

SEXUAL ORIENTATION SELF-LABEL, BEHAVIOR, AND PREFERENCE:
COLLEGE STUDENTS IN TAIWAN AND THE USA

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The relationships among self-labeled sexual orientation, sexual preferences, and sexual behaviors were examined in samples from Taiwan and the USA. Subsamples matched on gender, age, and marital status were created to reduce sexual orientation cell size discrepancies and demographic differences. Sexual orientation self-label, the Kinsey Scale of Sexual Orientation, and a modified version for preference were used to assess participants' sexual orientation, behavior, and preference, respectively. Additional measures included an adaptation of the Early Sexual Experiences Checklist, and the Hopkins Symptom Checklist for psychological distress.

For both Taiwan and USA subsamples, heterosexual participants reported significantly greater congruence between sexual orientation identity and preference than did nonheterosexual participants. A high proportion of the Taiwan sample were celibate, precluding analyses of congruence between sexual orientation identity and sexual behavior. Congruence between sexual behavior and preference in the USA sample was negatively correlated with psychological distress. In a cross-cultural comparison between the Taiwan and USA women ($n = 176$), the two samples reported similar congruence between sexual orientation identity and preference.

Exploratory analyses revealed that heterosexual participants' sexual orientation label was more "public," (more categories of people who knew the participants' sexual orientation), than was nonheterosexuals' in both Taiwan and the USA. In Taiwan, heterosexual and nonheterosexual participants reported similar proportions who were celibate. A gender difference within the USA subsample included that men reported significantly greater congruence than did women regarding sexual orientation identity and congruence between behavior and preference. Analyses comparing self-labeled sexual orientation groups on unwanted childhood sexual experiences and age of earliest voluntary sexual activity were not significant.

This study's limitations included small numbers of bisexual (USA $n = 27$, Taiwan $n = 17$) or homosexual (USA $n = 35$, Taiwan $n = 9$) participants, prohibiting distinctions between them. Recommended future research includes examining the self-labeling process, Asian American student sexual behaviors, and incorporating frequency and intrusiveness when assessing unwanted childhood sexual experiences.

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CHAPTER 1

OVERVIEW

Four important concepts comprised the development of this project. The first concept of interest was that of sexual orientation and how one determines which category to choose. The main interest was not exclusively in the choice of sexual orientation, but other factors that are subsumed under the construct of sexual orientation. For example, if one self-labels as a heterosexual man but has exclusive homosexual contacts and fantasizes about men and women, is the heterosexual label accurate? What factors determine the outcome label and how discrepant do competing factors have to be for a change in label to occur? Investigating possible conflicts between sexual orientation self-label, sexual behavior, and sexual preferences may clarify the extent to which one may experience negative effects and how they manifest themselves.

Additionally, some researchers have attempted to demonstrate a relationship between childhood sexual abuse and adult sexual orientation outcomes (Friedman & Downey, 1993; Hines & Green, 1991; Money, 1993; Paul, 1993). Other researchers (Kinsey, Pomeroy, and Martin, 1948; Manosevitz, 1970; Rotheram-Borus et al., 1995) suggested an accelerated sexual development for homosexual people. Regarding unwanted childhood sexual experiences, there are a variety of prevalence rates available (Finkelhor et al., 1990; Vogeltanz et al., 1999; Friedrich et al., 1991). Most researchers agree that unwanted childhood sexual experiences have some degree of negative impact

on adults who experienced childhood sexual abuse, although there are exceptions. Rind et al. (1998) reviewed 59 studies based on college student samples. Their meta-analyses revealed that students with childhood sexual abuse (CSA) were only slightly less well adjusted than were students in the control group. However, when studies controlled for family environment, which was believed to be a significant confound, there were no statistical differences between the two groups.

The second relevant concept was the labeling process. Questions became apparent after studying some of the labeling theory literature. How does one decide upon a self-label? What are the factors that influence the choice of label initially? What happens when, in the labeling process, one chooses a label that does not match other competing factors? As for external factors, such as unwanted childhood sexual experiences, voluntary sexual experiences, and societal pressures, these may contribute to a person's labeling process and possible negative evaluation of the self.

The third concept is that of congruence. Theoretically, congruence regarding sexual orientation, behavior, preference, and sexual orientation identity is a construct with far reaching implications. Rogers (1951) contended that all forms of incongruence resulted in psychological conflict between two opposing self-concepts. Incongruence is unhealthy and can manifest itself as a physiological problem if the psychological distress is not reduced. Reducing the conflict implies that one of the two opposing forces needs to change (Rogers, 1951). Concepts regarding maintenance of the self indicate that changing the ideal self is easier than changing the real self.

Combining labeling theory and the concept of congruence, it has been suggested that when one does not behave in a manner appropriate for the self-label, psychological distress may result (Rogers, 1951). However, can the direction of incongruence be protective? Cass (1979) indicated that during the stages of identity formation, some inconsistency is healthy and appropriate for that given stage. For example, can a homosexual man in the military be congruent regarding all four variables of sexual orientation self-label, behavior, preference, and sexual orientation identity? If he is congruent, he may lose his career and face possible legal proceedings as a result of his congruence.

Finally, how do cultures compare to each other on the concepts of labeling, sexual orientation, and congruence? What commonalities will be discovered when the East meets the West? Or are the differences still too disparate for comparison? Taiwan is a collectivist society and the USA is an individualist one. The independent flair of society in the USA may not be comparable to the conformity-demanding society in Taiwan.

To understand the intricacies of these woven concepts, it is best to begin with reviews of the relevant research in each specific area of sexual orientation, labeling theories, congruence, and cross-cultural comparisons regarding sexual orientation, sexual behavior, and/or preference. A brief review of sexual orientation as it has been conceptualized and assessed through history will prepare the reader for a greater understanding and appreciation of the research hypotheses.

SEXUAL ORIENTATION: THEORIES AND TERMINOLOGY

Theories of Sexual Orientation

Before embarking on a discussion of sexual orientation, sexual behaviors, and preference, a review of various sexual orientation theories is necessary. Additionally, there is a plethora of terminology to define “sexual orientation.” Terminology to define what constitutes the term “sexual orientation” is vast and confusing. Different historical time periods, cultures, and researchers have used different, yet overlapping terms. However, classifying a person by their sexual orientation is a relatively recent phenomenon. A perusal of the variety of ways that sexual orientation is defined is necessary before examining the full range of terminology. Therefore, beginning with some of the earliest descriptions of same-sex sexual behavior is appropriate as most of the early theories regarding what is now termed “sexual orientation” were examples of one’s behavior.

Evidence of same-sex behaviors in ancient times. One of the earliest references to same-sex activity was from Egyptian legends regarding the relationship between Set (also known as Seth) and Horus. Set was an Egyptian god who engaged in a battle with his nephew, Horus, for control over all of Egypt. According to legend, Set attempted to gain control over the Upper and Lower Kingdoms by having a sexual liaison with Horus. Set tried to “impregnate” Horus as a means of gaining power over him. However, Horus was able to “impregnate” Set with his own semen thus disgracing him. Homosexuality, like incest, was socially acceptable during ancient Egyptian times. In fact, Pharaohs were

expected to marry their siblings and rule Egypt. Set's fall from grace was not a result of homosexual acts but because he tried to steal Horus' birthright to rule the Lower Kingdom in Egypt (Budge, 1969).

Other Egyptian gods who were depicted as having same-sex relationships were Osiris, god of the underworld, and Ra, the sun god. In murals, Osiris and Ra are depicted together as an integrated unit, representing the unity of life and death. Additionally, many of the murals in Egypt depict homosexual relationships as a natural part of life in ancient Egypt. In 2400 BC, two male figures, Niankhkhnum and Khnumhotep, were painted in an intimate embrace. In 1360 BC, Akhenaton appointed the Pharaoh Smenkhare as king. Several scenes of the pharaoh and co-regent portray them in "affectionate" poses, which led some historians to claim that Smenkhare was Akhenaton's lover (Budge, 1969).

A variety of Greek gods became divine patrons to those pursuing same-sex love. Apollo was known for taking male lovers and had a significant relationship with another male god, Hyacinth. Artemis, the huntress and protector of women and children, rejected traditional female roles and was a patron for both men and women who engaged in same-sex relationships. Dionysus was depicted as soft and feminine and he became lovers with Adonis and Hermaphrodite. Warriors, before a battle, called upon Eros because ancient Greeks believed that victory was achieved because of the love between men. Pan was portrayed in art with an erect penis as he chased after men and women, especially shepherds. Zeus was well known for his sexual liaisons with men, especially his cupbearer, Ganymede (Calimach, 2002).

The Greek lesbian poet, Sappho (6th century BC), was also a popular lyricist and had a large following. The ancients distinguished her by the title of the Tenth Muse and she was born at Mytilene on the island of Lesbos. Although her romantic preference was for women, she reportedly had male, as well as female, lovers. Lesbos, in Sappho's day, was a cultural center with a poetic tradition. Its society was markedly more egalitarian toward women of that historical period as Lesbos's women mixed freely with men, were highly educated, and formed clubs for the development of poetry and music. Her poetry was discovered in 1897 when archeologists discovered her works in excavating tombs in Egypt (Calimach, 2002).

Roman historians report that Antinous was the “favorite” of the Roman Emperor Hadrian (110 AD). The record of their meeting and exact nature of their relationship is not clear but most historians agree that they were lovers. Antinous died from drowning in the Nile River at age 20 years and the possibility of murder or suicide was never ruled out. Emperor Hadrian later deified Antinous as a tribute to their love (Lambert, 1988).

Soranus, a Greek physician, noticed that some men were effeminate and he theorized that they had a mental disease as opposed to a physical one. He theorized that these effeminate men were victims of their excessive sexual activity causing a strain on their virility resulting in a pattern of having sex with other men. He reported this same phenomenon of women pursuing other women. During Plato's time, it was common for adult men and adolescent boys to have sexual relationships as a type of “mentoring” process (Bullough, 1990).

Recent theories of sexual orientation. Sigmund Freud began examining sexuality and sexual identification in his *Three Essays on the Theory of Sexuality* (1905). He used the term “inversion” to denote a reversal of sexual identification. The translation of the words “invert” and “inversion” appear to be consistent across multiple translations of Freud’s work. However, John Addington Symonds used “inversion” in 1891 to describe individuals who had sexual urges that were incompatible with their sexual organs (Bullough, 1990).

Freud used the term “absolute invert” to describe a person who seeks sexual objects of their same sex. An “amphigenic invert” is one who seeks sexual gratification from both same-sex and opposite sex individuals. “Contingent inverts” are people who seek same-sex relationships when opposite sex-relationships are unavailable. His theory implies that external factors determine the type of invert that one would become. Freud’s (1933) explanation of male homosexuality included the concept of being fixated at a particular psychosexual stage due to the presence of a domineering mother or absence of a dominant father.

Another premise of Freud’s is that there were basically no differences between heterosexual and homosexual individuals regarding the initial stages of their sexual and social development. Therefore, Freud believed that all people were “bisexual.” Freud posited that homosexuality is part of normal sexuality in fantasy and practice. He further asserted that sexual behaviors do not necessarily restrict one’s sexual preference. Freud later amended his concept to indicate that inversion results as a restriction on the initial

bisexuality that all people have as part of their initial stage of sexual development (Samuels, 2000).

Bisexuality is still found in the lower animal kingdom and Lyston and Kiernan (1888, as cited in Krafft-Ebing, 1935) proposed that monosexuality gradually evolved from bisexuality. Forel (1935) addressed the interaction between psychic and physical sexual attraction in homosexual individuals. Freud (1905) found a degree of bisexuality in every one of his cases. He theorized that heterosexuals and homosexuals were not born that way but shaped by their internal and environmental experiences. However, opponents such as Radó refuted Freud's bisexuality theory by stating that there is no physiological scientific basis for bisexuality. Therefore, bisexuality could not exist psychologically (Nierenberg, 1999). Some theorists contend that bisexuals are merely homosexuals who reduce their conflicts about being homosexual by having occasional heterosexual experiences (Hunt, 1974).

Lacan's theory of sexuality (1977; as cited in Samuels, 2000) suggested that there is no inherent sexuality. According to Lacan, homosexuality and heterosexuality both develop as a result of social reality and internal struggles with regard to freedom from social regulation, an ideal image of pleasure, desire for unity, and desire of others. Lacan conceptualized three forms of homosexuality somewhat differently from Freud's classification. Lacan's complex theory deals with one's desires and how they are intrapsychically resolved. Additionally, Lacan's theory was developed with only homosexual men and not women or heterosexual men. Lacan conceptualized homosexual men as being psychotic, neurotic or perverse. Lacan used concepts such as the Real, the

Imaginary, and the Symbolic to distinguish between the desires of psychotic, neurotic, and perverse homosexual men. Homosexual men who were classified as psychotic attempt to focus on the “Other” or unattainable objects while ignoring the Real. Psychotic homosexual men would become fixated on a sexual target that is not realistically available while ignoring accessible sexual targets in their environment. Neurotic homosexual men avoid the Real by retreating into a fantasy world where they can defend against a “castration complex” or the Symbolic. Neurotic homosexual men would be unable to enjoy sexual activities with other men but have a rich homosexual fantasy life with resultant feelings of guilt or anxiety. Homosexual men with perverse homosexuality merge the Imaginary and the Symbolic without any castration anxiety. These men would be very open to a variety of sexual desires and experiences without any psychological discomfort (Samuels, 2000).

More recent concepts regarding sexual orientation revolve around the term of plastic sexuality, originated by Giddens (1992; as cited in Young, 2001). While the actual concept of plastic sexuality may date back to ancient times, the phrase is relatively new. Plastic sexuality is viewed as a form of sexual self-exploration. Giddens stated that 40% of married men have regular sex with other men at some point in their married life (Young, 2001). This is consistent with Kinsey’s finding that 37% of the men in his study had at least one homosexual experience in their lifetimes.

Stein (1997) posited that homosexuality is not static but fluid. The concept of “homosexuality” can refer to sexual desire, romantic desire, relational desire, and/or fantasy. In the efforts to “simplify” sexual orientation into a unitary or fixed

phenomenon, the expression of the self is clearly restricted and does not allow for multiple or divergent desires or behaviors. Without the freedom that plastic sexuality provides, people are forced into making choices regarding sexual orientation self-label, sexual behavior, and sexual preference that may not accurately reflect the full range of emotions or behavioral expressions of a person.

Esther Rothblum (as cited in DeAngelis, 2002) stated that today's gay, lesbian, and bisexual youth tend to express themselves in a fluid gender and sexual identity manner. This allows the youth to express themselves more freely and not be stereotyped as in previous generations as either "butch" or "femme." Marny Hall (as cited in DeAngelis, 2002) contends that the lines between gender identity and sexual identity are becoming more semipermeable. As a result, she posits that some youth are in a "lingering" category before foreclosing on a definitive, traditional label. Culture and society have little tolerance for ambiguity and, as a result, tends to dichotomize social classifications. For this reason, bisexual youth foreclose on a gay or lesbian label to avoid being further stigmatized by the gay and lesbian community (DeAngelis, 2002).

Examining some of the major theories of sexual orientation helps give one a perspective on historical and recent conceptualizations regarding the construct of sexual orientation. However, as one can surmise, there continues to be little, if any, agreement regarding the facets of a person's life that constitutes what is referred to as sexual orientation. A quick perusal of the terminology will allow one to appreciate the complexity and difficulty in defining a construct. The terminology is further complicated

by the problem regarding a lack of consensus regarding what the construct of sexual orientation involves.

Sexual Orientation Terminology

Historical definitions of sexual orientation. For centuries, people were not judged by their sexual behaviors or preferences but by their class status. The earliest known attempts to classify sexual behavior were made during the second century AD by Soranus. He described effeminate men whom he labeled “subactors” or “pathics.” Women who preferred to have sex with their own gender were known as “tribades.” Terminology did not become an issue again until the nineteenth century when a forensic medicine pioneer, Johann Ludwig Casper, used the term “paederastia” to describe men who were having sexual relationships with young boys. This term was a poor one as it was overinclusive because it included same-sexual behaviors among adult men. He included additional terms for lesbianism and sodomy, although the latter referred to both bestiality and anal intercourse between two men. In 1889, Carl Liman wanted more precise terminology to reflect a difference between “innate” homosexuals (exclusive homosexual activity) and men who had some homosexual activity due to boredom with heterosexual contacts (Bullough, 1990).

Heinrich Hössli (1836; as cited in Bullough, 1990) used the term “mannerliebe” meaning “man-love.” The advantage of this term was that it was a neutral, ambiguous classification. In an attempt to clarify taxonomic terms, Karl Heinrich Ulrichs used the term “mannmännliche Liebe” which denoted love between men (Bullough, 1990). Ulrichs (1860s, as cited in Sell, 1997) devised a classification scheme for males as

follows: (a) Dioning, a heterosexual male; (b) Urning, a homosexual male, and (c) Urono-dioning, a bisexual male. Ulrichs also subdivided the Urnings into four classifications: (a) Mannling, a masculine Urning; (b) Weibling, an effeminate Urning; (c) Zwischen, a mix of manly and effeminate traits in a Urning; and (d) Virilised, a Urning that behaves like a heterosexual man. Homosexual women were classified as Urningins, while heterosexual women were known as Dioningins (Bullough, 1990).

Karl Maria Kertbeny first used the term “homosexuality” in 1869. In 1884, Gustav Jager and Richard von Krafft-Ebing began using the term in their literary works (Bullough, 1990). However, other sources credit Charles Gilbert Chaddock for coining the term in 1892 when he translated Krafft-Ebing’s text, *Psychopathis Sexualis* (Halperin, 1989).

Terminology for sexual orientation has been a rather recent development. However, examining the different methods by which a person could define sexual orientation will illustrate the diverse methods by which people were classified regarding their sexual orientation. The taxonomic problems seem secondary to the lack of agreement regarding the actual construct itself.

Definitions based on behavior. Almost all of the earlier definitions of sexual orientation were based on behavior as discussed previously. Sell (1997) described historical definitions of sexual orientation. He cited the works of Ulrichs and Mayne who described homosexuality in terms of behavior and preference. Other sources such as the Stedman’s Medical Dictionary (1982) used only behaviors to define one’s sexual

orientation. Additionally, Beach and Diamond used only behavior in their definitions of homosexuality (Sell, 1997) as did Reber (1985).

Definitions based on internal experience. Sell (1997) discussed the problems with earlier definitions of sexual orientation as being psychologically based and not addressing the behavioral correlates of sexual attraction. For example, early researchers such as Mayne in 1908, Ellis in 1896, and Krafft-Ebing in 1886 used sexual preference or interest to categorize individuals as opposed to just sexual behavior. LeVay (1993) defined sexual orientation on the basis of sexual “feelings” or behavior.

Krafft-Ebing (1935) defined homosexuality as a “reversal” of sexual feelings. “Normal” people have affection and sexual desire for people of the opposite sex; therefore, sexual behavior should not be the basis for a diagnosis but a person’s “perverse” feelings for persons of the same sex. Krafft-Ebing cited Ulrichs (1864, 1865) who proposed that sexual mental life was not connected to sexual activity. Mayne (1908) reasoned that homosexual men experienced sexual feelings for other men due to either an innate or environmentally influenced change from the “normal” sexual feelings he would have for women. Additionally, he believed that some men who desired men also desire women (Sell, 1997).

Oddly enough, the classification of a person’s sexual orientation based on variables other than sexual behavior was not a recent development. Today’s world seems to focus on the external or behavioral components of sexual orientation, while earlier researchers cautioned against using only behavior as the criterion for category assignment regarding sexual orientation. It appears that, in spite of theoretical differences in

capturing the construct of sexual orientation, most current researchers agree that using multiple factors, both internal and external, seem to capture more accurately the essence of sexual orientation. However, included in the next section are several theories that have attempted to explain how a person comes to identify with a particular sexual orientation.

Studies based on biological and behavioral differences between heterosexual, bisexual, and homosexual individuals. Gley (1884, as cited in Krafft-Ebing, 1935) posited that men who were homosexual have female brains with male genitalia. LeVay (1991) was able to show similarities between heterosexual female and homosexual male brains in specific areas of the hypothalamus. Heterosexual male brains differed in size in specific regions of the hypothalamus (INAH 3) from homosexual males and heterosexual females. Krafft-Ebing also reported that the “reversal” of sexual feelings implicates anomalies in the cerebral areas of the brain. Unfortunately, the biological studies performed had major limitations such as small sample sizes, all gay participants had died from AIDS (which has deleterious effects on the central nervous system, thus confounding attribution of brain differences to sexual orientation), and the only homosexuals used in the study were men. No lesbians were included for comparison.

Wilson (1975, 1978; as cited in Young, 2001) posited that there is no discontinuity between animal and human sexual behaviors. Both lower animals and humans engage in highly ritualized mating patterns. Comfort (1950, 1972, 1974; as cited in Young, 2001) viewed foreplay as an extension of sexual behavior. Therefore, the boundaries between sexual exploration and sexual behavior abnormalities are hard to distinguish from one another (Young, 2001).

Other researchers have tried to find biological determinants for sexual orientation. Benedek and Rubenstein (1942) studied hormonal changes during menstrual cycles and found that changes in the content of fantasies were highly correlated with hormonal cycles. The content of the fantasies became more sexually oriented, but sexual preference was not noted. However, the sample did not include any women who had stable emotional or satisfying sex lives. Robert Kolodny (1978; as cited in Friedman & Downey, 1998) discovered a relationship between serum testosterone levels and sexual orientation in men. Kolodny reported that testosterone levels in men were inversely related to their sexual orientation self-label, with heterosexual men having the highest levels and homosexual men the lowest. However, attempts to replicate these studies have failed (Friedman & Downey, 1998).

Richard Isay's (1990) goal for his theory on homosexuality was to normalize homosexuality in the population, as he concluded that it was genetic. His "gay gene" theory attempted to demonstrate that homosexuality was innate and, as such, their environment did not unduly influence homosexual individuals because they had no "choice" regarding their sexual orientation (Nierenberg, 1999). Breedlove (1997) argues that it is not merely a genetic disposition but an interaction between behavioral components and neuronal development. He believed that sexual behavior might account for morphological changes in the brain. His research on male rats demonstrated that the frequency of sexual behavior and hormonal changes could change the brain's morphology as the two are reciprocally related.

The problem with many of the research projects listed previously is the almost exclusive focus on biological determinants to explain the “cause” of a person’s specific sexual orientation. It does not leave room for change, fluidity or environmental influences. Examining the social context and possible influences on a developing sexual orientation can balance out the “nature versus nurture” debate regarding the eventual development and expression of a specific sexual orientation.

Definitions based on the social construction of identity. Self-described sexual orientation results from forming an identity with a group and, in turn, adopting that group’s identity. The group membership affords benefits to the member in the manner of support, commonality, and protection from the “other” groups. The complexity of the labeling process is subsequently described under *Labeling Theory* on page 19.

Freud lacked terminology to incorporate other determinant factors for sexual orientation identity into his theories of sexual orientation. The concepts of gender identity and gender role were virtually nonexistent during Freud’s time. These are important constructs that impact on one’s sexual development and eventual choice of sexual orientation identity (Friedman & Downey, 1998). Burch (1993) reported that sexual identity and orientation are separate and interdependent variables but may conflict. She attributed part of the problem with defining sexual identity to the overlap of terminology for sexual identity. Savin-Williams (1989) concluded that sexual identity is a consistent, enduring interpretation of sexual orientation and sexual behavior with regard to inner identity. Evans and Levine (1990) proposed different identity processes for homosexual men and women, asserting that women develop a lesbian identity later than gay men and

that lesbian women usually define their sexual identity before engaging in congruent behaviors, unlike gay men (Marmor, 1980). Emotional attachment may be more salient for women and homosexuality is less threatening for them than for gay men. Finally, sexuality appears to be more relational and fluid for lesbian women than gay men.

Social influence is a powerful catalyst for identity and change. People who are striving to achieve an identity will look to groups that have similar values and ideas with which they want to associate. The alignment with a group based on sexual orientation can provide support, comfort, and protection for the member. However, the use of multiple factors to define one's sexual orientation is becoming the most theoretically appropriate method as the construct itself is complex.

Definitions based on multiple factors. Chung and Katamaya (1996) reviewed 144 studies to ascertain the various methods for assessing sexual orientation of lesbian, gay, or bisexual individuals during the years 1974-1993. They identified previous methods for assessing sexual orientation as: (a) self-identification, such as self-labeling (LaTorre & Wendenburg, 1983); (b) sexual preference, such as assessing sexual attraction (Klein et al., 1985); (c) behavior, assessing actual sexual behavior (Coleman, 1987); (d) single dimension, such as the Kinsey Sexual Orientation Scale; (e) multiple dimensions, such as using more than one dimension or more than one of the previously mentioned assessment methods; and (f) unsure, such as not using an assessment method, or the type of assessment method was not specifically addressed. The results of their review indicated that self-identification was used in a majority of the articles reviewed as a method of assessing sexual orientation. In another study, Shively, Jones and DeCecco (1984)

reviewed 228 similar studies and their findings indicated that in almost 82% of the studies, sexual orientation was by single self-report as opposed to a more in-depth formal assessment.

Assessment of sexual orientation is difficult due to having researchers emphasize slightly different aspects of the construct. The aforementioned reviews illustrated the problems with assessment and interpretation. However, problems with terminology and the overlap between terms will continue to make assessment problematic. Therefore, a consensus for taxonomic agreement is one of the first steps toward clarifying and refining assessment tools used for sexual orientation.

Problems with Terminology

An examination of the literature surrounding the terms “sexual orientation” and “sexual identity” reveals that the terminologies, if not the constructs, are prone to unstandardized usage. Due to lack of agreement regarding terminology, a researcher may contribute to the confusion by creating a new term. Because the constructs appear to overlap, it is difficult to determine the correct terminology on these abstract, unclear and interwoven concepts. Additionally, self-labeling can be a confusing process as individuals may have several conflicting ideas about themselves and how they should define their sexual orientation. Is sexual orientation based on sexual behavior, preference, or other factors such as emotional closeness, fantasies, or social closeness?

Contemporary Terminology for Sexual Orientation and Identity

General definitions and useage. Sexual development has been examined in terms of three related, but independent components of a person's: (a) sexual structures and

functions (male or female), (b) sex-role identification and behavior (masculine or feminine), and (c) physiological arousal and subsequent behavior regarding the object of gratification (heterosexual, homosexual, or bisexual; Brown & Lynn, 1966).

Sexual orientation has been loosely defined as the overtly expressed adult sexual preference with regard to the object of gratification and has been categorized as heterosexual, homosexual, or bisexual (VanWyk & Geist, 1984). However, some researchers endeavor to expand the scope of the definition to measure sexual orientation along these seven dimensions: (a) sexual attraction, (b) sexual behavior, (c) sexual fantasies, (d) emotional preference, (e) social preference, (f) self-identification, and (g) heterosexual/homosexual lifestyle (Klein, Sepekoff, & Wolf, 1985). They felt that sexual orientation should be based on a variety of facets (as listed above). Their premise was that a man could self-label as a heterosexual and engage in a sexual relationship with a man. Shively, Rudolph and DeCecco (1978; as cited in Klein, Sepekoff, & Wolf, 1985) regarded sexual orientation as encompassing physical sexual activity, interpersonal affection, and erotic fantasy. They used a Kinsey-type scale that asked the degree of sexual behavior, affection, and fantasy toward opposite and same sex individuals.

Coleman (1987) suggested another model as an alternative to the trend toward oversimplification of sexual orientation classifications. His model incorporated gender identity and sexual identity as part of his model. Question ranged from ascertaining a person's lifestyle to sexual orientation as defined by behavior, fantasies, and emotional attachment. The nine dimensions of Coleman's scale include: (a) current relationship

status, (b) current and ideal self-identification identity, (c) global acceptance of current sexual orientation identity, (d) physical identity, (e) gender identity, (f) sex-role identity, (g) sexual orientation as measured by behavior, (h) sexual orientation as measured by fantasies, and (i) sexual orientation as measured by emotional attachments.

There seems to be a trend in the assessment and terminology of sexual orientation to be either over or under-inclusive regarding the various areas involved. When terms are clear and concise, researchers can clearly communicate their findings to other professionals and laypersons. However, when one gets “inventive” regarding terminology, the effect is an introduction of more confusion to an already complex area of investigation. But what happens when two or more researchers are using the same term for different constructs? The overlap may produce more deleterious effects for understanding the concept of sexual orientation.

The Overlap of Terminology

A quick perusal of the literature revealed the overlap between several of the terms used in this project. Specifically, Gill and Tutty (1997) use the term sexual identity to describe both social sex role identity, and gender identity. Bailey (1995) identified three components of sexual orientation: a) sexual behavior, b) sexual identity, and c) sexual desire. Bailey indicated that the three components act independently of each other, to a certain extent. For example, a married heterosexual man who has homosexual contacts is behaviorally homosexual, while his label of heterosexual refers to his self-label and to his desire to have sexual relationships with women.

Shively and DeCecco (1977) delineated four components of sexual identity into: (a) biological identity, (b) gender identity, (c) social sex role identity, and (d) sexual orientation identity. Biological identity involves the physical assignment of gender by medical personnel at one's birth. The individual and beliefs about being male or female comprise gender identity. Social sex role identity involves the identification with typical characteristics that are culturally associated with men or women. Sexual orientation identity is defined as the gender of the individual's preferred love object. The stages, per se, of sexual identity follow a developmental pathway. Gender identity is generally formed around the age of 3. Social sex role identity is formed somewhere between the ages of 3-6 years, as the child learns sex roles through interactions with the caregiver, which corresponds with Freud's psychosexual phallic stage in which children desire the opposite-sex parent, realize they are unattainable, and engage in an identification process with the same-sex parent after resolving Oedipal or Electra complexes. Sexual orientation identity is the final developmental stage and is not necessarily either temporally anchored or stable across one's lifespan.

Historically, researchers have endeavored to separate or categorize these constructs into distinct, separate entities, but perhaps they are of such complexity that to simply categorize them or artificially divide them may result in a loss of the core construct altogether. By collapsing such complex constructs into simple terminology, one loses the diversity and richness of the person's phenomenology. By allowing for overlap between constructs, one can "flesh out" the complete picture albeit confuse readers as researchers when the terminology cannot be defined consistently. The taxonomic

difficulty is to agree on the number and/or types of constructs, collaboratively agree on core definitions, and reach a consensus regarding the terminology.

Conceptual and Measurement Problems for Sexual Orientation

Since researchers have problems agreeing on how to conceptualize sexual identity and sexual orientation, it should come as no surprise that there is even less agreement regarding the operational definitions of these constructs. As a result, researchers adopt a particular facet of the construct and use narrowly defined instruments to assess that constricted area. Needless to say, the measurement problems arise in much the same way as the three blind gentlemen attempting to describe the elephant. Each researcher focuses on an specific aspect of the construct and measures that narrowly defined aspect.

Most of the previous research has been done with self-report instruments. While this presents obvious problems such as the reliability and validity of retrospective reports (Yarrow, Campbell & Burton, 1970), the issue of self-labeling (along the lines of sexual orientation and sex roles) further complicates the overlap between constructs (Golden, 1996). Additionally, individuals may have problems with self-labeling. Retrospective studies are fraught with confounds as memories are frequently reconstructed as they surface. Therefore, without “pure” memories or corroborating information, it is uncertain how inaccurate a memory really is (Green, 1985). Changes in memory occur through how one’s personal attributes change over time as opposed to an accurate recall of the original attributes. Changes in attributes cannot avoid affecting the recall of one’s past sexual experiences. For example, if the current attitude is that same-sexual activity is

pleasurable and acceptable, earlier experiences will be interpreted as such, even if the original experience was negative (Bauserman & Davis, 1996).

Sell (1997) reviewed and critiqued the definitions and measures of sexual orientation and outlined four measures of sexual orientation including (a) dichotomous measures (i.e., heterosexual and homosexual), (b) the Kinsey Sexual Orientation Scale, (c), the Klein Scale, and (d) the Shively and DeCecco Scale. Previous methods for assessing sexual orientation include: (a) self-identification, such as self-labeling (LaTorre & Wendenburg, 1983); (b) sexual preference, such as assessing sexual attraction (Klein et al., 1985); (c) behavior, assessing actual sexual behavior (Coleman, 1987); (d) single dimension, such as the Kinsey Sexual Orientation Scale; (e) multiple dimensions, such as using behavior and preference, and (f) unsure, such as not using an assessment method, or the type of assessment method was not specifically addressed in the articles reviewed by Sell.

Other researchers have criticized the narrow scope through which sexual orientation or sexual identity has been measured. Holden and Holden (1995) proposed a continuum on which 5 elements were superimposed to measure sexual identity: (a) orientation, (b) attitude, (c) erotic behavior, (d) image, and (e) nonerotic behavior. Nonerotic behaviors include identifying people with whom one has positive physical, nonerotic contacts such as shaking hands or hugging. Two researcher groups (Gonsiorek, Sell, & Weinrich, 1995; Ellis, Burke, and Ames, 1987) have also called for the inclusion of fantasy as a factor that contributes to one's sexual orientation.

The debate regarding which areas to include when assessing sexual orientation continues. Different researchers emphasize differing aspects of the construct. As mentioned earlier, social influences are a major part of the development and eventual self-labeling process. Examining several identity theories and how a person develops and maintains a self-concept is essential in understanding the eventual outcome of one's sexual orientation.

IDENTIFICATION AND SELF-CONCEPT

The concept of labeling is central to one's identity formation. The process with which one identifies with a group is a multifaceted one and deals with self-concept, internal conflicts and societal pressures. Specifically, the self-labeling process for sexual orientation assists the individual in choosing a group assignment and can serve as a buffer for individuals who do not choose the dominant group (generally heterosexual) as their own. Examining the process of self-labeling assists with understanding how and when self-label does not match behavior or preference. Additionally, how the self deals with inconsistent, conflicting patterns of behavior (external or internal) will be reviewed.

Labeling Theory

The labeling process is a process of forming an attachment to a social group. Labeling theory (Schur, 1971) involves choosing a social group, adopting its norms and becoming a group member. Schur's work began with deviant behaviors and how those behaviors shape social interactions. Factors involved in the labeling process itself are stereotyping, retrospective interpretation and negotiation. Scheff (as cited in Schur, 1971) applied labeling theory to mental illness and the effects of stereotyping, noting that

children acquired ideas about acting “insane.” It is these stereotypes that result in being labeled “insane” if one behaviorally fits the stereotype. Stereotyping is utilized as a means of identifying with a group. It provides a structured environment for a repertoire of internal and external behaviors.

Retrospective interpretation refers to the process of reviewing one’s past behavior, thoughts or feelings to support or refute present behavior, thoughts or feelings. When related to homosexuality, Kitsuse (as cited in Shur, 1971) reported that once the retrospection had occurred, the individuals arrived at the conclusion that whatever the behavior, thoughts or feelings were in the present, those same parameters were present consistently in the past, also. The neglect of previous possible conflicting group behaviors or beliefs possibly indicates the concept of identity salience (Stryker & Burke, 2000). Identity salience indicates that a person enters situations that activate an identity, thus making it possible for them to enact that identity. Another possible reason for the seemingly consistent behavior, thoughts or feelings in the past and the present is the self-esteem hypothesis that indicates that when a person’s membership in a group is positive, the person demonstrates elevated self-esteem (Brown, 2000).

Negotiation, the third factor in self-labeling, involves the need for consistency within a personal domain. Psychiatric diagnoses have been recognized as part of this bargaining and negotiation process. Both therapist and patient engage in a process of mutually agreeing upon a diagnosis. However, the power differential is clearly in favor of the therapist and leaves the patient in the position of offering alternative explanations or reasons for his or her behavior or distress. As a result of the final “diagnosis”, the patient

engages in “role engulfment,” which is a process through which one’s behavior is increasingly organized around the “role” or “diagnosis.” The role engulfment process involves the psychosocial impact upon the patient. Once the label is “assigned,” the patient can no longer see himself or herself as what he or she was but as what one has become (Schur, 1979).

In a larger context, the self-labeled “deviance” provides a venue for the individuals to form cohesive groups and allows for social/ moral support because they share a common label. Individuals, in or out of cohesive groups, experience role engulfment whenever a strong negative social reaction is encountered. Role-engulfment affords an individual protection, resources, support, and a sense of “camaraderie” which cannot be obtained from other groups. However, Schur (1979, 1980) cautioned against using the term “labeling” as it often takes on a very narrow connotation. That is, that the “label” is used for one purpose and oversimplifies the whole concept of social reaction. For example, researchers may “label” a person based upon one unfavorable consequence of behavior. But that would be only one aspect of the labeling process. Schur (1980) emphasized that researchers should enlarge their scope and look at the complexities of the total social construction. Brown (2000) suggested including aspects such as type of group, identifying contextual and personal variables that one incorporates in choosing a group, the stability or identity maintenance, and the degree of volition that one has regarding inter and intra group comparisons. Questionnaires have been designed in the past to measure degrees of social distance between respondents and various ethnic and other “deviant” groups, such as homosexuals. In a study by Simmons (1969, as cited in

Schur, 1971) examining stereotyping behaviors, respondents reported the most social distance from lesbian and homosexual individuals.

Savin-Williams (1988) discussed the coming out process of homosexual or bisexual individuals in terms of labeling theory. Terms such as self-identification, known-aboutness, and acceptance of the verdict help homosexual people define and accept their sexual orientation by working through these three phases. Self-identification involves identifying as a member of a group. Known-aboutness refers to the degree to which others label the individual as “deviant” from the dominant group. Finally, acceptance of the verdict is the result of preparedness for hostile behaviors from the dominant group.

The labeling process is an essential part of society. Its function is to create an orderly social environment in which people can connect with others on a face-to-face or institutional level. Labeling also allows society to categorize people based upon their behaviors, thoughts and emotions. However, to further understand complex interaction of labeling and social relationships, examining the tenets of social identity and identity theories will bridge the sociological and psychological gap between the two.

Social Identity Theory

Social identity theory (Tajfel, 1982; Hogg & Abrams, 1988; as cited in Cox & Gallois; 1996; Tajfel & Turner, 1979) explores the impact of societal forces on a person's self-concept development. The main function of an individual is to categorize the self and seek out a group with which the self-label matches. Several steps are involved in the process of developing a social identity. The first two steps are self-categorization and

social comparison. Self-categorization involves adopting the norms of the group with which one has aligned. As a result, a "we" versus "them" mentality develops. Once a person claims his or her group membership, other people will be placed within the "we" group based on label and identity similarities and the persons with dissimilar labels or identities will be placed in the "them" group. During this continual process of interaction between the self and the social environment, one's identity is formed (Hoyle, Kernis, Leary, & Baldwin, 1999). Identity typically consists of social (group membership) and personal identity (unique characteristics about the person).

All people have multiple social identities (i.e. mother, sister, graduate student, etc.). When a person has multiple social identities all of which are acceptable by the dominant culture, self-esteem is usually elevated. However, persons with multiple social identities one or more of which is stigmatized such as a gay, Asian male may have problems with maintaining adequate levels of self-esteem due to negative self-comparisons with the dominant culture. Another source of intrapsychic conflict may be opposing social identities such as being gay and being a member of the military. Levels of incongruence theoretically will be high in such individuals, as the military does not allow gays, lesbians, or bisexuals to serve in their organization. A lesbian female in the U.S. Air Force may hide her sexual orientation if she wants to continue in her career field. On the other hand, she will be forced into covert sexual activities so that her sexual orientation does not become public, thus threatening her employment. Such psychological pressure to act in an appropriate manner between two conflicting

ideologies will likely result in a psychological or physiological symptom (Donahue et al., 1993).

Identity Theory

Identity theory examines the existence of multiple identities that an individual may have during a lifetime. The emphasis in identity theory is not the label but the role one plays in a social context (Stryker & Burke, 2000). Identity theory consists of four components: (a) identity standard, (b) an individual's perceptions of meanings within a situation, (c), a comparative mechanism which evaluates the social situation with the individual's identity standard, and (d) the resultant behavior of the individual. The identity standard is the culturally derived set of meanings that are held by the person and define the role that he or she will take in any given situation. When entering any situation, the individual examines his or her perceptions of the situation and compares them to the identity standard. The resultant comparison determines the individual's behavior or role in that particular situation. For example, if an individual professes monotheistic beliefs, entering into a polytheistic setting will cause the individual to compare their own monotheistic beliefs to those of the polytheistic beliefs held by the people in the group. If the differences are too disparate, the individual will leave the setting due to the distance between the internally held identity standard and the external pressures of differing beliefs.

In identity theory, when there is a self-discrepancy, between a situation and the identity standard, a negative emotion is activated. When there is little, if any, discrepancy, a positive emotion results. Thus, a homosexual man who adopts the role of a

heterosexual man is likely to experience negative emotions and possibly loss of self-esteem. The optimal outcome is that multiple roles and identities reinforce each other. When roles are in conflict, identity competition results and conflicts arise between commitments, identity salience, and identity standards. While social identity focuses on social structures and the relationship among identities, identity theory deals with internal, cognitive identity processes (Stets & Burke, 2000).

In a comparison between identity theory and social identity theory, Hogg, Terry and White (1995) discuss the differences between the two with regard to role and group membership, intergroup behavior, social context and identity, and the level of analysis. Basically, differences are due to the sociological nature of identity theory and the psychological nature of social identity theory. Identity theory involves adopting roles and the number of roles that a person develops appears to be related to the number of relationship networks developed. Additionally, there appears to be a salience hierarchy for self-identities. The degree of salience is directly proportional to the level of commitment to the role one assumes. Social identity theory, on the other hand, involves self-categorization for the purpose of eventual group membership through processes of social comparison. The basis of social identity is the relative uniformity of perceptions, actions, and attitudes within the group whereas identity theory emphasizes the differences in perceptions, actions, and attitudes that result in a particular role as related to conflicting roles. Thus, identity theory has more of a sociological nature than social identity theory.

How people think of themselves involves self-concept and is accomplished through self-knowledge. The aforementioned constructs of identity and social identity theories contribute to the concept of self. However, certain aspects of the self play a more salient part in the possible conflict between sexual orientation self-label and sexual experiences. Examining the constructs pertinent to the maintenance of the self will facilitate an understanding of the direction and purpose of this study. The concepts of self-concept, self-consistency, self-affirmation, maintenance of the self and congruence have much in common. The constructs of the theorists who are the most renowned (Donahue et al., James, Steele, Hoyle et al, and Rogers) for each respective construct regarding the aforementioned aspects of self and congruence are included for review.

Self-identification Theories

Self Concept. Donahue et al. (1993) discussed the self-concept, or self-structure, as becoming differentiated. Differentiation is described as a type of specialization in the self-concept. If differentiation of the self is great and the complexity of the self is increased, this allows a person to adapt to different role requirements. However, if the differentiation is too disparate or conflicts with one's self-concept, then there is a lack of psychological integration. When disintegration occurs, psychological distress is frequently the result. College students with greater disparate self-concept differentiation had lower self-esteem and more depressive symptoms according to Donahue et al.

Self-consistency. Self-consistency is a concept that provides a person with a stable point of reference while interacting with a changing environment. A developed identity allows a person a sense of order, predictability, and control. Consistency allows a person

to know themselves and what to expect of themselves, which reassures the person and allows them to interact with their environment in a more adaptive manner. However, inconsistency causes confusion and uncertainty within the person to the point of maladaptive responses to environmental cues (James, 1958).

Self-affirmation. Self-affirmation theory (Steele, 1988) states that when a person acts inconsistently with their beliefs, it causes a threat to one's self-concept. The negative affect can be reduced or avoided by affirming one's integrity in another way, which is usually unrelated to the specific dilemma caused by the threat. The self-affirmation can neutralize the threat without addressing the original cause of discomfort. Threats to the integrity of the self-concept serve as a motivator to restore integrity by making behavior or thoughts more congruent with the core self-concept. This concept is very similar to Rogers' congruence theory and serves to clarify the manner in which one would "resolve" inconsistent beliefs compared to behaviors.

Maintenance of the Self. The concept of self involves thoughts, feelings, and motives that serve to define and direct a person (Hoyle, Kernis, Leary, & Baldwin, 1999). There is a reciprocal relationship between the self and the social environment. The self is responsive and stable, diverse and unified, conscious and unconscious, variable and fixed, and private and public. The self is maintained through the processes of self-assessment and self-improvement. Self-assessment involves seeking valid information about the self to assemble an accurate view of one's abilities and attributes. People are constantly striving to ascertain how others perceive them and the nature of their own strengths and weaknesses. Self-improvement is another mechanism by which one can

maintain the self. One of the goals of self-improvement is to gain rewards and avoid punishments. As they grow and change, they strive toward their “possible” self or what they would like to become. Self-improvement helps repair the self after changes have been made to accommodate another person for the purpose of gaining their approval and love (Hoyle, Kernis, Leary, & Baldwin, 1999). Self-improvement helps restore the balance that a person may have temporarily lost.

The identity process, eventual categorization, and adoption of roles within one’s chosen group are desirable for the maintenance of social support. The concept of self is an on-going process in which one is constantly comparing the self to the environment, including the group with whom one has aligned. When the self engages in a comparative process and there is a discrepancy between the self and an aspect of the environment that conflicts, a state known as incongruence can result. Reviewing the basic tenets of Rogers’ (1951) theory of congruence is necessary to understand the psychological underpinnings of anxiety and depression when there is a mismatch between one’s sexual orientation, sexual behavior, and/or preference.

Congruence

Carl Rogers’ (1951) theory regarding self-concept involves a person’s perception of what a person actually is (real self) versus what a person would like to be (ideal self). The ideal self is not reality bound, but a fantasy of what one should or wants to be according to a preconceived life-plan. As a result, the person focusing on the ideal self instead of the real self does not base their thoughts or feelings on any actual experience.

As a consequence, the person may feel like they are “going through the motions” rather than feeling free to experience life.

When there is a discrepancy between the real and ideal self, a psychological threat occurs. The incongruity can occur at a conscious or unconscious level. When a person is experiencing low levels of congruence, the person becomes vulnerable to anxiety and personality disorganization (Rogers, 1951). As the incongruent material slowly becomes conscious, the person employs defensive mechanisms. The defense mechanisms maintain the integrity of the self by either denying or perceptually distorting the incongruence. The perceptual distortion allows threatening material into consciousness but in an altered form that restructures it into something that is consistent with a person’s self-image (Rogers, 1951). Denial preserves the integrity of the self-structure by not allowing the threatening material into conscious awareness. Persons with moderate levels of incongruity experience psychological distress in the form of anxiety. Persons with high levels of incongruity experience a shattered self-concept due to the inability to employ any defense mechanisms. In the extreme form, these persons may become psychotic (Rogers, 1951).

The magnitude of incongruence determines the psychological level of maladjustment or psychopathology, according to Rogers. Brammer and Shostrom (1977) emphasized that a person’s awareness can affect their experiences to either enhance or decrease congruence levels. Being unaware of how one’s behavior or presentation matches their internal representation of the self can result in low self-esteem, guilt and anxiety. Rogers (1951) believed that a person needed to replace introjected value

systems with direct experiences and, by incorporating them, the person's self-structure becomes more genuine.

Incongruence, while called a "mismatch" in the identity theory literature, results when different types of standards lead to different emotional responses resulting in a self-verification failure. When one fails to meet the standards that others have imposed upon the individual, anxiety can result. When one fails to meet one's self-standards and expectations, then depression may be the resultant psychological state. The failure to meet either other's or one's own standards can facilitate the development of different identity standards such as public and private, individual and group, or higher and lower in the hierarchy of identity (Stryker & Burke, 2000).

While it is generally agreed that intrapsychic conflict can produce anxiety or other negative manifestations, there may be times when one would experience the discomfort if the external risk were too great for self-disclosure. This is especially pertinent for individuals who may publicly identify as being heterosexual but have exclusive homosexual contacts. Previous literature has been presented that assumes a biological causative agent for one's eventual sexual orientation. However, looking at the environmental experiences, specifically sexual experiences, will introduce new factors that may contribute to the eventual development of one's sexual orientation.

SEXUAL EXPERIENCES

When examining sexual orientation, the impact of early childhood sexual experiences is sometimes mistakenly hypothesized as a "causal" agent for the eventual expression of one's sexual orientation. Some theorists maintain that bisexual or

homosexual individuals develop their specific sexual orientation due to unwanted childhood sexual experiences. Other theorists surmise that bisexual or homosexual individuals have an accelerated sexual developmental pathway. Nevertheless, the bulk of research has provided for a large knowledge base regarding childhood heterosexual development but little knowledge regarding the pathways for homosexual or bisexual childhood development. Additionally, the numerous individual studies do not provide a comprehensive picture of early childhood experiences and adult outcomes regarding sexual orientation identity, behavior and preference.

Developmental Sexual Behavior Issues

Depending upon one's age, there are fairly specific and consistent patterns of sexual behavior through the age of puberty. From a heterosexual developmental stance, Johnson (1993) reported that genital exploration begins in infancy. From the ages of 3-6 years of age, children engage in impersonations of adults regarding sexual behaviors. This can include kissing, showing off one's genitals or touching each other's genitalia. However, Friedrich et al. (1991) indicated that there was an abrupt decrease in these overt sexual behaviors after the age of 6. He stated that, "Sexual behavior persisting into the elementary years is clearly not usual" (p. 462). Johnson and Feldmeth (1993) report that children who continue to engage in sexual behaviors may have been "sexualized" by exposure to adult nudity, sexual intercourse or media portraying mature sexual themes. For some of these children, the experiences have been a result of childhood sexual abuse. However, Krafft-Ebing (1935) proposed that homosexual individuals began their sexual activity early in life and with a greater degree of sexual intrusiveness as compared to

heterosexual individuals. In examining early sexual experiences, Rotheram-Borus et al. (1995) found that 90% of the males sampled between the ages of 14-19 years who were self-labeled as homosexual, were sexually active, while only 33% of the self-labeled heterosexual males reported sexual activity.

The results of Kinsey's study (Kinsey, Pomeroy & Martin, 1948) shocked the public in the USA. His research revealed that 45% of early-adolescent males (less than or equal to 15 years old) polled engaged in homosexual experiences while less than 25% of late-adolescent males (older than 15 years) engaged in homosexual activity, regardless of their sexual orientation self-label. Kinsey found that boys who recalled engaging in homosexual activities for the first time at an early age remained more homosexually active than boys who started the same type of sexual activity at a later age. Kinsey reported an overall homosexuality rate in adult males of 10%. Kinsey posited that sexual activity may be mediated more by early onset of adolescence than by what Freud described as the Oedipal complex.

Chng and Wong (1998) reported that many gay, lesbian and bisexual individuals reported an awareness of their sexual orientation as early as late childhood. Telljohann and Price (1993; as cited in Chng & Wong, 1998) reported that 1/3 of a sample of gay, lesbian, and bisexual participants knew their sexual orientation between 4 and 10 years of age. Reinish (1990, as cited in Chng & Wong) contended that early same-sex play did not correlate with adult sexual orientation. However, Van Wyk and Geist (1984) found a positive correlation between adult sexual preference and gender of partners during prepubescent and pubescent periods for sexual experiences that were pleasurable. The

correlation was greater in homosexual than heterosexual individuals. Bailey and Zucker (1995) reported that homosexual participants had significantly greater cross-sex typed behaviors than heterosexual participants. They cited research suggesting a link between cross-sex typed behaviors and higher levels of depression, and anxiety and lower self-esteem.

Unwanted Childhood Sexual Experiences

As several inferences have been made by researchers (Van Wyk & Geist, 1985; Bauserman & Davis, 1996; Gill & Tutty, 1997) regarding the influence of early sexual activity on the adult outcome of sexual orientation, briefly examining a portion of the child abuse literature will orient the reader to differing rates and implications of early unwanted sexual experiences. Additionally, citing some of the statistics regarding the frequency of childhood sexual abuse would assist in understanding some of the research regarding early sexual abuse and adult outcome of sexual orientation.

Prevalence rates for childhood sexual abuse in the USA are cited as 27% for women and 16% for men (Finkelhor et al., 1990). Vogeltanz et al. (1999) reported that the prevalence rate of childhood sexual abuse for women ranged from 15-32%. Friedrich et al. (1992) reported that sexually abused children engaged in more sexual behaviors than their same age peers. He hypothesized that sexual abuse provides acceleration to adult-like sexual activity with playmates. In a separate study, Friedrich et al. (1991) reported incidence rates of childhood sexual abuse between 20-25% for females and 10-15% for males. Unfortunately, adult sexual orientation was not noted in the reports from Vogeltanz et al., Finkelhor, or Friedrich et al. The bulk of sexual abuse

research has dealt with sexual orientation-specific populations (homosexual or bisexual individuals), which may have overestimated the prevalence rates of childhood sexual abuse overall. Additionally, a thorough review of the studies' methodology is called for to examine limitations of the generalizability of the findings. There are prevalence rates for the "general" populations but little research regarding the adult outcomes across all sexual orientations. Other possible problems with current child abuse research is that prevalence rates are quoted with some researchers including qualitative information regarding the intrusiveness of the experience but the prevalence and degree of intrusiveness are rarely, if ever, combined for ease with statistical analyses.

However, Miller, Johnson and Johnson (1991) examined the rate and degree of invasiveness of unwanted childhood sexual experiences. The severity of the abuse was simply rated as more or less severe without combining rate and severity for statistical analyses. They reported that 49% of the women and 38% of the men indicated that they had unwanted sexual experiences prior to age 16 years. Additionally, 19% of those reporting unwanted sexual experiences indicated that they were relatively severe. By using weighted (for severity) unwanted childhood experiences in this study, both quality and quantity can be assessed.

Sexual socialization appears to influence the sexual orientation outcome especially when mediated by childhood sexual abuse (Friedman & Downey, 1993; Hines & Green, 1991; Money, 1993; Paul, 1993). These researchers reported similar findings regarding childhood sexual abuse and adult outcome for sexual orientation. They reported gender differences regarding outcomes between men and women in relation to their

sexual orientation as adults and early unwanted sexual experiences. Briefly, their findings indicated that men who were sexually abused by men generally reported their adult sexual orientation as that of preferring men for sexual partners. It is theorized that classical conditioning, for men, played a large part in the adult outcome as a result of early stimulation and pleasure. However, for women, their outcome seemed to be the relational aspects of the early unwanted experience that mediated their adult sexual orientation. Women reported having a general distrust of men as a result of the early experience, whether they were sexually aroused or not. The violation of trust as a child seemed to result in preferring women for sexual partners as adults. Of course, the samples were varied and diverse. Therefore, the generalizability of these studies is somewhat limited. Conversely, Bell and Weinberg (1981) found no association between sexual orientation and sexual abuse.

It seems that the explanations for the development of one's sexual orientation have been polarized into either nature or nurture based phenomena. However, there is clearly a relationship between the two. Bandura's (1978) reciprocal determinism concept is an excellent example of the interplay between the individual and the influence the environment has on the individual's self-regulatory processes. Previously presented research has suggested that, while there may be some biological basis for one's sexual orientation, there are environmental factors that also affect the outcome. Early unwanted childhood sexual experiences typically have deleterious effects on children but not always (Rind, et al., 1998). Not all children who have been abused adopt a homosexual or

bisexual identity. Conversely, not all people who had less stressful childhood experiences adopt a heterosexual identity.

Sexual Experiences and Attitudes of Students and Adults in America

Alfred Kinsey accomplished early comprehensive research regarding the sexual activity of American men in the 1940s. His research was a major undertaking for his time and resulted in an increase in public awareness regarding the sexual activity of men in the USA during that time period. His research methodology included the use of interview data in which an ordinal number was assigned by the interviewer based upon the type and frequency of sexual activity reported by the male participants for the purposes of placing them into sexual orientation categories. Additionally, he examined current and lifetime sexual practices and desires, with a variety of ages as reference points for different developmental stages (Kinsey, Pomeroy, & Martin, 1948).

What types of sexual research have been conducted with adults since Kinsey's groundbreaking surveys? Researchers tried to replicate some of his findings, especially with regard to the frequency within Kinsey's sample of men who had homosexual experiences. Manosevitz (1970) discovered that, in a sample of men, 80% of self-labeled homosexuals reported having sexual experiences with both males and females. Sexual behavior with women for the male homosexuals was limited to oral-genital contact, mutual masturbation, kissing, and petting. Conventional wisdom indicates that heterosexual individuals only participate in opposite-sex sexual activities. Hunt (1974) indicated that approximately 25% of males and 15% of females experience at least one

homosexual encounter. He noted that a significant number of individuals reported homoerotic experiences without any physical contact.

Jones, Shainberg, and Byer (1977) reported a great increase in bisexuality since Kinsey's original report. They reported that during the middle of the 1970s, 4-10 percent of adults self-labeled as exclusively or almost exclusively homosexual. They also noted that approximately 25-40% of male and female prepubescent or pubescent individuals have a "transient" period of homosexual activity before self-identifying with an enduring, adult sexual orientation.

Ellis and Ames (1987) discuss the concept that having occasional homosexual experiences, especially in early adolescence, does not make one a homosexual. They stress that sexual orientation should be based on consistent, distinct preferences after puberty in the presence of clear alternatives and that isolated incidents may or may not reflect one's sexual orientation. McConaghy and Armstrong (1983) reported that medical students who identified themselves as having a homosexual component in their self-reported sexual identity answered questions about their sexual identity with greater consistency than those who had no awareness of homosexual feelings.

After examining the types of adult sexual activity with regard to their self-labeled sexual orientation, looking to the sexual activity of today's youth may provide researchers with the means for better sexual education, provide a more open environment for the sexual orientation self-labeling process to occur and reduce risky sexual behaviors. Participants in the data collection by the Massachusetts Department of Education's 1997 Youth Risk Behavior Survey (YRBS) are approximately the same age

today as the participants in this present study, thus serving as a type of cohort group. The results of the YRBS indicated that the proportion of students having sexual intercourse in the previous three months was highest among African American students (47%), followed by Latino (41%), “Other” (34%), White (29%), and Asian (17%). Sexual activity was reported solely on the basis of ethnicity. The total number of students who were engaging in sexual intercourse during their lifetimes had decreased in 1997 (45%) compared to 1993 (49%). Two percent of the students polled identified themselves as being gay, lesbian, or bisexual. An additional two percent reported having same-sex contact. The percentage of gay, lesbian, and bisexual students in the Massachusetts YRBS is somewhat lower than the estimated rates of gay, lesbian, and bisexual people in the USA.

Van Wyk and Geist (1985) surveyed participants in gay bars who had predominantly homosexual preferences. Male participants reported having a strong relationship between overt behavior and subjective arousal to homosexual stimuli. For female participants, the strength of the relationship between the two was much less. Additionally, male participants who engaged in mutual masturbation with another male or observed a man masturbating were more likely to prefer men for sexual partners as an adult than male participants who learned about masturbation in other ways. Male participants indicated that if their first orgasm was with another boy or man, their adult preference would be for men. Women in the study engaged in more heterosexual activity and demonstrated weaker relationships between early sexual experiences and sexual orientation outcome as adult women. However, if the female participants were pressured

or coerced into sexual activity with a man, they reported becoming sexually aroused, but preferred women as sexual partners as adults due to the loss of trust toward men. Because the data was collected from known gay bars, the generalizability of the research may be limited.

Additional literature revealed no consistent trend in the agreement of self-label with either behavior or desire. However, Lever et al. (1992) found that two-thirds of self-labeled heterosexual men polled had sex with other men. The adult males chose to label themselves as heterosexual rather than bisexual, which would have been a more accurate behavioral label. Doll et al. (1992) found that 56% of self-labeled heterosexual men had attraction to other men and sexual contact. While Doll's and Lever's research findings are helpful in conceptualizing possible inconsistencies between sexual behavior and preference for the men with regard to the current project, research on women and congruence between their self-label, sexual behavior and preference is virtually nonexistent.

It appears that adults report some inconsistency regarding their sexual orientation, sexual behavior, and preference. How do youth deal with the complexities of self-labeled sexual orientation, sexual identity, behavior and preference during an already tumultuous developmental stage of puberty? Rotheram-Borus and Fernandez (1995) noted that nonheterosexual youth tend to engage in risky sexual behaviors when they are in the early stages of "coming out." Additionally, the youth demonstrate some homophobia and low self-esteem. They found a relationship between stressors of being a gay or bisexual youth

and having more problematic behaviors such as substance abuse and increased sexual activity, but the distribution for the sample was not typical.

For bisexual or homosexual ethnic minority males, resolution of sexual identity appears to precede same-sex sexual activity (Dubé & Savin-Williams, 1999). Before the resolution of one's sexual identity, most young men report sexual activity and romantic interests in young women. If the youths resolve their sexual identity later in life, sexual activity with a person of the opposite sex usually precedes their public self-labeled sexual orientation. Heterosexual activity may become more frequent and play a larger role in the context of their development due to societal constraints. Alternatively, a homosexual youth can delay the labeling process by remaining celibate. However, the resolution of one's sexual identity can facilitate the self-labeling process and decreases anxiety regarding the labeling process. Following the self-labeling process, homosexual activity is more likely to occur. In regard to specific behavior pattern differences among Asian American, African American, Hispanic, and Caucasian young men, Asian American youths were least likely to report romantic or sexual relationships with women. However, in the other three ethnic groups, having romantic or sexual relationships with young women is considered normative developmental behavior (Dubé & Savin-Williams, 1999).

Depending upon the sampled geographical area, overall estimates of self-labeled sexual orientation are 5-15% for homosexual male adults and 1-6 % for homosexual female adults. Data on bisexuality is rarely cited. However, in Kinsey's study, 3-4% of the men surveyed indicated that they were bisexual (Hunt, 1974). Comparing data for

sexual activity is difficult at best due to the unstandardized questions. Some researchers use age ranges when asking about sexual activity. Others use lifetime experiences and this makes it difficult to determine the actual prevalence of people in different sexual orientation categories.

Not only is it difficult to ascertain the levels and types of sexual activity with adults in the USA, but the incidence rates for different sexual orientations are also conflicting and confusing to the average reader. Add the problems with labeling and discrepancies between sexual behavior, preference and self-labeled sexual orientation and it is no wonder that this body of literature is frequently overwhelming and confusing. What is needed in this area is a consensus regarding some type of standardization for terminology and assessment purposes.

Sexual Experiences and Attitudes of Asian-American Students

One of the problems encountered when comparing samples from the United States with samples from Asia is the level of disclosure that is appropriate for each culture. Chen (1995) found that Americans have higher levels of disclosure than Chinese people. However, the depth of self-disclosure is also different. Chen discovered that when Chinese participants self-disclosed, they did it in greater depth than American participants. However, the total amount of self-disclosure was greater with the American participants. This finding has serious implications for multicultural comparisons between the United States and other Asian countries. Specifically, how will levels of disclosure affect the present study? In planning for the possibility of low levels of self-disclosure from the Taiwan sample, examining agreement between several similar areas of interest

(private self-label sexual orientation and public knowledge of one's self-label) may serve as an indicator of openness regarding disclosure of personal information.

Several researchers have reported varying rates and types of sexual activity with a variety of Asian samples including Vietnamese men, Asian American university students, and Taiwanese women. Although the samples are diverse regarding the countries of origin and levels of acculturation to the USA sexual norms, examining these studies will provide the backdrop for the current project regarding frequency, type and age of first sexual activity. Additionally, implications of revealing one's sexual orientation, if different from the "heterosexual default," are briefly examined.

Carrier, Nguyen, and Su (1992) researched sexual behaviors among gay Vietnamese men. The men interviewed reported that they experienced extreme levels homophobia in Vietnam before coming to the USA. They identified the stereotype of a feminine male as being commonly identified as a homosexual. In fact, one man refused to believe another was gay, as he did not "act" feminine. Additionally, self-disclosure, especially in their country of origin, was restricted due to fears of being socially sanctioned. Regarding specific sexual practices, anal intercourse was rarely practiced among themselves unless the Vietnamese men had sex with other ethnicities such as Caucasian, African American or Hispanic gay men.

Wang and Lin (1994) studied the sexual activity of women in Taiwan in 1991 who were between the ages of 16-92 years of age ($n = 17,047$) and their marital status consisted of unmarried, married, widowed, divorced and separated women. They found that the mean number of sexual intercourse experiences was lower than similar studies in

other countries for sexually active women. In the unmarried subsample, approximately 10% of the women reported being celibate during the previous month. Unfortunately, the researchers did not query how many unmarried women reported being celibate. However, the researchers concluded that there has been an increase in social acceptance of premarital sexual intercourse for young adults in Taiwan.

One may wonder if Asian American students may have increased levels of sexual activity due to acculturation to the USA sexual norms. Sue (1982) reported that Asian American university students did not differ from other university students in the sample with regard to sexual experience or sexual repression. However, a limitation of the study was that the sample was drawn from a pool of students currently enrolled in human sexuality courses already in progress. Also, the only ethnic backgrounds of the participants delineated by the researcher were the Asian American students.

Cochran, Mays, and Leung (1991) examined sexual activity in Asian-American students between the ages of 18-25 years. They found that the Asian-American students were significantly less sexually active than the Caucasian, African-American and Hispanic students in the study. The authors surmise that there is greater sexual conservatism with regard to the initiation of sexual activity. For Asian-American students who were sexually active, there were no significant differences between the ethnic groups.

Dubé and Savin-Williams (1999) reported that Asian American males engaged in their first sexual activity almost three years later than the rest of the participants who self-identified as African American, Hispanic, and Caucasian. Cochran et al. (1991) reported

the same delays in the heterosexual Asian American youth compared to African American, Hispanic, and Caucasian youth in the study. Cultural constraints play a large part in the delay of sexual activity. Sexual activity is not an acceptable topic of everyday discussion and the implicit rule is that sexual activity be delayed until after marriage. However, Asian American males may feel pressure to have heterosexual sexual experiences for the purposes of procreation and carrying on one's line of descent. Another possible reason for the delay in sexual activity may be to delay the assignment of a label as being "gay." Abstinence prevents anyone from jumping to conclusions regarding one's sexual orientation (Dubé & Savin-Williams, 1999).

A review of some of the literature revealed differences in sexual behaviors between Caucasian adults in the USA, Asian-American adults in the USA and women in Taiwan. One explanation is the different societal norms for engaging in sexual behavior, as well as being open about one's sexuality and/or sexual orientation. Each culture has strikingly different philosophies regarding social interaction. The USA is an individualist society where independence and nonconformity are valued. Most Asian countries subscribe to a collectivist view of society that values interdependence, group goals, and behaviors that reflects social norms and roles. With this in mind, the comparison of sexual behaviors, preferences and self-labeled sexual orientation between two countries, such as Taiwan and the USA, will be challenging as there is little basis for a comparison.

THE PRESENT STUDY

This study addressed several major questions within two cultures, USA and Taiwan. In Studies 1 and 2, two main questions were examined for each culture

separately. The first major question looked at differences between sexual orientation groups regarding agreement between sexual orientation identity self-label, sexual behavior and preference. The second major question addressed the relationship between sexual orientation self-label and recall of early voluntary and unwanted sexual experiences. Additional questions were addressed in Study 2 for USA participants only regarding the relationship between congruence and psychological distress. Finally, in Study 3, university students in Taiwan and the USA were compared with regard to differences between self-label groups in incongruence between sexual orientation identity and preference.

First, in each of the separate studies with students from Taiwan and the USA, how congruent is sexual activity compared to sexual orientation identity? How congruent is sexual preference compared to sexual orientation identity? Finally, will there be differences among self-labeled heterosexuals, bisexuals, and homosexuals regarding congruence between behavior and preference? If a woman labels herself as a heterosexual, but has sexual activity with both men and women and prefers to have sexual relationships exclusively with women, how might this conflict affect her?

In examining congruence regarding sexual orientation self-label, behavior, preference, and sexual orientation identity, recall that Rogers (1951) defined incongruence as a result of two opposing self-concepts resulting in psychological distress. In identity theory (Stryker & Burke, 2000), incongruence results in anxiety if one fails to meet others' expectations, while depression results as a result of failure to live up to one's own expectations. Incongruence is generally believed to have deleterious effects on a

person, which can manifest as a physiological problem if there is not resolution between the two opposite forces. To reduce the conflict, one of the two opposing forces needs to change.

For example, if a student wants to be an artist but is pressured by parents to pursue medicine, the student will experience discomfort as a result of the conflict. Negotiating a compromise between the two may result in the student pursuing graphic arts for medical texts, thus reducing the original conflict by maintaining good family relationships and allowing for artistic expression as a career choice. A similar study by Van Wyk and Geist (1984) examined the congruence between one's self-label of sexual orientation and actual and/or preferred behaviors. They reported that boys in their study have a history of bisexual contacts but do not identify themselves as being "bisexual." Van Wyk and Geist indicated that there is an exploratory period that all children progress through but it is the object of exploration that tended to determine adult preference. The present study goes beyond their research to ascertain current agreement between one's self-labeled sexual orientation and sexual behavior and/or preferences.

Labeling theory suggests that when one does not act in a manner appropriate for the self-label, psychological distress may result. However, some types of incongruence can be protective if revealing one's "real" self elicits negative consequences such as being stigmatized, harassed or killed because the dominant group felt threatened. Therefore, a person will eventually adapt to the internal conflict as the alternative (revealing one's true sexual orientation) may hold greater risk for the individual.

Second, are there differences among heterosexuals, bisexuals, and homosexuals regarding age of first voluntary experience with oral, vaginal, or anal sexual intercourse? Another aspect of Studies 1 and 2 examined differences between heterosexuals, homosexuals, and bisexuals, as identified by self-label, regarding the level of intrusiveness of any unwanted sexual experiences prior to age 13. There is a bulk of literature for normative childhood sexual behaviors, as Friedrich et al. (1991) and Johnson and Feldmeth (1993) contend that sexual behaviors for all children are basically the same regardless of adult sexual orientation. When children are under the age of six years, there is a period of exploration and discovery. However, after six years, most sexual behaviors cease, which corresponds with Freud's psychosexual stage of latency. Latency is a period of displacing sexual instincts into the appropriate area of scholastic or athletic endeavors. However, if the child has been sexually traumatized or exposed to explicit sexual material, such as magazines or videos, he or she will engage in more frequent and intense sexual activity than other children within the same age cohort. To support this supposition, some researchers (Kinsey, Pomeroy, and Martin, 1948; Manosevitz, 1970; Rotheram-Borus et al., 1995) suggested an accelerated sexual development for homosexual people. However, one of the problems encountered when reviewing the literature in this area is the lack of connection between frequency and severity of the experiences. Miller, Johnson and Johnson (1991) qualitatively evaluated the severity of the experience using the designations of more or less severe. While the present study did not examine frequency as most studies do, the level of intrusiveness

was examined as it was proposed that the severity of the experience contributes more to the traumatic nature and subsequent psychological distress.

Finally, in Study 3, agreement between sexual orientation, behavior and preference was examined for any cultural differences between students in Taiwan and the USA. With regard to sexual behavior, Asian-American students are typically less sexually active than Caucasian, African-American and Hispanic students (Cochran, Mays, and Leung, 1991). Additionally, Dubé and Savin-Williams (1999) reported that average Asian American males delayed sexual activity for three years later than African American, Hispanic, and Caucasian young men in their study. They theorize that delaying sexual behavior delays the labeling process and enables the Asian American youth to stay connect to their families for emotional and financial support. While the Asian students in the present study were all from Taiwan (and not Asian American), it was expected that the sample would be more conservative regarding self-labeling and sexual behavior but not preference, as Bailey (1995) contended that preference is innate and behavior is socially regulated.

In previous studies, methods used to measure the construct of sexual orientation were varied and dependent upon the researchers' definition of sexual orientation. Some assess sexual orientation as a combination of behavioral, internal experiences (or preferences), and sexual orientation identity (Sell, 1997). Assessment of sexual orientation in the present study will be accomplished by using self-reported sexual orientation self-label, two adaptations of the Kinsey Sexual Orientation Scale to measure

actual and preferred sexual behavior, and the Sell Scale of Sexual Orientation Identity that together capture all three aspects of sexual orientation.

Hypotheses

Three studies were conducted. The first four hypotheses were tested in Study 1 and 2. Additional questions were combined with the original questionnaire and used in Study 2 to generate two additional hypotheses. The final hypotheses combined the USA and Taiwan samples for Study 3 to examine cultural differences between USA and Taiwan university students.

The hypotheses generated in Study 1 (Hypotheses 1-4) and Study 2 (Hypotheses 5-8) focused on self-labeled sexual orientation group differences in congruence between sexual orientation identity, sexual behavior, and preference; and in unwanted early sexual experiences. Additional hypotheses generated for Study 2 only (Hypotheses 9 and 10) focused on earliest age of various sexual experiences and on associations between psychological distress and congruence. The final hypothesis, Hypotheses 11, compared Taiwan and the USA participants regarding differences between countries in congruence between sexual preference and self-labeled sexual orientation identity.

Hypotheses About Sexual Orientation Self-Label Differences in Congruence of Sexual Orientation Identity with Behavior and/or Preference: Studies 1 and 2.

Hypotheses 1 and 5. Congruence scores for agreement between sexual orientation identity and sexual behavior will be higher for bisexual participants than for heterosexual or homosexual participants.

Hypotheses 2 and 6. Congruence scores for agreement between sexual orientation identity and sexual preference will be higher for bisexual participants than for heterosexual or homosexual participants.

Hypotheses 3 and 7. Congruence scores between sexual behavior and sexual preference will be higher for bisexual participants than for heterosexual or homosexual participants.

Hypotheses Regarding Historical Experiences (Studies 1 and 2).

Hypotheses 4 and 8. Heterosexual participants will have lower numbers of unwanted sexual activities prior to age 13 years than will bisexual or homosexual participants.

Hypothesis 9. Bisexual and homosexual participants from the USA will report having their first voluntary experience with oral, vaginal, and/or anal sexual intercourse at younger ages than will heterosexual participants.

An Hypothesis Regarding Incongruence and Psychological Distress (Study 2).

Hypothesis 10. USA participants with greater congruence between behavior and preference will report less psychological distress as compared to participants with less congruence.

A Cross-Cultural Hypothesis (Study 3).

Hypothesis 11. The USA university students will demonstrate greater congruence between sexual orientation identity and sexual preference than will the Taiwan university students.

Tests of Hypotheses 1-4 can be found in Chapter 2, tests of Hypotheses 5-10 can be found in Chapter 3, and tests of Hypothesis 11 can be found in Chapter 4.

CHAPTER 2. STUDY 1

METHOD

Participants

Participants in Study One included 446 college students in Taiwan. The colleges and universities sampled in Taiwan were: (a) Chinese Culture University in Taipei, (b) Hung-Kuang College of Nursing & Medical Technology in Tai-Chung, (c) Wen Tzao Ursuline College of Modern Languages in Kao Hsiung, and (d) MacKay Memorial Nursing College in Taipei, which is affiliated with the Presbyterian Church in Taiwan. These data had been collected previously for another project, and permission from the primary investigator, Ying-Shi Chang, Ph.D., was given to the current researcher to use the data in this research project.

For the present analyses, a subsample was created due to having markedly unequal cell sizes for the major independent variables when the whole sample was examined. To reduce this disproportion, sexual orientation self-labeled categories were collapsed into two main categories, heterosexual and nonheterosexual, due to low numbers of participants in the more specific bisexual and homosexual categories. Then, a matched sample strategy was used for the present analyses due to the disproportion of the distributions of sexual orientation and gender. The following criteria were used for matching and creating the subsample: 1) self-labeled sexual orientation, 2) gender, and 3) age range (within 3 years). Matching was accomplished by using a ratio of 1 nonheterosexual participant to 3 heterosexual participants within gender from the subsample and the whole sample, respectively. For example, for every nonheterosexual

female participant, three heterosexual female participants were chosen who were within a 3-year age range. Thus, the 22 nonheterosexual women were matched with 66 heterosexual women and the 4 nonheterosexual men matched to 12 heterosexual men.

Demographic data is displayed in Table 1. In the original data set, participants ($n = 446$) included: 314 heterosexual women, 101 heterosexual men, 16 bisexual women, 1 bisexual man, 6 lesbian women and 3 gay men. Data for the matched set ($n = 104$) included: 66 heterosexual women, 12 heterosexual men, 16 bisexual women, 1 bisexual man, 6 lesbian women, 3 gay men and 5 who did not identify either their gender or sexual orientation. As a result of matching and collapsing the categories of sexual orientation from 3 to 2, the resulting subsample differed from the total sample regarding the numbers of male and female participants and their respective sexual orientations. The unmatched sample had 23.8% male participants and 75.6% female participants (0.6% did not denote their gender), with the matched sample having 15.4% and 84.6%, male and female participants, respectively. The average age for both men and women was 20.4 years. Another interesting aspect of this sample, both unmatched and matched, was that all the participants who chose to answer the question regarding marital status said they were single.

Measures

The 90-item questionnaire included demographic information, sexual orientation (self-label and designations on the Sell Scale of Sexual Orientation and both Kinsey Sexual Orientation Scale Scales for Actual and Preferred Sexual Behavior), and sexual experiences (including childhood sexual abuse), questions from Mayne's (as cited in Sell,

1997) questionnaire regarding earliest knowledge of sexual orientation and its expression, Sell Scale of Sexual Orientation, Human Sexuality Questionnaire and Early Sexual Experiences Checklist (Appendix A). Please note that some variables presented in the questionnaire were not used in this study.

Background Questions. The research packet contained questions about various aspects of the participant's background and current sexual behaviors and preferences, which included: (a) age, (b) gender, (c) marital status, (d) ethnicity, (e) educational level, (f) employment status, (g) sexual orientation (and how it is labeled, expressed and desired), (h) various sexual behaviors, (i) early childhood sexual experiences, and (k) parents' marital status, occupations and educational levels to determine socioeconomic levels.

Kinsey Sexual Orientation Scale. Adaptations of the Kinsey Sexual Orientation Scale (Kinsey, Pomeroy, & Martin, 1948), the Kinsey Sexual Orientation Scale of Actual and Preferred Sexual Behavior, were used to assess sexual behavior. This was accomplished to allow for finer discriminations between one's sexual behavior and one's preference of sexual partner. Both Kinsey Sexual Orientation Scales are single-item self-report instruments that consist of an 8-point Likert-type sexual orientation continuum, where 0 = exclusive heterosexuality, 6 = exclusively homosexuality, and 7 = no actual or preferred sexual activity (Bailey & Zucker, 1995). The latter coding designation was used to denote an absence of sexual activity as opposed to traditional coding strategies of using "9" for missing data. The absence of sexual activity does not indicate that data are missing. On the contrary, it does indicate the participants' level of activity. Celibate

participants were coded as “missing” data on analyses dealing with sexual behavior, but not preference.

Sell Scale of Sexual Orientation. The Sell Scale of Sexual Orientation (SSSO; Sell, 1997) assesses an individual’s biological sex, sexual interests, sexual contacts, and sexual orientation identity. The SSSO is a self-report instrument that consists of an 8-point Likert-type sexual orientation continuum. Values for the SSSO ranged from “a” to “h”, where “h” = exclusive heterosexuality, “b” = exclusive homosexuality, and “a” = no sexual activity (denoting an absence of activity and not a missing answer). Designations from “c” to “g” indicated gradients from “predominantly homosexual” to “predominantly heterosexual.”

A modification of the SSSO was used. The modification included using numerical designations (instead of alphabetic) for sexual orientation identity to match the numerical Kinsey designations. For example, “I consider myself exclusively heterosexual” would have a “0” designation as it would on Kinsey Sexual Orientation Scales instead of the original designation of “b.” Additionally, questions were re-ordered to start with the Kinsey equivalent score of 0-6, with 7 denoting no sexual activity and 8 allowing participants to use their own sexual orientation identity label. The final question was added on the sexual orientation identity questions: “I identify with a different sexual orientation” with space provided for participants to elaborate on their taxonomic classification for sexual orientation/identity. Participants who chose this response were coded as “missing” data as were celibate participants when analyses examined sexual behavior. Additional questions assessed both sexual interests and sexual contacts with

males or females, including the intensity and number of desired or actual contacts.

Early Sexual Experiences Checklist. An adapted version (with the authors' permission) of the self-report instrument, Early Sexual Experiences Checklist (ESEC; Miller, Johnson, & Johnson, 1991), was used to assess childhood sexual abuse by asking about varying degrees of unwanted sexual contact. The original version was adapted to reflect a cutoff age of 13 years instead of the original 16-year cutoff, as research has shown that a majority of the youth in the United States has participated in some type of voluntary sexual activity before the age of 16 years (Massachusetts Department of Education, 1998). An additional question concerned the gender of the "abuser." The adapted version will be denoted as ESEC-A to reflect changes that were made. Unwanted early sexual experiences ranged from having someone expose their genitals in front of the participant to engaging in anal sexual intercourse with the participant. The authors reported (via email communication) that the reliability was calculated using Cohen's kappa and the average one-month test-retest reliability was .92.

The authors originally divided the experiences listed into "less severe" and "more severe" categories. For the purpose of this study, weights were assigned to questions based on the increasing levels of intensity of sexual contact (refer to Table 2) to allow for more gradients of possible impact. For example, having someone expose his or her genitals to another person was weighted less than having someone perform anal intercourse on an unwilling participant. Multiplying each experience that the participant endorsed by the weight assigned to that specific experience and summing all scores together resulted in a weighted summative score. The total of the weighted scores ranged

from 0-29 for number of experiences that occurred before the participant was 13 years of age.

Congruence Measures. Three congruence scores were derived to distinguish congruence between sexual orientation identity, sexual interest, and sexual preference. The Interest Congruence Score (ICS) was derived as a mathematical difference score between a sexual orientation identity measure (“I consider myself:” Appendix A, Q#50) and sexual interest, as measured using a question dealing with sexual interests. In the Taiwan study, sexual interest was substituted for behavior, as the majority of participants were celibate. To achieve the ICS, the sexual interest score (“During the past year, my sexual interests have been:” Appendix A, Q#36) was subtracted from the sexual orientation identity score. To avoid negative resultant scores, the absolute difference score was used. By subtracting the absolute score from a constant value of 10, the resultant score allowed for greater ease with regard to interpretation. For example, the higher the score, the higher the levels of congruence, with a “perfect” congruence score equaling 10.

The Preference Congruence Score (PCS) was calculated as a mathematical difference score between question #50 and the Kinsey Sexual Orientation Scale Preferred score. The Kinsey Sexual Orientation Scale Preferred score was subtracted from the sexual orientation identity score (Q#50). Again, to avoid negative resultant scores, the absolute value was subtracted from 10 as in the derivation of the ICS. The higher the PCS, the higher the level of agreement was indicated between one’s sexual orientation identity and sexual preference.

The Interest/Preference Congruence Score (IPCS) was a difference score between one's sexual interest (Q#36) and sexual preference (Kinsey Sexual Orientation Scale Preferred score). Subtracting the absolute difference score from 10 helped with meaningful interpretations of scores.

Procedure

Professors offered the opportunity for college students to participate in the research project for extra credit. All participants were informed of the purpose, risks, and benefits of the study. Consent to participate was indicated by completing a single 90-item questionnaire packet. A graduate student in a doctoral-level psychology program who is fluent in Mandarin Chinese performed the translation of the original questionnaire from English to Mandarin Chinese (Appendix B). Back-translations were performed by another graduate student and were judged to be of equivalent content and intent (refer to Appendix C for the back-translated protocol). The original titles of the individual protocols were not used so as to minimize any bias due to demand characteristics of the individual protocol names. Immediately before participation and during debriefing, participants were informed of counseling services available, at which time the participants were provided with the researcher's website address where they can access the results and implications of the study by August 1, 2002.

RESULTS

Descriptive Analyses

Before testing the hypotheses, it was first necessary to determine whether the sample was typical or atypical. Descriptive statistics were examined to determine the

normalcy of distributions, skewness and presence of outliers for all variables used in hypothesis testing. It was noted that some of the sample's scores were not normally distributed, namely for gender, self-labeled sexual orientation, and early, unwanted sexual experiences. For example, for the self-labeled sexual orientation variable, the majority of the participants viewed themselves as being heterosexual. Few labeled themselves as bisexual, and the homosexual self-label was rarely endorsed. For this reason, to reduce violations of statistical normalcy, sexual orientation categories were collapsed from three (heterosexual, bisexual, and homosexual) into two categories (heterosexual and nonheterosexual) and a matching process was utilized due to the disproportion of the distributions of sexual orientation and gender, as described in the *Participants* section. Additionally, when analyses used either gender or early, unwanted sexual experiences, gender moderator comparisons were performed to control for the skewness of the sample.

Participants' ages ranged from 19-31 with an average age of 20.4 years. With respect to gender, 85% were women ($n = 88$) and 15% were men ($n = 16$). The majority of the subsample was originally from Taiwan ($n = 100$) while the remainder of participants were from another Asian country ($n = 4$). Seventy-five percent of the participants self-identified as "heterosexual" ($n = 78$) while 25% endorsed either "homosexual" or bisexual" as their self-labeled sexual orientation ($n = 26$).

Correlation matrices and t-tests were used to identify and analyze relationships among the demographic, sexual orientation self-label, sexual orientation identity, behavior, preference, and unwanted childhood sexual experience variables, following the

model of exploratory data analyses (EDA; Tukey, 1977). EDA was used to determine the necessity of using composite scores for variables that tap into the same constructs (i.e. sexual orientation). There were no significant relationships between age of participant and other demographic variables. However, there was a significant gender difference for early, unwanted sexual experiences, with male participants reporting more of these ($r_{pb} = .21, p = .05$).

Correlations among measurements of sexual orientation were performed and revealed somewhat variable relationships ($r = .43-.69$; refer to Table 3). However, when the correlation for behavior was omitted due to the low rate of sexual activity in this subsample, the resulting correlations ranged from 0.54 to 0.69. Therefore, the use of composite scores was unnecessary. Self-labeled sexual orientation category was used as the independent variable in all analyses, with other sexual orientation or sexual orientation identity questions (Kinsey or Sell designations) used as dependent variables or in the derivation of dependent variables (such as the Preference Congruence Score). In this sample, there was a high correlation between self-labeled sexual orientation and both preference and interest but not behaviors due to having nearly all of the participants describe their behavior as “celibate.” Table 4 contains variables from the protocol and derived indices for early, unwanted sexual experiences, ICS, PCS, and IPCS.

For the purposes of hypothesis testing and all other analyses listed above, the number of sexual orientation categories was collapsed due to insufficient numbers of participants in each category. Therefore the hypotheses were adjusted to reflect comparison of two sexual orientation categories and not three as originally planned.

Thus, t-tests were performed instead of the originally planned ANOVA as the categories, bisexual and homosexual, were subsumed under the category of nonheterosexual.

Additionally, due to the overwhelming numbers of participants from the Taiwan sample indicating that they were celibate, the Hypothesis 1 substituted sexual interest for sexual behavior.

Hypothesis-Testing Analyses

The first three hypotheses examined differences between heterosexual and nonheterosexual participants regarding congruence between sexual orientation identity, sexual interest, and preferences using three independent-samples t-tests. These were between-subjects hypotheses to determine if there are different degrees of congruence between heterosexual and nonheterosexual participants.

Hypothesis 1: Heterosexual participants will report having sexual interests that are more congruent with sexual orientation identity than are those of nonheterosexual participants. An independent-samples t-test was performed and was not statistically significant, $t(96) = -0.56, p = .58$. Hypothesis 1 was not supported.

Hypothesis 2: Nonheterosexual participants will report sexual preferences that are more congruent with sexual orientation identity than are the preferences of heterosexual participants. An independent-samples t-test was performed and statistically significant differences were noted, $t(96) = 2.42, p = .02$. However, it was heterosexual participants who were more congruent ($M = 9.79$) than nonheterosexual participants ($M = 8.88$). Thus, Hypothesis 2 was significantly disconfirmed as heterosexual participants had greater congruence between sexual orientation identity and preference.

Hypothesis 3: Nonheterosexual individuals will have higher levels of congruence than will heterosexual individuals regarding agreement between sexual interests and sexual preference. Using the Interest/Preference Congruence Score (IPCS) as the dependent variable, an independent-samples t-test did not reveal statistically significant differences between heterosexual and nonheterosexual participants, $t(102) = -.32, p = .75$. Heterosexual participants' IPCS scores ($M = 9.09$) were about the same as nonheterosexual participants' IPCS scores ($M = 9.23$). Hypothesis 3 was not supported.

The final hypothesis tested dealt with differences regarding self-label sexual orientation and early, unwanted childhood sexual experiences (prior to age 13 years).

Hypothesis 4: Nonheterosexual individuals will have significantly higher numbers of unwanted sexual experiences prior to age 13 than will heterosexual individuals. An independent-samples t-test revealed no statistically significant differences between heterosexual participants ($M = 1.48$) and nonheterosexual participants ($M = 3.04$) regarding number and intensity of unwanted sexual experiences prior to the age of 13 years, $t(29) = -1.14, p = .26$; therefore, Hypothesis 4 was not supported.

Exploratory Analyses

Following the hypothesis testing, it appeared that there might be significant gender differences regarding the relationship between sexual orientation self-label and unwanted childhood sexual experiences. This speculation was based on the initial correlations performed to examine possible relationships between demographic and predictor variables. Gender was the only demographic variable that demonstrated a significant relationship with the dependent variable of weighted unwanted childhood

sexual experiences. Both heterosexual ($M = 3.92$, $n = 12$) and nonheterosexual ($M = 4.50$, $n = 4$) men reported greater levels of early sexual impact than heterosexual ($M = 1.03$, $n = 66$) or nonheterosexual ($M = 2.75$, $n = 22$) women. However, due to the small sample cell size for male participants, statistical comparisons could not be made.

After Hypothesis 1 was disconfirmed regarding the relationship between sexual orientation identity self-label and sexual preference, a question was raised regarding possible differences in a participant's "private" and "public" sexual orientation self-label. The protocol contained questions (Q# 17-24) regarding the different categories of people who "knew" about a participant's sexual orientation. Possible scores ranged from 0 to 16, with a higher score indicating more public awareness of one's sexual orientation. After summing the number of categories of people who were aware of the participant's sexual orientation, an independent t-test was performed and revealed that heterosexual participants ($M = 11.13$) were significantly more "public" regarding their sexual orientation than nonheterosexual participants ($M = 7.50$), $t(102) = 4.03$, $p < .001$. There are stages involved in forming a homosexual or bisexual identity that include a process of "coming out." During the identity formation, it is expected that one's private and public self-label regarding sexual orientation will be inconsistent until the final stages of identity formation are completed (Cass, 1979; Dubé & Savin-Williams, 1999; Cochran et al., 1991).

Another question was raised regarding the delay of sexual activity as a means of delaying the labeling process. Dubé and Savin-Williams (1999) have suggested that delaying sexual activity is one way to delay the public labeling process, especially among

minority youth. A Chi-square analysis was performed to examine differences between heterosexual and nonheterosexual participants regarding their absence or presence of sexual activity. There were no statistical differences between the two groups, $\chi^2(1, n = 104) = 1.16, p = .28$. It appears that the issue of self-labeling is more salient to the degree of public awareness regarding one's sexual orientation than is the delay of sexual activity.

CHAPTER 3. STUDY 2

METHOD

Participants

One thousand seventy-six university students were recruited from the University of North Texas. Participants under 18 years of age were excluded.

In order to compare participants on a more analytically sound basis, it was necessary to create, for the present analyses, a subsample due to having grossly unequal cell sizes for self-labeled sexual orientation when the whole sample was examined. As there was a plethora of heterosexual participants and few bisexual or homosexual participants, a matched sample strategy was used as it was in Study 1. For data analyses, sexual orientation categories were collapsed into two main categories, heterosexual and nonheterosexual, due to low numbers of participants in the more specific categories. The following criteria of self-labeled sexual orientation, gender, age, and ethnicity were used to create a matched subsample. Matching was accomplished by using a ratio of 1 to 3 for participants from the whole sample, matching within gender. For every bisexual or homosexual female participant, three heterosexual female participants were chosen who were matched based on age (within 5 years) and ethnicity. Because nonheterosexual participants indicated that their marital status was “single,” all married, divorced or separated heterosexual participants were not used in the matched subsample.

Demographic data is displayed in Table 5. In the original data set, participants ($n = 1076$) included: 698 heterosexual women, 291 heterosexual men, 21 bisexual women, 7 bisexual men, 9 lesbian women, 26 gay men, and 4 who did not disclose their

gender or sexual orientation. One protocol was eliminated because the participant listed her age as 17 years. Eleven female and two male participants reported their sexual orientation as “unsure.” Data for the matched set ($n = 251$) included: 90 heterosexual women, 99 heterosexual men, 20 bisexual women, 7 bisexual men, 9 lesbian women, and 26 gay men. After collapsing categories, data for the matched set included: 99 heterosexual men, 33 nonheterosexual men, 90 heterosexual women and 29 nonheterosexual women. For this subsample, ages ranged from 18-43 years with an average age of 22.22 years.

The subsample differed from both the university population and the original sample on the variables of gender, self-label sexual orientation, and marital status. Due to matching strategies, fewer heterosexual participants were included in the subsample due to the low numbers of bisexual and homosexual participants in the original sample. Additionally, men and women were equally represented in the subsample. With regard to ethnicity, the subsample was well representative of the university population with African-American, Caucasian, and Hispanic participants (refer to Table 5). As mentioned above, only unmarried participants were used in the subsample.

Measures

This study assessed the same sociodemographic characteristics as previously described in Study 1 with a few additional questionnaires or questions generated by the principle investigator. The Early Sexual Experiences Checklist-Adapted (ESEC-A) used in Study 1 was further modified in the present study. The question regarding “engaging in anal intercourse” was divided into two separate questions to reflect whether the person

was performing or receiving anal intercourse. No other modifications of the ESEC-A were performed. However, the ESEC-A will now be denoted as the ESEC-AUS.

Individual items in the ESEC-AUS were weighted on the basis of level of hypothesized sexual impact to follow the original intent of the authors. Questions with assigned weights can be found in Table 6.

Additionally, participants were asked the age at which they first engaged in voluntary oral, vaginal or anal intercourse. Questions assessing the frequency of condom use during vaginal or anal intercourse were also included. A measure for the presence and intensity of psychological distress, Hopkins Symptom Checklist (HSCL), was added to examine the relationship between levels of distress and levels of congruence. The original titles of the individual protocols were not used so as to minimize any confound due to demand characteristics of the measure names. However, the questionnaire contained more variables than were used for analyses in this study (refer to Appendix D for the complete protocol).

Hopkins Symptom Checklist. The Hopkins Symptom Checklist (Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974; HSCL) was used to assess both presence and intensity of distress. The HSCL is a 58 item self-report measure, which consists of five subscales derived through factor analyses. The five subscales are: (a) somatization, (b) obsessive-compulsive, (c) interpersonal sensitivity, (d) anxiety, and (e) depression. The authors determined internal consistency reliability estimates for each subscale with coefficient alpha ranging from .84-.87. Test-retest reliability for the five subscales ranged from .64-.87 over a one-week interval between testing situations (Derogatis et al., 1974).

Criterion-related validity studies have been done using drug trials and symptom relief as a measure of validity (Covi, Lipman, & Derogatis, 1973). Another study examined distress levels before and after gynecological visits with women classified as either emotionally labile or nonlabile (Rickels, Lipman, Garcia, & Fisher, 1972). Construct validity has been demonstrated by using the HSCL clusters as operational definitions of a hypothetical symptom construct and the factors as empirical measures of how symptoms occurred in the actual clinical realm (Derogatis, Lipman, Covi, & Rickels, 1971).

Measuring congruence was accomplished in this study in a similar manner as in Study 1. The Preference Congruence Score (PCS) was derived the same way it was in the previous study. To examine congruence between one's sexual orientation identity and Kinsey Actual score (behavior), a Behavior Congruence Score (BCS) was calculated as the absolute value of the arithmetic difference between the two variables and subtracted from a constant of 10. Because most participants in this subsample reported some amount of sexual activity, sexual interest was not used as a proxy for behavior as in Study 1. The Behavior/Preference Congruence Score (BPCS) subtracted the Kinsey Preference score from the Kinsey Actual (behavior) score. Again, the absolute value was subtracted from a constant of 10 to indicate the degree of congruence with a "perfect congruence" having a value of 10.

Procedure

Participants were representative of a variety of disciplines (biology, fine arts, behavioral sciences, etc.). Participants were recruited from large, introductory classes in Psychology and Human Sexuality (taught through the Kinesiology Department).

Participants were also recruited from known gay and lesbian student organizations and affiliations on the university's campus.

Most of the participants were awarded extra credit for their participation and all participants had a chance to be entered into a raffle for gift certificates to theatres, restaurants and bookstores, as additional incentives for participation. A grand prize of \$100 cash was also to be awarded to one participant. Extreme care was taken to ensure anonymity for participants regarding the raffle. Participants separated two tickets with duplicate numbers upon completion of the protocol or at their request if they did not want to complete the questionnaire. Participants placed one of the tickets in a secure container for a drawing at a later time and were instructed to keep the other ticket. Participants were instructed that they did not have to claim their prize in person if they felt uncomfortable and that prizes would be awarded to anyone who had possession of a "winning" ticket. All collected tickets, protocols, and prizes were locked in a secure area. Unfortunately, few prizes were claimed in spite of having notices of the raffle results in the school newspaper, posted on the school newspaper's website, and on the researcher's website.

All participants were informed of the purpose, risks, and benefits of the study (see Appendix E). They indicated their consent to participate by completing and returning the single 156-item questionnaire. Participants were informed immediately before participation and during debriefing of counseling services available. Additionally, the participants were provided with the researcher's website address where they could access the prize-winning raffle numbers, results and implications of the study. The University of

North Texas' Institutional Review Board (IRB) approved this project.

RESULTS

Descriptive Analyses

Descriptive analyses were performed to detect any abnormalities in the sample's distribution so corrections for any skewness and/or presence of outliers for all variables could be performed before using them in hypotheses testing. It was noted that the subsample's scores were not normally distributed on the sexual orientation, sexual orientation identity and unwanted childhood sexual experiences variables. For example, the distribution of the self-labeled sexual orientation variable revealed that the majority of the participants viewed themselves as being heterosexual, with considerably fewer participants viewing themselves as bisexual or homosexual. Another interesting distribution dealt with a reversed ratio of bisexuals to homosexuals by gender. There were more bisexual ($n = 20$) than homosexual ($n = 9$) women in the subsample, but the reverse was true for men (bisexual = 7 and homosexual = 26). To control for the disproportionate numbers, sexual orientation categories were collapsed from three into two. Again, a matched sample strategy was used for the present analyses due to the disproportion of the distributions of sexual orientation and gender. Additionally, age was a variable that demonstrated skewness, and those older than 31 years of age were eliminated before the matching process was complete. Hypotheses that were affected by age differences used age as a covariate to control for the variance that age contributed.

The makeup of the subsample was 9.2% African American ($n = 23$), 78.5% Caucasian ($n = 197$), 10.8% Hispanic ($n = 27$), and 1.6% Asian/Pacific Islander ($n = 4$)

and included 47% who were women ($n = 119$) and 53% who were men ($n = 132$).

Participants' ages ranged from 18-43 with an average age of 22.2 years. Three-fourths of the subsample were self-identified as "heterosexual" ($n = 189$) while one-fourth labeled themselves as either "homosexual" or bisexual" ($n = 62$).

Correlation matrices, t-tests, and analyses of variance (ANOVA) were used to identify and analyze relationships among variables to determine the necessity of using composite scores for variables that tap into the same constructs (i.e. sexual orientation). Additionally, relationships were examined to determine the appropriate statistical analysis to be used. Correlations among the various variables measuring sexual orientation were slightly higher than those in Study 1 ($r = .76-.98$; refer to Table 7). Sexual orientation self-label was used for categorical analyses as the independent variable, while the other sexual orientations (such as Kinsey or Sell designations) were used as continuous variables in testing hypotheses.

Correlations among demographic variables revealed significant relationships between age and gender ($r_{pb} = .13, p = .05$), sexual preference ($r = .14, p = .05$), age of first vaginal intercourse ($r = .20, p = .01$), and age of first anal intercourse ($r = .41, p = .01$). Gender and sexual behavior were also significantly correlated ($r_{pb} = .16, p = .05$). Table 8 displays variables from the protocol and derived indices for the three congruence measures (BCS, PCS, and BPCS) and early, unwanted sexual experiences.

The three sexual orientation categories were collapsed into heterosexual and nonheterosexual due to insufficient numbers of participants who identified as being either

bisexual or homosexual. Therefore, the hypotheses have been adjusted to compare two sexual orientation categories and not three as originally planned. Additionally, Pearson correlations and independent-samples t-tests were used in hypothesis testing as only two groups were compared.

Hypothesis-Testing Analyses

The first set of hypotheses examined heterosexual and nonheterosexual participants' congruence between self-labeled sexual orientation, BCS, and PCS. These are between-subjects analyses to determine if there are different degrees of congruence between the two sexual orientation self-labeled groups. Because gender and sexual behavior were significantly related, as were age and sexual preference, gender was used as a covariate in Hypothesis #1, while age was a covariate in Hypotheses #2 and #3.

Hypothesis 5: When controlling for gender, nonheterosexual participants will report engaging in sexual activities that are more congruent with their sexual orientation identity than will heterosexual participants. A hierarchical ANOVA was performed and there were no statistically significant main effects for either gender, $F(1,244) = 2.75$, $p = .10$, or sexual orientation, $F(1,244) = 2.27$, $p = .13$. There were no interaction effects, $F(3,244) = 0.18$, $p = .67$. Heterosexual participants' sexual behavior congruence ($M = 9.58$) was similar to nonheterosexual participants ($M = 9.27$). Hypothesis 5 was not supported.

Hypothesis 6: When controlling for age, nonheterosexual participants will report sexual preferences that are more congruent with their sexual orientation identity than will heterosexual participants. An ANCOVA revealed significant differences between the two

groups, $F(1,245) = 14.81, p < .001$. However, heterosexual participants' sexual preference congruence scores ($M = 9.89$) were slightly higher than nonheterosexual participants ($M = 9.47$). Therefore, Hypothesis 6 was significantly disconfirmed as heterosexual participants reported more congruence between sexual orientation identity and preference than did nonheterosexual participants.

Hypothesis 7: When controlling for age, nonheterosexual individuals will have greater congruence than will heterosexual individuals regarding sexual behavior and sexual preference as denoted by their BPCS. An ANCOVA revealed significant differences between the two groups, $F(1,246) = 7.80, p = .006$. Unexpectedly, heterosexual participants' BPCS scores ($M = 9.63$) were higher than nonheterosexual participants' BPCS scores ($M = 9.06$). Because nonheterosexual participants demonstrated less congruence than heterosexual participants, Hypothesis 7 was statistically significant in the opposite direction from the predicted one.

The next two hypotheses tested dealt with differences between people of different self-label sexual orientation regarding early, unwanted childhood experiences (prior to age 13 years) as well as age of voluntary sexual experiences. Hypotheses 9b and 9c were also controlled for age effects, as there was a significant relationship between age and first voluntary vaginal and anal intercourse.

Hypothesis 8: Nonheterosexual individuals will have significantly higher numbers of weighted, unwanted sexual experiences prior to age 13 than will heterosexual individuals. An independent-samples t-test revealed no statistically significant differences between heterosexual participants ($M = 4.02$) and nonheterosexual participants ($M =$

5.31) regarding number and intensity of weighted, unwanted sexual experiences prior to the age of 13 years, $t(241) = -1.06, p = .29$. Therefore, Hypothesis 8 was not supported.

Hypothesis 9a: Nonheterosexual participants will report having their first voluntary experience with oral sex at younger ages than will heterosexual participants. An independent-samples t-test revealed no significant differences between ages of heterosexual participants ($M = 16.12$) and nonheterosexual participants ($M = 16.00$) regarding first voluntary experience with oral sex, $t(72) = -.65, p = .52$. Therefore, Hypothesis 9a was not supported.

Hypothesis 9b: When controlling for age, heterosexual participants will report having their first voluntary experience with vaginal intercourse at younger ages than will nonheterosexual participants. An ANCOVA revealed no significant differences between ages of heterosexual participants ($M = 16.71$) and nonheterosexual participants ($M = 16.97$) regarding first voluntary experience with vaginal intercourse, $F(1, 192) = .49, p = .48$. Therefore, Hypothesis 9b was not supported.

Hypothesis 9c: When controlling for age, nonheterosexual participants will report having their first voluntary experience with anal intercourse at younger ages than will heterosexual participants. An ANCOVA revealed no significant differences between ages of heterosexual participants ($M = 19.43$) and nonheterosexual participants ($M = 18.69$) regarding first voluntary experience with anal intercourse, $F(1, 94) = 1.83, p = .18$. Therefore, Hypothesis 9c was not supported.

The final hypothesis dealt with the relationship of congruence between the Behavior/Preference Congruence Score and level of psychological distress.

Hypothesis 10: Congruence will be inversely related to psychological distress. A Pearson correlation was performed to examine relationships between psychological distress and congruence between behavior and preference as denoted by the Behavior/Preference Congruence Score (BPCS). The correlation revealed a significant relationship between psychological distress and BPCS ($r = -.16, p = .05$). Therefore, Hypothesis 10 was supported.

Exploratory Analyses

Several questions were raised as a result of the hypotheses testing. Would there be gender differences regarding self-labeled sexual orientation and preference? Some literature (Manosevitz, 1970; Kinsey, Pomeroy, & Martin, 1948) supports that men usually have earlier and more sexual experiences than women. But little research has been done regarding differences in sexual preference. Bailey (1995) contended that preference would be more innate and less prone to social sanctions than sexual behavior. If there were differences in congruence, would men and women report significantly different levels of psychological distress? Additionally, would there be differences in labeling between one's public and private label for sexual orientation?

In a further examination of Hypothesis 6 for between-gender comparisons, a 2 X 2 ANOVA was performed to detect any differences between heterosexual and nonheterosexual participants for the PCS. Results revealed a main effect for sexual orientation category, $F(1,244) = 13.38, p < .001$, with heterosexual participants having greater PCS scores ($M = 9.89$) than did nonheterosexual participants ($M = 9.47$). There was no significant main effect for gender, $F(1, 244) = .15, p = .70$ or interaction effects,

$F(1,244) = .56, p = .45$. However, when within-gender comparisons were performed, results for both women, $t(54) = 2.28, p = .03$, and men, $t(37) = 2.34, p = .03$, were significant, with both heterosexual men ($M = 9.91$) and women ($M = 9.87$) having higher congruence than did the nonheterosexual men ($M = 9.41$) and women ($M = 9.54$).

In examining between-gender comparisons to ascertain differences between heterosexual and nonheterosexual participants with regard to BPCS, another 2 X 2 ANOVA was performed. Results were statistically significant for the main effect of sexual orientation, $F(1, 245), p = .01$, with heterosexual participants having higher BPCS scores ($M = 9.62$) than did nonheterosexual participants ($M = 9.07$). There were no main effects for gender, $F(1,245), p = .21$. Within-gender independent t-test analyses revealed differences with heterosexual men ($M = 9.89$) having higher congruence than did nonheterosexual men ($M = 9.06$), $t(37) = 2.93, p = .006$. However, there were no significant within-gender differences between heterosexual ($M = 9.36$) and nonheterosexual ($M = 9.07$) women, $t(117) = .78, p = .45$.

Hypothesis 8 examined possible differences between men and women regarding unwanted childhood sexual experiences due to the apparent differences between men and women after frequency data was examined and it was noted that men reported higher total weighted childhood sexual experiences than women. As this is an atypical finding for sexual abuse statistics in the USA where women experience childhood sexual abuse at greater rates than men, an independent t-test was performed to detect possible between-gender differences. There were no statistical differences between men ($M = 5.08$) and women ($M = 3.53$), $t(200) = 1.52, p = .13$.

Hypothesis 10 was examined for within-gender differences for both the men and women in the sample regarding possible relationships between self-labeled sexual orientation, psychological distress, and BPCS. For men, there was a statistically significant relationship between self-labeled sexual orientation category and BPCS ($r_{pb} = -.34, p = .01$), but not between BPCS and psychological distress ($r = -.17$) or between self-labeled sexual orientation category and level of psychological distress ($r_{pb} = .06$). Heterosexual men demonstrated more congruence between their sexual behaviors and preference than did nonheterosexual men. For women, the relationship between psychological distress and self-labeled sexual category was statistically significant ($r_{pb} = .27, p = .01$), with heterosexual women reported lower levels of psychological distress than did nonheterosexual women. With regard to the relationship between sexual orientation and BPCS, heterosexual and nonheterosexual women reported similar values ($r_{pb} = -.07$). Additionally, there was no statically significant difference between BPCS and psychological distress ($r = -.14$) for women.

Another interesting question raised was the possibility of differences between “private” and “public” sexual orientation self-label in light of the numerous disconfirmed hypotheses. The protocol contained questions (Q# 17-24) regarding the different categories of people who “knew” about a participant’s sexual orientation. Possible scores ranged from 0 to 16, with a higher score indicating a more public awareness of one’s sexual orientation. After summing the number of categories of people who were aware of the participant’s sexual orientation, an independent t-test examined differences between one’s self-labeled sexual orientation and the public nature of the self-label. Results

revealed that heterosexual participants ($M = 13.76$) indicated that they are more public with their sexual orientation than nonheterosexual participants ($M = 11.32$), $t(248) = 6.41, p < .001$. This finding supports Cass' (1979) and Troiden's (1984/1985) theory of labeling and how those labels may be inconsistent regarding the stage of homosexual identity that a person is experiencing or the social context in which one is currently operating. However, both Cass and Troiden dealt with sexual identity of homosexual men and the findings here may also apply to heterosexual people who have foreclosed on their sexual identity.

The last area for exploratory analysis dealt with the same concept as in Study 1 regarding whether there are statistical differences between heterosexual and nonheterosexual participants regarding the presence or absence of celibacy. A Chi-square was performed and demonstrated that heterosexual and nonheterosexual participants had similar proportions of celibate members in each of the two sexual orientation categories, $\chi^2(1, n = 189) = .27, p = .61$.

CHAPTER 4. STUDY 3

This section describes the comparison between the Taiwan and USA subsample heterosexual and nonheterosexual participants regarding sexual orientation identity and sexual preference congruence as denoted by the Preference Congruence Score (PCS). The original plan was to compare participants from USA and Taiwan regarding behavior and preference congruence by sexual orientation category. However, due to the problems encountered in Study 1 with regard to the high numbers of participants who were celibate, only sexual preference was examined. In the Taiwan sample (Study 1), there were statistically significant differences between heterosexual and nonheterosexual participants regarding the Preference Congruence Score (PCS). Heterosexual participants exhibited more congruence than nonheterosexual participants. Finally, there were no statistically significant differences between heterosexual and nonheterosexual participants regarding Interest Congruence Score (ICS), Interest/Preference Congruence Score (IPCS), and weighted childhood unwanted sexual experiences.

Statistically significant results were also found in the USA sample regarding PCS and BPCS with heterosexual participants reporting higher PCS and BPCS scores than did nonheterosexual participants. Additionally, there was a significant relationship between BPCS and psychological distress, with heterosexual participants having higher BPCS scores and lower levels of psychological distress than did the nonheterosexual participants. No statistically significant differences were found between participants in heterosexual and nonheterosexual groups regarding behavioral congruence (BCS), the number of weighted childhood unwanted sexual experiences or first ages of voluntary

sexual acts. Regarding hypotheses testing differences between Study 1 and Study 2, derived scores were different between the two regarding behavioral components. In Study 1, almost all of the participants were celibate, so sexual interest scores were substituted for sexual behavior. While sexual interests and behaviors are similar, they are obviously not identical.

The final hypothesis deals with a comparison between the Taiwan and USA samples regarding differences between heterosexual and nonheterosexual participants and their Preference Congruence score (PCS). However, there were some limitations to the present study regarding matching the two samples. To reduce disproportionate cell sizes of sexual orientation self-labeled groups in the combined samples, a third matched sample strategy was used. Sociodemographic differences between the two samples were removed by truncating variables (marital status and age) to provide a higher level of comparability. First, all of the married, divorced, and separated participants were eliminated from the USA subsample, as none of the Taiwan participants were married in that respective subsample. Then, due to the very small sample of nonheterosexual men from Taiwan, the final hypothesis was tested with only the women of both countries. Keeping both men and women in the sample and re-matching them to make cell counts more equitable would have resulted in an untestable sample size. Finally, when the two samples were analyzed together, age ranges for the USA sample were truncated to eliminate women older than 31 years of age to allow greater comparability with the younger Taiwan subsample.

Heterosexual and nonheterosexual women were then matched based on country and age. For example, for every bisexual or homosexual woman from Taiwan, a bisexual or homosexual woman from USA was chosen within a 3-year age range. For every nonheterosexual woman from Taiwan, 3 heterosexual women from the same country were chosen within a 3-year age range. The same strategy was used for the USA heterosexual and nonheterosexual participants. The result of the matching strategy yielded 66 heterosexual women and 22 nonheterosexual women from the USA and 66 heterosexual women and 22 nonheterosexual women from Taiwan, all matched within a 3-year age range. Both previous subsamples differed from the current subsample due to the exclusion of all the male participants. Age range (18-31 years) and average ($M = 19.84$) for this combined subsample matched the previous Taiwan sample more closely than the previous USA sample. The greatest difference was in the ethnic makeup of this subsample from the previous two: 2/3 fewer African Americans than in the previous USA subsample, half as many Caucasians as in the USA subsample, 1/3 fewer Hispanics than in the USA sample, and 30 times more Asian/Pacific Islanders than in the USA sample. The Taiwan subsample had 96% of the participants from Taiwan with the remainder from other Asian countries. Gender was restricted to women only for this last hypothesis due to the small number of nonheterosexual men from Taiwan.

Demographic data for Study 3 included the women's age ranges (18-31) with an average age of 19.8 years. The makeup of the subsample was 47.7% Taiwanese ($n = 88$) and the USA sample included 3.4% African American ($n = 6$), 40.3% Caucasian ($n = 71$), and 6.3% Hispanic ($n = 11$). Seventy-five percent of the participants self-identified as

“heterosexual” ($n = 132$) while 25% endorsed either “homosexual” or bisexual” as their self-labeled sexual orientation ($n = 44$).

RESULTS

Descriptive Analyses

Before testing the final hypothesis, an examination of the newly created subsample was done to detect distribution abnormalities. Scores on some of the demographic variables were not normally distributed. As previously described, sexual orientation self-label distributions revealed that the majority of participants viewed themselves as heterosexual and to control for the disproportion of the sample, sexual orientation categories were collapsed to increase cell sizes and allow for statistical analyses. Additionally, age was truncated to better match the range of the Taiwan women. The matching process helped normalize the distribution with regard to skewness and outliers for variables tested in the hypothesis.

Descriptive analyses were performed to detect and analyze relationships between variables that may contribute to family-wise error rates or suggest spurious associations. There were no significant relationships between age and sexual orientation, preference, sexual interest, or sexual orientation identity. Significant correlations were found between variables used in the hypothesis testing (sexual orientation, sexual preference, sexual orientation identity, ICS, PCS, and IPCS). Correlations are displayed in Table 9.

Hypothesis-Testing Analyses

The final hypothesis examined differences between women who were university students from Taiwan and the USA regarding congruence levels of sexual preference and sexual orientation identity.

Hypothesis 11: The USA university students will demonstrate greater congruence between sexual orientation identity and sexual preference (using the PCS) than will the Taiwan university students. An independent-samples t-test revealed no significant differences between women from Taiwan ($M = 9.53$) and the USA ($M = 9.77$) regarding PCS scores, $t(127) = -1.65, p = .10$. Hypothesis 11 was not supported.

Exploratory Analyses

An aspect that begged for analysis was regarding the relationship between Taiwan and the USA regarding public knowledge of one's sexual orientation self-label. A 2 X 2 ANOVA revealed statistically significant main effects for country of origin, $F(1, 350) = 80.38, p < .001$, and sexual orientation, $F(1, 350) = 17.32, p > .001$. Additionally, an interaction effect of country by sexual orientation was statistically significant, $F(1, 350) = 18.30, p < .001$. Participants from the USA reported greater disclosure ($M = 13.17$) regarding their sexual orientation than participants from Taiwan ($M = 9.31$), with heterosexual participants ($M = 12.14$) reporting a greater degree of public knowledge regarding their sexual orientation than did nonheterosexual participants ($M = 10.35$). This supports research (Dubé & Savin-Williams, 1999; Cochran, 1991) that indicates that in countries like Taiwan, sexuality and sexual orientation are not topics for discussion. Sexuality is a very private part of a person's life in Taiwan as opposed to the fairly open nature in the USA.

CHAPTER 5

DISCUSSION

The purpose of this project was to examine how the relationship between sexual orientation, sexual orientation identity, and social labeling processes are related to college students' sexual behaviors and preferences in Taiwan and the USA. A research opportunity became available to include data collected in Taiwan, similar to the data collected in the USA, for the purposes of a cross-cultural comparison. Generally, most of the hypotheses tested on the Taiwan sample were not supported, some were significantly disconfirmed for the USA sample, and hypotheses dealing with levels of psychological distress as a result of greater incongruence were supported.

Hypotheses 1 and 5 examined heterosexual and nonheterosexual participants regarding congruence between sexual orientation identity and sexual behavior. Sexual interest was substituted for behavior as the majority of participants from Taiwan (almost 77%) indicated that they were celibate. Correlations between sexual behavior and sexual interest were statistically significant for both the Taiwan and USA subsamples, accounting for 50% of the variance in the Taiwan sample and 79% in the USA sample. Therefore, sexual interest was a statistically and conceptually appropriate substitute for behavior. Hypothesis 1 (Taiwan) failed to find significant differences between heterosexual and nonheterosexual participants regarding congruence between sexual orientation identity and sexual interest. One of the possible problems with the parallel sample from Taiwan is the relatively young age of participants, and the behavioral component was not the best variable to use when examining incongruence. Preliminary

analysis from this sample indicated that using sexual interest would be a better variable than behavior as most of the respondents endorsed that they were sexually inactive, which is consistent with other research cited regarding a delay in sexual activity. A majority of the Taiwan students were celibate and may have delayed sexual activity as a way of postponing being labeled with regard to sexual orientation. However, there were no statistical differences between heterosexual and nonheterosexual participants regarding their levels of sexual activity. While Taiwan participants in this study are not directly comparable to the Asian-American participants in Cochran et al.'s study, there appears to be a degree of continuity between generations with regard to sharing similar cultural heritages and sexual values. As Cochran, Mays, and Leung (1991) discovered, sexual activity in the Asian-American participants was significantly less than any of the other ethnic groups (African American, Hispanic and Caucasian) in their sample. Results of this study appear to support Cochran's finding, as an overwhelming majority of participants from Taiwan indicated that they were celibate.

Hypothesis 5, the parallel hypothesis for the USA college students, was nonsignificant regarding differences between heterosexual and nonheterosexual participants for congruence between sexual orientation identity and sexual behavior. Congruence between sexual behavior and sexual orientation identity for heterosexual and nonheterosexual participants was very similar. Gender was controlled in this analysis because of the significant relationship between it and sexual behavior as revealed in exploratory analyses. Due to gender being correlated with behavior, controlling for gender reduced shared variance that facilitated interpretation. Because gender was

controlled for in this analysis, possible differences between men and women regarding sexual behavior may have been significant had the distribution of cell sizes been different. Note that there were approximately equal numbers of men and women in this subsample, but the Taiwan subsample contained an overwhelming number of women. Men usually engage in sexual experiences at an earlier age and with more frequency than do women.

Hypothesis 2 examined congruence between sexual orientation identity and sexual preference among heterosexual and nonheterosexual participants. This finding was significantly disconfirmed. Heterosexual participants had greater congruence than did nonheterosexual participants. Bailey and Zucker (1995) indicated that, while sexual behavior and sexual orientation identity are influenced more by societal constraints due to the public nature of behavior, preference appears to be more innate. Results of this hypothesis do not seem to support Bailey and Zucker's research findings, as nonheterosexual participants had more incongruence between sexual orientation identity and sexual preference. The predicted direction for the hypothesis was made assuming that nonheterosexual participants would have partially resolved their sexual identity and therefore be congruent regarding sexual orientation identity and sexual preference. Additionally, hypotheses were not adjusted to reflect the collapsing of sexual orientation categories.

Hypothesis 6, for the USA subsample, examined congruence between sexual orientation identity and sexual preference among heterosexual and nonheterosexual participants. This finding was also significantly disconfirmed. Heterosexual participants

had greater congruence than did nonheterosexual participants. One interesting aspect regarding congruence between sexual orientation identity and sexual preference in Study 1 and Study 2 was that USA nonheterosexual participants' scores (9.34) reflected greater congruence than nonheterosexual participants' scores (8.88) from Taiwan. Bailey and Zucker (1995) indicated that sexual preference is not as influenced by societal norms as sexual behavior. Results of this hypothesis lend modest support to Bailey and Zucker's supposition. The difference in scores between the USA and Taiwan samples for nonheterosexual participants seem to support the general idea that openness in a society allows one to express themselves in a manner that causes minimal distress in a person.

Hypothesis 3 compared heterosexual participants' congruence between sexual orientation identity and IPCS to that of nonheterosexual participants. There were no significant differences. Researchers (Bailey 1996; Krafft-Ebing, 1935; Mayne, 1908; LeVay, 1993; & Sell, 1997) have posited that sexual preference is more resistant to social norms than is sexual behavior and would be a "pure" measure. However, Hypothesis 3's nonsupport does not seem to buttress the researchers' theory that sexual preference is innate while sexual behavior is socially influenced. It was only recently that the Chinese Psychiatric Association (CPA) removed "homosexuality" from their new diagnostic manual for psychiatric disorders. The change came about after 51 gay and lesbian individuals had their mental health monitored for a year. After the year, only six individuals were deemed as having psychological disorders (Huang, 2001). This may illustrate the general climate in Asian countries regarding reluctance to self-label and/or engage in sexual activity. Additionally, Chen (1995) found that the total amount of

overall self-disclosure was greater for the American than Chinese American participants in his study. However, he reported that when Asian people disclose, they do it in greater depth than people from the USA. Chen's finding had partial support for more in-depth disclosure from the Taiwan sample due to the differences between the way that participants self-labeled and the degree to which their family, friends, and society know their self-label.

For the USA sample, Hypothesis 7 compared heterosexual participants' congruence between sexual orientation identity and BPCS to that of nonheterosexual participants. USA heterosexual students demonstrated greater congruence than nonheterosexual students. Surprisingly, Hypothesis 7 was significantly disconfirmed. Recall that researchers (Bailey, 1996; Krafft-Ebing, 1935; Mayne, 1908; LeVay, 1993; & Sell, 1997) have posited that sexual preference is more resistant to social norms than behavior. Hypothesis 7 may lend some modest support to their proposal, but it is sample-specific, as the Taiwan parallel hypothesis did not support Bailey's findings. However, the variable used to measure behavior may have confounded any significant findings as it was also a self-label regarding types of sexual behavior (ranging from 100% heterosexual to 100% homosexual) over one's lifetime and not a quantification of current sexual behaviors. Results of the USA sample appear to be congruent with the country's individualist societal norms. Additionally, in the USA, sexuality is pervasive and very accessible to most individuals. As time goes on, the concept of one's sexual orientation is becoming less of an issue in the USA with some states providing for same-sex health benefits and rare states allowing same-sex marriages or unions. Surprisingly, participants

in the USA sample did not appear to be more public about their sexual orientation self-label, behavior or preference than participants in the Taiwan sample.

Hypothesis 4 examined weighted unwanted childhood sexual activities (prior to age 13 years) by self-labeled sexual orientation category. There were no significant differences between heterosexual and nonheterosexual participants. The weighting of unwanted childhood sexual experiences was performed to reflect the likely severity of the experiences. Miller, Johnson and Johnson (1991) took into account the severity of the experience by dividing experiences into more or less severe. However, the two (rate and severity) were not combined to allow for simultaneous statistical comparisons. It makes conceptual sense to weight the experiences, as having someone perform oral sex on a child carries the same “weight” as having someone expose their genitals to a child. Without taking into consideration the combination of frequency and severity, research may underestimate the psychological sequelae of these traumatic events in a child’s life.

The present weighting for childhood sexual experiences was based on increasing levels of sexual intrusiveness carrying increasing weight. Summing the weighted scores was an attempt to reflect a wider range of sexual experiences by severity level. The rate and severity of childhood sexual abuse is very difficult to ascertain in Taiwan because all sexual topics are of a very private nature and therefore “taboo.” Sexual abuse would be extremely sensitive subject matter to explore, especially if the abuse involved family members and the questionnaires were collected (and possibly perused) by their professors.

Hypothesis 8, for the USA sample, also examined weighted unwanted childhood sexual activities (prior to age 13 years) by self-labeled sexual orientation category. There were nonsignificant differences between heterosexual and nonheterosexual participants. As with the Taiwan sample, the weighting of unwanted childhood sexual experiences was performed to reflect the severity as well as the frequency of the experiences. Participants were not asked to enumerate the experiences but simply indicate if they had ever experienced them. The weighting of the experiences could make it difficult to compare these results with other research findings. Present results do not appear to support earlier research suggesting that nonheterosexual individuals have more intrusive unwanted childhood sexual experiences than heterosexual individuals (Van Wyk & Geist, 1984) but the weighting process may account for this and render the two studies incomparable. Also, weighting the number of unwanted childhood sexual experiences used for statistical analysis may have artificially inflated the averages reported by participants. Additionally, in this study, participants were asked “if” they had experienced a particular sexual encounter and not the “number” of sexual encounters. It would behoove future researchers to use weighted frequency scores or derive some other way to reflect both the rates and severity of unwanted childhood sexual experiences.

Hypotheses 9a, 9b, and 9c were tested on the USA subsample only, because the Taiwan protocol did not include questions pertaining to first voluntary experience with oral, vaginal, or anal sexual intercourse. There were no significant differences between heterosexual and nonheterosexual participants regarding their ages for first voluntary experience with oral, vaginal, or anal sexual intercourse. This finding is not consistent

with Kinsey's research that indicated the possibility of an accelerated sexual developmental pathway for nonheterosexual male individuals (Kinsey, Pomeroy & Martin, 1948). Additionally, Manosevitz (1970) found that total childhood sexual activity was significantly greater for male homosexual participants than male heterosexual participants. His conclusion is that a "prehomosexual" child becomes sexually active earlier than a "preheterosexual" child. However, both of those studies are fairly old and are not directly comparable to the subsamples used in this study due to differences in the historical periods in which all three samples were collected, age of participants, and possible cohort effects. Ages of the samples in this study were younger than studies conducted by Kinsey in 1948 and consisted of college students. Questionnaires were used in this study as opposed to the interview format used in Kinsey's original study. Additionally, Manosevitz's study had significantly fewer participants ($n = 50$) than in this study and participants were recruited from known gay organizations.

Hypothesis 10 was tested with the USA subsample only, because the Taiwan protocol did not have the HSCL included in the research packet. Participants with more congruence between behavior and preference reported significantly less psychological distress than participants with less congruence. The hypothesis was supported. These findings of the relationship between psychological distress and incongruence support Rogers' (1951) general concept regarding the appearance of a psychological threat when there is a discrepancy between the real and ideal self (or behavior and preference, as tested in this sample). However, incongruence may be protective for some individuals depending on the directionality as proposed by Cass (1979). For example, a man living in

Taiwan may self-label as homosexual but have heterosexual experiences due to cultural expectations for continuing the generations through procreation, according to Ying-Shi Chang, Ph. D., Director of the Counseling Center at Hung-Kuang College of Nursing and adjunct professor at Nation Changhua University of Education (Department of Guidance and Counseling), and Jing-Houng Kuo, Ph. D. Department Chairman of Social Welfare at the Chinese Culture University. While other Asian countries share a collectivist approach to life, countries such as Thailand and India are more tolerant of nonheterosexual people if they overtly conform to the heterosexual lifestyle of marrying and raising children. What the nonheterosexual person does covertly is not usually a problem for those societies unless he or she is “caught” engaging in nonheterosexual activities.

A cross-cultural comparison was made with only the women from Taiwan and the USA, as the nonheterosexual men from Taiwan were so few in number. In the cross-cultural hypothesis, Hypothesis 11 found that USA university women did not demonstrate greater congruence between sexual orientation identity and sexual preference than did the Taiwan university women. This finding was surprising due to the cultural expectation in Taiwan for women to marry and produce children to ensure heirs for future generations. While there is some degree of that same expectation in the USA, women appear to have greater freedom of expression in general, but especially regarding their sexuality, than the women in Taiwan. Therefore Taiwan women were expected to experience more incongruence if they are conflicted between who they are versus what

society expects them to be. However, the finding for this Hypothesis did not reflect cultural differences.

In addition, several interesting findings came as a result of exploratory analyses regarding gender differences after hypothesis testing on all three studies. Only the USA sample was used to examine gender differences as the Taiwan sample had too few men, and the cross-cultural comparison was with women only. Results of gender differences indicated that heterosexual men and women reported greater congruence than did nonheterosexual men and women between sexual orientation identity and sexual preference.

Additionally, heterosexual men reported greater congruence than did nonheterosexual men between sexual orientation identity and BPCS. However, there were no differences between heterosexual and nonheterosexual women regarding congruence between sexual orientation identity and BPCS. Possible reasons for these findings of greater congruence among men may be the lengthy history of homosexuality among men and less acceptance of homosexuality among women. Traditionally, women have been socialized to ensure the tribe's existence through propagation of the young. Therefore, women who deviated from the sexual mores of their historical period were typically seen as a threat to society's survival. In ancient times, women were valued on the basis of their fertility. For that reason, among others, today's women continue to be socialized to assume the traditional role of mother and wife as a means of maintaining the status quo. While women in the USA enjoy more social and economic security than

women in other parts of the world, they are still under more constraints than men due to pressure from society to conform to historical standards.

For the Taiwan sample, examining possible differences between one's self-labeled sexual orientation and presence or absence of sexual activity revealed that heterosexual men and women were not more or less sexually active than were nonheterosexual men and women. This does not seem to support the Dubé and Savin-Williams (1999) supposition that delaying sexual activity delays the labeling process and public awareness of one's sexual orientation. However, due to the small numbers of nonheterosexual participants who were sexually active, this finding should be replicated with a larger sample.

Finally, in examining "public" versus "private" sexual orientation self-labels, heterosexual men and women from Taiwan and the USA were more public regarding their self-label than were nonheterosexual men and women from both of those countries. This finding supports Cass' (1979) and Troiden's (1984/1985) theory of labeling and how those labels may be inconsistent regarding the stage of homosexual identity that a person is experiencing or the social context in which one is currently operating.

Three assumptions were made based on previous research that did not generalize to these two samples. The assumptions affected the predicted directionality of most of the hypotheses and did not take into account alternative variables that possibly affected the results of hypotheses testing. The first assumption was that a person's self-label was consistent across most relationships and situations. In spite of the fact that the results of questionnaire could not be traced back to individual participants, it was assumed that

participants might have been reluctant to self-label accurately regarding their sexual orientation. Therefore, the assumption was made that a participant's sexual orientation self-label generally would be of a public nature, especially if one labeled as a heterosexual. That is, the sexual orientation that one endorsed would be the same sexual orientation that parents, family, friends, teachers, and romantic partners knew. However, after the analyses demonstrated a discrepancy between the participants' sexual orientation self-label and the number of categories of people who knew the self-label, more research was examined possibly to explain the findings in this project. Cass' model of homosexual identity formation (1979) indicates that a person can go through a series of stages in which the self-label initially is very private. The next stage usually involves some discrepancy between the public self-label and private self-label with the optimal outcome being that the public and private self-label become basically the same.

Troiden (1984/1985) suggests that identity is merely a label that individuals use when they are in a social context. Identity helps the individual to define group membership and facilitates self-categorization. However, Troiden suggests that once the person is removed from the social cues that enhance the current self-label, that particular social identity may become dormant. Therefore, if a person self-labels as a homosexual, the label will be active as long as the person is in the social context where that particular label is valued. When the person is no longer in a social context in which homosexuality is valued or positively appraised, the label becomes dormant and a label suitable to the current social context is activated. Tajfel and Turner (1979) suggest that everyone has multiple social identities. People who have several dominant group identities are more

likely to have consistency with their various identity labels. However, for people who have several nondominant group identities, the management of those identities may lead to low self-esteem due to negative reactions to the identity labels. For example, an Asian lesbian woman may be rejected by a group of women should she divulge her sexual orientation, and rejected by a group of lesbians based on her ethnicity. She cannot do much about her ethnicity, obviously, but she can keep quiet regarding her sexual orientation in order to be accepted into a group. In exploratory analyses for Study 1, 2 and 3, it appears that one's private label serves a protective function when the level of threat is high regarding one's sexual orientation.

The second assumption was that all incongruence is maladaptive (Rogers, 1951). Donahue et al. (1993) described research findings regarding the theory of self-concept differentiation (SCD). While some theorists view greater levels of SCD as becoming more "specialized" and therefore more adaptable, Donahue et al. viewed it as a failure to integrate core role identities, resulting in a fragmentation of one's identity. Participants were asked to list five of their social roles. While sexual orientation or sexual identity was not listed in the examples, romantic partner was a commonly chosen role. The researchers found that people with high levels of SCD endorsed higher levels of depression, anxiety, and neuroticism and lower levels of self-esteem and well-being. In contrast, Cass (1979) views incongruence or inconsistency as adaptive, especially for groups of people who may suffer harm or other ill consequence if their "true" self-label is revealed. She theorized that for a homosexual man, the public label of being heterosexual affords him the protection and availability of resources that may not be accessible if he

declares his homosexual identity. Additionally, during this time of inconsistency, the homosexual man can have time to further explore his sexual orientation identity options before foreclosing on a gay identity altogether. She also suggests that incongruence or inconsistency is resolved in three ways: a) people can change their self-perceptions, b) people can change the way others perceive them, and c) people can change their perception of their own behavior. From the results of hypothesis testing, it appears that there is some incongruence among nonheterosexuals. However, information regarding the individuals' environments was not collected to determine if there is a reasonable external threat that overrides the need to be congruent. Given that the sample was collected from a university in the Midwest, there may be religious pressure to pass one's self off as a heterosexual to prevent sanctioning from family, friends, and other supportive networks or institutions.

The third assumption was that college students in Taiwan would be more similar to the students in the USA than different. The conclusion was made because the research reviewed was somewhat dated regarding people from Asian countries and it was hoped that the culture had made some micro changes in the area of sexuality. However, it became apparent at the beginning of the statistical analyses that this was not the case regarding matters of a sexual nature.

The opportunity for cross-cultural comparisons between Taiwan and the USA presented itself rather quickly. By comparing Taiwan and the USA, new information regarding self-labeling, sexual orientation, behavior, and preference could be collected and analyzed. Culturally, the comparisons were made between an individualist and a

collectivist society. Individualist societies value independence, personal achievement, rights and liberties, many casual relationships with confrontation as a part of that relationship, and behaviors that reflect one's personality and attitudes. Conversely, collectivist societies value interdependence, group goals and solidarity, few but close relationships with harmony valued, and behavior that reflects social norms and roles. The USA is well known for its attitude of overt nonconformity while Taiwan is a country in which people learn to conform to help society remain on a stable, predictable path. Therefore, any nonconformity in Taiwan is not valued and is overtly discouraged. People who live in Taiwan must be covert if they are nonconforming or risk loss of their job, family, and other resources.

According to Professors Chang and Kuo, there are social prohibitions against people who are not heterosexual. They cannot act on their private self-label regarding their sexual orientation or they risk rejection from their family, discrimination regarding educational or employment opportunities (to the point of being dismissed from a job), and being labeled as a social deviant or having a mental illness (personal communication, May 27, 2002). Professors Chang and Kuo were not surprised at the findings regarding hypotheses dealing with congruence levels between one's sexual orientation identity self-label and behavior or preference, as heterosexuality is the norm for people in Taiwan.

Keeping those assumptions in mind, it is no surprise that the Taiwan sample did not evidence any differences between heterosexual and nonheterosexual participants regarding congruence between their sexual orientation identity and sexual interest. Taiwan continues to be a conservative country where a nonheterosexual person risks

losing family, friends, and employment if their public and private self-labels of nonheterosexuality are consistent. Given the norm of heterosexuality and privacy regarding sexual activity, especially childhood sexual abuse, findings from this sample seem to be congruent with the information received from Professors Chang and Kuo.

Limitations

Limitations of this study include the possible lack of generalizability due to dropping considerable numbers of participants as a result of the matching process. Both samples were from universities. Participants from Taiwan were polled in universities with religious affiliations, which may explain the higher number of celibate students in the sample. Additionally, cultural prohibitions regarding premarital sexual behavior made the comparison of this sample to the USA sample very difficult at best. Additionally, participants were lower in age and of a higher socioeconomic status than the general population in their respective countries.

Regarding the labeling process and inconsistency between sexual orientation and behavior and/or preference, it may be the case that people in societies where there are rather strict guidelines for behaviors may have more difficulty with achieving an individual identity, especially if it is not in agreement with the dominant culture or group. Additionally, greater complexity of a society can allow for more degrees of freedom regarding how and where one can fit into the society. The more groups with which one can align, the easier it may be for an individual to form an identity that accurately reflects their internal world. The first two steps of identity formation are self-categorization and social comparison (Hogg, Terry & White, 1995). If the society has a restricted range of

behaviors or attitudes with which one can compare, what happens to the people who are on the fringes of society's dominant culture? They must choose between "fitting in" with a culture at odds with their belief system or remain isolated and risk being stigmatized. Asian American youth that are homosexual or bisexual risk losing their families (resources), friends (support systems) and a variety of institutional benefits (churches, social organizations). Chen (1995) suggests that communication style differences between people in the USA and China may preclude Asian youth from divulging their sexual orientation identity, as well as their sexual interest or preference. This finding could present interesting challenges for future research in those areas of sexual identity and level of self-disclosure. While the Taiwan sample was more open when responding to this project's anonymous questionnaire regarding their sexual orientation self-label, they indicated that they were less open with others in their world regarding their identity.

It appears that generally, the USA sample was more congruent overall than the Taiwan one. Given the "permissive" attitudes regarding sexuality in this country, it is not surprising that USA youth are sexually active at younger ages and in larger numbers than the Taiwan youth. The Massachusetts Department of Education reported in their 1997 Youth Risk Behavior Survey that a fair number of high school students, between the ages of 14 and 18 years, were having sexual intercourse (African American students, 47%; Hispanic, 41%; "Other," 34%; Caucasian, 29%; Asian, 17%). Even in the USA, Asian American students are having one-third to half as much sex as the other ethnic categories represented in the survey. What was surprising was the lack of significant findings in the USA sample regarding sexual behavior, as it was observed in the preliminary data

analyses that most of the students in the USA were sexually active. However, the variable used for sexual behavior in the analysis was another self-label regarding gradients of heterosexual to homosexual behavior (Kinsey A) but not a quantification of sexual behaviors per se. Basically, this appeared to be more of a comparison between self-labels than possibly getting at actual congruence between behavior and sexual orientation identity, which is a measurement issue and not necessarily a conceptual problem.

When examining sexual preference and congruence with both samples, there were differences between self-labeled sexual orientation groups. However, the USA sample seemed to report greater congruence. Cultural restraints in Taiwan may lead to some cognitive dissonance regarding sexual identity, behavior and preference. Dissonance theory posits that when a person responds in a manner inconsistent with one's beliefs, an unpleasant state is experienced, creating cognitive dissonance. Two methods for alleviating the unpleasant arousal are to change one's behavior to match one's beliefs or to change the belief itself (Festinger, 1957). It is harder to change the belief than the behavior, according to Rogers (1951).

Another possible reason why the Taiwan sample was less congruent involves Savin-Williams' (1996) research that suggested that Asian gay men might have problems with sexual identity formation due to internalized homophobia, perceptions of rejection, and availability of support resources. When in a restrictive environment, one may have to behave in a manner to match others' expectations rather than one's own desires. The language used to describe sexual orientation, sexual orientation identity, sexual behavior, and preference is confusing and overlapping, making it difficult to know

how to label and what label to use. However, rather than restrict the labeling options that people have regarding their sexual orientation, a better proposal would be to examine the self-labeling and sexual identity processes that one goes through when deciding on a sexual orientation label. Future research would be helpful in examining the process of labeling.

One of the puzzling aspects of this study was why the use of “sexual interest” in the Taiwan sample did not seem to be an equivalent term for “sexual behavior.” The correlation between sexual interest and sexual behavior was high in both the USA and Taiwan samples (as cited earlier in this chapter). One can only wonder how the term “sexual interest” was interpreted and utilized. Perhaps sexual interest has less discriminative ability in Mandarin Chinese protocol than originally proposed. The term “attracted to” may have been a better choice for the protocol. While the original and translated protocols were comparable, there may have been subtle linguistic differences or cultural nonequivalence of constructs between the two.

In asking questions regarding first voluntary oral, vaginal or anal sexual intercourse, it was surprising that there were no differences between sexual orientation groups. All three behaviors are intrusive and not age normative before puberty. However, the data collection was taken from students over the age of 18 years. Adding questions regarding “sex play” and masturbation may have yielded significant findings, as these sexual behaviors are familiar to most people and normative for a majority of them. A better method for querying early voluntary sexual behavior would be in the form of an open-ended question. Participants could be asked to define their earliest voluntary sexual

experience, their age at the time of the occurrence, and how frequently they engaged in that behavior (perhaps with an age or developmental stage as a cut point).

Regarding psychological distress and congruence among sex-related constructs, it appears that Rogers' theory is somewhat applicable today but perhaps only in the USA or other Westernized countries. Incongruence can be protective as noted previously regarding gay or bisexual men and lesbian or bisexual women in the military. Cass (1979) would argue for a level of self-protection for nonheterosexual people as a means of survival. A gay youth was murdered in a conservative town in Wyoming. One wonders if the youth had not been openly gay, would he be alive today? The assessment of degree of threat needs to be factored into the decision regarding achieving congruence. While Rogers may not have conceptualized incongruence regarding one's sexual orientation, sexual behavior, and preference, today's environment is not the same one that Rogers was familiar with when he proposed his theory. Today's environment calls for the inclusion of mediating factors in the environment, which may be directly competing with greater congruence within one's self.

The findings regarding women from Taiwan and USA are somewhat consistent with the societal norms in those two cultures. Taiwan is a conservative, collectivist country and the USA has prided itself on independence and openness to new experiences. When women of the two cultures were compared, it is no wonder that Taiwan women have more incongruence regarding sexuality, as they do not have the luxury of open expression or experimentation without reprisals. However, the general status of Asian women both structurally in their society and within their culture does seem to promote

higher levels of incongruence regarding roles they have to assume and roles they want to assume.

Recommendations for Future Research

Given the cultural differences between Taiwan and the USA, it would be interesting to replicate this project using the same or a similar protocol and compare men and women who are USA Asian/ Pacific Islanders with men and women from another Asian country, such as Taiwan, to determine how acculturated the USA Asian sample might be regarding sexual activity and self-labeled sexual orientation.

Another area for future research includes the use of weighted unwanted childhood sexual experiences. In the present study weighting was based on increasing levels of sexual intrusiveness carrying increasing weight. Summing the weighted scores was an attempt to reflect a wider range of sexual experiences by severity level. Additionally, while not statistically significant, men from Taiwan and the USA reported greater severity than women from either of the countries, which is a reverse trend from previous literature.

An additional focus for future research would be to examine the self-labeling and sexual identity processes that one goes through when deciding on a sexual orientation label. If the label does not match one's behavior, preference or fantasy, which factor carries more weight? Or does a conflicting combination of factors contribute more distress? It would be interesting to examine this process using vignettes to have participants label characters and then prioritize the labeling procedure that they used.

Using a quantification of sexual behaviors may have prevented the measurement problem with Hypotheses 1 and 5. Using Sell's quantification questions regarding how many men and/or women a person had sexual contact with over the last year may have been a better choice. Additionally, a measure of lifetime sexual activity (i.e. Human Sexuality Questionnaire) may have been an even better alternative as behaviors were described over a lifetime and not solely the past year.

Conclusions

In conclusion, three salient findings sum up the essence of this study. The first one is that when the two cultures were compared, the findings were consistent with earlier research regarding cultural differences. As noted previously, Taiwan values conformity and the USA values nonconformity. What was notable regarding the Taiwan sample was the relative absence of sexual activity. While it is difficult for a person in the USA to identify as a nonheterosexual person, it is even more difficult and has severe repercussions for a nonheterosexual person in Taiwan to achieve a nonheterosexual identity. Additionally, due to the Taiwan norm of sexual abstinence before marriage, several hypotheses were not suitable for comparison as originally phrased.

Second, however, regardless of the country of origin, heterosexual people are the "norm" and any deviation from that can result in a loss of family, friends, employment, and, in some cases, life. Heterosexual people can label themselves as such, engage in heterosexual practice and have heterosexual fantasies. Nonheterosexual people cannot. They risk much when they become public about their sexual behaviors, feelings or desires. Therefore, on average, most nonheterosexual people, unless they have

successfully completed the process of identification with either homosexual or bisexual groups, are likely to have more inconsistency with their self-labeled sexual orientation, behavior and preference than do heterosexual people.

Third, an inconsistency or incongruence between one's self-labeled sexual orientation, behavior, and/or preference does not necessarily imply psychological distress. For many nonheterosexual people, being consistent between self-label and behavior can be very costly. Research has examined the stages of sexual identity for homosexual men (Cass, 1979) and found that some inconsistency was appropriate and psychologically healthy as one works through the stages of identity formation. Therefore, nonheterosexual people who may not be totally consistent may be the very ones who can live satisfying lives, albeit not 100% consistent at all times. It is proposed that the cognitive awareness of a threatening situation in the environment will activate a different schema involving the assessment of the threat and consequences for congruence between one's self-labeled sexual orientation, behavior, and/or preference. The degree of inconsistency that can be tolerated seems to be related to the degree of threat from the environment. Thus, if an individual has a low threat condition, inconsistency may become more salient and disruptive to the individual. However, if the threat is of a higher level, the threat itself, and not the inconsistency or incongruence, will be the determinant factor for distress. Incorporating environmental factors into congruence theory should be the direction for future research and theory development.

TABLES 1-9

Table 1

Taiwan Demographic Differences in Sexual Orientation (Self-label) Groups – Matched Sample

	<u>Heterosexual</u> (n = 78)		<u>Non-heterosexual</u> (n = 26)		<u>Total Matched Sample</u> (n = 104)		<i>t</i>	<u>Whole Taiwan Sample</u> (n = 446)	
Gender	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%		<i>n</i>	%
Male	12	11.5	4	3.8	16	15.4	^b –	106	23.8
Female	66	63.5	22	21.2	88	84.6		337	75.6
Marital Status ^a									
Single	78	75.0	26	25.0	104	100.0	n/a	433	97.7
Ethnicity									
Taiwan	75	72.1	25	24.0	100	96.2	^b –	388	88.0
Other Asian	3	02.9	1	1.0	4	3.9		53	12.0
Age									
Mean	20.4		20.4		20.4		-0.05	21.2	
SD	2.5		2.6		2.5			2.5	

^aNo matched sample participants indicated that they were married.

^bNot valid due to insufficient numbers of participants in required cells.

Table 2

Questions and Assigned Weights for the Early Sexual Experiences Checklist for the Taiwan Protocol

<u>Question</u>	<u>Weight</u>
Another person showed his/her sex organs to you.	1
You showed your sex organs to another person at their request.	1
Someone touched or fondled your sexual organs.	3
You touched or fondled another person's sex organs at their request.	3
Another person had sexual intercourse with you.	5
Another person performed oral sex on you.	4
You performed oral sex on another person.	4
Someone told you to engage in sexual activity so they could watch.	2
You engaged in anal sex with another person.	6

Table 3
Taiwan Differences in Unwanted Sexual Experience and Congruence by Sexual Orientation (Self-label) Groups – Matched Sample

	<u>Heterosexual</u> (n = 78)		<u>Non-heterosexual</u> (n = 26)		<u>Total Matched Sample</u> (n = 104)		<i>t</i>	<u>Whole Taiwan Sample</u> (n = 446)	
	<i>M</i>	<i>n</i> %	<i>M</i>	<i>n</i> %	<i>M</i>	<i>n</i> %		<i>M</i>	<i>n</i> %
Total Weighted	1.5		3.0		1.9		-1.14		
Unwanted Sex									
Value 0	54	51.9	15	14.4	69	66.3		283	63.5
1	13	16.7	4	15.4	17	16.3		88	19.7
>1	7	9.0	5	19.2	12	11.5		49	11.0
Interest Congruence Score (ICS)									
	9.27		9.52		9.33		-0.56	9.25	
Preference Congruence Score (PCS)									
	9.79		8.88		9.57		3.92**	9.52	
Interest/Preference Congruence Score (IPCS)									
	9.09		9.23		9.23		-0.32	9.09	

***p* < .01.

Note. Variables shown in categorical form to illustrate their distributions. Other descriptive and hypotheses testing analyses used continuous scores.

Table 4

Taiwan Correlations for Sexual Orientation, Identity, Behaviors, and Preferences

	SO	Behavior	Preference	SO Identity	Unwanted Sex	ICS	PCS	IPCS
SO	----	.43**	.54**	.64**	.14	.06	-.24*	.03
Behavior		----	.78**	.68**	-.14	-.36	-.51*	-.42*
Preference			----	.84**	.15	.02	-.50**	-.13
SO Identity				----	.22*	-.02	-.34*	-.01
Unwanted Sex					----	.10	-.17	.06
ICS						----	-.06	.93**
PCS							----	.14
IPCS								----

* $p = .05$, ** $p = .01$

Note. Variable abbreviations are as follows: SO = Sexual Orientation, ICS = Interest Congruence Score, PCS = Preference Congruence Score, and IPCS = Interest/Preference Congruence Score.

Table 5

United States Demographic Differences in Sexual Orientation (Self-label) Groups – Matched Sample

	<u>Heterosexual</u>		<u>Non-heterosexual</u>		<u>Total (Matched Sample)</u>		t	<u>Whole US Sample</u>		<u>UNT</u>	
	n	%	n	%	n	%		n	%		
Gender							-0.12				
Male	99	39.4	33	13.1	132	52.6		327	30.7	11904	44
Female	90	35.9	29	11.6	119	47.4		739	69.3	15150	56
Marital Status ^a							— ^c				
Single	189	75.3	62	24.7	251	100.0		982	91.3	n/a	
Ethnicity ^b							0.71				
African Am	16		7			9.2		152	14.1	2501	9.2
Caucasian	149	59.4	48	19.1	197	78.5		750	69.8	19023	70.3
Hispanic	21	8.4	6	2.4	27	10.8		96	8.9	2116	7.8
Asian/PacIs	3	1.2	1	0.4	4	1.6					
Age											
Mean	22.0		22.8		22.2					22.5	
SD	4.6		5.5		4.8						

^a No matched participants indicated that they were married, divorced, widowed or separated.

^b No matched participants indicated that they were of American Indian/Native Alaskan ethnicities.

^c Not valid due to insufficient numbers of participants in required cells.

Table 6

Questions and Assigned Weights for the Early Sexual Experiences Checklist for the USA Protocol

<u>Question</u>	<u>Weight</u>
Another person showed his/her sex organs to you.	1
You showed your sex organs to another person at their request.	1
Someone touched or fondled your sexual organs.	3
You touched or fondled another person's sex organs at their request.	3
Another person had sexual intercourse with you.	5
Another person performed oral sex on you.	4
You performed oral sex on another person.	4
Someone told you to engage in sexual activity so they could watch.	2
Another person performed anal sex on you.	6
You performed anal sex on another person.	6

Table 7
USA Differences in Unwanted Sexual Experiences and Congruence by Sexual Orientation (Self-label) Groups – Matched Sample

	<u>Heterosexual</u>		<u>Non-heterosexual</u>		<u>Total Matched Sample</u>		<i>t</i>	<u>Whole US Sample</u>	
	<i>M</i>	<i>n</i> %	<i>M</i>	<i>n</i> %	<i>M</i>	<i>n</i> %		<i>n</i>	%
Total Weighted Unwanted Sex	4.0		5.3		4.3		-1.06		
Value 0 - 1	118	47.0	40	16.0	158	63.0		481	47.6
2-4	27	10.8	5	2.0	32	12.7		188	18.6
5-12	18	7.2	8	3.2	26	10.4		156	15.4
13-23	14	5.6	4	2.0	18	7.2		134	13.2
> 23	5	2.0	4	2.0	9	3.6		52	5.1
Behavior Congruence Score (BCS)	9.58		9.15		9.47		2.04*	9.29	
Preference Congruence Score (PCS)	9.89		9.34		9.75		3.49**	9.86	
Behavior/Preference Congruence Score (BPCS)	9.63		9.06		9.49		2.71**	9.35	

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

Note. Variables shown in categorical form to illustrate their distributions. Other descriptive and hypotheses testing analyses used continuous scores.

Table 8

USA Correlations for Sexual Orientation, Identity, Behaviors, and Preferences

	SO	Behavior	Preference	SO Identity	Unwanted Sex	BCS	PCS	BPCS
SO	----	.78**	.76**	.84**	.07	-.09	-.23**	-.17**
Behavior		----	.90**	.93**	.07	-.22**	-.26**	-.25**
Preference			----	.92**	.11	-.08	-.28**	-.11
SO Identity				----	.12	-.03	-.19**	-.10
Unwanted Sex					----	-.02	-.04	-.06
BCS						----	.17**	.84**
PCS							----	.35**
BPCS								----

** $p = .01$

Note. Variable abbreviations are as follows: SO = Sexual Orientation, BCS = Behavior Congruence Score, PCS = Preference Congruence Score, and BPCS = Behavior/Preference Congruence Score.

Table 9
Cross-cultural Correlations for Sexual Orientation, Identity, Behaviors, and Preferences

	SO	Behavior	Preference	SO Identity	Unwanted Sex	ICS	PCS	IPCS
SO	----	.60**	.67**	.71**	.13	-.04	-.40**	-.04
Behavior		----	.80**	.73**	-.33	-.17	-.38**	-.19
Preference			----	.78**	.04	-.02	-.35**	-.07
SO Identity				----	.05	-.13	-.68**	-.09
Unwanted Sex					----	.04	-.04	-.01
ICS						----	.19*	.83**
PCS							----	.22**
IPCS								----

* $p = .05$, ** $p = .01$

Note. Variable abbreviations are as follows: SO = Sexual Orientation, ICS = Interest Congruence Score, PCS = Preference Congruence Score, and IPCS = Interest/Preference Congruence Score.

APPENDIX A
ORIGINAL ENGLISH VERSION OF TAIWAN QUESTIONNAIRE

General Demographic Questionnaire

The following questions ask for some basic information about you. Please answer as best you can even if you are uncertain.

About yourself:

1. Age: _____

2. Current Legal Marital Status:

___ 1) Single (never married) ___ 2) Married ___ 3) Widowed
___ 4) Divorced ___ 5) Separated

3. Are you now in a committed relationship with a person to whom you are not legally married?

___ 0) No ___ 1) Yes

4. In which group do you mostly place yourself?

___ 1) African-American/Black ___ 4) Caucasian
___ 2) American Indian/Alaskan Native ___ 5) Hispanic
___ 3) Asian/Pacific Islander ___ 6) Other _____

5. Do you have children? ___ 0) No ___ 1) Yes (including step or adopted)

6. Who do you live with?

7. Has your living arrangement changed in the in the past year? ___ 0) No ___ 1) Yes

8. Highest level of education:

___ 1) Less than High school
___ 2) High school graduate or GED
___ 3) Some college, associate degree, technical degree
___ 4) College graduate
___ 5) Masters degree
___ 6) Doctorate: Ph.D., M.D., J.D.
___ 7) Other _____

9. Are you in school now? ___ 0) No ___ 1) Yes, part-time ___ 3) Yes, full-time

10. Current Employment:

- 1) Employed full time or more
- 2) Employed part-time (less than 35 hours per week)
- 3) Self-employed
- 4) Homemaker
- 5) Unemployed

11. Type of job:

- | | |
|--|--|
| <input type="checkbox"/> 1) Unskilled worker | <input type="checkbox"/> 6) Major business manager, owner
Medium-sized business, Professional |
| <input type="checkbox"/> 2) Machine operator or semiskilled | <input type="checkbox"/> 7) Higher executive, large business
owner, major professional |
| <input type="checkbox"/> 3) Skilled manual worker | <input type="checkbox"/> 8) Other _____ |
| <input type="checkbox"/> 4) Clerical and sales worker | <input type="checkbox"/> 0) Unemployed |
| <input type="checkbox"/> 5) Administrator, owner of small
business, semi-professional | |

About your parents:

12. Current Marital Status:

level:

- | <u>Father</u> | <u>Mother</u> |
|---|--------------------------|
| <input type="checkbox"/> 1) Single | <input type="checkbox"/> |
| <input type="checkbox"/> 2) Married | <input type="checkbox"/> |
| <input type="checkbox"/> 3) Widowed | <input type="checkbox"/> |
| <input type="checkbox"/> 4) Divorced | <input type="checkbox"/> |
| <input type="checkbox"/> 5) Separated | <input type="checkbox"/> |
| <input type="checkbox"/> 6) Both my parents are married (not to each other) | <input type="checkbox"/> |
| <input type="checkbox"/> 7) Deceased | <input type="checkbox"/> |

13. Highest Educational

- | <u>Father</u> | <u>Mother</u> |
|--|--------------------------|
| <input type="checkbox"/> 1) Less than H.S. | <input type="checkbox"/> |
| <input type="checkbox"/> 2) H.S. or GED | <input type="checkbox"/> |
| <input type="checkbox"/> 3) Some College | <input type="checkbox"/> |
| <input type="checkbox"/> 4) College Grad. | <input type="checkbox"/> |
| <input type="checkbox"/> 5) Masters | <input type="checkbox"/> |
| <input type="checkbox"/> 6) Doctorate | <input type="checkbox"/> |
| <input type="checkbox"/> 7) Other: | <input type="checkbox"/> |

14. Parents' Occupations (current or most recent, or "Don't know"):

Father's:

Mother's:

15. Which category best describes your sexual orientation?

- 1) Heterosexual 2) Homosexual 3) Bisexual 4) Other _____

16. Please explain the factors you use to identify your sexual orientation:

The following people know my sexual orientation: (please check)

	<u>Does not know</u>	<u>Knows</u>	<u>Does not apply</u>
17. My father	_____ 1)	_____ 2)	_____ 0)
18. My mother	_____ 1)	_____ 2)	_____ 0)
19. One or more brothers or sisters	_____ 1)	_____ 2)	_____ 0)
20. Spouse or significant other	_____ 1)	_____ 2)	_____ 0)
21. Casual sexual partners	_____ 1)	_____ 2)	_____ 0)
22. One or two best friends	_____ 1)	_____ 2)	_____ 0)
23. Most of my friends	_____ 1)	_____ 2)	_____ 0)
24. Many people; I am very public	_____ 1)	_____ 2)	_____ 0)

25. Please read these descriptions, in order from 0 to 7. Then, please **circle** the number of the behavior that you feel **most closely** describes your sexual behavior **in the past, up to and including today**.

- 0 I have had **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.
- 1 I have had a **majority** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.
- 2 I have **rarely** had sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself.
- 3 I have had sexual experiences (resulting in erotic arousal or orgasm) **equally** as often with persons the **opposite** and the **same** sex as myself.
- 4 I have **rarely** had sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.
- 5 I have had a **majority** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself.
- 6 I have had **all** my sexual experiences (resulting in erotic arousal or orgasm) with persons of the **same** sex.
- 7 I have **never** had a sexual experience resulting in erotic arousal or orgasm.

26. At what age did you first notice your sexual desires? _____

27. Toward whom was this desire first directed? _____ 1) Female _____ 2) Male

28. Did the direction of your desire change back and forth for a period of time?

___ 1) Yes ___ 0) No

29. How do you experience your sexual desires **now** toward persons of the **opposite** sex:

___ 1) Physically ___ 2) Emotionally ___ 3) Both ___ 0) Neither

30. How did you experience your sexual desires in the **past** toward persons of the **opposite** sex:

___ 1) Physically ___ 2) Emotionally ___ 3) Both ___ 0) Neither

31. How do you ***express*** your sexual desires **now** toward persons of the **opposite** sex:

___ 1) Physically ___ 2) Emotionally ___ 3) Both ___ 0) Neither

32. How did you ***express*** your sexual desires in the **past** toward persons of the **opposite** sex:

___ 1) Physically ___ 2) Emotionally ___ 3) Both ___ 0) Neither

33. In dreams, do you have experiences of sexual relations with:

___ 1) Women ___ 2) Men ___ 3) Both ___ 0) Neither

34. Please **circle** the number of the behavior that you feel **most closely** describes the way you would **prefer** your sexual behavior to be **in the future**.

0 I prefer to have **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.

1 I prefer to have more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and less than a **fourth** of my sexual experiences with persons of the **same** sex as myself.

2 I prefer to have between **one-half and three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons of the **same** sex as myself.

- 3 I *prefer* to have sexual experiences (resulting in erotic arousal or orgasm) about **half** of the time with persons the **same** and about **half** of the time with persons the **opposite** sex as myself.
- 4 I *prefer* to have between **one-half to three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons the **opposite** sex as myself
- 5 I *prefer* to have more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and less than a **fourth** of my sexual experiences with persons the **opposite** sex as myself.
- 6 I *prefer* to have **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons of the **same** sex.
- 7 I *prefer never* to have sexual experiences (resulting in erotic arousal or orgasm).

35. What is your biological sex (choose one answer): _____ 1) female _____ 2) male

The following seven questions are asked to assess the intensity and frequency of your sexual interest in men and/or women. Consider times you were: 1) **sexually attracted to a man or woman**; 2) *had sexual fantasies, daydreams, or dreams about a man or woman*; or 3) were sexually aroused by a man or woman.

36. During the past year, my sexual **interests** have been (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I have had no sexual interests during the past year.

37. During the past year, how many different men were you sexually ***interested*** in (circle one answer):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

38. During the past year, on average, how often were you sexually ***interested*** in a man (circle one):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

39. During the past year, the most I was sexually ***interested*** in a man was (circle one answer):

- | | |
|------------------------------------|---------------------------------------|
| 0) Not at all sexually interested. | 4) Significantly sexually interested. |
| 1) Slightly sexually interested. | 5) Very sexually interested. |
| 2) Mildly sexually interested. | 6) Extremely sexually interested. |
| 3) Moderately sexually interested. | |

40. During the past year, how many different women were you sexually ***interested*** in (circle one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

41. During the past year, on average, how often were you sexually ***interested*** in a woman (circle one answer):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

42. During the past year, the most I was sexually ***interested*** in a woman was (circle one answer):

- | | |
|------------------------------------|---------------------------------------|
| 0) Not at all sexually interested. | 4) Significantly sexually interested. |
| 1) Slightly sexually interested. | 5) Very sexually interested. |
| 2) Mildly sexually interested. | 6) Extremely sexually interested. |
| 3) Moderately sexually interested. | |

The following five questions are asked to assess the frequency of your sexual contacts. Consider times you had contact between your body and another **man** or **woman's** body for the purpose of sexual gratification.

43. During the past year, my sexual **contacts** have been (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I have had no sexual contacts

44. During the past year, how many different men did you have sexual **contact** with (circle one):

- 0) None
- 1) 1
- 2) 2
- 3) 3-5
- 4) 6-10
- 5) 11-49
- 6) 50-99
- 7) 100 or more

45. During the past year, on average, how often did you have sexual **contact** with a man (circle one):

- 0) Never.
- 1) Less than 1 time per month.
- 2) 1-3 times per month.
- 3) 1 time per week.
- 4) 2-3 times per week.
- 5) 4-6 times per week.
- 6) Daily

46. During the past year, how many different women did you have sexual **contact** with (circle one):

- 0) None
- 1) 1
- 2) 2
- 3) 3-5
- 4) 6-10
- 5) 11-49
- 6) 50-99
- 7) 100 or more

47. During the past year, on average, how often did you have sexual **contact** with a woman:

- 0) Never.
- 1) Less than 1 time per month.
- 2) 1-3 times per month.
- 3) 1 time per week.
- 4) 2-3 times per week.
- 5) 4-6 times per week.
- 6) Daily

48. During the past year, how often have you had vaginal sexual intercourse without a condom:

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

49. During the past year, how often have you had anal sexual intercourse without a condom:

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

The following four questions are asked to assess your sexual orientation identity.

50. I consider myself (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual (bisexual).
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I do not identify with any sexual orientation.

51. I consider myself (circle one answer):

- 0) Not at all homosexual
- 1) Slightly homosexual
- 2) Mildly homosexual
- 3) Moderately homosexual
- 4) Significantly homosexual
- 5) Very homosexual
- 6) Completely homosexual
- 7) I do not identify with any sexual orientation

52. I consider myself (circle one answer):

- 0) Completely heterosexual
- 1) Very heterosexual
- 2) Significantly heterosexual
- 3) Moderately heterosexual
- 4) Mildly heterosexual
- 5) Slightly heterosexual
- 6) Not at all heterosexual
- 7) I do not identify with any sexual orientation

53. I consider myself (circle one answer):

- 0) Not at all bisexual
- 1) Slightly bisexual
- 2) Mildly bisexual
- 3) Moderately bisexual
- 4) Significantly bisexual
- 5) Very bisexual
- 6) Completely bisexual
- 7) I do not identify with any sexual orientation

Indicate how much of each of the following items applies to you by using the following format:

Never **Once or twice** **Three to four times** **Four to ten times** **More than ten times**
0 **1** **2** **3** **4**

How many times have you done the following with a person of the **opposite** sex ?

- | | | | | | |
|---|---|---|---|---|---|
| 54. Kissing on the mouth with or without tongue contact. | 0 | 1 | 2 | 3 | 4 |
| 55. Touching or fondling another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 56. Mouth contact with another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 57. Hand manipulation of another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 58. Mouth contact with another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 59. Lying close to, on, or underneath partner, while nude, petting without penetration. | 0 | 1 | 2 | 3 | 4 |
| 60. Vaginal sexual intercourse with penetration. | 0 | 1 | 2 | 3 | 4 |
| 61. Performing anal intercourse on a person of the opposite sex. | 0 | 1 | 2 | 3 | 4 |
| 62. Having anal intercourse performed on you by a person of the opposite sex. | 0 | 1 | 2 | 3 | 4 |

Never Once or twice Three to four times Four to ten times More than ten times
 0 1 2 3 4

How many times have you done the following with a person of the same sex ?

- | | | | | | |
|---|---|---|---|---|---|
| 63. Kissing on the mouth with or without tongue contact. | 0 | 1 | 2 | 3 | 4 |
| 64. Touching or fondling another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 65. Mouth contact with another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 66. Hand manipulation of another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 67. Mouth contact with another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 68. Lying close to, on, or underneath partner, while nude, petting without penetration. | 0 | 1 | 2 | 3 | 4 |
| 69. Vaginal sexual intercourse with penetration. | 0 | 1 | 2 | 3 | 4 |
| 70. Performing anal intercourse on a person of the same sex. | 0 | 1 | 2 | 3 | 4 |
| 71. Having anal intercourse performed on you by a person of the same sex. | 0 | 1 | 2 | 3 | 4 |

Please indicate by circling "yes" or "no" if any of these incidents ever happened to you **when you did not want them to**, your approximate age at the time of the **first** occurrence, and the approximate age of the other person involved.

- | | (best guess) | | Your age | Their age |
|---|--------------|-----|----------|-----------|
| | (1) | (0) | _____ | _____ |
| 72. Another person showed his/her sex organs to you. | Yes | No | _____ | _____ |
| 72. You showed your sex organs to another person at his/her request. | Yes | No | _____ | _____ |
| 74. Someone touched or fondled your sexual organs. | Yes | No | _____ | _____ |
| 75. You touched or fondled another person's sex organs at his/her request. | Yes | No | _____ | _____ |
| 76. Another person had sexual intercourse with you. | Yes | No | _____ | _____ |
| 77. Another person performed oral sex on you. | Yes | No | _____ | _____ |
| 78. You performed oral sex on another person. | Yes | No | _____ | _____ |
| 79. Someone told you to engage in sexual activity so that he/she could watch. | Yes | No | _____ | _____ |
| 80. You engaged in anal sex with another person. | Yes | No | _____ | _____ |
| 81. Other (please specify): _____ | Yes | No | _____ | _____ |
| 82. None of these events ever occurred | Yes | No | _____ | _____ |

If any of the incidents (listed on the previous page) has ever happened to you, please choose the **one behavior** that bothered you the **most** and answer the following questions with that incident in mind.

83. Who was the other person involved?

__ 1) family member __ 2) friend or acquaintance __ 3) stranger __ 4) Other _____

84. If they were a family member, how were they related to you? _____

85. What was the sex of the other person(s) involved?

___ 1) Female ___ 2) Male ___ 3) Both male and female at the same time

86. How many times did this behavior occur?

___ 1) just once ___ 2) twice ___ 3) 3-4 times ___ 4) 5 times or more

87. Over how long a period did this behavior occur?

___ 1) just once ___ 2) a month or less ___ 3) several months ___ 4) a year or more

88. How much did this experience *bother* you *at the time*?

1	2	3	4	5
Not at all		Moderately		Extremely

89. How much does this experience *bother* you *now*?

1	2	3	4	5
Not at all		Moderately		Extremely

90. What about the incident(s) bothered you the most?

APPENDIX B

MANDARIN CHINESE PROTOCOL

這是一份有關性意識及性行為的調查，您一切的答案都是匿名且保密的。您與其他同學的答案將代表台灣地區的大專學院，此資料會送到美國北德州大學 (University of North Texas) 進行分析比較。請勿在問卷上做任何記號，並將您的答案填入答案卷內。謝謝您的合作！

A. 個人基本資料:(請依照您個人情況來回答下列問題，並將答案填入答案卷)

1. 年齡：
2. 婚姻狀況： 1)單身、未婚 2)已婚 3)鰥夫或寡婦 4)離婚 5)分居
3. 您是否與某人(尚未合法結婚)有海誓山盟的關係(包括訂婚、口頭誓約...)? 0)否 1)是
4. 您的出生地： 6)台澎金馬地區 7)其他：
5. 您是否有小孩? 0)沒有 1)有(包括過繼、合法收養...)
6. 在過去一年中，您是否有改變您的居住情況(包括搬遷、移居...)? 0)否 1)是
7. 您現在和誰同住？
8. 最高教育程度? 1)高中肄業 2)高中(職)畢業 3)專科畢業(二、三、五專) 4)大學畢業 5)碩士 6)博士 7)其他：
9. 您目前的就學情況：0)不是學生 1)選修生(part-time) 2)全修生(full-time)
10. 您目前的就業情況：1)全職(或數職) 2)兼職(每週少於35小時) 3)自營商 4)理家 5)無業
11. 工作型態：
 - 0) 無業
 - 1) 一般作業員
 - 2) 半技術機械操作員
 - 3) 專業機械操作員
 - 4) 辦事員或銷售員
 - 5) 小型企業雇主或半專業主管
 - 6) 中型企業雇主或專業主管
 - 7) 大型企業雇主或高級專業主管
 - 8) 其他：

B. 父母基本資料:(請依照您現在家庭情況來回答下列問題，並將答案填入答案卷)

11. 父親婚姻狀況：1)單身(從未結婚) 2)結婚中(與您母親) 3)鰥夫 4)離婚 5)分居 6)再娶
母親婚姻狀況：1)單身(從未結婚) 2)結婚中(與您父親) 3)寡婦 4)離婚 5)分居 6)再嫁
13. 父親最高教育程度：1)高中以下 2)高中 3)專科 4)大學 5)碩士 6)博士 7)其他
母親最高教育程度：1)高中以下 2)高中 3)專科 4)大學 5)碩士 6)博士 7)其他
14. 父親現在或最近的職業(或不知道)：
母親現在或最近的職業(或不知道)：

C. 性意識及性行為調查(請依照您個人情況來回答下列問題，並將答案填入答案卷)：

15. 下列哪一個類別最能形容您的「性傾向」(Sexual Orientation)? 1)異性戀 2)同性戀 3)雙性戀
16. 請簡單列出幾個您認定自己性傾向的因素：

下列哪些人知道您的性傾向（請在答案卷上選1、2或0）：

	不知道	知道	不切實際情況
17. 父親	(1)	(2)	(0)
18. 母親	(1)	(2)	(0)
19. 一個或多個兄弟姊妹	(1)	(2)	(0)
20. 配偶或重要關係人	(1)	(2)	(0)
21. 不固定的性伴侶	(1)	(2)	(0)
22. 一個或兩個好友	(1)	(2)	(0)
23. 大多數的朋友	(1)	(2)	(0)
24. 很多人都知道（我很公開）	(1)	(2)	(0)

25. 下列是不同程度的性經驗。請依照0到7的順序閱讀，並選一個最能描述您過去到現在的敘述：

- 0) 我所有的性經驗都是和異性發生，並在這些經驗中達到性衝動或性高潮。
- 1) 我大多數的性經驗是和異性發生，並在這些經驗中達到性衝動或性高潮。
- 2) 我幾乎沒有和同性發生過性經驗，也沒有因此達到性衝動或性高潮。
- 3) 我和同性、異性都有相同次數的性經驗，並在這些經驗中達到性衝動或性高潮。
- 4) 我幾乎沒有和異性發生過性經驗，也沒有因此達到性衝動或性高潮。
- 5) 我大多數的性經驗是和同性發生，並在這些經驗中達到性衝動或性高潮。
- 6) 我所有的性經驗都是和同性發生，並在這些經驗中達到性衝動或性高潮。
- 7) 我不會有任何的性經驗。

26. 您最早在幾歲時清楚地知道對性的渴望 (Sexual Desires)？

27. 這個性渴望或性慾是針對哪一種性別？ 1) 女性 2) 男性

28. 您的性渴望或性慾是否曾經有不確定地改變（在同性與異性間徘徊）？ 1)是 0)不是

29. 在生理和感情上，您現在是否對同性的人產生性渴望？

- 1)在生理上是 2)在感情上是 3)兩者皆是 0)兩者皆非

30. 在生理和感情上，您過去是否對同性的人產生性渴望？

- 1)在生理上是 2)在感情上是 3)兩者皆是 0)兩者皆非

31. 在生理和感情上，您現在是否對異性的人表達性渴望？

- 1)在生理上是 2)在感情上是 3)兩者皆是 0)兩者皆非

32. 在生理和感情上，您過去是否對異性的人表達性渴望？

- 1)在生理上是 2)在感情上是 3)兩者皆是 0)兩者皆非

33. 在夢境中，您會夢到與誰發生性關係？ 1)女性 2)男性 3)兩者皆是 0)兩者皆非

34. 下列敘述是不同程度的性經驗。請依照0到7的順序閱讀，並圈選一個最能描述您個人未來對於性行為所偏愛及喜好的敘述：

- 0) 我期待所有的性經驗都是和異性發生，並在這些經驗中達到性衝動或性高潮。
- 1) 我希望大多數的性經驗是和異性發生，並在這些經驗中達到性衝動或性高潮。
- 2) 我幾乎不可能和同性發生性經驗，也不會因此達到性衝動或性高潮。
- 3) 我和同性、異性都有相同次數的性經驗，並在這些經驗中達到性衝動或性高潮。
- 4) 我幾乎不可能和異性發生性經驗，也不會因此達到性衝動或性高潮。
- 5) 我希望大多數的性經驗是和同性發生，並在這些經驗中達到性衝動或性高潮。
- 6) 我期待所有的性經驗都是和同性發生，並在這些經驗中達到性衝動或性高潮。
- 7) 我將不會有任何的性經驗。

35. 在生理上，您的性別是（選一）： 1)女性 2)男性

下面七個問題是問到您對於男人和女人「性興趣」(sexual interests)的強度和頻率。請由下面三個情境來考慮來回答這七個問題：1)當您對男人或女人產生性吸引；2)當您有性幻想、白日夢或夢到關於男人或女人；3)當您被男人或女人挑逗產生的性衝動。

36. 在過去一年中，我的「性興趣」是（選一）：

- 0) 完全地異性戀。
- 1) 絕大多數的情況是異性戀，而非常少的情況是同性戀。
- 2) 大部份是異性戀多於同性戀。
- 3) 異性戀和同性戀佔同樣地份量。
- 4) 大部份是同性戀多於異性戀。
- 5) 絕大多數的情況是同性戀，而非常少的情況是異性戀。
- 6) 完全地同性戀。
- 7) 在過去一年中，不曾產生任何的性興趣。

37. 在過去一年中，您對於多少不同的男人產生「性興趣」（選一）：

- 0) 沒有
- 1) 1個
- 2) 2個
- 3) 3-5個
- 4) 6-10個
- 5) 11-49個
- 6) 50-99個
- 7) 100個或更多

38. 在過去一年中，平均而言，您對於某一男子產生「性興趣」的頻率是（選一）：

- 0) 從來沒有
- 1) 一個月不到1次
- 2) 一個月1-3次
- 3) 一星期1次
- 4) 一星期2-3次
- 5) 一星期4-6次
- 6) 一天1次

39. 在過去一年中，您對某一男子感到有「性興趣」的強度是（選一）：

- 0) 一點也不感興趣
- 1) 些微地感興趣
- 2) 有些感興趣
- 3) 有興趣
- 4) 明顯地感興趣
- 5) 非常地感興趣
- 6) 完全地感興趣

40. 在過去一年中，您對於多少不同的女人產生「性興趣」（選一）：
- | | |
|---------|------------|
| 0) 沒有 | 4) 6-10個 |
| 1) 1個 | 5) 11-49個 |
| 2) 2個 | 6) 50-99個 |
| 3) 3-5個 | 7) 100個或更多 |
41. 在過去一年中，平均而言，您對於某一女子產生「性興趣」的頻率是（選一）：
- | | |
|------------|------------|
| 0) 從來沒有 | 4) 一星期2-3次 |
| 1) 一個月不到1次 | 5) 一星期4-6次 |
| 2) 一個月1-3次 | 6) 一天1次 |
| 3) 一星期1次 | |
42. 在過去一年中，您對某一女子感到有「性興趣」的強度是（選一）：
- | | |
|------------|-----------|
| 0) 一點也不感興趣 | 4) 明顯地感興趣 |
| 1) 些微地感興趣 | 5) 非常地感興趣 |
| 2) 有些感興趣 | 6) 完全地感興趣 |
| 3) 有興趣 | |

下面五個問題是問到您個人「性接觸」(sexual contact) 的頻率。提到性接觸的頻率是指爲了達到性滿足的目的，您的身體接觸到另一個男人或女人的身體。

43. 在過去一年中，我的「性接觸」一直是（選一）：
- 0 完全地異性戀。
 - 1 絕大多數的情況是異性戀，而非常少的情況是同性戀。
 - 2 大部份是異性戀多於同性戀。
 - 3 異性戀和同性戀佔同樣地份量。
 - 4 大部份是同性戀多於異性戀。
 - 5 絕大多數的情況是同性戀，而非常少的情況是異性戀。
 - 6 完全地同性戀。
 - 7 在過去一年中，我不曾有任何的性接觸。

44. 在過去一年中，您和多少不同的男人發生「性接觸」（選一）：
- | | |
|---------|------------|
| 0) 沒有 | 4) 6-10個 |
| 1) 1個 | 5) 11-49個 |
| 2) 2個 | 6) 50-99個 |
| 3) 3-5個 | 7) 100個或更多 |
45. 在過去一年中，平均而言，您和某一男子發生「性接觸」的頻率是（選一）：
- | | |
|------------|------------|
| 0) 從來沒有 | 4) 一星期2-3次 |
| 1) 一個月不到1次 | 5) 一星期4-6次 |
| 2) 一個月1-3次 | 6) 一天1次 |
| 3) 一星期1次 | |
46. 在過去一年中，您和多少不同的女人發生「性接觸」（選一）：
- | | |
|---------|------------|
| 0) 沒有 | 4) 6-10個 |
| 1) 1個 | 5) 11-49個 |
| 2) 2個 | 6) 50-99個 |
| 3) 3-5個 | 7) 100個或更多 |
47. 在過去一年中，平均而言，您和某一女子發生「性接觸」的頻率是（選一）：
- | | |
|------------|------------|
| 0) 從來沒有 | 4) 一星期2-3次 |
| 1) 一個月不到1次 | 5) 一星期4-6次 |
| 2) 一個月1-3次 | 6) 一天1次 |
| 3) 一星期1次 | |
48. 在過去一年中，您有多少次陰道性交時未使用保險套？
- | | |
|---------|------------|
| 0) 沒有 | 4) 6-10次 |
| 1) 1次 | 5) 11-49次 |
| 2) 2次 | 6) 50-99次 |
| 3) 3-5次 | 7) 100次或更多 |
49. 在過去一年中，您有多少次肛門性交時未使用保險套？
- | | |
|---------|------------|
| 0) 沒有 | 4) 6-10次 |
| 1) 1次 | 5) 11-49次 |
| 2) 2次 | 6) 50-99次 |
| 3) 3-5次 | 7) 100次或更多 |

下面四個問題是問到您個人對自己性傾向的認定。

50. 我覺得我自己是（選一）：
- | | |
|---|--------------------------|
| 0 | 完全地異性戀。 |
| 1 | 絕大多數的情況是異性戀，而非常少的情況是同性戀。 |
| 2 | 大部份是異性戀多於同性戀。 |
| 3 | 異性戀和同性戀佔同樣地份量。 |
| 4 | 大部份是同性戀多於異性戀。 |
| 5 | 絕大多數的情況是同性戀，而非常少的情況是異性戀。 |
| 6 | 完全地同性戀。 |
| 7 | 在過去一年中，尚未認定任何的性傾向。 |

51. 我覺得我自己是 (選一) :
- | | |
|------------|---------------|
| 0) 一點也不同性戀 | 4) 明顯地同性戀 |
| 1) 些微地同性戀 | 5) 非常地同性戀 |
| 2) 輕量地同性戀 | 6) 完全地同性戀 |
| 3) 中量地同性戀 | 7) 尚未認定任何的性傾向 |
52. 我覺得我自己是 (選一) :
- | | |
|-----------|---------------|
| 0) 完全地異性戀 | 4) 輕量地異性戀 |
| 1) 非常地異性戀 | 5) 些微地異性戀 |
| 2) 明顯地異性戀 | 6) 一點也不異性戀 |
| 3) 中量地異性戀 | 7) 尚未認定任何的性傾向 |
53. 我覺得我自己是 (選一) :
- | | |
|------------|---------------|
| 0) 一點也不雙性戀 | 4) 明顯地雙性戀 |
| 1) 些微地雙性戀 | 5) 非常地雙性戀 |
| 2) 輕量地雙性戀 | 6) 完全地雙性戀 |
| 3) 中量地雙性戀 | 7) 尚未認定任何的性傾向 |

請依照您個人情況與經驗用下列量表來選一個適合的答案。

第一部份：在和異性相處時，您做過...

從來沒有 一次或兩次 三到四次 四到十次 十次以上

54. 口對口接吻 (無論是否有接觸舌頭)	0	1	2	3	4
55. 觸摸或愛撫對方的乳房	0	1	2	3	4
56. 以口來接觸對方的乳房	0	1	2	3	4
57. 用手去撫弄對方的性器官	0	1	2	3	4
58. 以口來接觸對方的性器官	0	1	2	3	4
59. 裸體躺在對方的身旁彼此挑逗愛撫並卻無性交動作	0	1	2	3	4
60. 陰道性交並有抽送的動作	0	1	2	3	4
61. 要求對方提供肛門，達到肛交的目的	0	1	2	3	4
62. 配合對方要求提供您自己的肛門，達到肛交的目的	0	1	2	3	4
63. 口對口接吻 (無論是否有接觸舌頭)	0	1	2	3	4
64. 觸摸或愛撫對方的乳房	0	1	2	3	4
65. 以口來接觸對方的乳房	0	1	2	3	4

第二部份：在和同性相處時，您做過...

從來沒有 一次或兩次 三到四次 四到十次 十次以上

66. 用手去撫弄對方的性器官	0	1	2	3	4
67. 以口來接觸對方的性器官	0	1	2	3	4
68. 裸體躺在對方的身旁彼此挑逗愛撫並卻無性交動作	0	1	2	3	4
69. 陰道性交並有抽送的動作	0	1	2	3	4
70. 要求對方提供肛門，達到肛交的目的	0	1	2	3	4
71. 配合對方要求提供您自己的肛門，達到肛交的目的	0	1	2	3	4

某些事情是我們不願看見卻不幸地發生。請依照您個人情況，先回答(圈選)下列事件是否曾發生在您身上；如果回答「是」則請您估計第一次發生時，自己和對方的年齡：

<u>圈選一</u>		您的年齡	對方年齡
72. 是 否	某人向您暴露他(她)的性器官	_____	_____
73. 是 否	在脅迫下，您向某人暴露自己的性器官	_____	_____
74. 是 否	某人接觸或撫弄您的性器官	_____	_____
75. 是 否	在脅迫下，您接觸或撫弄某人的性器官	_____	_____
76. 是 否	某人對您做出性交的動作	_____	_____
77. 是 否	某人對您做出口交的動作	_____	_____
78. 是 否	您對某人做出口交的動作	_____	_____
79. 是 否	在脅迫下，您從事性活動以供他(她)觀賞	_____	_____
80. 是 否	與某人做出肛交的動作	_____	_____
81. 是 否	其他 (請說明)：_____	_____	_____
82. 是 否	上述事件從未發生過		

如果上述事件曾發生在您身上，請選擇一件最困擾您的事並回答下列問題：

83. 某人是誰？ 1)家庭成員 2)朋友或認識的人 3)陌生人
84. 如果是家庭成員，您與此人的關係是：
85. 此人的性別是： 1)女性 2)男性 3)同時有女性和男性涉入
86. 此行為發生多少次？ 1)1次 2)2次 3)3-4次 4)5次以上
87. 這事件發生的期間？ 1)只有1次 2)不到一個月 3)數月 4)一年或更久

APPENDIX C

ENGLISH BACKTRANSLATION OF ORIGINAL TAIWAN QUESTIONNAIRE

This is a questionnaire about your ideas of sexuality and sexual behavior. Your participation is anonymous and confidential. Your questionnaire will be a part of data from all other college students in Taiwan, and these data from Taiwan will be sent to the University of North Texas in order to process the analyses and comparisons.

A. General Demographics Questionnaire: (Please answer as best you can based on your personal situation)

1. Age: _____

2. Current Marital Status:

___ 1) Single (never married) ___ 2) Married ___ 3) Widowed
___ 4) Divorced ___ 5) Separated

3. Are you now in a committed relationship with a person but not legally married yet?
___ 0) No ___ 1) Yes

4. In which group do you mostly place yourself?

___ 6) Taiwan's area ___ 7) Other: _____

5. Do you have any children? ___ 0) No ___ 1) Yes (including step or legally adopted)

6. Has your living situation changed in the past year? ___ 0) No ___ 1) Yes

7. Who are you living with now?

8. Highest level of schooling:

___ 1) Less than High school
___ 2) High school graduate or GED
___ 3) Some college, associate degree, technical degree
___ 4) Bachelor's degree
___ 5) Master's degree
___ 6) Doctoral degree
___ 7) Other _____

9. Are you currently in school? ___ 0) No ___ 1) Yes, part-time ___ 3) Yes, full-time

10. Current Employment:

- 1) Employed full time or several jobs
- 2) Employed part-time (less than 35 hours per week)
- 3) Self-employed
- 4) Homemaker
- 5) Unemployed

11. Type of job:

- | | |
|---|---|
| <input type="checkbox"/> 0) Unemployed | <input type="checkbox"/> 5) Administrator, owner of small business, semi-professional |
| <input type="checkbox"/> 1) Unskilled worker | <input type="checkbox"/> 6) Major business manager, owner medium-sized business, professional |
| <input type="checkbox"/> 2) Machine operator or semiskilled | <input type="checkbox"/> 7) Higher executive, large business owner, major professional |
| <input type="checkbox"/> 3) Professional technician | <input type="checkbox"/> 8) Other _____ |
| <input type="checkbox"/> 4) Clerical and sale associate | |

B. Basic information about your parents (Please check one):

12. Current Marital Status:

- | <u>Father</u> | <u>Mother</u> |
|---|--------------------------|
| <input type="checkbox"/> 1) Single | <input type="checkbox"/> |
| <input type="checkbox"/> 2) Married | <input type="checkbox"/> |
| <input type="checkbox"/> 3) Widowed | <input type="checkbox"/> |
| <input type="checkbox"/> 4) Divorced | <input type="checkbox"/> |
| <input type="checkbox"/> 5) Separated | <input type="checkbox"/> |
| <input type="checkbox"/> 6) Both my parents are remarried but not to each other | |

13. Highest Educational level:

- | <u>Father</u> | <u>Mother</u> |
|--|--------------------------|
| <input type="checkbox"/> 1) Less than H.S. | <input type="checkbox"/> |
| <input type="checkbox"/> 2) H.S. or GED | <input type="checkbox"/> |
| <input type="checkbox"/> 3) Some College | <input type="checkbox"/> |
| <input type="checkbox"/> 4) Bachelor's | <input type="checkbox"/> |
| <input type="checkbox"/> 5) Master's | <input type="checkbox"/> |
| <input type="checkbox"/> 6) Doctorate | <input type="checkbox"/> |
| <input type="checkbox"/> 7) Other: | <input type="checkbox"/> |

14. Parents' Occupations (current or most recent, or "Don't Know"):

- | <u>Father</u> | <u>Mother</u> |
|---------------|---------------|
| _____ | _____ |

C. Sexuality and Sexual behavior Survey (please answer as best you can based on your personal situation):

15. Which category best describes your sexual orientation?

- 1) Heterosexual 2) Homosexual 3) Bisexual

16. Briefly list the factors you use to identify your sexual orientation:

The following people know my sexual orientation: (please check)

Does not know Knows Does not apply

- | | | | |
|---------------------------------|----------|----------|----------|
| 17. My father | _____ 1) | _____ 2) | _____ 0) |
| 18. My mother | _____ 1) | _____ 2) | _____ 0) |
| 19. One or more my siblings | _____ 1) | _____ 2) | _____ 0) |
| 20. Spouse or significant other | _____ 1) | _____ 2) | _____ 0) |
| 21. Casual sexual partners | _____ 1) | _____ 2) | _____ 0) |
| 22. One or two best friends | _____ 1) | _____ 2) | _____ 0) |
| 23. Most of my friends | _____ 1) | _____ 2) | _____ 0) |
| 24. Many people; I am very open | _____ 1) | _____ 2) | _____ 0) |

25. Following are descriptions of different types of sexual behavior (in order from 0 to 7). Please **choose** a number of the behavior that you feel **most closely** describes the way your sexual behavior has been from past to now.

- 0 I have had all of my sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.
- 1 I have had a majority of my sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.
- 2 I have rarely had sexual experiences with persons the **same** sex as myself producing in erotic arousal or orgasm.
- 3 I have had sexual experiences equally as often with persons the **same and opposite** sex as myself producing in erotic arousal or orgasm.
- 4 I have rarely had sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.
- 5 I have had a majority of my sexual experiences with persons the **same** sex as myself producing in erotic arousal or orgasm.
- 6 I have had all my sexual experiences with persons of the **same** sex producing in erotic arousal or orgasm.
- 7 I have never had a sexual experience.

26. At what age did you know clearly about your sexual desire?

27. How was this sexual desire first toward? ____ 1) Female ____ 2) Male

28. Did you change your desire back and forth for a period of time? ____ 1) Yes ____ 0) No

29. How do you experience your sexual desires now toward persons of the same sex:

____ 1) Physically ____ 2) Emotionally ____ 3) Both ____ 0) Neither

30. How did you experience your sexual desires in the past toward persons of the same sex:

____ 1) Physically ____ 2) Emotionally ____ 3) Both ____ 0) Neither

31. How do you express your sexual desires now toward persons of the opposite sex:

____ 1) Physically ____ 2) Emotionally ____ 3) Both ____ 0) Neither

32. How did you express your sexual desires in the past toward persons of the opposite sex:

____ 1) Physically ____ 2) Emotionally ____ 3) Both ____ 0) Neither

33. In dreams, do you have visions of sexual relations with:

____ 1) Women ____ 2) Men ____ 3) Both ____ 0) Neither

34. Following are descriptions of sexual behavior in various degrees in order from 0 to 7. Please **choose** a number of the behavior that you feel **most closely** describes the way you would **prefer** your sexual behavior to be **in the future**.

0 I *prefer* to have all of my sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.

1 I *prefer* to have a majority of my sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.

2 I *prefer* to rarely have sexual experiences with persons the **same** sex as myself producing in erotic arousal or orgasm.

- 3 I *prefer* to have sexual experiences equally as often with persons the **same and opposite** sex as myself producing in erotic arousal or orgasm.
- 4 I *prefer* to rarely have sexual experiences with persons the **opposite** sex as myself producing in erotic arousal or orgasm.
- 5 I *prefer* to have a majority of my sexual experiences with persons the **same** sex as myself producing in erotic arousal or orgasm.
- 6 I *prefer* to have all of my sexual experiences with persons of the **same** sex producing in erotic arousal or orgasm.
- 7 I *prefer* to never have sexual experiences.

35. Physically, what is your biological sex (check one): ____ 1) female ____ 2) male

The following seven questions are asked about the intensity and frequency of your sexual interest in men and women. Consider times you were: 1) **sexually attracted to a man or woman**; 2) *had sexual fantasies, daydreams, or dreams*; or 3) were sexually aroused by a man or woman.

36. During the past year, my sexual ***interests*** have been (choose one):

- 0) Totally heterosexual.
- 1) Mostly heterosexual, only incidentally homosexual.
- 2) Mostly heterosexual, but more than incidentally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than incidentally heterosexual.
- 5) Mostly homosexual, only incidentally heterosexual.
- 6) Totally homosexual.
- 7) I have had no sexual interests during the past year.

37. During the past year, how many different men were you sexually ***interested*** in (choose one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

38. During the past year, on average, how often were you sexually ***interested*** in a man (choose one):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

39. During the past year, the most I was sexually ***interested*** in a man was (choose one):

- | | |
|------------------------------------|---------------------------------------|
| 0) Not at all sexually interested. | 4) Significantly sexually interested. |
| 1) Slightly sexually interested. | 5) Very sexually interested. |
| 2) Mildly sexually interested. | 6) Extremely sexually interested. |
| 3) Moderately sexually interested. | |

40. During the past year, how many different women were you sexually ***interested*** in (choose one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

41. During the past year, on average, how often were you sexually ***interested*** in a woman (choose one):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

42. During the past year, the most I was sexually ***interested*** in a woman was (choose one):

- | | |
|------------------------------------|---------------------------------------|
| 0) Not at all sexually interested. | 4) Significantly sexually interested. |
| 1) Slightly sexually interested. | 5) Very sexually interested. |
| 2) Mildly sexually interested. | 6) Extremely sexually interested. |
| 3) Moderately sexually interested. | |

The following five questions are asked the frequency of your sexual contacts. Consider times you had contact between your body and another **man** or **woman's** body for the purpose of sexual satisfaction.

43. During the past year, my sexual **contacts** have been (choose one):

- 0) Exclusively heterosexual.
- 1) Predominantly heterosexual, only incidentally homosexual.
- 2) Predominantly heterosexual, but more than incidentally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Predominantly homosexual, but more than incidentally heterosexual.
- 5) Predominantly homosexual, only incidentally heterosexual.
- 6) Exclusively homosexual.
- 7) I have had no sexual contacts

44. During the past year, how many different men did you have sexual **contact** with (choose one):

- 0) None
- 1) 1
- 2) 2
- 3) 3-5
- 4) 6-10
- 5) 11-49
- 6) 50-99
- 7) 100 or more

45. During the past year, on average, how often did you have sexual **contact** with a man (choose one):

- 0) Never.
- 1) Less than 1 time per month.
- 2) 1-3 times per month.
- 3) 1 time per week.
- 4) 2-3 times per week.
- 5) 4-6 times per week.
- 6) Daily

46. During the past year, how many different women did you have sexual **contact** with (choose one):

- 0) None
- 1) 1
- 2) 2
- 3) 3-5
- 4) 6-10
- 5) 11-49
- 6) 50-99
- 7) 100 or more

47. During the past year, on average, how often did you have sexual **contact** with a woman (choose one):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

48. During the past year, how often have you had vaginal sexual intercourse without a condom (choose one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

49. During the past year, how often have you had anal sexual intercourse without a condom (choose one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

The following four questions are asked your sexual orientation identity.

50. I consider myself (choose one answer):

- 0) Totally heterosexual.
- 1) Mostly heterosexual, only incidentally homosexual.
- 2) Mostly heterosexual, but more than incidentally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than incidentally heterosexual.
- 5) Mostly homosexual, only incidentally heterosexual.
- 6) Totally homosexual.
- 7) I do not identify with any sexual orientation.

51. I consider myself (choose one answer):

- 0) Not at all homosexual
- 1) Slightly homosexual
- 2) Mildly homosexual
- 3) Moderately homosexual
- 4) Significantly homosexual
- 5) Very homosexual
- 6) Completely homosexual
- 7) I do not identify with any sexual orientation

52. I consider myself (choose one answer):

- 0) Completely heterosexual
- 1) Very heterosexual
- 2) Significantly heterosexual
- 3) Moderately heterosexual
- 4) Mildly heterosexual
- 5) Slightly heterosexual
- 6) Not at all heterosexual
- 7) I do not identify with any sexual orientation

53. I consider myself (choose one answer):

- 0) Not at all bisexual
- 1) Slightly bisexual
- 2) Mildly bisexual
- 3) Moderately bisexual
- 4) Significantly bisexual
- 5) Very bisexual
- 6) Completely bisexual
- 7) I do not identify with any sexual orientation

In the following section, please indicate how much of each of the following items applies to you by using the scale as follows:

Never	Once or twice	Three to four times	Four to ten times	More than ten times
0	1	2	3	4

First Part: How many times have you done the following? (with a person of the opposite sex)

- | | | | | | |
|---|---|---|---|---|---|
| 54. Kissing on the mouth with or without tongue contact. | 0 | 1 | 2 | 3 | 4 |
| 55. Touching or fondling another person's breasts | 0 | 1 | 2 | 3 | 4 |
| 56. Mouth contact with another person's breasts | 0 | 1 | 2 | 3 | 4 |
| 57. Hand manipulation of another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 58. Mouth contact with another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 59. Lying prone on partner, while nude, petting without penetration | 0 | 1 | 2 | 3 | 4 |
| 60. Vaginal sexual intercourse with penetration. | 0 | 1 | 2 | 3 | 4 |

61. Performing anal intercourse on a person of the opposite sex. 0 1 2 3 4
62. Having anal intercourse performed on you by a person of the opposite sex. 0 1 2 3 4

Second Part: How many times have you done the following? (with a person of the same sex)

63. Kissing on the mouth with or without tongue contact. 0 1 2 3 4
64. Touching or fondling another person's breasts 0 1 2 3 4
65. Mouth contact with another person's breasts 0 1 2 3 4
66. Hand manipulation of another person's genitalia. 0 1 2 3 4
67. Mouth contact with another person's genitalia. 0 1 2 3 4
68. Lying prone on partner, while nude, petting without penetration. 0 1 2 3 4
69. Vaginal sexual intercourse with penetration. 0 1 2 3 4
70. Performing anal intercourse on a person of the opposite sex. 0 1 2 3 4
71. Having anal intercourse performed on you by a person of the opposite sex. 0 1 2 3 4

Sometimes, there was something that we don't like, but unfortunately occurred. Please indicate if any of these incidents ever happened to you, your approximate age at the time of the first occurrence, and the approximate age of the other person involved.

- | | Your age | | Their age | | |
|-----|----------|-----|-----------|-------|--|
| | (1) | (0) | | | |
| 72. | Yes | No | _____ | _____ | Another person showed his/her sex organs to you. |
| 73. | Yes | No | _____ | _____ | You showed your sex organs to another person at his/her request. |
| 74. | Yes | No | _____ | _____ | Someone touched or fondled your sexual organs. |
| 75. | Yes | No | _____ | _____ | You touched or fondled another person's sex organs at his/her request. |
| 76. | Yes | No | _____ | _____ | Another person had sexual intercourse with you. |
| 77. | Yes | No | _____ | _____ | Another person performed oral sex on you. |
| 78. | Yes | No | _____ | _____ | You performed oral sex on another person. |

79. Yes No _____ Someone told you to engage in sexual activity so that he/she could watch.
80. Yes No _____ You engaged in anal sex with another person.
81. Yes No _____ Other (please specify): _____
82. Yes No _____ None of these events ever occurred.

If any of the incidents (listed above) has occurred to you, please choose the **one behavior** that bothered you the **most** and answer the following questions:

83. Who was the other person involved?

_____ 1) family member _____ 2) friend or acquaintance _____ 3) stranger

84. If they were a family member, how were they related to you? _____

85. What was the sex of the other person(s) involved?

_____ 1) Female _____ 2) Male _____ 3) Both male and female at the same time

86. How many times did this behavior occur?

_____ just once _____ twice _____ 3-4 times _____ 5 times or more

87. Over how long a period did this behavior occur?

_____ just once _____ a month or less _____ several months _____ a year or more

88. How much did this experience *bother* you at the time?

1	2	3	4	5
Not at all		Moderately		Extremely

89. How much does this experience *bother* you *now*?

1	2	3	4	5
Not at all		Moderately		Extremely

90. Please brief describe what is most bothered you in that incident?

**Please check whether you have answered all the questions.
Thank you for your input and cooperation!**

APPENDIX D
USA QUESTIONNAIRE

PLEASE do NOT put your name on this Questionnaire!!

Dating Preferences and Behaviors Questionnaire

1. Age: _____

2. Current Legal Marital Status:

___ 1) Single (never married) ___ 2) Married ___ 3) Widowed
___ 4) Divorced ___ 5) Separated

3. Are you now in a committed relationship with a person to whom you are not legally married?
 ___ 0) No ___ 1) Yes

4. In which group do you mostly place yourself?
 ___ 1) African-American/Black ___ 4) Caucasian
 ___ 2) American Indian/Alaskan Native ___ 5) Hispanic
 ___ 3) Asian/Pacific Islander ___ 6) Other _____

5. Do you have children? ___ 0) No ___ 1) Yes (including step or adopted)

6. Who do you live with? _____

7. Has your living arrangement changed in the in the past year? ___ 0) No ___ 1) Yes

8. Highest level of education:
 ___ 1) Less than High school ___ 5) Masters degree
 ___ 2) High school graduate or GED ___ 6) Doctorate: Ph.D., M.D., J.D.
 ___ 3) Some college, associate degree, technical degree ___ 7) Other _____
 ___ 4) College graduate

9. Are you in school now? ___ 0) No ___ 1) Yes, part-time ___ 2) Yes, full-time

10. Current Employment:
 ___ 1) Employed full time or more ___ 4) Homemaker
 ___ 2) Employed part-time (less than 35 hours per week) ___ 5) Unemployed
 ___ 3) Self-employed

Parents' Current Marital Status:

11. Father 12. Mother
- _____ 1) Single _____
- _____ 2) Married _____
- _____ 3) Widowed _____
- _____ 4) Divorced _____
- _____ 5) Separated _____
- _____ 6) Both my parents are married
but not to each other
- _____ 7) Deceased _____

Parents' Highest Educational level:

13. Father 14. Mother
- _____ 1) Less than H.S. _____
- _____ 2) H.S. or GED _____
- _____ 3) Some College _____
- _____ 4) College Grad. _____
- _____ 5) Masters _____
- _____ 6) Doctorate _____
- _____ 7) Other: _____

Parents' Occupations (current or most recent, even if deceased):

15. Father

16. Mother

17. Which category best describes your sexual orientation?

- _____ 1) Heterosexual _____ 2) Bisexual _____ 3) Homosexual
- _____ 4) Unsure/Questioning _____ 5) Other _____

18. At what age did you first come to describe yourself that way? Age: _____

19. Please explain what led you to identify your sexual orientation:

The following people know my sexual orientation: (please check)

	<u>Does not know</u>	<u>Knows</u>	<u>Does not apply</u>
20. My father	_____ 1)	_____ 2)	_____ 0)
21. My mother	_____ 1)	_____ 2)	_____ 0)
22. One or more brothers or sisters	_____ 1)	_____ 2)	_____ 0)
23. Spouse or significant other	_____ 1)	_____ 2)	_____ 0)
24. Casual sexual partners	_____ 1)	_____ 2)	_____ 0)
25. One or two best friends	_____ 1)	_____ 2)	_____ 0)
26. Most of my friends	_____ 1)	_____ 2)	_____ 0)
27. Many people; I am very public	_____ 1)	_____ 2)	_____ 0)

28. Please read these descriptions, in order from 0 to 7. Then, please **circle** the number of the behavior that you feel **most closely** describes your sexual behavior **in the past, up to and including today**.

- 0 I have had **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.
- 1 I have had more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and less than a **fourth** of my sexual experiences with persons the **same** sex as myself.
- 2 I have had between **one-half and three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons the **same** sex as myself.
- 3 I have had sexual experiences (resulting in erotic arousal or orgasm) about **half** of the time with persons the **opposite** sex as myself and about **half** of the time with persons of the **same** sex as myself.
- 4 I have had between **one-half and three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons the **opposite** sex as myself.
- 5 I have had more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and less than a **fourth** of my sexual experiences with persons the **opposite** sex as myself.
- 6 I have had **all** my sexual experiences (resulting in erotic arousal or orgasm) with persons of the **same** sex.
- 7 I have **never** had a sexual experience resulting in erotic arousal or orgasm.

29. At what age did you first notice your sexual desires? _____

30. What was happening at that time that let you know that you were having sexual desires?

31. Toward whom was this desire first directed? ___ 1) Female ___ 2) Male ___ 3) Other

32. Did the direction of your desire (toward males versus females) change back and forth for a period of time? ___ 1) Yes ___ 0) No

33. How do you experience your sexual desires **now** toward persons of the **opposite** sex:

___1) Physically ___2) Emotionally ___3) Both ___4) Neither ___0) Don't feel any

34. How did you experience your sexual desires in the **past** toward persons of the **opposite** sex:

___1) Physically ___2) Emotionally ___3) Both ___4) Neither ___0) Don't feel any

35. How do you **express** your sexual desires **now** toward persons of the **opposite** sex:

___1) Physically ___2) Emotionally ___3) Both ___4) Neither ___0) Don't feel any

36. How did you **express** your sexual desires in the **past** toward persons of the **opposite** sex:

___1) Physically ___2) Emotionally ___3) Both ___4) Neither ___0) Don't feel any

37. In dreams, do you have experiences of sexual relations with:

___1) Women ___2) Men ___3) Both ___4) Neither

38. Please **circle** the number of the behavior that you feel **most closely** describes the way you would **prefer** your sexual behavior to be **in the future**.

- 0 I prefer to have **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself.
- 1 I prefer to have more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and less than a **fourth** of my sexual experiences with persons of the **same** sex as myself.
- 2 I prefer to have between **one-half and three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **opposite** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons of the **same** sex as myself.
- 3 I prefer to have sexual experiences (resulting in erotic arousal or orgasm) about **half** of the time with persons the **same** and about **half** of the time with persons the **opposite** sex as myself.

- 4 I *prefer* to have between **one-half to three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and **one-fourth to one-half** of my sexual experiences with persons the **opposite** sex as myself
- 5 I *prefer* to have more than **three-fourths** of my sexual experiences (resulting in erotic arousal or orgasm) with persons the **same** sex as myself, and less than a **fourth** of my sexual experiences with persons the **opposite** sex as myself.
- 6 I *prefer* to have **all** of my sexual experiences (resulting in erotic arousal or orgasm) with persons of the **same** sex.
- 7 I *prefer never* to have sexual experiences (resulting in erotic arousal or orgasm).

Instructions: Below is list of problems and complaints that people sometimes have. Please read each one carefully. After you have done so, please rate how much that problem has bothered or distressed you DURING THE PAST WEEK INCLUDING TODAY. To make your ratings, use the scale shown below:

1 = Not at all 2 = A little bit 3 = Quite a bit 4 = Extremely

EXAMPLE: If you feel that "backaches" have been bothering you quite a bit during the past week, you would record your response as shown below:

	1	2	3	4
Example. Backaches	___	___	<u>X</u>	___

During the past week, including today, how much were you bothered by:

	1	2	3	4
39. Headaches	39. ___	___	___	___
40. Nervousness or shakiness inside	40. ___	___	___	___
41. Being unable to get rid of bad thoughts or ideas	41. ___	___	___	___
42. Faintness or dizziness	42. ___	___	___	___
43. Loss of sexual interest or pleasure	43. ___	___	___	___
44. Feeling critical of others	44. ___	___	___	___
45. Bad dreams	45. ___	___	___	___
46. Difficulty in speaking when you are excited	46. ___	___	___	___

1 = Not at all 2 = A little bit 3 = Quite a bit 4 = Extremely

During the past week, including today, how much were you bothered by:

	1	2	3	4
47. Trouble remembering things	47. ___	___	___	___
48. Worried about sloppiness or carelessness	48. ___	___	___	___
49. Feeling easily annoyed or irritated	49. ___	___	___	___
50. Pains in the heart or chest	50. ___	___	___	___
51. Itching	51. ___	___	___	___
52. Feeling low in energy or slowed down	52. ___	___	___	___
53. Thoughts of ending your life	53. ___	___	___	___
54. Sweating	54. ___	___	___	___
55. Trembling	55. ___	___	___	___
56. Feeling confused	56. ___	___	___	___
57. Poor appetite	57. ___	___	___	___
58. Crying easily	58. ___	___	___	___
59. Feeling shy or uneasy with the opposite sex	59. ___	___	___	___
60. A feeling of being trapped or caught	60. ___	___	___	___
61. Suddenly scared for no reason	61. ___	___	___	___
62. Temper outbursts you could not control	62. ___	___	___	___
63. Constipation	63. ___	___	___	___
64. Blaming yourself for things	64. ___	___	___	___
65. Pains in the lower part of your back	65. ___	___	___	___
66. Feeling blocked in getting things done	66. ___	___	___	___
67. Feeling lonely	67. ___	___	___	___
68. Feeling blue	68. ___	___	___	___
69. Worrying too much about things	69. ___	___	___	___
70. Feeling no interest in things	70. ___	___	___	___
71. Feeling fearful	71. ___	___	___	___
72. Your feelings being easily hurt	72. ___	___	___	___

1 = Not at all 2 = A little bit 3 = Quite a bit 4 = Extremely

During the past week, including today, how much were you bothered by:

	1	2	3	4
73. Having to ask other what you should do	73. ___	___	___	___
74. Feeling others do not understand	74. ___	___	___	___
75. Feeling that people are unfriendly or dislike you	75. ___	___	___	___
76. Having to do things very slowly to insure correctness	76. ___	___	___	___
77. Heart pounding or racing	77. ___	___	___	___
78. Nausea or upset stomach	78. ___	___	___	___
79. Feeling inferior to others	79. ___	___	___	___
80. Soreness of the muscles	80. ___	___	___	___
81. Loose bowel movements	81. ___	___	___	___
82. Trouble falling asleep	82. ___	___	___	___
83. Having to check and double-check what you do	83. ___	___	___	___
84. Difficulty making decisions	84. ___	___	___	___
85. Wanting to be alone	85. ___	___	___	___
86. Trouble getting your breath	86. ___	___	___	___
87. Hot or cold spells	87. ___	___	___	___
88. Having to avoid certain things, places or activities because they frighten you	88. ___	___	___	___
89. Your mind going blank	89. ___	___	___	___
90. Numbness or tingling in parts of your body	90. ___	___	___	___
91. A lump in your throat	91. ___	___	___	___
92. Feeling hopeless about the future	92. ___	___	___	___
93. Trouble concentrating	93. ___	___	___	___
94. Feeling weak in parts of your body	94. ___	___	___	___
95. Feeling tense or keyed up	95. ___	___	___	___
96. Heavy feelings in your arms or legs	96. ___	___	___	___

97. What is your biological sex (choose one answer): _____ 1) female _____ 2) male

The following seven questions are asked to assess the intensity and frequency of your sexual interest in men and/or women. Consider times you were: 1) **sexually attracted to a man or woman**; 2) *had sexual fantasies, daydreams, or dreams about a man or woman*; or 3) were sexually aroused by a man or woman.

98. During the past year, my sexual ***interests*** have been (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I have had no sexual interests during the past year.

99. During the past year, how many different men were you sexually ***interested*** in (circle one answer):

- 0) None
- 1) 1
- 2) 2
- 3) 3-5
- 4) 6-10
- 5) 11-49
- 6) 50-99
- 7) 100 or more

100. During the past year, on average, how often were you sexually ***interested*** in a man (circle one):

- 0) Never.
- 1) Less than 1 time per month.
- 2) 1-3 times per month.
- 3) 1 time per week.
- 4) 2-3 times per week.
- 5) 4-6 times per week.
- 6) Daily

101. During the past year, the most I was sexually ***interested*** in a man was (circle one answer):

- 0) Not at all sexually interested.
- 1) Slightly sexually interested.
- 2) Mildly sexually interested.
- 3) Moderately sexually interested.
- 4) Significantly sexually interested.
- 5) Very sexually interested.
- 6) Extremely sexually interested.

102. During the past year, how many different women were you sexually ***interested*** in (circle one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

103. During the past year, on average, how often were you sexually ***interested*** in a woman (circle one answer):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

104. During the past year, the most I was sexually ***interested*** in a woman was (circle one answer):

- | | |
|------------------------------------|---------------------------------------|
| 0) Not at all sexually interested. | 4) Significantly sexually interested. |
| 1) Slightly sexually interested. | 5) Very sexually interested. |
| 2) Mildly sexually interested. | 6) Extremely sexually interested. |
| 3) Moderately sexually interested. | |

The following five questions are asked to assess the frequency of your sexual contacts. Consider times you had contact between your body and another **man** or **woman's** body for the purpose of sexual gratification.

105. During the past year, my sexual **contacts** have been (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual.
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I have had no sexual contacts

106. During the past year, how many different men did you have sexual **contact** with (circle one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

107. During the past year, on average, how often did you have sexual **contact** with a man (circle one):

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

108. During the past year, how many different women did you have sexual **contact** with (circle one):

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

109. During the past year, on average, how often did you have sexual **contact** with a woman:

- | | |
|--------------------------------|------------------------|
| 0) Never. | 4) 2-3 times per week. |
| 1) Less than 1 time per month. | 5) 4-6 times per week. |
| 2) 1-3 times per month. | 6) Daily |
| 3) 1 time per week. | |

110. During the past year, how often have you had vaginal sexual intercourse without a condom:

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

111. During the past year, how often have you had anal sexual intercourse without a condom:

- | | |
|---------|----------------|
| 0) None | 4) 6-10 |
| 1) 1 | 5) 11-49 |
| 2) 2 | 6) 50-99 |
| 3) 3-5 | 7) 100 or more |

The following four questions are asked to assess your sexual orientation identity.

112. I consider myself (circle one answer):

- 0) Exclusively heterosexual.
- 1) Mostly heterosexual, only rarely homosexual.
- 2) Mostly heterosexual, but more than occasionally homosexual.
- 3) Equally heterosexual and homosexual (bisexual).
- 4) Mostly homosexual, but more than occasionally heterosexual.
- 5) Mostly homosexual, only rarely heterosexual.
- 6) Exclusively homosexual.
- 7) I do not identify with any sexual orientation.
- 8) I identify with a different sexual orientation. (Please describe)_____

113. I consider myself (circle one answer):

- 0) Not at all homosexual
- 1) Slightly homosexual
- 2) Mildly homosexual
- 3) Moderately homosexual
- 4) Significantly homosexual
- 5) Very homosexual
- 6) Completely homosexual
- 7) I do not identify with any sexual orientation

114. I consider myself (circle one answer):

- 0) Completely heterosexual
- 1) Very heterosexual
- 2) Significantly heterosexual
- 3) Moderately heterosexual
- 4) Mildly heterosexual
- 5) Slightly heterosexual
- 6) Not at all heterosexual
- 7) I do not identify with any sexual orientation

115. I consider myself (circle one answer):

- 0) Not at all bisexual
- 1) Slightly bisexual
- 2) Mildly bisexual
- 3) Moderately bisexual
- 4) Significantly bisexual
- 5) Very bisexual
- 6) Completely bisexual
- 7) I do not identify with any sexual orientation

116. At what age did you first **consent** to having oral sex? _____

117. At what age did you first **consent** to having vaginal intercourse? _____

118. At what age did you first **consent** to having anal intercourse? _____

Indicate how much of each of the following items applies to you by using the following format:

Never **Once or twice** **Three to four times** **Four to ten times** **More than ten times**
0 **1** **2** **3** **4**

How many times have you done the following with a person of the **opposite** sex ?

- | | | | | | |
|--|---|---|---|---|---|
| 119. Kissing on the mouth with or without tongue contact. | 0 | 1 | 2 | 3 | 4 |
| 120. Touching or fondling another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 121. Mouth contact with another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 122. Hand manipulation of another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 123. Mouth contact with another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 124. Lying close to, on, or underneath partner, while nude, petting without penetration. | 0 | 1 | 2 | 3 | 4 |
| 125. Vaginal sexual intercourse with penetration. | 0 | 1 | 2 | 3 | 4 |
| 126. Performing anal intercourse on a person of the opposite sex. | 0 | 1 | 2 | 3 | 4 |
| 127. Having anal intercourse performed on you by a person of the opposite sex. | 0 | 1 | 2 | 3 | 4 |

Indicate how much of each of the following items applies to you by using the following format:

Never **Once or twice** **Three to four times** **Four to ten times** **More than ten times**
0 **1** **2** **3** **4**

How many times have you done the following with a person of the **same** sex ?

- | | | | | | |
|--|---|---|---|---|---|
| 128. Kissing on the mouth with or without tongue contact. | 0 | 1 | 2 | 3 | 4 |
| 129. Touching or fondling another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 130. Mouth contact with another person's breasts and/or chest. | 0 | 1 | 2 | 3 | 4 |
| 131. Hand manipulation of another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 132. Mouth contact with another person's genitalia. | 0 | 1 | 2 | 3 | 4 |
| 133. Lying close to, on, or underneath partner, while nude, petting without penetration. | 0 | 1 | 2 | 3 | 4 |
| 134. Vaginal sexual intercourse with penetration. | 0 | 1 | 2 | 3 | 4 |
| 135. Performing anal intercourse on a person of the same sex. | 0 | 1 | 2 | 3 | 4 |
| 136. Having anal intercourse performed on you by a person of the same sex. | 0 | 1 | 2 | 3 | 4 |

Please indicate by circling “yes” or “no” if any of these incidents ever happened to you **when you did not want them to**, your approximate age at the time of the **first** occurrence, and the approximate age of the other person involved.

	(best guess)	Your age	Their age
	(1)	(0)	
137. Another person showed his/her sex organs to you.	Yes	No	___ ___
138. You showed your sex organs to another person at their request.	Yes	No	___ ___
139. Someone touched or fondled your sexual organs.	Yes	No	___ ___
140. You touched or fondled another person’s sex organs at their request.	Yes	No	___ ___
141. Another person had sexual intercourse with you.	Yes	No	___ ___
142. Another person performed oral sex on you.	Yes	No	___ ___
143. You performed oral sex on another person.	Yes	No	___ ___
144. Someone told you to engage in sexual activity so they could watch.	Yes	No	___ ___
145. Another person performed anal sex on you.	Yes	No	___ ___
146. You performed anal sex on another person.	Yes	No	___ ___
147. Other (please specify): _____			___ ___

148. Did any of the events (listed above) ever happen to you?

___ 2) Yes ___ 1) Not sure ___ 0) No

If any of the incidents has ever happened to you, please go back and circle the **one** **experience** that bothered you the **most**. Then answer the following questions with that one experience in mind.

149. Who was the other person involved?

___ 1) family member ___ 2) friend/acquaintance ___ 3) stranger ___ 4) other _____

150. If they were a family member, how were they related to you? _____

151. What was the sex of the other person(s) involved?

___ 1) Female ___ 2) Male ___ 3) Both male and female at the same time

152. How many times did this behavior occur?

___ 1) just once ___ 2) twice ___ 3) 3-4 times ___ 4) 5 times or more

153. Over how long a period did this behavior occur?

___1) just once ___2) a month or less ___3) several months _____4) a year or more

154. How much did this experience *bother* you *at the time*?

1	2	3	4	5
Not at all		Moderately		Extremely

155. How much does this experience *bother* you *now*?

1	2	3	4	5
Not at all		Moderately		Extremely

156. What about the incident(s) bothered you the most?

Some people may find recalling the events described in this questionnaire distressing. If you experience such distress, please call the Counseling and Testing Center at 565-2741 or the Psychology Clinic at 565-2631 (both are located on the University of North Texas campus). The Counseling and Testing Center offers eight (8) free counseling sessions to currently enrolled students at the University of North Texas. The Psychology Clinic can provide counseling services to students or the community population on a sliding fee scale. Please do not hesitate to discuss these options with Mrs. Roberts or her research assistants. Also, your responses remain confidential! Thank you for your participation!

APPENDIX E
USA CONSENT FORM

CONSENT TO PARTICIPATE IN A RESEARCH STUDY

TITLE: Dating Preferences and Behaviors

INVESTIGATORS: Mary K. "Kitty" Roberts, M.A. and Sharon Rae Jenkins, Ph.D.

Department of Psychology University of North Texas
Denton, TX 76203 (940) 565-2671

DESCRIPTION: This study is designed to assess dating preferences and behaviors in college populations. Participation in this study would involve taking one paper-and-pencil test, consisting of general questions about one's dating history, preference for dating and some sexually explicit questions regarding one's sexual experiences. It should take approximately 30 – 45 minutes to complete this test.

BENEFITS: The benefits of participation include the satisfaction of contributing to research regarding current dating preferences and behaviors of individuals. In addition, some instructors may offer extra credit for participation. All persons who participate will have their name entered into a raffle for either gift certificates (such as to local theatres and restaurants) or a grand prize of \$100 in cash.

RISKS: The risks of participation consist of possibly revealing embarrassing information during the course of completing the self-report inventory, and possibly becoming mildly distressed as a result of disclosing such information. Should you experience any distress, at any time, you are encouraged to discuss these feelings with either Dr. Jenkins or Ms. Roberts. Additionally, you may go to the Counseling and Testing Center (if you are a current student at UNT) or the Psychology Clinic at UNT. The Counseling and Testing Center offers eight (8) free counseling sessions to currently enrolled students. The Psychology Clinic offers psychological services on a sliding fee scale.

VOLUNTARY PARTICIPATION: Your participation in this research is completely voluntary; you do NOT have to participate if you don't feel comfortable about it.

CONFIDENTIALITY: You will be assigned a code number that will be used to identify your responses. All information will be recorded anonymously. Results of this study will be made available to you by August 1, 2002 and will be posted on the following website:
<http://communities.msn.com/PsychologyResearch>.

RIGHT TO WITHDRAW: You are free to refuse to participate in this study or to withdraw from this study at any time. Your decision to withdraw will bring no negative consequences, no penalty to you.

INFORMED CONSENT: I have read the description, including the nature and purpose of the study, the procedures to be used, the potential risks and side effects, as well as the option to withdraw from the study at any time. The investigator has explained each of these items to me. The investigator has answered all of my questions regarding the study, and I believe I understand what is involved. My returning of the questionnaire indicates that I freely agree to participate in this research study.

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