

Keeping it real: Young adult women's authenticity in relationships and daily condom use

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Abstract

The role of relationship authenticity in shaping women's daily condom use was investigated. Forty-seven sexually active women in dating relationships completed a measure of relationship authenticity and then reported on their daily condom use and relationship events for 14 consecutive days. Inauthentic women were less likely than more authentic women to use condoms, particularly on days with frequent negative events such as major disagreements with a romantic partner. These critical Person × Situation interactions remained significant after controlling for the use of another form of birth control, sexual frequency, knowledge of a partner's sexual history, and relationship satisfaction. Implications for sexual risk-taking behaviors and future research using daily experience methods to study sexuality in dating relationships are discussed.

Nearly half of all sexually active adolescents and young adults currently engage in unprotected sexual intercourse (Centers for Disease Control and Prevention [CDC], 2006) and many college students do not use condoms consistently (e.g., Kiene, Barta, Zelinski, & Cothran, 2005). In the United States, young adults, compared to older adults, are at heightened risk for contracting sexually transmitted infections (STIs) such as HIV, chlamydia, and gonorrhea (Weinstock, Berman, & Cates, 2004). Women are particularly vulnerable to contracting certain types of STIs. For example, chlamydia rates are almost 3 times as high among women than men, and women

are also more likely than men to contract gonorrhea (CDC, 2007). Although 15- to 24-year-old girls and women represent only 25% of individuals who have ever been sexually active, they acquire nearly one half of all new STIs (Weinstock et al., 2004). Furthermore, women bear the primary burden of unwanted pregnancies stemming from unprotected sex. In response, the public health community has set increasing condom use among young adults as one of its top priorities for the decade (U.S. Department of Health and Human Services, 2000).

Young adult women are more likely to have unprotected sex in ongoing dating relationships than in newly developing relationships or with casual sexual partners (e.g., Fortenberry, Wanzhu, Harezlak, Katz, & Orr, 2002; see also review by Misovich, Fisher, & Fisher, 1997). Condom use can be a source of great conflict in ongoing dating relationships, as partners may disagree about whether condoms should be used and what the use of condoms means in developing relationships (Bowleg, Lucas, & Tschann, 2004; Cabral et al., 2003; Wingood & DiClemente, 1998). Given the fact that women have more

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favorable attitudes toward condoms (e.g., Campbell, Peplau, & De Bro, 1992; De Bro, Campbell, & Peplau, 1994) and have more to lose from not using condoms than men, they often find themselves in situations in which they must try to influence or persuade a partner to use a condom. Recent research has therefore begun to explore various factors such as interpersonal trust and commitment (see review by Noar, Zimmerman, & Atwood, 2004) and attachment style (Strachman & Impett, 2009) that predict when women will use condoms. These studies highlight the importance of exploring the role of specific relational factors in shaping women's sexual health. In this article, we introduce and test *relationship authenticity* as a factor that is critical to understanding women's condom use during daily sexual interactions in their dating relationships.

Relationship authenticity

To be nobody-but-yourself—in a world which is doing its best, night and day, to make you somebody else—means to fight the hardest battle which any human being can fight.

—e.e. cummings

Studies of adolescent girls (e.g., Harper & Welsh, 2007; Harter, Waters, Whitesell, & Kastelic, 1998; Impett, Sorsoli, Schooler, Henson, & Tolman, 2008) and young adult women (Jack, 1991) have shown that the ability to authentically communicate their “true” wishes and desires in close relationships can powerfully shape women's mental health and well-being. To act with authenticity, meaning to be who you “really” are and say what you “really” feel, can be a major struggle for adolescent girls and adult women (Impett, Schooler, & Tolman, 2006; Jack & Dill, 1992; Tolman & Porche, 2000).

Qualitative research that has focused on adolescent girls' own perspectives has shown that the desire to develop and maintain relationships is a primary struggle in adolescence (e.g., Brown, 1998; Brown & Gilligan, 1992; Tolman, 2002). This healthy desire for connection comes with an unfortunate and often

devastating cost, namely, the tendency to sacrifice or “silence” one's own needs and desires in order to please others and avoid conflict (Gilligan, 1982; Jack, 1991). Indeed, longitudinal research has shown that although childhood girls are engaged in a rich social world in which they acknowledge and speak about their feelings directly and publicly, in early adolescence, many girls begin to feel the pressure to act in ways that are inconsistent with their actual thoughts and feelings (Brown & Gilligan, 1992). Although it emerges in early adolescence, the tendency to silence one's own authentic thoughts and feelings in relationships is likely to persist as girls mature into young adult women and begin dating relationships (Jack, 1991; Jack & Dill, 1992).

In our previous work, we have focused specifically on girls who resist such pressures to self-silence—girls who are high in *relationship authenticity*, defined as a high level of congruence between what a girl thinks and feels and what she actually does and says in relational contexts (Impett et al., 2008). Previous research with both adolescent and young adult women has shown that relationship authenticity is associated with increased mental health and well-being. In one study of early adolescent girls, relationship authenticity predicted higher self-esteem and less depression after controlling for a variety of other factors that have been consistently associated with positive youth development (Tolman, Impett, Tracy, & Michael, 2006). In a 5-year longitudinal study, girls who were high in relationship authenticity in early adolescence experienced increases in self-esteem over the course of adolescent development (Impett et al., 2008). Research with both adolescent girls and young adult women using other measures such as Harter and colleague's measure of “false self behavior” and Jack and Dill's (1992) measure of “self-silencing” has supported similar conclusions (Harper, Dickson, & Welsh, 2006; Harper & Welsh, 2007; Harter, Marold, Whitesell, & Cobbs, 1996; Harter et al., 1997). Furthermore, these findings converge with the observations of other scholars who have stressed the importance of authenticity and mutuality in relationships

(e.g., Chodorow, 1999; Harter, 2002; Jack, 1991; Jordan, 1994; Miller, 1976).

Women who are able to be authentic in their relationships may also find it easier to articulate and communicate their *sexual* needs and desires as well, including the desire to protect themselves against STIs and unwanted pregnancy (Amaro, 1995; Amaro, Raj, & Reed, 2001). In a study of late adolescent girls aged 16–19 years, Impett and colleagues found that authentic girls reported higher feelings of sexual self-efficacy (i.e., feelings of conviction that a girl can act upon her own sexual needs in a relationship, such as enjoying sex, refusing unwanted sex, and insisting on the use of protection) than less authentic girls (Impett et al., 2006). In another study of adolescent and young adult women aged 14–21 years, girls who “silenced” their authentic thoughts and desires in relationships with boys reported less open sexual communication, and in turn less frequent use of contraception than more authentic girls and women (Widman, Welsh, McNulty, & Little, 2006).

Overview of the hypotheses and current study

These preliminary studies suggest that relationship authenticity may be a critical predictor of women's use of condoms in their dating relationships. However, all these studies relied on cross-sectional, retrospective reports of sexuality and sexual behavior, despite the risk of retrospective bias when assessing condom use through cross-sectional self-report designs (Croyle & Loftus, 1993). This study addresses this limitation by using a daily experience method to obtain daily reports of condom use in dating relationships every day for 14 consecutive days. These daily reports are designed to minimize retrospective bias and to provide more detailed, accurate information about condom use in dating relationships (Graham, Catania, Brand, Duong, & Canchola, 2003).

Based on theory and previous research, our first hypothesis was that young adult women who are high in relationship authenticity would be more likely than inauthentic women to use condoms during daily sexual interactions with a dating partner.

Furthermore, although we predicted that relationship authenticity would be associated with more frequent use of condoms during daily sexual interactions, we also thought that the daily relationship climate would make a difference. Each day poses an opportunity for couples to share good as well as bad times (Gable, Reis, & Downey, 2003). On some days partners express their love and affection and make each other feel special, but on other days, couples get into fights or disagreements or may unfairly criticize each other. Women who have trouble acting authentically in relationships have especially heightened concerns about avoiding conflicts and disagreements (Jack, 1991; Tolman & Porche, 2000). Given that condom use can be a source of great conflict in relationships (e.g., Bowley et al., 2004; Cabral et al., 2003), inauthentic women may be particularly sensitive to conflict surrounding condom use. Therefore, our second hypothesis was that inauthentic women would be particularly threatened by negative relationship events and less likely to use condoms on such days. That is, women who have trouble voicing their needs in general might find expressing their needs to be especially difficult when they feel that their relationship is on shaky ground.

In addition to the influence of relationship authenticity and the daily relationship climate, condom use is typically influenced by a variety of other factors that may be especially significant within dating relationships. Use of another form of birth control is reported frequently as a reason for not using condoms (Sheeran, Abraham, & Orbell, 1999). Research has suggested that a “contraceptive switch” often occurs in relationships such that partners begin their relationships using condoms, but as the relationship progresses, they move to a hormonal contraceptive method such as birth control pills (Civic, 2000; Hammer, Fisher, Fitzgerald, & Fisher, 1996). Other possible contributors to condom use include sexual frequency and perceived knowledge of the partner's sexual history. Greater frequency of sexual intercourse has been associated with less consistent condom use (Sheeran et al., 1999), and in one study, the top reason why college students

did not use condoms was that they claimed to have known their partner's sexual history (Civic, 2000). In addition, in romantic relationships specifically, many studies have shown that higher feelings of relationship satisfaction are associated with lower rates of condom use (e.g., Katz, Fortenberry, Zimet, Blythe, & Orr, 2000; Strachman & Impett, 2009). As such, we included each of these factors (i.e., use of another birth control method, sexual frequency, knowledge of a partner's sexual history, and relationship satisfaction) as covariates in all the study analyses.

Method

Participants and procedure

This study was conducted at a large public university in the Western United States. The study was advertised as an examination of "Relationships, Sexuality, and Health" to students in psychology courses. The participants were told the study was about daily events in relationships and that many different relationship events would be assessed. In order to examine multiple sexual interactions within-person, participants were prescreened and recruited based on answering "yes" to the following three questions: (a) Are you currently in a relationship? (b) Are you sexually active with your current partner? and (c) Will you see your partner at least five times during the next two weeks? Participants were not told they were recruited to participate based on their responses to these questions until debriefing.

Sixty women initially completed the study for course credit. Thirteen of the women did not engage in sexual intercourse during the study and thus did not have the opportunity to use (or not use) a condom; therefore, only the women who engaged in at least one sexual interaction during the course of the study ($N = 47$) were included in the analyses. The final analysis sample was racially diverse: 28% Caucasian, 25% Asian, 6% African American, 3% Native Hawaiian, 36% self-identified as multiracial or "other," and 2% did not report their race. Hispanic ethnicity was assessed independently from

racial heritage, with 24% of the racial groups identifying as ethnically Hispanic. Participants ranged in age from 18 to 31 ($M = 20.2$, $SD = 2.6$) and had been dating their partner for an average of 23 months ($SD = 26$ months, range = 1–135 months).

During an initial session in the laboratory, participants completed a questionnaire with basic demographic information (i.e., gender, age, ethnicity, and relationship duration), relationship authenticity, and various measures of past sexual behavior. At this time, they were instructed to complete an online survey by logging onto a secure server each day beginning the following day. The daily survey was posted on a Web site and each participant was given a login name and password to use each time they entered the site. Because we found in our pilot research in a similar sample of undergraduates that most sexual activity occurs in the evening, participants were asked to complete the survey at the beginning of each day for 14 consecutive days, and the survey asked about the previous day's relationship and sexual activities. Participants were instructed to complete the survey by 1 p.m. each day. The date and time of survey completion were automatically recorded by the Web site, and research assistants checked this log each morning and e-mailed reminders to participants who had not yet completed their daily surveys. Only surveys completed on time were accepted and included in the data analyses. All participants received course credit, and as an additional incentive for on-time completion of surveys, participants who completed between 11 and 14 diaries were entered into a lottery drawing for \$100. Participants completed a total of 803 daily surveys on time, an average of 13 of 14 possible days per person. Ninety percent of participants completed all their surveys on time.

Background measures

Relationship authenticity

A slightly modified version of the Inauthentic Self in Relationships subscale of the Adolescent Femininity Ideology Scale (AFIS; Tolman & Porche, 2000) was used to measure relationship authenticity. The AFIS was

developed with and specifically for girls of varied ages in adolescence. In this sample of young adult women in dating relationships, the items were modified to refer to a woman's relationship with her current dating partner. Women responded to 10 statements such as "I tell my partner what I honestly think even when it might make him uncomfortable or upset" and "I usually tell my partner when he hurts my feelings" on 7-point scales (1 = *strongly disagree* to 7 = *strongly agree*). Several items were reverse-coded, and mean scores for this measure were computed with higher scores reflecting greater authenticity in dating relationships. In this sample, $\alpha = .74$.

Sexuality questions

Participants were asked an open-ended response question about their primary form of birth control (e.g., condoms, oral contraceptives such as the pill, etc.). Thirty-eight percent of participants reported condoms as their primary form of birth control; 48% reported oral contraceptives, patch, or Depo-Provera; 6% "pull-out"; 4% diaphragm; and 4% "none." We created a variable called "Otherbirth" to control for the use of other birth control methods. Participants who reported using other forms of birth control (i.e., oral contraceptives, Depo-Provera, and diaphragm; 56% of the sample) were assigned a 1 on this variable, whereas participants who did not use another form of birth control (i.e., condoms, pull-out, and none; 44% of the sample) were assigned a 0 on this variable. Participants were also asked how well they knew their partner's sexual history (1 = *not at all* to 5 = *very well*) on a 5-point scale ($M = 4.26$, $SD = 1.24$).

Relationship satisfaction

In addition, relationship satisfaction was assessed with a standard measure (Rusbult, Martz, & Agnew, 1998). Participants responded to five statements such as "Our relationship makes me happy" on 9-point scales ranging from 1 (*do not agree at all*) to 9 (*agree completely*). In this sample, $\alpha = .91$ for satisfaction.

Daily measures

Relationship events

Participants completed measures of positive and negative relationship events used in previous research (Gable et al., 2003; Impett, Strachman, Finkel, & Gable, 2008). Each day, participants indicated whether they experienced each of nine positive relationship events and nine negative relationship events. Positive events included: "My partner told me that he loves me," "My partner and I participated in an activity that I really enjoy," "During a discussion, I felt understood and appreciated by my partner," "My partner did something that made me feel wanted," "My partner and I did something fun," "My partner did something special for me," "My partner complimented me," "My partner made me laugh," and "My partner and I talked about making our relationship more serious or committed." Negative events included: "My partner and I had a minor disagreement," "My partner was inattentive and unresponsive to me," "My partner tried to control what I did," "We had a major disagreement," "My partner's behavior made me question his commitment to me," "My partner criticized me," "My partner went out with his friends instead of spending time with me," "My partner did something that made me feel irritated or angry," and "My partner gave me the silent treatment." Responses to these questions were summed to create separate indices of the total number of positive events and the total number of negative events that participants experienced in their relationships each day.

Sexual intercourse

Participants were asked if they engaged in sexual intercourse since their last survey with a *yes-no* response. Participants engaged in intercourse an average of 3.8 times ($SD = 1.4$, range = 2–7 times) during the 2-week study.

Condom use

If participants engaged in sexual intercourse since their last survey, they were asked if they used a condom during this sexual interaction

with a *yes–no* response. Of the participants who reported using another form of birth control ($N = 28$), 79% never used condoms during the study, 7% used condoms during some of the sexual interactions, and 14% used condoms every time. Of those who reported not using another form of birth control ($N = 19$), 43% participants never used condoms during the study, 14% used condoms some of the times they engaged in sex, and 43% used condoms every time. The average condom use (regardless of other birth control use) was 33% of the time.

Results

Data analysis plan

The primary goal of this study was to examine the joint influence of relationship authenticity and daily relationship events on daily condom use. Traditional analysis of variance methods assumes independence of observations, a criterion that is clearly violated when the same individual completes the same measures repeatedly over several days. Therefore, the data were analyzed using hierarchical linear modeling (HLM) techniques (HLMwin Version 6.04; Raudenbush, Bryk, Cheong, & Congdon, 2004). HLM provides independent estimates of the associations among constructs at the lower level (within persons) and models them at the upper level (between persons) as random effects using maximum-likelihood estimation. A strength of HLM techniques is that they can readily handle an unbalanced number of cases per person (e.g., number of diaries provided or number of days on which individuals engaged in sex), giving greater weighting to participants who provide more data (Reis & Gable, 2000; Snijders & Bosker, 1999). Level 1 (i.e., daily) predictors (in this case, positive and negative relationship events) were centered around each individual's mean across the 14-day study. This technique, known as group-mean centering, accounts for differences between persons in the sample and assesses whether day-to-day changes from a participant's own mean are associated with changes in the outcome variable, consequently unconfounding between- and within-person effects.

Relationship authenticity and daily condom use

The first set of hypotheses concern the association between relationship authenticity and daily condom use. Because condom use is dichotomous, the hypotheses were evaluated with logistic HLM (Snijders & Bosker, 1999). We coded condom use as 0 (*no condom used*) and 1 (*condom used*), such that in all the analyses presented, positive coefficients indicate that a particular variable was associated with a greater likelihood of using condoms. The equations to test the association between relationship authenticity and daily condom use are as follows.

Level 1 equation

$$\text{Prob}(Y_{ij}(\text{NOCONDOM}) = 1 | b_0) = p_j$$

$$\log \left[\frac{p}{1-p} \right] = b_0 + r$$

Level 2 equation

$$b_0 = g_{00} + g_{01} \times (\text{AUTHENTICITY}) + u_0.$$

In the Level 1 equations, condom use is the dependent variable Y for Level 1 unit i in group j and has a probability p for outcome 1 (condom used) and probability $1 - p$ for outcome 0 (no condom used). In addition, b_0 refers to the intercept (condom use on an average day). In the Level 2 equation, g_{00} refers to the degree to which variations from the sample's mean relationship authenticity score were predictive of daily condom use and g_{01} represents the slope between relationship authenticity and condom use. Condom use was calculated as a function of the entire sample and error (u). In addition, the probability of using a condom as compared to the probability of not using a condom, or the log odds, was also calculated. When the probability is p_j , the odds are $p/(1 - p)$. Although not displayed in the equations, we also controlled for use of another form of birth control, relationship satisfaction, perceived knowledge of the partner's sexual history, and frequency of sexual intercourse. In the Results, we report both the coefficient representing the probability of

Table 1. Condom use as a function of relationship authenticity and the covariates in hierarchical linear modeling analyses

	β	Odds ratio	Confidence interval
Relationship authenticity	.31**	1.35	1.11–1.64
Other birth control	–2.13***	.12	.08–.18
Relationship satisfaction	–.43***	.65	.61–.90
Sexual frequency	–.17**	.84	.74–.96
Knowledge of partner's sexual history	.08	1.08	.89–1.32

** $p < .01$. *** $p < .001$.

using a condom and the odds ratio (OR) and confidence interval (CI) of this probability.

The results of this analysis showed that, as predicted, relationship authenticity was associated with an increased likelihood of using condoms (Table 1). More specifically, for each unit increase in relationship authenticity, participants were nearly $1^{1/2}$ times as likely to use condoms during day-to-day sexual interactions with their dating partner. In addition, there were also significant effects for three of the four covariates, including the use of another form of birth control, relationship satisfaction, and frequency of sexual intercourse over the course of the study. That is, women were more likely to use condoms during daily sexual interactions to the extent that they were not currently using another form of birth control, had lower relationship satisfaction, and had a low frequency of engaging in sexual intercourse. Perceived knowledge of the partner's sexual history was the only covariate that was not significantly associated with daily condom use.

Daily relationship events as a moderator between relationship authenticity and daily condom use

We also predicted that the association between relationship authenticity and daily condom use would be moderated by daily negative relationship events. More specifically, we predicted that women scoring low in relationship authenticity would be even less likely to use condoms on days when they felt their sense of security in the relationship threatened, such as

on days when the women got into major disagreements with their dating partner or questioned their partner's level of commitment to the relationship. To test this hypothesis, we created several new HLM equations.

Level 1 equation

$$\text{Prob}(Y_{ij}(\text{CONDOM}) = 1|b_0) = p_j$$

$$\log \left[\frac{p}{1-p} \right] = b_0 + b_1 \\ \times (\text{RELATIONSHIP EVENTS}) + r$$

Level 2 equation

$$b_0 = g_{00} + g_{01} \times (\text{AUTHENTICITY}) + u_0$$

$$b_1 = g_{10} + g_{11} \times (\text{AUTHENTICITY}) + u_1.$$

In the Level 1 equations, b_0 refers to the intercept (condom use on an average day) and b_1 represents the slope between relationship events and condom use, and includes an error term (r). In the Level 2 equations, relationship authenticity was predicted to moderate the slope between relationship events and condom use; g_{00} refers to the degree to which variations from the sample's mean relationship authenticity score was predictive of daily condom use, and g_{01} represents the slope between relationship authenticity and condom use. Whether relationship authenticity moderated the relationship between events and condom use was tested by the coefficient g_{11} . As in the analysis reported above, this analysis also controlled for use of another form of birth control, relationship satisfaction, perceived knowledge of the partner's sexual history, and frequency of sexual intercourse.

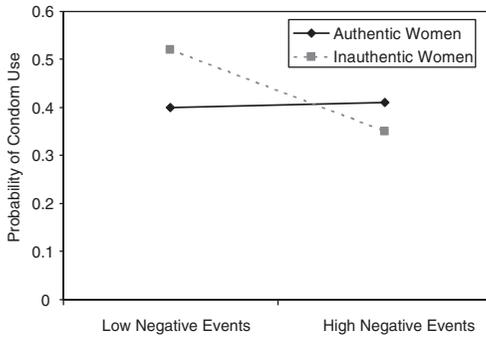


Figure 1. Negative relationship events moderating the link between relationship authenticity and daily condom use.

Note. Relationship authenticity is plotted 1 *SD* above and below the mean. Because women reported negative events with relatively low frequency, we conducted a median split of negative events for the purposes of this figure. The median of negative events = 1.0, with 1 or more negative events occurring 55% of the time and 0 negative events occurring 45% of the time.

Results of these analyses revealed a significant interaction between relationship authenticity and daily negative relationship events in predicting condom use (unstandardized HLM coefficient = $-.28$, OR = $.75$, 95% confidence interval CI = $.60, .94$, $p < .05$). As shown in Figure 1, for people who scored high in authenticity, there was no association between the occurrence of daily negative events and daily condom use. However, people who scored low in authenticity were less likely to use condoms on days with more frequent negative events in their relationships than on days with less frequent negative events. In other words, inauthentic women were less likely to use condoms when they felt that their sense of security had been threatened such as on days when they got into disagreements with their partner or questioned their partner's level of commitment to the relationship. As a comparison, we tested positive events as a possible moderator of the link between authenticity and daily condom use. As predicted, we did not find a significant interaction effect (unstandardized HLM

coefficient = $.02$, OR = 1.02 , 95% CI = $.80, 1.32$, $p = .86$), suggesting that women who find it difficult to be authentic in their dating relationships are specifically sensitive to *negative* events and not just to all relationship-relevant events in their romantic relationships. In addition, after controlling for positive relationship events, the interaction between authenticity and negative relationship events remained significant.

We also conducted a final set of analyses to determine if inauthentic women are particularly sensitive to specific types of negative events that inhibit their abilities to use condoms during daily sexual interactions. Some of the daily relationship events that we assessed are more severe or potentially threatening than others. For example, most couples get into minor disagreements from time to time (on 26% of days in this study); major disagreements happen much less frequently (on 8% of days) but they may be severe and highly upsetting when they do occur. Just as negative events may differ in their severity, positive events may differ in the level of satisfaction or rewards that they provide. To address these issues, we conducted a final set of analyses in which we explored interactions between relationship authenticity and each of the 18 different types of relationship events. Because in this case the relationship events were dichotomous (0 = *no event occurred that day*, 1 = *an event occurred that day*), we entered the relationship events uncentered (as opposed to entering them group-mean centered as we did with the continuous measures of relationship events used in the previous analyses). Starting with the negative events, we found that inauthentic women were less likely to use condoms on days with more severe types of negative relationship events including "My partner and I had a major disagreement," "My partner's behavior made me question his commitment to me," and "My partner did something that made me feel irritated or angry," all $ps < .05$. In contrast, we did not find similar interactions for the less severe types of negative relationship events including "My partner and I had a minor disagreement," "My partner gave me the silent treatment," "My partner

was inattentive or unresponsive to me," "My partner went out with his friends instead of spending time with me," "My partner criticized me," and "My partner tried to control what I did," all $ps > .10$. Authenticity did not significantly interact with any of the nine positive relationship events, all $ps > .10$.

Discussion

Many studies of adolescent girls and young adult women have shown that to the extent that girls and women can bring themselves authentically into relationships, they experience enhanced mental health and well-being (Harper & Welsh, 2007; Impett et al., 2008; Jack, 1991). This study extends this work to investigate the implications of relationship authenticity for women's sexual health, providing evidence that women who feel that they can "speak their minds" in dating relationships also feel better equipped to assertively communicate their sexual needs and desires, including the desire to use condoms during daily sexual interactions.

In this 14-day daily experience study of young adult women in dating relationships, we found that the more authentic women felt they could be in their current relationship, the more likely they were to use condoms during daily sexual interactions with a dating partner. Furthermore, women who felt that they could not be authentic in their dating relationships were even less likely to use condoms on days when they reported more frequent negative events, particularly more severe types of relationship events including experiencing a major disagreement, feeling irritated or angry with their partner, and questioning their partner's level of commitment to the relationship. This finding suggests that inauthentic women, who have trouble voicing their concerns in general, might find this especially difficult when their relationship is on shaky ground, and is consistent with previous research showing inauthentic women's concerns with conflict avoidance (Jack, 1991). This critical Person \times Situation interaction was robust beyond several important covariates including women's use of another form of birth control, relationship satisfaction, perceived knowledge

of the partner's sexual history, and frequency of sexual intercourse.

All the existing research using this measure of relationship authenticity has focused on adolescent girls' authenticity in their peer relationships (e.g., Impett et al., 2006; Tolman & Porche, 2000; Tolman et al., 2006), whereas we adapted the items to measure young women's abilities to authentically communicate their thoughts and feelings to a *dating partner*. The extent to which a girl feels that she can be authentic in her peer relationships may or may not overlap with the degree to which she feels that she can be authentic in a dating relationship, particularly in heterosexual relationships in which power differentials are embedded. Indeed, many of the adolescent girls interviewed by Way (1995) discussed their willingness to be outspoken with their friends, teachers, and family members, but many of them seemed to change their tone when they spoke about boys. The adaptation of the original measure developed by Tolman and Porche (2000) is a strength of this study.

A major methodological strength of this research concerns the daily nature of data collection. Previous research has examined the link between relationship authenticity and various indicators of sexual health, with cross-sectional, retrospective designs (Impett et al., 2006; Widman et al., 2006). However, assessing condom use in cross-sectional studies poses considerable risk of retrospective bias (Croyle & Loftus, 1993). This study is the first to extend this research using a daily experience methodology in which participants reported on their sexual interactions shortly after they occurred. The research design allowed for the simultaneous examination of dispositional variables (i.e., relationship authenticity) and situational variables (i.e., daily relationship events), as well as interactions between the two, an uncommon practice in research on condom use (Wiederman, 2004). Such a method provides a fuller and more nuanced understanding of the dynamics of condom use among young adult women.

The results of this study have important implications for understanding sexual risk-taking behaviors in intimate relationships.

More specifically, these findings suggest that interventions that take into account the symbolic meaning of condom use in intimate relationships may be more efficacious to the extent that they incorporate person-level factors such as women's abilities to be authentic with a dating partner or their attachment orientations (Strachman & Impett, 2009), as well as situation-level factors such as daily fluctuations in relationship satisfaction or the types of events that women experience in their relationships. For example, taking note of women's abilities to be authentic with a dating partner, particularly when their sense of security is threatened, may help to identify difficult situations that require intervention. As shown by the current research, condom use interventions may be most helpful and needed when a woman has difficulties being authentic and is also experiencing particular events in her dating relationships that heighten her feelings of anxiety or vulnerability.

Several limitations of this research and directions for future research deserve comment. First, it will be valuable to extend this research to a broader range of couples. The participants were college students in dating relationships, and it will be important to replicate and extend these findings to other samples including women in short-term casual relationships. Furthermore, given the high rates of STIs and unwanted pregnancies among adolescents (Weinstock et al., 2004), future research should also start earlier in the life span to examine how girls' feelings of authenticity, shaped prior to the onset of adolescence, influence later condom use. In addition, the importance of negotiating relational processes is not unique to girls and women. Indeed, there is evidence that boys and young men also face distinct relational struggles such as feeling the need to "act like a man" to maintain relationships with peers (e.g., Tolman, Spencer, Rosen-Reynoso, Harmon, & Striepe, 2004; Way, 2001; Way & Chu, 2004). Future research should investigate the ways in which boys' ideologies about masculinity influence aspects of their sexual health.

Second, the measure of condom use included in the daily experience study was necessarily brief. There are many avenues

of future research that would benefit from the use of daily experience methods and that could expand upon the measures in this study. For example, this study did not differentiate between instances in which the woman herself initiated the use of condoms and times when the woman agreed to use a condom upon her partner's suggestion. In addition, the simple use of a "yes" or "no" to measure condom use may have obscured another complexity that researchers often overlook, that is, that couples' use of condoms in a single sexual encounter is not always an all-or-nothing phenomenon. Couples may begin a sexual encounter with a condom on, then remove it (or vice versa), or they may use it only for certain sexual acts (e.g., no condom for oral sex, but condom use for vaginal sex). Future research would benefit from using an expanded measure of condom use that allows participants to indicate if a condom was used for the entire sexual encounter, for part of the sexual encounter, or not at all. Finally, we should also point out that although this diary study provides a more complete picture of condom use in dating relationships, the findings are correlational, and causal conclusions about links between authenticity and condom use behavior cannot be determined using the current data.

Third, future research should begin to explore possible mechanisms of the association between relationship authenticity and condom use during daily sexual interactions. For example, it is possible that less authentic women fail to use condoms because they are afraid of upsetting their partners or because they want to feel closer and more connected to their partners and think that using condoms interferes with this closeness (Noar et al., 2004). Future research could assess women's reasons for both using and not using condoms in order to understand why inauthentic women may fail to protect themselves in sexual situations.

Despite the noted limitations, this study makes a number of unique contributions to our understanding of the links among relationship authenticity, the daily climate of romantic relationships, and young adult women's sexual health. Future research should continue

to pay close attention to the role that relationship authenticity plays in shaping the sexual feelings, motives, and behavior of adolescent girls and young adult women.

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