

SEXUAL DESIRES, AGING PERCEPTION, AND MARITAL SATISFACTION AMONG OLDER COUPLES IN NIGERIA: IMPLICATION FOR SEX-POSITIVE COUNSELLING

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Abstract:

This study adopted a descriptive cross-sectional survey design to examine sexual desire, aging, and marital satisfaction among older couples, with implications for sex-positive counselling in Nigeria. The population comprised legally married couples aged 60 years and above residing in selected urban and semi-urban communities in South-Western Nigeria. A multistage sampling procedure was employed to select 320 respondents (160 couples) for the study. Data were collected using a structured questionnaire consisting of three standardized instruments: the Sexual Desire Scale (SDS), the Aging Perception Inventory (API), and the Marital Satisfaction Inventory–Revised (MSI-R). Results indicate that a significant positive correlation was found, indicating that there is a significant relationship between sexual desire and marital satisfaction among older couples; that the regression model was statistically significant, explaining 9% of the variance in sexual desire; aging perception significantly predicted sexual desire; that sexual desire and aging perception jointly predict marital satisfaction among older couples, explaining 15% of variance; and that older male spouses report higher marital satisfaction based on levels of sexual desire compared to older female spouses. The study concluded that sexual desire significantly predicts marital satisfaction among older couples in Nigeria. The study recommended the integration of sex-positive counseling and Emotion-Focused Couple Counselling to promote healthy aging and marital satisfaction among older Nigerian couples.

Keywords: *Sexual desire, Aging, Marital Satisfaction, Older Couples, Sex-Positive Counselling*

Introduction:

Sexual desire, aging perception, and marital satisfaction are interconnected dimensions of older couples' relationships. In Nigeria, however, cultural and societal norms often overlook or silence discussions about older adults' sexuality. Emerging evidence suggests that sexuality remains an important aspect of relational well-being in later life, challenging long-standing stereotypes that portray older adults as asexual.

Empirical studies within Nigeria support the continued relevance of sexual expression among older adults. For instance, Ede, Chepngeno-Langat, and Okoh (2023) found that older adults aged 60–89 years in southeastern Nigeria engage in diverse sexual behaviors, with a strong emphasis on emotional intimacy, mutual understanding, and companionship. These findings challenge prevailing myths about asexuality in later life and align with broader research demonstrating that sexual activity and intimacy remain meaningful components of aging relationships (Henninger, IV, Heinz, & Taylor, 2025).

Despite this evidence, cultural stigma continues to marginalize older adults' sexuality in Nigeria. Societal expectations often discourage open discussion of sexual concerns, particularly among women, thereby reinforcing silence and misconceptions (Adeoti, Ojo, & Ajayi, 2015; Ede et al., 2023). A systematic review of 17 Nigerian studies conducted between 2003 and 2024 further revealed that although many older adults remain sexually active, they face significant barriers to sexual well-being, including cultural taboos, gender norms, misinformation about HIV transmission, low condom use, and health system neglect (Lukwa, Akinsolu, Abodunrin, Okowa, Koledowo, Hassan et al., 2026). Healthcare providers' discomfort and limited training in addressing sexual health among older adults also contribute to inadequate service provision (Lukwa et al., 2026; Ogbonna, Azubuike, Enyam et al., 2024). These findings underscore the need to recognize and support older adults' sexual health as part of healthy aging and marital satisfaction.

Gender Differences in Relationship Priorities:

Research also indicates that men and women may prioritize different aspects of intimate relationships in later life. Henninger et al. (2025) reported that men's relationship satisfaction tends to be associated with long-term commitment and stability, whereas women's satisfaction is more strongly linked to emotional intimacy and companionship. Similarly, Nigerian studies suggest that women often prioritize emotional connection and mutual support, while men emphasize relational longevity and structural stability (Ede et al., 2023; Harris, 2023). These gendered patterns highlight the importance of culturally responsive and gender-sensitive interventions when addressing marital satisfaction among older couples.

Theoretical Framework: Socioemotional Selectivity Theory:

Socioemotional Selectivity Theory (SST)

This study was theoretically anchored in Socioemotional Selectivity Theory (SST), originally developed by Laura L. Carstensen. SST explains how individuals' goals, motivations, and social priorities change across the lifespan as a function of their perceptions of time. The theory proposes that when individuals perceive their future time as increasingly limited, as is common in later adulthood, they tend to prioritize emotionally meaningful goals and relationships over knowledge acquisition or future-oriented pursuits (Carstensen, 2021).

Within the context of aging, SST suggests that older adults become more selective in their social interactions and increasingly invest in relationships that provide emotional fulfillment, intimacy, and psychological well-being. Empirical evidence has consistently shown that older adults tend to focus more on emotionally gratifying interactions and relationship quality, particularly within close interpersonal relationships such as marriage (Carstensen, 2021; English & Carstensen, 2022). This shift toward emotionally meaningful engagement

often leads to stronger efforts to maintain closeness, companionship, and relational harmony with significant others.

Applied to marital relationships, SST provides a useful conceptual anchor for understanding how older couples may place greater emphasis on emotional intimacy, companionship, and relational satisfaction in later life. As couples age and become more aware of life's finitude, marital relationships may increasingly serve as a primary source of emotional support and meaningful connection. In this regard, expressions of affection, intimacy, and sexual connection may remain important components of relational well-being among older spouses (Harris, 2023; Henninger, Ram, & Gerstorf, 2025).

The theory, therefore, helps to situate the present study by highlighting the psychological processes that may underlie the continued relevance of sexual desire and intimacy in later-life marriages. As older couples prioritize emotionally meaningful experiences and relationships, sexual desire and affectionate intimacy may contribute to sustaining emotional closeness and marital satisfaction. Thus, SST provides a theoretical anchor for examining how perceptions of aging and the pursuit of emotionally meaningful relationships may shape sexual desire and marital satisfaction among older couples in Nigeria, while also informing the relevance of sex-positive counselling approaches that support intimacy and relational well-being in later life.

Sexual Desire, Aging, and Marital Satisfaction:

Although sexual expression remains important in later life, studies indicate that sexual desire and marital satisfaction may change with age. Factors such as physical health, chronic illness, relational quality, and societal expectations influence these shifts (Adeoti et al., 2015; Ede et al., 2023; Henninger et al., 2025). For example, Ede et al. (2023) found that older adults' sexual desire in Nigeria is shaped by health status, cultural norms, and the quality of spousal relationships. Similarly, longitudinal research demonstrates that relationship quality and physical health significantly predict marital satisfaction in older couples (Henninger et al., 2025). Thus, while sexual desire may decline in frequency or intensity for some individuals, emotional intimacy and relational closeness often gain prominence, suggesting a qualitative transformation rather than a complete diminishment of sexuality in later life.

Sex-Positive Counselling and the PLISSIT Model:

Addressing the sexual health needs of older adults requires culturally sensitive and affirming counselling approaches. Sex-positive counselling promotes healthy attitudes toward sexuality, emphasizing consent, respect, pleasure, and open communication. In the Nigerian context, such approaches can help counteract stigma, misinformation, and healthcare neglect (Lukwa et al., 2026).

A useful framework for implementing sex-positive counselling is the PLISSIT model, developed by Jack S. Annon. The model involves four progressive steps:

- Permission (P) – creating space to discuss sexual concerns;
- Limited Information (LI) – providing accurate, relevant education;
- Specific Suggestions (SS) – offering tailored strategies; and
- Intensive Therapy (IT) – referring for specialized intervention when necessary.

Healthcare professionals, including nurses and counsellors, can apply this model to facilitate open discussions, address misconceptions, promote safe sexual practices, and strengthen communication between partners. Key components of sex-positive counselling for older adults include prioritizing emotional connection, respecting cultural values, and providing accurate sexual health information.

Problem Statement:

Sexuality remains a fundamental dimension of human development and relational well-being across the lifespan. Although global research demonstrates that sexual desire and satisfaction persist into later adulthood, aging sexuality continues to be surrounded by myths, stereotypes, and silence—particularly in many African societies, including Nigeria. Older adults are frequently perceived as asexual or disinterested in intimacy, resulting in the marginalization of their sexual health needs in research, counselling practice, and public health programming. Consequently, issues related to sexual desire, intimacy, and marital satisfaction among older couples remain insufficiently explored within the Nigerian context. While studies conducted in Western and some Asian contexts have established significant associations between sexual desire, emotional intimacy, and marital satisfaction in later life, these findings cannot be uncritically generalized to Nigeria. Distinct sociocultural norms, religious values, patriarchal structures, and communication patterns shape marital relationships and sexual expression in Nigerian communities. Open discussion of sexual concerns—especially among older adults—is often discouraged, potentially leading to unmet needs, emotional distance, and marital dissatisfaction.

Moreover, aging is accompanied by physiological changes, health conditions, and psychosocial adjustments that may influence sexual functioning and desire. In the absence of culturally sensitive counselling interventions, these changes may generate anxiety, misconceptions, and relational strain. Counselling frameworks in Nigeria have historically focused on youth sexuality, reproductive health, and marital conflict among younger couples, leaving a significant gap in gerontological and sex-positive counselling approaches tailored to older married individuals.

A further limitation in the literature is the scarcity of empirical studies examining the joint and individual contributions of sexual desire and aging perceptions to marital satisfaction among older Nigerian couples. Although marital satisfaction has been widely studied, few investigations have systematically explored how evolving sexual needs and attitudes toward aging interact to influence relationship quality in later life. This gap restricts evidence-based counselling practice, policy development, and targeted interventions promoting healthy aging.

Additionally, gender dynamics within Nigerian marriages may shape experiences of sexual desire and satisfaction differently for men and women. Cultural constructions of masculinity, femininity, sexual roles, and communication norms likely influence how couples negotiate intimacy in later adulthood. Without rigorous empirical inquiry, these dynamics remain poorly understood, limiting counsellors' ability to provide culturally responsive and gender-sensitive support.

Failure to address these issues may perpetuate marital strain, emotional disconnection, diminished quality of life, and psychological distress among older couples. Conversely, identifying patterns and predictors of sexual desire and marital satisfaction can inform sex-positive counselling interventions, strengthen marital stability, and contribute to holistic models of healthy aging.

Therefore, this study seeks to address the insufficient empirical understanding of the relationship between sexual desire, aging perceptions, and marital satisfaction among older couples in Nigeria, and the consequent lack of culturally grounded counselling strategies to support their intimate and relational well-being.

Hypotheses:

1. There is no significant relationship between sexual desire and marital satisfaction among older couples.
2. Aging perception has no significant influence on sexual desire among older couples.
3. Sexual desire and aging perception do not jointly predict marital satisfaction among older couples.
4. There is no significant difference in marital satisfaction between older male and female spouses based on levels of sexual desire.

Methodology:

This study adopted a descriptive cross-sectional survey design. The design was considered appropriate because it allowed for the systematic collection of quantitative data from older couples at a single point in time to examine the relationships among sexual desire, aging perceptions, and marital satisfaction.

The population of the study comprised legally married older couples aged 60 years and above residing in selected states in South-Western Nigeria. Both spouses were living together and had been married for a minimum of ten years, ensuring that participants possessed adequate relational experience. The accessible population consisted of older couples registered with community development associations, religious organizations, retirees' associations, and primary healthcare centres within selected Local Government Areas (LGAs).

A sample size of 320 respondents (160 couples) was selected for the study. The sample size was determined using Cochran's formula for estimating proportions in large populations and was adjusted for feasibility and statistical power for regression analysis. A multistage sampling procedure was employed as follows:

Stage One – Purposive Sampling: Two states in South-Western Nigeria were purposively selected based on population density and accessibility.

Stage Two – Random Sampling: Three Local Government Areas (LGAs) were randomly selected from each chosen state using simple random sampling (balloting method).

Stage Three – Systematic Sampling: Lists of eligible older couples were obtained from community and religious bodies, and every kth couple was selected systematically.

Stage Four – Snowball Sampling Technique: To reach less visible older couples, initial participants were used to identify other eligible couples within their communities.

Both husbands and wives independently completed the research instruments to allow for dyadic analysis where necessary.

Data were collected using a structured questionnaire divided into four sections:

Section A: Demographic Information Form (DIF): This section sought information such as age, gender, duration of marriage, educational level, health status, number of children, and religious affiliation.

Section B: Sexual Desire Scale (SDS): Adapted from standardized measures of sexual desire, this section assessed levels of sexual interest, frequency of sexual thoughts, and desire for intimacy using a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree).

Section C: Aging Perception Inventory (API): This instrument measured attitudes toward aging, perceived bodily changes, and emotional adaptation to aging.

Section D: Marital Satisfaction Inventory (MSI): This standardized marital satisfaction scale assessed relationship quality, communication, intimacy, and overall marital happiness.

All instruments were adapted to ensure cultural relevance and clarity within the Nigerian context. A table of specifications was developed to ensure adequate coverage of all domains of sexual desire, aging perception, and marital satisfaction, thereby enhancing content validity. The instruments were pilot-tested on 30 older couples outside the main study area to identify ambiguities and refine questionnaire items.

The reliability of the instruments was determined using Cronbach's Alpha Coefficient to assess internal consistency. Test-retest reliability was also conducted during pilot testing with a two-week interval to assess stability over time. The reliability coefficients obtained were as follows: Sexual Desire Scale (SDS): 0.75; Aging Perception Inventory (API): 0.72; and Marital Satisfaction Inventory (MSI): 0.80

Ethical approval was obtained from the Ethics Committee of Emmanuel Alayande University of Education institutional review board. Permission was also sought from community leaders and religious organizations before data collection. Trained research assistants who were fluent in English and Yoruba administered the questionnaires. Informed consent was obtained from all participants before participation. The questionnaires were administered in person to ensure clarity and to enhance the response rate. Confidentiality and anonymity were assured throughout the research process. Participants were allowed to complete the questionnaires separately to minimize response bias. Completed questionnaires were retrieved immediately after completion. The data collection process lasted approximately six weeks. The collected data were analyzed using frequency counts and percentages, mean, and standard deviation for descriptive statistics. Inferential statistics included Pearson's Correlation Coefficient (r), Simple Linear Regression, t-test for gender differences, and Multiple Linear Regression Analysis.

Results:

Hypothesis One: There is no significant relationship between sexual desire and marital satisfaction among older couples.

Variable	N	Correlation Coefficient (r)	p-value	Result
Sexual Desire & Marital Satisfaction	160	0.25	0.001	Significant relationship

Results in Table 1 revealed that a significant positive correlation was found ($r = 0.25$, $p = 0.001$, $N = 160$), indicating that there is a significant relationship between sexual desire and marital satisfaction among older couples. Hypothesis 1 was rejected, and the study concluded that there is a significant relationship between sexual desire and marital satisfaction among older couples.

Hypothesis Two: Aging perception has no significant influence on sexual desire among older couples.

Table 2: Simple Linear Regression Analysis Showing the Influence of Aging Perception on Sexual Desire Among Older Couples (N=160)

Predictor	B	SE B	β	t	p	R	R ²	F(1,158)
(Constant)	12.45	210	-	5.93	< .001			
Aging Perception	0.48	0.12	.30	3.95	< .001	.30	.09	15.64***

Note. $R = .30$; $R^2 = .09$; Adjusted $R^2 = .08$.

*** $p < .001$.

The regression model in Table 2 was statistically significant, $F(1, 158) = 15.64$, $p < .001$, explaining 9% of the variance in sexual desire. Aging perception significantly predicted sexual desire ($\beta = .30$, $p < .001$). The null hypothesis is rejected, and the study concluded that aging perception has a significant influence on sexual desire among older couples.

Hypothesis Three: Sexual desire and aging perception do not jointly predict marital satisfaction among older couples.

Table 3: Multiple Linear Regression Table of Sexual Desire and Aging Perception Jointly Predicting Marital Satisfaction Among Older Couples.

Predictor	β	p-value
Sexual Desire	0.30	< 0.001
Aging Perception	0.20	0.01

Results in Table 3 indicate that sexual desire and aging perception jointly predict marital satisfaction among older couples (N = 160), explaining 15% of variance [F(2,157) = 13.72, P < 0.001]. Hence, hypothesis three is rejected, and we conclude that sexual desire and aging perception jointly predict marital satisfaction among older couples.

Hypothesis Four: There is no significant difference in marital satisfaction between older male and female spouses based on levels of sexual desire.

Table 4: t-test Table of Marital Satisfaction Between Older Male and Female Spouses Based on Levels of Sexual Desire.

Group	Mean Marital Satisfaction	SD	t(158)	p-value
Older Males	3.8	0.7	2.15	0.033
Older Females	3.4	0.8		

Results in Table 4 indicate that older male spouses report higher marital satisfaction based on levels of sexual desire compared to older female spouses [t(158) = 2.15, p = 0.033]. The null hypothesis is rejected, and we conclude that there is a significant difference in marital satisfaction between older male and female spouses based on levels of sexual desire.

Discussion:

Results in Table 1 showing a significant positive correlation (r = 0.25, p = 0.001) between sexual desire and marital satisfaction among older couples (N = 160) indicate that stronger sexual desire is associated with greater marital satisfaction. This result aligns with a substantial body of research showing positive linkages between sexual functioning (including desire and satisfaction) and marital quality. Correlational effect sizes in relationship research are often modest because marital satisfaction is influenced by many factors (e.g., communication, health, parenting, economic stress), so a correlation of r = .25 in a sample of older adults reflects a meaningful association rather than a trivial one. Although much research on marital satisfaction focuses broadly on communication and intimacy, sexual desire and sexual satisfaction remain consistently associated with marital quality. For example, studies across age groups show that higher levels of sexual desire or satisfaction are linked with greater overall relational satisfaction, even when effect sizes vary: Sexual desire and marital functioning were positively correlated in community

couples, suggesting that desire relates meaningfully to relationship satisfaction (Breznsnyak & Whisman, 2004). Research in broader adult samples shows that sexual satisfaction and overall relationship satisfaction co-occur, indicating that couples who report greater sexual fulfillment also tend to report higher marital satisfaction (Chao, Lin, Ma, Lai, Ku, & Kuo, 2011). Studies of older adult dyads show that sexual activity and satisfaction remain relevant to marital experiences in later life, suggesting sexuality continues to play a role in relational well-being beyond midlife (Hanamori *et al.*, 2023).

These studies support the interpretation that sexual desire has positive correlations with satisfaction within long-term relationships, including among older populations. Empirical work on older adults challenges the stereotype that sex becomes irrelevant in later life and demonstrates continued connections between sexual functioning and relational quality: Large population-level research on older partnered adults found that satisfying sexual lives were linked with stronger relational indicators, including intimacy and perceived relationship quality, suggesting the relevance of sexual desire and satisfaction for marital life even into older ages (Gillespie, 2017). Discussions of aging and sexuality emphasize that many older adults continue to value sexual expression and that sexual desire informs both individual well-being and interpersonal closeness, which in turn connects to relational satisfaction (Takbiri, Imeni, & Fini, 2017). These findings emphasize that sexual desire and satisfaction do not disappear with age and remain psychologically important for many couples, which can explain why a positive correlation with marital satisfaction is found in older samples. The mechanisms linking sexual desire to marital satisfaction likely include communication, emotional intimacy, and mutual responsiveness: Research highlights that open sexual communication enhances sexual satisfaction, which then contributes to relational satisfaction; in this framework, sexual desire may act upstream as part of a broader network of intimacy and communication processes (Galizia, Theodorou, Simonelli, Lai, & Nimbi, 2023). Sexual desire may facilitate emotional closeness and shared pleasurable experiences, which are core components of marital satisfaction across the life span. Thus, a correlation between desire and satisfaction in marriage reflects complex interpersonal dynamics, not a direct cause-and-effect relationship.

The simple linear regression analysis showed that aging perception significantly predicts sexual desire among older couples ($\beta = .30, p < .001$). This means older adults with more positive perceptions of aging tend to report higher levels of sexual desire. This result aligns well with contemporary research revealing that psychosocial factors — including self-perceptions of aging and attitudes towards sexuality — are important determinants of sexual well-being in later life. For instance, Vasconcelos, Paúl, and Nobre (2024) found that negative age-related sexual beliefs are significantly associated with poorer sexual well-being in older adults, whereas positive sexual attitudes enhance sexual satisfaction and desire in partnered older individuals (e.g., higher relationship satisfaction and positive beliefs improved sexual outcomes). Their biopsychosocial model showed that subjective beliefs about aging and sexuality contributed meaningfully to variance in sexual well-being measures, beyond physical health alone, supporting the idea that psychological perceptions matter for sexual desire (Vasconcelos, Paúl, & Nobre, 2024). Similarly, recent qualitative research highlights how body and self-image perceptions influence sexual identity and satisfaction in older adults. Older Norwegian adults navigating changes in their ageing bodies reported that negative internalized views of their aging bodies could shape sexual

desire and engagement, illustrating a psychosocial pathway through which aging perception affects sexual experience and desire (Schaller, Kvaalem, & Traen, 2023). Additionally, caregivers and researchers stress that older adults' sexual attitudes and perceptions significantly affect their overall sexual lives. A study of older women in southern China found that women with more positive sexual attitudes were more likely to report active sexual desire and value sexual activity as part of ageing, while those with reserved or indifferent attitudes were more likely to report diminished desire and lower engagement in sexual activity (Peng, Wang, Wang, Li, Sun, Li *et al.*, 2024).

The result showing that sexual desire and aging perception jointly predict marital satisfaction among older couples (N = 160) is consistent with recent studies. Research suggests that sexual desire plays a significant role in marital satisfaction, particularly among older adults (Fisher, Bigras, Popova, Pedneault, Brassard, & Bergeron, 2024). Aging perception also influences marital satisfaction, as older couples' attitudes toward aging can impact their relationship dynamics (Levy & Slade, 2019). A study published in the *Journal of Marriage and Family* found that older couples with positive aging perceptions reported higher marital satisfaction (Wong *et al.*, 2020). Another study in the *Journal of Sex Research* highlighted the importance of sexual desire in maintaining intimacy and relationship satisfaction among older adults (Heiman, Baird, Barnett, Meston, Rosen, Rosen *et al.*, 2019). These findings underscore the need for healthcare professionals to address aging perceptions and sexual desire when working with older couples.

The result showing older male spouses report higher marital satisfaction based on levels of sexual desire compared to older female spouses (N=160 couples) is consistent with recent studies. Research suggests that men tend to prioritize long-term relationships and report greater sexual satisfaction than women in older adulthood (Henninger *et al.*, 2025). This difference may be attributed to men's greater emphasis on emotional connection and companionship in relationships, as explained by Socioemotional Selectivity Theory (SST) (Carstensen, 2021). A study published in *Social Sciences* found that older men (Mdn = 16.00) placed greater importance on long-term relationships than older women (Mdn = 15.00), with a medium effect size ($r = -0.35$) (Henninger *et al.*, 2025). Another study highlighted that men's marital satisfaction is often linked to their partner's caregiving roles, whereas women's satisfaction is influenced by their own caregiving responsibilities (Harris, 2023). These findings underscore the need for healthcare professionals to address relationship dynamics and sexual desire when working with older couples.

Conclusion:

This study examined the relationships among sexual desire, aging perception, and marital satisfaction among older couples in selected communities in South-Western Nigeria, with particular attention to the implications for sex-positive counselling. Using a descriptive cross-sectional survey design and standardized instruments, the study provided empirical evidence that sexuality and relational well-being remain important aspects of life even in older adulthood. Contrary to persistent cultural assumptions that often portray older adults as largely asexual or disengaged from intimate relationships, the findings demonstrated that sexual desire continues to play a meaningful role in the marital lives of older couples.

The results of the study revealed a significant positive relationship between sexual desire and marital satisfaction among older couples. This finding indicates that couples who reported higher levels of sexual desire also tended to experience higher levels of satisfaction in their marital relationships. The study further showed that aging perception significantly predicted sexual desire, suggesting that how individuals perceive and interpret the aging process may influence their attitudes toward intimacy, physical closeness, and sexual expression. Positive perceptions of aging may therefore contribute to healthier sexual attitudes and experiences in later life.

In addition, the regression analyses indicated that sexual desire and aging perception jointly predicted marital satisfaction among the participants, accounting for a meaningful proportion of the variance. Although the percentage of explained variance was modest, the findings highlight the interconnected nature of psychological, relational, and perceptual factors in shaping marital well-being among older couples. The study also found gender differences in marital satisfaction, with older male spouses reporting higher levels of marital satisfaction in relation to sexual desire compared to their female counterparts. This suggests that gender dynamics may influence how intimacy and satisfaction are experienced and expressed within long-term marital relationships.

Overall, the findings underscore the importance of recognizing sexuality as a normal and valuable component of healthy aging. Sexual desire should not be viewed solely through the lens of youth or reproductive capacity but rather as an enduring aspect of emotional connection, intimacy, and relationship satisfaction across the lifespan. The study, therefore, highlights the need to challenge cultural stigmas and societal misconceptions surrounding sexuality in later life within the Nigerian context.

The study contributes to the growing body of literature on aging, sexuality, and marital relationships in Africa by providing empirical data on older couples, a population that has often been underrepresented in research on intimate relationships. By demonstrating the significant role of sexual desire and aging perceptions in marital satisfaction, the study also emphasizes the relevance of incorporating sex-positive perspectives and emotionally focused approaches in counselling interventions aimed at older couples.

More importantly, the study established that sexual desire remains a significant predictor of marital satisfaction among older couples in Nigeria and that perceptions of aging play an important role in shaping sexual attitudes and relational outcomes. These findings highlight the need for counselling professionals, healthcare providers, and policymakers to recognize and support the sexual and relational well-being of older adults. Promoting sex-positive counselling practices, fostering open communication about intimacy in later life, and addressing gender and cultural dynamics will contribute to enhancing marital satisfaction and overall quality of life among older Nigerian couples.

Recommendations:

First, there is a need to integrate sex-positive counselling approaches into marital and family counselling services for older adults in Nigeria. The study demonstrated that sexual desire significantly predicted marital satisfaction among older couples. This suggests that sexuality remains an important aspect of relational well-being even in later life. Counsellors,

psychologists, and marriage therapists should therefore adopt sex-positive counselling frameworks that normalize and validate sexual expression among older adults, rather than reinforcing societal stereotypes that portray older individuals as asexual. Counselling interventions should encourage open communication about intimacy, desire, and emotional connection between spouses.

Second, the study recommends the application of Emotion-Focused Couple Counselling (EFCC) in therapeutic settings involving older couples. Since sexual desire and aging perception jointly predicted marital satisfaction, EFCC can help couples strengthen emotional bonds, address unmet attachment needs, and improve intimacy. Counsellors should assist older couples in exploring emotional vulnerabilities, enhancing empathy, and rebuilding emotional closeness, which may in turn promote healthier sexual relationships and overall marital satisfaction.

Third, counselling training programmes in Nigerian universities and professional institutes should incorporate gerontological sexuality and sex-positive counselling competencies into their curricula. Many counsellors receive limited training on sexuality in later life, which can lead to discomfort or avoidance of the topic during therapy. Including specialized training on aging, sexuality, and marital dynamics will equip practitioners with the skills necessary to address the psychosocial and relational needs of older couples effectively.

Fourth, community-based psychoeducational programmes should be developed to promote positive perceptions of aging and sexuality among older adults. The study found that aging perception significantly predicted sexual desire, suggesting that how individuals perceive aging may influence their attitudes toward intimacy and sexual expression. Religious organizations, community development associations, retirees' groups, and primary healthcare centres can collaborate with counselling professionals to organize workshops and seminars that challenge negative stereotypes about aging and encourage healthy discussions about marital intimacy in later life.

Fifth, healthcare professionals working with older adults should adopt a more holistic approach to ageing that includes sexual health and relationship wellbeing. Medical practitioners, nurses, and geriatric care providers should be trained to recognize that sexual health remains an integral component of quality of life for older adults. Routine health consultations with older couples could include discussions on intimacy, physical health factors affecting sexual functioning, and appropriate referrals to counselling services when necessary.

Sixth, given the study's finding that older male spouses reported higher marital satisfaction associated with sexual desire than female spouses, counselling interventions should pay particular attention to gender dynamics in marital relationships among older couples. Counsellors should encourage equitable communication about sexual needs, expectations, and emotional support between spouses. Addressing gender-based differences in perceptions of intimacy may help improve mutual satisfaction and relational harmony.

Finally, future research should expand on the present study by exploring additional psychosocial, cultural, and health-related variables that may influence sexual desire and

marital satisfaction among older adults in Nigeria. Longitudinal and qualitative studies could provide deeper insights into how aging, health status, cultural beliefs, and relationship dynamics interact over time. Such research would contribute to the development of culturally sensitive counselling interventions and policies that support the well-being of older couples.

Overall, implementing these recommendations will contribute to promoting healthy aging, enhancing marital satisfaction, and fostering a more inclusive and sex-positive counselling practice for older couples in Nigeria.

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