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Marital satisfaction and its associated factors at reproductive age women referred to health centers

Raziyeh Taghani, Akram Ashrafizaveh^{1,2}, Mahsa Ghanbari Soodkhori, Elham Azmoude^{1,2}, Maryam Tatari³

Abstract:

BACKGROUND: Marital satisfaction, as one of the elements of family health, is affected by various factors such as social norms, customs, and expectations. Sexual self-efficacy as one of the important aspects of female sexual affairs may be related to the marital relationship. The aim of this study was to evaluate the related factors of marital satisfaction in Torbat Heydariyeh, Iran.

METHODS: This research was a cross-sectional study performed on 350 married women in the reproductive age referred to health centers in Torbat Heydariyeh, Iran, in 2018. The data collection tools were Evaluation and Nurturing Relationship Issues, Communication, and Happiness Marital Satisfaction Questionnaire and a sexual self-efficacy questionnaire derived from Schwarzer general self-efficacy scale. The data were analyzed with Pearson's correlation coefficient and linear regression. A $P < 0.05$ was considered statistically significant.

RESULTS: The mean age of the participants was 30.85 ± 7.56 years. Most people had high sexual self-efficacy (51%) and relative and intermediate marital satisfaction (68%). There was also a significant relationship between sexual self-efficacy and marital satisfaction ($P = 0.001$). According to the linear regression test, only three variables of sexual self-efficacy, dyspareunia, and socioeconomic status explain 12% of the variance of marital satisfaction in women ($P < 0.05$).

CONCLUSION: The results indicated that sexual self-efficacy, dyspareunia, and socioeconomic status have significant relationship with marital satisfaction. Due to the significant relationship between sexual self-efficacy and marital satisfaction, some interventions to improve this aspect of sexual life may increase the satisfaction of individuals from marital life.

Keywords:

Dyspareunia, marital satisfaction, sexual self-efficacy, women of reproductive age

Introduction

Marital satisfaction, as one of the indicators of the quality of marriage, is a genuine feeling of pleasure, satisfaction, and joyfulness experienced by a husband and wife when they consider all aspects of their marriage. The state of adaptation between the expected situation and the current situation of an individual, in marital relations, would develop marital satisfaction which is the most important factor for the

durability of married life regarding the literature.^[1,2] Marital satisfaction actually indicates the interest and sympathy of couples toward each other and their positive attitude to being married.^[3] The family being immune from harms is the final result of increase in the level of satisfaction of marital life.^[1] However, on the other hand, social impairment and increased social deviations are the results of marital problems.^[4] Marital satisfaction is affected by several factors. For example, couples' sexual performance and satisfaction of sexual relations are considered one of the factors influencing

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Student Research Committee, Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran, ¹Department of Midwifery, School of Nursing and Midwifery, Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran, ²Health Sciences Research Center, Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran, ³Department of Public Health, School of Health, Torbat Heydariyeh University of Medical Sciences, Torbat Heydariyeh, Iran

Address for correspondence:

Mrs. Akram Ashrafizaveh, Department of Midwifery, School of Nursing and Midwifery, Torbat Heydariyeh University of Medical Sciences, Razi Street, Torbat Heydariyeh, Iran. E-mail: ashrafizaveh@yahoo.com

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marital satisfaction.^[5] Satisfaction of sexual relations is the preface of marital satisfaction.^[6] Satisfactory sexual relations are among the most important factors resulting family survival and health.^[7] Frotan and Milany demonstrate that among the applicants for divorce in Iran, 66.7% of men and 68.4% of women were dissatisfied of their sexual life.^[8] Most people involved in the treatment of sexual problems believe that sexual self-efficacy is essential for having a proper sexual function.^[9,10] Sexual self-efficacy is a multidimensional structure that includes each person's belief in their ability to manage sexual aspects of his or her life for more effective sexual function, being favorable to their sexual partner and an assessment of ability and self-efficacy in sexual behavior.^[11,12] Raising the level of sexual self-efficacy of couples causes many basic sexual problems solved.^[13] In this regard, several studies have evaluated these categories. For example, Vaziri *et al.* demonstrated that sexual self-efficacy has a significant relationship with marital satisfaction and sexual self-efficacy scores can predict marital satisfaction scores.^[14] However, researches and studies in this area are very limited, and most studies on marital satisfaction are in the Western countries. Therefore, considering the importance of marital satisfaction in promoting and developing the foundation of the family, this study was conducted to identify the effective factors on the marital satisfaction in women of reproductive age and perform efficient interventions to improve couples relationship in Torbat Heydariyeh Iran.

Methods

This cross-sectional study was performed on 350 married women in the reproductive age referred to health centers in Torbat Heydariyeh in 2018. The suitable sample size of the study was computed to be 324, assuming $\alpha = 0.05$, $\beta = 0.1$, and $r = 0.155$ based on pilot study findings and the use of the sample size formula in correlational studies. Finally, with considering the probability of a 10% drop, 356 women were selected as a final sample size.

The subjects were selected using available method from women referring to all the urban health centers considering the inclusion criteria. The sample size in each of the centers was based on the number of population covered.

The eligible women were informed about the purpose of the study. Furthermore, they were also ensured of the confidentiality of their data and signed written informed consent form. Then, they were asked to complete the questionnaire in a separate quiet room in the centers, after receiving health-care services.

The inclusion criteria to the study included individuals aged 18–45 years, currently married, and passing at least

1 year from a permanent marriage. If the couples have severe and critical conflicts or the woman was pregnant or in the first 6 months of lactation, or any of the couples suffer from chronic medical conditions that affect sexual function, they were not included in the study. In addition, people with drug abuse and addictions were also excluded.

Data collection tools were demographic characteristics, marital satisfaction, and sexual self-efficacy questionnaires.

Evaluation and Nurturing Relationship Issues, Communication, and Happiness Marital Satisfaction Questionnaire has 47 questions and 10 subscales (personality issues, Equalitarian Roles, Communication, conflict resolution, financial management, leisure activities, sexual relationship, children and Marriage, family and friends, and religious orientation). Each item scored on a 5-point Likert scale from 1 = strongly disagree to 5 = strongly agree.^[15] Scores on this scale range from 47 to 235 (47–84: strong dissatisfaction, 85–122: relative dissatisfaction, 123–160: moderate satisfactions, 161–198: high satisfaction, and 199–235: very high degree of satisfaction).^[16] In the present study, the reliability of this tool has been proved by a test–retest method.

Sexual self-efficacy was determined using Vaziri sexual self-efficacy questionnaire derived from Schwarzer general self-efficacy scale. This questionnaire has 10 items which are scored from 0 (not all correct) to 3 (completely correct). The score would be interpreted to three categories of low, moderate, and high sexual self-efficacy.^[14] In the present study, its reliability coefficient was 0.86 using a test–retest analysis.

The participants' economic status was divided into three groups (less than sufficient, sufficient, and more than sufficient) based on self-declaration.

Data analysis was performed using independent *t*-test, analysis of variance, and Pearson's correlation coefficient using SPSS statistical software version 16.0 (SPSS Inc., Released 2007. Chicago, IL, USA). In addition, to predict marital satisfaction based on demographic variables and sexual self-efficacy, a stepwise linear regression model was used.

Ethical considerations

The study was approved by the ethics committee of Torbat Heydariyeh University of Medical Sciences (code: IR.thums.Rec. 1396.41). In addition, for all participants, the objectives of the study were fully explained and informed consent form was completed.

Results

Finally, 350 participants were included in this study. Respondent's and spouse's age was 30.85 ± 7.56 and 36.05 ± 8.71 years, respectively. The duration of marriage was 10.61 ± 7.87 years and the average number of children was 1.66 ± 1.18 . The majority of women were homemakers (74.3%) and the level of their education was secondary school degree and diploma (41.1%). In addition, most of the participants (84%) were in the sufficient economic group.

In addition, according to the findings of the study, most people reported high sexual self-efficacy (51.2%) [Chart 1] and relative and average marital satisfaction (68%) [Chart 2].

Based on the results of Pearson's correlation test, there was no significant correlation between age, age of spouses, duration of marriage, and number of children with marital satisfaction ($P > 0.05$). However, sexual self-efficacy was significantly correlated with marital satisfaction ($r = 0.273$, $P = 0.001$) and all subscales ($P < 0.05$).

To predict marital satisfaction based on demographic variables and sexual self-efficacy, a stepwise linear regression model was used. In the last step, only sexual self-efficacy, dyspareunia, and economic situation with enough and more than enough income level were capable of predicting 12.1% variance of marital satisfaction [$P = 0.001$, Table 1].

Discussion

Marital satisfaction has a significant effect on individual's general health, life satisfaction, and sexual pleasure.^[17] In general, most participants had a relative and moderate marital satisfaction in the study. Similarly, Banaian *et al.*, Askarian *et al.*, Khazaeia *et al.*, and Anhang *et al.* also had relative marital satisfaction.^[18-21]

In addition, according to the findings of the study, most participants reported high sexual self-efficacy. Sexual self-efficacy is as approach which improves sexual

performance and as an effective factor in promoting and developing marital satisfaction.^[13]

Alirezai *et al.* also showed moderate sexual self-efficacy in her study.^[22] In addition, similar to the results of Zare *et al.* and Vaziri *et al.*, there was a relationship between sexual self-efficacy and marital satisfaction.^[7,14] This observation is consistent with other studies which showed there is a positive relationship between general self-efficacy and marital satisfaction.^[23-25] Since sexual self-efficacy is in a same line with general self-efficacy, the results of these studies are coordinated with current study. Higher self-efficacy increases the ability to manage challenging tasks and events and family conflicts.

After examining the regression model, only three variables of sexual self-efficacy, dyspareunia, and economic situation were able to predict the variance of marital satisfaction.

Consistent with these findings, Tavakol *et al.*, Mitchell *et al.*, and Smith and Pukall found a significant relationship between dyspareunia and marital satisfaction. Pain during intercourse reduces sexual satisfaction and may leads to marital dissatisfaction.^[6,26,27]

Furthermore, the findings are consistent with the results of Fathi and Azadian, Taghizadeh and Kalhori, and Archuleta *et al.*, who found that with increasing income, the level of satisfaction was increased.^[28-30] Economic problems actually affect the quality and stability of life and cause negative and emotional distress patterns among couples.^[31] The level of desirable income and economic prosperity by reducing anxiety and providing more and better access to resources and facilities creates conditions that cause more stable relationships and increase marital satisfaction.^[28]

Therefore, these three variables can be the aim of educational programs and interventions to promote and develop marital satisfaction.

However, since these three variables were only able to predict 12% variance in marital satisfaction, further

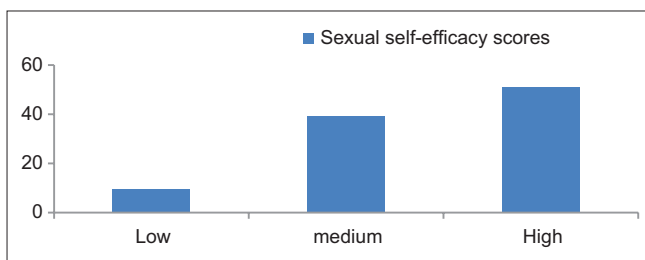


Chart 1: Sexual self-efficacy scores

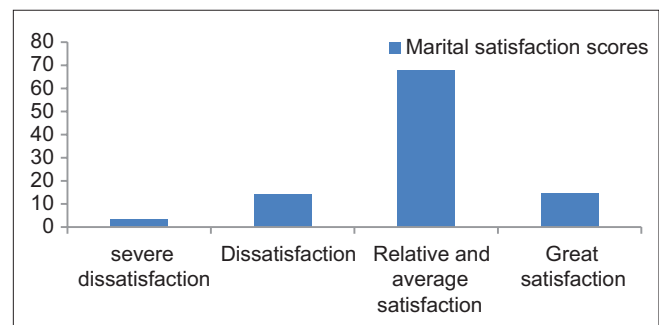


Chart 2: Marital satisfaction scores

Table 1: Marital satisfaction prediction based on background variables and sexual self-efficacy (last step)

Predictor variable	Nonstandardized coefficients		Standardized coefficients (β)	t	P
	SE	B			
Sexual self-efficacy	0.183	0.915	0.252	5.001	0.001
Dyspareunia	3.242	9.808	0.152	3.025	0.003
Economic situation (enough)*	4.427	12.432	0.176	2.808	0.005
Economic status (more than enough)*	6.667	24.577	0.231	3.686	0.001

*Reference group=Less than enough. SE=Standard error

studies are recommended to investigate other factors affecting marital satisfaction of women in this population.

In consistence with some studies, other variable such as age, age of their spouses, number of children, occupation, husband's occupation, duration of marriage, method of contraception, and levels of husband and wife education cannot predict marital satisfaction.

Conclusion

Higher sexual self-efficacy, better economic situation, and lack of sexual dysfunction (dyspareunia) may lead to marital satisfaction. The main limitation of this research was a convenience sample. Therefore, generalization should be done with caution. As well as this study was only on women. Similar researches are recommended to be conducted in other cities; furthermore, it is suggested that factors affecting the marital satisfaction among men to be conducted future researches are recommended to investigate and identify other factors affecting marital satisfaction.

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Conflicts of interest

There are no conflicts of interest.

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