Sexual Satisfaction in Older Marriages: Effects of Family-of-Origin Distress and Marital Distress

Luke Elias Wilson
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SEXUAL SATISFACTION IN OLDER MARRIAGES:
EFFECTS OF FAMILY-OF-ORIGIN DISTRESS AND MARITAL DISTRESS

by

Luke Elias Wilson

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of

Master of Science

Marriage and Family Therapy Program
School of Family Life
Brigham Young University
July 2007
This thesis has been read by each member of the following graduate committee and by majority vote has been found to be satisfactory.

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Robert F. Stahmann

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As chair of the candidate’s graduate committee, I have read the thesis of Luke Elias Wilson in its final form and have found that (1) its format, citations, and bibliographical style are consistent and acceptable and fulfill university and department style requirements; (2) its illustrative materials including figures, tables, and charts are in place; and (3) the final manuscript is satisfactory to the graduate committee and is ready for submission to the university library.

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ABSTRACT

SEXUAL SATISFACTION IN OLDER MARRIAGES:
EFFECTS OF FAMILY-OF-ORIGIN DISTRESS AND MARITAL DISTRESS

Luke Elias Wilson
Marriage and Family Therapy Program
School of Family Life
Master of Science

The purpose of this study was to examine how sexual satisfaction in older marriages (marriages with at least one spouse between the ages of 55 and 75) was affected by family-of-origin distress (recent measure of recollection of childhood experiences) and marital distress (measure of current marital relationship) for husbands and wives. The hypotheses of this study were that both family-of-origin distress and marital distress would have negative effects on sexual satisfaction for older couples, with marital distress having a direct, negative effect on sexual satisfaction and with family-of-origin distress having an indirect, negative effect on sexual satisfaction through its influence on marital distress.

The sample consisted of 614 older couples (approximate average age of 65 for husbands and 62 for wives) who participated in the Project Couple Retire research project which provided the data for this study. Each participant completed the Project Couple Retire questionnaire which included the Marital Satisfaction Inventory-Revised (MSI-R)
(1997), the Personal Assessment of Intimacy in Relationships (PAIR) (1981), and other instruments measuring various factors relating to older marriages.

A conceptual model was created consisting of three latent variables: sexual satisfaction, family-of-origin distress, and marital distress. The latent dependent variable, sexual satisfaction, was measured by the MSI-R sexual dissatisfaction (SEX) scale and the sexual intimacy scale of the PAIR inventory. One of the latent independent variables, family-of-origin distress, was originally measured by both the MSI-R family history of distress (FAM) scale and an additional instrument from the Project Couple Retire questionnaire measuring history of abuse. However, the history of abuse measure was eventually dropped from the study due to poor measurement fit. The other latent independent variable, marital distress, was measured by the affective communication (AFC) and time together (TTO) scales of the MSI-R. The data in this study was dyadic, with each variable including data from both husbands and wives. Therefore, both actor and partner effects were examined.

Structural equation modeling (SEM) was used to analyze the conceptual model. Findings indicated that both family-of-origin distress and marital distress negatively affected sexual satisfaction in older marriages for both husbands and wives when considering both indirect and direct effects.
ACKNOWLEDGEMENTS

I would like to express appreciation to all those who have helped me to complete this thesis. I am indebted to my advisor and committee chair, Dr. Harper, for his patience and for all of his time and effort in assisting me with my thesis. I also appreciate the helpful feedback that I received from the other members of my committee, Dr. Stahmann and Dr. Miller. I am thankful for the encouragement and support that I received from my parents and siblings during my graduate school experience. Finally, I will always be grateful to my amazing wife, Carla, for her love, understanding, patience, and support throughout the entire process of my graduate education and my thesis.
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SEXUAL SATISFACTION IN OLDER MARRIAGES: 
EFFECTS OF FAMILY-OF-ORIGIN DISTRESS AND MARITAL DISTRESS

Chapter I: Introduction and Literature Review

Sexuality is a sensitive topic to study because it is generally considered to be a private, intimate matter. However, sexuality needs to be studied and understood so that professionals such as marital therapists and sex therapists can effectively help couples with sexual concerns. These professionals are in need of better information to inform the counsel that they provide (Laumann, et al., 1994).

Sexuality in marriage is a relevant topic to research because of its prevalence and importance in the lives of married individuals. Approximately 85% of married individuals have sex regularly (Laumann, et al., 1994). However, many married men and women experience sexual dysfunctions and other concerns about their sexual relationships. Because sexual intimacy is a central part of the marital relationship, it needs to be examined.

How satisfied married individuals are with their sexual relationships and what factors affect their sexual satisfaction are also important issues for researchers and other professionals to understand. Married individuals generally experience greater sexual satisfaction than unmarried individuals. Also, married men tend to be more satisfied with their sexual relationships than married women (Laumann, et al., 1994). Other factors that affect sexual satisfaction are health status and sexual dysfunction. Poor health and sexual dysfunction tend to decrease sexual satisfaction (Laumann, et al., 1994).

Sexual satisfaction in older marriages is an important topic that needs to be studied further. Researchers have found that sexuality is very significant to younger (ages 18-34) and midlife (ages 35-54) couples (Laumann, et al., 1994). Sexuality is
frequently portrayed in the media with couples in these age groups. However, older couples (ages 55-75) are less frequently portrayed in sexual ways. Cultural stereotypes about sexuality and older people may have been a contributing factor in limiting the research that has been done about the sexual relationships of older couples.

With the number of older adults increasing, the study of older marriages is becoming more important. Sexuality is still significant in the relationships of older couples (AARP, 2004). Many older adults discuss their sexual satisfaction with their spouses and seek information that will help them improve their sexual relationships. In addition, many older adults seek treatment to improve their sexual functioning (AARP, 2004). These efforts demonstrate the importance of sexual satisfaction to older couples. Because sexuality is an important part of marriage throughout life (AARP, 2004; Ade-Ridder, 1990; Hinchliff & Gott, 2004), it is necessary to better understand sexual satisfaction in older marriages.

The purpose of this study was to examine sexual satisfaction in older marriages (marriages with at least one spouse age 55-75, including first marriages and remarriages) and how it is influenced by family-of-origin distress and marital distress for both husbands and wives. The questions answered in this study include the following: How well do these family-of-origin and marital variables predict sexual satisfaction in older marriages? Which variables have more predictive power? Which variables more strongly influence husbands’ sexual satisfaction? Which variables more strongly influence wives’ sexual satisfaction?
Older Marriages

There has not been as much research about older marriages as there has been about young and midlife marriages. However, some important information about older marriages has been learned from the research that has been done. New stages of marriage have been added: post-child rearing/pre-retirement, post-child rearing/early retirement, and post-child rearing/late retirement. Many older couples benefit in their marriage by no longer having to deal with the challenges of raising and supporting children. However, older couples can also face many stresses as they age such as limited income and health problems (Swensen, Eskew, & Kohlhepp, 1984; Walsh, 1996).

Older marriages are unique because of longer shared history. Askham (1994) reviewed literature about older marriages and concluded that long shared history and commitment to the relationship are what keep older couples together. He also pointed out that older married individuals generally live longer and have higher life satisfaction, better physical and mental health, more social support, and more economic resources than older unmarried individuals.

Research suggests that older couples have less marital conflict. Levenson, Carstensen, and Gottman (1993) examined 156 long-term marriages using demographic, marital, and health questionnaires and laboratory observation. They found that older marriages (spouses’ age of 60-70 years) have lower potential for conflict and higher potential for pleasure than midlife marriages (spouses’ age of 40-50 years). They also found that older couples have similar levels of physical and mental health to midlife couples and fewer gender differences in sources of pleasure than midlife couples.
Some research studies about older couples have been able to identify important factors relating to successful long-term marriages. Billingsley, Lim, and Jennings (1995) conducted qualitative interviews with 30 couples who had been married 25 to 40 years and who reported high satisfaction with their marriages. These couples first completed the Marital Satisfaction Inventory (MSI) (Snyder, 1981) and achieved satisfactory scores to qualify for inclusion in the study. The researchers identified six important themes that contribute to marital satisfaction: 1) commitment, 2) common interests, 3) communication, 4) religiosity, 5) role models, and 6) finances.

Another similar research study (Lauer, Lauer, & Kerr, 1990) examined stability and satisfaction in long-term marriages by studying 100 couples who had been married 45 years or more. The participants were administered a marital satisfaction questionnaire that included the Dyadic Adjustment Scale (DAS) (Spanier, 1976) and other questions that the researchers added. Findings included the following important variables related to marital quality in long-term marriages: 1) being married to someone they like and enjoy being with, 2) commitment to the spouse and to marriage, 3) a sense of humor, and 4) consensus about various issues including aims and goals in life, friends, and decision making. Husbands and wives in this study reported similar variables related to happy, long-term marriage, indicating few differences between men and women.

Other research has found interesting differences between older and younger couples. For example, Norris, Snyder, and Rice (1997) used the MSI to examine marital quality in both a community sample (640 married individuals) and a clinical sample (2,490 married individuals). Ages in both samples ranged from 20 to 75 years. The researchers found that older married adults (50-75 years old) reported more traditional
role orientation; less family history of distress; less conflict over child rearing, finances, and time together; but more sexual dissatisfaction than younger (20-34 years) and midlife (35-49 years) married adults.

There has also been some research which examined depression in older married couples. Using data from the Yale Health and Aging Project (YHAP), independent interviews with 317 couples who were 65 years and older and living in the community, Tower and Kasl (1995) found that depressive symptoms in one spouse significantly affected depressive symptoms in the other spouse. In addition, they found that marital closeness had a moderating influence, with a spouse’s symptoms contributing more to the respondent’s symptoms when the couple was close. However, marital closeness also was found to act as a buffer to depressive effects from intrapersonal factors in the respondent.

In another study of depression in older marriages, Sandberg, Miller, and Harper (2002) interviewed 26 older couples (10 couples in which one spouse was experiencing depression and 16 couples in which neither spouse was depressed). They found that depressed couples reported more problems with communication and problem solving during periods of depression. They also found that the nondepressed spouse felt confused and frustrated while the depressed spouse felt isolated and misunderstood.

In summary, research has provided some important information about both positive and negative aspects of older marriages. While there is some good research information about older couples, there is still much to learn in the research area of older marriages. However, the studies that have been done in this area help to provide some context to assist in understanding sexual satisfaction in older marriages.
Sexual Satisfaction in Older Marriages

Satisfying sexual intimacy has been linked to marital quality for older couples. One research study (Ade-Ridder, 1990) consisted of 244 married couples with at least one spouse over age 65 and both husbands and wives reporting good health. The Dyadic Adjustment Scale (DAS) (1976) was used to measure marital quality, and other questions created by the researcher were used to measure sexual interest and sexual behavior. Significant positive correlations were found between marital quality and frequency of sexual activity. In addition, marital quality was found to be positively correlated to the age of noticed changes in sexual activity. In other words, happier couples reported changes in sexual activity later in life than did less happy couples. There was also a significant positive correlation between marital quality and sexual interest. Older couples who were happily married reported the highest levels of sexual interest. These same happy couples also reported that they had high sexual interest during early marriage. It appears that for older couples, frequent sexual activity, continuing to remain sexually active until late age, and high sexual interest are all positively related to marital quality.

A recent qualitative study (Hinchliff & Gott, 2004) also found an important connection between sexuality and marital quality for older couples. This study about sexual intimacy within long-term marriages analyzed three themes: 1) the importance of sex within long-term marriage, 2) the perceived benefits of sex within long-term marriage, and 3) changes experienced in the sexual relationship within long-term marriage during later life. The study included 28 participants (50-86 years old) living in the U.K. who had been married for at least 20 years. Data was collected through in-depth interviews, and a thematic analysis was used to identify important themes. All but two of
the participants in this study reported that their sexual relationship was important to their quality of life and their marital quality. The perceived benefits of sex reported by the participants included the following: sexual satisfaction, marital satisfaction, expressing and enhancing love, and expressing commitment.

As for changes in the sexual relationship for older couples, the same qualitative study cited above found that a common change reported by husbands was decreased libido although none of the husbands said that this created problems in their marriages. Some couples reported that the length of their marriage improved their sexual relationship because they knew each other better, were more aware of each other’s likes and dislikes, and were closer as a couple. The most common change that participants reported in their sexual relationships in later life was the cessation of sexual intercourse because of problems such as erectile dysfunction (ED), changes in the vaginal tunnel making intercourse painful, and other medical conditions. Most of these participants reported that they adjusted well to the absence of sexual intercourse by expressing their sexuality in other ways such as touching and hugging. Participants who were still engaging in sexual intercourse also experienced changes and had to make adjustments. Because of heart problems and other health conditions, many of these participants had to adapt by being more careful during sex and by being sexually intimate on days when physical health was better (Hinchliff & Gott, 2004).

Although research about sexual relating in older marriages is limited, these studies cited above show that sexuality is as important to older couples as it is to younger and midlife couples. Sexual interest and sexual behavior significantly affect marital quality for older couples, and these couples report specific benefits from a satisfying
sexual relationship. Even though older couples often face challenges in their sexual relationship due to health problems, happily married couples are generally able to adapt to those challenges and continue to be sexually active.

No additional studies focusing specifically on sexual satisfaction in the elderly were found, but findings regarding sexual satisfaction in young and midlife marriage may help anticipate variables related to sexual satisfaction in the elderly. Research cited below demonstrates that many couples seeking marital therapy for general marital problems also have significant sexual problems. In addition, many couples seeking sex therapy also have problems in other areas of their marriage.

One study using the MSI (Berg & Snyder, 1981) compared two clinical samples: couples presenting marital distress as their primary concern and couples presenting sexual distress as their primary concern. The maritally distressed sample consisted of 45 couples seeking conjoint therapy at a marital therapy clinic. The sexually distressed sample consisted of 45 couples seeking conjoint therapy at a sexual dysfunction specialty clinic. The average age of participants was 36 years and the average length of marriage was 11 years. These researchers found that sexually distressed couples were differentiated from maritally distressed couples by more sexual dissatisfaction, but both groups reported problems in other areas of their marriage. They also found that among couples seeking general marital therapy, husbands reported more sexual dissatisfaction than did their wives. It is also interesting to note that the study did not find any significant differences between husbands and wives in the sexually distressed group. All of the literature reviewed in this section makes it clear that sexual satisfaction is related to overall marital quality and other specific factors in the marriage.
Family-of-Origin Distress

Family-of-origin distress and its influence on older marriages is another area that deserves more empirical research. While the studies reviewed in this section do not specifically focus on older couples, the findings may apply to older couples as well as younger and midlife couples. The aspects of family-of-origin distress included in this study’s conceptual model were family history of distress and history of abuse as reported by older couples recalling their childhood experiences.

Spouses’ families of origin, examined through adult recollections of childhood experiences, have been shown to influence their marital relationships. In one study, Sabatelli and Bartle-Haring (2003) examined the relationship between family-of-origin experiences and marital adjustment using a sample of 125 married couples. The average age of husbands was 49 years, and the average age of wives was 47 years. The mean length of marriage was 23 years, with marriage length ranging from 5 to 37 years. Family-of-origin dynamics were measured using the Differentiation in the Family System Scale (Anderson & Sabatelli, 1992). Marital adjustment was measured using the Marital Comparison Level Index (Sabatelli, 1984) and the Miller Social Intimacy Scale (Miller & Lefcourt, 1982). These researchers found that both husbands’ and wives’ family-of-origin experiences significantly influenced their later marital adjustment. In addition, the results indicated that wives’ experiences in their family of origin were more strongly related to their marital adjustment and their husbands’ marital adjustment than were husbands’ family-of-origin experiences.

A longitudinal study (Klever, 2005) related to intergenerational transmission theory examined the multigenerational family influence on nuclear family functioning.
The study examined 49 newly developing nuclear families and their multigenerational families over five years. Through quantitative analysis, multigenerational stressors were found to have an even stronger impact on nuclear family functioning than individual or nuclear family stressors. Thus, family-of-origin stressors do significantly influence nuclear family functioning, including marital functioning.

In summary, self-reported family history of distress appears to influence marital quality. The wife’s family of origin seems to have a greater impact than does the husband’s family of origin. In addition, multigenerational effects appear to be more significant than individual or nuclear family effects. Because family-of-origin experiences appear to be related to marital quality and because marital quality is related to sexual satisfaction, it may be that even in older marriages family history of distress is related to sexual satisfaction.

A more specific aspect of family-of-origin distress is history of abuse. While the studies reviewed here are not confined to familial abuse, they are helpful in understanding the variable of history of abuse. Research has indicated that experiencing abuse as a child can negatively affect future relationships as an adult. Nelson and Wampler (2000) found that the experience of childhood abuse is a trauma that not only can affect the adult survivor, but also can have indirect or secondary effects on the survivor’s spouse and family. These researchers studied 96 clinic couples who reported a history of childhood physical or sexual abuse in one or both partners and 65 clinic couples in which neither partner reported any abuse. The Brief Symptom Inventory (BSI) (Derogatis, 1993) was used to measure general symptomatology. The DAS and the
Family Adaptability and Cohesion Scale (Olson, Portner, & Lavee, 1985) were used to measure marital and family adjustment respectively.

In this study, couples in which one or both spouses reported childhood physical or sexual abuse also reported significantly lower marital satisfaction, higher individual stress, and a lower level of family adjustment than couples with no abuse history. In addition, no significant differences were found between survivors of childhood abuse and their spouses who reported no history of abuse, supporting the theory of secondary trauma. In other words, both spouses seem to have been affected when one spouse had a history of abuse.

In this same study, abuse was related to both intrapersonal and interpersonal effects. One of the intrapersonal effects of abuse that also influenced the marital relationship was sexual dysfunction. Among the interpersonal effects of abuse were the following: marital disruption, communication problems, and intimacy problems. Abuse survivors and their spouses also reported many of the same symptoms, including individual stress, isolation, low relationship quality, and reduced intimacy (Nelson & Wampler, 2000).

Other research has specifically examined the effects of childhood sexual abuse and has found that male and female survivors experience many of the same problems in future relationships, including sexual problems. One study noted that the intimate relationships of male and female survivors were significantly affected. Common problems for adult survivors of childhood sexual abuse included problems establishing and maintaining intimate relationships and sexual intimacy problems (Jacob & Veach, 2005).
No studies were found that specifically examined the effects of abuse history on older marriages. Given that findings with younger marital couples clearly show that abuse has significant individual, marital, and familial effects, it appears reasonable that a history of verbal, physical, and sexual abuse in one or both elderly married partners may affect sexual satisfaction in elderly marriages.

*Marital Distress*

In addition to family-of-origin distress, it is important to consider how marital distress relates to older marriages. The specific aspects of marital distress focused on in this study were distress relating to affective communication and distress relating to time together. These areas of the marital relationship are important for married couples in general, and specifically for older couples. Following is a discussion of some research studies involving affective communication and time together in marital relationships.

Affective communication, the expression of affection and understanding, has been shown to be an important factor for younger and older couples. Biller (2000) examined both short-term and long-term marriages and found that dissatisfaction with affective communication was a significant predictor of global distress in the marriage for wives, especially for wives in long-term marriages. Another study found in this literature review, while it did not specifically examine the variable of affective communication, did examine the closely related variable of emotional expressiveness in marriage.

Yelsma and Marrow (2003) studied perceived difficulties with emotional expressiveness and marital satisfaction in 66 husbands and wives. The Toronto Alexithymia Scale (Taylor, 1994) and the Dyadic Adjustment Scale (Spanier, 1976) were used to measure difficulties with emotional expressiveness and marital satisfaction.
respectively. The results indicated that both husbands’ and wives’ difficulties with emotional expressiveness negatively influenced their own and their spouses’ marital satisfaction. Therefore, according to this study, lower levels of emotional expressiveness impair marital satisfaction. Regarding affective communication, these studies show that the ability to express emotions in marriage is related to general marital satisfaction which leads to the belief that it is also related to sexual satisfaction.

Along with affective communication, time together was also examined in the context of marital distress. As the following studies demonstrate, the amount of leisure time a couple spends together and the amount of interests that they share influence the couple’s relationship. This connection leads to the hypothesis that time together also influences the sexual area of the relationship. Biller (2000) found that dissatisfaction with time together was a strong predictor of global distress in the marriage for wives. In addition, a previous study (Smith, et al., 1988) used the MSI to examine the relationship between time together and marital satisfaction in 251 married individuals. This study found that time spent in individual activities or with others instead of the spouse was significantly correlated to marital distress. In addition, insufficient time together as a couple was more significantly correlated to marital distress for wives than for husbands. These same researchers concluded that time together was an important factor related to marital satisfaction throughout the family life cycle.

Older couples, especially retired ones, are often able to spend more time together than younger couples. Davey and Szinovacz (2004) used data from the National Survey of Families and Households (407 couples to study wives’ retirement and 550 couples to study husbands’ retirement) to examine changes in the marital relationship after
retirement. Enhanced time for couple activities was a positive change resulting from the 
retirement transition. No longer having work obligations allowed retired couples to 
develop their companionship and participate in more activities together.

The variable of time together can also have negative effects on older couples in 
retirement. Davey and Szinovacz (2004) found that disagreement over time use was a 
stressor for some retired couples. Some wives complained that their retired husbands 
interfered with their daily routines and their time for themselves. Too much time 
together for retired couples who did not have many friends outside of the marriage 
sometimes resulted in increased conflict. Time together can have both positive and 
negative effects on older marriages, but it appears that the amount of time together is not 
as important as the level of satisfaction with that time together.

Statement of Purpose

The purpose of this study was to examine how sexual satisfaction in older 
marriages is affected by family-of-origin distress and marital distress. The constructs 
related to sexual satisfaction were sexual dissatisfaction and sexual intimacy. The 
constructs related to family-of-origin distress were family history of distress and history 
of abuse. The constructs related to marital distress were affective communication and 
time together (see Figure 1). The hypotheses of this study were as follows:
Hypothesis 1: Marital distress has a direct, negative effect on sexual satisfaction in older 
marriages. In other words, increased marital distress leads to decreased sexual 
satisfaction in older marriages for both husbands and wives.
Hypothesis 2: Family-of-origin distress has an indirect, negative effect on sexual 
satisfaction in older marriages through its influence on marital distress. In other words,
increased family-of-origin distress leads to decreased sexual satisfaction in older marriages for both husbands and wives indirectly by influencing marital distress.
Fig. 1 Conceptual Model with Husband and Wife Family-of-Origin Distress and Husband and Wife Marital Distress as Predictors and Husband and Wife Sexual Satisfaction as Criterion Variables.
Chapter II: Method

Sample

The data for this study was taken from the first wave of data in Project Couple Retire. In this project, a list of names and addresses was purchased from the Donnelley Corporation, a major marketing firm, who guaranteed the list to be a random selection from all 50 of the United States of married couples with at least one spouse between the ages of 55 and 75. The purpose of this project was to examine marital process and individual well-being from pre- to post-retirement.

Of the 9,328 pairs of questionnaires mailed, 1,611 couples returned questionnaires. An additional 591 pairs of questionnaires were returned because of incorrect or old addresses. Using the Dillman (1978) formula for calculating response rates, the total response rate for the project was 24%, which is not considered uncommon for a long survey given to older subjects and requiring both marriage partners to respond (Kaldenberg, Koenig, & Becher, 1994; Roszkowski & Bean, 1990). In the process of reviewing the questionnaires, 997 couples were disqualified from analysis because only one spouse responded or because of incomplete information. Those who qualified for analysis for this study were 614 couples with complete data from both husbands and wives. In instances in which less than 5% of items on any scale were missing, values were replaced by mean scores from the series mean.

Table 1 contains information about age and length of marriage for the husbands and wives in this study. The average age in the sample was about 65 years for husbands and about 62 years for wives with a range of 40-79. Some individuals in the sample were outside of the 55-75 age range because older marriages were defined in this study by at
least one spouse being between ages 55 and 75. The average length of marriage was approximately 36 years for both husbands and wives with a range of 2-56.

Table 2 includes percentage breakdowns for husbands and wives for the categories of race, religion, occupation, and income. Regarding race, the majority of the subjects described themselves as Caucasian (approximately 97%). As for religion, the majority of the subjects described themselves as Protestant (approximately 62%). In addition, significant percentages described themselves as Catholic (about 21%) and Jewish (about 4%). At the time of response, approximately 65% of the husbands and approximately 72% of the wives described themselves as retired or not employed. Finally, median income levels were $20,000 - $29,999 for husbands and $10,000 - $19,999 for wives.

Table 1

Means, Standard Deviations, and Ranges for Age and Length of Marriage for Both Husbands and Wives

<table>
<thead>
<tr>
<th></th>
<th>Husbands</th>
<th></th>
<th>Wives</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Range</td>
<td>Mean</td>
</tr>
<tr>
<td>Age</td>
<td>64.94</td>
<td>4.48</td>
<td>49-79</td>
<td>62.39</td>
</tr>
<tr>
<td>Length of Marriage</td>
<td>36.03</td>
<td>11.63</td>
<td>2-52</td>
<td>35.93</td>
</tr>
</tbody>
</table>
### Table 2

Means, Standard Deviations, and Ranges for Age and Length of Marriage for Both Husbands and Wives

<table>
<thead>
<tr>
<th></th>
<th>Husbands</th>
<th>Wives</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>0%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Black</td>
<td>0.5%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0.7%</td>
<td>0.5%</td>
</tr>
<tr>
<td>White</td>
<td>96.4%</td>
<td>97.2%</td>
</tr>
<tr>
<td>Other</td>
<td>1.3%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Missing</td>
<td>1.1%</td>
<td>1.0%</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
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<td>6.5%</td>
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<tr>
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<td>4.1%</td>
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<tr>
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<td>10.6%</td>
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<tr>
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<td>Over $70,000</td>
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<tr>
<td>Missing</td>
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Procedure

Each couple was sent a packet containing instructions and two questionnaires, one for the husband and one for the wife. Included in the questionnaire was the Marital Satisfaction Inventory, Revised (MSI-R) (Snyder, 1997), the Personal Assessment of Intimacy in Relationships (PAIR) (Schaefer & Olson, 1981), and other instruments measuring many variables relating to older marriages. The questionnaire was 13 pages long and took a significant amount of time to complete. The husbands and wives were instructed to complete the questionnaires individually and to return them to the researchers in separate self-addressed, stamped envelopes that were provided.

Instruments

The latent variables in this study (sexual satisfaction, family-of-origin distress, and marital distress) were measured by subscales from the MSI-R (Snyder, 1997), a multidimensional self-report instrument that assesses the individual’s current experience in the marital relationship, and by a subscale of the PAIR inventory (Schaefer & Olson, 1981), another self-report instrument that assesses different types of intimacy in terms of how individuals perceive the intimacy in their relationships and how they would like it to be. An additional set of questions included in the Project Couple Retire questionnaire was used in this study to measure history of abuse.

Marital Satisfaction Inventory, Revised (MSI-R)

The MSI-R (Snyder, 1997) contains 129 true/false questions that measure marital quality. The instrument includes two validity scales (Inconsistency and Conventionalization) and one general scale (Global Distress). The MSI-R also includes 10 additional scales that measure specific aspects of the marriage: 1) Affective
Sexual Satisfaction  21

Communication, 2) Problem-Solving Communication, 3) Aggression, 4) Time Together, 5) Disagreement about Finances, 6) Sexual Dissatisfaction, 7) Role Orientation, 8) Family History of Distress, 9) Dissatisfaction with Children, and 10) Conflict over Child Rearing (Snyder, 1997). The MSI-R scales used in this study were the following: Sexual Dissatisfaction, Family History of Distress, Affective Communication, and Time Together.

*Personal Assessment of Intimacy in Relationships (PAIR)*

The PAIR inventory (Schaefer & Olson, 1981) has 72 total items and is divided into two sections of 36 items each. The first section assesses perceived intimacy and the second section assesses intimacy expectations. The PAIR measures five types of intimacy: emotional, social, sexual, intellectual, and recreational. Individuals respond to each item on a five-point Likert scale and scores are calculated by adding the items corresponding to each type of intimacy and then converting the totals into scores similar to percentiles that range from 0 to 96. The total score on the PAIR ranges from 0 to 480 with higher scores indicating greater levels of intimacy (Schaefer & Olson, 1981). The PAIR scale that was used in this study was the Sexual Intimacy scale.

*Sexual Satisfaction Indicators*

The latent dependent variable created for this study for both husbands and wives was sexual satisfaction. Its indicators were the PAIR Sexual Intimacy scale and the MSI-R Sexual Dissatisfaction scale. The Sexual Intimacy scale of the PAIR was expected to factor significantly on the latent variable of sexual satisfaction in the positive direction, while the Sexual Dissatisfaction scale of the MSI-R was expected to factor significantly in the negative direction.
PAIR Sexual Intimacy Scale. The Sexual Intimacy subscale of the PAIR contains six items which are statements about sexual intimacy in the respondent’s current relationship. Individuals respond to these items by expressing their level of agreement or disagreement with how accurately each statement describes how the sexual intimacy in their relationship is now (perceived) and how they would like it to be (expected). The following statements are examples of items on this scale: “I am satisfied with our sex life,” “I feel our sexual activity is just routine,” and “My partner seems disinterested in sex.” The possible score range for this scale is 0-96.

Reliability and validity testing support the use of the PAIR Sexual Intimacy scale in research. Item analysis and factor analysis were conducted for this scale. Only those items with the best factor loading and those that met the item analysis criteria were retained. In addition, the Sexual Intimacy scale was analyzed for its ability to converge and discriminate with other measures as expected. The Sexual Intimacy scale has significant correlations as expected with measures of marital satisfaction, self disclosure, and family environment. The Cronbach’s Alpha reliability coefficient for this scale is .77 (Schaefer & Olson, 1981). Thus, the Sexual Intimacy scale appears to have adequate reliability and validity.

MSI-R Sexual Dissatisfaction (SEX) Scale. The SEX subscale of the MSI-R consists of 13 items that are made up of three main dimensions: general dissatisfaction with the sexual relationship, partner’s lack of interest in the sexual relationship, and inadequate affection during sexual exchanges. Examples of items on this scale are: “I would prefer to have sexual relations more frequently than we do now,” “My partner sometimes shows too little enthusiasm for sex,” and “I would like my partner to express a
little more tenderness during intercourse.” Higher scores on the SEX scale indicate higher levels of distress regarding the sexual relationship, with a possible score range of 0-13 (Snyder, 1997).

Studies of reliability indicate that the SEX scale has an internal consistency coefficient of .84 and a test-retest reliability coefficient of .81. In terms of validity, 40% of men and 48% of women in couples therapy have reported high-range scores on the SEX scale. Higher scores on the SEX scale are related to clinical ratings about concerns regarding the couple’s sexual relationship. Also, higher scores on the SEX scale are related to concerns about nonsexual intimacy (Snyder, 1997). It appears that the SEX scale has adequate reliability and validity for research.

*Family-of-Origin Distress Indicators*

Two latent independent variables were created for this study. One of the latent independent variables created for both husbands and wives was family-of-origin distress. Its indicators were the MSI-R Family History of Distress scale and the History of Abuse scale from the Project Couple Retire questionnaire.

*MSI-R Family History of Distress (FAM) Scale.* The FAM subscale of the MSI-R is made up of 9 items that assess disruptions in the respondent’s family of origin related to an unhappy childhood, disruption in the parents’ marriage, and disrupted relationships among family members. Items on this scale include the following: “My childhood was probably happier than most,” “My parents’ marriage was happier than most,” and “The members of my family were always very close to each other.” The possible score range is 0-9, and higher scores on the FAM scale indicate higher levels of distress in the respondent’s family of origin (Snyder, 1997).
Based on reliability studies, the FAM scale has an internal consistency coefficient of .78 and a test-retest reliability coefficient of .84. In terms of validity, 38% of men and 50% of women in couples therapy report high-range scores on the FAM scale. Higher scores on the FAM scale are related to clinical ratings of disruption in the family of origin. Individuals with higher FAM scale scores tend to report an unhappy childhood, disruption in their parents’ marriage, and a lack of affection among family members. Higher scores on the FAM scale are also related to current interfering from parents and a longer history of problems in the current marital relationship (Snyder, 1997). It appears that the FAM scale has adequate reliability and validity for use in research.

**History of Abuse Scale.** The Project Couple Retire questionnaire consists of several other items in addition to the MSI-R and the PAIR inventory. Among these additional items are three questions concerning the respondent’s history of abuse during childhood. These three questions specifically ask about the extent of verbal, physical, and sexual abuse. Each question is answered and scored using a 4-point response scale: 1) never, 2) a little, 3) some, 4) often. The scores are then summed and can range from 0 to 12. Higher scores indicate a history of abuse, while lower scores indicate little history of abuse. The test-retest coefficient for this scale is 1.00. In validity studies of this scale, women and men who score higher on the History of Abuse scale also report more symptoms on the SCL-90. It appears that the History of Abuse scale has good reliability and adequate validity.
Marital Distress Indicators

The other latent independent variable created for this study was marital distress. This variable was also created for both husbands and wives. Its indicators were the MSI-R Affective Communication scale and the MSI-R Time Together scale.

MSI-R Affective Communication (AFC) Scale. The AFC subscale of the MSI-R contains 13 items and measures the respondent’s dissatisfaction with how much affection and understanding his or her partner expresses. There are two main dimensions of the AFC scale: lack of affection and support, and lack of empathy or mutual disclosure. Examples of this scale’s items are: “There is a great deal of love and affection expressed in our relationship” and “I feel free to express openly strong feelings of sadness to my partner.” Higher scores on the AFC scale indicate higher levels of dissatisfaction with the amount of affection and understanding expressed by one’s partner. Scores can range from 0 to 13 (Snyder, 1997).

In reliability studies, the AFC scale has an internal consistency coefficient of .85 and a test-retest reliability coefficient of .79. In terms of validity, individuals in couples therapy have been shown to have higher scores on the AFC scale. High-range scores (problem category) on the AFC scale are related to clinical ratings of lack of love and affection, lack of understanding and support, and feelings of estrangement. In addition, individuals with high scores on the AFC scale tend to describe their spouses as unsympathetic, insensitive, overly critical, and withdrawn. These same individuals are not likely to describe their spouses as loving, tender, trusting, and confiding (Snyder, 1997). It appears that the AFC scale has adequate reliability and validity for research.
**MSI-R Time Together (TTO) Scale.** The TTO subscale of the MSI-R consists of 10 items and evaluates how much time the couple spends together in leisure activity and how satisfied the spouses are with their leisure time together. This scale consists of two dimensions: lack of shared leisure activity and lack of shared interests. The following statements are examples of this scale’s items: “My partner and I spend a good deal of time together in different kinds of play and recreation” and “I wish my partner shared a few more of my interests.” Scores on the TTO scale can range from 0 to 10, with higher scores suggesting higher levels of dissatisfaction with the couple’s amount of time together (Snyder, 1997).

In reliability studies, the TTO scale has an internal consistency coefficient of .80 and a test-retest reliability coefficient of .77. In terms of validity, approximately 90% of individuals attending couples therapy have reported at least mid-range scores (possible problem category) on the TTO scale. Over half of these individuals in couples therapy report high-range scores. Higher scores on the TTO scale relate to clinical ratings of lack of common interests and insufficient leisure time together. In addition, individuals with higher scores on this scale are more likely to report feelings of emotional distance from their spouse and less likely to describe their spouse as fun to be with or as a friend (Snyder, 1997). It appears that the TTO scale has adequate reliability and validity for research.

**Analysis**

The method of analysis used in this study was structural equation modeling (SEM). AMOS (Analysis of Moment Structures) was the software used to conduct SEM.
SEM is able to analyze a conceptual model and test for direct and indirect effects within the model simultaneously. (Kline, 2005).

The conceptual model created for this study examined the effects of family-of-origin distress and marital distress (the latent independent variables) on sexual satisfaction (the latent dependent variable). After the conceptual model was created, factor analysis was used to determine measurement fit for the indicators of the latent variables. The analysis produced a significance test for both direct and indirect paths in the conceptual model.

Because the data in this study was dyadic, each variable included data from husbands and data from wives. Following Kenny’s actor-partner interdependence model (Kenny, 2007), there were actually two latent dependent variables (husbands’ sexual satisfaction and wives’ sexual satisfaction) and four latent independent variables (husbands’ family-of-origin distress, wives’ family-of-origin distress, husbands’ marital distress, and wives’ marital distress). In addition, there were four observed dependent variables (husbands’ sexual intimacy, wives’ sexual intimacy, husbands’ sexual dissatisfaction, and wives’ sexual dissatisfaction) and eight observed independent variables (husbands’ family history of distress, wives’ family history of distress, husbands’ history of abuse, wives’ history of abuse, husbands’ affective communication, wives’ affective communication, husbands’ time together, and wives’ time together).
Chapter III: Results

The method of analysis used for this study was structural equation modeling (SEM). The initial conceptual model required adjustment to produce better fit. The modified model was then tested for direct and indirect effects simultaneously.

Descriptive Statistics

Table 3 contains the means, standard deviations, and ranges for all of the observed variables in this study. The observed variables of family history of distress and history of abuse were used to measure the latent variable of family-of-origin distress. The observed variables of affective communication and time together were used to measure the latent variable of marital distress. Finally, the observed variables of sexual intimacy and sexual dissatisfaction were used to measure the latent variable of sexual satisfaction. The following discussion describes the results listed in Table 3.

Table 3

<table>
<thead>
<tr>
<th>Means, Standard Deviations, and Ranges for All Variables</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td>Husbands</td>
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<td>----------------</td>
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</tr>
<tr>
<td>Affective Communication^a</td>
</tr>
<tr>
<td>Time Together^a</td>
</tr>
<tr>
<td>Sexual Intimacy^c</td>
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<tr>
<td>Sexual Dissatisfaction^a</td>
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</table>

^aMSI-R scale. ^bProject Couple Retire scale. ^cPAIR scale.

Family-of-origin distress was measured using the MSI-R family history of distress (FAM) scale and a history of abuse scale from the Project Couple Retire questionnaire.
For the FAM scale, husbands’ scores from the data in this study ranged from 0 to 9 with a mean of 2.99 and a standard deviation of 2.63. Scores for wives in this study ranged from 0 to 9 with a mean of 3.32 and a standard deviation of 2.78. On the Project Couple Retire history of abuse scale, scores for husbands in this study ranged from 5 to 31 with a mean of 7.17 and a standard deviation of 2.98. Wives’ scores ranged from 0 to 27 with a mean of 4.70 and a standard deviation of 5.27.

Marital distress was measured by the affective communication (AFC) and time together (TTO) scales of the MSI-R. For the AFC scale, husbands’ scores in this study ranged from 0 to 13 with a mean of 2.24 and a standard deviation of 2.93. Scores for wives on the AFC scale ranged from 0 to 13 with a mean of 3.47 and a standard deviation of 3.80. On the TTO scale, scores for husbands from the data in this study ranged from 0 to 10 with a mean of 2.13 and a standard deviation of 2.45. Wives’ scores on the TTO scale ranged from 0 to 10 with a mean of 2.41 and a standard deviation of 2.77.

Sexual satisfaction was measured using the PAIR sexual intimacy scale and the MSI-R sexual dissatisfaction (SEX) scale. For the sexual intimacy scale of the PAIR inventory, scores for husbands in this study ranged from 4 to 96 with a mean of 63.55 and a standard deviation of 21.30. Wives’ scores on the PAIR sexual intimacy scale ranged from 0 to 96 with a mean of 65.88 and a standard deviation of 20.78. On the SEX scale of the MSI-R, husbands’ scores in this study ranged from 0 to 12 with a mean of 4.51 and a standard deviation of 3.72. Scores for wives on the MSI-R SEX scale ranged from 0 to 12 with a mean of 3.46 and a standard deviation of 3.37.
Correlation Results

A correlation analysis of all observed variables originally included in this study was completed and the results are shown in Table 4. This study originally included 12 observed variables. As will be explained below in discussing the structural equation model, history of abuse (for husbands and wives) was later removed from the study which resulted in 10 remaining observed variables. The following discussion highlights some of the correlations among the remaining observed variables.

Sexual intimacy and sexual dissatisfaction had a significant inverse correlation for both husbands and wives, which was consistent with the use of these observed variables as measures of the latent variables, husbands’ sexual satisfaction and wives’ sexual satisfaction. In addition, sexual intimacy and sexual dissatisfaction for husbands were both significantly correlated to sexual intimacy and sexual dissatisfaction for wives, indicating that husbands’ sexual satisfaction was closely related to wives’ sexual satisfaction.

According to the correlation analysis, the observed variables used to measure husbands’ sexual satisfaction had significant correlations to the observed variables used to measure husbands’ family-of-origin distress, husbands’ marital distress, and wives’ marital distress. However, the observed variables for husband’s sexual satisfaction were not significantly correlated to the observed variable for wives’ family-of-origin distress. Thus, the observed dependent variables used to measure husbands’ sexual satisfaction were significantly correlated to all but one of the observed independent variables as expected.
Table 4

Correlations for All Variables

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<th>HHISABUS</th>
<th>HAFFCOM</th>
<th>HTMTO</th>
<th>HSEXINT</th>
<th>HSEXDIS</th>
<th>WHISABUS</th>
<th>WFHDIS</th>
<th>WAFFCOM</th>
<th>WTIMTO</th>
<th>WSEXINT</th>
<th>WSEXDIS</th>
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</tr>
<tr>
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</table>

*p < 0.05. **p < 0.01.

H = Husband; W = Wife.
FHDIS = Family History of Distress; HISABUS = History of Abuse; AFFCOM = Affective Communication. TIMTO = Time Together; SEXINT = Sexual Intimacy; SEXDIS = Sexual Dissatisfaction
The correlation analysis also indicated that the observed variables used to measure wives’ sexual satisfaction had significant correlations to the observed variables used to measure wives’ family-of-origin distress, wives’ marital distress, husbands’ family-of-origin distress and husbands’ marital distress. Therefore, the observed dependent variables used to measure wives’ sexual satisfaction were significantly correlated to all of the observed independent variables as expected.

In addition, it is interesting to note that the correlation analysis showed that the observed variables used to measure family-of-origin distress for both husbands and wives were significantly correlated to the observed variables used to measure marital distress for both husbands and wives. However, the observed variable for husbands’ family-of-origin distress and the observed variable for wives’ family-of-origin distress were not significantly correlated to each other. None of the correlations among the remaining observed independent variables were so high that they would create problems with multicollinearity, so the indicators were left in the model.

*Structural Equation Model Results*

All of the latent and observed variables were inserted simultaneously into the structural equation model and the results were generated using the AMOS (Analysis of Moment Structures) statistical program. The original conceptual model shown in Figure 1 was modified based on statistical evidence in order to maximize fit. The modified conceptual model can be seen in Figure 2. The analysis results, which were based on the modified model, are presented in Figure 3. Non-significant paths were eliminated from Figure 3 for ease of reading.
Originally, the observed variable of history of abuse was used to assist in measuring the latent variable of family-of-origin distress. However, the fit statistics did not meet all of the standards for goodness of fit, and family-of-origin distress for husbands and wives had negative variance. Since it is theoretically possible for variables to have negative variance, there was a problem with the model. In addition, the factor loadings for husbands’ and wives’ history of abuse on the latent variable, family-of-origin distress, were low. The observed variable of history of abuse was consequently dropped from the study which resulted in the modified model. Therefore, the latent variable of family-of-origin distress only included the observed variable, family history of distress.

Table 5 contains goodness of fit indices for the original conceptual model in Figure 1 (Model 1) and the modified conceptual model in Figure 2 (Model 2).

Comparing the CFI and RMSEA indices for Model 1 and Model 2 demonstrates that the modified conceptual model had much better fit. Model 2 had better scores than Model 1 on all of the goodness of fit indices, and Model 2 met the goodness of fit standards for each index (Byrne, 2001). Thus, the changes to the conceptual model maximized fit.

Table 5

<table>
<thead>
<tr>
<th>Goodness of Fit Index</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Standard (Byrne, 2001)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chi Square (df)</td>
<td>408.0 (df=39)</td>
<td>78.62 (df=21)</td>
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<td>GFI</td>
<td>0.91</td>
<td>0.98</td>
<td>Above 0.90</td>
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<tr>
<td>CFI</td>
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<td>Above 0.95</td>
</tr>
<tr>
<td>RMSEA</td>
<td>0.12</td>
<td>0.05</td>
<td>0.04-0.08</td>
</tr>
</tbody>
</table>

Fig. 2. Conceptual Model with Husband and Wife Family History of Distress and Husband and Wife Marital Distress as Predictors and Husband and Wife Sexual Satisfaction as Criterion Variables. (with Husband and Wife History of Abuse removed)
Fig. 3. Structural Equation Modeling Results showing Standardized Coefficients for the Significant Paths.

H Family History Of Distress → H Marital Distress → H Sexual Satisfaction
W Family History Of Distress → W Marital Distress → W Sexual Satisfaction

* p < 0.05  ** p < 0.01  *** p < 0.001

Chi-Square=78.8, df=21, CFI=0.98, RMSEA=0.05
The last two tables (Tables 6 and 7) present the results from the test of the structural equation model. These tables contain information about the relationships among all of the latent variables. The latent variables of sexual satisfaction for husbands and wives were the criterion, or dependent, variables in the model. The latent variables of family-of-origin distress and marital distress for husbands and wives were the predictor, or independent, variables in the model.

Table 6 presents the direct effects in the model. In other words, this table shows how the predictor variables of family-of-origin distress and marital distress for husbands and wives directly affected the criterion variables of sexual satisfaction for husbands and wives. The direct effects were calculated using AMOS standard procedures.

Table 6

<table>
<thead>
<tr>
<th></th>
<th>Husband Sexual Satisfaction</th>
<th>Wife Sexual Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband Family-of-Origin Distress</td>
<td>-0.03</td>
<td>0.00</td>
</tr>
<tr>
<td>Wife Family-of-Origin Distress</td>
<td>-0.01</td>
<td>-0.09*</td>
</tr>
<tr>
<td>Husband Marital Distress</td>
<td>-0.83***</td>
<td>0.01</td>
</tr>
<tr>
<td>Wife Marital Distress</td>
<td>-0.16*</td>
<td>-0.65***</td>
</tr>
</tbody>
</table>

Note. All values are standardized coefficients.
*p < 0.05.  ** p < 0.01.   ***p < 0.001.

According to the results, husbands’ family-of-origin distress did not have a significant direct effect on husbands’ sexual satisfaction or wives’ sexual satisfaction. In addition, wives’ family-of-origin distress did not have a significant direct effect on husbands’ sexual satisfaction. However, wives’ family-of-origin distress did have a significant direct effect on wives’ sexual satisfaction (at the 0.05 level).

As for marital distress, the results showed that husbands’ marital distress had a significant direct effect on husband’s sexual satisfaction (at the 0.001 level) but not on
wives’ sexual satisfaction. Also, wives’ marital distress had a significant direct effect on both husbands’ sexual satisfaction (at the 0.05 level) and wives’ sexual satisfaction (at the 0.001 level).

The analysis of direct effects indicated that husbands’ sexual satisfaction was most strongly affected by husbands’ marital distress and wives’ marital distress. In other words, the more distress that husbands and wives experienced in their marital relationships, the less satisfied husbands were with their sexual relationships. The direct effects also showed that wives’ sexual satisfaction was most strongly affected by wives’ marital distress and wives’ family-of-origin distress. In other words, the more distress that wives experienced in their marital relationships and their families of origin, the less satisfied wives were with their sexual relationships.

Table 7 presents the indirect effects in the model. In other words, this table shows how the predictor variables of family-of-origin distress for husbands and wives indirectly affected the criterion variables of sexual satisfaction for husbands and wives through their influence on the other predictor variables of marital distress for husbands and wives. The indirect effects were calculated using AMOS standard procedures.

Table 7

<table>
<thead>
<tr>
<th>Indirect Effects</th>
<th>Husband Marital Distress</th>
<th>Wife Marital Distress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband Family-of-Origin Distress</td>
<td>0.35***</td>
<td>0.17***</td>
</tr>
<tr>
<td>Wife Family-of-Origin Distress</td>
<td>0.12**</td>
<td>0.27***</td>
</tr>
</tbody>
</table>

Note. All values are standardized coefficients.
*p < 0.05. ** p < 0.01. ***p < 0.001.

According to the analysis, husbands’ family-of-origin distress had significant indirect effects through its influence on both husbands’ marital distress and wives’
marital distress (both at the 0.001 level). In addition, wives’ family-of-origin distress had significant indirect effects through its influence on both husbands’ marital distress (at the 0.01 level) and wives’ marital distress (at the 0.001 level).

The analysis of indirect effects suggested that husbands’ sexual satisfaction was indirectly affected in a significant way by both husbands’ and wives’ family-of-origin distress through their influence on both husbands’ and wives’ marital distress. This analysis also indicated that wives’ sexual satisfaction was indirectly affected in a significant way by both husbands’ and wives’ family-of-origin distress through their influence on wives’ marital distress.
Chapter IV: Discussion

For the purpose of this study, a conceptual model was created using the method of structural equation modeling (SEM). This model consisted of two latent dependent variables (husbands’ sexual satisfaction and wives’ sexual satisfaction) and four latent independent variables (husbands’ family-of-origin distress, wives’ family-of-origin distress, husbands’ marital distress, and wives’ marital distress). Appropriate observed variables were used to measure the latent variables. Measures of sexual intimacy and sexual dissatisfaction were used for the latent variable, sexual satisfaction. Measures of family history of distress and history of abuse were originally used for the latent variable, family-of-origin distress. However, the history of abuse measure was eventually removed from the study because it did not fit well within the model. Therefore, the latent variable of family-of-origin distress only included the family history of distress measure. Measures of affective communication and time together were used for the latent variable, marital distress. An important advantage of this study was that it included dyadic data. Consistent with Kenny’s actor-partner interdependence model (Kenny, 2007), both actor and partner effects were examined.

SEM analysis was used to test the conceptual model and produce the results. This method of analysis simultaneously tested for direct and indirect effects. In performing SEM analysis, the initial model was modified to achieve the best possible fit. AMOS (Analysis of Moment Structures) was the specific statistical program used in this study. This was a study of the effects of family-of-origin distress and marital distress on sexual satisfaction in older marriages. The conceptual model in this study was created to examine how spouses’ families of origin and the current marital relationship affect the current sexual relationship for older couples. While sexuality research for young and
mid-life couples has been emphasized for some time, only recently have researchers also focused on sexuality for older couples. In addition, the author of this study was especially interested to examine how families of origin still influence later-life marriages. While spouses’ families of origin are frequently examined in studies of young and mid-life marriages, it was interesting in this study to see how the older couples’ families of origin still impacted their marital and sexual relationships. The findings of this study and their implications are discussed in more detail in the following sections.

**Sexual Satisfaction in Older Marriages**

Sexual satisfaction for older couples is a topic that deserves further empirical study. Earlier studies have pointed out the importance of sexuality in older marriages (AARP, 2004; Ade-Ridder, 1990; Hinchliff & Gott, 2004), which is consistent with the focus of the current study. The sexual relationship is just as important for older couples as it is for younger and midlife couples. However, previous research has also found that older couples generally have lower levels of sexual satisfaction than younger and midlife couples (Norris, Snyder, & Rice 1997). This difference may be due to various stressors that some older couples experience such as physical health problems and limited income. Sexual dysfunctions for husbands and wives have also been found to negatively affect the sexual relationship in older marriages (Hinchliff & Gott, 2004). In addition, depression has been found to negatively affect older marriages (Tower & Kasl, 1995; Sandberg, Miller, & Harper, 2002) which suggests that depression may also negatively affect the sexual area of the marriage for older couples. On the other hand, one of the studies cited above (Hinchliff & Gott, 2004) also found that length of marriage improved sexual
intimacy for some older couples because they knew each other better, were more aware of each other’s likes and dislikes, and were closer as a couple.

Therefore, there are both positive and negative factors that affect the sexual relationship in older marriages. The findings in this study have shown that sexual satisfaction for older couples is also affected by other areas of the current marital relationship as well as by the spouses’ perceptions of their families of origin. Even with the many changes and challenges that older couples face, they are generally able to adapt and continue to be sexually active. Thus, it is important to further the understanding of sexuality in older marriages. This study was performed to contribute to that understanding.

**Sexual Satisfaction and Marital Distress**

The results of this study showed that marital distress had a direct, negative effect on sexual satisfaction in older marriages. Specifically, wives’ marital distress had a significant direct effect on both wives’ sexual satisfaction and husbands’ sexual satisfaction. In addition, husbands’ marital distress had a significant direct effect on husbands’ sexual satisfaction but not on wives’ sexual satisfaction. Therefore, increased marital distress did lead to decreased sexual satisfaction in older marriages. However, wives’ marital distress was found to significantly affect the sexual satisfaction of both spouses while husbands’ marital distress was found to significantly affect their own sexual satisfaction but not that of their spouses.

This study’s results are consistent with previous research that has linked sexual satisfaction and marital quality in older marriages (Ade-Ridder, 1990; Hinchliff & Gott, 2004). The results regarding marital distress are interesting when considering that the
measures of marital distress in this study were affective communication and time together. Previous research has shown that distress relating to affective communication does negatively affect the marital relationship (Biller, 2000; Yelsma and Marrow, 2003). These findings led to the hypothesis that affective communication would also affect the sexual area of the relationship. The results of this study confirmed that hypothesis. Thus, older couples who work to improve their affective communication by expressing more affection and understanding will also improve their sexual relationship.

As for time together, previous studies (Biller, 2000; Smith, et al., 1988) have indicated that distress relating to time together negatively affects marital satisfaction which led to the belief that it would also have an impact on sexual satisfaction. This study’s results supported that belief. Accordingly, if older couples will work to have more satisfying time together in nonsexual ways, their sexual time together will also be more satisfying.

It is also interesting, in light of the results of this study, to consider previous research that specifically examined time together in older marriages. Researchers have pointed out that older couples in which at least one of the spouses is retired are often able to spend more time together than younger couples. This increased time together can have both positive and negative effects on older couples. The level of satisfaction with time together seems to be more significant than the amount of time together (Davey & Szinovacz, 2004). Therefore, as older couples transition into retirement they have to adjust to more time together and work to make their increased time together mutually satisfying to avoid negative affects on their marriage and on their sexual relationship.
Sexual Satisfaction and Family-of-Origin Distress

The results of this study demonstrated that family-of-origin distress had an indirect, negative effect on sexual satisfaction in older marriages through its influence on marital distress. In particular, husbands’ family-of-origin distress and wives’ family-of-origin distress significantly influenced both husbands’ marital distress and wives’ marital distress. Thus, increased family-of-origin distress did lead indirectly to decreased sexual satisfaction in older marriages by significantly influencing marital distress.

The results concerning family-of-origin distress are important because they contribute to better understanding the impact of spouses’ families of origin on later-life marriages. According to Williamson’s theory concerning personal authority in the family system (Williamson, 1991), adults have already worked out their family-of-origin issues by age 40. However, the current study’s results indicate that adults may never totally work out these issues and that they are still affected by their families of origin in old age. Family-of-origin variables have been frequently included in studying younger and mid-life marriages. This study has shown that family-of-origin variables are still relevant in studying older marriages.

Consistent with the results of this study, previous research has demonstrated that spouses’ families of origin do influence the marital relationship. One study looked at the connection between family-of-origin experiences and marital adjustment (Sabatelli & Bartle-Haring, 2003). The researchers found that family-of-origin experiences for both husbands and wives significantly affected their later marital adjustment. Another study examined the influence of previous generations on nuclear family functioning and found that multigenerational stressors had a greater effect than individual or nuclear family
stressors (Klever, 2005). These research studies did not focus specifically on older couples, but they show the relevance of spouses’ families of origin to their later marital relationship. Perhaps it is because couples are affected by their families of origin in early marriage that they are still affected in later marriage. The influence of spouses’ families of origin may set their relationship on a different trajectory early on that still affects them in later life indirectly. The results of the current study confirm the hypothesis that spouses’ families of origin still affect their marital and sexual relationship in later life. Therefore, addressing unresolved family-of-origin issues can help older couples to decrease marital distress and increase sexual satisfaction.

Theoretical Implications

The findings in this study show how family systems theory can contribute to a better understanding of sexual satisfaction in older marriages. Family systems theory (Bowen, 1978) is a theory of human behavior that views the family as a unit and uses systems thinking to explain the interactions within the unit. Family members are understood to be interdependent, and a change in one member’s functioning leads to changes in the functioning of others. This study identified the significant influences of marital relationship dynamics and family-of-origin dynamics on sexual satisfaction for older couples. While individual variables also affect sexuality in older marriages, this study’s results demonstrate the importance of systemic variables in studying the marital and sexual relationships of older couples.

Closely related to family systems theory is intergenerational transmission theory. According to the theory of intergenerational transmission (Bowen, 1978), previous family generations significantly affect later family generations. Healthy or unhealthy
functioning can be transmitted to the next generation through exposure in the family of origin. In other words, intergenerational transmission occurs through social learning. Consistent with this theory is the importance of spouses’ families of origin in understanding their marital and sexual relationships throughout life. Therefore, this study’s results support intergenerational transmission theory.

Research Implications

Sexuality is an important part of the marital relationship throughout life, and the number of older adults is continuing to increase. Consequently, there will continue to be more sexually active older couples that can benefit from the findings in this study.

This research study of sexual satisfaction in older marriages was limited to examining the effects of certain family-of-origin and marital variables. Future research studies about sexuality for older couples could look at other variables. For example, the original model in this study included history of abuse as a variable, but this variable did not fit well within the model and had to be removed. History of abuse is still relevant conceptually in understanding sexual satisfaction. Perhaps a future study could include history of abuse as a separate variable in a different model. In addition, the impact of marital abuse on the sexual relationship for older couples could be examined.

Finally, the data used in this study came from the first wave of a research project about older couples and therefore was not longitudinal. Data from future waves of Project Couple Retire could be combined with this data to conduct longitudinal studies that would provide insight into how the marital and sexual relationships of older couples change over time. There are clearly many opportunities to do additional research in the future about sexual satisfaction in older marriages.
Clinical Implications

The results of this study also have important implications for clinical practice with older couples. This study found that both husbands’ and wives’ families of origin still have significant influences in older marriages. Accordingly, marital therapy with older couples should include an assessment of how the spouses’ families of origin are still affecting their current marital relationship. Therefore, the assessment and discussion of intergenerational issues is supported by this study’s results and will likely be helpful in working with older couples.

In addition, this study has pointed out the importance of affective communication in older marriages which suggests that emotionally focused marital therapy (EFT) will also be useful with older couples. EFT (Johnson, 1996) is an approach to marital therapy that focuses on emotion and attachment. The clinician works to help spouses change their emotional responses to each other in a way that creates a more secure attachment in the relationship.

Regarding conflict over time together, it is expected that problem-solving approaches such as behavioral marital therapy (BMT) will have value for older couples. BMT (Jacobson & Margolin, 1979) is a treatment approach for marital distress based on principles of reinforcement, social learning, and behavior exchange. In applying these principles to marital dynamics, the focus is on changing unhealthy relationship patterns, balancing each spouse’s needs, and improving skills in communication, conflict resolution, and problem solving.

Also, sex therapy with older couples should include an assessment of how the spouses’ families of origin and their current marital relationship affect their current
sexual relationship. This study’s results indicate that marital distress has a direct, negative effect on sexual satisfaction in older marriages and that family-of-origin distress indirectly affects older couples’ sexual satisfaction in a negative way. Clinicians treating the sexual relationships of older couples should consider these systemic influences on sexual satisfaction.

Limitations

While this study has contributed to the understanding of sexual satisfaction in older marriages, there are some limitations to consider. The sample was mostly Caucasian, which means that the results may not be able to be generalized to other racial groups. In addition, the measure of history of abuse included in the original conceptual model had to be removed which gave the study a more limited focus.

The data in this study came from self-report instruments. Potential problems with self-report data include recall problems and the intentional misreporting of behaviors. Also, the measures of sexual satisfaction in this study were general and did not focus on specific aspects of sexual intimacy in older marriages. In spite of these limitations, this study hopefully assists clinicians and researchers to better understand sexual satisfaction in older marriages.

Conclusion

In conclusion, sexual satisfaction in older marriages is an important topic that needs to be studied further and better understood. Sexuality remains significant to older couples, and they need access to updated information that will help them improve their sexual relationships. This study’s purpose was to contribute useful information about sexual satisfaction in older marriages that will help lead to an improved understanding
among professionals and among older couples themselves. The results of this study have demonstrated the impact that spouses’ families of origin and the current marital relationship can have on the sexual relationship in older marriages. Hopefully, professionals and older couples will benefit from this study by recognizing the significant effects that family-of-origin and marital factors can have on sexual satisfaction.
References

Washington, DC: Author.


Appendix: Instruments

*Sexual Satisfaction Indicators*

PAIR Sexual Intimacy Scale

Answered (a) How it is now and (b) How I would like it to be.

The following response scale was used: 0-Strongly Disagree, 1-Somewhat Disagree, 2-Neutral, 3-Somewhat Agree, 4-Strongly Agree.

I am satisfied with our sex life.
I feel our sexual activity is just routine.
I am able to tell my partner when I want sexual intercourse.
I “hold back” my sexual interest because my partner makes me feel uncomfortable.
Sexual expression is an essential part of our relationship.
My partner seems disinterested in sex.

MSI-R Sexual Dissatisfaction (SEX) Scale

True or False

My partner seems to enjoy sex as much as I do.
I would prefer to have sexual relations more frequently than we do now.
I am sometimes unhappy with our sexual relationship.
I am somewhat dissatisfied with how we discuss better ways of pleasing each other sexually.
One thing my partner and I don’t fully discuss is our sexual relationship.
My partner sometimes shows too little enthusiasm for sex.
My partner has too little regard sometimes for my sexual satisfaction.
My partner and I nearly always agree on how frequently to have sexual relations.
I have never seriously considered having an affair.
My partner and I rarely have sexual relations.
I would like my partner to express a little more tenderness during intercourse.
There are some things I would like us to do, sexually, that my partner doesn’t seem to enjoy.
Our sexual relationship is entirely satisfactory.
MSI-R Family History of Distress (FAM) Scale

True or False

My childhood was probably happier than most.
I was very anxious as a young person to get away from my family.
My parents’ marriage was happier than most.
All the marriages on my side of the family appear to be quite successful.
My parents didn’t communicate with each other as well as they should have.
My parents never really understood me.
I had a very happy home life.
The members of my family were always very close to each other.
I often wondered whether my parents’ marriage would end in divorce.

Project Couple Retire History of Abuse Scale

The following response scale was used: a-Never, b-A little, c-Some, d-Often

I was physically abused as a child.
I was verbally abused as a child.
I was sexually abused as a child.
Marital Distress Indicators

MSI-R Affective Communication (AFC) Scale

True or False

My partner almost always responds with understanding to my mood at a given moment. It is sometimes easier to confide in a friend than in my partner. There is a great deal of love and affection expressed in our relationship. My partner doesn’t take me seriously enough sometimes. Whenever I’m feeling sad, my partner makes me feel loved and happy again. Sometimes I feel as though my partner doesn’t really need me. Sometimes my partner just can’t understand the way I feel. Just when I need it the most, my partner makes me feel important. My partner does many different things to show me that he or she loves me. I feel free to express openly strong feelings of sadness to my partner. Sometimes I wonder just how much my partner really does love me. Whenever he or she is feeling down, my partner comes to me for support. My partner keeps most of his or her feelings inside.

MSI-R Time Together (TTO) Scale

True or False

I am fairly satisfied with the way my partner and I spend our available free time. I wish my partner shared a few more of my interests. My partner likes to share his or her leisure time with me. My partner and I spend a good deal of time together in different kinds of play and recreation. My partner and I don’t have much in common to talk about. It seems that we used to have more fun than we do now. Our daily life is full of interesting things to do together. My partner doesn’t take enough time to do some of the things I’d like to do. I spend at least one hour each day in an activity with my partner. Our recreational and leisure activities appear to be meeting both our needs quite well.