centers, grocery stores and non-profit community organizations (e.g., Planned Parenthood Ottawa and The Distress Centre). Additionally, the social networking website Facebook was used to recruit community participants. Social networking websites, such as Facebook, are recognized as legitimate sources to recruit diverse samples of individuals (Rigby, 2008) and are commonly used as a recruitment strategy in academic research (e.g., Amidon, 2009; Keller, 2008). Recruitment emails as well as paid advertisements were posted on Facebook which included a link to the online survey which was posted on Survey Monkey (See Appendix D).

To recruit the student sample, recruitment posters were put up around the Carleton University campus (see Appendix C) and were posted on the Carleton University student database (SONA system). Students were offered 0.5% credit towards their first year undergraduate Psychology classes for participation in the study. Additionally all the participants (community and student) were offered to be entered into a draw for a \$50 gift certificate to a local restaurant as a thank-you for their participation in the study.

Once they agreed to participate, participants were directed to the online survey on the Survey Monkey website. Because the online survey was posted on the external

Survey Monkey website, anonymity was guaranteed to the participants as the researcher did not have access to the web address that the responses were obtained from. For students who used the SONA system, anonymity was also guaranteed as the SONA administrator only recorded their participation in the study to receive credit and did not have access to their individual responses. To maintain anonymity when entering the draw, participants were asked to email their contact information to the researchers separately from their responses after they had completed the survey. All contact information received was kept confidential by the researcher on a secure computer with a password. After the draw had taken place the contact information of participants was deleted.

The first page of the questionnaire package was an instruction sheet (see Appendix E) giving directions on how to complete the survey and making the operational definitions clear. The next page was the Informed Consent sheet (see Appendix F); by clicking 'next' to proceed to the first page of the questionnaires the participant was assumed to give consent to participate in the study. The participants were asked to complete a series of online questionnaires (Appendix A) on topics surrounding sexuality which took approximately 45 minutes to complete. There were two versions of the survey administered to the participants (Survey 1 and Survey 2). The two online surveys were identical to each other with the exception that one of the questionnaires was counterbalanced.

After the participants completed the survey a Debriefing form was presented (see Appendix G). This form included the purpose of the study as well as contact information for the researchers and the psychology department at Carleton University should the participants have any questions or concerns. Participants were also provided with the

number of the local Distress Centre, Planned Parenthood and a number of other resources in the written debriefing and were encouraged to contact these resources if they experienced any distress or felt the need to talk with someone after participation in the study.

Materials

All measures can be found in Appendix A.

Demographics. The participants were asked to complete a demographics questionnaire which inquired about the participants' gender, age, ethnicity, education level, sexual orientation, current relationship status (i.e., not currently dating, casually dating, seriously dating, living together, married, separated/divorced), and current sexual behaviour status (i.e., not sexually active, sexually active but not engaging in sexual intercourse, sexually active and engaging in sexual intercourse). If the participant was currently in a relationship, the participant was asked how long he/she had been in the relationship and how long the participant had been sexually active with that partner. If the participant was not currently in a relationship but had been in the past the participant was asked how long ago the relationship was, how long it lasted and how long the participant was sexually active for. Lastly, the participants were asked to state who they were considering when answering the questionnaire packages (their current partner, their most recent partner, their sexual partners over the last 6 months). This background information was collected from the participants as a way to determine if relationship history had any influence of the way that they answered the questionnaires.

Implementation of the SDS scale. A modified version of the *Sexual Double Standard Survey* (Donald, 1985) was used to measure the amount to which participants

implement the sexual double standard when making judgments about others. That is, if they rate men and women differently for engaging in the same sexual behaviour. This measure of the sexual double standard uses a broad definition assessing if one gender is judged more harshly for sexual behaviours such as infidelity, sexual coercion, non-relational sex, having multiple partners at one time, and engaging in sexual activity both when causally dating or within the context of a serious relationship. Additionally, this scale is a subtle sexual double standard scale, meaning that the items that are designed to address the sexual double standard are mixed with a series of filler items meant to distract the participant from knowing the true purpose of the scale.

The participants were asked to rate a series of 68 statements (34 sexual and 34 filler) on their ethicality on a scale ranging from 0 (highly ethical) to 7 (highly unethical). The 34 sexual statements were 17 matched pairs; one statement contained a female target name and one statement contained a male target name. The matched pair statements described the target engaging in the same sexual behaviour, yet had slight variations in the wording used, for example “Nathan L. has been dating four women at the same time and is sexually active with them all” and “Gwen F. has been dating four different men with whom she is also having sex.”

To ensure that any observed differences of the ratings between the male and female statements were not due to the variation in the wording but truly due to a differential evaluation of the statements based on the targets gender, a second version of the scale was made where the target names were switched with one another within the statements. For example in Survey 2, the above examples were switched to “Gwen F. has

been dating four men at the same time and is sexually active with them all” and “Nathan L. has been dating four different women with whom he is also having sex.”

The scale was modified to update the language for a modern audience. Additionally, 8 matching pairs were added to update some of the content that men and women are potentially judged differently from one another on such as masturbation, the use of sex toys, pornography, having had many sexual partners in the past, and picking up sexual partners at bars, etc. Examples of the items include. “Donna M. likes to watch sexually explicit videos”, “Patrick A. masturbates on average three times a week” and “Sarah W. has had sex with eight different men.”

In order to tally a score, the 17 male target statements and 17 female target statements were summed separately to obtain a total male statement score and a total female statement score for each participant. A single score was obtained by subtracting the total female statement scores from the total male statement scores to obtain a difference score. Observed difference scores ranged from -17 to 20. A difference score of 0 indicated that the male and female statements were not rated differently from one another indicating no evidence of a sexual double standard. A negative score of -17 indicated that the female statements were deemed to be less ethical on average than the male statement indicating evidence of implementation of a traditional sexual double standard. A positive score of 20 indicated that on average the male statements were deemed to be less ethical than the female statement indicating evidence of implementation of a reverse sexual double standard, where men are judged more harshly than women. Cronbach’s alpha value was .95 indicating an adequate level of internal reliability.

Sexual attitudes scale. This scale was designed to measure how liberal or conservative participants were in their attitudes towards sexual behaviour (Hudson, Murphy & Nurius, 1983). Responses to this 25-item scale were scored on a 5-point likert-type scale with responses ranging from *strongly disagree* (1) to *strongly agree* (5). Examples of items included, “I think there is too much sexual freedom given to adults these days” and “I think sex should be reserved for marriage.” Scores ranged from 0-86 with higher scores indicating higher levels of sexual conservative attitudes and lower scores indicating more sexually liberal attitudes.

The scale was minimally modified to update some of the language used on the original scale. One of the items used the term “sexual petting” so the term “mutual masturbation” was added in brackets in order to clarify the definition of this term. One of the items used the term “severely handicapped” on the original scale and this was changed to “severely disabled” in order to be more inclusive. Also, the scale is originally an American scale and speaks to the notion of the “American family” in one of the items and this was changed to “Canadian family” as the study used a Canadian sample. Finally, the item “Pornography should be totally banned from our books” was shortened to “Pornography should be totally banned” in order to be more currently relevant, as pornography is now accessed through a variety of mediums. Cronbach’s alpha value was .92 indicating an adequate level of internal reliability.

Gender identity scale. This scale was designed to measure an individual’s subjective evaluation of their gender identity, indicating how much they identify as either masculine or feminine (Stern, Barak & Gould, 1987). This scale was included in order to observe trends in the participants’ traditional gender identity in order to give context and support

the results of the planned hypothesis testing. The scale had the participants' rate how true a series of traits are of themselves on a 7-point scale that ranges from "never or almost never true" to "always or almost always true". The scale was originally a 20 item scale with 10 feminine traits and 10 masculine traits. When further analysis was completed on the scale to test for cross-cultural validity of the measure four items were removed from the original: loyal, understanding, dominant and aggressive (Schertzer et al., 2008). The final scale had 8 feminine items (affectionate, tender, sensitive to others' needs, sympathetic, compassionate, eager to soothe hurt feelings, gentle, and warm) and 8 masculine items (have leadership abilities, willing to take a stand, ambitious, competitive, assertive, a strong personality, forceful, and act like a leader).

The feminine items were summed together to receive a score of femininity which ranged from 8-56. The masculine items were summed together to receive a score of masculinity which ranged from 16-56. A higher score on these traits indicated higher endorsement of either feminine or masculine traits in the participant.

Cronbach's alpha for the masculinity scale was found to be .84 and the femininity scale was .93 indicating high levels of internal consistency. Past research found evidence of both convergent and divergent construct validity (Stern, Barak & Gould, 1987). The validated 16-item scale was found to have cross-cultural validity (Schertzer et al., 2008).

Sexual assertiveness. Sexual assertiveness in this investigation was measured using a modified version of the *Sexual Assertiveness Scale* (Shafer, 1980). This measure of sexual assertiveness was a measure of sexual initiation and communication, i.e. the participants' ability to openly communicate and initiate the sexual contact they desire.

Responses to the 30-item scale were scored on a 5-point likert-type scale with responses representing the percentage of time participants engaged in a given behaviour; a response of 1 indicated that participants engaged in that behaviour 0-20% of the time and 5 that participants engaged in that behaviour 81-100% of the time. Examples of items included, “What percent of the time does your partner initiate sex?”, “When you and a sexual partner discuss sex, what percent of the time do you bring up the topic?”, and “During sexual activity, if you especially enjoy something, what percent of the time do you let a sexual partner know it?” The scale was a mix of standard and reverse-scored questions, which were coded and summed in order to gain a total score. The range of observed scores was from 60 to 128. A higher score on the scale indicated high levels of sexual assertiveness.

The modifications made to this scale were minimal and involved rewording some of the questions from using the term “partner” to “sexual partner”. This term was preferred by the researcher because it makes no assumptions of the type of relationship (committed or casual) that the sexual activity took place. The participants need not be in an intimate relationship to participate in the study, and they may reflect on any sexual encounter they have had in the last six months (committed or casual). These modifications were used previously by the researchers in an unpublished research project (Austin & Offman, n.d.), and Cronbach’s alpha was determined to be .80 for this project, indicating that this scale showed appropriate levels of interval consistency with the suggested modifications included. A few additional items were also added to the end of the measure inquiring about how satisfied the participants was with their sexual experiences being reflected on and what percentage of their sexual experiences they were

reflecting on were in the context of an committed relationship or casual dating experiences. These items were added in order to clarify and gain a more thorough understanding of the types of sexual experiences the participant is reflecting on when answering the questionnaire.

When previous studies have measured split-half reliability the coefficient was .86 indicating sufficient reliability (Shafer 1977). Cronbach's alpha was .79 indicating a sufficient level of internal consistency reliability.

Belief in the societal sexual double standard. Belief in the sexual double standard was measured using a modified version of the *Double Standard Scale (DSS)* (Canon, Davis, Halteman & Stickle, 1993). The scale was originally designed to measure individuals' personal attitudes or beliefs towards the sex roles of men and women and acceptance of the traditional sexual double standard. However, our modifications allow for an individuals perception of a societal sexual double standard to be measured. In order to achieve this modification to the scale the instructions were changed to include the following statement: "This is a measure of your perception of cultural or societal norms/standards surrounding sexuality. When answering the questions, reflect on if you think society at large holds these particular attitudes or beliefs and not your own personal endorsement of these attitudes." The items themselves were also modified to reflect more generally on perceptions of cultural ideals as apposed to personal ones. For example, the item "It is worse for a woman to sleep around than it is for a man" was changed to "Society at large believes that it is worse for women to sleep around than it is for men". An additional item was also added to the scale in order to measure belief in a societal double standard: "In today's western culture there is a double standard for sexual

behaviour, in which women are judged more harshly for the same sexual behaviours performed by men.”

This 11-item scale had participants rate on a 5-point likert-type scale that ranges from strongly agree (1) to strongly disagree (5), how much they agreed with a series of attitudes/beliefs regarding sexual behaviour and gender. Examples of items included, “It is expected that women be less sexually experienced than their partners” and “It is worse for women to sleep around than it is for men.” A total score was obtained by summing the scores for each item (including reversing negative items). The scores ranged from 11-52, with lower scores indicating a greater belief in a societal sexual double standard. Cronbach’s coefficient alpha for the summed scores with the modifications was .85, indicating a sufficient level of internal consistency reliability.

Belief and implementation of the sexual double standard scale (BI Scale).

This scale was formulated by the researcher in order to measure both belief and implementation of the sexual double standard in the same questionnaire to allow comparisons between the two constructs. This study aimed to make a direct comparison between the constructs of belief and implementation of the sexual double standard in order to differentiate them as distinct constructs that can vary independently to one another within an individual. In order to complete such an analysis, a measure needed to be created that measured both belief and implementation on the same scale to allow for direct comparisons to be made.

The 12-item measure asks the participant a series of questions about their perceptions of the sexual double standard (belief), if they feel it impacts sexual behaviour (impact) and if they think they used it when making judgments on others

(implementation). Examples of items include “Do you think you use the sexual double standard when judging the sexual behaviours of other people of your age?” and “Do you believe the sexual double standard reflects the current situation in our society?” The participants responded “1 definitely yes”, “2 probably yes”, “3 probably not” and “4 definitely not”. Items 1-4 were the BI-belief subscale which was focused on perceptions of a societal sexual double standard. Items 5-8 made up the BI-impact subscale which inquired about if they feel the sexual double standard has an impact on sexual behaviours. Finally, items 9-12 made up the BI-implementation subscale which inquired about the participants’ personal use of the sexual double standard.

A score was obtained for each of these subscales by summing the responses. Responses ranged from 4 to 16 with lower scores indicating higher perceived belief, impact, or implementation of the sexual double standard. Cronbach’s coefficient alpha for the subscales were BI-belief .82, BI-impact .77, and BI-implementation .90, indicating sufficient levels of internal consistency reliability. Although the BI-impact subscale was included on the scale it was not used in analysis as it was not one of the primary variables of the sexual double standard under investigation and it was not found to be significantly related to the outcome measures.

Results

Missing Data Analysis

Twenty-three participants chose not to answer 8 or more items on the Sexual Assertiveness Scale. This data was considered not to be missing completely at random (MCAR) because participants were less likely to answer the scale which inquired about the participants personal sexual behaviours rather than scales which inquired about

sexuality in general. Additionally, Little's MCAR test was found to be significant, $\chi^2(24134, 362) = 25694.08, p=.000$, indicating that the data was not missing completely at random, violating this assumption. Because the Sexual Assertiveness was used as the primary outcome measure in the study, these 23 participants were removed from analysis.

Before the 23 participants were removed from further analysis, the excluded group was tested for group differences with the rest of the included sample. The excluded and included groups significantly differed on their current relationship status, $\chi^2(9, 362) = 71.44, p=.000$. Of the excluded group, 18 of the 23 (78%) were not currently dating at the time of the study. Additionally, 16 of the 23 (70%) of the excluded participants were not currently sexually active, $\chi^2(3, 362) = 52.55, p=.000$. This may be a possible reason why these participants did not answer the scales that inquired about their sexual behaviour, because they felt they could not answer the questions accurately. The excluded participants also scored significantly higher on the Sexual Attitude Scale $F(1, 341) = 13.88, p=.000, \eta_p^2=.04$ indicating that the excluded participants held significantly more conservative sexual attitudes ($M=39.79, SD=19.03, CI_{95}= 33.07, 46.51$) than the rest of the included sample ($M=26.69, SD=14.64, CI_{95}= 25.06, 28.31$). The Levene's test for homogeneity of variance was significant, $F(1, 341) = 5.38, p=.02$, indicating a violation of the assumption of homogeneity of variance. This group difference is also a possible explanation for the missing data because one would expect that a more conservative individual may be less likely to answer questions about their own sexual behaviour. Once these 23 participants were excluded from further analysis, there was less than 5% missing data across the scales and mean substitution was used for the rest of the missing data.

Comparative Analysis between Gender Counterbalanced Implementation Scales

Two versions of the Implementation of the SDS scale were given to the participants (*Survey 1* and *Survey 2*) that were identical to one another except that in Survey 2 the names of the male and female targets were switched with one another in the matched pair statements. For example, in Survey 1 the matched statement pairs were “Tom T. has engaged in sexual intercourse with eight women” and “Sarah W. has had sex with eight different men”; in Survey 2 the matched statement pairs were “Sarah W. has engaged in sexual intercourse with eight men” and “Tom T. has had sex with eight different women”. Half the participants responded to the original scale (Survey 1, $n = 164$) and half responded to a scale where the names of the targets had been switched (Survey 2, $n = 175$).

A regression model was used to examine if the version of the scale that the participant was given (Survey 1 or Survey 2) predicted their recorded scores on the Implementation of the SDS scale. There was a significant difference between the participants in Survey 1 and Survey 2 on their Implementation of the SDS scores, $F(1, 337) = 11.35, p = .001, \eta_p^2 = .03$, with the participants in Survey 1 ($M = 2.27, SD = 5.05, CI_{95} = 17.62, 18.83$) scoring significantly higher than the participants in Survey 2 ($M = .29, SD = 5.73, CI_{95} = 17.62, 18.83$). However, the correlation coefficient, ($r(337) = .18, p < .001$); shows a weak relationship between Survey and Implementation of the SDS scores. Additionally, the standard estimate of error was 23.11% of the mean Implementation of the SDS scores ($SEE = 5.41, M = 1.25$), which indicates indirectly that there is a weak relationship between the version of the survey the participants was given and their scores on the Implementation of the SDS scale.

Furthermore, when the data was split three ways by gender, survey and age cohort it was found that there were cells that had very few participants. This could impact the validity of the results when making comparisons between the groups in the two surveys as some of the cells are not adequately represented. It was found that Survey 1 had only 4 older female participants in comparison to Survey 2 which had 69 female participants in the older age cohort. Additionally, in Survey 2 the older age cohort only included 13 males, compared to Survey 1 which had 44 males in the older age cohort. These low cell samples are due to sampling error and difficulty recruiting older participants to the study. However, the reliability of the findings, which suggest differences between the surveys, are uncertain and are most likely due to Type I error. For example, the matched pair statements “Roger N. has had sex with his steady girlfriend” and “Paula D. has had sex with her steady boyfriend” use the exact same wording as one another, yet were found to be significantly different from one another based on the version of the survey they were given. This may be evidence that the significance found between the versions of the survey may be due to the make-up of the samples that completed Survey 1 or Survey 2, rather than the variation in the wording of the statements. Therefore, irrespective of the survey version completed (1 or 2) the decision was made to collapse over the 2 surveys and the data in Survey 1 and Survey 2 were pooled for subsequent analysis.

Descriptives

Descriptive statistics of measures. The means and standard deviations for each of the measures are provided for the overall sample (see Table 1).

Table 1

Means and standard deviations of measures for total sample

Measure	n	Mean	SD	Min	Max
Implementation of the SDS	339	1.25	5.95	-17.00	20.00
Belief in the societal SDS	339	33.95	7.74	11.00	52.00
BI Scale					
BI-belief	339	7.76	2.09	4.00	16.00
BI-implementation	339	11.99	3.32	4.00	16.00
Sexual assertiveness	339	99.20	12.51	54.97	128.00
Sexual attitudes scale	339	27.08	14.83	0.00	86.00
Gender identity scale					
Masculinity	339	41.93	7.43	16.00	56.00
Femininity	339	45.58	8.13	8.00	56.00

The mean difference score on the Implementation of the SDS scale was close to 1, demonstrating on average only small differential ratings of sexual behavior between men and women. This indicates little evidence of implementation of the SDS as predicted. The mean Belief in a societal SDS score was very close to the median ($M = 33.95$, $Mdn = 34.00$), indicating on average a moderate perception that the SDS is a social norm in current culture. The BI-belief subscale was lower than the BI-implementation subscale demonstrating on average the total sample has a greater mean belief in the SDS than implementation of it. Additionally, if the mean of the BI-belief is divided by the number of items included in the subscale, the average response on the subscale was found to be

1.94, indicating that on average the participants “agreed” with statements that there was a societal SDS. Conversely, when the mean BI-implementation score was averaged by the number of items in the subscale the average response was found to be 3.00, indicating that on average participants “disagreed” with statements regarding the perception that they themselves implemented the SDS. Although this serves as preliminary evidence that the sample hold more belief than implementation of the SDS, further analysis is presented to test if these differences are significant.

The mean score on the Sexual Assertiveness Scale indicated a moderate to high level of SA in the sample of participants. The mean score on the Sexual Attitudes Scale was on the lower end of the scale suggesting that the overall sample held more liberal views. Finally, both the means for the sub-scales of masculinity and femininity were high in the score range indicating high levels of identification with both genders in the overall sample. These findings together indicate that this sample appears to be a relatively liberal and sexually permissive group; however they do express a belief in a societal sexual double standard.

The sample was also split by gender and age cohort to observe trends in the data of the four groups of younger males, older males, younger females and older females (see Appendix H). When comparisons were done between the four groups the majority of comparisons were consistent across the groups and with those found in the sample as a whole. However, differences were found between the groups on the Implementation of the SDS scale. Although all of the mean scores on the Implementation of the SDS scale of the four groups were relatively small there was some variation in scores between the groups: younger males ($M = 1.09$, $SD = 5.09$, $n = 74$), older males ($M = 2.30$, $SD = 5.75$, $n =$

57), younger females ($M= 1.65$, $SD= 5.11$, $n=135$) and older females ($M= -.14$, $SD= 6.16$, $n= 73$). These means suggest on average that these groups only make minor differential ratings of the sexual behaviours of men and women, which indicate little evidence of implementation of the SDS. With this said, the group of older males and younger females in comparison to the others did have slightly higher positive mean difference scores on the Implementation of the SDS scale. The positive mean difference scores suggest that on average these groups rated the males as less ethical to the females, opposite to the traditional sexual double standard and contrary to expectation.

Additionally, all four of the groups indicated moderate to high levels of Sexual Assertiveness: younger males ($M= 96.91$, $SD= 12.60$, $n= 74$), older males ($M= 99.81$, $SD= 11.52$, $n= 57$), younger females ($M= 100.06$, $SD= 12.43$, $n=135$) and older females ($M= 99.47$, $SD= 13.24$, $n= 73$). This is contrary to the prediction that there would be gender differences in SA with the men scoring higher than the women, which traditional sexual scripts suggest. As well, all of the four groups had relatively consistent scores on masculinity: younger males ($M= 42.04$, $SD= 7.16$, $n= 74$), older males ($M= 42.84$, $SD= 7.26$, $n= 57$), younger females ($M= 41.64$, $SD= 7.31$, $n=135$) and older females ($M= 41.66$, $SD= 8.13$, $n= 73$). This is contrary to expectation that males would display higher masculinity to females. Also the rates of femininity were consistent across the groups of older males ($M= 45.84$, $SD= 8.64$, $n= 57$), younger females ($M= 46.65$, $SD= 6.69$, $n=135$) and older females ($M= 46.86$, $SD= 8.47$, $n= 73$); however, the group of younger males ($M= 42.04$, $SD= 8.98$, $n= 74$) displayed lower mean identification with femininity than the rest of the groups. This is partially consistent to expectation as it was thought that both groups of males would display lower identification with feminine traits when compared

to women. Therefore the group trends are relatively consistent with the means of the overall sample suggesting the participants included in this study are on average a sexually liberal and permissive group. The groups do consistently express belief in a societal sexual double standard, indicating they still perceive culture at large to endorse the SDS. Having said this, although the examination of the group trends may serve as preliminary evidence of group differences, further analysis is required to test if these differences are significant.

Relations between measures. As seen in Table 6, the correlations between measures are provided for the overall sample. The Implementation of the SDS (Donald, 1985) and the Belief in a societal SDS scales (Canon, Davis, Halteman & Stickle, 1993) were not significantly correlated to one another, suggesting independence between the two measures.

The correlation between the created BI-implementation subscale and its' corresponding published Implementation of the SDS scale (Donald, 1985) was significant ($r(337) = .12, p < .05$); also the correlation between the subscale BI-belief and its' corresponding Belief in a social SDS scale (Canon, Davis, Halteman & Stickle, 1993) was also significant ($r(337) = .16, p < .01$), meaning that the created subscales are significantly related to their corresponding published scales, which is preliminary evidence of convergent validity between the measures. Although both of the correlations coefficients are low, this can be expected due to the large sample included in the analysis. An alternative explanation for the low correlation coefficients is that they may be due to conceptual differences between the measures which will be more fully addressed in later sections. Additionally, the created BI-implementation and BI-belief subscales were not

significantly correlated to one another ($r(339) = .08, ns$), suggesting that they may be independent constructs.

Contrary to expectation, the Sexual Assertiveness scale was not significantly correlated with the Implementation of the SDS scale (Canon, Davis, Halteman & Stickle, 1993), or the Belief in a societal SDS scale (Donald, 1985). This is unexpected because it was predicted that these variables would have significant relationships with SA. SA had negative linear relationships with the Sexual Attitude scale, meaning as the sexual attitudes score decreases SA increases. This suggests that with less conservative sexual attitudes there is an increase in SA. SA also significantly correlated with both masculinity and femininity indicating significant linear relationships between the measures. Consistent to expectation there was a positive linear relationship between masculinity and SA, where as masculinity increases so does SA. Contrary to what would be expected femininity and SA also have a positive linear relationship, where as femininity increase so did SA.

Table 2

Simple correlations between measures for total sample.

Measure	Implem- entation	Belief of SDS	BI- belief	BI- Imp	Sexual Assertiv	Sexual Attitude	Mascu- linity	Femin- inity
Implem- entation	1							
Belief of SDS	-.01	1						
BI- belief	.02	.16**	1					
BI- imp	.12*	.20**	.08	1				
Sexual Assertiv	-.00	.09	-.09	.14**	1			
Sexual Attitude	-.16**	-.17**	.05	-.17**	-.24**	1		
Mascu- linity	.06	.02	-.13*	.04	.32**	-.19**	1	
Femin- inity	.06	.07	-.08	.04	.11*	-.06	.17**	1

Note. * $p < .05$, ** $p < .01$

Additionally, the correlations between measures are provided with the sample split by gender and age cohort to examine for differences between the four groups of younger females, older females, younger males and older males (see Appendix H).

Majority of the relationships between the measures in the subgroups were consistent with the overall sample. However, the created subscales BI-implementation and BI-belief were not significantly related to their corresponding published Implementation of the

SDS scale (Donald, 1985) and Belief in a societal SDS scale (Canon, Davis, Halteman & Stickle, 1993) in most of the subgroups. Only in the group of younger males was the correlation between the subscale BI-belief and its' corresponding Belief in a social SDS scale (Canon, Davis, Halteman & Stickle, 1993) significantly related ($r(74) = .44, p < .01$). These findings suggest possible low convergent validity between the created and published scales, which can possibly be explained by conceptual differences between the scales which is further explained in subsequent sections.

Although in the overall sample Belief in the SDS was not significantly related to SA, when analysis was done by each group separately it was found that SA was significantly correlated to the measure of Belief in a societal SDS in the group of older women only, ($r(73) = .23, p < .05$). A positive linear relationship was found for this group indicating as Belief in the SDS scores increase, SA increases. This suggests that, consistent with prediction, lower Belief in a societal SDS is related to an increase in SA for the older women. The other three groups did not have significant relationship between the Belief in a societal SDS scale and SA.

Belief and Implementation of the SDS as Distinct Constructs and their Relations to Gender and Age Cohort

In order to test the first hypothesis, that belief and implementation of the SDS are distinct constructs, a 2 (Gender: male and female) x 2 (Age Cohort: younger and older) x 2 (BI: belief and implementation), mixed model factorial ANOVA with repeated measures on the final factor was conducted. A significant within-subjects main effect was found for BI (BI-implementation and BI-belief), $F(1, 335) = 453.56, p = .000, \eta_p^2 = .58$, indicating that the two variables significantly differ from one another, supporting that

they are distinct constructs. The interaction between BI scores and gender was insignificant, $F(1, 335) = .38$, *ns*, supporting prediction that there would be no gender differences in levels of belief or implementation. However, the interaction between BI scores and age cohort was significant, $F(1, 335) = 22.44$, $p = .000$, $\eta_p^2 = .06$, indicating BI-implementation and BI-belief vary independently depending on age cohort. The three way interaction between gender, age cohort and BI scores was found to be insignificant, $F(1, 335) = .56$, *ns*.

Consistent with my hypothesis, the mean BI-belief scores ($M=7.81$, $SE=.12$, $CI_{95}= 7.57, 8.04$) were lower than the BI-implementation scores ($M=12.28$, $SE=.18$, $CI_{95}= 11.92, 12.64$). These lower mean scores indicate a higher level of belief in the SDS than implementation of it on the BI-subscales. These results are consistent with prediction and indicate that in the sample overall there was a higher level of belief in the SDS as opposed to implementation of it.

In simple main effects analysis, no significant differences were found in BI-belief scores between the younger and older age cohorts, $F(1, 337) = 1.91$, *ns*. However, the participants in the older age cohort scored significantly higher on the BI-implementation subscale than those in the younger cohort, $F(1, 337) = 20.20$, $p = .000$, $\eta_p^2 = .05$, indicating that participants in the younger age cohort had higher levels of implementation of the SDS than the older age cohort. Both of these findings are contrary to the prediction that the older age cohort would hold higher levels of both belief and implementation of the SDS compared to the younger cohort.

Additionally, an investigation of group differences between the younger males, the older males, the younger females and the older females on the published measures

Implementation of the SDS (Donald, 1985) and Belief in a societal SDS scales (Canon, Davis, Halteman & Stickle, 1993) were completed. This analysis was completed in order to explore for group trends in the rates of implementation and belief of the SDS in the published scales. Although direct comparison of the two published measures cannot be made as they are not on equivalent measurement units, we can examine the trends of how the different groups responded to these measures separately to fully explore rates of belief and implementation of the SDS in the sample to serve as supporting evidence to the previous conclusions.

A 2 (Gender: male and female) x 2 (Age Cohort: younger and older) ANOVA was completed with Implementation of the SDS scale as the dependent variable. No significant main effects were found for Gender, $F(1, 335) = 2.28, ns$, nor Age Cohort, $F(1, 335) = .21, ns$. A significant interaction was found, $F(1, 335) = 5.77, p = .017, \eta_p^2 = .02$, signifying that Implementation scores vary by Gender and Age Cohort combined. When simple main effect analysis was completed it was found that the younger males ($M = 1.09, SE = .63, CI_{95} = -.16, 2.34$) and the younger females ($M = 1.65, SE = .47, CI_{95} = .72, 2.57$) did not significantly differ from one another on Implementation scores, $F(1, 207) = .57, ns$. However, the older males and older females did significantly differ from one another, $F(1, 128) = 5.30, p = .023, \eta_p^2 = .04$, with the older males ($M = 2.30, SE = .72, CI_{95} = .87, 3.72$) having a higher positive mean Implementation score than the older females ($M = -.14, SE = .64, CI_{95} = -.14, 1.12$). This higher mean suggests that the men in the older age cohort make significantly more differential judgments between the sexual behaviours of men and women; yet unexpectedly the positive mean signifies that they seem to be rating men more harshly to women, opposite to the

traditional SDS. Additionally, it was found that the younger and older females significantly differed from one another on Implementation scores, $F(1, 206) = 4.99$, $p = .027$, $\eta_p^2 = .02$, with the younger females having higher mean implementation score than the older females. Again the mean difference score for the younger females was positive, indicating a reverse rather than a traditional sexual double standard. The younger and older males did not significantly differ from one another, $F(1, 129) = 1.62$, ns . These findings taken together indicate little evidence of implementation of the traditional SDS in any of the groups. They also indicate that the older males and the younger females seem to unexpectedly be displaying differential evaluation between the genders, which rate the sexual behaviours of men more harshly to those of women, suggesting preliminary evidence of a reverse SDS.

To test for group differences on the Belief in a Societal SDS Scale, a 2 (Gender: male and female) x 2 (Age Cohort: younger and older) ANOVA was completed. There was no significant main effect of gender, $F(1, 335) = 3.04$, ns , meaning men and women did not significantly differ on their levels of belief in the SDS. There was however, a significant main effect for age cohort, $F(1, 335) = 8.71$, $p = .003$, $\eta_p^2 = .03$, with the participants in the older age cohort scoring significantly higher on the Belief in a Societal SDS Scale ($M = 33.05$, $SE = .55$, $CI_{.95} = 31.97, 34.14$) than those in the younger age cohort ($M = 35.63$, $SE = .68$, $CI_{.95} = 34.30, 36.95$) with a mean difference of ($MD = 2.57$, $SE = .87$, $CI_{.95} = .86, 4.29$), indicating there were higher levels of belief in the SDS in the younger age cohort compared to the older age cohort. The interaction was found to be insignificant, $F(1, 335) = 2.21$, ns . These findings are contrary to prediction, as it was

expected that the older age cohort would display higher levels of belief in a societal SDS compared to the younger cohort.

The Relation between Belief and Implementation of the SDS and SA Moderated by Gender

In order to test the second hypothesis that there is a significant relationship between belief and implementation of the SDS and SA, which is moderated by gender for both age cohorts, two hierarchical multiple regression analyses were conducted using SA as the dependent variable. Gender was added on the first step, followed by both belief and implementation of the SDS on the second step and then on the final step the interactions between gender and the SDS variables were entered. This regression model was run for each age cohort.

In the regression model for the younger age cohort, as seen in Table 3, on the first step the relationship between gender and SA was insignificant, $R^2_{cha} = .02$, $F(1,207) = 3.05$, *ns*. On the second step, the relationship between belief and implementation of the SDS and SA was insignificant, $R^2_{cha} = .00$, $F(2,205) = .21$, *ns*. On the third step the interactions were insignificant, $R^2_{cha} = .01$, $F(3,202) = .58$, *ns*, indicating that there is no moderation effect of gender in the relationship between the belief and implementation of the SDS on SA. These results indicate that for the younger age cohort belief and implementation of the SDS did not predict SA and further that this relationship was not moderated by gender.

Table 3

Hierarchical regressions for the relationship between belief and implementation of the SDS and SA moderated by gender for the younger age cohort.

	<i>r</i>	<i>B^a</i>	<i>R²_{cha}</i>
Step 1	.12		.02
Gender		.12	
Step 2	.13		.00
Implementation		-.04	
Belief		-.01	
Step 3	.16		.01
Gender x Implementation		.08	
Gender x Belief		.20	
Gender x Implementation x Belief		.08	

Note: * $p < .05$, ^a Standardized coefficients

In the regression model for the older age cohort, as seen in Table 4, on the first step the relationship between gender and SA was insignificant, $R^2_{cha} = .00$, $F(1,128) = .02$, *ns*. On the second step the relationship between belief and implementation of the SDS and SA was significant $R^2_{cha} = .05$, $F(2,126) = 3.36$, $p = .038$, as well as the coefficient belief in the SDS was found to be significant on this step ($B = .22$, $p = .012$). This suggests that for every one unit increase on the belief in the SDS scale, representing less belief in the SDS, there was a .22 increase in SA for the older age cohort. This is

indicative of an inverse relationship between belief of the SDS and SA for the older cohort, where lower belief in the SDS predicts higher SA. On the third step the interactions were found to be insignificant, $R^2_{cha} = .01$, $F(3,123) = .42$, *ns*, once again indicating that there is no moderation effect of gender on the relationship between belief and implementation of the SDS and SA.

Table 4

Hierarchical regressions for the relationship between belief and implementation of the SDS and SA moderated by gender for the older age cohort.

	<i>r</i>	<i>B^a</i>	<i>R²_{cha}</i>
Step 1	.01		.00
Gender		-.01	
Step 2	.23		.05*
Implementation		.05	
Belief		.22*	
Step 3	.25		.01
Gender x Implementation		.28	
Gender x Belief		.08	
Gender x Implementation x Belief		.08	

Note: * $p < .05$, ^a Standardized coefficients

The hierarchal multiple regression analyses indicated that contrary to prediction, gender does not moderate the relationship of belief and implementation of SDS and SA in either of the age cohorts. Additionally, belief and implementation of the SDS were not predictors of SA in the younger cohort, yet it was determined that belief in the SDS did predict that in the older age cohort. Lower belief in the SDS was found to predict higher levels of SA in the older age cohort only. This is somewhat consistent with hypothesis as it was thought that belief and implementation would have a larger effect in the older age cohort; yet, we have determined that belief alone predicts SA in solely the older age

cohort. This means that as individuals in the older age cohort decrease their belief in a societal SDS they are more likely to demonstrate higher levels of SA, which is partially consistent with prediction as it was thought this relationship would only hold for women.

Belief in a Societal SDS as an Independent Predictor of SA

In order to test our third hypothesis, that belief in the SDS, independent of implementation, would significantly predict SA for men and women of both age cohorts, yet more strongly for the older age cohort, five hierarchical regression analyses were conducted, one for the total sample, the younger males, the older males, the younger females, and the older females, all using SA as the dependent variable, as seen in Table 5. For men, a direct relationship was predicted where an increase in belief in the SDS would lead to higher SA. For women, an inverse relationship was predicted where an increase in belief in the SDS will lead to lower SA. Additionally, it was predicted that more of the variance in SA would be accounted for by belief in the SDS in the men and women in the older age cohort than the ones in the younger cohort. For the models, implementation was entered on the first step and belief on the second step in order to partial out the variance of implementation.

In the model completed on the total sample, when implementation was added on the first step it was not found to be a significant predictor of SA, $R^2_{cha} = .00$, $F(1, 337) = .01$, *ns*, nor was belief when added on the second step, $R^2_{cha} = .01$, $F(1, 336) = 2.47$, *ns*. In the model completed on the younger males implementation, $R^2_{cha} = .01$, $F(1, 72) = .34$, *ns*, nor belief, $R^2_{cha} = .01$, $F(1, 71) = .39$, *ns*, were found to significantly predict SA. The first step of the model completed on the older males indicated that implementation did not significantly predict SA, $R^2_{cha} = .00$, $F(1, 55) = .00$, *ns*, nor did belief when added on

the second step, $R^2_{cha} = .04$, $F(1, 54) = 2.31$, *ns*. Similarly, implementation, $R^2_{cha} = .00$, $F(1, 133) = .12$, *ns*, and belief, $R^2_{cha} = .00$, $F(1, 132) = .11$, *ns*, were not significant predictors of SA in the sample of younger females.

However, in the model completed on the older females implementation was not found to predict SA on the first step, $R^2_{cha} = .00$, $F(1, 71) = .31$, *ns*; yet the relationship between belief and SA was significant on the second step, $R^2_{cha} = .06$, $F(1, 70) = 4.40$, $p = .040$, signifying that belief in the SDS significantly predicts the levels of SA, independent of implementation, in the sample of older females. Additionally, the coefficient for belief ($B = .25$, $p = .040$), indicates that for every one unit increase on the Belief in a societal SDS scale, representing less belief in the SDS, there was a .25 increase in SA. This is indicative, as predicted, of an inverse relationship between belief of the SDS and SA for the older women.

Table 5

Hierarchical regressions for the relationship between belief and SA independent of implementation.

		<i>r</i>	<i>B^a</i>	<i>R²_{cha}</i>
Total	Implementation	.00	.00	.00
	Belief	.09	.09	.01
Male	Ages 18-25			
	Implementation	.07	-.05	.01
	Belief	.10	-.08	.01
	Ages 35-42			
	Implementation	.00	-.03	.00
	Belief	.20	.21	.04
Female	Ages 18-25			
	Implementation	.03	-.03	.00
	Belief	.04	.03	.00
	Ages 35-42			
	Implementation	.07	.10	.00
	Belief	.25	.25*	.06*

Note: * $p < .05$, ^a Standardized coefficients

These findings suggest that, as predicted, there is an inverse relationship between belief in the SDS and SA independent of implementation for the older women, indicating that lower belief in the SDS predicts higher levels of SA in this group. Contrary to

prediction, belief in the SDS did not predict SA for either men or women in the younger age cohort nor men in the older age cohort. This partially supports the hypothesis that the relationship between belief and SA would be stronger in the older age cohort as the relationship was only found in the older women.

These results are consistent with the results from hypothesis two, which found that belief in the SDS is a predictor of SA in the older age cohort and that there was an inverse relationship in which lower belief in the SDS in the older age cohort predicts higher levels of SA. This result was only partially consistent with the prediction as it was thought this inverse relationship would only hold for women, not men. However, when closer examination was performed on hypothesis three, it was determined that the relationship of belief in the SDS as a predictor of SA was only significant in the sample of older women, not both men and women in the older cohort as suggested by the results of hypothesis two. This finding further supports prediction that the inverse relationship between belief in the SDS and SA would only hold for women, as traditional sexual scripts and the sexual double standard endorse that women demonstrate lower levels of SA and men higher levels.

Follow up analysis was conducted in order to examine group differences in SA between the younger males, the older males, the younger females and the older females in order to examine if SA varies by gender or age cohort as expected according to traditional sexual scripting. A 2 (Gender: male and female) x 2 (Age Cohort: younger and older) ANOVA was completed. The main effect of gender, $F(1, 335) = .98, ns$, age cohort, $F(1, 335) = .66, ns$, and the interaction, $F(1, 335) = 1.49, ns$, were all found to be insignificant. Contrary to expectation these findings indicate that there are no

significant differences between gender and age cohort on SA. This suggests that men and women of both age cohorts do not differ from one another in terms of their levels of sexual assertiveness, contrary to traditional sexual scripts.

Given that gender differences were expected in SA and none were found, further investigation was warranted. Traditional masculine or feminine identity are associated with the use of traditional sexual scripts, thus analysis was completed to observe for group differences between the genders and the age cohorts in terms of identification with traditional gender identities. It was expected that women would more highly identify with traditionally feminine traits and men would identify with more traditionally masculine traits.

In order to test for group differences in masculinity and femininity scores among the groups a 2 (Gender: male and female) x 2 (Age Cohort: younger and older) x 2 (Identity: masculinity and femininity), mixed model factorial ANOVA with repeated measures on the final factor was conducted. A significant within-subjects main effect was found for identity between masculinity and femininity, $F(1, 335) = 34.94, p = .000, \eta_p^2 = .09$, indicating that the two traditional gender identities differ from one another and vary independently within an individual. The interaction between identity and gender was significant, $F(1, 335) = 9.84, p = .002, \eta_p^2 = .03$, indicating masculinity and femininity vary as a function of gender, consistent with prediction. However, the interaction between identity and age cohort was insignificant, $F(1, 335) = 1.82, ns$, indicating masculinity and femininity do not vary by age cohort. The three way interaction between gender, age cohort and identity was also found to be insignificant, $F(1, 335) = 1.39, ns$.

When simple main effects were run on the interaction between gender and

identity scores, no significant differences were found in masculinity scores between the genders, $F(1, 337) = .80$, ns , with the males ($M=42.39$, $SE = .65$, $CI_{95} = 41.11, 43.66$) and the females ($M=41.64$, $SE = .52$, $CI_{95} = 40.63, 42.66$) displaying very similar mean identification with the traditional masculine traits. This was contrary to the expectation that the males would have higher identification with traditionally masculine traits than the females. However, a significant difference was found in femininity score between the genders, $F(1, 337) = 10.94$, $p = .001$, $\eta_p^2 = .03$, with the females ($M=43.77$, $SE = .70$, $CI_{95} = 42.39, 45.15$) scoring higher on femininity than the males ($M=46.73$, $SE = .56$, $CI_{95} = 45.63, 47.82$), which is consistent to expectation.

In view of the fact that no group differences were found in SA nor masculinity, yet were found in femininity, an investigation to explore if the amount to which men and women endorse traditional gender identity would predict their levels of SA was completed. It was thought that high identification with traditional femininity would lead to decreased SA for women and would not predict SA for men. Additionally, high identification with traditional masculine traits was thought to predict increased SA in both genders because SA is traditionally scripted as a masculine behaviour. Two hierarchical regression models were run, one for males and one for females, on the sexual identity subscales femininity and masculinity to test if they predict SA. For each of the models femininity was added on the first step and masculinity on the second in order to observe their unique contribution to the variance in SA independent of one another.

In the model completed on the males, when femininity was added on the first step it found to be an insignificant predictor of SA, $R^2_{cha} = .02$, $F(1, 129) = 1.99$, ns , consistent with prediction. Again consistent with expectation, when masculinity was

added on the second step it was found to be a significant predictor of SA, $R^2_{cha} = .08$, $F(1, 128) = 11.14$, $p = .001$, with a coefficient of ($B = .28$, $p = .001$), indicating for every one unit increase in masculinity there was a .28 increase in SA for men. Thus, increased masculinity in males leads to higher levels of SA.

When the model was run on the females and femininity was added on the first step, it was found to be an insignificant predictor of SA, $R^2_{cha} = .01$, $F(1, 206) = 1.36$, *ns*. This is contrary to expectation as it was thought that higher identification with feminine traits would lead to decreased SA. Moreover, when masculinity was added on the second step it was found to be a significant predictor of SA, $R^2_{cha} = .11$, $F(1, 205) = 25.86$, $p = .000$, with a coefficient of .34, $p = .000$, indicating that for every one unit increase in masculinity there was a .34 increase in SA in women. Thus, consistent with expectation, increased masculinity in women leads to increased SA.

These findings together suggest some interesting trends in the data. It was predicted that a belief in the SDS would predict levels of SA in all of the groups, yet it was found only to predict SA in the group of older females. Although the finding of this relationship in the group of older women is consistent with prediction, it was unexpected that there were no significant relationships in the other groups. When levels of SA were compared between the groups no variation in the levels of SA was found. Additionally, it was determined that the groups did not differ in their identification with traditionally masculine traits which predict levels of SA. These findings are contrary to traditional sexual scripts that would expect higher levels of both masculinity and SA for men compared to women. The lack of gendered variance in SA and masculinity in accordance

to traditional sexual scripts could be a potential explanation for the lack of significant results between belief in the SDS and SA in the other groups.

Discussion

Sexual scripting theory holds that we learn what is expected of us through specific, socially acceptable roles, known as sexual scripts (Simon & Gagnon, 1986). Sexual scripts are often gender specific, which lead to differing sexual expectations for men and women, often termed the “sexual double standard” (SDS) (Wiederman, 2005). Traditionally, the sexual double standard restricts the accepted sexual behaviours of women and is more permissive of the expression of male sexuality (Reiss, 1956, 1960, 1969, 1995). According to traditional sexual scripts of the sexual double standard, women are scripted to be the sexual recipients while men are scripted as sexual initiators (O’Sullivan & Byers, 1992), which impacts the levels of expressed sexual assertiveness of each gender.

The sexual double standard is thought to be a social phenomenon that evolves as the norms of society evolve (Reiss, 1969). Thus, individuals of different generational age cohorts may experience the influence of the sexual double standard uniquely. Furthermore, social norms regarding standards for females’ sexual permissiveness are becoming more liberal over time (Cram & Jackson, 2003; Sprecher & Hatfield, 1996), and traditional sexual scripts, such as the sexual double standard, may be less influential to newer generations than they were in the past. Consequently, recent research has contested the continued existence of a sexual double standard that judges the sexual behaviours of women more harshly than those of men in current western society (Marks & Fraley, 2005); however, when the distinction is made between belief and

implementation of the sexual double standard, this conclusion is disputed (Milhausen & Herold, 1999).

Belief and Implementation of the Sexual Double Standard as Distinct Constructs

Belief in a societal sexual double standard is defined as the perception that others in society endorse the traditional sexual double standard. Implementation of the sexual double standard is defined as the behaviour of making differential judgments between the genders for engaging in the same sexual acts, where traditionally women are judged more harshly than are men (Milhausen & Herold, 1999, 2001). Past research has acknowledged that there is a distinction between belief and implementation of the sexual double standard (Milhausen & Herold, 1999, 2001), yet direct comparisons between the constructs have not been made. In order to make a direct comparison, the Belief and Implementation of the SDS Scale (BI Scale) was created, which included two subscales of belief and implementation on an equivalent measurement unit. When the subscales were examined, they were found to be significantly different from one another, suggesting that they are distinct constructs. In other words, an individual's perception of a societal sexual double standard which other members of society endorse does not equate to their own behaviour of making differential judgments of sexual behaviour based on an individual's gender. In effect, a person can believe that it is a norm for other members of society collectively to endorse the traditional sexual double standard, yet not endorse such a standard him or herself.

Implementation of the sexual double standard. Overall, little evidence of implementation of the sexual double standard was observed in the study. Mean responses to the BI scale supported minimal implementation as the average response on the BI-

implementation subscale was 'disagree' to statements regarding the participants' perception of their own implementation of the sexual double standard. This is consistent with past research that found low rates of implementation of the sexual double standard (Marks & Fraley, 2005; Milhausen & Herold, 1999). This finding is in line with newer experimental research on the sexual double standard which consistently finds little evidence of continued implementation of this script.

Examination of the BI-implementation subscale determined that there were no gender differences in this construct, which is consistent with expectation, as the intrapsychic scripts of the sexual double standard are thought to be perceived by all members of western culture, both men and women (Crawford & Popp, 2003). It was found, however, that the participants in the younger age cohort had higher levels of BI-implementation compared to the older age cohort, although the overall rates in both cohorts were low. This is contrary to the prediction that traditional gender roles were more influential in the past than they are in today's society and that the older participants would reflect those traditional norms at a higher rate than younger participants. It was thought that the individuals of Generation X would have experienced more conservative sexual messaging in their youth (Moreno, 2006), thus the sexual double standard would have been a more salient script and would more easily translate into the implementation of the sexual double standard. Individuals of Generation Y were thought to have experienced more permissive messaging regarding sexuality (Moreno, 2006), hence were not expected to demonstrate implementation of the sexual double standard. However, the results of this analysis indicated the opposite, with the younger age cohort displaying higher levels of BI-implementation than the older age cohort.

Although it is possible that the younger cohort is experiencing the sexual double standard more strongly than the previous cohort, it can also be explained by the types of sexual relationships that the younger cohort is more likely to be experiencing coupled with their current stage of sexual development. Of the younger group 47.4% of the participants were either single or casually dating, whereas only 18.5% of the participants in the older cohort identified with these categories. Additionally, 60.7% of the participants in the older age cohort were cohabitating, married or married with children, whereas only 26.8% of the younger cohort applied to these categories. It has been reported that couples in committed relationships more often deviate from traditional sexual scripting (O'Sullivan & Byers, 1992), and that individuals rely more heavily on sexual scripting in early stages of new sexual relationships or casual sex encounters (Sprecher & Hatfield, 1996). This may be because individuals have not received much information about their partner's preferences in new or casual sexual scenarios, so they rely on the general cultural ideals of what is expected of them (Wiederman, 2005). If more individuals in the younger age cohort are experiencing new or casual sexual relationships then it would be expected that they would endorse the sexual double standard at higher rates, as it would be more readily available to them in their intrapsychic scripting.

Consistent with the analysis of the BI-implementation subscale, as well as past findings (e.g., Milhausen & Herold, 1999; Marks & Fraley, 2006), minimal evidence of implementation of the traditional sexual double standard was supported in the analysis of the Implementation of the SDS scores. The older males and the younger females made the most differential judgments between the sexual behaviours of men and women.

However, unexpectedly, they rated the sexual behaviour of men more harshly to women, opposite to the traditional sexual double standard. This is of interest because it is the exact reverse to what would be expected given the literature on traditional sexual scripting and the sexual double standard.

Similar results to these were reported by Milhausen and Herold (2001), who observed evidence of a reverse double standard. When both male and female participants were asked if they would encourage a female friend to date a highly sexually experienced male target, they said they would warn a female friend about the sexual history of the male target, yet would not offer the same warnings if the genders were reversed (Milhausen & Herold, 2001). The researchers attributed these results to recent social trends that view highly sexually experienced men as ‘exploiters’ of female sexuality. They suggested that this negative view of permissive male sexuality may be due to extensive media coverage and publicity of sexual assault and harassment where men are perceived as sexual predators (Milhausen & Herold, 2001). It may be that the groups of older men and younger women are most aware of these scripts of men as predators thus judge the sexual behaviors of men more harshly to women. Although we cannot draw such conclusions from the small differential ratings between the genders observed in this study, future research should continue to investigate the existence of a reverse sexual double standard which scripts the sexuality of men to be potentially harmful to women.

Although both the BI-implementation and the Implementation of the SDS Scale (Donald, 1985) revealed little evidence of implementation of the traditional sexual double standard, comparative analysis using the two scales were only partially consistent with one another. The BI-implementation subscale showed differences in the levels of

implementation of the traditional sexual double standard between age cohort, whereas the Implementation of the SDS Scale did not. Additionally, although the two measures were significantly related to one another in the overall sample, when analysis was broken down into the four subgroups of younger males, older males, younger females and older females, the two measures of implementation were not significantly related to one another in any of the groups. This suggests some evidence of low convergent validity between the created BI-implementation subscale and its' corresponding Implementation of the SDS scale.

The discovery of low convergent validity between the two measures of implementation could be explained by conceptual differences between the measures. Upon closer examination, the BI-implementation subscale and the Implementation of the SDS scale (Donald, 1985) may be measuring slightly different constructs. Although the two scales both address implementation of the sexual double standard, they go about it in different ways. The published Implementation of the SDS scale (Donald, 1985) has participants' rate male and female items to covertly observe any differential rating of ethicality for sexual behaviour of men and women. Thus, it is a true measure of the behaviour of differential ratings of the genders. The BI-implementation subscale inquires directly about the participants' perceptions of their own implementation of the sexual double standard. For example, "Do you think you use the sexual double standard when judging the sexual behaviours of your friends?" These items are capturing a perception of their behaviour in retrospect and not a direct measure of their behaviour. These differences between the measures may explain the observed discrepancies between the results of the scales. It may be that the younger cohort were more willing to admit they

perceive themselves to sometimes implement a sexual double standard when judging the behaviours of others compared to the older cohort, yet neither group actually implemented the standard when completing the survey. However, even with these conceptual differences between the measures, evidence of continued implementation of the traditional sexual double standard was not found overall for both measures.

An alternative explanation for observing no traditional implementation of the sexual double standard and preliminary evidence of a reverse one may be due to how representative the sample is in comparison to the general population. Individuals who are willing to volunteer for sexuality research report more sexually liberal attitudes, are more sexually experienced (Bogaert, 1996), express more positive attitudes towards sexuality and are more comfortable with discussing their sexuality for research purposes (Stassberg & Lowe, 1995). This assertion was supported when the participants who were excluded due to large amounts of missing data in their responses were compared to the final included sample. The excluded participants held significantly more conservative sexual attitudes than the rest of the sample and were less willing to answer questions that directly inquired about their personal sexual behaviour as opposed to sexuality in general. Although this study incorporated a community sample as opposed to solely a student sample, it still lacked diversity in its' members. The sample was a predominately Caucasian, middle classed, educated group with 75% of the participants having attended post-secondary education. This is a common issue in sexuality research because, in general, volunteers have a higher education, higher social status and are more unconventional than the general population (Fiske, 2004).

The current sample of participants may have been especially open in their sexuality and perhaps not as vulnerable to the social influence of traditional sexual scripts. Volunteers of sexuality research have been found to be lower in social conformity and rule-following behaviour (Bogaert, 1996), which are possibly linked to conformity of the social rules of traditional sexual scripts, such as the implementation of the sexual double standard. This decreased variability in the participants attitudes could influence results of this research as more sexually conservative individuals may hold the highest endorsement of traditional sexual scripts and implementation of the sexual double standard. Future research should aim to target individuals with sexually conservative views when sampling for studies of the sexual double standard in order to obtain a more accurate representation of liberal and conservative attitudes. This could potentially be accomplished by designing studies that do not inquire about participants' personal sexual behaviours, as conservative individuals are less likely to answer these types of questions. Alternatively, the phrasing of questions could be more general inquiring about attitudes and perceptions of sexuality.

Another possible explanation for the low rates of implementation of the sexual double standard found in this study may be that the participants answered the surveys in a biased manner due to social desirability effects. That is, the participants may have attempted to answer in a fashion they considered to be socially desirable (i.e., not using double standards in the evaluation of the sexual behaviour of men and women). Social desirability is a common limitation to survey research (Philips & Clancy, 1972); however measures were taken to attempt to reduce the social desirability effects in this research. It was thought that the use of online survey for data collection in sexuality research reduces

social desirability effects due to the increased anonymity of the participants (Bowen et. al., 2008). Additionally, the Implementation of the SDS scale (Donald, 1985) was a covert measure of the sexual double standard to conceal the purpose of the questionnaire and reduce response bias. Even as such, it is possible that some of the participants answered the items with bias, potentially swaying the results. Even with these possible limitations considered the results of this study, in combination with the results of past research (e.g., Milhausen & Herold, 1999; Marks & Fraley, 2006), suggest little evidence of continued implementation of the sexual double standard.

Belief in a societal sexual double standard. Results from the Belief in a Societal SDS scale (Canon, Davis, Halteman & Stickle, 1993) revealed evidence in the overall sample of a belief in a societal sexual double standard consistent with past research (Marks & Fraley, 2005; Milhausen & Herold, 1999, 2001). Overall, the mean scores indicated that 88.5% of participants “strongly agreed” or “agreed” with the statement “In today’s western culture there is a double standard for sexual behaviour, in which women are judged more harshly for the same sexual behaviours performed by men”. Additionally, on average, the participants responded that they ‘agreed’ to the four item statements on the BI-belief subscale regarding perceptions of the existence of a societal sexual double standard. Again, this finding is consistent with past research, which has found that 95% of people said they definitely or probably believed a sexual double standard exists in our culture (Milhausen & Herold, 1999). This is an indication that the widely held belief in a societal sexual double standard remains salient in the cultural scenarios and intrapsychic scripting of members of society collectively.

There were no gender differences observed in the rates of belief in a societal sexual double standard, which is consistent with expectation, as it is thought to be a pervasive cultural norm for both men and women (Crawford & Popp, 2003). Additionally, no differences were found in rates of BI-belief between the age cohorts, with both cohorts displaying high agreement with the existence of a societal sexual double standard. Contrary findings were observed with the Belief in a Societal SDS scale (Canon, Davis, Halteman & Stickle, 1993), where higher levels of belief were found in the younger age cohort when compared to the older age cohort. It is notable that it was the younger generational cohort that had a higher level of belief in the sexual double standard, because it had been predicted that more conservative scripting would have been more predominant in the older generational cohort.

Once again, the finding of higher rates of belief in a societal sexual double standard in the younger age cohort could be due to the types of sexual relationships the younger age cohort is engaging in and can be attributed to their life-stage, rather than generational differences. More of the individuals in the younger cohort are casually dating than in the older cohort, and a more casual relationship stage of sexual commitment is associated with higher reliance on the sexual double standard (Sprecher & Hatfield, 1996). Therefore, the scripts of the sexual double standard may be more readily available in the beliefs of this group. It is possible that age effects are being observed in the younger cohort as a function of the life-stage the cohort is experiencing (Harding & Jencks, 2003). This suggests that future research is needed which takes into account generational cohort effects as well as stage of life effects in combination, and how they

both may uniquely impact how the scripts of the sexual double standard are perceived and endorsed.

The differing outcomes between the results of the BI-belief subscale and the Belief in a Societal SDS scale (Canon, Davis, Halteman & Stickle, 1993) analyses may be an indication of low convergent validity between the measures, similar to the issues with the two measures of implementation. Although the two measures were significantly related to one another in the overall sample, when the analysis was broken down by gender and age cohort, the two measures were only significantly related to one another in the group of younger males. This can potentially be explained by the variety of items included on the scales. All four of the items of the BI-belief subscale inquired directly about the cultural belief in a societal sexual double standard. This subscale was created so that it was on an equivalent measurement unit to the BI-implementation subscale, which could allow for direct comparisons to be completed between the constructs. The Belief in a Societal SDS scale was an eleven item scale which included one item that directly inquired about the existence of a societal sexual double standard. However, it also included ten other items that inquired about a variety of sexual behaviours consistent with a traditional double standard, such as bringing a condom to a sexual encounter, initiating sexual activity, and promiscuity (Canon, Davis, Halteman & Stickle, 1993). When the total score on this BI-belief subscale was compared to the single item on the Belief in a Societal SDS scale (Canon, Davis, Halteman & Stickle, 1993), which directly inquired about the existence of a societal sexual double standard, the items were found to be significantly related in all of the groups. This suggests the lack of variety in the items included on the BI-belief subscale may be responsible for the divergent results found

between the measures. Nevertheless, both measures did produce findings which demonstrated a substantial belief in a societal sexual double standard in the sample, consistent with prediction.

Taken together, the findings of this study indicate little evidence of implementation of the traditional sexual double standard overall, although belief in a societal sexual double standard remains high. These results are consistent with past research, which has observed that implementation of the sexual double standard is lower in our culture than in the past (Marks & Fraley, 2005), yet the belief in a societal double standard is widely held (Milhausen & Herold, 1999). It may be that although implementation of the sexual double standard is minimal, belief in it could still be perpetuated due to the continued portrayal of sexual scripts consistent with the sexual double standard in the media (Aubrey, 2004). This may be especially true for youth, as scripts of the sexual double standard are prominent in the television programming targeted at them (Aubrey, 2004), and could be influencing the salience of this script and allowing it to stay predominant in their beliefs. Additionally, there seems to be a confirmation bias in the processing of information regarding the sexual double standard, where individuals were found to recall significantly more instances that were consistent with a traditional sexual double standard compared to instances that opposed it (Marks & Fraley, 2006). These findings suggest that the media exposes members of society to messaging consistent with the sexual double standard, and then due to a confirmation bias these messages are more often remembered than messages that oppose it. This suggests that the script of the sexual double standard may serve as a lens, which colours how the sexual social world is perceived. That is, if it is widely believed that there is a sexual

double standard in collective consciousness, this in itself might maintain the existence of this script at the cultural scenario level, even though individuals may not be using it themselves. Therefore, believing the sexual double standard is a cultural norm may cyclically perpetuate its continuation as a sexual script.

The influence of the Sexual Double Standard on Sexual Assertiveness

Sexual assertiveness is the ability to initiate and communicate desired sexual behaviours (Shafer, 1977). The traditional sexual double standard scripts men to be sexual initiators thus express higher levels of sexual assertiveness. Conversely, women are scripted to be sexual recipients, thus demonstrate lower levels of sexual assertiveness (O'Sullivan & Byers, 1992). Contrary to traditional scripting, the men and women of both generational cohorts were not found to differ from one another on average in their levels of expressed sexual assertiveness. This is surprising, as much literature has supported the existence of social proscriptions against female sexual assertiveness (see Byers, 1996; Greene & Faulkner, 2005; Laumann & Mahay, 2002; O'Sullivan & Byers, 1992). A possible explanation for this finding is that there were also no observed differences between the groups in identification with traditional masculine traits, and masculinity was found to predict sexual assertiveness in men and women of both age cohorts. Since there was little variation in the sample in traditionally masculine traits, and masculinity predicts sexual assertiveness, it is not unexpected that there is also little variation in the sexual assertiveness of the sample.

It is not surprising that identification with masculine traits predicts levels of sexual assertiveness, as assertiveness is traditionally scripted as a masculine duty (Greene & Faulkner, 2005). Additionally, the Sexual Identity scale (Stern, Barak & Gould, 1987)

used the item 'assertive' as traditional masculine trait. This indicates that the measure of masculinity and the measure of sexual assertiveness are in part measuring the same construct and are directly connected to one another. It was unexpected to find that men and women of both cohorts did not differ in their level of identification with masculine traits, as these characteristics were traditionally reserved for males (Stern, Barak & Gould, 1987). However, this finding is consistent with past research which has found that across generations women have increased masculine gender-types behaviours (Guastello & Guastello, 2001). The lack of variance in traditionally masculine identity and sexual assertiveness may alternatively be explained by the impact of the sample included in analysis. Participants generally held sexually liberal attitudes and highly identified with both traditionally masculine and feminine traits suggesting some androgyny among the sample, which may not be representative of the general population.

Implementation of the sexual double standard and sexual assertiveness.

Implementation of the sexual double standard was not found to predict levels of sexual assertiveness by gender for either of the age cohorts. It was initially hypothesized that implementation of the sexual double standard would influence the sexual assertiveness of the older age cohort, as this generation was thought to have internalized this script more strongly. Still, these results are not surprising as direct implementation of the sexual double standard has been noted to be decreasing with time (Marks & Fraley, 2005) and little evidence of implementation was observed in the sample of participants of either generational cohort. Therefore, because the sample of participants in this study in both age cohorts did not demonstrate implementation of the sexual double standard it may

explain why there were no observed gendered relationships between it and sexual assertiveness.

As discussed previously, the lack of variance in rates of implementation of the sexual double standard may have also been a byproduct of naturally occurring sampling error in sexuality research (Strassberg & Lowe, 1995), which reduces the range of sexually permissive to sexual conservative views within the participants. Therefore, it could be that some individuals do experience gendered relationships of sexual assertiveness influenced by implementation of the sexual double standard, although they are less likely to participate in sexuality research thus are not included in the sample of participants observed in this research.

Belief in a societal sexual double standard and sexual assertiveness. It was thought that belief alone would be sufficient to influence the sexual assertiveness of men and women in accordance to the scripts of the sexual double standard. Belief in a societal sexual double standard was not found to predict levels of sexual assertiveness in the sample of older men. However, it was a significant predictor of sexual assertiveness in the women in the older age cohort; where higher levels of belief in the sexual double standard lead to decreased sexual assertiveness. This finding is consistent with traditional sexual scripts of the sexual double standard, which discourages sexual assertiveness in women (Laumann & Mahay, 2002); accordingly, more belief in such scripts would restrict freedom to express higher levels of sexual assertiveness.

Alternatively, it is possible that this relationship can be interpreted in the other direction, in that women of the older age cohort who are more sexually assertive may be less likely to hold beliefs that are consistent with the sexual double standard. This line of

reasoning would maintain that sexual assertiveness may be a trait an individual inherently possesses and this would lead to differing attitudes regarding sexuality such as higher belief in a societal sexual double standard. However, sexual scripting theory emphasizes the social construction of sexuality (Simon & Gagnon, 1986) which would maintain that the messaging of sexual scripts at the cultural scenario level may be internalized in the interpersonal scripts of individuals, leading to behavioural outcomes such as lower expressed sexual assertiveness in women.

This relationship between belief in the sexual double standard and sexual assertiveness may have only been observed in the sample of older women, and not men, because the scripting of the sexual double standard is primarily focused on restrictions to female sexuality (Crawford & Popp, 2003); consequently, it has a greater implications to the sexual behaviours of women. This finding is consistent with past research that has found that women have modified their sexual behaviours in accordance with the sexual double standard based on perceptions that others surrounding them endorse this standard (Crawford & Popp, 2003; Muehlenhard & McCoy, 1991). This demonstrates that for the group of older women belief in the sexual double standard alone was sufficient to impact their expressed sexual assertiveness.

Although the younger cohort was found to hold a belief in the sexual double standard, it was not found to predict levels of sexual assertiveness in men or women of this cohort. This suggests that while there is a mass cultural belief in support of the existence of a societal sexual double standard, it does not impact the levels of expressed sexual assertiveness of the younger groups to conform to traditional sexual scripts. It may be that the scripts of the sexual double standard are readily available to individuals

in the younger cohort, as they experience more new and casual sexual relationships (Wiederman, 2005) and the media targeted at them is laden with scripting of the sexual double standard (Aubrey, 2004). However, these scripts may not hold enough weight to influence their sexual assertiveness, possibly because of changing trends in society which have generally become more sexually permissive (Cram & Jackson, 2003). Explicitly, even if it believed that others in society still use the sexual double standard to evaluate the sexual behaviours of others (Milhausen & Herold, 1999), individuals of the younger generation included in this sample did not conform their levels of sexual assertiveness to align within the confines of traditional sexual scripts. Future research may want to go beyond examining the cultural belief in a societal sexual double standard and inquire about the importance of these scripts when youth of younger generations are making sexual decisions. This type of research would be important to informing sex educators of the social influences of sexuality and how youth can challenge the influential sexual scripts of their generation.

Belief in a societal sexual double standard may have only predicted sexual assertiveness in the older age cohort of women, as opposed to the younger cohort, due to generational differences between the groups. Individuals are thought to be most impressionable to the generational norms of their youth (Plummer, 2010), as a result the sexual scripting that individuals absorb in their youth will likely be long lasting and remain salient in their intrapsychic scripting into adulthood. Over time, sexual attitudes, especially towards female sexuality, have become more permissive (Cram & Jackson, 2003), indicating the women from the older age cohort of Generation X may have been raised in a time with more conservative social norms (Moreno, 2006). Although both the

younger and the older cohorts expressed high belief in a societal sexual double standard, it may be that these scripts hold more importance to the older women when they are making sexual choices, such as their expression of sexual assertiveness, and this is why the negative relationship between belief and sexual assertiveness was only found for the older females.

This view is consistent with the expectation that it would be the group of older women whose levels of sexual assertiveness are influenced by the belief in a societal sexual double standard. This group is both from the older age cohort and is female, which were the two variables that were predicted to be greatly impacted by the scripts of the traditional sexual double standard. Even though the group of older women was not found to implement the sexual double standard themselves, they believed that the sexual double standard is a script of society which influenced their levels of sexual assertiveness. In support of this finding, studies have found that women's desires have been shifting away from traditional sexual scripts, yet the behaviour they express continues to follow the traditional roles (Lawance et al., 1996). Hence, it may be easier for women to hold an intrapsychic script that challenges the sexual double standard, such as not implementing the sexual double standard, than it is to challenge the interpersonal script in practice, such as expressed sexual assertiveness. This may be because social norms, such as sexual scripts, can be so pervasive and enduring in a given culture that most members of society act in accordance to the norms (Fazio & Roskos-Ewoldsen, 2005), regardless of an internal desire to act differently. This may result in women engaging in sexual behaviours scripted by the sexual double standard, such as lower sexual assertiveness, even if they do not personally endorse it and wish to behave in ways incongruent to the script.

Applied Implications

An implication of the findings of this research includes changing the public perception of the traditional sexual double standard. It has been asserted that the media over represents situations that confirm the sexual double standard (Marks & Fraley, 2006) and that a great deal television programming targeted to youth audiences is laden with scripts consistent with the sexual double standard (Aubrey, 2004). These media sources support the continued existence of the sexual double standard as a norm of society and contribute to a confirmation bias in the processing of information that is consistent with it sexual double standard (Marks & Fraley, 2006). That is, even if research is consistently finding less evidence of direct implementation of the sexual double standard, the media is providing contradictory information by depicting men and women with traditional scripting, thus perpetuating the widely held belief in a societal sexual double standard. While it may be utopian to expect the media to completely eliminate messaging consistent with the traditional sexual double standard, these scripts can be challenged in sexual education settings, thereby encouraging discourse of how culture and sexual behaviour are interconnected. Creating dialogue among members of society that female sexuality is not as restricted by the confines of the sexual double standard as it was in previous generations may aid in decreasing the mass cultural belief in it. This is important as belief alone was enough to influence the sexual assertiveness of women in the older age cohort of this study.

By increasing consciousness of traditional sexual scripting of the sexual double standard, clinicians and sex therapists can encourage awareness that many gender differences within sexuality are socially constructed rather than innate (Simon & Gagnon,

1986). This may give individuals reason to question the sexual scripts they use, instead of following them as the “normal” or “natural” way even if the scripts are harmful to their sexual well being. Specifically, the disadvantages of following the traditional sexual script of lower sexual assertiveness, has been linked to increased potential for sexual coercion in women (Byers, 1996) and difficulty communicating desire to use certain safer sex practices (Bowleg et al., 2004).

Clinicians can also continue to encourage women to display more sexual assertiveness leading to positive health outcomes such as greater marital and sexual satisfaction (Hurlbert, 1991), and greater sexual self-esteem (Menard & Offman, 2009). These implications are particularly relevant when working with clients of older generational cohorts, as higher belief in the sexual double standard was linked to lower levels of sexual assertiveness for the older women. Therefore, this research demonstrates how women of differing generations may be uniquely influenced by traditional sexual scripts and the sexual double standard. Due to this, clinicians may want to consider the generational cohort of their clients when considering counselling techniques and practices, as certain generations may have internalized differing problematic sexual scripts.

An epistemological implication of this study is the need for more conservative individuals to be sampled in sexuality research. The included participants were a mixed student and community sample; however they were generally a sexually permissive, liberal and androgynous group. As a result, it is not surprising that we found little evidence of implementation of the sexual double standard and little variance in masculinity and sexual assertiveness. Even though the lack of generalizability of samples is a common limitation in sexuality research (Strassberg & Lowe, 1995), this is especially

problematic to research regarding the sexual double standard as the uses of such sexual scripts are dependent on more conservative sexual attitudes. This makes the results of the current study difficult to interpret and application of findings to community settings questionable. Future research should specifically target individuals with sexually conservative attitudes to be included in sexuality research in order to accurately represent the varied attitudes that occur in communities. This could potentially be accomplished by designing studies that inquire about perceptions of sexuality rather than personal behaviours, in order to make conservative individuals more comfortable with participation and targeting specific conservative community organizations during sample recruitment.

Additionally, although no evidence of implementation of the traditional sexual double standard was found in this study, it is not to say that it is not still implemented by different sub-groups of western society. As previously stated, the sample used in this research was a predominately Caucasian, middle class and educated group. Sampling bias in research on the sexual double standard is a common issue (Crawford & Popp, 2005); however, future researchers may want to continue to incorporate cultural comparisons in the belief and implementation of the sexual double standard. Each society, culture and religion has their very own rules and scripts of what is appropriate sexual behaviour (Sprecher & Hatfield, 1996). Canada defines itself as a multicultural nation with many ethnicities living in close proximity. To study the sexual scripts of individuals of different ethnic, cultural and religious backgrounds would be of great interest, as it would allow further insight into how the scripts of the sexual double standard influence all individuals living in Canada. The sexual scripts of the sexual double standard may be very unique in

different cultural and religious groups and may be reflected and expressed in many different ways which are in need of further investigation (Sprecher & Hatfield, 1996). Knowing these differences may aid with cultural sensitivity in outreach and community programming targeted to specific minority groups.

Of additional note, there are some limitations which make the interpretation of the results of this research difficult. First, due to the use of cross-sectional design in this study there is a potential confound between the age of subject and generational cohort that cannot be readily teased apart. Two age cohorts of participants were targeted during recruitment in order to represent a sample of individuals of Generation X and Generation Y, in order to make comparisons inferring generational differences. However, as previously discussed, differences between the groups can also be attributed to the life-stage or stage of sexual development of the individual, because these two groups are sampled at differing ages (18-25 and 35-42). For example, as previously specified, the younger group was found to be engaging in more casual dating relationships compared to the older age cohort, which may be due to the life stage of these groups. Longitudinal design which would allow the same sample of participants to complete the questionnaire at two differing times, in early adulthood and middle adulthood, would reduce some of this bias. However, a longitudinal research design is expensive and time consuming, thus difficult to implement (Cozby, 2004) and was outside of the scope of the current research project. Future research may benefit from using longitudinal design to examine how attitudes regarding sexuality, such as the sexual double standard, changes over the life-cycle.

An additional limitation of the research may have been its dependence on on-line research and whether or not the internet can guarantee a truly random sample. In using the internet as our mode of data collection we were limiting our sample of individuals to those who have access to a computer and the internet and thus excluding participants from varying socioeconomic statuses. The use of internet surveys is becoming more commonly used in academic research (e.g., Marks & Fraley, 2005; Wood et al., 2006); however, it may still present a limitation when sampling to represent to entire population. However, our use of an online survey allowed for total anonymity of the participants which may have aided in decreasing demand characteristics and social desirability in the responses, which was considered to be essential in sexuality research.

Conclusion

The purpose of this investigation was to explore how belief in a societal sexual double standard, and direct implementation of the sexual double standard when making judgments on the sexual behaviours of others, uniquely influence the sexual assertiveness of men and women of differing generational age cohorts. Belief and implementation of the sexual double standard were determined to be distinct constructs that vary independently. This means that an individual can believe a sexual double standard to exist in current culture, yet not use such double standards themselves. Consistent with past findings, rates of belief in the sexual double standard were found to be higher than rates of implementation.

Implementation of the sexual double standard was not found to influence the levels of sexual assertiveness expressed in any of the groups. This may signify that the sexual double standard is less often being used by individual members of society, thus is

no longer impacting their sexual assertiveness. However, belief in the sexual double standard was found to influence the levels of sexual assertiveness in women of the older age cohort. Decreased belief in the traditional sexual double standard leads to increased levels of sexual assertiveness. This finding is consistent with traditional sexual scripting which endorse lower levels of sexual assertiveness for women, thus less belief in such scripts would lead to more expressed assertiveness. Also, belief in a societal sexual double standard was not found to influence the sexual assertiveness of the younger cohort. This indicates that, although the belief in a societal sexual double standard remains in the intrapsychic scripts and cultural scenarios of today's younger generation Y, it does not appear to be enacted on in the behavioural interpersonal scripts of sexual assertiveness in this generation. Since the sexual double standard is primarily focused on restricting the sexual behaviours of women, and this was a script that was more salient in past generations than today, it is not surprising that the sexual assertiveness of women from Generation X are still influenced by the widely held cultural belief in a societal sexual double standard.

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Appendix A
Questionnaires
Demographics

1. Please indicate your gender (circle one):
 - a) M
 - b) F
 - c) Other (*please specify*) _____
 - d) I'd prefer not to answer.

2. Please indicate your age: _____

3. How would you describe yourself?
 - a) African-Canadian/Black
 - b) Asian/ Asian-Canadian
 - c) Caucasian
 - d) Hispanic/Latino
 - e) Middle Eastern
 - f) Other (*please specify*) _____
 - g) I'd prefer not to answer.

4. Please indicate the highest level of education that you have completed:
 - a) Less than high school
 - b) High school diploma
 - c) Some university/college
 - d) University/college degree
 - e) MA or PhD
 - f) Professional degree
 - g) Other (*please specify*) _____

5. Please indicate your sexual orientation
 - a) Heterosexual
 - b) Homosexual
 - c) Blexual
 - d) Other: (*please specify*) _____
 - e) I'd prefer not to answer.

6. How would you describe your current relationship?
 - a) not currently dating, have never had a serious relationship
 - b) not currently dating, have had a serious relationship in the past
 - c) casually dating, have never had a serious relationship
 - d) casually dating, have had a serious relationship in the past
 - e) seriously dating, not living together
 - f) seriously dating, living together
 - g) married
 - h) married with children

- i) separated/divorced
- j) I'd prefer not to answer

If you are currently in an intimate relationship, please answer questions 7 to 9. If you are not currently in an intimate relationship but have been in the past, please answer questions 10 to 13. All participants, please answer question 14 and 15.

7. How long have you been with your current partner? _____
8. What is the status of your current sexual relationship with your partner?
 - a) not currently sexually active
 - b) sexually active but do not engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - c) sexually active, engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - d) I'd prefer not to answer.
9. How long have you been sexually active with your current partner? _____
10. How long ago was your last serious relationship? _____
11. How long did that relationship last? _____
12. What was the status of your sexual relationship with your last partner?
 - a) not sexually active
 - b) sexually active but did not engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - c) sexually active, did engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - d) I'd prefer not to answer
13. How long were you sexually active with your last partner? _____
14. What is your current sexual behaviour status over the last 6 months?
 - a) not currently sexually active
 - b) sexually active but do not engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - c) sexually active, engage in sexual intercourse (e.g., anal and/or vaginal penetration)
 - d) I'd prefer not to answer
15. For the purposes of this study, I will answer the questionnaires considering:
 - a) my current sexual partner
 - b) my most recent sexual partner
 - c) my sexual partners over the last 6 months
 - d) I'd prefer not to answer

SDSS

This questionnaire will assess the possibility of a varying degree of ethicality when evaluating male and female behaviour. Please indicate in the line provided the choice that best describes your position on the situation presented.

0	1	2	3	4	5	6	7
Highly							Highly
Ethical							Unethical

1. Gary N. was the first person in his office to come in one morning. Unfortunately, when he tried making coffee, he was careless and broke the coffee machine. When the damage was discovered later that morning, he said nothing about breaking it.
2. Bob F. has recently started dating a woman. He has not had sex with her although they engage in heavy petting (mutual masturbation).
3. Nina S. was in a store, looking at blouses. In the dressing room she tried one on, decided she liked it, and buttoned her old shirt over it. Then, she walked out of the store.
4. Tom T. has engaged in sexual intercourse with eight women.
5. Jim C. was in charge of choosing a contractor for the construction of a new office building. One contractor offered him a modest sum of money to choose him. Jim chose that contractor and accepted the money.
6. Carl T. has been having sex with his girlfriend for more than a year. He has met another woman recently, and has been having a secret affair with her.
7. Peter F. felt swamped with his courses. He didn't think he'd studied enough for his exam, so he copied some answers when he took the exam.
8. Nick C. knew his girlfriend had some reservations about having sex with him. He felt they should, and he put pressure on her until she agreed.
9. Debbie A. was working one day when her boss praised her for the work she had done on a recent project. Most of the work had actually been done by another worker, but she did not tell her boss so.
10. Judy R. on average masturbates three times a week.
11. Larry E. was with a friend when he found a nice shirt. Since he did not have any money with him, his friend offered him a loan. Larry has not paid his friend back.
12. Trisha A. has been having an affair. She has hidden the affair from her husband.
13. Jack H. is paid by the hour. He has been leaving early, but has claimed he worked his normal 40 hours.
14. Ann M. has been seeing her new boyfriend for a short while. She is extremely attracted to him and has begun to have sex with him.
15. Hal R. is a landlord. Although he knows that damage in one of his apartments had been present when the tenants moved in, he is blaming them for it. They want to move, and Hal is keeping their security deposit to pay for repairs.
16. Debbie A. likes to occasionally go out to see male strippers.
17. Cindy P. was shopping when she saw another shopper sneaking a watch into her pocket. Cindy did nothing to stop the theft or notify the store personnel.
18. Mark C. has had sexual relationship with his girlfriend for about a year. He has told his girlfriend that he started sleeping with another woman recently.

19. Dick M. has realized that the training he received in school does not qualify him for the work he is doing. He does not leave his job.
20. Donna M. likes to watch pornography.
21. Fred N. heard a damaging rumor about one of his friends. He spread the rumor to another friend.
22. Paula D. has had sex with her steady boyfriend.
23. Angela C. bought a shirt. The first time she wore it she ripped it. She took it back to the store, pretending it had been ripped when she bought it, and demanded a replacement.
24. Nathan L. has been dating four women at the same time and is sexually active with them all.
25. John H. had promised to rent an apartment from a private family, and had promised to drop by within the week to sign the lease and pay a security deposit. He decided not to rent it, but did not bother to let the family know.
26. Jerry T. has begun to have sex with his girlfriend. He is 16 years old.
27. Ross T. was talking to a friend when the friend told him about a personal matter and asked him to keep it to himself. It was interesting news, though, and Ross told another friend about it.
28. Ian S. was in the mood to have sex. He went out to a bar in hopes of meeting somebody to take home.
29. Glenda S. found somebody's charge card lying by a rack of clothing. She took it to another store and charged \$80 worth of merchandise with it.
30. Steven M. likes to use sex toys to masturbate.
31. Jane S. went on a business trip in March. Her travel expenses included the cost of a good hotel. She stayed at a cheap motel, although she charged the more expensive hotel rate to her expense account.
32. Nancy J. has just started dating a man. They fool around sexually (mutual masturbation), although they have not had sex.
33. Paul T. was looking at sweaters in a local department store. He snipped the price tag off one sweater, slipped it over his shirt, and left the store.
34. Jordan S. sometimes sends sexually explicit texts to his girlfriend.
35. Janet B. was working alone in her office one evening. She had turned the company radio on too loud and blew the speaker. She did not report the damage.
36. Cynthia O. went to the movies with a man she felt little desire for. Since she did feel like having sex, she slept with him after the movie was over.
37. Alice V. had gotten behind in her schoolwork. She did not have enough time to study for a particular exam, and cheated on it instead.
38. Margie F. has had a sexual relationship with her boyfriend for more than a year. Recently she started having sex with another man, she has kept this a secret from her boyfriend.
39. Hal M. had been involved in an assignment that had been finished well under deadline. From remarks his boss made to him, Hal realized his boss was giving him much of the credit for the leadership that made this possible. Although he had not, in fact, been responsible for this success, he did not tell his boss so.
40. Janice W. has been sleeping with her boyfriend for a year. She has recently started sleeping with another man she knows. She has told her boyfriend she is.

41. Harold W. bet money on his favorite baseball team. They lost the World Series but he did not pay on his bet.
42. Patrick A. masturbates on average three times a week.
43. Laura Y. owns an apartment house. Knowing that a couple who are moving out of it own a cat, she has untruthfully claimed that the animal damaged her carpeting. She is keeping their security deposit for the damage.
44. Roger N. has had sex with his steady girlfriend.
45. Ginny P. was recently offered a bribe to hire a particular applicant for a position in her company. She accepted the bribe and hired the person in question.
46. Peter S. has been having an affair. He has kept the affair from his wife.
47. May N. is paid an hourly salary. She has been coming in late recently, but has signed up for her regular hours anyway.
48. Dave K. goes out to the strip clubs occasionally.
49. Janet N. borrowed enough money from a friend to eat dinner in a nice restaurant. She has not repaid the loan.
50. Melanie F. wanted to have se.g. She went out to a nightclub in hopes of meeting somebody to pick up.
51. Sally R. just does not have enough experience for the job she has. Although she realizes this, she has not resigned.
52. Tonya L. is 16 years old and she has started having sex with her boyfriend.
53. Allen T. went to a convention last autumn. He generally ate at family restaurants. However, when he returned home, the amount he charged for food on his expense account was much more than he actually spent.
54. Harold T. has recently begun dating a new girlfriend. He is strongly attracted to her and has begun to have sex with her.
55. Brett C. was in a record store when he noticed a man slipping several albums under his coat. He did nothing to stop the man and did not alert the store employees.
56. Mark J. enjoys watching pornography.
57. Rose J. promised her girlfriend to keep a private conversation a secret. When she was talking to another friend, however, she realized that part of that private conversation would be interesting and she repeated it.
58. Kelly T. uses sex toys when she masturbates.
59. Jerry L. found a man's check book on the floor of a restroom. He wrote out a check for \$75 and cashed it.
60. Gwen F. has been dating four different men with whom she is also having se.g.
61. Susan L. had made a definite verbal agreement to buy a typewriter from a person who had advertised in the paper. She then decided she wouldn't buy it but did not get back in touch with the seller.
62. Sarah W. has had sex with eight different men.
63. Francis P. heard a story which would hurt her friend's reputation. She then told the story to another friend.
64. Linda D. knew her boyfriend was unsure if they should have se.g. She felt they should, and pressured him until he agreed to have sex with her.
65. Carl A bought a teapot at a local boutique. On the way home, it slipped off the car seat and the handle cracked. He took it back to the store and demanded a refund, saying it must have been broke before it left the store.

66. Marry T. sends her boyfriend a sexually explicit text messages.
67. Janice T. had made a bet with a friend on the presidential election. Her candidate lost but she didn't pay up.
68. Jonathan R. was on a date with a woman he felt little attraction for. He felt like having sex, though, so he slept with her.

SDSS Counterbalanced Scale (names switched)

This questionnaire will assess the possibility of a varying degree of ethicality when evaluating male and female behaviour. Please indicate in the line provided the choice that best describes your position on the situation presented.

0	1	2	3	4	5	6	7
Highly							Highly
Ethical							Unethical

1. Gary N. was the first person in his office to come in one morning. Unfortunately, when he tried making coffee, he was careless and broke the coffee machine. When the damage was discovered later that morning, he said nothing about breaking it.
2. Nancy J. has recently started dating a man. She has not had sex with him although they engage in heavy petting (mutual masturbation).
3. Nina S. was in a store, looking at blouses. In the dressing room she tried one on, decided she liked it, and buttoned her old shirt over it. Then, she walked out of the store.
4. Sarah W. has engaged in sexual intercourse with eight men.
5. Jim C. was in charge of choosing a contractor for the construction of a new office building. One contractor offered him a modest sum of money to choose him. Jim chose that contractor and accepted the money.
6. Margie F. has been having sex with her boyfriend for more than a year. She has met another man recently, and has been having a secret affair with him.
7. Peter F. felt swamped with his courses. He didn't think he'd studied enough for his exam, so he copied some answers when he took the exam.
8. Linda D. knew her boyfriend had some reservations about having sex with her. She felt they should, and she put pressure on him until he agreed.
9. Debbie A. was working one day when her boss praised her for the work she had done on a recent project. Most of the work had actually been done by another worker, but she did not tell her boss so.
10. Patrick A. on average masturbates three times a week.
11. Larry E. was with a friend when he found a nice shirt. Since he did not have any money with him, his friend offered him a loan. Larry has not paid his friend back.
12. Peter S. has been having an affair. He has hidden the affair from his wife.
13. Jack H. is paid by the hour. He has been leaving early, but has claimed he worked his normal 40 hours.
14. Harold T. has been seeing his new girlfriend for a short while. He is extremely attracted to her and has begun to have sex with her.
15. Hal R. is a landlord. Although he knows that damage in one of his apartments had been present when the tenants moved in, he is blaming them for it. They want to move, and Hal is keeping their security deposit to pay for repairs.
16. Dave K. likes to occasionally go out to see female strippers.
17. Cindy P. was shopping when she saw another shopper sneaking a watch into her pocket. Cindy did nothing to stop the theft or notify the store personnel.
18. Janice W. has had sexual relationship with her boyfriend for about a year. She has told her boyfriend that she started sleeping with another man recently.

19. Dick M. has realized that the training he received in school does not qualify him for the work he is doing. He does not leave his job.
20. Mark J. likes to watch pornography.
21. Fred N. heard a damaging rumor about one of his friends. He spread the rumor to another friend.
22. Roger N. has had sex with his steady girlfriend.
23. Angela C. bought a shirt. The first time she wore it she ripped it. She took it back to the store, pretending it had been ripped when she bought it, and demanded a replacement.
24. Gwen F. has been dating four men at the same time and is sexually active with them all.
25. John H. had promised to rent an apartment from a private family, and had promised to drop by within the week to sign the lease and pay a security deposit. He decided not to rent it, but did not bother to let the family know.
26. Tonya L. has begun to have sex with her boyfriend. She is 16 years old.
27. Ross T. was talking to a friend when the friend told him about a personal matter and asked him to keep it to himself. It was interesting news, though, and Ross told another friend about it.
28. Melanie F. was in the mood to have sex. She went out to a bar in hopes of meeting somebody to take home.
29. Glenda S. found somebody's charge card lying by a rack of clothing. She took it to another store and charged \$80 worth of merchandise with it.
30. Kelly T. likes to use sex toys to masturbate.
31. Jane S. went on a business trip in March. Her travel expenses included the cost of a good hotel. She stayed at a cheap motel, although she charged the more expensive hotel rate to her expense account.
32. Bob F. has just started dating a woman. They fool around sexually (mutual masturbation), although they have not had sex.
33. Paul T. was looking at sweaters in a local department store. He snipped the price tag off one sweater, slipped it over his shirt, and left the store.
34. Marry T. sometimes sends sexually explicit texts to her boyfriend.
35. Janet B. was working alone in her office one evening. She had turned the company radio on too loud and blew the speaker. She did not report the damage.
36. Jonathan R. went to the movies with a woman he felt little desire for. Since he did feel like having sex, he slept with her after the movie was over.
37. Alice V. had gotten behind in her schoolwork. She did not have enough time to study for a particular exam, and cheated on it instead.
38. Carl T. has had a sexual relationship with his girlfriend for more than a year. Recently he started having sex with another woman, he has kept this a secret from his girlfriend.
39. Hal M. had been involved in an assignment that had been finished well under deadline. From remarks his boss made to him, Hal realized his boss was giving him much of the credit for the leadership that made this possible. Although he had not, in fact, been responsible for this success, he did not tell his boss so.
40. Mark C. has been sleeping with his girlfriend for a year. He has recently started sleeping with another woman he knows. He has told his girlfriend he is.
41. Harold W. bet money on his favorite baseball team. They lost the World Series but he did not pay on his bet.

42. Judy R. masturbates on average three times a week.
43. Laura Y. owns an apartment house. Knowing that a couple who are moving out of it own a cat, she has untruthfully claimed that the animal damaged her carpeting. She is keeping their security deposit for the damage.
44. Paula D. has had sex with her steady boyfriend.
45. Ginny P. was recently offered a bribe to hire a particular applicant for a position in her company. She accepted the bribe and hired the person in question.
46. Trisha A. has been having an affair. She has kept the affair from her husband.
47. May N. is paid an hourly salary. She has been coming in late recently, but has signed up for her regular hours anyway.
48. Debbie A. goes out to the strip clubs occasionally.
49. Janet N. borrowed enough money from a friend to eat dinner in a nice restaurant. She has not repaid the loan.
50. Ian S. wanted to have se.g. He went out to a nightclub in hopes of meeting somebody to pick up.
51. Sally R. just does not have enough experience for the job she has. Although she realizes this, she has not resigned.
52. Jerry T. is 16 years old and he has started having sex with his girlfriend.
53. Allen T. went to a convention last autumn. He generally ate at family restaurants. However, when he returned home, the amount he charged for food on his expense account was much more than he actually spent.
54. Ann M. has recently begun dating a new boyfriend. She is strongly attracted to him and has begun to have sex with him.
55. Brett C. was in a record store when he noticed a man slipping several albums under his coat. He did nothing to stop the man and did not alert the store employees.
56. Donna M. enjoys watching pornography.
57. Rose J. promised her girlfriend to keep a private conversation a secret. When she was talking to another friend, however, she realized that part of that private conversation would be interesting and she repeated it.
58. Steven M. uses sex toys when he masturbates.
59. Jerry L. found a man's check book on the floor of a restroom. He wrote out a check for \$75 and cashed it.
60. Nathan L. has been dating four different women with whom he is also having se.g.
61. Susan L. had made a definite verbal agreement to buy a typewriter from a person who had advertised in the paper. She then decided she wouldn't buy it but did not get back in touch with the seller.
62. Tom T. has had sex with eight different women.
63. Francis P. heard a story which would hurt her friend's reputation. She then told the story to another friend.
64. Nick C. knew his girlfriend was unsure if they should have se.g. He felt they should, and pressured her until she agreed to have sex with him.
65. Carl A bought a teapot at a local boutique. On the way home, it slipped off the car seat and the handle cracked. He took it back to the store and demanded a refund, saying it must have been broke before it left the store.
66. Jordan S. sends his girlfriend a sexually explicit text messages.

67. Janice T. had made a bet with a friend on the presidential election. Her candidate lost but she didn't pay up.
68. Cynthia O. was on a date with a man she felt little attraction for. She felt like having sex, though, so she slept with him.

Sexual Attitude Scale

This questionnaire is designed to measure the way you feel about sexual behaviour. It is not a test, so there are no right or wrong answers. Answer each item carefully and accurately as you can by placing a number beside each one as follow:

- 1 Strongly disagree
- 2 Disagree
- 3 Neither agree or disagree
- 4 Agree
- 5 Strongly agree

Please begin:

1. I think there is too much sexual freedom given to adults these days.
2. I think that the increased sexual freedom seen the in the past several years has done much to undermine the Canadian family.
3. I think that young people have been given too much information about se.g.
4. Sex education should be restricted to the home.
5. Older people do not need to have se.g.
6. Sex education should be given only when people are ready for marriage.
7. Premarital sex may be a sign of decaying social order.
8. Extramarital sex is never excusable.
9. I think there is too much sexual freedom given to teenagers these days.
10. I think there is not enough sexual restraint among young people.
11. I think people indulge in sex too much.
12. I think the only proper way to have sex is through intercourse.
13. I think sex should be reserved for marriage.
14. Sex should only be for the young.
15. Too much social approval has been given to homosexuals.
16. Sex should be devoted to the business of procreation.
17. People should not masturbate.
18. Heavy sexual petting (mutual masturbation) should be discouraged.
19. People should not discuss their sexual affairs or business with others.
20. Severely disabled (physically and mentally) people should not have se.g.
21. There should be no laws prohibiting sexual acts between consenting adults.
22. What two consenting adults do together sexually is their own business.
23. There is too much sex on television.
24. Movies today are too sexually explicit.
25. Pornography should be totally banned.

Sexual Identity Scale

Please indicate on the seven point scale provided how much you think each listed trait is true of you.

1	2	3	4	5	6	7
<i>never or</i>						<i>always or</i>
<i>almost never</i>						<i>almost always</i>
<i>true</i>						<i>true</i>

1. Affectionate
2. Have leadership abilities
3. Compassionate
4. Willing to take a stand
5. Tender
6. Ambitious
7. Sensitive to others' needs
8. Competitive
9. Sympathetic
10. Assertive
11. Eager to soothe hurt feelings
12. A strong personality
13. Forceful
14. Gentle
15. Act like a leader
16. Warm

Sexual Assertiveness Scale

Please describe your patterns of communicating your sexual needs and initiating behaviour over the last six months. For this questionnaire a sexual partner is defined as *the person that engages in the sexual act with you*. A sexual partner may be somebody you have had a romantic relationship with or not. They may be a person you have had many sexual experiences with or just one. A person may have one or many sexual partners at any given time. In this questionnaire, “sex” and “sexual activity” refer to the variety of sexual behaviours, including kissing, hugging, caressing, petting, oral sex as well as sexual intercourse (i.e. vaginal or anal penetration).

For each item below, please indicate the percentage of time you communicate in the way described. Please circle the number that most accurately answers the question according to the code below:

I will answer the following questionnaire considering:

- a) my current sexual partner
- b) my most recent sexual partner
- c) my different sexual partners over the last 6 months

- 1.....0-20%
- 2.....21-40%
- 3.....41-60%
- 4.....61-80%
- 5.....81-100%

1. What percent of the time does your sexual partner initiate sex? (reverse)
2. If your sexual partner does something during sex that does not feel good, what percent of the time do you ask him/her to stop or do something else.
3. If your sexual partner wants to have sex and you don't what percent of the time do you comply with his/her wishes? (reverse)
4. What percent of the time do you feel free to ask a sexual partner to try sexual things you want to do?
5. What percent of the time do you initiate the changes in positions during sex with a sexual partner?
6. When you try something different in sex, what percent of the time is it your idea?
7. What percent of the time do you have sex mainly to build up your sexual partner's ego? (reverse)
8. During sex, what percent of the time do you think you know just what your sexual partner wants?
9. What percent of the time do you keep your sexual partner's needs and wants uppermost in you mind during sex?
10. During what percent of sexual experiences do you make specific requests of your sexual partner?
11. What percent of the time do you engage in sex mainly to please your sexual partner? (reverse)
12. If you have not gotten sexual satisfaction by the time a sexual partner has, what

- percent of the time does a sexual partner continue to stimulate you?
13. What percent of the time does a sexual partner get you to do sexual things you do not want to do? (reverse)
 14. When you feel like having sex, what percent of the time do you approach a sexual partner in a direct manner?
 15. What percent of the time is experimentation in your sexual acts initiated by a sexual partner? (reverse)
 16. If you have erotic fantasies during partner sex, what percent of the time do you share them with your sexual partner?
 17. If you communicate with a sexual partner about sex, wither verbally or nonverbally, what percent of the time are you less than completely honest? (reverse)
 18. During sex, what percent of the time do you think a sexual partner knows just what you want?
 19. If, during sexual activity, you don't like something a sexual partner does, what percent of the time do you keep it to yourself in order to avoid upsetting the sexual partner? (reverse)
 20. What percent of the time do you prefer to initiate sexual activity?
 21. During sexual activity, what percent of the time do you expect a sexual partner to know what you want without being told? (reverse)
 22. During sexual activity, if you especially enjoy something, what percent of the time do you let a sexual partner know it?
 23. During what percent of sexual encounters do you feel uncomfortable with your body? (reverse)
 24. If you and a sexual partner discuss sex, what percent of the time do you bring up the topic?
 25. During sexual activity, if you feel like doing something different, what percent of the time do you refrain from suggesting if for fear of what a sexual partner might think? (reverse)
 26. What percent of the time do you feel free to ask a sexual partner to try sexual things you want to do?
 27. During what percent of sexual encounters do you experience sensations which make you uneasy? (reverse)
 28. After sexual activity, what percent of the time do you feel exploited? (reverse)
 29. What percent of the time did you feel sexual satisfied after the sexual experiences you had with your sexual partner?
 30. What percent of your sexual behaviours over the last 6 months took place in the context of:

Casual interactions:	_____ %
Dating relationship:	_____ %
Committed relationships:	_____ %
I'd prefer not to answer (yes/no)	
Total	100%

Belief in a Societal Sexual Double Standard Scale

Each item below is an attitude or belief statement about the sex roles of men and women. This is a measure of your perception of cultural or societal norms/standards surrounding sexuality. **When answering the questions reflect on if you think society at large holds these particular attitudes or beliefs and not your own personal endorsement of these attitudes.**

There are no right or wrong answers. You may agree or disagree with each statement. Next to each statement is a scale that ranges from strongly agree (1) to strongly disagree (5). For each item, please circle the number corresponding to which you agree or disagree with that particular statement. Please make sure that you answer each item and that you choose only one answer per item.

- 1 Strongly Agree
- 2 Agree
- 3 Undecided
- 4 Disagree
- 5 Strongly Disagree

1. It is expected that women be less sexually experienced than their partners.
2. Women who are sexually active are less likely to be considered a desirable partner.
3. It is expected of women that they should never appear to be prepared for sexual encounters.
4. It is viewed as important that men be sexually experienced so as to teach women.
5. In today's western culture, "good" women would never have a one night stand, but it is expected of men.
6. Our culture supports that it is important for men to have multiple sexual experiences in order to gain experience.
7. It is expected that in sex, men should take the dominant role and women should assume the passive role.
8. In our culture it is acceptable for women to carry condoms.
9. Society at large believes that it is worse for women to sleep around than it is for men.
10. It is expected of men to initiate se.g.
11. In today's western culture there is a double standard for sexual behaviour, in which women are judged more harshly for the same sexual behaviours performed by men.

Belief and Implementation of the Sexual Double Standard Scale (BI Scale)

A recent study from the University Guelph polled 165 women from the ages of 18 to 25 about the sexual double standard. Traditionally the sexual double standard presumes that women are judged more harshly for engaging in the same sexual behaviours as men. Some examples of sexual behaviour include: number of sexual partners, gender differences in sexual interest, importance of sexual behaviour and having multiple sexual partners at one time. The researchers from the University of Guelph found mixed results which continue the debate over the existence and use of the sexual double standard in current western culture (Milhausen & Herold, 1999).

Please consider the findings of this research study when answering the following questions.

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

1. Do you believe the sexual double standard reflects the current situation in our society?
2. Would your sexual partner(s) believe the sexual double standard reflects the current situation in our society?
3. Would your friends believe the sexual double standard reflects the current situation in our society?
4. Would other people your age believe the sexual double standard reflects the current situation in our society?
5. Do you think the sexual double standard impacts your own sexual behaviour?
6. Do you think the sexual double standard impacts the sexual behaviour of your sexual partner(s)?
7. Do you think the sexual double standard impacts your friends' sexual behaviour?
8. Do you think the sexual double standard impacts the sexual behaviour of other people your age?
9. Do you think you use the sexual double standard when judging your own sexual behaviours?
10. Do you think you use the sexual double standard when judging the sexual behaviours of your sexual partner(s)?
11. Do you think you use the sexual double standard when judging the sexual behaviours of your friends?
12. Do you think you use the sexual double standard when judging the sexual behaviours of other people of your age?

Appendix B
Recruitment Advertisement (Community Sample)

What role does society play in influencing our sexual behaviour?

Researchers at Carleton University are looking for **heterosexual individuals who are either 18-25 years of age or 35-42 years of age** to answer a survey on human sexuality.

The purpose of the research is to investigate the influence of social pressures on sexual behaviour. You will be asked to answer an online questionnaire that will take about 30-45 minutes to complete. This questionnaire will ask you potentially sensitive questions about your sexual expectations, communication and behaviours over the last six months. Your participation would be anonymous and all information will be kept confidential.

If you are interested in participating, please take one of the attached website addresses to complete the survey online or contact the researcher by e-mail at caaustin@connect.carleton.ca, or aoffman@connect.carleton.ca for more information on how to proceed.

As a thank you for your participation in the study you will be eligible to be entered into a draw for a gift certificate to a local restaurant.

Please select one of the links at random to complete the survey:

<https://www.surveymonkey.com/s/sbsb1>

<https://www.surveymonkey.com/s/sbsb2>

This study has been approved by the Carleton University Ethics Committee for Psychological Research

Appendix C
Recruitment Advertisement (Student Sample)

What role does society play in influencing our sexual behaviour?

- Researchers at Carleton University are looking for heterosexual individuals who are either 18-25 years of age or 35-42 years of age to answer a survey on human sexuality
- The purpose of the research is to investigate the influence of social pressures on sexual behaviour. You will be asked to answer an online questionnaire that will take about 45 minutes to complete. This questionnaire will ask you potentially sensitive questions about your sexual expectations, communication and behaviours over the last six months. Your participation would be anonymous and all information will be kept confidential.
- Students completing this survey through the SONA system will be eligible to earn 0.25% towards their first year undergraduate Psychology classes for participation in this study.
- If you are interested in participating, please take one of the attached website addresses to complete the survey online or contact the researcher by e-mail at caaustin@connect.carleton.ca, or aoffman@connect.carleton.ca for more information on how to proceed.
- As a thank you for your participation in the study you will be eligible to be entered into a draw for a gift certificate to a local restaurant.
- This study has been approved by the Carleton University Ethics Committee for Psychological Research

Appendix D
Recruitment Email (Community Sample)

What role does society play in influencing our sexual behaviour?

Researchers at Carleton University are looking for **heterosexual individuals who are either 18-25 years of age or 35-42 years of age** to answer a survey on human sexuality.

The purpose of the research is to investigate the influence of social pressures on sexual behaviour. You will be asked to answer an online questionnaire that will take about 30 minutes to complete. This questionnaire will ask you potentially sensitive questions about your sexual expectations, communication and behaviours over the last six months. Your participation would be anonymous and all information will be kept confidential.

If you are interested in participating, please use the following link to complete the questionnaire online or contact the researchers by e-mail at caaustin@connect.carleton.ca, or aoffman@connect.carleton.ca for more information on how to proceed.

As a thank you for your participation in the study you will be eligible to be entered into a draw for a \$50 gift certificate to a restaurant.

This study has been approved by the Carleton University Ethics Committee for Psychological Research

Please select one of these surveys at random to complete:

<https://www.surveymonkey.com/s/sbsb1>

<https://www.surveymonkey.com/s/sbsb2>

Thank you very much for your participation!

Please pass this along to anyone you think would be willing to participate!

Appendix E

Instruction sheet

Dear Sir/Madame,

Thank you for agreeing to participate in the current study. The information you provide on the following survey will be extremely important to the completion of this research project, and will be kept confidential. Please read the following instructions before filling out the questionnaire package.

This questionnaire is intended for heterosexual individuals between the ages of 18-25 or 35-42. If you are of a sexual orientation other than heterosexual or are not in the designated age cohorts your information cannot be included and will be removed from the study; however if you still choose to complete the survey you will be eligible to earn student credit and be entered into the draw.

Enclosed, you will find several questionnaires pertaining to your view on sexual situations, and how you express your sexual needs. When answering the questionnaires keep in mind your sexual experiences over the last six months. A sexual partner is defined as *the person that engages in the sexual acts with you*. A sexual partner may be somebody you have had a romantic relationship with or not. They may be a person you have had many sexual experiences with or just one. A person may have one or many sexual partners at any given time.

In the following questionnaires, “sex” and “sexual activity” refer to the variety of sexual behaviours, including kissing, hugging, caressing, petting, oral sex, as well as sexual intercourse (i.e. vaginal or anal penetration). Keep all of these activities in mind when answering the questionnaires.

Please complete the questionnaires in the order that is provided here, and please do not read questions from any questionnaire prior to finishing the previous questionnaire. Please complete each questionnaire fully before moving on to the next. It is also important that the questionnaires be completed together and not at different times.

Please read the informed consent form before commencing the questionnaires. This form describes the purpose, requirements, potential risk, confidentiality, and the right to withdraw information for the research project. Completing the online survey will constitute consent to participate and have your responses used for research purposes.

If you would like to contact the researchers, contact information is provided in the informed consent. Additionally, a debriefing form is found on the last page of the questionnaire package. This provides you with further information regarding the study, as well as a list of agencies and contact information that you may use if you feel any discomfort or concern for yourself after completing the questionnaires.

As a thank-you for your participation we would like to enter your name into a draw for a gift certificate to a local restaurant. If you would like to be included in the draw please email your contact information to the researcher at caaustin@connect.carleton.ca. This contact information will not be attached to the responses you provide on the online survey and will only be used to contact you if you are a winner in the draw.

Once again, we thank you for your time and participation in this study.

Sincerely,

Carol Anne Austin, Dr. Alia Offman & Dr. Hymie Anisman

Appendix F

Informed Consent Form

The purpose of the informed consent is to ensure that you, the participant, understand all the aspects of this study. It will enable you to make an informed decision as to whether or not you wish to participate in this study. It also contains information about both the purpose of the study and your role in the study, if you choose to participate.

Study Title: The effects of social beliefs on sexual behaviour.

Study Personnel: Carol Anne Austin (Principal Investigator, caaustin@connect.carleton.ca), Dr. Alia Offman (Investigator, aoffman@connect.carleton.ca), (Hymie Anisman (Other research personnel, hymie_anisman@carleton.ca). If you have any ethical concerns about this study please contact Dr. M. Sénéchal (Chair, Carleton University Ethics Committee for Psychological Research, 613-520-2600, ext 1155) or Dr. Janet Mantler (Chair of the Department of Psychology, 613- 520-2648).

Purpose: The purpose of this study is to look at how social beliefs about sexual behaviour influence sexual behaviours.

Task Requirements: In order to complete this study, you will be asked to fill out an online survey, which contain questions regarding your view on sexual situations and how you express your sexual needs. It will take approximately 30 minutes to complete this questionnaire package.

Remuneration: Students completing this survey through the SONA system will be eligible to earn 0.25% towards their first year undergraduate Psychology classes for participation in this study. All participants will be offered to be entered in a draw for a gift certificate to a local restaurant as a thank you for participation in the study.

Potential Risk and Discomfort: Some participants may feel discomfort when answering personal questions about their intimate and sexual relationship. There are no known physical risks associated with participating in this research.

Anonymity/Confidentiality: In order to provide full anonymity for participation in the study you will not be asked to provide your name or identifying information with your answers.

Right to Withdraw: You have the right to withdraw from this study at any point, and you have the right to refuse to answer any questions without penalty. If the participant wishes to withdraw before fully completing the study they will still receive credit for participation and are still eligible to be entered in the draw.

Consent: I have read the above description of the study concerning the social influences on sexual behaviour. The data collected will be used in research publications and/or for teaching purposes. I agree to participate in the study, and this in no way constitutes a waiver of my rights.

Please note by clicking the “Next” button to proceed to the questionnaires implies consent.

This study has been approved by the Carleton University Ethics Committee for Psychological Research.

“Next”

Appendix G

Debriefing Form

What are we trying to learn in this research?

The purpose of this research is to see if there is any connection between the endorsement or belief in the sexual double standard and the sexual behaviours of individuals. The sexual double standard is a sort of unspoken social rule of what is acceptable sexual behaviour for men and women. Studying the connection between these rules and the thoughts and behaviours of individuals allows us to understand just how much sexual behaviour is influenced by social beliefs.

Why is this important to scientists or the general public?

Understanding the connection between the social rules of the sexual double standard and the sexual behaviours of individuals helps researchers explain why men and women may experience their sexuality differently in our society. This in turn can help with the development of appropriate counseling techniques for men and women experiencing sexual dysfunctions.

What are our predictions and hypotheses?

Our prediction is that the sexual double standard still has a powerful influence on how we think and feel about our sexuality. We predict that the sexual double standard still influences the sexual behaviour of men and women in our society. We also predict that the older age cohort of participants will hold more conservative standards and will be more likely to implement and believe the sexual double standard.

What if I have questions later?

If you have any further questions, concerns, or comments you would like to make about this study, please do not hesitate to contact us.

Dr. A. Offman, Principal Investigator, Department of Psychology,
aoffman@connect.carleton.ca,

Carol Anne Austin, Investigator, Department of Psychology,
caaustin@connect.carleton.ca,

Dr. Hymie Anisman, Other research personnel, Department of Psychology,
hymie_anisman@carleton.ca

Should you have any concerns about how this investigation was conducted, please contact one of the following individuals.

Dr. M. Sénéchal, Chair of Dept. of Psychology Ethics Committee, 613-520-2600,
 ext 1155.

monique_senechal@carleton.ca

Dr. Janet Mantler, Chair of the Dept. of Psychology, 613- 520-2648.

janet_mantler@carleton.ca

What should I do if I feel discomfort, upset or emotionally drained after answering personal questions about myself, my relationships, and sexuality?

If your participation in this experiment has resulted in feelings of distress, if you are feeling concerned about your relationship with your partner or your sexuality, please contact one of the following organizations.

Carleton University Health and Counselling Services 613-520-6674
Student Life Services 613-520-6600
Ottawa Distress Centre 613-238-3311
St. Paul's Centre for Counseling and Pastoral Services 613-782-3022
Sexual Health Info Line 613-563-2437
Sexual Health Centre 613-243-4641
Planned Parenthood Ottawa 613-226-3234

Appendix H
Descriptive and Correlational Tables by Group

Means and standard deviations of measures for the sample of young males (18-25 years)

Measure	n	Mean	SD	Min	Max
Implementation of the SDS	74	1.09	5.09	-11.00	14.00
Belief in the societal SDS	74	33.17	7.19	11.00	52.00
BI scale					
Belief	74	8.42	2.29	4.00	16.00
Implementation	74	11.87	3.07	4.00	16.00
Sexual assertiveness	74	96.91	12.60	54.97	120.00
Sexual attitudes scale	74	24.84	15.20	0.00	72.00
Gender identity scale					
Masculinity	74	42.04	7.16	26.00	55.00
Femininity	74	42.18	8.98	8.00	56.00

Means and standard deviations of measures for the sample of older males (35-42 years)

Measure	n	Mean	SD	Min	Max
Implementation of the SDS	57	2.30	5.75	-13.00	20.00
Belief in the societal SDS	57	37.04	6.96	24.00	52.00
BI scale					
Belief	57	7.98	1.99	4.00	12.00
Implementation	57	13.73	2.62	6.00	16.00
Sexual assertiveness	57	99.81	11.52	74.00	124.00
Sexual attitudes scale	57	24.00	13.39	2.00	53.29
Gender identity scale					
Masculinity	57	42.84	7.26	21.00	54.00
Femininity	57	45.84	8.64	14.00	56.00

Means and standard deviations of measures for the sample of young females (18-25 years)

Measure	n	Mean	SD	Min	Max
Implementation of the SDS	135	1.65	5.11	-13.00	15.00
Belief in the societal SDS	135	32.94	7.50	14.00	50.00
BI scale					
Belief	135	7.59	2.01	4.00	16.00
Implementation	135	11.10	3.48	4.00	16.00
Sexual assertiveness	135	100.06	12.43	70.00	128.00
Sexual attitudes scale	135	28.04	14.36	3.00	86.00
Gender identity scale					
Masculinity	135	41.64	7.31	18.00	56.00
Femininity	135	46.65	6.69	27.00	56.00

Means and standard deviations of measures for the sample of older females (35-42 years)

Measure	n	Mean	SD	Min	Max
Implementation of the SDS	73	-.14	6.16	-17.00	20.00
Belief in the societal SDS	73	34.23	8.73	13.00	51.00
BI scale					
Belief	73	7.23	1.95	4.00	12.00
Implementation	73	12.41	3.21	4.00	16.00
Sexual assertiveness	73	99.47	13.24	60.00	126.00
Sexual attitudes scale	73	29.97	15.88	5.00	77.00
Gender identity scale					
Masculinity	73	41.66	8.13	16.00	55.00
Femininity	73	46.86	8.47	22.00	56.00

Simple correlations between measures for younger males (18-25 years)

Measure	Implem- entation	Belief of SDS	BI- belief	BI- imp	Sexual Assertiv	Sexual Attitude	Mascu- linity	Femin- Inity
Implem- entation	1							
Belief of SDS	.21	1						
BI- belief	.52	.44**	1					
BI- imp	.23	.24*	.15	1				
Sexual Assertiv	-.07	-.09	-.04	.10	1			
Sexual Attitude	-.28*	-.10	.13	-.07	-.38**	1		
Mascu- linity	-.06	.02	-.31**	-.06	.36**	-.19	1	
Femin- inity	.07	.25*	.10	.10	.09	-.09	.14	1

Note. * $p < .05$, ** $p < .01$

Simple correlations between measures for older males (35-42 years)

Measure	Implem- entation	Belief of SDS	BI- belief	BI- imp	Sexual Assertiv	Sexual Attitude	Mascu- linity	Femin- Inity
Implem- entation	1							
Belief of SDS	.18	1						
BI- belief	-.15	-.09	1					
BI- imp	.20	.22	-.13	1				
Sexual Assertiv	.00	.20	-.10	-.07	1			
Sexual Attitude	-.25	-.19	.07	-.39**	.06	1		
Mascu- linity	.00	.09	-.00	.16	.32**	-.49**	1	
Femin- inity	.21	.12	-.09	.06	.12	-.03	.09	1

Note. * $p < .05$, ** $p < .01$

Simple correlations between measures for younger females (18-25 years)

Measure	Implem- entation	Belief of SDS	BI- belief	BI- imp	Sexual Assertiv	Sexual Attitude	Mascu- linity	Femin- Inity
Implem- entation	1							
Belief of SDS	-.14	1						
BI- belief	.10	.08	1					
BI- imp	.04	.02	.11	1				
Sexual Assertiv	-.03	.03	-.10	.17*	1			
Sexual Attitude	-.16	-.08	.07	-.17*	-.28**	1		
Mascu- linity	.10	.00	-.05	-.06	.24**	-.01	1	
Femin- inity	-.07	.06	-.06	-.02	.08	-.10	.27**	1

Note. * $p < .05$, ** $p < .01$

Simple correlations between measures for older females (35-42 years)

Measure	Implem- entation	Belief of SDS	BI- belief	BI- imp	Sexual Assertiv	Sexual Attitude	Mascu- linity	Femin- Inity
Implem- entation	1							
Belief of SDS	-.14	1						
BI- belief	-.08	.20	1					
BI- imp	.13	.33**	.04	1				
Sexual Assertiv	.07	.23*	-.06	.28*	1			
Sexual Attitude	.02	-.32**	.05	-.09	-.26*	1		
Mascu- linity	.10	.10	-.19	.18	.51**	-.27*	1	
Femin- inity	.09	-.11	-.14	.08	.09	-.09	.15	1

Note. * $p < .05$, ** $p < .01$