



## THE RELATIONSHIP BETWEEN MARITAL AND SEXUAL SATISFACTION AMONG WOMEN REFERRING TO HEALTH CENTERS

Soheila froozanfar<sup>1</sup>, Faranak rahimi<sup>2</sup>, Nooshin Khademolreza<sup>3</sup>, Raoofeh Ghayoomi<sup>4</sup>

1. *Master of Midwifery, Iran University of Medical Sciences, Deputy of health (IUMS), Tehran, Iran.*
2. *MD, General phisition, Iran University of Medical Sciences, Deputy of health (IUMS), Tehran, Iran*
3. *MD, Department of Social Psychiatry, Iran University of Medical Sciences (IUMS), Center of Excellence in Psychiatry, School of Behavioral Sciences and Mental Health, Tehran, Iran*
4. *MD, Department of Social Psychiatry, Iran University of Medical Sciences (IUMS), Center of Excellence in Psychiatry, School of Behavioral Sciences and Mental Health, Tehran, Iran.*

### ARTICLE INFO

**Received:**

03<sup>th</sup> Jun 2017

**Accepted:**

29<sup>th</sup> Nov 2017

**Available online:**

14<sup>th</sup> Dec 2017

**Keywords:** *Marital satisfaction, sexual satisfaction, couples*

### ABSTRACT

Both marital satisfaction and sexual satisfaction are of factors affecting stability and strength of family foundation, which have a close mutual relationship with each other. Hence, this study was conducted to assess the relationship between these factors and to determine some related factors among women referring to healthcare centers in Tehran.

**Material and Methods:** This descriptive-correlational study was conducted on 450 married women who had referred to the health centers of Iran University. Convenience sampling method was used to collect data. Data were collected from self-reports in demographic features questionnaire as well as Enrich and Larson questionnaires. To analyze data, Pearson correlation coefficient and Chi-square test were employed.

**Results:** There was a positive ( $r=0.374$ ) and significant ( $p<0.000$ ) relationship between marital satisfaction and sexual satisfaction. A significant correlation was observed between duration of marriage, age of couples, number of children and the level of education of couples and marital and sexual satisfaction.

**Conclusions:** There is a positive and significant relation between sexual satisfaction and marital life satisfaction.

Copyright © 2013 - All Rights Reserved - Pharmacophore

**To Cite This Article** Soheila froozanfar, Faranak rahimi, Nooshin Khademolreza, Raoofeh Ghayoomi, (2017), "the relationship between marital and sexual satisfaction among women referring to health centers", *Pharmacophore*, **8(6S)**, e-1173021.

### Introduction

Marriage is critical event of life of each person after birth [1]. Marital relationship is foundation of family and healthy community unless [2]. One of most significant goals of marriage is achieving calmness, meeting sexual needs, and social security [3]. Marital status is one of the important factors for women health that can affect mental health of couples [4]. Life satisfaction or positive attitude of person toward the world is a gratifying feeling throughout the life [5]. Various factors can effect on marital satisfaction [6].

On the other hand, it should be noted that sexual satisfaction is one of most effective factors in health of women as well as a significant agent for life satisfaction [7], which is defined as a pleasant experience of sexual behaviors [8]. The majority of studies conducted in this field have indicate a significant relationship between these two variables so that the higher the sexual satisfaction, the higher marital satisfaction will be [9, 10]. Some researchers believe that lack of sexual satisfaction among couples is the reason for 80% of marital conflicts [11, 12]. However, 40% of couples with marital satisfaction cope with disorders in their sexual relationships or are relatively satisfied with their sexual relationships [13, 14]. It seems that lack of sexual satisfaction is the reason for 70% of marital dissatisfactions in Iranian communities [15]. Some factors including age, marriage duration, can effect on sexual emotion, orgasm, and sexual satisfaction [16, 17] and marital satisfactions. On the other hand, sexual activity is an inseparable part of women's life. About 60-80% of women suffer from sexual disorders; and many of them think of separation [18]. Hence, the purpose of this study is to determine marital satisfaction and sexual satisfaction level as well as their relationships considering some demographic factors among women referring to healthcare centers in Tehran.

### Materials and Methods

This is a descriptive, analytical and cross-section study. Statistical population of study consists of women referring to healthcare centers of Iran University of Medical Sciences, and Healthcare Services to receive fertility health services. To estimate sample size, all open cases in centers in 2015 (274831 cases) were reviewed and then Cochran formula was used to estimate sample size. In this way,  $N=274831$ ,  $p=q=0.05$ , and  $d=0.05$  at significance level of  $\alpha=0.05$  using following formula and sample size obtained to 384 members.

$$n = \frac{(Z_{1-\frac{\alpha}{2}}^2 \cdot p^2 / d^2)}{1 + \frac{1}{N} (Z_{1-\frac{\alpha}{2}}^2 \cdot p^2)}$$

To increase power of study and to take probability of 15% missing data into account, sample size considered equal to 450 members. It should be mentioned that sampling method of this study is multistage. First, sample size of each province was estimated considering the ratio of total cases of each region to total cases and then sample size of centers was estimated considering ratio of number of cases of each center to sample attributed to province of that center. Available samples (women referring to considered centers) were used to collect data so that questioners are trained in each center (describing research objectives, information confidentiality, etc.) and research goals were explained then referred women were invited to participate in study. After filling out consent and distributing questionnaires among women who were willing to participate in study, the completed questionnaires were reviewed by questioner and questions without answers were asked again and completed. Final supervision on questionnaires was done by supervisor.

### Instrument

Data collection instruments consisted of three questionnaires. The first one consisted of personal variables such as age, gender, age of spouse, job of spouse, number of children, education level of spouse, etc.

**Enrich Marital Satisfaction Scale:** standard scale of marital satisfaction of Enrich has been employed as a valid instrument in numerous clinical studies. This scale consists of 35 items scored at 5-point Likert scale that each person is categorized in one of groups including complete satisfaction (above 75%), relative satisfaction (25-75%), and low satisfaction (lower than 25%) considering the obtained score of each person.

**Sexual Satisfaction Inventory of Larson:** sexual satisfaction inventory of Larson consists of 25 questions based on Likert scale, as Enrich Scale was, and each person is attributed to one of each four categories including complete satisfaction, relative satisfaction, low satisfaction, and dissatisfaction. To assess the relations between some qualitative variables such as education level, job, economic status, contraceptive method, etc., Chi-square value was used considering its presumptions so that some options were merged and to examine quantitative variables such as age of spouse, age gap between couples, number of children, marital life duration, etc., Pearson correlation coefficient was used first and to classify the mentioned variables, Chi-square test was employed. Significance level of all tests considered equal to 0.05.

### Results

Demographic characteristics of participated women in study and information of their husbands are indicated in table 1. Studied women were averagely 4.5 years younger than their husbands were, but had education level equal to their husbands. In terms of job, majority of participated members were housewives and their husbands were employees (table 1). 401 cases (89.11%) of participated members had marital satisfaction and frequency of couples with low satisfaction was equal to 0; mean and standard deviation of marital satisfaction obtained to  $107.05 \pm 24.3$  (Table 2). On the other hand, 238 cases (52.89%) of participants had average sexual satisfaction and there was no participant with sexual dissatisfaction (Table 2).

Pearson correlation coefficient between scores of marital and sexual satisfaction obtained to 0.374 that was significant ( $P<0.000$ ) (Table 3). However, it should be noted that scores of this test was high (except for West, Baharestan, and Qods provinces) considering living place and Robat Karim had the highest correlation coefficient ( $r=0.718$ ;  $P<0.000$ ) with lowest number of participants (Tale 3). There was a significant relation between education level of women ( $P<0.002$ ), their husbands, and living province ( $P<0.000$ ) (Table 3) so that an increase in education level led to increased marital satisfaction. On the other hand, there was a significant relation between marital satisfaction and marital life duration ( $P<0.000$ ), age of wife ( $P<0.019$ ) and husband ( $P<0.015$ ), number of children ( $P<0.000$ ) and time interval between marriage and first pregnancy (0.035). in this case, increase in marital life duration, age of wife and husband, and number of children led to lower marital satisfaction; whereas, increase in time interval between marriage and first pregnancy led to increase marital satisfaction.

There was also a significant relation between sexual satisfaction and variables including province ( $P<0.0003$ ), economic situation ( $P<0.021$ ), job of spouse ( $P<0.045$ ), and education level of woman (0.001) and man (0.014). In this case, women who had employed husbands, average economic situation, and diploma degree had more sexual satisfaction. There was also a significant relation between sexual satisfaction and age of women ( $P<0.000$ ) and men ( $P<0.000$ ), marital life duration ( $P<0.000$ ) and number of children ( $P<0.002$ ) so that an increase in age of women and men (older couples), marital life duration (women who had marital lower than 10 years had higher sexual satisfaction), and number of children led to lower sexual satisfaction.

Table 1. The specifications of members participated in study

Number (%)	Living province	Standard deviation	Mean	Personal specifications
				Age
(16/89)76	North West	0/333	30/73	wife
(16/67)75	Shahryar	0/351	35/06	husband
(10/89)49	Robat Karim	0/043	1/52	number of children
(16/67)75	Baharestan	0/308	9/18	marital life duration (year)
(11/11)50	Qods	0/146	4/59	age gap between couples
(11/11)50	Malard	0/119	2/24	time interval between marriage and first pregnancy
Number (%)	Contraceptive Method	After Marriage	Before Marriage	Teaching (Number/Percent)
(11/46)51	pill	(19/87)89	(67/19)301	has
(28/76)128	condom	(80/13)359	(32/81)147	does not have
(2/92)13	injection	husband	wife	Education level (number/percent )
(8/99)40	IUD	(8/91)40	(8/91)40	elementary
(2/47)11	Tubectomy	(21/16)95	(15/14)68	secondary
(0/9)4	Vasectomy	(37/86)170	(43/88)197	high school/diploma
(33/71)150	natural	(32/07)144	(32/07)144	above diploma
(0/67)3	breastfeeding	husband	wife	addiction (number/percent)
(10/11)45	non-use	(3/29)14	(0/46)2	has

number (percent)	economic status	(96/71)412	(99/54)431	do not have
(23/25)103	good	<b>husband</b>	<b>wife</b>	<b>job (number/percent)</b>
(64/56)286	average	-	(81/07)364	housewife
(12/19)54	weak	(89/51)401	(16/26)73	employee
		(1/34)6	(2/67)12	educating
		(8/04)36	-	unemployed
		(1/12)5	-	retired

Table 2. The frequency distribution of marital tisfaction and sexual satisfaction

(percent)number	marital satisfaction
(89/11)401	high satisfaction
(10/89)49	relative satisfaction
(0)0	low satisfaction
107/05 ±24/3	mean±standard deviation
(percent)number	sexual satisfaction
(36/22)163	high satisfaction
(52/89)238	average satisfaction
(10/89)49	low satisfaction
(0)0	dissatisfaction
93/99 ±13/42	mean±standard deviation

Table 3. The statistical tests to evaluate relation between marital satisfaction, sexual satisfaction and underlying variables

P.value	statistical test	marital satisfaction	P.value	Statistical test*	Marital and sexual satisfaction
0/000	107/16	province	0/012	0/288	West
0/035	r=0/102	from marriage to first pregnancy	0/000	0/539	North West
0/086	chi=6/6		0/000	0/652	Shahryar
P.value	statistical test	sexual satisfaction	0/000	0/718	Robat Karim
0/003	30/07	province	0/036	0/242	Baharestan
0/021	11/5	economic situation	0/035	0/298	Qods
0/011	11/94	job of spouse	0/000	0/560	Malard
		education	0/000	0/374	total
0/001	22/34	wife	P.value	statistical test	marital satisfaction
0/014	15/97	husband			education
		age	0/002	15/37	wife
0/000	r=-0/209	wife	0/000	18/96	husband
0/007	chi=17/56		0/000	r=-0/166	marital life duration
0/000	r=-0/195	husband	0/994	chi=0/084	
0/051	chi=12/54				age
0/000	r=-0/196	marital life duration	0/015	r=-0/115	husband
0/027	chi=7/22		0/489	chi=2/42	
0/002	r=-0/149	number of children	0/019	r=-0/111	wife
0/040	chi=10/01		0/127	chi=5/7	

			0/000	r=-0/209	number of children
			0/082	chi=5	
*Pearson correlation and Chi-square tests were used					

## Discussion

Various factors can effect on the relationship between couples and marital relationships. In this research, the relation between marital satisfaction and sexual satisfaction was examined and a significant relation was obtained between raw scores of these two variables ( $P < 0.000$ ) (Table 3); however, considerable changes were observed in correlation between these two variables (marital and sexual satisfaction) considering living place (province) of studied women so that Robat Karim Province had the highest correlation coefficient with lowest sample size (Table 1 & Table 3). Correlation coefficient had a considerable increase in Shahryar, Malard, and North Wets Provinces. Regardless of different underlying factors in options attributed to each province, it can be stated that such difference between scores of studied women and relation between marital satisfaction and sexual satisfaction is a kind of bias (selection/data) and the observed difference might not be just related to underlying variables. Participants might have not presented accurate and unbiased information and reasons for that might be related to understanding of participants in field of concepts of marital satisfaction and sexual satisfaction as well as cultural and traditional beliefs ruling over thoughts and information related to sexual issues, because Merghati Khoee et al. [19] have proved that this concept is explained by a sexual language among Iranian people and they do not feel good when speaking about this matter. Rahmani et al. [20] have justified the lack of significant relation between some of studied variables in their study and marital satisfaction through a similar expression.

At this study, there was a positive relation between education level of couples, marital satisfaction, and sexual satisfaction so that wives and husbands with higher education levels had higher marital satisfaction and sexual satisfaction compared to members with lower education level; however, participants with diploma degree had higher satisfaction that these findings are matched with results obtained from other studies. Shah Siyah et al. [21] conducted a study in Shahreza and indicated that higher education is along with higher sexual satisfaction and higher education probably is along with increase information about sexual issues [22, 23]. Some other studies have expressed that higher education has no effect on marital and sexual satisfaction, because high education level of couples is along with increase life expectations that unmet expectations can influence on marital and sexual satisfaction [24].

In this research, there was a significant and reverse relation between variable of marital life duration, marital satisfaction ( $r = -0.166$ ), and sexual satisfaction ( $r = 0.196$ ) (Table 3) so that increased marital life duration led to decrease in marital and sexual satisfaction (women who had marital life shorter than 10 years, had more sexual satisfaction). In study conducted by Tayeb et al. [25], although there was not any significant relation between marital life duration, number of children, and age gap between couples, participant members with high satisfaction were those who had reported lower age, marital life duration, number of children, and age gap between couples. Rahmani et al. [20] found same relation between marital life duration and sexual satisfaction.

Blourian et al. [26] found the same relation, so that 80% of women (older than 35) expressed a problem in their relationships. These researchers also stated that increase in age would lead to changes in sexual desire, body format, and health status of people and these changes can effect on satisfaction of person. Results of this study are somewhat in line with results obtained from present study owing to the reverse and significant relation between sexual satisfaction, marital satisfaction, and increased age gap between couples.

Shahsiah et al. [21] also attributed the observed reverse relation between marital life duration, sexual satisfaction, and marital satisfaction to presence of children, more marital conflicts and economic problems because emotional and sexual feelings at the beginning of life would hide these problems. It can be stated that results obtained from present study approve this matter, because there was a reverse relation between increased number of children, marital satisfaction ( $r = -0.209$ ), and sexual satisfaction ( $r = -0.149$ ) as well as a significant relation between economic situation ( $P < 0.021$ ), job of husband ( $P < 0.045$ ), and sexual satisfaction so that participants with average economic level and employed husbands had higher sexual satisfaction. Alizadeh et al. [27] and Yela C [28] indicated in their studies that economic pressure is one of factors leading to marital conflicts influencing on sexual activities.

In this research correlation coefficients between age gap of couples, marital satisfaction and sexual satisfaction obtained to  $r = -0.0526$  ( $P < 0.266$ ) and  $r = 0.002$  ( $P < 0.971$ ), respectively, but they were not significant that might indicate a negative relation between age gap of couples and marital satisfaction. In this relation, Zare et al. also reported a reverse ( $r = -0.13$ ) and significant ( $P < 0.008$ ) relation so that increased age gap between couples led to reduced marital satisfaction. It was also indicated in another research that the lower the age gap between couples (lower than 10 years), the higher the marital satisfaction and sexual satisfaction will be [29]. On the other hand, some studies reported highest sexual satisfaction among women who were 5-6 younger than their husbands were [30, 31].

Although there was not any significant relation between job of women, marital satisfaction, and sexual satisfaction, majority of cases with marital and satisfaction were related to housewives (81.07%); however, it should be should that some studies indicated that employed women had more sexual satisfaction than housewives benefiting from high self-confidence and

satisfaction due to their financial independence [22, 31, 32]. Some other studies claimed that housewives have had more satisfaction [27].

There was not any significant relation between marital satisfaction, sexual satisfaction, and contraceptive method in present research; nonetheless, the most expected frequency of women with high marital satisfaction and average sexual satisfaction was related to women who used natural contraceptive methods. In a study conducted by Cooper et al. [33], majority of participants reported increase sexual pleasure and sex times after tubectomy.

There was a direct ( $r=0.102$ ) and significant ( $P<0.035$ ) relation between marital satisfaction and time interval between marriage and birth of first child so that postponed pregnancy would increase marital satisfaction. Pourakbaran et al. [34] also expressed in their study that women who have no experience of pregnancy and childbirth have better sexual performance ( $P<0.017$ ) and higher marital satisfaction ( $P<0.005$ ); also, mean score of sexual performance among women without children was more than women who had children.

In addition to variables examined at this study, there are various factors such as diabetes, Rheumatoid Arthritis, obesity, anxiety, depression, addiction, etc. can effect on marital satisfaction and sexual satisfaction among women and these factors are named in study conducted by Shah Hosseini et al. [35]. On the other hand, effect of some social media such as Facebook on this field has been studied recently [36]; hence, it should be noted that capacity of present study was not to some extent that can control factor affecting marital satisfaction and sexual satisfaction.

### **Conclusion**

Considering the positive relation between sexual satisfaction and marital satisfaction as well as effect of some underlying variables on both mentioned variables, it seems that sexual trainings for couple in healthcare centers can increase marital adjustment, life satisfaction, and health of families. Accordingly, it recommended teaching marital and sexual skills to women in healthcare centers.

### **Acknowledgment**

We appreciate all colleagues and members referring to healthcare centers who cooperate in this research and Iran university for financial support.

This research was conducted with the consent of the women who were willing to cooperate.

### **References:**

1. Kaplan H, Benjamin S [2001]. A summary of Kaplan psychology. Tehran, Arjmand Publication 324-41.
2. Nasehi A, Raeis F, Jafari M, Rahmani M [2004]. The degree of marital compatibility on dormitory resident university students. *Iran J Psychiatry Clin Psych* 10(1-2):111-6.
3. Bizhan Zare, Hajar Safyari Jafarabad [2015]. The Study of Marital Satisfaction and its Determinants on Married Women and Men in Tehran City. *women s studies (Sociological & Psychological)* 13(1):111-40.
4. Saadeddin Nourani S, Joneidi E, Shakeri M T, Mokhber N [2009]. Comparison of sexual satisfaction in fertile and infertile women who were referred to the Public Clinics in Mashhad. *Journal of Reproduction & Infertility* 10(4):269-77.
5. Mina Hojat Panah, Zohreh Ranjbar Kohan [2014]. A Study of Relationship between Sexual Satisfaction, Marital Satisfaction and life Satisfaction in couples. *Cheshmandaz Amin in Applied Psychology* 1(1):56-63
6. Majeed Movahed, Tahereh Azizi [2011]. A study on the relationship between the sexual satisfaction of women in a married life and conflicts between spouses, among married women in Shiraz. *Women in Development and Politics* 9(2):181-206.
7. Salehy Fadardy J [1999]. The development and validation of marital satisfaction questionnaire on a sample of students of Ferdowsi university. *Psychother Novelties* 4:13-4.
8. Jamali S, Jahromi AR, Javadpour S [2014]. Sexual function in fertile and infertile women referring to the Jahrom Infertility. *women's health* 4:5:11-20.
9. RAFAEI SK, Chinichian M, EFTEKHAR AH, POURREZA AG [2010]. Need assessment: sexual health education in family planning centers, Tehran, Iran 9(3):251-260.
10. Sarhan D, Mohammed GF, Gomaa AH, Eyada MM [2016]. Female genital dialogues: female genital self-image, sexual dysfunction, and quality of life in patients with vitiligo with and without genital affection. *Journal of sex & marital therapy* 42(3):267-76.

11. Hawkins Y, Ussher J, Gilbert E, Perz J, Sandoval M, Sundquist K [2009]. Changes in sexuality and intimacy after the diagnosis and treatment of cancer: the experience of partners in a sexual relationship with a person with cancer. *Cancer nursing* 32(4):271-80.
12. Farnam F, Pakgozar M, Mir-mohammadali M [2011]. Effect of pre-marriage counseling on marital satisfaction of Iranian newlywed couples: a randomized controlled trial. *Sexuality & Culture* 15(2):141-52.
13. Shahsiah M [2012]. The effect of sex education on marital quality improvement in couples of Qom. *International Journal of Contemporary Research In Business* 12(7):134-147.
14. Jonaidy E, Sadodin S, Mokhber N, Shakeri M [2009]. Comparing the marital satisfaction in infertile and fertile women referred to the public clinics in Mashhad in 2006-07. *Iranian Journal of Obstetrics, Gynecology and Infertility* 12(1):7-16.
15. Rahmani A, Alahgholi L, Khuee EM [2009]. P511 How does sexual satisfaction relate to marital satisfaction among Iranians? *International Journal of Gynecology & Obstetrics* 107:S558-S9.
16. Oskay UY, Beji NK, Serdaroglu H [2010]. The issue of infertility and sexual function in Turkish women. *Sexuality and Disability* 28(2):71-9.
17. Marci R, Graziano A, Piva I, Monte GL, Soave I, Giugliano E, et al [2012] Procreative sex in infertile couples: the decay of pleasure? *Health and quality of life outcomes* 10(1):1.
18. Zahra Shahvary ALG, %A Sima Mohamad Hoseiny [2010]. Determination of some related factors on women sexual satisfaction Gachsaran (South-West of Iran). *Journal of Gorgan University of Medical Sciences* 11(4):51-6.
19. Merghati-Khoei E, Richters J, Whelan A [2005]. Language of love in culture of silence: Sociocultural context of Iranian women's sexual understandings. Unpublished PhD thesis, UNSW University School of Public Health and Community Medicine of Sydney, Australia.
20. Rahmani A, Merghati Khoei E, Sadeghi N, Allahgholi L [2011]. Relationship between Sexual pleasure and Marital Satisfaction. *Iran Journal of Nursing (IJN)* 24(70):82-90.
21. marzie shahsiah [2009]. On the relationship between sexual satisfaction and marital commitment among couples in Shahreza City, Central part of Iran. *Journal of Fundamentals of Mental Health* 11(43):233-8.
22. Yoo H, Bartle-Haring S, Day RD, Gangamma R [2014]. Couple communication, emotional and sexual intimacy, and relationship satisfaction. *Journal of Sex & Marital Therapy* 40(4):275-93.
23. De Graaf H, Vanwesenbeeck I, Meijer S [2015]. Educational Differences in Adolescents' Sexual Health: A Pervasive Phenomenon in a National Dutch Sample. *The Journal of Sex Research* 52(7):747-57.
24. Bakhshayesh A, MORTAZAVI M [2010]. The relationship between sexual satisfaction, general health and marital satisfaction in couples 4(12):73-85.
25. Ziaee T, Jannati Y, Mobasheri E, Taghavi T, Abdollahi H, Modanloo M, et al 2014. The relationship between marital and sexual satisfaction among married women employees at Golestan University of Medical Sciences, Iran. *Iranian journal of psychiatry and behavioral sciences* 8(2):44.
26. Bolourian Z, Ganjloo J [2007]. Evaluating sexual dysfunction and some related factors in women attending sabzevar health care centers. *Journal of Reproduction and Infertility* 8(2):163-70.
27. Mohammad-Alizadeh-Charandabi S, Mirghafourvand M, Asghari-Jafarabadi M, Tavananezhad N, Karkhaneh M [2014]. Modeling of socio-demographic predictors of sexual function in women of reproductive age. *Journal of Mazandaran University of Medical Sciences* 23(110):237-42.
28. Yela C [2012]. Predictors of and factors related to loving and sexual satisfaction for men and women. *European Review of Applied Psychology/Revue Européenne de Psychologie Appliquée* 50(1):235-243.
29. Zihel S, Masten R [2010]. Differences in predictors of sexual satisfaction and in sexual satisfaction between female and male university students in Slovenia. *Psychiatria Danubina* 22(3):425-9.
30. Rahmani A, Khoei EM, Gholi LA [2009]. Sexual satisfaction and its relation to marital happiness in Iranians. *Iranian Journal of Public Health* 38(4):77-82.
31. Ahmadi Z, Malekzadegan A, Hosseini A [2011]. Sexual satisfaction and its related factors in primigravidas. *Iran Journal of Nursing* 24(71):54-62.

32. Coskun B, Coskun BN, Atis G, Ergenekon E, Dilek K [2013]. Evaluation of sexual function in women with rheumatoid arthritis. *Urology journal* 10(4):1081.
33. Cooper P, Gath D, Fieldsend R, Rose N[1981]. Psychological and physical outcome after elective tubal sterilization. *Journal of psychosomatic research* 25(5):357-60.
34. Pourakbaran E, Amin Yazdi SA [2015]. A study of sexual functioning and marital satisfaction in women with and without history of labor. *Journal of Fundamentals of Mental Health* 17(4):202-8.
35. Zohreh S, Zeinab H G, Mehdi P, Fariba S [2014]. A Review of Affecting Factors on Sexual Satisfaction in Women. *Mater Sociomed* 26(6):378-81.
36. Cornwell B, Behler R 2015. *Sexual Behavior and Social Networks*.