

**A counselling psychologist's exploration of how
religion and humanistic approaches can enhance
sexual and psychological wellbeing**

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**THE FOLLOWING PART OF THIS THESIS HAS BEEN REDACTED
FOR DATA PROTECTION REASONS:**

PART B: COMBINED CLIENT STUDY PROCESS REPORT

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DECLARATION

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PREFACE

“The day is short, and the work is much.....it is not your responsibility to finish the work, but neither are you free to desist from it” (Ethics of the Fathers, 2:15).

This doctoral portfolio represents the learning, growth and development I have experienced on my journey towards becoming a counselling psychologist. The above quote represents a philosophy that has accompanied me throughout my life. I often think it to myself when I feel overwhelmed by the number of things that I feel need to be accomplished in one single day, a month or a lifetime. I am scared that there is not enough time to achieve my goals. This quote is comforting because I then remember that I don't need to accomplish everything, I just need to do what I can.

Over the course of this doctorate there have been many challenges and opportunities to fill the 'short days' that I have been allotted: accruing clinical hours, attending placement, completing assignments, attending classes, keeping up with project deadlines, giving birth (twice!), raising my children, being a wife and contributing to my local community. I am grateful for the opportunity to have come so far, and excited for where the journey of life now takes me.

I know that as I come to the end of my training as a counselling psychologist, the task of learning, developing and growing as a therapist and a person is never complete, and I will surely never 'desist from it'. It is my life to live and my job to infuse that life with achievements, meaning and purpose. This reflects one of the core principles of existential therapy. We each have a personal responsibility for how we interact with the world around us, how we create meaning within the mundane, and build a narrative to connect the dots of apparently disparate experiences.

There are three components to this portfolio that reflect the skills and training I have gained over the past four years whilst on the Professional Doctorate in

Counselling Psychology. These are: a research project, a client study and a publishable paper. Together they represent my identity as a reflective-scientist-practitioner.

The research project represents my academic skills and ability to investigate human phenomena with analytical rigour. The client study demonstrates my practical skills as a therapist and theoretical knowledge of the person-centred psychotherapeutic model. Finally, my publishable article is an academic exploration that considers how existential therapy can be used with religious clients. This last piece of work contains some deep personal reflections relating to death and existence, and all three pieces have helped me to discover different parts of my therapeutic identity, and my preference for humanistic epistemology.

The overall theme that links the components of this doctoral portfolio together is the importance of understanding and ‘hearing’ the whole person. A core tenant of counselling psychology is the mandate to work with the individual’s unique subjective psychological experience to empower their growth and healing. An important prerequisite to working with the individual's subjective psychological experience is to understand on a holistic level the constituent components of that experience. This is the reason I have chosen to focus on this theme for my doctoral portfolio.

Part A: Research Project

The research project explores the relationship between religion, sexual satisfaction, sexual knowledge and sexual attitudes amongst Orthodox Jews. The study adopted a post-positivist paradigm to explore these variables using an online survey that consisted of validated measures. A new measure was developed to assess basic sexual knowledge as no existing measures were appropriate for use with religious participants. 515 responses were analysed using quantitative tests that looked at the differences between religious groups and the relationship between sexual satisfaction and the other variables. A regression analysis was used to identify which variables could predict sexual

satisfaction. Optional open-ended questions were presented and analysed using a basic content analysis to enhance understanding of the quantitative results. The study concluded that the positive attitudes religion promotes about sexuality can enhance sexual satisfaction and can be used as a way to help clients who are distressed with their sex lives. The findings, strengths, limitations and implication are discussed in the context of relevant literature.

Over the course of this research project and training as a Counselling Psychologist, I have noticed how as my knowledge and understanding of sexuality has increased so has my confidence in discussing and assessing sexuality-related issues in the therapy room. For some of my clients, prompting a discussion about their sexual relationship led to the identification of one of the very issues that caused them to seek out therapy. In a recent edition of *The Counseling Psychologist* Burnes et al., (2017) write that “the lack of sexuality-related training in mental health disciplines has long been acknowledged as a problem” (p.507). After noticing how my increased understanding of sexuality enhanced my ability to help my clients it is my hope that this research can enhance the skills of other therapists as well.

Part B: Combined Process Report/ Case Study

In the report I discuss my short-term work with Stacey (all names and identifying information have been anonymised to maintain confidentiality) using the Person-Centred therapeutic model. I explore my struggle of using person-centred, a non-directive model, within an NHS setting that limits sessions to a maximum of six sessions. Stacey came to therapy because of a recent “breakdown” she experienced which she believed was related to her distress about her father’s negative cancer prognosis. Over the first few sessions it became evident that Stacey was unable to express her sadness or concern about her father to her family or friends. Her family would dismiss and disapprove of her negative emotions and Stacey felt she did not want to emotionally burden her friends. We identified that Stacey had a deep need to be heard and over our very brief time together came to value the therapeutic space in which she could express herself without interruption. The segment

of transcript I chose to explore powerfully demonstrates this deep ‘need to be heard’ and I reflect how I, as the practitioner, was struck by the “moment of movement” (Rogers, 1961) when Stacey starts to experience her full-self in the present and become more attuned to her self-actualising tendency. What struck me most about this piece of work was how being able to listen and understand someone fully allows them to become more attuned to their self-actualising tendency and free the “natural healing process” (Mearns et al., 2013). This piece of work represented a pivotal moment in helping me identify how my underlying epistemology aligns with humanistic therapeutic models.

Part C: Publishable Article

In the publishable article I explore the roots of existential therapy and how it can be used with religious clients in a meaningful way given that it is largely based on atheistic perspectives. The article further considers the compatibility of existential therapy and counselling psychology philosophy. It is hoped that this article will be published in the *Counselling Psychology Review* to improve understanding of the nuances in theory and practice that are required when working with religious clients. This article was written in response to my own tendency to adopt an existential epistemology in approaching both the client’s experience and my own. Initially, I was dismayed to learn that many existential philosophers had a strong negative attitude towards religion and perceive religion as a means of quelling anxiety and preventing people from addressing their existential fears (Bartz, 2009; Yalom, 2011). This contrasted with my own experience as a religious therapist, successfully practicing existential therapy with religious clients. I perceived a deep commonality between existential therapy and my religious beliefs, driven by the way that they help people identify purpose and meaning in their life as well as accept the external events that happen to them.

My article addresses the animosity that existential theorists have for religion by suggesting that counselling psychologists take on an agnostic stance when working with a client’s existential and religious experiences. Our training heavily emphasises that we enter the client’s frame of reference and seek to

help them through their own way of understanding the world. Even if the therapist and client are both religious, each person engages with their religion differently, and so the therapist is required to understand what religion means to their client and help them explore how to use any of their natural resources of strength and resilience to enhance their sense of meaning and life (Heminiak et al., 2012).

PART A: Doctoral Research

Does religion spoil your sex life? Exploring sexual satisfaction in the Jewish community

Supervisors

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Abstract

This thesis aimed to explore whether religion, sexual knowledge and sexual attitudes impact sexual satisfaction amongst Orthodox Jews. This thesis intended to address weaknesses of previous research by using robust multidimensional measures of religion and sexuality and focusing on a specific religious group. 515 participants completed measures circulated through an online survey. The measures used were: The New Sexual Satisfaction Scale; Centrality of Religiosity Scale (CRS); three subscales of the Brief Sexual Attitudes Scale (Permissiveness, Communion and Instrumentality); and a new measure, the Brief Sexual Knowledge scale, developed for this study. Participants were also presented with optional open-ended questions that asked about their sexual expectations and sexual education. Religious level was categorised using self-defined groups for Religious Culture; Ultra-Orthodox, Modern-Orthodox and Non-Orthodox groups as well as CRS categories for Religious Practice; Highly Religious, Religious, Not Religious. The findings show significant differences in the sexual satisfaction between Religious Practice groups but not Religious Culture groups. Significant differences in sexual knowledge and sexual attitudes were found for both types of religious variables. A correlation analysis revealed that sexual satisfaction is positively correlated with CRS and Communion scores whilst negatively correlated with Sexual Knowledge, Permissiveness and Instrumentality scores. Communion and Sexual Knowledge were significant predictors of sexual satisfaction in a multiple regression analysis. The findings of this study enhance theoretical understanding of religion and sexuality and address gaps in the literature. Clinical implications for therapists working with Orthodox Jewish clients suffering from sexual dissatisfaction are discussed.

ABBREVIATIONS

ANOVA	Analysis of Variance
Beta	Standardised Coefficient
BSAS	Brief Sexual Attitude Scale
BSKQ	Brief Sexual Knowledge Questionnaire
BSKQ12	Brief Sexual Knowledge Questionnaire (12 items)
CRS	Centrality of Religiosity Scale
F	Fisher's ration
M	Mean
N	Sample size
NATSAL	National Survey of Sexual Attitudes and Lifestyle
NSSS	New Sexual Satisfaction Scale
p	significance value
r	correlation coefficient
SAS	Sexual Attitude Scale
SD	Standard Deviation
SE	Standard Error

CHAPTER 1: INTRODUCTION

1.1 General Overview

One of the unique values of Counselling Psychology is to reduce distress and promote wellness across all areas of life (BPS Standards and Accreditation for Doctoral programmes in counselling psychology, October, 2015). Sexual satisfaction has been consistently identified as an important correlate of psychological, physical and relational wellbeing (Sánchez Fuentes, Santos-Iglesias & Sierra, 2014). Accordingly, one might have expected that the field of Counselling Psychology has promoted considerable research in this area, however, a review of the literature finds the opposite to be true (Hargons, Mosley, & Stevens-Watkins, 2017). In a recent issue of *The Counseling Psychologist* (2017), Hargons et al., (2017) highlight that the last time a Counseling Psychologist issue was dedicated to positive sexuality research, as opposed to sexual dysfunction or negative sexual attitudes, was over four decades ago. In the same recent issue, an article by Burnes, Singh and Witherspoon, (2017a) reports that only 16% of 25 doctoral training programmes offer a lecture or seminar on sexuality. Another study in 2010 found that only 40% of qualified practicing psychologists address the sexual health of their clients (Reissing & Giulio, 2010). Furthermore, Cruz, Greenwald and Sandil (2017) note that even when sexuality is taught on training programmes the focus remains on sexual dysfunction rather than healthy positive sexuality. These studies suggest that psychologists have not been sufficiently trained to understand or work with sexuality-related issues

in the therapy room. It is imperative for psychologists to feel informed and comfortable discussing sex with clients. This is particularly important when considering that many clients may be apprehensive of initiating conversation about sex out of embarrassment, discomfort or fear of judgment (Cruz et al., 2017). Burnes et al., (2017) have even suggested that counselling psychologists may have unintentional harmful effects on clients if they are not trained adequately in sexuality or lack awareness of how people differ in the way they perceive and experience sex. Burnes et al. (2017) call for a shift in the way sexuality is thought about and taught within the discipline of Counselling Psychology. Our identity as scientist-practitioners places us in a perfect position to investigate this subject in a practical way that can inform sex therapy and interventions (Hargons et al., 2017). This study will focus on enhancing understanding of sexual satisfaction amongst married couples with the intention of informing therapists who work with clients seeking to improve this area of their lives.

Another core value of Counselling Psychology is to promote understanding of diversity and multiculturalism (Mrdjenovch & Moore, 2004). In line with this value, much of sexuality research has focused on the homosexual or bisexual population. These studies have had a significant influence in the way this group is perceived and understood by both, the professional and the wider society, however, a limited understanding of other cultural groups persists. Hargons et al. (2017) suggest that future research should focus on the sexual health and wellbeing of racial and ethnic minority groups to address these gaps in our understanding. Although sex is a shared experience across religion, culture and race, these are also the very things that influence sexual

experience in distinct ways (Hargons et al., 2017). Counselling psychologists can contribute considerably to the multicultural study of sexuality by applying their formulation and case conceptualisation skills to understanding sexuality. When working with a client's presenting problem in the therapy room, Counselling Psychologists are trained to consider the many wider and external influences that could have led to the development of the problem. Counselling Psychologists can use these same conceptualisation skills to understand a phenomenon, such as sexuality, in the context of wider influencing factors such as religion, race or culture (Burnes, Singh and Witherspoon, 2017b).

Many religions promote certain values and beliefs about sex which can in turn influence a person's attitude and impact their sexual experiences (Agocha, Asencio & Decena, 2014). Although there has been a vast amount of research exploring how religion impacts sexual satisfaction there is still little understanding of this subject. One of the main problems with research in this area is that both sexuality and religion have been difficult to conceptualise and operationalise which has resulted in the use of many different methods to measure these variables across studies (Dundon & Rellini, 2010, Hernandez, Mahoney & Pargament, 2014). The consequence of this is that studies have produced contradictory findings and are difficult to compare. There are other methodological issues with research in this area, for example, majority of religion and sexuality research focuses on a Western teenage or university-aged Christian population (Hernandez et al., 2014). Findings from such a narrow subset of the population cannot be generalised across the population or extrapolated to members of other faiths.

This study is particularly interested in exploring the impact of religion on sexual satisfaction in the Orthodox Jewish community. Orthodox Judaism promotes some specific religious values that may impact sexual experiences. The first is that the Orthodox Jewish community values sex as sacred within a marriage which prevents members of the opposite sex from engaging in any physical contact prior to marriage. As a result, a couple's relationship will often transform from non-sexual to sexual in a matter of hours on their wedding day. Modesty is another strong value for this community and accordingly sex is rarely discussed in public. Formal sexual education is provided to brides and grooms shortly before they get married, however, studies have found that Orthodox women do not feel they have sufficient sexual knowledge prior to engaging in a sexual relationship (Friedman, Labinsky, Rosenbaum, Schmeidler & Yehuda, 2009). There is currently little research in understanding how the values and principles of Orthodox Judaism impact the sexual satisfaction of its members. Furthermore, no research to date has explored whether a low level of sexual education, such as is found in the Orthodox Jewish community, impacts sexual satisfaction. If sexual knowledge is found to have a significant role in sexual satisfaction this would imply that psychoeducation might be an effective intervention for couples struggling with their sexual relationship. Furthermore, it may encourage the provision of psychoeducation as a preventative technique for the development of sexual difficulties.

Research is required to understand this group's attitudes and experiences of sexuality. This study responds to the suggestions described above for more multicultural research and understanding of sexuality by exploring the role of

religion, sexual knowledge and attitudes on sexual satisfaction amongst Orthodox Jews. The following chapter will provide an overview of the relevant literature to date to provide the context, framework and rationale for this study.

1.2 Sexual Satisfaction

Sex is important and there is little doubt that this importance goes beyond its practical role in procreation. Sex plays a pivotal role in human relationships and since Kraft-Ebbing introduced his encyclopaedic etymology of sexual behaviour in 1886, the study of that role has been firmly within the domain of psychology. Freud (1961) saw the sexual drive as a powerful force responsible for driving a large part of human behaviour and his narrative of sexual development had a formative influence on the attitude of psychologists in the first half of the 20th century. Quantitative studies have investigated the psychological importance of sex and found that sexual satisfaction has many positive correlates with physical and psychological well-being (Dundon & Rellini, 2010; Scott, Sandberg, Harper, & Miller, 2012). Furthermore, research has repeatedly substantiated the importance of sexual satisfaction to the success or failure of relationships. Positive correlations have been found between sexual satisfaction, relationship satisfaction, marital satisfaction and communication amongst couples (Henderson, Lehavot, & Simoni, 2009; MacNeil & Byers, 2009; Schwartz & Young, 2009). A study by Karney and Bradbury (1995) suggested that sexual satisfaction was the strongest predictor for marital quality and stability. Conversely, low sexual satisfaction has been

associated with infidelity, marital instability and the greater chances of divorce (White & Booth, 1991; Edwards & Booth, 1994; Allen et al., 2008; Yabiku & Gager, 2009). The most recent report of national statistics in the UK predicted that 42% of marriages end in divorce and that 1 in 7 divorces were granted because of adultery (Office for National Statistics, Divorces in England and Wales in 2012; 2016). Sexual dissatisfaction within the marriage may have been an important component in a significant number of these instances although it is difficult to determine the direction of the relationship (Ashdown, Hackathorn, & Clark, 2011).

Comparisons between National Surveys of Sexual Attitudes and Lifestyles (Natsal) indicate that the average amount of sex people have per month has decreased every 10 years. In Natsal-1 people reported that they had sex five times a month on average, yet this rate reduced to three times a month in Natsal-3 which took place 20 years later (Spiegelhalter, 2015). Researchers consider that this might be the impact of living in a busy, tiring modern world (Spiegelhalter, 2015). A talk by Catherine Mercer on Tedx Talk in 2014, one of the forefront researchers and statisticians involved in Natsal, considered how competing distractions such as accessibility and use of the internet in our bedrooms to answer emails or pay a parking ticket late at night might be responsible for this decline. She explains that the lack of disconnect from work and outside life can prevent someone from being able to enter the right frame of mind to engage in sex with their partner. This echoes research conducted 20 years earlier which suggested that fatigue related to work correlated with decreased sexual frequency and satisfaction by both men and women (Greenblatt, 1983). Mercer further suggested that our expectation for

immediate results created by the speed of internet interactions may have influenced our willingness to invest time in having sex. She further points out that their data shows, it is not only the frequency of sex which has declined but also the quality of sex; the study reports that one in ten are distressed by their sex life and one in six are dissatisfied with the sex life (Mercer, 2015).

1.3 Defining Sexual Satisfaction

One of the most well-used definitions for sexual satisfaction was developed by Lawrance and Byers (1995, p.268). They describe sexual satisfaction as “an affective response arising from one’s subjective evaluation of the positive and negative dimensions associated with one’s sexual relationship”. However, despite its popular use, this definition has been criticised by some as too vague, global and difficult to measure (Pascoal, Narciso, & Pereira, 2014). Pascoal et al. (2014) describe how this lack of clarity is typical of research relating to sexual satisfaction and McClelland (2014) further comments that many studies tend to use self-reinforcing definitions. Pascoal et al. (2014) believe that the difficulty in defining sexual satisfaction stems from poor theoretical and conceptual frameworks and describe the field as in its infancy and poorly understood.

To address the problem of limited conceptual and theoretical understanding of sexual satisfaction Pascoal et al. (2014) sought to gain the layperson’s definition. They asked 760 participants “How would you define sexual satisfaction?” and analysed their responses using thematic analysis. They discovered that sexual satisfaction can be defined by two main themes: a)

personal sexual well-being and b) dyadic processes. Based on these results they suggested that sexual satisfaction could be defined as “the emotional experience of frequent mutual sexual pleasure”. They further discovered from their analysis that lay people defined sexual satisfaction as the presence of pleasure, positive experiences and mutuality in relationships rather than the absence of a sexual problem or dysfunction. This is particularly noteworthy because much of research in this area operationalises sexual satisfaction by a lack of sexual dysfunction (Kleinplatz et al., 2009).

Their finding echoes the World Health Organisation’s (WHO) revised definition of sexual health as “a state of physical, emotional, mental, and social well-being in relation to sexuality, it is not merely the absence of disease, dysfunction, or infirmity” (WHO, 2006). Kleinplatz et al. (2009) further differentiates between dysfunctional sex, functional sex and optimal sex. They describe optimal sex as a sexual experience that is not just ordinary and satisfying but rather is something qualitatively higher. To explain the necessity of distinguishing between optimal sex and functional sex the authors describe an example of a client who seeks help from a therapist because of sexual dysfunction. The researchers note that even after the client has overcome the sexual dysfunction the client may still experience underwhelming and dissatisfying sex. Kleinplatz et al. (2009) explain this is because sexual satisfaction is not solely achieved from the absence of sexual problems but rather there are a host of other attributes that lead to positive sexual experiences and these require exploration in both, research and the therapy room. Metz and McCarthy (2007) further point out that clients are often referred for low sexual desire however, following an assessment the

clinician is unable to identify the presence of any pathology. They suggest that the client may be seeking help because they are not experiencing optimal sexual encounters, and this is what is leading to their sexual dissatisfaction rather than a difficulty with sexual functioning. In these cases, the therapeutic work will need to focus on the presence of positive experiences rather than the absence of negative ones. Counselling Psychology is the ideal discipline to conduct research on optimal sexual experiences seeing as some of our core philosophies pertain to: viewing human distress through a non-pathological lens, positive mental health and experiences, preventing the development of problems, and empowering the individual to address their own issues (Packard, 2009).

McClelland (2010) conducted a critical historiography on life satisfaction research to provide a clearer understanding of how sexual satisfaction can be defined and operationalised. One of the things she notes is the importance of considering the individual's understanding of what constitutes a satisfying sexual experience. For example, in a previous study she explored how "high satisfaction" and "low satisfaction" might mean different things to different people (McClelland, 2009). She noticed that women tended to include negative experiences such as pain and depression when describing "low satisfaction", whereas men tended to describe "low satisfaction" as experiencing loneliness and insufficient sexual stimulation. These differences in description identify a difference in the conceptualisation, experiences and expectations of sexual satisfaction between men and women. Her findings highlight that comparing levels of sexual satisfaction is problematic because a common experience might not exist between individuals. Fahs and Plante

(2017) discuss the need to broaden the way we frame and measure sexuality when defining and measuring satisfaction. Given the lack of clear conceptual understanding that exists when defining sexual satisfaction, it is unsurprising that the field is still considered as in its infancy

1.4 Factors associated with sexual satisfaction

In 2006, Barrientos and Páez analysed psychosocial variables related to sexual satisfaction in a dataset of 5407 men and women from Chile. They identified that sexual satisfaction can be impacted by a range of factors that span from sexual constructs, such as frequency of intercourse and orgasm, to non-sexual constructs, such as level of education and socio-economic status. Whilst it seems intuitive that sexual behaviour correlates with sexual satisfaction it is important to appreciate the role that non-sexual variables play. Their findings were further substantiated by an extensive systematic review conducted by Sánchez Fuentes et al. (2014) that analysed 197 studies which used sexual satisfaction as the dependant variable. Their review similarly demonstrated that sexual satisfaction was influenced by a multitude of variables that spanned from within the individual and the relationship to wider factors such as social networks, politics, religion and culture. These findings once again highlight the importance of exploring a variety of factors that include non-sexual constructs in the study of sexual satisfaction (Ashdown et al., 2011). Below, a few studies are presented to provide a sense of the variety of variables that have been associated with sexual satisfaction and some of the difficulties involved in measuring them. The studies will be

presented through four categories a) individual factors b) relational factors c) sexual factors and d) macro-factors such as culture and religion.

1.4.1 Individual Factors

Psychological wellbeing has been identified as an important correlate and factor of sexual satisfaction. A study by Dundon and Rellini (2010) found that psychological wellbeing and relationship attachment were able to predict sexual satisfaction more than sexual functioning in midlife women. Similarly, a large sample study conducted by Higgins, Mullinax, Trussell, Davidson, and Moore (2011) found that high self-esteem amongst American university students led to greater physiological sexual satisfaction for men and greater psychological sexual satisfaction for women. These findings suggest that psychological health and wellbeing are significant factors of sexual satisfaction. Correspondingly, studies exploring the effects of physical health on sexual satisfaction demonstrate that physical illness can lead to lower sexual satisfaction. Althof et al. (2010) explored factors associated with lower satisfaction amongst men suffering from erectile dysfunction and found that those who also suffered from hypertension, vascular disorders or diabetes mellitus/insulin use reported lower sexual satisfaction compared to those who did not have these physical difficulties. Akkuş, Nakas, and Kalyoncu (2010) found that patients reported significant lower sexual satisfaction scores following the onset of rheumatoid arthritis emphasising the effects of physiological problems on sexual satisfaction. A study by De Ryck, Van Laeken, Nöstlinger, Platteau and Colebunders (2012) found that amongst men

living with HIV, those who suffered from depression, anxiety or stress reported lower sexual satisfaction compared to those who did not.

The studies exploring the association between lower psychological or physical health and sexual dissatisfaction are generally consistent in their findings. However, this is not the case for other individual factors such as gender or age (Byers & Rehman, 2014). Regarding gender, Rehman, Rellini, and Fallis (2011) found that women experienced more sexual satisfaction than men. A study by Lee, Nazroo, O'Connor, Blake, and Pendleton (2016) similarly showed that older men reported greater sexual dissatisfaction than women which implies that these differences are still present in an elderly cohort. However, a large sample study by Laumann et al. (2006) based on the responses of 27 500 men and women between the ages of 40 and 80 found that across several countries women reported less sexual satisfaction than men. Further still, several other studies found no significant differences between men and women's reports of sexual satisfaction (McClelland, 2011; Murray-Swank, Pargament & Mahoney, 2005; Oliver & Hyde, 1993). These conflicting findings do not provide a clear picture of how gender impacts sexual satisfaction.

The findings in relation to age and sexual satisfaction are similarly contradictory. In the sample investigated by De Ryck et al. (2012) of men living with HIV they found that age was negatively associated with lower sexual satisfaction for homosexual and heterosexual men. The cross-national study by Laumann et al., (2006) similarly found that sexual satisfaction decreased with age. However, Trompeter, Bettencourt and Barrett-Connor (2012) concluded the opposite when they found that sexual satisfaction

increases with age for women. Despite these findings, a study by Ashdown et al. (2011) found no significant correlation between age and sexual satisfaction for men and women. One of the reasons for these contrasting findings relating to age and gender might be a result of differences in the population samples or choice of measures. For example, it is possible that the lower sexual satisfaction associated with age might be a result of other physical or psychological age-related problems. When Laumann et al. (2006) controlled for health factors they found there was no relationship between age and wellbeing (Byers & Rehman, 2014). There are also mixed findings about how relationship duration impacts sexual satisfaction. Whereas, Heiman et al. (2011) found that sexual satisfaction increased over time in a marriage, other studies found that sexual satisfaction declines over time in a relationship (Christopher & Sprecher, 2000; Schmiederberg & Schroder, 2016). Age and relationship duration often travel on the same trajectory which makes it difficult to separate the effects of each. Nonetheless, these inconsistent findings highlight the need for studies that are more discriminating.

1.4.2 Relationship Factors

There is more consensus amongst studies that have explored relational variables of sexual satisfaction (Sánchez-Fuentes et al., 2014). Greater sexual satisfaction appears to be associated with higher levels of sexual communication, understanding and assertiveness (Byers & Macneil, 2006; MacNeil & Byers, 2009). This could be a result of greater feedback given to a partner about the sexual behaviours and experiences a person finds most

pleasurable. Other research indicates that intimacy and emotional closeness are highly correlated with sexual satisfaction although differences are observed between men and women in this area (Dundon & Rellini, 2010; Theiss, 2011). Lawrence et al. (2008) suggests that men are generally more focused on the sexual act rather than the relational dimension compared to women. They continue to explain that for men, the experience of sex enhances the relationship by leading to feelings of intimacy. Whereas, for women, on the other hand, the quality of the sexual and emotional aspects of the relationship tend to be interconnected. Birnbaum, Reis, Mikulincer, Gillath, and Orpaz (2006) similarly discusses that one of the main emphases of the sexual relationship for men is to fulfil a sexual need. Whereas, for women, the sexual aspect of the relationship tends to be more reflective of the quality of the emotional and interpersonal parts of the relationship (Lazar, 2017).

The type of relationship that sex occurs in, such as committed or casual, has also been found to impact sexual satisfaction. Laumann, Paik, and Rosen (1999) found that women involved in faithful traditional marriages were more sexually satisfied than women involved in extramarital affairs or single sexually active women. A more recent study by Higgins et al. (2011) found that men and women who were engaged in exclusive dating relationships were more likely to be physiologically and psychologically sexually satisfied than those who were not. Ashdown et al. (2011) similarly found that infidelity was related to lower sexual satisfaction for women. Some argue that it has become harder to isolate the contributors of sexual satisfaction due to the relatively recent changes in the sexual landscape of people which has come to include multiple partners, greater transmission of STIs and earlier initiation

of sex (Laumann et al., 1999) Each of these introduce new factors that may impact sexual satisfaction in different ways that previous research did not necessarily need to consider.

Studies have found that non-sexual factors concerned with the overall relationship such as companionship, respect, shared goals and shared experiences also impact sexual satisfaction (Young, Denny, Luquis, & Young, 1998). Interestingly, a study by Farley and Davis (1980) found that people reported greater sexual satisfaction if their partner had similar personality traits to them suggesting a relationship between personality and sexual satisfaction. These findings highlight the importance of considering the wider context within which individual and relational sexual experiences occur.

1.4.3 Sexual Factors

Like other areas of research in this field, the influence of sexual factors on sexual satisfaction is not straightforward. Early research found that overall sexual satisfaction was predicted by frequency of intercourse and orgasm (Haavio- Mannila & Kontula, 1997; Laumann, Gagnon, Michael, & Michaels, 1994). More recent research by Higgins et al. (2011) found that university-aged men and women who experienced sex more frequently were more sexually satisfied and this finding was confirmed by other studies (McNulty & Fisher, 2008; Schwartz & Young, 2009). Yucel and Gassanov (2010) suggests that this relationship might be bidirectional, whereby those who are not satisfied with sex engage in sex less frequently and that those

who have sex less frequently experience less satisfaction. From a more clinical perspective, Træen (2010) found that low sexual frequency was one of the main causes of sexual dissatisfaction reported by participants. However, a recent study based on the responses of over 30 000 participants found that more sex is not always linked with well-being and satisfaction. Muise, Schimmack and Impett (2016) identified that sexual frequency and wellbeing was only associated for those in a relationship and that the relationship between sexual frequency and well-being is curvilinear with the optimal frequency of sex being once a week. Although, this study looked at the effects of frequency on relationship satisfaction rather than sexual satisfaction, it suggests that more sex is not always better. In fact, the authors comment that “sex may be like money – only too little is bad” (Muise et al. 2016, p.301).

Santtila et al. (2008) measured sexual dissatisfaction through the discrepancy between desired frequency for sexual activities such as vaginal intercourse, oral sex, kissing and petting and the actual frequency of engaging in those activities. They found frequency discrepancies across a range of behaviours for both men and women in a sample of 3604 Finnish participants suggesting that those in the study were not experiencing as much sex as they desired and were therefore sexually dissatisfied. Research points to gender differences in levels of sexual desire levels in which men report higher levels of sexual desire across all stages of a relationship compared to women (Regan & Atkins, 2006; Baumeister, Catanese, & Vohs (2001). However, Fisher, Moore and Pittenger, (2012) found that although men did think about sex more than women they also thought more about food and sleep compared to women

suggesting men have more needs-based thoughts in general. Træen (2010) interestingly notes that despite these widespread gender differences, women tend to blame their sexual dissatisfaction on their own low level of sexual desire. Sexual variety and creativity has also been correlated with sexual satisfaction (McNulty & Fisher, 2008) with gender differences being identified in this area as well. Ashdown et al. (2011) found that the positive association between sexual satisfaction and greater experimentation of sexual positions and locations was stronger for men than for women.

Orgasm rates have been associated with greater sexual satisfaction for both men and women and due to this association self-reported orgasm rates have often been used in studies to measure sexual satisfaction (Higgins et al., 2011; Young, et al., 1998). One of the main reasons for this is that orgasm rates are easy to measure and can be easily compared across studies (Meston & Trapnell, 2005). However, several problems have been identified with using orgasm as a measure of sexual satisfaction. One primary reason is that it is unclear whether orgasm leads to greater sexual satisfaction or sexual satisfaction leads to greater experience of orgasm. Another issue with using orgasm as a measure of sexual satisfaction is that some studies have found that orgasm rates are not always associated with increased sexual satisfaction. For example, McClelland (2009) found that women who had higher levels of sexual satisfaction reported lower rates of orgasm. Furthermore, Opperman, Braun, Clarke, and Rogers (2014) identified that orgasms mean different things to different women. For some it signifies the ultimate sign of their own pleasure whereas for others it represents the ultimate goal to reach when having sex or that the sexual encounter has come to an end. And yet for others

still, the research noted that sexual encounters were evaluated based on whether one's partner experienced orgasm rather than what the person themselves experienced.

A study by Higgins et al. (2011) further highlights that orgasm is not an appropriate indicator of sexual satisfaction for women. They found that men reported experiencing orgasms twice as much as women and that women were five times more likely than men to report 'rarely' or 'never' experiencing orgasm during sexual intercourse. However, despite these findings they found that there was no significant difference in levels of satisfaction between men and women. Although they nonetheless found that women who did report experiencing orgasm frequently during intercourse were 6.6 times more likely to report that they were sexually satisfied than others. These findings indicate that orgasm has multiple significances and presents a challenging implication for previous research which has used orgasm as simple indicator of sexual satisfaction (Fahs & Plante, 2017).

1.4.4 Issues with measuring sexuality

Studies exploring the factors that are associated with sexual satisfaction are vast. However, as demonstrated above the conclusions drawn from these studies can often be contradictory and difficult to compare. (Dundon & Rellini, 2010). Pascoal et al. (2014) believe this is because of the limited conceptual definitions and theoretical models that exist for sexual satisfaction. They further claim that studies in this area are inconsistent with the measurements used and this reduces comparability between studies.

Štulhofer, Buško, and Brouillard (2010) point out that many studies reduce the measurement of this complex construct into a single-item indicator by simply asking “How satisfied are you with your sex life?” Other studies such as Higgins et al. (2011) used a two-item measure, which simply asked participants to self-report the extent of their “physiological (physical) sexual satisfaction” and their “psychological (emotional) sexual satisfaction”. Other researchers have borrowed scales from relationship research and then adapted them to measure sexual satisfaction such as Ashdown et al. (2011), who used a subscale from the ‘Investment Model Scale’ (Rusbult, Martz, & Agnew, 1998) and changed the wording from ‘romantic relationship’ to ‘sexual relationship’.

Whilst these measures may have been appropriate for the needs of these researchers, more conclusive results may be derived from the use of more specific measurements. The systematic review conducted by Sánchez-Fuentes et al. (2014) brought to light that out of the many instruments and methods that had been used to measure sexual satisfaction only two were based on a theoretical conceptualisation of sexual satisfaction. One was the New Sexual Satisfaction Scale (NSSS; Štulhofer et al., 2010) and the other was the Global Measure of Sexual Satisfaction (GMSEX; Lawrance & Byers, 1995). Both of which are based on the theory that there are two components to sexual satisfaction; personal well-being and dyadic processes. There is a need for research to be conducted that measures sexual satisfaction using robust and strongly validated measures so that a clearer understanding of sexual satisfaction may be obtained.

1.4.5 Non-sexual Factors

In their review Sánchez-Fuentes et al. (2014) highlighted that distal and macro factors such as social support, culture and religion can impact sexual satisfaction. The next section of this review will focus on the role of culture and religion on sexual satisfaction as they are most relevant to the current study. The relationship between religion and culture is complex and interconnected yet both have a strong influence on the attitude and beliefs that societies and individuals possess towards sexuality (Agocha et al., 2014).

1.4.5.1 Culture

Culture can influence one's values and perception about what is appropriate sexual behaviour, a suitable partner and even the age of consent (Heinemann, Atallah, & Rosenbaum, 2016). Behaviour that might be perceived negatively and as hyper-sexualising in one culture might be considered entirely acceptable and even positive in another. Culture can also impact what is perceived as normal or pathological. As an example, in Asia a lack of sexual desire is not considered abnormal or problematic due to the cultural acceptance that Asian women are not entitled to sexual desire (Lo & Kok, 2014). Whereas, in Western culture a lack of sexual desire in women is perceived as a clinical issue and diagnosed as Female Sexual Interest/Arousal Disorder in the DSM-5 (APA, ed. 2013). Culture can also impact how people perceive the purpose and function of sex; be it for pleasure, establishing love and devotion or purely for marital duty and procreation.

Laumann et al. (2006) conducted a study exploring sexual well-being across 29 different countries to explore the impact of sociocultural influence on a person's perception and evaluation of sexuality. They found that across the countries there were distinct differences in how people perceived sex and its relationship to gender role. As previously mentioned, these differences had an impact on the overall satisfaction of the individual's sexual experience, even after they clustered countries into groups, across all the clusters women expressed less sexual satisfaction than men and perceived sex as less important. Interestingly, a cluster that consisted of several Asian countries such as China, Indonesia and Japan revealed the lowest levels of sexual satisfaction and pleasure compared to other countries. This cluster of countries also seemed to value the role of sex as less significant to one's overall wellbeing compared to other clusters. This study highlights the importance of cultural influences on sexual satisfaction and the need to explore cultures and subcultures for their different experiences, perceptions and value of sex.

1.4.5.2 Religion

This study is particularly interested in the role that religion plays in sexual satisfaction. Religion can be an integral part of a culture and influence the beliefs, attitudes and behaviour of both, the individual and the society. Hernandez et al. (2014) describe religion and sexuality at "the core of human nature and relationships" (pp. 425). They identify that just like religion places a strong emphasis on personal development and the role of relationships in

one's life, sex can have a similar significant impact on personal-wellbeing and quality of relationships, resulting in the interweaving of these two fundamental human experiences. Despite the profound connection between religion and sexual satisfaction, our understanding of how they interact is limited and studies often arrive at contradictory conclusions (Sánchez-Fuentes et al., 2014).

One strand of research suggests that the religion impacts sexuality negatively. Various theories have been proposed as to how religion restricts sexual satisfaction such as limiting the range of permitted sexual unions or categorising sexuality as 'sinful' which may increase associated guilt and minimise the role of pleasure in sex (Ashdown et al, 2011; Davidson, Darling, & Norton, 1995; Murray-Swank et al., 2005). For example, Purcell (1984) found that people who are more religiously rigid had lower sexual satisfaction levels, more sex-related guilt and more sexual dysfunction. Higgins et al. (2011) similarly found a negative correlation between religiosity and sexual satisfaction and postulated this was due to rigid sexual attitudes. The study found that liberal sexual attitudes resulted in less sex-related guilt and increased sexual satisfaction. A study by Mahoney (1980) also found that a high frequency of religious attendance or religiosity predicted lower frequency in engaging in oral, anal, and vaginal sex. Ashdown et al. (2011) explain that these findings may be a result of the way religion regards certain sexual behaviours such as anal or oral sex and masturbation as taboo or immoral. The reason that these behaviours may be considered as immoral by some might be related to the fact that religions have historically taught that

sex is for procreation and disapprove of sex for the primary purpose of pleasure (Davidson et al., 1995; Murray-Swank et al., 2005).

However, not all studies exploring the relationship between religion and sexual satisfaction suggest a negative relationship. A study by Young et al. (1998) found that participants' religious commitment or their beliefs about whether God found sex favourable or unfavourable was not associated with sexual satisfaction. Studies by Ashdown et al. (2011), Davidson et al. (1995) similarly concluded there was no relationship between religion and sexual satisfaction. There are also a few studies that suggest there might be a positive relationship between religion and sexual satisfaction. A study by Neto and Pinto (2013) found that religious believers/attendees scored higher on satisfaction with sex life scales than non-believers/regular attendees. Another study by Peitl, Peitl, and Pavlovic (2009) exploring sexual satisfaction amongst patients suffering from schizophrenia found that those who were Roman-Catholic reported greater sexual satisfaction than those that were Eastern-Orthodox or atheist. To make sense of these contradictory findings it is necessary to consider some of the fundamental components of religion and the ways that these can impact findings.

The most significant problem with literature on this topic to date is that many of the studies concerning sexual satisfaction and religiosity have focused on Christian populations (Davidson et al., 1995; Hernandez et al., 2014; Peitl et al., 2009). Each religion has its own perspective on sexuality which does not necessarily overlap with the perspectives of other religions. For example, the historic mainstream Christian doctrine of "the original sin" and "the fall of man" sets the tone for a prohibitive attitude towards sex (Bainton, 1952).

Whereas, in contrast, Judaism sees sex within a marriage as a fundamentally positive divine commandment to fulfil (Kaufman, 1992). There are large gaps in the research of religion and sexuality, particularly in the understanding of how different religious views and cultures impact perceptions and experiences of sex. To date, psychologists struggling to understand the factors influencing sexual dissatisfaction of Jewish clients are not adequately supported by the literature. This study is interested in exploring the impact of religion on sexual satisfaction in Jewish participants as there is currently limited research on this population. From the research it appears that one key way religion influences sexual satisfaction is through the attitudes it condones or endorses. As a result, this study is also interested in exploring how religion impacts attitudes towards sexuality and how these attitudes affect sexual satisfaction in turn.

Hernandez et al. (2014) note that research relating to religion and sexuality focuses disproportionately on teenage and university-aged students. Although there may good reason for this, such as identifying whether religion can act as a preventative for undesirable consequences of teenage sexuality such as pregnancies and contracting disease, it nonetheless means that we have little insight into how religion influences sexual satisfaction amongst married or committed couples. In their review of the research, Hernandez et al. (2014) express the need for further studies that focus solely on married couples to enhance understanding of how marital sexual activity and experiences may differ across religions. Therefore, one of this aims of this research is to explore sexual satisfaction amongst religious married individuals.

The study of how religion impacts sexual satisfaction in minority subsets of the population is important for the development of the field of counselling psychology. The Division of Counselling Psychology promotes pluralism, diversity, understanding and acceptance of the individual's world view and for many, spirituality and religion are significant and important components of their lives (BPS Standards and Accreditation for Doctoral programmes in counselling psychology, October, 2015). Practitioners are required to understand how cultures may differ from Western society in how they perceive and experience sexuality (Heinemann et al., 2016). For many religious people, their beliefs about sexuality may be a source of anxiety as they integrate and live in a Western culture. In these cases, it will be necessary for the clinician to have a sense of the client's cultural understanding, experience and expectations (Heinemann et al., 2016). Many argue that developing spiritual literacy, an understanding of the basic principles, tenets and philosophies of major religions and how they impact significant areas of life such as sexuality, is crucial for the practice of counselling psychologists. (Hernandez et al., 2014; Pargament, 2007; Turner, Fox, & Kiser, 2007).

1.4.6 Issues with measuring religion

Another significant issue with research in this area revolves around the measures used to determine religiosity. For example, Ashdown et al. (2011) and Davidson et al. (1995) both measured religiosity by frequency of church attendance. Murray-Swank et al. (2005) similarly measured frequency of attendance in combination with a 4-point Likert scale of self-reported

religiosity and spirituality ranging from “Not at all religious/spiritual” to “Very religious/spiritual. These metrics do not offer a good proxy for the complexity and richness of holistic religiosity. After finding no significant association between religion and sexual satisfaction Ashdown et al. (2011) recognised that this might be a result of how they defined and measured religiosity in their study. They explained that attending religious services or measures of faith development are independent of specific religious beliefs. They further suggest that religiosity and spirituality are both multidimensional, and it is possible that different dimensions of religiosity are associated with sexual satisfaction differently. Hernandez et al. (2014) point out that research in this area is beginning to differentiate between elements of religion such as spirituality, religious practice and sanctification. In recent studies, religiousness is being conceptualised as non-personal, external and institutionalised whereas the dimension of spirituality is being perceived as more personal and internalised (Lazar, 2014; Hill & Pargament, 2003).

Developing ways to measure religiosity other than church attendance is crucial to further our understanding of how religion impacts people. Many elements of religiosity occur outside formal settings of religious service and the emphasis placed on attending religious services as a form of religious dedication differs between religions. For example, whilst Orthodox Jewish men attend synagogue regularly, attendance is often much less frequent for women, with no corresponding decrease in religiosity (Lazerwitz, 1961). This is because women are religiously exempt from formal prayer and as such this method to measure religious levels amongst Orthodox Jewish women is

meaningless. A measure of religiosity which focuses on a wider variety of religious behaviours and particularities surrounding belief and spirituality may offer more substantive findings. Other problems identified in this line of research is that the analyses tend to be descriptive or correlational and religion is often not the main variable of focus in the study (Hernandez et al., 2014).

A review by Hernandez et al. in the most recent version of the *APA Handbook of Sexuality and Psychology* (2014) voices the need for future research in sexuality to broaden and deepen its use of instruments, analytic methods and participant groups, particularly in understanding cultural diversity. This study hopes to address the outlined issues by using more reliable and extensive measures of religiosity, more discriminant analysis, specific population groups and maintain the variable of religion stays at the core of the investigation.

To summarise, this study is interested in progressing research in this area by focusing on how religion impacts sexual satisfaction amongst Jews. The way that religion influences sexuality is not comparable across religion as different faiths have fundamentally varying attitudes towards sexuality. Differences in how Christianity and Judaism perceive sexuality are outlined below to demonstrate the difficulty of generalising findings from research conducted on a largely Christian sample to that of a Jewish population. However, prior to this a discussion of psychological theories relating to religion and sexuality is presented.

1.5 Religion and Sexuality

1.5.1 Psychological theories about religion and sexuality

Traditional views about the psychological impact of religion on sexuality are often negative and stem from Freud's psychoanalytic theory of psychosexual development. Freud had an overall negative view of religion and professed that religion fulfilled the infantile wish to feel protected like a child feels protected by its father (Freud 1927/1961b, 1930,1961a). He saw religion as a culturally developed means of controlling and repressing natural impulses, particularly sexual ones to quell anxiety. His negative view had a strong influence on the way religion and sexuality were perceived at the time by psychologists and this view still has an impact in modern society (Hernandez et al., 2014). Many studies, and particularly early research in this area seem to support this theory. For example, studies by Beck, Cole and Hammond (1991) and Purcell (1984) found that married participants who had higher religious levels had lower sexual satisfaction, experiences, frequency and permissive attitudes. Thornton and Camburn (1989) found that lower religious levels were associated with more liberal and permissive views, more sexual activity and more friends who were sexually active. Other theories such as the evolutionary theory, suggest that religion's role in sexuality is to regulate sexual conduct. These evolutionary theories suggest that the emphasis religion places on marriage and fidelity serves the purpose of ideally creating a stable environment for the offspring to develop in; although this is clearly not always the case (Hernandez et al., 2014).

Hernandez et al. (2014) suggest that religion can be the cause of struggles and development of unhealthy relationships when people feel they are not living up to the rules of their religion and as a result experience shame, guilt or disparity between their beliefs and actions. Nonetheless, they continue to explain that religion may also have a positive impact on sexual relationships by enhancing and maintaining healthy sexuality and providing value and meaning to a couple's sexual relationship. For example, MacKnee (1997) conducted interviews amongst married participants and found that many participants described their sexual experience as meaningful, spiritual and transcendental. Many of the traditional theories are limited in their conceptual understanding of how religion impacts sexuality and do not consider these multiple facets (Hernandez et al., 2014).

Hernandez et al. (2014) point out that research has recently started to consider the role that sanctification may play in sexuality. They define sanctification as the process of attributing divine significance to a facet of life. Hernandez et al. (2014) discuss how the multiple facets of religion such as sanctification, practice and belief might explain some of the contradictory findings in this area. Murray-Swank et al. (2005) conducted a study and found that amongst college students sanctification was related to greater frequency and range of sexual activity whereas, religiousness measured by 'typical' measures such as church attendance, frequency of prayer and self-rated religiosity was not related to sexual measures. The 'typical' measures were also not associated with the sanctification variable indicating that religiousness and sanctification may be distinct concepts.

A study by Hernandez, Mahoney, and Pargament (2011) found that the more newly married individuals perceived sex as sanctified the more they could predict sexual satisfaction, intimacy and marital satisfaction than if they had used religiousness as measured by 'typical' indicators. They carried out a follow up study a year later with the same individuals and found that sanctification was still a significant predictor for sexual and marital satisfaction (Mahoney & Hernandez, 2009). This recent development to separate distinct religious elements may help provide a clearer understanding about how religion interacts with sexuality.

When considering the findings of different studies, it is interesting to bear in mind the time period the research was conducted in as well as the religious orientation of the researcher. The assumptions and expectations of a researcher can influence methodological design, data collection and even analysis (Spiegelhalter, 2015). This may be another contributing factor to the contradictory findings from studies. For this reason, reflexivity, the process of acknowledging and identifying one's own biases is encouraged in counselling psychology research.

1.5.2 Christianity and Sexual Satisfaction

Early Christianity viewed celibacy as the religious ideal, with marriage as a concession to the weakness of man and many of these ideals influence current views and perspectives on sexuality (Bainton, 1952; Pagels, 1988; 1 Corinthian, 7:2, 7:6, New International Version). Even within marriage the religious Christian narrative relating to sexual activity was focused on

reproduction rather than pleasure. (Davidson et al., 1995; Reiss, 1990). Clerical marriage is forbidden for Eastern Catholic, Eastern Orthodox and Oriental Orthodox religious leaders, whose membership comprises majority of the Christian world. In contrast, Judaism views marriage as a divine commandment to fulfil. Rabbis are expected to be married, and whilst pre-marital sex is forbidden, within a marriage, men have an obligation to sexually satisfy their wives (Babylonian Talmud. Tractate Ketubot, 61b). These differences amongst religious leaders set differing tones about each religion's attitudes towards sexual pleasure or physical pleasure in general. Early Christianity promoted that the path to spirituality was accessed through asceticism (Cochran & Beeghley, 1991; Friedman, 2005; Wiesner-Hanks, 2014). Whereas, Judaism believes that the path to spirituality must be attained through the sanctification of physicality (Friedman, 2005).

With the development of Christianity, attitudes towards sex have changed over time. Catholics believe that sex in marriage is a binding, unifying experience (Catechism, 1643) and that marriage is the sign of love between God and humanity (Catechism 1617). And more recently, Pope John Paul II presented a positive view of sex that that focused more on redemption rather than condemnation (General Audience 6). For many Christian denominations sex within a marriage represents God's love and even His presence (Gardner, 2002). Nonetheless, sex is only sanctioned within a marital relationship and premarital and extramarital sex is viewed negatively and sinful (Hernandez et al., 2014). Considering that most of the research in this area has focused on Christian teenage or university-aged samples it is unsurprising to find that shame and guilt are present in their sexual attitudes. This highlights the

importance of separating studies exploring married couples and non-married couples. It is fair to suggest that within a Christian population, married couples will experience less shame and guilt in their sexual relationship compared to those who are sexually active in a non-marital relationship.

Some researchers challenge the view that religious ideals only promote guilt and behavioural restraint (Murray-Swank et al., 2005) They suggest that instead of conducting research from a dualistic theological framework which considers the body and its functions as bad and the soul as good, it would be helpful to conduct research from a theological framework of embodiment. This framework suggests that the body and its functions are created from God and thereby defined as sacred, desirable and can be used to access a close relationship with God. In their study they assessed participants' beliefs about how religion regarded sexuality and found that those who had greater belief about the sanctification of sex experienced greater sexual satisfaction.

1.5.3 Judaism and Sexual Satisfaction

Despite the relatively recent developments in Christianity to view sexuality in a more positive light, its underlying views are profoundly different to those in Judaism. Within traditional Judaism there are disparate views towards sexuality varying from positive and permissive to negative and restrictive. (Cherlow, 2007; Lichtenstein, 2005). However, this is not exclusive to sexuality; inherent to Judaism are differing opinions towards any construct. As with Christianity, sex is only permissible within the bond of marriage. Judaism defines marriage as the creation of a spiritual bond between husband

and wife and fundamental to this is that sexual activity should not be purely for a physical purpose (Kaufman, 1992). At the very least it should serve as a provision for emotional connection and at its most a spiritually transcending experience (Friedman, 2005). There does exist within Judaism the perspective that the main purpose of sex is purely for procreation and warns people from being carried away by sexual desire which some consider to be debasing of the human nature (Ibn Ezra; Lichtenstein, 2005). However, this is not mainstream and there is a distinct obligation in Judaism for a man to sexually satisfy his wife thereby maintaining the value of sexual pleasure even if one believes that the primary purpose is for procreation. Within Judaism there are few rules relating to the behaviours allowed during intercourse other than the intentional emission of semen outside of the vagina (Ribner & Rosenbaum, 2005) although some Rabbinic authorities sanction this if it is only an occasional occurrence (Shitah Mekubetzet on the Babylonian Talmud. Tractate Nedarim 20b)

These contrasting views may have implications for a person's ability to derive satisfaction from their sexual relationship. If one subscribes to the belief that sex is a purely animalistic urge that we must succumb to, this could lead to the development of guilty feelings when indulging in sexual behaviour, even ones that are permissible. However, if one views the experience of pleasure as ideal and something to be enjoyed, it can equally influence the satisfaction one derives, albeit in the opposite way.

There are two other significant areas of Jewish law that can impact sexuality. The first is the principle of modesty and the second is the intricate detail related to a break from physical contact between a married couple whilst a

woman has her period until she has completed a purification process, referred to as *niddah*. The way that each of these may impact sexual satisfaction in various ways is discussed below.

1.5.3.1 Modesty and Sexuality

The notion of modesty for Judaism stems from a verse in the book of Micah (6:8) “Vehatzneah lachet im elokecha” most commonly translated as “...and walk modestly with your God” (Micah 6:8, The Jewish Publication Society, 1985), although the word ‘dignity’ may be a better translation than the word ‘modesty’. Modesty is a strongly held value across all areas of personal and public Jewish life such as speech, behaviour and attitude. However, there is a particularly strong emphasis on modesty in relation to sexuality. This does not solely impact the actual act of sexual intercourse but many things that surround it such as discussion of sexuality-related topics, dress and appearance with a highlighted emphasis that women do not wear provocative clothing. This also extends to the mingling between the sexes. Most Ultra-Orthodox schools and many Modern-Orthodox schools will have separate schools or classes between boys and girls. Mixed gender recreational activities are also discouraged. There is a separate law prohibiting physical touch between men and women who are not first-degree relatives. This means that Jews who have had an Orthodox upbringing will not usually spend casual time with the opposite gender until they are dating-to-get-engaged. The extent to which an Orthodox individual will have been exposed to basic sexual education will depend on which Orthodox denomination they belong to.

Judaism can be divided into three general denominations that represent differing philosophies about how to interact with Jewish law and secular society. These are referred to as; Ultra-Orthodox, Modern-Orthodox and Non-Orthodox and each of these groups will have subdivisions within it. These categories or ones similar to these are often used when conducting research on the Orthodox Jewish community (Lazar, 2014). The Ultra-Orthodox community tends to actively separate itself from secular culture to protect its Jewish values. Members of this community typically profess to care strongly about adhering to the particulars of Jewish law. The Modern-Orthodox community also presents itself as having a strong adherence to Jewish law, yet Modern-Orthodox Jews tend to believe that it is important to integrate within secular society whilst remaining true to traditional Jewish faith. In practice, the Modern-Orthodox community is an umbrella term for a very broad spectrum of Jewish practice. Non-Orthodox Jews do not typically have strong adherence to traditional Jewish law and perceive that it can be adjusted and changed to adapt to modern society. They tend to embrace and fully integrate with the secular world.

Generally, one can assume, Ultra-Orthodox and Modern-Orthodox Jews will not have discussed sex openly with anyone until they are having their lessons preparing them for marriage shortly before the wedding. There is also the expectation that there would have been no sexual contact between the genders prior to the wedding (Lazar, 2017). A couple is therefore expected to go from a completely non-physical relationship before their wedding to a fully sexual relationship on the wedding night or very soon after (Lazar, 2017). Many may find the immediate switch from a non-sexual relationship to a sexual

relationship complex and difficult to navigate (Friedman, Labinsky, Rosenbaum, Schmeidler, & Yehuda, 2009). Once a couple is married they will still maintain a sense of privacy around their sexual life and even if they are experiencing sexual problems some will be reluctant to discuss it with others due to modesty reasons (Friedman et al., 2009).

Despite the outlined strictures, a recent study explored the sexual lives of 380 Ultra-Orthodox and Modern-Orthodox religious women and found that only less than one quarter of the sample reported no physical or sexual contact prior to marriage (Friedman et al., 2009). These findings highlight that for many Orthodox women, their first sexual encounter was prohibited according to Jewish law. It would be important to consider how this might result in feelings of guilt and shame with relation to sexual feelings and behaviour even once they are married. Practitioners working with this client group require an awareness of the sensitivity that their clients may have to the use of explicit language to discuss sexual activities (Kellogg et al., 2014). Concern for modesty when discussing sexual experiences is one of the primary reasons why there is so little research on Orthodox Judaism and sexuality (Friedman et al., 2009). Members of the Orthodox Jewish community are likely to be apprehensive of having their sexual lives inquired about. Therefore, any research conducted with this demographic must take account of their sensitivities in the way the data is gathered and the language that is used.

1.5.3.2 Jewish Family Law

Once a couple is married there are still several boundaries to their sexual relationship. The couple refrain from any physical contact for the duration of a woman's period and seven days after that. For most couples this will amount to 12 days of physical separation. The main prohibition is to prevent a couple from having sex at this time and to safeguard this law there are further laws that stipulate a couple must not touch each other or share the same bed. A couple may resume their physical and sexual relationship once the wife has completed a spiritual ritual which culminates in immersing herself in a pool of water referred to as a *mikveh*. As with other areas of Judaism these laws seek to elevate physical behaviours into spiritual ones, in this case it is to sanctify the sexual aspect of a couple's relationship. (Friedman et al., 2009). Many view the rhythm of sexual abstinence followed by a reunion as key to their marital harmony and happiness (Friedman et al., 2009). Others understand that the laws help discipline the sexual drive into a framework of holiness (Friedman et al., 2009). Friedman et al. (2009) found that over 75% of their sample of Orthodox Jewish women felt their sexual lives were improved by these laws. Many of the participants explained in their open-ended responses that knowing there was a limited time they could be physically close to their husband meant that they used the time together more consciously. Others described how the breaks prevented their sex life from becoming too routine. A quarter of the women however, reported finding the breaks in their contact frustrating especially at the beginning of their marriage when they were still getting used to having a sexual relationship together.

Research into how religion impacts sexuality in Orthodox Jews is valuable to the field of counselling psychology. As a profession we promote pluralism and respect cultural and individual diversity and believe that we must commit to providing respectful treatment for all (Packard, 2009). However, this cannot be done if we do not have a basic insight or understanding of how a culture differs from our own. Success of therapy is partially contingent on the ability of the therapist to understand the social and cultural background of the client (Laungani, 1997) and one element of this is adopting the correct level of dialogue specific to the needs of the client (Collins & Arthur, 2010; Laungani, 1997). Therefore, it is crucial for the field of counselling psychology to develop research into diverse population and use these findings to help tailor therapy. Religious beliefs can impact the treatments clients are willing to engage with to address a sexuality-related problem. In fact, some methods used to treat couples with sexual dysfunction such as masturbation will contradict Jewish guidelines (Friedman et al., 2009). In these cases, if a practitioner has some sensitivity or basic awareness of these issues they can prevent placing the client inadvertently in an uncomfortable situation which might lead them to reject therapeutic intervention or opt out of therapy (Friedman, 2009). Furthermore, counselling psychologists greatly value the development of a strong therapeutic relationship with their clients which is seen as the vehicle to promote growth (Packard, 2009). Demonstrating an awareness of the individual's religion can help establish and enhance a strong therapeutic alliance when the client perceives that their therapist recognises and respects their belief (Kellogg et al., 2014). For all these reasons, research into Orthodox Judaism and sexuality can benefit the field of counselling

psychology by enhancing its understanding of humanity as a whole and propelling the scientific and theoretical understanding of sexuality further.

1.6 Sexual Education and Sexual Satisfaction

One factor which may contribute towards a correlation between sexual satisfaction and religiosity which, to the best of the author's knowledge, has not been directly explored to date, is level of sexual education. Friedman et al. (2009) studied different aspects of sexuality amongst Orthodox Jewish women and found that the majority did not feel prepared for married sexual life. Despite Judaism's emphasis on a healthy sexual life, they found emotional and physical sexual satisfaction were lower for the extremely Orthodox. Furthermore, Rosenbaum, De Paauw, Aloni, and Heruti (2013) found that sexual psycho-education was beneficial to Orthodox Jewish couples unable to consummate their marriage and Ribner and Rosenbaum (2005) found from clinical experience that a basic lack of information about sex was a primary factor for unconsummated marriages. These studies document cases in which neither partner could identify the location of the vaginal opening or describe the process and place of arousal in sex and foreplay. Some of the main themes from Orthodox Jewish women's reports in a qualitative study exploring their reaction to their wedding night were, 'traumatic', 'unprepared' and 'an event best forgotten' (Prins, 2011).

A few studies have observed a relationship between sexual knowledge and sexual satisfaction, however, as far as the author is aware, these two variables have not yet been explored directly. La France (2010) explored whether a

person's willingness to communicate about sexual preferences could predict sexual satisfaction. In order to assess this La France measured participant's level of sexual knowledge which in this study was conceptualised as the extent to which participants knew what made them feel sexually satisfied and a scale was devised to measure the willingness of participants to communicate their sexual preferences to their partner. Interestingly, they found that sexual knowledge was a significant predictor of sexual satisfaction whereas 'willingness to communicate' was not. There is significant scope to broaden the findings of this study. La France (2010) defined sexual knowledge from the perspective of 'self-awareness', and it would be worthwhile to explore a more objective measurement of sexual knowledge.

Maybruch, Pirutinsky, and Pelcovitz (2014) explored which elements of premarital education programs Orthodox Jewish participants rated as most valuable for their marital satisfaction. They found education about the sexual relationship was positively correlated with marital satisfaction and was the only significant predictor of marital quality in a regression analysis. Whilst interesting, there is plenty of room to further investigate this topic. Maybruch et al's variable of 'education about the sexual relationship' covered a plethora of subthemes including; aspects of Jewish law that pertain to intimacy and sexuality, emotional aspects of the sexual relationship as well as basic anatomy, physiology and mechanics of the sexual relationship. Since these variables were categorised together it is difficult to identify the relative importance of each for overall marital and sexual satisfaction.

Friedman et al. (2009) found that most of their Modern-Orthodox and Ultra-Orthodox Jewish female participants did not feel they had been prepared for

their wedding night and sexually active married life thereafter. Women reported these feelings despite having had a formal bridal teacher prepare them for Jewish family laws and a sexual relationship. They described that the focus of their classes was more on how to not break the law rather than how to engage in foreplay leading to successful intercourse or even which sexual acts were permissible. When the participants were asked in an anonymous questionnaire what topics they would have liked to learn more about from their bridal teacher the most common response was basic sexual education. This included information about women's body parts and sensitivities; orgasm and sexual positions; men's body parts; what to expect and how to consummate their marriage.

To summarise, sexual knowledge may correlate negatively with religiosity in the Orthodox Jewish population because Orthodox Jews place a high value on modesty, especially with regards to sex and sexuality. Contact between the sexes is limited prior to marriage and contemporary Jewish law prohibits pre-marital sexual experience (Ribner, 2003). Whilst less religiously Orthodox Jews might permit their children exposure to sexual education classes in a school framework, this would be strictly prohibited for modesty reasons in the extremely religious Orthodox Jewish population (Ribner, 2003; Ribner & Rosenbaum 2007). Orthodox Jews are unique compared to the wider population in that they may have a high broad level of education, whilst maintaining a very low level of sexual knowledge, even after marriage.

Counselling psychology emphasises the importance of promoting wellbeing and empowerment and one of the ways this can be achieved is by providing tools that can prevent the development of problems (Packard, 2009). For all

these reasons this study is interested in exploring the role of sexual knowledge in the sexual satisfaction of Orthodox Jews. This is an area that has not been explored directly and can provide tremendous insight into the effects of sexual psychoeducation. For the purposes of this study sexual education will refer to a formal process of acquiring information about sexuality. Sexual knowledge will refer to information about sexuality acquired through informal ways such as through friends, media, novels and magazines. Given that there is little formal sexual education in the Orthodox Jewish community this study is interested in the level of sexual knowledge Orthodox Jews develop and the extent to which this is related to sexual satisfaction.

1.7. Social norms and Sexual Satisfaction

Another key differences that might impact sexual attitudes and knowledge between Orthodox Jews and the general population might be amount of exposure one has to Western media and culture. The Ultra-Orthodox Jewish community tends to limit their exposure to influences that may compromise their religious beliefs and values (Ribner, 2008). As a result, they may be less influenced by norms presented through the media, books or conversations with others. Although this means they may have lower levels of sexual knowledge it may also mean that their expectations of sex are less influenced by unrealistic presentations of sex in secular society (Kleinplatz et al., 2009). Research has found that expectations and misperceptions of sex can influence sexual satisfaction. Stephenson and Sullivan (2009) conducted a study exploring the effects of the Social Norms Theory on American college

students and found that the greater the discrepancy between perceived social norms of sexual behaviour and one's own sexual behaviour, the greater the sexual dissatisfaction. This study only looked at number of sexual partners as a variable but posited that other variables such as frequency and quality of sexual experiences may follow the same pattern. When they gave the experimental group real information about others' sexual activities they found that participants' sexual satisfaction rates increased compared to a control group as they realised that their own behaviour was less divergent from the social norm than they had originally believed. It is possible that low level of exposure to information about sexual relationships allows for a higher level of sexual satisfaction as there is less disappointment of unattained expectations.

A study by Menard and Kleinplatz (2008) analysed the information people were receiving from magazines about what led to a satisfying sexual experience. They found that the focus of the tips presented in these magazines were primarily on sexual technique and variety. The authors note that this sort of information encourages people to focus outwardly on the externalities of sex rather than focusing inwardly on one's mindset and state of presence with one's partner. Kleinplatz et al. (2009) conducted interviews with 64 participants from varying backgrounds. On analysing the themes they deduced that there were eight components for great sex: being present and focused, connection and alignment, deep sexual erotic intimacy, high communication and empathy, authenticity and transparency, transcendence and transformation, exploration and fun, vulnerability and surrender. These themes are all placed within the intrapsychic and interpersonal domain and

provide a different narrative from that presented by the media and magazines about what leads to a satisfying sexual experience. It would be interesting to explore whether the expectations of Orthodox Jews differ from other groups based on the assumed lower exposure they have to secular narratives of sexuality.

Similarly, the Social Exchange Model by Lawrance & Byers (1995) suggests that sexual satisfaction is achieved when individuals perceive that rewards and costs of the sexual relationship are balanced (Hernandez et al., 2014). A large amount of research in this area identifies the importance of equality and fairness as integral to an individual's experience of satisfaction. McClelland (2010) discusses how it is the perception of fairness of input and rewards rather than the actual balance of it that leads to sexual satisfaction and uses this to identify the role of expectations in sexual experience (Byers & Wang, 2004). She argues that expectations *cannot* be compared to the general experience but rather must be considered within a specific context that could be influenced by social factors such as politics, culture and history. For example, men and women might both report satisfaction based on their experience meeting their expectation. However, the expectations can differ between the groups whereby men might expect to experience orgasm at every sexual encounter and women might not (Laumann et al., 1994; McClelland, 2009). In this sense the expectations of religious groups may differ based on what is acceptable by their religion or what they are aware of and this in turn could influence their level of sexual satisfaction. Therefore, this study will aim to explore the sexual expectations of Orthodox Jews to provide greater

understanding on how their sexual satisfaction may differ from those who are not Orthodox.

A widely acknowledged theory of sexuality which may expand on the studies described above is that of *sexual script theory* (Gagnon & Simon, 1974) which suggests that, like with all human social behaviour, sexual behaviour is socially scripted. This theory was influential in changing the way sexuality was understood, which at the time had been heavily influenced by psychoanalytic and biological theories of sexuality which focused on the presence of predetermined instincts or drives in people (Wiederman, 2015). Sexual script theory on the other hand identifies that sexuality is complex, multifaceted and interactional between one's self and society.

Sexual script theory conceptualises sexuality from a social constructivist perspective, whereby, the way sexual behaviour is interpreted is a result of shared belief one has learnt from the social group a person identifies with (DeLamater & Hyde, 1998; Wiederman, 2015). A social script can be conceptualised as a mental representation of expected behaviours for a particular situation. The theory argues that social scripts not only help someone to interpret their objective behaviour but also frames how to interpret internal states and experiences. Sexual scripts can be influenced by many factors in one's culture such as the media, education or religion (Gagnon, 1990; Wiederman, 2015). Sexual script theory suggests there are three levels of scripting that must occur for there to be an effect on behaviour. These are: cultural scenarios, interpersonal scripts and intrapsychic scripts.

Cultural scenarios are the general guidelines learnt from society about what types of sexual behaviours are accepted or rejected. As discussed, this may vary tremendously between cultures and religions as what might be encouraged in one social group may be stigmatized in another. Interpersonal scripts are the application of these cultural scenarios to specific situations and interactions with other people. The intrapsychic scripts represent what is occurring within the individual. They represent fantasies, memories and desires and in this realm the three categories interact with each other, whereby the individual attempts to find an interpersonal script to enact their intrapsychic scripts in a way that maintains the cultural scenarios (Wiederman, 2018; Gagnon and Simon, 1973). They further suggest that once sexual scripts have proven successful in providing adequate performance and pleasure, which often will happen early on in someone's sexual experiences, they tend to remain stable.

This theory suggests that sexual behaviour and experience is heavily impacted by one's social group and the cultural scenarios that one is informed by. This theory suggests that religion, exposure to media and education can all impact a person's sexuality. It is reasonable to suggest that each of these variables can have an impact on someone's sexual satisfaction. The Orthodox community have specific and detailed religious values related to sex, are less exposed to media and have less sexual education throughout their life. Based on the sexual script theory, one can expect there to be differences in sexual experiences compared to less Orthodox or non-religious groups.

1.8 Summary

In summary, sexual satisfaction is an important component of wellbeing. However, research in this area is riddled with contradictory findings resulting in an unsatisfactory understanding of what factors impact sexual satisfaction and how therapists can assist clients to enhance their sexual experiences. Religion often directs many people's beliefs and attitudes towards sex, yet, the role it plays in sexual satisfaction is still vague. There is still much to understand and explore about how religions differ in the way they impact sexual attitudes and experiences. Therefore, this study will attempt to address a gap in the literature by focusing on how these may differ amongst Jews. Judaism places a strong focus on modesty which results in low levels of sexual knowledge amongst Orthodox Jews prior to engaging in sexual experiences. Although one might believe this would negatively impact their sexual satisfaction, Orthodox Jews are also less exposed to the media and therefore may have developed a different set of expectations compared to the general population. Research shows that social expectations and comparisons of sexuality can leave people feeling dissatisfied with their own sexual lives. More research is required to understand how social norms may influence sexual satisfaction amongst Orthodox Jews. The research question directing this study asks whether religion, sexual knowledge and sexual attitudes impact sexual satisfaction amongst Orthodox Jews.

1.9 Aims and Rationale

As discussed in the literature review, findings exploring the link between religiosity and sexual satisfaction have been inconclusive which may be due to the use of poor methodological design, choice of measures and population sampling (Sánchez-Fuentes et al., 2014). Additionally, majority of the studies have been conducted using Christian population samples. This limits the generalisability of findings as different religions may have fundamentally different attitudes and beliefs towards sexuality which makes it difficult to compare groups. Studies in this field require more robust research methods and focus on different religious groups to advance understanding of this topic. This study aims to address this by investigating the impact of religiosity on sexual satisfaction in a minority population of Orthodox Jews which, to the best of the author's knowledge, has not been directly explored. It further aims to expand understanding of religion and sexuality by using previously validated measures. The findings about this group can add to the understanding of religious and cultural differences in sexuality.

Judaism has an inherently positive attitude towards sex and sexual satisfaction, however, at the same time places a high value on modesty between the sexes thereby limiting the level of formal and informal sexual education that members of the group receive (Ribner & Rosenbaum, 2005). The laws of modesty include prohibition of any physical contact with members of the opposite sex other than one's family members and spouse (Rosenheim, 2003). The value of modesty between the sexes can vary between degrees of Orthodoxy and it is common for Ultra-Orthodox circles

to promote limited social interaction with members of the opposite sex as well as discussion or education about sex-related topics. These competing values create a population which holds a fundamentally positive attitude towards sex within a marriage but limits education and discussion about it (Ribner, 2003; Ribner and Rosenbaum, 2005). Previous research has indicated that sexual knowledge may have some effect on sexual satisfaction (La France, 2010) however, this link has not yet been directly investigated. Given the limited discussion of sexuality within the Orthodox Jewish community, this population is particularly suited to explore the impact of sexual knowledge on sexual satisfaction. Therefore, this research aims to explore the relationship between religiosity, sexual knowledge and sexual satisfaction. A positive link may suggest that sexual satisfaction can be improved by providing better sexual education. This is a valuable intervention as it can be provided to couples prior to the development of serious sexual difficulties or dissatisfied relationships.

Previous studies based on Christian samples find that religious guilt plays a part in reducing sexual satisfaction, demonstrating a link between religiosity, cognition and sexual satisfaction (Ashdown et al., 2011; Murray-Swank et al., 2005). However, it is not expected that sexual guilt plays a role in the sexual satisfaction of Orthodox Jews. This allows the effect of religiously induced emotional factors that may impact sexual satisfaction to be separated from more physical and practical ones that may be overcome through the provision of sexual education. Given that religion plays a strong role in the development of beliefs and attitudes of its members, this study aims to explore how sexual attitudes differ between groups of differing religious

levels and how these attitudes impact sexual satisfaction. It is also expected that any differences found in the sexual attitudes between religious groups will provide greater understanding of how different facets of religion impact sexuality differently.

1.10 Hypotheses

The study will test four hypotheses. The hypotheses are based on findings from previous research discussed in the literature review above. The hypotheses will explore differences between the naturally occurring Religious Culture groups of Ultra-Orthodox, Modern-Orthodox and Non-Orthodox Jews. Differences will also be explored between Religious Practice groups using a robust and validated measure of religiosity that can be used either as an overall score or that can divide participants into Highly Religious, Religious and Not Religious groups. The first hypothesis states that there will be a difference in scores between Religious Culture groups in sexual satisfaction, sexual knowledge and sexual attitudes. The second hypothesis predicts that there will be a difference in scores between Religious Practice groups in sexual satisfaction, sexual knowledge and sexual attitudes. The fourth hypothesis states that religious practice, sexual knowledge and sexual attitude scores will all be significant predictors of the sexual satisfaction score. In addition to the stated hypotheses there will also optional open-ended questions presented at the end to enhance the understanding and meaning of the findings. The questions will ask participants about their sexual experiences, expectations, sources of knowledge and discussion of sex with other.

CHAPTER 2: METHODOLOGY

2.1 Overview

This study aimed to explore whether the level of religiosity of Orthodox Jews impacts their sexual satisfaction. This study investigated differences between religious groups in their sexual knowledge, sexual attitudes and sexual satisfaction scores and further explored how these variables relate to each other using correlation and regression analysis. As highlighted in the previous chapter, research into the effects of religion and sexual satisfaction has been criticised for using inconsistent measures, weak methodologies and for being based on poor conceptual understanding. This research addresses these issues by using robust measures of religion and sexuality on a previously unexplored subset of the population. In response to calls to recognise that religion has multiple components, each of which can influence sexuality differently, this study uses two distinct measures of religion and compares the findings. This study further aimed to explore how level of factual sexual knowledge was related to sexual satisfaction, a link which has not yet been explored. To this extent a new measure was developed for the purposes of this study as existing measures were deemed inappropriate for use with Orthodox Jews. Studies have found that sexual attitudes play a role with both religion and sexual satisfaction. Most research relating to sexual attitudes has been based on Christian or teenage population samples however there is little understanding of way religion influences the sexual attitudes of Orthodox Jews. To enable comparison of Orthodox Jews' sexual attitudes to findings of other studies, this study used a validated and well-used measure to explore this variable.

Since there is little research on this religious group, open-ended questions were placed at the end of the study to provide greater insight into the main findings of this study. This chapter will describe the research design and reasons for methodological choices of this study. Prior to this the ontological approach and epistemological stance adopted which influenced the method of the study is presented.

2.2 Epistemological Stance

My ontological belief is that of critical realism. I accept that there exists an objective reality which can be investigated using appropriate research methodology, however, it can only be measured and understood imperfectly. This position stands in contrast to the constructivist stance, which asserts the existence of multiple realities as well as that of naïve realism, which claims the existence of only one true reality that can be measured perfectly.

The subject matters of this study are sex, pleasure, relationships, religion and education. And whilst there exist proxies by which to effectively measure these constructs, they primarily exist within the subjective experience of each individual subject, and as such are unlikely to yield themselves to perfect quantification. Accordingly, I adopt a post-positivist epistemological stance.

The goal of post-positivism is to find an explanation that will ultimately lead to the prediction and control of phenomena (Ponterotto, 2005). However, unlike the strictly positivist approach, the post-positivist paradigm

acknowledges that there are flaws to researcher methodology, that human phenomena are difficult to understand and their problems difficult to solve.

Since much theory has already been developed within this area there are many benefits to addressing these research questions through quantifying the variables which allows for large samples of data to be gathered and the emergence of general patterns of behaviour of a population to be identified. This provides us with greater understanding of the variables involved and allows us to have more control of the phenomena of sexual satisfaction. Whilst I believe that experiences such as religiosity and sexual satisfaction can be quantified, measured and analysed using statistical measures such as questionnaires, I also acknowledge that questionnaires cannot capture the complexity of these experiences and can often mute the experiences of the participants. Despite the limitations of quantitative research in capturing the entirety of experiences, I believe the findings from this study can provide valuable insight and direction in understanding the experience of sexual satisfaction particularly when interpreted alongside findings from different research paradigms in the process of triangulation. For these reasons the study will also include a series of open-ended questions to access elements of the idiographic perspective and provide greater insight into the nomothetic findings from the questionnaires. All research methods have their inherent limitations (Hoyt & Mallinckrodt, 2012). By using quantitative and qualitative means of capturing data the limitations of one method can compensate for the limitations of the other (Hanson, Creswell, Clark, Petska, & Creswell, 2005; Ponterotto, Mathew, & Raughley, 2013).

Regarding epistemology and the relationship between the participant and researcher. Post-positivism does not allow for complete objectivity and dualism of the relationship. It acknowledges that the researcher may have some influence on the research but nevertheless still holds objectivity and dualism as important guidelines for the research process. The use of tools such as questionnaires allow for dualism between the researcher and participants by reducing the impact the researcher has on the participants. However, as seen with many previous prominent studies on the topic of sexuality such as the Kinsey Studies, Hirschfield study (1903) and Brickman study (1902) the researchers' assumptions and attitudes towards sexuality influence the collection and interpretation of data (Spiegelhalter, 2015). For this reason, I have decided to include a section on reflexivity below to maintain transparency and awareness of my own beliefs, experiences and assumptions throughout the research.

2.3 Reason for Research Paradigm

Once the research paradigm is established it provides a framework which guides the choice of the methods, tools and measures that that can be used for the investigation (Denzin & Lincoln, 2000). The post-positivist research paradigm requires a nomothetic, quantitative methodology in order meet its goals in understanding how to control and predict phenomenon. The nomothetic perspective focuses on uncovering the general, cultural and etic patterns of behaviour. This type of enquiry requires large sample sizes so that idiosyncrasies in the data can be suppressed and allow for a clearer

understanding of the general rules that influence the data (Ponterotto, 2005). Reducing elements of the phenomena so they can be compared and contrasted leads to a greater overall understanding of the phenomena (Hayes, 2011) and so the sample is analysed using statistical procedures to compare groups means and variances (Ponterotto & Grieger, 1999).

Given that the researcher has adopted a post-positivist epistemological stance, this study will use a quantitative methodology to address the research aims and questions. All the variables and groups of interest in this study i.e. religiosity, sexual knowledge and sexual satisfaction cannot be manipulated experimentally as they are naturally occurring variables in the population. This limits the extent to which a causal link can be inferred but nevertheless allows for a relationship between these variables to be observed. As such a quasi-experimental design using questionnaires will be employed. The design of this study will allow for a comparison of scores between the Religious Practice and Religious Culture groups from a large representative sample of the population. The researcher will be able to observe trends in a way that would not be possible if adopting a qualitative approach which focuses on understanding the individual experience (Spiegelhalter, 2015).

2.4 Reflexivity

According to the epistemological stance of post-positivism, researchers cannot be entirely separated from their own study and enquiries. When conducting research, the researcher has their own assumptions and

preconceptions about the topic which may unknowingly affect research decisions and interpretations of findings (Ponterotto, 2005). A way to address this is through acknowledging one's preconceptions and biases so that they can be bracketed throughout the research (Ponterotto, 2005); this is the process of reflexivity. Although reflexivity is primarily predominant in qualitative research I believe it has value and importance for quantitative research.

Considering that I myself am an Orthodox Jew and have transitioned between the Ultra-Orthodox community and Modern-Orthodox community it would be difficult for me to have an entirely neutral view of the subject. It is precisely because of my close link, passion and interest in this topic that I chose to research it. Additionally, I practice as a pre-marital teacher to Jews of all levels of Orthodoxy and myself had very limited sexual knowledge prior to marriage. Whilst this does not place me in a neutral position it does place me in the position to design an appropriately sensitive study and be aware of the nuances in the findings. To maintain awareness of my biases towards the research I will keep a reflective journal in which I will write down my feelings and reactions towards the research as it develops. I am curious about the findings and feel ambivalent about what the results may show about my culture and community.

2.5 Pilot phase

Two pilot studies were carried out. One study was focused on the sexual knowledge measurement which was created for this study. The second pilot

was for the entire questionnaire including all the measures as they would be presented to participants. The purpose of these pilot studies was to check that the measures, instructions and meaning of the questions were understood accurately and to detect unforeseen issues with the design of the study. The pilot phase further provided the opportunity to ensure the software and data collection worked as expected.

There were three participants in both pilots. Verbal feedback was obtained that the questions were understood correctly, and no major issues were found. As part of the pilot phase the researcher questioned members from the Orthodox Jewish population about how they would feel answering a questionnaire about sexual satisfaction and what conditions would help them feel more comfortable to answer the questionnaire. In his book *Sex by Numbers*, Spiegelhalter (2015) discusses how the way a study is presented impacts the sample population who agree to participate and consequently can influence the findings. To ensure there would be a representative sample across religious groups it was important that Orthodox Jews would feel comfortable participating in the study. Of those who were asked, they seemed interested in the topic but felt somewhat hesitant about answering an online questionnaire. They expressed they would feel more comfortable answering the questionnaire if total anonymity could be ensured and if they knew that other Orthodox Jews had completed the questionnaire or that it had been approved by a Rabbi. This was valuable information when considering the best means of recruiting participants and distribution of the questionnaire.

2.6 Participants and recruitment

The participants of interest for this study were men and women in the Orthodox Jewish community who would then be compared to members of the Non-Orthodox community. A sample of participants who did not identify with any religion was used for the control group to ensure that any effects observed differed from mainstream secular society and were due to Jewish belief and practice.

The inclusion criteria were that participants were over the age of 18 and in a long-term relationship. Ideally this study would only recruit married participants as this controls for the myriad of extraneous variables associated with long-term committed relationship that could impact sexual satisfaction such as cohabitation, sharing finances and children. However, given that the rate of marriage has reduced in secular society it will be difficult to limit the data set to only those who are married (Office for National Statistics Report 2012). Therefore, data was also collected from non-married participants and the findings will be considered in light of potential confounding variables such as length of relationship and number of children.

Despite that the recruitment and information sheet requested for participants currently in a relationship some participants who completed the study were single. Their data was excluded from the analysis as they did not meet the inclusion criteria.

To explore differences related to level of religiosity the participant groups were categorised in two different ways; the first was through self-defined groups and the second was through the Centrality of Religiosity Scale (CRS).

The control group consisted of secular non-Jewish participants; out of 81 non-Jewish participants who responded, 44 identified with a different religion and were therefore not included in the analysis.

During the pilot phase it was determined that the best methods to recruit potential participants, given the sensitive nature of the questionnaire, was to present it through a trusted friend or religious leader. Therefore, the researcher used volunteer and opportunist-based sampling to recruit participants through snowballing effect. The survey was advertised and a link to the questionnaire was distributed online through social media forums such as facebook and twitter in the hope of accessing a wide range of the population. The researcher asked Rabbis and religious leaders of Jewish communities to distribute the survey in attempt to gain even greater access to the Orthodox Jewish population.

2.7 Design

This study used a quasi-experimental between-subjects design. The independent variable was religiosity, and this was operationalised in two distinct ways. The first method was by dividing the sample according to their Religious Culture resulting in four groups; Ultra-Orthodox Jews, Modern-Orthodox Jews, Non-Orthodox Jews and controls (which comprised of atheists). The second method was by dividing the sample according to Religious Practice. Through this method there was three comparison groups; Highly-religious, Religious and Not-religious, this variable can also be used as a continuous variable for correlational analysis. The dependant variables

were; sexual satisfaction measured by the New Sexual Satisfaction Scale (NSSS), sexual knowledge measured by the Basic Sexual Knowledge Questionnaire (BSQK) and sexual attitudes measured by the Brief Sexual Attitudes Scale (SAS) all of which were used as continuous variables. A full discussion about each of the measures can be found in section 2.9 below. This study also used a correlational design to determine the nature of the relationship between the variables outlined above. The Religious Practice scores were correlated with sexual satisfaction, sexual knowledge and sexual attitudes scores. Self-report standardized questionnaires were used to explore the hypotheses. At the end of the study participants were given the option to complete open-ended questions inquiring into the way that they learnt about sex and how their experience matched their expectations.

2.8 Power analysis

Relevant literature has used between 150 (Ashdown et al., 2011; Murray-Swank et al., 2005) and 2168 (Higgins et al., 2011) participants for similar studies. An a priori power analysis using G*power shows that for an ANOVA with 4 comparison groups, a large effect size of 0.4, confidence interval of 0.05 and power of 0.95, required a minimum sample size of 112 participants. For a multiple regression with a large effect size of 0.35, confidence interval of 0.05 and power of 0.95 the study required a minimum sample size of 48 participants. In order to significantly compare the groups, it was ensured that there was a minimum of 30 participants per group.

The final sample exceeded the required sample size. There was a total of 515 participants. The number of participants in each group can be found in the Table 2.1 below. The samples are uneven and for some analytical methods this might pose a problem, however, this is not the case when using an ANOVA (Brace, Kemp, & Snelgar, 2016).

Table 2.1

Number of Participants in each Religious Group

	N	Percentage (%)
Religious Practice		
Ultra-Orthodox	96	18.6
Modern-Orthodox	333	64.7
Non-Orthodox	49	9.5
Controls	37	7.2
Religious Culture		
Highly Religious	266	51.7
Religious	195	37.9
Non-Religious	54	10.5

2.9 Instruments

This study used online self-report questionnaires to obtain the data. There were two versions of the questionnaires; one directed for participants who classified themselves as Jewish and one for participants who classified themselves as having any other religious affiliation. The questionnaires differed in the information sheet presented. The information sheet for the for

Jewish participants included an endorsement by a Rabbi to participate in the study to help them feel comfortable about filling in the questionnaire as sex is not usually discussed according to cultural Jewish norms. For these same reasons the word ‘sex’ was substituted where possible by the words ‘marital intimacy’ in both information sheets. These differences in the information sheets were discussed with the Ethics Review Committee and accepted.

2.9.1 Demographics

The questionnaire gathered basic demographic information such as gender and country of residence as well as demographic details specifically relevant to this study such as; relationship status, years married, age at time of marriage, number of marriages, number of sexual partners, number of children and religious affiliation. There was a limited amount of personal demographic information collected to preserve the feeling of anonymity.

2.9.2 Sexuality Measures

To determine which sexuality measures were best for this study research was conducted into previous similar studies to evaluate the relative strengths and weaknesses of each measure. As previously mentioned, the lack of consensus in research about religiosity and sexual satisfaction may be due to the lack of consistency or validity of measures used making it difficult to compare findings between studies (Sánchez-Fuentes et al., 2014). It was important for

this study to use robust measures that had also been used in previous studies so that this study could help move the research in the field forward.

To select the sexuality-related measures of this study (sexual knowledge, sexual satisfaction and sexual attitudes) the researcher referred to the *Handbook of Sexuality-Related Measures* (Fisher, Davis, Yarber, & Davis, 2011) which contains 218 validated scales. The scales were filtered using several criteria. First, face validity; the target population for this research require a sensitive approach when discussing sexually explicit content, it was therefore important to ensure that the questionnaires would not cause offence or discomfort to participants. For example, questionnaires containing items that discussed masturbation or multiple partners were considered inappropriate and as a result were discounted. Following this, questionnaires were excluded if they used outdated language or were too long to be included as part of a composite survey. The final consideration when selecting scales was the ease of accessibility or receipt of permissions from the authors.

As a result of the above process the following questionnaires were selected; New Sexual Satisfaction Scale (Štulhofer, et al., 2010), Brief Sexual Attitude Scale (Hendrick, Hendrick, & Reich, 2006) and Centrality of Religiosity Scale (Huber & Huber, 2012). A description of each measure is below with the examples of scale items, scoring and reliability statistic. No adequate sexual knowledge measure was identified which resulted in the development of the Brief Sexual Knowledge Questionnaire which is also described below. Each of the measures can be found in the Appendix.

2.9.2.1 New Sexual Satisfaction Scale (NSSS)

To measure sexual satisfaction, the researcher selected the NSSS, a two-dimensional measure of sexual satisfaction that was developed by Štulhofer et al. in 2010. The first dimension is ego-focused and the second dimension is partner and activity-focused. Each dimension contains items representing five conceptual constructs of sexual behaviour; sexual sensations, sexual awareness and focus, sexual exchange, emotional closeness, and sexual activity. This questionnaire is designed to measure sexual satisfaction regardless of gender, sexual orientation and relationship status. It is a significant improvement on previously devised questionnaires because it considers both sexual behaviour and the interpersonal context in which sex occurs. A study conducted by Mark, Herbenick, Fortenberry, Sanders, and Reece (2014) compared three well-used sexual satisfaction scales and found that NSSS had the strongest psychometric support of a bi-dimensional measure of sexual satisfaction. It was also found to have strong internal consistency ($\alpha = .96$) and test-retest reliability of .84. The questionnaire consists of 20 items that are each rated on a five-point scale between “Not at all satisfied” to “Extremely Satisfied”. There are ten ego-focused items (Subscale A) some examples of these items are “The quality of my orgasms” and “My emotional opening up in sex”. There are also ten partner and activity focused items (Subscale B) and examples of these are questions are “My partner’s sexual creativity” and “My partner’s ability to orgasm”. Scores range between 10 and 50 for each of the subscales and between 20 and 100 for the full scale.

2.9.2.2 Brief Sexual Attitude Scale (BSAS)

For the sexual attitude measure the researcher initially tried to access Hudson, Murphy, and Nurius's Sexual Attitude Scale (1983). However, it proved difficult to contact the authors and this measure would have been costly to use. It was therefore decided to use the BSAS which was originally developed as a 43-item scale by Hendrick and Hendrick in 1987 and later condensed into a 23-item scale by Hendrick, Hendrick and Reich in 2006. The scale measures multidimensional attitudes towards sexuality. The later version is more efficient to administer and the language has been updated for modern use. The questionnaire consists of four subscales; Permissiveness, Birth Control, Communion and Instrumentality which aim to measure different aspects of sexuality. The Permissiveness subscale measures casual sexuality, an example question for permissiveness is "The best sex is with no strings attached". The Birth Control scale measures attitudes towards responsibility and use of birth control an example of this question is "Birth control is part of responsible sexuality". The Communion scale measures feelings about the idealistic union and intimacy related to sex and an example of this is "At its best, sex seems to be the merging of two souls". The Instrumentality scale measures biological and utilitarian sexuality and an example of this question is "Sex is best when you let yourself go and focus on your own pleasure". The scale takes 5-10 minutes to complete. The statements are rated on a five-point scale ranging from 'Strongly agree' to 'Strong disagree'. A participant receives four subscale scores which are based on the mean score for those subscale items. Scores for Permissiveness range from 10 and 50, for Birth Control between 3 and 15, for Communion between 5 and 20 and for

Instrumentality between 5 and 20. A high score indicates high agreement with that construct. Internal consistency for the subscales are: Permissiveness $\alpha = .95$, Birth Control $\alpha = .88$, Communion $\alpha = .73$ and Instrumentality $\alpha = .77$. Test-Retest reliability was conducted with undergraduate students and correlations for the subscales were: Birth control = .57, Communion = 0.86, Instrumentality = .75 and Permissiveness = .92. The authors suggest that the low reliability statistic for birth control may represent an ambivalence and inconsistency in participants' attitudes towards using birth control and their actual behaviour in using it. The questionnaire will be used to identify whether attitudes differ between Jewish participants and controls (who represent a secular population) as well as different attitudes between levels of Orthodoxy. The subscale Birth Control was not used in this study.

2.9.3 Centrality of Religiosity Scale (CRS)

This 15-item religiosity scale was developed by Huber (2012) and measures the extent to which religion is important and central to one's life and has been used in over 100 studies in various countries (Huber & Huber, 2012). This measure poses five core theoretical dimensions that are representative of religious life based on Stark and Glock's (1968) multidimensional model of religion. The five dimensions are: public practice, private practice, religious experience, ideology and intellect. A question relating to the intellectual dimension is "How often do you think about religious issues" and a question regarding the private practice domains asks "How often do you pray". This measure can be used for multiple faiths such as Judaism, Islam, Christianity

as well as Buddhism and Hinduism. The scale measures each dimension with three items. The items have five answer options and are scored one to five. The item scores are then summed and divided by the number of scored items providing a score between 1 and 5 where scores between 1 and 2 = Not Religious, 2.1 and 3.9 = Religious and between 4.0 and 5.0 = Highly Religious.

The CRS correlates strongly ($r=0.78$) with other measures of religiosity (Huber & Krech, 2009) indicating high construct validity. The questionnaire also has high reliability ranging between 0.92 and 0.96 (Huber, 2007). The questionnaire will be used to identify the religious level of a participant and explore its impact on sexual satisfaction.

2.9.4 Sexual Knowledge

A thorough review of the measures for sexual knowledge led to the conclusion that none of the existing measures were appropriate for use with an Orthodox Jewish population. Most of the available measures focused on knowledge about sexual health issues such as contraception and sexually transmitted diseases. Both these issues are less prevalent in the Orthodox Jewish community predominately because premarital sex and the use of condoms are proscribed by Jewish law. It did not seem appropriate to present participants with material that would have no relevance to them and contradicts their value system. Only two measures seemed appropriate but were then discounted for other reasons. One of these was the Sexual Knowledge, Experience, Feelings and Needs Scale (SexKen) developed by

McCabe, Cummins, and Romeo (1996) which consists of 13 subscales measuring knowledge, experience, feelings and needs of respondents in a range of sexual areas. Three of the subscales seemed particularly useful for this study; body part identification, sex education and sexual interaction. However, the measure included pictures which were both outdated and inappropriate for the target population. After consultation with a Rabbi about the propriety of using sexually explicit pictures with an Orthodox population, it was decided not to use this measure. The other measure that was considered was the Derogatis Sexual Functioning Inventory which has a subscale for sexual knowledge that has been used independently in previous studies (see Appendix F) and has good validity as a measure (Reissing, Binik, Khalif, Cohen, & Amsel, 2003). However, the language is outdated and some of the questions relate to masturbation and use of condoms such as “The prophylactic (rubber) protects against contraception and against venereal disease” which, as previously discussed, is not appropriate for an Orthodox Jewish population. Given that neither of these measures were ideal for the target population the researcher felt it was preferable to create a measure of sexual knowledge for the purpose of this study that was specifically appropriate for Orthodox Jewish participants.

2.9.4.1 Basic Sexual Knowledge Questionnaire: Scale Development

A new sexual knowledge questionnaire was developed for this study that was based on previous measures, relevant literature, and information from healthcare providers and experts on sexual knowledge. The main aim of this

thesis is to better understand the variables that impact sexual satisfaction amongst Orthodox Jews, one of which is sexual knowledge, accordingly, the process of creating the questionnaire began by considering what type of sexual knowledge would be important for positive sexual functioning and satisfaction. This resulted in the identification of three different categories of sexual knowledge; anatomy/physiology, sexual functioning and erotic behaviours. Questions were then selected and adjusted accordingly from previously validated measures of these constructs such as the Derogatis Sexual Functioning Inventory. Following this, relevant literature on sexual knowledge was studied which prompted the inclusion of several questions that were designed to discern between different levels of sexual knowledge. To ensure face validity a small pilot study was carried out and the questions were deliberated with medical experts to ensure that they related to sexual knowledge and underlying theoretical concepts. The questionnaire was also discussed with lay people to check their understanding of the questions and the wording was adjusted appropriately.

2.9.4.2 Basic Sexual Knowledge Questionnaire: Content Validity

The validity of a measure assesses whether the scale measures what it sets out to measure (Field, 2013). The final version of the questionnaire consisted of 22 True/False questions and can be found in Table 2.2 below. Once satisfied with the content and wording of the questionnaires, 30 people considered to be ‘experts’ in sexual functioning such as doctors, sex therapists, gynaecologists and psychologists, were asked to complete the questionnaire

so that the correct responses of the items could be independently validated. It was emphasised that the questions were not testing a high, expert level of knowledge but rather a basic level sexual knowledge defined as, “that which the general population would be expected to know”. This was important because some questions such as ‘Lubrication in the female shows sexual excitement like the erection in the male’ can have different answers depending on level of expert knowledge. According to basic sexual knowledge the answer is ‘True’ however, one medical expert pointed out that women can also lubricate in situations where she may not be sexually aroused such as in preparation of violent, non-consensual sex suggested by The Preparation Hypothesis (Suschinsky & Lalumière, 2011), in which case the answer would be ‘False’. The first step of validating the questionnaire was ensuring 95% consistency amongst experts. The questionnaire met this criterion and had an average of 95.6% consistency. There were 19 female experts and 11 male experts.

Amongst the experts the question which had the lowest consistency rate was ‘In a woman an orgasm is a series of contractions of the muscles surrounding the vagina’ which had 79.3% agreement. It is interesting that this question had the lowest concordance because in the field of sexuality it is acknowledged that the female orgasm is more complex and less understood than the male orgasm (Janini et al., 2012; Wolf, 2012). The next question with lowest consistency was ‘Usually the penis must be erect before ejaculation may occur’ with 86.2% consistency. This may be because experts are the ones who are approached by those people who experience sexual dysfunction and would be exposed to situations which do not fit with ‘normal’ functioning and

experience. These two questions seemed to be the most ambiguous. Nevertheless, they were included in the questionnaire because they refer to basic physiological function and it would be interesting to observe how the general population relate to these issues. If appropriate an analysis will be conducted with these questions excluded.

A '*Do Not Know*' answer option was included to prevent participants from guessing the answer with a forced choice. This could provide insight into the certainty of people's answers. If they answered the item correctly, they were assigned a score of 1 and if they answered incorrectly or selected 'do not know' they were assigned a score of 0 for that item. The sum of scores of the 22 items provides the final score where higher scores indicate good level of basic sexual knowledge and lower scores represent poor level of basic sexual knowledge.

2.9.4.3 Basic Sexual Knowledge Questionnaire: Item Analysis

Table 2.2 below displays the item facility scores, which represent the percentage of participants who answered each item correctly. There is a ceiling effect whereby most participants answered many of the items correctly. There could be many reasons for this, one of which is related to response bias. The questionnaire was designed to measure basic sexual knowledge and because the participants of this study volunteered, this might indicate that they have greater levels of sexual knowledge due to their interest in the subject, compared to people who chose not to participate. The use of the internet and discussion of sexuality is discouraged within the Ultra-

Orthodox community and so participants in this study who define themselves as Ultra-Orthodox do not necessarily represent the mainstream members of this community. Nonetheless, it is clear to see that there are differences between experts and each of the religious culture groups regarding item facility. To reduce items on the questionnaire and increase the differences between groups, the item facility scores of the entire sample was assessed. It was determined that the items with a score of 91% accuracy and above would be removed as they were “too easy” and as result would emphasise the ceiling effect and reduce the distinction between groups. Twelve items remained and will be referred to as the BSKQ12 score and can be found in Table 2.3 below.

Table 2.2

Item facility scores for experts and religious culture groups

Item	Question	Expert	Ultra-Orthodox	Modern-Orthodox	Non-Orthodox	Controls	Entire sample
1	Usually the penis must be erect before ejaculation may occur	86.2	91.4	92.1	89.3	91.9	90.5%
2	Simultaneous orgasm is necessary for a good sexual relationship	100.0	78.1	90	94.6	90.1	90%
3	A woman who has had her womb removed can no longer experience orgasm	100.0	64.8	80.8	87.5	80.3	80.8%
4	Lubrication in the female shows sexual excitement like erection in the male	93.1	90.5	84.8	83.9	85.5	85.2%
5	A woman may be brought to orgasm by manual stimulation of her genitals	93.1	94.3	98.9	98.2	98.3	97.7%
6	Normally after intercourse there is a period when a man does not easily respond to sexual stimulation	100.0	92.4	87.8	80.4	87.8	86.8%
7	Most women are able to enjoy sex even without experiencing an orgasm	96.6	75.2	80.8	82.1	80.5	79%
8	Erection in a male is brought about by increased blood flow to the penis	96.6	88.6	97.8	96.4	96.1	95.7%
9	The clitoris is not a particularly sensitive part of the female's genitals	96.6	94.3	97	100	96.3	96.5%
10	The penis' head is its most sensitive part	89.7	81	76.7	85.7	79.5	80.5%
11	It is very painful for a man not to have an orgasm once he is sexually aroused and erect	89.7	42.9	51.2	69.6	52.8	53.8%
12	Some women can have several orgasms in quick succession	100.0	77.1	87.5	94.6	86.7	87.8%
13	A breastfeeding woman cannot conceive	100.0	91.4	90.5	91.1	91.3	90.3%
14	If a couple cannot conceive it must be because the woman has fertility issues	100.0	100	98.1	100	99	99%
15	If a man fails to get an erection, or gets an erection and then loses it, he does not really want his partner	100.0	98.1	97.6	96.4	98.5	98%
16	In a woman an orgasm is a series of contractions of the muscles surrounding the vagina	79.3	61.9	71.5	83.9	70.2	70.8%
17	In a man sperm and urine exit from the same place	100.0	86.7	89.4	89.3	88.2	87.7%
18	In a woman urine is passed from the vagina	100.0	78.1	74.3	80.4	75.4	74.8%
19	Fatigue cannot affect sexual arousal	93.1	94.3	93.5	91.1	94.6	93.5%
20	Hormones can affect a woman's sexual arousal	96.6	99	97.6	98.2	97.5	96.7%
21	When having sex the man can only be on top	100.0	98.1	99.5	100	99.6	99.3%
22	If sex is painful there is nothing that can be done to help	100.0	100	97.8	100	98.8	98.5%

Table 2.3

Items selected for the BSKQ12 scale

Previous Item number	New Item number	Question
1	1	Usually the penis must be erect before ejaculation may occur
2	2	Simultaneous orgasm is necessary for a good sexual relationship
3	3	A woman who has had her womb removed can no longer experience orgasm
4	4	Lubrication in the female shows sexual excitement like erection in the male
6	5	Normally after intercourse there is a period when a man does not easily respond to sexual stimulation
7	6	Most women are able to enjoy sex even without experiencing an orgasm
10	7	The penis' head is its most sensitive part
11	8	It is very painful for a man not to have an orgasm once he is sexually aroused and erect
12	9	Some women can have several orgasms in quick succession
16	10	In a woman an orgasm is a series of contractions of the muscles surrounding the vagina
17	11	In a man sperm and urine exit from the same place
18	12	In a woman urine is passed from the vagina

2.9.4.4 Basic Sexual Knowledge Questionnaire: Criterion Validity

Criterion validity refers to the extent a measure is associated with an outcome. Concurrent validity is one way to establish criterion validity which evaluates how a measure corresponds with other concurrently recorded measures that are conceptually related to it (Field, 2013). In this study, concurrent validity will be achieved if differences in sexual knowledge scores between Religious Culture groups are identified and a positive correlation is found between sexual knowledge and sexual satisfaction scores as hypothesised.

2.9.4.5 Basic Sexual Knowledge Questionnaire: Reliability

A Kuder-Richardson 20 test was used to measure the internal reliability of the BSKQ12 scale which consisted of binary scores. There was a low Cronbach's Alpha of .387 indicating that the test has low reliability. The reliability of the scale would only increase marginally if items were deleted therefore none of the items were deleted. This result indicates the findings related to the BSKQ12 should be interpreted with caution. On the other hand, one may question whether this measure requires a test of internal reliability at all. Internal reliability measures the extent to which items on a test are correlated to determine whether they are measuring the same construct. However, the measure developed in this study, the BSKQ12, is a measure of knowledge, and there is no theory or reason which suggests why any of the items should relate to one another. It could be proposed that this measure does not require the same level of cohesiveness as is required by measures of psychological constructs (e.g. mood, personality etc.).

2.9.5 Perceived Sexual Norms and Expectations

Counselling Psychology values both idiographic and nomothetic findings and advocates the use of multiple means of inquiry to provide greater insight into a phenomenon (Rafalin, 2010). Whilst quantitative studies can provide great understanding by identifying patterns of behaviour in a sample population which can then be applied to the rest of the population, it does not give insight into the individual experience. In order to access this individual insight, open-ended questions were placed at the end of the questionnaire. These questions

were optional so as not to deter participants from submitting otherwise completed questionnaires. There was no word limit to the questions and a content analysis was used to analyse the findings and identify common themes. There were two questions about expectations that were based on findings from Stephenson and Sullivan's (2009) study mentioned in the literature review. The questions presented to the participant were "What are your expectations of sex?" and "Does your experience of sex in your relationship live up to your expectations?". Two more open-ended questions were placed at the end of the questionnaire to provide greater understanding about how sexual knowledge develops. These questions were "Do you discuss this aspect of your relationship with anyone apart from your partner?" and "Where did you learn about sex?".

2.10 Procedure

Participants were recruited between the 13th July 2015 and 24th August 2015. An online survey was created using Qualtrics 2015 and consisted of an information sheet, consent form, the four measures listed above in section 2.9 as well as a debrief sheet all of which can be found in the Appendix. There were two other measures originally included in the study that were excluded from the analysis due to the limitation of this project and can be found in Appendix E. The data were collected through online responses. Whilst this enabled the collection of a large amount of responses from certain parts of the Orthodox community it also meant that it was more difficult to collect responses from members of the Ultra-Orthodox population as many Ultra-

Orthodox Jews do not have a computer or internet access in their homes due to religious principles. Moreover, the data of participants from the Ultra-Orthodox groups who did answer the questionnaire is likely to be more moderate than the rest of their group by mere fact that they answered an online questionnaire about sexuality. This has several implications for the results; firstly, the data collected for this group will be limited and not representative of the entire group, secondly, Ultra-Orthodox Jews who participated in this study may have greater level of sexual knowledge than other members of this group since they are able to access the information through the internet thereby skewing the results.

Majority of the data were generated and coded automatically by Qualtrics into Excel and SPSS format. The questions were coded based on the guidance provided by the measures described above in section 2.9. For participants who completed the entire questionnaire the mode response time was 17 minutes and the median response time was 14 minutes. The time taken to complete the questionnaire ranged from 4 minutes to 21 hours and 56 minutes. For these cases it is possible that someone started the survey and then continued later in the day or could have forgotten to press submit at the end. Following the survey participants were provided with the researcher's email address in case they wished to make contact regarding the research.

2.11 Ethics and permissions

The current study complies with BPS ethical guidelines and was approved by the research ethics committee of City University London (approval issued on

13 March 2015 under reference number PYSCH (P/F) 14/15 129). The participants were informed about the purpose of the study, its voluntary nature and their right to withdraw at any time. They were assured of anonymity and confidentiality of responses. All the participants signed consent forms before being presented with the study.

The ethical considerations for this study relate to the sensitive content and nature of the questionnaires. The researcher considered that some participants may be offended or emotionally upset at the explicit nature of the questions in the NSSS and BSKQ. However, this was not considered a likely scenario as the nature and purpose of the study was clearly communicated prior to the presentation of the material in both the information sheet and description of each measure at the start of each new section. Nevertheless, in order to maintain sensitivity, the wording of the questions and unnecessary exposure to sex related questions was constantly considered throughout the design of the study. For example, whenever possible even the word “sex” was replaced by “intimacy”. As mentioned above many measures were discounted and an entirely new questionnaire was constructed to ensure an appropriate fit for the target population. Additionally, pilot work was carried out to ascertain whether questions made participants feel uncomfortable and find out how participants would feel more comfortable answering these questions. Finally, the debrief material at the end of the study contained a list of resources and contact details for participants in case they felt they needed to access more information on sex or receive professional guidance with their relationship.

A second ethical issue to consider was to ensure data was only collected from participants over the age of 18 as this is age of consent to participate according

to BPS ethical guidelines. Since the survey was made available online through forums it was not possible to restrict access to the survey. To control for this, the recruitment advert and information sheet made it clear that only participants over 18 could proceed and their data were excluded from the analysis.

After the first submission to the ethics committee several adjustments were requested before granting approval. The full ethics forms and adjustments can be found in Appendix (B). There were two requests that the researcher asked the ethics committee to reconsider which were subsequently approved. The first was regarding the ethics committee's concern about asking participants to forward the link of the study to their friends out of concern that participants would feel obliged and pressurised to do so. The second request was to remove the researcher's personal views from the information sheet. The researcher explained that both of these facets were crucial to the recruitment of participants and in making participants feel comfortable to participate. The Orthodox Jewish communities are often inward looking and would unlikely participate in a study of this nature unless it was sent to them from a known source. Many studies relating to sexuality have noted the importance of the respondents' trust in the research team to be "respectful, confident and serious with their data" (Spiegelhalter, 2015, p. 37) and thereby provide accurate and reflective answers to questions.

The final point expressed by the committee was to ensure that all participants would receive feedback on their sexual knowledge scores. However, it was discovered that this would not be possible due to the nature of the online

survey software provided by the University and therefore this requirement was waived, and no feedback was presented.

2.12 Data Analyses

All data were analysed using SPSS V.23 and 24 for Windows. Alpha levels were set to $p < 0.05$. Scores for questionnaires were calculated according to their descriptions outlined in Section 2.9 and where necessary were reverse coded. All data were entered by the researcher and was screened prior to analysis to check for erroneous entries by observing the ranges of the scores.

2.12.1 Missing data

Reporting missing data and how it is handled is necessary for understanding results and therefore best practice recommends identifying how missing data has been managed (Schlomer, Bauman & Card, 2010).

One of the benefits of using an online questionnaire created by Qualtrics (2015) is that the software highlights to the participants if they missed answering a question. An advantage of this is that it can reduce the amount of missing response items in the data. However, many participants did not complete the entire questionnaire. In these cases, it is not possible to tell whether this was due to practical concerns such as the questionnaire was taking longer to complete than anticipated, the participant got disrupted or lost interest or whether the reasons were more significantly related to the content of the questionnaire for example not feeling comfortable answering about their sexual satisfaction relating to their partner. Furthermore, if a

participant simply stopped completing the survey there was no way to find out whether they wanted their data to be withdrawn from the study. For these reasons, the data in the analysis were only used for participants who completed the entire battery of questions and were fully debriefed. In this study there were 1028 visits to the survey however, only 785 participants agreed to participate in the study. Of this, there were 616 participants who answered all the basic demographic questions and 562 participants who completed the entire set of questionnaires resulting in a 91.1% completion rate of those who took time to complete their basic demographic information. The analyses for this study were conducted on the 562 participants who completed the entire questionnaire and there were no missing response items in this data set.

2.12.2 Outlier analysis

Outliers were explored to reduce error rates in the analyses. According to Tabachnick and Fidell (2007), outliers can be identified by checking whether the standardised z-scores are greater than 3.29. Table 2.4 shows the minimum and maximum z-scores for each of the measures. Only the Instrumentality and BSKQ12 variables exceeds this limit. The data were explored and three outliers were identified and removed.

Table 2.4

Table of minimum and maximum standardised z-scores

	Minimum	Maximum
CRS	-3.27330	1.32847
BSKQ (12)	-3.40680	1.33885
NSSS Overall	-3.21236	1.80270
SAS Communion	-3.15388	1.67346
SAS Permissiveness	-1.45859	3.20106
SAS Instrumentality	-2.21879	3.52204

Chapter 3: RESULTS

3.1. Normality of Data

Large sample studies are not compatible with normality tests such as the Shapiro-Wilk and Kolmogorov-Smirnov and so some argue that they should be ignored in these cases (Ghasemi and Zahediasl, 2012; Howell, 2012). Instead it is recommended to check for distribution of normality using visual inspection of the histograms, QQ plots and boxplots. These normality assumptions must be investigated for each category of the independent variable (Field, 2013). Visual inspection was used to check normality for all the groups with large sample sizes. These consisted of the Ultra-Orthodox (N=96) and Modern-Orthodox groups (N=333) as well as the Highly Religious (N=266), Religious (N=195) and Not Religious (N=54) groups. For these groups the histograms, normal QQ plots and boxplots showed that scores were approximately normally distributed for the sexual satisfaction and sexual attitudes variables and an example of these can be found in the Appendix K. For the sexual knowledge score (BSKQ12) the distribution was normal for the Ultra-Orthodox and Modern-Orthodox groups as well as for the Highly Religious group. The data of the Non-Orthodox, Controls, Religious and Not Religious groups had a negative skew indicating that the measure was too easy for these groups.

3.1.1 Shapiro Wilk test for smaller group sizes

For the smaller sample group sizes which were the Non-Orthodox Jews (N=49) and Controls (N=37) the Shapiro-Wilk's test was used to confirm whether the groups were normally distributed.

For the sexual satisfaction NSSS scores the Non-Orthodox and Control group was not significantly different from a normal distribution ($W=.974$ $p>0.05$; $W=.979$, $p>0.05$). For this variable the Non-Orthodox group has a negative skew of $-.187$ ($SE= .340$) and a kurtosis of $-.359$ ($SE = .668$). The Control group also had a negative skew of $-.147$ ($SE= .388$) and kurtosis of $-.078$ ($SE=.759$)

For the Sexual Attitude Scale (SAS) Permissiveness scores the Non-Orthodox and Control group were not significantly different from a normal distribution ($W=.984$ $p>0.05$; $W=.975$, $p>0.05$). For this variable the Non-Orthodox group has a slight negative skew of $-.022$ ($SE= .340$) and a kurtosis of $.542$ ($SE = .668$). The Control group also had a negative skew of $-.392$ ($SE= .388$) and kurtosis of $.008$ ($SE=.759$)

For the SAS Communion score the Non-Orthodox and Control group were not significantly different from a normal distribution ($W=.967$ $p>0.05$; $W=.951$, $p>0.05$). For this variable the Non-Orthodox group has a negative skew of $-.510$ ($SE=.340$) and a kurtosis of $.610$ ($SE = .668$) whilst the Control group had a positive skew of $.342$ ($SE=.388$) and kurtosis of $-.852$ ($SE=.759$)

For the SAS Instrumentality score the Non-Orthodox and Control group were not significantly different from a normal distribution ($W=.974$ $p>0.05$; $W=.922$, $p>0.05$). For this variable the Non-Orthodox group has a positive skew of $.022$ ($SE= .340$) and a kurtosis of $-.204$ ($SE = .668$). The control group also had a positive skew of 1.062 ($SE=.388$) and a kurtosis of 1.278 ($SE.759$).

For the sexual knowledge score (BSKQ12) score the Non-Orthodox and Control group was found to be significantly different from a normal distribution ($W=.844$ $p<0.01$; $W=.811$, $p<0.01$). For this variable the Non-Orthodox group has a negative skew of -1.364 ($SE=.340$) and a kurtosis of 2.356 ($SE=.668$). The control group had a negative skewness of -1.270 ($SE=.388$) and a kurtosis of 1.004 ($SE=.759$).

The ANOVA is a robust measure that can still control for Type 1 error when there is skewness, kurtosis and non-normality (Field, 2013) especially when the test is two tailed (Field, 2013). Therefore, because the sample sizes are large, the ANOVA is considered robust and majority of the groups were normally distributed, it was decided that an ANOVA would be used to analyse the data between the groups.

3.1.2. Levene's Homogeneity of Variance

The Levene test for homogeneity of variance was not significant for any of the variables in the Religious Culture groups, NSSS ($W(3,511) =1.424$, $p=.235$), SAS Permissiveness ($W(3,511) =1.889$, $p=.130$), SAS Communion ($W(3,511) =1.469$, $p=.222$), SAS Instrumentality ($W(3,511) =2.213$, $p=.086$) and BSKQ12 ($W(3,511) =.397$, $p=.755$) indicating that the assumptions of homogeneity of variance were not violated.

For the Religious Practice groups, the Levene test for homogeneity of variance for NSSS was not significant ($W(2,512) =.269$, $p=.764$). It was also not significant for SAS Permissiveness ($W(2,512) =1.243$, $p=.289$) nor for

SAS Communion ($W(2,512) = .727, p = .484$) indicating that the assumption required for an ANOVA was not violated for these variables. This was also the case for the BSKQ12 score ($W(2,512) = .412, p = .663$). However, the Levene test for homogeneity of variance for the SAS Instrumentality variable was significant indicating that the population sample varies significantly from that of a normal distribution ($W(2,512) = 3.720, p = .025$). For this variable, the Welch statistics for equality of means will be used instead of Fisher's F ratio.

3.1.3 Multicollinearity

The study used a regression analysis to determine the extent to which religious practice, sexual knowledge and sexual attitudes might predict sexual satisfaction. Multicollinearity is a concern when there is more than one predictor variable in a model because as multicollinearity increases so does the potential for error and the ambiguity about how each predictor accounts for the variance of scores in the dependant variable (Field, 2013). Multicollinearity is identified when there is a strong relationship between two or more predictor variables ($r > 0.9$). A correlation matrix was conducted to analyse whether there was a high correlation ($r > 0.9$) between any of the predictor variables. No correlations that violated this assumption were found.

3.2 Analytic strategy

Descriptive statistics were carried out on the data to explore the nature of the participant demographics and characteristics. Correlations were used to test for potential confounding variables.

To test for differences between groups parametric tests were used since the data sample was large and mostly met the assumptions of normality and homogeneity of variance. In the case of when a variable did not meet an assumption a more robust statistic was used as described above. Separate one-way ANOVAs were conducted since each predictor variable had more than two levels. There are four levels to the Religious Culture variable (Ultra-Orthodox, Modern-Orthodox, Non-Orthodox and control) and three levels to the Religious Practice groups (Highly Religious, Religious and Not Religious). The dependent variables were the BSKQ12 (sexual knowledge) score, NSSS (sexual satisfaction) score and the SAS (sexual attitude) scores consisting of three subscales Permissiveness, Communion and Instrumentality. Relationship duration was identified as a covariate variable for sexual satisfaction for the Religious Practice groups. In order to ensure the experimental effect was due to Religious Practice an ANCOVA was employed to test this variable with relationship duration entered as a covariate. Planned comparisons using independent samples t-tests were carried out following significant findings from the ANOVAs.

Bivariate correlations were carried out in order to explore the nature of the relationship between the variables and gain a greater understanding of the results from the ANOVAs. Multiple regression analyses were employed to

explore whether religious level, sexual knowledge and sexual attitudes could predict sexual satisfaction scores.

There were 140 Jewish participants who agreed to complete the optional open-ended questions. Of these, 25 identified as Ultra-Orthodox, 100 as Modern-Orthodox and 15 as Non-Orthodox. Given that the focus of this study was on the Orthodox Jewish population and there is no need for a control group in qualitative analysis so only the qualitative data from Jewish participants were used. The responses were categorised according to Religious Culture as the author believed the culture of the participant would have more influence on the participant's expectations and language than their Religious Practice level. The purpose of the open-ended questions was to provide greater understanding of the findings from the survey scores. A basic content analysis was carried out on these responses. Basic content analysis aims to systemise and quantify the data from written communication in an objective manner to help identify and clarify the topic concerned (Berelson, 1952; Drisko & Maschi, 2016). There is little concern of influence by the researcher with this method as the analysis is considered objective as opposed to interpretive and qualitative content analyses. The text data tends to be coded in explicit categories which can then be described using statistics such as percentages to make comparisons in the language used between groups (Drisko & Maschi, 2016; Hsieh & Shannon, 2005).

3.3 Preliminary Analyses

3.3.1 Demographic Characteristics

The final sample size consisted of 515 participants. There were 399 women (77.5%) and 116 men (22.5%). The Religious Culture groups consisted of the Ultra-Orthodox group (n=96), Modern-Orthodox group (n=333), Non-Orthodox group (n= 49) and the control group (n=37).

When categorising the sample according to the Religious Practice variable the sample consisted of the Highly Religious (n=266), the Religious group (n=195) and the Not Religious group (n=54). The Not Religious group consisted of 37 participants who at the beginning of the questionnaire identified with 'no religion' and 17 participants who identified as Jewish and had low Centrality of Religion (CRS) scores. The 37 participants who did not identify with any religion were not presented with the CRS measure when completing the questionnaire as they would not have had a religious experience with which to answer the measure. Despite not having an actual CRS score there were placed in the Not Religious category to increase the sample size. This was based on the assumption that had they completed the CRS they would have received a low score since the measure is designed to explore the extent to which religion is central to one's life. Tables 3.1 and 3.2 below display participant demographic characteristics according to Religious Culture and Religious Practice groups.

Each of the main demographic variables were explored to assess whether they might act as a confounding variable and provide greater insight into how the Orthodox Jewish sample may differ from the Non-Orthodox control group.

Only confounding variables for sexual satisfaction were explored as this variable was the main focus of the study.

Table 3.1

Means and Percentages of demographic information for Religious Culture groups

	Ultra-Orthodox (n=96)	Modern-Orthodox (n=333)	Non-Orthodox (n=49)	Controls (n=37)
Gender (%)				
Male	27.1	23.4	4.1	27
Female	72.9	76.6	95.9	73
Age (years)				
Mean	29.73	31.72	35.96	30.69
(SD)	9.05	9.71	12.42	7.33
Range	21-68	19-86	21-71	20-53
Married (%)	99	90.1	71.4	32.4
Length				
Married				
Mean	7.39	7.92	11.21	5.85
(SD)	8.67	8.57	11.67	5.45
Range	0-45	0-63	1-47	0-21
Non-married				
Mean	1.00	2.63	2.26	3.62
(SD)		2.47	1.25	3.66
Range	1	1-12	1-4	1-12
Age at Start				
Married				
Mean	22.43	24.15	29.00	30.08
(SD)	2.95	4.36	7.32	3.72
Non-Married				
Mean	20	25.94	23.07	24.38
(SD)		9.09	2.13	5.33
Previously married (%)	2.1	4.2	14.3	5.4
Parents (%)	86.6	62.6	61.2	21.6
Number of Children				
Mean	2.83	2.41	2.13	1.50
(SD)	2.06	1.29	.776	.54
Range	1-10	1-7	1-4	1-2
Age youngest				
Mean	2.70	3.05	3.17	3.50
(SD)	1.1	1.10	1.15	.76
Range	1-4	1-4	1-4	2-4

Table 3.2

Means and percentages of demographic information for Religious Practice groups

	Highly Religious (n=266)	Religious (n=195)	Not Religious (n=54)
Gender (%)			
Male	26.3	16.4	25.9
Female	73.7	83.6	74.1
Age (years)			
Mean	30.57	33.10	31.97
(SD)	9.10	10.92	8.55
Range	19-68	20-86	21-63
Married (%)			
	95.5	84.6	42.6
Length			
Married			
Mean	7.26	9.20	7.75
(SD)	8.13	10.02	6.24
Range	0-45	0-63	0-21
Non-married			
Mean	1.65	2.63	3.59
(SD)	1.11	2.50	3.32
Range	1-4	1-12	1-12
Age at Start			
Married			
Mean	23.39	24.98	29.91
(SD)	3.81	5.28	5.768
Non-Married			
Mean	27.25	24.60	23.97
(SD)	9.91	7.43	4.90
Previously married (%)			
	4.1	5.6	5.6
Parents (%)			
	73.7	59	33.3
Number of Children			
Mean	2.44	2.55	2.17
(SD)	1.69	1.15	1.20
Range	1-10	1-7	1-5
Age youngest			
Mean	2.84	3.18	3.33
(SD)	1.11	1.09	.970
Range	1-4	1-4	1-4

3.3.1.1 Gender

No significant differences were found between men and women in overall sexual satisfaction scores $F(1,513) = 1.824, p=.177$. However when exploring gender differences in the subscales, men were significantly more sexual satisfied ($M= 37.84, SD=7.724$) than women for Subscale A ($M= 35.07, SD=8.812$), $F(1,513) = 9.381, p=.002$. For Subscale B women ($M= 36.86, SD=8.242$) were more sexually satisfied than men ($M= 35.72, SD=8.906$), $F(1,513) = 30.438, p<.001$.

3.3.1.2 Age

The age of the overall sample of participants ranged from 19-86 with a mean age of 31.68 ($SD = 9.84$). The mode was 25 years. Table 3.1 and 3.2 above display statistics of age for the Religious Culture and Religious Practice groups respectively.

A bivariate correlation revealed the age is significantly negatively correlated with sexual satisfaction $r=-.191, p<.001$. An ANOVA revealed that there were significant differences in age across the Religious Culture groups $F(3, 507)= 4.562, p=.004$. This suggests that age is not independent of the experimental group manipulation and therefore does not meet the assumptions required to be treated as a covariate. Furthermore, age seemed to be significantly correlated with sexual satisfaction for the Modern-Orthodox group $r=-.250, p<.001$ and not the others.

Age was significantly negatively correlated with sexual satisfaction scores across Religious Practice groups. A correlations matrix revealed a similar

significant negative relationship between age and sexual satisfaction for each Religious Practice group. The correlation was strongest for the Not Religious group, $r=-.318$, $p<.05$, followed by the Religious $r=-.181$, $p<.05$ and finally for the Highly Religious $r=-.143$, $p<.05$. However, an ANOVA found significant differences in age between all the groups suggesting that age was not independent of religiosity level and therefore cannot be used as a covariate $F(2,508) = 3.785$, $p=.023$.

3.3.1.3 Relationship Status and Duration

In the overall sample 442 (85.8%) participants were married and 73 were not married. The mean relationship duration for those who were married was 8.35 years ($SD = 8.01$) and ranged from 0 - 63. Of those who were married 25 of them (4.9%) had been previously married. The mean age at marriage was 24.33 years ($SD=4.76$). For non-marrieds, the relationship duration ranged from 1 – 12 years, the mean relationship duration was 2.88 years ($SD =2.79$) and the mean age of entering their current relationship was 24.78 years ($SD = 6.99$). Table 3.1 and 3.2 displays descriptive data relating to relationship duration by Religious Culture and Religious Practice groups.

A bivariate correlation revealed that relationship duration was highly correlated with lower sexual satisfaction, $r=-.191$, $p<.001$.

An ANOVA found no significant differences in relationship duration between Religious Culture groups, $F(3,511)=1.920$, $p=.125$, suggesting that relationship duration was independent of the experimental group. However, a correlation analysis revealed that relationship duration was only

significantly correlated with NSSS scores for the Modern-Orthodox group, $r=-.279$, $p<.001$. Furthermore, the Non-Orthodox group had a weak but positive correlation $r=.044$, $p=.762$. whereas the other groups had negative correlations. This suggests a lack of homogeneity of regression and therefore relationship duration cannot be used a covariate of sexual satisfaction. Nonetheless, caution is required when interpreting the results relating to this variable.

For the Religious Practice groups, relationship duration was significantly negatively correlated with NSSS for each of the Religious Practice groups. The Not Religious group had the strongest negative correlation $r= -.322$, $p<.05$, the Religious group had a less strong correlation $r=-.229$, $p<.001$, whilst the Highly Religious had the least strong correlation, $r=-.139$, $p<.05$.

An ANOVA showed no significant differences in relationship duration between the Religious Practice groups suggesting an independence between relationship duration and Religious Practice groups, $F(2,512) = 2.751$ $p=.065$. Homogeneity of regression was also found for these variables, $F(2, 509) = 1.467$, $p=.231$, suggesting that it was appropriate to treat relationship duration as a covariate in an ANCOVA analysis investigating sexual satisfaction and Religious Practice.

3.3.3.4 Children

In the overall sample 329 (63.9%) participants had children. The mean number of children for the entire sample was 2.47 children ($SD=1.50$). 61.1% of the sample had one or 2 children, 30.2% of the sample had 3 or 4

children, 7.9% had between 5 and 7 children, 2 participants had 8 and 9 children and one participant had over 9 children. The mean age for the youngest child was 2.98 years ($SD=1.11$). For 29.8% of the sample the child was under one year. For 25.8% of the sample the youngest child was in between 1-2 years and for 44.4% of the sample their youngest child was over two years old. This information for the different religious groups is represented in Tables 3.1 and 3.2. There was no correlation between number of children and sexual satisfaction $r=.001$, $p=.98$

3.3.2 Correspondence between religious groups

Figures 3.1 and 3.2 below display how the Religious Culture and Religious Practice groups correspond with each other. Majority of the Ultra-Orthodox group scored on the CRS as Highly Religious (83.3%), 14.6% scored as Religious and 2% emerged as Not Religious. The Modern-Orthodox groups was mostly split between participants who scored as Highly Religious (54.1%) and Religious (43.5%) with only 2.4% scoring as Not Religious. The Non-Orthodox group consisted mostly of participants who scored as Religious (73.5%), followed by Not Religious (14.3%) with 12.2% scoring as Highly Religious on the CRS. Everyone in the control group was placed in the Not Religious group.

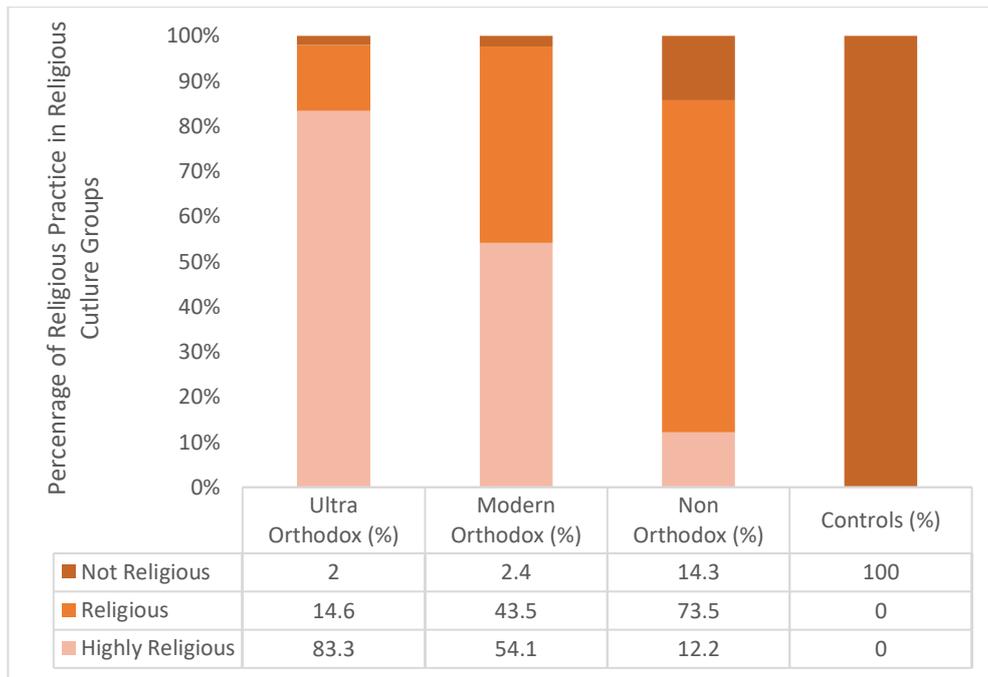


Figure 3.1. Stacked bar chart displaying the percentage of Religious Practice participants in the Religious Culture groups

The Highly Religious group mostly consisted of Modern-Orthodox group (67.7%) which had the largest sample size, about a third of the group were Ultra-Orthodox (30%) and 2.3% were Non-Orthodox group. The Religious group also consisted mostly of Modern-Orthodox Jews (74.4%), followed by the Non-Orthodox group (18.5%) and finally the Ultra-Orthodox group (7.2%). The Not Religious group consisted mostly of the controls which represented 68.5% of this group. The Modern-Orthodox group made up 14.8% of the Not Religious group, followed by Non-Orthodox which represented 13% of the Not Religious group. The Ultra-Orthodox group made up only 3.7% of this group.

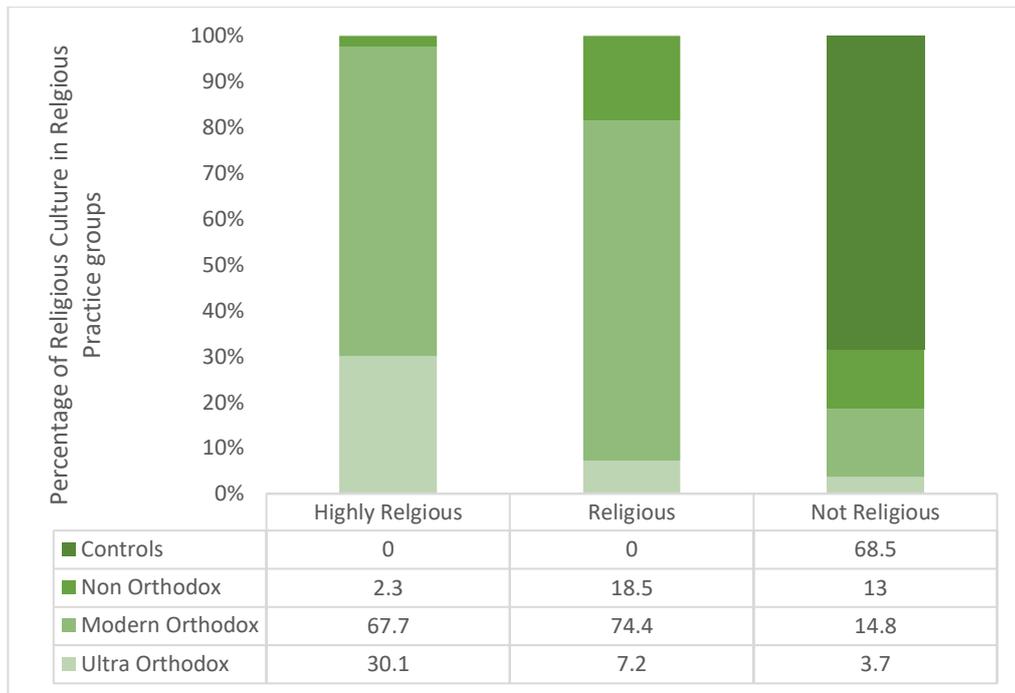


Figure 3.2. Stacked bar chart displaying the percentage of Religious Culture participants in the Religious Practice groups

3.3.3 Correlations between Religious Practice, Sexual Satisfaction, Sexual Attitudes and Sexual Knowledge

The P-P plots indicated that scores were normally distributed therefore a Pearson product-moment correlation coefficient was used to explore the relationship between religion, sexual satisfaction, sexual attitudes and sexual knowledge. The scores from the CRS, NSSF, BSKQ12 and SAS Permissiveness, SAS Communion and SAS Instrumentality were used in the analysis and the correlation matrix is displayed in Table 3.3 below. There was no CRS score for the controls as they had not been presented with the measure. Therefore, the correlations between CRS and the other variables was conducted on the responses from the 478 participants who completed the

CRS. The correlations between all the other variables were conducted on the entire sample ($N=515$).

Table 3.3

Pearson's Correlations matrix between Sexual Satisfaction (NSSS), Centrality of Religion (CRS), Sexual Knowledge (BSKQ12) and Sexual Attitudes (SAS) subscales.

<i>Variables</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>
	-					
1. NSSS						
2. CRS	.200**	-				
3. BSKQ12	.111*	-.147*	-			
4. SAS Permissiveness	-.155**	-.512**	.175**	-		
5. SAS Communion	.317**	.425**	-.078	-.377**	-	
6. SAS Instrumentality	-.146**	-.311**	-.082	.275**	-.098*	-

** $p < 0.01$ level (2-tailed).

* $p < 0.05$ level (2-tailed).

Significant correlations were found between sexual satisfaction scores (NSSS) and religious practice (CRS), sexual knowledge (BSKQ) and the sexual attitude subscales (SAS).

There was a significant positive correlation between NSSS score and CRS score ($r = .200, N=478, p < .01$, two tailed). However, the correlation was weak whereby only 4% of the variance of NSSS is shared by CRS score. These results suggest that the more religious someone is the higher levels of sexual satisfaction they experience.

There was a significant positive correlation between NSSS and BSKQ12 ($r = .111, N=515, p < .05$, two tailed) indicating that a higher level of sexual knowledge is associated with higher sexual satisfaction. The correlation was

weak as only 1.2% of the variation of sexual satisfaction scores is shared by BSKQ12 scores.

A negative correlation was found between SAS Permissiveness and NSSS scores ($r = -.155$, $N=515$, $p < .01$, two tailed). This finding suggests that higher sexual attitudes towards permissiveness are associated with lower experiences of sexual satisfaction. SAS Permissiveness only shares 2.4% of the variability found in NSSS scores. A negative correlation was also found between NSSS and SAS Instrumentality scores ($r = -.146$, $N=515$, $p < .01$, two tailed). These findings suggest that stronger sexual attitudes towards instrumentality in sex are associated with lower levels of sexual satisfaction. In this case instrumentality scores only share 2.1% of the variation in sexual satisfaction scores. There was a significant positive correlation between NSSS and SAS Communion ($r = .317$, $N=515$, $p < .01$, two tailed). This finding suggests that stronger sexual attitudes towards communion are associated with higher levels of sexual satisfaction. SAS Communion had the strongest relationship with NSSS score compared to the other variables and shares 10% of the variation of sexual satisfaction scores.

3.4 Differences between Religious Culture Groups

3.4.1 Sexual Satisfaction

A one-way between-participants analysis of variance (ANOVA) was used to explore the difference in sexual satisfaction scores amongst Religious Culture groups. There was one factor with four levels; Ultra-Orthodox, Modern-Orthodox, Non-Orthodox and controls. The alpha level was set to .05 for the analysis.

No significant differences were found between the sexual satisfaction scores between Religious Culture groups $F(3,511) = 2.034, p = .108, \eta^2 = .012$ and so the first experimental hypothesis was partially rejected. The means and standard deviations can be found below in Table 3.4.

Table 3.4

Means and standard deviations for NSSS score of Religious Culture groups

	Mean	SD
Ultra-Orthodox	74.68	17.56
Modern-Orthodox	70.24	16.25
Non-Orthodox	72.12	12.85
Controls	71.54	14.39

3.4.2 Sexual Knowledge

A one-way between-participants ANOVA was conducted to explore the effects of Religious Culture on sexual knowledge. A significant effect was found confirming the first hypothesis $F(3,511) = 5.155, p = .002, \eta^2 = .029$. This result suggests that 2.9% of the variance in sexual knowledge scores can be explained by the Religious Culture group one identifies with. Observation of the means and standard deviations displayed in Figure 3.3 below suggests a trend between levels of Orthodoxy and sexual knowledge scores whereby the Ultra-Orthodox group had the lowest scores in sexual knowledge ($M = 9.73, SD = 1.39$) followed by the Modern-Orthodox group ($M = 10.01, SD = 1.42$), followed by the Non-Orthodox group ($M = 10.45, SD = 1.42$) with the control group having the highest mean sexual knowledge score ($M = 10.65, SD = 1.44$).

3.4.2.1 Planned Comparisons

Three planned orthogonal comparisons were carried out to compare scores from each of the Orthodox groups. No significant difference was found between the Ultra-Orthodox and Modern-Orthodox groups $t(511) = 1.693, p = .091$. A significant difference was found between the Modern-Orthodox and Non-Orthodox groups $t(511) = 2.015, p = .044$. As expected there was no significant difference in the sexual knowledge between the Non-Orthodox group and controls $t(511) = .642, p = .521$.

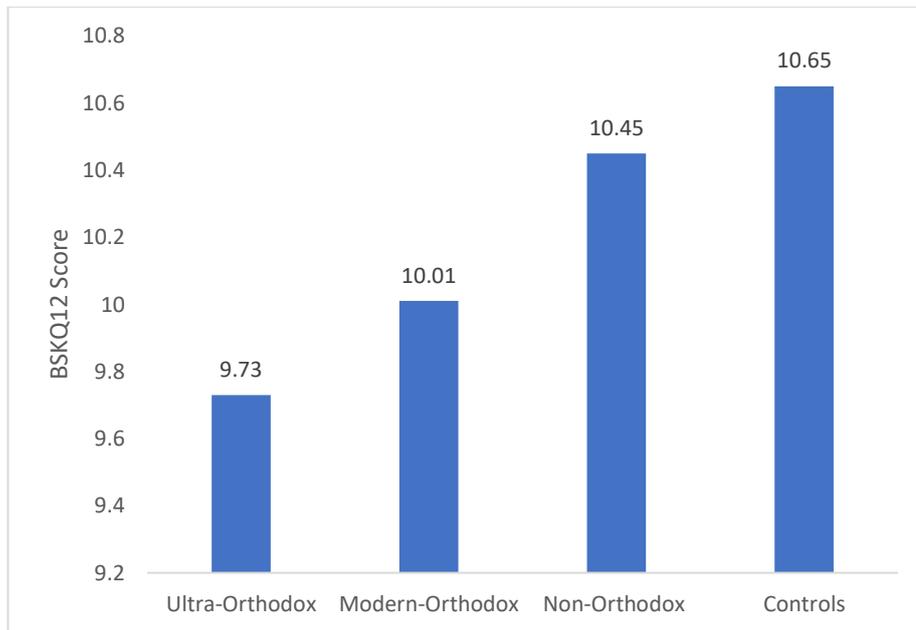


Figure 3.3. Sexual Knowledge scores for Religious Culture groups

3.4.3 Sexual Attitudes

Three one-way between-groups ANOVA were conducted to explore differences between Religious Culture groups across the sexual attitudes subscales of Permissiveness, Communion and Instrumentality. The alpha level was set to .05 for the analyses and the results are explained below.

3.4.3.1 Sexual Attitudes: Permissiveness

A one-way between-participants ANOVA was conducted to explore the effects of Religious Culture on sexual attitudes. A significant effect was found for SAS Permissiveness in line with the first hypothesis that there will be a significant difference in sexual attitude between groups $F(3,511) = 40.223$, $p < .001$, $\eta^2 = .191$. This result suggests that 19.1% of the variance in sexual attitudes relating to permissiveness can be explained by Religious Culture

groups. The means and standard deviations are displayed in Table 3.5 below. The graph in Figure 3.4 below illustrates a trend between levels of Orthodoxy and attitudes regarding permissiveness in sex. Ultra-Orthodox Jews have the lowest mean score of Permissiveness ($M = 1.81, SD = .84$) followed by the Modern-Orthodox group ($M = 2.14, SD = .77$), then by the Non-Orthodox group ($M = 2.84, SD = .71$) and followed finally by the control group ($M = 3.19, SD = .63$)

3.4.3.1.1 *Planned comparisons*

Three planned orthogonal comparisons were carried out to compare each of the Orthodox groups. A significant difference was found in the sexual attitudes relating to Permissiveness between the Ultra-Orthodox and Modern-Orthodox groups $t(511) = 3.71, p < .001$ indicating that the Ultra-Orthodox group has a significantly less permissive attitudes towards sexuality than all the other Religious Culture groups. A significant difference was also found between the Modern-Orthodox and Non-Orthodox groups $t(511) = 5.87, p < .001$ suggesting that the Modern-Orthodox group has a significantly less permissive attitude towards sexuality than Non-Orthodox and controls. There was also a significant difference in permissiveness scores between the Non-Orthodox and control group $t(511) = 2.14, p = .033$. This indicates that Jews who identify as Non-Orthodox have lower permissive attitudes towards sexuality compared to people who do not identify with a religion.

Table 3.5

Mean SAS scores, standard deviations and ANOVA between Religious Culture groups

SAS subscales	Ultra-Orthodox	Modern-Orthodox	Non-Orthodox	Controls	ANOVA	
	(n=96) M(SD)	(n=333) M(SD)	(n=49) M(SD)	(n=37) M(SD)	F	p
Permissiveness	1.81(.84)	2.14(.77)	2.84(.71)	3.19(.63)	40.22	.000
Communion	4.16(.65)	3.70(.74)	3.57(.71)	3.46(.78)	13.87	.000
Instrumentality	2.21(.73)	2.58(.65)	2.62(.55)	2.66(.70)	8.81	.000

3.4.3.2 Sexual Attitude: Communion

A one-way between-participants ANOVA was conducted to explore the effects of Religious Culture on sexual attitudes related to communion. A significant effect was found for Communion confirming the first hypothesis that there will be a significant difference in sexual attitude between groups $F(3,511) = 13.866, p < .001, \eta^2 = .075$. This indicates that 7.5% of the variance in sexual attitudes towards communion can be explained by Religious Culture. Observation of the means and standard deviations as displayed in Table 3.5 point towards a trend between levels of Orthodoxy and attitudes regarding communion in sex. Ultra-Orthodox Jews have the highest mean score of Communion ($M = 4.16, SD = .66$) followed by Modern-Orthodox Jews ($M = 3.70, SD = .74$), then by the Non-Orthodox group which had a slightly lower mean than this ($M = 3.57, SD = .71$) and finally by the control group ($M = 3.46, SD = .78$)

3.4.3.2.1 *Planned comparisons*

Three planned orthogonal comparisons were carried out to compare each of the Religious Culture groups. A significant difference was found in the sexual attitudes relating to Communion between the Ultra-Orthodox and Modern-Orthodox groups $t(511) = 5.482, p < .00$. No significant difference was found between the Modern-Orthodox group and the Non-Orthodox group $t(511) = 1.222, p = .222$. No significant difference was found between the Non-Orthodox and controls $t(511) = .684, p = .494$ suggesting that Non-Orthodox Jews do not differ significantly in their attitudes towards communion in sex compared to controls.

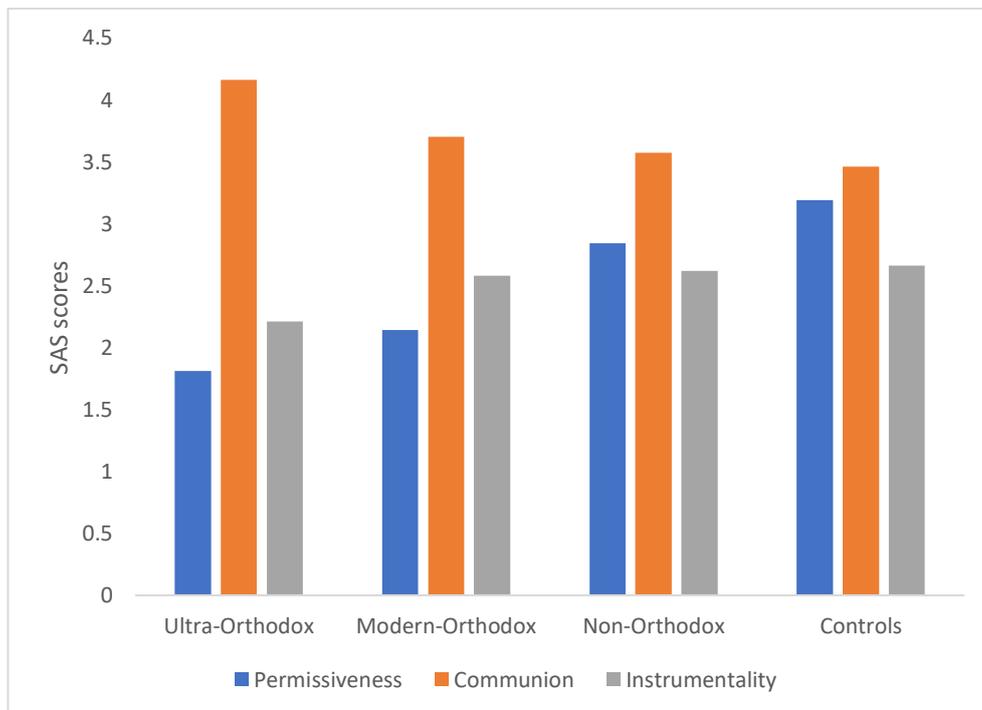


Figure 3.4. Sexual Attitude scores for Religious Culture groups

3.4.3.2 Sexual attitude: Instrumentality

A one-way between participants ANOVA was conducted to explore the effects of Religious Culture on sexual attitudes related to instrumentality. A significant effect was found confirming the first hypothesis that there are significant differences in attitudes relating to instrumentality between groups $F(3,511) = 8.81, p < .001, \eta^2 = .049$. Despite the significant finding Religious Culture only accounts for 4.9% of the variance in Instrumentality scores. Nonetheless, there appears to be a trend between level of Orthodoxy and sexual attitudes towards instrumentality when looking at the means displayed in Table 3.5. Ultra-Orthodox Jews had the lowest mean score of ($M = 2.21, SD = .73$) followed by Modern-Orthodox Jews ($M = 2.58, SD = .65$), a very slight increase was found with the Non-Orthodox group mean of 2.62 ($SD = .55$) and the highest mean Instrumentality scores was found with the control group ($M=2.66, SD=.70$).

3.4.3.3.1 *Planned comparisons*

Three planned orthogonal comparisons were carried out to compare each of the Orthodox groups. A significant difference was found in the sexual attitudes relating to instrumentality between the Ultra-Orthodox and Modern-Orthodox groups $t(511) = 4.81, p < .00$. No significant difference was found between the Modern-Orthodox group and Non-Orthodox group $t(511) = .426, p = .671$. There was no significant difference between the sexual attitudes towards Instrumentality between the Non-Orthodox group and controls $t(511) = .242, p = .808$.

3.5 Differences between Religious Practice

3.5.1 Sexual Satisfaction

A one-way between-participants ANCOVA was conducted to examine the whether there were differences in sexual satisfaction scores between Religious Practice groups with the alpha level set to .05. Checks were carried out to check for homogeneity of regression and a linear relationship between the covariate and dependent variable as describe above (Section 3.3.1.3). There was one factor with three levels: Highly Religious, Religious, and Not Religious based on participants' CRS scores. The covariate used was participants' relationship duration which was found to be significantly related to sexual satisfaction, $F(1,511)=18.596$, $p<.001$, $r^2=.065$. A significant effect of Religious Practice was still found after controlling for the effects of Relationship Duration $F(2,511)=7.833$, $p<.001$, partial $\eta^2=.030$. This small effect size suggests that Religious Practice group only accounts for 3% of the variance in the sexual satisfaction scores. The adjusted means for the Highly Religious Group was 74.02, Religious group 68.79, and the Not Religious group 68.09. These results suggest if someone's religion is highly central to their lives they experience more sexual satisfaction than people whose religion is less central to their lives.

3.5.1.1 Planned Comparisons

Planned contrasts revealed that the Highly Religious groups was significantly more sexually satisfied than the Religious $p<.001$, 95% CI [2.360, 8.099] and Not Religious, $p=.011$, 95% CI [1.395, 10.473] groups. There was no

significant difference between the Religious and Not Religious groups $p=.768$, 95% CI [-3.987, 5.395].

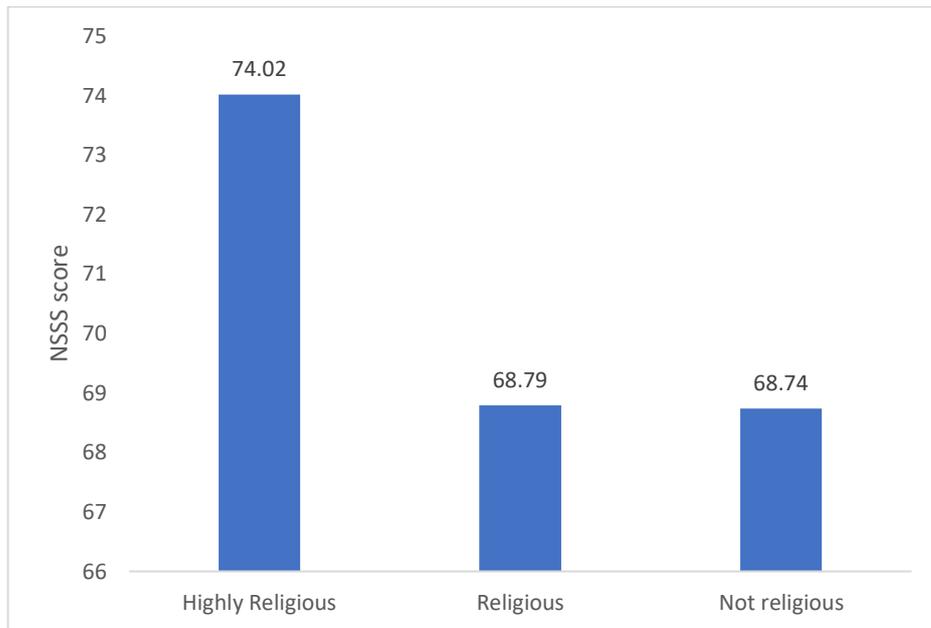


Figure 3.5. Adjusted Means of Sexual Satisfaction scores for Religious Practice groups after controlling for Relationship Duration

3.5.2 Sexual Knowledge

A one-way between-participants ANOVA was conducted to explore the effects of Religious Practice on sexual knowledge. A significant effect was found thereby confirming the first hypothesis $F(2,512) = 9.578$, $p < .001$, $\eta^2 = .036$. This result suggests that 3.6% of the variance in sexual knowledge scores can be explained by Religious Practice group. Observation of the means and standard deviations displayed in Figure 3.6 below suggest a trend between level of Religious Practice and sexual knowledge scores whereby the Highly Religious had the lowest sexual knowledge score ($M = 9.79$, $SD = 1.44$) followed by the Religious group ($M = 10.28$, $SD = 1.37$). This was followed by the Non-Religious group ($M = 10.48$, $SD = 1.53$).

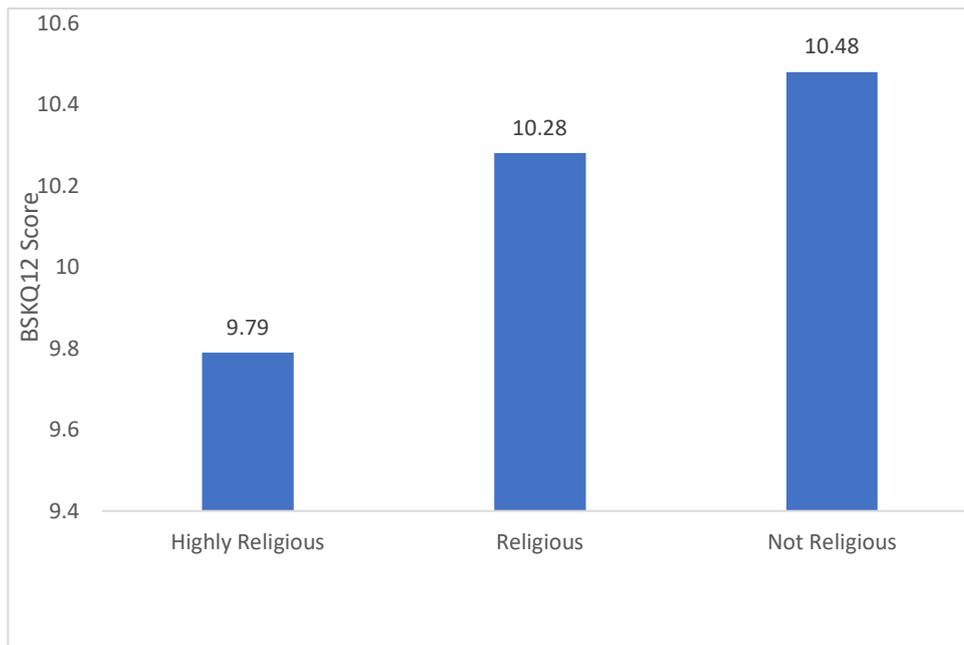


Figure 3.6 Sexual Knowledge scores for each Religious Practice group.

3.5.2.1 Planned Comparisons

Two planned orthogonal comparisons were carried out to compare each of the Religious Practice groups. A significant difference was found in sexual satisfaction between Highly Religious and Religious groups $t(512) = 3.668, p < .00$. No significant difference was found between the Religious and Not Religious groups $t(512) = .936, p = .350$.

3.5.3 Sexual Attitudes

Three one-way between-participants ANOVAs were conducted to explore differences between Religious Practice groups across the sexual attitudes subscales of Permissiveness, Communion and Instrumentality. The alpha level was set to .05 for the analyses.

3.5.3.1 Sexual Attitudes: Permissiveness

A one-way between-participants ANOVA was conducted to examine the effect of religious practice level as measured the Centrality of Religiosity scale on attitudes towards permissiveness in sex. A significant effect was found $F(2,512) = 105.617, p < .001, \eta^2 = .292$ confirming the second hypothesis. The effect size suggests that Religious Practice group can account for 29.2% of the variance sexual attitudes relating to permissiveness. Table 3.6 displays means and standard deviations for this variable. Figure 3.6 displays the means scores which show that there is a clear trend between permissiveness scores and level of religion. The Highly Religious group has the lowest scores relating to permissive sexual attitudes ($M = 1.82, SD = .67$), followed by the Religious group ($M = 2.51, SD = .79$) and finally the Not Religious group which had the highest mean scores ($M = 3.18, SD = .72$).

3.5.3.1.1 Planned Comparisons

Two planned orthogonal comparisons were carried out to compare each of the Religious Practice groups. A significant difference was found in Permissiveness scores between Highly Religious and Religious groups $t(512) = 10.240, p < .001$. A significant difference was also found between the Religious and Not Religious $t(514) = 6.025, p < .001$.

Table 3.6

Mean SAS scores, standard deviations and ANOVA between Religious Practice groups

SAS subscales	Highly Religious (n=266)	Religious (n=195)	Not Religious (n=54)	ANOVA	
	M(SD)	M(SD)	M(SD)	F	p
Permissiveness	1.82(.67)	2.51(.79)	3.18(.72)	106.56	.000
Communion	4.00(.67)	3.55(.72)	3.33(.79)	33.54	.000
Instrumentality	2.34(.70)	2.58(.65)	2.62(.55)	20.93	.000

3.5.3.2 Sexual Attitudes: Communion

A one-way between-participants ANOVA was conducted to examine the effect of Religious Practice on attitudes towards communion in sex. A significant effect was found $F(2,512) = 33.76, p < .001, \eta^2 = .116$ confirming the second hypothesis. This suggests that the Religious Practice group only accounts for 11.6% of the variance in the sexual attitude scores relating to communion. From observation of the means and standard deviations displayed in the Table 3.6 and Figure 3.7 it is clear to see that there is a trend between CRS and Communion scores. The Highly Religious group had the highest mean of 4.00 ($SD = .67$) followed by the Religious group ($M = 3.55, SD = .72$) and finally the Not Religious group which had the lowest score ($M = 3.33, SD = .79$).

3.5.3.2.1 Planned Comparisons

Two planned orthogonal comparisons were carried out to compare each of the Religious Practice groups in their sexual attitudes towards communion. A significant difference was found in communion scores between Highly Religious and Religious groups $t(512) = 6.706, p < .001$. A significant difference was also found between the Religious and Not Religious $t(512) = 2.068, p < .05$.

3.5.3.3 Sexual Attitudes: Instrumentality

A one-way between-participants ANOVA was conducted to examine differences in Instrumentality scores between Religious Practice groups. Since the assumption of homogeneity of variance was violated the Welch test was used as it considered a more robust test for equality of means. A significant effect was found $F(2,146.656) = 21.387 p < .001, \eta^2 = .075$ thus confirming the second hypothesis. The effect size suggests that Religious Practice group can explain 7.5% of the variance in sexual attitude scores towards Instrumentality. As portrayed in Table 3.6 the Highly Religious group has the lowest mean of 2.34 ($SD = .70$), followed by the Not Religious group 2.72 ($SD = .58$) which had a very slightly higher mean than the Religious group of 2.69 ($SD = .68$).

3.5.3.3.1 Planned Comparisons

Two planned orthogonal comparisons were carried out to compare each of the Religious Practice groups using the statistic that does not assume equal

variances. A significant difference was confirmed between the Instrumentality scores between the Highly Religious and Religious groups $t(451.808) = 6.380, p < .001$. However, no significant difference was found between the Religious and Not Religious groups $t(75.257) = .362, p = .718$.

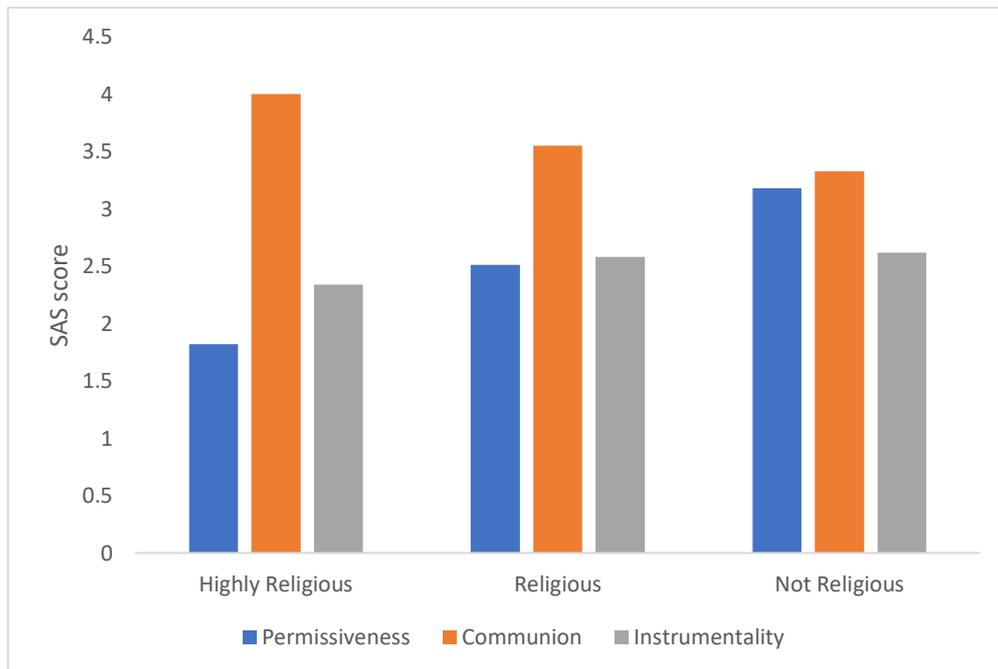


Figure 3.7. Means of Sexual Attitudes scores for the Religious Practice groups.

3.6 Regression Analysis

A multiple regression analysis using the standard method was used to explore the relationship between religiosity, sexual knowledge and sexual attitudes. The CRS, BSKQ12, and SAS subscale scores were entered as predictors into the multiple regression since they were all significantly correlated with the NSSS scores i.e. the criterion variable in this analysis (see Table 3.3 above).

The analysis was conducted on the 478 participants who had completed the CRS measure.

Prior to analyses the data were examined and met the required assumptions. The P-P plot and scattergram of the data appeared normal and displayed linearity and heteroscedasticity.

A significant model emerged $F(5,472) = 16.300, p < .001$. This model explains 13.8% of the variability in sexual satisfaction scores (adjusted $R^2 = .138$). The regression coefficients for the predictors entered in the model are displayed in Table 3.7 below. Sexual knowledge scores (BSKQ12) and sexual attitude towards communion were significant predictors and had a positive relationship with sexual satisfaction. SAS Communion was identified as the strongest predictor variable with the highest coefficient ($\beta = .298$) followed by BSKQ12 ($\beta = .149$). Religiosity (CRS score) and sexual attitudes towards permissiveness and instrumentality were not significant predictors. The findings partially confirm the fourth hypothesis.

Table 3.7

Unstandardized and standardised regression coefficients for variables in the regression model.

Variable	B	SE B	β	p
CRS	.835	1.013	.044	.410
BSKQ	1.684	.495	.149	.001
SAS Permissiveness	-1.045	1.003	-.054	.298
SAS Communion	6.438	1.038	.298	<.001
SAS Instrumentality	-1.80303	1.089	-.076	.099

3.7 Content Analysis

There were 140 Jewish participants who agreed to complete the optional open-ended questions. There were 25 who identified as Ultra-Orthodox, 100 who identified as Modern-Orthodox and 15 who were Non-Orthodox.

Four questions were presented to participants: What are your expectations of sex? Does your experience of sex live up to your expectations? Do you discuss this aspect of your relationship with anyone apart from your partner? and Where did you learn about sex? Outlined below are the responses to these questions and the process of how the responses were coded and categorised to allow for comparison of language between the groups (Drisko & Maschi, 2016; Hsieh & Shannon, 2005).

3.7.1 Expectations of Sex

Participants were asked “What are your expectations of sex?”. To analyse the responses they were first read through several times to help the researcher gain a sense of the types of words that were used and how they might relate to each other. Each time a word was used it was noted and at the end of the analysis the amount of times a word was mentioned was counted to provide an overall tally. In some instances, similar words were grouped into one category to systemise information. The amount of times a word or theme was mentioned is described as both a frequency and percentage in Tables 3.8 and 3.9 below. All the participants mentioned more than one word in response to this question and so the frequency represents how many times the word was mentioned across all participants in that group. Table 3.8 below contains all

the words that were counted, the subthemes they belong to and the major theme that they were eventually categorised into.

Table 3.8*Theme and subtheme categorisation of words used to describe expectations*

Theme	Subtheme	Words Used
Emotional	<i>Emotional, Expression</i>	Emotional, love, intimacy, affection, care, Expression of love
Physical	<i>Physical</i>	Physical
Psychological	<i>Psychological</i>	Mental
Spiritual	<i>Spiritual</i>	Spirituality, religion, soul
Satisfaction	<i>Satisfaction, Physical Satisfaction, Emotional satisfaction, Enjoyment, Needs,</i>	Satisfaction, pleasure, sexual, fulfilled, enjoy, fun, need
Mutuality	<i>Mutuality, Responsive, Respect, Consent</i>	Giving, receiving, both sides, responsive, respect, safety, consensual, agreement
Connection	<i>Connection, Physical connection, Emotional connection, Psychological connection</i>	Becoming one, closeness, union, physical connection, emotional connection, mentally connect
Communication	<i>Communication</i>	Communication, understanding
Characteristics of the Sexual Experience	<i>Creativity, Orgasm, Passion, Relaxing, Presence, Foreplay, Release, Cuddling, Natural, Frequency, Roles</i>	Creativity, experimentation, exploration, orgasm, thrilling, exciting, relaxing, presence, foreplay, release, let go, cuddling, natural and instinctive, frequent, not enough, one side being passive/active
Characteristics of the Sexual Relationship	<i>Exclusivity, Attraction, Desire, Relationship, Trust</i>	Exclusivity, no one else, attraction, seduction, feeling wanted, arousal, desire, turned on, important part of relationship, add to it, trust
Externally Driven Motivations	<i>Movies, Masturbation, Husband's drive</i>	Movies, Hollywood masturbating satisfy husband's drive

Eleven main expectation themes were identified. The frequency for the theme labelled Emotional was based on each time the word 'emotional', 'love', 'care', 'affection', 'intimacy', 'expression of love', as well as the other words identified in the subthemes were mentioned (see Table 3.8). When the word 'emotional' was followed by the word 'connection' or 'satisfaction' it was categorised under the theme of Connection or Satisfaction as in these cases the aspect of connection or satisfaction was the predominant expectation.

The Characteristic of Sexual Experience category contained those words that related to the quality of the sexual experience had by the individual. Characteristics of Sexual Relationship contained the themes and words that were related to the elements of the sexual relationship that were dependent on the other person. The theme Externally Driven Expectations is comprised of different experiences that influence a person's expectations of sex that are not necessarily based on their own experience of sex with another person. The theme Mutuality encompasses subthemes and words that are based on the acknowledgement and consideration of the other person's rights, wants, boundaries in the sexual relationship and recognition that there are two separate individuals involved.

The frequency was converted into percentages to compare the responses of the groups which differed significantly in size. However, these results must be interpreted with caution. Due to the large difference in group sizes the percentages may be misleading for example, the Psychological theme was only mentioned by one person in the Non-Orthodox group, one person in the Modern-Orthodox group and no one in the Ultra-Orthodox group. However,

this translates to 1% of the Modern-Orthodox group and 7% of the Non-Orthodox group despite it being mentioned by the same number of people.

Across all the groups the theme that was most stated was Satisfaction indicating that most people expect to have a sexual experience that is satisfying and enjoyable. One can see clearly in Figure 3.9 below that other strong themes for the Non-Orthodox group were the themes of Emotional, Mutuality and Characteristics of Sexual Encounter. For the Modern-Orthodox group, Connection was the theme that was most mentioned after Satisfaction followed by Characteristics of Sexual Encounter and Mutuality. Whereas for the Ultra-Orthodox group the theme Mutuality followed the theme of Satisfaction trailed by the themes of Emotional and Characteristics of Sexual Encounter. The expectation of the theme Connection appeared to differ drastically between the group whereby 43% of the Modern-Orthodox group mentioned words related to the Connection compared to 27% of the Non-Orthodox group and 20% of the Ultra-Orthodox group.

Table 3.9*Frequency and Percentage of expectations themes*

Theme	Ultra-Orthodox N=25 n (%)	Modern-Orthodox N=100 N (%)	Non-Orthodox N=15 n(%)
Emotional	8 (32)	24 (24)	9 (60)
Physical	2 (8)	7 (7)	4 (27)
Psychological	0 (0)	1 (1)	1 (7)
Spiritual	3 (12)	8 (8)	1 (7)
Satisfaction	17(68)	68 (68)	11(73)
Mutuality	11(44)	34 (34)	8(53)
Connection	5 (20)	43 (43)	4(27)
Communication	0 (0)	7 (7)	2(13)
Characteristics of Sexual Encounter	6 (24)	41 (41)	8(53)
Characteristics of Sexual Relationship	3 (12)	20 (20)	1 (7)
Externally Driven Expectations	5 (20)	6 (6)	0 (0)

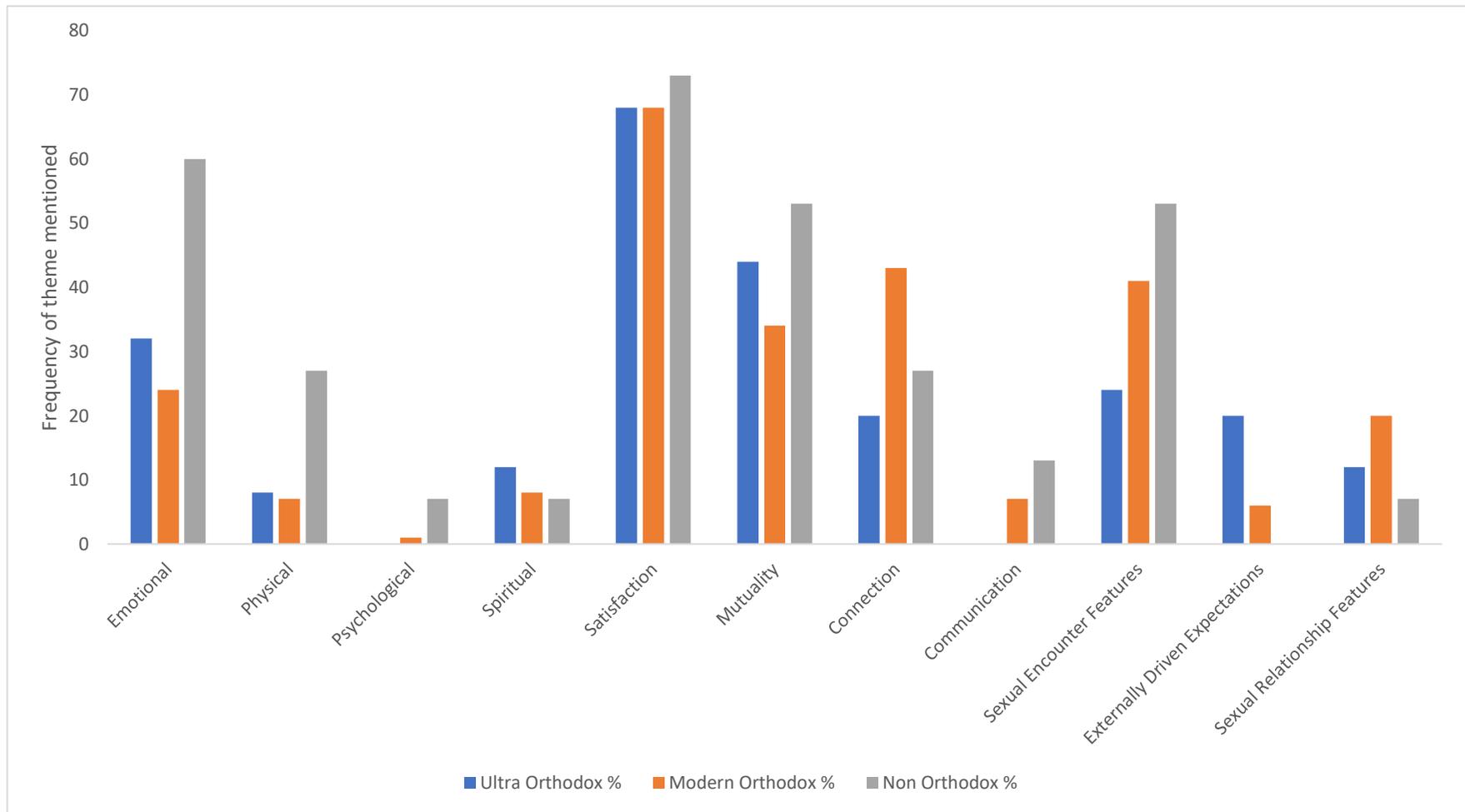


Figure 3.8. Percentages of expectation themes between Ultra-Orthodox, Modern-Orthodox and Non- Orthodox groups.

3.7.2 Connection Between Experience and Expectations

The second question participants were presented with was “Does your experience of sex in your relationship live up to your expectations?”. The responses were categorised into two groups, ‘Yes’ and ‘No’. Responses with words such as ‘usually’ were placed in the ‘Yes’ category as it implies that most times their experience of sex lives up to their expectations. In the context of this question responses such as ‘sometimes’ were placed in the ‘No’ category as this word implies that it is not a frequent occurrence and may be an exception rather than the general rule. Figure 3.9 below depicts the percentage for each group that responded their experience of sex lived up to their expectations.

In the Ultra-Orthodox group 16 out of 25 (64%) responded that their experience of sex did live up to their expectations. This was lower for the Modern-Orthodox group where 38 out of 100 (38%) said sex lived up to their expectation whilst for the Non-Orthodox group this was 9 out of 15 (60%)

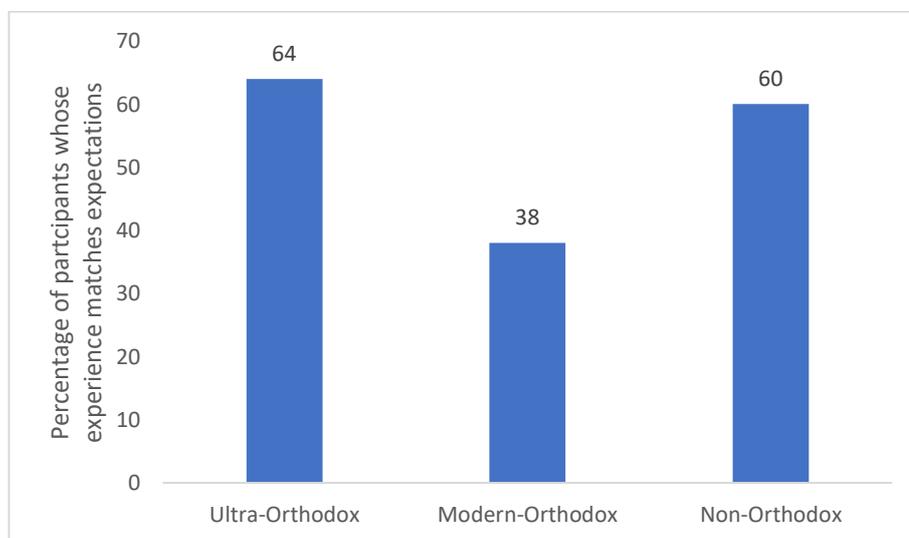


Figure 3.9. Graph portraying percentage of Religious Culture groups who responded that their experience of sex lived up to their expectations of sex.

3.7.3 Discussion of Sex with others

Participants responded to the question “Do you discuss this aspect of your relationship with anyone apart from partner?”. Responses were categorised into two group; ‘Yes’ and ‘No’. If a response described ‘rarely’ or ‘once’ the response was categorised as ‘No’ as it indicated that this was not a common experience of the participant. However, if the response used the words ‘sometimes’ or ‘occasionally’ to describe the extent to which the participant would discuss their sexual relationship with others it was categorised as a ‘Yes’ as it indicated it occurred on more than one occasion.

In the Ultra-Orthodox group 8 out of 25 (28%) confirmed that they discuss the sexual aspect of their relationship with someone other than their spouse. Confidantes specified were friends, therapists, bridal teachers and mentors. In the Modern-Orthodox group 44 out of 100 (44%) discussed the sexual aspect of their relationship with someone other than their partner. For Modern-Orthodox Jews, confidantes consisted of friends, sisters, bridal teachers, doctors and therapists. In the Non-Orthodox group 9 out of 15 respondents (60%) noted that they discussed their sexual relationship with someone other than their partner. For this group, confidantes consisted of close friends and in one case family members. These results seem to represent the difference between the groups in the value of modesty as discussed in the literature review above.

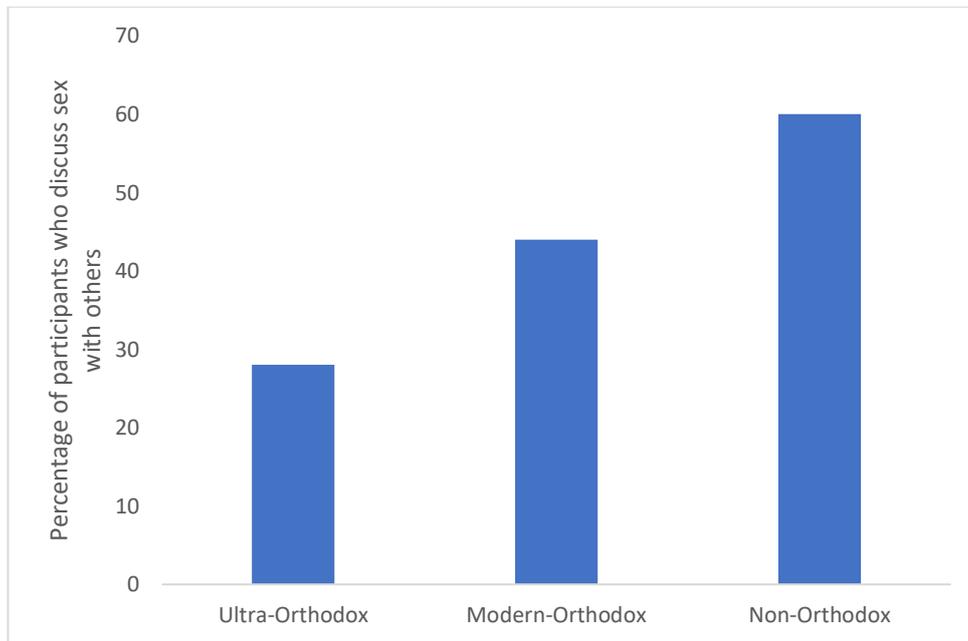


Figure 3.10. Graph depicting percentage of Religious Culture groups who discuss their sexual aspect of their relationship with someone other than their partner.

3.7.4 Sources of Sexual Information

The last question presented to participants was “Where did you learn about sex?”. The responses to this question were counted and systemised into 10 categories of sources of information which can be seen clearly in Table 3.10. The Family category consisted of parents, sibling and in one case a grandparent. Pre-Marital teachers refers to those who teach Orthodox Jewish brides and grooms the laws of Jewish family purity prior to their wedding. For many in the Ultra-Orthodox community this is a core source of information about sex. Many respondents mentioned that they learnt about sex from their sexual partner and their sexual experiences, these responses were categorised as Relationship and Experience. The category School Formal represent sexual education classes provided by the school or

information taught in biology classes. There was fairly large number of participants who cited TV programmes, movies, magazines or media as their source of information about sex and all of these were categorised as Media. Books of both fiction and non-fiction category were cited frequently as a source of sexual information across all the Religious Culture groups. Some participants recorded the Internet as a source of information however, it was not clear what type of information on the internet was accessed and so these answers were categorised under Internet. Porn and erotica did not appear to be a significant way this participant sample learned about sex however, it is unclear if this is what some people were referring to when they mentioned ‘the internet’ in their answer. The final category was learning about sex from Religious teachers or through studying religious texts such as the Talmud which at certain points discusses laws and religious perspectives relating to sex.

Table 3.10

Number of times source of sexual information mentioned by Religious Culture group

Source	Ultra-Orthodox n (%)	Modern-Orthodox n (%)	Non-Orthodox n (%)
Family	9 (36)	38 (38)	5 (33)
Friends	10 (40)	34 (34)	5 (33)
Pre-Marital teacher	8 (32)	20 (20)	0
Relationship and Experience	1 (4)	18 (18)	3 (20)
School Formal	2 (8)	25 (25)	4 (27)
Media	6 (24)	31 (31)	5 (33)
Books	10 (40)	31 (31)	5 (33)
Internet	5 (20)	22 (22)	2 (13)
Porn/erotica	2 (8)	4 (4)	1 (7)
Religious leaders/texts	3 (12)	4 (4)	0

As can be seen in Table 3.10 above and clearly portrayed in Figure 3.11 below the top three sources of information for all the groups were Family, Friends and Books. For the Modern-Orthodox and Non-Orthodox groups an equal number of participants cited Media as a source of information about sex as those who cited Books. For the Modern-Orthodox and Non-Orthodox groups about a quarter of participants mentioned formal sex education as a source of how they learnt about sex. This contrasted sharply with the Ultra-Orthodox group where only 8% of participants mentioned that they learnt about sex from formal school education. As can be seen in Figure 3.11 a similar pattern is found with the category of Relationship and Experiences whereby only 4% of the Ultra-Orthodox group cited this as a source of information compared to 18% of the Modern-Orthodox group and 20% of the Non-Orthodox group. For the Ultra-Orthodox participants books seemed to be the most important source of information about sex with 40% describing this as the source of their information compared to 31% of Modern-Orthodox and 30% of Non-Orthodox Jews. As expected the Non-Orthodox group did not learn about sex from any religious source, either a premarital teacher, religious teacher or text. However, for Ultra-Orthodox Jews almost a third of participants (32%) cited Pre-marital classes as a source of how they learnt about sex. Chapter 4 will discuss the meaning of these findings and how they might interrelate.

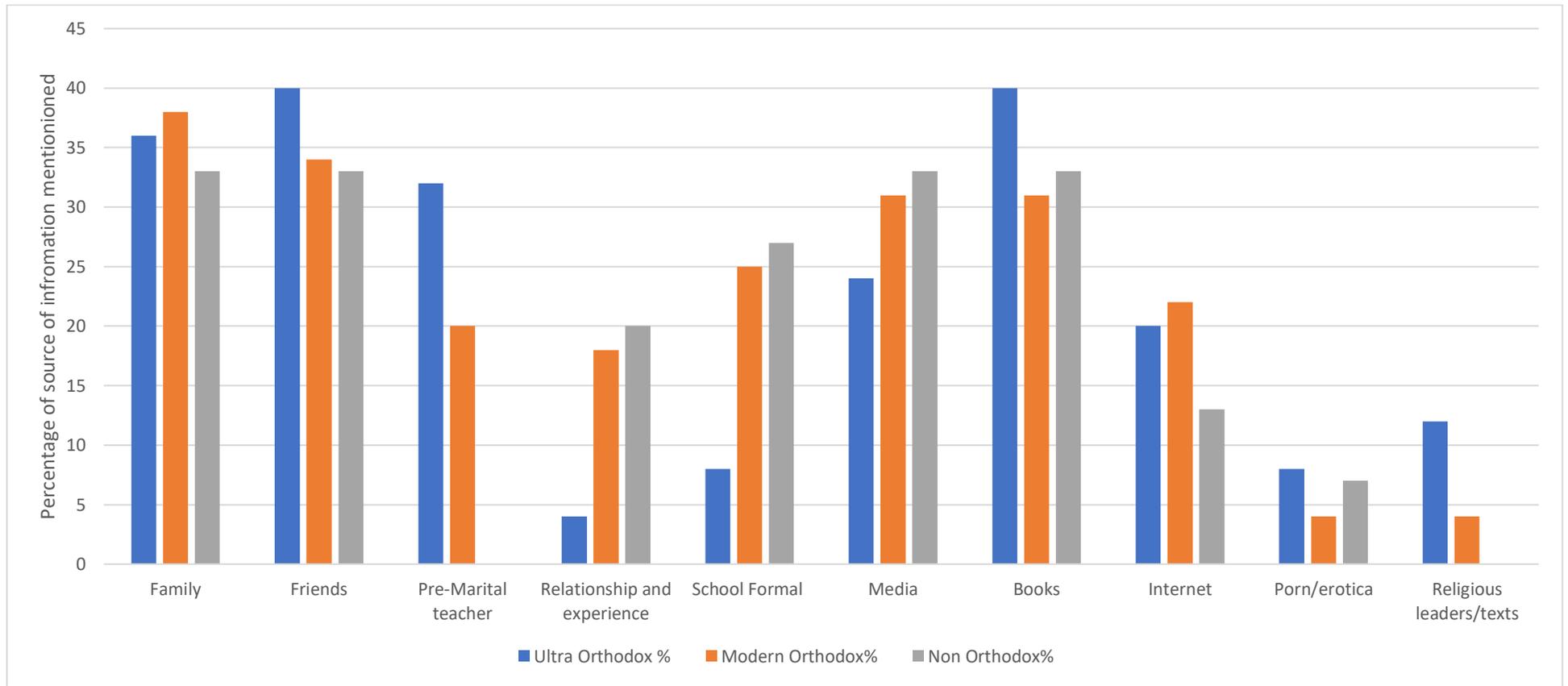


Figure 3.11 *Graph depicting percentages of sources of sexual information for each Religious Culture group.*

CHAPTER 4: DISCUSSION

4.1 Overview

The aim of this study was to extend understanding of how religion, sexual knowledge and sexual attitudes impact sexual satisfaction. Many studies have found that sexual satisfaction correlates with variables that span across individual, relational, sexual and social domains and as such is an important component of wellbeing and relationships (Barrientos & Paez, 2006; Sánchez-Fuentes et al., 2014). The relationship between sexual satisfaction and certain variables such as communication or relationship satisfaction has been well established, however, the way it is associated with other variables, such as religion, is less conclusive. Many argue that this is because the research exploring religion and sexual satisfaction is based on poor conceptual and theoretical frameworks (Dundon & Rellini, 2010; Pascoal et al., 2014; McClelland, 2014; Hernandez et al., 2014). Like sexual satisfaction, religion also deeply impacts a person's sense of identity, experiences, wellbeing and relationships (Hernandez et al., 2014). For a large part of history religion was perceived as the main authority of sexuality. Recently, in a secular society, science has replaced religion as the authority of sex (Agocha et al., 2014). Nonetheless, for religious people, their religious principles remain a strong moral guide for their sexual attitudes and behaviour. To this extent the therapist working with religious clients experiencing sexual difficulties is not sufficiently supported by literature. This is especially the case for Orthodox Jews of whom there is very little research. Recent developments in religion research highlight how previous studies have been

limited by conceptualising religion too simply. Religion is comprehensive and can influence sexuality through many facets such as the laws it instructs, the sense of spirituality it can imbue, the attitudes it promotes or the influence it can have on social expectations. Research that explores these multiple components is required in order to enhance awareness amongst clinicians who can then apply this understanding when working with clients.

In response to the gaps in the literature relating to religion and sexuality, this study explored the relationship between religion, sexual attitudes, sexual knowledge and sexual satisfaction amongst Orthodox Jews. To do this, the study employed a quantitative methodology that used three previously validated and well-used measures distributed through an online survey. These measures were the New Sexual Satisfaction Scale (NSSS), the Centrality of Religiosity Scale (CRS) and the Brief Sexual Attitudes Scale (BSAS). Religion was also measured using self-defined groups that represent Jewish cultural and social beliefs which allowed the study to compare the results of two different types of religiosity; Religious Culture, based on the self-defined group and Religious Practice based on the CRS scores. Sexual knowledge was measured using the Basic Sexual Knowledge Questionnaire (BSKQ12) which was developed for the purposes of this study as no previously validated measure was deemed appropriate for use with Orthodox Jewish participants. The survey also requested demographic information and contained four optional open-ended questions that were presented at the end of the survey. The purpose of these open-ended questions was to help interpret and understand the main findings of the study. The

survey was distributed through a snowball effect using social media and email lists. The responses of 515 participants were included in the analysis

This study tested four hypotheses. The first hypothesis predicted that there would be a difference between Religious Culture groups across sexual satisfaction, sexual knowledge and sexual attitudes scores. This hypothesis was partly accepted because significant differences were found between the groups for all the variables except sexual satisfaction. The second hypothesis predicted there would be a difference in scores between Religious Practice groups in sexual satisfaction, sexual knowledge and sexual attitudes and this hypothesis was fully accepted. The final hypothesis was that religious practice, sexual knowledge and sexual attitudes would be significant predictors for sexual satisfaction. This hypothesis was partly accepted because only sexual knowledge and the sexual attitude of communion towards sex were significant predictors. The meaning of these results and their implications to the field of Counselling Psychology are discussed below.

One important contribution of this study is the finding that different types of religious categorisations yield different results. This supports recent calls by Hernandez et al. (2014) for research to separate the different facets of religion and explore how this might impact sexual satisfaction differently. The Religious Culture group was based on self-defined categories that represent Jewish social and cultural beliefs that range on an Orthodox spectrum. These were the Ultra-Orthodox, Modern-Orthodox and Non-Orthodox groups. No differences were found in the level of sexual satisfaction between these groups suggesting that the cultural elements of Judaism do not impact sexual satisfaction, despite that significant differences were found in the sexual

attitudes and knowledge of the groups. The Religious Practice group categorisation was based on the scores of the CRS, which evaluates the extent to which beliefs and practice of religion are integrated into a person's life. The groups for this factor were Highly Religious, Religious and Not Religious. When assessing religiosity with this variable, significant differences in sexual satisfaction were found between the Highly Religious groups and other groups. The regression model identified that one of the sexual attitude scales (SAS) called Communion was the strongest predictor variable for sexual satisfaction. This finding provides valuable insight into how religion and sexual attitudes influence sexual satisfaction. Implications of this finding are discussed below.

Another meaningful contribution of this study is the development of a new sexual knowledge measure and its role in sexual satisfaction. This study is the first, as far as the author is aware, to directly explore whether sexual knowledge has an impact on sexual satisfaction and how it may differ between religious groups. The researcher developed a measure to test sexual knowledge in this study because existing measures were considered inappropriate for use with a religious demographic, outdated or primarily focused on sexual dysfunction. Although the measure requires further development, this study identified that sexual knowledge is a worthwhile variable to explore when investigating sexual satisfaction and that psychoeducation can play an important role in sexual therapy and preventative therapeutic work.

To gain a clear understanding of how religion, sexual satisfaction, sexual attitudes and sexual knowledge interrelate, this study used multiple methods

of inquiry and analyses which together provide a rich and holistic understanding how the religious beliefs, practices, attitudes and education of Orthodox Jews impacts their sexual satisfaction. As mentioned, one of the most interesting aspects of this research is the difference in results when using different religious categories. Therefore, the results will be presented in a way that facilitate the comparison of religious categorisations for each of the sexuality-related variables of this study. Once the initial quantitative findings have been briefly described a greater discussion about the meaning of each of the findings and how they relate to each other will follow. After this, the qualitative findings will be considered as well as how they relate to the quantitative findings. Following the discussion of the findings, the limitations of this study and recommendations for future studies will be considered. Finally, the theoretical and clinical implications of this study will be presented.

4.2 Demographic characteristics and confounding variables

An important component of this study was to increase understanding of how Orthodox Judaism influences sexuality to provide clinicians with greater awareness of factors that need to be considered when working with this client group. The Orthodox Jewish community has many cultural norms relating to marriage and family life based on its religious values and perspectives that differ from a secular society. For example, one striking difference is that Orthodox Jews get married at a young age and tend to have large families

(Loewenthal & Rogers, 2004). This trend was observed in our sample whereby the number of children in the Ultra-Orthodox group ranged from one to ten whereas in the control group the range was from one to two. However, despite the large differences in the range of children, the mean number of children in each group were less drastically different and no significant correlation was found between number of children and sexual satisfaction. Similarly, the mean age of marriage in the Ultra-Orthodox group was at 22 years and for the control group it was at 30 years. The demographic characteristics of the population sample were explored to assess whether any of these differences between Ultra-Orthodox, Modern-Orthodox, Non-Orthodox and control participants could confound any conclusions drawn from the results. Analyses were conducted to check whether age, relationship duration or number of children could be considered as a covariate or confounding variable of sexual satisfaction, which was the main variable in this study.

The sample consisted mostly of women however, no differences were found in overall levels of sexual satisfaction between men and women suggesting that the difference in group sizes between male and female participants did not impact the results. It is worth noting that differences were found between genders for the subscales, Ego-Focused and Partner and Activity-Focused. In line with previous research, women had significantly higher scores on the Partner and Activity-Focused subscale whilst men had significantly higher scores on the Ego-Focused subscale (Štulhofer et al., 2010). These differences seem to represent the consistent finding that the relational context of sexual

satisfaction is more important for women than it is for men (Impett, Muise and Peragine, 2014).

Differences in ages were found between the groups. For the Religious Culture groups, the Ultra-Orthodox group had the youngest mean age and the Non-Orthodox had the highest mean age. In the Religious Practice group, the Highly religious group had the youngest mean age and the Religious group had the highest mean age. This might reflect the extent to which Orthodox Jews who are Highly Religious or identify as Ultra-Orthodox Jews get married at a younger age compared to other groups. In this study's sample, Ultra-Orthodox Jews got married at a mean age of 22 years whereas Non-Orthodox Jews got married at a mean age of 29 years. A similar difference was found between the Highly Religious and Not Religious groups. Age was significantly negatively correlated with sexual satisfaction in this study. Although this finding parallels that from previous research (De Ryck et al., 2012), the relationship between age and sexual satisfaction is multifaceted and seems to be moderated by other variables such as physical health and gender (Schwarz, Diefendorf & McGlynn-Wright, 2014). Age did not meet the assumption of independence that is needed to be considered as a covariate since significant differences were found between groups.

Relationship duration was also negatively correlated with sexual satisfaction in line with previous empirical studies (Schmiederberg & Schroder, 2016). This variable was used as a covariate when analysing differences in sexual satisfaction between Religious Practice groups. It was not used as a covariate for Religious Culture groups as it did not meet the required assumption for homogeneity of regression. Relationship duration was identified as a

significant covariate of sexual satisfaction, although a significant effect of Religious Culture on sexual satisfaction was still found after controlling for Relationship Duration. Given that age and relationship duration are intrinsically correlated it would be interesting to conduct research that could separate the two effects. One such study could compare the level of sexual satisfaction of younger and older participants who have been in a relationship for a similar amount of time.

In summary, the demographic information of the participants in this study provides insight into how Orthodox Jews might have different family structures compared to Non-Orthodox and secular participants. On average Ultra-Orthodox Jews who participated in this study were younger, got married younger, had lower percentages of previous marriages, more children and younger children than any of the other Religious Culture groups. Of these, Age and Relationship Duration correlated significantly with sexual satisfaction however, only relationship duration was used as a covariate. Variables related to family life and number of children can impact the social, emotional and economic aspects of a client's life and it is important for clinicians to be aware of these mainstream differences when providing therapy to Orthodox Jewish clients (Loewenthal & Rogers, 2004).

4.3 Sexual satisfaction

A primary focus of this study was to establish whether religion impacted sexual satisfaction in Orthodox Jews. Two methods of assessing religious level that explored different aspects of religion were used to investigate

whether the way religion was measured impacted results. The first method was Religious Culture which comprised of self-defined groups which are often used when researching Orthodox Jews. The second was Religious Practice groups which was based on the scores of the Centrality of Religiosity Scale (CRS). Different conclusions were drawn when measuring religion in different ways and these will be described and discussed below.

No significant difference was found between Religious Culture groups in their sexual satisfaction scores. Moreover, the mean sexual satisfaction scores across all these groups were similar to those from an independent US community sample that was used when developing the NSSS (Štulhofer et al., 2010). These findings suggest there is no impact of religious level on sexual satisfaction amongst Orthodox Jews and supports previous studies that draws the same conclusions (Young et al., 1998; Ashdown et al., 1995; Lazar, 2017). One of the reasons the findings from this study might differ from those that found a negative relationship between religion and sexual satisfaction such as Purcell (1984) and Higgins et al. (2011) could be due to the demographic groups explored. Purcell (1984) conducted his study on a sample of mostly Catholic and Protestant participants. Higgins et al. (2011) conducted their study on a sample of American college students who were engaging in sex outside of marriage. In their studies, Purcell (1984) and Higgins et al. (2011) identified that sex-related guilt was a mediator between religion and sexual satisfaction. The samples used in the current study, which consisted mostly of married Jewish participants, is not expected to be affected by sexual guilt since Judaism has a fundamentally positive attitude towards sex within marriage. The differences in the samples and findings drawn from

these studies highlight how researchers need to consider the underlying tenets of each religion prior to conducting investigations. Furthermore, it underlines the difficulty of generalising findings across religions and the value of exploring these variables within specific cohorts.

This finding has implications, not only for research methodologies when studying religion and sexual satisfaction, but also for therapeutic practice. It is necessary for therapists to have an awareness of the different factors that may impact their client's attitudes towards sex. For example, whereas sexual guilt might be an important factor to consider when formulating the development of erectile dysfunction or vaginismus of a Catholic university student engaging in sex outside of marriage, this is likely to be less relevant when treating a married Ultra-Orthodox Jew for the same conditions.

In contrast to the above finding and in support of using multiple religious measurements, a significant difference was found between the Religious Practice group in their sexual satisfaction scores. This was the case even after controlling for the significant covariate of Relationship Duration. These results support previous research that found religious participants are more satisfied with their sex life than non-religious participants (Neto & Pinto, 2013).

The planned comparisons revealed an interesting effect. The Highly Religious group had a significantly higher sexual satisfaction score than the Religious group, yet no significant difference was found between the Religious and Not Religious groups in their sexual satisfaction score. These findings suggest that when it comes to Religious Practice, being Highly Religious has a distinctly

positive impact on sexual satisfaction but this effect is not observed at all once religious level decreases. It would be interesting for future studies to explore what aspect of high religiosity enhances sexual satisfaction in a way that is considerably different to other levels of religiosity and whether this effect is found in other religions apart from Judaism.

The differences in these findings based on religious categorisation and measurement substantiate the arguments put forth by Hernandez et al. (2014) that there are multiple components of religion and these impact sexuality in different ways. Although there is some development in this area, there is still not sufficient understanding of the components underlying religiosity and how religions may differ. For example, in Judaism, a person's level of religiosity is often assumed based on the Orthodox group they identify with (Lazar, 2014). These Orthodox groups not only represent beliefs, but also social structures surrounding Orthodox life, such as schooling, whether one attends university, age of marriage, dress code and average number of children per family. When exploring how the two types of religious categorisations interrelate, it appears that a large percentage of Ultra-Orthodox Jews fit in the Highly Religious group although, not all of them do. More significantly, around half of the Modern-Orthodox group fit into the Highly Religious category and most of the Non-Orthodox group fit into the Religious category. These findings suggest that a difference exists between what is socially perceived as 'religious' and religiosity that is intrinsic and based on a person's belief and practice. This may correspond to the religiousness/spirituality split used by other studies to distinguish between an institutionalised, non-personal, external construct and a personal, internal

construct (Lazar, 2014; Hill & Pargament, 2003). It is important to be aware of this because often studies exploring the impact of religiosity in Judaism will explore differences based on groups similar to the Religious Culture groups used in this study (Lazar, 2014; Kellogg et al., 2014). These findings reinforce the recent change in religiosity research to distinguish between various elements of religion such as spirituality, religious practice and sanctification to provide a comprehensive understanding of how they influence sexual satisfaction (Hernandez et al., 2014; Murray-Swank et al., 2005).

4.4 Sexual Knowledge

The literature review above identified how basic sexual knowledge may be a cause of significant distress for Orthodox Jews. Limited sexual education prior to marriage has left Orthodox women feeling unprepared for a sexual relationship and in some cases led to the couple struggling to have sexual intercourse or even consummating their marriage (Rosenbaum et al., 2013; Ribner and Rosenbaum, 2004; Friedman et al, 2009). No previous measures existed that were appropriate for use with Orthodox Jewish participants or designed to exclusively measure knowledge about basic sexual anatomy and function. Considering that this was the area of knowledge that many Orthodox Jewish women said that they lacked in a study by Friedman et al. (2009), a measure designed for this purpose that was appropriate for use with an Orthodox Jewish population was developed. A discussion of the findings

exploring whether Religious Culture and Practice impact sexual knowledge is presented below followed by a discussion elaborating on the measure itself.

A significant difference was found between Religious Culture groups in their level of sexual knowledge indicating that Religious Culture impacts level of sexual knowledge, although the small effect size suggests that Religious Culture groups only accounts for a small difference in the sexual knowledge scores. As expected, the Ultra-Orthodox group had the lowest sexual knowledge score, followed by the Modern-Orthodox, the Non-Orthodox group and finally the controls. No significant difference was found between the Ultra-Orthodox and Modern-Orthodox group suggesting that these groups have similar levels of sexual knowledge. No significant difference was also found between the Non-Orthodox and controls, suggesting that there is no impact of Religious Culture on the sexual knowledge of the Non-Orthodox group. The significant difference lay between the Modern-Orthodox and Non-Orthodox groups suggesting that those who identify with Ultra or Modern-Orthodox Judaism have significantly lower sexual knowledge than the general population. This difference might be explained by the greater focus placed in the Ultra and Modern-Orthodox communities on modesty as well as the lower exposure they might have to sexual literature, movies, conversations or formal sexual education. These findings support previous studies that members of the Orthodox community have less sexual knowledge than the general population (Maybruch et al., 2014; Friedman et al., 2009; Ribner 2003; Ribner & Rosenbaum, 2007).

A significant difference was also found between the Religious Practice groups in their sexual knowledge scores. Once again, a small effect size was found

suggesting that the Religious Practice group is only modestly associated with the variance of the sexual knowledge scores in this study. The Highly Religious group had the lowest sexual knowledge score, and this was significantly lower than the scores of both the Religious and Not Religious groups. Although the Religious group had a lower score than the Not Religious group this difference was not significant suggesting that there is no substantial distinction in sexual knowledge between the Religious and Not Religious groups. These results might be explained by the way the Modern-Orthodox group was comprised of roughly two subgroups of differing Religious Practice. It appears that the Highly Religious section of the Modern-Orthodox group has similar levels of sexual knowledge to most of the Ultra-Orthodox group and so a significant difference is observed between Highly Religious and Religious groups but not between Ultra-Orthodox and Modern-Orthodox. Similarly, this could explain why there is no difference between the Religious and Not Religious groups, as the Religious group mainly consists of the less religious section of the Modern-Orthodox group. These differences based on religious categorisations further substantiates the importance of using multiple measures of religion when conducting research.

As explained above, the sexual knowledge measure was developed for the purposes of this study. The measure appears to have successfully distinguished between the Orthodox and Non-Orthodox groups. This difference was hypothesised based on a rationale from previous research (Friedman et al., 2009; Rosenbaum et al., 2013; Ribner & Rosenbaum, 2005). Since this hypothesis was confirmed, these findings provide concurrent validity for this measure. However, despite the evidence that this measure can

discern between levels of sexual knowledge, the variance of the sexual knowledge scores was not large and there was a low ceiling effect, whereby most people could answer all the questions. Additionally, a significant difference between the Modern-Orthodox and Ultra-Orthodox groups was expected but not found and the reliability analysis resulted in a low reliability score. Consequently, the results relating to this measure must be interpreted with caution and the scores can only represent sexual knowledge as a construct measured within this study rather than representing the construct of sexual knowledge in general.

One possible cause for the low reliability score and ceiling effect might be because the measure was not first tested on an independent group for whom the measure was specifically designed which was largely due to recruitment difficulties and time constraints related to this project. The measure was developed as a response to studies that found that Ultra-Orthodox Jews were unaware of basic anatomy and sexual functioning (Friedman et al., 2009; Rosenbaum et al., 2013; Ribner & Rosenbaum, 2005). As such, the questionnaire measures the basic sexual knowledge that one would expect a sexually active adult to know. It was anticipated that participants with access to sexual knowledge or those who were provided with sexual education would score highly and those who did not would score poorly. However, in this study the Ultra-Orthodox group scored higher than expected with a mean score of 9.7 correct answers out of 12. On reflection, this may have occurred due to selection bias, since the Ultra-Orthodox Jews who volunteered to participate in this study were more likely to be open about discussing sexuality and have greater access to sexuality-related information than Ultra-

Orthodox Jews who either did not come across the study or decided not to partake in it. To validate this measure, future studies are required to distribute the questionnaire amongst participants who are representative of the entire Ultra-Orthodox spectrum. It would be interesting to compare the sexual knowledge scores of those Ultra-Orthodox Jews who do not regularly use the internet with those who do. This would be particularly fascinating when considering that, in the open-ended responses, a fifth of Ultra-Orthodox Jews cited the internet as one of their sources of sexual knowledge.

The responses from the open-ended questions support the above findings as well as provide support for the theoretical construction of the questionnaire. In response to the question “Where did you learn about sex?” only eight percent of the Ultra-Orthodox group mentioned formal school education. This contrasts with the other groups, where 25% of the Modern-Orthodox group and 27% of the Non-Orthodox group cited formal school education as a source of sexual information. This suggests that Ultra-Orthodox Jews receive the least amount of sexual education. Although a low rate was expected for the Ultra-Orthodox group, it was surprising to find such a small difference between the Modern and Non-Orthodox groups given that modesty is less emphasised amongst Non-Orthodox Jews. It is unclear whether the Non-Orthodox participants attended Jewish schools or non-faith schools. If most went to non-faith schools, this finding could represent the level of school based sexual education that exists in the general population which prompts one to question whether sufficient sexual education is being delivered in schools in general.

An important point to consider in response to this is that the mean age of participants in the study was 31.68 years and that sexual education in schools has changed considerably over the last few decades. A long and controversial debate exists regarding the role, purpose and effects of school-based sexual education which only started to become more explicit in the 1940s (Iyer & Aggleton, 2015; Pilcher, 2004). Iyer and Aggleton (2015) wrote a review in the Health Education Journal regarding the diverse debates and perspectives surrounding school-based sex-education over the last 70 years. These discussions consider whether the focus of sex education should be primarily on damage control, reducing the risks of negative consequences or on the positive potential of the sexual relationship. They conclude their review lamenting the lack of development and consensus achieved in these debates over 70 years. They note that still, during the 2000's, there was a primary focus on preventing teen pregnancy and sexually transmitted infections (STI), however they also identify that at this time there was an initial shift in perception that sexual education could empower the youth to act as agents of their own sexual health. These debates are reflected in current policy; only as recent as March 2017 did the government require that all schools, not just those that are council run, provide mandatory sexual education. This policy was developed in response to recognising that many children were not coming out of school ready for sexuality-related experiences in the modern world (Sellgren, 2017). Given the controversies over the place and purpose of sexual education in school over the last few decades it is unsurprising that many of the participants in this study did not reference school as a source of sexual education.

What was further surprising in the analysis of the open-ended questions was that only 32% of Ultra-Orthodox and 20% of Modern-Orthodox cited pre-marital classes as a source of sexual education. This was concerning, given that pre-marital classes are the designated place for Orthodox-Jews to receive their sexual education. This finding implies that very few members of Ultra and Modern-Orthodox communities are receiving sexual education from any formal setting and leads one to question whether they are learning accurate sexual information at all. This conclusion echoes the findings of Friedman et al. (2009) that Ultra and Modern-Orthodox female Jewish participants do not feel sufficiently prepared for their first sexual encounter and have an inadequate level of basic sexual knowledge.

The finding from the tests exploring differences between groups coupled with the open-ended responses indicate that members of the Ultra and Modern-Orthodox communities are less exposed to sexual education and as a result have lower sexual knowledge than members of the general population. When working with this population for marital or sex therapy, clinicians need to keep in mind that gaps in basic sexual information may exist which could be contributing to the couple's sexual problems. An example of something that may be considered basic sexual knowledge that could contribute to pain and distress between the couple is the role of lubricants or that stress and fatigue can reduce sexual desire (Brotto & Smith, 2014). In these situations, the lack of knowledge could lead to the experience of uncomfortable or even painful sex and reduce the pleasure associated with it. This might cause a partner to lose interest in sex which could be interpreted as "my partner is no longer attracted to me". In such cases, the provision of basic sexual education at an

early stage could isolate the cause of the problem, inhibit any escalation of the problem and prevent it from infiltrating on other parts of the couple's relationship.

4.5 Sexual Attitudes

As part of understanding how religion impacts sexual satisfaction, sexual attitudes were explored. Many religions promote strong messages about sexuality that shape the attitudes of its members, such as by condemning or endorsing certain sexual behaviours. The influence of religious sexual attitudes is not solely limited to the types of sexual behaviour or relationships one engages in but can also influence the satisfaction one derives from their sexual experiences. This has been described above when discussing how sexual guilt can sometimes moderate the relationship between religion and sexual satisfaction. In such cases, incongruence between one's beliefs and actions promotes guilt and impacts the level of satisfaction derived from the sexual encounter (Moore & Davidson, 1997). As such it is important to explore how attitudes differ between religions and even amongst members of the same faith to gain a richer understanding of the way that religion impacts sexual satisfaction. This study used three subscales from the Brief Sexual Attitudes Scale labelled; Permissiveness, Communion and Instrumentality. A description of each of the subscales is presented below alongside a discussion about how each these attitudes differ between Religious Culture and Religious Practice groups. A discussion about the relationship between each of these variables and sexual satisfaction is presented later.

4.5.1 Permissiveness

The Permissiveness subscale measures the permissive sexual attitudes one has towards sex. The developers of the scale also refer to this dimension as 'casual sexuality'. This subscale investigates peoples' attitude towards multiple sexual partners, one-night stands, sex outside of a relationship, sex with 'no strings attached', having sex more freely, and separating the emotional and relational parts of sex from the physical aspects of sex.

As expected, the results from this study showed significant differences between Religious Culture groups in their permissiveness attitudes towards sex. This finding corroborates with previous research conducted by the scale developers that people without religious beliefs approve of permissive behaviours more than those with religious beliefs (Hendrick & Hendrick, 1987a). Furthermore, compared to all the other variables Religious Culture had the biggest impact on these attitudes and was able to explain 19.1% of the variance of permissiveness scores. This is considered a moderate to large effect size and when one considers that sexual satisfaction is a complex variable that can be impacted by a multitude of factors this finding is meaningful in suggesting that religion has a considerable impact on permissiveness attitudes towards sex (Vacha-Haase & Thompson, 2004).

The Ultra-Orthodox group had significantly less permissive attitudes towards sex than the Modern-Orthodox group which in turn had a significantly less permissive attitudes towards sex than the Non-Orthodox group. This finding supports one of the premises of this study that religion impacts people's

attitudes towards sex and provides empirical insight into the subtle differences between Orthodox groups, thereby justifying Religious Culture as meaningful categorisation of religiosity for Jews. It is interesting to note that the Non-Orthodox group had significantly different Permissiveness scores compared to the control group which comprised of participants who did not associate with a religion. This finding implies that religion influences the attitudes of Non-Orthodox Jews towards sexual permissiveness and that they are more conservative than the general population.

A similar trend was found in the Permissiveness scores between each of the Religious Practice groups. The Highly Religious group had the lowest scores followed by the Religious group and finally the Not Religious group. This analysis had the largest effect size in the study suggesting that Religious Practice has a particularly strong influence on sexual attitudes towards permissiveness. This finding supports the claim that Judaism disapproves of extra-marital sex.

4.5.2 Communion

The results from this study show a significant difference between the Religious Culture groups in their Communion (idealistic) attitudes towards sex. A full discussion of this variable is presented below when discussing its role in predicting sexual satisfaction. The Ultra-Orthodox group had significantly higher Communion scores than all the other groups suggesting that they had the most idealistic attitude towards sex. Although the Modern-Orthodox group had a higher mean Communion score than the Non-Orthodox

group this difference was not significant. Similarly, the Non-Orthodox group did not have significantly different scores from controls. These results imply that Ultra-Orthodox Jews are more idealistic about sex than Modern-Orthodox Jews, Non-Orthodox Jews and controls.

A significant difference was found between Religious Practice groups in their attitudes toward communion in sex. The Highly Religious group had significantly higher scores than the Religious group which in turn had significantly higher scores than the Not Religious group. This trend implies that religion influences attitudes towards Communion in sex. This variable will be discussed in greater detail below (section 4.7.1). For both, Religious Culture and Practice there was a small to medium effect size, suggesting that these grouping variables only explain a small amount of variance in communion scores. This suggests that religion has more of an impact on permissiveness attitudes than communion attitudes.

4.5.3 Instrumentality

The last of the sexual attitude subscales was Instrumentality which Hendrick and Hendrick (2006) describe as assessing biological and utilitarian attitudes towards sex. In their original paper in 1986 they comment that this dimension has an egocentric and mechanistic theme which focuses on genital sexuality. This study found significant differences between Religious Culture groups in their instrumentality attitudes. The effect size was once again small suggesting that the religious groups only explained a small part of the variance in scores. The Ultra-Orthodox group had a significantly lower

Instrumentality score compared to all the other groups suggesting they had the least utilitarian and self-focused attitude towards sex. Although the Modern-Orthodox group had lower Instrumentality scores than the Non-Orthodox group this difference was not significant suggesting that these two groups have similar attitude towards instrumentality in sex. There was also no significant difference between the Instrumentality scores of the Non-Orthodox and control groups.

Significant differences were also found between the Religious Practice groups in their instrumentality attitudes towards sex. Again, this finding had a small effect size suggesting that Religious Practice groups could only explain a small amount of variance in Instrumentality scores. The Highly Religious group had significantly lower Instrumentality scores than the Religious and Not Religious group. This suggests that Highly Religious Jews view sex as less biological and utilitarian than Jews who are less religious. No significant difference was found between the Religious and Not Religious group who only had a very slight difference in their scores.

The findings from this study substantiate previous findings that Permissive and Instrumentality are positively related to each other and that both are negatively correlated with Communion (Hendrick & Hendrik, 1987). The Ultra-Orthodox and Highly Religious groups had the highest Communion scores and the lowest Permissiveness and Instrumentality scores whilst the Control and Not Religious groups scores had the lowest Communion scores and the highest Permissive and Instrumentality scores. An interesting finding is that the Non-Orthodox Jews seem to be more traditional and conservative in their sexual attitudes compared to secular participants. A difference

between the groups is only observed in Permissiveness scores whilst their Communion and Instrumentality scores paralleled those of secular participants. This could suggest that members of this group are influenced by the restrictive beliefs of religion but not by the idealistic or positive ones.

To summarise, this study found that religion influences sexual attitudes. Across each of the attitude subscales, there are consistent significant differences between the Religious Culture and Religious Practice group perceptions. Religion presents an individual with a set of morals and ethics to live by, yet the extent to which it impacts a person's behaviour and attitudes depends on their individual commitment to the religion (Odimegwu, 2005). This might be reflected by the stronger effect sizes found for the Religious Practice analyses compared to the Religious Culture analyses which suggests that when it comes to sexual attitudes your level of intrinsic belief influences your attitudes towards sexuality more than the cultural group you identify with. To understand how different religions impact people's attitudes towards sex future studies could compare the attitudes of religious members from different faiths.

4.6 Relationship between sexual satisfaction, religion, sexual knowledge and sexual attitudes

This study predicted that sexual satisfaction scores would be significantly correlated with Religious Practice, sexual knowledge and sexual attitude scores. The previous analyses addressed the question *does* religion impact sexual satisfaction, sexual knowledge and sexual attitudes? Once differences were established between groups the correlational analyses provided a greater understanding of *how* religion, sexual, knowledge and sexual attitudes relate to sexual satisfaction, by assessing the nature and direction of the relationships between the variables. This study found that each of these variables correlated significantly with sexual satisfaction and accordingly this hypothesis was accepted. The correlations between each of the variables with sexual satisfaction are presented below.

Although most of the correlations in this study had small effect sizes, according to standard effect sizes ratings, Field (2013) highlights that it is necessary to consider effect size within the context of other research in the field. Previous research correlating sexual attitudes and religion with sexual or relationship satisfaction found effect sizes within a similar range (Hendrick et al., 2006; Young et al., 1998). Given that sexual satisfaction is a complex variable that can be influenced by many factors such as physical health, mental health and relationship factors it is reasonable to conclude that the correlations from this study are meaningful in understanding sexual satisfaction.

4.6.1 Religion and Sexual Satisfaction

Sexual satisfaction was significantly positively correlated with Religious Practice scores and indicates that the more religious a Jewish person is the greater sexual satisfaction they experience. This supports the above findings that differences in sexual satisfaction exists between Religious Practice groups. As previously discussed this finding cannot be generalised to all religions due to the inherent differences in each religion's beliefs about sexuality. To gain further understanding of how each religion impacts sexuality, future studies are needed to compare sexual satisfaction between different religions using consistent methods and tools.

The positive relationship between religiosity and sexual satisfaction may be due to a range of factors specific to Judaism. As previously discussed, the absence of sexual guilt might be one factor. The sanctification of sex within a marriage and the meaning it attributes to the sexual experience could be another factor (Hernandez, 2008). A different specific feature of Judaism that may be related to this is the regularity of family purity laws (discussed in Section 1.6.3.2) which serve as a constant reminder of the sanctification of marriage and provides a strong presence of religion in a person's daily life. Moreover, the observance of the laws of separation during a woman's time as a *niddah* might lead to greater sexual experiences when the couple reunites as they know that their opportunities for sexual interactions are limited. This may mean that once they can resume intimacy they are focused on creating time and space for sex amidst their busy lives. Alternatively, the adage "absence makes the heart grow fonder" may have some effect in their relationship. In her book, 'Mating in Captivity' Esther Perel (2007) presents

a theory of why sexual satisfaction decreases over relationship duration. She suggests that a sense of distance and separateness is necessary to fuel sexual desire, and this can be lost over time as couples fuse together emotionally. Throughout her book she discusses case studies of clients who have lost interest in sex with their long-term partner. She writes “Ironically, what makes for good intimacy does not always make for good sex....the breakdown of desire appears to be an unintentional consequence of the creation of intimacy” (p. 23-24). Although Perel referred to the need for emotional distance, perhaps a by-product of the *niddah* laws is that it creates a sense of distance that is necessary for the maintenance of sexual desire in a relationship.

4.6.2 Sexual Knowledge and Sexual Satisfaction

The results suggest the sexual knowledge is positively correlated with sexual satisfaction whereby higher levels of sexual knowledge are associated with higher levels of sexual satisfaction. The direction of influence between these variables is difficult to determine. For the other correlations it is possible to identify the direction of the relationship based on existing theory or reason. For examples, it is more reasonable to suggest that someone’s religious ideals impact sexual satisfaction rather than someone’s positive sexual experiences has led them to become more religious. When it comes to sexual knowledge there is not sufficient research to understand how it interacts with sexual satisfaction.

Perhaps one way of understanding this relationship is that a greater level of sexual knowledge leads to greater sexual satisfaction because a person has more information about the stages of arousal, how to reach orgasm or if something is uncomfortable how to adjust things to enhance their experience. This would corroborate with the self-sexual knowledge that La France (2010) investigated and found was a significant predictor of sexual satisfaction. It would also relate to the findings by Byers and MacNeil (2006) and MacNeil and Byers (2009) that sexual communication, understanding and assertiveness correlate with greater levels of sexual satisfaction. Conversely, low sexual knowledge might lead to low sexual satisfaction if a person does not understand what is happening to them, how to achieve orgasm, what is pleasurable for them and their partner or how to make things better. Another possible explanation is that positive sexual experiences might encourage people to learn more about sex or feel comfortable discussing sex with others. In a similar way, negative sexual experiences might cause people to feel embarrassed, less motivated to understand how to improve things and feel hopeless. These findings suggest that providing sexual knowledge to couples who may have inaccurate or insufficient sexual knowledge could improve their sexual experiences and prevent the development of further sexual problems. Therefore, an assessment of client's current sexual knowledge would be an important precursor for the therapy and treatment that follows.

The correlation matrix shows a significant negative correlation between religion and sexual knowledge. This illustrates the complex interrelation between, religiosity, sexual knowledge and sexual satisfaction. On the one hand, sexual satisfaction is correlated with higher levels of sexual knowledge

and higher levels of religiosity. Yet, high levels of religiosity are negatively correlated with sexual knowledge. This might indicate that sexual knowledge moderates an interaction between religiosity and sexual satisfaction whereby if someone is religious and has higher levels of sexual knowledge they are likely to be more sexually satisfied than someone religious who has less sexual knowledge. Another possible explanation is that sexual knowledge does not have as strong effect on sexual satisfaction for people who are not religious. It would be worthwhile for future studies to explore how sexual knowledge might act as a moderator between religiosity and sexual satisfaction.

Our commitment as counselling psychologists to wellbeing and prevention of the development of distress and problems means that at times the implications of our research extends to the wider community and society. These findings have implications for schools, teachers, government policies and pre-marital teachers to ensure that young people are being provided with sufficient and accurate sexual education. An important aim and value of counselling psychology is that of social justice whereby counselling psychologists are encouraged to promote “the values of self-development and self-determination for everyone” (Vera & Speight, 2003, p.111). Some argue that multicultural competence is dependent on this commitment to social justice (Vera & Speight, 2003; Goodman et al, 2004). This is achieved by promoting change in the community and consequently our roles as counselling psychologists extend far beyond the therapy room (Palmer & Parish, 2008; Goodman et al., 2004). In the context of this research, counselling psychologists are well placed to present findings from the field of sexual

satisfaction and the value of sexual education to those in society who are in positions to make changes to the education system. Counselling psychologists who are well informed about sexuality can provide training workshops to educators that provide them with information and skills about how to discuss sexuality with individuals of different ages and backgrounds. Counselling psychologists can also help guide and manage the anxieties that parents or teachers may have about discussing these topics with their children or students (Walker, 2004).

4.6.3 Sexual Attitudes and Sexual Satisfaction

4.6.3.1 Permissiveness

The study found that Permissiveness was negatively correlated with sexual satisfaction scores. This suggests that the less permissive attitudes one has towards sex the more sexually satisfied they are. It is interesting to note that permissiveness and religiosity had the strongest negative relationship of all the variables. The strong effect size supports the claim that Judaism has a conservative view of sex and this influences the sexual attitudes of its members. However, the results show that a more conservative attitude does not lead to lower sexual satisfaction. On the contrary, this study found that those who are more religious have higher levels of satisfaction and those who have more permissive sexual attitudes experience lower levels of sexual satisfaction.

In her book 'Mainstreaming Sex: The sexualization of western culture', Feona Attwood describes how the boundaries between the public and private

are changing in a way that makes sex more visible and accessible than ever before (Attwood, 2014). At the same time, she identifies, that a disassociation between sex for pleasure and sex as a means for reproduction or developing a relationship has led to sexual relationships becoming more transient and permissive. This study found that within the Jewish population more permissive attitudes do not lead to sexual satisfaction. This might be because permissive behaviour and attitudes conflict with implicit religious attitudes about sex which can then lead to reduced sexual desire or satisfaction (Dosch, Belayachi & Van Der Linden, 2015). To identify whether this negative relationship between Permissiveness and sexual satisfaction is also present in the general population, future studies will need to use these same measurements to investigate this relationship. Perhaps the messages portrayed by mainstream media regarding the benefits of permissive sexual relationships and behaviour does not actually lead to greater sexual satisfaction and instead contributes to the decrease in sexual frequency between couples observed through the NATSAL surveys? The findings from this study indicate that there is something important about the quality of the sexual relationship within which sex occurs that leads to sexual satisfaction. Based on this finding one could suggest that if someone is seeking to enhance their sexual satisfaction they should not try and engage in more casual sex but rather invest in their relationship. This supports previous research which found that those who were involved in exclusive relationships were more sexually satisfied than those where not (Higgins et al, 2011).

4.6.3.2 Communion

A significant positive correlation was found between Communion scores and sexual satisfaction scores. Of all the variables Communion had the strongest association with sexual satisfaction suggesting that Communion is an important variable in understanding sexual satisfaction. Communion is also highly related to Religious Practice. The significance of this variable will be elaborated in Section 4.7.1 below when discussing its role as a predictor of sexual satisfaction.

4.6.3.3 Instrumentality

There was a significant negative correlation between Instrumentality scores and sexual satisfaction scores suggesting that the more one possesses a biological and utilitarian view towards sexuality the less sexual satisfaction they experience. An important belief in Judaism is that sex should not be a purely physical or self-focused experience (Friedman, 2005). This is supported by the significant negative correlation between religiosity and Instrumentality and could explain why Instrumentality is inversely related to sexual satisfaction in this sample of Orthodox Jews. Future studies are required to explore whether this pattern, using these measures, is found in the wider general population. If a similar pattern is found it would indicate that sex occurring within a relational experience is more satisfying than one that focuses on the individuals' own pleasure. Although this may be intuitive this is not reflective of messages about sex and relationships in the media which influences people's attitudes about sexuality (McNair, 2002; Attwood, 2014).

The findings from the open-ended questions regarding expectations of sex support this finding. Participants across all groups mentioned the theme 'emotional' more than 'physical'. The word 'physical' was mentioned by only 8% of the Ultra-Orthodox, 7% of the Modern-Orthodox and 27% of the Non-Orthodox groups. Although these comparisons need to be interpreted with caution given the large differences in group sizes, this difference could represent that there are more 'physical' expectations of sex for the Non-Orthodox Jews than Orthodox ones. Of further interest, the theme 'mutuality' was stated by a large proportion of each group, 44% of the Ultra-Orthodox, 34% by the Modern-Orthodox and by 53% of the Non-Orthodox. This suggests that a sense of reciprocity and 'give and take' in sexual interaction is expected by many. This might explain why Instrumentality, which has an egocentric dimension, is negatively correlated with sexual satisfaction.

In summary, the directions of the relationships between sexual satisfaction and each of the sexual attitudes suggests that the less someone perceives sex as casual, biological and focused on physical pleasure and the more someone views sex as an important way to connect to someone on a deeper relational and idealistic level the more they will experience greater sexual satisfaction. These findings provide us with an enriched understanding of sexual satisfaction and has implications for clinical practice and the way sex is thought about and discussed as part of a relationships particularly in the Orthodox Jewish community.

4.7 Predicting sexual satisfaction

The final hypothesis stated that Religious Practice as measured by the Centrality of Religiosity Scale (CRS), sexual knowledge as measured by the Brief Sexual Knowledge Questionnaire (BSKQ12) and sexual attitude scores as measured by three subscales from the Sexual Attitudes Scale (SAS Permissiveness, SAS Instrumentality and SAS Communion) will be significant predictors of sexual satisfaction. Whereas the correlation analysis suggested *how* all the variables were associated with each other, the purpose of the regression analysis was to understand the direction of the relationship with the outcome variable as well as the explanatory power of each of the variables. A multiple regression analysis was used to explore this and found that the overall model with all the variables entered was significant. However, only the variables Sexual Knowledge and Communion were identified as significant predictors of sexual satisfaction.

Communion had the largest coefficient suggesting it had the most predictive ability in the model. This corresponds with the findings from the correlation analysis which shows that Communion had the strongest correlation with sexual satisfaction. Although Religious Practice had the next strongest correlation with sexual satisfaction it was not significant in the model. This disparity could indicate that the effects of Religious Practice might be more attributable to other factors that correspond with it such as the sexual attitude of Communion.

The other significant predictor in the model was the Sexual knowledge score which suggests that despite the low ceiling effect and restricted range of

scores, the measure is meaningful in understanding factors that influence sexual satisfaction amongst Orthodox Jews. This finding strongly suggests that this variable should be developed and explored in future sexual satisfaction research. The standardised coefficient for sexual knowledge was positive, re-emphasising the finding from the correlational analysis that greater levels of sexual knowledge lead to greater sexual satisfaction. Future research could explore which items of the questionnaire had the most predictive ability and explore how these are related to sexual satisfaction.

4.7.1 Communion

Communion was significantly positively correlated with both sexual satisfaction and religiosity and was the strongest predictor variable for sexual satisfaction in the regression analysis. There were significant differences in Communion scores between the Ultra-Orthodox group and the rest of the Religious Culture groups and there were also significant differences between each of the Religious Practice groups where the Highly Religious group had the highest mean Communion scores. These findings suggest that people who are religious have greater Communion attitudes towards sex, and it is this Communion attitude which significantly impacts sexual satisfaction more so than the other variables explored in this study.

To understand the significance and meaning of this finding, it is necessary to consider what this variable represents and how it was developed. The sexual attitudes scale used in this study was developed originally by Hendrick and Hendrick in 1987. After its widespread use in research for 20 years it was

brought to the authors' attention that the scale needed to be readjusted when studies that were using the measure found that the original factor loadings did not represent their population samples well (LeGall, Mullet & Riviere-Shafiqhi, 2002). The scale developers reviewed the instrument and similarly found that some of the items no longer loaded well onto their factors. They postulated that this was because some items had become outdated due to changes in societal attitudes towards sex. Consequently, in 2006, Hendrick et al. re-analysed the scale using factor analysis and dropped several items from the scale to improve the factor loadings. They adjusted the Communion variable considerably and removed four out of nine, just under half, of the original items. Three of the retained items refer to beliefs about the relational aspect of sex "Sex is the closest form of communication between two people", "At its best, sex seems to be the merging of two souls" and "A sexual encounter between two people deeply in love is the ultimate human interaction". The other two items refer to the beliefs about the significance of sex and the sexual experience, "Sex is a very important part of life", "Sex is usually an intensive, almost overwhelming experience". Interestingly this last item loaded the lowest on to this factor and it seems to be less associated with idealistic beliefs and more about actual experience. The authors concluded that this variable now focused mostly on the relational aspect of sex and maintained the label 'Communion' for this factor.

In the Collins English dictionary 'communion' is described as "the act of sharing; possession in common; participation", "the act of sharing one's thoughts and emotions with another or others; intimate converse" and "an intimate relationship with deep understanding". The British definition adds

the description of “strong emotional or spiritual feelings”. The scale developers often synonymously described Communion as ‘idealistic’ sex. In the Collins English Dictionary ‘idealism’ or ‘idealistic’ is defined as “beliefs and behaviour of someone who has ideals and who tries to base their behaviour on these ideals”. The definition of ‘ideal’ is “a principle, idea, or standard that seems very good and worth trying to achieve”. These definitions of Communion and Idealistic sex frame the remaining items as a construct to measure the meaningful values and ideals one possesses about sex.

With this understanding of Communion, it is possible to interpret the relationship between religion, sexual attitudes and sexual satisfaction. The findings from this study suggest that people who have more ideals about sex experience more satisfying sex and that these attitudes are found in those with the highest religious levels. It is reasonable to suggest that religion provides a meaning-filled framework of values and ideals relating to sex and sexuality that enhance the experience of those who believe in it.

This is particularly interesting, because it is contrary to the sexual messages portrayed, directly or indirectly, by the media which are vast and varied (Ward, Reed, Trinh & Foust, 2014). A review of the sexual content of TV and magazines found that much of it promotes casual attitudes towards sex and impacts the perceived norms of permissive behaviour (Ward, 2003; Ward et al., 2014). In their analyses of sexual advice and tips provided in men’s and women’s magazines, Mernard and Kleinplatz (2008) found that 91% of the tips provided focused on technical/mechanical/physical factors, sexual variety which included places of having sex, kinkier sex, watching “steamy”/pornographic content and pre-sex preparation such as wearing sexy

clothes and lighting candles. Their analysis provides insight into the messages people are consciously or unconsciously absorbing. They found that only 6% of the tips related to fostering the relational and emotional aspect of the relationship. It seems that the information people receive from mainstream media about what enhances sexual satisfaction are related to Permissiveness and Instrumentality factors, which this study identifies is associated with lower sexual satisfaction.

Although, Permissiveness, Instrumentality and Communion were all correlated with Religious Practice and Sexual Satisfaction, only Communion had a significant effect in the model. Perhaps this suggests that the meaning-making aspect of religion has more influence than the restrictive and conservative elements of religion. On the other hand, perhaps the restrictive elements of religion are what provide meaning. If one views sexuality as a deeply profound opportunity for connection and relation to their partner this would mean that they would not be open to sharing it with many other people in a casual way. This finding supports research that found that sanctification of sexuality was a positive correlate of sexual satisfaction (Mahoney & Hernandez; Hernandez et al., 2014). Perhaps future studies could explore the relationship between Communion and sanctification amongst Orthodox Jews and the extent to which these variables overlap or have their separate influences on sexual satisfaction.

4.8 Open Ended Questions

The purpose of the open-ended questions was to provide greater insight into the quantitative findings of this study and the sexual attitudes, beliefs and practices of Orthodox Jews of which there is very little existing literature. Methodological pluralism allows for the development of a greater perspective and understanding of a subject and is encouraged in Counselling Psychology research. Rafalin (2010) argues that “A real understanding of phenomena requires an understanding on both the quantitative and qualitative dimensions” (p. 45.) One of the benefits of open-ended questions is that there is no limitation placed on participants’ responses and as a result factors that have not yet been considered by the researcher can become manifest. This is particularly important for developing theoretical understanding of subjects that are still poorly understood such as sexual knowledge in the Orthodox Jewish community. The responses were analysed using a basic content analysis whereby words were counted and systemised to allow for comparisons between group responses. In this way a quantitative method was employed to explore the qualitative data and there is little interpretation of the responses on an idiographic level. This has allowed the researcher to use multiple modes of inquiry whilst still remaining within a post-positivist research paradigm.

4.8.1 Sexual Expectations

A content analysis was conducted on participants’ responses to the question “What are your expectations of sex?”. The objective of this question was to

identify what participants perceive as sexual norms. Expectations play a powerful role in satisfaction as discussed in the literature review above (Section 1.8). The Social Norms Theory suggests that actions are often based on misperception of how members of a social group think and act. For example, college students tend to overestimate the amount of alcohol their peers drink and may adjust their own drinking level to match the perceived norm of their peers (Perkins & Berkowitz, 1986; Berkowitz, 2005). In 2009, Stephenson and Sullivan explored whether Social Norms Theory could be used to understand sexual satisfaction. They found that the larger a perceived discrepancy between one's own sexual experience and that of others existed, the greater dissatisfaction the individual experienced. They also identified that participants over-estimated others' sexual permissiveness and behaviours. One reason for this might be because sexual experiences often take place in a private setting and one of the only references people have for sexual behaviour is through the media which portrays sensationalised rather than realistic relationships (Menard & Kleinplatz, 2009). Stephenson and Sullivan (2009) found that when participants were presented with a realistic description of others' sexual behaviour and could see that the discrepancy was not as large as they had previously thought, their rating of their sexual satisfaction increased. The findings from their study suggests that unrealistic expectations may lead to sexual dissatisfaction and that providing accurate information about sexual behaviour and practices could enhance sexual satisfaction. This study was therefore interested in exploring the sexual expectations of Orthodox Jews, whether their expectations were realistic and how their expectations differed between groups.

The words that participants used were counted and grouped into themes and then further systemised into eleven main themes (see Table 3.8). The most frequently described theme across all groups was Satisfaction, which included any use of the word ‘satisfaction’ as well as ‘enjoying sex’ and ‘having fun’. Whereas this is a reasonable result to expect, it is possible that participants’ responses and choices of words were impacted by having just completed a measure concerning sexual satisfaction. To explore whether a recency effect impacted the responses, future studies could ask these questions prior to introducing any other measures or exploring responses in a separate study.

For the Ultra-Orthodox and Non-Orthodox group the next most mentioned theme was ‘Mutuality’. That mutuality is one of the most highly mentioned themes supports research that identifies the importance of the dyadic processes for sexual satisfaction (Štulhofer et al., 2010; Pascoal et al., 2014). It is interesting to note that four of the main components of the layperson’s definition of sexual satisfaction in Pascoal et al’s (2014) study; ‘emotional’, ‘frequent’, ‘mutual’ and ‘sexual pleasure’ correspond with the four most frequently mentioned themes for the Non-Orthodox and Ultra-Orthodox groups. Of further interest, previous research found that higher levels of communication are related with higher levels of sexual satisfaction (MacNeil & Byers, 2009) however, in this study the word ‘communication’ was not mentioned at all by the Ultra-Orthodox group and very little by the other groups.

For the Modern-Orthodox group the theme ‘Connection’ was mentioned most frequently following ‘Satisfaction’, whereas for the other groups ‘Emotional’ was next frequently mentioned. The theme ‘Connection’ seems to be related

to construct of Communion as the subthemes consist of words such as ‘union’, ‘closeness’ and ‘becoming’ as well as other forms of connection. It is interesting that there is a large discrepancy between the Ultra-Orthodox group (20%) and Modern-Orthodox (43%) group in how often this theme was mentioned. Perhaps this points to different expectations or ideals that each group is presented with by their pre-marital teachers. As it was discussed in the literature review, even within Orthodox Judaism there is a range of views concerning the purpose of sex and focus on pleasure. Further research is required to explore whether different Orthodox groups are receiving different messages about the place and purpose of sex in a marriage.

These findings demonstrate that participants expect more than just physical pleasure from sex and highlights the complexity of what constitutes sexual satisfaction. It is interesting that messages from secular media on how to enhance sex focus primarily on ‘Characteristics of the Sexual Experience’ which includes subthemes of ‘creativity’, ‘orgasm’, ‘passion’, ‘foreplay’, ‘release’, ‘frequency roles’ and others. Whereas, this study found that ‘Emotional’, ‘Mutuality’ and ‘Connection’ are the most cited sexual expectations that people have. These ‘Characteristics of Sexual Experience’ were mentioned least by the Ultra-Orthodox group and most by the Non-Orthodox group. This difference could reflect each group’s exposure to the media’s portrayal about what leads to great sex. The frequent mention of ‘Mutuality’ in this study supports the Social Exchange Model (Lawrence and Byers, 1995) which suggests that the individual feels satisfied when they experience a balance of costs and reward between themselves and their partner and this balance matches what they expected.

It is interesting to note that the Non-Orthodox group mentioned many of the words more than the other groups. A discourse analytical approach may suggest that this represents the way that sexuality and sexual expectations are spoken about in each of these different groups. Overall, these findings support the idea that people conceptualise sexual satisfaction by the presence of pleasure, positive experience and mutuality rather than by the absence of sexual problems (Pascoal et al, 2014). This implies that when an individual or couple attend therapy for sexual difficulties the therapist's efforts should extend beyond alleviating the sexual distress or dysfunction to helping clients experience positive, mutual sexual experiences with their partner.

4.8.2 Correspondence between Experience and Expectations

Participants were asked whether their experience of sex lives up to their expectations of sex. Most people did not answer yes or no directly, rather responses contained nuances and, in some cases, participants provided reasons for their response. For example, one participant said "Yes, it is a means to deepen the connection" and another wrote "Generally not. Partially because my expectations are so high and partially because I feel like I want more from our sexual relationship". This is one of the benefits of asking open-ended questions and collecting qualitative data. A medium score on a sexual satisfaction questionnaire could indicate that sex is always mediocre, or it could indicate that sometimes the participant is extremely satisfied and sometimes they are not satisfied. Open-ended questions allow the researcher to obtain a clearer understanding of what the scores from questionnaires

represent. Many of the responses used words such as ‘usually’, ‘sometimes’ or ‘rarely’. The choice of these words could be analysed using discourse analysis to provide insight into how sexual satisfaction is construed and the variance in people’s experience. However, since this study adopted a post-positive epistemological approach and the open-ended questions were not the focus of this study, the responses were analysed in a quantitative manner and based on the surface meaning of the responses.

In many ways, asking participants whether their expectations live up to their satisfaction, explores a type of sexual satisfaction. Several studies, discussed above, have suggested that expectations can influence levels of sexual satisfaction (Kleinplatz et al, 2009; Wadsworth, 2014; Stephenson & Sullivan, 2009). It is interesting to observe that the pattern of each group’s response to this question corresponds to the mean group scores from the sexual satisfaction scale. In the previous analyses, the Ultra-Orthodox group had the highest levels of sexual satisfaction followed by the Non-Orthodox and then the Modern-Orthodox group. In this analysis, the Ultra-Orthodox group indicated that their experience of sex lived up their expectations more than any other group, followed by the Non-Orthodox and finally that Modern-Orthodox. Although the results from this analysis must be taken lightly because of large differences in group sizes which make it difficult to compare the groups, this may point to a phenomenon occurring within the Modern-Orthodox community who tend to commit to Orthodox Jewish values yet expose themselves and integrate into the secular world. Only 38% of the Modern-Orthodox group indicated that their experience of sex matched their expectations. This low statistic is upsetting and indicates that further research

into the sexual expectations and experiences of this community is required to identify the best paths to assist them and to understand why there is such a low concordance rate between their experience and expectations. Perhaps one explanation could be that they hold conflicting beliefs, and this leads to lowered sexual satisfaction. Another possible explanation could be that they are more exposed to secular portrayals of sex than the Ultra-Orthodox group and this informs their sexual expectations however, they then do not have the sufficient levels of sexual knowledge or experience to identify that portrayal of sex by the media is unrealistic. Alternatively, they may feel a conflict between what they perceive leads to great sex and their religious values and this conflict, like sexual guilt, might lead to feeling dissatisfied.

This analysis suggests that 64% of the Ultra-Orthodox and 60% of the Non-Orthodox group found that sex lives up to their expectations. Although this is majority of each groups it suggests that there are around 40% of couples whose experience of sex falls below their expectations. For these cases it is not clear whether the discrepancy is due to unrealistic expectations or to problems with sexual function. For example, one participant was dissatisfied because his wife suffers from vaginismus and he has not been able to bring her to orgasm. Whereas a few women wrote that movies created unrealistic expectations for them “I expected sex to look like the movies..that I would get turned on and feel wanted and want my husband” and another wrote “movies have ruined that for me I think...”. This is an area that is important for therapists to assess if they are treating a couple for sexual dissatisfaction. If one of the partners has unrealistic expectations of sex, adjusting those expectations might be the optimal therapeutic path. If their expectations are

reasonable and rather it is the experience of sex that is causing the problem, this would require a different path of therapy. Future studies could explore the expectations of couples who are sexually dissatisfied and analyse whether these expectations are reasonable or achievable.

4.8.3 Discussing sex with others

Participants were asked whether they discussed this aspect of their relationship with anyone apart from their partner. The aim of this question was to discover how groups may differ in the way they access sexual knowledge, seek advice or learn about group norms and experiences.

As indicated by the literature review, this study found that the Ultra-Orthodox group talk about their sexual relationship with other people less than the other groups. Only 28% of Ultra-Orthodox participants indicated they discuss their sexual relationship with others whereas this rate went up to 44% for the Modern-Orthodox and 60% for the Non-Orthodox groups. This seems to imply that Ultra-Orthodox Jews have less opportunity to ask about sex or gain sexual knowledge from others. However, this may also mean that they are less likely to develop norm references and compare their sexual experiences to that of others.

For couples who are struggling with their sexuality this finding prompts the question whether Ultra-Orthodox Jews can access support or help when they need it. Researchers have identified how clients will often not disclose information or concerns relating to sex due to feelings of shame, embarrassment or fear of judgment by their therapist (Reissing & Di Guilio,

2010; Love & Farber, 2017). Findings from this study indicate that this is something that may be even more of a concern for clients from Ultra-Orthodox communities and require the therapist to raise the topic sensitively.

4.8.4 Sources of sexual information

The last of the optional questions asked the participant “Where did you learn about sex?”. The intention of this question was to isolate the primary place participants first learnt about sex. However, many of the responses included multiple sources of information that spanned over the life of the participant. This indicates that the question was not clear and should have asked “Where did you first learn about sex?”. Nonetheless the responses provide interesting insights into the way that people learn about sex and particularly that people seek to fill their sexual knowledge through different means over their life.

Across all the groups Family, Friends and Books were the most cited sources of sexual information. Many people identified that it was an older sibling rather than parents that informed them about sex, which echoes findings from previous studies and has been recommended as an appropriate and even in some cases preferred path for delivering sexual education (Rutledge, Siebert, Chonody & Killian, 2011; Walker, 2004).

The Ultra-Orthodox group had the lowest rate of school sex education (8%) which substantiates one of the rationales of this study that the Ultra-Orthodox community have very little access to accurate basic sexual education. This corroborates the findings from the analyses above that Ultra-Orthodox Jews have significantly lower sexual knowledge scores than other groups. In the

Ultra-Orthodox community, it is expected that members will learn about sex in their pre-marital classes however, only 32% of participants from this group mentioned that their premarital teacher was a source of sexual information. This result is similar to that of Friedman (2009) who found that only around 50% of Ultra and Modern-Orthodox women received sexual education from their bridal teacher and that instead, Friends, Written material and Media were the most cited sources of sexual education. There is recognition within the Orthodox community that greater written material about sexuality is required. In recent years a few books have been published that aim to provide basic education about sexual anatomy and functioning within a Jewish context. One of these books is 'Talking about Intimacy and Sexuality: A Guide for Orthodox Jewish Parents' (Debow, 2012) and another is 'The Newlywed's Guide to Physical Intimacy' (Rosenfeld and Ribner, 2011). It is unclear the extent to which these books are circulated around the Orthodox community and how the readership may differ between the Ultra-Orthodox and Modern-Orthodox groups. A future study could examine how sources of information and literature differ between these groups.

This finding suggests that majority of Ultra-Orthodox Jews are not receiving adequate sexual knowledge prior to engaging in a sexual relationship. Given the low sexual knowledge available to members of the Ultra-Orthodox community it is unsurprising that 20% of participants mentioned that they use the internet as a source of information and 24% mentioned that they learn about sex from the media. Both these sources of information may not present accurate information about sex or reflect religious ideals of their community. Given that Ultra-Orthodox participants in this study are likely to be more

moderate than their religious counterparts this suggests that mainstream Orthodox Jews are even more limited in access to sexual knowledge. For psychologists these findings are relevant in highlighting the role of sexual education as an integral component of treatment for clients from the Orthodox community who are experiencing sexual difficulties.

A quarter of the Modern-Orthodox group indicated that they received formal education about sex in school and only 20% mentioned their premarital teacher as a source of sexual information. These results suggest that Modern-Orthodox Jews are receiving more sexual education in school than the Ultra-Orthodox, however they are receiving less education from their premarital teachers than the Ultra-Orthodox group. The findings regarding this group similarly suggest that despite a broader perspective, Modern-Orthodox Jews are similarly not provided with sufficient opportunities to learn about sexual education.

Unexpectedly, only 27% of the Non-Orthodox group cited school as a source of sexual education. Although this is larger than the other groups, it is surprising that there is still such a low rate of formal school sex education given that they are less constrained by modesty values. Perhaps this low rate represents the shift in attitudes towards sex education over the last few decades as discussed above (Section 4.4)

4.9 Limitations and Future Studies

This study has presented analyses of differences, relationships and regression for the variables of religion, sexual knowledge, sexual satisfaction and sexual attitudes. It has provided insightful findings that provide greater understanding of how these variables interact, however there are some limitations to the methodology of this study which need to be considered when interpreting or generalising the findings. Some of these limitations have helped to identify areas for future research.

4.9.1 Setting

One of the strengths of this study is the large sample size, particularly regarding the Ultra-Orthodox and Modern-Orthodox communities, from which it is often difficult to recruit in general and in particular when it comes to discussing sexuality. The recruitment procedure for this study was designed to ensure a strong sense of confidentiality and anonymity for participants. As a result, an online survey was considered the most effective method. However, one of the limitations of this method is that the setting is uncontrolled, and participants complete the measure from a place of their choosing, such as from home, work, their phone or a variety of other places. Participants may have completed the questionnaire without disruption or over several sessions. The setting and manner of how participants completed the study may have impacted their responses compared to if they had completed it in a more controlled setting. The part of the survey which may have been particularly affected was the sexual knowledge questionnaire. It is possible

participants may have checked for answers on the internet whilst completing the questionnaire raising the score of the overall scale. The participants might have done this out of curiosity or embarrassment that they did not know the answers. Alternatively, because the setting may have felt more private, there is less concern of demand characteristic and their responses may be more of a true reflection of their level of sexual knowledge or sexual satisfaction with their partner. One way to address this might be to put a time limit on the survey or use a software that prevents participants to explore the internet whilst completing the survey.

4.9.2 Bias

4.9.2.1 Self-selection bias

With volunteering and opportunity sampling a self-selection bias is inevitable. Participants who are interested in the topic of religion or sexuality are more likely to participate in the study. This may result in a sample that is more strongly religious, more sexually knowledgeable or have stronger attitudes towards sexuality than the average population. This could be one of the reasons why there was a low ceiling effect across all the groups for the sexual knowledge questionnaire. Participants who responded to this study are also more likely to have read other information relating to sexuality circulated through social media. Additionally, the snowballing effect could have led to recruiting many like-minded participants than if other recruitment methods had been used. However, the researcher believes that the snowballing effect is what led to the large participant sample because participants trusted their

friends who forwarded the study on to them. To observe whether this bias impacted this study, future studies could recruit participants from independent settings. It is also important to consider, that despite the concern of self-sampling bias, the method used in this study allowed for a broader range of participants to be recruited than samples from previous research which often mainly used college population samples. Furthermore, when it comes to internet research, the comparisons between group scores is of primary interest and there is less of a concern that the groups scores are entirely representative of their population.

It is possible that demand characteristics may have impacted results as participants were aware of the purpose of the study and may have felt motivated to portray their religious affiliation in a positive light. Another effect of using an internet-based survey distributed via social media is the limited age of the sample. Although there was a large range of ages (19-86) only 6% of participants were over the age of 50 and 62% of the sample was under 30 years old. This means the findings are not necessarily generalisable to older adults and might be more representative of a younger population.

4.9.2.2 Response Bias

The generalisability of this study is further limited by response bias. Whereas 1028 people visited the study, only 785 agreed to participate. This suggests that around 25% of participants who saw this study decided not to participate. There could have been different reasons why they did not participate such as they were not interested enough in the study or perhaps did not feel

comfortable participating. Of this only 562 completed the entire survey which is around 54% of the original number of people who saw the survey. This indicates that the participant pool consisted of people who were both interested in sexuality and comfortable with discussing it and this is not the case for many members of the population. Their interest may have led them to research this topic more than their counterparts and thereby limit the extent to which they are representative of their groups.

4.9.4.3 Order Effects

There is a concern of order effects since some of the measures may have influenced the responses on other measures. In the current study, the religiosity measure was presented first, followed by the sexual knowledge scale, then the sexual attitudes scale and finally the sexual satisfaction scale. Future studies could control for potential order effect by randomising the order of the measures for each participant.

Of particular concern are the responses to the open-ended question. Many of themes regarding expectations of sex echo the themes from the New Sexual Satisfaction Scale. In this case it is unclear if these questions provide conceptual support for the scale or are simply the result of a recency and priming effect. It would be interesting to collect people's responses to these questions presented at the start of the study or in isolation.

4.9.3 Sampling issues

4.9.3.1 Group sizes

The design of the study aimed to recruit an even number of participants for each group. However, limited time was available to recruit participants due to the constraints of completing this study alongside training for a Professional Doctorate in Counselling Psychology. This resulted in unbalanced sample sizes where the biggest group was the Modern-Orthodox Jews ($n = 333$) which was nine times larger than the control sample ($n=37$), almost seven times larger than the Non-Orthodox group ($n=49$) and almost three times larger than the Ultra-Orthodox group ($n=96$). This could be a result of the researcher's own religious identity as a Modern-Orthodox Jew. The snowballing recruitment of participants was initiated from the researcher's social media groups, email lists, and community mail and so a larger representation of this group was expected. Although large differences in group sizes is problematic for many statistical tests this is not a concern for ANOVA and ANCOVA which are robust methods of analysis. To ensure the large sample size of the Modern-Orthodox group did not influence the overall mean of the group, the sample was reduced to 100 participants through random selection using SPSS. There was little fluctuation in mean and standard deviation across all the demographic and scale variables. Since little difference was found, the full group sample was used to ensure error rates were reduced and the tests had more power (Field, 2013). The groups were more balanced when categorised according to Religious Practice whereby, the Highly Religious group was largest ($n=266$) followed by the Religious group ($n=195$) and finally the Not Religious group ($n=54$). Although the Not

Religious group may seem small in comparison to the other groups, a sample size more than 30 is considered large (Field, 2013).

When comparing the religious categorisations, the Modern-Orthodox seems to have been comprised of two sub groups, those who are Highly Religious and those who are Religious. This may have impacted the results when using the Religious Culture categorisations and moderated the overall effects of this group. This suggests that using Modern-Orthodox as a group categorisation may not have been appropriate. Future studies might provide more distinct categories for this group such as *Dati Leumi (Religious Zionist)* and *Traditional* to distinguish between those who strongly practice Judaism but have a more modern perspective and integrate with secular society from those who believe in Orthodox Judaism but are not as strongly religiously committed to its belief and practice (Lazar, 2014).

4.9.3.2 Recruitment of Ultra-Orthodox

When designing this study, it was anticipated that it would be difficult to recruit members of the Ultra-Orthodox community. Due to the anonymity, confidentiality, endorsement of a Rabbi and identity of the researcher as a religious Jew, a substantial Ultra-Orthodox group was recruited (n=96) which exceeded the researcher's expectations. However, it is important to state that the researcher made attempts to circulate the questionnaire amongst strongly identified Ultra-Orthodox members and was met with resistance by some of the religious leaders because of the lack of modesty of the topic. This has led the researcher to conclude that those who identified as Ultra-Orthodox in this study are a minority representation of this population who are more moderate

in their views than their counterparts. They may be considered more liberal by their own community members for using the internet or responding to a survey on sexuality, therefore, the results based on this group may not be generalisable to the wider Ultra-Orthodox community. However, considering significant differences were found in Sexual Knowledge and Sexual Attitudes between the Ultra-Orthodox groups and the other groups the researcher believes that the differences in the population could be even more exaggerated. It is unclear to the researcher whether having a more conservative Ultra-Orthodox sample would result in the same findings. In order to explore this group further, future studies may be required to use alternative methods to recruit participants from the Ultra-Orthodox community, this may be by putting advertisements in places Ultra-Orthodox Jews are more likely to see it, such as the *Mikvah* (ritual bath) for women, enlist the endorsement of more Rabbinic leaders, try to access participants through premarital teachers and offer a paper version of the questionnaire with an envelope to post the questionnaire back to the researcher although even these methods may feel too risky for some.

4.9.4 Measurement issues

An important aim of this study was to conduct the research using robust validated measures. The exception to this was the sexual knowledge (BSKQ) measure which was created for this study as no suitable existing sexual knowledge measures were identified (see section 2.9.7). As previously discussed there was limited scope in this study to validate the measure and to

test for reliability. Additionally, a limitation already identified is that the cohort in this study is likely to have been more knowledgeable than other members of the group due to their interest and willingness to participate in the study and use of the internet. It is anticipated that if more conservative members of the Ultra-Orthodox community completed this measure there would have been a lower mean score for this group.

Another limiting factor of this study is that all the participants who categorised themselves as 'not religious' were automatically placed in the Not Religious category without completing the CRS measure. Initially the researcher thought participants might be frustrated or irritated if they were presented with a questionnaire about religious beliefs and practice after they indicated they were not religious. However, in retrospect it may have been preferable to present them with the CRS so they would have had a CRS score and not just a category which could have been used in the correlation and regression analyses. There was a concern that some of these participants may have been spiritual even if not religious and this would have conflicted with the results. However, since the CRS was developed and used to measure elements of organised religions such as attendance of prayer services and thoughts related to God it was decided that this was not a concern. Future studies might want to explore whether there is a difference between religiosity and spirituality and how it impacts sexual satisfaction.

4.10 Strengths and Implications

Despite the above-mentioned limitations this study has many strengths and contributes significantly to both the field of religion and sexuality research as well as the field of Counselling Psychology.

Firstly, this study has addressed previous shortcomings by using robust measures for religion and sexuality that assess multiple dimensions within each of these variables. Furthermore, this study focused on a participant pool that had not been previously explored to gain a broader theoretical understanding of how different religions impact sexual satisfaction. This study has also identified the value of considering the development of the variable Basic Sexual Knowledge in the study of sexual satisfaction. Furthermore, in line with methodological pluralism, this study obtained qualitative research to enhance understanding of the findings of quantitative research. Finally, this study has responded to recent calls for the field of Counselling Psychology to become more proficient in the research, understanding and training of sexuality related issues (Burnes et al., 2017). The theoretical and clinical implications of this research are discussed in turn below.

4.10.1 Theoretical Implications

The findings of this study support the claim that religion has multiple dimensions and that these dimensions need to be explored separately when investigating the impact of religion on sexuality (Hernandez et al., 2014).

Religions have different beliefs about sexuality and this study has suggested that these differing beliefs interact with sexual satisfaction in different ways. As a result, findings related to one religion cannot be generalised to all religions and therefore each religion, and even each religious subgroup needs to be explored separately. As far as the author is aware this is the first study to focus primarily on the effect of religious level on sexual satisfaction within Orthodox Judaism. This study has found a positive association between Religious Practice in Orthodox Jews and sexual satisfaction. Furthermore, much of the research in this field has been based on unmarried college or teenage samples. Findings based on these population samples cannot be extrapolated to people at different stages in life or long-term sexual relationships. Therefore, this study has expanded the field by investigating the sexual satisfaction of people in married or committed relationship.

The overall findings of this study have led the researcher to conclude that religion has an influence on people's attitudes on sexuality and it is these attitudes that influence sexual satisfaction. The finding that Communion was the strongest predictor of sexual satisfaction amongst Orthodox Jews, suggests that the values and perspectives about the role of sex in marriage that Judaism promotes enhances sexual satisfaction. This once again reflects the need to understand the effect of each religion on sexuality separately. Hackathorn, Ashdown and Rife (2013) found that the sexual guilt stemming from religious beliefs was an important mediator between religion and sexual satisfaction particularly in unmarried sexually active participants. This may have explained previous results that found religion has a negative impact on sexual satisfaction. This study, on the other hand has identified that the sexual

attitude of Communion, which also stems from religious beliefs, has a positive impact on sexual satisfaction and might possibly mediate a relationship between religion and sexual satisfaction amongst Orthodox Jews.

Katz-Wise and Hyde (2014) discuss how the field of sexuality has, until recently, been dominated by the medical model. They identify how the influential work of Masters and Johnson (1966, 1970) placed the focus of sexuality primarily on the physiology of the sexual response. They continue to describe how this focus was reemphasised by the American Psychological Association's fourth version of the *Diagnostic and Statistical Manual of Mental Disorders* (APA, 2000) when it created diagnostic categories for sexuality-related problems. The medical model that has pervaded psychological understanding and treatment of sexuality focused on the genital functioning, physiological response, the individual and separation between the mind and body. Understanding that this has been the dominant conceptualisation of sexuality until recently can explain why Menard and Kleinplatz (2008) found that majority of tips provided in magazines were focused on technical, mechanical and physical factors. A clear problem of this medical model of sexuality is that it does not consider the influential role of the relationship context nor other influencing factors such as culture and religiosity (Tiefer, 2001). Traditionally, counselling psychologists prefer to distance themselves from a medical model and try to understand their client's distress and issues in a holistic manner (Woolfe, Strawbridge, Douglas & Dryden, 2010). This research promotes counselling psychology principles of highlighting the significant impact of social and cultural influences on sexual satisfaction.

To the best of the author's knowledge this is the first study to explore the direct role of basic sexual knowledge on sexual satisfaction. Despite the limitations discussed above, this study provides evidence of an impact of sexual knowledge on sexual satisfaction. Research is required to develop greater understanding of this variable, its impact on the different parts of the population and the extent to which it is an effective intervention in sex therapy.

4.10.2 Clinical Implications

The above literature review outlined the multiple ways that sexual satisfaction is intertwined with a person's psychological, relational and emotional wellbeing. Many of these relationships are bi-directional which means that sexual problems can be both, a cause and by-product of emotional or relational distress. For example, sexual dysfunction or dissatisfaction could lead to the development of frustration, feeling undesired by one's partner, lack of desire for one's partner, or low self-esteem (Payne, 2010). In his book of "Couple Counselling: A Practical Guide", Martin Payne (2010) writes that although there are certain client cases for which a therapist with sex therapy training is best suited, for many of the commonly experienced problems a therapist without sex therapy training can help considerably. He identifies that general therapeutic skills such as normalising the problem, providing practical ways to deal with it and building on the positive features of a couple's relationship can be all that is required. One of the intentions of this study was to provide all types of therapists with greater understanding of

sexual satisfaction that they can use when working with their clients distressed by their sexual experiences. This is particularly relevant to the practice of counselling psychologists who receive surprisingly little training in sexuality-related issues (Burnes et al, 201&). The findings from this study have several clinical implications that relate to; an enhanced cultural understanding of the sexual experiences of Orthodox Jews, the significance of sexual attitudes on sexual satisfaction, identifying the need for clinicians to assess level of sexual knowledge in Orthodox Jewish clients and finally the role that sexual psychoeducation may play as an intervention for sexual dissatisfaction and distress in this population. These will each be discussed below.

Few studies have explored sexuality-related issues amongst the non-clinical Orthodox Jewish population. This may be due to their minority presence as part of the general population. Jews account for 0.5% of the population in the UK and only 16% of those identify as Orthodox (The Boards of Deputies of British Jews, n.d.). Another reason for the lack of research on this cultural group may be due to the difficulty in recruiting members of this population as sex is often considered a taboo subject. This fact was reflected by the responses of most Orthodox Jews in this study who indicated that they did not discuss their sexual relationships with anyone. This study has provided greater understanding of the attitudes, expectations and experiences of the sexual lives of Orthodox Jews. Understanding the client's issues through their own perspectives and experiences is a core principle of counselling psychology (BPS Standards and Accreditation for Doctoral programmes in Counselling Psychology, October, 2015). Both the qualitative and

quantitative data of this study highlighted that Ultra and Modern-Orthodox Jews receive less sexual education than the general population. On a practical level, it is therefore recommended that therapists consider their use of terminology when discussing sexuality with this demographic and not assume that their clients are able to recognise words such as ‘orgasm’ or ‘clitoris’. Research has demonstrated that clients from the general population often feel reluctant to discuss their sex lives in therapy, this may apply even more strongly to the Orthodox Jewish population who do not discuss sex openly even within their close social network (Mercer, 2015). Therefore, a greater responsibility lies on the therapist to initiate the conversation in a way that makes the client feel comfortable and communicates that the therapist is aware and sensitive to the client’s cultural beliefs (Cruz et al., 2017).

This research also provides the clinician with greater understanding of the wider context and variables that influence sexual satisfaction. To develop a formulation about how a sexual problem may have developed the therapists will need to consider the multiple influences on the client’s sexuality. Some questions that would be helpful for the therapist to explore are; What are the client’s beliefs about sexuality? Do these fit in with the values of their religion? How do these fit in with their family’s values? Do these beliefs portray sex in a positive or negative way? Once the therapist gains a clear formulation about the influencing factors on the client’s sexual experiences the therapist can then address adaptive and maladaptive perceptions and explore with the client how these may be contributing to the problem.

More specifically, this study points to the influence of people’s attitudes and expectations on sexual satisfaction. Accordingly, one of the practical

implications from this study is that attitudes and expectations should be explored as part of any sexual assessment with the client. Not only would this help make the client feel understood by the therapist but may even help identify the cause of the sexual dissatisfaction. For example, higher permissiveness and instrumentality attitudes were associated with lower sexual satisfaction. This suggests that the extent to which someone engages in casual sex or is focused on their own pleasure in a sexual relationship could be one of the causes of their sexual dissatisfaction. If this was the case the therapist could explore with the client whether their perceptions or behaviours were linked to their sexual satisfaction. Moreover, the finding that communion attitudes was positively related to sexual satisfaction suggests that clinicians engage with their client's religious beliefs and sense of meaning to enhance their experience of sexual satisfaction and possibly other areas of their lives as well. The findings from this study highlight that sexual satisfaction is not solely based on physical satisfaction but rather is also influenced by emotional, cognitive, psychological and relational factors. Therefore, any treatment plan for sexual dissatisfaction would need to focus on all these elements.

Finally, this study suggests that sexual education might be a useful intervention for Orthodox Jewish couples who are sexually dissatisfied, particularly as they will have less opportunities to discuss this in their existing social circles. This has already been suggested by researchers who were presented with the case of an Ultra-Orthodox couple who struggled to consummate their marriage (Rosenbaum, Paauw, Aloni & Heruti, 2013). Sexual education could be used as a practical tool to help identify the

problem, open channels of communication between the couple and facilitate understanding of how the problem developed. Sexual education can provide clients with greater physiological understanding of sexuality and the factors that influence it. If a couple who recently had a baby, understand that fatigue and hormones can impact sexual desire then they can isolate the problem to remain within physiological parameters and prevent the extent to which it intrudes on to other areas of the relationship and escalate into larger problems. Additionally, it empowers the couple by providing them with tools to understand themselves and places them in a position to make realistic changes to their lifestyle that can enhance the opportunities for sex. For example, for new parents this might be identifying which days they want to have sex and ensure that each of the partners has a nap on that day.

To summarise, there are several theoretical and clinical implications that can be drawn from the findings of this study. These span from enhancing understanding of the subject matter and providing support for multifaceted religion and sexuality research to the initial development of a sexual knowledge measure as well as highlighting the role of the counselling psychologists in facilitating better sexual education and finally suggesting recommendations for assessment and formulation of Orthodox Jewish client suffering from sexual difficulties.

4.11 Conclusions

This study has provided greater insight into the effects of religion, sexual knowledge and sexual attitudes on sexual satisfaction. This study is the first to explore the role of sexual knowledge on sexual satisfaction and provides substantiated insight into the impact of religious belief and practice on sexual satisfaction amongst Orthodox Jews. The findings from this study suggest that, amongst Jews, those who are more religious experience greater sexual satisfaction than those who are not. This is only the case when religion is measured according to intrinsic belief and practice rather than association with a religious cultural group. Further findings from this study suggest that sexual knowledge is positively associated with sexual satisfaction. Another significant finding is that permissiveness and instrumentality attitudes towards sex are associated with lower sexual satisfaction and communion attitudes lead to greater levels of sexual satisfaction. These findings provide a meaningful presentation of the sexual experiences of Orthodox Jews which counselling psychologists can consider when working with clients from this population group. Future research is needed to understand how these variables interact across other specific subgroups. Future research is also needed to further develop the Brief Sexual Knowledge Questionnaire and determine the relevance of this variable as a component of sexual satisfaction in the wider population.

APPENDICES

APPENDIX A: New Sexual Satisfaction Scale

Exhibit

The New Sexual Satisfaction Scale (NSSS)

	Subscale A (Ego-Focused)	Subscale B (Partner and Activity-Focused)	Short Version (NSSS-S)
<i>Thinking about your sex life during the last six months, please rate your satisfaction with the following aspects.^a</i>			
1. The intensity of my sexual arousal	X		
2. The quality of my orgasms	X		X
3. My "letting go" and surrender to sexual pleasure during sex	X		X
4. My focus/concentration during sexual activity	X		
5. The way I sexually react to my partner	X		X
6. My body's sexual functioning	X		X
7. My emotional opening up in sex	X		
8. My mood after sexual activity	X		X
9. The frequency of my orgasms	X		
10. The pleasure I provide to my partner	X		X
11. The balance between what I give and receive in sex		X	X
12. My partner's emotional opening up during sex		X	X
13. My partner's initiation of sexual activity		X	
14. My partner's ability to orgasm		X	X
15. My partner's surrender to sexual pleasure ("letting go")		X	
16. The way my partner takes care of my sexual needs		X	
17. My partner's sexual creativity		X	X
18. My partner's sexual availability		X	
19. The variety of my sexual activities		X	X
20. The frequency of my sexual activity		X	X

^aResponses are anchored on the following scale: 1 = Not at all Satisfied, 2 = A Little Satisfied, 3 = Moderately Satisfied, 4 = Very Satisfied, 5 = Extremely Satisfied.

APPENDIX B: Centrality of Religiosity Scale

Table 1. Items and versions of the Centrality of Religiosity Scale (CRS)—English versions.

Dimension	Items for both the basic and interreligious versions	Basic CRS versions			Additional Items for the interreligious versions only	Interreligious CRSi versions		
		CRS-5	CRS-10	CRS-15		CRSi-7	CRSi-14	CRSi-20
Intellect	01: How often do you think about religious issues?							
Ideology	02: To what extent do you believe that God or something divine exists?							
Public practice	03: How often do you take part in religious services?							
Private practice	04: How often do you pray?				04b: How often do you meditate?			
Experience	05: How often do you experience situations in which you have the feeling that God or something divine intervenes in your life?				05b: How often do you experience situations in which you have the feeling that you are in one with all?			
Intellect	06: How interested are you in learning more about religious topics?							
Ideology	07: To what extent do you believe in an afterlife—e.g. immortality of the soul, resurrection of the dead or reincarnation?							
Public practice	08: How important is to take part in religious services?							
Private practice	09: How important is personal prayer for you?				09b: How important is meditation for you?			
Experience	10: How often do you experience situations in which you have the feeling that God or something divine wants to communicate or to reveal something to you?				10b: How often do you experience situations in which you have the feeling that you are touched by a divine power?			
Intellect	11: How often do you keep yourself informed about religious questions through radio, television, internet, newspapers, or books?							
Ideology	12: In your opinion, how probable is it that a higher power really exists?							
Public practice	13: How important is it for you to be connected to a religious community?							
Private practice	14: How often do you pray spontaneously when inspired by daily situations?				14b: How often do you try to connect to the divine spontaneously when inspired by daily situations?			
Experience	15: How often do you experience situations in which you have the feeling that God or something divine is present?							

APPENDIX C: Brief Sexual Attitude Scale

BRIEF SEXUAL ATTITUDES SCALE

Listed below are several statements that reflect different attitudes about sex. For each statement fill in the response on the answer sheet that indicates how much you agree or disagree with that statement. Some of the items refer to a specific sexual relationship, while others refer to general attitudes and beliefs about sex. Whenever possible, answer the questions with your current partner in mind. If you are not currently dating anyone, answer the questions with your most recent partner in mind. If you have never had a sexual relationship, answer in terms of what you think your responses would most likely be.

For each statement:

A = Strongly agree with statement

B = Moderately agree with the statement

C = Neutral - neither agree nor disagree

D = Moderately disagree with the statement

E = Strongly disagree with the statement

1. I do not need to be committed to a person to have sex with him/her.
2. Casual sex is acceptable.
3. I would like to have sex with many partners.
4. One-night stands are sometimes very enjoyable.
5. It is okay to have ongoing sexual relationships with more than one person at a time.
6. Sex as a simple exchange of favors is okay if both people agree to it.
7. The best sex is with no strings attached.
8. Life would have fewer problems if people could have sex more freely.
9. It is possible to enjoy sex with a person and not like that person very much.
10. It is okay for sex to be just good physical release.
11. Birth control is part of responsible sexuality.

12. A woman should share responsibility for birth control.
 13. A man should share responsibility for birth control.
 14. Sex is the closest form of communication between two people.
 15. A sexual encounter between two people deeply in love is the ultimate human interaction.
 16. At its best, sex seems to be the merging of two souls.
 17. Sex is a very important part of life.
 18. Sex is usually an intensive, almost overwhelming experience.
 19. Sex is best when you let yourself go and focus on your own pleasure.
 20. Sex is primarily the taking of pleasure from another person.
 21. The main purpose of sex is to enjoy oneself.
 22. Sex is primarily physical.
 23. Sex is primarily a bodily function, like eating.
-
-

Note. The BSAS includes the instructions shown at the top. The items are given in the

order shown. The BSAS is usually part of a battery with items numbered consecutively. For purposes of analyses, we have A=1 and E=5. (The scoring may be reversed, so that A = strongly disagree, etc.) A participant receives four subscale scores, based on the mean score for a particular subscale (i.e., we add up the 10 items on Permissiveness and divide by 10). An overall scale score is really not useful.

Items	Scoring Key
1-10	Permissiveness
11-13	Birth Control
14-18	Communion
19-23	Instrumentality

APPENDIX D: Basic Sexual Knowledge Questionnaire

This questionnaire is measuring your level of sexual knowledge. Please answer the questions below to the best of your knowledge using TRUE, FALSE or DO NOT KNOW.

1. Usually the penis must be erect before ejaculation may occur
2. Simultaneous orgasm is necessary for a good sexual relationship
3. A woman who has had her womb removed can no longer experience orgasm
4. Lubrication in the female shows sexual excitement like the erection in the male
5. A woman may be brought to orgasm by manual stimulation of her genitals
6. Normally after intercourse there is a period when a man does not easily respond to sexual stimulation
7. Most women are able to enjoy sex even without experiencing an orgasm
8. Erection in a male is brought about by increased blood flow to the penis
9. The clitoris is not a particularly sensitive part of the female's genitals
10. The penis's head is its most sensitive part
11. It is very painful for a man not to have an orgasm once he is sexually aroused and erect
12. Some women can have several orgasms in quick succession
13. A breastfeeding woman cannot conceive
14. If a couple cannot conceive it must be because the woman has fertility issues
15. If a man fails to get an erection or loses it, he doesn't really want his partner
16. In a woman an orgasm is a series of contractions of the muscles surrounding the vagina
17. In a man sperm and urine are exit from the same place?
18. In a woman urine is passed from the vagina?
19. Fatigue cannot affect a women's vaginal lubrication
20. Taking hormonal supplements e.g. (the pill) can affect a woman's sexual arousal?
21. When having sex the man can only be on top
22. If sex is painful there is nothing that can be done to help

APPENDIX E: Other Measures included in study

Brief Orthodox Jewish Religiosity Scale

This questionnaire has about 11 questions about your religious beliefs and practices. Please try to answer all the questions as best and honestly as possible. Circle the number that best describes your answer. The numbers can reflect either strength of agreement- from strongly disagree to strongly agree.

1 = Strongly Disagree

2 = Disagree

3 = Slightly Disagree

4 = Neither Agree or Disagree

5 = Slightly Agree

6 = Agree

7 = Strongly Agree

1. My religion influences everything I do.
2. I believe that the Torah was given to Moshe by God at Sinai.
3. I try to observe halacha [religious law] as carefully as possible.
4. I believe God directs and controls the world.
5. My religious observance is primarily out of social expectation. [reversed scored]
6. I believe God loves all His creations.
7. I feel that God is always accessible to me.
8. I feel God listens to my prayers.
9. I feel Divine intervention (hashgacha) within my life.
10. I believe in God.
11. I say Brochos [blessings] with Kavaana [devotion].

Source: Pirutinsky, S. (2009). The terror management function of Orthodox Jewish religiosity: A religious culture approach. *Mental Health, Religion and Culture*, 12, 247 - 256.

Note: This is a self-report instrument. No special skills are required to administer this measure; however interpretation should only be carried out by individuals with appropriate training in psychological assessment. Provided that the scales are not modified or sold for profit, and complete and accurate references to relevant published works are provided in all print copies and cited in academic work, no permission is required to use or distribute these instruments when used for research or healthcare purposes. Steven Pirutinsky,

████████████████████.

Brief Orthodox Jewish Religiosity Scale (BOJM)

This is a self-report measure created by Pirutinsky (2009) to measure religiosity specifically amongst Orthodox Jews. It has been used to categorise participants into 3 groups; Ultra-Orthodox, Orthodox and Non-Orthodox. The scale contains 11 statements which participants are asked to indicate the extent to which they agree or disagree with the statement. The responses are rated on a 7-point Likert scale ranging from “Strongly Agree” to “Strongly Disagree”. The measure has high internal consistency of $\alpha=0.92$ and differentiates between levels of religious orientation when compared to self-report measures. The questionnaire was developed based on religious texts, rituals and previously used measures. An example of a question is “I believe God directs and controls the world”. The questionnaire has strong face validity, internal consistency and is able to discriminate between groups. Although this measure has been used in a previous study (Pirutinsky, 2009) it’s full psychometric properties have not been established. The author has not reported what the cut-offs are between the groups thereby limiting the extent to which its results can be interpreted. Despite this, it will be used in this study to provide extra information of people’s religious level as, to the author’s best knowledge, no other religiosity measure relating specifically to Orthodox Jews has been established.

Revised Dyadic Adjustment Scale

REVISED DYADIC ADJUSTMENT SCALE

Most persons have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your partner for each item on the following list.

	Always Agree	Almost Always Agree	Occasionally Agree	Frequently Disagree	Almost Always Disagree	Always Disagree
1. Religious matters	5	4	3	2	1	0
2. Demonstrations of affection	5	4	3	2	1	0
3. Making major decisions	5	4	3	2	1	0
4. Sex relations	5	4	3	2	1	0
5. Conventionality (correct or proper behavior)	5	4	3	2	1	0
6. Career decisions	5	4	3	2	1	0

	All the Time	Most of the time	More often than not	Occasionally	Rarely	Never
7. How often do you discuss or have you considered divorce, separation, or terminating your relationship?	0	1	2	3	4	5
8. How often do you and your partner quarrel?	0	1	2	3	4	5
9. Do you ever regret that you married (or lived together)?	0	1	2	3	4	5
10. How often do you and your mate "get on each other's nerves"?	0	1	2	3	4	5

	Everyday	Almost Everyday	Occasionally	Rarely	Never
11. Do you and your mate engage in outside interests together?	4	3	2	1	0

How often would you say the following events occur between you and your mate?

	Never	Less than once a month	Once or twice a month	Once or twice a week	Once a day	More often
12. Have a stimulating exchange of ideas	0	1	2	3	4	5
13. Work together on a project	0	1	2	3	4	5
14. Calmly discuss something	0	1	2	3	4	5

Revised Dyadic Adjustment Scale
Scoring Key

Most persons have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your partner for each item on the following list.

	<u>Always Agree</u>	<u>Almost Always Agree</u>	<u>Occasionally Agree</u>	<u>Frequently Disagree</u>	<u>Almost Always Disagree</u>	<u>Always Disagree</u>
1. Religious matters	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
2. Demonstrations of affection	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
3. Making major decisions	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
4. Sex relations	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
5. Conventionality (correct or proper behavior)	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
6. Career decisions	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>
	<u>All the time</u>	<u>Most of the time</u>	<u>More often than not</u>	<u>Occasionally</u>	<u>Rarely</u>	<u>Never</u>
7. How often do you discuss or have you considered divorce, separation, or terminating your relationship?	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
8. How often do you and your partner quarrel?	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
9. Do you ever regret that you married (or lived together)?	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
10. How often do you and your mate "get on each other's nerves"?	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
	<u>Every Day</u>	<u>Almost Every Day</u>	<u>Occasionally</u>	<u>Rarely</u>	<u>Never</u>	
11. Do you and your mate engage in outside interests together?	<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>	<u>0</u>	
How often would you say the following events occur between you and your mate?						
	<u>Never</u>	<u>Less than once a month</u>	<u>Once or twice a month</u>	<u>Once or twice a week</u>	<u>Once a day</u>	<u>More often</u>
12. Have a stimulating exchange of ideas	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
13. Work together on a project	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
14. Calmly discuss something	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>

From: Busby, D.M., Crane, D.R., Larson, J.H., & Christensen, C. (1995). A revision of the Dyadic Adjustment Scale for use with distressed and nondistressed couples: Construction hierarchy and multidimensional scales. *Journal of Marital and Family Therapy*, 21, 289-308.

REVISED DYADIC ADJUSTMENT SCALE

Description:

The Revised Dyadic Adjustment Scale (RDAS) is a self report questionnaire that assesses seven dimensions of couple relationships within three overarching categories including *Consensus* in *decision making, values* and *affection, Satisfaction* in the relationship with respect to *stability and conflict* regulation, and *Cohesion* as seen through *activities and discussion*. “[With] time constraints on therapists in clinical practice . . . the RDAS . . . allow[s] for a reliable and economical measurement of marital and relationship quality” (Crane, Middleton, & Bean, 2000, p. 54). The RDAS includes only 14 items, each of which asks the respondents to rate certain aspects of her/his relationship on a 5 or 6 point scale. Scores on the RDAS range from 0 to 69 with higher scores indicating greater relationship satisfaction and lower scores indicating greater relationship distress. The cut-off score for the RDAS is 48 such that scores of 48 and above indicate non-distress and scores of 47 and below indicate marital/relationship distress.

Reliability:

The RDAS has been found to have a Cronbach’s alpha (reliability) of .90.

Validity:

Construct validity for the RDAS is supported by its high correlation with a similar measure, the Locke-Wallace Marital Adjustment Test (MAT). The correlation between the RDAS and the MAT was .68 ($p < .01$). In addition, the correlation between the RDAS and the original Dyadic Adjustment Scale (DAS) was .97 ($p < .01$).

In terms of discriminant validity, the RDAS has been found to successfully differentiate between 81% of distressed and non-distressed cases.

Evaluation:

The RDAS is a straightforward assessment that can be completed easily and in a short amount of time. It can successfully differentiate between distressed and non-distressed relationships and it gives specific measures of three relationship constructs and seven related relationship areas. As such, the RDAS gives a quick snapshot of multiple dynamics within a given relationship as well as an overall assessment of the stability of the relationship.

Scoring for the RDAS is a simple process of calculating a sum of the scores for the 14 items.

This gives an overall score which can be interpreted using the above noted cut-off score. The subscale scores can be interpreted using the table below:

	Scores Range from:	
Consensus	0 to 30	Higher scores on any of these subscales indicate greater stability and satisfaction in the relationship. Lower scores indicate greater distress.
Decision Making: Items 3 and 6.	0 to 10	
Values: Items 1 and 5	0 to 10	
Affection: Items 2 and 4	0 to 10	
Satisfaction	0 to 20	
Stability: Items 7 and 9	0 to 10	
Conflict: Items 8 and 10	0 to 10	
Cohesion	0 to 19	
Activities: Items 11 and 13	0 to 9	
Discussion: Items 12 and 14	0 to 10	

References:

- Busby, D. M., Christensen, C., Crane, D. R., & Larson, J. H. (1995). A revision of the dyadic adjustment scale for use with distressed and nondistressed couples: Construct hierarchy and multidimensional scales. *Journal of Marital and Family Therapy, 21*(3), 289-308.
- Crane, D. R., Middleton, K. C., & Bean, R. A. (2000). Establishing criterion scores for the Kansas Marital Satisfaction Scale and the Revised Dyadic Adjustment Scale. *American Journal of Family Therapy, 28*(1), 53-60.

APPENDIX F: Alternative measures considered

Derogatis Sexual Functioning Inventory – Information Subset which the BSKQ was developed from.

INSTRUCTIONS

Below you will be asked to report certain attitudes and opinions, and provide information about some of your sexual experiences. These questions are focused on your thoughts and feelings. Your answers and responses will be kept in the utmost confidence, and only those members of the staff directly involved with your treatment will have access to this information. It will not be made available to anyone else unless you request it. The inventory is divided into 10 sections, and in each section you are asked something slightly different. In some you are asked to answer questions, while in others you are asked to describe yourself. We also ask about problems you may be having and about some of your sexual thoughts, fantasies, and experiences.

Each section has a brief instruction which will tell you what you are to do in that section. Please work quickly, and do not skip any items. If you have any questions, please ask the technician to help you.

SECTION I

Below are some statements concerning general information about sexual functioning. Please read each statement carefully. Once you have read it, indicate whether you agree with the statement or not by marking TRUE for those you agree with, and FALSE for those you do not.

	TRUE	FALSE
1. Usually men achieve orgasm more quickly than women	<input type="radio"/>	<input type="radio"/>
2. Having intercourse during menstruation is not a healthy practice	<input type="radio"/>	<input type="radio"/>
3. The penis must be erect before ejaculation may occur	<input type="radio"/>	<input type="radio"/>
4. Simultaneous orgasm is not necessary for a good sexual relationship	<input type="radio"/>	<input type="radio"/>
5. Masturbation by either partner is an indicator of poor marital adjustment	<input type="radio"/>	<input type="radio"/>
6. A women who has had a hysterectomy can no longer experience orgasm	<input type="radio"/>	<input type="radio"/>
7. Men reach the peak of their sexual drive in their late teens while women reach their peak during their 30's	<input type="radio"/>	<input type="radio"/>
8. A women can become pregnant during menstruation	<input type="radio"/>	<input type="radio"/>
9. Most men and women lose interest in sex after age 60	<input type="radio"/>	<input type="radio"/>
10. A male's orgasm is more satisfying than a female orgasm	<input type="radio"/>	<input type="radio"/>
11. The prophylactic (rubber) protects against conception and against venereal disease	<input type="radio"/>	<input type="radio"/>
12. Lubrication in the female shows sexual excitement like the male's erection	<input type="radio"/>	<input type="radio"/>
13. Oral-genital sex is unhealthy because it enhances the possibility of contracting venereal disease	<input type="radio"/>	<input type="radio"/>
14. Women who have fantasies during intercourse are dissatisfied with their sex lives	<input type="radio"/>	<input type="radio"/>
15. Frequency of intercourse is an accurate measure of success of a relationship	<input type="radio"/>	<input type="radio"/>
16. A women may be brought to orgasm by manual stimulation of her genitals	<input type="radio"/>	<input type="radio"/>
17. Menopause in a woman creates a sharp reduction in her sexual drive	<input type="radio"/>	<input type="radio"/>
18. Women desire sex about as frequently as men	<input type="radio"/>	<input type="radio"/>
19. An effective form of contraception is douching after intercourse	<input type="radio"/>	<input type="radio"/>
20. After intercourse there is a period when a man cannot respond to sexual stimulation	<input type="radio"/>	<input type="radio"/>
21. Females can maintain a sexual response through multiple orgasms	<input type="radio"/>	<input type="radio"/>
22. Most women are able to enjoy sex even without experiencing orgasm	<input type="radio"/>	<input type="radio"/>
23. The bigger the penis the more satisfying it is to the female in intercourse	<input type="radio"/>	<input type="radio"/>
24. A woman can no longer become pregnant once menopause has begun	<input type="radio"/>	<input type="radio"/>
25. Erection in the male is brought about by congestion of blood in the penis	<input type="radio"/>	<input type="radio"/>
26. The clitoris is not a particularly sensitive area of the female's genitals	<input type="radio"/>	<input type="radio"/>

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APPENDIX G: Ethics Approval Letter



Psychology Research Ethics Committee
School of Social Sciences
City University London
London EC1R 0JD

13 March 2015

Dear Hadassah Fromson,

Reference: PSYCH(P/F) 14/15 129

Project title: Do religion and sexual knowledge impact sexual satisfaction?

I am writing to confirm that the research proposal detailed above has been granted approval by the City University London Psychology Department Research Ethics Committee.

Approval is conditional upon the following amendments:

- Please ensure that participants who complete both the online and pen and paper versions of the sexual knowledge questionnaire are given the correct answers to the questions in addition to their score.

Period of approval

Approval is valid for a period of three years from the date of this letter. If data collection runs beyond this period you will need to apply for an extension using the Amendments Form.

Project amendments

You will also need to submit an Amendments Form if you want to make any of the following changes to your research:

- (a) Recruit a new category of participants
- (b) Change, or add to, the research method employed
- (c) Collect additional types of data
- (d) Change the researchers involved in the project

Adverse events

You will need to submit an Adverse Events Form, copied to the Secretary of the Senate Research Ethics Committee ([REDACTED]), in the event of any of the following:

- (a) Adverse events
- (b) Breaches of confidentiality
- (c) Safeguarding issues relating to children and vulnerable adults
- (d) Incidents that affect the personal safety of a participant or researcher

Issues (a) and (b) should be reported as soon as possible and no later than 5 days after the event. Issues (c) and (d) should be reported immediately. Where appropriate the researcher should also report adverse events to other relevant institutions such as the police or social services.

Should you have any further queries then please do not hesitate to get in touch.

Kind regards

Erika Suchanova

Departmental Administrator

Email: [REDACTED]
[REDACTED]

Katy Tapper

Chair

Email:

APPENDIX H: Recruitment Advert



**Department of Psychology
City University London**

PARTICIPANTS NEEDED FOR RESEARCH IN *RELIGIOSITY AND INTIMACY*

We are looking for Jewish volunteers of all religious levels to take part in a study on *the impact of religiosity and education on intimacy*.

Rabbi Dr Harvey Belovski, senior rabbi of Golders Green Synagogue, and an experienced teacher and adviser to engaged and married couples, has provided rabbinical guidance in the development of this study. He believes that this research is of great importance and will prove invaluable to rabbis, rebbetzins, counsellors, teachers of brides and grooms and educators

You will be asked to complete an anonymous questionnaire

Your participation would only be required once and it should take approximately 30 minutes to complete.

At the end of the study you can choose to get feedback on some of your scores.

For more information about this study, or to take part, please contact:

Hadassah Fromson (researcher): [REDACTED]

Dr Don Rawson (supervisor): [REDACTED]

This study has been reviewed by, and received ethics clearance through the Psychology Research Ethics Committee, City University London PSYCH(P/F) 14/15 129.

If you would like to complain about any aspect of the study, please contact the Secretary to the University's Senate Research Ethics Committee on 020 7040 3040 or via email: [REDACTED]

APPENDIX I: Information Sheet



Title of study: Do religion and sexual knowledge impact sexual satisfaction?

We would like to invite you to take part in a research study. Before you decide whether you would like to take part it is important that you understand why the research is being done and what it would involve for you. Please take time to read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or if you would like more information.

What is the purpose of the study?

This completely anonymous and Rabbinically approved study is being conducted as part of a Doctorate in Counselling Psychology through City University London. The creation of *shalom bayis* (marital harmony), is one of the most important *mitzvos* (biblical commandments) and we need to do everything within our power as a community to ensure that our educators and leaders are well informed about the matter. One area where more work is needed is in education surrounding physical intimacy. As a Rebbetzin who regularly teaches brides in preparation for marriage I believe that it is important to understand how Orthodox Jews experience intimacy, what level of knowledge they have about such matters and how we can best ensure that brides and grooms are adequately prepared for married life. As a Trainee Psychologist I think it is important for psychologists to have an understanding of how intimacy in the Orthodox Jewish community is experienced. This is important because if a couple needs professional guidance, it is of the utmost importance that their psychologist is informed about and sensitive to the couples' religious needs. The information from this study will be completely anonymous and stored in a secure online database - there is no way for the researcher to trace any information back to you. At no point will you be asked to give identifying information such as your name, telephone number, address or email. The study will run for about six months.

Rabbi Dr Harvey Belovski, senior rabbi of Golders Green Synagogue, and an experienced teacher and adviser to engaged and married couples, has provided rabbinical guidance in the development of this study. He believes that this research is of great importance and will prove invaluable to rabbis, rebbetzins, counsellors, teachers of brides and grooms and educators.

Why have I been invited?

This study will be looking at the experience of all Orthodox Jews (Chasidish, Chareidi and Modern-Orthodox). It is important to get as many people as possible to complete this questionnaire in the time the study is running in order to ensure that all different perspectives are represented.

The only criteria for this study is that you are Jewish, married and over 18 years old.

Do I have to take part?

Participation in the project is entirely voluntary, and you can choose not to participate in part or all of the project.

It is up to you to decide whether or not to take part. If you do decide to take part you will be asked to sign a consent form. Once you have signed the consent form you are still free to withdraw at any time without giving a reason and being disadvantaged in any way.

What will happen if I take part?

If you decide to take part you will be asked to complete a questionnaire with several parts. The first part will ask you basic information about you such as you age, gender, religious level and marital status. There will be six further sections to the questionnaire. The questions describe intimacy in everyday language, this is because they are standard scientific questionnaires that cannot be altered.

If you fill out the questionnaire in one go it should take you around 30 minutes.

At the end of the questionnaire there will be an option to complete some open-ended questions related to your expectations about intimacy. This means the questions will not be just asking you to select an option, rather you will have the opportunity to write more about the topic. You may find that it is a good opportunity to talk about these things as your answers will be entirely confidential and completely anonymous. You may find these questions a great outlet to express your sincere feelings about the topic, and I would very much appreciate if you could take the time to fill out these sections as they often provide an invaluable insight into participants' individual experiences.

After you have completed the questionnaire you will get some feedback from your answers which you may find useful. There will also be recommendations of resources you can look up at your convenience.

The data will be stored in a secure online database and the information on it cannot be traced back to you. Once the time allotted to the study ends (six months) the data will analysed and interpreted.

This study can be completed anywhere, all you need is either the paper version or the online link to the website. There will be no formal contact with the researcher.

What do I have to do?

If you are using an electronic version:

All you have to do is follow the instructions, fill in the questionnaire and press submit.

If you are using a paper version:

Fill in the questionnaire and send it to the researcher using the envelope provided.

What are the possible disadvantages and risks of taking part?

This study is researching a private and sensitive topic about knowledge of intimacy and satisfaction with your spouse.

Please remember if you do feel uncomfortable with the study you may withdraw at any time.

What are the possible benefits of taking part?

By taking part in this research you will benefit on a personal and a communal level.

On a communal level you will be contributing to new and important research that can give better insight into how to educate members of the community in these topics. This is important information for Psychologists, Rabbis, Educators and anyone who deals with these sensitive topics in the Jewish community.

On a personal level you will get feedback on some of your own scores and you can then decide if you want to gain more knowledge by accessing recommended resources. Additionally, you will be able to have your view and experience heard. You may have felt you've never been able to talk about these topics with anyone before and this is providing you a confidential outlet for that.

What will happen when the research study stops?

When the research project is over, all the data will be retained for 5 years according to the British Psychological Society's guidelines and then will be destroyed. Paper versions will be shredded and online data will be deleted. This will also happen should the research stop for any reason. Whilst the data is retained it will be kept secure and only the researcher will have access to the data.

Will my taking part in the study be kept confidential?

The data will remain entirely confidential and anonymous throughout the study. This means that no one will be able to tell who submitted what

information. At no point will you be asked to give identifying information such as your name, telephone number, address or email.

The people who are expected to have access to the data are the researcher, supervisor of the project and perhaps a statistical expert who will be approved by the researcher and her supervisor to help analyse the data.

The data will be stored on a secure online database and the researcher's computer storage devices. The information will not be used for any other purpose.

What will happen to the results of the research study?

The findings from this study will be used for the researcher's thesis. The thesis will be stored in the university's library. The research will probably also be submitted for publication in an academic journal.

What will happen if I don't want to carry on with the study?

You can withdraw at any stage of the project without providing an explanation or being disadvantaged in any way.

What if there is a problem?

If you have any problems, concerns or questions about this study, you should ask to speak to a member of the research team. If you remain unhappy and wish to complain formally, you can do this through the University complaints procedure. To complain about the study, you need to phone 020 7040 3040. You can then ask to speak to the Secretary to Senate Research Ethics Committee and inform them that the name of the project is: Do religion and sexual knowledge impact sexual satisfaction?

You could also write to the Secretary at:

Anna Ramberg
Secretary to Senate Research Ethics Committee
Research Office, E214

City University London
Northampton Square
London
EC1V 0HB

Email: [REDACTED]

City University London holds insurance policies which apply to this study. If you feel you have been harmed or injured by taking part in this study you may be eligible to claim compensation. This does not affect your legal rights to seek compensation. If you are harmed due to someone's negligence, then you may have grounds for legal action.

Who has reviewed the study?

This study has been approved by City University London [*insert which committee here*] Research Ethics Committee, [*insert ethics approval code here*].

Further information and contact details:

Hadassah Fromson (Researcher)

Email: [REDACTED]

Dr Don Rawson (Supervisor)

Email: [REDACTED]

Thank you for taking the time to read this information sheet.

APPENDIX J: Debrief Sheet



Do religion and sexual knowledge impact sexual satisfaction?

DEBRIEF INFORMATION

Thank you for taking part in this study! Now that it's finished we'd like to explain the rationale behind the work.

The general aim of this study was to investigate the connection between religious level, knowledge of intimacy and satisfaction with intimacy.

Previous research indicates that higher levels of knowledge about intimacy lead to higher levels of satisfaction with intimacy. This implies that if people are taught more factual knowledge about physical intimacy they may experience increased satisfaction in intimate lives.

We are not sure about what we will find but it is likely that the study will provide important understanding of how religiosity affects knowledge of intimacy and satisfaction of intimacy.

We hope you found this study interesting. If you have any questions about the study please do not hesitate to contact us at the following:

Hadassah Fromson (Researcher) Email: [REDACTED]

Dr Don Rawson (Supervisor) Email: [REDACTED]

We have provided for you below a list of resources on this topic which may interest you should you wish to know more.

Books

- *The Newlywed's Guide to Physical Intimacy by Rosenfeld and Ribner*
- *What Your Mother Never Told You About S-E-X by Hutcherson*
- *The Sex-Starved Marriage: A Couple's Guide to Boosting Their Marriage Libido by Weiner-Davis*

Websites

- *NHS Information - www.nhs.uk/Livewell/Goodsex*
- *Go Ask Alice - <http://goaskalice.columbia.edu>*

If you feel you would like support and guidance on this topic we have listed below some organisations to which you can refer yourself.

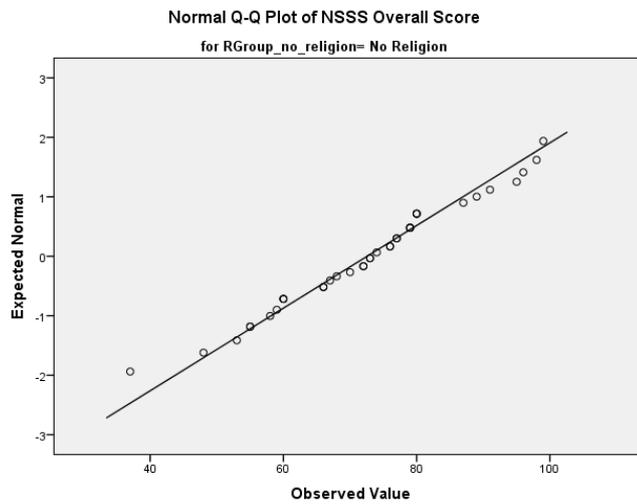
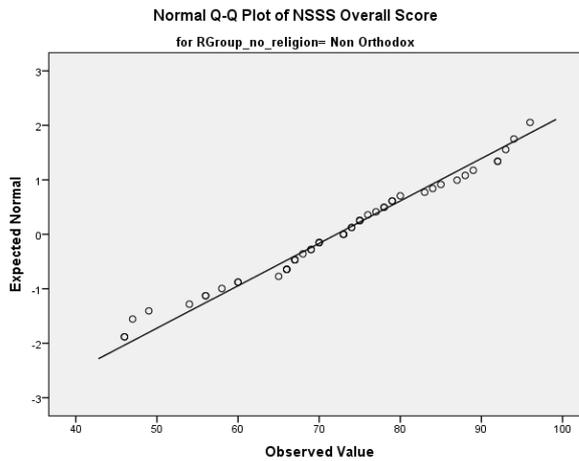
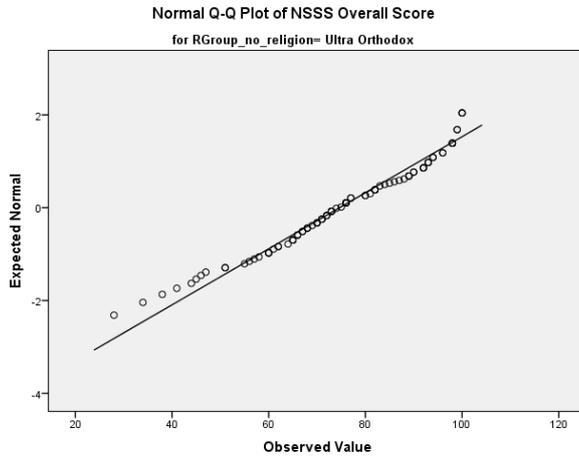
- Jewish Marriage Council - www.jmc-uk.org
- Relate - www.relate.org.uk
- College of Sexual and Relationship Therapists – www.basrt.org.uk

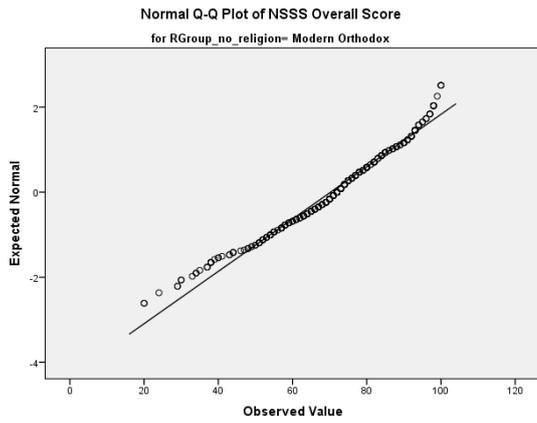
You are also able to get further guidance about physical intimacy from your GP who is also able to refer you to suitable organisations depending on your needs.

If you find intercourse painful you should discuss it with you GP.

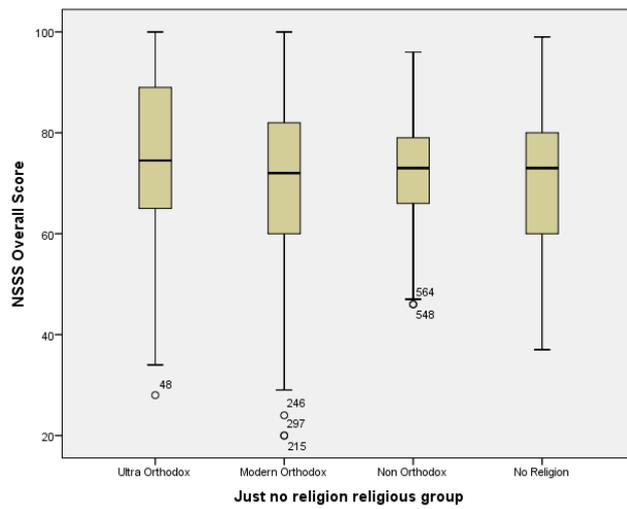
APPENDIX K: Sample of normality distributions for Religious Culture groups

NSSS Overall Score - Normal Q-Q Plots

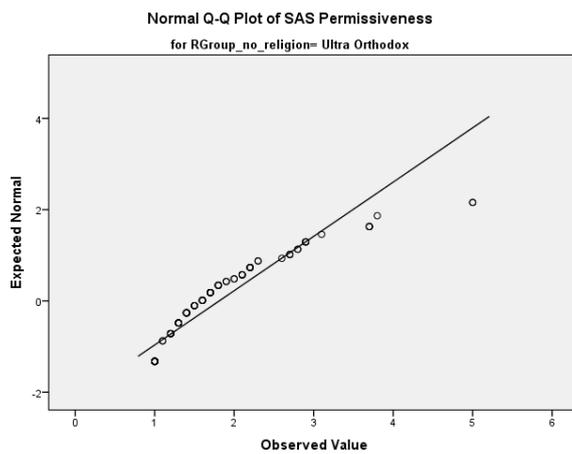


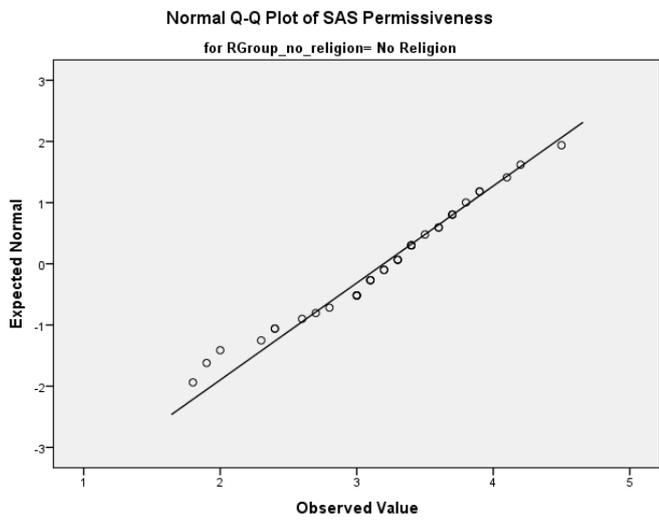
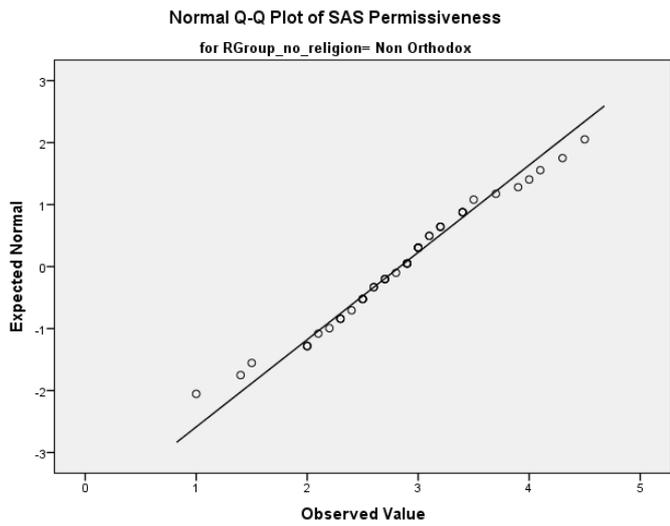
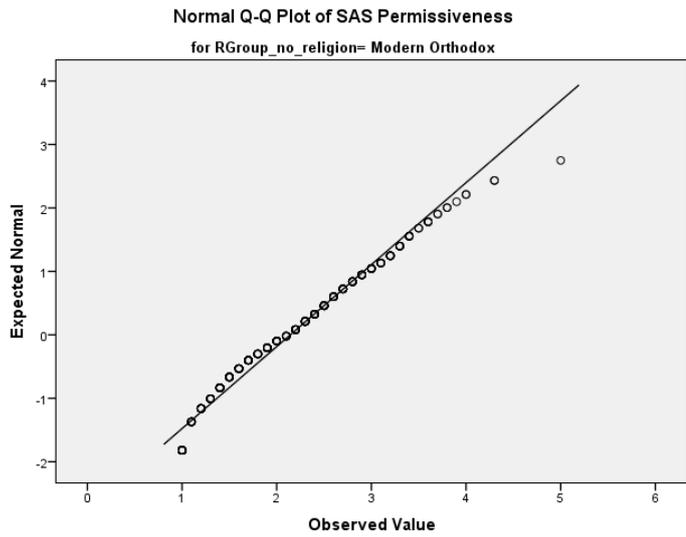


Boxplots for NSSS score of Religious Culture groups

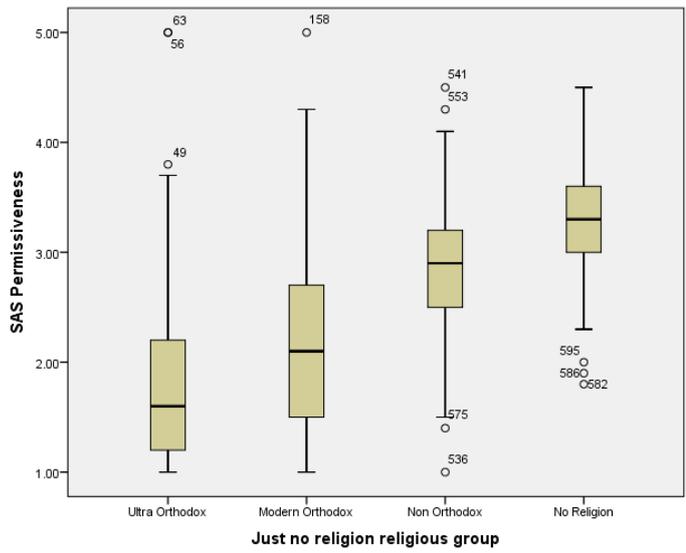


SAS Permissiveness -Normal Q-Q Plot

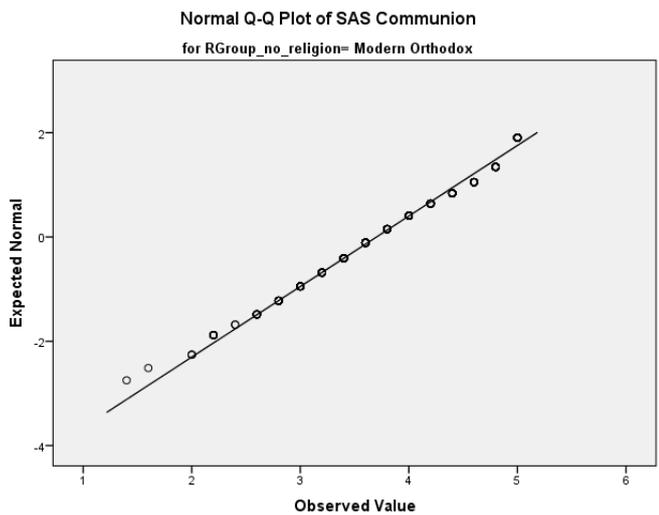
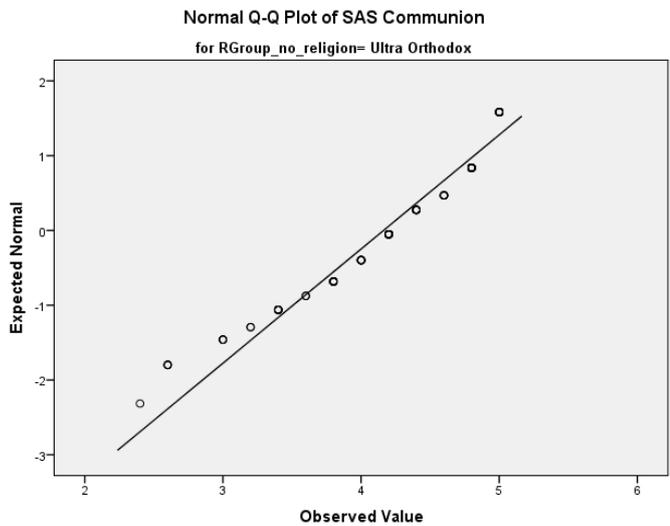


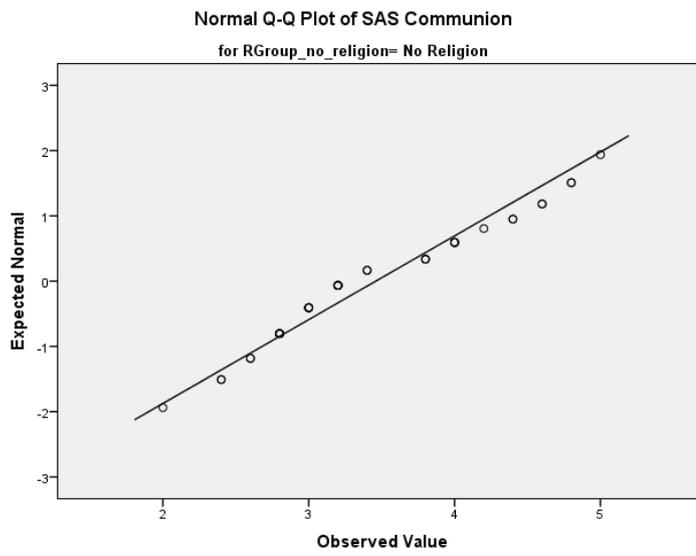
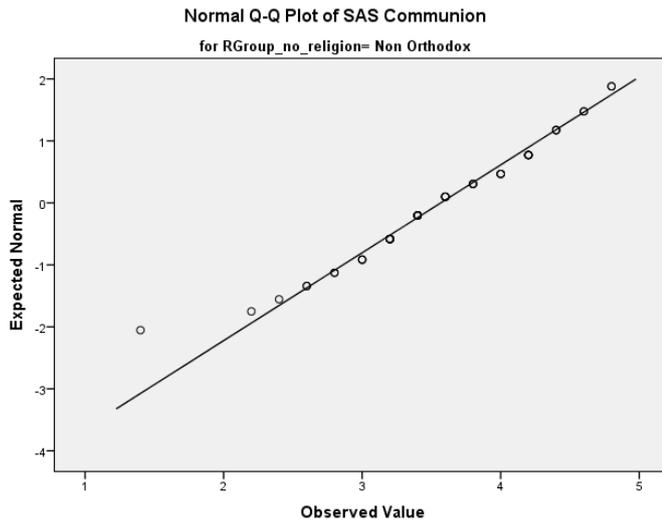


Boxplots for Religious Practice SAS Permissiveness scores

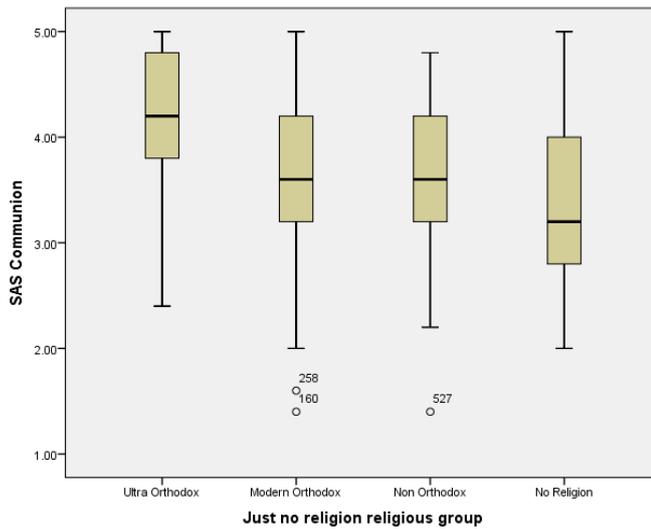


SAS Communion - Normal Q-Q Plots

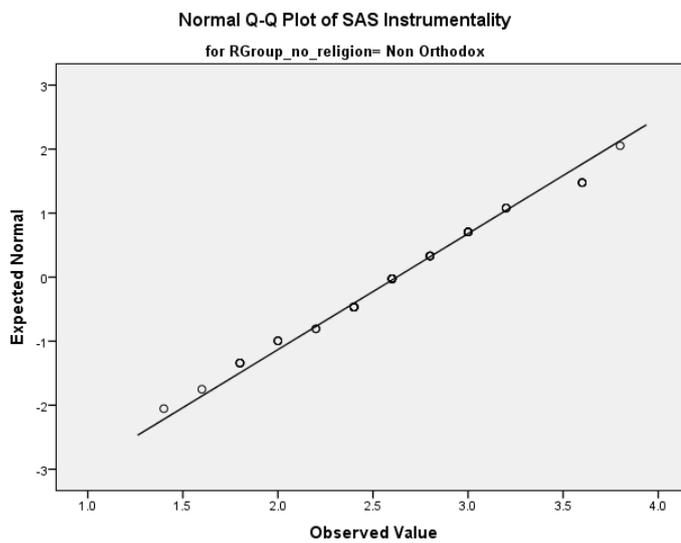
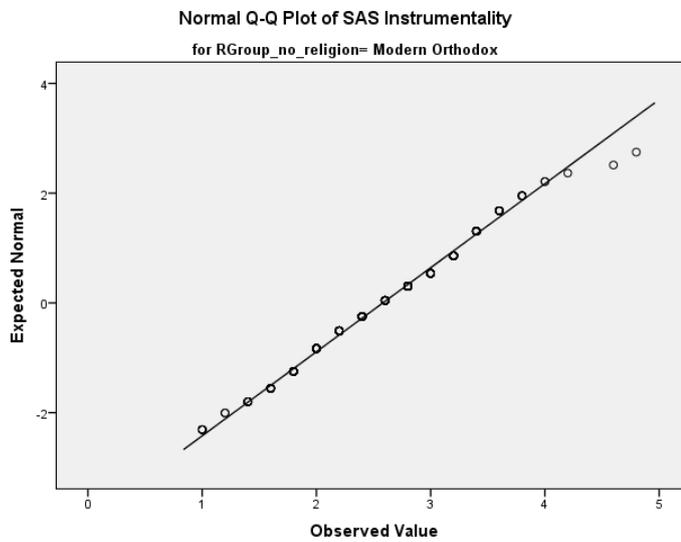
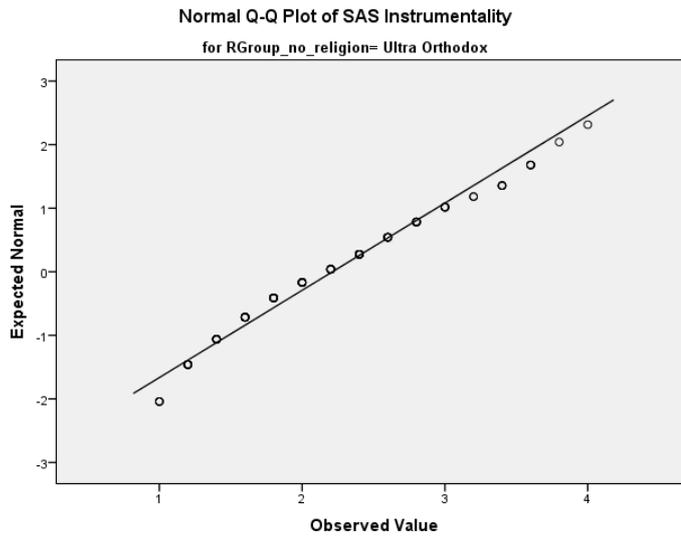


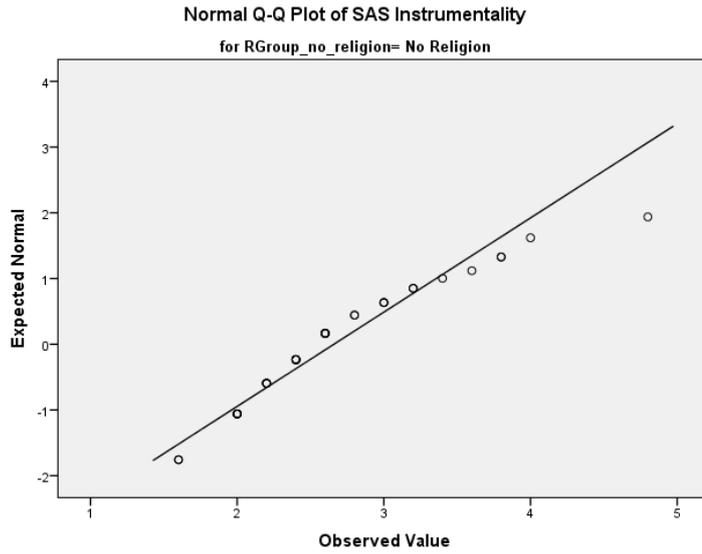


Boxplots for Religious Practice SAS Communion scores

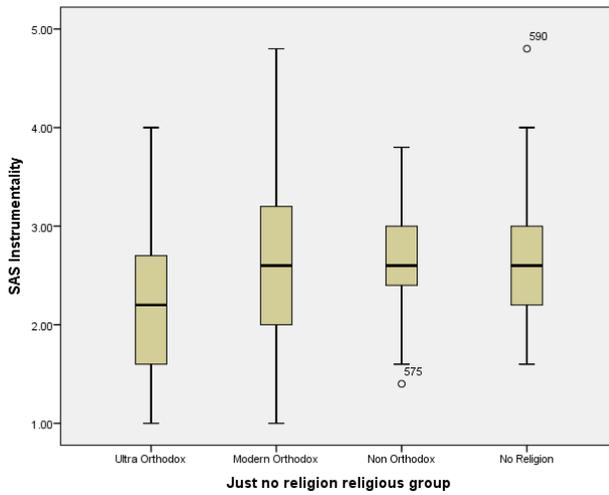


SAS Instrumentality- Normal Q-Q Plots

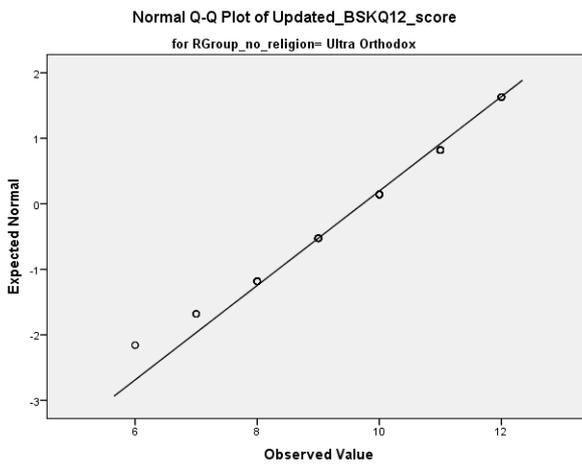


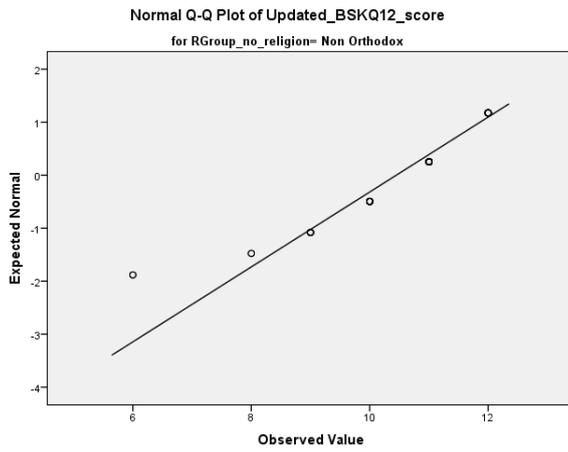
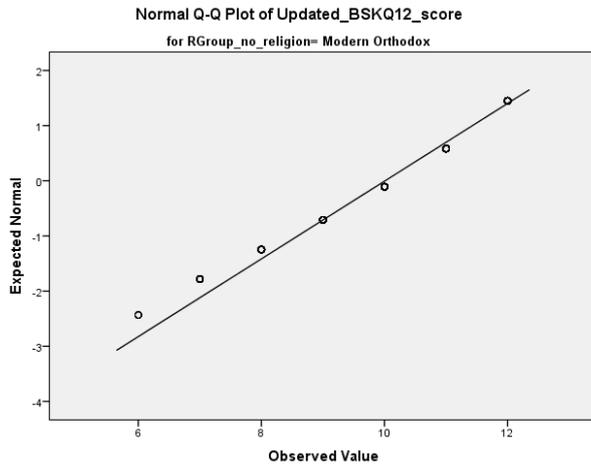


Boxplots for Religious Practice SAS Instrumentality scores.

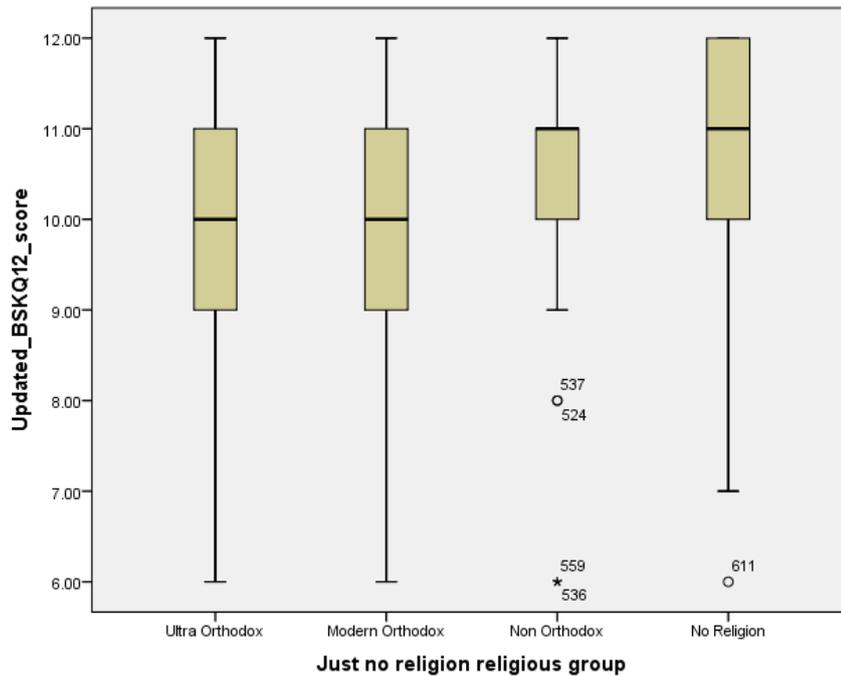


BSKQ12_score - Normal Q-Q Plots





Boxplots for Religious Practice BSKQ12 scores



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**The Professional Practice Component of this thesis has been
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**It can be consulted by Psychology researchers on application at
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PART C: PUBLISHABLE JOURNAL ARTICLE

Can existential therapy be used with religious clients?

This article is intended for submission to the *Counselling Psychology Review* for publication.

Abstract

Content & Focus: *Existential therapy can be a powerful therapeutic approach when working with clients facing their mortality. It is based on existential philosophy which tends to have a skewed negative perspective of religion. Paradoxically, existential therapy and religion both aim to enrich people's lives with meaning. This article explores the extent to which existential therapy can be used with religious clients or religious therapists given its atheistic underpinnings. The article first explores what existential therapy is and how it has developed as a therapeutic model. The article then discusses the extent to which existential therapy is compatible with counselling psychology principles and practice and compares existential therapy with other mainstream therapeutic models such as person-centred psychotherapy and cognitive behavioural therapy. Finally, this article discusses the current debate about whether existential therapy can be used with religious clients given that religion often provides a source of strength and protective factors for a client. This article concludes that the therapist should take an agnostic stance when adopting this model with clients whereby they suspend judgment about the client's beliefs. This is consistent with counselling psychology phenomenological approach to therapy which seeks to understand the client experience from the client's perspective.*

Keywords: *existential therapy, existential philosophy, religion, counselling psychology, therapeutic models*

Introduction

I have never felt more aware of my existence than standing by the crematorium in Auschwitz where my great-grandfather was murdered for simply being a Jew. Thoughts about my mortality and existence flew in and out of my head and I remember feeling utterly overwhelmed at the vastness

of the world and my place in it. This was not my first visit to the site, in fact it was my fifth. It was my job to take groups of Jewish teenagers, university students and young professionals on educational trips to learn about their heritage and what happened to the Jews of the previous generation seventy years ago. People would ask me how I could possibly go to Poland again.

Paradoxically, I would look forward to the next trip and experiencing the closeness to death because of the way it would influence me; I felt I could appreciate life more, I would re-prioritise my goals, reach out and develop my relationships with family and friends, tell people how much I love them. I was reminded that life was so precious and felt lucky and exhilarated to be alive. However, as time passed, the experience and shock would fade and slowly I would slump back into routine and 'live' a little less. And so I looked forward to the next trip so that I could be re-inspired by my existence. When reading about existential philosophy the following sentence struck me and reminded me of my experiences in Poland, "Though the physicality of death destroys us, the idea of death can save us" (Yalom, 2011 pg. 7).

As a counselling psychologist who is currently working in a cancer setting where women are given difficult and terminal diagnoses, I am constantly observing and experiencing people struggle with the idea of death. Even those who have been given a positive prognosis and have successfully completed treatment are left feeling shaken by having encountered mortality. It was thinking about these clients that led me to write this essay on existential therapy. One of the therapeutic aims of sessions with these clients is to help them live a more meaningful and enjoyable life despite their illness and limited time. Several clients have struggled with their religious beliefs and

wondered how God could do this to them. As a result, some people have grown stronger in their faith and some have distanced. In this article I would like to explore how a Counselling Psychologist can use existential therapy with religious clients. I will begin by outlining and defining the philosophical roots and assumptions of existential therapy. Then I will discuss existential therapy in the context of Counselling Psychology and compare it with other therapeutic models. After this, I will outline the current debate around the compatibility between existential therapy and religious clients. Finally, I will conclude that the debate about whether existential therapy can be used with religious is futile because as a Counselling Psychologist what is important is entering the meaning-making world of the client whatever they may be.

What is existential therapy?

Existential therapy is the practical application of existential philosophy (Adam, 2014). It belongs to the humanistic psychology movement and is primarily concerned the difficulties we encounter by being human (Steffan & Hanley, 2014). There are no clear guidelines or techniques about how existential therapy is practiced as there is with other models rather, it is the application of ideas and thoughts from existential thinkers (Bartz, 2009). Some existential therapists have tried to create a framework and outline how one may conduct existential therapy such as Viktor Frankl who developed logotherapy (Frankl, 1959) as well as Irvin Yalom, who has written an accessible textbook on Existential Psychotherapy (Yalom, 1980). Since

existential therapy is drawn from existential philosophy it is important to understand some of the fundamentals of existentialism.

Existentialism originated in Europe in the 1800's. Kierkegaard is considered by most to be the first existential thinker; he was a religious author and a theologian (Hoffman 2009a). One of his fundamental teachings was that each person, rather than society, is responsible for giving meaning to their own life and living it passionately (Hoffman, 2010). Other important existential thinkers are Sartre, Nietzsche, Tillich, Heidegger and Camus, each providing a rich perspective on what it means to be human. One of the reasons that the practice of existential therapy is so flexible and varied amongst practitioners is because the philosophies upon which it is based are extremely diverse and varied (Hoffman, 2010). Existential philosophers would argue that by definition there can be no unitary theory (Hoffman, 2010) as existentialism is about subjective meaning-seeking and this differs between people. However, a recent paper written by Adams (2014) in *Counselling Psychology Review* describes that Warnock (1970) identified three basic principles that define a theory as existential which will now be explored.

The first basic principles is that existence comes before essence (Sartre, 1973). As opposed to external objects who's existence is defined by what their "essence" is, meaning they exist because of how we want to use them. Humans first exist with no predetermined identity and then they create and develop themselves.

The second principle is that of personal responsibility. We are limited by the circumstances we are given but the way we view our limitations and

circumstances is our choice. Heidegger (1962), describes that we are “thrown” into a particular set of circumstances such as genes, culture and family, of which we are given no choice about and cannot change. Existential philosophers argue that most people prefer to view themselves as fixed by their circumstances because it is too difficult and anxiety provoking to think that the life they live is a product of their own actions and choices in life (Adams, 2014).

The third of Warnock’s principle of existential theory that Adams (2014) outlines, concerns how to think about things in an existential way and how existential theory is developed. Existential philosophy uses the phenomenological method developed by Edmund Husserl (1960; 2013). Husserl proposed that to comprehend the essence of something it needs to be understood and described rather than explained and analysed through traditional objective scientific measures. Adams (2014) writes that “existential thought is the body of knowledge that arises when the systematic research method of phenomenology is applied to the study of human existence”.

Existential therapy and counselling psychology

Existential therapy is a model that blends well with many of the philosophical underpinnings of Counselling Psychology. One example of this is by promoting a contextualised understanding of a client (Milton, 2014).

Counselling psychology acknowledges the clients are complex beings and their problems cannot be reduced to diagnostic categories (Kasket, 2011). There is a current movement in the field of psychology from viewing client problems as distinct diagnostic categories to diverse extremes on a continuum of human nature (Paris, 2013). This is reflected in the changes made between the DSM-IV and DSM-V (Paris, 2013). This is also reflected in the academic world of Counselling Psychology where qualitative research methods are valued to the same extent as traditional quantitative methods. Counselling Psychologists acknowledge the limitations of quantitative methods which cannot provide rich meaning of the individual. Instead quantitative methods group people together in categories to test effects and look for patterns and by doing so loses the identity of the individual. Existential philosophy similarly challenges traditional scientific categorisation and reductionism (Milton, 2014; Langdrige, 2007; Strawbridge, 1994). Its use of the phenomenological method highlights the importance it places on understanding the subjective experience of the client and acknowledges that no two people have the same experience from the same phenomena. Furthermore, existential thought does not pathologize clients since one of its fundamental tenets is that the human condition is inherently difficult and therefore it is normal and even anticipated for the client to be in distress

As part of the humanistic model, existential therapy places high value on the therapeutic relationship in which the therapist is placed in a non-expert position. The therapist and clients are considered equal in confronting the paradoxes of being human together. There are no definite answers and the

therapist can learn as much from the client as the client can learn from the therapist. One could even argue that according to the phenomenological method the client is the expert in the room since the therapy is based on the client's subjective experience of the world. This perspective of the therapeutic relationship is compatible with Counselling Psychology which places great emphasis on the therapeutic relationship and promotes egalitarianism between the therapist and the client (Gillies, 2010)

Yalom in his book of *Existential Psychotherapy* presents the therapeutic relationship as the healing factor in therapy (Ottens & Hanna, 1998). He writes that "the encounter itself is healing for the patient in a way that transcends the therapist's theoretical orientation" (Yalom, 1980 p. 401). Counselling Psychology's theoretical underpinnings propose that psychological problems are relational rather than medical and that the therapeutic relationship is integral in helping the client understand how they relate to others (Gillies, 2010). A great deal of research has validated this and found that the therapeutic relationship is responsible for therapeutic progress more than the employment of any particular therapeutic model (Lambert & Barley 2001)

Existential therapy shares similarities with other models used within the Counselling Psychology framework such as Person-Centred psychotherapy. Both of them fall under the humanistic model of therapy and they are similar in how they place high value on the therapeutic relationship. Additionally, they do not seek to explain the problem or point to what went wrong as other models such as Cognitive Behavioural Therapy (CBT) might do, rather they seek to understand how the client's difficulties affect them. Despite these

similarities, Existential therapy differs from Person-Centred therapy. Whereas Person-Centred psychotherapy hypothesises that if someone becomes attuned to themselves and express what they are feeling they will improve their mental state. This is not the case with Existential therapy which does not believe this can happen in a world which is inherently distressing and difficult to live in. In this way Existential therapy shares similarities with third wave CBT models such as Acceptance and Commitment Therapy which postulates that one must accept that things are difficult and cannot be resolved but rather needs to find a way to reconcile this and choose to live the way they want despite the difficulties.

Although there are many aligned views between Existential therapy and Counselling Psychology there are also some ideological difficulties with integrating Existential therapy in a Counselling Psychology framework. Spinelli (2014) argues that Existential therapy is not seeking to cure or help the client and as a result it cannot be part of a Counselling Psychology framework which aims to alleviate distress. However, this discordance might be a result of how Existential therapy attribute meaning and understanding to the concept of 'distress'. In Existential therapy 'distress' could be considered as something positive that encourages the client to delve more deeply into the meaning of their existence. This contrasts with the concept of 'distress' outside of realm of existentialism which tends to be something negative that needs to be addressed.

Existential therapy and religion

Since its beginnings existentialism has been divided by theistic and atheistic perspective. Theistic philosophers such as Kierkegaard (1813-55), a devout Christian, felt that Christianity was misunderstood by both, its leaders and followers, and as a result people were not living their lives “authentically”. By this he meant that people were not taking personal responsibility and commitment to find meaning in their lives and living it passionately (Lowrie, 1969). He protested against people living under societal constraints rather than taking personal responsibility for their choices and decisions.

On the other hand, Sartre, another prominent existential philosopher, was strongly atheist and stated that existentialism was "the attempt to draw all the consequences from a position of consistent atheism" (Wood, in Sartre 2013). A similarly influential existential philosopher was Nietzsche (1844-1900) who made the declaration that ‘God is dead’ and preached that God was outdated and believing in God was limiting (Nietzsche, 1911). Nietzsche called for individuals to reconsider what their existence could be like without God and how they could be free of moral and societal constraints imposed by the concept of God. Nietzsche proposed that people should live according to their desires and choose their own moral standards.

Bartz wrote a paper in 2009 about the difficulty of using current existential therapy models with religious clients. He proposes this is because most current existential therapy models draw their existential perspectives from atheistic philosophers and that theistic philosophy has been neglected. He draws an example of work by Irvin Yalom, who is considered as influential

in the development of existential psychotherapy. Yalom himself is an atheist and claims that religion does not allow people to experience death anxiety but instead offers them comfort by promising a continued existence after death; “death anxiety is the mother of all religions, which, in one way or another, attempt to temper the anguish of our finitude.” (Yalom, 2011 pg. 5) Additionally, he believes that religion persuades people not to take responsibility for their own freedom, choices and search for meaning. (Bartz, 2009). Yalom advocates helping the client deal with death anxiety by teaching them Epicurean philosophy and challenge their fears about death through the use of logic, for example, if one is dead they will not know they are dead and therefore there is nothing to fear (Bartz, 2009; Yalom, 2011).

A weakness of using a model with atheistic underpinnings is that the therapist may feel that the client’s religious beliefs are wrong or even harmful to their ‘authenticity’ and must be reconciled. This could be detrimental to the client and lead to greater distress. Bartz (2009) further proposes that conducting existential therapy based on atheistic values prevents the therapist from engaging in many important experiences, such as the spiritual elements of existence. If a therapist does not acknowledge God then the client’s spiritual experience is perplexing and inexplicable. Furthermore, a therapist will not know how to engage with the client’s spiritual values or help them restore their faith which can often be an important resource for future difficulties.

Despite these important points Bartz (2009) has been heavily criticised by practising existential philosophers and therapists such as Helminiak and Hoffman who argue that the notion of a theistic model of existential therapy is fundamentally flawed and ungrounded (Helminiak et al., 2012; Hoffman,

2010) Helminiak (2005, 2006, 2008a) comments that the mere notion of “theistic psychology”, the attempt to integrate theistic perspectives with psychotherapy, is flawed. Rather, Helminiak argues that belief in the existence of God should not be a central component of a psychological model, rather, that theism and spirituality are distinct (Helminiak, 2012). An obvious reason for this is that there are numerous experiences of God and each culture, language and individual has their own way of relating to God (Helminiak et al, 2012; Owen, 1967; Reese, 1980).

To try and dissuade someone of their religious beliefs whatever they may be would be harmful and antithetical to the ethics of Counselling Psychology. The egalitarianism and non-judgmental attitude that Counselling Psychology promotes requires the therapist to directly engage with the client’s way of viewing the world to understand how they come to behave and respond to others (Coyle in Milton, 2010). Moreover, challenging the client’s view of religion requires the therapist to employ their own preconceptions about the religion and will prevent them from being able to fully understand and explore what the religion means to the client. Therefore, it should not matter if the client or therapist is atheistic or theistic. Perhaps the best stance is for the therapist to take on, despite their personal views, is that of an agnostic character when working with a client (Helminiak et al, 2012). Agnosticism is the suspension of judgment on the existence of God. Adopting an agnostic perspective when conducting therapy may allow the therapist to be most receptive to the client’s beliefs whatever they may be (Helminiak et al, 2012)

As discussed above there are varying perspectives that existential philosophers had regarding the value of religion. One the one hand,

Kiekergaard and Nietzsche, despite their differing religious beliefs, believed that religion itself had merit but rather what they protested was unthinking, unquestioning and uncritical belief systems (Hoffman,2010). Sartre and Yalom on the other hand, deem religion as having very little merit. As a result, from both, theistic and atheistic perspectives, religion has a place in existential thought and tends to be evaluated as either something positive or negative. Hoffman (2010) claims that one of the problems in understanding the place of religion in existentialism is that majority of authors have focused on identifying the negative elements of religion and not enough on the positive leaving the reader with a skewed view. This may be a gap within the field where more can be written about and studied.

Hoffman (2010) comments that although it is true that later existential thinkers were either atheistic or agnostic, this is also true for many philosophical and psychological theories in general at the time and existentialism was not immune to this. In the post enlightenment period it was fashionable to reject religious theism in favour of scientific rationale (Sacks, 2011). However, some contemporary thinkers such as Sacks (2011) argue that once people accept that religion and science have different purposes they can then coexist “Science takes things apart to see how they work. Religion puts things together to see what they mean.” (Sacks, 2011, pg 2). A famous American existential therapist, Rollo May chose to understand religion as a myth which many not be false, but also cannot be proven true (Hoffman, 2010). This may be a useful way to think about religion when working with clients.

Conclusion

This essay has explored how existential therapy fits in a counselling psychology framework and can be used with religious clients. This essay began by describing a personal existential experience. What most attracts me to existential therapy is that as a human I am undergoing the same crises as my clients. When working with the construct of other models, the client is often being treated for a problem that the therapist is most probably not suffering from such as depression, anxiety, schizophrenia or anorexia. With existential therapy, although as the therapist I am helping the client through their crises, I also experience the interaction as simply being another human in the room who is learning from the other sharing parts of my own journey in confronting this world. Existential therapy converses with those upsetting thoughts that cross our minds such as as those which crossed my mind when standing by the crematorium at Auschwitz. Sometimes we may push these thoughts to the back of our minds and sometimes they can make us feel withdrawn from the world. However, these thoughts can also 'save us' if we are not afraid to engage in them. After discussing the roots of existential therapy and some of its basic principles this essay explored the place existential therapy has within a counselling psychology framework. Finally, the debates surrounding the use of Existential therapy with religious clients is discuss. Religion can be source and wellspring for meaning in people's lives and as counselling psychologists what is important to us is that clients are thinking about their beliefs systems whatever that may be. As the therapists, it is not up to us to determine whether the client's beliefs are true or not, no matter what therapeutic model we are working in, instead our role is to help

the client live a fulfilling and meaningful life from their perspective and experience.

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