With love, bitter turns into sweetness.
With love, dregs turn into honey.
With love, pains turn into healing.
With love, they revive the dead.
With love, the king becomes a servant.
With love, thorns become flowers.
With love, vinegar becomes wine.

—Persian poet and mystic Jalal al-Din Rumi (1207-1273)—

Love and Sexual Health

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Abstract

Recently, scholars from a variety of academic disciplines—cross cultural studies, history, psychology, sociology, neurophysiology, and endocrinology—have begun to explore the importance of love in sexual desire, sexual behavior, and sexual health. In this chapter, we will set the stage by reviewing the historical and cultural forces that have shaped men and women’s romantic and sexual attitudes, feelings, and behavior. We will begin by addressing the questions with which we are most concerned: “What impact do passionate and companionate love, relationship quality, and commitment have on men and women’s sexual desire, sexual pleasure, and sexual health?” Next we will discuss the impact of fairness and equity on sexual health. Then we will ask:
“Passionate and companionate love: How long do they last?” We will conclude by speculating about the social changes that must occur in the lives of 21st century men and women if they are to enjoy full sexual citizenship and health.

I. Defining Passionate and Companionate Love

Love is a basic emotion. It comes in a variety of forms. Scholars, as well as persons-in-the-street, usually distinguish between two kinds of love—passionate love (“being in love”) and companionate love (“loving”). Most people understand the difference between being “in love” with someone and “loving” them. When besotted lovers hear the dreaded mantra: “I love you but I'm not in love with you. Can't we just be friends?” their hearts sink. Researchers find that men and women in a variety of nations, homosexual and heterosexual, single and married resonate to this distinction (Fehr, 1993; Hatfield & Rapson; 1993; Hendrick & Hendrick, 1989).

A. Passionate Love

Passionate love (sometimes called “obsessive love,” “infatuation,” “lovesickness,” or “being-in-love”) is a powerful emotional state. It has been defined as:

A state of intense longing for union with another. Passionate love is a complex functional whole including appraisals or appreciations, subjective feelings, expressions, patterned physiological processes, action tendencies, and instrumental behaviors. Reciprocated love (union with the other) is associated with fulfillment and ecstasy.
Unrequited love (separation) is associated with feelings of emptiness, anxiety, and despair (Hatfield & Rapson, 1993, p. 5.)

The *Passionate Love Scale (PLS)* (see Table 1) was designed to tap the cognitive, emotional, and behavioral indicants of such longings (Hatfield & Sprecher, 1986.) The *PLS* has been found to be a useful measure of passionate love with men and women of all ages and in a variety of cultures, and to correlate well with certain well-defined patterns of neural activation (see Bartels & Zeki, 2000, 2004; Doherty, Hatfield, Thompson, & Choo, 1994; Fisher, 2003; Landis & O’Shea, 2000.)

Insert Table 1 about here

**B. Companionate Love**

Companionate love is a far less intense emotion. It is comprised of feelings of deep attachment, commitment, and intimacy, and has been defined as:

The affection and tenderness we feel for those with whom our lives are deeply entwined. (Hatfield & Rapson, 1993, p. 9)

Psychologists have used a variety of scales to measure companionate love. Since Sternberg (1988) postulated that companionate relationships require both intimacy and commitment, many researchers have assessed such love by measuring those two components.
Other Definitions of Love: Scientists have proposed a variety of definitions and typologies of love (see Hendrick & Hendrick, 1989; Shaver & Hazan, 1988; Sternberg, 1988.) According to Sternberg (1988), for example, there are seven types of love—each determined by various combinations of passion, intimacy, and commitment. Possible combinations result in Romantic Love, Infatuation, Companionate Love, Liking, Fatuous Love, Empty Love, and Consummate Love. According to Sternberg, the ideal form of love is Consummate Love, which includes passion, intimacy, and commitment.

II. Passionate Love, Sexual Desire, and Sexual Behavior

Recently, social psychologists, neuro-scientists, and physiologists have begun to explore the links between passionate love, sexual desire, and sexual health in both men and women.

The first neuroscientists to study passionate love (using fMRI brain imaging techniques) were Birbaumer and his colleagues (1993). They concluded that passionate love was “mental chaos.” More recently, Bartels and Zeki (2000, 2004) studied the neural bases of passionate love (also using fMRI techniques.) They interviewed young men and women from 11 countries and several ethnic groups who scored high on the Passionate Love Scale (PLS) and who claimed to be “truly, deeply, and madly” in love. The authors discovered that passionate love leads to a suppression of activity in the areas of the brain controlling critical thought; they argue that once we get close to someone, there is less need to critically assess their character and personality. (In that sense, love may indeed be “blind.”) Passion also
produced increased activity in the brain areas associated with euphoria and reward, and decreased levels of activity in the areas associated with distress and depression. Activity seemed to be restricted to foci in the medial insula and the anterior cingulated cortex and, subcortically, in the caudate nucleus and the putamen, all bilaterally. Deactivations were observed in the posterior cingulated gyrus and in the amygdala and were right-lateralized in the prefrontal, parietal, and middle temporal cortices. The conclusion?

We conclude that human attachment employs a push-pull mechanism that overcomes social distance by deactivating networks used for critical social assessment and negative emotions, while it bonds individuals through the involvement of the reward circuitry, explaining the power of love to motivate and exhilarate (p. 1155).

The authors point out that the areas activated in passionate love are identical to those activated in euphoric states (such as cocaine addition) and adjacent to those activated in sexual arousal. Thus, they argue, it is not surprising that passionate love and sexual arousal are often tightly linked.

Other psychologists who have studied the links between passionate love and sexual desire (using fMRI techniques) have found roughly similar results. Fisher and her colleagues (2003, 2004; Aron et al., 2005), for example, investigated the brain chemistry of men and women passionately in love (again using the PLS scale.) They also found that passionate love produced complex changes in brain activation. In this study of couples who had just recently fallen
in love, they found that passionate love produced activation in areas similar to (but not identical with) those identified by Bartels and Zeki. The authors argued that there may be three brain systems involved in passionate encounters—attraction, lust, and attachment. Consistent with their thesis, they found that passionate love and sexual desire activated somewhat different regional activations.

In parallel with this research, a number of social psychologists, neurobiologists, and physiologists have begun to explore the neural and chemical substrates of passionate love, sexual desire, and sexual behavior (Carter, 1998; Carter, Lederhendler, & Kirkpatrick, 1999; Komisaruk & Whipple, 1998; Maraziti, et al., 1999; Marazziti & Canale, 2004.)

Psychologists may differ on whether romantic and passionate love are or are not emotions (Fisher, et al, 2004; Shaver, Morgan, & Wu, 1996) and whether passionate love, sexual desire, and sexual motivation are closely related constructs (both neurobiologically and physiologically) or very different in their natures (Beck, Bozman, & Qualtrough, 1991; Diamond, 2004; Hatfield & Rapson, 1987.) Nonetheless, this path-breaking research has the potential to answer age old questions as to the nature of love and human sexuality.

Let us now turn to a brief consideration of the historical and cultural factors that have shaped modern-day men and women’s sexual attitudes and behavior.
III. Historical and Cultural Factors

Influencing Sexual Health

Social commentators, clinicians, and writers of self-help books often assume that men and women’s personal attitudes are the “cause” of satisfaction versus problems with sexual desire, sexual arousal, and sexual pleasure. Yet, throughout history (and still today in many cultures) men and women were (and are) taught that sex is evil and warned not to allow their own passionate and sexual feelings to spin “out of control” (Crawford, 2004; Coontz, 2005; Hatfield & Rapson, 1993, 1996; Stone, 1997.)

A. Historical Factors

The earliest Western literature abounds in tragic tales of lovers caught up in a sea of passion and violence: Orpheus and Eurydice, Daphnis and Chloe, Dido and Aeneas, Tristan and Isolde, Paolo and Francesca, Romeo and Juliet. In the Medieval world, religious, medical, and scientific authorities almost uniformly condemned such passion (Hatfield & Rapson, 1993.).

The early Catholic Church, for example, decreed that all passionate love and sexual pleasure was sinful whether or not couples were married. The Church urged Christians to be celibate. As Tannahill (1980) observed:

It was Augustine who epitomized a general feeling among the Church Fathers that the act of intercourse was fundamentally disgusting. Arnobius called it filthy and degrading, Methodius unseemly, Jerome unclean, Tertullian shameful, Ambrose a defilement. In fact there was an unstated consensus that God
ought to have invented a better way of dealing with the problem of procreation. (p. 14)

Until the 18th century, physicians generally assumed that masturbation and “excessive” sexual activity were unhealthy. A pamphlet by Daniel Defoe (1727), for example, warned about the pitfalls of any kind of sexual excess: “Whence come Palsies and Epilepsies, Falling-Sickness, trembling of the Joints, pale dejected Aspects, Leanness, and at last Rottenness, and other filthy and loathsome Distempers, but from the criminal Excesses of their younger times?” (p. 91)

Perhaps there wasn’t as much temptation to indulge in sexual “excess” in those days as today. True, in the 12th century, women of the court whiled away their time listening to troubadours’ tales of courtly love—stories of the idealized love of a young knight for his lady, who set him many impossible tasks to prove his love. But these were court romances, indulged in by the rich and powerful—not by commoners whose lives were, as Thomas Hobbes notes, “nasty, brutish, and short.” These 12th century “love affairs” were, by definition, “pure” and “holy” relationships—never to be “tainted” by “crass” physical consummation! (Capellanus, 1990) The lives of the remaining 95% of humanity, however, were quite different (Crawford, 2004; Stone, 1977.)

Stone (1977) points out that at the beginning of the Early Modern period, young men and women rarely encountered romantic partners who were sexually appealing. People’s hair was filled with lice. They had bad breath and rotting teeth. They rarely washed—their skin crawled with eczema, scabs, running
sores, oozing ulcers, and other disfiguring skin diseases. Women suffered from gynecological problems—vaginal infections, ulcers, tumors, and bleeding, which made sexual intercourse uncomfortable, painful, or impossible. Men and women who engaged in sexual relations were likely to catch any number of venereal diseases. Nor did men and women, plagued with malnutrition and exhaustion, often possess the energy required to indulge in sexual “excess.”

Historically, then, in the West men and women were influenced by an ideology that viewed sexual pleasure as unimportant (at best) and at worst shameful. (For a review of the historical factors which have influenced men and women’s sexual attitudes and behavior in non-Western countries, see Hatfield & Rapson, 1993, 1996; Oliver, 1989; Ruan, 1991).

B. Cultural Factors

Cultural factors, too, determine whether or not people celebrate passionate love and experience satisfying romantic, sexual, and personal relationships.

Cultural researchers argue that romantic love and sexual pleasure are more valued in affluent, modern, egalitarian cultures than in traditional, patriarchal societies with strong, extended family ties (Goode, 1959; Rosenblatt, 1967; Simmons, et al., 1986.) In modern, urban, egalitarian societies, it is often assumed that the healthy person is one who experiences pleasurable sex. In more patriarchal cultures, this is not necessarily so—especially for the world’s women. For the So woman of Uganda, for example, penetration is expected to be non-lubricated and painful; not surprising then that the So have no word for
female orgasm (although they do have a word for male ejaculation: Francoeur, 2004). In many African cultures, the customs of dry sex, salt cuts, and female genital mutilation further render the issue of female sexual pleasure irrelevant. In a culture where women prepare themselves to pleasure their husband by drying their vagina with powdered stem and leaf mixed with water, wrapped in a nylon stocking and inserted into the vagina for 15 minutes before intercourse, the concept of “female sexual dysfunctions” takes on a very different meaning than it holds in other parts of the world (Francoeur, 2004.) In some African cultures such as the Hausa of Nigeria, itching vulva, amenorrhea, dyspareunia (painful intercourse), infertility and obstructed labor are all considered to be sexual dysfunctions that can be cured by making a “salt cut” on the anterior vaginal wall (Francoeur, 2004.) Not surprisingly, such practices merely add to women’s sexual problems.

In any multicultural society, people’s sexual attitudes are shaped by a variety of cultural messages—some fostering healthy sexuality, some making things difficult. In addition, worldwide many men and women are in cultural or personal transition. This is indeed a challenge for health workers dedicated to improving people’s sexual health globally.

Throughout the world, “the times they are ‘a changing.” (Hatfield & Rapson, 1996; Hatfield, Rapson, & Martel, in press.) In recent years globalization and the “women’s revolution” have had a profound impact on men and women’s sexual attitudes, desires, and demands (Hatfield, et al., in press.) When (increasingly) passionate love is cherished, when women are no longer
totally dependent on the power of men, and when the “ideal” relationship is considered to be a intimate, committed, and equitable one, more men and women come to seek sexual pleasure in their love relationships, to have a voice in how and when sexual relations occur, to admit to sexual dissatisfaction, and to seek solutions. Much change is still needed, of course, if men and women of all nations are to experience satisfying passionate and sexual lives and if “sexual health” is to be a reality.

IV. Love, Relationship Quality and Stability, and Sexual and Marital Satisfaction

Let us now discuss a sprinkling of the recent social psychological research as to the impact of love and its various components—passion, intimacy, and commitment—on sexual attraction, sexual arousal, sexual behavior, and sexual satisfaction. There is considerable evidence that love—in combination with a variety of associated factors traditionally thought to contribute to relationship quality and relationship stability—are important determinants of dating and marital sexual satisfaction. These include such things as social rewards, intimacy and the ability to communicate, commitment, and the fairness or equity of the dating or marital relationship (Harvey, Wenzel, & Sprecher, 2004; McKinney & Sprecher, 1990; Sprecher, 2002; Sprecher & McKinney, 1993.)

A. Companionate Love and Sexual Health: Reinforcement Theory

Many psychologists cite reinforcement theory principles to explain why people are attracted to some people and repelled by others (Kelley et al., 1983; Hatfield & Rapson, 1993).
According to reinforcement theory, men and women come to care for those who provide important rewards and to dislike those who are withholding or punishing. The human mind is like a giant computer. It swiftly tallies up how pleasurable or painful a lifetime of fleeting encounters with a person have proved to be, sums, and “spits out” an emotional reaction. A very handy tally indeed.

Gottman and Levenson (1992) contrasted the behavior of married couples who were reasonably happy with those who were distressed. They found that happy couples generally had positive exchanges. They smiled, nodded, and made eye contact. They spoke to each other in soft, tender, happy voices. They leaned forward to catch one another’s words. Distressed couples had evolved corrosive patterns of interacting. They tried to bludgeon one another into agreements by complaints and punishment. They sneered, cried, and frowned at one another. Their voices were tense, cold, impatient, whining. They made rude gestures, pointed, jabbed, and threw up their hands in disgust, or they simply ignored one another. As soon as one partner resorted to these tactics, the other began to respond in the same way, leading to an escalation of reciprocal aversiveness. As an old song goes: “You've got to ac-cen-tu-ate the positive/E-li-mi-nate the negative/Latch on to the affirmative/Don't mess with Mr. In-Between.”

Byrne (1971) contends that companionate love and liking are the most important rewards/costs involved in a relationship. What are the other “rewards” that men and women long for in their love relationships?
Hatfield and her students (Hatfield, Traupmann, Sprecher, Utne, & Hay, 1984) interviewed over 1000 dating couples, 100 newlyweds, and 400 elderly women, asking them to note the rewards (or lack thereof) they found to be most critical in their relationships. Their answers, which are shown in Table 2, were surprisingly similar:

| Insert Table 2 about here |

Not surprisingly, couples loved and liked their partners far more when they provided abundant rewards than when they did not. In fact, researchers have often found that the reward value of a relationship is the most important predictor of dating and marital satisfaction and sexual health (see Cate, Loyd, & Henton, 1985; Martin, 1985, for a review of this research.)

**B. Intimacy and Sexual Health**

The word intimacy is derived from *intimus*, the Latin term for “inner” or “inmost.” Perlman and Fehr (1987) argue that intimate relationships involve affection and warmth, self-disclosure, and closeness and interdependence. Helgeson, Shaver, and Dyer (1987) asked college men and women to tell them about times when they felt most intimate with (or most distant from) someone they cared about. For most people, intimate relations were associated with feelings of affection and warmth, with happiness and contentment, with talking about personal things, and sharing pleasurable activities. And what sorts of things put an impenetrable wall between couples? Distant relationships were
associated with anger, resentment, and sadness as well as criticism, insensitivity, and inattention.

Men and women seemed to mean something slightly different by “intimacy.” Women tended to focus primarily on love and affection and the expression of warm feelings when reliving their most intimate moments. They rarely mentioned sex. For men, a key feature of intimacy was sex and physical closeness.

According to social psychologists, three factors—affection, trust, and self-disclosure—contribute to feelings of intimacy.

**Love and affection.** Men and women generally feel more love and affection for their intimates than for anyone else. When people know they are loved and liked, they naturally become more willing to risk exposing their ideas and feelings (Gottman, 1979; Hatfield & Rapson, 1993).

**Trust.** People seldom risk exposing their dreams or fears to people unless they know it is safe to do so. Sometimes, all it takes is one bad experience to make intimates withdraw.

**Self-disclosure.** Jourard (1979) contended that caring and trust may be the soil in which self-disclosure thrives, but self-disclosure, in turn, nourishes love, liking, caring, trust and understanding (see also Derlega, 1993.)

1. **Why People Seek Intimacy**

When scientists ask men and women what they most desire in life, they generally mention a close, intimate, relationship (Berscheid & Peplau, 1983).
People may long for intimacy in and of itself, but intimate relationships also possess some side benefits:

a. **Intimacy and psychological well-being**

Research documents that intimacy and psychological health go hand-in-hand: Intimate relationships foster creativity, productivity, and emotional integration. Intimacy is associated with happiness, contentment, and a sense of well-being (Hatfield & Rapson, 1993.) McAdams and Vaillant (1982) interviewed single and married men when they were 30 years old and then again when they were 47. They found that those men who valued intimacy when they were 30 had the happiest and most stable marriages two decades later.

c. **Intimacy and physical well-being**

A number of medical researchers have confirmed that intimacy and physical wellbeing are connected. Intimate relationships apparently buffer the impact of stress (Miller & Lefcourt, 1982; Jemmott & Magloire, 1988). If people have a chance to disclose emotionally upsetting material to someone who seems to care, they exhibit improved mental and physical health in follow-up physical examinations (Pennebaker, 1990.)

d. **Intimacy and sexual health**

Intimate communication contributes to a healthy and fully satisfying sexual relationship. The ability to talk about sex with one’s partner—to discuss sexual desires, preferences, fears, and standards—promotes sexual satisfaction. Conversely, couples who have difficulty communicating are more likely to experience sexual problems (Metts & Cupach, 1991).
2. Gender Differences in Intimacy

Researchers have observed that there is sometimes a gap between men and women’s ideas as to what constitutes “intimacy”. Rubin and his colleagues (1980), for example, asked dating couples via the Jourard Self-Disclosure Questionnaire how much they had revealed to their steady dates. Did they talk about their current relationships? Previous affairs? Their feelings about their parents and friends? Their self-concepts and life views? their attitudes and interests? Their day-to-day activities? Overall, men and women did not differ in how much they were willing to confide to their romantic partners. They did differ, however, in the kinds of things they shared. Men found it easy to talk about politics; women found it easy to talk about people. Men found it easy to talk about their strengths; women found it easy to talk about their own fears and weaknesses. Interestingly enough, traditional men and women were most likely to limit themselves to stereotyped patterns of communication. More modern men and women were more relaxed about discussing all sorts of intimate matters—politics, friends, their strengths and their weaknesses.

Huston interviewed 130 married couples at the University of Texas (Goleman, 1986). He found that, for the wives, intimacy meant talking things over. The husbands, by and large, were more interested in action. They thought that if they did things (took out the garbage, for instance) and if they engaged in some joint activities, that should be enough. Huston found that during courtship men were willing to spend a great deal of time in intimate conversation. But after
marriage, as time went on, they reduced the time for close marital conversation while devoting increasingly greater time to work or hanging around with their own friends. Huston observed:

Men put on a big show of interest when they are courting, but after the marriage their actual level of interest in the partner often does not seem as great as you would think, judging from the courtship. The intimacy of courtship is instrumental for the men, a way to capture the woman's interest. But that sort of intimacy is not natural for many men (p. Y19).

Women have also been found to be more likely than men to view romantic love, emotional intimacy, and commitment as prerequisites for sexual activity and to be more censorious of casual sex (Baumeister & Tice, 2001; Regan & Berscheid, 1999). In one study, Clark and Hatfield (1989) attempted to assess how receptive college men and women would be to a stranger's sexual importunings. College men and women, who varied from slightly unattractive to moderately attractive in appearance, agreed to serve as experimenters. They strolled across the quadrangle at Florida State University. As soon as they encountered attractive men and women of the opposite sex, they approached them and said: “I have been noticing you around campus and I find you to be very attractive.” Then they asked them one of three questions: (1) “Would you go out with me tonight?” (2) “Would you come over to my apartment tonight?” or (3) “Would you go to bed with me tonight?” To the authors’ surprise, they found it was surprisingly easy for men and women to get a date even with a complete
stranger. As you can see from Table 3, more than half the men and women agreed to go out on a date! Another surprise in this day of AIDS was the fact that men were generally willing to have sexual relations with practically any woman who asked. Men readily accepted sexual invitations (75% agreed to go to bed with the women). Women were totally unwilling to go to bed with a stranger (0% agreed to do so). In general, men were intrigued by the sexual invitation. They made comments such as, “Why do we have to wait until tonight?” Often the men who said “no” were apologetic. They said, “I'm married” or “I'm going with someone.” In contrast, the women were stunned and angry at such invitations: “You've got to be kidding” or “What's wrong with you, creep, leave me alone.”

C. Commitment and Sexual Health

In their classic text, Thibaut and Kelley (1959) pointed out that one can like or love someone without feeling committed to them. A college beauty may like a fellow and delight in his company, but not want to marry him. The battered wife may hate her brutal husband and be totally miserable but be afraid to leave. She may fear that she and the children would suffer from loneliness, poverty, and further physical abuse if she abandoned the relationship.

Social psychologists have found that several factors determine how committed men and women are to a dating relationship or marriage. Levinger (1979) proposed that three kinds of forces influence cohesiveness:
attractiveness of the relationship, the attractiveness of alternative attractions, and any existing barriers against leaving the relationship. More recently, Rusbult, Martz, and Agnew (1998) has argued that the more satisfied couples are, the more time and effort they have invested in their dating relationships or marriages, and the fewer alternatives they see to staying in their present relationships, the harder they will work to keep their relationships going. It is paradoxical that when relationships are fraught, men and women will continue to “throw good money after bad” in the hopes that in the end they will finally reap their due. In truth, the best predictor of the future is the past and the relationship that is exploitative at Time #1 is likely to continue to be so throughout its dismal tenure. Yet, it is hard for people to accept that fact.

V. Equity and Sexual Health

Theorists point out that couples must be careful to ensure that their partners feel loved, rewarded, and fairly treated. Otherwise, their love relationships will suffer and possibly dissolve. As Patterson (1971) observed:

There is an odd kind of equity which holds when people interact with each other. In effect, we get what we give, both in amount and in kind. Each of us seems to have his own bookkeeping system for love, and for pain. Over time, the books are balanced (p. 26).

Let us begin by reviewing Equity theory and then proceed to discuss some research findings.

A. Equity Theory
Equity theory is a simple theory. Essentially, the equity argument goes as follows: People may be motivated by self-interest, but they soon learn that the best way to survive is by following social rules—or at least to appear to be doing so. Thus men and women all-in-all, will feel most comfortable when they are getting roughly what they deserve from their relationships—no more and certainly no less. If men and women exploit their mates, or allow themselves to be exploited, they will experience distress (see Hatfield, Walster, & Berscheid, 1986.)

Researchers have devised a simple scale for measuring how equitable men and women believe their relationships are. (Technically, an equitable relationship is said to exist if both partners are doing equally well in the marital give and take.) How equitable couples perceive their relationships to be is assessed by asking them:

Considering what you put into your dating relationship (or marriage) compared to what you get out of it . . . and what your partner puts in compared to what he or she gets out of it, how does your dating relationship (marriage) “stack up?”

+3: I am getting a much better deal than my partner.
+2: I am getting a somewhat better deal.
+1: I am getting a slightly better deal.
0: We are both getting an equally good or bad deal.
-1: My partner is getting a slightly better deal.
-2: My partner is getting a somewhat better deal.
-3: My partner is getting a much better deal than I am.
On the basis of their answers, persons are classified as over-benefited (receiving more than they deserve), equitably treated (the ideal), or under-benefited (receiving less than they deserve.)

**B. Equity and Sexual Health**

Men and women’s perceptions of the fairness and equitability of their relationships have been found to be an important determinant of whom they chose for a sexual encounter, how adventurous and satisfying their sexual relationships are, and how likely those relationships are to endure (Hatfield, Walster, & Berscheid, 1986.) Specifically, researchers find that:

1. The more socially desirable people are—i.e., the more physically attractive, personable, famous, rich, considerate they are—the more socially desirable they will expect an “appropriate” mate to be.

2. Dating couples are more likely to fall in love if they perceive their relationships to be equitable—that is, if they feel they and their partners are receiving approximately what they deserve—neither appreciably more nor (certainly) no less than they deserve. They seem to care about “fairness” and “equity” in the personal, emotional, and day-to-day rewards involved in a relationship as well as the rewards one reaps from simply being in a relationship.

3. Couples are likely to be romantically matched on the basis of self-esteem, looks, intelligence, education, and mental and physical health (or disability).

4. Couples who perceive their relationships to be fair and equitable are more likely to get involved sexually. When asked about the sexual intimacy of
their relationships—were they “necking, petting, engaging in genital play, intercourse, cunnilingus and fellatio?”—couples in equitable romantic relationships tend to be more sexually involved. In one study, it was found that couples in equitable relationships were generally having sexual relations; couples in inequitable relationships tended to stop before “going all the way.”

Couples were also asked why they’d made love. Those in equitable affairs were most likely to say that both of them wanted to have sex. Couples in inequitable relationships were less likely to claim that sex had been a mutual decision; many felt pressured into having sexual relations in order to keep the relationship alive.

Perhaps it is not surprising then to discover that dating and married couples had more satisfying sexual lives if they were in equitable relationships than if they were not (See Byers & Wang, 2004; Canary & Stafford, 2001; Hatfield, et al., 1986; Vohs, Catanese, & Baumeister, 2004; for a summary of this research.) For a critique of Equity research, see Mills and Clark (2004).

VI. Passionate and Companionate Love: How Long Do They Last?

When individuals are dizzyingly, wildly in love, they are convinced that their passionate feelings will last forever. Yet, when we take an unflinching look at the many dismal marriages around us, it becomes clear that passion is generally fleeting. Klinger (1977) warned that “highs are always transitory. People experience deliriously happy moments that quickly fade and all attempts to hang on to them are doomed to fail” (p. 116). Solomon (1980) observed that passionate love follows the same pattern as any addiction. At first, passionate
love produces giddy euphoria. In time, however, it takes more and more love (or cocaine, alcohol, and so forth) to produce even a weak high. Eventually, highs become transitory. If one loses love (or if one goes “cold turkey” on a drug), one must endure the pains of withdrawal—depression, agitation, fatigue, anger, and loneliness. Marriage and family texts also warn that romantic love is temporary. Passion frequently wanes once the couple moves in together. Reik (1972) warned that the best a couple, once intensely in love, can hope for after several years of living together is a warm “afterglow.”

There is indeed evidence that passionate love does erode with time. Hatfield and her colleagues (Traupmann & Hatfield, 1981) interviewed dating couples, newlyweds, and older women who had been married an average of 33 years. (The longest marriage was 59 years.) The authors predicted that passionate love would decline precipitously with time but that companionate love would hold its own or even increase. They authors were only partially right. Over time, passionate love did seem to plummet. Couples started out loving their partners intensely. Both steady daters and newlyweds expressed “a great deal of passionate love” for their mates. But after many years of marriage, women reported that they and their husbands now felt only “some” passionate love for one another.

Insert Figure 1 about here
And what of the fate of companionate love? Theorists generally paint a rosy picture of such love. Sternberg (cited in Goleman, 1985) for example, proposed that although passion draws men and women to one another, it soon begins to fade. “Passion is the quickest to develop, and the quickest to fade (p. 13),” he observed. After a while, what matters most is companionate love—which is comprised of commitment and intimacy. It takes longer for couples to feel fully committed to their marriages and to become intimate with one another, but in love, these were the things that seemed to last, he observes. Alas, in Hatfield and her colleagues’ study, they found that over time, both passionate and companionate love tended to decline.

This finding was especially unsettling since the authors are only interviewing couples whose marriages survived for 10, 20, or 50 years! Couples whose relationships were most dismal, may well have divorced and thus been lost from the sample!

Nonetheless, in spite of the discouraging data, things are not quite so dismal as the data make it seem. We are all aware that some marriages “beat the odds”—remaining passionate, intimate, and committed for a half-century or more. It is these lucky relationships that are likely to remain emotionally and sexually vibrant over time.

VII. Critical Review of Existing Literature
When Ellen Berscheid and Elaine Hatfield (1969) were writing *Interpersonal Attraction*, they discovered that almost no research existed on passionate love. We had speculated about the nature of love with little or no data, and precious little experience of our own, to guide us.

Now scientists know more.

What a change has occurred in 35+ years! Today, scholars from a variety of theoretical disciplines—social psychologists, anthropologists, evolutionary psychologists, neuroendrocinologists—are addressing an array of questions concerning passionate love, sexual desire, and sexual behavior. They are employing an impressive arsenal of new techniques as well: they are studying primates in the wild and in captivity, and they are pouring over fMRIs. Historians are now studying history from the “bottom up” rather than the “top down”—studying the lives not only of kings and queens, but of the other 99.9% of humanity, utilizing demographic data (marriage, birth, divorce, and death records, architecture, medical manuals, church edicts, legal data, songs, paintings, diaries, court cases . . .

In the very near future, we suspect that relationship researchers will be well on the way to answering some of the most basic questions that have plagued scholars for centuries:

• Is passionate love, in fact, a cultural universal? If so, how do changing societal norms mediate the passion?

• How early in our evolutionary heritage did passionate love begin?

• Why are people in the throes of love so powerfully obsessed, unable to think of very much else? Why are their feelings so tumultuous—traveling from elation to blackest despair in a matter of seconds? Why are they willing to take such stunning risks for love?

• Do men and women love with equal passion? In the same way? Are any existing differences—cultural or genetic? If there is a cultural dimension, will time diminish these differences?

• Are passionate love and sexual desire the same thing? Kissing cousins, so to speak? Or are they significantly different constructs?

• Are there some people who never love? Who are love blind? Or are they just unaware of their feelings?

• How long can passionate love last? How long can companionate love last?

Today’s multidisciplinary relationship research is truly revolutionary and the information scholars are securing at this moment is indeed provocative. And we are only at the beginning!

IX. In Conclusion

Passionate love is a powerful emotion—so potent that it generates a jumble of other emotions: euphoric joy, fierce anxiety, episodes of despair alternating with exultant hope. Such love has, historically, been the stuff of poetry and legend. In real life, in the West, most religious and political authorities have feared its awesome force and its celebration of individual
feeling over communal order. No surprise then that for thousands of years authorities have struggled to suppress it. What is more “subversive” than the freedom to satisfy personal desire?

Everywhere throughout the centuries (the chief exception being Western culture and then only recently,) religious and secular rulers have exacted terrifying penalties for the expression of passion (even marital passion), declaring it forbidden, sinful, and punishable in quite draconian ways. Such love has had little place to go except to disaster, disgrace, and death—especially for women. Authorities have feared its awesome force and its celebration of individual feeling over communal order.

But no longer. With notable exceptions, primarily in societies where fundamentalist religion dominates, the world has witnessed remarkable changes. Throughout much of the world, globalization, the woman’s movement, increasing modernization, urbanization, the expansion of democracy, the growth of global communication, and a rising affluence have combined to alter notions of private freedoms. These global transformations have produced more positive views of passionate love and sexual desire, of love matches (as opposed to arranged marriages), of gender and sexual equality, and of an increased acceptance of the notion that men and women are entitled to passion, intimacy, satisfying romance, and pleasurable sex in their lives. In their close companionate relationships, men and women are increasingly coming to expect that their relationships will be marked by love,
trust, intimacy, and commitment, and joy (see Harvey & Wenzel, 2002; Harvey, Wenzel, & Sprecher, 2004.)

While globalization is hardly an unmixed blessing, it is not an unmitigated disaster (as some claim), either. Increasingly, societies worldwide are rejecting the notion that passionate love and sexual desire—especially in women—are evil and ought to be punished. (Again, see Hatfield & Rapson, 1993; 1996 for a review of this evidence.) In this, the 21st century, we are likely to see a growing emphasis on the value of men's and women's sexual delight and satisfaction, and a conviction that sexual problems and dysfunctions are something to be cured, not patiently borne. Whether this liberation is to be applauded or seen as an invitation to license, immorality, and disorder, these developments almost certainly will afford endless and rich opportunities and challenges for today’s teachers, sex therapists, and researchers.

IX. References


Francoeur, R. T. (April 15-18, 2004.) Female orgasm, social repression and religion: What we know about the incidence of female orgasm around the world and why it may not be as common as we think. Presentation at the Society for the Scientific Study of Sexuality Western Region Conference, San Diego.


Tavris, C. (1993). *The mismeasure of woman: Why women are not the better sex, the inferior sex, or the opposite sex.* New York: Simon & Schuster.


Table 1
The Passionate Love Scale

We would like to know how you feel (or once felt) about the person you love, or have loved, most **passionately**. Some common terms for passionate love are romantic love, infatuation, love sickness, or obsessive love.

Please think of the person whom you love most passionately **right now**. If you are not in love, please think of the last person you loved. If you have never been in love, think of the person you came closest to caring for in that way.

Try to describe the way you felt when your feelings were most intense. Answers range from (1) **Not at all true** to (9) **Definitely true**.

Whom are you thinking of?

- Someone I love **right now**.
- Someone I **once** loved.
- I have never been in love.

<table>
<thead>
<tr>
<th>True</th>
<th>Not True</th>
<th>Definitely True</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would feel deep despair if _____ left me.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>Sometimes I feel I can't control my thoughts; they are obsessively on _____.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I feel happy when I am doing something to make _____ happy.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I would rather be with _____ than anyone else.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I'd get jealous if I thought _____ were falling in love with someone else.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I yearn to know all about _____.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I want _____ physically, emotionally, mentally.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
<tr>
<td>I have an endless appetite for affection from _____.</td>
<td>1 2 3 4 5 6 7 8 9</td>
<td></td>
</tr>
</tbody>
</table>
For me, _____ is the perfect romantic partner. 

1 2 3 4 5 6 7 8 9

I sense my body responding when _____ touches me. 

1 2 3 4 5 6 7 8 9

_____ always seems to be on my mind. 

1 2 3 4 5 6 7 8 9

I want _____ to know me—my thoughts, my fears, and my hopes. 

1 2 3 4 5 6 7 8 9

I eagerly look for signs indicating _____’s desire for me. 

1 2 3 4 5 6 7 8 9

I possess a powerful attraction for ______. 

1 2 3 4 5 6 7 8 9

I get extremely depressed when things don't go right in my relationship with ______. 

1 2 3 4 5 6 7 8 9

Total: _______

Results:

• 106-135 points = Wildly, evenrecklessly, in love.
• 86-105 points = Passionate, but less intense.
• 66-85 points = Occasional bursts of passion.
• 45-65 points = Tepid, infrequent passion.
• 15-44 points = The thrill is gone.
Table 2

Participants’ Perceptions of Equity/Inequity

Introduction: Explanation of Concepts

“We’re interested in the give-and-take that goes on in marriage. We’d like to ask you a few questions about the things you put into your marriage . . . and the kinds of things you get back out of it.

Now we know that most people don’t ordinarily keep careful track of exactly what they’re giving and getting from their marriages. They certainly don’t pull their relationship apart and think about the various aspects of their marriage, one by one. But in order for us to get some idea of what goes on in marital relationships, we have to ask you and the other people we’re interviewing to spell out some of the give-and-take that naturally occurs.

Now we’ll look at some of the critical areas in any marriage. Look over this list. (Hand respondent list.) The underlined headings give you a sense of the ground we will cover. We’d like to ask about you and your partner’s Personal Concerns, your Emotional Concerns, your Day-to-Day Concerns, and a little about the things the two of you feel you gain or lose—simply by being married. We’d like you to read each item.”

(Each item is read through, aloud if interviewer is used. After reading each item, Respondent is asked:

Considering what you put into your dating relationship (or marriage) in this area, compared to what you get out of it . . . and what your partner puts
in compared to what he or she gets out of it, how does your dating relationship (marriage) “stack up?”

+3: I am getting a much better deal than my partner.
+2: I am getting a somewhat better deal.
+1: I am getting a slightly better deal.
0: We are both getting an equally good or bad deal.
-1: My partner is getting a slightly better deal.
-2: My partner is getting a somewhat better deal.
-3: My partner is getting a much better deal than I am.

Areas Involved in the Marital Give and Take

Personal Concerns

Social Grace

1. Social Grace: Some people are sociable, friendly, relaxed in social settings. Others are not.

Intellect

2. Intelligence: Some people are intelligent and informed.

Appearance

3. Physical Attractiveness: Some people are physically attractive.

4. Concern for Physical Appearance and Health: Some people take care of their physical appearance and conditioning, through attention to such things as their clothing, cleanliness, exercise, and good eating habits.

Emotional Concerns

Liking and Loving

5. Liking: Some people like their partners and show it. Others do not.

6. Love: Some people feel and express love for their partners.

Understanding and Concern

7. Understanding and Concern: Some people know their partner's personal concerns and emotional needs and respond to them.
Acceptance

8. Accepting and Encouraging Role Flexibility: Some people let their partners try out different roles occasionally, for example, letting their partner be a “baby” sometimes, a “mother,” a colleague or a friend, an aggressive as well as a passive lover, and so on.

Appreciation

9. Expressions of Appreciation: Some people openly show appreciation for their partner’s contributions to the relationship—they don’t take their partner for granted.

Physical Affection:

10. Showing Affection: Some people are openly affectionate—touching, hugging, kissing.

Sex

11. Sexual Pleasure: Some people participate in the sexual aspect of a relationship, working to make it mutually satisfying and fulfilling.

12. Sexual Fidelity: Some people live up to (are “faithful” to) their agreements about extra-marital relations.

Security/Freedom

13. Commitment: Some people commit themselves to their partners and to the future of their relationship together.

14. Respecting Partner’s Need to be a Free and Independent Person: Some people allow their partners to develop as an individual in the way that they choose: for example, they allow their partners freedom to go to school or not; to work at the kind of job or career they like; to pursue outside interests; to do things by themselves or with friends; to simply be alone sometimes.

Plans and Goals for the Future

15. Plans and Goals for the Future: Some people plan for and dream about their future together.

Day-to-Day Concerns
Day-to-Day Maintenance

16. Day-to-Day Maintenance: Some people contribute time and effort to household responsibilities such as grocery shopping, making dinner, cleaning, and car maintenance. Others do not.

Finances:

17. Finances: Some people contribute income to the couple’s “joint account.”

Sociability

18. Easy-to-Live-With: Some people are easy to live with on a day-to-day basis; that is, they have a sense of humor, aren’t too moody, don’t get drunk too often, and so on.

19. Companionship: Some people are good companions, who suggest interesting activities for both of them to do together, as well as going along with their partner’s ideas about what they might do for fun.

20. Conversation: Some people tell partners about their day’s events and what’s on their mind . . . and are also interested in hearing about their partners’ concerns and daily activities.

21. Fitting in: Some people are compatible with their partner’s friends and relatives; they like the friends and relatives, and the friends and relatives like them.

Decision Making:

22. Decision-Making: Some people take their fair share of the responsibility for making and carrying out of decisions that affect both partners.

Remembering Special Occasions

23. Remembering Special Occasions: Some people are thoughtful about sentimental things, such as remembering birthdays, your anniversary, and other special occasions.

Opportunities Gained and Lost

Opportunities Gained
24. Chance to be Married: Marriage gives many people the opportunity to partake of the many life experiences that depend upon being married; for example, the chance to become a parent and even a grandparent, the chance to be included in “married couple” social events, and finally, having someone to count on in old age.

Opportunities Foregone

25. Opportunities Foregone: Marriage necessarily requires people to give up certain opportunities . . . in order to be in this relationship. The opportunities could have been other possible mates, a career, travel, etc.

To calculate a Total Index, the experimenter sums the respondents’ estimates of how Over-benefited, Equitably treated, or Under-benefited they are in each of the 25 areas.
### Table 3
Percentage of Compliance With Each Type of Request

<table>
<thead>
<tr>
<th>Sex of Person Making Request</th>
<th>Type of Request</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Date</td>
</tr>
<tr>
<td>Man/Woman's Response</td>
<td>56%</td>
</tr>
<tr>
<td>Woman/Man's Response</td>
<td>50%</td>
</tr>
</tbody>
</table>

In spite of the AIDS crisis, similar results have been found in later studies (Clark, 1990).


"Sexual health and wellbeing among older men and women in England" is the first piece of research of its kind to include people over the age of 80. Older people are continuing to enjoy active sex lives well into their seventies and eighties, according to new research from The University of Manchester and NatCen Social Research. To find out more about maintaining a healthy sex life, including advice on sex and relationships and information about sexual health, people can visit the Age UK website www.ageuk.org.uk. People can also contact their GP with any sexual health questions or concerns. Contact us. +44 (0) 161 306 6000. A WHO working definition for sexual health is that it "is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of Learn how to achieve a healthy sexual relationship with your partner, including how to protect yourself from STDs, birth control options, and how to deal with sexual dysfunction problems such as impotence or inability to achieve orgasm. Take the Sex & Love Quiz to challenge yourself on healthy human sexuality! Read more about Sex & Love Quiz: Test Your Relationship IQ ». STDs in Women. Learn and become aware of common STDs in women, including descriptions, symptoms, diagnosis, and treatments of each type of infection.