

# Investigating the Relationship Between Religious Attitudes With Some Sexual Characteristics and Marital Satisfaction Among Women of Reproductive Age

Fatemeh Ghodrati,<sup>1</sup> Zahra Yazdanpanahi,<sup>2</sup> and Marzieh Akbarzadeh<sup>3,\*</sup>

<sup>1</sup>PhD, Department of Theology, Faculty of Humanities College, Yasouj University, Yasouj, Iran

<sup>2</sup>Community Based Psychiatric Care Research Center, Department of Midwifery, School of Nursing and Midwifery, Shiraz University of Medical Sciences, Shiraz, Iran

<sup>3</sup>Maternal-Fetal Medicine Research Center, Department of Midwifery, School of Nursing and Midwifery, Shiraz University of Medical Sciences, Shiraz, Iran

\*Corresponding author: Marzieh Akbarzadeh, Maternal-Fetal Medicine Research Center, Department of Midwifery, School of Nursing and Midwifery, Shiraz University of Medical Sciences, Shiraz, Iran, E-mail: akbarzadm@sums.ac.ir

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## Abstract

**Background:** Religious values and attitudes can be considered as a guideline for sexual relationship and gender related roles.

**Objectives:** The current study aimed at investigating the relationship between religious attitudes, and some sexual characteristics with marital satisfaction among females of reproductive age in 2014 - 2015.

**Methods:** The current descriptive-analytical study investigated the relationship between religious attitudes and some sexual characteristics, and marital satisfaction on 210 females of reproductive age. Firstly, cluster sampling was conducted. The sexual trait questionnaire and religious attitude scale, which contains 25 questions in 6 areas related to the religious attitudes, were distributed. Sexual trait questionnaire includes questions on pre-sex motivations, premature ejaculation, young couple's education, couples' intimate relationships, and finally couples' satisfaction. Chi-square test was applied to analyze the data, using SPSS software.

**Results:** The mean age of the study population was  $30.35 \pm 7.52$  years. According to the Chi-square result, there was a significant relationship between religious attitudes and pre-sex motivations ( $P = 0.001$ ), young couples' education ( $P = 0.005$ ), couples' intimate relationships ( $P = 0.002$ ), and couples' satisfaction ( $P \leq 0.001$ ). However, there was no significant association between early ejaculation and religious attitude ( $P = 0.11$ ).

**Conclusions:** The results revealed a significant relationship between religious attitudes and pre-sex motivation, sexuality, and sexual arousal. Therefore, education on sex-based issues and couples' intimate relationships, which leads to decreased premature ejaculation and more sexual satisfaction, seem to be necessary. The results of the current study showed a significant relationship between religious attitudes, sexuality and sexual arousal. Also, the need for sex education and emotional intimacy between male and female are necessary to reduce premature ejaculation and enhance sexual satisfaction.

**Keywords:** Religious Attitude, Satisfaction, Sexual Behavior

## 1. Background

Sexual health is an important aspect of personal hygiene that impacts the people's life at any age and stage (1). Sexual function is a part of human life and behavior. Therefore, it is mixed with human characteristics, which cannot be considered as an independent phenomenon (2). Sexual need is not only a human physiological need such as thirst, hunger, and the need for air and sleep, but it is also considered as an important spiritual need (3). According to the studies, there is a positive correlation between sexual satisfaction and marital commitment (4). Sexual health is considered as a challenge due to the impact of culture, religion, and personal values (5). The World Health Organization (WHO) and other international societies (6) suggest sexual health as an independent subject (separated from reproductive health), which contributes to most common

diseases and health related disorders (6, 7). Mate selection is an important decision in family and social life. Its importance requires more attention to the issues such as external factors including religion, social class, age, education, etc. as well as the underlying factors such as personality traits (8). These characteristics can be important elements in marital commitment, which is the basis of a healthy marriage (9). A study reported that people who are more committed and religious have a more purposeful and deep insight toward marriage (10). There is a serious commitment in marital relationships. Couples reported this commitment as a central factor in marriage success and sexual satisfaction (11). According to other studies, there is a positive relationship between the practice of religious belief and positive emotions such as happiness, good humor, kindness, confidence, respect, and peace (12). Another study showed the importance of religion on marital satis-

faction and adaptation (13). The results of another study supported the fact that religious differences among family members lead to many conflicts and dispute for the rest of marital life, which can reduce marital satisfaction (14). The study conducted on the Iranians living in Canada investigated the correlation between religiosity and mental health components such as satisfaction, happiness, and lack of depression. In fact, there was a significant positive correlation between religiosity and satisfaction. Moreover, there was a significant negative correlation between religiosity and depression. Religious experience and worship leads to an increased personal satisfaction and more social relationship with God. This bond is almost similar to that of the human communications (15). A significant correlation was reported between firm beliefs (regardless of presence in church) and life satisfaction, particularly among the elderly (16). No study is conducted on the relationship between religious attitudes and variables such as pre-sex motivations in females, early ejaculation, the need for education on sexual issues, and sexual satisfaction.

## 2. Objectives

The current study aimed at investigating the relationship between religious attitudes, and some sexual characteristics with marital satisfaction among females of reproductive age.

## 3. Methods

The current descriptive-analytical study investigated the relationship between religious attitudes and some sexual characteristics with marital satisfaction on 210 females of reproductive age. Firstly, cluster sampling was carried out among 4 randomly selected health centers located in the North, South, East and West of Shiraz, Iran. Then, purposive sampling was done in each center. After filling out the written informed consents and the demographic forms; sexual trait and religious attitude questionnaires were completed. The religion attitude scale-review (RAS-R) and sexual trait questionnaires were the data collection tools of the current study. The RAS-R questionnaire, with the maximum score of 125, contains 25 questions within 6 areas related to the religious attitudes as worship (prayer), morals and values, the effect of religion on life and behavior (prayer- fasting), social issues, ideologies, beliefs, science and religion. The 5- point Likert scale included strongly agree (5), agree (4), no idea (3), disagree (2), and strongly disagree (1) (Positive attitude was scored 4 to 5, negative attitude items 1 to 2, and neutral items 3). In this

questionnaire, higher scores indicate the higher level of religious attitudes: Those scored above 100 had a strong religious attitude, scores within 51 to 99 were moderate, and finally scores below 50 were considered poor. The correlation coefficient of each item with total score was valid at a P-value of 0.0001. Its reliability was calculated using Spearman-Brown formula and Guttman scale as 0.948 and 0.933, respectively. Cronbach's alpha was equal to 0.954 in an Iranian study. Thus, it can be used as a valid criterion to determine religious attitudes in patients and general populations (17). The sexual trait questionnaire, is a researcher made questionnaire and includes some sexual characteristics and marital satisfaction such as pre-sex motivations, early ejaculation, the need for education on sexual issues, couples' intimate relationship, and satisfaction. To determine the validity of the questionnaire, it was given to 10 expert instructors of schools of nursing and midwifery at different medical universities in Shiraz, Iran. After application of the instructor' recommendations, the validity of the questionnaire was confirmed.

Variables were selected based on previous research protocol (18-20), the research team experiences, and other offers of the teachers at the time of content validity determination. Besides, to determine the relationship between religious attitudes and some sexual characteristics, the backward elimination technique (alpha-to-remove = 0.1) was used for regression modeling.

### 3.1. Data Analysis

Chi-square test was applied to analyze the data by SPSS software.

### 3.2. Ethical Considerations

The current research project was approved by the local Ethics Committee of Shiraz University of Medical Sciences and written informed consents were obtained from all the participants. The project was financially supported by Student Research Committee of Shiraz University of Medical Sciences. Therefore, to consider the ethical points, the patients' name and record remained anonymous. The researcher respected the right of individuals to withdraw the research at any stage.

## 4. Results

The mean age of the study population was  $30.35 \pm 7.52$  years. About 28.2% had high school diploma, 37.2% had university degree, and the rest were under high school diploma. According to Chi-square result, there was a significant relationship between religious attitudes and pre-sex motivations (at a confidence interval (CI) of 99%) (P

= 0.001). The majority of the subjects with high level of religious attitude were satisfied with pre-sex motivations (71.6%). There was no significant association between early ejaculation and religious attitudes. The highest frequency was observed in the cases with high religious attitudes and no early ejaculation (78.4%). There was a significant association between education on sexual issues and religious attitude ( $P = 0.005$ ). According to Chi-square result, there was a significant relationship between religious attitudes and sexual satisfaction (99% CI) ( $P \leq 0.001$ ). The majority of the subjects with high level of religious attitudes had sexual satisfaction (78.4%). According to Chi-square result, there was a significant relationship between religious attitudes and couples' intimate relationships (99% CI) ( $P = 0.002$ ). The majority of the subjects with high level of religious attitudes had intimate relationship with their spouses (74.3%). The current study showed that people with higher levels of sexual arousal and religious attitudes also had higher levels of satisfaction. When there was an emotional relationship between the marital couples, the intercourse was more favorable. Therefore, the relationship between emotional relationship and favorable intercourse was approved in the couples with higher levels of satisfaction. The regression model for relations determines the relationship among religious attitudes and the different variables such as sexual satisfaction, foreplay before sex, friendly relationship with the husband, husband's premature ejaculation, sex education, wife's age, and duration of marriage, husband's age, and age of first parenting. Results of fit regression model showed that variables such as friendly relationship with husband ( $P = 0.002$ ), husband's premature ejaculation ( $P = 0.032$ ), and sex education ( $P = 0.004$ ) were more associated with religious attitude (R-square: 0.118) (Table 3).

## 5. Discussion

The current study showed that a higher level of religious attitudes was along with more sexual arousal and satisfaction. Therefore, when emotional relationship was established between the marital couples, intercourse was more favorable. Islam considers marriage as the only way to satisfy the sexual instinct. Moreover, chastity is suggested to those who cannot afford marriage (21). Thus, according to Islam, marriage and family are particularly important, because it is a means of chastity, sexual inhibition, peace, and the trend toward religious perfection. On the other hand, monasticism (leaving this world and its pleasures) is condemned (22). Primarily, religious restrictions lead to improvement in the couples' bond. In addition, it helps them to spend more time with their family in their leisure time. Their planning for sexual func-

**Table 1.** Demographic Characteristics of the Study Population

Variable	Grade	Number (%)
Educational level	Illiterate	9 (4.3)
	Primary school	36 (17.1)
	Secondary school	73 (34.8)
	University	91 (43.3)
	Total	210 (100)
Husband's educational level	Illiterate	14 (6.7)
	Primary school	33 (15.7)
	Secondary school	68 (32.4)
	University	95 (45.2)
	Total	210 (100)
Occupation	Housewife	167 (79.5)
	Clerk	43 (20.5)
	Total	210 (100)

tioning causes sexual satisfaction (23). Other studies reported the relationship between spiritual health and marital commitment, as religious attitude leads to more hope and commitment in marital relationships (24). The relationships between intimacy, quality of life, and functional impairment were examined among males and females. Males' sexual impairment (impotency, less sexual desire, early ejaculation) affects all aspects of their intimate relations. The scores of intimate relationships were higher among females with no sexual dysfunction (less sexual desire, arousal, and orgasm) compared with the ones with sexual dysfunction (25). There was a significant relationship between religious attitudes and couples' self-study on sexual issues. Self-education and sexual health education can improve the communication between spouses and sexual satisfaction. Research has shown that sex education helps people to consider the health related principles in sexual activities and avoid the high-risk behaviors. This training is useful in both less experienced or not experienced individuals (such as kids and teenagers) as well as experienced adults (such as married individuals). Lack of information or misinformation about sexual issues leads to more sexual disorders, high-risk sexual behaviors, sexually transmitted diseases, less sexual enjoyment, unintended pregnancy, and marital and familial problems. However, many studies indicated the effect of sex education on family planning (26, 27). There was a significant relationship between religious attitudes, sexual satisfaction, and couples' intimate relationship in the current study. This finding was consistent with those of other studies (28-30). The research conducted within the past 25 years, clearly state

**Table 2.** The Relationship Between Religious Attitudes and Sexual Function Factors

Religious	Score	Lower Attitudes, No. (%)	Moderate Attitudes, No. (%)	Higher Attitudes, No. (%)	P value	Statistical Test
Sexual satisfaction	Yes	2 (50)	68 (51.5)	58 (78.4)	0.000	Chi-square
	No	2 (50)	25 (18.9)	3 (4.1)		
	Sometimes	0 (0)	39 (29.5)	13 (17.6)		
Foreplay before sex	Yes	1 (25)	69 (52.3)	53 (71.6)	0.001	Chi-square
	No	3 (75)	26 (19.7)	4 (5.4)		
	Sometimes	0	37 (28)	17 (23)		
Friendly relationship with husband	Yes	2 (50)	70 (53)	55 (74.3)	0.002	Chi-square
	No	2 (50)	17 (12.9)	9 (12.2)		
	Sometimes	0	45 (34.1)	10 (13.5)		
Husband's premature ejaculation	Yes	2 (50)	27 (20.5)	10 (13.5)	0.11	Chi-square
	No	2 (50)	85 (64.4)	58 (78.4)		
	Sometimes	0	20 (15.2)	6 (8.1)		
Sex education	Yes	0	83 (62.9)	55 (74.3)	0.005	Chi-square
	No	4 (100)	49 (37.1)	19 (25.7)		

**Table 3.** Regression Model to Determine the Most Important Factors in Relation to Religious Attitudes<sup>a</sup>

Model	Unstandardized Coefficients		Standardized Coefficients <sup>a</sup>	t	Sig.	
	B	Std. Error	Beta			
7	Constant	99.023	5.381		18.403	0.000
	Friendly relationship	-3.824	1.242	-0.207	-3.080	0.002
	Premature ejaculation	4.236	1.957	0.146	2.164	0.032
	Sex education	-6.582	2.249	-0.195	-2.927	0.004

R-Square = 0.118

<sup>a</sup>Dependent variable: attitude

religion and spirituality as the leading factors in healthy marriage (31). Spiritual beliefs are considered as the marital satisfaction and marital intimacy predictors (32). Religiosity makes people consider marriage and family as a divine order and sacred process, which helps them to be more committed to the family. The most important limitation of the study was religious rules in Iran. Lack of religiosity can cause a social force and enforcement. Although the respondents' identity was not disclosed, they may hide their hidden inner carefully or pretend to be more religious than they are. The authors suggest that according to the amount of R-square = 0.118 in the regression model, other important variables should be investigated in future studies with larger sample sizes.

### 5.1. Conclusion

According to the results, there was a significant correlation between religious motivations, pre-sexual motivations, and decreased early ejaculation, which is associated with more intimate relationship and sexual satisfaction between the marital couples.

Marriage and family counselors are advised to emphasize religious education for couples to increase their marriage commitment. It is suggested that religious beliefs and sexual commitment should be included in youth and adult educational programs.

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## Footnotes

**Authors' Contribution:** Zahra Yazdanpanahi and Marzieh Akbarzadeh: Study designing, literature searching, definition of intellectual content, manuscript preparation, reviewing, and corresponding; Zahra Beygi: Data collection, manuscript preparation, and literature searching; Fatemeh Ghodrati: Concepts designing, definition of intellectual content, literature searching.

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**Ethical Approval:** This article does not contain any studies by the authors with human participation or using animals (Only questionnaires completed by females).

**Informed Consent:** Written informed consents were obtained from all participants.

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