Article

# Marital Satisfaction of Portuguese Families in Times of Social Lockdown

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#### **Abstract**

The COVID-19 pandemic represents a global threat and crisis situation, and its wide-reaching impact has also affected marital satisfaction. Dysfunction of the marital system puts the survival of the family unit at risk. This research aimed to determine the level of marital satisfaction of Portuguese families during the social lockdown and the association between the variables under study. A descriptive, exploratory study was conducted. During the social lockdown, 276 people of Portuguese nationality and residing in Portugal were recruited using nonprobabilistic convenience sampling. Marital satisfaction in the pandemic phase showed low values that may be associated with the social, economic, and political context experienced by the pandemic situation. Future research must be carried out in order to identify, prevent, and intervene in situations of violence. In addition, future research should explore not only marital satisfaction during the current pandemic but a more systemic assessment of marital relations during crises, expanding the impact of marital satisfaction in family functioning.

## **Keywords**

family, pandemics, conjugal status, coronavirus infections

# Marital Satisfaction in the Age of COVID-19

The outbreak of COVID-19 produced a dramatic change in family's routines (Lebow, 2020). The changes invaded the family system and gave rise to situations for which there are no previous models (Prime et al., 2020). Throughout our history, there have been other important moments of loss, ranging from wars to genocide and massive oppression to other pandemics, but there has never been an event so widespread and so interconnected throughout the world (Lebow, 2020).

Indeed, new concerns are now added to the multiplicity of preexisting roles of families, such as social confinement, restriction of social support, education at home, teleworking, financial concerns due to job loss, removal of families to reduce exposure to the virus, the physical and emotional contact of the household 24 hr a day, among many other aspects (Fisher et al., 2020). Never before such an event has been experienced, where the psychosocial effects and far-reaching implications of the virus have not yet been fully understood. Therefore, it can be assumed that the virus will be associated with changes not only in physical areas but also in relational areas. However, there is currently a lack of empirical evidence examining the impact of this pandemic on relationships and family life (Reizer et al., 2020) and, in particular, on marital satisfaction. With the current isolation measures demanded by COVID-19, whether single or in a relationship, love in the coronavirus era is a challenge (Hendrick & Hendrick, 2020). Specifically, these events can exacerbate preexisting problems in marriage or create new difficulties (Prime et al., 2020).

From the above, we questioned how the COVID-19 pandemic has affected intimate relationships. The existing literature is scarce, and little is known about this topic, particularly in the Portuguese context. What is known is that the dependence on intimate partners increased even more during the COVID-19 pandemic, raising questions about the pandemic's impact on intimate relationships (Williamson, 2021).

Given the present development framework, it is urgent to assess the level of marital satisfaction during the COVID-19 pandemic phase. Marital satisfaction is a multidimensional concept that comprises different aspects of the marital relationship, and it is a measure of the quality of the relationship of couples as assessed by subjective evaluation (Sayehmiri et al., 2020). It indicates the state in which men and women assess how satisfied they are with each other in their relationship (Kamal et al., 2018). For Narciso and Costa (1996), authors responsible for the Satisfaction Assessment Scale in Areas of Conjugal Life (EASAVIC), conjugal satisfaction is a

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multidimensional concept, which they divided into two distinct dimensions: the love dimension and conjugal functionality.

The first, the love dimension, refers to the feelings that the parties have among themselves, taking into account factors such as passion, intimacy, and commitment. The conjugal functionality dimension refers to the mode of organization considering aspects of the family and extra-family system (Narciso & Costa, 1996).

It should be noted that the stability of the family structure depends on the quality of the couple's relationship (Sayehmiri et al., 2020). In the marital relationship, satisfaction can contribute to the satisfaction of the other. Therefore, understanding the factors underlying satisfaction in relationships and marriages is important and can contribute to the general well-being of individuals and families (Kamal et al., 2018). Dysfunctional marital relationships or unsuccessful marriages threaten the mental health of couples and endanger the survival of the family unit (Sayehmiri et al., 2020). Although concern about how satisfied people feel in their marriage or relationship is not recent (Delatorre & Wagner, 2020; Du Bois et al., 2019; Kamal et al., 2018; Sayehmiri et al., 2020). This aspect is even more relevant at a time when the COVID-19 pandemic required couples to spend a lot of time together and depend mainly on each other for support during a major stressor that altered almost every aspect of daily life (Williamson, 2021).

Few studies analyze this problem in the light of the current context (Mousavi, 2020; Reizer et al., 2020; Williamson, 2021). There are no studies that analyze the theme in the Portuguese context, highlighting the relevance of this study. Observing prepandemic values, on a scale of 1-10, Portugal (2013 = 7.9, 2018 = 8.2) presented average values of satisfaction with personal relationships, close to the average value in the European Union (2013 = 7.8, 2018 = 7.9; Eurostat, 2018).

Considering the context of the country's demographic situation, in 2019, there was a slight decrease in the gross nuptiality rate, which went from 3.4 to 3.2 marriages per thousand inhabitants. The proportion of exclusively civil marriages has been increasing, as well as postponing the age of marriage. Since 2015, the sharp reduction in the number of Catholic marriages has been offset by the increase in civil marriages (Instituto Nacional de Estatística [INE], 2019). In fact, in 2018, the most recent year for which Eurostat released comparative data, Portugal's gross nuptiality rate registered the third lowest value (3.4‰; Eurostat, 2018). With regard to divorces, 20,421 divorces were decreed in 2019, 0.4% more than in 2018 (20,345). Between 2014 and 2019, the highest figure was in 2015, and the lowest figure was in 2018 and 2019 (INE, 2019).

Research related to marital satisfaction is central to working with families. In addition to assessing marital satisfaction during the current pandemic, this study examines its relationship with family Adaptation, Partnership, Growth, Affection, Resolve (APGAR), family cohesion, and adaptability. The use of family APGAR can be a strong ally in assessing family relationships and detecting risk factors that require intervention (Fernandes et al., 2020). Marital satisfaction is influenced by many factors such as education, socioeconomic status, love,

commitment, marital communication, conflict, gender, marriage duration, the presence of children, sexual relationships, personality, and division of labor (Delatorre & Wagner, 2020; Kamal et al., 2018; Sayehmiri et al., 2020). There is also growing evidence that each partner can conceptualize marital satisfaction differently (Kamal et al., 2018). On the other hand, it is also important to consider the connection and the mediating role of marital satisfaction on family cohesion and adaptability (Pedro et al., 2015). Family cohesion refers to the emotional bond between the family and its members, while family adaptability concerns the family's ability to change its leadership, rules, and roles in response to contextual and developmental demands (Olson, 2000; Pedro et al., 2015). Investigations have shown relationships between the dimensions of cohesion, adaptability, and other measures such as family and marital satisfaction (Jiménez et al., 2017).

A basic premise in systems theory is that moments of crisis and persistent challenges in life impact the whole family, and in turn, the main family processes mediate the adaptation of all individual members, their relationships, and the family unit (Walsh, 2016). The COVID-19 pandemic will have an impact on the quality of marital relationships due to changes in the families' ways of relating, which may lead to a greater risk of marital disruption threatening families' well-being (Prime et al., 2020). Based on the current literature gap, we seek to answer two research questions: (1) What is the level of conjugal satisfaction of Portuguese families during the social confinement? and (2) What association exists between the variables under study and marital satisfaction of Portuguese families during the social confinement?

# **Method**

#### Participants and Procedures

We present a descriptive and exploratory study, which was intended to assess the level of marital satisfaction during the COVID-19 social confinement. After constructing the data collection instrument and approval by the ethics committee, we disseminated the research questionnaire electronically, nationally, and personally, using various online sources. The questionnaire was sent via a link, which initially referred to the Free and Informed Consent Term and later the questionnaire, built using Google<sup>®</sup> Forms.

The inclusion criteria included being over 18 years of age, having Portuguese nationality, residing in Portugal, and voluntarily consenting to participate in the study. The sample consisted of 276 people obtained in a nonprobabilistic convenience manner. In this study, a questionnaire was used that included questions regarding sociodemographic characteristics; questions regarding the characterization of the family, housing, and family cohabitation during the pandemic period; questions about the phase of the Vital Duvall cycle (1971); questions regarding the application of the APGAR Family Scale (Smilkstein, Ashworth & Montano 1982); questions related to the application of the Family Cohesion and Adaptation Scale

(FACES II; Olson et al., 1979); and questions related to the application of the Satisfaction Rating Scale in Areas of Conjugal Life (Narcissus & Costa, 1996). All instruments used have a high degree of reliability, are suitable for the Portuguese population, and are available in the public domain. The questionnaires were applied during the state of emergency and social confinement in Portugal (March 20 to May 2).

Authorization was obtained from the Ethics Committee (Opinion 85/2020) for this study. Participants were informed about the purpose of the study and the guarantee of data confidentiality, validating the informed consent in the electronic form.

## Measures

Demographics. Six demographic questions were asked regarding age, gender, educational level, marital status, area of residence, and profession.

Family and housing during the pandemic. Participants were asked about the employment situation during the pandemic confinement period, the type of housing, number of household members, type of family, and life cycle stage. For the characterization of the type of family, the description of the National Statistics Institute (INE) was used. For the phase of the family's life cycle, Duvall's model (1971) with eight phases was used: 1-Establishment phase (newly married without children), 2-Beginning of parenting (oldest child: birth to 30 months), 3—Family with preschool children (the eldest child is 2.5-6 years old), 4-Family with school-age children (oldest child is between 6 and 13 years old), 5-Family with teenagers (oldest child is between 13 and 20 years old), 6-Families with young adults (period from the departure of the eldest child from home, until the departure of the youngest), 7—Family in middle age (period of "empty nest"—retirement), 8—Aging family (period from retirement to death of one/both spouses).

Family APGAR Scale. The family APGAR Scale, developed in 1978, is a five-item questionnaire (with each item evaluated on a 3-point scale) measuring five constructs: Adaptation (Adaptability), Participation (Partnership), Growth (Growth), Affection (Affection), and Dedication (Resolve; Hiroaki & Nobutaro, 2016). This instrument allows the characterization of the fundamental components of family function and is validated for the Portuguese population.

FACES II. With this instrument, Olson and collaborators outlined two aspects of family behaviors: cohesion and adaptability (Zhang et al., 2019). The instrument was translated and adapted for the Portuguese population by the Sociedade de Terapia Familiar and later by Fernandes (1995; Santos & Figueiredo, 2013).

FACES II is a 30-item scale used to measure an individual's perceptions of adaptability, family cohesion, and the general functioning of the family. There are 16 questions that measure family cohesion and 14 that measure family adaptability, with

each question using a Likert-type scale from 1 (*almost never*) to 5 (*almost always*; Olson, 2000). Cohesion indicates the extent to which family members are emotionally connected, and adaptability refers to the family system's ability to adjust to situational and developmental stressors (Zhang et al., 2019). The assessment of cohesion includes Items 1, 5, 7, 11, 13, 19, 21, 23, 27, and 30 positively rated and Items 3, 9, 15, 17, 25, and 29 rated negatively.

The dimensions of cohesion are characterized as disengaged, separated, connected, and very connected. In the adaptability assessment, Items 2, 4, 6, 8, 10, 12, 14, 16, 18, 20, 22, and 26 are positively rated and Items 24 and 28 are negatively rated. The dimensions of adaptability are characterized as rigid, structured, flexible, and very flexible. Several family types are clustered among the types of family such as unbalanced, midrange, moderately balanced, and balanced (Olson, 2000; Zhang et al., 2019).

The Marital Life Satisfaction Rating Scale. The Marital Life Satisfaction Rating Scale (EASAVIC) is a self-reported question-naire comprising 44 items with a 6-point Likert-type scale, ranging from 1 (not at all satisfied) to 6 (fully satisfied). This scale provides a reliable assessment of satisfaction with the couple's life (Ferreira et al., 2016; Narciso & Costa, 1996).

This instrument is organized into five areas of conjugal life related to the conjugal functioning dimension: family functions (Items 1, 2, 3, and 4), free time (Items 5 and 6), autonomy/privacy (Items 10 and 11), extrafamilial relationships (Items 7, 8, 9, 12, and 13), and communication and conflicts (items 14, 15, 16, 17, and 18); and five areas related to the love dimension: feelings and expression of feelings (items: 19, 20, 21, 22, 33, and 34), sexuality (Items: 23, 24, 25, 26, 27, and 28), emotional intimacy (Items: 29, 30, 31, 32, 35, 36, and 37), continuity of the relationship (Items: 38, 39, and 40), and physical and psychological characteristics (Items: 41, 42, 43, and 44).

A higher score indicates higher satisfaction levels, globally and in its different dimensions. To facilitate the comparison of these different items, all results were normalized to a scale from 1 to 10. In this study, the instrument demonstrated a high internal consistency ( $\alpha = 0.98$ ).

Data analysis. Data were analyzed using IBM SPSS® Statistics Version 25. Descriptive statistics were used to report sample demographic data and prevalence of variables. For inferential analysis, parametric tests were used because a normal sample distribution was not verified. When indicated, nonparametric tests (Mann–Whitney U or Kruskal–Wallis) were used. Statistical significance was considered to be p < .005.

#### **Results**

The sample consisted of 276 people, with a mean age of 42.4 years (standard deviation [SD] = 10.5), with a minimum of 18 years and a maximum of 72 years. Of the individuals surveyed, 76.8% were from the northern region, 81.9% were women,

69.2% were married, and 47.8% have a university degree. Regarding the family situation, the mean number of family members was average 3.4 (SD = 1.1).

The majority were legal couples with children (Marriage; 59.4%), and according to Duval's life cycle, the majority were in the Families with school-age children (25.7%) stage (Table 1). Regarding the type of housing, 58.0% lived in a house or floor that, without being luxurious, was spacious and comfortable.

Concerning employment, during the COVID-19 pandemic, the majority were working on the job in person (48.9%) or teleworking (24.6%), and in 47.8%, one of the family members was not in social isolation.

With regard to the APGAR Family Scale, the results highlight that 80.8% of the participants had the perception of having a highly functional family, but 3.3% (n=33) had the perception of having a family with severe dysfunction, and 15.9% (n=62) had the perception of a family with moderate dysfunction.

In terms of the FACES II Scale, we found that 12.2% perceived their family cohesion as dismembered, 22.5% as separated, 47.5% linked, and 18.1% very linked. Regarding family adaptability, 5.1% perceived it as rigid, 8.3% as structured, 29.0% as flexible, and 57.6% as very flexible. Regarding the type of family, 12.0% were disengaged, 22.5% were separated, 47.5% were connected, and 18.1% were very connected.

Table 2 shows the average values of the Satisfaction Assessment Scale in Areas of Conjugal Life (EASAVIC) and its dimensions. For better comparison of results, all data were normalized to a scale of 1–10, with a score of 5 as the midpoint. The table shows that the highest average values are obtained in the love—feelings and expression of feelings (mean = 7.9) and the lowest mean values in marital functioning—free time (mean = 6.4). Of note, the average values of the entire scale were 5.1 in a possible range from 1 to 10, with a low average marital satisfaction score.

Table 1 also shows the association between the EASAVIC Scale and the variables under analysis, highlighting the association with age, education, work situation during the pandemic, type of housing, life cycle stage, family APGAR, and cohesion and family adaptability.

#### **Discussion**

There are ample reasons for concern regarding the acute situation of the COVID-19 pandemic and its impact on the general well-being of the population, families, and individuals. The pandemic represents a global crisis not only of public health and economic stability but also of family and conjugal well-being (Prime et al., 2020).

To our knowledge, this is the first study to investigate the marital satisfaction of Portuguese families during social confinement. This research aimed to determine the level of marital satisfaction of Portuguese families during social confinement due to the pandemic and the association between the variables under study.

One of the most significant and clinically applicable findings of this research is that pandemic marital satisfaction presented low values that may be associated with the social, economic, and political context experienced by the pandemic situation. Since 2013, the average level of satisfaction with personal relationships in the European Union, also measured on a scale of 0–10, has remained almost stable from 7.8 in 2013 to 7.9 in 2018. Although with different instruments, Portugal presented average values of 7.9 in 2013 rising to 8.2 in 2018 (Eurostat, 2018), values that are much higher than those of our study.

Social isolation requires families to remain in their homes, resulting in intense and uninterrupted contact, as well as the exhaustion of existing support networks, such as the extended family, social, and community support networks (Usher et al., 2020). These aspects can lead to an increased risk of marital disruption that threatens the family's well-being, exacerbating previous problems or creating new difficulties (Prime et al., 2020).

Marital satisfaction is a multidimensional concept that comprises different aspects of the marital relationship (Sayehmiri et al., 2020); hence, we analyzed this concept along the same lines as the author of the Satisfaction Assessment Scale in Areas of Marital Life (EASAVIC). These authors emphasize the personal and subjective character of conjugal relationships, both in relation to conjugal functioning and love (Narciso & Costa, 1996).

Assuming that marital quality is a multidimensional construct increases the challenge of defining it, as well as determining at what level it operates and what dimensions to include (Delatorre & Wagner, 2020). In the application of the EASA-VIC Scale, in its different dimensions, we observed, on average, higher values in the dimensions of love, which indicates the feelings that each has for the other (Narciso & Costa, 1996; feelings and expression of feelings = 7.9, emotional intimacy = 7.7, continuity of the relationship = 7.6, physical and psychological characteristics = 7.4, and sexuality = 7.4).

In the conjugal functioning dimension, defined as the way in which the relationships in the conjugal Holon and family, are organized and regulated (Narciso & Costa, 1996), the values on average presented lower scores (autonomy/privacy = 7.5, extrafamilial relationships = 7.3, communication and conflicts = 7.2, family functions = 6.8, and leisure = 6.4). Of note, the lowest value refers to leisure time (mean = 6.4), which meets the conditions of blocking and requires sharing a small space for days and weeks on end, potentiating conflicts (Reizer et al., 2020). What used to be quickly resolved due to normal day-to-day disagreements and forgotten over time now has a greater impact (Prime et al., 2020).

In contrast, the highest value falls on the dimension Feelings and expression of feelings with a mean score of 7.9. As Hendrick and Hendrick (2020) notes, this global pandemic era is strange and scary for everyone; however, this is also a time when love and affection (in this case, for a romantic partner) can profoundly deepen a relationship.

 Table 1. Participants Characteristics.

Variables			Total Scale		
	N	%	Mean	SD	Þ
Gender (N = 276)					.507
Male	50	18.1	4.9	1.2	
Female	226	81.9s	5.0	1.3	
Age groups (N = $276$ )					.000
18–29	23	8.3	5.9	1.1	
30–41	110	39.9	5.3	1.1	
42–53	103	37.3	4.6	1.4	
54–65	30	10.9	5.1	1.2	
66–77	10	3.6	4.0	1.2	
Marital status ( $N = 276$ )					.180
Single	31	11.2	5.3	1.5	
Civil Union	51	18.5	5.2	1.3	
Married	191	69.2	4.9	1.3	
Divorced	3	1.1	4.7	0.6	
Widowed	0	0	0	0	
Residence region ( $N = 276$ )					.678
North	212	76.8	5.0	1.3	
Center	25	9.1	4.9	1.1	
Lisbon area	22	8.0	4.90	1.4	
Alentejo	3	1.1	5.3	.6	
Algarve	5	1.8	5.2	1.1	
Azores	3	1.1	4.0	1.7	
Madeira	6	2.2	5.5	2.0	
Educational level ( $N = 276$ )	Ū	2.2	3.3	2.0	.019
Basic I (I–4 years)	2	0.7	4.5	2.1	.017
Basic 2 (5–6 years)	I	.4	5.0	0	
Basic 3 (7–9 years)	10	3.6	4.6	1.5	
Secondary school (10–12 years)	48	17.4	5.4	1.1	
Bachelor's degree	7	2.5	4.0	1.1	
Licensed degree	132	47.8	4.8	1.5	
<u> </u>	59	21.4	5.4	1.0	
Master's degree PhD	17	6.2	5.1	.7	
	17	0.2	3.1	./	.189
Profession ( $N = 276$ )	1	0.4	5.0	0	.107
Occupation in the armed forces		5.8			
Representatives of legislative power and executive organizations	16	65.2	4.9	1.3	
Intellectual and scientific experts	180 40		4.9	1.3	
Technicians and intermediary-level occupations		14.5	5.0	1.5	
Administrative staff	6	2.2	4.8	0.8	
Workers of personal, protection and safety services and salespeople	13	4.7	5.0	0.9	
Workers skilled in farming and agricultural trades	4	1.4	5.5	0.6	
Workers skilled in industrial, construction, and operational trades	6	2.2	5.7	0.8	
Unqualified workers	5 5	1.8	6.0	1.0	
Student COVID 10 1 1 (A) 27()	5	1.8	6.4	0.9	000
Employment situation during the COVID-19 pandemic ( $N = 276$ )		- 4	4 7		.000
Retired	15	5.4	4.7	1.6	
Domestic	7	2.5	5.9	0.4	
Unemployed	9	3.3	5.4	1.4	
Active worker (face-to-face)	135	48.9	5.1	1.2	
Active worker (telecommuting or similar)	68	24.6	4.5	1.4	
Worker on vacation	10	3.6	5.4	1.3	
Furloughed	23	8.3	5.4	1.0	
Student	9	3.3	6.1	1.1	
Housing type ( $N = 276$ )	_				.036
Luxurious, spacious home or floor, offering its residents maximum comfort	31	11.2	5.4	0.9	
House or floor that is spacious without being luxurious	160	58.0	5.1	1.2	
Modest house or floor well-built and in good condition, well lit, airy, with kitchen and bathroom	82	29.7	4.7	1.6	
House with kitchen and bathroom but degraded and/or—without essential appliances	3	1.1	4.0	1.0	

(continued)

Table I. (continued)

Variables			Total Scale		
	N	%	Mean	SD	Þ
Number of household members: $(N = 276)$					.822
One member	6	2.2	4.2	1.6	
Two members	55	19.9	5.2	1.2	
Three members	97	35. I	5. l	1.4	
Four members	87	31.5	5.0	1.2	
Five members	24	8.7	5.0	1.4	
Six members	2	.7	4.5	.7	
>Seven members	5	1.8	4.8	1.9	
Situation of household members during social lockdown ( $N = 276$ )					.677
All elements of the household are in isolation	107	38.8	5.0	1.4	
One of the family members is not in social isolation	132	47.8	5.0	1.3	
All family members are not in social isolation	24	8.7	5.0	1.2	
More than one element is not in social isolation	13	4.7	5.5	1.3	
Type of family ( $N = 276$ )	13	1.,	3.3	1.5	.603
Father with at least one child	1	0.4	4.0		.003
Mother with at least one child	6	2.2	4.2	1.3	
	16	5.8	5.7	1.3	
Civil union couple without children	20	7.2	5.2	.8	
Married couple without children					
Married couple with children	164	59.4	5.0	1.3	
Civil union couple with children	43	15.6	5.2	1.4	
Couple without children with other people	3	1.1	4.3	1.2	
Couple with children with other people	11	4.0	4.5	1.4	
Families with two nuclei without children	0	0	0	0	
Families with children in only one of the nuclei	4	1.4	4.3	0.5	
Families with children only in one nucleus with other people	l -	0.4	4.0	0	
Families with children in both nuclei	3	1.1	4.0	1.7	
Families with children in two nuclei with other people	ļ	0.4	4.0	0	
Single-person families	3	1.1	6.0	1.0	
Vital cycle phase ( $N = 276$ )					.002
Couples without children	34	12.3	5.6	1.0	
Families with newborn (oldest child: birth to 30 months)	27	9.8	5.4	1.1	
Families with preschool children (eldest child: 2.5–6 years)	32	11.6	5. l	1.3	
Families with school children (oldest child: 6–13 years old)	71	25.7	4.8	1.3	
Families with teenage children	52	18.8	4.6	1.5	
Families with young adults (departure of first child—departure of last child)	39	14.1	5.3	1.1	
Middle-aged couple (empty nest—retirement)	21	7.6	4.5	1.5	
Aging (retirement—death of one spouse)	0	0	0	0	
Family Adaptation, Partnership, Growth, Affection, Resolve (N = 276)					.000
Family with severe dysfunction	9	3.3	3.7	1.2	
Family with moderate dysfunction	44	15.9	4.3	1.3	
Highly functional family	223	80.8	5.2	1.3	
FACESII family cohesion ( $N = 276$ )	223	00.0	3.2	1.5	.000
Disengaged	33	12.0	3.9	1.2	.000
Separated	62	22.5	4.6	1.3	
Connected	131	47.5	5.I	1.2	
	50			0.9	
Very connected	30	18.1	6.0	0.9	000
FACES II family adaptability ( $N = 276$ )	1.4		4.3		.000
Rigid	14	5.1	4.3	1.3	
Structured	23	8.3	4.2	1.2	
Flexible	80	29.0	4.6	1.3	
Very flexible	159	57.6	5.4	1.2	
FACESII types of family ( $N = 276$ )					.000
Unbalanced	33	12.0	4.3	1.3	
midrange	62	22.5	4.0	1.2	
Moderately balanced	131	47.5	4.9	1.2	
Balanced	50	18.1	5.6	1.1	

**Table 2.** Satisfaction Rating Scale in Areas of Marital Life and Dimensions.

Scale Dimensions	Mean	Standard Deviation	Min	Max
Total scale	5.1	1.3	2	7
Marital functioning—family functions	6.8	2.1	0	10
Marital functioning—free time	6.4	2.2	0	10
Marital functioning—autonomy/ privacy	7.5	2.1	0	10
Marital functioning—extrafamilial relationships	7.3	1.9	I	10
Marital functioning— communication and conflicts	7.2	2.2	I	10
Love—feelings and expression of feelings	7.9	2.2	2	10
Love—sexuality	7.4	2.4	0	10
Love—emotional intimacy	7.7	2.3	- 1	10
Love—continuity of the relationship	7.6	2.6	I	10
Love—physical and psychological characteristics	7.4	2.3	0	10

Considering the second objective of the study regarding associations between the variables under study and marital satisfaction of Portuguese families during social confinement, an association was observed between the global mean score on the EASAVIC Scale and age, education, work situation at the time of pandemic, type of housing, the life cycle phase, family APGAR, and family cohesion and adaptability.

As Sayehmiri et al. (2020) note, different factors can influence marital quality, and factors that predict higher levels of satisfaction include socioeconomic status, education, age, ethnicity, religious beliefs, physical attractiveness, intelligence quotient, and personal attitudes. Indeed, age can be an important factor when estimating marital satisfaction but will be more related to the length of the relationship (Kamal et al., 2018; Sayehmiri et al., 2020).

When considering the phase of the life cycle, the highest mean scores were observed in the phase of couples without children (mean = 5.6) and the lowest values in middle-aged couples (empty nest—retirement; mean = 4.6). The latter value is notably below the average value. Hsiao writes that marriage is not a static state but a continuous and dynamic process influenced by individual development and the family and social context of specific changes. Couples face different challenges at different stages of their lives and in their family environments; therefore, the nature and quality of marital relationships vary throughout the family's life cycle (Hsiao, 2017). In fact, this stage of life, associated with the beginning of retirement, can have negative psychological implications, resulting from the drastic changes in the person's daily life that can lead to a sense of meaninglessness or lack of purpose and feelings of disconnection, with an impact in marital satisfaction (Fye et al., 2020).

Regarding the association with APGAR Familiar, people classified in the groups "family with severe dysfunction" (mean = 3.7) and "family with moderate dysfunction" (mean = 4.3) had lower mean scores for marital satisfaction compared to those in the "highly functional family" group (mean = 5.2). Indeed, the functioning of the family is a determining factor for the preservation of family's health, and according to their performance, they can be classified as functional or dysfunctional families, incorporating the capacity of the family system to face nonnormative crises or specific to the life cycle (Fernandes et al., 2020), which correlates with conjugal functionality.

Finally, in terms of the association of marital satisfaction with family cohesion, adaptability, and type of family, as measured with the FACES-II Scale, lower mean scores were observed for marital satisfaction in the cohesions dimension "dismembered family" (mean = 3.9) and the highest values in "very linked" families (mean = 6.0). With regard to family adaptability, average scores for lower marital satisfaction were obtained in the "structured" dimension (mean = 4.2) and higher values in the "very flexible" dimension (mean = 5.4). Considering family cohesion and adaptability, the type of family where the lowest values of marital satisfaction were obtained was the "separated" type, and the type with the highest scores was the "very connected" type (mean = 5.6).

A basic premise in systems theory is that moments of crisis and persistent challenges in life have an impact on the whole family, and in turn, the main family processes mediate the adaptation (or maladaptation) of all individual members, their relationships, and the family unit (Walsh, 2016), which may occur during a pandemic. Family cohesion seems to have a significant moderating effect on the association between life stress and marital satisfaction, serving to mitigate the negative impacts on the couple's life (Hsiao, 2017). Family adaptability (or flexibility), with an impact on family health and the well-being of its members, refers to the family's ability to change rules and roles in response to contextual needs—variables that are essential in the current pandemic context (Pedro et al., 2015).

# **Limitations**

Although the present findings are informative, multiple limitations must be considered when interpreting the results. Future research should use a better sampling technique for greater security in the results and conclusions. With regard to sampling, there is a higher proportion of participants from the north of the country. This may be related to the convenience bias reflecting the researchers' contacts. However, it may also be related to the fact that the north of the country was the most affected area at the beginning of the pandemic. The use of online questionnaires may also have led to a participation bias.

# **Clinical Implications**

The COVID-19 pandemic represents an international social experiment affecting family and married life, perhaps the most

widespread social experiment of all time (Lebow, 2020), with impact and risks at various levels that are still unknown. This moment represents a great challenge in countless aspects, and particularly in relational issues, which will certainly leave its mark on our lives (Reizer et al., 2020). Social isolation has exacerbated personal and collective vulnerabilities, limiting access to family support options (Usher et al., 2020). Dysfunctional or unsuccessful marital relationships not only threaten the mental health of couples but also endanger the survival of the family unit (Sayehmiri et al., 2020). In addition, during the COVID-19 pandemic, domestic violence (physical, sexual, psychological, or economic) may be more common (Usher et al., 2020).

This study shows low levels of marital satisfaction in a global context and its different subdimensions. Therefore, health professionals should keep in mind the associations between the social confinement period, marital dissatisfaction, and the risks that result from this. In particular, the impact on families that already have members or subsystems in which there are individual or relational difficulties that are now isolated from much of the outside world should be considered and questioned. Clearly, additional risks will be expected in couples and families already in situations of violence, conflict, or other forms of relational difficulty (Lebow, 2020).

This issue deserves the continuation of a careful investigation to identify and prevent situations of violence and to implement interventions to control its impact. Likewise, it can be rewarding to explore not only marital satisfaction during a pandemic, but a more systemic assessment of marital relationships during this crisis (such as effective communication, problem solving, and dyadic coping), expanding the impact of marital satisfaction in family functioning (Prime et al., 2020, Reizer, Koslowsky, & Geffen 2020).

# **Conclusion**

Despite the limitations of the present study, we believe that this work contributes significantly to the literature on relationships in pandemic times. The current results show that the conjugal satisfaction of Portuguese families during social confinement was low compared to previous results.

Associations were identified between marital satisfaction and age, education, work situation during the pandemic, type of housing, life cycle phase, family APGAR, and family cohesion and adaptability. Understanding the impact of the pandemic and social confinement can facilitate the development of clinical interventions aimed at a still little-known reality.

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Study conception and design, and drafting of the manuscript: C.F., S.S., and B.M.; data analysis: B.E. and S.S.; critical reviews for intellectual content: C.F.

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