



Emotional Intelligence, Sexual Functioning, and Subjective Sexual Well-being in Portuguese Adults

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Authors' contributions

This work was collaboratively carried out by the authors. Author PS collected and analyzed data, provided material support and drafted the manuscript. Author HP conceived and designed the study and carried out statistical analyses. Authors GE, SM, RMA and ML drafted and reviewed the manuscript for intellectual content. All authors read and approved the final manuscript.

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ABSTRACT

Not many studies exist that relate emotional intelligence with sexual variables, such as sexual functioning and subjective sexual well-being. In order to fill the gap in the research, we developed this study with the following objectives. First, we aim to assess levels of emotional intelligence, sexual functioning, and subjective sexual well-being in a large sample of Portuguese adults. Second, we seek to compare differences in emotional intelligence, sexual functioning, and subjective sexual well-being between genders and age groups. Finally our goal is to determine the association between emotional intelligence, and sexual functioning and subjective sexual well-being. The sample consists of 1,421 individuals, who are predominantly female (818, 57.6%), between the ages of 18 and 83 years. The average age of participants is 38.76 years old (SD = 13.67). We use Schutte's Emotional Intelligence Scale, the Changes in Sexual Functioning

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Questionnaire, and the Subjective Sexual Well-being Questionnaire as research instruments. Overall results identify high levels of emotional intelligence, sexual functioning, and subjective sexual well-being. Significant differences concerning emotional intelligence are found between genders (women present higher scores than men), age (older participants demonstrate higher scores than younger participants), and also for sexual functioning and sexual subjective well-being (men present higher scores than women). There are significant, but mild, levels of association between emotional intelligence and sexual variables. These results allow us to better inform professionals who work, either in the area of emotional intelligence, or in the field of sexuality.

Keywords: Emotional intelligence; sexual functioning; subjective sexual well-being.

1. INTRODUCTION

Emotional intelligence is seen as an innovative perspective on the study of emotions, since emotions are involved in solving the problems of everyday day life, helping in the standardization of psychological adjustment, and in physical processes [1]. The concept of emotional intelligence may be related to the concepts of emotion and intelligence; however, emotional intelligence is not considered to be equal to either of them [2]. While some authors, like Howe [2], consider intelligence to be a type of learning related to human behavior, others argue that intelligence is a quality belonging to the neurobiological structure of the human mind. According to Goleman [1], emotions are essential to understand how humans operate, since they influence people's decision-making abilities and help them solve problems. Concurring with this viewpoint, Mayer, Roberts, and Barsade [3] report that emotional intelligence is closely related to the scientific concepts of intelligence and emotion.

The concept of emotional intelligence is relatively recent, with its origins dating to the late twentieth century. Emotional intelligence gained greater scientific emphasis in the 1990s because of the work of the researchers Salovey and Mayer, who were forerunners in the development of scientific studies on the subject. They define emotional intelligence as a subset of social intelligence that involves the ability to monitor feelings and emotions, both in oneself and in others. According to Salovey and Mayer, emotional intelligence also implies the ability to differentiate between feelings and emotions and the ability to use this information based upon the condition of their own actions and thoughts [4]. Bar-On [5] uses a broader definition, stating that emotional intelligence is a set of emotional and social competencies, skills, and techniques, which are used to recognize, understand, and manage emotions, to adapt to change, to solve problems

of personal and interpersonal nature, and to deal effectively with the demands and challenges of day-to-day life, including its sexual aspects.

Research on emotional intelligence highlights the idea that emotional aspects interfere with the expression of sexuality and sexual functioning [6], since the perception that individuals have of their emotional and physical satisfaction in several areas of sexuality and health is defined by the self-appraisal of one's own subjective sexual well-being. This refers to the perception of the quality of one's sexuality, sex life, and sexual relations [7]. By studying subjective sexual well-being, we attempt to examine the satisfaction with the physical and emotional aspects of relationships, the satisfaction with sexual functioning, and also the importance of sexuality in life in general.

In this sense, sexuality is an integral part of human life that promotes intimacy, connection, and pleasure [8-11].

Sexuality plays a central role throughout the lives of individuals. This not only includes sexual activity, but also gender roles and identities, sexual orientation, eroticism, pleasure, intimacy, and reproduction [10]. Research on emotional intelligence emphasizes the idea that emotional aspects can interfere positively or negatively with the expression of sexuality. Examples of positive interference include the frequency of female orgasm, masturbation [6,12], and the preference for engagement with partners [6]. Emotional aspects can also interfere negatively, since having less emotional intelligence is associated with riskier sexual behavior, more sexual partners, less ability to establish and maintain mutually satisfying relationships, and less ability to recognize, understand, and express sexual feelings [13].

Other studies demonstrate how emotional intelligence is related to subjective sexual well-

being, since the perception that individuals have of their emotional and physical satisfaction in several areas of sexuality and health is defined by the perception of the quality of one's sexual life and sexual relations [7]. By studying subjective sexual well-being, we can examine satisfaction with the physical and emotional aspects of relationships, satisfaction with sexual functioning, and also the importance of sexuality in life in general [8]. Thus, there is evidence that subjective sexual well-being is beneficial to a person's welfare and interpersonal relationships [14]. In fact, most studies in this area point to a strong positive correlation between satisfaction with one's sex life and satisfaction with life in general [15].

Despite the close association between emotional intelligence, sexual functioning, and subjective sexual well-being, very few studies exist in Portugal, which address these topics. In order to fill this gap, we developed our study with the following objectives. First, we aim to assess levels of emotional intelligence, sexual functioning, and subjective sexual well-being in a normative sample of Portuguese adults. Second, we seek to compare differences in emotional intelligence, sexual functioning, and subjective sexual well-being between genders and age groups. Our final goal is to determine the association levels between emotional intelligence and sexual functioning and subjective sexual well-being. To this end we established the following hypothesis:

- H1: Levels of emotional intelligence, sexual functioning, and subjective sexual well-being in a normative sample of Portuguese adults are high.
- H2: Female participants have higher levels of emotional intelligence, sexual functioning, and subjective sexual well-being than male participants.
- H3: Older participants have higher levels of emotional intelligence, sexual functioning, and subjective sexual well-being than younger participants.
- H4: There is a positive correlation between emotional intelligence and sexual functioning, and subjective sexual well-being.

2. METHODS

2.1 Participants

The sample consists of 1,421 individuals, who are predominantly female (820, 57.6%), between

the ages of 18 and 83 years. The average age was 38.76 years (SD = 13.67). It should also be noted that this is a highly differentiated sample, since most of the participants possess a university education (88.2%) and are employed (72.3%). With regard to marital status, most of the respondents say they are married (38.8%) or single (34.9%), and the majority claims to be childless (54.5%). See Table 1 for complete demographic information about the participants.

2.2 Measures

Demographics: Participants reported their age, gender, marital status, educational level, number of children, place of residence, sexual orientation, and professional status.

Emotional Intelligence: Participants completed Schutte's Emotional Intelligence Scale [16] – Portuguese version. This scale consists of 33 items that evaluate emotional intelligence on a Likert-type scale. Values range from "1 - strongly disagree" to "5 - strongly agree". The range of scores is calculated through the sum of all items, and the scores of items 5, 28, and 33 are inverse [17]. Factor organization consists of the perception of emotions (items 5, 9, 15, 18, 19, 22, 25, 29, 32, and 33), the management of one's own emotions (items 2, 3, 10, 12, 14, 21, 23, 28, and 31), the management of other's emotions (items 1, 4, 11, 13, 16, 24, 26, and 30), and the use of emotions (items 6, 7, 8, 17, 20, and 27). The used version was independently translated into Portuguese from its original English version and the different versions were discussed and compared. A final version was obtained, back translated and compared to the original scale in English. The conclusion was that there were no relevant differences in the content of the two versions of the scale. The Cronbach's alpha ($\alpha=0.88$) for this measure indicates very good internal reliability [18].

Sexual Functioning: Participants completed the Changes in Sexual Functioning Questionnaire-Short Form (CSFQ-14) [19]. This questionnaire is a clinical and research instrument consisting of 14 items, which evaluate the five dimensions that correspond to the phases of the sexual response cycle (desire/interest, desire/frequency, pleasure, arousal, and orgasm) [19]. Factor analysis confirms the validity of this construct as a global measure of sexual dysfunction [19]. It should also be noted that the individual scales exhibit a strong level of internal reliability with a Cronbach's alpha of 0.90 [19]. The level of significance of this study is 0.88, which indicates

high levels of internal consistency [18]. After analyzing the questionnaire, in accordance with the proposal of the author, the questionnaire was organized into five different dimensions: desire and frequency of sexual activity, desire and interest, arousal, pleasure, and orgasm [19]. Finally, a global scale was developed based upon the 14 items of sexual functioning.

Subjective sexual well-being: We assess subjective sexual well-being according to Laumann proposal [14], which consists of four items. The first item evaluates the "level of satisfaction with the physical pleasure felt in relation to your partner in the last 12 months." The second item investigates the "level of satisfaction with the emotional pleasure felt in relation to your partner in the last 12 months." The third item asks participants, "If you had to spend the rest of your life with the sexual life that you have today (sexual relationships and sexual health), how would you feel?" Finally, the fourth item asks participants to evaluate, "the importance that sex has on your overall life". We score the responses on a Likert-type scale. Possible responses for items 1, 2, and 3 are "completely unsatisfied", "moderately dissatisfied", "neither dissatisfied, nor satisfied", "moderately satisfied", and "extremely satisfied". The potential responses for item 4 are "not important at all", "not very important", "somewhat important", "very important", and "extremely important." The original alpha was 0.80, consistent with the value obtained in the present study (0.86), with both values representing a very good level of internal consistency [18].

2.3 Procedures

Participants were recruited online and were invited to fill out the survey, which was conducted between October 2014 and February 2015. We used a specific online link for the purposes of this investigation, which we disseminated through mailing lists, contacts with organizations, and social networks.

The study's webpage presented its goals, in addition to meeting and including all of the principles of traditional psychological research ethics, namely the perseveration of confidentiality and anonymity, as well as informed consent.

Recruitment focused on obtaining a normative sample of the Portuguese population. We sent out direct requests for voluntary participation, explaining the study's objectives, along with

instructions and the contact information of the research team.

The Scientific Committee of the Department of Psychology and Education at the University of Beira Interior approved this study. The study also complies with all ethical principles set by the Portuguese Board of Psychologists for research development, as well as the guidelines of the American Psychological Association in regards to conducting studies involving human beings.

3. RESULTS

Concerning emotional intelligence, results show that participants have high levels of overall emotional intelligence (129.91, SD = 12.83; expected cut-off point of 99), which is also the case for the various factors of the study. Regarding the "perception of emotions" scale, the expected cut-off point was 30, and the observed mean was 37.20 (SD = 4.28). When measuring the "management of [one's] own emotions", the expected cut-off point was 27, and the observed mean was 35.38 (SD = 3:57). On the scale, "management of others' emotions", the expected cut-off point was 24, and the observed mean was 32.57 (SD = 4.28). Finally, the "use of emotions" scale had an expected cut-off point of 18, and the observed mean was 24.77 (SD = 3.25).

As for global sexual functioning, the results indicate slightly above average scores with an expected cut-off point of 42, and an observed mean of 45.58 (SD = 8.23). Overall subjective sexual well-being shows an observed mean of 15.51 (SD = 3:46), with an expected cut-off point of 12. Regarding the "pleasure" scale, the expected cut-off point was 3, and the observed mean was 3.45 (SD = 1.13). The "sexual desire and frequency" scale had an expected cut-off point of 7.5, and an observed mean of 6.68 (SD = 1.69). In relation to the "sexual desire and interest" scale, the expected cut-off point was 10 and the observed mean was 9.31 (SD = 2.62). The "arousal" scale had an expected cut-off point of 10, while the average observed was 11.02 (SD = 2.46). Finally, for the "orgasm" scale, the expected cut-off point was 12.5 and the observed mean was 13.03 (SD = 2.67).

When comparing differences between men and women in regards to levels of emotional intelligence, sexual functioning, and subjective sexual well-being, statistically significant differences are found. The study reveals that men feel more sexual desire more often, more

arousal more frequently, and have more orgasms and more pleasure than women. Thus, men present higher levels of sexual functioning. However, despite having higher levels of subjective sexual well-being, these differences are not statistically significant. In turn, with regard to the factors of emotional intelligence, women show better “management of others’ emotions” than men (See Table 2).

In order to compare the differences in levels of sexual functioning, subjective sexual well-being, and emotional intelligence based upon age, we divided participants into three age groups: 14 to 29, 30 to 49, and 50 to 83. Statistically significant differences are found, indicating that when it comes to factors of emotional intelligence, older participants (50-83 years) have better perception and use of emotions. Participants older than 50 years of age also are better at managing their own emotions and the emotions of others. Thus, it can be said that older participants possess more emotional intelligence. Participants between the ages of 30 to 49 indicate greater sexual desire, more arousal, higher levels of pleasure, and have more orgasms. This indicates

that participants in this age group have better sexual functioning than in other age groups. However, the study also shows that younger participants (14-29 years) feel more pleasure.

It should also be noted that while older participants have higher scores for subjective sexual well-being when compared to other age groups, these differences are not statistically significant (See Table 3).

Regarding the association between levels of emotional intelligence and sexual functioning and subjective sexual well-being, bivariate correlations show the existence of positive and statistically significant association values in most dimensions (see Table 4). The association between the variables of total sexual functioning and subjective sexual well-being is especially noteworthy due to its large magnitude of effect. Despite the fact that all associations between sexual variables and emotional intelligence are significant, the magnitude of effect is generally small, and the association for subjective sexual well-being is stronger than the association for sexual functioning.

Table 1. Socio-demographic information

		N	%
Gender	Male	601	42.3%
	Female	820	57.7%
Marital status	Married	551	38.8%
	Single	496	34.9%
	Emotionally committed	125	8.8%
	Divorced	107	7.5%
	Civil union	127	8.9%
	Widow	15	1.1%
Education	Up to 12 years of school	168	11.8%
	Bachelor's	530	37.3%
	Master's	530	37.3%
	Ph.D.	193	13.6%
Age groups	18-29	447	31.5%
	30-49	596	41.9%
	50-83	345	24.3%
Sexual orientation	Heterosexual	1319	92.8%
	Bisexual	32	2.3%
	Homosexual	70	4.9%
Place of residence	Rural	1319	92.8%
	Urban	102	2.3%
Children	No	774	54.5%
	Yes	647	45.5%
Professional status	Unemployed	88	6.20%
	Student	217	15.30%
	Employed	1027	72.30%
	Retired	66	4.60%
	Other	23	1.60%

Table 2. Results for gender differences in levels of emotional intelligence, sexual functioning, and subjective sexual well-being

	Gender	Mean	SD	T	P
Global levels of emotional intelligence	Male	128.014	12.992	0.080	0.777
	Female	131.301	12.524		
Perception of emotions	Male	36.576	4.268	0.525	0.469
	Female	37.661	4.245		
Management of one's own emotions	Male	35.123	3.565	0.034	0.855
	Female	35.562	3.556		
Management of others' emotions	Male	31.843	4.448	4.984	0.026*
	Female	33.090	4.071		
Use of emotions	Male	24.546	3.284	1.316	0.252
	Female	24.933	3.209		
Global levels of sexual functioning	Male	50.011	6.486	21,234	0.000**
	Female	42.866	7.989		
Pleasure	Male	3.617	0.981	40.828	0.000**
	Female	3.316	1.212		
Desire/frequency	Male	7.442	1.409	6.454	0.011*
	Female	6.131	1.667		
Desire/interest	Male	10.633	2.270	1.351	0.245
	Female	8.323	2.430		
Arousal	Male	12.204	2.031	12.504	0.000**
	Female	10.308	2.418		
Orgasm	Male	14.277	1.915	54.061	0.000**
	Female	12.268	2.772		
Global levels of subjective sexual well-being	Male	15.775	3.361	1.649	0.199
	Female	15.308	3.526		

* <0.05 ** <0.001

4. DISCUSSION

We conducted this study in order to understand how emotional intelligence levels are related to levels of sexual functioning and subjective sexual well-being, and thus to fill a gap in the research on this subject.

Our study concludes that participants have high levels of emotional intelligence, which should be expected due to the fact that the sample is normative. Women present higher levels of emotional intelligence in comparison to men, a finding corroborated by other research [20]. An extensive review of the literature concerning the emotional aspects of gender differences supports this finding, showing that female subjects are better at decoding nonverbal emotional information [21], have greater emotional understanding [22], are more sensitive to others' emotions [23], are more emotionally expressive, and show greater interpersonal skills [24]. Studies show that women are more accustomed to societal norms regarding the expression of emotion and are more biologically prepared to perceive emotions than men. Women also tend to use emotions more frequently and more adequately in comparison to men [3,20].

In addition, this study demonstrates that age levels can interfere with emotional intelligence, since older participants demonstrate greater perception and use of emotions, as well as better management of their own emotions and the emotions of others. Similar to other studies that analyze the association between age and emotions [25], our study finds that age can be predictive factor emotional intelligence, since it can be seen as an adaptive function that develops throughout the life cycle.

With respect to levels of sexual functioning and subjective sexual well-being, the results of this study corroborate the fact that men show higher scores than women. These differences can be explained by bio-psychosocial reasons, which lead us to reflect on gender differences in specific social contexts, such as the sample being studied. The recent study of [26], reveals that Portuguese society is considered to be mostly religious and conservative, which tends to produce different social norms in regards to gender, ultimately influencing sexual functionality.

In relation to levels of subjective sexual well-being, our results indicate better scores for men

when compared to women. These results are substantiated by other studies that conclude that men, regardless of the socio-cultural context, have higher levels of sexual satisfaction than women [27-29]. Along the same lines, the study of Edwards, Bryning, and Crane [30] shows that average levels of satisfaction were generally lower in women in all aspects of subjective sexual well-being.

With respect to age, participants between the ages of 30 and 49 feel more desire and more

excitement, have more fun, and have more orgasms. This indicates that participants in this age group have better sexual functioning. It should also be noted that older participants (ages 50-83) have higher average levels of subjective sexual well-being, when compared to other age groups. However, unlike the results seen in this study, [31] study shows that a decline in sexual responsibility over the life cycle, related to bodily and hormonal changes and the frequency of sexual activity can interfere with levels of sexual functioning and subjective sexual well-being.

Table 3. Results for differences among age groups in levels of emotional intelligence, sexual functioning, and subjective sexual well-being

	Age group	Mean	SD	F	p
Global levels of emotional intelligence	14-29	127.902	12.258	15.051	0.000**
	30-49	129.330	13.075		
	50-83	133.076	12.819		
Perception of emotions	14-29	36.896	4.162	4.787	0.008*
	30-49	37.012	4.341		
	50-83	37.168	4.309		
Management of one's own emotions	14-29	34.893	3.556	9.060	0.000**
	30-49	35.304	3.630		
	50-83	35.997	3.387		
Management of others' emotions	14-29	31.823	4.239	19.964	0.000**
	30-49	32.387	4.354		
	50-83	33.727	3.949		
Use of emotions	14-29	24.053	3.214	23.466	0.000**
	30-49	24.752	3.250		
	50-83	25.647	3.031		
Global levels of sexual functioning	14-29	45.323	8.152	7.266	0.001*
	30-49	46.812	7.808		
	50-83	43.549	8.806		
Pleasure	14-29	3.484	1.189	3.152	0.043*
	30-49	3.478	1.071		
	50-83	3.304	1.130		
Desire/frequency	14-29	6.599	1.673	12.810	0.000**
	30-49	6.923	1.641		
	50-83	6.359	1.765		
Desire/interest	14-29	9.248	2.517	11.445	0.000**
	30-49	9.649	2.652		
	50-83	8.799	2.605		
Arousal	14-29	10.976	2.385	27.241	0.000**
	30-49	11.496	2.256		
	50-83	10.187	2.710		
Orgasm	14-29	12.694	2.888	7.266	0.001*
	30-49	13.344	2.403		
	50-83	12.889	2.837		
Global levels of subjective sexual well being	14-29	15.510	3.521	0.044	0.957
	30-49	15.463	3.401		
	50-83	15.534	3.559		

*<0.05 **<0.001

Table 4. Results for the correlation of levels of emotional intelligence, sexual functioning, and subjective sexual well-being

Variables	1	2	3	4	5	6	7	8	9	10	11	12
1 - Perception of emotions	-											
2- Management of one's own emotions	.570**	-										
3- Management of others' emotions	.600**	.690**	-									
4- Use of emotions	.493**	.647**	.589**	-								
5 - Global levels of emotional intelligence	.817**	.860**	.871**	.791**	-							
6- Pleasure	.178**	.231**	.167**	.136**	.226**	-						
7 - Desire/frequency	.048	.161**	.048	.095**	.113**	.604**	-					
8 - Desire/interest	.011	.130**	.006	.066*	.061*	.370**	.675**	-				
9 - Arousal	.058*	.159**	.047	.118**	.108**	.472**	.724**	.679**	-			
10 - Orgasm	.092**	.151**	.123**	.135**	.147**	.419**	.481**	.447**	.604**	-		
11 - Global levels of sexual functioning	.093**	.192**	.094**	.141**	.157**	.611**	.831**	.822**	.878**	.766**	-	
12 - Global levels of subjective sexual well-being	.186**	.229**	.187**	.167**	.230**	.672**	.480**	.282**	.421**	.461**	.520**	-

*<0.05 **<0.001

Correlational analysis shows significant, yet mild, levels of association between emotional intelligence and sexual functioning and subjective sexual well-being. Congruent with the observations of other studies [32-35], we find that sex apparently has no strong effect on emotional intelligence, even if it is closely linked with emotions. Furthermore, we observe that emotionally balanced people are happier and indicate higher levels of subjective sexual well-being [7], and sexual functioning [6].

This study has some limitations, including the fact that the sample is highly differentiated and was collected by convenience over the Internet. Therefore, the results are not generalizable. In order to rectify these deficiencies, it would be appropriate to develop future studies with probability samples and control groups, in order to manipulate emotional intelligence as an experimental variable. It should be noted that the responses to questionnaires about intimate subjects like sexuality might be influenced by factors such as inhibition, shame, or social desirability. Without being properly controlled these factors may skew the results, even if all measures present good levels of internal consistency.

5. CONCLUSION

All our hypothesis were accepted, and these results allow us to better inform professionals who work, either in the area of emotional intelligence, or in the field of sexuality, about the importance of these variables in promoting health, well-being, and quality of life in general.

Emotional intelligence, sexual functioning and subjective sexual well-being are very important new concepts in the sexuality/sex therapy field. These separate but complementary concepts promote healthy male, female and couple sexuality. This study contributes to the integrated use of emotional intelligence and sexual approaches, separately for both individuals and together as a couple, to promote sexual health.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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