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ABSTRACT:

Coronavirus (COVID-19) is a complex disease that has affected millions worldwide, with more than four and a half million deaths. It is undoubtedly the most complex pandemic experienced by modern humanity, generating harmful consequences at all levels of human life, directly affecting individuals, families, and couples. Based on the above, this research proposed the following research question: What are the levels and correlation among Couple Satisfaction, Stress, Anxiety, Depression, and Fear of COVID-19 in people in couple relationships in Chile during the COVID-19 pandemic? The present research methodology corresponds to a descriptive correlational type of non-experimental nature with a cross-sectional design. The sample was composed of 1,109 people—78.3% female, 21.5% male, and 0.3% non-binary—who were in a couple's relationship at the time of answering the questionnaires. At a descriptive level, the COVID-19 pandemic affected more the female gender, those who did not live with their partners, and those who did not have children. They presented higher rates of depression, anxiety, and stress. Concerning correlations, partner satisfaction had a significant and negative correlation with fear of COVID-19 (-.322; -.329), depression (-.244; -.246), anxiety (-.173; -1.53), and stress (-204; -1.88). From these results, we can conclude that being in a couple during the COVID-19 pandemic was a protective factor for mental health. These results should draw the attention of national authorities to realize possible strategies for preventing mental health problems in individuals and couples in the country.

KEYWORDS: Couple Satisfaction, Anxiety, Depression, Stress, Fear of COVID-19.

RESUMEN:

El coronavirus (COVID-19) es una enfermedad compleja que ha afectado a millones en todo el mundo, con más de cuatro millones y medio de muertes. Es sin duda la pandemia más compleja que ha vivido la humanidad moderna, generando consecuencias nefastas en todos los niveles de la vida humana, afectando directamente a las personas, familias y parejas. Con base en lo anterior, esta investigación planteó la siguiente pregunta de investigación: ¿Cuáles son los niveles y la correlación entre la Satisfacción de Pareja, el Estrés, la Ansiedad, la Depresión y el Miedo al COVID-19 en personas en relaciones de pareja en Chile durante la pandemia del COVID-19? La presente metodología de investigación corresponde a un tipo descriptivo correlacional de carácter no experimental con un diseño transversal. La muestra estuvo compuesta por 1.109 personas, 78,3% mujeres,21,5% hombres y 0,3% no binarios, que se encontraban en pareja al momento de responder los cuestionarios. A nivel descriptivo, la pandemia de COVID-19 afectó más al género femenino, a quienes no vivían con su pareja y a quienes no tenían hijos. Ellos presentaron mayores índices de depresión, ansiedad y estrés. En cuanto a las correlaciones, la satisfacción de la pareja tuvo una correlación significativa y negativa con el miedo a COVID-19 (-.322; -.329), depresión (-.244; -.246), ansiedad (-.173; -1.53) y estrés (-204; -1.88). De estos resultados podemos concluir que estar en pareja durante la pandemia de COVID-19 fue un factor protector para la salud mental. Estos resultados deben llamar la atención de las autoridades nacionales para concretar posibles estrategias de prevención de problemas de salud mental en solteros y parejas del país.

PALABRAS CLAVE: Satisfacción de pareja, Ansiedad, Depresión, Estrés, Miedo al COVID-19.



INTRODUCTION

In December 2019, in Wuhan, Hubei province in China, a group of 27 people was reported with pneumonia of unknown etiology linked to a seafood market, fish, and live animals (Figueroa Triana et al., 2020). COVID-19 is a complex disease that has wreaked havoc in several areas of life due to its high mortality, with more than 6 million deaths worldwide and the political, social, psychological, educational, and economic consequences (Martínez-Líbano, 2020). The virus caused confinement, social isolation, and disruption of daily life during the COVID-19 pandemic (Tasnim et al., 2020; Yeomans Cabrera & Silva Fuentes, 2020), becoming a disease that affects every relevant aspect of modern human life (Nguyen et al., 2021). Three traumatic elements may be seen in COVID-19 in this sense. The first is the fear of current and upcoming diseases. Third, the disruption of daily routine and isolation, followed by the overall economic impact (Kira et al., 2020). Thus, the confinement generated by this pandemic meant a radical change of lifestyle, radically decreasing social contact with all types of people and, in addition, stopping activities not related to work (Corvo & Caro, 2020). The most significant and long-lasting effects and implications of COVID-19 will probably be on mental health, despite the fact that the medical effects are notable (Madigan et al., 2020; Martínez-Líbano et al., 2021; Martínez-Líbano, et al., 2022; Martínez-Líbano & Yeomans, 2021; Yeomans et al., 2021) short and long term (Park et al., 2021).

Couples in society

The couple is the basic unit of the family, and several authors state that we must undoubtedly study it and treat it independently (De La Espriella Guerrero, 2008). This has changed over time as society and culture constantly change (Gurman, 2008). The couple is a combination of the needs of each individual and their own needs generated by the relationship (Castrillón Muñoz, 2008). We have learned that happily married couples experience increased immunological capacity, as they show a more significant proliferation of white blood cells in the face of an invasion of external agents (Oliver et al., 2008). On the other hand, when spouses feel dissatisfied with their relationship, they are more likely to trigger depressive symptoms. Marital dissatisfaction impairs spousal caregiving and the cohesion of the couple itself (Kouros & Cummings, 2011). In the United States, marital dysfunction alone accounts for more mental health referrals than any other psychiatric diagnostic category (Hammett et al., 2016). Different studies correlate marital adjustment with mental health (Oliver et al., 2008), physical health, and even longevity (Villanueva et al., 2009). In general, it has been found that maintaining a relationship with someone with mental disorders and/or physical problems is related to low levels of marital satisfaction. Higher levels of pathology result in lower satisfaction for both partners. In terms of psychological disorders, the couples that show the lowest levels of marital satisfaction are those in which both partners suffer from major depression (Whisman et al., 2004). According to the social exchange theory, individuals try to maximize the rewards in their relationships and are less depressed if the rewards outweigh the costs. Therefore, when individuals are involved in an unbalanced relationship, they gradually feel more discomfort and depression (Domínguez Jové, 2015). The effects of depression are relevant in the life of couples. Still, the effects of anxiety are more complex, and its influence is very profound on the couple's satisfaction, a very important predictor of misalignment, dissatisfaction, and the cause of divorce in couples (Gottman, 2002; Whisman et al., 2004).

Couples in Chile

In Chile, couple relationship formation and parenthood patterns are becoming similar to the reality of developed countries. Background on fertility and family (INE, 2018) shows an increase in the average age



of first marriage, corresponding in the case of men to 31.3 years and women to 29.9 years (Rivera et al., 2015). Most people in Chile live in families, as 82.1% of households are composed of people in kinship ties, either in nuclear households, extended families, or compound households (INE, 2018). However, 19.2% of marriages divorce in the first five years of a relationship despite the valuation of the couple, marriage, and family (according to the United Nations record in Chile). This percentage would be higher if couples who cohabit and then separate were included and those married couples who separate de facto and materialize the legal dissolution of the bond years later (Rivera et al., 2015). Forming a stable marriage or cohabitation relationship and a family does not ensure that these bonds are satisfactory and healthy—even more so if this family dyad is affected by a pandemic such as COVID-19.

Catastrophes as Couples' external stressors

Research on romantic relationships shows that external stressors, such as economic hardship, demanding jobs, and disasters, can threaten the quality and stability of relationships (Pietromonaco & Overall, 2021) . In general, catastrophes have been associated with issues in couple relationships because regular stressors can erode emotions of togetherness ("we"), reduce emotional sharing and dyadic coping, heighten withdrawal symptoms, and impair communication (Prime et al., 2020). As natural catastrophes have shown, major life events can exacerbate already-existing marital issues or cause new ones. This is especially true when stressors like job loss, illness, and parenting worries are present (Cohan, 2010). In addition, the physical disease of the partner is a significant stressor that increases marital dissatisfaction and the likelihood of subsequent divorce (Hemel et al., 2019). COVID-19 has made couple relationships' quality more difficult (Mousavi, 2020). Consequently, there is a higher likelihood of marital conflict and breakup (Prime et al., 2020), influencing the happiness of couples during the COVID-19 epidemic and afterwards having an impact on social interaction, mental health, and general well-being (Ashwini, 2018). Reviewing the effects of natural disasters and terrorist attacks, as inferred from divorce, marriage, and birth rates offers some insights into how the current COVID-19 pandemic might affect couples. Research examining the various consequences of natural disasters (e.g., tornadoes, floods, hurricanes) generally indicates no long-term effects on divorce and marriage rates (Deryugina et al., 2018). Some short-term effects, however, are evident: in the year following Hurricane Hugo, divorce, marriage, and birth rates increased in the hardest-hit areas but then returned to preexisting levels (Cohan & Cole, 2002). In contrast, divorce rates declined immediately following two 9/11 terrorist attacks and the 1995 Oklahoma City bombing and eventually returned to baseline levels (Cohan et al., 2009). These divergent short-term effects may reflect differences in the two contexts (Cohan et al., 2009). In the terrorist attacks, many deaths occurred (e.g., for 9/11, about 3,000 deaths, and many people experienced uncertainty about the world, future attacks, and their mortality. When people experience this threat to their existence, they generally seek safety and comfort from their closest others (Mikulincer & Shaver, 2007), which would explain why couples might turn to each other and be less likely to divorce after terrorist attacks. In contrast, Hurricane Hugo involved fewer deaths but required more time to rebuild communities, which could put chronic stress on marriages that likely contributed to increased divorce.

Covid-19 as a couple's external stressor

Drawing on relationship science theory and research, a framework adapted from the vulnerability-stress-adaptation model (Karney & Bradbury, 1995), we can say that coping with COVID-19-related external stress is likely to increase harmful dyadic processes (e.g., hostility, withdrawal, less responsive support). This may undermine the quality of the couple's relationship; harmful effects are likely exacerbated by the broader preexisting context in which couple relationships are situated (e.g., social class, minority status, age)



and their individual vulnerabilities (e.g., attachment insecurity, depression). Research on the psychological effects of COVID-19 has found elevated anxiety, depression, and sleep disturbance levels in the general population (Huang & Zhao, 2020) . At present, there is considerable empirical evidence on the damage to the mental health of the population (Gruber et al., 2020), such as increased family stress, work stress, and distress about the spread of the disease (Asmundson et al., 2020), loss of employment and economic insecurity, insufficient basic supplies, loss of resources, lack of support and interpersonal interaction, and the possible death of loved ones (Gruber et al., 2020). Likewise, within the symptoms of COVID-19 itself, depression and anxiety have been cataloged as the main psychiatric symptoms in both mild and severe cases. It has also been found that 1 out of 5 patients diagnosed with COVID-19 presents mental health symptoms (Taquet et al., 2021). The pandemic has brought a decline in people's quality of life and mental health worldwide (Kaparounaki et al., 2020). As family life has been disrupted, many parents have faced significant role overload and stress (van Tilburg et al., 2020). It also has challenged the quality of couple relationships (Mousavi, 2020). Therefore, the risk of marital conflict and dissolution is likely to be elevated (Prime et al., 2020), affecting couples' satisfaction during the COVID-19 pandemic and consequently affecting mental health, overall happiness, and social interaction (Ashwini, 2018). These historical examples of catastrophes as couples' external stressors provide some basis for assessing and predicting how the COVID-19 pandemic may be linked to relationship stability and, more generally, relationship quality. With the COVID-19 situation, couples face an event of unknown duration and likely a relatively lengthy rebuilding and recovery process, like conditions accompanying many natural disasters.

Evidence shows that other circumstances and catastrophes have affected the stability of family and couple relationships. There are recent systematic reviews on mental health problems in the general population (Xiong et al., 2020) and in couples (Martínez-Libano & Yeomans, 2021). Besides, various studies focus on the consequences of natural disasters and catastrophes in couples (Biton-Bereby et al., 2019; Cohan et al., 2009; Cohan & Cole, 2002; Deryugina et al., 2018) . However, evidence is scarce regarding levels of the consequences and their correlation with Couple Satisfaction, Stress, Anxiety, Depression, and Fear of COVID-19 in couple's relationships. Therefore, it is relevant to measure these variables within the context of the pandemic and to demonstrate the possible consequences that affect people in a couple's relationship during COVID-19. Consequently, the objective of this research was to determine and identify the correlation among Couple Satisfaction, Stress, Anxiety, Depression, and Fear of COVID-19 in a sample of people in couple relationships during the pandemic in Chile.

MATERIALS AND METHODS

Study Design

The present study had the characteristic of being descriptive and correlational.

Participants

In our study, 1,109 people were in a couple's relationship when answering the questionnaire. In Chile, about 70% of the population is in couple relationships, equivalent to 12 million people. Inclusion criteria were being 18 or older, being in a couple's relationship when answering the questionnaire, and living in Chile. The exclusion criteria were incomplete questionnaires.

By analyzing the target population and the sample obtained, we can then understand that the results of this research have a maximum error level for a confidence level of 95% of 2.94%; a maximum error for a confidence level of 97% of 3.26% and a maximum error for a confidence level of 99% of 3.87%. Since research



with an error range of 5% is generally accepted—far from close to a 3% error at 95%—this research has a good confidence level. Therefore, we could say that the results could be extrapolated to reality.

Instruments

For this research, the following instruments were used to measure couple satisfaction Kansas Marital Satisfaction Scale (KMSS) (Schumm et al., 1983b); The Relationship Assessment Scale (RAS) (Hendrick, 1988), validated for the Chilean population (Rivera et al., 2011). In addition, a questionnaire was constructed with sociodemographic variables, accompanied by scales of fear of COVID-19, coronavirus involvement, and Depression, Anxiety, and Stress Scales-21 (DASS-21).

Description of the instruments

Kansas Marital Satisfaction (KMS) (Schumm et al., 1983a): The Kansas Marital Satisfaction Scale assesses a person's current satisfaction with their partner. Examples of items are "How satisfied are you with your current relationship or marriage?" (item 1) and "How satisfied are you with your partner as a mate?" (item 3). It consists of three questions that are answered with a response format ranging from 1, meaning "extremely dissatisfied," to 9, meaning "extremely satisfied" (Montes-Berges, 2009).

The Relationship Assessment Scale (RAS) of Hendrick (1988): evaluates overall satisfaction with the relationship. This self-administered instrument consists of seven items assessed on a Likert scale from 1 to 5, where 1 corresponds to "it does not represent me at all" and 5 to "it totally represents me." In this study, the instrument's consistency was .71, according to Cronbach's Alpha in the Chilean population (Rivera et al., 2011).

DASS-21: is composed of three self-report scales assessing anxiety (7 items), depression (7 items), and stress (7 items). Each item is scored from 0 (does not apply to me at all) to 3 (applies to me a lot or most of the time). The scale score is calculated by adding the scores of the relevant items, ranging from 0 to 21 (Park et al., 2020). It presented a Cronbach Alpha of .85 for the Chilean population (Antúnez & Vinet, 2012).

Fear of COVID-19 Scale (FCV-19S) (Ahorsu et al., 2020): is a self-administered questionnaire that assesses fear of COVID-19 from 7 items (e.g., "I am terrified of the coronavirus") with a Likert-type format with five response anchors according to the degree of agreement of the participants. The FCV-19S has presented good psychometric properties according to what has been reported in the literature. According to the authors, it has robust psychometric properties, reliable and valid to evaluate the environment to COVID-19 in the general population; Cronbach's alpha: 0.82 and intraclass correlation: 0.72 (17) (Ahorsu et al., 2020; Reznik et al., 2020). Its adaptation to Spanish (Furman et al., 2020) was developed following the methodological standards recommended by the International Test Commission (ITC) (Muñiz et al., 2013). It was validated for Chilean population in 2022 (Martínez-Líbano, et al., 2022).

Sociodemographic variables instrument: This section was created with general variables such as age, marital status, sexual orientation, children, the region where they live, nationality, level of education, and length of the relationship.

The scale of COVID-19 affected areas (Martínez-Líbano, 2022): This was a section created by the researchers with various queries on how COVID-19 has affected areas such as emotional state, relationship, socioeconomic status, work situation, social life, physical health, family life, mental performance, academic performance, sexual life, and mental health. This is a Likert scale where the person is asked to indicate their degree of agreement with each of the eleven statements to determine which areas of their lives have been most affected by the pandemic.



Procedure

After the ethics committee approved the study, the GoogleForm was distributed via e-mail and social networks. Data was gathered among May 2021 and August 2021. All participants accepted and validated their participation in this study through informed consent as a first step. Only questionnaires that met the inclusion criteria, such as being of legal age, being in couples relationships at the time of answering the questionnaire, and living in Chile, were taken into account for the data analysis.

Data Analysis

Data analysis was performed using SPSS software version 25 (IBM, 2017). The first step was to determine the reliability of the instruments, then study the descriptive variables, and finally, the procedure to analyze the correlations to be investigated.

Ethical implications

The present study was reviewed and approved by the Ethics Committee of the Universidad Internacional Iberoamericana, as stated under registration CR-142-2022.

RESULTS

Descriptive Results

The sample was composed of 1,109 people, all in a relationship when answering the questionnaires. The mean age was 34.5. Table 1 shows the main sociodemographic variables collected in this study.



Table 1 Sociodemographic Variables

Variable	n	9/6
Gender		
Female	868	78.3
Male	238	21.5
Non-Binary	3	0.3
Sexual Tendency		
Heterosexual	1001	90.3
Homosexual	42	3.8
Bisexual	54	4.9
Demisexual	3	0.3
Pansexual	9	0.8
Marital Status		
Single	592	53.4
Married	309	27.9
Cohabitant	144	13
Divorced	58	5.2
Widowed	6	0.5
Currently living with your		
partner		
Yes	454	40.9
No	655	59.1
Length of relationship		
Less than 1 Year	159	14.3
Between 1 to 2 Years	164	14.8
Between 3 to 4 Years	170	15.3
Between 5 to 6 Years	106	9.6
Between 6 to 7 Years	55	5
Between 7 to 8 Years	52	4.7
Between 8 to 9 Years	64	5.8
Between 10 to 15 years	173	15.6
Between 15 to 20 Years	78	7
More than 20 Years	88	7.9

Source: Own elaboration.

Results Correlations

Table 2 presents the results of the correlations between partner satisfaction and affectation, Fear of COVID-19, and Depression, Anxiety, and Stress



	Ras	KMS	COVID-19 Affectation	Fear of COVID-19	Depression	Anxiety	Stress
Ras	1.000	.870**	322**	-0.039	244**	173**	204**
KMS	.870**	1.000	329**	-0.038	246**	153**	188**
COVID-19 Affectation	322**	329**	1.000	.271**	.526**	.447**	.505**
Fear of COVID-19	-0.039	-0.038	.71**	1.000	.277**	.375**	.340**
Depression	244**	246**	.526**	.277**	1.000	.775**	.839**
Anxiety	173**	153**	.447**	.375**	.775**	1.000	.845**
Stress	204**	188**	.505**	.340**	.839**	.845**	1.000

Source: Own elaboration.

DISCUSSION

The objective of this research was to determine and identify the correlation among Couple Satisfaction, Stress, Anxiety, Depression, and Fear of COVID-19 in a sample of people in couple relationships during the pandemic in Chile.

Impact of Covid-19 on Chilean people

Concerning the impact on the lives of the respondents, 74.1% of the sample reported that their emotional state during the COVID-19 pandemic had been affected from "moderately" to "very much", which can be explained by the fact that the pandemic has had an impact on social and physical distancing, which could affect social interaction (Berg-Weger & Morley, 2020). In addition, the pandemic affected daily activities, such as academic and professional life, daily routine, and social-emotional well-being (Golemis et al., 2022), which are essential for maintaining the quality of life and the physical and mental health of people (Hammami et al., 2022). 49.2% of the sample reported that the pandemic affected their relationship moderately, quite a lot, and very much, which can be explained by the fact that the four fundamental needs that support solid and healthy relationships—such as physical, emotional, commitment and community were affected (Stanley & Markman, 2020). 51.7% of the sample reported that their socioeconomic level was affected among moderately, quite a lot, and very much since the health measures adopted by governments to curb its spread have had significant economic and social consequences throughout the world (Valenzuela & Reinecke, 2020), generating a greater detriment to the quality of life in vulnerable social groups, which due to their age, sex, marital status, ethnic origin and/or socioeconomic status, are in a situation of risk that prevents them from joining development and accessing better conditions of well-being; these groups are at greater risk of illness and death since due to the characteristics of their environment they are more exposed to risk factors and at the same time have fewer protective factors or resources to face diseases (Cortés-Meda & Ponciano-Rodríguez, 2021). The economic situation could be linked to the 52.4% of the sample that reported that their employment situation was affected by the pandemic, ranging from moderately, quite a lot, and very much. The COVID-19 outbreak has caused different consequences that directly affect people and the functioning of a changing society. Due to the cessation of economic activities, the country's unemployment rates increased when the pandemic arrived, which generated financial difficulties in families and affected the country's economy (Lozano Chaguay et al., 2020).



Correlations

Concerning the correlations (see Table 2), it can be observed that there are significant and negative correlations among partner satisfaction, COVID-19 affectation, depression, anxiety, and stress.

The higher the partner satisfaction, the lower the COVID-19 affectation, depression, anxiety, and stress. According to the above, we can say that in the face of catastrophes, couples tend to cohere (Alexander & Robbins, 2019) and to be a supportive factor among the members of this relationship (Sprenkle et al., 2013). However, other general findings suggest that loss of resources and mental and relational well-being indicators were associated across couples, and greater loss of resources was associated with greater distress within and among couples (Witting & Busby, 2022).

People whose affectation and fear of COVID-19 were high tended to have a significant and positive correlation. Therefore, the higher the affectation and fear of COVID-19, the higher the depression, anxiety, and stress scores. Concerning depression and the increase in depressive symptoms during the pandemic, we can report difficulty in access to and quality of physical spaces, including housing conditions and public spaces for socializing, social support, adverse work conditions; besides, caregiving responsibilities, and lack of access to digital technologies and health care services contributed to the increase in depressive symptoms (Aguilar-Latorre et al., 2022; Yeomans Cabrera & Silva Fuentes, 2022). In addition, the increase in the amount of work, the fear of work, and the fear of becoming infected showed adverse effects on psychological resources, making it impossible to relax in free time, generating an increase in the feeling of anxiety and stress (Borusiak et al., 2022).

Concerning the correlations among age, length of the relationship, the number of children, and level of studies vs. partner satisfaction, affectation, fear of COVID-19, depression, anxiety, and stress (see Table 2), we got eight observations. (1) Age vs. Partner Satisfaction - There is a significant and negative correlation. Older people may have less partner satisfaction given the natural wear and tear of partner relationships, which affect and generate emotional wear and tear in people (Aguilar & Paladinez, 2020). (2) Age vs. Depression, Anxiety, and Stress - A significant and negative correlation could be observed, which implies that older people tend to present fewer symptoms of depression, anxiety, and stress. Mature people are associated with greater indicators of optimism, which can protect from depression, raise the level of achievement, accentuate the feeling of well-being, and protect from stress and disease. Besides, optimism correlates with health, better immune system functioning, absence of negative emotions, and promotion of healthy behaviors (Scheier et al., 2001; Seligman, 2003). (3) Length of the Relationship vs. Partner Satisfaction. Couples together for a long time have a greater long-term commitment, which is a predictor of partner satisfaction and, therefore, will lead to a greater probability of maintaining the relationship in the long term (Monteiro et al., 2015). (4) Length of the Relationship vs. the level of COVID-19 Affectation. There is a significant and negative correlation, which implies that the more years together, the less affectation of Covid-19. This fact suggests that the length of the relationship is a protective factor. Research has found a positive relationship among the number of years as a couple vs. communication. Therefore, the longer the relationship, the more assertive the communication (de Lourdes Eguiluz et al., 2012). (5) Length of the Relationship vs. Depression, Anxiety, and Stress. There is a significant negative correlation. The longer years of a relationship, the lower the degree of depression, anxiety, and stress. Married respondents are 1-2 percentage points less likely than their single counterparts to experience mental health problems (Jace & Makridis, 2020). Marriage offers couples more than social and emotional security. It is also a critical source of financial stability during good times and bad. Marriage puts families at a financial advantage by providing two potential sources of income. In addition, research shows that marriage reduces the likelihood that a household will go through costly family transitions, fosters greater support from family networks, and builds habits of financial prudence, bolsters additional security against hardship (Roth & Wilcox, 2020). (6) Number of Children vs. Mental Health Issues. The more children, the lower the depression, anxiety, and stress indicators. When parents have more



children, they are focused on responding to family and work demands, so their attention is not centered on their mental health (Aryee et al., 2005). (7) Level of Education vs. Fear of Covid-19. There is a significant and negative correlation. People with a higher socio-cultural level have more knowledge or are adequately informed, understand the virus better, and therefore take the corresponding measures to avoid being affected (Wolf et al., 2020). (8) Level of Education vs. depression, anxiety, and stress levels. There is a significant and negative correlation. Research indicates that people with higher levels of education or academic degrees have a greater sense of happiness and lower levels of depression (Kostiukow et al., 2021). This is complemented by other research, which indicates that low levels of education, even more so in women, present higher levels of unemployment, causing falling below the poverty line and thus experience poorer physical and mental conditions (Drydakis, 2021).

Two findings can be highlighted concerning the correlations made with respect to the gender variable. (1) Gender vs. Age vs. Partner Satisfaction. Regarding the relationship among age and gender. We can say that women have a higher significant and negative correlation among age and partner satisfaction, which is not observed in the male sample (i.e., the older the women are, the less satisfied they are with their partner) (Doulabi et al., 2019). Women generally have to assume the role of primary caregiver of the children, which generates deep wear and tear (Fitzpatrick & Vacha-Haase, 2010). Therefore, women report more occupational demands, more concrete stressful life events at work, greater interference of work with home and family life, more stressful life events at work, and more interference to home and family life (Burke & Weir, 1980). Besides, during the pandemic, overcrowding affected women more than men, probably because of the double task of being at home and taking care of chores and work (el Frenn et al., 2022). (2) Gender vs. Covid-19 Affectation. Men and women were equally affected by COVID-19 since this virus affected the entire population and drastically changed people's habits and lifestyles (Seufert et al., 2022).

From all the data analyses, we can say that being in a couple's relationship is a protective factor for confronting a pandemic such as COVID-19. According to a systematic review, protective factors in a couple's life can be divided into intrapersonal (or intradyadic) and interpersonal (extradyadic) factors. Prominent intrapersonal factors include religiosity and spirituality, commitment and loyalty, personality characteristics, ability to trust and empathize, patience, support, forgiveness, and acceptance of self and others. Prominent interpersonal factors consist of communication, sexual relationship, love and attachment, intimacy, religious agreement, mutual respect, role division, spending quality time, and approach to problem-solving and conflict resolution. In addition, some aspects, such as the role of children and the couple's financial issues, extend beyond the intrapersonal and interpersonal components (Karimi et al., 2019).

Conclusions

The general objective of this research was to determine the correlation among partner satisfaction, stress, anxiety, depression, and fear of COVID-19 in a Chilean sample of people in couple relationships during the COVID-19 pandemic. The following correlations were determined: (a) Couple satisfaction measured through the RAS and KMSS instruments correlated significantly and inversely with COVID-19 affectation (-.331*; -.336*), depression (-,286*; -,322*), anxiety (-,233*; -,210*), and stress (-,242*; -,250*). Thus, the higher the partner satisfaction, the lower the COVID-19 score, and the lower the depression, anxiety, and stress. From these results, we can conclude that being in a couple during the COVID-19 pandemic was a protective factor for mental health.



Limitations and future studies

A cross-sectional scope does not allow us to draw long-term conclusions; therefore, we must advance in longitudinal studies with the same couples and see how this COVID-19 pandemic has affected them in a cross-sectional manner. It is essential to continue growing with the understanding of relationships and couples living in rural areas, sexual minorities, and new forms of relationships and phenomena such as using social networks and emotional exhaustion, among others.

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