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Married Men's Perception of the Influence of Dysmorphobia and Demographic Variables on Marital Consummation with their Spouses in Rivers South East Senatorial District, Rivers State

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Abstract

The study investigated married men's perception of the influence of dysmorphobia and demographic variables on marital consummation with their spouses in Rivers South East Senatorial District. It adopted a survey research design. Six research questions and five hypotheses were formulated to guide the study. The population of the study comprised the entire married men in Rivers South East Senatorial District estimated to be 11,700. A population of 400 was drawn from the population using Taro Yamane formula. A researcher developed instrument titled: "Married Men's Perception of the Influence of Dysmorphobia on Marital Consummation Scale" (MMPIDMCS) was used for data collection. The instrument was validated by the researcher's supervisor, one expert in Counselling Psychology and another expert in Measurement and Evaluation. The reliability of the instrument was found to be 0.78 using test re-test method. Mean and standard deviation were used to answer the research questions while the independent samples t-test was used to test the hypotheses at 0.05 level of significance. The result of the study revealed that the married men in Rivers South East Senatorial District tend to have positive perception of the influence of dysmorphobia on marital consummation and that their perception on this regard differed significantly along the lines of age range, level of education,

locality, religiousness and socioeconomic status. The study recommended that married men in Rivers South East Senatorial District should seek professional help from professional counsellors on the need to develop unconditional self-love in order to to boost the libido for their spouses.

Keywords: Dysmorphobia, Demographic Variable, Marital Consummation, Spouse, Age Range

Introduction

Marital consummation occupies a pride of place in our society. It is the imprimatur of matrimony. It is the sexual enjoyment that cements marital bonds. Marital consummation as a phenomenon of interest encases the entirety of what couples do to gratify their sexual needs in marriage. People marry for various reasons; one of which is sexual gratification. Sex within the context of marriage usually involves lovely erotic plays that accommodate intromission or copulation without barrier and culminate into orgasm for one or both parties. Its relevance in human societies therefore cannot be over emphasized (Stechler & Henton, 2022).

Men generally tend to look out for sexually captivating females endowed with lovely breasts, soft and well developed body parts, tender thighs, appetizing hands and legs and attractive buttocks. Females on their part tend to be captivated by macho features. However, appearance in this context could be deceptive as it can only guarantee the facial aspect of the validity of marital consummation leaving the content, construct and criterion aspects to chance. And this is worrisome considering the fact that some females with facial validity of marital consummation may lack; content, construct and criterion aspects of the validity of marital consummation and vice versa (Ryding & Kuss, 2019). This can pose a problem of reliability and usability when it comes to marital consummation in the area.

Perception as a phenomenon of interest is the way something is comprehended, regarded and interpreted. It is a notion as well as an interpretation based impression and expression. Perception is sensation via the five sense organs and as such a decisive phenomenon. Being preoccupied with perceived flaws amongst females ripe for marital consummation is deleterious and/or disastrous as it can make the females in question appear like bumpkins. It can as well culminate into dysmosphobia (Nwankwo, 2013). This makes the study a crucial one.

Dysmorphobia is a constellation of continual irrational and illogical fears about deformity. Body dysmorphic disorder (BDD), occasionally nonetheless called dysmorphophobia, is a mental disorder characterized by using the obsessive concept that a few component of one's personal frame element or appearance are

critically unsuitable and therefore warrants tremendous measures to hide or restore them. It is pertinent to note that in BDD's delusional version, the flaw is imagined. If the flaw is actual, its significance is significantly exaggerated. Either way, feelings about it are pervasive and intrusive, and may occupy numerous hours a day, inflicting excessive distress and impairing one's daily activities. BDD is assessed as a somatoform disorder, and the DSM-5 categorizes BDD inside the obsessive–compulsive spectrum, and distinguishes it from anorexia nervosa (Bjornsson et al., 2010 cited in Kpea, 2023).

Ramphul and Mejias (2018) defined body dysmorphic sickness as an intellectual fitness situation in which an individual cannot stop thinking about one or more perceived defects or flaws in his/her appearance — a flaw that appears minor or cannot be seen by others. But the individual could feel so embarrassed, ashamed and stressed out that he or she can avoid many social gatherings. When one has body dysmorphic disorder, he or she becomes intensely aware of his/her look and frame photo, repeated checking of reflect, grooming or searching for reassurance, occasionally for many hours each day. The perceived flaw and the repetitive behaviors causes widespread misery and impact their capability to carry on with daily existence (Ryding & Kuss, 2019).

Body dysmorphic sickness usually would not get higher on its personal. If left untreated, it could worsen through the years, give rise to tension, tremendous scientific payments, intense despair, and even suicidal mind and conduct (Ryding & Kuss, 2019). Body dysmorphic disorder is estimated to affect from 0.7% to 2.4% of the populace. It usually starts off during formative years and impacts both men and women. The BDD subtype muscle dysmorphia (deformity or abnormality in the size or shape of the muscle), perceiving the frame as too small, impacts mainly adult males. Besides considering it, one repetitively tests and compares the perceived flaw, and can undertake uncommon routines to keep away from social touch that exposes it. Fearing the stigma of arrogance, one usually hides the preoccupation (Ryding & Kuss, 2019).

Dislike of one's appearance is not unusual, but individuals with BDD have severe misperceptions about their bodily look. The bodily area of cognizance can be almost any and is typically face, hair, and pores and skin. In addition, a couple of areas may be focused on concurrently. A subtype of body dysmorphic disease is bigorexia (anorexia reverse or muscle dysphoria). Many females try to find dermatological remedy or cosmetic surgical procedure, which commonly do now not resolve their distress. On the alternative hand, attempts at self-remedy, as by pores and skin choosing, can create lesions wherein none previously existed (Ryding & Kuss, 2019).

Most times, one experiencing BDD ruminates over the perceived bodily disorder numerous hours each day or longer, uses either social avoidance or camouflaging with cosmetics or apparel, repetitively examines the deformity, compares it to that of other human beings, and can often seek for verbal reassurances. One might sometimes keep away from mirrors, repetitively alternate clothes, groom excessively, or restrict

consumption of food. Psychological problems that can originate from body dysmorphic disorder include; low self-esteem, social isolation, melancholy, suicidality, anxiety disorders, along with social anxiety ailment (social phobia), obsessive-compulsive disorder, eating disorders, substance misuse, health issues from behaviors together with skin selecting and physical ache or risk of disfigurement because of repeated surgical interventions (Vanali, 2015).

Marital consummation is sexual gratification enjoyed by married persons. It is the mutual sexual enjoyment of couples. It is all about enjoying one's spouse sexually. It is a way of savoring marital union. Hardon (2015) espoused that in the context of marriage, consummation means the actualization of marriage. It is the first act of sexual intercourse after marriage among a husband and spouse. Consummation is specifically applicable underneath canon regulation, in which failure to consummate a marriage is a ground for divorce or an annulment. Bernstein (2010) cited in Kpea (2023) disclosed that in many traditions and statutes of civil or religious regulation, the consummation of a marriage, often known as without a doubt consummation, is the primary (or first formally credited) act of sexual intercourse between human beings, following their marriage to each other. The definition of consummation usually refers to penile-vaginal sexual penetration, but some non-secular doctrines maintain that there may be an extra requirement that no birth control ought to be used. Consummation is likewise applicable inside the case of a common regulation marriage. The importance of consummation has brought about the development of numerous bedding rituals. In addition to those formal and literal usages, the term also exists in casual and much less precise usage to consult a sexual landmark in relationships of various depth and duration (Bernstein, 2010).

This study is anchored on Body Dysmorphic Theory by Wihelm and Nezigoglu (2002). Wilhelm and Nezigoglu (2002) observed that body dysmorphic theory hinges on the cognitive model for obsessive compulsive ailment (OCD). The theorists developed a model for body dysmorphic ailment (BDD) that emphasized on bodily appearance appraisal and cognitive processing. They theorized that body image disturbance is associated with maladaptive ideals and changed interpretations of looks.

Some empirical evidence related to this study were carried out. Scott et al. (2010) investigated the influence of dysmorphobia on marital consummation based on age range. The finding of the study revealed that married (versus unmarried) was related to reduced threat of first onset of maximum intellectual disorders in both genders irrespective of age, but for substance use problems this decreased chance was stronger amongst females, and for despair and panic sickness it was confined to males. Being previously married (versus stably married) was associated with extended hazard of all disorders in both genders irrespective of age range, but for substance use problems this increased hazard was stronger among females and for depression it was more potent amongst guys.

Sreedhari et al. (2014) investigated the implications of marriage structure for working men's attitudes, beliefs, and behaviors towards the suitability of deformed women for marital consummation based on age range. The result revealed that marriage structure significantly influenced men's work place attitude, beliefs and behaviour towards the suitability of deformed women for marital consummation based on age range. Athallah et al. (2016) examined married men's perception of the influence of dymorphobia on marital consummation based on age range. The researchers gathered data from 77 purposively selected men whose wives had visible deformities. The result revealed that married men's perception of the influence of dymorphobia on marital consummation differed significantly based on age range. It was further revealed that the respondents usually evaluated their sufferers and their partners in the context of tradition and check distressing sexual signs no matter whether or not they were identified disorder.

Oputa (2022) investigated extra marital behaviours and family instability among marriedpersons in Awka schooling sector, Anambra State based on Level of education. The primary finding of the study indicated that both married men and women exhibited diverse styles of greater marital behaviours based on level of education, it additionally confirmed that inability of husbands in providing own family wishes, husband starting up sex constantly among others have been factors answerable for exhibition of more marital behaviours among couples, and that there is a great relationship between extra marital behaviours and circle of relatives instability, among others.

Egenti et al. (2022) investigated the relationship among greater marital behaviours and own family instability among married humans in Owerri Education Zone, Imo State based on level of education. The primary finding of the study indicated that the married women and men exhibited various sorts of greater marital behaviours, it additionally showed that incapacity of husbands in providing family needs, husband starting up sex continually amongst others had been factors responsible for exhibition of greater marital behaviours among couples, and that there may be a considerable relationship between extra marital behaviours and circle of relatives instability, amongst others. Furthermore, level of education was not found to significantly influence married men's perception of dysmorphobia on marital consummation.

Atallah et al. (2016) examined Ethical and Sociocultural Aspects of Sexual Function and Dysfunction in Both Sexes based on locality. The result revealed that married men's perception of dysmorphobia on marital consummation does not differ significantly based on locality. Stechler and Henton (2022) explored how ladies with BDD make felt about body intimacy inside the context of modern-day partner relationships based on locality. The study demonstrated how appearance-associated worries filtered out into the cognitive, behavioural, and emotional inter subjective areas of bodily intimate partnerships. It was further revealed that the ensuing shame or trauma differed significantly based on locality and can be controlled through disengagement or dissociation.

Perception of dysmorphobia on marital consummation in Rivers South East Senatorial District is a serious matter as it can make or mar marital relationships in the area. This is so because perception can trigger positive or negative sexual action and reaction. To get valid, reliable and usable information on the issue under investigation therefore; it is pertinent to examine the perception of married men on this regard as they have the needed sexual experience. The investigation on the influence of dysmorphobia on marital consummation in Rivers South East Senatorial District of Rivers State was deemed imperative based on the established background.

Statement of the Problem

Body dysmorphic disorder is prevalent in Rivers South East Senatorial District. It is not uncommon to see couples complaining about the bodily flaws of their partners. Some married persons in the area appear to be having issues with their partner over marital consummation given the identification, interpretation and magnification of existent flaws and this is what warranted the researcher to conduct the study. In Rivers South East Senatorial District, much value is attached to beauty and sexuality when it comes to marital consummation. Body structure is considered by both men and women in the choice of a partner which affects their sexual arousal. Body dysmorphic disorder is responsible for many men either marrying late or having extra marital affairs especially when their wives fall out of shape due to child bearing and other psychological factors.

Body dysmorphic disorders can trigger perceptual problems when it comes to identification, interpretation and organization of their suitability for marital consummation. Their common areas of defect, blemish or deformity include but are not limited to; the eye, ears, nostril, facial discoloration, micro or hydrocephalus based skull deviation, malformed hands and legs inter alia. The defects are usually obvious and difficult to conceal making its possessors to fall short of the sexual ideals based on social standards. This can create psychological problems for affected or defected persons most especially with regards to matrimony devoid of acrimony. Dysmorphobia is not something to be taken lightly as it can culminate into obsession, stress, distress, rejection, ejection, dejection, self-abuse, substance abuse, husband abuse, wife abuse, inferiority complex, paraphilic and suicidal tendencies at the detriment of the individual and the society. Body dysmorphobia is a one major reason for marital dissatisfaction and divorce. It is against this backdrop that the study investigate the married men's perception of the influence of dysmorphobia and demographic variables on marital consummation with their spouses in Rivers South East Senatorial District.

Aim and Objectives of the Study

The aim of the study was to investigate married men's perception of the influence of dysmorphobia and demographic variables on marital consummation with their spouses in Rivers South East Senatorial District.

Specifically, the study intended to investigate:

1. Married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range;
2. Married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education;
3. Married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality;
4. Married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status.

Research Questions

The study was guided by the following research questions:

1. What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range?
2. What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education?
3. What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality?
4. What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status?

Hypotheses

The study was guided by the following null hypotheses tested at 0.05 level of significance:

1. There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range.
2. There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education.
3. There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality.

4. There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status.

Methodology

The study adopted descriptive survey research design. Maduabum (2020) defined descriptive survey design as that concerned with the state of things. It collects data on a phenomenon of interest and describes it in a systematic way. Its focus is on the trend of things. It does not involve the manipulation of variables. It reports things the way they are for enlightenment purposes. The design was appropriate because it aided the researcher investigate married men's perception of the influence of dysmorphobia and demographic variables on marital consummation with their spouses in Rivers South East Senatorial District.

The population of the study comprised the entire married men in Rivers South East Senatorial District estimated to be 11,700 as at September 2023. The teeming population of married persons in the area was the guarantee of adequate sample size that made the researcher to conduct the study among the population.

The sample size of this study comprised 400 married men. The sample determined via Taro Yamane computation which gave 387. However, the sample figure was increased to 400 to ensure adequate representation of the population. The cluster and purposive sampling techniques were used to constitute the sample of the study. Cluster sampling deals with randomized selection of intact groups. The researcher sample from intact groups of married men in: Andoni, Eleme, Gokana, Khana, Opobo–Nkoro, Oyigbo and Tai. Married men whose wives were dysmorphic were purposively selected from each of the Local Government Areas in Rivers South East Senatorial District. A total of 56 married men were selected from each of the Local Government Areas that make up Rivers South East senatorial district except for Gokana were 64 married persons were selected because of the presence of more married men whose wives were dysmorphic. The technique ensured better representation of the population.

The instrument for data collection was a researcher developed modified four point Likert rating scale titled: "Married Men's Perception of Dysmorphobia on Marital Consummation Scale" (MMPDMCS). The instrument was made up of two sections designated sections A and B. Section A elicited the bio-data of the respondents such as age, level of education, location, religious status and socioeconomic background. The section B on it's part dealt with the influence of dysmorphobia on marital consummation. This section was made up of 20 item statements; the 20 item statements were developed in five blocks of four item statements each. The response scale for section B was a four point modified Likert rating scale of; Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD) assigned numerical values of 4, 3, 2 and 1 for positively keyed

items and 1, 2, 3, and 4 for negatively keyed items. The minimum score for section B was 20 while the maximum score was 80.

The instrument was tested for reliability through a test-retest method, with a reliability coefficient of r = 0.78, ascertained through the Pearson Product Moment Correlation (PPMC) statistic. The copies of the questionnaire were administered to and retrieved from the respondents at their residences across the different Local Government Areas of the Rivers South East Senatorial District and the selected communities used for the study. The total of 400 copies of the questionnaire administered and 400 copies retrieved were properly filled, and thus used for further analysis.

Mean and standard deviation were used to answer the research questions while the independent samples t-test was used to test the hypotheses at 0.05 level of significance. In answering the research questions, a criterion mean of 2.5 was set for the item statements; any item statement with a mean score below 2.5 was deemed to be disagreed upon by the respondents while any item statement above 2.5 was deemed to be agreed upon by the respondents. Concomitantly, mean scores above 2.5 were deemed to evince positive perception of influence dymorphobia on marital consummation. The socioeconomic status of the respondents was determined using their income level which could be high or low.

Results

Research Question 1: What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range?

Table 1: Mean Score Analysis of the Perception of Married men on the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District based on age range

S/N	Items	Above 50 years N 150			Below 50 years N 250		
		X	S.D	Result	x	S.D	Result
1.	My spouse ugly body reduces foreplay among us during sex	2.1	1.1	D	3.7	1.2	A
2.	Shapeless appearance of one's body reduces marital sex life	3.5	1.0	A	2.0	1.0	D
3.	Being ashamed of one's part of the body leads to low sex drive	3.0	1.2	A	3.9	1.1	A
4.	Belief that people see one as an ugly person affects sexual communication	2.1	1.1	D	3.6	1.2	A
5.	Being obsessed with one's flaws induces secondary impotence among married males	3.5	1.0	A	3.6	1.2	A
6.	Having a strong belief that my partner talks about my flaws makes me to have weak erection	2.1	1.1	D	3.9	1.1	A
7.	Having perfectionistic tendencies makes sex less enjoyable	3.0	1.2	A	2.0	1.0	D

S/N	Items	Above 50 years N 150			Below 50 years N 250		
		X	S.D	Result	x	S.D	Result
8.	The fear of giving birth to a deformed child inhibits intimacy	3.5	1.0	A	3.7	1.2	A
9.	Going for corrective surgeryreduces sex drive	2.1	1.1	D	2.0	1.0	D
10.	Being obsessed about one's poor appearance gives rise to poor sexual performance	3.5	1.0	A	3.9	1.1	A
11.	Feeling bad about one's appearance triggers masturbation	2.1	1.1	D	3.6	1.2	A
12.	Trying to cover up one's bodily flaws leads to poor sexual communication	3.0	1.2	A	3.7	1.2	A
13.	The belief that one's sexual partner is ugly leads to sexual dissatisfaction	2.1	1.1	D	3.6	1.2	A
14.	The belief that one is ugly triggers quick ejaculation	1.9	1.1	D	3.9	1.1	A
15.	Comparing oneself with others leads to sexual underperformance	3.0	1.2	A	2.0	1.0	D
	Grand total	40.5	16.5	A	49.1	16.6	A
	Grand Average	**2.7**	**1.1**	A	**3.3**	**1.1**	A

Table 1 above shows the perception of married men on the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range. An overview of the table revealed that the married men above 50 years of age had a grand mean score of 40.5 and a grand average of 2.7 while the married men below 50 years of age had a grand mean of 49.1 and a grand average of 3.3 .This shows that the married men below the age of 50 perceived the influence of dysmorphobia on marital consummation more positively than their counterparts aged 50 and above.

Research Question 2: What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education?

Table 2: Mean Score Analysis of the Perception of Married men on the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Level of Education

S/N	Items	Degree Holders N 104			Non Degree Holders 296		
		X	S.D	Result	X	S.D	Result
1.	My spouse ugly body reduces foreplay among us during sex	3.6	1.0	A	3.9	1.0	S
2.	Shapeless appearance of one's body reduces marital sex life	3.5	1.0	A	3.3	1.1	A
3.	Being ashamed of one's part of the body leads to low sex drive	3.6	1.1	A	3.9	1.0	A
4.	Belief that people see one as an ugly person affects sexual communication	3.3	1.1	A	3.3	1.1	A
5.	Being obsessed with one's flaws induces secondary impotence among married males	3.3	1.1	A	3.9	1.0	A

S/N	Items	Degree Holders N 104			Non Degree Holders 296		
		X	S.D	Result	X	S.D	Result
6.	Having a strong belief that my partner talks about my flaws makes me to have weak erection	3.5	1.0	A	3.6	1.2	A
7.	Having perfectionistic tendencies makes sex less enjoyable	3.6	1.0	A	3.2	1.0	A
8.	The fear of giving birth to a deformed child inhibits intimacy	3.5	1.0	A	3.3	1.1	A
9.	Going for corrective surgery reduces sex drive	3.3	1.1	A	3.6	1.2	A
10.	Being obsessed about one's poor appearance gives rise to poor sexual performance	3.6	1.0	A	3.2	1.0	A
11.	Feeling bad about one's appearance triggers masturbation	3.6	1.0	A	3.6	1.2	A
12.	Trying to cover up one's bodily flaws leads to poor sexual communication	3.3	1.1	A	3.2	1.0	A
13.	The belief that one's sexual partner is ugly leads to sexual dissatisfaction	3.6	1.0	A	3.3	1.1	A
14.	The belief that one is ugly triggers quick ejaculation	3.3	1.1	A	3.2	1.0	A
15.	Comparing oneself with others leads to sexual underperformance	3.5	1.0	A	3.6	1.2	A
	Grand total	52.1	15.6	A	45.3	16.2	A
	Grand Average	**3.5**	**1.0**	**A**	**3.0**	**1.1**	A

Table 2 above shows the perception of married men on the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education. An overview of the table revealed that the married men with degrees had a grand mean score of 52.1 and a grand average of 3.5 while the married men without degrees had a grand mean of 45.3 and a grand average of 3.0. This shows that the married men with degrees perceived the influence of dysmorphobia on marital consummation more positively than their counterparts without degrees.

Research Question 3: what is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality?

Table 3: Mean Score Analysis of the Perception of Married men on the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Locality

S/N	Items	Urban			Rural		
		X	S.D	Result	X	S.D	Result
1.	My spouse ugly body reduces foreplay among us during sex	3.5	1.1	A	2.2	1.1	D
2.	Shapeless appearance of one's body reduces marital sex life	2.9	1.2	A	2.1	1.2	D
3.	Being ashamed of one's part of the body leads to low sex drive	3.2	1.2	A	2.4	1.2	D
4.	Belief that people see one as an ugly person affects sexual communication	3.3	1.1	A	2.5	1.2	A
5.	Being obsessed with one's flaws induces secondary impotence among married males	3.5	1.1	A	2.2	1.1	D

S/N	Items	Urban			Rural		
		X	S.D	Result	X	S.D	Result
6.	Having a strong belief that my partner talks about my flaws makes me to have weak erection	3.2	1.2	A	2.4	1.2	D
7.	Having perfectionistic tendencies makes sex less enjoyable	2.9	1.2	A	2.1	1.2	D
8.	The fear of giving birth to a deformed child inhibits intimacy	3.3	1.1	A	2.5	1.2	A
9.	Going for corrective surgeryreduces sex drive	3.3	1.1	A	2.1	1.2	D
10.	Being obsessed about one's poor appearance gives rise to poor sexual performance	2.9	1.2	A	2.4	1.2	D
11.	Feeling bad about one's appearance triggers masturbation	3.2	1.2	A	2.2	1.1	D
12.	Trying to cover up one's bodily flaws leads to poor sexual communication	3.5	1.1	A	2.5	1.2	A
13.	The belief that one's sexual partner is ugly leads to sexual dissatisfaction	2.9	1.2	A	2.2	1.1	D
14.	The belief that one is ugly triggers quick ejaculation	3.5	1.0	A	2.4	1.2	D
15.	Comparing oneself with others leads to sexual underperformance	3.3	1.1	A	2.1	1.2	D
	Grand total	48.4	17.1	A	34.3	17.6	D
	Average	3.2	1.1	A	2.3	1.2	D

S/N	Items	Urban			Rural		
		X	S.D	Result	X	S.D	Result
1.	My spouse ugly body reduces foreplay among us during sex	3.5	1.1	A	2.2	1.1	D
2.	Shapeless appearance of one's body reduces marital sex life	2.9	1.2	A	2.1	1.2	D
3.	Being ashamed of one's part of the body leads to low sex drive	3.2	1.2	A	2.4	1.2	D
4.	Belief that people see one as an ugly person affects sexual communication	3.3	1.1	A	2.5	1.2	A
5.	Being obsessed with one's flaws induces secondary impotence among married males	3.5	1.1	A	2.2	1.1	D
6.	Having a strong belief that my partner talks about my flaws makes me to have weak erection	3.2	1.2	A	2.4	1.2	D
7.	Having perfectionistic tendencies makes sex less enjoyable	2.9	1.2	A	2.1	1.2	D
8.	The fear of giving birth to a deformed child inhibits intimacy	3.3	1.1	A	2.5	1.2	A
9.	Going for corrective surgeryreduces sex drive	3.3	1.1	A	2.1	1.2	D
10.	Being obsessed about one's poor appearance gives rise to poor sexual performance	2.9	1.2	A	2.4	1.2	D
11.	Feeling bad about one's appearance triggers masturbation	3.2	1.2	A	2.2	1.1	D
12.	Trying to cover up one's bodily flaws leads to poor sexual communication	3.5	1.1	A	2.5	1.2	A
13.	The belief that one's sexual partner is ugly leads to sexual dissatisfaction	2.9	1.2	A	2.2	1.1	D
14.	The belief that one is ugly triggers quick ejaculation	3.5	1.0	A	2.4	1.2	D
15.	Comparing oneself with others leads to sexual underperformance	3.3	1.1	A	2.1	1.2	D
	Grand total	48.4	17.1	A	34.3	17.6	D
	Average	3.2	1.1	A	2.3	1.2	D

Table 3 above shows the perception of married men on the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality. An overview of the table revealed that the married men in urban areas had a grand total of 48.4 and a grand average of 3.2 while the married men in rural areas had a grand total of 34.3 and a grand average of 2.3. This shows that the married men in urban

areas perceived the influence of dysmorphobia on marital consummation more positively than their counterparts in rural areas.

Research Question 4: What is married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status?

Table 4: Mean Score Analysis of the Perception of Married men on the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Socioeconomic Status

S/N	Items	High SES N 127			Low SES 273		
		X	S.D	Result	X	S.D	Result
1.	My spouse ugly body reduces foreplay among us during sex	3.6	1.0	A	3.9	1.0	A
2.	Shapeless appearance of one's body reduces marital sex life	3.5	1.0	A	3.3	1.1	A
3.	Being ashamed of one's part of the body leads to low sex drive	3.6	1.1	A	3.9	1.0	A
4.	Belief that people see one as an ugly person affects sexual communication	3.3	1.1	A	3.3	1.1	A
5.	Being obsessed with one's flaws induces secondary impotence among married males	3.3	1.1	A	3.9	1.0	A
6.	Having a strong belief that my partner talks about my flaws makes me to have weak erection	3.5	1.0	A	3.6	1.2	A
7.	Having perfectionistic tendencies makes sex less enjoyable	3.6	1.0	A	3.2	1.0	A
8.	The fear of giving birth to a deformed child inhibits intimacy	3.5	1.0	A	3.3	1.1	A
9.	Going for corrective surgery reduces sex drive	3.3	1.1	A	3.6	1.2	A
10.	Being obsessed about one's poor appearance gives rise to poor sexual performance	3.6	1.0	A	3.2	1.0	A
11.	Feeling bad about one's appearance triggers masturbation	3.6	1.0	A	3.6	1.2	A
12.	Trying to cover up one's bodily flaws leads to poor sexual communication	3.3	1.1	A	3.2	1.0	A
13.	The belief that one's sexual partner is ugly leads to sexual dissatisfaction	3.6	1.0	A	3.3	1.1	A
14.	The belief that one is ugly triggers quick ejaculation	3.3	1.1	A	3.2	1.0	A
15.	Comparing oneself with others leads to sexual underperformance	3.5	1.0	A	3.6	1.2	A
	Grand total	52.1	15.6	A	45.3	16.2	A
	Average	**3.5**	**1.0**	A	**3.0**	**1.1**	A

Table 4 above shows the perception of married men on the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status. An overview of the table revealed that the married men of high socioeconomic status had a grand total of 52.1 and a grand average of 3.5 while the married men of low socioeconomic status had a grand total of 45.3 and a grand average of 3.0. This shows that the married men of high socioeconomic status perceived the influence of dysmorphobia on marital consummation more positively than their counterparts of low socioeconomic status.

Hypothesis 1: There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on age range.

Table 5: Independent Samples t-test Analysis of the Significance of the Difference in the Mean Rating of Married Men's Perception of the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Age Range.

Age Range	n	X	S.D	D.F	Standard Error	t-cal	t-cri	Remark
Above 50 years	150	2.7	1.1					
Below 50 years	250	3.3	1.1	398	0.114	5.263	1.980	Significant

Table 5 above shows the significance of the extent to which married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District differs based on age range. An overview of the table revealed that the calculated t-value of 5.263 is above the critical t-value of 1.980. Thus the null hypothesis is rejected. The interpretation is that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on age range.

Hypothesis 2: There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on level of education.

Table 6 Independent Samples t-test Analysis of the Significance of the Difference in the Mean Rating of Married Men's Perception of the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Level of Education

Level of Education	n	X	S.D	D.F	StandardError	t-cal	t-cri	Remark
Degree Holders	104	3.5	1.0					
Non Degree Holders	296	3.0	1.1	398	0.117	4.27	1.980	significant

Table 6 above shows the significance of the extent to which married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District Differs Based on level of education. An overview of the table revealed that the calculated t-value of 4.27 is above the critical t-value of 1.980. Thus the null hypothesis is rejected. The interpretation is that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on level of education.

Hypothesis 3: There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on locality.

Table 7 Independent Samples t-test Analysis of the Significance of the Difference in the Mean Rating of Married Men's Perception of the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Based on Locality

Locality	n	X	S.D	D.F	Standard Error	t-cal	t-cri	Remark
Urban	101	3.2	1.1					Significant
Rural	299	2.3	1.2	398	0.130	6.923	1.980	

Table 7 above shows the significance of the extent to which married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District Differs Based on locality. An overview of the table revealed that the calculated t-value of 6.923 is above the critical t-value of 1.980. Thus the null hypothesis is rejected. The interpretation is that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on locality

Hypothesis 4: There is no significant difference in the mean ratings of married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District based on socioeconomic status.

Table 8: Independent Samples t-test Analysis of the Significance of the Difference in the Mean Rating of Married Men's Perception of the Influence of Dysmorphobia on Marital Consummation with their Spouses in Rivers South East Senatorial District Differs Based on Socioeconomic Status

Socioeconomic Status	n	X	S.D	D.F	Standard Error	t-cal	t-cri	Remark
High	127	3.5	1					Significant
Low	273	3.0	1.21	398	0.111	4.51	1.980	

Table 8 above shows the significance of the extent to which married men's perception of the influence of dysmorphobia on marital consummation with their spouses in Rivers South East Senatorial District Differs Based on socioeconomic status. An overview of the table revealed that the calculated t-value of 4.51 is above the critical t-value of 1.980. Thus the null hypothesis is rejected. The interpretation is that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on socioeconomic status.

Discussion of Findings

Perception of the Influence of Dysmorphobia on Marital Consummation Based on Age Range

The result of research question one (Table 1) revealed that the married men below the age of 50 perceived the influence of dysmorphobia on marital consummation more positively than their counterparts aged 50 and above. Furthermore, the finding of hypothesis one (Table 5) revealed that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on age range. This shows that age indeed is a significant determinant of married men's perception of the influence of dysmorphobia on marital consummation. The difference is that married men below the age of 50 perceived the influence of dysmorphobia on marital consummation the more. This could be due to youthful exuberance and allied preference. It is noteworthy that this result agrees with the finding of Scott et al. (2010) which revealed age differences in the institutions among marital popularity and onset of depressive and substance use problems. The result equally concatenates with the finding of Ivenuik et al. (2014) which revealed that perception of the influence of dysmorphobia on marital consummation of the studied couples differed significantly based on age range. This result equally gives credence to the finding of Sreedhari et al. (2014) which revealed that marriage structure significantly influenced men's work place attitude, beliefs and behaviour towards the suitability of deformed women for marital consummation based on age range.

Perception of the Influence of Dysmorphobia on Marital Consummation Based on Level of Education

The result of research question two (Table 2) revealed that the married men with degrees perceived the influence of dysmorphobia on marital consummation more positively than their counterparts without degrees. The finding of hypothesis two (Table 6) revealed that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on level of education. This difference could be due to self-esteem, exposure and composure. Married men with degrees have higher chances of marrying sexually attractive females. This is so because most of such males are of the high socioeconomic status and as such held in high esteem in the society. Marrying a deformed person in most cases is not an option for them; however there are exceptions. This result consolidates the finding of Oputa (2022) which revealed that both married men

and women exhibited diverse styles of greater marital behaviours based on level of education, it additionally confirmed that inability of husbands in providing own family wishes, husband starting up sex constantly among others have been factors answerable for exhibition of more marital behaviours among couples, and that there is a great relationship between extra marital behaviours and circle of relatives instability, among others. The result disagrees with the finding of Egenti, Achi and Ikechebelu (2022) which revealed that level of education was not found to significantly influence married men's perception of dysmorphobia on marital consummation. This could be due to differences in attitude. Education per se does not necessarily translate to positive or negative perception of the influence of dysmorphobia on marital consummation. However, the mindset or mentality of its recipients does.

Perception of the Influence of Dysmorphobia on Marital Consummation Based on Locality

The result of research question three (Table 3) revealed that the married men in urban areas perceived the influence of dysmorphobia on marital consummation more positively than their counterparts in rural areas. The finding of hypothesis three (Table 7) revealed that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differs significantly based on locality. It appears that there is high level of stigma towards deformed or malformed females in urban areas. Married males in urban areas seem to have urbane or mudane feminine specifications. It is worthy of note that the result agrees with the finding of Mohan and Gangotri (2016) which revealed that gender and academic qualification are crucial factors that determine perception of marital consummation based on locality. However the result disagrees with the finding of Atallah, Agbakwu, Rosenbaum, Abdo, Byers, Graham, Nobre, Wylie and Brotto (2016) which revealed that married men's perception of dysmorphobia on marital consummation does not differ significantly based on locality. It was suggested that clinicians examined their patients and their partners within the context of way of life and assess distressing sexual signs and symptoms regardless of whether or not they are identified dysfunctions. Both clinicians and researchers need to broaden culturally touchy assessment skills and units. There were some of practices with complex moral troubles among the respondents. They include; (eg, lady genital cutting, girl and male beauty genital surgery). It is worthy of note that the present result agrees with the finding of Stechler and Henton (2022) which revealed that appearance-associated worries filtered out into the cognitive, behavioural, and emotional inter subjective areas of bodily intimate partnerships. It was further revealed that the ensuing shame or trauma differed significantly based on locality and can be controlled through disengagement or dissociation. Locality to a high extent therefore is integral to perception of influence of dysmorphobia on marital consummation.

Perception of Dysmorphobia on Marital Consummation Based on Socio-economic Status

The result of research question four (Table 4) revealed that the married men of high socioeconomic status perceived the influence of dysmorphobia on marital consummation more positively than their counterparts of low socioeconomic status. The finding of

hypothesis five (Table 8) revealed that married men's perception of the influence of dysmorphobia on marital consummation with their spouse differed significantly based on socioeconomic status. The difference was that married men of high socioeconomic status perceived the influence of dysmorphobia the more. This result agrees with the finding of Maliki (2017) which revealed that socio-economic popularity considerably have an impact on possibilities in marriage accomplice's selection in terms of character developments, socio-economic status and bodily elegance. Men of high socioeconomic status can use their affluence to get the best women; hence their high taste when it comes to sexual partner.

Conclusion

Based on the findings of the study, the researcher concluded that on a general note the married men in Rivers South East Senatorial District have positive perception of the influence of dysmorphobia on marital consummation; this means that they are of the view that dysmorphobia affects their marital consummation a lot. Demographic variables such as age range, level of education, locality and socioeconomic status moderated the influence of dysmorphobia on marital consummation significantly. The difference was that married men below the age of 50, those with degrees, those in urban areas, religious married men and married men of high socioeconomic status had higher perception of the influence of dysmorphobia on marital consummation than their counterparts in the other part of the divide.

Implications for Counselling

a. There is need to integrate cognitive behavioral therapy into the counselling intervention for married men that have negative perception of the influence of dysmorphobia on marital consummation.
b. Counsellors working with married men in Rivers South East Senatorial District should be abreast with family system therapy to enable them render the desired sex and marital counselling effectively.

Recommendations

The study recommended the following:

1. The married men below the age of 50 should seek professional help from counsellors on the needs to love one's spouse unconditionally in order to boost the libido of their spouses.
2. Married men in Rivers South East Senatorial District with degrees should be helped to develop more positive perception of the suitability of malformed women for sexual consummation using logo-therapeutic technique known as modification of attitude.
3. Married men in urban parts of Rivers South East Senatorial District should be reoriented using cognitive behavioral model of body dysmorphic disorder to help

them develop a more positive perception of the influence of dysmorphobia on marital consummation.

4. Married men of high socioeconomic status should be helped to develop more positive perception of the influence of dysmorphobia on marital consummation using family system therapy.

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