Handbook of Sexuality-Related Measures

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Sexual Self-Disclosure Scale

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70. I’m concerned about how the sexual aspects of my life appear to others.
71. It’s important to me that I involve myself in sexual activity.
72. If I developed any sexual problems, my recovery would depend in large part on what I myself would do.
73. I have positive feelings about the way I approach my own sexual needs and desires.
74. The sexual aspects of my life are satisfactory, compared to most people’s.
75. In order to be sexually active, I have to conform to other more powerful individuals.
76. I am able to “connect” well with a sexual partner, and it’s important to me that I am able to do so.
77. I don’t have much fear about engaging in sex. (R)
78. I will be able to avoid any sexual problems, if I just take good care of myself.
79. I feel unhappy about my sexual experiences.
80. The main thing which affects the sexual aspects of my life is what I myself do.
81. I feel nervous when I think about the sexual aspects of my life.
82. I have the capability to take care of my own sexual needs and desires.
83. I am very aware of the sexual aspects of myself (e.g., habits, thoughts, beliefs).
84. I am really motivated to avoid any sexual activity that might expose me to sexual diseases.
85. The sexual aspects of my life are a matter of fate (destiny).
86. I think about sex the majority of the time.
87. When it comes to sex, I usually ask for what I want.
88. I anticipate that in the future the sexual aspects of my life will be frustrating. (R)
89. If something went wrong with my own sexuality, then it would be my own fault.
90. I’m aware of the public impression created by my own sexual behaviors and attitudes.
91. I strive to keep myself sexually active.
92. If I developed a sexual disorder, my recovery would depend on how I myself dealt with the problem.
93. I feel good about the way I express my own sexual needs and desires.
94. I am satisfied with the sexual aspects of my life.
95. My sexual behavior is mostly determined by people who have influence and control over me.
96. Not only am I capable of relating to a sexual partner, but it’s important to me that I relate very well.
97. I’m not afraid of becoming sexually active. (R)
98. If I just pay careful attention, I’ll be able to prevent myself from having any sexual problems.
99. I feel sad when I think about my sexual experiences.
100. My sexuality is something that I myself am in charge of.
101. I responded to the above items based on:
   (A) A current relationship.
   (B) A past close relationship.
   (C) An imagined close relationship.

Note. R = reverse-scored item.

Sexual Self-Disclosure Scale

JOSEPH A. CATANIA,¹ University of California, San Francisco

The Sexual Self-Disclosure Scale (SSDS) is a 19-item, Likert-type scale measuring the degree of threat associated with sexuality questions. The scale items assess respondent’s self-reported ease or difficulty with disclosing information in different contexts and interpersonal situations. Description

The self-administered scale requires respondents to imagine themselves in the different situations described by each item and then rate how easy or difficult it would be to reveal sexual information under each circumstance. A short, 7-

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Response Mode and Timing

Ratings made on 6-point Likert-type scales, in which 1 = extremely easy, to 6 = extremely difficult. All forms take approximately 3–5 minutes to complete.

Scoring

Scores are produced by summing across items. Lower scores indicate less threat.

Reliability and Validity

The SSDS has been administered to college students and a national probability sample. The scale was administered to participants recruited from introductory social science classes at a large western university (N = 66 males, 127 females) who were asked to participate in a study assessing response bias in self-administered questionnaires and sample bias in face-to-face interviews (Catania, McDermott, & Pollack, 1986). Respondents’ mean age was 24.6 years; education, 12–19 years; 100% Caucasian heterosexuals; 89% with prior coital experience; 65 respondents having had coitus with their current partner. Internal consistency reliability (Cronbach’s alpha) was .93; Test-retest r was .92.

In terms of construct validity, the scale was also found to correlate significantly with Chelune’s (1976) General Self-Disclosure Scale, r(72) = –.51, p < .0001. Note that lower SSDS scores indicate less threat, whereas higher scores on Chelune’s scale indicate less threat. One item from the Chelune Scale concerning sexuality was removed to eliminate redundancy between scales.

The discriminant validity of the SSDS was assessed in a separate analysis in which introductory psychology students (n = 90) were compared with students in a human sexuality course (n = 84). We hypothesized that the human sexuality students, on the basis of self-selection for a course of that nature, would be more sexually self-disclosing than the average introductory psychology student. This hypothesis was supported: Intro Psych M = 60.7, SD = 16.2; Sex Course M = 54.6, SD = 17.1; t(172) = 1.66, p < .05. Note that groups did not differ in age, t(172) = 1.14, p > .10; number of sex books read, t(172) = .30, p > .10; number of lifetime sexual partners, t(172) = .09, p > .10; virginity status, χ²(1, N = 174) = .01, p > .10; and sex composition, χ²(1, N = 174) = .01, p > .10. Both the number of sexuality books read and total sex partners had small but significant negative correlations with threat, r(86) = –.24, p < .03; r(86) = .23, p < .05, respectively. There was no difference in number of partial responders; 24% of participants who circled one or more items were detected when comparing respondents who did versus did not receive the SSDS at baseline, χ²(1, N = 193) = .06, p > .10. This finding indicates that the SSDS did not sensitize respondents to making fewer nonresponses. Volunteers, relative to nonvolunteers, were significantly less threatened about disclosing sexual information, t(191) = 7.22, p < .0001. Furthermore, the order of presentation of SSDS or general self-disclosure scales had no significant effects on sexual behavior and pathology summary scores. Summary scores included variety (the total number of different sexual behaviors performed), frequency (total frequency of sexual behaviors performed, and pathology (average percentage of sexual episodes negatively influenced by sexual problems). All t values were less than 1.49, and all two-tailed p values were greater than .14.

The shortened version was administered by phone to 2,018 respondents who were randomly selected, through probability sampling using random-digit dialing of the contiguous United States, to participate in the recently completed (1995) National Survey Methods study (unpublished data, information is available from the author); reliability (Cronbach’s alpha) = .80. Normative data are provided for gender and levels of education; ethnic groups were excluded because there was an insufficient number of non-White ethnic groups to pursue differences (see Table 1).

Table 1

<table>
<thead>
<tr>
<th>Scale</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>Range</th>
<th>Mdn</th>
<th>Alpha</th>
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<td>.09</td>
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<td>4.24</td>
<td>21.0</td>
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<td>Education</td>
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<td>21.0</td>
<td>21.65</td>
<td>.83</td>
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<td>3.96</td>
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<td>22.00</td>
<td>.80</td>
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</table>

References


Exhibit

Sexual Self-Disclosure Scale

Instructions: The following describe different situations in which people may or may not wish to discuss sexual matters. Imagine yourself in each of the situations listed below and circle that number which best shows how easy or difficult it would be for you to reveal sexual information in that situation. Use the key below as a guide for making your answer.

Key
1. Extremely easy
2. Moderately easy
3. Somewhat easy
4. Somewhat difficult
5. Moderately difficult
6. Extremely difficult

1. If you were asked to complete an anonymous questionnaire containing personal questions on sexuality, the answers to which you had been told would never be publicly associated with you personally, how easy or difficult would this be in the following situation:
   a. In the privacy of your own home, with no one else present.
   b. During a large (25 or more people) group meeting, where most others are also filling-out the questionnaire.

2. If you were asked personal sexual questions in a private face-to-face situation (for instance, only you and an interviewer), the answers to which you had been told would never be revealed, how much difficulty or ease would you have in doing this in the following situations:
   a. With a young (20–30 years) female interviewer
   b. With a young (20–30 years) male interviewer
   c. With an older (50 years and older) female interviewer
   d. With an older (50 years and older) male interviewer
   e. With a young (25–35 years) female medical doctor
   f. With a young (25–35 years) male medical doctor
   g. With an older (50+ years) female medical doctor
   h. With an older (50+ years) male medical doctor

3. How difficult or easy would it be for you to discuss a personal sexual problem or difficulty in the following situation (assume you are in private circumstances):
   a. With a close female friend
   b. With a close male friend
   c. With a spouse or sexual partner
   d. With a personal physician
   e. With a specialist in sexual problems

4. How easy or difficult would it be for you to openly discuss your sex life and history in a group of three to five people who are:
   a. Both female and male (mixed company) that you have known only briefly
   b. All members of your own sex that you have known only briefly

5. How easy or difficult would it be for you to discuss a personal sexual problem or difficulty with your parents, or if your parents are deceased how easy or difficult would it have been to discuss such with them? (answer for both parents separately below):
   a. With your mother
   b. With your father

Sexual Self-Disclosure Scale—Short Form

1. Do you think that talking about sex in an AIDS survey is . . .
   Very easy
   Kind of easy
   Kind of hard or
   Very hard
   Declined to answer
   Don’t know

2. How easy or hard would it be to fill out an anonymous questionnaire that asked questions about your sexual behavior in the privacy of your own home with no one else present? Would it be . . .

3. How easy or hard would it be for you to fill out an anonymous questionnaire that asked questions about your sexual behavior in the waiting room of a medical clinic with other patients present, who could not see what you were writing? Would it be . . .
4. How easy or hard would it be for you to answer questions about your sexual behavior if they were asked by a medical doctor in the privacy of his/her own office? Would it be . . . 
5. How easy or hard would it be to answer questions about your sexual behavior if they were asked by a marriage counselor in the privacy of his/her office? Would it be . . . 
6. How easy would it be for you to discuss a sexual problem (read each) 
   With a good friend? Would it be . . . 
7. With a spouse or sexual partner? Would it be . . . 

*The 1–6 scale is repeated after each item.
*These response options follow each item.

## Sexual Self-Disclosure Scale

**Edward S. Herold** and **Leslie Way**, University of Guelph

Although there has been considerable research about self-disclosure, there has been little research regarding disclosure of sexual topics. In particular, researchers have not differentiated disclosure about specific sexual topics. This differentiation is important because sexuality covers a wide range of attitudinal and behavioral areas.

Our first objective was to construct a scale consisting of sexual topics and to determine the extent of disclosure for each. The question of whether subjects vary in their disclosure to different target persons has been examined extensively. When disclosing information on sexual topics, adolescents and young adults prefer to disclose to friends and dating partner than to parents (Herold, 1984).

Our second objective was to analyze sexual self-disclosure separately for each of the target groups of mother, father, close friend of the same sex, and dating partner.

### Description and Response Mode

The Sexual Self-Disclosure Scale (SSDS) was based on Jourard’s Self-Disclosure Questionnaire (Jourard, 1971). The SSDS differs from Jourard’s in three respects. The SSDS measures only sexual topics. The SSDS measures disclosure to the target groups of mother, father, close friend of the same sex, and dating partner. Unlike Jourard, we did not measure self-disclosure to a close friend of the opposite sex as we believed some people might have difficulty in distinguishing between close friend of the opposite sex and dating partner.

### Timing and Scoring

The scale requires about 5 minutes for completion. Self-disclosure scores are obtained separately for each of the target groups. Item scores for each target group are summed and mean scores are obtained.

### Reliability and Validity

Data were obtained from 203 unmarried university females aged 18–22 (Herold & Way, 1988). The respective scale means and Cronbach alpha coefficients were: disclosure to mother ($M = 13.2$; alpha = .84); disclosure to father ($M = 10.1$; alpha = .71); disclosure to friend ($M = 19.7$; alpha = .89) and disclosure to dating partner ($M = 21.9$; alpha = .94). Validity for the scale is indicated by the fact that the mean scores are consistent with previous research which has found greater disclosure to friends and dating partner than to parents and the least amount of disclosure to father (Herold, 1984).

### Other Information

There is no charge for use of the scale and no restriction in its use.

### References


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