

Structural Model of Women's Sexual Health Based on Alexithymia, Differentiation of Self, and Gender Roles Mediating by Social Exchange Styles

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Abstract

Objective: The purpose of this study was to evaluate the structural model of the relationship between alexithymia, Differentiation of Self, and gender roles in women's sexual function with the mediation of social exchange styles.

Method: This research was a descriptive correlational study. The statistical population of the study included all married women living in Tehran, of whom 550 people participated in the study through an online call. The instruments used in this study to collect data were the Toronto Alexithymia Scale (1994), the Differentiation of Self Inventory (1999), the Bem Sex Role Scale (1981), the Women's Sexual Function Scale (Rosen et al., 2000), and the Leybman et al.'s (2011) Social Exchange Questionnaire. The structural Equation Modeling (SEM) and LISREL software were applied to evaluate the proposed model. Intermediate relationships in the proposed model were also tested using the bootstrap method.

Results: The results of structural equation modeling indicated the model fitness and showed that alexithymia has a negative impact on sexual performance by the mediation role of utilitarianism and extreme investment styles. In addition, the masculine gender role positively affects women's sexual function.

Conclusion: According to the results, social exchange styles should be considered in improving sexual function. The findings of the present study provide a useful framework for identifying the influential components in the field of social psychology in women's sexual function that should be considered in prevention and treatment programs.

Keywords: Sexual Health, Differentiation of Self, Alexithymia, Gender role, Social Exchange Styles.

Introduction

One of the most important issues in marital relationships, especially in the first years of marriage, is sexual relations. Having a desirable sexual relationship in a way that can bring satisfaction to both parties, has a very important and fundamental role in the success and stability of the family center (Aliakbari Dehkordi, 2009). Therefore, proper sex relationships can act as a background for strengthening the emotions and feelings between couples and strengthen family ties, which consequently prevent the emergence of disorders

and the disintegration of the foundation of the family and society (Slater & Robinson, 2014). According to this definition, sexual health is a situation in which couples enjoy a healthy, appropriate, and normal sexual relationship so that their physical, mental, and behavioral status is desirable and indicates a kind of harmony, love, and affection in married life (Higgins, Mullinax, Trussell, Davidson & Moore, 2011). Sexual function is a part of sexual health (Robinson, et al, 2001). Today, researchers have paid much attention to the role of proper sexual function in the quality of life as an important issue in sexual health. Previous studies have also shown that good sexual function plays an important role in feeling healthy and improving the quality of life (Poyner-Del et al., 2011; AL-krenawi, 2012; Kołtuniuk et al.,

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2020).

Basson (2005) states that sexual function is like a cycle and is influenced by various internal and external factors. One of the internal factors affecting sexual function is alexithymia. Alexithymia is defined as the inability to process and regulate emotion-based information (Stasiewicz et al., 2012). The ability to create and maintain a satisfying relationship requires recognizing emotions, expressing emotions, and ability to understand and accept the other partner's emotions (Zhang, Dong & Zhao, 2020; Andersen, & Cyranowski, 2009; Sharifian et al., 2018b; Bahrami et al., 2013; Besharat, Khajavi & Pourkhghan, 2012; Irandoost, Sohrabi, Malihozakerini & Ahi, 2018). Berenguer et al. (2019) in their recent study, showed that alexithymia in women is associated with less sexual arousal, orgasm, sexual pain, and dissatisfaction, and in men is associated with erectile dysfunction. Among other factors influencing sexual function, we can mention self-differentiation. Bowen (1978) defined self-differentiation as the degree to which one can balance intellectual-emotional and intimacy-autonomy functions in relationships (Young, Klosko & Weishaar, 2003). It, therefore, examines the distinction between the foundations of intimacy and mutual acceptance in marriage (Hardy & Fisher, 2018). Men and women with low levels of differentiation are expected to have less emotional maturity in marriage and a more limited capacity for intimacy and oneness. In contrast, in differentiated marital systems, spouses allow each other to play a more flexible role and a more intimate relationship, tolerating each other's differences of opinion, and experiencing less emotional response (Bowen, 1987). Studies have shown that self-differentiation is associated with higher satisfaction (Stapley & Murdock, 2020) and higher marital adjustment (Peixoto-Freitas et al., 2020; Jakubiak & Feeney, 2016). Another factor influencing sexual function is a gender role. The inclusive term of gender role or gender modeling includes non-physical factors

including behaviors, expectations, and roles that are defined by society. Sexually transmitted diseases theory, proposed by Bem (1983, cited by Aliakbari Dehkordi, Mohtasahmi & Hasanzade, 2012), claims that people vary in the extent to which they use sexually transmitted diseases to perceive and evaluate others and guide their behaviors. Studies have shown that gender roles are associated with mental health and sexual satisfaction (Lefkowitz & Zeldow, 2006; Mahalik, Burns & Syzdek, 2007; Isaac & Shah, 2016; Reynolds et al., 2016; Aliakbari Dehkordi, Shokr Kon & Hasan Zade, 2011). For example, Vivian (2017) showed that sexual satisfaction is associated with the feminine gender role, the most common femininity characteristics related to sexual satisfaction are empathy, self-expression, and nursing. Also, masculinity characteristics such as self-reliance and autonomy are related to sexual satisfaction and aggressive masculinity characteristics are significantly associated with sexual dissatisfaction. Zarei, Pourhossein, Tarafdari, Habibi Askarabad, and Babakhani (2016) showed that gender roles directly affect sexual health. Maaref, Khalili, Hejazi, and Lavasani (2014) also stated in a study that in men there is a positive relationship between the gender role of femininity and marital satisfaction, while such a relationship was not found in women. In one of the most recent studies, Yoo (2020) in his study stated that in the group of women, gender attitudes have a direct and indirect effect on marital satisfaction, while in the male group, the quality of relation plays a mediating role between gender role and marital satisfaction.

As mentioned earlier, according to the study background, many variables are directly associated with sexual function, but it should be noted that none of these variables can explain the problem alone and it is necessary to examine this issue from various aspects. Kayser (1996) believes that all marriages are somehow faced troubles and frustrations; for example, research has shown that even with overt sexual dysfunction (such as vaginismus), couples

still live together and have marital compatibility (Ferenidou et al., 2008; Sharifian et al., 2018). The fact that despite many problems, some marriages lead to sexual dissatisfaction and, consequently, marital dissatisfaction and the breakdown of life while some marriages continue to be compatible, suggests that there are other factors that can overshadow the effects of important variables. Therefore, there are other influential factors that can indirectly affect the sexual function of couples. In other words, the possible relationship between self-differentiation, alexithymia, and gender roles with sexual function is not a simple linear relationship and other variables can mediate in this regard. With this introduction and according to the definition of the World Health Organization, sexual health is the coordination and compatibility of the physical, emotional, intellectual, and social aspects of human sexuality in a way that promotes and enriches the personality and relationships of love. With this definition, the sexual function has received very little attention from a social perspective, and of course, the view of social psychology on sexual function is very motivating and at the same time very significant to attract the researchers' attention. One of the theories that can be proposed in this field is the social exchange theory. Social exchange theory is an approach to social psychology that describes social relations as an exchange process between two partners based on the concept of rewards, punishments, and resources. The exchanged resources can be money to meet needs, information to solve problems, creativity, and the like (Spellman, 2013). Social exchange theory holds that when people enter into a relationship, they focus on their investment costs and their participation in the relationship with the amount of income they earn (Saffarinia, 2017). For example, when a person realizes that the costs of a relationship outweigh the benefits, social exchange theory predicts that the person may decide to leave the relationship (West & Turner, 2007). This theory is also important in the marital relationship. Perry (2004) believes that the

social exchange theory is one of the most important theories in the field of marriage and family that provides a good explanation for the quality and manner of marital relations. For example, according to this view, a man who perceives injustice in his wife's behavior ejaculates prematurely (Rosenbaum, 2009). The results of studies on the role of social exchange in sexual function and gender attitudes of men and women have shown that social exchange between husband and wife on marital and sexual issues shapes romantic relationships, intimacy, attitudes, and views such as give and take and cost and rewards, which fundamentally affects their sexual function (Kenrick et al., 2003; Sprecher, 2001; Sánchez-Fuentes, Santos-Iglesias, 2016; Stephenson, Meston, 2011; Cornwall et al., 2014; Zizpour & Saffarzadeh, 2016; Sharifian, Saffarinia, & Alizadeh Fard, 2018a). Thus, in a marital relationship, couples who receive the desired cost/reward consequences from each other are more likely to be more satisfied with their marriage and less likely to resolve their marital problems through divorce and separation. These couples are also more satisfied with marital issues such as sexual satisfaction and expectation from the marital relationship, and in contrast, couples who do not receive the desired cost/reward consequences have problems in their marital relationship (Nakonezny & Denton, 2008; Stephenson & Meston, 2011; Sánchez-Fuentes & Santos-Iglesias, 2016). On the other hand, the previous studies have shown that when the exchange relations between husband and wife are very intense, women become sexually incapacitated and avoid talking about sex; in such cases, sexual function and the associated sexual pleasure for women are greatly impaired (Hope, 2014; Wamoyi et al., 2015). Recent research confirms these findings. For example, Saffarinia, Sharifian, and Alizadeh Fard (2016) stated in a study that the fairness exchange style can predict sexual pain disorder. Also, Sharifian, Saffarinia, and Alizadeh Fard (2015) showed that passionate-

romantic sexual schemas and shy-cautious sexual schemas with the mediation of fairness style have an indirect effect on sexual pain disorder. Mardani Valandani, Saffarinia, Alipour, and Aghayosafi (2019) in their study, to investigate the effectiveness of cognitive self-compassion training on changing social exchange styles of divorced couples, showed that cognitive self-compassion training has had a significant impact on changing fairness exchange and extreme investment styles. On the other hand, the study of Sharifian et al. (2018b) showed that sexual anxiety and marital adjustment are associated with vaginismus disorder without the mediation of social exchange styles. As the background of the study shows, social exchanges between husband and wife for sex and during sexual activity are greatly influenced by the sexual attitudes of the couple (Baumeister, 2014). Social exchange theory, on the other hand, provides a potentially useful framework for assessing sexuality, but few researchers have used this variable. Thus, this view, theoretically and based on research literature, can be effective in couples' sexual relations (Thibaut & Kelley, 1959). Since Ellis, Keynes, and later, Masters and Johnson began systematically studying sexual behavior, it has become clear that sexual dysfunctions are more common than previously thought (Ali Akbari Dehkordi et al., 2013). Studies show that one-third of women have low sexual desire, one-fourth have orgasm problems, and one-fifth have lubrication and sexual satisfaction (Ornat et al., 2013; Poiner-Del Vinto & Dab, 2011; McCabe et al., 2012). Many sexual issues remain hidden and unspoken due to shame, inadequacy, and feeling guilty, which can lead to many family problems and mental disorders. However, according to researchers and experts in the field of sexual psychology, there will be effective prevention and treatment methods for them if these problems are diagnosed in time. On the other hand, due to the many sexual problems and also the cultural context of Iran, couples rarely express their sexual problems and mostly complain about

other issues in life. Thus, recognizing the manner of relationships and the impact of vigorous variables in the psychological field such as alexithymia, self-differentiation, and gender roles on sexual function in the context of social psychology is of great importance. Therefore, investigating sexual problems can be very helpful. The recent models of feminine sexual function suggest that women engage in sexual intercourse with their husbands to achieve emotional intimacy, not to satisfy their instincts (Sánchez-Fuentes & Santos-Iglesias, 2016). Therefore, women's unwillingness or arousal should not only be examined in the context of biomedical medicine but also the context of social communication (Basson, 2005), and since sexual problems are multifactorial, professionals need to consider all related variables and their social relationships. Background studies have also examined the role of psychosocial factors in this area, but there is a paucity of literature available in this area, and in some cases, there are contradictions. Therefore, the present study aimed to develop a model using structural equation modeling to investigate the relationship of alexithymia, self-differentiation, and gender roles with sexual function with the mediation of social exchange styles. Also, it tests the structure of the model to see if the model fits well enough and whether social exchange styles can mediate the relationship between alexithymia, self-differentiation, gender roles, and sexual function. The structure of the model is presented in Figure 1.

Method

Participants and Procedure

The design of the present study was descriptive-correlational and structural equations. The statistical population of this study included all married women living in Tehran. Kline (2016) considers the minimum sample size for using structural equation modeling to be 200 and suggests 5 to 10 participants for each parameter being examined. Taking this into account, 550 people were selected as the sample and after deleting incomplete data, the data from 510

respondents were analyzed. Due to the prevalence of the Covid-19 virus, the questionnaires were prepared online and published in cyberspace, and interested people to participate in the research completed the questionnaires and sent them.

The inclusion criteria were being married, the history of at least one-year marriage, age average of 29 to 39, having no chronic sexual problems, having no chronic physical and psychiatric problems, not using the medicine for physical and mental problems, no history of remarriage, and absence of any chronic sexual problems in their husbands. The participants of the present study were 510 married women with a mean age of 35.20 years old and a standard deviation of 9.21. The average duration of marriage of the participants was 13.19 years with a standard deviation of 9.62. Among them, 406 (79.6%) were housewives and 104 (20.4%) were employed. In terms of the number of children, 133 people (26.1%) had no children, 157 people (30.8%) had one child, 176 people (34.5%) had 2 children, 38 people (7.5%) have 3 children, 5 people (1%) had 4 children, and one person (0.2%) had 5 children. In terms of education, 30 people (5.9%) had a high school degree, 119 people (23.3%) had a diploma, 263 people (51.6%) had a bachelor's degree, 79 people (15.5%) had a master's degree, and 19 people (3.7%) had a doctorate degree. In the data analysis of this study, people were excluded from the analysis due to having unwanted univariate and multivariate data.

Ethical statement

the design of the present study (e.g., all participants' data were anonymous and will not be used for commercial or other non-scientific purposes) required only informed consent from the participants.

Data analysis method

The collected data were analyzed in two sections: descriptive statistics (mean, standard deviation) and inferential statistics. In the

inferential section, according to the nature of the hypotheses and objectives of the research, the data were analyzed using the Pearson correlation coefficient test and structural equation modeling. It is worth mentioning that SPSS software version 23 and LISREL version 8.8 were used for data analysis.

Measures

Toronto Alexithymia scale (1994): The scale was revised by Bagby, Taylor, and Parker in 1994. In this twenty-item scale, alexithymia is assessed in three subscales of difficulty in recognizing emotions, difficulty in describing emotions, and thinking with external orientation. The response range of each article is 5 degrees and is rated from "Strongly disagree" to "Strongly agree". Questions 4, 5, 10, 18, and 19 are scored reversely due to being negative. Besharat and Ganji (2012) in their research calculated Cronbach's alpha coefficients for the whole scale and subscales that were 0.85, 0.82, 0.75, and 0.72, respectively, which indicate good internal consistency of the scale. The concurrent validity of this scale was evaluated and the correlation between the subscales of this test and the scales of emotional intelligence, psychological well-being, and psychological helplessness was confirmed.

Differentiation of Self Inventory (1999): The initial form of the questionnaire was prepared by Skowron and Smith (1999) and the final test was developed by Jackson in 45 items and 4 subscales based on Bowen's theory and was revised by Skowron and Smith in 2003. This questionnaire is scored based on a 6-point Likert scale ranging from 1 (Not true for me at all) to 6 (absolutely true for me); thus, the maximum score of this scale is 720. Items 4, 7, 11, 15, 19, 23, 27, 31, 37, 41, and 43 are scored positively and other items are scored in reverse. A lower score indicates a lower level of differentiation (Papcoo, 2004). Skowron and Friedlander obtained the internal correlation of the questionnaire with Cronbach's alpha for the whole questionnaire 0.88, for emotional reactivity 0.83, for emotional cut-off

0.80, for fusion with others 0.82, and for I-position 0.80. This questionnaire was standardized in Iran by Younesi (2006) and its content validity was obtained at 0.83 by the internal consistency method and its validity was obtained at 0.81 by the test-retest method.

Bem Sex Roles Inventory (1981): The short form of Bem's Sexual Role Scale is based on its long form. Bem (1981) made its short form based on the analysis of factors performed on its long form (1974). The short form is a 30-item scale that includes 10 items of femininity, 10 items of masculinity, and 10 items of social desirability and is scored based on a 4-point Likert scale (never, sometimes, most often, always). Bem (1981) examined the internal consistency of this questionnaire to estimate the reliability of the short form of the scale. The internal consistency obtained was 0.90, which indicates that this scale is more reliable than the long form in terms of psychometric properties. In Iran, Ali Akbari Dehkordi, Mohtashami, and Hassanzadeh (2012) estimated the reliability of the short form of the Bem sexual role scale and its components. The obtained Cronbach's alpha coefficients indicated high reliability in both masculinity and femininity sections and the results of confirmatory factor analysis showed a poor fitness of the model in determining the factors of the original form by Bem (1981), while the results of exploratory factor analysis in 30 items showed three factors of masculinity, femininity, and neutrality with changes in some main items. Also, the findings of standardization showed that the median scores of masculinities and femininity in the whole Iranian sample are 5.36 and 5.81, respectively, due to the change and revision of some items in the exploratory factor analysis.

Social exchange styles Questionnaire: The Social Exchange Questionnaire was designed by Liebman et al. (2011) and consists of 54 items and five subscales: follow-up, fairness, individualism, utilitarianism, and extreme investment. This questionnaire was first translated into Persian by Saffarinia (2015) in Iran

and then the Persian version was again translated into English. After that, the comprehensibility and clarity of the text were examined by psychology professors by performing on 470 men and women in Tehran, and the number of items was reduced to 41 items. Items are scored on a five-point Likert scale (strongly disagree = 1 to strongly agree = 5). In Saffarinia's (2015) study, the reliability of the questionnaire, using Cronbach's alpha method for the whole questionnaire, was equal to 0.83, which was desirable. Also, the results of content validity evaluation, using the opinion of experts, indicated the content validity of the questionnaire, and the results of exploratory factor analysis and analysis of principal component (PC) through Varimax rotation also confirmed the existence of five factors with a special value greater than 1.5. These factors were "follow-up", "fairness", "individualism", "utilitarianism", and "Extreme investment" by changing some main items and deleting some others. Also, the results of confirmatory factor analysis indicate a relatively good fit for the 41-item model. In addition, the findings related to standardization showed that the median scores of fairness, utilitarianism, individualism, pursuit and extreme investment in the whole Iranian sample are equal to 14, 32, 21, 27, and 13, respectively.

Female Sexual Function Index (Rosen et al., 2000): It is one of the appropriate tools is the Women's Sexual Performance Index that with 19 items measures women's sexual performance in 6 areas, including sexual desire, psychological arousal, lubrication, orgasm, satisfaction, and sexual pain. This scale was developed by Rosen et al. (2000) and has been validated in a group of women with sexual arousal disorder. Based on balancing the fields, the maximum score for each field and the whole scale will be 6 and 36, respectively. A score of zero indicates that the person has not had sexual activity during the last 4 weeks. The cut-off points for the whole scale and subscales are wholescale=28, desire=3.3, psychological arousal=3.4, lubrication=3.4,

orgasm=3.4, satisfaction=3.8, and sexual pain=3.8, respectively. In other words, scores higher than the cut-off point indicate good performance. This questionnaire is a standard general questionnaire whose reliability and validity were confirmed by Rosen et al. in 2000 by a study conducted for this purpose. Also, the reliability and validity of this scale have been evaluated by Mohammadi (2004) in Iran. In his study, it has been confirmed that the overall reliability coefficient of the test was obtained at 78 and 75% through split-half and test-retest methods, respectively, and sub-tests were obtained at 63 to 75% by the split-half method and 70 and 81% with the test-retest method.

Results

Descriptive data (mean, standard deviation, and minimum and maximum scores) of research variables are presented in Table 1.

Table 1. Descriptive properties

variable	Mean	standard deviation
Alexithymia	51.14	11.51
Differentiation of Self	145.1	17.25
Masculinity	46.23	6.92
Femininity	57.76	6.98
tracking	28.34	4.18
fairness	35.56	3.97
individualism	21.73	2.86
benefit-seeking	30.3	5.58
overinvestment	16.16	2.4
Sexual function	21.8	8.47

Correlation matrix of research variables are presented in Table 2.

As Table 2 shows, self-differentiation, with a correlation coefficient of 0.101, alexithymia, with a correlation coefficient of -0.181, and the gender role of masculinity, with a correlation coefficient of -0.108, have significant relationships with sexual function.

The selection of appropriate markers in the model of structural equations is doubly important. Before selecting the markers, their ability to measure the latent variables was evaluated using confirmatory factor analysis. Structural equation modeling assumptions, such as univariate normality, multivariate normality, multiple linearity, and irrelevant data, were also examined and confirmed. The results of non-standard and standard coefficients and significant levels for the structural model of the research are presented in Table 3.

As Table 3 shows, the effect of self-differentiation on all five social exchange styles was not significant. Also, the effect of the masculine gender role on the individualism exchange style and the effect of the feminine gender role on the fairness exchange style were not significant. Also, the effect of follow-up exchange style, fairness, and individualism on sexual function was not significant. Other effects are

significant at the level of $p < 0.05$.

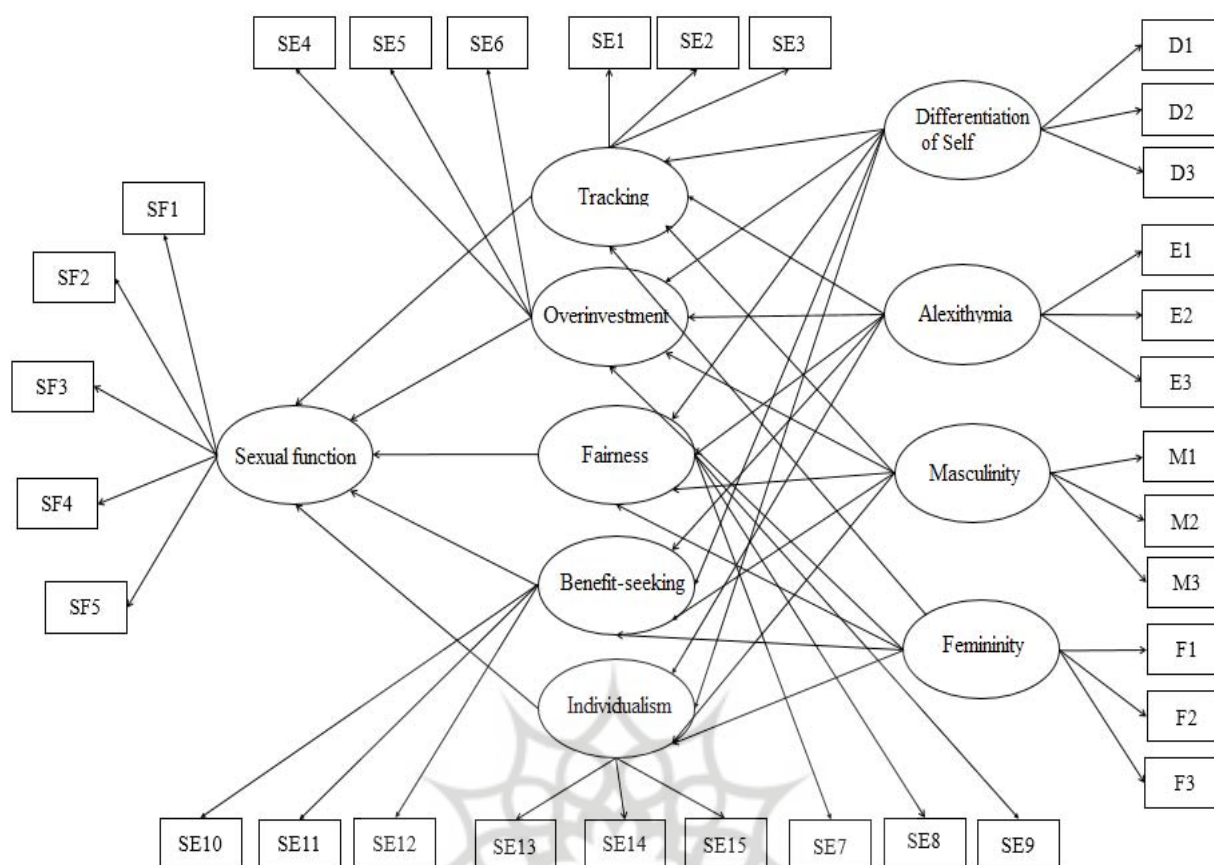
In the structural model of the present study, it was assumed that self-differentiation, alexithymia, and gender roles of masculinity and femininity affect exchange styles, and exchange styles also affect sexual function. The structure of this hypothetical model is shown in Figure 1.

Table 2. Correlation matrix

		1	2	3	4	5	6	7	8	9	10
1	Alexithymia	1									
2	Differentiation of Self	0.332**	1								
3	Masculinity	-0.22*	0.208**	1							
4	Femininity	-0.243**	-0.068	0.194**	1						
5	tracking	0.101*	-0.188**	0.049	-0.056	1					
6	fairness	0.120**	-0.178**	0.008	0.04	-0.563**	1				
7	individualism	0.273**	-0.086	-0.007	-0.092*	0.439**	0.418**	1			
8	benefit-seeking	0.274**	-0.141**	0.073	-0.198**	0.553**	0.457**	0.562**	1		
9	overinvestment	-0.270**	-0.138**	-0.041	-0.098**	0.502**	0.514**	0.427**	0.448**	1	
10	Sexual function	0.181**	0.101*	0.108*	0.029	0.01	-0.02	-0.07	-0.4	-0.05	1

Table 3. Unstandardized Coefficients, Standardized Coefficients and significant levels for the structural model of the research

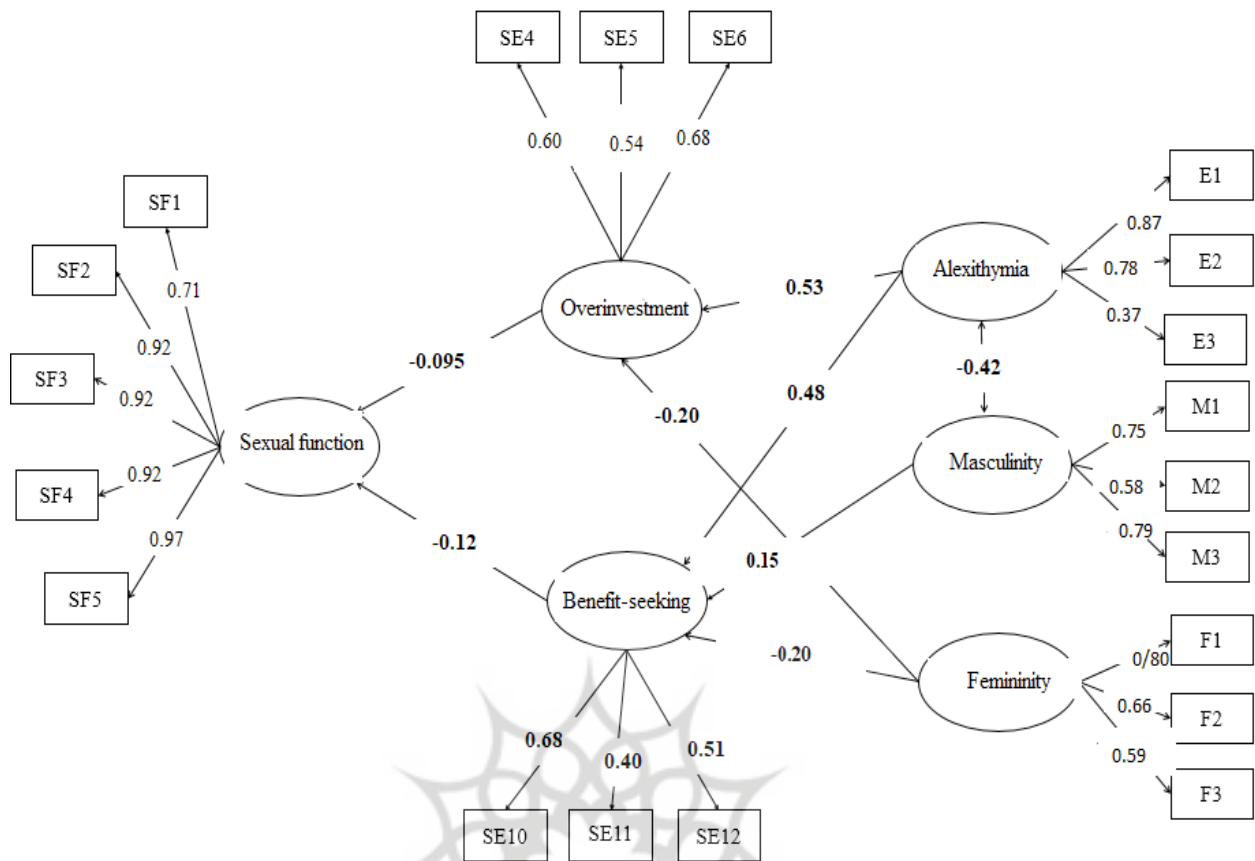
pathway		Unstandardized Coefficients	Standardized Coefficients	sig
Alexithymia	tracking	0.552	0.732	0.1
Alexithymia	fairness	0.169	0.422	0.001
Alexithymia	individualism	0.278	0.679	0.001
Alexithymia	benefit-seeking	0.566	0.884	0.001
Alexithymia	overinvestment	0.371	1.04	0.001
Differentiation of Self	tracking	-0.009	-0.066	0.175
Differentiation of Self	fairness	-0.005	-0.078	0.166
Differentiation of Self	individualism	0.007	0.104	0.113
Differentiation of Self	benefit-seeking	0.001	0.001	0.999
Differentiation of Self	overinvestment	-0.003	-0.044	0.419
Masculinity	tracking	0.311	0.320	0.001
Masculinity	fairness	0.161	0.312	0.001
Masculinity	individualism	0.008	0.015	0.823
Masculinity	benefit-seeking	0.244	0.295	0.001
Masculinity	overinvestment	0.102	0.222	0.001
Femininity	tracking	-0.231	-0.159	0.002
Femininity	fairness	-0.038	-0.050	0.389
Femininity	individualism	-0.122	-0.155	0.026
Femininity	benefit-seeking	-0.258	-0.210	0.001
Femininity	overinvestment	-0.112	-0.164	0.006
Tracking	Sexual function	0.158	0.147	0.310
Fairness	Sexual function	0.230	0.114	0.110
Individualism	Sexual function	-0.102	-0.052	0.666
Benefit-seeking	Sexual function	1.27	1.005	0.048
Overinvestment	Sexual function	-2.77	-1.21	0.043

**Table 4.** Fitness index of the final structural model

Fitness index	Acceptable domain	value
χ^2	-	814.03
χ^2/df	<5	1.35
TLI	> 0.90	0.97
CFI	> 0.90	0.96
IFI	> 0.90	0.94
NFI	> 0.90	0.93
GFI	> 0.90	0.93
RMSEA	> 0.08	0.058

One of the basic steps in modeling structural equations is model modification. Model modification is especially important when the initial research model does not have the goodness of fit. In the model modification process, the meaningless paths are removed from the model, and then the correction indices are calculated to add the necessary parameters to the model. In the present research model, the differentiation variable was removed from the final

model because it had no significant effect in the model. Also, considering that the main purpose of this study was to develop a structural relationship model for women's sexual function, the styles of exchange, follow-up, fairness, and individualism were removed from the final model due to the lack of significant effect on sexual function. Then, the correction indices showed that the covariance correction index of the masculine gender role and alexithymia was 50.06, the covariance of marker error of M1 and M3, the masculine gender role, was 94.48, and the covariance of marker error of sexual desire and psychological arousal was equal to 46.83. These three parameters were also added to the final model. Model fit indices are presented in Table 4. Table 4 shows that all indicators are within the acceptable range and the values of these indicators show that the final research model has a good fitness (chi-square indices/degree of freedom $\chi^2/df = 1.35$, GFI= 0.93, NFI=0.93, CFI=0.96, IFI=0.94 and Root



Mean Square Error of Approximation=0.058). The final model is presented in Figure 2.

According to Figure 2, this model shows that alexithymia affects extreme investment and utilitarianism styles with a standard coefficient of 0.53 and 0.48, respectively. The gender role of masculinity has a significant effect on utilitarianism exchange style with a standard coefficient of 0.15 and the gender role of femininity has a significant effect on both extreme investment and utilitarian styles with a standard coefficient of -0.20. Also,

extreme investment style and utilitarian style have a significant effect on women’s sexual performance with a standard coefficient of -0.095 and -0.12, respectively.

In the present study, the bootstrap test was used to evaluate the mediating relationships. Bootstrap provides the most powerful and logical method to evaluate indirect effects. Significant evaluation of these relationships can be examined in two ways. The first method is by referring to the significance levels and the second method is by examining the

Table 5. Bootstrap test results for intermediate effects

independent variable	Intermediate variable	dependent variable	Standardized Coefficients	Sig	Lower	Upper
Alexithymia	overinvestment	Sexual function	-0.05	0.42	-0.083	-0.002
Alexithymia	benefit-seeking	Sexual function	-0.057	0.039	-0.102	-0.029
Masculinity	benefit-seeking	Sexual function	-0.018	0.201	-0.037	0.029
Femininity	overinvestment	Sexual function	0.019	0.242	-0.026	0.034
Femininity	benefit-seeking	Sexual function	0.024	0.194	-0.013	0.065

confidence intervals. If the upper and lower limits with 95% confidence interval are similarly marked for the intermediate path (both positive or both negative), or in other words, the value of zero is not placed between these two limits, the desired path is significant at the level of $p < 0.05$.

Table 5 shows that alexithymia has a significant effect on sexual function with the mediation of extreme investment exchange style with a standard coefficient of -0.050 . Also, alexithymia has a negative significant effect on sexual function with the mediation of utilitarian exchange style with a standard coefficient of -0.057 . The mediating effects of masculinity and femininity on sexual function were not significant.

Discussion and Conclusion

As mentioned earlier, this study was conducted to develop a structural model for the relationship between alexithymia, self-differentiation, and gender roles with women's sexual function by mediation of social exchange styles. The results of this study showed that alexithymia affects extreme investment style and utilitarian style. Self-differentiation has no significant effect on social exchange styles. Also, the masculine gender role has a significant effect on the utilitarian style and the feminine gender role has a significant effect on both extreme investment and utilitarian styles. Also, both extreme investment and utilitarian styles have a significant effect on women's sexual performance. But according to the results of the Bootstrap test, it can be said that alexithymia is indirectly related to sexual function only through two utilitarian and extreme investment styles and the masculine gender role is directly related to sexual function. These findings are indirectly consistent with previous studies (Stephenson & Meston, 2011; Clark et al., 2015; Hoop, 2014; Vamoie et al., 2015; Sánchez-Fuentes & Santos-Iglesias, 2016; Sharifian et al., 2018; Saffarinia et al., 2020).

In explaining the results, it is important to point out that the most key concepts in social exchange

theory are trust and commitment (Blau, 1964; Cook & Emerson, 1978, cited by Rosenbaum, 2009). Trust is an essential element that allows people to be just and expect long-term justice. Commitment also includes establishing stability in the relationship (Rosenbaum, 2009). Asoudeh, Khalili, Daneshpour, and Lavasani (2010) showed that the perception of equal cost/reward in a marital relationship increases trust between spouses, which increases the quality of the marital relationship. Patrick et al. (2013) also showed that the existence of trust in the marital relationship increases forgiveness between couples, which causes them to ignore small issues, and this leads to the quality of the marital relationship. Norris and Zweigenhaft (2009) also believe that couples who have a higher level of trust, constantly express positive attributions about each other and their relationships, and have higher satisfaction with their marriage. However, if couples do not trust each other and do not share their thoughts and feelings, this lack of expression of feelings will disrupt sexual relations. In many cases, this lack of expression of emotions causes the persistence of a sexual problem for a very long time because problems will not be resolved unless issues are discussed. This may be one of the factors that cause sexual dysfunction to persist for years. On the other hand, talking about sex in many societies is a shame, and it is very much dependent on culture and ethnic views. For example, women in Iranian culture have agreed to talk less about their sexual orientation in married life and to express less dissatisfaction. They face the stereotype that "a good woman never talks about her sexual behavior." Studies have also shown that higher levels of trust increase the level of commitment in marital relationships (Simpson, 2009). In other words, when couples feel equal in cost/reward in their relationship, they trust each other and this trust causes them to express their sexual feelings. On the other hand, this trust creates marital commitment between couples and makes them feel satisfied with their relationship in the case of arising problems. Thus,

having commitment and trust, which are among the key components of social exchange theory, explain the relationship between social exchange styles with alexithymia, self-differentiation, and gender roles.

In explaining the relationship of alexithymia with social exchange styles and sexual function, it can be stated that people with alexithymia - due to deficiency in identifying, expressing, and processing their emotions - have some reactions and mediating strategies (compatible-incompatible) that can indirectly affect their sexual performance. People with alexithymia show lower levels of empathy required for a sincere relationship (Jonason et al., 2013). They do not show emotion towards their spouse and have a cold and avoidant communication style (Spitzer et al., 2005) and these factors, in turn, affect social exchange styles. According to social exchange theory, maintaining or ending a relationship depends on how any partner of a relationship assesses the costs or rewards of continuing or ending a relationship. Therefore, knowing the conscious or unconscious calculation of the costs and benefits of continuing or ending a relationship determines the status of that relationship.

The social exchange approach has a certain reciprocal relationship with sexual behaviors and feelings, and it can be said that a woman's perception of social interaction with her husband, when requesting and having sex, can greatly affect sexual behavior and the emotions and enjoyments associated with it (Sánchez-Fuentes & Santos-Iglesias, 2016). Thus, in alexithymia, which is an emotional cognitive characteristic and the sufferer is unable to regulate and understand his emotions, when emotional information cannot be perceived and evaluated in the process of cognitive processing, people are emotionally and cognitively disturbed and this inability can disrupt the organization of their emotions and cognitions (Saarijarvi et al., 2006). The inability to properly regulate emotions often leads to internalizing behavioral problems such as depression, and anxiety, (Pahlavanneshan,

Pakdaman, Ghanbari, Shahidi & Shokri, 2021). Therefore, low understanding of emotional states, negative reaction to emotions, and uncompromising strategies in the interpretation of emotions can affect the exchange relationship between couples and activate uncompromising mechanisms, and consequently improper sexual relationships (Calvete, Orue & Hankin, 2013). Alexithymia affects the exchange style between couples and gets them out of balance, and according to the results of the present study, women with this problem either seek more benefits or treat their partner as an extreme investment and this state of imbalance (seeking greater profits through utilitarianism and extreme investment styles) indirectly leads to sexual dysfunction.

There are two perspectives in explaining why social exchange styles do not mediate the relationship between self-differentiation and sexual function. First, differentiation, which is interpreted as the ability to distinguish one's mental-emotional and intimacy-autonomy processes from others, is the ability to reduce the emotional response to problems so that individuals can express their thoughts and ideas regardless of social pressure. Differentiated people may experience intense emotions but are not overwhelmed by these emotions and can control their reactions. When their inner experiences or interpersonal interactions are very stressful, they do not feel the need of being emotionally isolated. Such people have a strong identity and can maintain their self-defined intimate relationships (Yosefi & Azizi, 2018). Differentiated people use their thoughts and feelings according to their situation, control their anxiety, and have fewer difficulties in their relationships (Fisher, 2006). Thus, differentiated individuals do not view profit and loss in their interpersonal relationships and do not make decisions based on the conscious calculation of these profits and losses.

Second, according to previous studies, there is a relationship between commitment and differentiation.

Studies have shown that differentiation can sustain commitment and enable a person to insist on their commitment (Rabe, 2014). In other words, marital commitment requires a strong sense of self-identification and differentiation (Barahmand, 2010). In this regard, the study of Rezaian, Masoumi, and Hosseinian (2017) has shown that there is no significant difference in self-differentiation between divorce seekers and ordinary people. In other words, when there is a problem in the marital life of differentiated people, these individuals attempt to remain committed, which of course is more justifiable due to the religious nature of our country. Thus, differentiated individuals are not influenced by interpersonal exchange styles with their spouses and attempt to deal with problems according to their developed personality patterns.

Also, the results of the present study have shown that masculine gender roles are associated with utilitarian style and feminine gender roles are associated with both utilitarian and extreme investment styles. In explaining these results, it can be said that today, rapid social, economic, and cultural developments have changed the structure of the family and the pattern of relationships of its members and husband and wife; this change in women has led to more desire for fairness and justice in their marital relationships. Spercher (2001) believes that according to the theory of social exchange, the perception of fairness depends on the sense of balance between the consequences (reward and cost) and the investment of the partners (couple) in their relationship.

Nowadays, the perception of fairness is a very important and determining factor in marital relations, but in traditional marriage, the position and role of individuals were limited and clear; however, with the passage of time and the emphasis on the role of women in society, the situation has changed. Women's employment caused them to share in the family income with their husbands, and this increased their authority and role in the family (Khojasteh Mehr et al., 2012). Thus, women's participation

in society was accompanied by demands for equal rights between men and women and the issue of justice. The perception of egalitarianism is so important that has affected less important issues such as the sharing of household chores. According to Claffey and Mickelson (2009), perceptions of fairness in the sharing of household chores affect marital inconsistency. Thus, according to the theory of social exchange, human beings, consciously or unconsciously, are constantly calculating the benefits of participating in a relationship. They seek justice and balance between input and output. In addition, according to this view, marital relations are an example of cooperative relations and, like all interactive relations, should consist of justice and proper interpersonal relations (Kogan, et al., 2010). Therefore, if women have a perception of imbalance between inputs and outputs in their married life, they either look for more profit in their relationship or treat their partner as an extreme investment, and this state of imbalance (seeking more profit through utilitarianism and extreme investment styles), undoubtedly and indirectly, leads to sexual dysfunction. However, in addition to the results that are thought-provoking while being new, what is important, and is one of the interesting contributions of this study, is that the masculine gender role directly and even without the mediation of social exchange styles affects sexual function. According to Bem's (1981) theory and similar studies on sexuality, men are more attracted to beauty and physical attractiveness, while women are more concerned with safety and emotional commitment and tend to experience the emotional signs of love (Sánchez-Fuentes & Santos-Iglesias, 2016). Therefore, it can be said that men, or in other words, the role of the male gender in a sexual relationship, seek to gain the benefits that the relationship has for them and look at it more in the form of sexual pleasure, entertainment, and lust. On the other hand, women invest in a relationship more than men; in other words, because women care more about the emotional aspects of a relationship,

they invest too much to build and maintain a better relationship. Therefore, according to the results of this study and previous studies, the role of the male gender is very important in optimal sexual function. For example, Vivian's study (2017) showed that masculinity characteristics such as self-reliance and independence are significantly associated with sexual satisfaction.

The present study has faced some limitations, among which it can be mentioned that this study was performed on women living in Tehran using convenience (non-random) sampling online and during the Covid-19 virus pandemic, regardless of different cultural and ethnic considerations which limits the generalization of results to other people in other cities. Also, the lack of control over demographic variables and personality variables of the sample group was another limitation of the present study. Besides, although the data of this study are consistent with the tested structural model, its application in cause-and-effect relationships should be done with caution. So, considering the limitations of this study and other possible variables, it is suggested that further studies will be done to provide the interventional role of social exchange theory for the prevention and treatment of sexual problems to therapists with a social psychology approach.

Acknowledgment

We would like to thank all the married women living in Tehran who participated in this study and helped us in this study.

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