

Comparison of the Effectiveness of Feminist Therapy with Sex Therapy Based CBT on Sexual Intimacy in Betrayed Women

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Abstract

The Present Study Aims to Comparison of the effectiveness of feminist therapy (FT) with sex therapy on sexual intimacy in female. This Study Was Typed of Experimental Studies with pre-test and Post-Test with Control Group. The Study Consisted of All woman Referred to the Counselling Centres in university Neyshabur City. A Sample of 36 People Was Selected Then Randomly Assigned to Two Experimental Groups and One Control Groups. The people inventory sexual intimacy Botlani (SII) Was Used for Data Collection Then Based on 12 Meetings 90 Minutes for the Experiment Groups. The Pre-Test and Post-Test Scores Were Analysed Using a Manova Test in the SPSS 20 Software. According to the Results of Showed feminist Therapy More Effect Than Other Experimental Group and Control Group ($p \leq 0.001$) so sex Therapy More Effect Than Control Group in Variable ($p \leq 0.001$). The conclusion is that the feminist therapy approach can be used to increase sexual intimacy in developing Muslim societies.

Keywords: Feminist Therapy, Inventory sexual intimacy (SII), Sex Therapy, Women

Introduction

Today we have less psychotherapy research in the field of women than men. In this sense, therapeutic approaches have followed a coherent and unified approach since the 1970s. The result was some disorders in women, such as premenstrual syndrome in women [1]. According to Accord (2017), women's studies are summarized in three waves, and the third wave emphasizes cultural-therapeutic approaches. Feminist therapy (FT) is also highly dependent on culture. Feminist therapy does not offer a specific package protocol and Depending on the researcher's studies. In Iranian culture, girls have a passive role due to mandatory Islamic laws and they do not have the right to choose in marriage. Hence, we are in society with numerous betrayals by men, which is never mentioned anywhere due to the propaganda of the system. It has led to the continuation of women's passivity in other aspects of her life, such as employment. And in the end, it does not lead to the flourishing of female talents. But striving for equality can lead to systematic growth of the whole family and consequently to the growth and perfection of the family [2]. Psychology texts consider marriage to be feminine and it is effective not only in promoting interpersonal communication but also in women's physiology, such as regulating the menstrual cycle [3]. For this reason, a lot of research has been done in the field of couples. Bagarozzi (2014) considers intimacy as a basic need that is rooted in attachment. According to

Bagarozzi, Batlani in Iran has done a similar research on Iranian culture and made an inventory. To understand the subject, research on couples is considered the best opportunity and many other researchers, such as Eric Erickson, Sullivan, and Balbi, have done research. Although they have been criticized a lot because women are ignored. For example, Eric Erickson has named his book 'The Eight Stages of Man' [4]. Many approaches have addressed the issue of intimacy, such as therapeutic approaches: cognitive therapy, gestalt therapy, sex therapy, etc. Intimacy is made up of many factors. These factors require a holistic approach that combines cognitive-behavioral approaches with existentialism & Feminist therapy creates these conditions. This approach is considered as an integrated approach that builds all other approaches on the basis of power [5]. In other approaches to psychotherapy, such as the reality therapy approach, power is considered a need or the view of Islamic psychology in Iran considers power in the hands of men and Islamic psychology considers women as the property of men (It is important in Iran - Especially in Muslim societies- which can be mentioned due to the prohibitions related to jurisprudence in research processes). In the feminist therapeutic approach, power is derived from the principles of modern sociology. Marx considers power to be based on tools and wealth and Foucault (1972) considers power in knowledge. Therefore, one of the factor of feminist therapy are the job and knowledge. Power in feminist therapy is

analysed on the basis of “external and internal, situational and semantic. In the field of external awareness we have: 1. Inequality of power in the Islamic structural system that leads to the formation of defence mechanisms in women’s interpersonal relationships 2. personal history such as the identification of sexual experiences (B.O.S.) 3. betrayal, which is likened to acid droplets as a metaphor. In fact, the necessary tools such as VIS, “B.O.S”, GOF (emotional fog) or “Social, historical and Interpersonal” narratives are important for the client’s formulation [6]. In our research, we emphasize the Criticism and Rejection of Islamic rules rather than the solid principles of theory. Like Criticism and Rejection the story of Eve in the Qur’an, or the role of the media, which emphasizes Feminine passivity like the movie Davat. In Shia Aslam, sex is reserved for men, a man can marry up to four women at a time, while in women, and even sexual expression is shameful. According to the above topics, the therapist plays a sensitizing and informative role responsibly with client-centred approach [7]. Classical feminists such as Helen Deutsch and Horne began their research mainly in the field of sex, which was rooted in Freud’s theory. Freud saw healing in solving sexual oppression. In fact, he considered sexual issues as his independent variable. Sex is a biological perspective, it plays a significant role in the formation of a person’s ego as the structure of his personality. Reports show a 30% role in the variance of marital conflict [8]. Sex therapy teaches the physiology and stages of the sex cycle based on the theories of Masters Johnson and Keynes [9]. Of course, each stage covers a wide range of psychological matters. Like ritual in the first stage. It also addresses the issue of intimacy. In the next stage is based on the first stage and intimacy is effective in it [10]. In marriage, a woman benefits more than a man [11]. It is different in Shia. The main reason is the approval of Islamic jurisprudence. And sometimes rape is seen among them. For example, the illegitimate relations of Salman Khodadai (Member of Parliament), a close associate of Khamnei, and the killing of the female victim. On the other hand, taboos in Iran are more feminine than male....

Methodology

The Present Study is the Type of Semi Experiment Studies, Pre Test Post Test with Control Group: 2 experimental group and 1 control group. The Study Consisted of All student (female) Neyshabur City. 36 people based that 12 people Receive Feminist Therapy, 12 people sex Therapy and 12 people Were Control Group. First, the Announcement Was Made to Select the Sample 42 Have the Condition to Enter the Study. The People Have Problem Cause of Addiction, Mental Illness, Homicide, and Marital Infidelity Had Been Driven Out of the Study 36 people Selected Random They Have Been relationship at least Three Years; Their Age. In the Range of 20 to 50 Years. Selected 24 Couple Random Then based on 12 Meetings 90 minutes for sex therapy and 12 Meeting feminist therapy. The Control Group Did Not Receive Any Treatment, and They Were Told That They Are Waiting List in the Process of Treatment After Three Months. The Therapeutic Protocols Used in This Study Include a Package sex Method Therapy and Feminist Therapy.

Instrument

Inventory sexual intimacy (SII), SII included 30 items each with a 4 choice range (always, sometimes, seldom, never) with 1-4 scores.

As such, “always” gets 1 score and “never” gets 4 scores. Maximum and minimum scores are 120 and 40, respectively. Higher score indicates more sexual intimacy of the woman. The validity of content of questionnaire was confirmed, who were psychologists and consultants at Educational Sciences Department at Isfahan University and its reliability was investigated in a study conducted by Botlani and colleagues, on 140 People who had referred to Family Cultural Centre in Isfahan City in 2008 and Chronbach’s alpha coefficient was obtained 0.81% [12].

Bohan (1992) states six guidelines for feminist practitioners to follow:

1. Therapists are knowledgeable concerning gender role socialization and the impact these standards have on what it means to be a woman or a man.
2. Therapists are aware of the impact of the distribution of power within the family and power differentials between men and women in terms of decision making, child rearing, career options, and division of labor.
3. Therapists understand the sexist context of the social system and its impacts on both the individual and the family.
4. Therapists are committed to promoting roles for both women and men that are not limited by cultural or gender stereotypes.
5. Therapists acquire intervention skills that assist clients in their gender role journey.
6. Therapists are committed to work toward the elimination of gender role bias as a source of pathology in all societal institutions.

Intervention Package Sex therapy, Bilal, A. (2020):

Session 1: Case formulation in the context of unique psychosexual history
 Session 2: Reconstruction of sexual attitudes, Socratic dialog
 Session 3: Exploration of automatic thoughts and catastrophization...
 Session 4: Relaxation exercises and mindfulness, to help the client control negative stress
 Session 5: Learning sexual communication and love skills (spending time together, emotional expression, love talk, surprise gifts)
 Session 6: Review of relaxation exercises and mindfulness
 Session 7: Review of love and sexual communication skills
 Session 8: Review of sensate focus
 Session 9: Homework Assignment: Stop and Start Technique with a lubricant
 Session 10: Review of stop and start technique
 Session 11: Review of home assignments and discussion about hot issues
 Session 12: Ermination of therapy, review of therapy goals and outcomes

Finding

Before using the analysis of covariance test, the normality of the distribution, data scatter, homogeneity of error variance, and homogeneity of regression lines were checked. All three hypotheses were confirmed, That is, it is allowed to perform ANCOVA. As shown in Table One Mean sexual intimacy of sex therapy group and feminist therapy group increased in the post-test. But there was a very small difference in the pre-test and post-test of the control group.

Table 1: Descriptive Statistics and Results of the three groups

SD	M	Stepp	Group
10.28	24.00	Per Test	Control
9.87	44.25	Post Test	
9.12	43.50	Per Test	Sex Therapie
17.41	74.25	Post Test	
8.95	42.92	Per Test	Feminist Therapie
15.74	84.00	Post Test	

Table 2 shows the result of analysis of covariance, that the sum of the squares of the independent variable is 10651.858 And F= 48.681... F is obtained with DF = 36.3 a significance level of 5% larger than F in the table. Therefore, the zero hypothesis is not confirmed. In other words, with 95% confidence level, at least one of the treatment has an effect on Women's sexual intimacy. Now we have to check: Which has a significant effect? Post hoc tests should be used (Bonferoni method)

Table 2: Results of the CO-variance analysis of the three groups

Sig	F	Sun of Square	Df	Sun of Square	Source
0.000	34.033	3723/361	3	11170.082	Corrected Model
0.008	7.989	874.000	1	874.000	Intersepta
0.008	4.948	869.582	1	869.582	Per Test
0.000	48.681	5325.929	2	10651.858	Group(independent variable)
		109.404	32	3500.918	Error
			36	178696.000	Total
			35	14671.00	Corrected Total

According to the findings presented in this table. There is a statistically significant difference between the mean of the control group with both experimental groups ($P < 0.01$). The mean of the experimental groups is statistically higher than the mean of the control group. There is also a significant difference between the means of the experimental groups. The average sexual intimacy of the feminist therapy group is higher than the sex therapy group.

Table 3: Post-HOC of the effectiveness of feminist therapy with sex therapy on sexual intimacy

Sig	SD	Average of difference	Group b	Group a
0.001	4.272	-30.386	Sex therapy	Control
0.001	4.280	-40.856	Feminist therapy	
0.001	4.272	30.386	Control	Sex Therapie
0.004	4.273	-10.200	Feminist therapy	

Conclusion

Horney was of the opinion: Women, like men, have a genital tract but it is inside the body And Freud ignored it. If women have a masculine complex, men are womb envy. In the continuation of Horney's theories, Forward, S. (2010) addressed the role of a feminist in the couple. She has worked only on women and has achieved many successes. And he believes that the only way to save the relationship is The Self-Confidence Formula for Women in society. A summary of previous theories can be seen in Laura Brown's view (1986). Feminist therapy focuses on both industry and employment and it is an up-to-date approach. It emphasizes empowering target groups such as the disabled, the poor, and children. In the realm of couples, women's awareness and the right strategy for the symptoms in the family is important. Another dimension of feminist therapy is employment. The economy leads to independence. And women's independence means women's liberation from Islamic commandments and leads to the growth of later generations, especially girls in families [13]. Hare-Mustin, R. T. (1984) with feminist psychotherapy has shown a significant increase in empowering variables compared to other approaches [14-20].

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