

ORIGINAL ARTICLE

Relationship between Gender Roles and Sexual Assertiveness in Married Women

Elham Azmoude¹, MS; Mahboobe Firoozi², MS; Elahe Sadeghi Sahebzad³, MS;
Neghar Asgharipour⁴, PhD

¹Department of Midwifery, School of Nursing and Midwifery, Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran;

²Department of Midwifery, School of Nursing and Midwifery, Mashhad University of Medical Sciences, Mashhad, Iran;

³Department of Midwifery, Mashhad University of Medical Sciences, Mashhad, Iran;

⁴Psychiatry and Behavioral Sciences Research Center, Ibn-e-Sina Hospital, School of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran

Corresponding author:

Mahboobe Firoozi, MS; Department of Midwifery, Mashhad University of Medical Sciences, Ibn Sina St, Doctora Intersection, Postal Code: 91379-13199, Mashhad, Iran

Tel: +98 51 38591511; **Fax:** +98 51 38597313; **Email:** Firooziim@mums.ac.ir

Received: 25 November 2015 **Revised:** 17 January 2016 **Accepted:** 7 February 2016

ABSTRACT

Background: Evidence indicates that sexual assertiveness is one of the important factors affecting sexual satisfaction. According to some studies, traditional gender norms conflict with women's capability in expressing sexual desires. This study examined the relationship between gender roles and sexual assertiveness in married women in Mashhad, Iran.

Methods: This cross-sectional study was conducted on 120 women who referred to Mashhad health centers through convenient sampling in 2014-15. Data were collected using Bem Sex Role Inventory (BSRI) and Hulbert index of sexual assertiveness. Data were analyzed using SPSS 16 by Pearson and Spearman's correlation tests and linear Regression Analysis.

Results: The mean scores of sexual assertiveness was 54.93 ± 13.20 . According to the findings, there was non-significant correlation between Femininity and masculinity score with sexual assertiveness ($P=0.069$ and $P=0.080$ respectively). Linear regression analysis indicated that among the predictor variables, only Sexual function satisfaction was identified as the sexual assertiveness summary predictor variables ($P=0.001$).

Conclusion: Based on the results, sexual assertiveness in married women does not comply with gender role, but it is related to Sexual function satisfaction. So, counseling psychologists need to consider this variable when designing intervention programs for modifying sexual assertiveness and find other variables that affect sexual assertiveness.

KEYWORDS: Femininity; Masculinity; Gender identity; Sexual behavior

Please cite this article as: Azmoude E, Firoozi M, Sadeghi Sahebzad E, Asgharipour N. Relationship between Gender Roles and Sexual Assertiveness in Married Women. *IJCBNM*. 2016;4(4):363-373.

INTRODUCTION

Healthy sexual function is a sign of physical and mental health and a life quality factor that creates a sense of shared pleasure in couples and increases their capability in coping with stress and life problems effectively.¹ Sexual experience is one of the major pleasures of a life time and has significant effects on that marital satisfaction.² Sexual interactions are indeed the prerequisite for strengthening mental and emotional dependence in couples, and are under the influence of many factors. One of the most influential factors in this regard is sexual assertiveness.³ Assertiveness means one's capability in acting on self-interests and persisting on it without anxiety, and expressing his/her own rights without violating others' rights.⁴ In this regard, sexual assertiveness is also defined as one's capability in refusing unwanted sexual relationship and having a sexual interaction that brings sexual pleasure.⁵ Sexual assertiveness is, indeed, a specific type of relationship, which employs verbal and non-verbal strategies to express sexual preferences.⁶ Women can potentially take an active role in their sexual relationships, rather than performing a passive role in service of men. This allows them to experience a more pleasurable sex.⁷ Evidence indicates that women with greater sexual assertiveness experience deeper sexual satisfaction, and are more capable in dealing with sexual dysfunction.^{6,8,9}

Despite the importance of this issue in many societies including Iran, the majority of women have difficulty expressing their sexual desires and needs, and maintaining their autonomy in sexual relationship, and suffer from low self-esteem.¹⁰ For example, in a study in Ramyar, Golestan Province, Iranian women scored lower than the median score of the inventory in sexual assertiveness;⁷ whereas, in the majority of foreign studies, women obtained higher scores.^{10,11} Therefore, identifying factors affecting this index seems essential. There are several factors influencing the formation of sexual interactions in people

and probably their sexual assertiveness.^{12,13}

According to some researchers, one of many reasons for the lack of sexual tendency or desire in women is their difficult and strict gender roles,¹⁴ which consist of behaviors, attitudes, and personal traits that are considered more appropriate and common for women and men in the society.¹⁵ In all human societies, social distinctions are made on the basis of gender. The gender-related concepts and processes affect behaviors, thoughts, and feelings of an individual as well as interpersonal interactions, and contribute to determination of social structures, and eventually perpetuate gender differences.¹⁶ Study of gender provides an opportunity to examine marital interactions and reproductive behaviors.¹⁷ According to some studies, traditional gender norms that hold sexually active males paired with passive females, conflict with women's ability in expressing sexual desires.¹¹ Some researchers argue that high and low sexual assertiveness indicates nontraditional and traditional ideas, respectively.¹⁸ Women in fact learn from social texts and writings that are not appropriate for them to express their sexual desires and initiate a sexual activity.¹⁹ Impett and Peplau (2003) believe that traditional gender roles induce women to feel responsible for sexual desires and needs of men.²⁰ In this way, their sexual desires are placed at the service of men. Since women prioritize men's needs, they think they are not allowed to express their sexual desires. From the early days that women learn about sexual intercourse to when they start thinking about expressing sexual desires, they prioritize men's pleasure.¹⁴

There are several theories explaining the gender role or what is called femininity and masculinity. Bem's model is one of the well-known theories that consider femininity and masculinity as two separate dimensions, in that a person could be high or low in masculinity and high or low in femininity at the same-time. In this model, the masculine personality belongs to men or women who

obtain a high score in masculinity and a low score in femininity. In other words, they exhibit more masculine behaviors and possess more masculine traits. The feminine personality also belongs to men or women who show more feminine behaviors and have more feminine traits. According to Bem (1974), individuals who possess a high degree of both masculine and feminine traits are categorized as androgynous, which is the most adaptive gender feature. Moreover, individuals who manifest a decrement in both masculine and feminine traits are categorized as undifferentiated in this model.²¹

The relationship of gender role with some dimensions of sexual behavior has been investigated. For example, in a study, it was shown that the gender role schema affects sexual satisfaction in women, but not men. In fact, sexual dissatisfaction increased by having only feminine gender role schema.²²

Although the majority of studies into sexual assertiveness suggest lower score of women in this regard, this gender-role induced difference has been less investigated and the findings available are conflicting. For example, one study has shown no significant relationship between gender role adaptation with sexual assertiveness in men and women.⁸ In contrast, Curtin et al. (2011) reported lower sexual assertiveness in women with stronger feminine personalities.²³ Having knowledge of the gender roles' impact on sexual assertiveness can dramatically help family and marriage advisors improve the score of sexual assertiveness, and thus the sexual and marital satisfaction of women. In addition, since many researchers believe that the effect of social developments on gender role changes, identification of the sexual assertiveness difference in women who are affected by social changes, and who have gender adaptive tendencies is significant.²⁴ Accordingly, this study was conducted aiming at determining the relationship of attitude towards gender role with sexual assertiveness among married women in Mashhad in 2015.

MATERIALS AND METHODS

This was a cross-sectional study conducted among women who referred to health centers of Mashhad, Iran during November 2014 to July 2015. The sample size was estimated as 109 participants according to a pilot study using the following formula:

$$n = [Z_{(1-\alpha,2)} + Z_{(1-\beta)} \cdot C(r)]^2 / 3 \\ C(r) = 1.2 \ln(1+r \cdot 1-r)$$

Firstly, femininity, masculinity and sexual assertiveness were investigated in 15 subjects, and then the correlation coefficient between femininity and sexual assertiveness and masculinity and sexual assertiveness was calculated by Spearman correlation coefficient test ($r=0.265$ and $r=0.271$ respectively). The sample size was determined based on both correlation coefficients and the largest number was considered as the final sample size. Given a 10% dropout during the study, 120 subjects were included in order to be assured about the adequacy of sample size [CI=95%; degree of confidence $(1-\alpha)=0.05$; test power $(1-\beta)=80\%$]. Response rate was estimated at 98%; thus, the data related to 118 participants were collected.

Sampling was conducted via multi-stage sampling from all the health centers of Mashhad. Firstly, each of five mother health care centers (No. 1, 2, 3, 5, and Samen) was considered as a cluster. Then, with regard to the number of urban health care centers covered by each mother health care center, 10 health care centers were selected through lotto draw and considered as a cluster. Next, based on the number of clients referring to family planning units, the related portion was determined. The participants were selected from the family planning unit in each health center by using convenient sampling, if they met the inclusion criteria. Inclusion criteria were 1) Iranian nationality, 2) aged between 15 and 49, 3) literacy (the minimum), and 4) living with the spouse at least one year. Individuals were excluded if they or their husband had a sexual disorder, according to the DSM-IV-TR criteria, had a chronic disease, were infertile, had a history of psychological disorders according

to participants, being pregnant or menopause, had the experience of psychological crisis during the past three months and used drugs that affected sexual desire.

After explaining the study objectives and giving informed consent, the participants were interviewed privately to evaluate the inclusion and exclusion criteria by a psychologist who was one of the researchers. Then, the questionnaire related to demographic and marital characteristics, Bem Sex Role Inventory (BSRI) and Hulbert index of sexual assertiveness were given to eligible individuals.

Data Collection Tools

Demographic and marital characteristics questionnaire contained the following items: age, husband's age, educational, occupation and economic status, age at marriage, number of children, and suitable place for sexual contact at home.

Furthermore, woman's satisfaction with their own appearance, husbands appearance, marital satisfaction and sexual function satisfaction were measured according to six-option Likert scale (very dissatisfied=1, dissatisfied=2, relatively dissatisfied=3, relatively satisfied=4, satisfied=5, very satisfied=6. Content validity was used to determine the validity of this scale.

The Validity and Reliability of BSRI

The BSRI includes 20 masculine personality traits, 20 feminine personality traits, and 20 neutral traits (Bem, 1974). Response choices range from 1 (never or almost never true) to 7 (always or almost always true). Bem classified responses as masculine, feminine, androgynous and undifferentiated.^{21,25} The median split technique was used in this study to classify participants.

First, median score of masculinity and femininity was calculated. Respondents who are higher than the median in both masculinity and femininity scale are classified as androgynous; individuals who are high masculinity and low femininity are masculine,

and females who are low masculinity and high femininity are feminine; individuals low in both categories are classified as undifferentiated.

Bem's (1974) reported test-retest reliability as .90 for masculinity and .90 for femininity.²¹ This scale was translated to Farsi by Aliakbari Dehkordi (2012) in Iran and its validity and reliability were confirmed by content validity and Cronbach alpha coefficients equal .78 for masculinity and .82 for femininity, respectively.²⁶ In this study, its reliability was calculated by the internal consistency and the computation of Cronbach alpha ($\alpha=0.70$).

The Validity and Reliability of Hulbert Index of Sexual Assertiveness

Hulbert index of sexual assertiveness was compiled by Hulbert (1991). It is a 25-item self-report measure using a 5-point Likert scale response format with options that range from 0 (always) to 4 (Never). The scores ranged from 0 to 100. A higher score indicated more sexual assertiveness.²⁷ This test has been conducted on 40 married female students in Iran by Shafiee (2005) and an overall Cronbach alpha coefficient of 0.87 has been obtained.²⁸ In this study, its reliability was calculated by the internal consistency and the computation of Cronbach alpha ($\alpha=0.77$) after a pilot study, conducted on 20 subjects.

In order to analyze demographic and marital data, descriptive statistics including frequencies, percentages, means, and standard deviations were used. In order to fulfill the research objectives, Pearson and Spearman's correlation tests as well as linear Regression Analysis were used. Also, a one-way ANOVA test was used for the comparison of sexual assertiveness scores in gender role types. The significance level was considered less than 0.05.

Ethical Considerations

It should be mentioned that prior to the study, an approval was obtained from the Ethics Committee of Mashhad University

of Medical Sciences (code:IR.MUMS.REC.1392.801). The purpose of the study was explained to every participant verbally. Moreover, a written and oral informed consent to participate in this study was obtained from each participant who agreed to complete the tools and attend the sessions. It was emphasized that subjects' participation was voluntary and subjects were assured of confidentiality and anonymity of the data.

RESULTS

There were a total of 118 participants who completed the survey. The mean age of women and their spouses was 27.80 ± 6.3 and 32.08 ± 6.8 years, respectively. Also, the mean duration of marriage was 6.7 ± 5.5 ranging from 1 to 28 years. Moreover, the mean scores of Satisfaction of own and husband's appearance were 4.73 ± 0.89 and 4.52 ± 1.07 , respectively. And the mean scores of marital and Sexual function satisfaction were also 4.49 ± 1.07 and 4.20 ± 1.05 respectively. Table 1 reveals the demographic characteristics of subjects.

Table 1: Background characteristics among studied women

Variables	N(%)
Educational status	
Less than diploma	34(28.8%)
Diploma	23(19.5%)
University Education	45(38.1%)
Occupational status	
housewife	40(33.9%)
employed	75(63.6%)
Economic status	
Less than average	13(11.0%)
average	91(77.1%)
more than average	12(10.2%)
Suitable place for sexual contact at home	
Yes	11(9.3%)
No	104(88.1%)

The total mean \pm SD score of sexual assertiveness was 54.93 ± 13.20 . Additionally, descriptive statistics showed that the mean scores of gender femininity and masculinity were 5.11 ± 0.55 and 4.72 ± 0.87 , respectively.

Findings also showed that 51(43.2%) studied women were undifferentiated, 31 (26.3%) women were androgynous, 26 (22%) women were Feminine, and 10 (8.5 %) women were Masculine. According to the results, the mean scores of sexual assertiveness in women did not differ in job ($P=0.187$) and having a suitable place for sexual contact ($P=0.741$).

Furthermore, one-way ANOVA test showed that the scores of sexual assertiveness did not differ in educational status ($P=0.495$) and economic status ($P=0.676$).

The correlation results in Table 2 showed that Satisfaction of husbands appearance ($r=0.217$, $P=0.020$), marital satisfaction ($r=0.193$, $P=0.041$) and Sexual function satisfaction ($r=0.380$, $P=0.001$) were positively correlated with sexual assertiveness. However, length of marriage was significantly negatively related to sexual assertiveness ($r=-0.240$, $P=0.010$) (Table 2).

On the other hand, there was a non-significant correlation between Femininity and Masculinity score with sexual assertiveness ($r=0.168$, $P=0.069$ and $r=0.162$, $P=0.080$ respectively) (Table 2).

Linear Regression Analysis was performed in two stages. In the first model, demographic variables that were significant in correlation were entered and only Sexual function satisfaction was found to have a statistically significant effect on Sexual assertiveness of the women ($\beta=0.433$, $P<0.001$). However, the other four predictor variables did not contribute significantly to the prediction of Sexual assertiveness of the women. This model explains 22% of the variance in Sexual assertiveness.

In the second model, Femininity and masculinity scores were entered. But these two variables did not contribute significantly in the model. Also the only variable that significantly predicted Sexual assertiveness in Model 2 was Sexual function satisfaction ($\beta=0.438$, $P<0.001$) (Table 3).

In addition, One-way ANOVA was used to investigate the difference of sexual assertiveness between gender-role type

Table 2: The Correlation Matrix of background characteristics, gender role and sexual assertiveness

Variables	1	2	3	4	5	6	7	8
1 Age	-----							
2 Length of marriage	0.727***	-----						
3 Satisfaction of own appearance	0.158	-0.150	-----					
4 Satisfaction of husbands appearance	-0.267**	-0.170	0.636***	-----				
5 Marital satisfaction	-0.199*	-0.146	0.507***	0.673***	-----			
6 Sexual function satisfaction	0.099	-0.009	0.301***	0.404***	0.425***	-----		
7 Feminine	-0.008	-0.029	0.134	0.002	0.046	0.151	-----	
8 Masculine	0.009	-0.127	-0.044	-0.162	-0.131	-0.061	0.505***	-----
9 Sexual assertiveness	-0.142	-0.240*	0.103	0.217***	0.193*	0.380***	0.168	0.162

*P<0.05; **P<0.01; ***P<0.001; Significance level was considered P<0.05

Table 3: Linear Regression Analysis predicting Sexual assertiveness with femininity and masculinity scores and covariates

Variables	Step 1			Step 2		
	Beta	Std. Error	P	Beta	Std. Error	P
Length of marriage	-0.163	0.213	0.068	-0.146	0.214	0.104
Satisfaction of husbands appearance	0.007	1.43	0.950	0.063	1.49	0.525
Marital satisfaction	-0.013	1.46	0.909	-0.036	1.46	0.752
Sexual function satisfaction	0.433	1.22	0.001	0.429*	1.21	0.001
Feminine				0.037	2.36	0.704
Masculine				0.146	1.57	0.155

beta=standardized regression coefficient; Significance level was considered; P<0.05; Step1: R²=0.220, Adjusted R²=0.190, F=7.47; Step2: R²=0.246, Adjusted R²=0.202, F=5.64

groups. As indicated in Table 4, there were non-significant differences between gender-role type and Sexual assertiveness (F = 2.25, P=0.086) (Table 4).

DISCUSSION

This study intended to determine the relationship of gender role with sexual assertiveness in married women in Mashhad. The mean score

of sexual assertiveness in this study was higher than that reported in another study into married educated women in Northern Iran, and two other studies into married women in Tehran.^{7,29,30} However, this score was significantly lower than the mean score reported on Chestnut Hill College students in the USA. This may be due to the difference in participants. Although all subjects in study of Chestnut Hill College were heterosexual women aged 18 years and above

Table 4: One-way ANOVA test for the comparison of sexual assertiveness scores in gender role types

Variables	Sexual assertiveness Mean±SD	One Way-ANOVA
Undifferentiated	51.39±11.42	F=2.25
Feminine	57.69±10.31	P=0.086
Masculine	58.70±15.59	
Androgynous	57.22±16.20	

Significance level was considered P<0.05

with only one sexual partner at the time of study, the majority of them were in a non-married, non-cohabitating relationship. In fact, this finding may reflect the dominant culture in the US, in which women are encouraged to express their sexual needs and assure that their sexual needs are met. In the field of sexual interactions, culture has several impacts on thoughts, beliefs, and actions of both genders.¹¹ Additionally, based on the literature, culture can even affect the way people talk about sexual matters and experiences.³¹

On the other hand, results of this study did not show any significant relationship between gender roles and sexual assertiveness. In other words, it seems that sexual assertiveness in women is not affected by their gender roles. In fact, since the dominant cultures in Iran and other traditional communities assume more passive roles for women in sexual relationship, they have low sexual assertiveness regardless of their dominant gender personality. Lettenberger et al. did not find any significant relationship between gender role adaptation and sexual assertiveness in men and women, despite using different instruments.⁸ In this study, there was no difference in low sexual assertiveness between women holding traditional gender roles and women exhibiting gender-dependent behaviors.⁸ In a study into the relationship of sexual assertiveness, tendency, and identity in married female students living in college dormitories in Tehran, no significant correlation was found between gender identity and sexual assertiveness. In addition, sexual identity was incapable of predicting sexual assertiveness in such women.²⁸ There was also no significant correlation between gender roles and marital satisfaction in another study.³² Since previous studies found a positive relationship between sexual assertiveness and marital satisfaction, this finding is consistent with the results of the present study.¹⁰ Dividing people into four personality groups (masculine, feminine, undifferentiated, and androgynous) also did not lead to any significant difference in the score of sexual assertiveness.

Yet, these findings contradict those of other studies proving that feminine role makes them passive in sexual and romantic relations.^{33,34} For example, in a contradictory study, it was concluded that women with greater adherence to traditional gender roles have lower sexual assertiveness than women with bigender roles. This difference may be due to different characteristics of participants. For example, in a previous study, the research sample included 397 international bachelor students (from Asia, Africa, America, Latin America, and Arabian countries) at a Midwestern university. Moreover, in contrast to this study in which sexual relationships were formed within marriage, only 54% of subjects in the mentioned study were in a committed relationship.²³ According to the studies, the type of relationship is a factor that effectively influences sexual relationship.³⁵ In general, the majority of studies about the relationship between gender role and sexual assertiveness were conducted in uncommitted relationships. These findings may imply that in marital relationships, there are other variables with greater impact on sexual assertiveness.

According to the findings of this study, marital duration has an inverse negative correlation with sexual assertiveness in women. One probable justification is that usually young women with shorter marital duration gain higher sexual assertiveness scores as they are affected by social norm changes in terms of gender equality and women's right. In contrast to the findings of this study, Auslander did not find any significant correlation between the duration of relationship and sexual assertiveness. This, however, can be attributed to the subjects (young girls with mean age of 21.6 years and mean relationship duration of 4.6 months) in Auslander study; whereas, in our study, the subjects were in a very longer relationship.³⁶

Other findings of the study did not report any significant correlation between appearance satisfaction and sexual assertiveness; whereas, the relationship between satisfaction with partner's appearance and sexual assertiveness

was significant. Similar to the findings of this study, Auslander did not find any significant correlation between body image of women and their demand for initiation or refusal of unwanted sexual relationship.³⁶ These findings are inconsistent with the majority of studies in which a significant relationship between body image and sexual assertiveness has been reported.^{37,38} This inconsistency can be attributed to the use of different measuring instruments in these studies, as the majority of these studies have employed structured instruments; whereas, due to the multiplicity of questionnaires, the present study has utilized one question to assess appearance satisfaction. The researchers had no access to any research into the relationship between satisfaction with partner's appearance and sexual assertiveness. Yet, according to some researchers, one's feeling towards his/her sexual partner is an effective factor in sexual performance and arousal of couples.³⁹

On the other hand, according to the findings of this study, people's satisfaction with sexual performance and marital relationship was positively correlated with sexual assertiveness in them. Results of another study also showed that women who have greater satisfaction with sexual relationship and performance tend more to initiate a sexual activity.⁴⁰ Similarly, MacNeil and Byers recognized that satisfaction with relationship intermediates the relationship of sexual self-expression with sexual satisfaction.⁴¹ In another study, a positive and significant correlation was reported between overall satisfaction and sexual assertiveness in women.⁴² Indeed, couples' satisfaction with good and pleasurable sexual relationships leads to higher sexual demand and tendency in them for initiating a sexual activity and finding deeper pleasure.

According to the linear regression test, satisfaction with sexual performance alone explains 22% of the variance of sexual assertiveness in women; whereas, femininity and masculinity did not predict sexual assertiveness in women. The sense of satisfaction with sexual relationship may lead to a commitment that is

a better predictor of sexual assertiveness as compared to gender attitudes.

Yet, the variables investigated in this study were only capable of predicting a quarter of the variance of sexual assertiveness in women. It means that the majority of the score of this index can be explained by uninvestigated variables. In conclusion, further studies are required for the rejection or confirmation of these results as well as for the identification of other factors affecting sexual assertiveness in Iranian women.

Despite these findings, the present study suffered from a number of limitations. First, its cross-sectional design inhibited the realization of causal relationships. Therefore, performing longitudinal and/or experimental studies seems essential. In addition, the application of self-report practice for presenting sexual information was another limitation of this study, as this practice does not allow the subjects to express their attitudes, values, and beliefs; so, future studies should include other forms of assessment. Third, participants were drawn from a small area with a specific culture, potentially limiting generalizability. Therefore, it may be beneficial to consider the results in other populations.

Another limitation is related to some of the instruments used in this research for measuring marital and sexual satisfaction due to the multiplicity of questionnaires. However, the validity of these instruments was confirmed.

However, exploring many possible determinants and predictors of sexual assertiveness, an important component to sexual relationships and attention to the concept of sexual assertiveness in spouses are among the strengths of this study.

CONCLUSION

In general, the findings of this study support the claim that sexual assertiveness in childbearing age women does not follow gender roles, and the majority of women have low sexual assertiveness under the dominant structure of

the society, regardless of their sexual identity. Lack of relationship between gender roles and sexual assertiveness in women may imply its greater dependence on other factors than gender role. Emotional health, and belief and attitudes about sexual matters can greatly affect one's sexual activities. Therefore, marriage and family advisors and therapists should look for factors affecting sexual assertiveness in women as an important component of marital satisfaction. However, due to the fact that this model will be able to predict a small percentage of the sexual assertiveness variance, further studies are required to detect other factors effective on sexual assertiveness.

ACKNOWLEDGEMENT

The present article was extracted from the Research project and was financially supported by Mashhad University of Medical Sciences grants No 920314. Hereby, we thank the Deputy for research of Mashhad University of Medical Sciences for financial support. Additionally the researchers would like to express their gratitude to all the participants who were involved in this study and staff of Mashhad Health Centers.

Conflict of Interest: None declared.

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