Bienestar psicológico y satisfacción sexual en personas de 40 a 70 años de edad.

Psychological well-being and sexual satisfaction in people aged 40 to 70

Satisfação psicológica e sexual em pessoas com idade bem-estar 40 a 70 anos de idade.

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Resumen

El objetivo del estudio fue identificar las diferencias en la Satisfacción Sexual (SS) y el Bienestar Psicológico (BP) en personas de 40 a 70 años de edad, así como la relación entre ambas variables. La muestra fue de 300 personas, 150 hombres y 150 mujeres, que conformaron 150 parejas divididas en tres grupos distribuidos de la siguiente manera: G1, personas de 40 a 49 años (n=100); G2, personas de 50 y 59 años (n=100) y G3, personas de 60 y 69 años (n=100).

Se uso una ficha de identificación, el Inventario de Satisfacción Sexual (Álvarez-Gayou, 2004), y la Escala de Bienestar Psicológico (Sánchez-Canóvas, 2002).

Los resultados obtenidos describen diferencias significativas ($p \le .05$) en algunos factores del Bienestar Psicológico y en la satisfacción sexual entre los grupos. Al mismo tiempo se identificaron correlaciones fuertes y moderadas entre las variables.

Palabras clave: satisfacción sexual, bienestar psicológico, adultos mayores, parejas.

Abstract

The objective of the study was to identify differences in Sexual Satisfaction (SS) and Psychological Well-being (BP by its name in Spanish) in people 40 to 70 years of age, as well as the relationship between the two variables. The sample was 300 people, 150 men and 150 women, who formed 150 couples divided into three groups, distributed as follows: G1, persons aged 40 to 49 years (n = 100); G2, people from 50 to 59 years (n = 100) and G3, people of 60 and 69 years of age (n = 100).

Using a card of identification, inventory of Sexual satisfaction (Alvarez-Gayou, 2004), and the scale of psychological well-being (Sánchez-Cánovas, 2002).

The results described significant differences ($p \le 0.05$) on some factors of the psychological well-being and sexual satisfaction among stakeholders. At the same time, moderate and strong correlations between the variables were identified.

Key words: sexual satisfaction, psychological well-being, older adults, couples.

Resumo

O objectivo do estudo foi identificar diferenças na satisfação sexual (SS) e o bem-estar psicológico (BP) em pessoas de 40 a 70 anos de idade, e a relação entre as duas variáveis. A amostra consistiu em 300 pessoas, 150 homens e 150 mulheres, que constituída por 150 pares divididos em três grupos distribuídos como se segue: G1,

pessoas com idades compreendidas entre 40 a 49 anos (n = 100); G2, as pessoas 50 e 59 anos (n = 100) e G3, idade 60 a 69 anos (n = 100).

foi utilizada uma ficha de identificação, satisfação sexual Inventory (Alvarez-Gayou, 2004) e bem-estar psicológico Scale (Sánchez-Cánovas, 2002).

Os resultados descrever diferenças significativas ($p \le 0.05$) em alguns factores de bemestar psicológico e satisfação sexual entre os grupos. Ao mesmo tempo, foram identificadas as correlações fortes e moderadas entre variáveis.

Palavras-chave: satisfação sexual, bem-estar psicológico, idosos, casais.

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Introduction

At the end of the century gone talk about sexuality in people older than 40 years it was almost impossible, since there were few investigations on the matter and a human life expectancy was much lower than the present day.

Sexuality involves much more than activities and the pleasure of the genital tract; it implies analyzing all the factors around it, such as the age, quality of life, medical, psychological, and biological factors, materials, labor, affective and emotional factors.

Psychological well-being understood as the positive sentiment and constructive thinking human being about itself, as well as Sexual satisfaction, understood as the fulfillment of an erotic desire, serenity of a feeling, feelings of joy and love, are essential for the full development of the later stages of the life of every human being.

Aparicio (2002) points out that maturity is defined as a transition stage for the average adult to the stage of the elderly, in a chronological age ranging between 40 and 60 years. In the female it is marking the culmination of the reproductive stage of their sexual cycle (menopause), and in man his productivity gradually decays.

Various authors (Dulcey and Uribe, 2002: McCary, 1999; Cagnon, 1980; Stassen and Thompson, 2001; Lefrancois, 2001; Craig and Baucum, 2001; Reinisch and Beasley, 1992; Rena, 2005; Valli, 1988) agree that beginning at age 40, people start to experience changes both physical as psychological-affective affecting sexuality, at the same time is a stage of achievements and goal attainment (Carretero, Palacios y Marchesia, 1985).

In the 20th century, talk about sexual activity in individuals between 40 and 60 years have been something unusual, not just because people lived shorter, but for cultural reasons, which made it difficult to talk about. In the 21st century, the situation has changed, since there is available a wide sexual information, medical advances and treatments that can prolong the life beyond the age of 70, thus in the period of maturity has also been extended to keep erotic relations (Cardenas, 2003).

At the same time, López (1983) comments that it is not surprising that in our time, as in other times, it has been established as a taboo that sex belongs only to young people. However, sexuality is important for the well-being and quality of life of older people and, therefore, must be taken into account by health professionals (Muñoz, 2000, Papalia, Wenkos and Duskin, 2001; ;

According to Sahagún (1993), human instincts, particularly sexual ones, have great flexibility, that is, there are several ways of satisfying them, such as masturbation or fast or permanent partner choice.

Several authors point out that the concept of sexual satisfaction has multiple meanings and dimensions, among which are: fulfillment of an erotic desire, reassuring a feeling, being pleased and loved (Aparicio, 2002); In couples over the years the frequency of sexual encounters decreases, however, it increases the sense of satisfaction in each encounter (Rosenzvaig, 1999); For Blasco (1994) includes an essay of games, caresses and contact with the body that allows to know the intimate mechanisms of the pleasure of each individual. Some men enjoy the full nudity of their wives during preliminary sexual acts and during intercourse, while others prefer their wives to dress in a special way, perhaps with some background, special panty or bra, in order to increase their Sexual arousal and satisfaction (McCary, 1999). For Reyes, Díaz and Rivera (1998), sexuality encompasses various agents such as: seduction, pleasure, passion, stimulation, affection, and so on. In order to explain it, however, it is also inescapable to talk about the issue that occurs in the sexual act of the couple, that is, what produces satisfaction before, during and after sexual intercourse, and factors that influence it. In order for men and women to maintain good sexual health, it is recommended that they maintain a reasonable physical condition, especially of the cardiovascular system, by performing exercises, walking, yoga, and so on, and maintaining a normal body weight. Overweight hinders the performance of sexual intercourse (Cagnon, 1980).

Getting to 40 or 50 years does not mean that sexual relations are extinguished, on the contrary, at this stage of life there is the advantage that the sexual act can become much

more intense; They may have relationships once or twice a week, but they will be of better quality.

Cardenas (2003) mentions that when a woman reaches 40 and menses have ceased, she is no longer in danger of becoming pregnant, so she and her man could afford to know, find out and enjoy everything they have not experienced, about All if they are in pair. If the relationship has become boring and routine, it is necessary for a member of the couple to use their imagination and perform some techniques such as: to devise new positions or caresses, to watch movies with sex, to escape from the weekend or maybe to use a toy sexual.

García and González (2000) mention that the study of human welfare is undoubtedly a complex subject on which social scientists do not reach a consensus. The lack of agreement in its conceptual delimitation is due, among other reasons, to the complexity of its study, largely determined by its temporal character and its pluridentified nature in which objective and subjective factors intervene. There are a variety of approaches to human well-being, which has not made it possible to reach consensus on its conceptualization and measurement. One of the essential components of well-being is personal satisfaction with life. This satisfaction arises from the exchange between the individual and his micro and macrosocial environment, with its current and historical elements, which include objective material and social conditions that offer man certain opportunities for personal fulfillment.

Dienner (2000, en Cuadra, 2003) Mentions that psychological well-being is what people think and feel about their lives, as well as the cognitive and affective solutions they achieve when they evaluate their existence.

On the other hand, Suh, Lucas and Smith (1999, in Cuadra, 2003) affirm that the psychological well-being is a site of scientific benefit and not a specific structure that contains the emotional responses of the people, satisfactions of dominion and the global judgments of Life satisfaction

Diener, Suh and Oishi (1997, Figueroa, Contini, Lacunza, Levín and Estévez, 2005) stated that for a long time it was believed that psychological well-being was related only to objective variables such as physical appearance and intelligence, Which is more linked to others at the individual and subjective level.

Also, different studies have pointed out that the happier and more satisfied individuals suffer less discomfort, have better personal appreciation, a better control of the environment and a more healthy management of interpersonal relationships (Ryff, 1989, Ryff and Keyes, 1995; Argyle and Martín, 1987, in Figueroa et al., 2005).

Therefore, psychological well-being is a complex concept that has been used imprecise in relation to others, such as life satisfaction and quality of life. Horley and Little (1985, Figueroa et al., 2005) differentiate psychological well-being, defining it as subjective perception, positive state or feeling; Satisfaction is understood as the gratification provided by personal projects; While the quality of life is the degree to which it is perceived favorably. They think that psychological well-being can be evaluated through several of its components, affections and cognition, which have to be examined in different contexts such as family and work.

For Diener (1994, en Figueroa et al., 2005), The definition of well-being is related to its measurement. It recognizes three characteristics: subjectivity; Presence of positive indicators, and not only the absence of negative factors; And an overall assessment of life.

A high well-being depends on a positive appreciation of that which remains over time, and low well-being depends on the mismatch between expectations and achievements.

Psychological well-being is presented as a multidimensional concept (Ryff and Keyes, 1995, in Figueroa et al., 2005). Ryff was able to identify in his research six dimensions of psychological well-being: a) a positive appreciation of himself (self-acceptance); B) ability to effectively control the environment and life itself (domain); C) ability to efficiently manage personal relationships (positive affects); D) the belief that life has purpose and meaning (personal development); E) positive feelings towards growth and maturity (autonomy); E) sense of self-determination.

Diener, Suh, Lucas and Smith (1999, in Cuadra, 2003) show that there are different areas of psychological well-being, the first is subjective well-being, which refers to the fact that when the person is happy he is jovial, healthy, extroverted, Optimistic, free, religious, with high self-esteem, moral and with a wide range of levels of intelligence; This subjective well-being focuses on the emotional and emotional aspects.

Anguas y Reyes (1998) affirm that the subjective well-being is one of the primordial goals of the western society of our time. People, on an individual level, try to mold their lives in such a way that they can fully enjoy it. The belief that one can enjoy greater well-being has its origin in the humanistic view of man. This view is still the ideological basis of the social welfare states of the twentieth century, where social reforms guided by scientific research are expected to result in a better society and greater well-being.

Lazarus y Folkman (1986, en Valenzuela y Díaz, 1996) They state that subjective wellbeing will be understood as the relation between expectations and results obtained, that is, people will be satisfied with themselves and their achievements to the extent that they exceed what they intended to achieve and will be frustrated when such Achievements do not reach what they had planned.

The concept of subjective well-being has been described mainly through three dimensions of change in society: a) interpersonal human growth, which emphasizes social mechanisms to maximize human well-being; B) protection of the quality of the environment, which refers to preserving the natural ecological balance and the integrity of the biosphere with interpersonal changes; C) technical economic growth, including economic and technical changes (Mookherjee, 1992, in Valenzuela and Díaz, 1996).

Seidlitz and Diener (1993, in Valenzuela and Diaz, 1996) propose two more components for subjective well-being, happiness or mood and satisfaction with life: given that for people an assessment of quality of life in cognitive terms May be less relevant than what they feel at a particular moment in time.

Mookherjee (1992, Valenzuela and Diaz, 1996) found that the variables of importance for the evaluation of subjective well-being were race, marital status, education and financial status. These are also predictive, except financial status; While gender, residence at 16 and the current place of residence were not significant.

On the other hand, Ellison (1991, in Valenzuela and Diaz 1996) points out a positive relationship between religious beliefs and perceptions of well-being, noting that non-traditional people report much less satisfaction with life than individuals who are affiliated with a belief religious.

In addition, various investigations into the differences between sex and subjective wellbeing are contradictory. On the one hand, women report dissatisfaction with life more frequently than men; While in other studies, on the contrary, they are the most satisfied (Wood et al., 1989; Fujita, Diener y Sándwich, 1991, en Valenzuela y Díaz, 1996).

García and González (2000) Point out that subjective well-being is part of health in its most general sense and that it is manifested in all spheres of human activity. It is well known that when a person feels good, he is more productive, sociable and creative, he possesses a positive future projection, infuses happiness and happiness implies the capacity to love, work, socially relate and control the environment (Taylor, 1991, in García y González, 2000).

Subjective well-being is an integral part of the quality of life on a temporary and multidetermined basis. Some authors defend the measurement of well-being through its different components, that is, the satisfaction of areas rather than through a single measurement of subjective well-being, while others offer a global assessment (Skin and Johnson, 1978, García y González, 2000).

According to Warr (1990, García y González, 2000), other authors have considered subjective well-being as an expression of affectivity.

On the other hand, for Lawton (1972, García y González, 2000), well-being is perceived as a cognitive assessment, such as the evaluation of the congruence between desired goals and those obtained in life, while Diener, Suh and Shigehiro (1997, in García and González, 2000) offer a more inclusive conception of subjective well-being, considering it as the evaluation that people make of their lives, which includes both cognitive judgments and affective reactions (moods and emotions).

The word welfare implies personal experience, and therefore talk of subjective wellbeing can be considered a redundancy. There is an intimate relation of the affective and the cognitive, so that the well-being is determined by the majority of the authors as the subjective valuation that affirms the satisfaction of the people and their degree of complacency with specific or global aspects of their life, in Those that prevail positive moods.

The subjective well-being emphasizes an experiential character in its broadest sense, although it is essential to clarify its link with other categories of more social character. The term psychological well-being has been used as a synonym for subjective well-being; In fact, both terms are closely related. The psychological well-being can be considered as the part of the well-being that makes up the psychological level, being the general well-being or subjective well-being that is composed of other influences, for example, the satisfaction of physiological needs.

Then there is the area of material welfare, which Sánchez (1998) states is based on economic income, material resources and other similar indices. Therefore, in the couple, money is more than an administrative matter, because it implies the status they will have in the society in which they operate.

Material well-being refers to the personal interests of the couple, to the power of each of its members, how the material circulates and distributes in the relationship. On the other hand, work well-being has a close relationship with general satisfaction, coupled with marriage and family. For a long time, women's stereotypes were: the woman's place is in the home and her destiny is motherhood, but this misperception has been changing to give way to a new development; Likewise, changes in the roles of women also demand changes in men's.

Finally, there is the area of relationships with the couple, where satisfactory relationships with the members of a couple is one of the main components of the general well-being of happiness. In the relationships of couple arise different conflicts because they are two different beings, man and woman, that complement each other, reason why they must make several covenants, necessary in any relation between people that coexist in intimate association. Therefore, there must be harmony between these two different worlds, as well as mutual support to solve innumerable problems of couple, and thus achieve well-being as individuals, as a couple and as a society.

Method

La investigación realizada es no experimental y transversal porque los datos se recolectaron en un solo momento; el propósito de este diseño es describir variables y analizar su incidencia e interrelación en un momento dado; asimismo es correlacional porque describe la relación entre variables; y de corte descriptivo porque su objetivo es indagar la incidencia y los valores con las que se manifiestan las variables, así como ubicar, categorizar y proporcionar una visión de los grupos estudiados (Hernández, 2003).

Participantes

The study took effect in the City of San Francisco de Campeche.

We worked with couples in the mean age of 40 to 59 years, and couples in the late age of 60 to 69 years. These stages of life were defined according to the stages of Erik Erikson (Papalia et al., 2001).

The inclusion criterion of the sample selection is:

• Couples with more than 15 years of conjugal relationship or concubinage, with or without children.

The sample was non-probabilistic for the convenience of 300 people, 150 men and 150 women, who formed 150 couples divided into three groups distributed as follows:

- G1: 50 couples between 40 and 49 years old (n: 100)
- G2: 50 couples between 50 and 59 years old (n: 100)
- G3: 50 couples between 60 and 69 years (n: 100)

Table 1. Distribution of the sample by degree of studies

Grado de estudio	Total
Básico	95
Medio	80
Superior	45
Postgrado	30
Sin estudios	50
Total	300
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Fuente: propia.

Instruments

An identification form was used to obtain sociodemographic data of couples. Likewise, the "Sexual Satisfaction Inventory" of Alvarez-Gayou (2004) was used to evaluate the sexual satisfaction variable, validated for Mexican samples, which consists of 40 items, among which the first 10 correspond to personal data and 30 Remaining refer to sexual satisfaction in men and women. Each question has five possible answers (always, most of the times, sometimes yes and sometimes not, rarely, and never) and is an inventory that responds anonymously.

In addition, the "Psychological Well-Being Scale" of Sánchez-Canóvas (2002) was used to evaluate the psychological well-being variable, which contains general data to identify the subject, with three sections: the first is subdivided into others Two: Subjective Psychological Well-being and Material Well-being; The first one contains 30 questions and the second 10 questions. The second section corresponds to the work well-being and has 10 questions. Finally, the third section refers to the relationship and contains 15 questions whose format corresponds to the gender of the person who Fill in and where each section has five possible answers.

In addition, SPSS v18.00 statistical data analysis software was used.

Process

An envelope was provided to each pair, which contained two Identification Sheets, two Sexual Satisfaction Inventories and two Psychological Wellbeing Scale Inventories; Were given the instructions to answer the inventories separately, first the Psychological Wellbeing, since their filling should be immediate, and then the Sexual Satisfaction, to be answered with the necessary privacy.

The data examined for the investigation were as follows:

- A reliability analysis of both instruments was performed, obtaining for the Sexual Satisfaction an alpha of 0.79 and for the Psychological Wellbeing an alpha of 0.82.
- A descriptive statistical analysis was carried out, where the means by groups, gender and degree of studies of Sexual Satisfaction (SS), Subjective Psychological Well-being (BPS), Material Welfare (WB), Work Well-being (BL), Well-being Of Relationship of Couple (BRP) and Total Psychological Well-Being (BPT).
- Analysis of variance ANOVA by Subjective Psychological Well-being (BPS), Material Well-being (WB) and Couple Relationship Well-being (BRP) was also performed, where differences were found according to the Tukey HSD and Scheffe test. We also performed the analysis of variance ANOVA Welfare of Couple Relationship (BRP) by grade of study, finding differences according to the test of Tukey HSD and Scheffe.
- Lastly, Pearson's correlation between variables was analyzed, considering the following: Age, Degree of Study, Time to Know the Couple, Time to Live with the Partner, Sexual Satisfaction (SS), Subjective Psychological Well-Being (BPS), Well-being Material (WB), Work Wellbeing (BL), Relationship Wellbeing (BRP), Dating Time and Total Psychological Well-Being (BPT).

The analysis of these variables was performed using the SPSS v18.00 Statistical Analysis Software

Results

Table 2. Medias by groups of Sexual Satisfaction (SS), Subjective Psychological Well-
Being (BPS), Material Welfare (WB), Work Well-being (BL), Welfare of Couple
Relationship (BRP), and Total Psychological Well-Being (BPT).

Grupos	SS	BPS	BM	BL	BRP	BPT
G1	121.89	115.00	38.42	40.61	62.61	256.56
G2	112.39	113.25	38.47	39.64	56.42	247.78
G3	113.72	119.75	43.58	41.28	52.33	256.94
Total	166.00	116.00	40.16	40.51	57.12	253.76

Fuente: propia a partir del análisis del programa SPSS.

Table 3. Subjective Psychological Satisfaction (BPS), Material Well-Being (WB),Work Well-being (BL), Couple Relationship Well-being (BRP), and TotalPsychological Well-Being (BPT).

Grupos	SS	BPS	BM	BL	BRP	BPT
Mujeres	111.59	113.93	39.28	39.67	55.04	247.85
Hombres	120.41	118.07	41.04	41.35	59.20	259.67

Fuente: propia a partir del análisis del programa SPSS.

Table 4. Medias por grado de estudio de Satisfacción Sexual (SS), Bienestar Psicológico Subjetivo (BPS), Bienestar Material (BM), Bienestar Laboral (BL), Bienestar de Relación de Pareja (BRP), y Bienestar Psicológico Total (BPT).

Grado de Estudios	SS	BPS	BM	BL	BRP	BPT
Básico	114.55	114.95	39.30	38.89	54.68	247.82
Medio	121.43	116.93	38.21	40.07	58.79	254.00
Superior	114.79	115.15	40.33	42.18	57.82	255.41
Posgrado	133.20	128.40	45.40	43.40	69.80	287.00
Sin estudios	107.50	116.67	45.50	40.17	56.00	258.33
Total	116.00	116.00	40.16	40.51	57.12	253.76

Fuente: propia a partir del análisis del programa SPSS.

 Table 5. Analysis of Variance (ANOVA), by Subjective Psychological Well-Being

Group (BPS).

		Suma de Cuadrados	Grados de Libertad (gl)	Media Cuadrática	F	Sig.
	Entre grupos	5578.722	2	2789.361		
BPS	Dentro de grupos	86164.944	298	820.619	3.399	0.037
	Total	91743.667	299			

Fuente: propia a partir del análisis del programa SPSS.

Table 6. Differences between groups for Subjective Psychological Well-Being (BPS) (Tukey HSD y Scheffe)

	G1 40 a 49 años	G2 50 a 59 años	G3 60 a 69 años
G1 40 a 49 años			
G2 50 a 59 años			.038*
G3 60 a 69 años			

* P<.05

Fuente: propia a partir del análisis del programa SPSS.

Table 7. Analysis of Variance (ANOVA), by Material Wellness Group (BM).

		Suma de Cuadrados	Grados de Libertad (gl)	Media Cuadrática	F	Sig.
	Entre grupos	7191.407	2	3595.704		
BPM	Dentro de grupos	82916.694	298	789.683	4.553	0.013
	Total	90108.102	299			
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Fuente: propia a partir del análisis del programa SPSS.

Table 8. Differences between groups for Well-being Material (BM) (Tukey HSD y

Scheffe).

	G1 40 a 49 años	G2 50 a 59 años	G3 60 a 69 años
G1 40 a 49 años			.022*
G2 50 a 59 años			.035*
G3 60 a 69 años			

*P<.05

Fuente: propia a partir del análisis del programa SPSS.

Table 9. Analysis of Variance (ANOVA), by Couple Relationship Welfare Group (BRP).

		Suma de Cuadrados	Grados de Libertad (gl)	Media Cuadrática	F	Sig.
	Entre grupos	16396.130	2	8198.065		
BPRP	Dentro de grupos	88357.306	298	841.498	9.742	0.000
	Total	104753.440	299			

Fuente: propia a partir del análisis del programa SPSS.

Table 10. Differences between groups for Welfare of Couple Relationship (BPRP)(Tukey HSD y Scheffe).

	G1 40 a 49 años	G2 50 a 59 años	G3 60 a 69 años
G1 40 a 49 años		.026*	.000*
G2 50 a 59 años			
G3 60 a 69 años			

Fuente: propia a partir del análisis del programa SPSS.

Table 11. Analysis of variance (ANOVA), of Welfare of Relationship (BRP) por Grado

		de	Estudio.			
		Suma de Cuadrados	Grados de Libertad (gl)	Media Cuadrática	F	Sig.
	Entre grupos	12178.120	4	3044.530	_	
BRP	Dentro de grupos	92575.315	298	898.789	3.387	0.012
	Total	104753.440	299		_	

Fuente: propia a partir del análisis del programa SPSS.

 Table 12. Differences between Partner Relationship Welfare Groups (BRP) by Degree of Studies (Tukey HSD y Scheffe).

	Básico	Medio	Superior	Posgrado	Sin estudios
Básico				.006*	

*P<.05

*P<.05

Fuente: propia a partir del análisis del programa SPSS.

 Tabla 13. Correlations between variables

	Tiem nov	Tiem v par	SS	BPS	BM	BL	BRP	BPT
Edad	.195*	.576**	208*		.196*		397**	
Grado est	.231*					.202*	.239*	
Tiempo c par	.245*	.877**			.243*		410**	
Tiempo v par			225*				391**	
SS				.461**	.277**		.491**	.517**
BPS					.668**	.435**	.362**	.878**
BM						.432**	.243*	.767**
BL							.266**	.547**
BRP								.608**

Fuente: propia a partir del análisis del programa SPSS.

** = Correlación Fuerte

* = Correlación Moderada

- *, -** = Correlación Inversa Proporcional

Discussion and Conclusions

According to the results obtained in the research, it was found that couples in late adulthood (group 3) have a higher Subjective Psychological Well-Being (BPS) and Material Well-Being (WB), compared to middle-aged couples 1 and 2); In this regard, Diener, Suh, Lucas and Smith (1999, in Cuadra, 2003) state that subjective well-being refers to the fact that when the person is happy he is jovial, healthy, extroverted, optimistic, free, religious, with high self- Moral of work and with a wide range of levels of intelligence; Lazarus and Folkman (1986, in Valenzuela and Diaz, 1996) affirm that subjective well-being is the relationship between expectations and results obtained; Also, García and González (2000) point out that subjective well-being is part of health in its most general sense and manifests itself in all spheres of human activity. Undoubtedly, all this is possible since they have a high Material Welfare, which is based on economic income, material resources and other similar indexes, according to Sánchez (1998). On the other hand, middle-aged couples (G1) have a higher couplerelationship well-being (BRP) compared to middle-aged (G2) and late-adult (G3) couples. It should be noted that the G2 is classified as couples in middle adulthood but in transition stage, and entering this stage of their lives do so with fear and concerns about their new role: "being old"; This may explain that people in G1 have higher Couple Relationship Well-being (BRP) compared to G2 and G3. For their part, Flores, Ramírez, Díaz, Rivera and Cortés (1998) argue that there are factors that affect the preparation and satisfaction within the couple relationship. Historically, women have been marginalized to the work of the household, to the children and to the satisfaction of the needs of the husband before of the own, and also has been given a second plane with regard to the acquisition of information on sexuality, limiting much Your sexual satisfaction.

Martínez (2004) Mentions that with regard to the effects of age and schooling, it has been found that at higher levels of schooling in couples, they feel more satisfied in the relationship, which may explain why they communicate more, have more commitment, Way of thinking, more coexist, and so on. This confirms the findings as the professionals obtained significantly higher averages in physical-sexual factors and support compared to non-professionals, which leads to the belief that the participation of men and women in productive life and the help that both Can contribute to their relationship from the economic level, family organization, expression of affection, understanding and help, will be influencing considerably on their degree of satisfaction. Other authors mention that women with less schooling are awarded more aspects of submission and self-denial. On the other hand, women with higher levels of schooling are more autonomous with their partners, that is, they represent a less passive role and the ability to seek (Cortes, Reyes, Díaz Living, Rivera and Monjaraz, 1994, in Martínez, 2004).

On the other hand, the Peer Relationship Welfare (BRP) by Degree of Study is higher in the Postgraduate level compared to the basic level; There is a moderate correlation with Bridegroom Time, Labor Well-Being (BL) and Couple Relationship Well-being (BRP). That is, people with a higher level of education reported significant well-being in couples not only in the sexual part, but also in their work, economy and other factors that resulted in a high BRP.

According to McCary (1999), the young people think that the elderly hate the aged body of their spouse as well as theirs and, therefore, avoid physical contact with their partner. According to the correlations between variables, a moderate correlation could be observed with the Time of Dating and Material Well-Being (BM); And an inverse correlation with Sexual Satisfaction (SS) and lower Pair Relationship Welfare (BRP). Also, the longer they live with the partner, there is also an inverse correlation with SS and BRP.

According to Cagnon (1980), women begin to manifest biological changes that begin from 45 to 50 years and last until the age of 55, indicating that reproduction has ended (menopause); While in men there is no set of biological changes, although probable psychosexual crises.

Brayshaw (1962, in Reyes, Cortés, Díaz and Rivera, 1996) indicates that sexual satisfaction in the relationship has been studied as an integral factor of scales on the interaction of partners. Some of the reasons for the decrease in sexuality are the age and number of years in the relationship; There is a decrease in the value given to the sexual relation with the passage of time, since it ceases to be primordial in the marital adjustment. Another explanation is in terms of attraction and attachment; Troll and Smith (1976, in Reyes et al., 1996) postulate that at the beginning of the relationship, attraction is high and attachment low, but that over the years attraction is reduced as the novelty of the relationship diminishes And, likewise, attachment increases. There has

even been a negative relationship between boredom in the sexual area and the number of times one has sex with the same person (Lee and Casebier, 1971 in Reyes et al., 1996), as well as a reduction in passion (Bradwick, 1979 in Reyes et al., 1996). For its part, Silny (1980, in Reyes, 1996) found that sexual boredom is usually cited more by men than by women as a reason for marital failure.

But even when all the factors mentioned above decrease Sexual Satisfaction (SS) and, therefore, the Relationship Well-Being of the Partner (BRP), Pérez (2002) points out that during the course of senescence sexuality acquires an important role, Despite the lack of opportunities to exercise it and the marked discrimination, as long as people of this age maintain good health there is no inconvenience for the interest and sexual practices disappear. It is true that during the aging there are some changes in sexual physiology, where there is a greater slowness and less intensity in the sexual response, but this is not an impediment to sexual activity. However, in many of these couples, not having sex often does not mean they are unsatisfied, but their sporadic encounters are more intense and more pleasurable.

Also according to the correlations between variables, it was found that a higher Sexual Satisfaction (SS) exists a strong correlation with Subjective Psychological Well-being (BPS), Material Well-being (WB), Couple Relationship Welfare (BRP) and Total Psychological Welfare BPT); These data make very clear the close relationship between each of the factors analyzed, without one of them, the other is not given or not achieved with the same intensity as with all. That is, Sexual Satisfaction is not the simple satisfaction of sexual desire, understood as the contact of the genitals and orgasm, but is a much more complex concept, involving a great number of factors, which in turn include others that They could go unnoticed but they are not of any less importance, because they are part of a whole that allows us to have Psychological Well-being.

In this regard, García and González (2000) affirm that well-being is a human experience linked to the present, but also with a projection to the future, because it is produced precisely by the achievement of goods. It is in this sense that well-being arises from the balance between expectations (projection of the future) and achievements (valuation of the present), which many authors call satisfaction in the areas of greatest interest for the human being: work, family, Health, material living conditions, interpersonal relationships, and sexual and affective relationships with the couple. This satisfaction with life emerges as a starting point of a transaction between the individual and his micro and macrosocial environment, which includes the objective material and social conditions that provide man with certain opportunities for personal fulfillment.

Bibliography

- Alonso, M. (2005). Nerviosismo. Recuperado el 24 de enero de 2006, de http://www.farmaceuticonline.com/cast/familia_plantesedants_c.html
- Alvarado, A. M. (2005). Sinusitis. Recuperado el 24 de enero de 2006, de http://www.binasss.sa.cr/poblacion/sinusitis.htm
- Álvarez, G. J. (1984). La condición sexual del mexicano: Relaciones humanas y sexología. México: Grijalbo, 212 pp.
- Álvarez, G. J. (1986). Elementos de sexología. México: Interamericana, 183 pp.
- Álvarez, I. C. (2005). Enfermedades circulatorias. Recuperado el 24 de enero de 2006, de http://www.hemodinamicadelsur.com.ar/pacientes/articulo_011.asp
- American Psychological Association. (1994). Manual de estilo de publicaciones (4a. ed.), México: El Manual Moderno, 402pp.
- Anguas, P.A. y Reyes, L.I. (1998). El significado del bienestar subjetivo: Su valoración en México. La psicología social en México.7, 7-11.
- Anzola, P. E. y Morales, M. F. (1997). La Atención de los Ancianos: Un desafío para los años noventa. México: Organización Panamericana de la Salud, 488 pp.
- Aparicio, P. T. (2003). La influencia de la cultura en la satisfacción sexual del adulto Maduro. Revista de Psicología de la Universidad Autónoma de Querétaro, 3, (7), 15-20.
- Asilla, N. y Julián, T. (1998). Apoyo Social y Bienestar Psicológico en la juventud y en la vejez. La Psicología Social en México. 1, 423-428.
- Azcárraga, G. (2001). Sexología básica: Guía para la Educación Sexual (3a. ed.).México: La Prensa Médica Mexicana, 278 pp.
- Bernardo, A. (2005). La sexofobia judeocristiana versus sexualidades espiritualizadas de otras culturas. Recuperado el 27 de febrero de 2007, de http://www.cendoc-mujer.org.pe/cmpsexofob.html
- Blasco, G. S. (1994). Camino al orgasmo: La sexualidad femenina sin secretos. México: Paidós, 221 pp.
- Cagnon, J. (1980). Sexualidad y conducta social. t. r. Días Haroldo México: Pax, 281 pp.

- Calatroni, A; Ruiz, P. y Tozzini, D. (2003). Ginecología. (3a. ed.). México: Médica Panamericana, 567 pp.
- Cárdenas, G. (2003). Sexo con Seso. Muy Interesante, 3, (32), 28-29.
- Carretero, M.; Palacios, J. y Marchesia, A. (1985). Psicología Educativa: Adolescencia, madurez y senectud. Madrid: Alianza Psicológica, 367 pp.
- Carrizo, B. H. (Ed.). (1982). La educación de la sexualidad humana: Sociedad y Sexualidad. México. Consejo Nacional, vol. 1, 541 pp.
- Centro Centroamericano de Población, Universidad de Costa Rica. (2006). Psicosexualidad. Recuperado el 20 de abril de 2006, de http://ccp.ucr.ac.cr/bvp/pdf/manual/saludreproductiva/01%20Salud%20reproducti va%20e.pdf
- Chover, A. (2004). Homeopatía. Recuperado el 24 de enero de 2006, de http://www.drmarcochover.com/homeopatiadef.htm
- Craig, G. J. y Baucum, D. (2001). Desarrollo psicológico (8a. ed.), México: Pearson Educación, 720 pp.
- Cuadra, M. y Florenziano, R (2003). El bienestar subjetivo: hacia una psicología positiva. Revista de Psicología de la Universidad de Chile, 12 (1), 83-96.
- Dalet, F y del Río, G. (1998). Infecciones Urinarias. España: Médica Panamericana, 475 pp.
- Demare, J.C. (2005). Las verdaderas claves para una vida en plenitud. Recuperado el 25 de abril de 2005, de http://www.emigracionlegal.com/not,asp.2notail=5078
- Díaz, L.G. (2001). El Bienestar Subjetivo. Actualidad y Perspectivas. Revista Cubana de Medicina General Integral. 17, (6), 572-579.
- Dulcey, R. E. y Uribe, V. C. (2002). Ciclo vital, envejecimiento y vejez. Revista Latinoamericana de Psicología, 34, 17-25.
- Evans, E. y Parra, M. A. (2000). La sexualidad secreta de los hombres: Los hombres somos obvios... Santiago de Chile: Grijalbo, 276 pp.
- Fernández, R. L. (1994). Manual de psicología preventiva: Teoría y práctica. Madrid: Siglo Veintiuno de España, 383 pp.
- Figueroa, M; Contini, N; Lacunza, A; Levín, M. y Estévez, S.A. (2005). Las estrategias de afrontamiento y su relación con el nivel de bienestar psicológico. Un estudio con adolescentes de nivel socioeconómico bajo de Tucumán (Argentina). Anales de Psicología. 21, (1), 1695-2294.

- Flores, G.E., Díaz, L.R.; Rivera, A.S. y Cortés, G.M. (1998). Factores Psicosomáticos asociados a la satisfacción sexual en la mujer con la pareja. La psicología social en México. 7, 283-287.
- García, R. G. y Díaz, L. R. (2003). Estilos de amor y satisfacción en la relación de pareja. Psicología Iberoamericana, 11, (4), 234-242.
- García, V.C. y González, B.I. (2000). La categoría bienestar psicológico. Su relación con otras categorías sociales. Revista Cubana de Medicina General Integral. 16, (6), 586-592.
- Gennaro, A. (2003). Remigton Farmacia. (20a. ed.). Buenos Aires: Médica Panamericana, vol. 1, 663-1286 y Vol. 2, 1888-1891.
- González-Celis, C. A. (2003). ¿Cómo mejorar la calidad de vida y bienestar subjetivo? México: Prensa, 254 pp.
- Gotwald, W. y Holtz, G. (1983). Sexualidad: La experiencia humana. t. r. Gorst Antonia. México: El Manual Moderno, 564 pp.
- Hernández, S. R.; Fernández, C. C. y Baptista, L. P. (2003). Metodología de la Investigación (3a. ed.). México: McGraw-Hill / Iberoamericana, 705 pp.
- Ibáñez, B. B. (1997). Manual para la elaboración de tesis: Consejo nacional para la enseñanza e investigación en psicología (2a. ed.). México: Trillas, 303 pp.
- Jaramillo, T. (2005). Rinitis. Recuperado el 24 de enero de 2006, de http://www.susmedicos.com/articulos_otorrino_rinitis.htm
- Lefrancois, G. (2001). El ciclo de la vida. t. r. Dávila Francisco (6a. ed.). México: Internacional Thomson Learning, 670 pp.
- Lerer, M.L. (1995). Sexualidad femenina: Mitos y realidad (3a. ed.), México: Paidós, 246 pp.
- Llusiá, B. (1998) Síndrome de nido vacío. Recuperado el 30 de junio de 2005, de http://iqb.es/menopausia/indice.htm
- Loebi, S; Spratto, G. y Heckheimer, E. (1986). Manual de Farmacología. México: LIMUSA, 892 pp.
- López, I. J. (1983). Biblioteca básica de la educación sexual: Armonía sexual de la pareja. México: Universo México, 119 pp.
- Martínez L. S. (2004). Efectos de la edad, sexo y la escolaridad en la satisfacción marital. Recuperado el 2 de mayo de 2006, de http://www.uvmnet.edu/investigacion/episteme/numero1-04/reportes/a_efectos.asp

- Masters, W.; Johnson, V. y Kolodny, R. (1995). Human sexuality (5a. ed.). New York: Harper Collins Collage Publishers, 778 pp.
- Maya, L. E. (1997) Componentes de la calidad de vida en adultos mayores. Recuperado el 25 de abril de 2005, de http://www.funlibre.org/documentos/lemaya2.html
- McCary, J. L. (1999). Sexualidad humana (5a. ed.). México: El Manual Moderno, 250 pp.
- Mendoza, E. (1990). Sexualidad. Conozca Más, 9, (7), 60-63.
- Molina, K. (2006). Psicosociología. Recuperado el 20 de abril de 2006, de http://www.psicopedagogia.com/definicion/orientacion%20psicosocial
- Muñoz, L. R. (2000). Tipo, frecuencia y calidad de las relaciones sexuales. Revista de Estudios Médicos Humanísticos, 8, (8), 101-115.
- Navarro, M y Stimpson, C. (Comp.). (1999). Sexualidad, género y roles sexuales. México: Fondo de Cultura Económica, 262 pp.
- Nieto, J. A. (1993). Sexualidad y deseo. España: TEA, 257 pp.
- Nussbaum, M. (Comp.). (1997). La calidad de vida. t. r. Reyes Roberto. México: Fondo de Cultura Económica, 314 pp.
- Papalia, D.; Wenkos, O. S. y Duskin, F. R. (2001). Desarrollo humano. t. r. Jurksaitis Ona. (8a. ed.). Bogotá: McGraw Hill, 708 pp.
- Plaza, R. J. (2006). Cultura y Sexualidad. Recuperado el 27 de febrero de 2007, de http://www.verdemente.com/Articulos/Sexualidad/cultusex.htm
- Pérez, F. C. (2002). Antología de la sexualidad humana (2a. ed.). México: Miguel Ángel Porrúa, vol. 2, 532-793.
- Quesada, A. (2003). Colesterol. Recuperado el 24 de enero de 2006, de http://geosalud.com/nutricion/colesterol.htm
- Reinisch, J. M. y Beasley, R. (1992). Nuevo informe de Kinsey sobre sexo: Todo lo que usted debe saber sobre sexualidad. México: Paidós, 718 pp.
- Rena (2005). Desarrollo de la Edad Adulta. Recuperado el 27 de febrero de 2007, de http://www.rena.edu.ve/cuartaetapa/psicologia/tema7.html
- Reyes, D.D.; Cortés, M.S.; Díaz, L.R. y Rivera, A.S. (1996). La satisfacción sexual en la relación de pareja, (ISSP), A través del tiempo. La psicología Social en México. 6,296-302.
- Reyes, D.D; Díaz, L.R. y Rivera, A.S. (1998). Satisfacción Sexual: antes, durante y después. La Psicología Social en México. 7, 299-304.

- Rodríguez, G. (Ed.). (1982). La educación de la sexualidad humana: Individuo y Sexualidad. México: Consejo Nacional, vol.3, 342 pp.
- Rosenstein, S. E. (2002). Diccionario de Especialidades Farmacéuticas (48a. ed.). México: Thomson P. L. M., 2644 pp.
- Rosenzvaig, R. (1999). La pareja al desnudo: Anatomía de la intimidad afectiva y sexual. México: Plaza & Janés, 245 pp.
- Sahagún, A. (1993). Integración sexual humana. México: Trillas, 117 pp.
- San Martín, H. (2000). Tratado General de la Salud en las Sociedades Humanas: Salud y enfermedad. México: La Prensa Médica Mexicana, 1111 pp.
- Sánchez, C. J. (1998). Manual de bienestar psicológico. Madrid: TEA, 45 pp.
- Stassen, S. K y Thompson, R. (2001). Psicología del desarrollo: Adultez y vejez (2a. ed.). España: Médica Panamericana, 232 pp.
- Uriarte, B. V. (1999). Psicofarmacología (4ª. ed.). México: Trillas, 584 pp.
- Valenzuela, M.M.; Díaz, L.R. y Manjares, I.J. (1996). Diferencias entre variables sociales y demográficas en el bienestar subjetivo. La Psicología Social en México. 6,425-432.
- Valli, F. (1988). Todo sobre el sexo. Barcelona: De Vecchi, 254 pp.
- Weeks, J. (2000). Sexualidad. t. r. Monoscaur Monica. México: Paidós, 131 pp.