



**PREGNANCY AND SEXUALITY: IMPLICATIONS IN MARITAL RELATIONSHIP**  
**GESTAÇÃO E SEXUALIDADE: IMPLICAÇÕES NO RELACIONAMENTO CONJUGAL**  
**EMBARAZO Y SEXUALIDAD: IMPLICACIONES EN LA RELACIÓN CONYUGAL**

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**ABSTRACT**

**Objective:** understanding how sexual practice during pregnancy involves the marriage relationship. **Method:** a qualitative study with explanatory approach carried out with pregnant couples in a city of Bahia. Data collection was conducted through individual semi-structured interviews from December/2013 to January/2014. The data were subjected to critical analysis, understood, categorized and discussed through the literature. The research had the project approved by the Research Ethics Committee, CAAE: 21467513.4.0000.0055. Results: it was revealed by pregnant women the negative impact that sexual practice reflects in the marital relationship, especially in communication between the two, about behavior and treatment. In the male perspective, there were positive reports that pregnancy contributed to unity, the exercise of mutual respect and affection. **Conclusion:** it is clear that, despite some difficulties related to sexual activity during pregnancy, its need and importance are recognized for both participants. **Descriptors:** Nursing; Marital Relationship; Sexuality.

**RESUMO**

**Objetivo:** compreender de que forma a prática sexual no período gestacional implica no relacionamento conjugal. **Método:** estudo qualitativo com enfoque explicativo realizado com casais grávidos em um município da Bahia. A coleta foi realizada individualmente por meio de entrevista semiestruturada no período de dezembro/2013 a janeiro/2014. Os dados foram submetidos à análise crítica, compreendidos, categorizados e discutidos com a literatura. A pesquisa teve o projeto aprovado pelo Comitê de Ética em Pesquisa, CAAE: 21467513.4.0000.0055. **Resultados:** revelou-se pelas gestantes o impacto negativo que a prática sexual reflete no relacionamento conjugal, especialmente na comunicação entre ambos, no comportamento e tratamento. Na perspectiva masculina, houve relatos positivos que a gestação contribuiu para união, o exercício do respeito mútuo e do carinho. **Conclusão:** percebe-se que, apesar de algumas dificuldades relacionadas à prática sexual durante a gestação, sua necessidade e importância são reconhecidas para ambos os participantes. **Descritores:** Enfermagem; Relacionamento Conjugal; Sexualidade.

**RESUMEN**

**Objetivo:** comprender cómo la práctica sexual durante el embarazo implica en la relación matrimonial. **Método:** un estudio cualitativo con enfoque explicativo llevado a cabo con parejas embarazadas en una ciudad de Bahía. La recolección de datos se realizó a través de entrevistas semiestructuradas individuales de Diciembre/2013 a enero/2014. Los datos fueron sometidos al análisis crítico y entendidos, clasificados y discutidos en la literatura. La investigación tuvo el proyecto aprobado por el Comité de Ética en la Investigación, CAAE: 21467513.4.0000.0055. **Resultados:** demostrado por las mujeres embarazadas el impacto negativo que la práctica sexual se refleja en la relación conyugal, sobre todo en la comunicación entre los dos, el comportamiento y el tratamiento. En la perspectiva masculina, hubo informes positivos que el embarazo contribuye a la unidad, el ejercicio del respeto mutuo y el afecto. **Conclusión:** es claro que, a pesar de algunas dificultades relacionadas con la actividad sexual durante el embarazo, su necesidad e importancia son reconocidas por ambos participantes. **Descriptor:** Enfermería; Relación Conyugal; Sexualidad.

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## INTRODUCTION

The word Sexuality, most often, is used in the social environment to refer to sexual intercourse; however, the concept of sexuality is related also to the biopsychocultural, social, anthropological and behavioral aspect of an individual with himself and the world as well as emotional-sexual relations between a couple.<sup>1</sup>

Historically, pregnancy refers the woman to a different position in society, in which it turns to the family and motherhood, endowed with passivity and love. Therefore, many couples come to believe that the exercise of sexuality is not consistent with motherhood; there are also situations in which the partner becomes confused with maternity holiness, eliminating the sexuality of the couple's life. Both situations are considered generators conflict problems, since intercourse contributes to the woman's well-being since that time it becomes more and poor feelings to the surface, thus increasing the need for feel supported and loved.<sup>2</sup>

Pregnancy provides a series of physiological changes that interfere with the functioning of all organs of the body of the woman,<sup>3</sup> as the belly bulge, acnes appearance, hair loss, breast pain, nausea, vomiting, heartburn and swelling,<sup>4</sup> resulting in changes in sexual practice this with her partner. In this context, a study<sup>1</sup> enabled categorizing pregnant women in two different ways: those who felt sexual desire and reported that there was an increase of this desire, and that, despite the desire to be present, could not relate sexually with their spouses, due to several factors such as the physical changes coming discomforts of pregnancy. The pregnancy period is revealed through a process of adaptation to pregnant women, spouse and family as a whole, in several areas, causing some authors characterize pregnancy as a crisis phase.<sup>5</sup>

The sexual adaptation process experienced by couples during pregnancy can represent both an opportunity for new discoveries, as a stressful period of estrangement between the couple and wear relationship. Both aspects will depend on how the couple faces the pregnancy cycle, the way it was designed and the difficulties encountered during this period as well as the experience of the couple before pregnancy.

It is observed that the sexual practice during the pregnancy directly influences the marriage relationship, however, pregnancy being a period described by the frequent appearance of difficulties in sexual relations between the couple, in the literature, there is

still a shortage of studies showing as gestational sexual practice can interfere with the marriage relationship. From this perspective, interested in seeking to know more about these issues, the following question arose:

Giving the pregnancy characteristics changes, how does the sexual practice during pregnancy interfere in the marital relationship? Therefore, this study aims to:

- Understanding how sexual practice during pregnancy involves the marital relationship.

## METHOD

A qualitative study with explanatory approach, carried out with pregnant couples living in an inner city of Bahia/BA. The survey was conducted with four couples, whose wife was pregnant woman, who lived before and throughout pregnancy, registered in a Family Health Unit ascribed to his residence and who agreed to voluntarily participate.

For data collection, there was a survey of pregnant women enrolled in the prenatal program, and consultation plugs "A" of the information system of primary care (SIAB) in the family records, according to the inclusion criteria pre-established. Later, there was a visit on their homes for clarification and invitation to participate. Upon acceptance and signing the Informed Consent and Informed (IC), the collection was carried out from December/2013 to January/2014, these individually in order to achieve the more specific questions on the subject. It was used as a collection tool semi-structured interview, which is recorded, transcribed, read thoroughly and analyzed.

As methodological strategy, the subjects were asked to choose how they wanted to be identified in the study, upon presentation of a thematic list of code names containing virtues that a couple should grow to a healthy marital relationship.

The data were submitted to a critical examination in order to detect faults or errors and avoid confusing information, understood and categorized according to their interrelations. Their discussion was based on the literature, was maintained so that an interaction between them.

The survey was conducted according to ethical principles set out in Resolution n°. 466, of December 12<sup>nd</sup>, 2012, following a favorable opinion of the Ethics Committee of the State University of Southwest Bahia- UESB, issued on 12.02.2013, according to protocol Presentation of Certificate of Appreciation for

ethically CAAE - 21467513.4.0000.0055 and report n°. 456.970.

## RESULTS AND DISCUSSION

The results were presented in two stages, according to the semi-structured script: at first, the characterization of the subjects regarding the socio-cultural aspects, and in the second, the description and analysis of the reports individually in the perception of the pregnant woman and her partner. Thus, the following categories were emerged: a sexual practice during pregnancy in female and male vision; negative/positive change during sexual activity during pregnancy; difficulties in sexual relations during pregnancy; reaction to difficulties in sexual relations during pregnancy; interference of sexual practice in

the marital relationship and qualification of sexual satisfaction during pregnancy.

### • Sociocultural aspects of subjects

According to analysis of the following tables be noted that all subjects have older, an age group between 19 and 38. It was noted also that in both genders, the relationship between the precocity of the first sexual intercourse and more partners occurred in individuals with lower education level, beyond ourselves also present a greater number of children and share of common-law marriage.

It is worth mentioning the existence of conflicting information among couples in matters of family income and living time, raising inferences as failure in marital communication or inattention to these aspects.

Subjects	Age (years)	Color	Religion	Schooling	Family Income	Children	Start of sexual relationship (years)	Number of sexual partners	Marital Status	Living Time
Peace	23	Dark	Evangelic	Elementary Incomplete	1 Minimum wage	2	14	100	Stable Union	2 years
Wisdom	24	Dark	Catholic	High School Complete	2 Minimum wages	0	19	3	Married	4 years
Resilience	28	Black	Protestant	High School Complete	2 Minimum wages	0	23	1	Married	11 months
Patience	19	Dark	Evangelic	Elementary Incomplete	1 Minimum wage	0	13	10	Stable Union	3 months

Figure 1. Characterization of the female participants, according to sociocultural aspects. Bahia, Brazil. 2014.

Subjects	Age (years)	Color	Religion	Schooling	Family Income	Children	Start of sexual relationship (years)	Number of sexual partners	Marital Status	Living Time
Zeal	37	Dark	Evangelic	Elementary Incomplete	1 Minimum wage and a half	2	15	20	Stable Union	2 years
Respect	25	White	Catholic	High School Incomplete	2 Minimum wages	0	17	7	Married	3 years
Love	38	Dark	Protestant	High School Complete	2 Minimum wages	1	17	5	Married	2 years
Forgiveness	30	Dark	Evangelic	Elementary Incomplete	1 Minimum wage and a half	3	16	12	Stable Union	5 months

Figure 2. Characterization of the male participants, according to sociocultural aspects. Bahia, Brazil. 2014.

### Category 1. Having sex during pregnancy in female and male vision.

When questioned as to how they see sex during pregnancy and its importance in this period, it was observed that both pregnant women, as their spouses affirmed the importance of active sexual activity during pregnancy, however, differ in the way they express their vision.

Among pregnant women, 75% of them consider the important sex, whilst emphasizing the view of this practice as a nuisance, as well as pain, fear and hurt the "baby", as observed in their statements. *I think it's important, although in early pregnancy I felt very uncomfortable, but I think it's important for me and for my partner (Wisdom). I think it is that sometimes the man does not understand that sometimes it is not because the woman does not want to, but because it does not feel right, it hurts, bothers, and hurts (Peace). At first, until the first three months are afraid, you think it will hurt the baby [...] (Resilience).*

In contrast, only one of the interviewees associated these feelings the lack of importance and harmful view to cause discomfort, as testimony: *Ah, hard [...] no, nothing important [...] harms, harms very [...] How we feel bad when I think that's doing harm the child, there we feel bad (Patience).*

For partners, it became clear the great importance of this practice to maintain the relationship as well as normal vision they reported, in addition to establishing a relationship between lack of sex practice in the existence of the disease: *Normal, normal, for me changed little [...] important, very important! Always have to keep the sexual relationship, because otherwise gives problem (Zeal). Normal! [...] Very important, for sure! [...] There has to be, pregnancy is not a disease [...] is the union have to have that love (love).*

Therefore, there is that sexual activity is also considered an important source of satisfaction and marital well-being<sup>5</sup> and that, despite some difficulties described by the research subjects during pregnancy, your need is recognized for both sexes.

Also it can be seen that the lack of sex during pregnancy, it may provoke feelings of frustration on the part of the spouse who did not take this position and result in damage to the good affective relationship of the couple, before the problems arising in this period.<sup>2</sup> So, seek to adapt to the new reality, achieving diversity in the form of pleasure and achieving sexual satisfaction, through petting and foreplay are seen as very relevant alternatives to minimize such problems.<sup>1</sup>

Reflecting on sexual practice in our society, it is noticeable that the way sex is

seen is influenced by several factors such as cultural, personal, and religious, among others. Some believe that sex during pregnancy is a filthy practice, dangerous and capable of producing monsters, on the other hand, there are beliefs that the sexual act is favorable to the fetus and the labor.<sup>4</sup>

From this perspective; long sexual practices during pregnancy was discouraged. However, currently, we experience a wide spread about sexuality, in which the strong presence of this in our day to day increases the incentive of participation in sexual pleasure. So even before all the alterations of the pregnancy, a woman can and should feel sexually desired, developing his eroticism through sex and sexuality.<sup>1</sup>

### Category 2 - Prospect of negative/positive changes during the sexual practice in pregnancy.

When they are asked to compare their sexual life before and after the couple get pregnant, and identify the presence or absence of changes in this period, reports of changes were observed in the sexual practices caused by pregnancy, both positively as negatively, for pregnant women and no change accompanied by contradiction, revealed by the spouses.

#### Female perspective

Fifty percent of the women reported negative changes in sexual practice, linking these to loss of libido, and the presence of feeling uncomfortable during the act, which was considered as a negative change. *It had [...] will greatly diminished, enough! (Peace). Yes, yes, I am a little uncomfortable now what I'm pregnant by the time I have compared (Wisdom).* While only one of the women said that during pregnancy there was an increase in sexual activity, related to improvement in the way that her partner started to treat her, what influenced in improving libido and pleasure [...] *Today I Feel more pleasure, is much better! I was more comfortable due to be patient, be careful, more affection, I thought it was much better, became something more pleasurable (Resilience).* However, there was still a pregnant woman during the questioning denied the existence of changes, however, was notorious shyness, apprehension and insecurity about the questioning.

During pregnancy there are changes in the structure and function of the reproductive organs, because of glandular changes that regulate the production of hormones and the onset of characteristic signs and symptoms of that period.<sup>3</sup> Therefore, changes in sexual

desire, is more or less; it is a factor that can be found on variations.

Corroborating these findings, comparative study between pregnant and non-pregnant women identified the prevalence of sexual dysfunction significantly higher in the group of pregnant women, and sexual desire was presented as one of the hardest hit areas of female sexual function.<sup>6</sup> In this study, showed the presence of dyspareunia, uncomfortable and afraid of hurting the baby, which can justify the gestational negative impact on female sexual function.

In contrast, even with physical, psychological, emotional and hormonal, there are women that pregnancy positively influences on sexuality, such as increasing the desire.<sup>7</sup> This is due, because besides the intrinsic changes undergone by pregnant women, external factors can interfere in practice sex couples. There are reports of women who claim loss of the will to relate sexually with your spouse by aggressive or insensitive way it is addressed, accounting for them disrespectful to your pregnant body.<sup>1</sup> Contributing to the behavioral relationship between the partner and the couple's sexual relationship the importance of a flexible behavior, present in androgynous couples, that is, individuals with characteristics of both female and male, is highlighted for a process of adaptation and more satisfying sexual role.<sup>8</sup>

Therefore, at no time were cited bodily changes related to aesthetics or self-worth, as influential factor of changes in sexual practice, in contrast to several studies.<sup>5</sup>

### Male perspective

The speeches of clear spouses left the strong presence of changes of denial and at the same time, the contradiction and uncertainty of the information reported: *No, I do not think so, not (Zeal). No, I think not (Respect). No, had no change does not, became simpler sex, but did not change, that decreased some things, it is more difficult to relate after pregnant [...] in relation to the position [...] (Forgiveness).*

Only one respondent put the existence of change and the need for greater care: *Had some changes [...] It is more delicate [...] and so we have to be very careful (Love).*

Opposed to negation, to relate sexually changes were identified, such as simplicity in time to carry out the act related to the restriction of the use of different positions. This can be understood because of gestational changes as the belly bulge, the discomforts and pains reported by pregnant women, afraid of hurting the fetus and commit abortion. In

addition, male sexual performance may be influenced by factors such as the aesthetics of the woman. Thus, changes in body aesthetic woman that occurred during pregnancy can result in a loss of pre-established female sex attractive by society, becoming negative factor for male sexual performance, which can be discouraging, depending on the preference of the partner.<sup>2</sup>

### Category 3 - Difficulties to relate sexually in pregnancy.

#### Female difficulty

During the dialogue were highlighted some difficulties during sex during pregnancy, such as feeling uncomfortable, limiting positions and concern for the "baby": *It's a nuisance, it looks like it hurts [...] and I also am in fear. For me will hurt the baby if he on top of me, his weight, something will happen to the baby (Wisdom). Only at the beginning I was afraid, everything you think will hurt the baby [...] the issue of sexual positions [...] because you think more on baby, everything is the baby (Resilience).*

Corroborating these findings, commonly, pain during sex and the fear of hurting the baby are described by pregnant women, as contributing factors to hinder the practice of sex in that period;<sup>4</sup> however, the presence of amniotic fluid surrounding the fetus, protects against mechanical impacts, beyond the existence of a mucus in the cervix, making the mucus plug, which also provides protection to the fetus.<sup>9</sup> Consequently, it is suggested that in physiologically healthy pregnant women, the sexual practice is not harmful to the fetus and it should not be avoided, except in cases of medical guidelines in high-risk pregnancies, that it may have restrictions.

#### Male difficulty

Similarly to women, men reported fear of hurting the "child" and difficulties in relation to the limitation position: *Fear yes, hurt to the child, to children is harmful (Respect). Only a matter of position (Love).*

Interesting was also that for some men, the difficulties of relating sexually to women were blamed, causing sometimes accepting, sometimes dismay and dissatisfaction, as exemplified below: *The difficulty is more the woman, who feels pain at all, but quiet the man must accept these things (Zeal). Yes, because it's not every position that pregnant women can get [...] (Respect). Because with her pregnant is very difficult [...] I get worried, even discourages, because we ta a relationship is satisfying and the other ta feeling pain [...] then I get kind of discouraged and sometimes stop [...] (Forgiveness).*

It notes the persistence of harmful myths of sex to the fetus also among men and the

influence of this on the couple's sex life. Another factor to consider is that the difficulties in the pregnancy period were attributed only the physical changes caused by the same, forgetting the importance of the possible existence of psychological disorders such as sensitivity and insecurity, and behavior of partners such as affection and care, also influence sexual practice.

#### **Category 4 - Reaction in the face of difficulty relate sexually during pregnancy.**

##### **Female reaction**

For pregnant women, the reaction of fellow was described differently, and only 50% spoke about his own reaction. The main reactions were cited of understanding, misunderstanding, patience negligence on the part of companions and normal acceptance for themselves: *He even tries to understand that sometimes it is a little hard for him because he has no sense in the end we take all in play [...] (Peace). I try to take as well, for me is normal; for him not! He feels bad, you think it's my freshness, sometimes I think even doubt my word, that TA does not hurt [...] (Wisdom). Being first pregnancy, it was with great patience even! So if I talk like "ah, I sleep", ready, sleep and everything quiet [...] (Resilience). I just because we do not even comment on this, there is only between me only (Patience).*

In the speech can show an outburst of pregnant women to point out the reaction of colleagues, mostly unsatisfactorily and self-assertion of passivity reflected by acceptance. Notably, the lack of understanding and neglect from the partner will result in an offensive aggression to women, reflected by mistrust and lack of communication.

The sexual activity was cited as influential factor in the dialogue between the couple. Therefore, communication should be seen as essential for harmony between the couple, and their absence creates dissatisfaction in women, and the presence of sex without desire is the same, just to satisfy your partner.<sup>7</sup>

##### **Male reaction**

The statements of the companions expressed positive reactions to the difficulties, in some cases, did not agree with the statements of the women. They reported the importance of mutual respect, understanding and care, also revealing the simple acceptance: *[...] We have to react delicately, respecting fondly and survive the life that is the daily life of the people [...] we have to accept (Zeal). We try to make the easy way and that will not threaten her and that do*

*well for me and it [...] in a good way so as not to hurt [...] (Forgiveness).*

Sexual difficulties are among the main reported by men during pregnancy, and their confrontations have been demonstrated by the presence of tolerance with respect to pregnancy period, peace and understanding, and such attitudes perceived as favorable to the harmonious coping and family welfare.<sup>10</sup> Corroborating with this study, male reports demonstrate a satisfactory attitude toward sexual confrontations of the couple, acting facilitator and peaceful manner, to maintain the balance of the relationship.

Thus, it appears that for a marital relationship based on stability, sexual pleasure should be balanced with other needs and responsibilities. Thus, the marriages that do not achieve that integration have a greater tendency to sexual dissatisfaction. However, in the literature, were scarce findings on male sexual confrontations during pregnancy.

#### **Category 5 - Interference of sexual practice in the marital relationship.**

##### **Female interference**

All pregnant women say how the couple relates daily interfered with the sexual practice between spouses, is that positive or negative interference. Complaints were pointed companions such as lack of attention, the nuisance by the same, reflecting up in the dialog omission: *Interfere because sometimes when he comes near me, bother, because I motion sickness and sometimes he thinks he is because I do not paying attention to [...] and in the end he just trying to understand, if he does not understand he knows disguise [...] (Peace). [...] He was upset with me; He was not talking to me, and then forgetting [...] (Wisdom). However, it can be noted that increased care and companionship is touched as the positive interference of sexual practice in the marital relationship, described as follows: [...] It's a whole actually is careful, becomes very careful [...] becomes even more present (the spouse), emerges even more the hand of fellowship [...] (Resilience).*

The changes occurring during pregnancy affect not only the mother, but to her companion and how they relate.<sup>11</sup> During pregnancy, the spouse acquires feelings of exclusion and envy. The first occurs when there are the physical changes and the woman turns to you and the fetus carries in her womb, causing the emergence of a feeling of usurpation, in which the attention of his wife is completely focused on her and the his son, behaving as if it belonged only to her, exempting it from certain form of his fatherhood.<sup>12</sup>

As every woman's actions are directed to pregnancy shows up a gap in this relationship with your spouse, creating a situation of conflict and disruption in marital structure, be it sexual, emotional or behavioral .<sup>12</sup>In addition to the psychological aspects, the physiological changes such as nausea, vomiting, sleepiness, belly bulge, dizziness, among others, may interfere with the disposition and sexual desire, and therefore in the marital relationship.

It is noteworthy that in the same way that dialogue interferes with the couple's sex life,<sup>7</sup> negative coming changes in sexual practice interfere with communication between the couple and hence undermine the relationship between spouses. As well as feelings of sensitivity, understanding between the couple and flexibility contribute to improvement in the marital relationship during this period.<sup>8</sup>

● **Male interference**

Half the men deny the fact of sexual practice interfere in the relationship with his partner. And likewise women, there were positive reports that it contributed to unity, the exercise of mutual respect and affection [...] *Do not interfere with anything not! One is the same thing during the day, the street is the same. Not because she is pregnant, it has some difficulty we changed [...] (Forgiveness). I think it interferes*

*thus to better not worse. This child came even served to unite, hold onto even the issue of respect (Respect). Remains the same treatment [...] with more affection (Love).*

In contrast, studies show negative implications in married life reported by men, such as decreased tolerance and separation between the couple as a result of decreased sexual activity, the fatigue resulting from the presence of anxiety and fear. However, there were reports that pregnancy contributed to strengthen, consolidate and stabilize the wedding and married life,<sup>13</sup> highlighting subsequent rapprochement between the couple and a greater supply of affection and love to his wife.<sup>14</sup>

In this study, the denial of interference of sexual practice in the marital relationship was present in half of the cases. However, it was noted during interviews that the word interference was understood and interpreted only in its negative context, leading to conviction denial of bad impact of changes in sexual practice, behavior between spouses.

**Category 6 - Qualification of sexual satisfaction during pregnancy in female and male perspective.**

To demonstrate the latter category of this study we used a framework for better visualization and understanding of the reader.

Qualification of sexual satisfaction	Female perspective		Male perspective	
	Nº	%	Nº	%
Bad	0	0%	0	0%
Regular	2	50%	3	75%
Good	0	0%	0	0%
Very good	1	25%	1	25%
Excellent	1	25%	0	0%

Figure 3. Qualification of sexual satisfaction during pregnancy in female and male perspective. Bahia. Brazil. 2014.

After the framework of the above analysis, 50% of pregnant women qualify their sexual satisfaction during pregnancy as regular 25% as good and 25% as excellent.

Similarly, a comparison between the sexual satisfaction of the couple before and after pregnancy, and observed a decrease in the percentage of this satisfaction during pregnancy, in which 87,1% of the women studied showed satisfactory sex life in the pre-pregnancy period, however , it was noted that this percentage decreased to 39,8% during pregnancy. Therefore, it was inferred that the quality of sexual satisfaction of pregnant women is considerably worse

compared to when these women were not pregnant.<sup>11</sup>

The decrease in sexual satisfaction in most pregnant women, is often linked to decreased sexual desire.<sup>11</sup> The level of satisfaction in the marital relationship implies the attention given to her companion, while the marital quality of life linked to the sexual satisfaction of the couple.<sup>5</sup>

Therefore, the sexual activity also considered to be an important source of satisfaction and marital well-being, several studies have demonstrated that performance with the marital relationship markedly decreases during pregnancy.<sup>5</sup> This fact can be

elucidated because of a gap that occurs in the relationship pregnant with your spouse as during pregnancy the woman turns to you and your child, creating a feeling of exclusion in companion, interfering with the way they live their sexuality and consequently the realization of the couple.<sup>12</sup>

Just as women, most men (75%) qualify their sexual satisfaction during pregnancy as regular, and only 25% as good. This statement can be understood by changes to relate sexually arising during pregnancy, evidenced in reports thereof, as the simplicity in time to carry out the act related to the restriction of the use of different positions as well as the difficulties encountered during this period, as afraid of hurting the "baby" and the difficulties presented by women.

In this perspective, studies of prospective parents show a decrease in sexual satisfaction, characterized by decreasing the frequency of sexual activity and increased anxiety,<sup>15</sup> and also characterized by the presence of fear about the fetus.<sup>16</sup>

As evidenced, changes in sexual practice can interfere in the marital relationship, just as the unsatisfactory sexual satisfaction may reflect negative repercussions for the couple. However, in the literature, they found few studies that substantiate the sexual satisfaction in male perspective on pregnancy.

## CONCLUSION

This study reached its objectives, from the moment that it was revealed by pregnant women the negative impact that the sexual practice reflects on marital relationship, especially in communication between the two, behavior and partner treatment. In contrast, through the male perspective, there were positive reports that it contributed to unity, the exercise of mutual respect and affection.

Even in the face of today's society, with changes in the socio-cultural pattern, the wide range of information and openness that the media offers, it was clear that the social myths are still present and influential in people's lives. It is valid highlight the difficulty in talking about sex and the macho man behavior that still prevails in our society.

Given the profile of the respondents, one can also establish a relationship between low educational level and the lack of knowledge about sexual and reproductive education, evidenced by the existence of behaviors considered risky, and ratified the need for greater investment in sex education in primary and secondary schools as well as in primary care and preventive actions.

Reported sexual difficulties are related to the physical changes brought about by pregnancy, marginalizing the psychological implications and their positive or negative impact on sex practice, emerging, and then the need for actions directed to the mental and psychological health of pregnant women. However, despite some difficulties related to sexual practice described during pregnancy, the need and importance are recognized for both sexes.

Thus, although it is realized the need of couples seeking experience a positive adaptation process, building innovations in getting the pleasure and with mutual respect, and the importance of the inclusion of man in prenatal consultations; however, become necessary further studies in this line of thought, especially in the male perspective, which there are few reports in Brazilian literature.

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