
Effectiveness of sex skills education on intimacy and aggression among couples

Leila Hemmatimoghaddam (MA)¹, Hamid Nejat (Phd)²

1. Graduate of Clinical Psychology, Department of Psychology, Kish International Branch, Islamic Azad University, Kish Island, Iran

2. Department of psychology, quchan branch, Islamic azad university, quchan, Iran

KEY WORDS: skills for sex, intimacy, aggression, couples

ABSTRACT: A semi-experimental study (pretest-posttest with control group) was carried out to survey effectiveness of educations of skills for sex on improvement of intimacy and reduction of aggressive behavior between couples. A sample group (n = 30) of the couples with sexual problems who referred to Arsh Clinic in Mashhad-Iran in 2015 was formed through convenient sampling. The participants were randomly grouped in experiment (n = 15 couples) control (n = 15 couples) groups. The data gathering tools included marital intimacy questionnaire and aggression questionnaire. The experiment group received educations on skills for sex (six sessions of 2hrs each) and meanwhile the control group received no intervention. At the end of the intervention, the participants filled out the questionnaire once more. The collected data was analyzed using descriptive (mean and standard deviation) and inferential (covariance) statistics. The findings indicated effectiveness of the educations on increase of intimacy in the couples and on decrease of aggression between them.

Introduction

Given the critical role of marriage in formation of family foundation and upbringing of the future generation, it is one the most important and fundamental human-relationship. A key aspect of marital relationship is the satisfaction that the couple experience by their marriage. Marital satisfaction is a positive and joyful attitude that the couple experience with different aspects of marital relationship (e.g. communication, personality matters, conflict solving, financial matters, sexual relationship, and children) (Tani, et al. 2006). However, as suggested by divorce statistics, which is the most reliable index of dissatisfaction in marital relationship, marital satisfaction is not easily achievable as it needs hard works by the couple to build their relationship (Resen et al., 2004; Lawer, 2005). Sexual satisfaction or the extent of satisfaction felt by a person of their sexual relationship is one of the elements of marital satisfaction and a key element of successful marriage, survival of family foundation, and health (Harvi, Wanzel, and Sprecher, 2004). Sexual relationship is affected by emotional relationship between the couples and failure to reach satisfaction in this regard leads to marital dissatisfaction and family problems consequently (Tankabouni, 2013). One probable problem, which is commonly seen in couples who are not sexually satisfied, is aggression. Sex education is a way to reduce aggression and increase satisfaction in marital relationship. It is a process that helps the couple to have healthy sexual development, marital health, better interpersonal relationships, stronger emotions, more intimacy, better physical image, and more fruitful sexual role. It deals with all aspects of sexuality such as biological, cultural-social, psychological, and religious. Sex education has to do with cognitive field (information and knowledge), affectional field (emotions, values, and attitudes), and behavioral field (communicational skills, and having sexual relation) (Ali, Lium, Homdian, 2004). It is reasonable to assume that lack of information or having wrong information about sexual matters increases risk of sexual disorders, risky behaviors, venereal diseases, loss of sexual joy, unplanned pregnancy, and family/marital problems (Vender Zanden, 1993). Taking into account that healthy, quality, and satisfactory sexual relationship leads to marital satisfaction and higher mental health; family foundation is well-preserved and sexual needs the couples are met, when it is limited to family boundaries based responsiveness; and that without it and neglecting sexual needs leads to depression, anxiety, decrease of self-confidence, isolation, and marital problem and even divorce; and that the absence of proper sex education has never been as evident as it is today's, the present paper is aimed at surveying and answering if sex skills education to couples could improve intimacy and decrease aggression?

Methodology

A semi-experimental study with unequal control group was conducted with study population comprised of all couples who referred to Arsh Marriage Consultant Center in Mashad, Iran from 21st of April to 21st of June. Sample group (n=30) was

formed through convenient/voluntarily sampling and the participants were grouped in control (n = 15) and experiment (n = 15) groups not fully-randomly. Inclusion criteria were literacy, no addiction, no physical problem, no desire to watch pornos, and lack of organic problem of sexual organs; and exclusion criteria were drug addiction by one of the couples, physical/mental diseases, and absence for more than two sessions. The data gathering tools were marital intimacy questionnaire and aggression inventory. The former was developed and normalized by Olia (2006) in Iran with 87 statements and 9 subscales including emotional, psychological, rational, physical, sexual, spiritual, social, leisure, aesthetic intimacy and general intimacy. Each question is designed based on Likert's four-point scale (always = 4, ..., never = 1). Maximum and minimum scores are 348 and 87 and the higher the score the more intimate are the respondents. Olia reported total Cronbach's alpha equal with 0.92. In addition, to measure aggressiveness, Boss and Perry's standard questionnaire with 29 statements was used. The tool measures aggressiveness in physical, verbal, anger, and enmity fields. The statements are designed based on Likert's five-point scale). Based on the obtained score, the respondent is placed in aggressive disorder group (score ≥ 78) and no aggressive disorder (score < 78). Najafzade (2013) obtained Cronbach's alpha of the questionnaire equal with 0.89. After making arrangement with authorities of the center and selecting the participants, a pretest was carried out by asking all the participants to fill out the questionnaires. Afterward, the experiment group was exposed to the independent variable and the control group kept its normal program. The sessions were held once a week and each session tool 2hrs. One week after the intervention, the participants of the both groups filled out the two questionnaires of the study. The collected data was analyzed by descriptive (mean, SD and so on) and inferential (covariance analysis) statistics.

Findings

Table 1. MANCOVA test on mean scores of pretest and posttest

Variable	Square sum	Df	Mean score	f	Sig.
Pretest	39/675	1	39/675	1/259	0/271
Posttest	1598/700	1	1598/700	30/257	0/001

As listed in the table above, the difference between the experiment and control groups regarding aggressiveness test (f= 1.25) at pretest stage is significant at $P>0.01$ level. However, the difference regarding aggressiveness test (f =30.25) at posttest stage is significant at $P<0.01$ level. To remove pretest effect, covariance analysis was used.

Table 2. Mean and SD of couples' intimacy score at pretest and posttest

Scale	Groups	Pretest		Posttest		Posttest after removing pretest effect	
		Mean	SD	Mean	SD	Mean	SD
Intimacy	Experiment	222/20	6/93	226/63	5/52	-4/43	9/74
	Control Group	219/90	3/88	212/03	8/67	7/87	8/24

As indicated in the table above, mean score of intimacy of the experiment group increased at posttest stage (226.63) comparing with that of pretest (222.20); while the difference of mean score of intimacy of the control group does not change considerably at pretest stage (219.90) and posttest (212.03). This highlights the effect of sex skills education on intimacy of the couples.

Table 3. Covariance of mean score of intimacy of couples at posttest

Variable	Square sum	DF	Mean square	F	Sig.	Effect	Test power
Pretest	1/896	1	1/896	/035	0/854	0/001	0/054
Group membership	1507/660	1	1507/660	27/550	0/001	0/505	0/999
Error	1477/571	27	54/725				
Total	3078/167	29					

As listed in the table above, there is no significant difference between the control and experiment group at pretest level regarding intimacy ($F_{27,1} = 0.03$, $p>0.05$). However, there is significant difference between the two groups in this regard at posttest ($F_{27,1} = 27.55$, $p<0.05$). Therefore, H_0 is not supported with confidence level of 99% and H_1 is supported. Therefore, sex education skills is effective on intimacy of the couples.

Table 4. Descriptive statistics after adjusting the pretest

Group	Adjusted mean	SD error
Experiment	226/58a	1/931
Control	212/09a	1/931

As indicated in the table above, adjusted mean score of intimacy of couple of the experiment group is higher than that of the control group; thus, sex skills education is effective on intimacy of the couples.

Table 5. MANCOVA test on mean scores of pretest and posttest

Variable	Square sum	Df	Mean score	f	Sig.
Pretest	70/533	1	70/533	3/388	0/076
Posttest	546/133	1	546/133	11/309	0/002

As listed in the table above, the difference between the experiment and control groups regarding aggressiveness test (f= 3.38) at pretest stage is significant at P>0.01 level. However, the difference regarding aggressiveness test (f =11.30) at posttest stage is significant at P<0.01 level. To remove pretest effect, covariance analysis was used.

Table 6. Independent t-test

Variable	T	DF	Sig.
Aggressiveness	-1/841	28	0/076

As listed in the table above, independent t-test is not significant regarding aggressiveness of the couples. Thereby, the two group are identical at the baseline

Table 7. Mean and SD of couples' aggressiveness score at pretest and posttest

Scale	Groups	Pretest		Posttest		Posttest after removing pretest effect	
		Mean	SD	Mean	SD	Mean	SD
Aggressiveness of couple	Experiment	76/60	4/44	72/01	7/63	4/60	8/83
	Control	79/67	4/68	80/53	6/19	-0/87	5/43

As indicated in the table above, mean score of aggressiveness of the experiment group decreased at posttest (72.01) comparing with that of pretest (76.60); while the difference of mean score of aggressiveness of the control group does not change considerably between pretest (79.67) and posttest stages (80.53). This highlights the effect of sex skills education on aggressiveness of the couples.

Table 9. Covariance of mean score of aggressiveness of couples at posttest

Variable	Square sum	DF	Mean square	F	Sig.	Effect	Test power
Pretest	79/975	1	79/975	1/697	0/204	0/059	0/242
Group membership	366/118	1	366/118	7/770	0/010	0/223	0/766
Error	1272/258	27	47/121				
Total	1898/367	29					

As listed in the table above, there is no significant difference between the control and experiment groups at pretest stage regarding aggressiveness (F_{27,1}= 1.69 ,p>0.05). However, there is significant difference between the two groups in this regard at posttest stage (F_{27,1}= 7.70 ,p<0.05). Therefore, H0 is not supported with confidence level of 99% and H1 is supported. Therefore, sex education skills is effective on aggressiveness of the couples.

Table 10. Descriptive statistics after adjusting the pretest

Group	Adjusted mean	SD error
Experiment	72/568a	1/825
Control	79/965a	1/825

As listed in the table above, independent t-test is not significant regarding aggressiveness of the couples. Thereby, the two group are identical at the baseline

Discussion and conclusion

Hypothesis one of the study stated that sex skills education is significantly and positively effective on improving marital intimacy of the couple. The results showed that attending sex education classes significantly improved intimacy of the couples of the experiment group comparing with the control group. Thereby, sex educations improve intimacy of couples. Our results are consistent with Shakarami et al. (2014), Sehat et al. (2013), Yusefzadeh (2013), Gurman and Jackobson (2003), Markman et al. (2006), Latilad et al. (2006), and Buttler (2006). To explain the findings, the needs for intimate relationship and covering psychological and mental needs are of the main reasons of marriage (Etemadi, 2005) and intimacy is one of the most valuable existential aspect of human and a key factor in health performance of man (Dandurand, 2013). Intimacy in marital relationship is conceptualized as a critical behavioral pattern with strong emotional-affectional and social aspects, which is formed based on acceptance, satisfaction, and love (Tenhoten b, 2007). In other words, it is behavioral intimacy that improve emotional intimacy. Emotional intimacy includes support and mutual understanding, communication and participation, and sharing activities and properties with another person (Pili, Lotin, Arindel, 2005). The couples in the experiment group were encouraged to carry out cognitive tasks, learn about their wrong thinking styles, change their attitude to sexual matters, learn about their partner and their own emotions, accepting their partner and their own emotions and behavior, and acquire sexual skills. After the intervention, the participants showed significant increase in intimacy. The results showed decrease of aggressiveness in the experiment group after the intervention comparing with the control group. Therefore, sexual skill education reduces aggressive behaviors in couples and hypothesis two is supported. This result is consistent with Markman et al. (1993), Long et al. (1998), Link (2003), and Estiesh (2004). Literature review showed that sex skills education is a behavioral-cognitive approach that is effective on anger control and self-control and in light of the fact that sexual problems are rooted in interactive patterns and improper marital relationships, the education seems to be effective on improving sexual relationship (Masters and Janson, 1987). Problem solving, on the other hand, is one of the main fields of concentration in sex skills education. Couples that experience conflicts in their relationship tend to show aggressive behavior in the face of stressful situations. Anger is an emotional and affectional mood that ranges from mild emotions to uncontrolled anger. This situation happens when the way to achieve the goals seems blocked by the person.

References

- Ali SR, Liu WM, Humedian M. Islam 101: Understanding the religion and therapy implications. *Professional Psychology: Research and Practice* 2004; 35(6): 635-642.
- Blume TW. *Becoming a family counselor: a bridge to family therapy theory and practice*. Hoboken. New Jersey: USA: Wiley; 2006. P. 106-119.
- Dandurand C, Lafontaine MF. Intimacy and couple satisfaction: The moderating role of romantic attachment. *International Journal of Psychological Studies* 2013; 5(1): 74-90.
- Harvey, J., Wenzel, A., & Sprecher, S. (2004). *The handbook of sexuality in close relationships*. London: Lawrence Erlbaum Associates.
- Rosen-Grandon, J.R., Myers, J.E., & Hattie, J.A. (2004). The relationship between marital characteristics, marital interaction processes and marital satisfaction. *Journal of Counseling and Development*, 82(1), 58-68.
- Sehat N., Sehat F., Mohebi S., Shah Siah M (2013) *Effectiveness of sex education on sexual satisfaction of the couples in Isfahan*, *Life Journal*, 10(5), 5-31
- Taniguchi, S.T., Freeman, P.A., Taylor, S., & Malcarne, B. (2006). A study of married couples' perceptions of marital satisfaction in outdoor recreation. *Journal of Experiential Education*, 28 (3), 253-256.
- TenHouten WD. *A general theory of emotions and social life*. 1st ed. New York: USA: Rutledge; 2007.P. 6-7.
- Tonekaboni S, Hassanzadeh R, Ebrahimi S. The effect of sex education on the marital satisfaction *European Journal of Experimental Biology* 2013; 3(6):427-31
- Usefzadeh S., Namni F, Golmakani N., Najaf Najafi M., Ebrahmi M., Modares Ghorvi M. (2013) *Surveying the effect of sex educations based on religious trainings on marital adaptation of married women*, *Iran Woman and Fertility Journal*, 16 (84): 10-19