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Original Article



Married Women's and Men's Experiences Regarding the Concept of Sexual Desire: A Qualitative Research

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Abstract

Background: Sexual desire has biological, individual, interpersonal, and social dimensions. The question raised here is whether being a woman or a man influences sexual desire or whether gender differences contribute to it.

Objectives: This study aimed at exploring married women's and men's experiences regarding the concept of sexual desire.

Methods: This study conducted by a qualitative design and with a thematic analysis method. Data were collected using semi structured-interviews (with an equal number of men and women) chosen through a purposeful sampling method. After being conducted, each interview was transcribed verbatim and read several times to achieve the sense of the whole and then, the key terms were highlighted as codes. After the initial classification of the codes, subthemes and main themes gradually appeared.

Results: Two main themes were developed as follows: "feeling of arousal with the goal of achieving orgasm" and "individual conditions and relational skills strengthening sexual desire."

Conclusions: Participants considered physical, psychological, and interpersonal dimensions of sexual desire. They mostly intended sexual intercourse and orgasm during the feeling of sexual desire. The skills of couples to interact with each other and physical and psychological readiness for an individual to have sexual relationships strengthened sexual desire. Any evaluation and treatment in the field of sexual desire should be comprehensive and consider all contextual, individual, and interpersonal aspects of each society.

Keywords: Hypoactive Sexual Desire Disorder, Iran, Qualitative Research

1. Background

Sexual desire is an idiosyncratic concept (1). Many researchers have defined sexual desire as a tendency or incentive to participate in sexual activities (2). Sexual desire has biological, individual, interpersonal, and social dimensions (3). Despite the current notion that men tend to express sexual desire more than women, it is not clear whether gender influences sexual desire or even gender differences influence the assessment of sexual desire (4). There is no agreement whether sexual desire should be understood, evaluated, and treated in individuals or couples (5). However, it is important to understand how couples actually experience sexual desire. Several types of research have studied sexual desire mostly among women. Some of these studies have focused on a sexual desire among

adolescent girls (6, 7). Moreover, others have focused on women in the reproductive age (1) or post-menopause period (8). Therefore, a few studies have been conducted on arousal and sexual desire among men (9).

Disturbances of sexual desire are one of the causes of sexual dysfunction (3). Deficiency or absence of sexual desire and fantasies for sexual activities can lead to individuals' distress or interpersonal difficulties, which is known as 'hypoactive sexual desire disorder' (HSDD) (10). This disorder can affect both women and men, but studies have focused mainly on women (11). The prevalence of HSDD in Iranian women who complain of sexual problems is 65.8% with a prevalence of 35% in the general population (12). Another disorder that closely is related to HSDD is sexual arousal disorder, especially in women. According to DSM-5, this disorder is combined with sexual desire disorder and

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named female sexual interest/arousal disorder (13). The prevalence of sexual arousal disorders in Iranian women with gender-related complaints is 59.6% and in the general population, it is 33.8%, which are almost the same as global statistics (12). According to the National Health and Social Life Survey, 14% to 17% of men aged 18 to 59 are suffering from a low sexual desire for several months within the last year (11).

Sexual disorders are one of the most important causes leading to divorce in Iran (14). Studies have shown that there is a positive relationship between sexual desire and marital satisfaction (15). In addition, marital satisfaction is one of the most important factors influencing the sustainability and survival of marital life (16).

Given the importance of family stability and the impact of sexual desire, it is necessary to explain the concept of sexual desire from the perspectives of women and men. On the other hand, a few studies have been conducted on this issue. We chose a qualitative design for this research because of the sensitive nature of the subject. A qualitative method is appropriate for uncovering the complex human issues and what lies behind them. It is beneficial in states where there is little pre-existing knowledge and the issues are complex (17).

2. Objective

This study with a qualitative approach was designed in response to the question of how married women and men experience the concept of sexual desire.

3. Materials and Methods

This qualitative research was done using the thematic analysis method. The participants comprised 14 married individuals (7 women and 7 men who were couples). They were in the reproductive age, had the ability to communicate fluent in Persian, and lived in Tehran. They had a minimum of one year of legal marital life and were interested in participating in this research. In addition, they did not have chronic diseases leading to sexual dysfunction. The participants were excluded from the study if they did not want to record audio or continue the interview.

After obtaining permissions from the Ethics Committee affiliated to Isfahan University of Medical Sciences with the number IR.MUI.REC.1394.3.488, the researcher referred to Isfahan health care centers and two private sexual health clinics in Tehran and Isfahan. The interviewer was a sexual health therapist and had sufficient skills in communicating with the participants. Those people who had research inclusion criteria were invited to participate in the study.

Sampling was done purposefully. Subsequently, sampling continued with a maximum variation until data saturation reached. This is the point when additional input from new participants no longer changes the researchers understanding of the concept (18).

The researcher gained the trust of those willing to participate in the study by briefing them on the study objectives. Then, they determined their convenient time and place for the interviews. Before the interviews, written and oral informed consent was obtained. They were assured of confidentiality and anonymity throughout the study process and that they could withdraw from the study at any time without any effect on their caring process.

At the beginning of the study, the participants were evaluated for sexual desire through clinical interviews. Of the 14 participants, 11 had a normal sexual desire and three of the participating women had a positive history of hypoactive sexual desire disorder diagnosed by the physician but were not undergoing treatment. Then, 14 in-depth individual semi-structured interviews were conducted. In addition, six complementary individual interviews were conducted to improve the depth of the collected data. The interviews were tape-recorded after obtaining permissions from the participants. The duration of the interviews was adjusted according to the willingness of the participants that varied between 30 and 135 minutes with an average of 70 minutes.

The interviews started with a general question: "What do you think about your sexual desire?" and continued with probing questions such as: "Could you explain your experiences about it?", "What do you feel at the moment of sexual desire and what do you think about?" and

"What factors increase your desire?"

Data analysis was performed using the six steps proposed by Braun and Clarke (19). After being completed, each interview was transcribed verbatim and read several times to achieve the sense of the whole. In the second stage, key terms were highlighted as codes. Totally, 560 codes were extracted. The codes were sorted based on the development of potential themes. After the initial classification of the codes, subthemes and main themes gradually appeared. The criteria for such classifications were the internal consistency and external heterogeneity of the codes. The themes were identified and named, so the extract of the data for each theme was identified. The research report was prepared and narrative related to each theme was expressed.

Member checking by some participants and peer checking by qualitative experts helped with the credibility of the data. Dependability was also ensured by the complete and continuous recording of the researchers' activities on how to collect and analyze data and provide excerpts from the transcriptions. A brief report of the interviews was also provided to a number of couples who did not participate in this study and their perspectives were sought in terms of similarity and differences with the common social notions of the study topic. In addition, a number of interviews, codes, and classifications were provided to researcher colleagues who were familiar with qualitative research that approved our findings and methodological processes.

4. Results

In this study, 14 participants consisting of seven eligible women and seven men were interviewed (Table 1).

By analyzing the participants' description, the two main themes emerged, "feeling of arousal with the goal of achieving orgasm" and "individual conditions and relational skills strengthening sexual desire." In addition, five subthemes and their 11 sub-subthemes were described using the quotations of the participants (Box 1).

4.1. The First Main Theme: A Feeling of Arousal with the Goal of Achieving Orgasm

The analysis of the experiences of women and men in relation to the concept of sexual desire led to the development of this theme. It referred to physical, psychological, and interpersonal dimensions of sexual desire. Most participants had goal-oriented sexual relationships and intention to engage in sexual intercourse and reach sexual orgasm.

4.1.1. Feelings of Psychophysiological Arousal

The participants mainly described sexual arousal when they were asked about sexual desire. They felt physical and psychological excitements when they experienced sexual desire describing the sense of heat and energy or physical changes such as increased heart rate and blood flow to the genital system. They mostly considered sexual desire to be an emotional and exciting relationship.

4.1.1.1. The Feeling of Physical Arousal

Some women and men used phrases such as 'warm', 'hot', and 'fiery' to describe their high sexual desire. Some also used phrases such as 'cold' to describe their low sexual tendency. They pointed out the feeling of hotness and warmth during arousal when they described sexual desire. Some also referred to their thoughts and expressed that at that moment, they would think about getting energy from sexual relationships.

Participant 5, a 31-year-old man said:

"I feel happy at that moment; it is a joy, my reason is that I am taking energy, I get fresh, I am happy, and I reach calm."

Some women participants also pointed out the feeling of genital hyperemia and lubrication during libido. They felt an increase in heart rate at that moment.

Participant 6, a 31-year-old woman said:

"Sexual desire has a great sense of humor that I have about my husband. At that moment, I feel very warm. My heart rate is increased and I become a little bit hot."

4.1.1.2. The Feeling of Psychological Arousal

According to female participants, sexual desire was beyond a task and began with an emotional feeling. The person felt the desire to have a sexual relationship with the intimacy and enjoying the warmth and affection with the spouse.

Participant 8, a 37-year-old woman said:

"Sexual affection is mainly emotional... that starts with emotional feelings."

The man participants described an incredible and attractive sensation that was accompanied by joy and euphoria. It was similar to the emotional experience of solving a complex puzzle.

Participant 3, a 33-year-old man said:

"The feeling that I have is a thrilling sense. It is a thrill and puzzle feeling that I have to solve and this is very interesting."

Most women and men felt the need for intimacy, being togetherness, and extremely intense attraction to each other. They wanted to have foreplay, embrace, and enjoy each other.

Participant 10, a 40-year-old woman said:

"The feeling that I have at that moment is an extremely intense attraction that I find my spouse and that's most fantasy for me is the foreplay part. In fact, the most exciting part I am going to take ... hug my husband... he hugs me ... touch him ... feel his warmth... kisses me!"

4.1.2. Goal-Oriented Sexual Relationships

More than half of the women and men thought of having a sexual encounter and orgasm when they had sexual desire. They had sexual relationships based on the goal of achieving orgasm, which had a particular importance.

4.1.2.1. The Motivation for Achieving Orgasm

Half of the women and men during sexual desire experienced or imagined the desire to have a sexual encounter or orgasm. They tended to talk about sexual things, use sexual expressions, or make sexual jokes during sexual arousal. They decided to establish a full sexual relationship or thought at that moment about the previous sexual intercourse that they had with their spouses.

Participant 9, a 43-year-old man said:

Table 1. The Characteristics of the Participates Participant Number Sex Age (y) **Education Level** Occupation Number of Children **Duration of Marriage** Taxi driver 1 Man 52 Diploma 27 2 Woman 50 Diploma House wife 2 27 3 Man 33 Bachelor degree Employee n Woman 28 Bachelor degree Photographer 0 5 Man 31 Diploma Self-employed n 6 Woman 31 Bachelor degree Hair dresser O 7 Man 38 Bachelor degree Employee 0 Ph.D. student Laboratory chief Woman 37 0 Man Bachelor degree Employee 2 9 43 10 Woman Ph.D. student Employee 40 2 11 Man 37 Under diploma Self-employed 0 Diploma Employee 12 Woman 35 0 13 Man 35 Bachelor degree Self-employed 0 14 Woman 21 Diploma House wife

iox 1. Main Themes, Subthemes, and Sub-Subthemes Developed in This Study Main Themes	
;	1.1. Feelings of psychophysiological arousal
	1.1.1. The feeling of physical arousal
	1.1.2. The feeling of psychological arousal
	1.2. Goal-oriented sexual relationships
	1.2.1. The motivation for achieving orgasm
	1.2.2. Orgasm as a reward for sexual relationships
2. Individusire	dual conditions and relational skills strengthening sexual
:	2.1. Spouse's attraction and relational skills build sexual desire
	2.1.1. Spouse's sexual skills
	2.1.2. Spouse's communicational skills
	2.1.3. Attractiveness and characters of the spouse
	2.2. Individual readiness for sexual relationships
	2.2.1. Physical readiness for sexual relationships
	2.2.2. Psychological readiness for sexual relationships

"In my opinion, when someone decides to have a sexual relationship with the spouse, sexual desire arises; as he/she likes talking about sexual issues, has sexual relationships with the spouse, enjoys touching the spouse and eventually has a perfect sexual intercourse."

4.1.2.2. Orgasm as a Reward for Sexual Relationships

Most men and women experienced or imagined the strong sense of physical contact, touch, arousal, and orgasm. In addition, they thought of sexual intercourse and orgasm for themselves or their partners. They saw the achievement of an orgasm as a reward for the sexual relationship with the hope of receiving this reward again and again and reaching this pleasurable goal. They considered sexual desire as an unavoidable need. Half of men and women suggested that sexual orgasm has a positive impact on the sexual relationship. Some men and women stated that they felt emotionally more closeness to their spouses after reaching sexual orgasm. Some men stated that they had a feeling of power, strength, and masculinity after that their wives reached orgasm.

Participant 6, a 31-year-old woman said:

"Sexual desire is a great sense of humor that I have about my husband. I love this sense and I am thirsty to be at that moment and I want to be satisfied with him."

4.2. The Second Main Theme: Individual Conditions and Relational Skills Strengthening Sexual Desire

The analysis of the experiences of women and men in relation to factors influencing sexual desire led to the extraction of this theme. In the dimension of interactions, the attractiveness of couples for each other and in the individual dimension, the physical and psychological readiness of the individual for sexual relationships were factors related to the enhancement of sexual desire.

4.2.1. Spouse's Attraction and Relational Skills Build Sexual Desire

According to the participants, the spouse's interpersonal skills in sexual interactions, interpersonal relationships in life, visual and physical attractions and the individual characteristics of couples led to the improvement of sexual desire.

4.2.1.1. Spouse's Sexual Skills

Most participating women and men said that sometimes they might have no sexual desire, but in response to the sensual, erotic and sexual behaviors, and seductive words of the spouse, or their proximity to them, it was built.

According to the women and men, non-verbal sexual interactions such as non-verbal sexual jokes, the initiation of sex by women, and being sexually active led to an increase in the men's sexual desire. Sexual relationships based on the demands of partners, the observation of the enjoyment of the other party and the feeling of satisfaction resulting from it also increased sexual desire among couples.

Participant 9, a 43-year-old man said:

"I often like that my wife is the initiator and so-called director of sexual relationships, and treats me as an object in the relationship! And I do what she likes; she directs me; she is very exciting!"

Most men and some women stated that expression sexual desire by using gestures and sexual behaviors and seductive words shaped sexual desire among men. Women liked to raise their sexual desire as they approached their husbands and used the sense of humor and erotic behaviors. One of the male participants pointed to the enormous impact of his wife's seduction on his sexual desire.

Participant 3, a 33-year-old man said:

"One thing that I'm exciting with is seduction by my wife; her tranquility and temptation, her sound that goes up and down and the strokes that begin to have more effects than other things."

Men and women argued that verbal sexual interactions such as talking about sexual relationships and their needs and interests, information transfer to each other about their body and acts, prioritization of things and applying sexually transmitted words increased sexual desire. They also stated that sexual relationships should be at the time of need, not based on a predetermined schedule. The expression of affection or sexually suggestive words creating an excellent and effective relationship stimulated sexual desire, especially in women.

Participant 9, a 43-year-old man said:

"One thing that progresses our sexual relationships was that we talked a lot about our idea and desire and gave each other information about our body."

According to some women and men, the proper response to each other sexual dysfunction and considering it a temporary situation (such as lack of female orgasm or premature ejaculation in some sexual encounters) instead of protesting and humiliating each other, prevent negative effects on sexual desire. If women respond appropriately to some sexual requests of men, such as anal sex, and try to satisfy their demands as far as they do not get harassed or hurt physically, so men's curiosity will be reduced about what they are forbidden from. According to one male participant, a sexual relationship should be enjoyable for both sides. For this reason, despite certain sexual preferences such as oral or anal sex, woman's sexual capacity and favorite sexual activities should be recognized. Sometimes, men's expectations of sexual relationships were beyond the women's abilities.

Participant 10, who was his wife said:

"My husband like many other men likes anal sex, but it is not really good for me!" However, I tried it once, but I did not enjoy it because it was very painful. When my husband realized that I cared about his demand, but it was really painful and could have complications for me, he avoided it!"

Participating women and men also stated that interactions such as sitting beside the spouse, caressing, touching, kissing, hooking each other, making sexual jokes, and touching the erogenous zone build sexual desire.

Participant 13, a 25-year-old man said:

"Whenever I hold my wife in my arms, that feeling comes to me. It is not for the sake of sexual desire that I hug her, but whenever I hug her, this feeling is created."

A woman and a man as a married couple in separate interviews stated that couples' efforts to meet their sexual aspirations and acquire sexual skills improved the quality of sexual relationships. In addition, couples can practice and gain experiences by making the spouse to reach orgasm, prolonging sexual intercourse with delaying ejaculation, and acquiring the ability to achieve multiple orgasms in a sexual relationship. Spouse's support, mutual interests, and satisfaction of each other and desire to maximize pleasure were the main motivators for prolonging sexual intercourse and gaining these abilities.

Participant 13, a 43-year-old man said:

"The experiences and abilities that I achieved by practice to delay ejaculation helped me much more than the use of the drug. I am empowered to be twice satisfied with each sexual relationship! That is, when I get satisfied once, I still have an erection and can continue the sexual intercourse to reach the second orgasm."

According to some women and men, variations in physical features and sexual activities like dressing, makeup, using perfumes, genital shaving, and the model of fore-

play and sexual positions strengthened sexual desire.

Participant 6, a 31-year-old woman said:

"My husband and I tried diversities in our sexual relationships. I know that my husband likes sexy pajamas and clothes; I always want to have some new things for him. I wear a new outfit, change the look of the model, use perfumes, makeup, or come up with shoes to the bed."

4.2.1.2. Spouse's Communicational Skills

Most women and some men said that love for the spouse, emotional closeness to the partner, exchanging feelings, and hearing affectionate words increased sexual desire. Expressing affection throughout the day, having time to talk to each other, defining and praising the spouse, and making physical contact without sexual relationships could increase sexual desire. The emotional conversation between couples increased the level of intimacy and closeness and developed a sense of calm and satisfaction.

Participants 12, a 35-year old woman said:

"I prefer a verbal relationship! A word that is emotional or being praised; sexual desire is made in me at that moment!"

Most men and women stated that a sincere and intimate relationship between couples increased sexual desire. The couples were more comfortable in an intimate relationship, made more satisfying sexual relationships, and were able to talk about their sexual problems and dissatisfaction.

Participant 6, a 31-year-old woman said:

"My husband and I talk a lot of times and have a good conversation with each other; for example, we are talking to each other from the morning and even when we are at work. I say to my husband that I miss you; I like to hug you and kiss you. Our relationship becomes more intimate and much closer together. We feel more relaxed and enjoy each other."

The type of interaction and respectful behavior of the spouse influenced sexual desire from the participant's perspectives. Respecting each other's emotions and privacy, maintaining respect for each other in the community, giving importance to each other's wishes, mutual understanding, lack of long coercions, helping one another especially at home, allowing each other to do favorite activities, and advancing the work and educational goals of couples increased sexual desire. Participant 1, a 50-year-old woman said:

"My wife and I care about each other's feelings and desires, respect each other, do not offend each other, and consider each other personality. Well, that is how I feel; all of these have a positive effect on our desire for a sexual relationship."

Some women and men said that having a good time together, spending time with each other and having shared recreations such as playing or watching a movie would enhance sexual desire. Participant 5, a 31-year-old male said:

"When my wife and I traveled to another county, we were happy! And enjoyed, every day we went shopping, we went to different places, we saw new people, weird foods, it all had an effect on us; we were so happy and had a pleasant ending with sexual relationships."

4.2.1.3. Attractiveness and Characters of the Spouse

Some women and men considered the spouse's appearance important for sexual desire. Beautiful face, tall and elegant limbs could increase sexual desire. Some women experienced high sexual desire through the smell of their husbands' body. Almost all men experienced the same through visual stimuli such as hair adornment, thick make-up, and the use of sexy dressing by their spouses. According to most couples, adornment and tidy not only improved the sexual desire of the spouse but also by increasing self-esteem and individual energy levels, increased the person's sexual desire. Participant 5, a 31-year-old man said:

"The way that my wife dresses up is very important to me. When she wears sexy costumes for me... or uses thick make-ups ... I often say to myself 'what a beautiful wife I have!' So, it affects my sexual desire!"

According to the most women and men, personal hygiene and bathing before sexual relationships, use of perfume and brushing, pleasant smell of the mouth, wearing clean clothes, and shaving genital area increased sexual desire. Participant 14, a 21-year-old woman said:

"I always try to keep up with my hygiene, but it is very important to me that my spouse has a good smell, brushes, and cleans up. The smell of my spouse is very important to me, for example, when he uses perfume, I am attracted to him, but when he is not clean, I avoid him."

4.2.2. Individual Readiness for Sexual Relationships

According to the participants, couples' readiness in terms of physical and mental was important to have a sexual relationship and level of sexual desire.

4.2.2.1. Physical Readiness for Sexual Relationships

According to some women, physical flourishing and lack of fatigue and not having a busy life played an important role in improving sexual desire. Participant 4, a 28-year-old woman said:

"It is very important to me not to be tired during sexual relationships. It is important for me to have enough time to have sexual relationships, but my fatigue is far more important than time."

According to some women, hormonal changes in menstrual periods influenced the level of sexual desire, and they felt the most sexual desire during ovulation. Participant 10, a 40-year-old woman said:

"Hormonal changes that occur during the menstrual cycle influence my sexual desire; around the ovulation, the need for sexual relationships is much higher."

4.2.2.2. Psychological Readiness for Sexual Relationships

According to the women and men, having a positive body image of themselves and having feelings of pleasure about their limbs contributed to sexual desire. Participant 3, a 33-year-old man said:

"When I like my body and feel very good looking, I look at myself in the mirror; when I see that my body is like the ones see in journals, I love another person to see this and enjoy it."

According to some men and women, mental relaxation and fitness before sexual relationships, the quiet environment during sexual activities, and the lack of intrusive sounds affected the level of sexual desire. Participant 5, a 31-year-old man said:

"I always try to mentally prepare myself and my wife for sexual relationships. I definitely cut off the phone and the mobile phone to make the environment calm. I also try to comply with the peace I should have during sexual relationships."

Some men and women stated emotional excitement created by having a positive mood, participating in weddings or achieving success in work and income enhanced sexual desire. On the other hand, some women and men stated that after a conflict or in tragic situations such as the loss of loved ones, their sexual desire increases. Participant 14, a 21-year-old woman said:

"When I am happy when I am energetic, I feel that my sexual desire is increased! For example, when I go to a party, I am ready for sexual relationships at my home; I feel very well and my energy is high."

5. Discussion

This study examined the experiences of women and men regarding the concept of sexual desire. The data analysis led to the development of two main themes: "feeling of arousal with the goal of achieving orgasm" and "individual conditions and relational skills strengthening sexual desire." Sexual desire for Iranian women and men was a multifaceted sense. They considered physical, psychological, and interpersonal dimensions of sexual desire and most of them intended sexual intercourse and orgasm during the feeling of sexual desire. The skills of couples to interact with sexual communication, interpersonal relationships, visual attraction, and characteristics of the spouse, the physical and psychological readiness for sexual relationships played an important role in enhancing sexual desire.

In this study, women and men used their physical feelings for describing their sexual desire. Goldhammer and

McCabe pointed out that some individuals use cognitive processes such as fantasies and their own imaginations to describe sexual desire. In addition, some used physical experiences and emotions such as the feeling of being alive, needle-punching, or slippery vagina to describe sexual desire (1).

Some women and men use a sense of excitement and a tendency for relaxation and intimacy and an emotional closeness to explain sexual desire. Basson suggested that the desire to increase emotional closeness and intimacy or self-disclosure to a sexual partner might provide grounds for engaging in sexual activities for women (20). However, the other study showed that sexual desire is more closely related to interpersonal relationships in women than in men (2). In this study, in addition to women, some men also described their sexual desire through affection, love, and intimacy. In a study by Graziottin on sexual differences and similarities between men and women, satisfaction or dissatisfaction after sexual relationships in both genders was based on physical, emotional, and cognitive emotions. In addition, the perceived sexual experiences affected positive or negative feedback and increased or suppressed sexual responses (21). In a study by Janssen on male sexual arousal, it was found that sexual arousal was associated with positive and negative emotional states in a complex way, and positive emotions facilitated sexual arousal in men (9).

The results showed that half of the women and men liked to engage in sexual relationships for orgasm during the feeling of sexual desire. They made a sexual relationship based on the goal of achieving orgasm. In this regard, Meston and Buss (22) and Kennair et al. (23) showed that one of the most common reasons for sexual relationships was to reach physical pleasure. In addition, in this study, the desire to have goal-oriented sexual relationships was one of the main concerns of most women and men. However, an excessive emphasis on orgasm damages sexual pleasure and reduces it. It is suggested that for sexual pleasure, goal-oriented sexual activity is avoided, and instead of focusing on orgasm and perfect intercourse performance, the non-intercourse scenario or a sensual scenario for sexual pleasure is considered (24, 25).

This study revealed that sexual desire for some women was an obscure and intuitive sense. Most participants in this research said that sometimes they might have no sexual desire, but in response to the sexual desire of the spouse, the affectionate or tempting behavior of the spouse, or the proximity with the spouse, sexual desire would be built. Almost all men with visual stimuli from their wives felt sexual desire. Rupp and Wallen have also been found out men responded to visual sexual stimuli more than women (26). Goldhammer and McCabe found

that responsive sexual desire in women was evident in participants' narratives. In addition, women reported that many environmental and exterior factors had the potential to trigger sexual desire, including visual, hearing, and tactile. In addition, most women considered their sexual partner as the first person to activate their sexual desire (1). Basson believed that women's sexual response was often a reaction to the sexual partner's interest rather than being directed by their sexual desire (20). In this study, most of the participants had long-term marital relationships, most women were almost inactive, and they were more likely to accept sexual stimulation rather than express their own sexual desire. Basson sexual response model (27) also confirms this finding.

In this study, emotional and intimate relationships with the spouse, having mutual respect and good times together increased sexual desire. McCarthy and colleagues have noted, in their book, an intimate marriage facilitates sexual desire. The essence of intimacy is the feeling of emotionally open, securely attached, and valued (28).

For most women and men, personal hygiene and bathing before sexual intercourse, the use of perfume and brushing increased sexual desire in the couples. Janssen et al. found that one of the most common characteristics of sexual partners that led to the arousal of men was appropriate features and physical characteristics. In addition, men reported that an unpleasant or pleasant scent played an important role in reducing or exacerbating sexual arousal (29). Conversely, in this study, it was important for both men and women.

Some women and men stated that having a positive body image had a role in arising sexual desire. Janssen et al. found that women's self-esteem or feeling toward the body influenced male sexual arousal (29). These findings are consistent with those of Graham et al.'s study indicating that women who have less arousal have negative feelings about themselves and their appearance (30).

Some women and men in this study stated that their sexual desire increased in positive and negative emotional excitement situations. This increased inclination occurred when some had good emotional conditions and even in a tragic situation such as lost loved ones. Janssen et al. showed that mood played an important role in male sexual desire and arousal. While some men reported that positive mood enhanced sexual desire and negative mood inhibited it, some men showed a negative mood such as stress and anger facilitated sexual desire or at least had no effect on sexual arousal (29). In the study by Graham et al. on women, the same results were reported indicating that the negative mood in some women increased and in some women inhibited sexual desire (30).

5.1. Conclusion

The findings of this study showed that sexual desire in Iranian married women and men is a multifaceted concept. They considered physical, psychological, and interpersonal dimensions of sexual desire and most of them described sexual desire as the tendency for goal-oriented sexual relationships to reach orgasm. In addition, the findings of this study showed that individual and relational skills of couples had an effective role in increasing sexual desire. Therefore, any evaluation and treatment in the field of sexual desire should be comprehensive and consider all contextual, individual, and interpersonal aspects of each society.

5.2. Limitations

This paper focused on the concept of sexual desire from the perspectives of a limited number of Iranian married and Muslim men and women living in Tehran and Isfahan. Therefore, the perspectives of all Iranians have not been reflected in this study. Due to the nature of the sexual issues and cultural taboos in the community, participating in research was difficult for people. It was difficult for participants to express some information and experiences. For this reason, the researcher tried to communicate with them effectively, and all the interviews were done individually.

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Footnotes

Authors' Contribution: All Authors were responsible for most of the study including data collection, data derivation, statistical analysis, interpretation of results, preparation of tables, and manuscript drafting and writing.

Declaration of Interest: All authors declare that they have no conflict of interests.

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References

- Goldhammer DL, McCabe MP. A qualitative exploration of the meaning and experience of sexual desire among partnered women. Can J Hum Sex. 2011;20(1-2):19-29.
- Impett EA, Strachman A, Finkel EJ, Gable SL. Maintaining sexual desire in intimate relationships: The importance of approach goals. *J Pers Soc Psychol.* 2008;94(5):808–23. doi: 10.1037/0022-3514.94.5.808. [PubMed: 18444740].
- 3. Teimourpour N, Moshtagh Bidokhti N, Pourshahbaz A, Bahrami Ehsan H. Sexual desire in Iranian female university students: Role of marital satisfaction and sex guilt. *Iran J Psychiatry Behav Sci.* 2014;8(4):64–9. [PubMed: 25798176]. [PubMed Central: PMC4364479].
- Dawson SJ, Chivers ML. Gender differences and similarities in sexual desire. Cur Sex Health Rep. 2014;6(4):211–9. doi: 10.1007/s11930-014-0027-5.
- McCarthy B, Wald LM. Sexual desire and satisfaction: The balance between individual and couple factors. Sex Relation Ther. 2012;27(4):310– 21. doi: 10.1080/14681994.2012.738904.
- Impett EA, Tolman DL. Late adolescent girls' sexual experiences and sexual satisfaction. J Adolesc Res. 2016;21(6):628-46. doi: 10.1177/0743558406293964.
- Fortenberry JD. Puberty and adolescent sexuality. *Horm Behav*. 2013;64(2):280-7. doi: 10.1016/j.yhbeh.2013.03.007. [PubMed: 23998672]. [PubMed Central: PMC3761219].
- Wood JM, Mansfield PK, Koch PB. Negotiating sexual agency: Postmenopausal women's meaning and experience of sexual desire. Qual Health Res. 2007;17(2):189-200. doi: 10.1177/1049732306297415. [PubMed: 17220390].
- Janssen E. Sexual arousal in men: A review and conceptual analysis. Horm Behav. 2011;59(5):708-16. doi: 10.1016/j.yhbeh.2011.03.004. [PubMed: 21397602].
- Lermann J, Haberle L, Merk S, Henglein K, Beckmann MW, Mueller A, et al. Comparison of prevalence of hypoactive sexual desire disorder (HSDD) in women after five different hysterectomy procedures. Eur J Obstet Gynecol Reprod Biol. 2013;167(2):210-4. doi: 10.1016/ji.ejogrb.2012.12.005. [PubMed: 23313224].
- Brotto LA. The DSM diagnostic criteria for hypoactive sexual desire disorder in men. *J Sex Med.* 2010;7(6):2015–30. doi: 10.1111/j.1743-6109.2010.01860.x. [PubMed: 20929517].
- Ramezani MA, Ahmadi K, Ghaemmaghami A, Marzabadi EA, Pardakhti F. Epidemiology of sexual dysfunction in Iran: A systematic review and meta-analysis. *Int J Prev Med.* 2015;6:43. doi: 10.4103/2008-7802.157472. [PubMed: 26097672]. [PubMed Central: PMC4455123].
- Binik YM, Hall KS. Principles and practice of sex therapy. New York: Guilford Publications; 2014.
- Gheshlaghi F, Dorvashi G, Aran F, Shafiei F, Najafabadi GM. The study of sexual satisfaction in Iranian women applying for divorce. *Int J Fertil Steril*. 2014;8(3):281-8. [PubMed: 25379157]. [PubMed Central: PMC4221515].

- Javed S, Gul T. Gender differences: Association of sex drives and marital satisfaction. Am J Appl Psychol. 2016;4(2):31-8.
- Yeh HC, Lorenz FO, Wickrama KA, Conger RD, Elder GH Jr. Relationships among sexual satisfaction, marital quality, and marital instability at midlife. *J Fam Psychol*. 2006;20(2):339–43. doi: 10.1037/0893-3200.20.2.339. [PubMed: 16756411].
- Khalesi ZB, Simbar M, Azin SA. A qualitative study of sexual health education among Iranian engaged couples. *Afr Health Sci.* 2017;17(2):382–90. doi: 10.4314/ahs.v17i2.12. [PubMed: 29062333]. [PubMed Central: PMC5637023].
- Tran VT, Porcher R, Tran VC, Ravaud P. Predicting data saturation in qualitative surveys with mathematical models from ecological research. *J Clin Epidemiol*. 2017;82:71-78 e2. doi: 10.1016/j.jclinepi.2016.10.001. [PubMed: 27789316].
- Braun V, Clarke V. Using thematic analysis in psychology. Qual Res Psychol. 2006;3(2):77-101. doi: 10.1191/1478088706qp063oa.
- Damjanovic A, Duisin D, Barisic J. The evolution of the female sexual response concept: Treatment implications. Srp Arh Celok Lek. 2013;141(3-4):268-74. [PubMed: 23745356].
- Graziottin A. Similarities and differences between female and male sexual functions and dysfunctions. J Mens Health Gend. 2004;1(1):71–6. doi:10.1016/j.jmhg.2004.03.011.
- Meston CM, Buss DM. Why humans have sex. Arch Sex Behav. 2007;36(4):477-507. doi: 10.1007/s10508-007-9175-2. [PubMed: 17610060].
- 23. Kennair LEO, Grøntvedt TV, Mehmetoglu M, Perilloux C, Buss DM. Sex and mating strategy impact the 13 basic reasons for having sex. *Evol Psychol Sci.* 2015;1(4):207-19. doi: 10.1007/s40806-015-0024-6.
- McCarthy BW, Metz ME. The "good-enough sex" model: A case illustration. Sex Relation Ther. 2008;23(3):227-34. doi: 10.1080/14681990802165919.
- Qualls C. The prevention of sexual disorders: Issues and approaches. New York: Springer Science and Business Media; 2013.
- Rupp HA, Wallen K. Sex differences in response to visual sexual stimuli: A review. *Arch Sex Behav.* 2008;37(2):206-18. doi: 10.1007/s10508-007-9217-9. [PubMed: 17668311]. [PubMed Central: PMC2739403].
- Basson R. Using a different model for female sexual response to address women's problematic low sexual desire. J Sex Marital Ther. 2001;27(5):395-403. doi: 10.1080/713846827. [PubMed: 11554199].
- 28. Weeks G, Gambescia N. Hypoactive sexual desire: Integrating couple and sex therapy. New York: WW Norton; 2002.
- Janssen E, McBride KR, Yarber W, Hill BJ, Butler SM. Factors that influence sexual arousal in men: A focus group study. *Arch Sex Behav*. 2008;37(2):252–65. doi: 10.1007/s10508-007-9245-5. [PubMed: 18040768].
- Graham CA, Sanders SA, Milhausen RR, McBride KR. Turning on and turning off: A focus group study of the factors that affect women's sexual arousal. *Arch Sex Behav.* 2004;33(6):527–38. doi: 10.1023/B:ASEB.0000044737.62561.fd. [PubMed: 15483367].