

Analysis of Sexual Disorders as a Cause for Seeking Divorce

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This study aims to analyze sexual disorders as one of the important factors leading to the demand for divorce and annulment of marriage within the legal and jurisprudential system of Iran. Sexual disorders, as one of the influential factors on family relationships, can undermine the foundation of the family and create tensions between spouses. Healthy and reciprocal sexual relations play a crucial role in preserving and strengthening the family structure; however, sexual disorders that lead to one-sided gratification or failure to satisfy the needs of either party may result in the demand for divorce or annulment of marriage. The study, employing a descriptive-analytical approach, investigates jurisprudential sources, legal texts, and the perspectives of legal scholars. The findings indicate that sexual disorders, particularly conditions such as impotence ('inan), castration (khisā'), and forced sexual relations (jubr) in men, and vaginal tearing (afdhā') and narrowing (qarn) in women, are explicitly mentioned in the Civil Code as grounds for annulment of marriage. Additionally, some unlisted disorders, such as vaginismus and premature ejaculation, may, according to the legal interpretation of certain specialists, lead to the right to annul the marriage or even to divorce. However, the right to annul the marriage is only applicable if the sexual disorder is incurable. Moreover, infertility does not constitute a direct cause for annulment of marriage but may lead to the demand for divorce. The consequences of sexual disorders extend beyond the right to annul the marriage, including the husband's right to remarry or the cessation of alimony. This research demonstrates that the legislator, based on the principle of non-harm and the support of family stability, has foreseen specific cases for the annulment of marriage.

Keywords: sexual disorders, family relations, annulment of marriage, impotence, castration, forced sexual relations, right to divorce.

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1. Introduction

Numerous verses and hadiths concerning the creation of human beings are found in Islamic sources. A general review of the content of these verses and narrations, particularly the phrase "so that you may find tranquility in her", which appears in many verses of the Qur'an, reveals that the primary purpose of marriage in the creation of this world is to achieve peace and tranquility. If there is an obstacle preventing the spouses

from achieving this peace, Islam, like other religions, has devised measures to ensure the fulfillment of this goal and promote the mutual well-being of the couple. The obstacles that might hinder the attainment of this tranquility have various origins, sometimes arising from the moral qualities of one partner. For instance, if one spouse lacks good character and causes disturbance through harshness, it disrupts the peace of the other spouse. At other times, these obstacles may be external factors over which the individuals have no control, and



at times, they may be physical or bodily issues that are beyond the individuals' control. For example, a defect in one person may prevent the other from experiencing adequate physical satisfaction. Each of these obstacles has significant effects on the lives and relationships between spouses, and both Islamic jurisprudence and Iranian legal systems have addressed these impacts. Since the foundation of the Islamic system is the family, and based on research conducted in the fields of medical sciences, psychology, and social sciences, sexual disorders between spouses and the quality of marital relations directly affect the stability of the family system, it is necessary to examine and elaborate on the quality of marital relationships and the impact of sexual disorders. Therefore, it is crucial to identify their legal and jurisprudential aspects, as well as to examine their types and effects on marital relations, which have multiple consequences.

Sexual disorders are one of the complex and multifaceted issues that not only impact an individual's physical and mental health but also have profound effects on the stability and quality of marital relationships. Marriage, as one of the fundamental pillars of family life, requires balance and coordination in various aspects, including sexual, emotional, and psychological dimensions. Any deficiency or disorder in these areas can lead to serious problems in the relationship between spouses. Among these issues, sexual disorders, due to their high sensitivity and direct impact on emotional and physical relations between partners, are key factors in marital conflicts and even divorce. Divorce, as one of the social and individual crises, is often caused by various factors that affect the quality of shared life. Among these factors, sexual disorders, due to their complex nature and profound impact on the intimacy of spouses, represent one of the important but less discussed causes in social and psychological studies. Many couples, due to a lack of awareness, cultural taboos, or fear of social judgment, hide their sexual problems and, instead of seeking solutions, are driven towards separation.

Sexual disorders encompass a wide range of problems such as reduced sexual desire, sexual dysfunction, premature ejaculation, delayed ejaculation, and sexual arousal disorders, which may arise from psychological, physiological, or even socio-cultural factors. These disorders not only create tension in marital relationships but can also affect self-esteem and intimacy between

spouses. On the other hand, studies have shown that the inability to manage and resolve sexual problems often leads to feelings of frustration, hopelessness, and a lack of willingness to continue the marriage. One of the main challenges in this context is the lack of awareness and cultural taboos surrounding sexual issues. In many societies, particularly in traditional ones, discussing sexual problems is considered unacceptable for moral or social reasons. This leads individuals to conceal their problems instead of seeking counseling or treatment, ultimately pushing them towards decisions such as divorce.

Analyzing sexual disorders as a cause for seeking divorce requires a comprehensive and multidimensional approach. This analysis must take into account psychological, cultural, social, and biological factors and examine how these elements may either exacerbate or alleviate marital conflicts. Additionally, attention must be paid to preventive and therapeutic solutions, such as pre-marital sexual education, couples counseling, and psychological and medical treatments, to reduce the negative effects of these disorders on marital relations. The goal of this research is to identify the dimensions and consequences of sexual disorders in the context of seeking divorce. The importance of this topic lies in increasing public awareness, improving the quality of marital life, and reducing divorce rates in society. Undoubtedly, addressing this issue is an effective step towards strengthening the family structure and preventing the social consequences of divorce.

2. The Concept of Sexual Dysfunction

Dysfunction, in its linguistic sense, refers to damage to tasks, harm, defect, disorder, disruption, and the failure to complete a task (Moein, 2009).

Sexual dysfunctions have various definitions from the perspectives of medicine, jurisprudence, and law, but these definitions are essentially unified in their nature and do not differ significantly.

Sexual dysfunction can be defined as an inability or problem in engaging in successful sexual intercourse with a partner, and this incapacity can vary in quality across different types of sexual dysfunction. In other words, each type of sexual dysfunction has its own characteristics and may affect various aspects of an individual's life and their relationship with their sexual partner. For example, an individual with premature

ejaculation may be able to perform intercourse, but their ability to satisfy their partner sexually may be compromised due to the brief duration of ejaculation. On the other hand, a man who cannot engage in sexual intercourse due to erectile dysfunction faces a different type of incapacity, which will have distinct psychological and physical effects on both the individual and their partner. These two examples demonstrate that sexual problems can have diverse dimensions and each can uniquely influence the quality of a person's sexual life and their emotional relationships.

Sexual dysfunctions may arise from a variety of causes, ranging from physical factors such as hormonal imbalances, chronic illnesses, or medication side effects, to psychological factors like stress, anxiety, depression, or emotional difficulties in relationships. These factors may occur alone or in combination, leading to sexual dysfunction. A key point in understanding sexual dysfunction is that these problems affect not only the individual but also their sexual and emotional relationship with their partner. For example, premature ejaculation may lead to dissatisfaction in the sexual partner, and this dissatisfaction can negatively impact the individual's self-esteem over time. Likewise, conditions such as erectile dysfunction can increase feelings of shame or embarrassment in men, potentially deterring them from seeking medical or psychological help.

Treatment of sexual dysfunction typically requires a multifaceted approach. For physical problems, consulting with a medical specialist and undergoing thorough examinations are essential. Alongside this, psychological treatments, such as sexual counseling or cognitive-behavioral therapy, can help reduce anxiety, boost self-confidence, and improve communication between couples. Additionally, learning communication skills and better understanding the needs and emotions of a sexual partner can play a significant role in reducing tensions arising from sexual dysfunctions. Sexual dysfunction is a complex and multifaceted issue that requires careful attention, professional support, and cooperation from both partners to manage and improve. In Islamic law and jurisprudential texts, sexual dysfunction is referred to as a "defect" (ayb). The term "defect" is also used in a linguistic sense to refer to badness, ugliness, deficiency, disrepute, sin, disgrace, etc. (Moein, 2009).

In jurisprudential terminology, a defect refers to "deviation from natural paths towards deficiency or excess, which causes a loss in value, such as diseases like leprosy, madness, vitiligo, etc." (Hilli, 1984).

Some scholars believe that any deviation, whether excess or deficiency, from the natural creation is considered a defect (Najafi, 1989).

From what has been discussed, it is clear that both defects and dysfunctions share the concept of deficiency, disruption, harm, and disorder. Therefore, it is possible for the terms defect and dysfunction to be used interchangeably or understood as having the same meaning. For example, the term "erectile dysfunction" in the revised fourth statistical and diagnostic group of mental disorders is similarly referred to as a "defect in erection" in jurisprudential and legal texts. This demonstrates the overlap and equivalence of the concepts of defect and dysfunction, with the only difference being that each term is used in its respective field, but their meanings align according to shared texts.

3. Main Factors Contributing to Sexual Disorders

Understanding the factors involved in the emergence of sexual disorders is a highly important issue, and we will address this discussion based on several key sources from the field of medicine.

3.1. Lack of Knowledge or Limited Knowledge

One of the primary causes of sexual dysfunction and related disorders is the lack of adequate information about sexual functions. Often, individuals face these problems due to their ignorance of sexual responses and sexual physiology, or because their perceptions of sexual matters are incorrect or misguided. For instance, a woman who is knowledgeable about the function of the clitoris and its role in sexual arousal and stimulation will likely have a different sexual experience compared to a woman who lacks this awareness. Similarly, men who experience issues with erection and ejaculation often do so due to concerns and anxieties related to the speed of reaching orgasm. Some sexual adaptation issues also arise from misguided beliefs and cultural misconceptions, such as the belief that a boy who loses too much semen during adolescence will experience sexual and non-sexual disorders in the future (Nikkhoo & Avadis Yans, 2008).

Psychological factors significantly contribute to sexual disorders, including anxiety, attitudes, passive behavior, and communication problems, with a particular focus on communication problems between partners. Issues in relationships, such as conflicts, fears of infidelity, and problems with family and friends, can directly affect the sexual relationship between partners, either independently or in combination (Shoayri, 2007). Communication problems between couples can manifest as visible or hidden anger, internal resentment, the level of trust and support between them, and their emotional dependence on each other. Such issues can lead to the emergence of sexual problems. Therefore, these non-sexual issues in a relationship can also contribute to difficulties in the couple's sexual life, and vice versa. In some cases, sexual issues between partners can cause non-sexual issues (Shoayri, 2007).

3.2. *External Factors*

In addition to the aforementioned factors, other elements play a significant role in the emergence of sexual disorders, which are beyond individual knowledge deficiencies. Factors that reduce one's capabilities, preventing them from experiencing successful sexual activity or even making it impossible for them to engage in sexual intercourse, such as cancer, strong chemotherapy, chronic bronchitis, and others, are also significant contributors. External factors include genetic, environmental, and congenital factors, all of which are outside the individual's control and are considered external causes.

4. **Methods for Preventing Sexual Disorders**

In general, there are three approaches that can prevent the onset of these disorders. These methods should be carefully observed in the relationships of couples, as failing to adhere to them can cause irreparable damage to their relationship.

4.1. *Correcting the Misleading Stigma Surrounding the Discussion of Sexual Disorders*

The first step in preventing sexual disorders is to avoid the creation of misconceptions, which often stem from improper education and upbringing. Unfortunately, despite the increasing prevalence of these disorders, many individuals are ashamed to discuss their problems,

which in turn creates difficulties in their relationships. Therefore, this issue necessitates a comprehensive and multidimensional approach to understanding sexual dysfunction. These problems often result from the interaction of various factors, including social, psychological, and biological elements, which may interfere simultaneously, even if they occur one after the other. Social factors are usually seen as the most significant initiators of these issues. Thus, it is essential for each partner to discuss any sexual problem they have openly and without shame before initiating sexual relations, as addressing the issue openly can often lead to its resolution.

4.2. *Consulting a Specialist Before Disorders Arise*

Proper physical functioning in sexual matters is somewhat dependent on better social conditions and the mental health of society. However, it should be noted that when a physical problem causes sexual dysfunction, the disorder tends to be persistent, and its symptoms usually intensify over time. Among the physical and medical factors that contribute to sexual dysfunction are cardiovascular problems, obesity, blocked arteries, diabetes, hyperthyroidism, testicular inflammation, and genital pain during sexual activity, among others. When such symptoms appear, the first and most important step is to undergo relevant tests and consult a doctor, as these symptoms could indicate various health issues, such as cancers, muscle spasms, or side effects from certain medications, which need immediate medical intervention. Overall, factors influencing sexual behavior and physical function include emotions, beliefs, thoughts, feelings, and personality traits. Problems in these psychological characteristics and a lack of skills to control them play a significant role in an individual's sexual health. Of course, these traits depend on the individual's level of education, training, media exposure, and personal experiences. Therefore, believing that sexual problems, like any other issues, should be addressed by specialists is essential. Although the healthcare system has often neglected specialists in this field due to various reasons, it is necessary to establish qualified professionals and therapists to diagnose and treat such issues (Jahanfar & Molaie Nejad, 2007).

4.3. *Maintaining the Natural Health of the Body*

Maintaining physical health is crucial for sexual well-being in men. To have optimal sexual performance, men must take care of their overall physical health. Factors such as hormones, the nervous system, blood circulation, and the health of sexual organs are critical not only for general physical health but also for sexual interactions. The most significant factor in maintaining the health of these bodily functions is a healthy lifestyle. The use of tobacco, high blood pressure, high cholesterol, diabetes, obesity, and physical inactivity threaten the vascular health of the genital system, just as they do for the cardiovascular and cerebral vessels. The impact on the genital system is usually more immediate and severe. Furthermore, in addition to the importance of maintaining the health of the nervous and vascular systems, the secretion levels of male hormones are also critical for the physical, sexual, and psychological well-being of older and middle-aged men. Therefore, paying attention to overall body health and controlling the use of sexual medications to prevent the onset of these disorders is essential.

5. **The Impact of Sexual Dysfunction on Strengthening Marital Relationships**

Sexual problems and dysfunctions in marital relationships are a significant factor in marital discord and other psychological and social issues. Research indicates that sexual dysfunctions are closely related to mental illnesses, divorce, and social problems such as delinquency and sexual assault. Many couples with sexual dysfunction are unaware of the impact these issues have on their marital lives, including the role they play in creating weak relationships, low self-esteem, and depression in both partners. On the other hand, optimal sexual performance is a fundamental element for strengthening the family and establishing a stable cultural foundation. Studies show that 44% of marital conflicts are due to sexual relationship problems, and about 25% are related to other sexual issues (Jabal Ameli, 2016).

According to some research conducted in Iran, at least fifty percent of divorces filed in family courts for various reasons stem from sexual issues. It has been proven that in families where the sexual problems of the spouses were resolved, the likelihood of family problems

diminishing significantly increased. Therefore, a positive and mutual response from spouses to each other's sexual needs can be one of the most important factors in strengthening the family. This is perhaps why Islamic guidelines emphasize the fulfillment of sexual needs between spouses (Mohammadi Reyshahri, 2016: 286). Studies on the effect of sexual satisfaction on marital adjustment indicate not only the factors influencing satisfaction in sexual relationships but also the predictive ability of sexual satisfaction scores in forecasting marital compatibility (Ahmadi, 2006: 5). Other studies have shown that sexual satisfaction is positively correlated with marital satisfaction, while lack of sexual desire has a detrimental impact on the stability of married life. Interestingly, couples in the study, across various age and education levels, unanimously agreed on the undeniable role that sexual relationship problems play in the emergence of marital issues (Bakhshayesh & Mortazavi, 2009).

6. **Participatory Sexual Relations and the Consequences of One-Sided Satisfaction**

Although the satisfaction of some needs is achieved individually, sexual desires naturally require mutual fulfillment. It has been proven that in families where sexual problems between partners were resolved, family issues tended to diminish. Hence, participation, interaction, satisfaction, and mutual pleasure are integral components of healthy sexual relationships. Research results indicate that achieving balance in fulfilling sexual desires and sexual pleasure for both partners, alongside their active involvement in preparing for optimal sexual intercourse, significantly impacts the resolution of marital problems (Bakhshai & Mortezaei, 2009: 15).

A person who fails to meet their spouse's sexual needs should expect the consequences of such neglect. Issues such as boredom, lack of enthusiasm in life, irritability, aggression, rebellion, marital disobedience, dissatisfaction with life, mistreatment of children, psychological and physical problems, nervous pain, lack of motivation for progress and work, emotional coldness, attraction to someone other than their spouse, exhibitionism in public spaces, and ultimately, divorce and family breakdown, can all be direct and indirect outcomes of one-sided sexual satisfaction. This is true for both men and women. Sexual dissatisfaction can turn the

kindest men into grumpy and hard-to-please individuals, while conversely, a man who is completely satisfied with his sexual relationship with his wife tends to overlook many of her mistakes (this also applies to women). Therefore, care must be taken to ensure that there are no barriers or obstacles in sexual relations, and that there are no metaphorical "rocks" in the marital bed (Nosh Abadi, 2005).

Meeting the sexual needs of each spouse involves delicate considerations that are learned through knowledge and sexual skills, as well as experiences gained in a shared life.

7. The Effects of Sexual Disorders on Spousal Relations in Islamic Jurisprudence and Law

We will first introduce some introductory points and then discuss the effects of sexual disorders.

7.1. *The Effect of Sexual Disorders on the Annulment of Marriage*

From the perspective of Islamic jurisprudence and civil law, one of the grounds for annulment of marriage is the presence of sexual disorders between spouses. Since the essence and foundation of marriage are based on mutual consent and the protection of the rights of both spouses, the presence of sexual disorders is incompatible with this purpose (Najafi, 1989).

The basis for this viewpoint is the numerous narrations that negate any harm to the spouses (Haeri, 2005).

Sexual defects in men include impotence, castration, and the absence of the penis, while sexual defects in women include congenital infertility and total sterility. On the other hand, the defects explicitly mentioned in the Civil Code are rooted in Shiite jurisprudence, where such defects were regarded as grounds for the annulment of marriage during the time of the infallibles (A.S.), and thus, they have been incorporated into the Civil Code. Now, with the advancements in medical science, some of these defects, which were once considered incurable and significant diseases, are now treatable. The question arises: does the right to annul the marriage still exist in such cases? This is a crucial issue that plays a decisive role in determining the fate of the marriage contract. According to research in jurisprudential and legal texts, it can be concluded that if the defects mentioned can be treated, no right of annulment exists for the other party.

7.2. *The Basis for the Annulment of Marriage Based on Spousal Sexual Disorders*

The basis for the annulment of marriage is to create a foundation for preventing harm and damage to the spouse, and this right provides the opportunity to eliminate such harm (Safaei & Emami, 2021).

Understanding this issue is important because if the primary objective of this basis is to remove harm or damage inflicted on either spouse, it follows that with the elimination of the harm, the right to annul also disappears. If the defect is rectified through surgery or treatment, the basis for annulment is lost. With the advancement of medical science, if the defects mentioned in the law are now treatable, and the harm no longer exists, the question arises whether the right to annul the marriage still persists. In cases of defects that lead to the annulment of marriage, what matters is the necessity to remove the harm from the affected party. However, many Shiite jurists, when discussing the right to annul marriage due to defects, focus only on the types of defects and their rulings, without addressing the underlying basis for such rulings. Nevertheless, some jurists argue that the basis for such rulings is the negation of harm and deceit (Najafi, 1989).

Another important point in determining the basis for annulment is that if the basis for annulment is solely the removal of harm, we must consider other defects not explicitly mentioned in legal texts, such as AIDS, which brings harm to the other party, including transmission and death, or premature ejaculation in cases where the husband is incapable of intercourse, which disrupts the wife's life and certainly causes harm. In such cases, the right to annul should also be considered for these diseases and disorders. However, contemporary jurists' fatwas indicate that they only recognize the right to annul for the defects explicitly mentioned in the law (Makarem Shirazi, 2016).

Therefore, jurists believe that marriage should, as much as possible, remain intact, and annulment is only permissible if there is a legal justification based on clear texts or narratives. Thus, logical, social, or utilitarian reasoning and analogy do not carry weight for them, and when using narratives, they focus on the literal meaning of the texts rather than their wisdom and purpose (Mehrpour, 2008).

However, regarding defects that occur after the contract, the principle of "no harm" cannot be applied because the

rationale behind this principle is that if annulment is a rational right and its denial would cause harm, it is clear that, from a rational perspective, the right to annul does not exist for defects that occur after the marriage. Additionally, this principle cannot be applied to external harm caused by defects after the contract, because the external harm that arises due to a post-marriage defect is not logically attributed to the contract itself. Furthermore, this principle cannot be applied based on the idea that the primary goal of the marriage contract is to marry a healthy spouse because, typically, the parties to the contract are only concerned with health at the time of marriage and cannot predict the future health of their spouse (Haeri, 2005).

7.3. *The Nature and Conditions for the Annulment of Marriage Based on Spousal Sexual Disorders*

With the marriage contract, the marital relationship between the man and the woman is established, and the legal status of the marriage continues until it is dissolved. The dissolution of the marriage contract can occur through divorce, death, or annulment (Article 1120 of the Civil Code).

The annulment of marriage allows either party to terminate the marital relationship at their discretion. Annulment is a unilateral legal act and, in Islamic jurisprudential terms, falls under "iqa'at" rather than contracts. Therefore, it is carried out by the will of the party holding the right and does not require the consent of the other party (Katouzian, 2023).

The condition for applying the annulment law is ignorance at the time of marriage. In other words, neither party should be aware of the defect in the other at the time of marriage. The defects mentioned in the marriage contract must exist at the time of the contract, except for defects like insanity and impotence, which are mentioned in the law and, even if they occur after the marriage, provide the right of annulment for the spouse (Article 1125 of the Civil Code).

This is the case for the defects of the wife, where the defect must exist at the time of the marriage for the husband to have the right to annul the marriage (Article 1124 of the Civil Code). Another issue is that the right to annul is immediate; otherwise, the right is forfeited (Article 1131 of the Civil Code). The term "immediate" in this legal article is not used in its physical sense, and any delay does not annul the right. The term refers to the

"customary immediacy," meaning that the right should be exercised within a reasonable period, during which an ordinary person would act without delay.

In the Iranian legal system, the annulment of marriage does not require special procedures; it occurs with the mere will of the right-holder (Article 449 of the Civil Code). However, it is important to note that internal intent, unless formally declared, does not affect the dissolution of the marriage, as stated in the Civil Code. Thus, there is no need to refer to the court or obtain the approval of a religious judge for annulment (Article 449 of the Civil Code).

This ruling is also found among jurists (Najafi, 1989; Tusi, 1983). Most Shiite jurists believe that exercising the right to annul does not require referring to the judge, except in cases of impotence, where a year is allowed to verify the defect, and referring to the judge becomes necessary (Golpayegani, 2008).

However, due to the nature of the matter, in cases of disputes or the occurrence of annulment grounds, the party claiming annulment must file a lawsuit in court. The court's ruling does not have a foundational effect but serves as an executive ruling confirming whether the annulment is valid and from which date it was effective. Therefore, referring to the court is a condition for verifying the right to annul and proving the dissolution of the marriage, not a requirement for its occurrence (Katouzian, 2021).

Among the grounds for annulment mentioned in jurisprudential texts are defects in one of the spouses, deceit, and violation of the agreed-upon qualities. However, according to the Civil Code, the grounds for annulment are limited to defects and violation of the agreed-upon qualities (Article 1128 of the Civil Code).

Thus, one of the grounds for annulment, which is mentioned in jurisprudential texts, is deceit, which can be considered another cause for the annulment of marriage. It is noteworthy that this cause is not explicitly mentioned in the law, but it can often be categorized under defects or violation of the agreed-upon qualities (Mehrpour, 2008).

The law does not recognize every defect as a ground for annulment; it only acknowledges those defects that, if continued, would lead to the breakdown of family life. Therefore, to adhere to the principle of negating harm, the law grants the right to annul the marriage (Emami, 2021).

8. Conclusion

The results of this study indicate that sexual disorders, as one of the key factors affecting the stability and durability of the family system, play a decisive role in the demand for divorce and annulment of marriage. Since healthy sexual relations are one of the main pillars of marital life, any disruption in this area can lead to the destabilization of the relationship between spouses and the emergence of serious conflicts. The analyses conducted based on juristic sources, Iranian civil law, and the views of legal scholars further emphasize the significance of this issue.

Some sexual disorders, such as impotence, castration, and genital mutilation in men, and vaginal narrowing and obstruction in women, which are explicitly mentioned in the Civil Code as defects that may lead to annulment of marriage, provide the grounds for marriage dissolution. If these disorders are diagnosed as incurable, they can form a legal and juristic basis for the annulment of marriage. Furthermore, certain non-specified disorders, such as vaginismus and premature ejaculation, according to the legal interpretation of some experts, may also create the right to annul the marriage or demand divorce.

A noteworthy point is that infertility, although not directly considered a reason for the annulment of marriage, may lay the groundwork for a divorce claim. Additionally, the consequences of sexual disorders are not limited to the dissolution of marriage; they also include other outcomes, such as the possibility of remarriage for the husband or the suspension of alimony. The Iranian legislator, based on principles such as the prevention of harm and the protection of the family unit, has attempted to maintain a balanced approach between safeguarding the rights of both spouses and ensuring the stability of the family system. In this regard, specific conditions and criteria for the annulment of marriage have been defined, which not only grant the right to seek annulment to those affected by these disorders but also prevent potential abuse.

This study shows that legislation in the field of sexual disorders, with an emphasis on individual and social rights, can contribute to reducing tensions and strengthening marital relationships. On the other hand, the necessity for awareness-raising and enhancing education related to sexual health and marital

relationships is also suggested as a preventive and supportive measure. Overall, attention to this issue and the establishment of efficient legal mechanisms can contribute to strengthening the foundation of the family and reducing divorce rates.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

In this research, ethical standards including obtaining informed consent, ensuring privacy and confidentiality were observed.

References

- Bakhshayesh, A., & Mortazavi, M. (2009). The Relationship Between Sexual Satisfaction, General Health, and Marital Satisfaction in Couples. *Applied Psychology Quarterly*, 3(12).
- Emami, S. H. (2021). *Civil Law*. Islamiyah Bookstore.
- Golpayegani, S. M. R. (2008). *Majma' al-Masa'il*. Dar al-Qur'an al-Karim Publishing.
- Haeri, S. K. (2005). Defects Leading to Annulment of Marriage. *Journal of Fiqh Ahl al-Bayt*, 1(41).
- Hilli, H. i. Y. (1984). *Qawa'id al-Ahkam fi Ma'rifat al-Halal wa al-Haram*. Islamic Publications Office affiliated with the Society of Seminary Teachers of Qom.

- Jabal Ameli, J. (2016). Examining Marital Life Problems with an Emphasis on Sexual Relationships. Strengthening the Family System and Its Pathology, Qom.
- Jahanfar, S., & Molaei Nejad, M. (2007). *Textbook on Sexual Disorders*. Jame Negar Publishing.
- Katouzian, N. (2021). *Family Civil Law*. Ganj Danesh.
- Katouzian, N. (2023). *Introductory Course on Civil Law: Legal Acts and Contracts*. Ganj Danesh.
- Makarem Shirazi, N. (2016). *New Istifta'at*. Imam Ali ibn Abi Talib School Publications.
- Mehrpour, H. (2008). A Jurisprudential and Legal Examination of the Different Status of Men and Women Regarding Marriage Annulment. *Mofid Quarterly*, 1(20).
- Moein, M. (2009). *Moein Persian Dictionary*. Amir Kabir Publishing.
- Najafi, M. H. (1989). *Jawahir al-Kalam fi Sharh Sharayi' al-Islam*. Dar al-Turath al-Arabi.
- Nikkhoo, M. R., & Avadis Yans, H. (2008). *Men's Sexual Life*. Sokhan Publishing.
- Nosh Abadi, A. (2005). Women and Methods of Attracting Spousal Affection. *Payam-e Zan Magazine*, 1(164).
- Safaei, S. H., & Emami, A. (2021). *Family Law*. Mizan Publishing.
- Shoayri, M. R. (2007). *Human and Sexual Health: Diagnosis and Treatment of Sexual Disorders from a Psychological Perspective*. Alborz.
- Tusi, M. i. H. (1983). *Al-Mabsut fi Fiqh al-Imamiyya*. Al-Haydariyah Press.