

Research Article

Women's Right to Sexual Pleasure and Contraception

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ABSTRACT

Objectives: Researchers reported having semen in vagina affects the sexual satisfaction but traditionally, women are not granted the right to sexual pleasure in different cultures. Understanding women is good but not enough for men, they should also respect their partner's rights, too. This survey attempted to consider different aspects of women right in having sexual pleasant, because we asked participant about Azl (coitus interruptus) as a women's right. Methods: This study was an applied Survey research that was conducted on 152 couples who had admitted to participate in the study during 2019- 2020. Two groups of couples were studied "young couple" group (N = 74 couples) and a "older couple" (N= 75 couples). 152 couples met the questionnaire. The questionnaires were sent electronically to ensure confidentiality. Alpha Cronbach was 0.8. Results: Findings confirmed just young couples believe that having semen in vagina is an advantage for women. This study approved that old couples considers the women's satisfaction in sexual relationships more than young couples despite it is the simplest way of contraception. Conclusions: Iranian couples think preventing from having sperm is harmful but as it is the simplest way for contraception couples prefer to ignored the right of women in satisfaction of sexual relationship. Scientists and men are two sides of resolving this problem.

Keywords: Contraception; Sexual relationship; Women

INTRODUCTION

The survey of high rates of divorce in the countries of the world shows that the vast majority of people, especially women, do not have a proper understanding of their sexual rights [1]. Undoubtedly, the importance of women's desire for fertility is also important [2]. Several studies have focused on the issue of female sexual satisfaction [3]. Passing time alters couples' reaction to the marital life. The decision making in sexual relations are subjective issues in different academic departments, and specific policies of countries in relation to social expectations and conditions of employment affects these decisions [4-5].

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Historically, the church does not grant sexual pleasure to women. When a woman cares about her sexual pleasure, she's not a family proponent, and she's not a good wife to her husband [6]. In addition to culture, country regulations require married women to have sex with their husbands, and it is usually men who have the right to determine the duration, manner, and intensity of the relationship [7]. In most cultures, the lack of respect for women's sexual pleasure goes so far that even women who pay attention to sexual pleasure are considered unpleasant and immoral [8]. Satisfaction with women's sexual pleasure is limited to fertility success. It is accepted for women not to understand sexual pleasure and not to insist on having sex and sexual pleasure, because it is difficult for men to reach them to the peak of sexual pleasure. Gradually, women recognized their rights [9]. Despite the increasing awareness of women and men about their rights, women still depend on men, and it is the right of men to decide which health care should be taken to meet their sexual needs. Women in the lower social classes are more aware of their rights than women in the upper social classes, but in practice women are only

allowed to have sex when men choose to have sex [10]. Different academic science found the female reproductive system needs sperm and is ready for sperm, and men need to consider women's sexual satisfaction [11], if their request is having a stable family.

Researchers reported having semen in vagina affects the sexual satisfaction of women [12]. If the sexual pleasure of women in a sexual relationship remains unanswered, there will be many physical and psychological consequences for women. that women reach orgasm at least one minute after men [13], which is out of women's control. If men pay attention to the fact that, [14] having semen in vagina affects the sexual satisfaction of women [12], has benefits for themselves, too as achieving women's sexual satisfaction increases the life expectancy of women and certainly affects women's fertility [15]. Women who have multiple orgasms during sexual intercourse are more satisfied with their sexual intercourse, achieving women's sexual satisfaction increases their life expectancy and definitely affects women's fertility [15]:

Table 1. Disadvantages	of having a success sexu	al relationshin
Table 1. Disaatantagee	or maring a saccoss soma	

Adv	vantages	Disadvantages			
Biological	Psychological	Biological	psychological		
female fitness	Anti-depressant	Low blood pressure	Quality of life		
Genetic benefits	Anti-anxiety	Having no orgasm	Insecurity		
Life span	Anti-stress	Not getting pregnant	low self-esteem		
Anti-inflammatory			anxiety		
Preventing cancer			low self-control		
Reduce nausea			feelings of guilt		

Resource

Women's lack of sexual gratification has an impact on both their husbands and themselves. Not only having semen in uterus during sex relationship causes effects on couples, martial length also increases the decreasing risk of dissatisfaction of the sexual relationship. Women's lack of sexual gratification has repercussions for their husbands as well as for themselves, but this study sought to add to our understanding of the right of women in sexual relationship by testing the hypothesis that levels of both young couple and old couple more than 20 years leaving to each other. The aim of this study is to investigate on the effect of recognition of length of marriage on women [16-20].

Hypotheses

The specific hypotheses tested by this study were as follows: 1. Young couples are more conscious about women's rights than old couples "like Azl". 2. In young couples, having semen in vagina is by a man's willingness. 3. Young couples believe that having semen in vagina is an advantage for women but as it is the simplest way of contraception they have to ignore the women satisfaction.

Materials And Methods

The statistical heterogeneity among studies was assessed by the Morgan test. Two groups of couples were studied "young couple" group (N = 74 couples) and a "older couple" (N= 75 couples). 152 couples met the questionnaire. Also, since participants aged 18 to 69 do have children in the home up to 3 or having no children, studying couples with children provided data applicable to this majority. Alpha Cronbach was 0.86.

There were people in both groups who did know the Azl. The current research method is semi experimental. The study on married women was carried out electronically, based on the questionnaire's sensitivity. In this regard, the knowledge of the right to dismiss and its consequences as an experimental variable and the duration of marriage as a dependent variable have been examined. The sample size for this study was 152 in two experimental and control group. Sampling method is randomized between a group of married peoples who marry less than 10 years and a second group who married 10 years at least. Research tools for this test have been provided to the respondents within five weeks. Thus, the pre-test was performed on 22 people before the training. Experimental and control groups were given a questionnaire. The content of the questions was also compiled in accordance with the research assumptions. Validity was also confirmed prior to the test. In fact, the effectiveness of modern education on young couples is reflected in their understanding of the "Azl". Compare means, one sample t- test used in statistical analysis.

RESULTS

The participants included 75 young couple to 78 older couple (more than 10 years). Participants' age was ranged from 18 to 69 years old (M age= 37.64, SD age= 12.13), with (0-3 children).



Figure 1. Azl in participant's approach

Hypotheses

The specific hypotheses tested by this study were as follows:

1. Young couples are more conscious about women's rights than old couples "like Azl"

	Ν	Mean	Std. Deviation	Std. Error Mean
Marriage period	152	1.5132	0.50148	0.04068
Awareness on Azl	152	2.47	7.89	0.64
Awarenws on Azl In Islam	151	4.19	15.699	1.278
	Test Valu	e = 0		

	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Inte	rval of the Difference
					Lower	Upper
Marriage period	37.201	151	0	1.51316	1.4328	1.5935
Awareness on Azl	3.865	151	0	2.474	1.21	3.74
Awarenws on Azl In Islam	3.281	150	0.001	4.192	1.67	6.72

The results showed that the marriage duration had a significant relationship with the degree of knowledge of the husband's right to husband and also the duration of the marriage had a significant relationship with the degree of awareness of the right of the husband to be laid off in Islamic traditions, so that younger families were more sensitive to Islamic law, but generally even older (sig<0.05).

2. In young couples. Having semen in vagina is by a man's willingness. This is usually done by agreement, whether the agreement is permanent or temporary. In other cases, the decision is made by the woman. Older couples are more likely to agree than younger couples (45.5 to 55.5 %) and older couples are more likely to say that whatever a woman says her husband is going to do (55.6 to 44.4 %). In general, there is more disagreement among younger couples on this issue.

Table 3. One-Sample Statistics

						Cases			
			v	alid	I	Aissing		Total	
			Ν	Percent	Ν	Percent	N	Percent	
Length of marriage* Making	decision o	n Azl	149	98.00%	3	2.00%	152	100.00%	
			Test Value =	0					
	t	df	Sig. (2-tailed		ean erence			dence Interval Difference	of th
	t	df	Sig. (2-tailed					Difference	of th pper
ngth of marriage* Making decision Azl	t 37.201	df 151	Sig. (2-tailed) Diffe]	Difference Up	

3. Young couples believe that having semen in vagina is an advantage for women but as it is the simplest way of contraception they have to ignore the women satisfaction

This hypothesis is confirmed by the fact that older couples are more likely to believe that it does not matter to women whether or not having the semen in their vagina but young couples do it as they think it is the simplest way of contraception

			N M	lean Std. Dev	iation	Std. Error Mean	
Length of	marriage	*	152 1.5	5132 0.501	48	0.04068	
Women &	Azl		152 6	0.16 46.9	54	3.808	
			Te	est Value = 0			
	t	df	Sig. (2-tailed)	Mean Difference	95% Conf	idence Interval of	the Differenc
	t	df	Sig. (2-tailed)	Mean Difference	95% Conf Lov		the Differenc Upper
ngth of marriage*	t 37.201	df 151	Sig. (2-tailed) 0	Mean Difference		wer	

Table 4. One-Sample Statistics

DISCUSSION

To improve the relationships between couples, physically healthy, positive fertility and mental health are effective factors [21]. Based on Research in marital relationships, Sexual satisfaction has significant effects on the strengthening of quality of life [14,22-24]. Particularly, martial satisfaction is essential to the survival of a sexual relationship in the family center [23]. Sexual dysfunction between couples is also unpleasant for women, too [25]. Researchers found that understanding's women is good but not enough for men, they should also respect their partner's rights, too [26-28].

Avoiding semen in the vagina during sexual intercourse is called coitus interruptus. It has been used by many of the population as a contraceptive in order to avoid unwanted pregnancies. This carries women sexual dissatisfaction. Also, some young men resort to anal intercourse to avoid rupture of the hymen which carries many side effects including frequent kidney infections for male partners and possibly kidney failure in some cases. Furthermore, some anatomical and physiological disorders could occur in females including lacerations of anal sphincters with no control of flatus. It may also cause infertility against the male partner's semen due to the possibility of some of it escaping through minor anal injuries into the female circulation [29-31].

Women who have semen in their vagina during sex are more pleased than others [14,29]. As Stopping sperm from ejaculation means preventing women from practicing their natural right [33]. Through prohibiting men from ejaculating semen in a woman's body without her consent, a woman and her marriage will be impaired. A man who throws ejaculate does not pay attention to women's sexual satisfaction and may even leave without orgasm. Thus, seminal ejaculation in the female uterus is one of the factors contributing to the woman's sexual pleasure, which contributes to a peak of pleasure and sexual satisfaction. But this research confirmed just young couples believe the problem of having semen in vagina is an advantage for women. Defense system activation of women's body [15], decreasing depression and decreasing pain and anxiety [34,35], blood pressure reduction [36], blood circulation in the pelvic cavity, nutrient supply, growth of healthy tissues, menstrual cycle, appetite, body temperature and control emotions; muscle power and osteoporosis; depression; increased pain; colds; teeth loss and bladder control [31,32], hormonal imbalanced [9,34,35] are other effects of having the semen in the vagina.

In Islam, prevention of seminal ejaculation in the uterus what is Azl and it is rejected to ignore the woman's individual and social needs for semen ejaculation in the body. Men may need to have ejaculation in the vagina for several reasons, but women are opposed to the cause of seminal vagina ejaculation. The Holy Scriptures considers the right of making decisions in this issue for both men and women . Despite the fact that it is immoral to stop seminal ejaculation in women's vagina, the history is as much as the history of sexual relations [36].

Azl evades the man's penis after his penetration and pours the sperm out of the woman's vagina [37]. In Imamieh religion, there are two views on the issues [37-41]. Azl should be one of the conditions before marriage or it is not permitted to men to decide by themselves about the Azl and the satisfaction of women is important. In family planning, despite these other recommendations, women do not have enough control [36-45]. This study approved one of the important factor of having a sturdy matrimony is to respect the right of women and old couples considers this right even if they do not be familiar to the women's right.

This study suggests that more women's rights studies should be conducted experimentally. In particular, the issue of women's rights in sex needs to be addressed with more variables, including sociological and demographic factors.

CONCLUSIONS

The results of the current study indicated that couples especially women believes women need to have semen in their vagina and this issue could be effective on the martial duration. Moreover, couples think preventing from having sperm is harmful but as it is the simplest way for contraception couples prefer to ignored the right of women in satisfaction of sexual relationship. Scientists and men are two sides of resolving this problem.

CONFLICT OF INTERESTS

The authors declare that they have no conflict of interests.

ETHICAL ISSUES

We designed a questionnaire in two sections that, if they married, would go to the next pages.

REFERENCES

- Lottes IL. (2013). Sexual rights: meanings, controversies, and sexual health promotion. J Sex Res. 50(3-4): 367-391.
- Gharehghani MAM, khosravi B, Irandoost SF, Soofizad G, lebni JY. (2020). Barriers of condom use among female sex workers in Tehran, a qualitative study. Int J Womens Health. 12: 681-689.

- Singh KK, Bloom SS, Tsui AO. (1998). Husbands' reproductive health knowledge, attitudes, and behavior in Uttar Pradesh, India. Stud Fam Plann. 29(4): 388-399.
- Aujoulat I, Libion F, Berrewaerts J, Noirhomme-Renard F, Deccache A. (2010). Adolescent mothers' perspectives regarding their own psychosocial and health needs: A qualitative exploratory study in Belgium. Patient Educ Couns. 81(3): 448-53.
- 5. Burri A, Buchmeier J, Porst H. (2019). The importance of male ejaculation for female sexual satisfaction and function. J Sex Med. 15(11): 1600-1608.
- Paine EA, Umberson D, Reczek C. (2019). Sex in Midlife: Women's Sexual Experiences in Lesbian and Straight Marriages. J Marriage Fam. 81(1): 7-23.
- Frug M J. (1992). A Postmodern feminist legal manifesto (an unfinished draft). Harv Law Rev. 105(5): 1045-1075.
- Jianjun J, Norling A. (2004). Sexual Satisfaction of Married Urban Chinese. Journal of Developing Societies. 20(1-2): 21-38.
- Ghazivakili Z, Norouzinia R, Kabir K, Karimi M. (2014). Mental Health of People Who Are Going to Marry and Its Relation to Some of Their Demographic Factors. aumj. 3(2): 81-88.
- Obaid TA. (2009). Fifteen years after the International Conference on Population and Development: What have we achieved and how do we move forward? Int J Gynaecol Obstet. 106(2): 102-105.
- 11. Davidson JK, Darling CA. (1989). Self-perceived differences in the female orgasmic response. Fam Pract Res J. 8(2): 75-84.
- Bahrami N, Soleimani MA, Shraifnia H, Masoodi R , Shaigan H, Mohammad rezaei Zh. (2012). Female Sexual Satisfaction with Different Contraceptive Methods. IJN. 25(76): 55-63.
- Baker RR, Bellis MA. (1993). Human sperm competitionejaculate adjustment by males and the function of masturbation. Animal Behaviour. 46(5): 861-885.
- 14. Litzinger S, Gordon KC. (2005). Exploring relationships among communication, sexual satisfaction, and marital satisfaction. J Sex Marital Ther. 31(5): 409-424.
- 15. Wagner WE, Kelley RJ, Tucker KR, Harper CJ. (2001). Females receive a life-span benefit from male ejaculates in a field cricket. Evolution. 55(5): 994-1001.

- 16. Andersson MB. Sexual selection: USA: Princeton University Press. 1994.
- Wolfner M. (2002). The gifts that keep on giving: physiological functions and evolutionary dynamics of male seminal proteins in Drosophila. Heredity. 88(2): 85-93.
- Bonduriansky R, Wheeler J, Rowe L. (2005). Ejaculate feeding and female fitness in the sexually dimorphic fly Prochyliza xanthostoma (Diptera: Piophilidae). Animal Behaviour. 69(2): 489-497.
- 19. Tepavcevic D, Kostic J, Basuroski I, Stojsavljevic N, Pekmezovic T, Drulovic J. (2008). The impact of sexual dysfunction on the quality of life measured by MSQoL-54 in patients with multiple sclerosis. Mult Scler. 14(8): 1131-1136.
- Nicolosi A, Glasser DB, Kim SC, Marumo K, Laumann EO, Group GI. (2005). Sexual behaviour and dysfunction and help-seeking patterns in adults aged 40–80 years in the urban population of Asian countries. BJU Int. 95(4): 609-614.
- Ghorashi Z, MerghatiKhoei E. (2017). Exploring the Reducing Satisfactory Response in Married Women of Reproductive Age: Qualitative Study. IJPCP. 22(4): 300-307.
- 22. Davis D, Shaver PR, Widaman KF, Vernon ML, Follette WC, Beitz K. (2006). "I can't get no satisfaction": Insecure attachment, inhibited sexual communication, and sexual dissatisfaction. Personal Relationships. 13(4): 465-483.
- Santtila P, Wager I, Witting K, Harlaar N, Jern P, Johansson A, et al. (2007). Discrepancies between sexual desire and sexual activity: Gender differences and associations with relationship satisfaction. J Sex Marital Ther. 34(1): 31-44.
- 24. Bean FD, Curtis RL, Marcum JP. (1997). Familism and marital satisfaction among Mexican Americans: The effects of family size, wife's labor force participation, and conjugal power. Journal of Marriage and the Family. 39(4): 759-767.
- 25. Qavam M, Tasbihsazan R. (2008). Prevalence and Diversity of Sexual Disorders among Male and Female Patients in a Family Health Care Clinic, Tehran Studies in Medical Sciences. 18(4): 634-639.

- Mathews Journal of Gynecology and Obstetrics
- Sims KE, Meana M. (2010). Why did passion wane? A qualitative study of married women's attributions for declines in sexual desire. J Sex Marital Ther. 36(4): 360-380.
- 27. Hayes RD, Dennerstein L, Bennett CM, Sidat M, Gurrin LC, Fairley CK. (2008). Women's sexual health: Risk Factors for Female Sexual Dysfunction in the General Population: Exploring Factors Associated with Low Sexual Function and Sexual Distress. J Sex Med. 5(7): 1681-1693.
- 28. Levine SB. (2002). Reexploring the concept of sexual desire. J Sex Marital Ther. 28(1): 39-51.
- 29. Hegazy AA, Al-Rukban MO. (2012). Hymen: facts and conceptions. The Health. 3(4): 109-115.
- Hegazy A. (2015). Repetitive Anal Intercourse as a Potential Risk for Renal Failure. Academia Anatomica International. 1(1): 1-2.
- Hegazy AA, & Hegazy MA. (2019). Anal intercourse and idiopathic infertility: Anatomical considerations and authors' perspective. Trends Med. 19(1): 1-3.
- 32. Greenberg JS, Bruess CE, Oswalt SB. (2014). Exploring the dimensions of human sexuality. USA: Jones & Bartlett Publishers.
- Darling CA, Davidson JK, Cox RP. (1991). Female sexual response and the timing of partner orgasm. J Sex Marital Ther. 17(1): 3-21.
- Chen YY, Subramanian S, Acevedo-Garcia D, Kawachi I. (2005). Women's status and depressive symptoms: a multilevel analysis. Soc Sci Med. 60(1): 49-60.
- Brommer JE, Merilä J, Kokko H. (2002). Reproductive timing and individual fitness. Ecology Letters. 5(6): 802-810.

- 36. Brody S. (2006). Blood pressure reactivity to stress is better for people who recently had penile-vaginal intercourse than for people who had other or no sexual activity. Biol Psychol. 71(2): 214-222.
- Gove WR, Style CB, Hughes M. (1990). The effect of marriage on the well-being of adults: A theoretical analysis. Journal of family issues. 11(1): 4-35.
- Levenson RW, Carstensen LL. (1993). Gottman JM. Longterm marriage: Age, gender, and satisfaction. Psychol Aging. 8(2): 301-313.
- 39. Samani L. (2018). Guarantee of Women's reproductive right. Womens Strategic Studies. 20(78): 7-27.
- Tusi J. (1987). Al-Tahzib Al-Ahkam. Iran: Tehran Islamic Library.
- 41. Tusi J. (1980). Alnahaya fi Mojarrad Al Fiqh and Al Fatawa. Beirut, Lebanon: Al-Arab Book Gallery.
- 42. Ameli Z. (1990). Al-Rawdh Al-Bahia in the explanation of the Al- Damascus Allomeh. Qom, Iran: Davari Bookstore.
- 43. Mutahhari M. (1981). The rights of women in Islam. Tehran, Iran: World Organization for Islamic Services.
- 44. Ameli Z. (1993). Masalek Al-afham. Qom, Iran: Islamic Knowledge Foundation.
- DeRose LF, Ezeh AC. (2010). Decision-making patterns and contraceptive use: evidence from Uganda. Popul Res Policy Rev. 29(3): 423-439.