The Baltar Sexual Identity Inventory, Female Form: A Multidimensional Measure of Sexual Identity

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LOYOLA UNIVERSITY CHICAGO

THE BALTAR SEXUAL IDENTITY INVENTORY - FEMALE FORM:
A MULTIDIMENSIONAL MEASURE OF SEXUAL IDENTITY

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE GRADUATE SCHOOL
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DOCTOR OF PHILOSOPHY

DEPARTMENT OF PSYCHOLOGY

BY

JOSEPH F. BALTAR

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CHAPTER I

INTRODUCTION

In 1991, this author developed a multi-faceted and quantifiable measure for sexual identity in males (Baltar & Crawford, 1991). A need was assessed for such an instrument given the inconsistent and often contradictory use of terminology in the study of sexual identity as well as a lack of awareness and/or attention to the complexity and multi-dimensionality of human sexuality. The definitions used by the present author are in accord with Larson's (1982) in the belief that sexual identity is one aspect of one's sense of "self" or one's self-concept. Sexual identity may be defined as comprising the thoughts, attitudes, and feelings that correspond to one's gender identity, sex-role identity, and sexual attraction. Gender identity may be defined as the individual's biological sex as well as the sex the individual perceives him/herself as belonging. Sex-role identity may be defined as the degree of masculine and/or feminine attitudes, feelings, and behaviors that are culturally viewed as being typical of one sex or another. Sexual attraction and sexual orientation may be viewed as synonymous. That is, they both
refer to the sex or sexes of the partner(s) the individual is attracted to or oriented towards in terms of actual behavior, fantasy, and/or emotions (Coleman, 1987b).

Research and theory has indicated that sexual identity should be examined on a continuum rather than in a dichotomous framework (homosexual or heterosexual). Further, it has been suggested that sexual identity can be viewed as multidimensional. The need for an adequate assessment tool has been identified. To date, instruments other than the BSII are either limited to components of sexual orientation, limited to one item per dimension which precludes an examination of the nuances which comprise the dimension, or are not quantifiable. This study attempts to construct a quantifiable instrument which will measure female sexual identity in terms of its dimensions using a series of items hypothesized to correspond to a specified construct. It will additionally explore personality variables that are commonly associated with sexual identity such as self-esteem, feelings of guilt associated with sexuality, substance use, and fear of negative evaluation.
CHAPTER II

REVIEW OF THE LITERATURE

Sexual Identity Development


Cass (1979, 1984a) suggested that self-perceived identity may differ from the "presented" identity. That is, she made a distinction between the "private" or personal self and the "public" or social aspects of sexual identity. Consequently, it is possible for an individual to hold a private identity as a homosexual and a public identity as a heterosexual, and vice versa. This type of individual, however, would not have a fully developed sense of "self as a
homosexual" because the self-perception differs from the presented identity. Cass pointed out that it is the "presented self" or public self that is closely linked to the ideal self or the self that the individual wishes to be (Cass, 1984b). Cass based her model of homosexual identity formation on interpersonal congruency theory. The theory holds that stability or change are dependent on the congruence or incongruence felt by the individual in relation to his/her own perception of self, the individual's perception of his/her own behavior and the individual's perceptions of how others perceive him/her. It is a six stage model in which an individual may progress from identity confusion (Stage 1) to comparison with others (Stage 2), identity tolerance (Stage 3), acceptance (Stage 4), pride (Stage 5) and synthesis (Stage 6). According to Cass, an individual may progress through all of the stages, or remain at some point between identity confusion and synthesis. Identity confusion results in conflict and turmoil. She described "ambisexuals," or bisexuals, as a "strategy" wherein a person perceives him/herself as both heterosexual and homosexual. This strategy is employed in stage 2, identity comparison, and is described as more of an "excuse" to not accept one's homosexuality. As such, it appears that, according to Cass' model, the continuum between heterosexuality and homosexuality
is more of a process undergone by a person who is homosexual in his/her journey towards acceptance of that identity. Incomplete acceptance will leave the individual somewhere in between and thus in some degree of conflict (Cass, 1979, 1984a). According to this theory, one may then expect that homosexual and bisexual individual's would experience greater conflict or discomfort related to their sexual identity than their exclusively heterosexual counterparts. In addition, the bisexual individuals would be likely to experience the greatest degree of discomfort as they have not reached resolution of their homosexual identity.

Troiden (1984) criticizes Cass for her inconsistent use of the definition for "identity" and "self." Troiden defines "identity" as an organized set of characteristics that the individual perceives as representing self in relation to an imagined or real social situation. "Self" is defined as "an individual's consciousness of his or her own being" (p. 100). It is a construct which consists of both affective and cognitive dimensions, the affective dimension incorporating the feelings about the self, which Troiden defines as "self-esteem." He refers to the cognitive dimension as the "me," or "objective" self; whereas, the affective dimension is the "I" or "subjective" self. Further, the connection is made between self-esteem and self-evaluation. That is, the closer the
individual's ideal self is to the individual's present self-concept, the greater that individual will value or esteem his/her self. Thus, this seems to suggest that individuals at any point in the continuum of sexuality who express similarity between their present and ideal sexual identity would likely possess higher self-esteem than those individuals who express a desire for change (in either direction) in their sexual identity.

Troiden (1979, 1988, 1993) presents an "ideal-typical" model of homosexual identity development. He maintains that homosexual identity development is not linear, but rather more like a "horizontal spiral" in which movement through the stages occurs in such a way that an individual may exhibit characteristics of more than one stage at a particular time, or move back and forth between stages. In addition, he warns that the ideal types described in a model are not real. Rather the types serve more of a heuristic purpose. Troiden's model follows along similar lines to Cass' model, however he presents identity development in four rather than six stages. Stage 1, or the "sensitization stage" is similar to Cass' Stage 1, in that an individual first begins to sense that there is something different about him/her. Stage 2, "identity confusion," the perception that an individual may actually be homosexual, results in feelings of confusion,
discomfort, and turmoil. Troiden states that conflict and discomfort felt by the homosexual are likely to arise from the guilt, need for secrecy, and social isolation which the stigma of being labeled a "homosexual" creates. This is the result of what he refers to as the "social condemnation of homosexuality." As such, one might hypothesize that homosexuals are likely to experience a greater degree of guilt associated with sexuality, and a greater degree of fear of negative evaluation by others than their exclusively heterosexual counterparts. Like Cass, Troiden (1988) refers to the "ambisexual strategy" as basically a position taken by the homosexual in an attempt to reduce the identity confusion. Although Troiden speaks of the bisexual and homosexual, he does not seem to explore or attempt to explain the identity of the bisexual as separate from that of the homosexual. Stages 3, "identity assumption," and 4, "commitment," in Troiden's model parallel Stages 3 through 6 in Cass' model. The individual begins to slowly accept and acknowledge their homosexuality, and consequently begins to "self-define" as a homosexual. The hallmark of Troiden's commitment stage is that an individual enters into, and commits to, a same-gender relationship. It is at this stage that degree of satisfaction and/or acceptance and comfortability with one's sexual orientation should be the greatest.
During the last two decades, other theorists have offered their own conceptualization of how sexual identity develops in homosexual individuals. Coleman (1982) proposed a five-stage model consisting of the following stages: 1) Precoming out; 2) Coming-out (acknowledgement); 3) Exploration; 4) First relationships; and 5) Identity integration. Dank (1971) spoke of the individual first needing to cognitively identify him/herself as a homosexual (i.e., acknowledge his/her homosexual attraction), followed by an acceptance of that identification. Lee (1977) offered a model consisting of "Signification" (similar to identification), "Coming Out" (similar to self-acceptance and exploration), and "Going Public" (similar to Coleman's identity integration or Cass' identity synthesis). Plummer (1975) theorized a four stage model consisting of "Sensitization," "Signification," "Coming Out," and "Stabilization." His model closely parallels Troiden's four stage model as discussed previously. Minton and McDonald (1984) discuss the formation of a homosexual identity via an ego developmental perspective. Briefly, their position states that during an infant's first year there is not yet a sense of self that has developed apart from the environment (symbiotic stage). The child then begins to identify a sense of self apart from the environment (egocentric stage), and it is at this stage that the child may
begin to experience homoerotic feelings on a primitive level based on pleasure derived from masturbation, same sex emotional attachment, and fantasies involving these same sex figures (similar to Plummer's and Troiden's "sensitization" stages). Social norms are internalized and a sense of personal identity based on role performance begins to develop around the age of puberty (Sociocentric Stage). Finally, acceptance and commitment to a homosexual identity occurs, and the identity itself becomes integrated (Universalistic Stage).

Richard Isay (1986) bases his definition of the homosexual on endurance over time of a predominant same sex-preference. He discusses the notion that behavior may be engaged in which is not necessarily defining of that person's sexual identity, such that a heterosexual may engage in exploratory homosexual behavior, yet identifies as heterosexual given the predominance of opposite sex attraction and its endurance over time. Isay (1989) additionally stresses the importance of erotic fantasy, stating that it plays a greater role in defining an individual's sexual identity than overt behavior which is influenced by societal expectations and prohibitions. Consequently, Isay points to the differentiation between behavior and thought as aspects of sexual identity. He further suggests that fear of non-acceptance, may potentially result in suppression of behaviors
and/or in defenses such as denial, repression, or suppression of thought or fantasy to the extent that the individual may not recognize his/her homosexual desires. Other authors support Isay in his emphasis on the internal affective and cognitive experiences as the defining aspects of sexual identity over behavioral expression, citing that sexual behavior may have motivations other than intense and persistent erotic attraction (Kirkpatrick & Morgan, 1980; Marmor, 1980; Saghir & Robins, 1980).

Stoller (1968), Berger (1983), and McDougall (1986) discuss the anxiety, distress, and/or confusion that commonly accompanies incongruence between various aspects of sexual identity (i.e. behavior, thoughts/fantasies, self-identification, etc). Freud's (1905) notion of "homosexual panic" may have been the first reference to this incongruence between sexual self-identification and internal experiences and feelings. Stoller (1968) and McDougall (1986) stress that, aside from fear of negative evaluation, the greater anxiety resulting from incongruence is the threat to one's established sense of self; thus, an individual who identifies as a heterosexual may experience significant panic at recognizing or acting on homosexual attraction as would a self-identified homosexual at recognizing/acting on heterosexual attraction. According to Berger (1983),
resolution is achieved when these components are once again congruent.

Golden (1987) addresses the issue of sexual identity formation in women. She stresses the conceptualization of sexual identity as occurring on a continuum rather than being dichotomous. She states that, through her clinical experience, she has treated women who have identified as exclusively lesbian, as exclusively heterosexual, and as bisexual in terms of their sexual behavior. She indicates that within these identifications there is likely to exist fluidity through the lifespan as well as across behaviors, such that a woman may identify as heterosexual at one point in her life and as bisexual or lesbian at another. Similarly, a woman may identify as lesbian in terms of her ideation (i.e., emotional, political beliefs) but not so in terms of her sexual behavior or attraction. Golden (1987) differentiates between "primary lesbians" and "elective lesbians" in which primary lesbians believe themselves to be without choice regarding their sexual identity while elective lesbians perceive their lesbianism to be consciously chosen. Golden notes that elective lesbians reported a greater incidence of difficulty in coming out, internalized homophobia, and an unwillingness to give up the social privileges associated with heterosexuality.
In a similar line of study, Vance and Green (1984) examined self-defined lesbians. They found differences based on the developmental period in which the first lesbian relationship occurred. Women who reported their first lesbian relationship as having occurred in adolescence tended towards more masculine sex-role characteristics, reported no emotional involvement with men prior to defining themselves as lesbian, and defined themselves as exclusively lesbian. Women whose first lesbian experience occurred later in their lives exhibited less stereotypical masculine traits and tended towards greater prior emotional and/or sexual involvement with males.

It can be noted that all of these models appear to have several things in common. Primarily, they all discuss the acquisition of a homosexual sexual identity. First, there seems to be a period of time where an individual is unaware and unconcerned about his/her sexual identity, followed by a sense that he/she is different from others. The sense or awareness is further defined by becoming cognizant of an attraction towards members of the same gender. What is done with this awareness depends on the individual, but appears related to the perceived level of environmental support. This support is likely to manifest by coming into contact with others who identify themselves as homosexual. This contact
provides the gateway for experiencing homosexual behavior and for further identification as a homosexual. These models have also been criticized on many points. Perhaps the most comprehensive critique against the use of such developmental models comes from Thomas Weinberg (1985). He states that such models ignore the possibility of alternative pathways to the same identity. They also ignore the possibility that an individual may adhere to more than one identity and regard waverings or deviations as a problem in the process rather than as part of the process. He states that the models tend to presuppose that all individuals begin at the same starting point and develop at the same rate, and that they view the individual as directed towards an end goal of having an integrated sense of self or full acceptance of a homosexual identity. Further, these models do not account for cultural differences in sexual identity development. Weinberg (1985) suggests that a more productive approach to the study of homosexual identity acquisition would be to examine the common elements shared by such individuals rather than to attempt to organize events into stages whereby one stage must be encountered before another. Weinberg's points are well taken and the study of the common elements shared by individuals is an approach which will likely shed much needed light on the study of sexual identity. Although the developmental models
are mostly presented as linear, with a similar starting point and an end goal in the process, they should be accepted as a frame of reference rather than as a rigid step-by-step process from which there are no deviations. Consequently, Troiden and Cass would likely discuss the usefulness of their paradigms in that they identify various observable and identifiable aspects of sexual identity development. Such models provide a starting point for further exploration of the nuances involved in the process of sexual identity acquisition. Clearly, human nature simply does not adhere to the rigidity implied by linear developmental models; however, these models can be very helpful for understanding some of the experiences which may be a part of the process of a non-heterosexual sexual identity acquisition.

The Biological Factors Associated with Sexual Orientation

More recently, interest has grown in examining the biological factors associated with sexual orientation or sexual attraction. Although the nature-nurture debate remains unresolved, the biologically based theories offer important and plausible explanations on the origin and development of sexual orientation. Of note, is that the current state of the research on biological influences of sexual orientation remain inconclusive and in need of further research (Bailey, 1995).

The neuroendocrine theory of sexual orientation posits
that there are essential brain differences in individuals who are sexually attracted to men versus those that are sexually attracted to females, and that these differences are most likely associated with differences in prenatal hormonal exposure (Bailey, 1995). Ellis and Ames (1987) posit a "gestational neurohormonal theory" of human sexual orientation. According to this theory, sexual orientation in all mammals is primarily determined by the degree to which the nervous system is exposed to testosterone, its metabolite estradiol, and to other certain sex hormones (primarily androgens) during neuro-organization. If the levels of these hormones are in the "female range" (i.e., lack of androgens) during neuro-organization, then the individual's orientation will be towards masculine and defeminized partners (M/df). However, if they are in the "male range," the individual will prefer to interact sexually with those presenting as feminine and demasculinized (F/dm). According to the authors, differences in sexual orientation begin between the second and fifth month of gestation (the first neuro-organizational stage) when essentially permanent differences are established in the hypothalamic-limbic region of the brain. Sex typical behavior patterns are further determined during a two to three month interval (second neuro-organizational stage) which slightly overlaps with, and extends beyond, the first stage.
Research has attempted to support the neuroendocrine theory. Animal studies have suggested that psychological stress during pregnancy inhibits the production of androgens, resulting in a homosexual orientation in male offspring (Ellis & Ames, 1987; Money, 1987). Human studies, while inconclusive, have added some support to this theory. Ellis and Ames (1987) report that in a study asking mothers of homosexual, bisexual, and heterosexual offspring to report on the level of psychological stress experienced during pregnancy, "Nearly two-thirds of the mothers of male homosexuals compared to one-third of the mothers of bisexuals, and less than 10 percent of the mothers of heterosexuals were able to recall such (stressful) episodes" (p. 247). According to the authors, the prenatally determined sexual orientation is stored in androgen receptor sites, is reactivated at puberty, and potentially will not stabilize until early adulthood.

LeVay (1991) studied the post-mortem brains of 18 homosexual males who had died of AIDS; 16 males who were presumed heterosexual (but whose sexual orientation was not truly known); and six females (whose sexual orientation was not reported). LeVay reported that the third interstitial nucleus of the anterior hypothalamus was less than half the size in females than in the males classified as heterosexual.
The size of the homosexual males's nuclei approximated that of the female subjects. This study was strongly criticized about the uncertainty of the sexual orientation of those males presumed heterosexual, as well as the fact that AIDS may have been a potential confound given that the homosexual subjects had all died of the disease. Nevertheless, LeVay's findings remain promising and merit further research.

As to the role of genetics in determining sexual orientation, one may argue that through natural selection (in that homosexuals reproduce less frequently than heterosexuals) the prevalence of homosexuality should be on the demise. This, however, is not the case as Bailey (1995) states, "Even at its lowest estimated base rates, homosexuality occurs far more frequently than the highest known mutation rates..." (p. 119).

Pillard and Weinrich (1986) recruited 51 male homosexual and 50 male heterosexual subjects who had same sex siblings. Twenty percent of the homosexual subjects had homosexual siblings versus four percent of the heterosexual subjects. A similar study conducted by Bailey, et al. (1991) supported the higher incidence of homosexual males having homosexual brothers (10 percent) than heterosexual males (2 percent). Pillard (1990) and Bailey, et al. (1993) replicated their studies with female subjects and found similar trends with
higher incidences of homosexual females having homosexual siblings versus heterosexual females.

More recent landmark studies investigated the issue of genetics by recruiting monozygotic twins, dizygotic twins, and non-twin siblings. Bailey and Pillard (1991) found that rates of homosexuality among monozygotic twins was greater (52 percent) than the rate between dizygotic twins (22 percent). The lowest rate occurred between non-twin siblings (11 percent). Follow-up genetic studies replicated Bailey and Pillar's findings, indicating that monozygotic twins shared a greater concordance rate for homosexuality than did dizygotic twins (King & McDonald, 1992; Whitman, et al., 1992). It would appear that conclusive evidence for genetic involvement in sexual orientation would necessitate the identification of a specific gene or genes associated with its formation and development. The identification of such gene(s) has yet to be accomplished.

As Bailey (1995) indicates, theories and research relating to biological origins of sexual identity are indeed necessary, promising, and exciting. Currently, the data are inconclusive, but merit further exploration.

**Personality Variables and Sexual Identity**

Special problems, reported in the literature, frequently faced by the homosexual individual include the "coming out"
process, alcoholism, and concerns/fears around AIDS (Cabaj, 1988). Regardless of the specific treatment issue(s), non-heterosexual individuals often have difficulty accepting their sexual identity and some seek professional counseling to work through the process. The latter often signifies a life-long struggle to accept a sexual orientation that is neither modeled nor promoted by society, and subsequently may be often accompanied by feelings of shame, guilt, fear of negative evaluation, depression, and lowered self-esteem. Cabaj (1988) states that the client is likely to benefit from the exploration of his/her individual feelings surrounding these issues, and recommends that therapists working with these clients encourage such exploration rather than make attempts at giving answers about the etiology of homosexuality in an attempt to diminish the client's angst.

The rate of alcoholism in the gay community has frequently been reported to be especially high, ranging from 25 to 35 percent (Kuss, 1988). Often this is attributed to the fact that "gay" bars are perhaps the most popular place for homosexuals to meet other homosexuals (Cabaj, 1988; Lohrenz, Connelly, Coyne, & Spare, 1978; Smith, 1988). Kus (1988) theorized and found support for his theory that the high rate of alcoholism among homosexuals is not linked to the "gay bar phenomena." He conducted in depth interviews across
the country with recovering alcoholic men and found that a lack of self-acceptance resulting from internalized homophobia seemed to be at the root of their lack of sexual identity acceptance and consequent substance abuse. Indeed, perhaps the gay bars serve the dual function of a place to meet others as well as a place to "escape" (through alcohol) social oppression from society and consequent internalized homophobia. Other studies investigating alcohol consumption in women indicate a significantly higher rate of alcohol abuse among lesbians (Fifield, 1975; Hawkins 1976; Saguir and Robins 1973). Using a non-clinical sample, Saguir & Robins (1973) compared the self-reports of 57 lesbians with 43 heterosexual women. They found that 35% of the lesbians reported a history of alcohol abuse and/or dependence as compared to 5% of the heterosexual women. Diamond and Wilsnack (1978) conducted a descriptive study on alcohol abuse among lesbians. They conducted intensive semi-structured interviews with 10 lesbian alcohol abusers. Alcohol usage was coded as associated with needs for dependency, power and control, and/or improved self-esteem. The authors found that those women who reported greater dependance on alcohol additionally had lower self-esteem, greater dependency and power/control needs, as well as greater conflict associated with their sexual identity. Likewise, Baltar and Crawford (1991) in the study leading to
the construction of the male form of the BSII, found that a greater incidence of substance abuse among gay males was associated with psychological concerns (depression, low self-esteem, discomfort with sexual identity, and fear of negative evaluation) as opposed to sexual identity. While the literature points to a greater incidence of alcohol abuse and/or dependency among homosexuals, the substance abuse appears more directly associated with aspects of psychological discomfort rather than to sexual identification in and of itself. As such, the literature suggests that homosexuality does not directly preclude a predisposition towards greater alcohol consumption. Rather, it appears that the negative feelings and/or discomfort associated with one's sense of being different, unaccepted, unsupported, and lonely, are more likely to result in alcohol/substance abuse or dependence. It follows that individuals who exhibit greater psychological well-being, regardless of their sexual identification, are less likely to abuse alcohol and other recreational drugs.

Weinberg and Williams (1974) surveyed homosexual, bisexual and heterosexual men using the Kinsey Scale. Bisexual men were found to report greater feelings of shame, doubt, anxiety, and guilt over their sexuality than homosexual or heterosexual men, such that they were more likely to conceal their homosexual feelings and expected greater discrimination
from heterosexuals than homosexual subjects. The authors found no other psychological differences between the groups. In addition, they did not find significant difference between groups on a measure of self-esteem. In a study encompassing six counties in California, Bell and Weinberg (1978), conducted extensive interviews with 61 men and, conversely, found that homosexual men scored lower on their measure assessing self-acceptance. They do point out however, that it was the "dysfunctionals" (individuals who had more sexual partners, more regret about being homosexual, and more sexual problems) and "asexuals" who scored lower on this measure, while the "functionals" (high in sexual partners but no regrets about their sexuality and low in sexual problems) and "closed couples" (few partners and low in sexual problems) did not differ from the heterosexual group. Bell and Weinberg also found that homosexual men tended to report greater feelings of loneliness, worried more, felt greater amounts of tension, and were more "paranoid" (defined as feeling that strangers were looking at them critically, tended to be on their guard) than the heterosexual men surveyed. Wayson (cited in Coleman, 1987a) reported that no significant differences were found between heterosexual, homosexual, and bisexual males in a study of personality variables as related to their sexual orientation. Although not significantly
different, he did find that the bisexuals in his sample obtained a somewhat higher self-esteem score than his homosexual or heterosexual participants.

Larson (1982) conducted a study to investigate three components of sexual identity (i.e. gender identity, sex-role identity, and sexual orientation) and their relationship to self-concept. Using the Bem Sex Role Inventory (BSRI) and the Tennessee Self Concept Scale (TSCS) with a sample of 160 subjects, Larson reported that homosexual men scored higher on femininity but not lower in masculinity than did the heterosexual men. In addition, he reported that the samples showed no evidence of psychopathology or strongly negative self-concepts. However, homosexual men were found to be slightly more defensive, possess a lower level of general satisfaction, and exhibit a slightly more conflicted sense of self-concept than did heterosexual men. An interesting finding is that androgynous men (high on both masculine and feminine traits) were found to have the most positive self-concepts, followed by masculine men (high in masculine traits, low in feminine traits), undifferentiated men (low in both masculine and feminine traits), and feminine men (high in feminine traits, low in masculine traits). In addition, androgynous men scored lowest on scales tapping into general maladjustment and personality disorder. Larson's findings
regarding the relationship between androgyny and self-concept replicated the findings of Spence, Helmreich, and Stapp (1975), and of O'Connor, Mann, and Bardwick (1978). In both of these latter studies androgynous individuals obtained higher self-esteem scores than other subject groups. These findings suggest that individuals who experience a greater acceptance of inherent masculine and feminine traits tend towards greater self-esteem and comfort with themselves.

Cooper (1990) interviewed lesbians, all of whom adopted traditionally masculine roles and interests. These subjects essentially rejected the traditional feminine role, choosing the masculine role through play or fantasy; by "acting the tomboy," defined by participation in sports, tree-climbing, preferring to play with boys; and by rejecting items of dress and play associated with girls. Cooper's subjects indicated that in order to gain access to women, they felt the need to adopt traditionally masculine roles. Oberstone and Sukoneck (1976), likewise, surveyed women and found lesbians to possess more masculine characteristics than heterosexual women. Hooberman (1979) in a survey of men found homosexual men to exhibit more feminine characteristics than heterosexual men. Storms (1980), however, using a scale that assessed masculine and feminine traits, found no significant differences in the masculinity or femininity of men or women.
who self-classified as heterosexual, homosexual, or bisexual. They explained that societal judgment of what is considered masculine or feminine has become less defined and that consequently self-report questionnaires are more accurate and reliable than traits assessed by observer subjectivity.

There is further support for the notion that androgyny, which has been found to be more prevalent in homosexuals (Brooks 1981; Hooberman, 1979; LaTorre & Wendenburg, 1983), is associated with better psychological adjustment including greater body satisfaction, greater levels of confidence and self-worth, and greater satisfaction with their sexual activities and their biological sex (Brooks, 1981; LaTorre & Wendenburg, 1983; Oberstone & Sukoneck, 1976; Reiss, Safer, & Yotive, 1974). This author is in accord with Latorre and Wendenburg (1983) in that while such correlations between androgyny and psychological health have been found, it remains unclear as to the nature of this relationship. One may speculate that perhaps an openness to experiencing greater diversity in human sexuality may be indicative of an openness to experiencing all of life's diversities, which may consequently expand one's understanding of oneself as a multi-dimensional individual. Likewise, one may also speculate that a person who is inherently more psychologically adjusted may feel greater security within themselves so as to allow for
greater sexual and life exploration. This question clearly remains open for further investigation. While androgyny is considered "healthier" than positions of extreme masculinity or femininity; prejudice, stereotyping, and negative evaluation are consequences likely to be endured for adopting this attitudinal and behavioral posture (De Monteflores & Shultz, 1978; Riddle & Sang, 1978; Vance, 1984).

A study conducted by Armon (1960) attempting to distinguish personality differences between heterosexual and homosexual women using projective measures (i.e., Rorschach and Figure Drawing) concluded that the two groups could not be distinguished from each other on the basis of their performance on these measures. Armon's samples consisted of 30 overt, self-identified homosexual women and 30 women who were mothers and reported being in a "satisfactory" marriage. Clearly, one may question in this study the selection criteria of the sample of women labeled as heterosexual. Riess (1980) reviewed several projective measures (i.e., Rorschach, Thematic Apperception Test, Draw a Person Test) and pencil and paper tests (i.e., Minnesota Multiphasic Personality Inventory, Szondi Test, Cattell's 16 Personality Factors) to determine their ability to predict certain aspects of homosexuality. In his review, he additionally surveyed the existing literature for studies which attempted to examine the
predictive ability of psychological tests with regards to identifying homosexual men (Anderson & Seitz, 1969; Exner, 1969; Van den Aardweg, 1969). He concluded that most of the projective tests, including the Rorschach and the Thematic Apperception Tests (TAT) were geared towards detecting pathology and that such studies utilized inpatient and/or outpatient heterosexual and homosexual subjects. He stated that the Male/Female scale (Scale 5) of The Minnesota Multiphasic Personality Inventory (MMPI) was found to be the most predictive in terms of sex-role preference; however, he emphasizes that the views taken by the inventory are mostly stereotypical in nature and that less than half of its items were discriminative. Riess (1980) concludes that there are currently no psychological tests which effectively discriminate between sexual identities. Further, he concludes that the most currently used assessment tools do not indicate a difference in degree of pathology among heterosexuals and homosexuals. Riess, Safer, and Yotive (1974) add that projective techniques have not only been targeted at clinical populations, but they are also subject to the interpretation of the researcher. They strongly encourage the development and use of self-report instruments that do not pull for pathology but rather objectively sample the subjective experiences of a non-clinical population.
In further exploring and assessing varying aspects of non-heterosexual versus heterosexual development in females, Burch (1986) theorizes from an Object-Relations perspective on the hurdles associated with individuation and the process of sexual identity development in lesbians. She compares the process of sexual identity formation and acceptance with that of separation-individuation from the parenting figures, such that a child needs to feel permission to venture and explore while simultaneously feeling the presence, support, and security of the parent. In developing a homosexual or bisexual identity the threat exists that while venturing out to explore one's sense of sexual identity, the parent figure will in fact not be there as a source of support, acceptance and security. Burch posits that this scenario is most likely accompanied by intense feelings of anxiety, self-doubt, guilt, loneliness, and consequent low self-esteem.

Buss (1980) hypothesized that self-consciousness and social anxiety may be related to the social stigmatization encountered by non-heterosexuals. Social anxiety is defined as anxiety or fear related to evaluative social contexts (Buss, 1980). In a study conducted by Schmitt and Kurdek (1987) using a non-clinical sample of 51 homosexual men, social anxiety was found to be inversely correlated with self-concept and degree of comfort with their sexual identity.
Smith (1988) states that what initially might appear to be paranoid thinking is often a reality-based fear of rejection that the non-heterosexual anticipates upon disclosure of his/her homosexuality. Moses (1978) conducted an extensive study on lesbian identity management in which she found that while her sample largely reported being satisfied with their sexual identity, they nevertheless engaged in social behaviors and strategies to avoid being identified as lesbian. These behaviors included introduction of partner as "friend," avoidance of discussing living arrangements, pretending to date or actually dating a man, referring to partner in conversation as "he" rather than "she," and using other strategies to disguise their lesbianism. This is clearly suggestive of a fear of being negatively evaluated and the potential consequences of social stigmatization and violence.

Brown (1989) adds that common patterns or behaviors used to negotiate problems associated with coming out and self-identification include: 1) creating physical and emotional distance from family and friends whom one fears may be rejecting or non-accepting; 2) adopting an unspoken agreement that issues regarding sexual identity will not be discussed; and 3) an alliance with those who are aware of the struggle to maintain secrecy lest it disturb, or "kill," those that don't know. These behaviors most often result in inner tension,
guilt, and self-esteem difficulties as the message conveyed is that a part of one's self is "bad" and essentially "unlovable."

Sophie (1982, 1987) states that lesbian women will not generally self-identify as lesbian until they have, at least in part, negotiated or come to experience some self-acceptance regarding their own struggles and conflicts associated with their sexuality. It is not uncommon for an individual to adopt the label of "bisexual" temporarily as a coping strategy given the lesser social stigma, until such time when identification as lesbian becomes more comfortable. Of course, some women identify as bisexual because they are indeed bisexual. Sophie (1982,1987) adds that social contact and support from homosexuals and non-homosexuals is instrumental in the development of self-acceptance and a positive sense of self as a non-heterosexual.

Having reviewed existing models of sexual identity development as well as personality variables associated and/or affected by sexual identity, the attempts researchers have undertaken to measure sexual identity will now be examined.

Measurement of Sexual Identity

Ellis (1939) and Bieber (1969) supported the viewpoint that heterosexuality was "normal" behavior and that bisexuality and homosexuality were deviances. Their
observations were based on clinical populations such that, as Hooker (1969) concluded, inferences made from these psychiatric patients could not be applied to a non-clinical homosexual population.

The first valid attempt at objectively surveying the complexity of sexual identity was made by Kinsey, Pomeroy, and Martin (1948) in their development of the Kinsey Heterosexual-Homosexual Scale (KHHS). Kinsey, et al (1948) developed an equal interval scale ranging from 0 to 6 with 0 indicating "exclusive heterosexuality" and 6 indicating "exclusive homosexuality." Subjects were asked to rate themselves on this continuum, resulting in 50% of the subjects rating as exclusive heterosexuals, 4% as exclusive homosexuals, and the remaining 46% as somewhere in between. While this scale clearly displayed that sexual identity was not dichotomous, it failed to account for factors such as personality variables and changes in sexual identification over time.

Klein, Sepekoff, and Wolf (1985) recognized sexual behavior, fantasies and emotions as dimensions of sexual identity, and included sexual attraction, social preference, self-identification, and lifestyle preference as additional factors. Using this framework, the authors developed the Klein Sexual Orientation Grid (KSOG) whereupon the subject rates him/herself on seven dimensions utilizing a 7-point scale (1
= other sex only; 2 = other sex mostly; 3 = other sex somewhat more; 4 = both sexes equally; 5 = same sex somewhat more; 6 = same sex mostly; 7 = same sex only). In addition, the subject is asked to provide a rating for each of these dimensions in terms of the past, present, and ideal. Klein, et al., distributed this measure and collected their sample through *Forum Magazine*, a widely circulated magazine catering to a largely college educated, professional readership, thereby placing limitations on the generalizability of the sample. Of the 362 respondents to the questionnaire, 128 identified themselves as heterosexual, 172 as bisexual, and 62 as homosexual. Reliability estimates for the past, present, and future dimensions were consistently higher than for any of the seven sexual orientation dimensions. The authors state this could be accounted for by the hypothesis that sexual orientation may be different along developmental lines (i.e., past, present, and future) and therefore the reliability estimates across the seven other dimensions is lowered by these changes in self-identification through time.

Klein, et al. report that inter-item correlations were "generally high" with the exception of "present social preference" and "past social preference" (the authors did not report correlation coefficients). This may indicate that social preference is somewhat different than other aspects of
sexual identity, such that who one prefers to socialize with may not necessarily correlate with one's own gender. The three "time" dimensions became the primary focus of the investigators given their higher correlations over the seven other dimensions. The authors suggest that individuals who self-rated as 1 or 2 could be assigned the label heterosexual, those who self-labeled 3, 4, or 5 could be labeled bisexual and those who self-labeled 6 or 7 could be labeled homosexual. The authors found that, through the individuals' lifetime, there was a movement toward bisexuality observed in all three groups, such that heterosexuals moved towards a more homosexual orientation and homosexuals moved towards a more heterosexual orientation in terms of behavior through experimentation, as well as in attraction and fantasy. Bisexual men and women tended towards continued change and experimentation throughout adult life. This measure has added to the view that sexual orientation is much more complex than previously thought in that it is multi-dimensional and fluid. It also serves as a useful instrument for the researcher to differentiate individuals according to their self-perceived sexual orientation. Although it examines sexual orientation, a similar shortcoming to that of the Kinsey scale is that it does not survey components of sexual identity such as social sex role or gender identity. In addition, the assessment of
each dimension of sexual orientation is based on one item. As previously discussed, studies have indicated that gender identity and sex-role identity play important roles in one's overall sexual identification (Buss, 1980; Cooper, 1990; Hooberman, 1979; Larson, 1982; Moses, 1978; Oberstone & Sukoneck, 1976), and as such, these dimensions should be included in a comprehensive examination of sexual identity. Furthermore, it would seem that a series of items comprising each dimension would add to a measure's validity and increase inter-item reliability within each dimension.

Coleman (1987b) stresses the importance of developing more sophisticated and complex assessment tools to assist the therapist in better understanding his/her client's sexual identity concerns. He emphasizes the particular need for such a tool when the client presents with confusion or conflict around his/her sexuality. In addition, Coleman discusses the importance of going beyond descriptors of sexual object choice to examine the perceptions and feelings that the individual holds about his/her sexual identity and orientation. This would include examining self-esteem, self-acceptance, and degree of comfort with one's sexual orientation. He emphasizes that although a person may be aware of his/her sexual identity, he/she may not be comfortable with or able to accept that identity. As such, these are components which
should be examined separately. Coleman additionally stresses the importance of viewing sexual orientation as not rigidly fixed within a certain point on the continuum. Rather, as indicated by the stage models of homosexual identity development, it appears that sexual orientation can be more fluid and can vary or change through time. As such, it would be important for a measure of sexual identity to include a dimension of time such as past, present, and future. Despite the emphasis on, and importance of, advocating the view of sexuality as a continuum, Coleman (1987b) and Paul (1984) stress that the labels of heterosexual, homosexual and bisexual are important in that they strongly serve to "identify" or "place" one's sexual and affectional inclinations at a particular moment in time. These labels become a way in which an individual defines him/herself and as such becomes part of the individual's identity. What seems important is to not assume that the label has the same exact meaning for every individual. Examining what the label means to a person can be accomplished by administering an assessment tool that allows the individual to report on all of the varying dimensions which are thought to comprise sexual identity.

Coleman (1987a, 1987b) proposed a model based on the dimensions offered by Shively and De Cecco (1977), Klein, et
al. (1985), and Bell and Weinberg (1978). Coleman's model explores nine dimensions of sexual orientation. The first dimension requires the subject to indicate their relationship status. The second and third dimensions require the subject to identify their sexual orientation at present and in the future. The fourth dimension requires the subject to indicate their degree of comfort with their sexual orientation. The other four dimensions require the subject to indicate how they perceive themselves in terms of their physical, gender, sex-role, and sexual orientation identities (behavior, fantasy, and emotional attachments). Finally, Coleman requires the subject to rate each of the latter four dimensions in terms of past-present, and future. Coleman indicates that he collapsed past and present into one dimension as he believes that it is the comparison between present and future that seems to be of greater clinical relevance. The rationale offered is that patient's are most concerned with their present state and future status. This author is in accord with Klein (1980), that three dimensions over time; that is, "past," "present," and "future" should be considered. Results stemming from the development of the Baltar Sexual Identity Inventory (BSII) for males further indicate that greater change in sexual attraction may be observed if past is examined as separate from present and future (Baltar & Crawford, 1991). Like the
KSOG, each of Coleman's dimensions is made up of one item. Further the last five dimensions ask that the subject indicate their response by partitioning a circle into pie slices. While these pie charts yield a graphic representation, it is not a measure that lends itself to quantitative analysis. In addition, like Klein, et al's (1985) sexual orientation grid, it seems that one item per dimension may not reliably assess the construct.

Morin (1977) states that assessing sexual orientation could be important in investigating the factors associated with positive and negative feelings regarding reported identities. He states that better understanding these factors would facilitate fostering positive identifications regardless of the individual's sexual orientation. Morin asserts that the "least offensive" approach to take in assessing sexual orientation is self-report. This approach "does not assume pathology, and gives credence to an individual's self-hypothesized identity" (p. 633). Klein, et al. (1985) reported that the best predictor item for the entire grid in the KSOG was the respondent's self-identification. As such, Coleman (1987b), Klein, et al. (1985), and Morin (1977) all seem to be in agreement that an individual's self-assessed sexual identification is of great importance to how the individual perceives him/herself and as such, self-report
appears to be the current method of choice for investigating sexuality.

Coleman (1987a) also maintains that self-assessment is the best indicator of an individual's sexual identity. In addition, he recommends the use of phrases such as "predominantly homosexual" and "predominantly heterosexual" as more accurate or representative of the complexity of sexuality. This is in accord with Comrey (1978) who stated that using dichotomous (true-false) responses tended to either produce inflated correlations or correlations that were artificially limited in size. He recommended the use of continuous measures that offer a range of scores.

Berkey, Perelman-Hall, and Kurdek (1990) developed the Multidimensional Scale of Sexuality (MSS) in an attempt to validate and contrast six proposed categories of bisexuality as well as categories related to heterosexuality, homosexuality, and asexuality. The six proposed categories of bisexuality include: 1) homosexual orientation prior to exclusive heterosexual orientation; 2) heterosexual orientation prior to exclusive homosexual orientation; 3) predominant homosexual orientation (frequent homosexual desires and/or contacts with infrequent heterosexual desires and/or contacts); 4) predominant heterosexual orientation (frequent heterosexual desires and/or contacts with infrequent
homosexual desires and/or contacts); 5) equal orientation towards members of both sexes, where desires for, and/or contacts with members of both sexes occur on a fairly frequent basis (concurrent bisexual); and 6) equal orientation towards members of both sexes, where exclusive homosexual orientation is followed by exclusive heterosexual orientation (or vice versa), on an ongoing basis (sequential bisexual)" (p. 70). The MSS allows for the individual to identify as one of the above bisexual categories or as exclusively heterosexual, exclusively homosexual, or as asexual. The authors additionally explored the components of "behavior" versus "affect/cognition" in terms of the role they each play in self-categorization. The 45-item measure provides three scores: a behavior score for each of the nine hypothesized orientations; a cognitive/affective score for each of the nine hypothesized orientations; and a score in which the subject self-identifies as one of the nine categories. The investigators hypothesized that a strong correlation would result between the self-selected category and the behavior and cognitive affective scores per individual. This investigation resulted in no subjects identifying themselves as "asexual" nor as "past homosexual, currently heterosexual." Given the low reported frequency of asexuality (Masters, Johnson, & Kolodny, 1986) as well as the low frequency of homosexuals who
successfully alter their sexual identity to heterosexual (Ellis & Ames, 1987; Haldeman, 1991), these findings were not considered surprising. Consequently, examination focused on the six posited categories of bisexuality and the category of exclusive homosexuality. The authors found a significantly high correspondence between self-description and cognitive/affect ratings; however, high correspondences between self-description and behavior occurred only for exclusive heterosexuals, exclusive homosexuals, and homosexuals/past heterosexuals. The authors conclude that these findings support the inclusion of dimensions other than sexual behavior in the study of sexual identity, and that single item self-descriptions can accurately reflect cognitive/ affective dimensions of sexual identity. This further suggests that self-described heterosexuals and homosexuals are more likely to have fantasies and or attractions (emotional and/or physical) towards the same or opposite sex, respectively, than may be acted upon through sexual behaviors. It my be hypothesized, as the authors and the literature suggest that, given the lack of social sanction, it is easier for exclusive heterosexuals to transfer their emotional and physical attractions to behavior than it is to enact same-sex attraction. The authors cite several limitations of their investigation including the small sample
size (approximately 70 men and women) as well as that many of the items were similarly worded which evoked feedback from the subjects that they were at times confusing. Clearly, a strength of this study is the attempt at examining sexual identity as existing along a continuum and as multidimensional. Unfortunately, it would seem that while the dimensions identified include behavior as well as affect and cognition, the differentiation between the latter two is confounded by elements of emotional attraction, arousal, and fantasy being grouped together in one score. Consequently, emotional attraction as opposed to a more cognitive, tangible, and conscious attraction (fantasy, wishes, desires) are not assessed as distinct from each other. Further, other dimensions such as gender identity and sex-role preference, which may be viewed as aspects of sexual identity, are not addressed. The Baltar Sexual Identity Inventory (BSII) (Baltar and Crawford, 1991) was constructed in an attempt to examine the behavioral, cognitive, and emotional experiences of males associated with the development of their individual sexual identity. Particular attention was focused upon the examination of the differing dimensions comprising sexual identity (emotional and sexual attraction, lifestyle and behavior, attitudes, fantasy, gender identification, and sex-role preference) as well as on examination of aspects of
psychological well-being cited in the literature as associated with development of, and degree of comfort in, one's sexual identity (i.e., self-esteem, fear of negative evaluation, substance abuse, and sex-related guilt). Further, the question of whether differences could be observed in heterosexual, bisexual and/or homosexual development among males was assessed. Of the known literature, the BSII is the most comprehensive tool currently available for assessing sexual identity and its components.

With a male sample, the BSII yielded highly significant and interesting results as well as a multi-faceted and quantifiable measure of sexual identity in males. The resulting measure consisted of nine dimensions totalling 87 items. Age emerged as a significant factor, as indicated by Klein, et al. (1985), suggesting that maturation resulted in greater acceptance of one's "true" sexual identity as well as in the diversity of sexual identities. Those individuals who reported being in a committed relationship, regardless of their sexual identity, scored higher in self-esteem as suggested by Troiden (1988).

In examining sexual attraction as dynamic or capable of changing through time, data from the 1991 administration of the BSII was collapsed into one dimension encompassing past and present identification and compared to future or ideal
identification as suggested by Coleman (1987). Similarly high loadings were found with this separation, such that there was no significant difference, which may suggest that greater change in sexual attraction may be observed if past identification were examined as separate from present and future/ideal identification as suggested by Klein, et al. (1985). As such, the administration of the female form of the BSII will examine past sexual attraction as compared to present/future sexual attraction. Another finding associated with sexual attraction was that non-heterosexuals scored lower in sex-associated guilt but higher in fear of negative evaluation and discomfort associated with sexual identity than heterosexuals. This is in support of the notion that a lack of self-acceptance is related to a sense of internalized homophobia stemming from feelings or fears that the individual may not be highly esteemed by others (Kus 1988; Schmitt & Kurdek, 1982). While the literature suggests that the bisexual is likely to experience the greatest degree of discomfort due to lack of support from either the homosexual or heterosexual communities, the findings on the BSII indicated no significant difference in the degree of discomfort experienced between homosexuals and bisexuals related to their sexual identification. Interestingly, the bisexuals in the sample scored higher in the gender identity
dimension than did the heterosexuals or homosexuals. This may be suggestive of a greater degree of androgyny experienced by the bisexual which allows for greater latitude in experience and expression (Garfinkle & Morin, 1978).

Individuals scoring higher in the sex-role dimension, indicating more traditionally female interests and preferences, also scored higher in fear of negative evaluation and sexual identity discomfort as well as lower in self-esteem than individuals reporting more traditionally male interests. Homosexual men scored significantly higher on this dimension than did either heterosexual or bisexual men. The correlation between non-traditional male interests, attitudes, and behaviors, with greater discomfort, fear of rejection and consequent low self-esteem may be associated with a reality-based fear of rejection from others anticipated by the individual (Smith, 1988).

An interesting finding resulted in the area of emotional attraction where heterosexual men reported sexual and emotional attraction to women; homosexual men reported sexual and emotional attraction to men; however, bisexual men reported greater emotional attraction to women and greater sexual attraction to men. These results clearly merit further investigation as it indicates a split in the attractions (i.e., emotional and sexual) which may be related to traits
associated by the bisexual with either sex. That is, bisexual males may tend towards greater sexual attraction with males given an association between sexuality and traits viewed as typically male (i.e., power, aggression, authority), while finding the nurturance, security, and sensitivity typically associated with females as more emotionally gratifying.

Results from the sexual behavior dimension of the BSII revealed that not having had sexual experiences with females was the discriminating factor between non-homosexual (i.e., heterosexual and bisexual) and homosexual men. This suggests that while individuals who identified as heterosexual or bisexual may have expressed interest in, or attraction to other men, a significant number had not engaged in sexual behaviors with men, thereby differentiating them from the homosexual sample who had engaged in such behaviors.

While a consistent body of literature reports that alcohol abuse among homosexuals is disproportionately high (Cabaj, 1988; Kus, 1988; Lohrenz, Connely, Coyne, & Spare, 1978; Smith 1988), this was not supported in the Baltar and Crawford (1991) study. This may indicate a greater use of alcohol in the 1970's and early 1980's when the previous investigations were conducted. It may also suggest that perhaps the greater incidence of substance abuse noted is potentially related to emotional or psychological concerns not
directly associated to sexual identity as assessed by Baltar and Crawford (1991).

The final dimension of the BSII examined social behaviors and attitudes associated with sexual identification. The findings suggested that heterosexuals and bisexuals who have a greater familiarity with homosexual or bisexuals had more positive, less prejudicial attitudes towards them. This finding supports the intervention of exposure to different groups as effective in reducing prejudicial attitudes (Herek, 1993, 1995).

Models and Issues Relevant to Sexual Identity in Women

Cass (1984) suggests that a homosexual identity is best characterized by "a clustering of self-images which are linked together by the individual's idiosyncratic understanding of what characterizes someone as a homosexual" (p. 110). Similarly, Elliott (1985) states that the term "lesbian identity" is relatively new and indicates that it is worthwhile to differentiate lesbian identity from lesbian behavior, homoerotic tendencies, interests, or attachments. As such, Falco (1991) suggests that lesbian identity might be best seen as "a cognitive or felt sense about oneself, or a belief about oneself, which can be more or less congruent with one's behavior, interests, or affections" (p. 81).

In a review of the literature on similarities and
differences between men and women in the coming out process, De Monteflores and Shultz (1978) noted that differing factors between male and female homosexual identity formation included age of first same-sex experience (Riddle & Morin, 1977), age of self-disclosure, and type of attachment such that men tended towards greater sexual attraction with other men while women tended towards more emotional attraction with other women (Saghir & Robins, 1969). Vetere (1983) discusses similar finding in her structured interviews of 23 lesbian women where she found friendship to be a prime developmental and maintenance factor in their relationships. De Monteflores and Shultz (1978) hypothesize that while heterosexual couples become whole through merging with each other, homosexual individuals become whole by becoming psychologically androgynous such that "there will likely be an essential difference in the coming out process for lesbians and gay men, with gay men and women moving in opposite directions on sex-typed dimensions" (p.69). As such, "sex-role violations" as referred to by the authors, are common among homosexuals. According to the authors, lesbians are likely to move towards more traditionally male sex-role characteristics while retaining feminine characteristics, and vice-versa for male homosexuals, each thereby achieving some approximation of androgyny. The authors base their hypothesis on the notion
that society assigns differential roles to men and women and that "the traditional route to full psychological development is for two complimentary half-persons, a man and a woman, to become whole by merging with each other" (p.69). In the case of homosexuals, they posit that an alternative developmental route is possible whereby each individual becomes more psychologically androgynous, thereby adopting characteristics or qualities attributed to both sexes. Clearly, the idea of complimentarity based on sex-role characteristics merits further investigation.

The problem of merger or fusion in lesbian relationships is frequently cited in the literature (Chodorow, 1978; Gilligan, 1982; Krestan & Bepko, 1980; Smalley, 1987). Merger/fusion may be defined as a psychological state in which there is loss of a sense of one's self as individual and separate from one's partner. Chodorow discusses the differing separation/individuation and ego development processes for males and females, such that while mother's tend towards over-identification and close emotional relationship with their daughters, the male child is encouraged to separate and to become independent through the denial of continued attachment. Gilligan (1982) also theorizes that masculinity is defined through separation and independence while femininity is defined through attachment and dependency;
consequently, Gilligan theorizes that males more typically will display fear of intimacy and dependence, finding their sense of identity in independence, while females will more likely demonstrate greater attachment and fear of separation, finding their sense of identity within the context of a relationship.

Kaufman, Harrison and Hyde (1984), in discussing the problem of merger in lesbian relationships, theorize that differing sex-roles may, for some lesbian couples, serve the purpose of providing clear territorial space and a sense of separateness against merger in the relationship. Consequently, if one partner adopts a more stereotypically masculine sex-role position and the other a more typically feminine position, their roles within the relationship would be more clearly defined, thereby decreasing the probability of fusion.

Additionally, Falco (1991) posits that sexual identity development is comprised of internal and external processes. The internal processes involve the development of structures that define the "self" or the identity formation; while the external processes are comprised of attitudes and behaviors that are congruent and supportive of the internal identification. The author states that while both processes exist, it is very difficult to separate them as they are
parallel processes and as such an overlap is essential for healthy sexual identity development. It seems to follow then that the greater the separation or incongruence between the internal and external processes, the greater the individual is likely to experience distress and consequent low self-esteem, anxiety and fear of negative evaluation.

Prevalent models of sexual identity development which apply to both men and women have been previously discussed (Cass, 1979, 1984a; Coleman, 1982; Troiden, 1979, 1984, 1988). Lewis (1984) has additionally postulated a five-stage sexual identity formation model specific to lesbian women. During the first stage, Being Different, the individual has a sense that her feelings are somehow different from the norm. In the second stage, Dissonance, the individual becomes consciously aware of her homosexual feelings and begins to take risks in disclosing these feelings to others. It is through this risk taking and consequent acceptance or non-acceptance from others that the individual begins to develop and establish a self-concept and self-esteem associated with his/her sexuality (Coleman, 1982). Consequently, this tends to be a period of dissonance in which feelings of shame, ambivalence, and guilt are likely and in which defenses such as denial are routinely called upon. Lewis poses that the third stage, Relationships, differs from Coleman's third stage
(Exploration), in that women tend to do their exploring within the context of a developed relationship. Stable Lesbian Identity, Lewis' fourth stage, is characterized by greater self-acceptance, consequently a decline in negative feelings associated with feeling different, and the beginnings of "settling down" and committing to a relationship. Upon reaching the fifth stage, Integration, the individual feels positive about her sexuality and views it as one aspect of many that comprise her sense of self. As such, the struggle is essentially over, and greater time and energy may be assigned to growth in other aspects of life.

The aforementioned authors indicate that, while the models are presented as stages, in fact the stages rarely if ever progress in a linear fashion. Rather they tend to be interactive based on individual life experiences. Most authors will agree that the process typically involves the following points, as summarized by Elliott (1985): 1) there is an experienced sense of being different in terms of one's sexual attraction; 2) an understanding emerges regarding these feelings as associated with the label of homosexuality; 3) an understanding of the need for acceptance of these feeling is essential in formulating a sexual identity; 4) a search is undergone for others with whom to identify and utilize as means of support; and 5) involvement in a sexual-emotional
relationship. Ponse (1978) additionally states that the process delineated by the identity models may begin at any of the aforementioned points.

Gramick (1984) offers an "interactionist" model of lesbian identity acquisition in which he posits that lesbian identity develops through time as a result of the reciprocity of interactions between the person and her environment. That is, Gramick viewed the varying aspects associated with sexual identity acquisition (feeling different; conscious awareness of difference; associating with other lesbians; emotional attraction; physical attraction; physical/sexual contact; development of a relationship) and found that a homosexual identity was primarily constructed and adopted as a result of the formation of a lesbian relationship and by physical/sexual contact. This suggests that while other aspects of sexual identity may be present (i.e., sexual and/or emotional attraction; awareness of being or feeling different, etc.) the individual is most likely to identify as a lesbian if she has had physical/sexual contact and/or developed a relationship with another woman.

**Summary and Hypotheses**

In summary, the review of the literature suggests the need for, and importance of, examining and differentiating sexual identity as non-dichotomous and multi-faceted. The
BSII has been developed as a measure for assessing the multi-dimensionality of sexual identity in males as well as accompanying personality variables which are associated with the development of a healthy and cohesive sense of self (i.e., positive self-esteem, freedom from guilt, social anxiety, conflict/discomfort, depression and substance abuse associated with sexual identification). The current study presents an attempt to answer similar questions associated with female sexual identity acquisition and development while developing a comparable measure for sexual identity in females.

The following specific hypotheses were postulated:

I. The dimensions of the BSII-F will show inter-item consistency.

II. Age will be positively correlated with sexual attraction, sex role identity, emotional attraction, social behavior and attitude, as measured by the BSII-F.

III. Individuals who report commitment to a relationship in that they are either living with or are monogamous with their sexual or romantic partner, will obtain higher self-esteem scores on the Rosenberg Self-Esteem Scale (RSE).

IV. Individuals who self-report as non-heterosexual on items 3 and 4 of the BSII-F will show significantly higher levels of sexual identity discomfort; more stereotypically male sex-role identity; higher levels of emotional attraction
towards females; and more frequent sexual behavior with females on the BSII-F than heterosexuals.

V. Individuals identifying as heterosexual on demographic items 1 and 2 of the BSII-F will demonstrate significantly higher levels of sex guilt.

The following hypotheses were made regarding the dimensions of the BSII-F and other aspects of psychological well-being:

VI. Dimension II (Sexual Attraction, SA) of THE BSII-F will correlate positively with the MMPI - Scale 5, and with the measure of Fear of Negative Evaluation (FNE).

VII. Dimension III (Discomfort, Disc) will correlate positively with fear of negative evaluation, sex-guilt, and the MMPI - Scale 5, and negatively correlate with self-esteem.

VIII. Dimension IV (Gender Identity, GI) will positively correlate with the MMPI - Scale 5, and negatively correlate with self-esteem.

IX. Dimension V (Sex Role Identity, SR), VI (Emotional Attraction, EA), and VII (Sexual Behavior, SxB) will have a positive significant correlation with the MMPI - Scale 5.

X. Dimension VIII (Alcohol and Drug Use, AD), will correlate positively with measures of fear of negative evaluation, sex guilt, and will correlate negatively with self-esteem.
XI. Dimension IX (Social Behavior and Attitude, SBA) will positively correlate with the MMPI - Scale 5 and will negatively correlate with sex guilt.

The following hypotheses were made in regard to the relationships between the various dimensions of the BSII-F:

XII. Dimension II (SA) will positively correlate with dimensions III (Disc), V (SR), VI (EA), VII (SxB), and IX (SBA).

XIII. Dimension III (Disc) will positively correlate with dimensions IV (GI), VII (SxB), and VIII (AD).

XIV. Dimension IV (GI) will positively correlate with dimensions V (SR) and VIII (AD).

XV. Dimension V (SR) will positively correlate with dimensions VI (EA), and IX (SBA).

The following hypotheses were made in regard to sexual orientation, the dimensions of the BSII-F, and five theoretical variables indicated in the literature that are strongly associated with sexual identity.

XVI. The BSII-F will be able to distinguish between heterosexuals, homosexuals, and bisexuals.

XVII. Non-heterosexuals will score significantly higher than heterosexuals on measures of sexual identity discomfort, sex-guilt, and fear of negative evaluation than individuals who identify themselves as heterosexuals.
XVIII. Individuals who identify themselves as homosexual will receive higher masculinity scores and will indicate greater emotional attraction towards women on the BSII-F than individuals who identify themselves as heterosexual and bisexual.

XIX. Individuals who identify themselves as homosexual will receive higher scores with respect to sexual activity with females, and higher scores on positive social behaviors and attitudes towards non-heterosexuals (as measured by the BSII-F) than individuals who identify themselves as heterosexual and bisexual.

The following three conditions were exploratory in nature:

A tenth dimension, Bisexuality (Bi), was explored in the study. The items in this dimension were composed of items specifically addressing "true" bisexuality (an identity comprised of equal sexual and emotional attraction to, as well as sexual behavior with, males and females). The question posed was whether this dimension could be supported by empirical evidence. It was hypothesized that a significant difference would result between groups with "true bisexuals" scoring significantly higher than homosexuals, and homosexuals scoring significantly higher than heterosexuals on
the items comprising this dimension.

Further, 25 percent of the distributed questionnaire packets contained a BSII-F with a six-point as opposed to a four-point Likert scale for items number 24 through 109. This comparison was geared to address whether there would be any difference in results when subjects are given a greater range of response choices.

Third, the Marlowe-Crown Social Desirability Scale (Crowne & Marlowe, 1960) was administered as an additional measure. It was hypothesized that heterosexual women would be more likely to respond in a more "socially desirable" manner than non-heterosexual women.
CHAPTER III

METHOD

Subjects

Participants in this project consisted of 118 female volunteers obtained from the undergraduate human subjects pool of a large, urban, Mid-western university and its surrounding community. The subjects represented a wide demographic range, including age, race/ethnicity, marital/relationship and socio-economic status, education, and religious affiliation. One-hundred and sixty (160) questionnaire packets were distributed, 40 with a six-point Likert scale and 120 with the four-point Likert scale on the BSII-F. Of the 40 packets distributed with the six-point Likert scale, only 13 were returned as compared to 104 of the 120 packets with the four-point Likert scale. Three of the 13 packets contained comments to the effect of "too many choices," "why so many choices?" and "all these choices are annoying!" Given the meager return rate, the analyses were based on the 104 packets.
containing the four-point Likert scale. The return rate for the questionnaires was 86 percent.

Demographic data was collected using a demographics questionnaire. A copy of the demographics questionnaire can be found in Appendix F. Table 1 presents the demographic characteristics of the participants of the study.
Table 1
List of Demographic Variables:
Frequencies and Percents

<table>
<thead>
<tr>
<th>Variable</th>
<th>N = 104</th>
<th>%</th>
</tr>
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<tbody>
<tr>
<td><strong>Age (years)</strong></td>
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<tr>
<td>18 - 25</td>
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<tr>
<td>26 - 35</td>
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<tr>
<td>46 +</td>
<td>12</td>
<td>11.5</td>
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<tr>
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</table>
Measures

_Baltar Sexual Identity Inventory - Female Form (BSII - F)_

It was the specific aim of this project to develop a quantifiable measure which would address the multidimensionality of sexual identity in females. One hundred and ten (110) items were generated and submitted for content analysis by various experts in the areas of psychology, women's medicine, sexuality and sexual identity. These experts rated each of the generated items for relevance, clarity and ratability on a scale of 1 - 4 (i.e., 1=poor, 2=adequate, 3=good, 4=excellent). Only those items receiving scores of 3 or greater on each of the criteria were maintained. From this analysis, five items were deleted and four were created resulting in the administered 109-item version of the BSII - F. For the purposes of this study, sexual identity was defined as the feelings and perceptions that an individual holds about her sexuality within the context of her intrapersonal world as well as within the greater context of society (Larson, 1982). A copy of the BSII - F can be found in Appendix A. The following dimensions are assessed by the BSII:

I. Current Lifestyle and Relationship Status (CLRS): This dimension consists of 8 demographic items which investigate current relationship and lifestyle status (e.g., I am
currently involved in a romantic relationship with a woman; I am currently involved in a sexual relationship with a man). The participant responds either True or False for each of these items. Each item is evaluated individually.

Note - The following dimensions of the BSII-F (Dimensions II through X) contain multiple choice and/or Likert-type scaled items. Responses to the Likert-type items range from 1 (strongly agree) to 4 (strongly disagree). Each response for both multiple choice and Likert-type scale items is assigned a specific weighting depending upon the way in which the item is stated, specifying its direction or valence. Items in each dimension were counterbalanced. A sum score of each dimension is calculated by adding the weighted responses for each item. Detailed information regarding the types of items in each dimension and an explanation of the meaning of the obtained score is included under the discription of each dimension.

II. Self-Perceived Sexual Orientation/Attraction (SA): This dimension assesses how an individual views her sexuality in a historical, present, and future/fantasy context. It takes into account past, present, and future preferences, and examines how the individual views others as perceiving her. The 24 items comprising this dimension include 7 multiple choice questions [e.g., Currently I see myself as being
sexually attracted to: a) males only; b) females only; c) both males and females but mostly males; d) both males and females but mostly females; and e) both males and females equally] and 17 four-point Likert-type items ranging from 1 (strongly agree) to 4, (strongly disagree). An example of an item in this dimension would be, "I would engage in sexual exploration with a female." Scores on this dimension can range from 0 to 76. Higher scores on this dimension indicate a greater attraction or orientation towards other females. As previously mentioned, this dimension is divided into two sub-dimensions, IIA (past sexual attraction, consisting of 7 items) and IIB (present/future sexual attraction, consisting of 17 items).

III. Discomfort with Sexual Orientation (Disc): This dimension evaluates an individual's affect regarding her self-perceived sexuality and the beliefs she might hold regarding how she is perceived by others. The 26 items comprising this dimension include 5 multiple choice questions [e.g., How do you feel about your sexual desires and/or thoughts?: a) very comfortable; b) somewhat comfortable; c) somewhat uncomfortable; and d) very uncomfortable] and 21 four-point Likert-type items ranging from strongly agree to strongly disagree [e.g., I am comfortable with who I am sexually]. Scores on this dimension can range from 0 to 85. Higher
scores on this dimension indicate a greater degree of sexual orientation discomfort.

IV. Gender Identity (GI): This dimension assesses the biological sex of the individual and her feelings about her gender. The 7 items comprising this dimension are structured along a four-point Likert-type scale ranging from strongly agree to strongly disagree [e.g., I currently wish I were of the opposite sex]. Scores on this dimension can range from 0 to 21. Higher scores on this dimension indicate that the individual identifies and/or perceives herself to be male.

V. Sex-Role Identity (SR): Sex-role identity is assessed using items examining emotions, behaviors, and interests labeled by the American culture as being typical of males or females. The 10 items comprising this dimension include 3 multiple choice items [e.g., I consider myself to be: a) very feminine; b) feminine; c) predominantly feminine with masculine characteristics; d) androgynous - equally masculine and feminine; e) predominantly masculine with feminine characteristics; and f) masculine] and 7 four-point Likert-type items ranging from strongly agree to strongly disagree [e.g., I feel that I should take a passive stance in relationships]. Scores on this dimension can range from 0 to 34. Higher scores on this dimension indicate that the individual regards herself as possessing stereotypical male
characteristics.

VI. Emotional Attraction (EA): This dimension is distinguished from sexual attraction by referring to affectional and emotional attraction towards males and females. It consists of 10 items utilizing a four-point Likert-type format ranging from strongly agree to strongly disagree [e.g., I am emotionally closer to my male friends than to my female friends] except for one item which is in multiple choice format [I am primarily emotionally attracted to: a) females only; b) males only; c) both males and females, but mostly females; d) both males and females, but mostly males; and e) both males and females, equally]. Scores can range from 0 to 28. Higher scores on this dimension indicate that the individual feels emotionally closer to other females than males.

VII. Sexual Behavior (SB): This dimension attempts to isolate sexual activity by explicitly asking the individual about specific sexual behaviors. It differs from the other dimensions in that the focus is on sexual behavior in which the individual has engaged in rather than anticipated or fantasized sexual activity. The 9 items comprising this dimension are scaled in four-point Likert-type format ranging from strongly agree to strongly disagree [e.g., I have engaged in masturbatory foreplay with a female] except for one item
which is in multiple choice format [Up to now, I have been sexually active with: a) males only; b) females only; c) both males and females, but mostly males; d) both males and females, but mostly females; and e) both males and females, equally]. Scores can range from 0 to 26. Higher scores indicate that the individual reports engaging in more sexual behaviors with other women than with men.

VIII. Alcohol/Drug Use (AD): This dimension consists of 9 items that assess the use of alcohol/drugs associated with sexual activity, attraction, and interest. That is, the items in this dimension assess the use of a mood altering substance to either affect the level of pleasure, comfort, or confidence associated with sexual behavior, attraction, or interest. All the items in this dimension are scaled in four-point Likert-type format ranging from strongly agree to strongly disagree [e.g., I feel that alcohol helps me relax when I am interested in someone]. Scores on this dimension can range from 0 to 27. Higher scores on this dimension indicate a more prevalent use of alcohol/drugs related to sexual activity and experience.

IX. Social Behavior and Attitude (SBA): This dimension is assessed by 12 items which are designed to explore a person's attitudes, beliefs, and social behaviors related to sexual expression. Scores range from 0 to 36. All the items in this dimension are structured in four-point Likert-type format.
ranging from strongly agree to strongly disagree [e.g., Sexual attraction between two women is acceptable]. Higher scores indicate the presence of a more open and non-prejudicial attitude toward non-heterosexuals.

X. Bisexuality (BI) (Experimental Dimension): This dimension consists of 5 Likert-type scale items developed to explore "true bisexuality," defined as equal sexual and emotional attraction, and equal sexual activity with males and females (Golden, 1987; Klein, 1973, 1985). Scores on this dimension range from 0 to 15. Higher scores on this dimension indicate more prevalent sexual activity and higher emotional and sexual attraction toward both men and women. Examples of items in this dimension include, "Being bisexual means having the best of both worlds," and "I would never wish to be bisexual."

The BSII-F takes approximately 30 minutes to complete and 10 minutes to score. A copy of the items hypothesized for each dimension may be found in Appendix C, and a copy of the weighting per item is presented in Appendix D.

The Mosher Guilt Inventory - Sex-Guilt Subscale (MSG), (Mosher, 1966): This 28-item subscale examines attitudes and cognitions related to the production of guilt or remorse involving sexual expression, interest-excitement, and enjoyment-joy. Mosher (1979) stresses that the measure is one which assesses guilt as a disposition rather than as an
affect. He defines sex-guilt as a person's "proneness to experience feelings of guilt for violating or anticipating the violation of a moral standard" (p. 105). Individuals completing the MSG are required to make a forced choice between two options. One of the options is scored one point and the other zero (O'Grady & Janda, 1979). Scores on the MSG can range from 0 to 28. Higher scores indicate greater guilt associated with sex. The author reports that the internal consistency of this scale approximates .90 (Mosher, 1966; Mosher 1979). A copy of the MSG is presented in Appendix D.

The Fear of Negative Evaluation Scale (FNE), (Watson & Friend, 1969): The Fear of Negative Evaluation Scale is comprised of 30 items to be answered either True or False. The items assess subject's feelings regarding social approval and evaluation by others. Scores on this measure range from 0 - 30. Higher scores on this measure indicate greater fear of negative evaluation. Test-retest reliability has been reported at .78 (Watson & Friend, 1969). A copy of the FNE is presented in Appendix D.

The MacAndrew Alcoholism Scale (MAC) (MacAndrew, 1965): This is a subscale of the Minnesota Multiphasic Personality Inventory (MMPI-I) consisting of 49 items answered either True or False regarding attitudes and behaviors associated with alcohol use. Coefficients of test-retest (Graham, 1987)
reliability for the MAC scale have been reported at .82 (a sample consisting of college males) and at .75 (for college women). Cross-validation data for this scale has resulted in correct classification of approximately 82 percent of alcoholic and non-alcoholic subjects drawn from a population of non-clinical male and female college students (Graham, 1987). Scores on this measure range from 0 - 49. Higher scores indicate an excessive use of alcohol or the probability of significant alcohol abuse (Graham, 1987). A copy of the MAC scale is presented in Appendix D.

Masculinity/Femininity Scale - MMPI-I (Scale 5) (Hathaway & McKinley 1943): The Masculinity/Femininity Scale of the MMPI-I consists of 60 items answered True or False [e.g., I like collecting flowers or growing house plants]. Scores on this measure range from 0 - 60. Higher scores for females in this subscale generally indicate rejection of stereotypical female interests. Higher scores are associated with stereotypically male characteristics such as aggressiveness, competitiveness and assertiveness. Lower scores are indicative of females who present as extremely passive, submissive, and dependant (Graham, 1987). Test-retest reliability is reported to range between .70 and .80 (Schwartz, 1977). Graham (1987) states that the authors of the MMPI-I appeared to not be especially concerned with issues of
internal consistency given the empirical keying procedures associated with basic scale construction. However, Dahlstrom, Welsh and Dahlstrom (1975) estimate internal consistency of this scale as ranging from .60 to .90. A copy of the MMPI-I, Scale 5 is presented in Appendix D.

The Rosenberg Self-Esteem Scale (RSE) (Rosenberg, 1965): The RSE consists of 10 statements concerning issues of self-esteem [e.g., At times I think that I am no good at all.] to which the subject is asked to respond on a 4 point Likert-type scale (strongly disagree to strongly agree). Scores range from 10 - 40 with higher scores indicating a greater sense of positive self-esteem. Convergent validity has been reported between the RSE and the Heath Self-Image Questionnaire and the Coopersmith Self-Esteem Inventory to be .83 and .60, respectively (Crandall, 1973; Tippet & Silber, 1965). A copy of the RSE is presented in Appendix D.

The Klein Sexual Orientation Grid (KSOG) (Klein, Sepekoff, & Wolf, 1985): The KSOG is designed to assess self-ratings of seven variables pertaining to sexual attraction, sexual behavior, sexual fantasies, emotional preference, social preference, self-identification, and lifestyle preference, which the subject is asked to rate on a continuum of 1 through 7: 1 corresponding to exclusively heterosexual preference and 7 corresponding to exclusively homosexual
preference. The respondents are asked to make these ratings in terms of their past, present, and ideal choice. The 7 by 3 grid results in 21 ratings which are collapsed into three categories (strictly heterosexual, bisexual, homosexual). The reliability ratings of the KSOG were reported as excellent (the authors do not report correlation coefficients) although they were higher for the past, present, and ideal dimension than across any of the seven other dimensions (Klein, Sepekoff, & Wolf, 1985). Item to item Cronbach Coefficient Alpha correlations were reported as high except for the "present social preference" and "past social preference" variables. The authors reported significant differences between the past and present scales, but none between the present and ideal scales (Klein, Sepekoff, & Wolf, 1985). A copy of the KSOG is presented in Appendix D.

The Marlowe-Crowne Social Desirability Scale (SDS) (Crowne & Marlowe, 1960): The SDS was designed to measure the propensity to respond in an overly positive manner when providing self-report information. The measure consists of 33 items answered True or False [e.g., My table manners at home are as good as when I eat out in a restaurant]. Scores on this measure range from 0 to 33. Higher scores on this scale generally indicate a greater degree of investment to respond in a socially desirable manner. Lower scores on this scale
generally indicate individuals who respond to his/her environment in a manner which does not necessarily conform to socially desirable norms (Crowne & Marlowe, 1960). The internal consistency of the SDS, as measured by Cronbach's Coefficient Alpha, is reported by the authors at .88 with a temporal stability of .88. (Crowne & Marlowe, 1960). A copy of the SDS is presented in Appendix D.

Procedure

All participants in the project were presented with an introduction to the study either personally (N = 48) or via a cover letter (N = 112) (refer to Appendix F). Questionnaires administered through in person invitation resulted in a 97 percent return rate, while those introduced through cover letters resulted in a 67 percent return rate. Participants were informed that they were being asked to participate in a project designed to investigate the process by which people come to understand themselves across various interpersonal dimensions. They were assured that all information gathered would be kept anonymous and held in the strictest confidence. A consent form was given to each participant to read and sign (Refer to Appendix F). Participants were told they could discontinue their participation at any time without penalty. The consent form included the researcher's telephone number and participants
were encouraged to record it for any questions that might arise and also for the purpose of debriefing at the conclusion of the study.

The participants were asked to complete a packet of questionnaires. The packet consisted of a demographic sheet, the BSII, RSE, MMPI-Scale 5, KSOG, FNE, MSG, MAC, and the SDS scale. The measures were counterbalanced to control for ordering effects. The questionnaires took approximately 50 minutes to complete. Participants were instructed to submit any and all questions concerning the project. Questions were addressed at the conclusion of the questionnaire period or by telephone by the author and/or the author's graduate student research assistant. A debriefing statement, including the researcher's phone number, was provided to each subject at the conclusion of the project. A copy of the debriefing statement is presented in Appendix F.

To protect the subjects' anonymity, names did not appear on any of the questionnaires. Subjects who returned their questionnaires through the mail were provided with a separate self-addressed stamped envelope in which to return their signed consent form. Questionnaires were coded to ensure that all material from each subject were kept together. During group administrations, subjects were spaced apart to ensure privacy while completing the questionnaires. A
graduate research assistant coordinated the group administrations, all of which were conducted in a university classroom setting. For consistency, the instructions given during the group administrations were identical to those provided in the cover letter accompanying questionnaire packets distributed through the mail. Consent forms were separated from the questionnaires at the onset, and no code numbers appeared on the consent forms, so as to ensure that the individual's names would not be matched with their questionnaires.
INTER-ITEM CORRELATIONS FOR THE BSII-F:

Hypothesis I stated that the Dimensions of the BSII-F would show inter-item consistency. To test for the homogeneity within each of the 10 dimensions (IIa, IIB through X)\(^1\), the correlation of each item with its dimension, minus the item itself, was computed employing a Pearson product-moment correlation. The item was subtracted from the dimension to prevent an inflated coefficient resulting from the item's correlation with itself (Guilford & Fruchter, 1978). The established criteria mandated that an item needed to correlate more highly with its hypothesized dimension than with any other dimension in the measure. Items not meeting this criteria were deleted from the final measure. Items were deleted from all of the dimensions with the exceptions of

---

1 The 10 Dimensions of the BSSI-F are comprised of the following:
IIa - Sexual Attraction-Past
IIB - Sexual Attraction-Pres/Fut
III - Discomfort
IV - Gender Identity
V - Sex Role Identity
VI - Emotional Attraction
VII - Sexual Behavior
VIII - Alcohol/Drug Use
IX - Social Behavior and Attitudes
X - Bisexuality
Sexual Behavior and Bisexuality. The number of items deleted from the dimensions were: Sexual Attraction-Past (-1); Sexual Attraction-Present/Future (-1); Alcohol/Drug Use (-3); Sex Role (-1); Discomfort (-2); Emotional Attraction (-2); Gender Identity (-2); Social Behavior and Attitudes (-3). This resulted in the deletion of 15 items, bringing the total items included in the BSII-F to 102. A summary of the intercorrelations of each item with its dimension is presented in Appendix G (Dimension I, Current Sexual Lifestyle and Relationship Status, was not included in this analysis as it is a demographic dimension). Of the original 117 items, 87% were retained as correlating with its hypothesized dimension. All but 7 of the retained items correlate at the $p < .001$ level with their respective dimension. Five of the other items are significant at the $p < .01$ level, and the final 2 items are significant at the $p < .05$ level. Of the hypothesized dimensions the highest item to dimension mean correlation resulted for the Sexual Attraction Dimension (Present-Future/Fantasy $= .93$). The lowest item to dimension mean correlation obtained was .22 for the Emotional Attraction Dimension.

Reliability Coefficients for the Dimensions of the BSII-F:

Cronbach coefficient alphas were calculated to assess the reliability of each of the dimensions comprising the BSII-F.
The resulting coefficient for each dimension provides a measure of the internal consistency of the items comprising that dimension. The square root of this coefficient, known as the index of reliability, has been interpreted as the percentage of true variance in the trait measured (Anastasi, 1982). Table 2 presents these coefficients. The internal consistency coefficients resulting for each dimension are generally high, which indicates a homogeneous domain for each dimension. Dimensions VIII (A/D), III (Disc), IX (Bisexuality) and IV (GI) resulted in the highest alphas (.83, .82, .81, and .82 respectively) indicating for these dimensions between 89% and 92% of the variance in the scores is attributable to true variance in the trait measured. All of the other dimensions resulted in acceptable alphas ranging between .78 and .80, indicating true variance as between 88% and 89% (refer to Table 2). Collectively, these results indicate that the BSII-F is internally consistent.
Table 2

Reliability Coefficients and Indices of Reliability for the Dimensions of the BSII-F

<table>
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<th>Dimension</th>
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<th>Index</th>
</tr>
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<td>.78</td>
<td>.88</td>
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<tr>
<td>II(b) (SA-PrFut)</td>
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<td>.78</td>
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<tr>
<td>III (Disc)</td>
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<td>IV (GI)</td>
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<td>.91</td>
</tr>
<tr>
<td>V (SR)</td>
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<td>.80</td>
<td>.89</td>
</tr>
<tr>
<td>VI (EA)</td>
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<td>VII (SxB)</td>
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<td>VIII (AD)</td>
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<td>X (Bisexual)</td>
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Demographic Variables:

Hypothesis II stated that age would be positively correlated with Sexual Attraction-Present/Future, Sex Role Identity, Emotional Attraction, and Social Behavior and Attitude as measured by the BSII-F. To explore the hypothesis, subjects were categorized into the following groups: Group I - 18 through 25 years; Group II - 26 through 35 years; Group III - 36 through 45 years; and Group IV - 46+ years. One-way Analysis of Variance examining the four groups and their scores on the aforementioned dimensions of the BSII-F were conducted.

With respect to sexual attraction, significant differences were found such that Groups III ($M = 33.57; SD = 17.74$) and IV ($M = 23.67; SD = 21.98$) significantly differed from Group I ($M = 7.27; SD = 10.6$) in that Groups III and IV (ages 36 and over) were significantly more attracted to females than Group I (ages 18 through 25). [$F(3,100) = 7.52, p < .001$]. These results are presented in Table 3.

With respect to sex role identity, no significant differences were found between age groups [$F(3,100) = 2.16, ns$].
Table 3

One-Way Analysis of Variance and Sheffe Tests with Age as the Independent Variable and Sexual Attraction—Present/Future of the BSII-F as the Dependent Variable

<table>
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<th>SOURCE</th>
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<td>Between Groups</td>
<td>3</td>
<td>1596.95</td>
<td>7.52***</td>
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<tr>
<td>Within Groups</td>
<td>100</td>
<td>212.37</td>
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<td>Total</td>
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Ages:

<table>
<thead>
<tr>
<th>Ages:</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-25(a)</td>
<td>7.27</td>
<td>10.6</td>
</tr>
<tr>
<td>26-35(b)</td>
<td>15.58</td>
<td>15.59</td>
</tr>
<tr>
<td>36-45(c)</td>
<td>23.57</td>
<td>17.74</td>
</tr>
<tr>
<td>45+ (d)</td>
<td>23.67</td>
<td>21.98</td>
</tr>
</tbody>
</table>

*** p < .001
With respect to Emotional Attraction, significant differences were found between Group I (M = 15.67; SD = 4.74)(ages 18 through 25) and Groups III (M = 21.43; SD = 7.38) and IV (M = 22.75; SD = 3.86)(ages 36 and over), such that the latter two groups exhibited significantly higher levels of emotional attraction toward women [F(3,100) = 8.03, p < .001]. These results are presented in Table 4.
Table 4

One-Way Analysis of Variance with Age as the Independent Variable and Emotional Attraction on the BSII-F as the Dependent Variable

<table>
<thead>
<tr>
<th>SOURCE</th>
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<th>F</th>
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<tbody>
<tr>
<td>Between Groups</td>
<td>3</td>
<td>238.29</td>
<td>8.03***</td>
</tr>
<tr>
<td>Within Groups</td>
<td>100</td>
<td>29.68</td>
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<tr>
<td>Total</td>
<td>103</td>
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Ages:

<table>
<thead>
<tr>
<th>Ages</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-25(a)</td>
<td>15.67</td>
<td>4.74</td>
</tr>
<tr>
<td>26-35(b)</td>
<td>17.54</td>
<td>6.17</td>
</tr>
<tr>
<td>36-45(c)</td>
<td>21.43</td>
<td>7.38</td>
</tr>
<tr>
<td>45+ (d)</td>
<td>22.75</td>
<td>3.86</td>
</tr>
</tbody>
</table>

*** p < .001
With respect to social behavior and attitudes, no significant differences were found between the four age groups \[ F(3,100) = 2.26, \text{ ns} \]

**Dimension I - BSII-F - Current Lifestyle and Relationship Status:**

Hypothesis III stated that individuals who reported as being in a committed relationship in that they were currently living with, or are monogamous with, their sexual or romantic partner would obtain significantly higher levels of self-esteem as measured by the RSE. To evaluate this hypothesis, independent sample t-tests were conducted. No significant differences in levels of self-esteem were found between individuals indicating that they were currently living with \( t(102) = 0.28, \text{ ns} \), or monogamous with \( t(102) = 0.92, \text{ ns} \), their sexual or romantic partners and those individuals who were not living with or monogamous with their partners; thus, this hypothesis was not supported.

Hypothesis IV stated that individuals who self-reported as non-heterosexual (i.e., involved in a sexual and/or romantic relationship with a female) would demonstrate significantly higher levels of sexual identity discomfort (Dimension III); more stereotypical sex-role identity (Dimension V); higher levels of emotional attraction towards
females (Dimension VI); and more frequent sexual behavior with females (Dimension VII) on the BSII-F than individuals who identify themselves as heterosexuals. All subjects who indicated they were in a sexual relationship with a female, also indicated they were in a romantic relationship with a female. To evaluate Hypothesis IV, independent sample t-tests were conducted. Hypothesis IV was supported in that participants who indicated they were involved in a sexual and romantic relationship with another female experienced greater levels of sexual activity with ($M = 15.10; SD = 3.21$), and emotional attraction towards females ($M = 25.00; SD = 4.32$), $t(102) = 14.56, p < .001$; and $t(102) = 7.50, p < .001$] than participants who identified themselves as heterosexual ($M = 2.89; SD = 3.41$ and $M = 16.00; SD = 4.93$, respectively). Hypothesis IV was further supported in that participants who indicated they were involved in a sexual and romantic relationship with another female experienced greater levels of discomfort ($M = 18.60; SD = 10.55$), and more masculine sex-role identification ($M = 13.05; SD = 4.05$), $t(102) = 3.67, p < .001$; and $t(102) = 6.14, p < .001$] than participants who identified themselves as heterosexual ($M = 9.00; SD = 10.49$ and $M = 7.30; SD = 3.70$, respectively). A summary of these results is presented in Table 5.
Table 5

Independent Sample t-tests for Current Lifestyle and Relationship Status (Dimension I – items #3 and #4) and Dimensions III, V, VI, and VII of the BSII-F.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Item #3/4</th>
<th>t - ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>III (Discomfort)</td>
<td>3.67***</td>
<td></td>
</tr>
<tr>
<td>V (Sex Role identity)</td>
<td>6.14***</td>
<td></td>
</tr>
<tr>
<td>VI (Emotional attraction)</td>
<td>7.50***</td>
<td></td>
</tr>
<tr>
<td>VII (Sexual behavior)</td>
<td>14.56***</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Group 1 (yes)</th>
<th>Group 2 (no)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>III</td>
<td>18.60</td>
<td>10.55</td>
</tr>
<tr>
<td>V</td>
<td>13.05</td>
<td>4.05</td>
</tr>
<tr>
<td>VI</td>
<td>25.00</td>
<td>4.32</td>
</tr>
<tr>
<td>VII</td>
<td>15.10</td>
<td>3.21</td>
</tr>
</tbody>
</table>

* p < .05
** p < .01
*** p < .001
Hypothesis V stated that individuals who self-identified as heterosexual (i.e., involved in a sexual and romantic relationship with a man) would demonstrate significantly higher levels of sex-guilt than individuals who self-identified as non-heterosexual. To evaluate this hypothesis, individual independent sample t-tests were conducted on the scores derived from the MSG. This hypothesis was partially supported in that women involved in a romantic (M = 9.55; SD = 4.52) but not sexual (M = 7.53; SD = 3.55) relationship with men reported experiencing greater levels of sex-guilt (t(102) = 5.79 p < .05) than women who were involved in sexual relationships with men (t(102) = 2.09, n.s.).

The Relationship of the BSII-F Sexual Identity Dimensions with Other Indices of Psychological Functioning:

Hypothesis VI stated that Dimension IIa (Sexual Attraction - Past) and IIb (Sexual Attraction Present/Future) would correlate positively with the MMPI-Scale 5, and with the measure of Fear of Negative Evaluation (FNE). To evaluate Hypothesis VI, Pearson product-moment correlations were computed on the scores obtained on Dimensions IIa and IIb and scores obtained on the MMPI-Scale 5 and the FNE (Sexual Attraction-Past and the MMPI-Scale 5: r = .17, n.s.); (Sexual Attraction-Present/Future and the MMPI-Scale 5: r = .10, n.s.)(Sexual Attraction-Past and the FNE: r = .79, n.s.); (Sexual
Attraction-Present/Future and the FNE: \( r = .91, \text{ ns} \). No significant correlations were found for these measures; consequently, Hypothesis VI was not supported.

Hypothesis VII stated that Dimension III (Discomfort) of the BSII-F would result in a significant positive correlation with the FNE scale, and the MMPI-Scale -5, the MSG, and inversely correlate with the RSE. To evaluate Hypothesis VII, Pearson product-moment correlations were computed on the scores obtained on Dimension III and scores obtained on the FNE, MMPI-Scale 5, MSG, and the RSE. This hypothesis was partially supported in that subjects who scored higher on the BSII-F Discomfort scale (indicating greater discomfort with their sexual identity, also scored significantly higher on the FNE (\( r = .23, p < .05 \)), and the MMPI- Scale 5 (\( r = .20, p < .05 \)). Although a positive correlation was hypothesized with the Discomfort Scale and the MSG such that greater discomfort with one's sexual identity would be accompanied by greater guilt associated with sexuality, this relationship was not significant (\( r = -.13, \text{ ns} \)). It was further hypothesized that the Discomfort Scale would inversely correlate with self-esteem, such that greater sexual identity discomfort would be associated with lower self-esteem. To evaluate this hypothesis, a Pearson product-moment correlation was computed; however, no statistically significant associations were
identified (r = -.18, ns).

Hypothesis VIII, stated that Dimension IV (Gender Identity) would positively correlate with the MMPI-Scale 5 and inversely correlate with scores on the RSE. To evaluate Hypothesis VIII, Pearson product-moment correlations were computed on the scores obtained on Dimension IV and scores obtained on the MMPI-Scale 5 and the RSE. This hypothesis was partially supported in that Dimension IV positively correlated with the scores on the MMPI-Scale 5, (r = .21, p < .05), such that greater wish for and/or identification as male was associated with more traditional male interests and characteristics. Scores on Dimension IV were not significantly correlated with self-esteem (r = -.06, ns).

Hypothesis IX stated that the scores derived from Dimensions V, VI and VII (Sex Role Identity, Emotional Attraction, and Sexual Behavior, respectively) would positively correlate with scores from the MMPI-Scale 5. To evaluate Hypothesis IX, Pearson product-moment correlations were computed on the scores obtained on Dimensions V, VI, and VII, and scores obtained on the MMPI-Scale 5. These relationships were significant (r = .64, p < .001); (r = .61, p < .001); (r = .81, p < .001), respectively, indicating that more stereotypical masculine roles and interests, greater emotional attraction towards females, and greater sexual
experiences with females (i.e., having engaged in sexual behavior with other females) as measured by these dimensions on the BSII-F were associated with more traditional male interests and characteristics as measured by the MMPI-Scale 5.

Hypothesis X stated that scores from Dimension VIII (Alcohol and Drug Use) would positively correlate with scores on the FNE and the MSG, and inversely correlate with scores on the RSE. To evaluate Hypothesis X, Pearson product-moment correlations were computed on the scores obtained on Dimensions VIII and scores obtained on the FNE, MSG, and the RSE. As predicted, the use of alcohol and drugs with sexual activities was associated with high levels of fear of negative evaluation ($r = .28$, $p < .01$), sex guilt ($r = .22$, $p < .05$), and low levels of self-esteem ($r = -.24$, $p < .05$).

Hypothesis XI stated that scores derived from Dimension IX (Social Behavior and Attitudes) would be positively correlated with the MMPI-Scale 5, and inversely correlated with the measure of sex guilt. To evaluate Hypothesis XI, Pearson product-moment correlations were computed on the scores obtained on Dimensions IX and scores obtained on the MMPI-Scale 5 and the MSG. While no significant correlation was found between Dimension IX and the MMPI-5 ($r = .08$, ns), the hypothesized inverse correlation between this dimension and the MSG was supported ($r = -.44$, $p < .001$), indicating that
lesser exposure to sexually diverse individuals and less favorable attitudes towards sexual diversity was associated with high levels of sex-guilt.

**Cross-Dimension Correlations of the BSII-F:**

Hypothesis XII stated that Dimensions II (a & b) (Sexual Attraction-Past, and Sexual Attraction- Present/Future) would positively correlate with Dimension III (Discomfort); V (Sex Role); VI (Emotional Attraction); VII (Sexual Behavior); and IX (Social Behavior and Attitudes). To evaluate Hypothesis XII, Pearson product-moment correlations were computed on the scores obtained on Dimensions II a and b, and scores obtained on Dimensions III (Disc), V (SR), VI (EA), VII (SxB), and IX (SBA). As predicted, individuals who scored high in sexual attraction to other females, also scored high in Dimension II (Disc) (Past: $r = .38, p = < .001$; Present Future/Fantasy: $r = .47, p = < .001$); Dimension V (SR) (Past: $r = .63, p = < .01$; Present Future Fantasy: $r = .64, p = < .001$); Dimension VI (EA) (Past: $r = .59, p = < .001$); Dimension VII (SxB) (Past: $r = .78, p = < .001$; Present Future Fantasy: $r = .81, p = < .001$); and Dimension IX (SBA) (Past: $r = .47, p = < .001$; Present Future Fantasy: $r = .56, p = < .001$) V (SR).

These results indicate that participants who experience high levels of sexual attraction towards other females tend to experience high levels of discomfort associated with their
sexual identity; have high masculine sex-role identification; have high emotional attraction towards females; have more frequent sexual activity with females; and have more frequent social behaviors and open attitudes towards non-heterosexuals.

Hypothesis XIII stated that Dimension III (Discomfort) would positively correlate with Dimension IV (Gender Identity), Dimension VII (Sexual Behavior) and Dimension VIII (Alcohol and Drug Usage). To evaluate Hypothesis XIII, Pearson product-moment correlations were computed on the scores obtained on Dimensions XIII and scores obtained on Dimensions IV, VII, and VIII of the BSII-F. Results indicate that individuals who experience high levels of sexual identity discomfort also possess high levels of masculine gender identification ($r = .47, p < .001$); engage in more frequent sexual activity with females ($r = .42, p < .001$); and report more prevalent use of alcohol and drugs associated with sexual activity ($r = .24, p < .05$); consequently, Hypothesis XIII was supported.

Hypothesis XIV stated that Dimension IV (Gender Identity) would positively correlate with Dimension V (Sex Role Identity), and Dimension VIII (Alcohol and Drug Use). To evaluate Hypothesis XIV, Pearson product-moment correlations were computed on the scores obtained on Dimension XIV and scores obtained on Dimensions V, and VIII of the BSII-F.
Results indicate that high levels of masculine gender role identification were associated with high levels of masculine sex role identification ($r = .36, p < .001$), and alcohol and drug usage associated with sexual activity ($r = .24, p < .05$). Of note is that while Dimension IV resulted in an inverse correlation with the MacAndrew Scale (which measures attitudes and behaviors associated with alcohol use), a positive correlation resulted with the BSII-F Alcohol/Drug Use Scale. This suggests that the BSII-F A/D Scale and the MacAndrew Scale are measuring different constructs. The implications of this finding will be further discussed in Chapter V.

Hypothesis XV stated that Dimension V (Sex Role Identity) would be positively correlated with Dimension VI (Emotional Attraction) and Dimension IX (Social Behavior and Attitudes). To evaluate Hypothesis XV, Pearson product-moment correlations were computed on the scores obtained on Dimension V and scores obtained on Dimensions VI and IX of the BSII-F. Results indicate that individuals expressing high levels of masculine sex-role identification also reported high levels of emotional attraction towards females ($r = .37, p < .001$) and greater exposure to and acceptance of sexually diverse individuals ($r = .46, p < .001$).

Table 6 presents a summary of the Pearson product-moment correlations discussed in relationship to Hypotheses VI
through XV.
Table 6

Hypothesized Significant Correlations Between the Dimensions of the BSII-F and Other Administered Measures

<table>
<thead>
<tr>
<th>Dimensions and Measures</th>
<th>IIa</th>
<th>IIb</th>
<th>III</th>
<th>IV</th>
<th>V</th>
<th>VI</th>
<th>VII</th>
<th>VIII</th>
<th>IX</th>
</tr>
</thead>
<tbody>
<tr>
<td>IIa - Sexual Attraction-Past</td>
<td>-</td>
<td>.38</td>
<td>.63</td>
<td>.59</td>
<td>.78</td>
<td>.47</td>
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<tr>
<td>IIb - Sexual Attraction-Pres/Fut</td>
<td>.38</td>
<td>-</td>
<td>.47</td>
<td>.81</td>
<td>.56</td>
<td></td>
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<tr>
<td>III - Discomfort</td>
<td>.47</td>
<td>-</td>
<td>.47</td>
<td>.42</td>
<td>.24</td>
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</tr>
<tr>
<td>IV  - Gender Identity</td>
<td>.47</td>
<td>-</td>
<td>-</td>
<td>.37</td>
<td>-</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>V   - Sex Role Identity</td>
<td>.63</td>
<td>.81</td>
<td>-</td>
<td>.36</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>VI  - Emotional Attraction</td>
<td>.59</td>
<td>.36</td>
<td>.37</td>
<td>-</td>
<td>-</td>
<td></td>
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<tr>
<td>VII - Sexual Behavior</td>
<td>.78</td>
<td>.42</td>
<td>.42</td>
<td>.46</td>
<td>-</td>
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</tr>
<tr>
<td>VIII - Alcohol/Drug Use</td>
<td>.47</td>
<td>.56</td>
<td>.56</td>
<td>.46</td>
<td>-</td>
<td></td>
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</tr>
<tr>
<td>IX  - Social Behavior/Attitudes</td>
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<td>.21</td>
<td>.64</td>
<td>.61</td>
<td>.81</td>
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<td></td>
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<tr>
<td>MSG - Mosher Sex-Guilt Inventory</td>
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<td>-.44</td>
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<td></td>
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<tr>
<td>FNE - Fear of Negative Evaluation</td>
<td>.23</td>
<td>.28</td>
<td></td>
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<tr>
<td>RSE - Rosenberg Self-Esteem Scale</td>
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<td>-.24</td>
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<tr>
<td>MAC - MacAndrew Scale</td>
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<td>.61</td>
<td>.81</td>
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<tr>
<td>MMPI5 - MMPI-Scale 5</td>
<td>*</td>
<td>*</td>
<td>***</td>
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</table>

* P < .05  ** P < .01  *** P < .001
Correlations Between Self-Classified Sexual Identification, the BSII-F, and Other Measures of Psychological Well-Being:

To investigate self-classified sexual orientation, the samples were divided into three groups using the KSOG. Group I (N = 54) was comprised of exclusively heterosexual females defined as those subjects who self-rated as exclusively heterosexual on the KSOG dimensions of sexual attraction, sexual behavior, sexual fantasies, and self-identification. Group II (N = 34) was comprised of bisexual females defined as those subjects who self-rated between 1 and 4, but not all 1s and no rating above 4, on the sexual attraction, sexual behavior, sexual fantasies, and self-identification dimensions of the KSOG. Group III (N = 16) was comprised of individuals who self-rated between 5 and 7 (primarily or exclusively homosexual) on the sexual attraction, sexual behavior, sexual fantasies and self-identification dimensions of the Klein Sexual Orientation Grid.

Hypothesis XVI stated that the BSII-F would be able to distinguish between the three sexually identified groups. To evaluate Hypothesis XVI two separate one-way ANOVAs were computed. These analyses resulted in all three groups emerging as separate and distinct groups, $F(2,101) = 148.39$, $p < .001$, as assessed by Dimension II(a) (Sexual Attraction
Past), and $\chi^2(2,101) = 360.80$, $p < .001$, and as assessed by Dimension II(b) (Sexual Attraction Present/Future-Fantasy). Regarding Sexual Attraction Past, Scheffe post-hoc analysis indicated that the participants who identified as homosexual possession the most sexual attraction towards other females ($M = 14.38$, $SD = 3.42$), followed by self-identified bisexuals ($M = 4.85$, $SD = 3.23$) and heterosexuals ($M = 1.56$, $SD = 1.80$), respectively. Scheffe post-hoc analysis additionally indicated that all three groups differed from each other on sexual attraction Present/Future-Fantasy, with the homosexual group scoring highest in sexual attraction toward women ($M = 45.81$, $SD = 4.62$), followed by the bisexual ($M = 14.92$, $SD = 8.53$), and the heterosexual groups ($M = 2.91$, $SD = 2.99$), respectively.

Because the mean scores of sexual attraction toward women appeared to shift from past attraction to present/future-fantasy attraction, a one-way ANOVA was computed to further examine this finding. The variable of change was examined by computing a "difference score," (i.e., the score for present/future-fantasy attraction subtracted from the score for past attraction. A Scheffe post-hoc analysis was conducted.

The comparison of Sexual Attraction Past versus Sexual Attraction Present/Future-Fantasy, revealed a significant
difference between the groups, with the homosexual group demonstrating the most change in attraction toward women (M = 1.88, SD = 1.71), followed by the bisexual group (M = .59, SD = 1.44), and the heterosexual group who demonstrated no significant change (M = 0, SD = 0). A summary of these findings is presented in Table 7.
Table 7

One-Way Analysis of Variance with Sexual Orientation as the Independent Variable and the Change in Scores on Dimension II(a) and II(b) (II(a) subtracted from II(b) as the Dependent Variable

<table>
<thead>
<tr>
<th>SOURCE</th>
<th>df</th>
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<tbody>
<tr>
<td>Between Groups</td>
<td>2</td>
<td>21.99</td>
<td>19.83***</td>
</tr>
<tr>
<td>Within Groups</td>
<td>101</td>
<td>1.11</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>103</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
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</thead>
<tbody>
<tr>
<td>Exclusively Heterosexual Group</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Bisexual Group</td>
<td>0.59</td>
<td>1.44</td>
</tr>
<tr>
<td>Primarily Homosexual Group</td>
<td>1.87</td>
<td>1.71</td>
</tr>
</tbody>
</table>

*** p < .001
Hypothesis XVII stated that non-heterosexuals (bisexuals and homosexuals) would score significantly higher than heterosexuals on measures of sexual identity discomfort, sex guilt, and fear of negative evaluation. To examine Hypothesis XVII, a one-way ANOVA was conducted utilizing self-identification and the scores derived from Dimension III of the BSII-F (Discomfort with sexual orientation). Significant group differences were identified, $F(1,101) = 18.76, p < .001$. Scheffe post-hoc analysis revealed that self-identified bisexual ($M = 17.38$, $SD = 14.92$) and homosexual women ($M = 15.56$, $SD = 7.84$) scored significantly higher than their heterosexual counterparts ($M = 5.33$, $SD = 4.38$) on levels of discomfort. The bisexual and homosexual participants did not differ significantly from each other.

Hypothesis XVII stated that non-heterosexuals would score higher on the BSII-F Dimension III (Discomfort), a measure of sex-guilt (MSG), and on fear of negative evaluation (FNE) than individuals who identified as heterosexual. To examine this hypothesis, one-way ANOVAS were conducted on the scores derived from Dimension III of the BSII-F, the MSG, and the FNE. With respect to the MSG, results revealed a significant difference, $F(2,101) = 6.48, p < .01$, but not in the predicted direction. Scheffe post-hoc analyses indicated that the heterosexual participants scored significantly higher in sex
guilt ($M = 10.09$, $SD = 4.66$) than their bisexual ($M = 7.26$, $SD = 3.40$) and homosexual counterparts ($M = 7.19$, $SD = 2.76$), respectively. Statistically significant differences in sex-guilt were not found between the bisexual and homosexual participants.

Hypothesis XVII further posited that non-heterosexuals would score significantly higher on fear of negative evaluation (FNE) than heterosexuals. To evaluate this hypothesis a one-way ANOVA was conducted on the scores derived on the FNE. No statistically significant difference between the two groups were found, $F(2,101) = .48$, ns.

Hypothesis XVIII stated that individuals who identified as homosexual would obtain higher masculinity scores as measured by Dimension V (Sex-Role Identity) and higher emotional attraction scores as measured by Dimension VI (Emotional Attraction) on the BSII-F than individuals who identified as bisexual or heterosexual. To evaluate this hypothesis a one-way ANOVA was conducted. Results indicate statistically significant differences between the three groups in terms of their scores on Dimension V of the BSII-F, $F(2,101) = 28.14$, $p < .001$. Scheffe post-hoc analysis indicated that the participants who identified themselves as homosexual scored significantly higher on masculine sex-role identity ($M = 13.38$, $SD = 4.33$) than the bisexual group ($M = $
Participants who identified as bisexual also scored significantly higher on masculine sex-role identity than their heterosexual counterparts ($M = 6.19, \text{SD} = 3.06$).

Hypothesis XVIII further hypothesized that homosexual women would report greater emotional attraction towards women than bisexual and heterosexual women. To investigate this hypothesis an ANOVA was conducted utilizing the scores of the three groups on Dimension VI (Emotional Attraction) of the BSII-F. The results revealed a significant difference between the groups, $F(2,101) = 32.98, p < .001$. Scheffe post-hoc analysis indicated that the homosexual participants ($M = 26.38, \text{SD} = 2.66$) scored significantly higher on the Emotional Attraction dimension than their bisexual ($M = 17.03, \text{SD} = 5.19$) and heterosexual counterparts ($M = 15.61, \text{SD} = 4.82$), in support of the hypothesis that the homosexual women would be more emotionally attracted to women than their heterosexual or bisexual peers.

Hypothesis XIX posited that women who identified themselves as homosexual would report engaging in more frequent sexual activity with other females than heterosexual and bisexual identified women. A one-way ANOVA examining the scores of the three groups on Dimension VII of the BSII-F (Sexual Behavior) was conducted to evaluate this hypothesis.
Statistically significant differences were found, $F(2,101) = 71.68, p < .001$. Scheffe post-hoc analysis indicated that the homosexual participants ($M = 15.31, SD = 2.24$) reported significantly more frequent sexual activity with other women than their heterosexual ($M = 2.30, SD = 2.78$) and bisexual ($M = 5.18, SD = 5.47$) counterparts.

Hypothesis XIX stated that individuals who identified as homosexual would receive higher scores than bisexuals and heterosexuals on the BSII-F Dimension IX assessing positive social behaviors and attitudes towards non-heterosexuals. To investigate this hypothesis, a one-way ANOVA was conducted utilizing the scores of the three groups from Dimension IX (Social Behavior and Attitudes). Statistically significant group differences were identified, $F(2,101) = 17.32, p < .001$. Scheffe post-hoc analysis revealed that all three groups differed from one another with the self-identified homosexual women ($M = 31.19, SD = 1.11$) possessing more positive attitudes towards non-heterosexuals than women identifying themselves as bisexual ($M = 25.32, SD = 5.48$), or heterosexual ($M = 21.70, SD = 6.69$).

Dimension X (Bisexuality) was included in the BSII-F as an exploratory dimension in an attempt to determine if the hypothesis that bisexuality would emerge as a separate and distinct category would be supported. Utilizing the subjects'
scores on this dimension, a one-way ANOVA was conducted to examine this dimension. The analysis resulted as significant, $F(2,101) = 25.91, p < .001$. Scheffe post-hoc analysis revealed that all three groups differed significantly from one another with the self-identified bisexual women ($M = 7.35, SD = 3.63$) reporting greater levels of sexual attractions and activity with both sexes than both heterosexual ($M = 3.15, SD = 2.08$) and homosexual participants ($M = 5.13, SD = 2.00$); thus, this hypothesis was supported. A summary of these findings is presented in Table 8.
Table 8

One Way Analysis of Variance with Sexual Orientation as the Independent Variable and Scores on Dimension X (Bisexuality) as the Dependent Variable

<table>
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<tr>
<th>SOURCE</th>
<th>df</th>
<th>MS</th>
<th>F</th>
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<tbody>
<tr>
<td>Between Groups</td>
<td>2</td>
<td>185.28</td>
<td>25.91***</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within Groups</td>
<td>101</td>
<td>7.15</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>103</td>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
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<tbody>
<tr>
<td>Exclusively Heterosexual</td>
<td>3.15</td>
<td>2.08</td>
</tr>
<tr>
<td>Bisexual Group</td>
<td>7.35</td>
<td>3.63</td>
</tr>
<tr>
<td>Primarily Homosexual</td>
<td>5.13</td>
<td>2.00</td>
</tr>
</tbody>
</table>

*** p < .001
It was further hypothesized that exclusively heterosexual participants would be more likely to respond in a socially desirable manner than bisexual and primarily homosexual participants, based on their scores on the Marlowe-Crowne Social Desirability Scale (SDS). To investigate this hypothesis, a one-way ANOVA was conducted. The analysis yielded a significant difference, $F(2,101) = 3.95, p < .05$). Scheffe post-hoc analysis revealed that self-identified exclusively heterosexual women ($M = 19.89, SD = 5.60$) scored significantly higher than the bisexual and homosexual participants ($M = 14.75, SD = 8.10$); therefore, this hypothesis was supported. A summary of these findings is presented in Table 9.
Table 9

One-Way Analysis of Variance with Sexual Orientation as the Independent Variable and Scores on the Marlowe-Crowne Social Desirability Scale (SDS) as the Dependent Variable

<table>
<thead>
<tr>
<th>SOURCE</th>
<th>df</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>2</td>
<td>173.30</td>
<td>3.95*</td>
</tr>
<tr>
<td>Within Groups</td>
<td>101</td>
<td>43.86</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>103</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Exclusively Heterosexual Group | 19.89 | 5.60|
Bisexual Group                 | 17.76 | 7.35|
Primarily Homosexual Group     | 14.75 | 8.10|

* p < .05
CHAPTER V

DISCUSSION

This investigation has resulted in the construction of a multi-dimensional and quantifiable measure of sexual identity for females. The resulting measure consists of 10 dimensions totalling 102 items. The items comprising the measure have been arrived at through expert ratings and statistical analysis. This has resulted in very high inter-item correlations adding evidence to the content and construct validity of the BSII-F. Convergent and discriminant validity are indicated in that a greater mean correlation was obtained between dimensions of the BSII-F directly assessing sexuality (i.e., Sexual Attraction past/present/future; Sex Role Identity; Gender Identity; Sexual Behavior; and Bisexuality) and other measures of sexual identity used in the analyses (Riess, 1980). That is, the BSII-F demonstrated greater positive correlations with other measures of sexuality (MMPI - Scale 5 and KSOG) than with measures not directly constructed to assess dimension(s) of sexuality. The use of the KSOG to
divide the sample into groups served as an indication of concurrent validity, in that identifying participants into "primarily homosexual," "bisexual," and "exclusively heterosexual" groups via this measure, resulted in three distinct and separate groups according to the BSII-F. The coefficient alphas obtained for the dimensions of the BSII-F further indicate the presence of strong internal consistency.

The remainder of this discussion will focus on the related findings of this investigation based on the hypotheses. It was hypothesized that age would correlate positively with sexual attraction, sex-role-identity, emotional attraction, and more frequent social behaviors and open attitudes towards non-heterosexuals. As hypothesized, age correlated positively with greater same-sex emotional and sexual attraction, and greater same-sex sexual behavior. This suggests, and is in support of findings by Klein, et al. (1985), that maturation (i.e., life and sexual experiences, etc.) may result in greater acceptance and expression of one's true sexual identity, and reductions in internalized homophobia and stigmatization associated with non-heterosexual identity. These findings are in support of the sexual identity development models in which movement is made, through time, maturity, and experiences, from traditionally and/or socially acceptable heterosexual self-identification, to one's

While it was further hypothesized that age would correlate positively with a greater endorsement of items as typically masculine, and a more positive attitude and/or acceptance of homosexuality in others, these relationships were not found. It was thought that, given the movement toward greater self-acceptance with age, this movement would additionally be reflected in more positive attitudes and/or acceptance of sexual diversity in others as well as in a decreased endorsement of traditionally feminine sex-role interests and behaviors. The lack of support for this hypothesis may be reflective of lessened societal adherence to traditional sex-roles, and greater overall acceptance of sexual diversity. Consequently, the older and younger subsets of participants expressed greater endorsement of stereotypical masculine interests and greater acceptance of sexual diversity in others, resulting in no significant differences between the groups.

Age correlated in a positive direction with the KSOG, further supporting a movement towards greater same-sex physical and emotional attraction. While not formally hypothesized, additional significant findings indicated that age correlated inversely with scores on the FNE and the SDS,
suggesting that as this sample of females age, they are less concerned with appearing and/or acting in accordance with societally governed expectations, and consequently may be less fearful, or concerned about being negatively evaluated (Berger, 1983; Isay, 1986; Kirkpatrick & Morgan, 1980; Marmor, 1980; Saguir & Robins, 1980; Stoller & McDougall, 1986; Troiden, 1986).

It was hypothesized that individuals who were involved in a committed relationship such that they were currently living with, or monogamous with, their sexual or romantic partner would possess higher levels of self-esteem, as measured by the RSE, than individuals who reported as single or uncommitted. This hypothesis was not supported, indicating that either there is no true difference between these groupings and or possibly that the RSE, a measure of global self-esteem, does not adequately tap into self-esteem as it relates to relationship commitment and stability. This hypothesis was based on Cass' (1984a) and Troiden's (1984) speculations that "interpersonal congruency" and consequent "commitment to another" would be associated with heightened levels of self-satisfaction, acceptance, and comfortability. It is plausible that lessened societal pressure towards partnerships or relationships may result in individuals choosing to remain as single, and that such a decision has a lessened impact on
self-esteem and/or self-concept. This finding merits further investigation.

It was further hypothesized that individuals who self-reported as non-heterosexual (i.e., involved in a sexual and/or romantic relationship with a female) would demonstrate significantly higher levels of sexual identity discomfort; more stereotypical sex-role identity; higher levels of emotional attraction towards females; and more frequent sexual behavior with females on the BSII-F than individuals who identified themselves as heterosexuals. This hypothesis was supported indicating that non-heterosexual females experienced a significantly greater degree of sexual identity discomfort, more stereotypically male sex-role identification, higher levels of emotional attraction towards females, and more frequent sexual activity with females. These results are quite interesting and merit further discussion. While it makes intuitive sense that women who self-identify as non-heterosexual are likely to experience greater emotional attraction towards other women and greater same-sex activity, the findings associated with discomfort and sex-role identification are curious. It was hypothesized that such a significant positive correlation would result with greater discomfort. This suggests that the level of discomfort as related to societal and familial acceptance may be a separate
construct from one's own personal acceptance of her non-heterosexuality, perhaps creating a dystonic state which results in the discomfort. It is further plausible that anxiety and or apprehension may be associated with the non-heterosexuality itself in the context of being negatively evaluated and/or perceived by others. These possibilities are further supported in that it is the Dimension of Discomfort and not the Dimensions measuring sexual attraction, that correlated positively with the measure of fear of negative evaluation. These findings lend support to Buss' (1980) hypothesis that social anxiety related to the fear of social stigmatization may account for the greater sense of discomfort experienced by non-heterosexuals. It further lends support to other theorists and studies which link social anxiety with discomfort associated with non-heterosexual sexual identity (Brown, 1989; Moses, 1978; Schmitt & Kurdek, 1987; Smith, 1988). Of particular note is Moses' (1978) finding that while lesbians may largely report being satisfied with their sexual identity, they nevertheless engaged in social behaviors and strategies to avoid being identified as lesbian. Future studies need to focus on the issue of discomfort associated with non-heterosexual identity so as to further identify the variables associated with the discomfort. A further consideration may be to examine the relationship of stages of
sexual identity acquisition, as well as the amount and quality of social contact and support received from other non-heterosexuals, with levels of discomfort.

Another interesting query stems from the findings that self-identified non-heterosexuals involved in a romantic/sexual relationship with another female, were associated with higher masculine sex-role identification. Given that non-heterosexuals did not significantly differ from heterosexuals with respect to sex-role identification, the question remains as to why this specific subsample reported greater masculine sex-role identification.

These findings may be explained by the work of De Monteflores and Schultz (1978) who postulate that the notion of "sex-role violation" occurs as non-heterosexual individuals gain greater acceptance of their sexual identity (i.e., evidence more non-traditional sex-role behaviors and interests). This process may be aided by the development of a social support network with other non-heterosexual individuals, forming emotional/sexual bonds with a partner, and/or immersing oneself into the gay, lesbian, or bisexual communities.

It was posited that individuals who self-identified as heterosexual would demonstrate significantly higher levels of sex-guilt than individuals who identified as non-heterosexual.
Of note is that all individuals identifying as non-heterosexual, for the purpose of this analysis, also identified themselves as involved in a romantic and sexual relationship with another female. This was not the case for heterosexual females. Heterosexual participants who identified as being in a romantic, but not sexual, relationship with a male reported significantly greater guilt associated with sexuality than their heterosexual and non-heterosexual peers. It may be that individuals who do not incorporate sexuality into their romantic relationships may be so doing from a basis of greater conservatism, possibly linked to higher guilt associated with sexual behavior. Findings have been cited that androgyny is associated with better psychological adjustment including greater body satisfaction, greater levels of confidence and self-worth, and greater satisfaction with sexual activity and one's own biological gender (Brooks, 1981; LaTorre & Wendenburg, 1983; Oberstone & Suckoneck, 1976; Reiss, Safer & Yotive, 1974). Individuals who are inherently more psychologically well-adjusted may feel greater security in accepting diversity in others and in themselves. It may be speculated that greater openness to, or acceptance of, diversity in human sexuality (lessened adherence to conservatism) may be related to greater psychological adjustment inclusive of decreased guilt.
associated with sexuality. As the non-heterosexual subsample all reported being involved in a romantic and sexual relationship, it would stand to reason that such a relationship would involve a lessened degree of guilt associated with sex. Saguir and Robins (1969) and Vetere (1983) state findings from their research and interviews to suggest that the basis of lesbian relationships is emotional. This is further supported by Lewis (1984) and Elliott (1985) in their presentations of lesbian sexual identity acquisition. That is, while initially there is confusion and a sense of "being different," as sexual identification progresses, a sense of belonging and being accepted replace the initial guilt and fear of negative evaluation; consequently, if lesbians tend to base relationships on emotions, then the sexual element of the relationship would seem to be an extension and/or expression of that emotional attachment. This may offer an explanation for the current findings indicating significant less sex-guilt experienced by the lesbian subsample.

An attempt to explore the relationship between religiosity, sexual identification, and degree of sex-guilt resulted in non-significant findings at conventional level. However a trend in the data suggests greater sex-guilt associated with more conservative religious affiliation. This
trend needs to be carefully considered in future studies of sexual identity and behavior.

It was further posited that the BSII-F dimensions measuring sexual attraction past (IIA) and sexual attraction present/future (IIB) would correlate positively with the MMPI-Scale 5 and with the FNE. This hypothesis was not supported. Given highly significant differences between sexual attraction and sex-role identification as measured by the dimensions of the BSII-F, it may be that the sex-role dimension of the BSII-F and the MMPI-Scale 5 are measuring different constructs. The items comprising the Sex-Role Identity dimension of the BSII-F seem to more specifically address sex-role identification within the context of a relationship, rather than more general sex-role identification within the context of societal norms. Questions comprising the BSII-F sex-role identification dimension are primarily comprised of items associated with one's own and other's view of the participant as masculine versus feminine, and passive versus active. The MMPI-Scale 5 is highly loaded with items that tap into stereotypically feminine or masculine interests and activities. Consequently, the results appear to indicate that non-heterosexual females tended to view themselves as more masculine, and as sexually active in their relationships; while not necessarily endorsing stereotypically masculine
interests and social activities on the MMPI-Scale 5. With respect to the literature, these findings lend support to the notion that individuals who are lesbian identified and in romantic and sexual relationships are more likely to present with more masculine traits as well as be more confident and assertive within the context of their lives (Elliott, 1985; Lewis, 1984). Lewis (1984) further alludes that the "struggle" to achieve a lesbian identity may serve to enhance the individual's sense of power and efficacy in other areas of her life.

No significant differences resulted between fear of negative evaluation and sexual attraction as measured by the BSII-F. It is plausible that those participants who were willing to admit to their true sexual attractions had already compromised a sense of indifference and/or acceptance regarding the impact of societal judgment on their sexual preferences. There are two important factors to consider in examining this finding. The first is that, as previously discussed, the sample of self-identified lesbians indicated they were involved in a romantic and sexual relationship with a partner, suggesting a greater progression and/or level of comfort associated with their sexual identification. Second, the participants in this study were largely from the academic community, which may be associated with greater contact with,
and education/understanding of, sexual diversity. It is likely that with a different sample (i.e., less educated, lower socio-economic status) one may find a greater fear of negative evaluation associated with being non-heterosexual.

As hypothesized, more stereotypically male sex-role identity, greater emotional attraction towards females, more frequent sexual same-sex sexual behavior, and more frequent social contact and positive social attitude toward non-heterosexuals were reported by individuals self-classifying as non-heterosexual. This supports the notion that non-heterosexuals are not only more likely to exhibit greater sexual, and emotional attraction and behaviors towards other females, but that they are more likely to exhibit greater tolerance towards diversity in human sexual behavior and attitudes. These results merit further elaboration, and as such each hypothesis pertaining to these BSII-F dimensions will be discussed.

It was hypothesized that the Sexual Attraction dimensions of the BSII-F would correlate positively with the MMPI-5 and the FNE; however neither of these relationship resulted as significant. As designed, these dimensions of the BSII-F addressed sexual attraction. Of interest is that the MMPI-5 did result in significant positive correlations with the Sex-role Identity and with the Gender Identity dimensions of the
BSII-F. These findings suggest that the MMPI-5 may be able to accurately measure sex-role identification, and possibly gender identity among lesbians, but it is not capable of assessing sexual attraction. This further supports Hathaway and McKinley's (1956) findings that the MMPI-Scale 5 was unsuccessful in identifying male homosexuals. Consequently, the MMPI-Scale 5, while useful in examining sex-role and gender role identification, is not an appropriate tool for measuring sexual identity or orientation (Blais, 1995; Green 1991).

With respect to the FNE, results indicate that heterosexuals do not significantly differ from non-heterosexuals in fear of negative evaluation. Given the earlier described relationship between age (maturity, life experience, etc.) and self-acceptance, this may not be a surprising finding. Individuals who self-accept as heterosexuals versus those who self-accept as non-heterosexuals may be equally free from fear of negative evaluation. An alternative explanation may be that non-heterosexuals possess heightened defenses against anxieties associated with their sexual orientation or developing identity. Consequently, a global measure of fear of negative evaluation, such as the FNE, may not be sensitive to anxieties specifically related to sexual identity and orientation.
Findings from the BSII-F discomfort scale, indicate greater sexual discomfort among non-heterosexuals. This finding supports the notion of externalized versus internalized discomfort. That is, while an individual may be willing to report comfort, it may not necessarily mean they sanction or feel comfort from within themselves (i.e., internal comfort). These results may also suggest that the Discomfort Scale of the BSII-F is a more adequate measure of anxiety associated with sexual identity than the FNE; as the latter taps into a global fear of negative evaluation more closely associated with social appearance and performance. In further exploring this finding, attention should be given to the models of sexual identity development. These models attempt to address the process of successful sexual identity acquisition (Cass, 1984a; Coleman, 1982, Plummer, 1975; Troiden, 1984). During this process, self-identification, consisting of an integration of affective (i.e., self-esteem) and cognitive (i.e., self concept) dimensions, occurs. Troiden (1984) states that the closer one's ideal self is to one's self concept, the greater the individual's resulting self-value or self-esteem. According to Troiden's model, fear of negative evaluation, social isolation, confusion, guilt, and discomfort are greatest during his first two stages (Sensitization and Identity Confusion stages). By the third
stage (Identity Assumption) the individual begins to assume a non-heterosexual identity, culminating in stage four (Commitment) when the individual enters in, and commits, to a same-gender relationship. It is at this fourth stage where satisfaction, self-acceptance, and comfort are thought to be greatest. Given that the non-heterosexual sample in the current study all were involved in same-gender relationships, this may lend some support to Troiden's model regarding lessened fear of negative evaluation at the Commitment Stage of sexual identity development.

However, viewing this in light of the findings that non-heterosexuals scored significantly higher with respect to sexual identity discomfort, one is left with some confusion. A possible explanation may be that some non-heterosexuals, while involved in a relationship, and perhaps in the community lifestyle, nevertheless have not achieved a comparable level of personal or internal self-comfort regarding their sexuality. Troiden (1984) states that sexual identity development is not linear, but rather like a "horizontal spiral," such that individuals may exhibit characteristics of more than one stage at any particular point in time. This lends credence to the complexity and multifaceted nature of sexual identity development and acquisition. Future studies may wish to focus on the variables of
relationship status, stages of identity acquisition, experienced levels of sexual identity discomfort, and affect and cognitions associated with self-perceptions and identification.

It was further hypothesized that the BSII-F dimension on Gender Identity (Dimension IV) would positively correlate with the MMPI-5, and inversely correlate with self-esteem. This hypothesis was partially supported, indicating that greater masculine gender identification on the BSII-F correlates with the MMPI-5 regarding sex role identification and interests (i.e., more masculine); but that self-esteem may not be significantly affected by such identification. This finding indicates that the MMPI-Scale 5 and the gender identity (Dimension IV) of the BSII-F both address the construct of gender-identity (Greene, 1991). The finding that self-esteem does not appear to be related to gender identification may reflect lessened societal stigmas associated with gender identification and/or a heightened degree of individual self-acceptance. Of note is that the non-heterosexual sample in the current study was highly educated and in the middle to high socio-economic status which may suggest they are further along in their sexual identity development. It is unclear whether higher education and wealth facilitate the process of sexual identity development or whether they function as
buffers against social stigmas associated with non-heterosexual identities. Future studies need to focus on the sexual identity acquisition process (i.e., length of time and progression) and its relationship to variables associated with psychological well-being.

It was hypothesized that Dimensions V, VI and VII (Sex Role Identity, Emotional Attraction, and Sexual Behavior) would positively correlate with the MMPI-Scale 5. These relationships were supported as significant. These findings are not surprising and make intuitive sense. Individuals who reported less stereotypical feminine interests and social roles, greater emotional attraction towards other females, and more frequent same-sex sexual behavior, obtained higher scores on the MMPI-5, indicating interests, roles, and behaviors more socially identified as traditionally masculine.

As hypothesized, Dimension VIII (Alcohol and Drug Use) correlated positively with fear of negative evaluation (FNE) and with sex-guilt (MSG), and inversely with self-esteem (RSE); thus, individuals who are more likely to be apprehensive regarding being judged negatively; who experience greater degree of guilt associated with sexuality; and who have low self-esteem, reported greater usage of alcohol and/or drugs related to sexuality and sexual behaviors. Of note is that this relationship is independent of a person's sexual
identity as no significant findings resulted between sexual identification and substance use.

Further, the MacAndrew's Scale (Mac) and the AD Dimension on the BSII-F did not result in a significant correlation. Whereas the MAC scale contains items which are more geared towards the measurement of alcoholism in association with pathology, the items comprising the AD dimension on the BSII-F specifically associate the use of alcohol or drugs with some aspect of sexuality (i.e., sexual interest, behavior, attraction, intimacy, etc.). Consequently, it would seem that the MAC and Dimension AD are measuring different constructs, and that Dimension AD more specifically adheres to the aims of the BSII-F, that is, to assess the use of alcohol or drugs with sexual expression and interest.

These findings are in support of Kuss' (1988) research which linked the high rate of alcoholism among non-heterosexuals to lack of self-acceptance and internalized homophobia. In their study of lesbian substance abusers, Diamond and Wilsnack (1978) also found that high rates of substance abuse corresponded to low self-esteem, greater dependency needs, and conflict associated with sexual identity. Baltar and Crawford (1991) reported similar findings, such that a greater incidence of substance abuse was associated with psychological concerns (i.e., depression, low-
self-esteem, discomfort with sexual identity, and fear of negative evaluation) regardless of sexual identification. The current findings lend support to the association between alcohol and drug use with psychological concerns or problems, while further adding that such abuse is not necessarily linked to sexual identity; consequently, it would seem that individuals who have low self-esteem, fear negative evaluation, and experience guilt related to their sexuality are more prone to substance abuse, regardless of their perceived sexual identification.

It was hypothesized that Dimension IX (Social Behavior and Attitudes) would be positively correlated with the MMPI-Scale 5, suggesting that greater contact with non-heterosexuals and less prejudicial attitudes towards non-heterosexuals would be held by individuals who reported less stereotypical sex role interests and behaviors. While this hypothesis was supported in the study constructing the BSII for males (Baltar & Crawford, 1991), the same hypothesis was not significant in the present study, such that no significant relationship was found between scores on the MMPI-Scale 5 and scores on the Social Behavior and Attitudes Dimension of the BSII-F. It may be that females generally hold less prejudicial and/or judgmental attitudes towards others than do males. This is in support of Herek's (1988) findings that
heterosexual males are more inclined to express greater prejudicial attitudes toward non-heterosexuals than heterosexual females.

It was further hypothesized that Dimension IX would inversely correlate with the measure of sex-guilt indicating individuals who scored lower on this dimension (i.e., more negative and prejudicial attitudes towards others) would also experience greater guilt associated with sexuality. This hypothesis was supported, reflecting that the greater amount of overall guilt and shame associated with sexuality that an individual experiences, the less likely that individual will accept and/or condone sexual attitudes or behavior that diverge from societal norms. This finding further indicates that greater acceptance of, and social contact with, non-heterosexual individuals, is associated with lessened guilt associated with sexuality. This, additionally, supports Herek's (1988) existing research on attitudes towards homosexuals, in that psychosocial variables, such as traditional family and social values and religiosity, play an important factor in an individual's attitudes and willingness to interact with non-heterosexuals. It would make intuitive sense that an individual adhering to more traditional social values and more conservative religious beliefs would be less tolerant of, and experience greater guilt associated with,
non-heterosexuality. This further supports findings that sex-guilt, religiosity, social and family values, and attitudes towards non-heterosexuals are variables associated with attitude formation towards non-heterosexuals (Herek & Glunt, 1993).

It was posited that Dimension II of the BSII-F would positively correlate with Discomfort, Emotional Attraction, Sexual Behavior, and Social Behavior and Attitudes. This hypothesis was supported such that participants who reported higher levels of sexual attraction towards other females additionally tend to experience higher levels of discomfort associated with their sexual identity; greater masculine sex-role identification; greater emotional attraction towards females; more frequent sexual activity with females; and more frequent social behaviors and open attitudes towards non-heterosexuals. Weinberg and Williams (1974), Bell and Weinberg (1978), and Larson (1982) reported similar findings in that non-heterosexuals tend to experience greater feelings of shame, doubt, and anxiety (i.e., discomfort), than their heterosexual counterparts. Bell and Weinberg (1978) and Baltar and Crawford (1991) reported that while findings of greater discomfort among non-heterosexuals was supported, the factors associated with the discomfort (i.e., lack of self-acceptance, shame, anxiety, etc.) appear to be present in
individuals who have not yet fully gained acceptance of their sexual identity. The findings of the present study further support this, such that, as previously discussed, discomfort with sexual identity appears to be greatest in the former stages of sexual identity acquisition and diminishes in the latter stages (Troiden, 1984). This suggests that a non-heterosexual identity is not necessarily equated with higher levels of sexual identity discomfort, but rather that discomfort is likely to be present earlier in the acquisition process of a non-heterosexual identity. This would support the literature reporting on the high rates (between 18 to 21 percent) of lesbian and gay adolescent suicide attempts, such that it is during the early stages of this process that greater isolation, guilt, shame, anxiety, and depression are present (Bell & Weinberg, 1978; Martin & Hetrick, 1988; Saguir & Robbins, 1973). Future studies should examine variables which could be relevant to the degree of discomfort experienced during non-heterosexual identity formation. Such variables could include degree of exposure to cultural and sexual diversity, family and social support, religiosity, ethnicity, socio-economic status, education, and varying aspects of psychological well-being. A longitudinal study focusing on the development of non-heterosexual identity formation and associated distress would provide a greater
understanding of the interplay of these variables and the complexity of the process.

Dimension III (Discomfort) appears to provide an index regarding the degree of sexual identity discomfort an individual experiences. Higher levels of sexual identity discomfort were reported by individuals self-classifying as being involved in a sexual and/or romantic relationship with another female. Further, individuals who scored higher on the BSII-F Discomfort dimension additionally indicated more masculine gender and sex role identifications, greater sexual behavior with other females, and a more pronounced use of alcohol and/or drugs associated with sexual behavior, attraction, and intimacy. These are very interesting results given significant data indicating a positive correlation between discomfort and fear of negative evaluation (FNE), yet an insignificant correlation between discomfort and self-esteem (RSE). As previously discussed, these findings suggest that the RSE measures "global self-esteem" which appears to be a different construct from one's own self-acceptance of non-heterosexual identity. The latter construct is what is measured by the BSII-F Discomfort scale which taps into discomfort associated with being negatively perceived and/or evaluated as non-heterosexual. This might explain the reason why the current sample of highly educated and/or professional
participants scored highly on "global self-esteem," yet experience discomfort associated with their sexual identity as measured by the BSII-F discomfort scale and fear of negative evaluation as measured by the FNE.

Hypothesis XIV stated that a higher score on Dimension IV (Gender Identity) would correlate in a positive direction with more masculine sex-role identification and higher substance usage associated with sexuality as measured by Dimensions V (Sex Role) and VIII (Alcohol and Drug Use) of the BSII-F. This hypothesis was supported, such that individuals self-reporting as having a more masculine gender identity, additionally reported more stereotypically male interests and roles, as well as greater substance usage associated with sexuality. As previously mentioned, the association between masculine gender identification resulted in an inverse relationship with scores on the MacAndrews Alcoholism Scale. It appears that the MAC Scale and the A/D Scale on the BSII-F are measuring different constructs, such that the MAC appears to tap into a more abusive use of alcohol and/or drugs, while the BSII-F A/D Scale appears to measure substance use directly associated with sexuality. As discussed, the findings of the current study indicate that individuals who are more likely to be apprehensive about being judged negatively reported greater use of alcohol and/or drugs. A possible explanation for the
association between more masculine gender identification, stereotypically male sex-role identification, and heightened use of substances may be that an individual exhibiting such characteristics violates societal gender role expectations; consequently, these individuals may anticipate and experience more negative interactions in their daily activities. Alcohol and drugs may be used to moderate these assaults to their self-esteem and sense of self (Baltar & Crawford, 1991; Diamond & Wilsnack, 1978; Fifield, 1975; Hawkins, 1976; Kuss, 1988; Saguir & Robbins, 1973).

It was hypothesized that sex-role identification as measured by Dimension V of the BSII-F would positively correlate with emotional attraction and social behavior and attitudes. This hypothesis was supported such that individuals who adhere less to traditional and/or stereotypical sex-roles are more likely to admit to greater same-sex emotional attraction and greater acceptance of, and/or contact with, non-heterosexuals. This finding supports the literature on individual differences, social values, and attitudes towards non-heterosexuals. Past research indicates that individual's who adhere to more traditional or conservative social and religious ideals, tend to be more prejudicial and negative regarding non-heterosexuality (Aguero, Block & Byrne, 1984; Ficarrotto, 1990; Herek, 1988;
Greater acceptance and contact with non-heterosexuals has been found to differ across gender, such that women tend to be more open and less judgmental of individual differences. Further, individuals who adhere to traditional sex-role expectations tend to be more negative and prejudicial towards non-heterosexuals (Black & Stevenson, 1984; Storms, 1978; Taylor, 1984).

As hypothesized, individuals who reported as non-heterosexual on the BSII-F demonstrated significantly higher levels of sexual attraction towards females in the past as well as in the present/future dimensions of the BSII-F. This was further supported by self-categorization on the KSOG. As previously discussed, it is thought that sexual attraction may be viewed as dynamic or capable of changing through time (Klein, et al., 1985). While Coleman (1987) recommended exploration of sexual attraction - past/present as a separate dimension from sexual attraction - future, Baltar and Crawford (1991) found no significant difference between this dichotomy among non-heterosexual men. Rather, it was proposed that the dimension of sexual attraction be examined as sexual attraction-past versus sexual attraction-present/future, based on the findings that there appeared to be greater change in sexual self-identification between past and present rather than between present and future (Baltar & Crawford, 1991).
This dichotimization was supported in that a significant difference was found between sexual attraction past and sexual attraction present/future with a greater movement towards same-sex attraction. This finding coincides with the age correlation findings, such that maturity and life experience may result in greater acceptance of one's true sexual orientation. It further makes intuitive sense that participants who self-identified as non-heterosexual would report a change from past self-identification given research findings that change occurs through the non-heterosexual identity acquisition process (Cass, 1979, 1984; Coleman, 19827; Lee, 1977; Plummer, 1975; Troiden, 1979, 1988).

Additional analyses included the construction of Dimension X (Bisexuality) and the administration of the Marlowe-Crown Social Desirability Scale. The BSII-F Bisexuality scale proved to significantly categorize individuals who may be classified as currently "true bisexuals." These subjects reported as being equally sexually and emotionally attracted to males and females as well as sexually active with both sexes, and scored higher on this dimension than either heterosexuals or homosexuals. This finding adds an important and significant dimension to the BSII in that it specifically addresses and measures bisexuality as a distinct identity. As Bell and Weinberg
(1978) and MacDonald (1985) have argued, most research on sexuality has been confounded by the exclusion of bisexuality as a distinct identity. Historically, bisexuality has been viewed as a developmental phase in the process of homosexual identity formation; as a corrupted heterosexual identity; or as a corrupted homosexual identity (DeCecco & Shively, 1985). Coleman (1987), Paul (1984), and Wolff (1977) add that by not recognizing bisexuality as a distinct identity, distress may be experienced by the bisexual such that s/he may feel isolated, and pressured by society to self-identify as either heterosexual or homosexual. The findings of the current study lend support to the existence of bisexuality as a distinct identity and may serve to encourage further exploration into bisexual identity development and psychological experience.

Incorporation of the Social Desirability Scale additionally yielded important information. Heterosexuals scored significantly higher than did non-heterosexuals (with no significant difference between bisexuals and homosexuals) such that heterosexuals expressed being more conformist and concerned with societal expectations than were the other groups. One possible explanation for this finding may be that individuals who have had to struggle with acceptance of their non-conventional sexual identity would seem likely to have overcome (to a some degree) the expectations of social norms.
It may also be that adhering to a more non-conformist stance may be associated with reaction formation as a defense against their own non-conventional sexual identity. Future research should focus on further exploring the relationship and nature of this finding, as well as whether differences exist across such demographic variables as education, socio-economic status, race/ethnicity, and contact or familiarity with sexual diversity.

**Limitations of the current study**

Limitations of this study include the sample size and the use of a convenience, or non-random, sample. Consequently, the findings of this study should be interpreted with caution, and generalizations beyond a middle-class, Euro-American population should be done judiciously, as a larger and more encompassing sample would likely yield more representative data. Further, data related to recognizing the differences in this sample, the length of participant's struggle with and/or acceptance of their sexual identity, exploration of the extent and utilization of existing support networks, are in need of further exploration in context with the BSII-F.

The great majority of the subjects involved in this study were Caucasian; consequently, investigation regarding populations of varying races, ethnicities, and cultures is indicated. Additionally, the majority of the subjects were
educated and of middle to high income, requiring future exploration across varying educational and socio-economic levels.

The measures used in this study were all self-report. While the literature indicates that self-report measures are preferential in the study of sexual identity (Coleman, 1987; Klein, et al, 1985; Morin, 1977), demand characteristics may result, such that the participants may tend to present themselves in a more favorable light. The resulting measure, the BSII-F, is in its inception and further examination of its psychometric properties is required, including factor analyses and standardization.

Additional measures of psychological well-being which could be included in future studies may include measures of distress, depression, tension, confusion, and perceived familial/social support.

**Conclusion**

This study has resulted in a measure which seems to be valid and more comprehensive than other available measures assessing sexual identity. The findings lend support to Troiden's (1984) model of sexual identity acquisition in which he addresses the complexity of sexual identification. More specifically, he targets the issue of self-esteem and self-
concept in relation to sexual identification, viewing one's internal awareness and acceptance of self-identification in relation to societal, or external, acceptance and support. The less the discrepancy between an individual's present identification and "ideal" identification, the less guilt, fear of negative evaluation, and subsequent discomfort should be experienced, regardless of sexual identification.

In summary, it is clear that the BSII-F has been successful in examining and differentiating various dimensions of sexual identity among three separate groups. Further, it lends support to the classification of bisexuality as a true and distinct identity.

The BSII-F seems to hold promise as a tool for counselors and therapists in assisting individuals struggling with various aspects of their sexual identity. As a research tool, the possibilities are significant. The BSSI (Male and Female forms) may prove instrumental in further exploring, and reaching a greater understanding of the different aspects and components of sexual identification. Research avenues regarding the various dimensions of sexual identity, as well as the differences and similarities between males and females, and homosexuals, bisexuals, and heterosexuals are numerous.

The concepts of "continuums" and "dimensionalities" are both exciting and innovative. As concluded by Kinsey in 1948,
"The living world is a continuum in each and every one of its aspects." (Kinsey, et al., 1948, p.639). Despite this suggestion made many decades ago, it appears that society and research (with some exceptions) have generally neglected or bypassed the nuances associated with sexual identity. It is hoped that the cumulative findings of the BSII investigations will spur greater interest and further investigation into the complexities of human sexual identity.
APPENDIX A

THE BSII-F AS ADMINISTERED
The BSII-F as Administered
BSII - F

MARK YOUR ANSWERS ON THE ANSWER SHEET PROVIDED. PLEASE DO NOT MAKE MARKS ON THE QUESTIONNAIRE.

Please answer the following items, T (true) or F (false), as they apply to you.

1. I am currently involved in a sexual relationship with a man.
2. I am currently involved in a romantic relationship with a man.
3. I am currently involved in a sexual relationship with a woman.
4. I am currently involved in a romantic relationship with a woman.
5. I am currently involved in a sexual and/or romantic relationship with both a man and a woman.
6. I am living with the person with whom I am involved in a sexual and/or romantic relationship.
7. I am involved in a relationship that is monogamous (one partner only).
8. I am not currently involved in a romantic or sexual relationship.

Please respond to the following questions by choosing the item which most closely reflects how you feel. PLEASE CONTINUE TO MARK YOUR RESPONSES ON THE ANSWER SHEET.

1. In the past (any time before the present) I have been sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, but mostly females.
   e) both males and females equally.
2. Currently I see myself as being sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

3. In the future I would like to be sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

4. If I were involved in a relationship I would like it to be
   a) monogamous (one partner only), with a male
   b) more than one partner, all male
   c) more than one partner, all female
   d) more than one partner, including males and females.
   e) monogamous (one partner only), with a female

5. In my fantasies, daydreams, and/or thoughts, I find that I am primarily attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

6. Up to the present, I have been sexually attracted to
   a) males only.
   b) females only.
   c) initially to females, but currently to males.
   d) initially to males, but currently to females.
   e) initially to both males and females, but now predominantly to males.
   f) initially to both males and females, but now predominantly to females.
   g) both males and females.

7. I feel that my current sexual orientation is
   a) exclusively heterosexual (attracted to men only)
   b) primarily heterosexual (attracted mostly to men but also to women)
   c) bisexual (attracted equally to men and women)
   d) primarily homosexual (attracted mostly to women but also to men)
   e) exclusively homosexual (attracted only to women)
8. If I could, I would change my sexual orientation to
   a) exclusively heterosexual
   b) primarily heterosexual
   c) bisexual
   d) primarily homosexual
   e) exclusively homosexual
   f) I would not change my sexual orientation.

9. How do you feel about your sexual desires and/or thoughts?
   a) very comfortable
   b) somewhat comfortable
   c) somewhat uncomfortable
   d) very uncomfortable

10. How would your father feel/have felt about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

11. How would your mother feel/have felt about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

12. How important is it to you how your parent(s) feel about your sexual orientation?
    a) very important
    b) somewhat important
    c) somewhat unimportant
    d) very unimportant

13. How would your friends feel about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

14. How important to you is it how your friends feel about your sexual orientation?
    a) very important
    b) somewhat important
    c) somewhat unimportant
    d) very unimportant
15. I consider myself to be
   a) very feminine
   b) feminine
   c) predominantly feminine with masculine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly masculine with feminine characteristics
   f) masculine

16. In bringing me up, I feel that my parents treated me
   a) more as a boy, emphasizing masculine characteristics
   b) more as a girl, emphasizing feminine characteristics
   c) in such a way that did not emphasize masculine or feminine characteristics

17. Most of my friends view me as being
   a) very feminine
   b) feminine
   c) predominantly feminine with masculine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly masculine with feminine characteristics
   f) masculine

18. I am primarily emotionally attracted to
   a) females only
   b) males only
   c) both males and females, but mostly females.
   d) both males and females, but mostly males.
   e) both males and females, equally.

19. Up to now, I have been sexually active with
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, but mostly females.
   e) both males and females, equally.

20. My sexual experience(s) with males have been generally
   a) satisfying
   b) unremarkable
   c) dissatisfying
   d) I have not had any sexual experiences with a male.
21. My sexual experience(s) with females have been generally
   a) satisfying
   b) unremarkable
   c) dissatisfying
   d) I have not had any sexual experiences with a female.

22. I wish I could be
   a) very feminine
   b) feminine
   c) predominantly feminine with masculine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly masculine with feminine characteristics
   f) masculine

23. Others see me as
   a) very masculine
   b) masculine
   c) predominantly masculine with feminine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly feminine with masculine characteristics
   f) feminine

On the rating scale below, please indicate the number that best represents how much you agree with the following statements. PLEASE CONTINUE TO MARK YOUR RESPONSES ON THE ANSWER SHEET.

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<td>disagree</td>
<td>disagree</td>
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24. ___ If I could choose my sexual orientation, I would choose heterosexuality.

25. ___ I am friends with one or more homosexual females.

26. ___ I am emotionally closer to my male friends than to my female friends.

27. ___ I have not found women sexually attractive.

28. ___ I would engage in sexual exploration with a female.

29. ___ I have found myself noticing an attractive man in passing or in a social situation.
30. ___ I feel more comfortable flirting if I have had a few drinks.

31. ___ I remember having a crush or infatuation on my best female friend when I was a girl.

32. ___ I would like to be sexually intimate with a man and a woman at the same time.

33. ___ I would like to be dominated by a female in love-making.

34. ___ I can talk about my feelings easier to a close female friend than to a close male friend.

35. ___ I approve of adolescents exploring their sexuality with friends of the opposite sex.

36. ___ I feel that most people would reject me if I were to tell them who I am sexually attracted to.

37. ___ I would never consider sexual exploration with another woman.

38. ___ If I had to have sex with someone, I would choose an attractive male over an attractive female.

39. ___ I think that drugs make the sexual experience more intense and enjoyable.

40. ___ I have been involved in a committed relationship with a man.

41. ___ I would never wish to be bisexual.

42. ___ I can talk about my feelings easier to a close female friend than to a close male friend.

43. ___ I would engage in sexual exploration with a male.

44. ___ If I were given the choice of being sexually intimate with any man or woman of my choosing, I would choose the woman.

45. ___ I have fantasized about having sex with both a man and a woman at the same time.

46. ___ I would not be worried if others found out about my sexual orientation.

47. ___ I feel that alcohol helps me relax when I am interested in someone.

48. ___ I feel pressured by my parent(s) and/or society to behave in a way that is really not true of me.
49. __ In the past, I have wished that I could be of the opposite sex.

50. __ I have had to keep my sexual orientation a secret.

51. __ I feel very alone and isolated from others as a result of my sexual orientation.

52. __ I am confused about my sexual desires.

53. __ My sexual orientation is condoned by my religious affiliation.

54. __ I have to hide my sexual attraction from others because I would be rejected by most people.

55. __ I feel guilty when I see someone whom I am sexually attracted to.

56. __ In the future I would like to be sexually intimate with another woman.

57. __ I would like to be more comfortable with my sexual orientation.

58. __ I have never had sexual dreams in which I was sexually involved with a female.

59. __ I feel that there are people out there for me with whom I can freely talk about my sexual orientation and sexual concerns.

60. __ I am comfortable with my sexual orientation.

61. __ Being bisexual means having the best of both worlds.

62. __ I am not confused about my sexual orientation.

63. __ I do not think that drugs enhance sexual intimacy.

64. __ I am glad that I am of the sexual orientation that I am.

65. __ I wish I could change who I am sexually.

66. __ I can talk about my feelings easier to a close female friend than to a close male friend.

67. __ I sometimes get sad about who I am sexually.

68. __ I would feel comfortable expressing my sexual needs and desires with my partner.
69. ___ I have wondered what it would be like to make love to a woman.

70. ___ I feel that I definitely belong to the female sex.

71. ___ In my fantasies I have sometimes thought of myself as a male.

72. ___ I have had sex with a female after having had a few alcoholic drinks.

73. ___ I prefer to engage in traditional male activities.

74. ___ I don't feel good about my sexual orientation.

75. ___ I am friends with one or more people whom I suspect are homosexual or bisexual.

76. ___ I have guilty feelings about my sexuality.

77. ___ I was born a biological female (that is, with female genitalia).

78. ___ I prefer to be the dominant partner in love-making.

79. ___ I am not friends with anyone whom I know to be homosexual or bisexual.

80. ___ I have fantasized about taking a passive role in sex.

81. ___ I am most comfortable engaging in traditional female interests (i.e., sewing, hairdressing, make-up, etc.)

82. ___ I think that being homosexual is the worst thing that could happen to anyone.

83. ___ I feel that alcohol helps me relax when I am interested in someone.

84. ___ I feel that I am very intimate with my friends.

85. ___ I am comfortable talking about my feelings.

86. ___ I have never had oral sex with a male.

87. ___ I currently wish I were of the opposite sex.

88. ___ When I am feeling scared or anxious, I would prefer that a female were there to comfort me rather than a male.

89. ___ I have never had a crush or infatuation on a man.
90. __ I am emotionally closer to my father than my mother.

91. __ I have never had oral sex with a female.

92. __ I have felt very emotionally close to a male.

93. __ I feel really sad or depressed about who I am sexually.

94. __ Sexual attraction between two women is acceptable.

95. __ I have engaged in masturbatory foreplay with a male.

96. __ I have never thought that I would want to be of the opposite sex.

97. __ I have engaged in mutual masturbation with a female.

98. __ I have engaged in intercourse with a male.

99. __ Having a few drinks does not make sex more pleasurable.

100. __ If I could be born all over again I would like to be born a male.

101. __ I am comfortable with who I am sexually.

102. __ I do not think that drugs enhance sexual intimacy.

103. __ I am equally comfortable engaging in some traditionally female and some traditionally male activities or behaviors.

104. __ Alcohol helps boost my self-confidence in approaching someone that I am sexually attracted to.

105. __ I approve of adolescents exploring their sexuality with friends of the same sex.

106. __ I feel comfortable hugging a close female friend.

107. __ I am friends with one or more homosexuals.

108. __ I have often felt that I was born male trapped inside a female body.

109. __ I believe that sexual intimacy between two women is a sin.
APPENDIX B

THE RESULTING BSII-F
Please answer the following items, T (true) or F (false), as they apply to you.

1. I am currently involved in a sexual relationship with a man.
2. I am currently involved in a romantic relationship with a man.
3. I am currently involved in a sexual relationship with a woman.
4. I am currently involved in a romantic relationship with a woman.
5. I am currently involved in a sexual and/or romantic relationship with both a man and a woman.
6. I am living with the person with whom I am involved in a sexual and/or romantic relationship.
7. I am involved in a relationship that is monogamous (one partner only).
8. I am not currently involved in a romantic or sexual relationship.

Please respond to the following questions by choosing the item which most closely reflects how you feel. PLEASE CONTINUE TO MARK YOUR RESPONSES ON THE ANSWER SHEET.

1. In the past (any time before the present) I have been sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, but mostly females.
   e) both males and females equally.
2. Currently I see myself as being sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

3. In the future I would like to be sexually attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

4. If I were involved in a relationship I would like it to be
   a) monogamous (one partner only), with a male
   b) more than one partner, all male
   c) more than one partner, all female
   d) more than one partner, including males and females.
   e) monogamous (one partner only), with a female

5. In my fantasies, daydreams, and/or thoughts, I find that I am primarily attracted to
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, both mostly females.
   e) both males and females equally.

6. Up to the present, I have been sexually attracted to
   a) males only.
   b) females only.
   c) initially to females, but currently to males.
   d) initially to males, but currently to females.
   e) initially to both males and females, but now predominantly to males.
   f) initially to both males and females, but now predominantly to females.
   g) both males and females.

7. I feel that my current sexual orientation is
   a) exclusively heterosexual (attracted to men only)
   b) primarily heterosexual (attracted mostly to men but also to women)
   c) bisexual (attracted equally to men and women)
   d) primarily homosexual (attracted mostly to women but also to men)
   e) exclusively homosexual (attracted only to women)
8. If I could, I would change my sexual orientation to
   a) exclusively heterosexual
   b) primarily heterosexual
   c) bisexual
   d) primarily homosexual
   e) exclusively homosexual
   f) I would not change my sexual orientation.

9. How do you feel about your sexual desires and/or thoughts?
   a) very comfortable
   b) somewhat comfortable
   c) somewhat uncomfortable
   d) very uncomfortable

10. How would your father feel/have felt about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

11. How would your mother feel/have felt about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

12. How would your friends feel about your sexual orientation?
    a) very comfortable
    b) somewhat comfortable
    c) somewhat uncomfortable
    d) very uncomfortable

13. I consider myself to be
    a) very feminine
    b) feminine
    c) predominantly feminine with masculine characteristics
    d) androgynous (equally masculine and feminine)
    e) predominantly masculine with feminine characteristics
    f) masculine
14. In bringing me up, I feel that my parents treated me
   a) more as a boy, emphasizing masculine characteristics
   b) more as a girl, emphasizing feminine characteristics
   c) in such a way that did not emphasize masculine or feminine characteristics

15. Most of my friends view me as being
   a) very feminine
   b) feminine
   c) predominantly feminine with masculine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly masculine with feminine characteristics
   f) masculine

16. I am primarily emotionally attracted to
   a) females only
   b) males only
   c) both males and females, but mostly females.
   d) both males and females, but mostly males.
   e) both males and females, equally.

17. Up to now, I have been sexually active with
   a) males only
   b) females only
   c) both males and females, but mostly males.
   d) both males and females, but mostly females.
   e) both males and females, equally.

18. My sexual experience(s) with males have been generally
   a) satisfying
   b) unremarkable
   c) dissatisfying
   d) I have not had any sexual experiences with a male.

19. My sexual experience(s) with females have been generally
   a) satisfying
   b) unremarkable
   c) dissatisfying
   d) I have not had any sexual experiences with a female.
20. I wish I could be
   a) very feminine
   b) feminine
   c) predominantly feminine with masculine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly masculine with feminine characteristics
   f) masculine

21. Others see me as
   a) very masculine
   b) masculine
   c) predominantly masculine with feminine characteristics
   d) androgynous (equally masculine and feminine)
   e) predominantly feminine with masculine characteristics
   f) feminine

On the rating scale below, please indicate the number that best represents how much you agree with the following statements. PLEASE CONTINUE TO MARK YOUR RESPONSES ON THE ANSWER SHEET.

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<td>strongly disagree</td>
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22. If I could choose my sexual orientation, I would choose heterosexuality.

23. I am friends with one or more homosexual females.

24. I am emotionally closer to my male friends than to my female friends.

25. I have not found women sexually attractive.

26. I would engage in sexual exploration with a female.

27. I have found myself noticing an attractive man in passing or in a social situation.

28. I feel more comfortable flirting if I have had a few drinks.

29. I remember having a crush or infatuation on my best female friend when I was a girl.
30. ___ I would like to be sexually intimate with a man and a woman at the same time.

31. ___ I can talk about my feelings easier to a close female friend than to a close male friend.

32. ___ I approve of adolescents exploring their sexuality with friends of the opposite sex.

33. ___ I feel that most people would reject me if I were to tell them who I am sexually attracted to.

34. ___ I would never consider sexual exploration with another woman.

35. ___ If I had to have sex with someone, I would choose an attractive male over an attractive female.

36. ___ I think that drugs make the sexual experience more intense and enjoyable.

37. ___ I have been involved in a committed relationship with a man.

38. ___ I would never wish to be bisexual.

39. ___ I can talk about my feelings easier to a close female friend than to a close male friend.

40. ___ I would engage in sexual exploration with a male.

41. ___ If I were given the choice of being sexually intimate with any man or woman of my choosing, I would choose the woman.

42. ___ I have fantasized about having sex with both a man and a woman at the same time.

43. ___ I would not be worried if others found out about my sexual orientation.

44. ___ I feel that alcohol helps me relax when I am interested in someone.

45. ___ I feel pressured by my parent(s) and/or society to behave in a way that is really not true of me.

46. ___ In the past, I have wished that I could be of the opposite sex.

47. ___ I have had to keep my sexual orientation a secret.

48. ___ I feel very alone and isolated from others as a result of my sexual orientation.
49. ___ I am confused about my sexual desires.

50. ___ My sexual orientation is condoned by my religious affiliation.

51. ___ I have to hide my sexual attraction from others because I would be rejected by most people.

52. ___ I feel guilty when I see someone whom I am sexually attracted to.

53. ___ In the future I would like to be sexually intimate with another woman.

54. ___ I would like to be more comfortable with my sexual orientation.

55. ___ I have never had sexual dreams in which I was sexually involved with a female.

56. ___ I am comfortable with my sexual orientation.

57. ___ Being bisexual means having the best of both worlds.

58. ___ I am not confused about my sexual orientation.

59. ___ I do not think that drugs enhance sexual intimacy.

60. ___ I am glad that I am of the sexual orientation that I am.

61. ___ I wish I could change who I am sexually.

62. ___ I can talk about my feelings easier to a close female friend than to a close male friend.

63. ___ I sometimes get sad about who I am sexually.

64. ___ I would feel comfortable expressing my sexual needs and desires with my partner.

65. ___ I have wondered what it would be like to make love to a woman.

66. ___ In my fantasies I have sometimes thought of myself as a male.

67. ___ I prefer to engage in traditional male activities.

68. ___ I don't feel good about my sexual orientation.

69. ___ I am friends with one or more people whom I suspect are homosexual or bisexual.
70. ___ I have guilty feelings about my sexuality.

71. ___ I was born a biological female (that is, with female genitalia).

72. ___ I prefer to be the dominant partner in love-making.

73. ___ I am not friends with anyone whom I know to be homosexual or bisexual.

74. ___ I am most comfortable engaging in traditional female interests (i.e. sewing, hairdressing, make-up, etc.)

75. ___ I think that being homosexual is the worst thing that could happen to anyone.

76. ___ I feel that alcohol helps me relax when I am interested in someone.

77. ___ I feel that I am very intimate with my friends.

78. ___ I have never had oral sex with a male.

79. ___ I currently wish I were of the opposite sex.

80. ___ When I am feeling scared or anxious, I would prefer that a female were there to comfort me rather than a male.

81. ___ I am emotionally closer to my father than my mother.

82. ___ I have never had oral sex with a female.

83. ___ I feel really sad or depressed about who I am sexually.

84. ___ Sexual attraction between two women is acceptable.

85. ___ I have engaged in masturbatory foreplay with a male.

86. ___ I have never thought that I would want to be of the opposite sex.

87. ___ I have engaged in mutual masturbation with a female.

88. ___ I have engaged in intercourse with a male.

89. ___ If I could be born all over again I would like to be born a male.
90. __ I am comfortable with who I am sexually.

91. __ I do not think that drugs enhance sexual intimacy.

92. __ I am equally comfortable engaging in some traditionally female and some traditionally male activities or behaviors.

93. __ Alcohol helps boost my self-confidence in approaching someone that I am sexually attracted to.

94. __ I approve of adolescents exploring their sexuality with friends of the same sex.

95. __ I am friends with one or more homosexuals.

96. __ I have often felt that I was born male trapped inside a female body.

97. __ I believe that sexual intimacy between two women is a sin.
APPENDIX C

ITEMS PER DIMENSION OF THE BSII-F
**Items per Dimension of the BSII-F**

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APPENDIX D

BSII-F SCORING KEY
BSII-F Scoring Key

BSII ANSWER SHEET AND SCORING (scoring in parentheses):

Items 1 through 8 are answered either True or False. Please circle the response which applies for you.

1. (1) (2)
2. (1) (2)
3. (1) (2)
4. (1) (2)
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Items 9 through 28 have several response options. Please circle the response which is true or most true for you.

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6b. a(0) b(4) c(0) d(0) e(2) f(4) g(2)
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14. a(3) b(2) c(1) d(0)
15. a(0) b(1) c(2) d(3) e(4) f(5)
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22. a(0) b(1) c(2) d(3) e(4) f(5)
23. a(5) b(4) c(3) d(2) e(1) f(0)
Items 24 through 109 are based on the scale presented below. For each item please indicate the number that best represents how much you agree with each statement. Periodically please check to make sure that the number of the statement you are responding to corresponds with the number on the answer sheet.

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APPENDIX E

ADDITIONAL MEASURES ADMINISTERED
Additional Measures Administered
Mosher Sex Guilt Inventory

This questionnaire consists of a sentence stem and a pair of responses which are lettered A and B. For each of the following items, read the stem and choose the response which you most agree with or is most characteristic of you. Your choice should reflect your own personal beliefs, thoughts, reactions. If you find it difficult to choose because you find both or neither apply, please don't omit the item. Instead, choose which applies the most of the two.

1. If in the future I committed adultery...
   A. I won't feel bad about it.
   B. it would be sinful.

2. "Dirty" jokes in mixed company...
   A. are common in our town.
   B. should be avoided.

3. As a child, sex play....
   A. never entered my mind
   B. is quite wide spread.

4. Sex relations before marriage...
   A. ruin many a happy couple.
   B. are good in my opinion.

5. If in the future I committed adultery...
   A. I wouldn't tell anyone.
   B. I would probably feel bad about it.

6. When I have sexual desires...
   A. I usually try to curb them.
   B. I generally satisfy them.

7. Unusual sex practices...
   A. might be interesting.
   B. don't interest me.

8. Prostitution...
   A. is a must.
   B. breeds only evil.

9. As a child, sex play...
   A. is not good for mental and emotional well-being.
   B. is natural and innocent.

10. As a child, sex play...
    A. was a big taboo and I was deathly afraid of it.
    B. was common without guilt feelings.

11. "Dirty" jokes in mixed company...
    A. are not proper.
    B. are exciting and amusing.

12. Unusual sex practices...
    A. are awful and unthinkable.
    B. are not so unusual to me.

13. When I have sex dreams...
    A. I cannot remember them in the morning.
    B. I wake up happy.

14. "Dirty" jokes in mixed company...
    A. are lots of fun.
    B. are coarse to say the least.

15. Petting...
    A. is something that should be controlled.
    B. is a form of education.

16. Unusual sex practices...
    A. are O.K. as long as they're heterosexual.
    B. usually aren't pleasurable because you have preconceived feelings about they're being wrong.

17. Sex relations before marriage...
    A. are practiced to much to be wrong.
    B. in my opinion, should not be practiced.

18. As a child, sex play...
    A. is dangerous.
    B. is not harmful but does not create sexual pleasure.
19. As a child, sex play...
   A. was indulged in.
   B. is immature and ridiculous.

20. When I have a sexual desire...
   A. they are quite strong.
   B. I attempt to repress them.

21. Sex relations before marriage...
   A. help people to adjust.
   B. should not be recommended.

22. Masturbation...
   A. is a habit that should be controlled.
   B. is very common.

23. If I committed a homosexual act...
   A. it would be my business.
   B. it would show weakness in me.

24. Prostitution...
   A. is a sign of moral decay in society.
   B. is acceptable and needed for some people.

25. Sex relations before marriage...
   A. are O.K. if both partners are in agreement.
   B. are dangerous.

26. Masturbation...
   A. is alright.
   B. should not be practiced.

27. Sex...
   A. is a beautiful gift from God not to be cheapened.
   B. is good and enjoyable.

28. Prostitution...
   A. should be legalized.
   B. cannot really afford enjoyment.
Fear of Negative Evaluation Scale

Please answer the following questions True or False by circling either T or F on the answer sheet provided.

1. I rarely worry about seeming foolish to others.
2. I worry about what people will think of me even when I know it doesn't make any difference.
3. I become tense and jittery if I know someone is sizing me up.
4. I am unconcerned even if I know people are forming an unfavorable impression of me.
5. I feel very upset when I commit some social error.
6. The opinions that important people have of me cause me little concern.
7. I often worry that I may look ridiculous or make a fool of myself.
8. I react very little when other people disapprove of me.
9. I am frequently afraid of other people noticing my shortcomings.
10. The disapproval of others would have little effect on me.
11. If someone is evaluating me, I tend to expect the worst.
12. I rarely worry about what kind of impression I am making on someone.
13. I am afraid that others will not approve of me.
14. I am afraid that people will find fault with me.
15. Other people's opinion of me do not bother me.
16. I am not necessarily upset if I do not please someone.
17. When I am talking to someone, I worry about what they may be thinking about me.
18. I feel that you can't help making social errors sometimes, so why worry about it.
19. I am usually worried about what kind of impression I make.
20. I worry a lot about what my superiors think of me.
21. If I know someone is judging me, it has little effect on me.
22. I worry that others will think I am not worthwhile.
23. I worry very little about what others may think of me.
24. Sometimes I think I am too concerned with what other people think of me.
25. I often worry that I will say or do the wrong things.
26. I am often indifferent to the opinions others have of me.
27. I am usually confident that others will have a favorable impression of me.
28. I often worry that people who are important to me won't think very much of me.
29. I brood about the opinions my friends have about me.
30. I become tense and jittery if I know am being judged by my superiors.
MACANDREWS ALCOHOLISM SCALE (MAC)

Please indicate whether you find each of the following items to be True (T) or false (F).

1. I like to read newspaper articles on crime.
2. Evil spirits possess me at times.
3. I have a cough most of the time.
4. My soul sometimes leaves my body.
5. As a youngster I was suspended from school one or more times for cutting up.
6. I am a good mixer.
7. Everything is turning out just like the prophets of the Bible said it would.
8. I have not lived the right kind of life.
9. I think I would like the type of work a forest ranger does.
10. I am certainly lacking in self-confidence.
11. I do many things which I regret afterwards (I regret things more or more often than others seem to).
12. I enjoy a race or game better when I bet on it.
13. In school I was sometimes sent to the principal for cutting up.
14. My table manners are not quite as good at home as when I am out in company.
15. I know who is responsible for most of my troubles.
16. The sight of blood neither frightens me nor makes me sick.
17. I have never vomited blood nor coughed up blood.
18. I like to cook.
19. I used to keep a diary.
20. I have had periods in which I carried on activities without knowing later what I had been doing.
21. I liked school.
22. I am worried about sex matters.
23. I frequently notice my hand shakes when I try to do something.
24. My parents have often objected to the kind of people I went around with.
25. I have been quite independent and free from family rule.
26. I have few or no pains.
27. I have had blank spells in which my activities were interrupted and I did not know what was going on around me.
28. I sweat very easily even on cool days.
29. I have often felt that strangers were looking at me critically.
30. If I were a reporter I would very much like to report sporting news.
31. I am sure I am being talked about.
32. I seem to make friends about as quickly as others do.
33. Many of my dreams are about sex matters.
34. I cannot keep my mind on one thing.
35. I have more trouble concentrating than others seem to have.
36. I do not like to see women smoke.
37. I deserve severe punishment for my sins.
38. I played hookey from school quite often as a youngster.
39. I have at times had to be rough with people who were rude or annoying.
40. I was fond of excitement when I was young (or in childhood).
41. I enjoy gambling for small stakes.
42. I am often inclined to go out of my way to win a point with someone who has opposed me.
43. While in trains, busses, etc., I often talk to strangers.
44. Christ performed miracles such as changing water into wine.
45. I pray several times every week.
46. I readily become one hundred percent sold on a good idea.
47. I have frequently worked under people who seem to have things arranged so that they get credit for good work but are able to pass off mistakes onto those under them.
48. I would like to wear expensive clothes.
49. The one to whom I am most attracted and whom I most admired as a child was a woman (Mother, sister, aunt or other woman).
Please indicate whether you find each of the following items to be True (T) or False (F).

1. I like mechanics magazines.
2. I think I would like the work of a librarian.
3. When I get a new job, I like to be tipped off on who should be gotten next to.
4. I would like to be a singer.
5. I feel that it is certainly best to keep my mouth shut when I'm in trouble.
6. When someone does me a wrong I feel I should pay him back if I can, just for the principle of the thing.
7. I am very strongly attracted by members of my own sex.
8. I used to like drop-the-handkerchief.
9. I have often wished I were a girl.
10. I enjoy reading love stories.
11. I like poetry.
12. My feelings are not easily hurt.
13. I sometimes tease animals.
14. I think I would like the type of work a forest ranger does.
15. It takes a lot of argument to convince most people of the truth.
16. I would like to be a nurse.
17. I like to go to parties and other affairs where there is lots of loud fun.
18. I frequently find it necessary to stand up for what I think is right.
20. I enjoy a race or game better when I bet on it.
21. Most people are honest chiefly through fear of being caught.
22. My table manners are not quite as good at home as when I am out in company.
23. I like dramatics.
24. I like collecting flowers or growing house plants.
25. I have never indulged in any unusual sex practices.
26. At times my thoughts have raced ahead faster than I could speak them.
27. I like to cook.
28. I would like to be a soldier.
29. I used to keep a diary.
30. I do not have a great fear of snakes.
31. I am worried about sex matters.
32. My hands have not become clumsy or awkward.
33. I daydream very little.
34. If I were a reporter I would very much like to report news of the theater.
35. I would like to be a journalist.
36. In walking I am very careful to step over sidewalk cracks.
37. I have never had any breaking out on my skin that has worried me.
38. I frequently find myself worrying about something.
39. I think I would like the work of a building contractor.
40. I like science.
41. I very much like hunting.
42. Some of my family have habits that bother and annoy me very much.
43. I should like to belong to several clubs or lodges.
44. I like to talk about sex.
45. I have been disappointed in love.
46. I believe there is a Devil and a Hell in the afterlife.
47. I like to be with a crowd who play jokes on one another.
48. I was a slow learner in school.
49. If I were an artist I would like to draw flowers.
50. It does not bother me that I am not better looking.
51. I am entirely self-confident.
52. I have often felt that strangers were looking at me critically.
53. Most people make friends because friends are likely to be useful to them.
54. Once in a while I feel hate towards members of my family whom I usually love.
55. If I were a reporter I would very much like to report sporting news.
56. I liked "Alice in Wonderland" by Lewis Carroll.
57. I wish I were not bothered by thoughts about sex.
58. I think that I feel more intensely than most people do.
59. There never was a time in my life when I liked to play with dolls.
60. I would like to be a florist.
ROSENBERG SELF-ESTEEM SCALE

DIRECTIONS: Please read each item carefully and then circle the best description of each item. SA = strongly agree; A = agree; D = disagree; SD = strongly disagree. Work carefully and quickly answering each item.

1. On the whole I am satisfied with myself. SA A D SD
2. At times I think I am no good at all. SA A D SD
3. I feel that I have a number of good qualities. SA A D SD
4. I am able to do things as well as most other people. SA A D SD
5. I feel I do not have much to be proud of. SA A D SD
6. I certainly feel useless at times. SA A D SD
7. I feel that I'm a person of worth, at least on an equal plane with others. SA A D SD
8. I wish I could have more respect for myself. SA A D SD
9. All in all, I am inclined to feel that I am a failure. SA A D SD
10. I take a positive attitude toward myself. SA A D SD
KLEIN SEXUAL ORIENTATION GRID

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Using the scale above, please fill out the grid on the attached sheet for the categories below.

"Sexual attraction" refers to the sex of the person or people whom you find yourself sexually attracted to.

"Sexual behavior" refers to the sex of the person or people with whom you actually have sex with.

"Sexual fantasies" refer to the sex of the people that are present during masturbation, daydreams of a sexual nature, etc.

"Emotional preference" refers to your feelings of loving, liking, or feeling close to others.

"Social preference" differs from emotional preference in that it pertains to whom you socialize, or spend time, with.

For the last two categories (self-identification and sexual lifestyle) please use the scale below:

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Self-identification refers to how you see yourself sexually or how you label yourself.

Sexual lifestyle not only to whom you prefer sexually but also the lifestyle that you prefer. For example, some heterosexuals only have sex with the opposite sex but prefer to spend the majority of their time with gay people. On the other hand, a homosexual or bisexual person may prefer to live exclusively in the gay world, the heterosexual world, or even to live in both worlds.

For all seven of these categories please rate yourself in terms of where you have been in the "past," where you see yourself at "present," and where you would like to see yourself in terms of some future "ideal."

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<th>SEXUAL FANTASIES</th>
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Social Desirability Scale

Listed below are a number of statements concerning personal attitudes and traits. Read each item and decide whether the statement is true or false as it pertains to you personally.

1. Before voting I thoroughly investigate the qualifications of all the candidates.
2. I have hesitate to go out of my way to help someone in trouble.
3. It is sometimes hard for me to go on with my work if I am not encouraged.
4. I have never intensely disliked anyone.
5. On occasion I have had doubts about my ability to succeed in life.
6. I sometimes feel resentful when I don't get my way.
7. I am always careful about my manner of dress.
8. My table manners at home are as good as when I eat out in a restaurant.
9. If I could get into a movie without paying and be sure I was not seen, I would probably do it.
10. On a few occasions, I have given up doing something because I thought too little of my ability.
11. I like to gossip at times.
12. There have been times when I feel like rebelling against people in authority even though I knew they were right.
13. No matter who I am talking to, I am always a good listener.
14. I can remember playing sick to get out of something.
15. There have been occasions when I took advantage of someone.
16. I am always willing to admit it when I make a mistake.
17. I always try to practice what I preach.
18. I don't find it particularly difficult to get along with loud-mouthed, obnoxious people.
19. I sometimes try to get even rather than forgive and forget.
20. When I don't know something, I don't at all mind admitting to it.
21. I am always courteous, even to people who are disagreeable.
22. At times I have really insisted on having things my own way.
23. There have been occasions when I've felt like smashing things.
24. I would never think of letting someone else be punished for my wrongdoings.
25. I never resent being asked to return a favor.
26. I have never been irked when people expressed ideas very different from my own.
27. I never make a long trip without checking the safety of my car.
28. There have been times when I was quite jealous of the good fortune of others.
29. I have almost never felt the urge to tell someone off.
30. I am sometimes irritated by people who ask favors of me.
31. I have never felt that I was punished without cause.
32. I sometimes think when people have a misfortune they only got what they deserved.
33. I have never deliberately said something to hurt someone's feelings.
APPENDIX F

DEMOGRAPHICS QUESTIONNAIRE, CONSENT FORM, INTRODUCTORY LETTER, AND DEBRIEFING STATEMENT
Demographics Questionnaire, Consent Form, Introductory Letter, and Debriefing Statement

DEMOGRAPHICS QUESTIONNAIRE

Please fill in the following information. Do **not** write your name on any of the materials handed out on this package as this will ensure your anonymity.

Age: ____  Ethnicity/Race: ____

Marital Status: ___ Married; ___ Living with significant other; ___ Separated/Divorced; ___ Single; ___ Widowed/Significant other deceased

Religious Background:
___ Roman Catholic; ___ Jewish
___ Protestant; ___ Other

Your Occupation: ___________________________

Your Parent's Occupation:
Mother ________  Father ________

Household income per year (note: if dependent on parents, please indicate household income of parents):

___ $0 - $10,000
___ $10,000 - $20,000
___ $20,000 - $40,000
___ $40,000 - $70,000
___ over $70,000

Please indicate the highest degree you have obtained:
___ Professional degree (Ph.D., M.D., etc.)
___ College degree
___ At least one year of college
___ High School diploma
___ Completed Elementary school
___ Did not complete Elementary school

Please indicate the number of brothers and sisters that you have:

Brothers ____  Sisters ____

Where do you fall in relation to your siblings?
___ Oldest;  ___ Middle;  ___ Youngest;  ___ Only Child
As a participant in this study, you will be asked to complete a battery of questionnaires. Because of the nature of this study, some of the questions ask for personal information regarding your sexual behavior. Please be assured that your responses to all questions will be strictly anonymous. Your name will not appear on any of the questionnaires, and the Consent Form that you sign will be kept separate from the actual questionnaires. The code numbers on the questionnaires are only to ensure that each set of questionnaires stays together. We will not be able to identify you or to associate your name with any specific questionnaire from the information we have.

We hope that you will feel free to complete all of the questionnaires. Though we do not anticipate a problem, you may, however, chose not to answer specific questions or to discontinue at any time without penalty.

If you have any questions or concerns about this investigation, please feel free to ask the experimenter before you leave today.

Thank you for your participation.

Participants' signature Date
This package consists of several questionnaires. Please note that there is a number at the top of all of the answer sheets. This allows me to keep the package together. Your confidentiality is assured as your name will not appear anywhere on the answer sheets. Your signed consent form is returned separately.

All of the items are of short format (i.e. True-False, Multiple Choice, etc.). Please read the items carefully as some of them are phrased in the negative. Example - "I would never ....".

As you will notice, the envelope is self-addressed and stamped. After you have completed the package, please enclose and return all the material. When I receive your completed package I will relay to you a brief description of the nature of the study. My phone number will be included should you have any questions about the measures, the procedure, or the purpose.

Thank you for participating in this study. It is of great help to me and I am very grateful for your time.

Joe Baltar
DEBRIEFING STATEMENT

This study attempted to investigate the different dimensions that may make up sexual orientation and their relationship to other variables. The questionnaires which you have just filled out will aid in the development of a sexual orientation questionnaire which may prove helpful to mental health professionals in their clinical practice. Should you have any further questions, please feel free to contact me at ..........

Your participation in this study is very much appreciated.
Appendix G

CORRELATION COEFFICIENTS OF EACH ITEM WITH ITS DIMENSION
Correlation Coefficients of Each Item with Its Dimension (all correlations are positive)

### Dimension IIa - Sexual Attraction-Past (SA Past)

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No. of items = 7

### Dimension IIb - Sexual Attraction Present-Future (SA PF)

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No. of items = 16
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No. of items = 26

### Dimension IV - Gender Identity (GI)

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No of items = 7
Dimension V - Sex Role Identity (SR)

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No. of items = 8

Dimension VI - Emotional Attraction (EA)

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No. of items = 8

Dimension VII - Sexual Behavior (SxB)

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No. of items = 9
### Dimension VIII - Alcohol/Drug Usage (AD)

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No. of items = 7

### Dimension IX - Social Behavior and Attitudes (SBA)

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No. of items = 9

### Dimension X - Bisexuality (Bi)

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No. of items = 5

* $p < .05$  
** $p < .01$  
*** $p < .001$
REFERENCES


VITA

The author, Joseph F. Baltar, was born in Havana, Cuba, on January 18, 1959. His family moved to the United States in 1960 and he graduated summa cum laude with a Bachelor of Arts degree in psychology from Manhattan College in Riverdale, New York, in May of 1981. He was elected a member of Phi Beta Kappa in 1980.

Following graduation, the author was employed by the airlines and traveled extensively until 1985. In 1985, he decided to return to psychology and as such worked in the psychiatric inpatient unit at Children's Memorial Hospital in Chicago until August of 1987. At that time, the author enrolled in the Clinical Psychology Doctoral Program at Loyola University Chicago. His training at Loyola included experiences in clinical work at an outpatient community mental health center, and at the university counseling center. The author served as a Teaching Fellow and Instructor at Loyola from 1990 to 1992.

The author earned a Masters of Arts degree in Clinical Psychology from Loyola University Chicago in 1991, and completed an APA accredited clinical psychology predoctoral internship in 1993 at Ravenswood Hospital Medical Center in Chicago, Illinois. From 1993 to 1996, the author served as Senior Program Coordinator at Allendale Association Residential Treatment Center in Lake Villa, Illinois. In June of 1996, the author joined Community Youth Network in Graylake, Illinois and is currently specializing in the area of outpatient sexual offender treatment.
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The final copies have been examined by the Director of the Dissertation and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the Dissertation is now given final approval by the Committee with reference to content and form.

The Dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

November 2, 1997
Date

[Signature]
Director's Signature