

The effect of sex education on sexual satisfaction increase of couples' in EsfahanFatemeh Sehat¹-Narges Sehat²- Marzieh Shahsiah³- Siamak mohebi⁴-Yaser Tabaraie^{*5}¹ MA counseling, Qom Islamic Azad University, Qom , Iran.² MA counseling, Qom Payame Noor University, Qom, Iran.³ Family counseling, Qom University of Medical Sciences, Qom, Iran⁴ Faculty members of Qom University of Medical Sciences, Qom, Iran.^{5*} Faculty members of Sabzevar University of Medical Sciences, sabzevar, Iran.*Corresponding Author: yasertabarraie@yahoo.com

Abstract: The purpose of this research was to study the effect of sex education on sexual satisfaction increase of couples in Esfahan. The research hypothesis was “Sex education of couples was effective on sexual satisfaction.” The research method was semi-experimental with pretest, posttest and control group. The statistical populations were couples referring to cultural centers in Esfahan in 2011. The sample was 30 couples selected through systemized random sampling and allocated into two groups of experimental and control. The experimental group had 6 educational sessions but not the control one. The research measure was the researcher-made sexual satisfaction questionnaire. The results, with covariance analysis, showed that sex education is effective on sexual satisfaction improvement ($p < 0/001$). [Fatemeh Sehat, Narges Sehat, Marzieh Shahsiah, Siamak mohebi, Yaser Tabaraie. **The effect of sex education on sexual satisfaction increase of couples' in Esfahan.** *Life Sci J* 2013;10(5s):31-35] (ISSN:1097-8135). <http://www.lifesciencesite.com>. 5

Key words: Sex education, sexual satisfaction, couples**Introduction**

In the family system and in marriage, sexual satisfaction is allowed and necessary. It allows the men and women to satisfy this instinct through marriage which makes them secure from conflicts and complexes lead to diseases and psychological disorders and guarantee the individuals and the society health. In biological needs, sexual instinct is mixed deeply with psychological needs so that we can observe its effect on different dimensions of life. This instinct has an undeniable impact on marital life and its stability. It has a constructive, important and fundamental role in health and psychological balance. It is because of obvious and considerable characteristics that sexual desire is away from other biological needs and becomes a spiritual and psychological need (1). Sex satisfaction refers to the human pleasant feelings of sexual relationship. Sex satisfaction increases, the quality of marital life rises too and marital instability decrease during life. Sexual satisfaction is important for most of the couples and it is personal issue. Couples sexual relationships are a Human's survival. Two-way communication process of sexual partners, that any disorder that can occur to the underlying problems and the family is shaken by the center. One important motivation is sexual marriage and divorce and family trauma also causes one is effective. And sexual behavior such as eating and drinking part of the needs of all people living and a way of life requires a healthy joint and survivor is his generation.

The concept of marital sexual satisfaction is divided in two parts. 1- Satisfaction in sexual activities. 2- Emotional and affective satisfaction. Researchers believe that supportive relations has a direct relationship with sexual satisfaction and also other factors like empathy, physical attraction and love are related to it (5,6). According to Hyde and Delamater (2000), sexual satisfaction means satisfaction in sexual activity and emotional satisfaction (7). Sexual satisfaction is not just physical pleasure but consists of all remaining feelings after positive and negative aspects of sexual relationship (8). Sexual satisfaction includes man's satisfaction from sexual activities to orgasm (9). Marital sexual satisfaction takes place in two ways:

1- Satisfaction with sexual activities.

2- Affective and emotional satisfaction (7).

A large number of researches show that sexual satisfaction anticipators in marriage are divided in 3 groups. The first group is relationship variables that contain emotional part of sexual satisfaction. The second group is physiological features of sexual relationship that includes satisfactory sings of sexual activities. The last one involves sexual satisfaction anticipators in individual characteristics and cognitive intimacy. The existence of problems in sexual activities such as loss of Desire, premature ejaculation, sexual unable and soon are hidden and may not be explored of because of fear, anxiety, shame, insufficiency feeling and sin. These secret problems may be changed to other symptoms such as physical problems, depression and marital life

dissatisfaction and set to continue to severe family conflict and divorce (11). Sexual education or marital counseling is the way in sexual disorders therapy in which men's knowledge in sexual desires, attitudes and cultural values increase, it also improves and promotes effective relations in sexual issues (12). Today there are clinics and medical centers in some developed countries where sexual problems are cared and they pay attention to family disorders. Noticeably, the studies done in these clinics indicate that the prevalence of sexual disorders such as sexual aversion or controlled sexual desire, sexual pain disorder, painful intercourse were about %18 to %79. Statistic show that %50 of couples had experienced sexual disorders in their marital life but some of them have consulted. Through education, counseling and necessary information in physiology of sexual response in human, the problems decrease gradual, unawareness is being changed to awareness. And successful and effective steps are taken for sexual problems and marital conflicts (13). Sexual need is one of the basic needs in couples for marriage. Sexual education has a effective role in sexual relationship (14). Since sexual relationship is very important in our lives and it is effective on family health, also the importance of sex education in preventing sexual disorders and diseases, this research is an attempt to offer couples a useful sex sexual satisfaction.

Sexual issues in marital life can be explained for two reasons:

- 1- Couples become familiar with natural relationship, using pleasurable methods ,family

planning and learning healthy and appropriate intercourse

- 2- Couples become familiar with psychosexual disorders which may be presented.

Research method

The research method was semi-experimental with pretest, post test and control group. Both groups completed pretest. Then, couples in experimental group attended in sex education sessions and answered posttest. Independent variable was sex education and dependent variable was sex satisfaction rate. Statistical populations were all couples referring to family cultural centers in Esfahan in 2008. They also had the following criteria:

- Lack of acute conflicts or not divorcing
- Lack of acute disorders of psychological and personality
- Lack of previous presence in sex education or life skills classes
- Having at least one year of joint life
- Having at least guidance school license

To choose the sample, first education classes and registration criteria were announced to the clients. 30 couples were randomly selected among the couples and they had an introductory interview in order to be familiar with them and allocated into two groups of experimental and control. The experimental group had six 90-min education sessions. Sex education was presented step by step through assignments and systematic exercises by the counselor and in separate classes for men and women. Its format is in the following.

| sessions | titles |
|-----------|---|
| session 1 | making relationship, explaining purposes and the importance of marital relationship , sex education and couples' relationship |
| session 2 | familiarity with sexual physiology and behavior |
| session 3 | correcting incorrect beliefs about sexual issues |
| session 4 | how to make sexual intimacy |
| session 5 | instructing correct techniques of sexual relationship |
| session 6 | familiarity with prevalent sexual disorders |

Since there is not any valid questionnaire about sexual intimacy in our country, the researcher has made a related questionnaire by the study of scientific resources. First, its draft was prepared with 30 statements. Each one contains 4 items (always, sometimes, rarely, never) from 0 to 3 scores. 17 statements were scoring directly and 13 reversely. Maximum score was 90 and the minimum was 0. The scores near the maximum show higher sexual satisfaction and vice versa. Its validity was done in 2008 by the researcher. To determine the content and

face validity, the questionnaire was studied by 5 counseling and psychology professors and then was approved. Afterward, the questionnaire was conducted on 106 couples selected randomly. To assess the reliability, Cronbach alpha was used and it was acceptable. The calculation of reliability, with the omission of one by one question, revealed that it does not have any effect on reliability coefficient.

Table 1. Cronbach alpha of sexual satisfaction

| | |
|----------------|---------------------|
| | sexual satisfaction |
| Cronbach alpha | 0/83 |

Research findings

Covariance analysis was used to test the research hypotheses. Here, posttest means were compared after the modification of pretest scores. To use this method, Levin test was calculated to study the equality assumption of variances.

Table 2: The results of Levin test for... Sexual satisfaction variance

| Levin test | F | Sig. |
|---------------------|-------|-------|
| Sexual satisfaction | 0/824 | 0/486 |

Observed F in Levin test does not show significant differences for sexual satisfaction ($F=0/824$) in level ($p>0/05$), therefore, the assumption of variance equality has been accepted and to analyze the data, covariance analysis can be used (concerning the sample and equality of two groups, this assumption does not influence on the calculation of covariance analysis.).

Hypothesis 1: Sex education is effective on couples' sexual satisfaction.

As it is seen in table 3, the study of mean in two groups reveal that the mean of experimental group has been increased in compared to posttest and control group which shows the effect of sex education on couples. As table 4 shows the difference between two groups in posttest is significant ($p<0/001$, $F=151/599$). The sexual satisfaction of posttest is controlled in this table. Therefore, it can be concluded that sex education is effective on sexual satisfaction. The first hypothesis is approved "Sex education is influenced on sexual satisfaction."

Discussion and Conclusion

Here the discussion about sexual satisfaction is presented. The sexual satisfaction score in experimental group was 41/2 and in control one was 42/76 before the educational intervention and it does not show any significant differences among the mean scores of sexual satisfaction in two groups and both groups are in the same condition. The score mean of sexual satisfaction before the intervention indicated that sexual satisfaction was in average level. The score mean of sexual satisfaction in experimental group reached to 54/66 after the intervention and it was not seen such differences in control group but it was an appropriate increase in sexual satisfaction in experimental group. The covariance analysis showed the significant differences between sexual satisfaction scores in experimental group after the intervention ($F=151/59$, $p<0/001$). Since the effect of pretest was

controlled in this research, the increase of sexual satisfaction in experimental group from 42/2 to 55/73 was due to this educational intervention. With the study of score difference of sexual satisfaction before and after the educational intervention in two groups, we can observe that this score difference in experimental group was 13/42 and in control one was zero. Thus, sexual satisfaction is one of important dimensions of couples' marital quality. This education is effective in improvement and development of couples' marital quality and sexual satisfaction. This research agreed with Henderson-King and Veroff (1994) who claimed that there is a relationship between couples' sexual relationship in their first year of life and marital health and sexual satisfaction was equally important for both sexes (15). Rahimi and Shams (2007) in their research named important factors in couples' sexual relationships improvement showed that there is a meaningful relationship between with sexual relationships suitable verbal and marital relationship and happy feeling and age increase, life time period, number of children, marital relationships were faded and women's sexual satisfaction feeling is decreased which agree with our research (16). Khoei (1999) did a research on 525 employed women and showed that most of women are satisfied with their sexual relationships and only %36.3 were not satisfied which agrees with our research. It seems that sexual satisfaction depends on various factors such as age, the lower the marriage time period, the higher sexual satisfaction (17). Therefore Christopher and Sprecher (2000) showed the relationship between age and sexual satisfaction. In their research %60 of men were satisfied with sexual satisfaction in experimental and control groups (18). Dunn's research in America showed that the prevalence of sexual dissatisfaction in men %21 and men's instinct to sexual relationship and their sexual satisfaction decreases with age increase which also agrees with our research (19). Based on education intervention in experimental group in post test showed that marital counseling is important in sexual satisfaction increase and this result with Pakghohar etal (2005) indicated that pre marriage counseling in sex increases sexual satisfaction and marriage satisfaction as a whole (20). Cooper and Stoltenberg (1987) compared sexual improvement program and relationship education on marital and sexual satisfaction. Couples in experimental group attended in weekly 2 sessions for one month. There was a control group. All groups were assessed after education and 3 month after the last session. Covariance analysis showed couples who attended in sexual relationship program had sexual pleasure in their relationship. Also, they feel more affect and kindness and they had more

improved marital satisfaction (23). Binikarom and Abrahamson (1992) claimed that sex education is effective on healthy behavior. It can increase people's understanding of sex (2). In his researches Santrock (1997) discussed that if we offer sex education at a suitable time, we can control undesirable sexual motives, create healthy sexual behavior, decrease sexual problems and prevent sexual transmitted disease (23).

| gender | pre | | test | | post | |
|---------|--------|--------------------|-------|--------------------|-------|--------------------|
| | mean | standard deviation | mean | standard deviation | mean | standard deviation |
| female | 41/06 | 7/70 | 53/60 | 4/9 | 53/60 | 4/9 |
| male | 41/33 | 8/11 | 55/73 | 5/1 | 55/73 | 5/1 |
| total | 41/20 | 7/77 | 54/66 | 5/1 | 54/66 | 5/1 |
| control | female | 40/80 | 10/50 | 40/93 | 10/2 | 40/93 |
| | male | 44/73 | 8/94 | 44/60 | 8/6 | 44/60 |
| | total | 42/76 | 9/79 | 42/76 | 9/4 | 42/76 |

Table 4: The results of covariance analysis of residual scores of sexual satisfaction in posttest

| resource | dependent variable (sexual satisfaction) | sum of squares | freedom degree | mean of squares | F | sig. | Etta coefficient |
|----------|--|----------------|----------------|-----------------|--------|-------|------------------|
| group | posttest | 2617/61 | 1 | 2617/61 | 151/59 | 0/000 | 0/75 |
| error | posttest | 846/66 | 49 | 17/67 | | | |
| total | posttest | 14789/00 | 60 | | | | |

Baron and Byrne (2004) came to the point that sex education and marital counseling play an important role in family health, sexual violence decrease, venereal disease prevention, positive attitude to sexual relationship, sexual pleasure, family maladjustment decrease and finally couple's sexual satisfaction (24). Sex education and marital counseling is a long process through which people can get necessary information about sex and form their attitudes, values and beliefs. Marital counseling is a process that helps healthy sexual development, marital health, interpersonal relationship, affect, closeness, body image and sex roles. Marital counseling plays attention to biological, cultural, social, psychological and religious dimensions too. It is related to cognitive (information and knowledge), affective (feelings, values and attitudes) and behavioral (relationship and decision skills) areas. Therefore, in this research, it seems that couple's sexual information and their attitudes to sex have been increased or improved by marital counseling. Since in our society today we have sexual problems, it is suggested to offer sex education and marital counseling before and during marriage which tends to sexual satisfaction and marital life quality increase.

Ethical Consideration

All Ethical issues (such as informed consent, conflict of interest, plagiarism, misconduct, co-authorship, double submission, etc) have been considered carefully.

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