

NON-MARITAL RELATIONSHIP STATUS, RELATIONSHIP STRAIN AND WELL-  
BEING: DOES RELATIONSHIP STATUS INFLUENCE WELL-BEING?

by

JESSICA ANN SEBERGER

(Under the Direction of Ronald L. Simons)

ABSTRACT

Past research has consistently reported a positive association between marriage and psychological well-being while also stressing the importance of including relationship quality in this analysis. Using a sample of African American young adults, my analysis examines the association between non-marital relationship status and psychological well-being and how relationship quality conditions the effect of relationship status on psychological well-being using an internal moderator approach. In my analysis, I examine relationship status as a dummy variable as well as a set of dummy variables (single, dating, and cohabiting). Results suggest that while being in a relationship itself is not associated with psychological well-being, individuals in strained relationships have significantly poorer well-being than individuals in less strained relationships. Further, examining relationship status using dummy variables, cohabiting women in strained relationships have significantly poorer well-being. These findings suggest that relationship quality conditions the effect of relationship status on psychological well-being.

INDEX WORDS: young adult, psychological well-being, relationship status, cohabiting, relationship strain, dating, single

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## I. INTRODUCTION

Arnett's (2000) theory of development focused on individuals ages 18-25 in industrialized countries and identified this age period as emerging adulthood. Arnett's theory attempted to examine the volatile years of life for young people. By focusing on the tumultuousness of this age group, Arnett outlined factors that make these individuals different from adolescents, young adults, and adults. Characterized by large demographic variability, this age group is highly experimental and exploratory (Arnett 2000). Demographic transitions such as finishing education, settling into a career, marriage, and parenthood are enacted during this period and in preparation for these changes, emerging adults explore the roles available in their social world. One of the main focuses within the theory is on role and identity change within the realm of love (Arnett 2000; Demir 2008).

Throughout the early adulthood years, young men and women explore different types of relationships and many make the transition into marriage or marriage like relationships. These relationships can be influential in an individual's life in a multitude of ways. Past research has shown that relationship status can impact health markers such as intergenerational health (Bennett 1992), subjective well-being (Dush and Amato 2005; Simon and Barrett 2010), physical health (Holt-Lunstad, Birmingham, and Jones 2008; Wickrama, Surjadi, and Bryant 2010), and sexuality (Yucel and Gassanov 2010). The majority of this research has examined the greater health of married individuals as compared to never married, separated, divorced, or widowed individuals (Ross, Mirowsky, and Goldstein 1990; Waite 1995). This has created an abundance of research contrasting married to non-married individuals, but there has been much less research

on individuals in non-marital romantic relationships, though there have been some exceptions to this (Demir 2008; Ross 1995; Simon and Barrett 2010). Given the current trend for young couples to delay marriage and form cohabiting relationships or remain single instead of marrying, research on non-marital relationships may be increasingly important. Given the variety of relationships that individuals participate in as they age, and especially within the period of emerging adulthood, examining non-marital romantic relationships can provide researchers with important information about the processes that may lead to marriage and the effects of these non-marital romantic relationships on health.

The analysis presented here will examine how being in a relationship influences psychological well-being for African Americans in early adulthood. In addition to examining the contrast between being in a non-marital romantic relationship or being single, further analysis will examine how psychological well-being varies for cohabiting, dating, and single individuals. In addition to evaluating the differences in psychological well-being for individuals in a variety of relationships, the analysis will also examine the extent to which the effect of relationship status on psychological well-being is dependent on the quality of the relationship.

## II. LITERATURE REVIEW

### *Marriage and Psychological Well-Being*

A large body of evidence suggests that marriage is associated with lower levels of depression as compared to levels for single, never married, divorced, or widowed individuals (Dush and Amato 2005; Koball, Moiduddin, Henderson, Goesling, and Besculides 2010; Simon and Barrett 2010). Individuals who get married and stay married are less depressed than those who remain single and those who divorce (Horwitz, White, and Howell-White 1996; Simon 2002). Researchers have proposed a few different perspectives to explain the association between relationship status and well-being.

The first perspective maintains that the association between relationship status and well-being is due to selection factors. From this perspective, well-adjusted individuals are more likely than poorly-adjusted individuals to get married and stay married (Horwitz and White 1998; Rhoades, Stanley, and Markman 2009). Research has shown, however, that relationship status has an effect on well-being even when controlling for selection factors (Gove, Hughes, and Style 1983; Williams 2003).

The second perspective focuses on social support and social integration. Emotional support provided by social ties enhances psychological well-being (House, Landis, and Umberson 1988). Research by Walen & Lachman (2000) supports this idea and stresses that emotional support provided by one's partner significantly predicts psychological well-being and is a better predictor of well-being and health than support from family and friends. In addition to

better psychological well-being, married individuals benefit from increased emotional well-being, greater happiness, and life satisfaction than non-married individuals (Robles and Kiecolt-Glaser 2003). Marriage influences these outcomes through a number of pathways, including influences on the marital relationship itself, individual's cognitions, emotions, health-related behaviors, coping behaviors, and physiology (Robles and Kiecolt-Glaser 2003).

The final perspective is centered on views of the self (Dush and Amato 2005). The structural symbolic interactionism perspective views the self as comprised of various roles that people play: organized by salience, with more salient roles contributing more to a person's identity in part because these roles are enacted more than non-salient roles (Stryker and Burke 2002). According to Stryker's identity salience hierarchy (1980), as individuals participate in a certain role and spend time enacting that role, they are said to become more committed to the role and as they commit to the role, it becomes more important and influential (Stryker 1980). This perspective assumes that married individuals benefit from a stronger sense of identity, self-worth, and self-esteem than individuals in non-marital romantic relationships. Married individuals benefit from this identity due to their increased connection to their relationship and the feedback from that relationship. In support of this perspective, Cast and Burke (2002) have shown that self-esteem is a central component of the basic identity process. Individuals who have verified identities see themselves as effective and competent when their role is confirmed through their action and jointly with others in a relationship. For individuals that identify with the spousal identity, divorce is more likely when the husbands' and wives' spousal identities are not verified (Cast and Burke 2002).

Most studies have examined the marriage-health link for the general population and have combined data together across racial groups. In doing so, White experiences, the largest racial group, tend to dominate the results (Koball et al. 2010). Race may be controlled in these analyses, but some of the potential unique associations between relationship status and health among African Americans may be left undetected. It is important to examine this link specifically for the variety of racial groups present in our society. African Americans in particular tend to experience poorer health outcomes and spend a smaller proportion of their lives married than other racial groups (Koball et al. 2010). Marriage has become much less prevalent in the past few decades as increasingly individuals delay marriage or choose not to marry at all (Booth, Crouter, and Shanahan 1999). For many, cohabitation has become an alternative or extended prelude to marriage. These trends are especially evident in economically distressed African American communities (Clayton, Mincy, and Blankenhorn 2003; Goldstein and Kenney 2001) where high levels of unemployment and incarceration discourage marriage (Pettit and Western 2004; Western 2006).

While the majority of the research has examined relationships that are longer lasting and more stable, relationships that form and develop during the years of early adulthood have also been shown to influence health outcomes. A recent study by Simon & Barrett (2010) examined the effect of being in a non-marital relationship and experiencing a recent breakup on depressive symptoms and substance abuse as well as the effect of the quality of the relationship on depressive symptoms and substance abuse. Their results showed that nonmarital romantic relationships are important for mental health during the transition to adulthood. They found that

young women were more reactive to relationship status than young men, while young men were more reactive to the quality of ongoing relationships than young women. Research like this can shed light on the processes at work within this cohort, on the cusp of adulthood. This research also highlights the utility of examining how non-marital romantic relationships influence health.

### *Relationship Quality*

In addition to examining the effect of marital status on well-being, researchers have examined the effect of the quality of the relationship on well-being. Marriages that involve partner support are associated with higher levels of well-being while strained relationships are related to a decrease in well-being (Umberson, Chen, House, Hopkins, and Slaten 1996; Williams 2003). Strengthening the case that relationship quality significantly impacts well-being even when accounting for relationship status, Gove, Hughes, & Style (1983) found that it is better to live alone than to be in an uncaring marriage. While individuals that reported their marriages as “very happy” had better mental health than the respondents in any of the unmarried categories, individuals who were “not too happy” or “not at all happy” with their marriages had poorer mental health than the respondents in any of the unmarried categories. These findings suggest that romantic relationships enhance well-being, but only to the extent that they are characterized by support. While married individuals have better mental health than the unmarried individuals on average, unhappily married persons have poorer mental health than the unmarried (Gove, Hughes, and Style 1983; Williams 2003).

Examining how relationship quality moderates the way that the benefits of marriage are conferred on individuals is necessary. If status effects are fully dependent on the characteristics

of the relationships, research that fails to control for relationship quality will be mis-specified. The examination of relationship quality allows us to examine when and how marriage is beneficial. Extrapolating this to other non-marital romantic relationships could help shed light on the processes at work within marital relationships and non-marital relationships. This would make possible the exploration of between group differences with regards to health and, more specifically, psychological well-being.

### *Relationship Status*

While there is a preponderance of research examining the association between marriage and well-being, there have been far fewer studies looking at non-marital relationships and their association with well-being. Most studies that do examine non-marital relationships examine the association between marriage and well-being by comparing married to cohabiting couples (Brown 2000; Rhoades, Stanley, and Markman 2009; Tach and Halpern-Meekin 2009). An exception can be found in Ross' (1995) study examining the effect of social attachments on well-being. Ross identified a variety of relationship statuses as alternatives to traditional marital statuses and found that romantically involved adults were less depressed than their uninvolved peers. Furthermore, Ross ordered her groups by social attachments, defined as a sequence of increasing commitments in adult relationships, and found that increased attachment was associated with a decrease in psychological distress.

Building on Ross' work, Dush & Amato (2005) proposed that romantic relationships formed a continuum of commitment, with married individuals having stronger commitments than

cohabiting individuals, and cohabiting individuals having stronger commitments than dating individuals. Commitment as it is used by Dush & Amato implies a long-term horizon and is relevant to the structural symbolic interactionist perspective. Drawing on Stryker & Burke's (2002) work, they argued that commitment to a role (or relationship) reflects the extent to which the role (or relationship) is a fundamental component of a person's identity. The results of their analysis support their continuum of commitment. They found that married individuals reported the highest subjective well-being, followed by cohabiting individuals, individuals dating one person steadily, individuals dating multiple people, and individuals not dating. Instead of looking at the relationship between marriage and other relationship statuses, Ross (1995) and Dush & Amato's (2005) work suggests that it is important to look at a range of relationships outside of marriage and their relationship to psychological well-being. That is, non-marital relationships also appear to be important for mental health.

While Ross (1995) and Dush & Amato (2005) found that relationship status was a significant predictor of psychological well-being in their populations, both studies examined different populations than the present study. Ross's sample ranged in age from 18 to 90 with a mean age of 43.5 while Dush & Amato's sample had a mean age of 24.5 with a median age of 23. The present study examines a somewhat younger sample, ranging from 19-25 with a mean of 21.5 and is comprised of a sample of African Americans. Due to differences in commitment and relationship progression for African Americans (Kiecolt, Hughes, and Keith 2008; Kurdek 2008), my results might differ substantially from Ross' and Dush & Amato's. It is also worth noting that both samples included married individuals, while the present study does not. The



current analysis will allow me to compare non-marital romantic relationships while examining if trends supporting a continuum of commitment exist within the data.

Ross (1995) and Dush & Amato (2005) stress the importance of connections between partners. Talking about commitment more broadly than Dush & Amato (2005), Johnson et al. (1999) argue that there are three major types of relationship commitment: personal, moral, and structural. Personal and moral commitment are experienced as internal to the individual and are a function of the person's own attitudes and values. Structural commitment is experienced as external to the individual and its impact may not be felt while personal and moral commitment are high. Components of structural commitments include the availability of comparable alternatives (such as housing, contact with children, romantic partners, employment), social pressure, termination procedures (the ease or difficulty associated with ending the relationship), and irretrievable investments (Johnson, Caughlin, and Huston 1999). As non-marital relationships are likely to have fewer structurally constraining mechanisms as married relationships, there is likely to be more fluidity within non-marital relationships. Instead of breaking up assets and selling a house, these individuals may be able to simply end the relationship. In this analysis I attempt to capture personal and moral commitment through relationship quality but am unable to capture structural commitments with the measures used. If, in this analysis, some individuals with high relationship strain are in a relationship, it is likely structural commitments influence their persistence in a strained relationship (Johnson, Caughlin, and Huston 1999; Stanley, Rhoades, and Whitton 2010). These structural commitments could be represented by children of the couple, a shared lease, or simply a shared social circle. So while

the three types of commitment proposed by Johnson et al. (1999) might not be easily seen in my analysis, I propose that relationship quality conditions the impact of non-marital relationships on psychological well-being, with low quality non-marital relationships existing due to personal, moral, and structural commitments. While I am not able to compare marital and non-marital relationships, it is likely that individuals in non-marital relationships are less constrained than individuals in marital relationships (Stanley, Rhoades, and Whitton 2010).

### *The Impact of Relationship Status on Psychological Well-Being*

Although past research has shown that marriage has an effect on psychological well-being that is independent of marital quality, I expect that relationship quality is an essential consideration when the focus shifts to non-marital romantic relationships. There are two reasons for believing that this is the case. First, marriage entails a ceremonial, formal status transition that is expected to impact a person's identity, and this process does not happen for other relationship transitions. Marriage entails taking on the socially recognized role of either husband or wife whereas non-marital romantic relationships involve more ambiguous status changes such as partner, roommate, or boyfriend/girlfriend. Identity theory posits that a relationship becomes central to a person's identity to the extent that that it involves strong emotional attachment and a high level of reward (McCall and Simmons 1966; Owens 2006; Stryker 1980). This suggests that relationships that entail a high degree of support and low degree of relationship hostility may boost psychological well-being. Thus, while the institution of marriage may boost psychological well-being independently of relationship quality, only highly gratifying non-marital romantic relationships would be expected to produce this effect. As only a portion of non-marital romantic

relationships would boost psychological well-being, overall, non-marital relationship status would not be predicted to have a direct effect on psychological well-being.

The second reason for stressing the importance of relationship quality in non-marital romantic relationships relates to the issue of influence. In part, marital relationships are thought to promote psychological well-being because spouses monitor and exercise influence over their partners (Wickrama, Surjadi, and Bryant 2010). Personal experience suggests that some even consider a spouse's right to exercise some degree of influence over their partner a component of the institution of marriage. This is not the case for non-marital romantic relationships. In the latter, a person's ability to exercise influence is strictly a function of the degree to which their partner values or is dependent on the relationship (Schafer, Schafer, Dunbar, and M. 1999). Individuals concede to the wishes of their romantic partner to the extent that they possess an emotional attachment to the person and therefore strive to avoid actions that would jeopardize the relationship.

Based upon these considerations, I expect that the simple fact of being in a romantic relationship has no impact upon psychological well-being. There is great variability in the quality of romantic relationships. Some are characterized by high levels of warmth and support whereas others are filled with hostility and strife. Research on African American teens and young adults, for example, indicates that their romantic relationships are often fractious, antagonistic, and unstable (Joyner and Udry 2000; Wilson 2003). I can think of no mechanisms whereby such relationships would foster a boost in psychological well-being. Romantic

relationships that are largely warm and supportive, on the other hand, have the ingredients necessary to promote psychological well-being.

### *Hypotheses*

I develop a set of hypotheses that directly examine the proposed relationships. While it has been consistently demonstrated that married individuals have better psychological well-being than never married, widowed, divorced, or separated individuals (Ross 1995), the relationship between non-marital romantic relationships and psychological well-being is not clear. I expect that the lack of status transition and the ambiguity present in non-marital romantic relationships will lead to no significant change in psychological well-being as compared to single individuals (hypothesis 1).

Assuming the same processes are at work for cohabiting and dating individuals, I also expect that differentiating between types of non-marital romantic relationships will not have a significant influence on psychological well-being (hypothesis 2a). Conversely, Ross (1995) and Dush & Amato's (2005) work on romantic relationships as continuums of attachment or commitment would lead me to believe that there will be significant difference in the psychological well-being of each group. Their research has provided examples of populations where relationship status significantly influenced psychological well-being. Drawing from this work I propose a contrasting hypothesis, specifically that relationship status will be ordered, with cohabiting individuals having significantly higher psychological well-being than dating

individuals and single individuals, and dating individuals having significantly higher psychological well-being than single individuals (hypothesis 2b).

As relationship quality has been shown to be an important moderator of relationship status and psychological well-being (Gove, Hughes, and Style 1983; Simon and Barrett 2010) I expect this relationship to hold even for individuals in non-marital romantic relationships. I propose that supportive romantic relationships have the ingredients necessary to promote psychological well-being. Thus, I expect that individuals with higher levels of relationship strain will have poorer psychological well-being than individuals with lower levels of relationship strain (hypothesis 3).

Though females historically report higher levels of psychological distress, an accumulating body of research reveals no gender difference in the association between marital status and mental health when males' and females' distinct expressions of distress are considered (Simon and Barrett 2010). The advantages of becoming married and the disadvantages of being or becoming single are evident for symptoms of depression among women and substance abuse among men (Barrett 2000; Simon 2002). Because the present analysis focuses solely on depression, I propose that there will be gender differences in psychological distress. Specifically I propose that females will have significantly more psychological distress than males and that the interaction between gender and relationship strain will be significant (hypothesis 4). This interaction would signify that relationship strain influences psychological well-being for men and women in significantly different ways.

### III. METHODS

#### *Data*

In my analysis, I explore the aforementioned issues using a sample of African American young adults, specifically using the Family and Community Health Study (FACHS) data set. I plan to test these hypotheses using data from waves 1, 4, and 5 of the FACHS data, an ongoing multi-site investigation of the social, psychological, and contextual risk and protective factors associated with African American families' health and wellbeing (Gibbons, Gerrard, Cleveland, Wills, and Brody 2004; Simons, Lin, Gordon, Brody, Murry, and Conger 2002). The FACHS sample consists of 867 African American families, all of whom were living in Iowa or Georgia at the initiation of the study.

Using 1990 census data, block groups (BGs) were used to identify neighborhoods in Iowa and Georgia that varied on demographic characteristics, particularly racial composition (percent African American) and economic level (percent of families living below the poverty line). In total, 259 BGs were identified. Within the BGs families were randomly selected and recruited by telephone from rosters of all African-American families who had a fifth grader (the target child) in the public school system.

Data collection began in 1997-1998 and follow-up interviews with the target children and their family members were conducted every 2-3 years thereafter. Data from the first, fourth, and fifth waves of data are utilized in the current analysis. This data was collected in 1997-1998, 2004-2005, and 2007-2008, respectively. These latter waves of data capture information from adolescence (age 17-18 at wave 4) through early adulthood (age 20-22 at wave 5). Of the 867

targets interviewed at wave 1, 689 (79.5% of the original sample) participated nearly a decade later at wave 5. By wave 5 of the study, the participants no longer resided in only Georgia or Iowa but were dispersed across 23 states.

Respondents are included in the data even if there is missing data for one or some of the waves of collection. If respondents were unwilling or unable to be interviewed at any given wave, they were retained in the sample and contacted for participation at the following wave. The current sample is comprised of those respondents who participated in waves 1, 4 and 5. The final sample, after removing participants with missing data, consists of 578 individuals (334 women and 244 men). As discussed elsewhere (Simons, Simons, Lei, and Landor 2011), there has been little evidence of selective attrition over the course of the study.

### *Procedures*

Before data collection began, focus groups (4 in Georgia and 4 in Iowa), each comprised of 10 African American women living in neighborhoods similar to those of study participants, examined and critiqued the self-report instruments. Pilot tests were then conducted on 16 families, 8 from each site. Of particular interest were any instruments that were perceived to be culturally insensitive, intrusive, or unclear. Neither the focus groups nor the pilot tests indicated a need for changes in the instruments used here.

To enhance rapport and cultural understanding, African American university students and community members, all of whom received training in the administration of the self-report instruments, served as field researchers to collect data from the families. The surveys were administered in the respondent's home and took an average of 2 hours to complete. In both waves 4 and 5, the instruments were presented on laptop computers. Questions appeared in

sequence on the screen, which both the researcher and participant could see. The researcher read each question aloud and the participant entered an anonymous response using a separate keypad. Because many of the instruments administered at wave 5 included questions regarding illegal or potentially embarrassing sexual activities, audio-enhanced, computer-assisted, self-administered interviews (ACASI) were used to ensure further anonymity. Using this procedure, the respondent sat in front of a computer and responded to questions as they were presented both on the screen and via earphones.

### *Measures*

As mentioned earlier, I utilized measures from the first, fourth and fifth waves of the FACHS data. Whether a respondent lived in a single parent family was the only variable utilized from wave 1. Using wave 4 I assessed previous psychological distress while all other variables were measured at wave 5. The specific measures are reported below.

#### *Dependent Variable: Psychological distress*

Psychological distress was assessed at wave 5 using respondents self-reports on a series of questions asking about bouts of depression or sadness. Questions used to assess psychological distress were derived from the Diagnostic and Statistical Manual of Mental Disorders 4<sup>th</sup> Edition (DSM-IV) (Huprich, Porcerelli, Binienda, and Karana 2005). This measure of psychological distress varied from past waves. Across waves, the measure for psychological distress was changed. Waves 1-4 use a scale designed for adolescent populations while the measure at wave 5 is used for adult populations. Participants responded yes or no to questions such as “In the past



year, was there ever a two week period when you felt sad, empty, or depressed most of the day?”, “In the past year, was there ever a two week period when you couldn't sit still and paced up and down or couldn't keep your hands still when sitting?”, “In the past year, was there ever a two week period when you felt worthless nearly every day?”, and “In the past year, was there ever a two week period when you felt so low that you thought about committing suicide?” Ten questions were used to construct the dependent variable, a symptom count of psychological distress (Cronbach's alpha = .78).

#### *Independent Variables*

Previous psychological distress was controlled for using variables from wave 4. Psychological distress was assessed at wave 4 using respondents self-reports on questions from the DISC-4. Participants responded yes or no to questions such as “In the last year, was there a time when you often felt grouchy or irritable and often in a bad mood, when even little things would make you mad?” “In the last year, was there a time when you often felt restless... like you just had to keep walking around?” “In the last year, was there a time when you often thought about death or about people who had died or about being dead yourself?” 23 questions were used to construct a symptom count of psychological distress (Cronbach's alpha = .89).

*Relationship Status:* To establish relationship status I created three dummy variables. The first group, no romantic relationship was comprised of individuals who reported “I am not dating or seeing anyone right now” or “I date, but do not have a steady, romantic relationship with one person.” The second group, dating relationship, was comprised of individuals who reported “I

date one person on a regular basis but can still see other people” or “I am in a steady, committed relationship but not engaged.” The third and final group reported “I live with my romantic partner but we do not currently have plans to marry” or “I live with my romantic partner and we are engaged to marry.” Engaged individuals that were not cohabiting were removed from the analysis due to the small number of engaged but not cohabiting individuals in the sample. I also worked under the assumption that the mechanisms that lead individuals to become engaged but refrain from cohabiting were substantially different from the mechanisms that lead individuals to become engaged individuals and cohabit. Married individuals were also removed from the analysis due to the intended focus on non-marital romantic relationships and a small number of married participants in the sample. This resulted in removing 44 individuals from the analysis, 29 married and 15 engaged individuals. I also created a dummy variable for whether or not individuals were in any kind of romantic relationship (dating or cohabiting versus no romantic relationship).

*Relationship Strain:* This construct was assessed at wave 5 for individuals that reported that they were in a romantic relationship at the time of assessment. Included within relationship strain are measures of relationship warmth, relationship hostility, and relationship satisfaction. Individuals answered 11 questions about these items. Questions about relationship warmth tapped into how often their romantic partner acted loving and affectionate toward them and how often their romantic partner let them know that he/she appreciates them, their ideas or the things they do. Questions about relationship hostility assessed how often during the past month their romantic partner shouted or yelled at them because their partner was mad at them, how often

their romantic partner threw things at them, and how often their Romantic Partner insulted or swore at them. Questions about relationship satisfaction tapped into how satisfied respondents were with their relationship, how happy they were, all things considered, with their relationship and how well they and their romantic partner got along compared to most couples. Items were coded such that higher scores indicated less warmth, more hostility, and lower satisfaction. That is, higher scores indicate more strain.

The items were standardized before combining them into a scale. The Cronbach's alpha for the scale was .81. Using the internal moderator approach (Frech and Williams 2007; Mirowsky 1999) relationship strain was standardized, with all average scores and single respondents coded as zero. This allowed me to include individuals who reported no romantic relationship in the analysis, maintaining a full sample even though all respondents did not report information on relationship strain. Setting up relationship strain in this manner allows me to determine whether differences in distress symptoms between respondents in a relationship and single respondents depends on the relationship strain of those partnered respondents. As "internal moderators represent differences applicable only to the individuals in a particular situation that affects outcomes" (Mirowsky 1999:117) utilizing the internal moderator model allows me to determine if "the qualities of a situation determine the effect of being in it" (117).

*Control Variables:* I controlled for a number of socio-demographic variables associated with changes in depression and/or relationship status. These included three variables assessed at wave 5: age (in years), number of children (Horwitz, McLaughlin, and White 1997) and gender, as well as family structure and geographic region which were assessed at wave 1 (Amato 2000;

Horwitz, McLaughlin, and White 1997; Mirowsky 1999). Age was included as a continuous variable. Because not all respondents were asked if they had any biological children the number of children was created from three variables. These variables assessed if the respondent had ever had sex with someone of the opposite sex, if the respondent had ever been or had ever gotten a girl pregnant, and if respondents currently had any biological children. A dummy variable was created using these questions, coding individuals as 0 if they had never had sex with someone of the opposite sex, or if they answered no to the question that asked if they had ever been or had ever gotten a girl pregnant. Gender was coded 1 for females and 0 for males. Family structure was originally a 3 category variable that distinguished between respondents coming from a 1) two biological parent family 2) married-stepparent family and cohabiting-stepparent family and 3) single parent family and others. For this analysis family structure was recoded as a dichotomous variable coded 1 if the respondents reported living in a single parent family at wave 1 and 0 if they reported living with more than one parent (step parents were included in this). Respondents from Georgia were coded as 1 for being from the South while respondents from Iowa were coded as 0.

### *Selection Bias*

Research examining the relationship between marriage and psychological well-being often stresses the importance of selection bias in explaining why married individuals report higher psychological well-being than unmarried individuals. The greater psychological well-being of married individuals could be in part due to the lower propensity of depressed individuals to marry. Past research examining the role of selection bias has been inconclusive

(Forthofer, Kessler, Story, and Gotlib 1996; Horwitz, White, and Howell-White 1996; Simon 2002). The most recent work in this area has concluded that mental health does not predict propensity to marry (Simon 2002). As age, gender, and the presence of children do predict entry into marriage, they are included in this analysis (Frech and Williams 2007; Mirowsky 1996; Simon 2002). Though I am not evaluating married individuals, the same processes may be at work in non-marital romantic relationships. In addition to including these variables, I have included previous psychological well-being in order to reduce selection bias influencing the results.

### *Analytic Approach*

As the dependent variable was a count of psychological distress I used negative binomial regression in Stata 11 (StataCorp 2007) to assess the association between non-marital romantic relationship status and psychological well-being. Due to the nature of the dependent variable, Poisson and negative binomial regression models are more appropriate for positively skewed count measures than OLS regression (Reynolds and Baird 2010). Negative binomial regression models are preferable to Poisson models when the data is overdispersed (Beck and Tolnay 1995). Overdispersion happens when the variance of a variable is larger than the mean by a factor of  $(1 + r^{-1} \mu)$  (Beck and Tolnay 1995). While our outcome variable, psychological distress at wave 5 is not overdispersed, the mean and the standard deviation are quite close (mean: 2.41, std. dev.: 2.28). Our measure of psychological distress at wave 4 is overdispersed with a mean of 3.88 and a standard deviation of 4.51. Analysis of the alpha term using the likelihood test supports the use of the negative binomial regression as compared to the Poisson model because the alpha term is

significant. Furthermore, while the Vuong test suggested use of the zero-inflated negative binomial regression for the data, the BIC very strongly recommended using the negative binomial regression. Because of the complexity of the data due to the inclusion of numerous internal moderators, I present results of the negative binomial regression analyses.

In Table 2, the initial model assessing the association between non-marital romantic relationship status and psychological well-being includes only control variables. Relationship status (versus no romantic relationship) is included in the analysis in the second model. The third model examines the effect of relationship strain on distress symptom counts. After examining the effect of being in a non-marital romantic relationship I separate relationship status into three categories (no romantic relationship, dating relationship, and cohabiting relationship) and then examine gender effects and relationship strain. After running the negative binomial regression by relationship status I further analyze any interactions the initial analyses uncover and present results highlighting the differences in psychological well-being by gender, relationship status, and relationship strain.

## IV: RESULTS

### *Descriptive Statistics*

As stated above, the final sample is comprised of 578 individuals who participated in wave 5 with control measures present at waves 1, 4, and 5. The sample includes 334 women and 244 men, reporting an average age of 21.5. 27% of the sample has children, 41% of the sample lived in a single parent household at wave 1, and 51.4% of the sample lived in the South at wave 1. At wave 5, 300 of the respondents (51.9% of the sample) reported being in a relationship. 216 respondents (37.4%) reported being in a dating relationship while 84 respondents (14.5%) reported being in a cohabiting relationship. 278 respondents were not in a romantic relationship. By gender, 92 males and 124 females were in a dating relationship, 36 males and 48 women were in a cohabiting relationship, and 116 males and 162 females were single.

As denoted in Table 1, there is a significant gender difference in mean reports of distress symptoms at wave 4 and wave 5, with women reporting significantly more distress symptoms than men at both waves. Distress symptoms at waves 4 and 5 are the only variables that significantly differ by gender. Notably, relationship strain does not vary significantly by gender. When examining group differences by relationship status (results not presented), respondents in a relationship are significantly more likely to have children than single respondents. Having children is the only variable that significantly differs for individuals in a relationship compared to single individuals. Notably, psychological distress at waves 4 and 5 does not differ for respondents in a relationship compared to single respondents.

When examining group differences with relationship status parsed into three dummy variables (results not presented), dating individuals are significantly more likely than cohabiting and single individuals to be from the South. Geographic region is the only variable that differed significantly for dating individuals as compared to single and cohabiting individuals. Cohabiting individuals are significantly older, significantly more likely to have children, significantly more likely to have been from a single parent family at wave 1, and significantly less likely to be from the South than single and dating individuals. Notably, the results indicate that there is not a difference between the mean relationship strain score for cohabiting and dating individuals. It is also important to mention that psychological distress at wave 4 is not significantly different for single, dating, and cohabiting individuals.

Results comparing respondents in a relationship (dating or cohabiting) to single respondents suggests that selection factors included in the model are not associated with relationship status, with the exception of having children. Age, coming from a single parent family and prior psychological distress are not significantly predictive of relationship status. Comparison of respondents by relationship status (single, dating, or cohabiting) suggests that there might be more going on than meets the eye. Cohabiting individuals, as compared to dating and single individuals are older, more likely to have children, more likely to be from a single parent family at wave 1, and less likely to be from the South than single and dating individuals. I explore the associations presented above and the impact they may have on psychological well-being further by examining results from the correlation matrix and negative binomial regression presented below.



### *Correlation Matrix*

Table 1 also reports a correlation matrix of the intercorrelation coefficients by gender. Bolded coefficients are statistically significant at the  $p < .05$  level. When examining the control variables, age and children are significantly correlated for males (.1702), while the relationship is not significant for females. This relationship is also significant for the entire sample. Psychological distress at wave 4 is significantly related to psychological distress at wave 5 for both males (0.3526) and females (0.2629). Analyzing correlations across the entire sample revealed an association between women and psychological distress at waves 4 (0.1178) and 5 (0.1651). By gender, only females at wave 5 have a significant correlation between relationship strain and psychological distress (0.1711). Overall, psychological distress at both waves is significantly correlated with relationship strain (0.1118) but breaking down the correlations by gender shows that the association between strain and distress is driven by women.

When evaluating relationship status without differentiating between dating and cohabiting individuals, the only significant correlation is with children for men (0.2006). This relationship is not significant for women. When this relationship is examined for the entire sample it is still significant (0.0896). When the association is broken down by gender males are driving this association.

When evaluating relationship status as a set of dummy variables, relationship strain is significantly and positively associated with dating men (0.1903). Relationship strain is also significantly associated with cohabiting men (-0.137). The association between relationship

strain and dating or cohabitation is not significant for women or when the sample is examined as a whole. For dating individuals as a group, being from the South is significantly associated with dating (0.1074). This relationship is not significant for dating men but does hold for women (0.1519). For cohabiting individuals, age and being from the South are significantly related to cohabitation for women (age 0.1142, South -0.1244) but these relationships are not significant for men. Having children and being from a single parent family are significantly related to cohabitation for men (having children 0.2455, single parent family 0.1297) but these relationships are not significant for women. When looking at correlations for the entire sample, the relationships between age, being from the South, being from a single parent family at wave 1 and having children hold for cohabiting individuals (age 0.1011, having children 0.1565, single parent family 0.0969, South -0.0900) but when these correlations are broken down by gender it is apparent which gender is driving the significance. The following analyses will assess whether these patterns hold when other variables are considered.

### *Negative Binomial Regression*

After examining mean differences by relationship status I examined how the variables related to the count variable of psychological distress. Models 1 through 3 in Table 2 examine the influence of being in a relationship on psychological distress with and without relationship strain in the analysis. Model 1 shows only the effect of the control variables on psychological distress symptom counts. This first table suggests that being a woman increases the expected number of distress symptoms by 31.6%. Being a woman remains significant throughout the analyses, regardless of the addition of relationship status and relationship strain to the model.

Furthermore, the effect of being a woman on the distress symptom count remains fairly stable, always increasing the expected number of reported distress symptoms by between 31.3% and 37.8%.

Psychological distress at wave 4 is also a significant predictor of distress symptoms at wave 5. This relationship is largely significant and consistent across models, though the strength of effect is surprisingly low. In the first model, a one unit increase in psychological distress at wave 4 increases the expected number of distress symptoms at wave 5 by 5.4%. In all of the models presented in Table 1 psychological distress at wave 4 increases the expected number of distress symptoms by 5.3% or 5.4%.

Besides prior distress, the only other control variable that significantly influences reported distress symptoms is being from the South. In Model 1 the expected numbers of distress symptoms reported by individuals from the South are reduced by a factor of .825. The effect of being from the south on the expected report of distress symptoms remains fairly stable in all models in Table 1. Being from the South appears to lower the expected report of distress symptoms by 16.6% - 18.7% across the models.

Relationship status is added into the analysis in model 2. As a reminder, relationship status in this context is a dummy variable where dating and cohabiting individuals are coded as 1 and single individuals are coded as 0. As seen from the model, relationship status as a dummy variable is not significantly predictive of the expected report of distress symptoms. This non-significance is supportive of the hypothesis that relationship status itself is not predictive of

psychological distress (hypothesis 1). Model 3 adds relationship strain to the analysis and it is significantly predictive of the expected report of distress symptoms (supportive of hypothesis 3).

As I am utilizing the internal moderator model, including relationship strain as an interaction with relationship status allows for the examination of the extent to which the effect of relationship status is dependent on the characteristics of the relationship. Coding single individuals at the mean of zero and interacting relationship strain with relationship status allows me to determine the effect of well-being for individuals in a relationship above and beyond the effect of simply being in a relationship. I am then able to examine if the effect of relationship status is fully dependent on the quality of that relationship. As single individuals have been coded as having zero relationship strain, including relationship strain in the model as a predictive variable (not in an interaction) would distort the associations between all included variables. The interaction between the dummy variable for relationship status (as either in a relationship status or single or as a set of dummy variables for single, dating, and cohabiting relationships) and relationship strain results in values that are meaningful for all categories. These values (of the interaction between relationship status and relationship strain) represent the effect of relationship strain on counts of symptoms of psychological distress. As single individuals have been coded as having zero relationship strain, their effect is in essence, neutralized. The interaction term reflects the effect of relationship strain while the relationship status variable reflects the effect of being in a relationship on distress symptom counts.

According to model 3, for respondents in a relationship, a unit increase in relationship strain is associated with a 12.9% increase in the expected number of reported distress symptoms.

These results suggest that being in a relationship itself is not significantly related to distress symptoms. Rather, as model 3 shows, the effect of a relationship is fully dependent on the quality of that relationship. In addition to the models presented using relationship status as a dummy variable, a fully interactive model was run that included interactions between each variable and gender. The likelihood-ratio test indicated that the fully interactive model was not a significant improvement in fit on model 3 (chi-square = 10.71,  $p < 0.1520$ ). The gendered interactions were not significant and were removed from the model.

Models 4 through 7 examine the influence of different relationship statuses on psychological distress. After removing the dummy variable for relationship status from the model, a set of dummy variables for individuals in dating relationships and cohabiting relationships have been included in the model. In this analysis, single individuals serve as the reference group. Rather than just looking at the influence of relationship status as an umbrella term, separating relationship status into two groups allows me to compare differences between groups. As cohabiting individuals are likely to have significantly more structural constraints than dating individuals, relationship strain might impact them in different ways than it influences dating individuals. As discussed earlier, in addition to structural constraints, dating and cohabiting relationships might differ in the extent to which they influence a person's actions, social support, and identity.

Model 4 includes only the control variables and the variables for dating and cohabiting relationships. Neither of these variables is significant and tests examining if the coefficients for dating and cohabiting differed significantly were not significant. This is supportive of the

hypothesis that relationship status itself is not predictive of psychological distress (hypothesis 2a) and provides no support for the hypothesis that non-marital relationship statuses are ordered in its relationship to well-being (hypothesis 2b). Model 5 includes internal moderators for each of the relationship status variables by relationship strain. In this analysis the internal moderator examining dating relationship and relationship strain is not significant while the internal moderator examining cohabiting relationship and relationship strain is significant. The significant internal moderator of cohabiting relationship and relationship strain suggests that disaggregating the relationship statuses is beneficial. As in models 2 and 3, being in a relationship by itself is not significantly related to distress symptom counts; it is the relationship strain (what happens in the relationship) that is related to distress symptom counts. Furthermore, as the dummy variable relationship status is disaggregated to dating relationship and cohabiting relationship, this association only holds for cohabiting individuals. For the current sample, relationships are predictive of distress only to the degree that they're strained, and that is particularly the case among cohabiters. For cohabiting individuals, a unit increase in relationship strain increases the expected count of distress symptoms increases by 25.9%. For this sample, an increase of one standard deviation is an increase of .72 on the standardized relationship strain scale.<sup>1</sup>

Model 6 includes an interaction between relationship status and gender. This is included as a precursor to the final model, and while the inclusion of the gendered interaction term is not

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<sup>1</sup> Though the scale was standardized, coding single individuals at 0 for relationship strain altered the standard deviation of the variable. Instead of a standard deviation of 1, the standard deviation for relationship strain is now .72.

significant, the internal moderator examining cohabiting relationship status and relationship strain remains significant. In addition to this model, a fully interactive model was run that included interactions between each variable and gender. Like the previous fully interactive model, the likelihood-ratio test indicated that the model was not a significant improvement in fit on Model 7 (chi-square = 9.76,  $p < 0.0823$ ).

While the fully interactive model was not a significant improvement over model 6, internal moderators assessing the association of relationship status (dating/cohabiting), gender, and relationship strain were retained in model 7 due to the marginal significance of the cohabiting internal moderator. To include the above internal moderators, the interactions of relationship status by gender and relationship status by relationship strain were included in the model. Other interactions that failed to reach significance were removed from the model.

The final model, model 7, includes the set of dummy variables for relationship status, the relationship status by gender interaction, and a three way internal moderator examining relationship status, relationship strain and gender. The entrance of the three way internal moderator term suggests that gender does moderate the effect of relationship strain for cohabiting individuals but that it does not moderate the effect of relationship strain for dating individuals.

To aid with the interpretation of the significant three way internal moderator, separate negative binomial regressions were run examining the role of romantic relationships and relationship strain on psychological distress symptom counts by gender. These results are

presented in Table 3.<sup>2</sup> Model 1 of Table 3 shows the analysis for men and model 2 of Table 3 shows the analysis for women. Unlike with the full model, when the model is run by gender, being from the South is not significantly related to a change in expected distress symptom counts for males but it is significant for female. This is consistent with the results of the correlation matrix presented above. In the correlation matrix geographic region was significantly associated with wave 5 distress symptoms for the full sample and for females when the correlation matrix was compiled by gender. Consistent with prior results, psychological distress at wave 4 is significantly predictive of an increase in the expected count of psychological distress symptoms for both men and women. Also consistent with prior results, relationship status does not significantly increase the expected count of psychological distress symptoms for either gender.

The final rows of Table 3 present the internal moderator assessing the association between relationship status and relationship strain. For dating individuals, relationship strain does not condition the association between dating relationships and the expected count of psychological distress symptoms for either gender. For cohabiting individuals, relationship strain does significantly condition the association between cohabiting relationships and the expected count of psychological distress symptoms for women while the association is not significant for men. These results suggest that for cohabiting women, it is the quality of the relationship, rather than being in a relationship, that is significantly associated with their psychological distress. To

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<sup>2</sup> Results presented here use the relationship strain scale standardized with men and women combined. To examine how gender differences affected the effect that standardization of relationship strain separate analyses were run standardizing strain for each gender. Results of that analysis were not substantially different from the results presented here. Results utilizing the standardization of strain by gender are available from the author upon request.



illustrate this more clearly, for cohabiting women, a unit increase in relationship strain increases the expected count of psychological distress symptoms by an additional 35.5%.

Figure 1 illustrates the relationship between relationship status, relationship strain and gender. This figure shows counts of psychological distress for men and women in each relationship status at high and low levels of relationship strain (i.e.  $\pm .5$  SD) for relationship strain.<sup>3</sup> Mean levels of psychological distress are shown for single males and females to allow the reader to see how the high and low values of relationship strain of the other relationship statuses vary in comparison to single individuals. Cohabiting females in strained relationships report more distress symptoms than all other groups. Thus it appears that a highly strained relationship is particularly related with well-being for cohabiting females. It is also worth noting that these findings suggest that the effect of relationship strain on cohabiting females reports of psychological distress drives the significance for relationship strain across all relationship statuses.

The difference in counts of distress symptoms by relationship type is not supportive of the continuum of commitment suggested by Dush & Amato (2005) and the earlier continuum of attachment suggested by Ross (1995). The three categories of relationship status, without the inclusion of relationship strain were not significantly different from one another in their ability to predict the expected count of distress symptoms. Mean difference tests also did not find

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<sup>3</sup> The figure was initially constructed examining high and low relationship strain  $\pm 1$  standard deviation from the mean but was revised due to small cell size. The smallest cell size when we examined the relationship at  $\pm 1$  standard deviation was 4 (for high relationship strain for cohabiting males) compared to the smallest cell size of 11 (for the same group) when examining the relationships at  $\pm .5$  standard deviations from the mean.

significant differences between the reports of symptoms for single, dating, and cohabiting individuals. As stated earlier, hypothesis 2b, designed to test Dush & Amato's (2005) continuum of commitment, proposed that cohabiting individuals would have significantly higher psychological well-being than dating individuals and single individuals, and that dating individuals would have significantly higher psychological well-being than single individuals. As my analyses contain fewer respondents than Dush & Amato's and Ross' analyses it is possible that the lack of comparable results is due to lower group sizes. The analysis may lack the power needed to detect differences between the groups.

## V: DISCUSSION

In this analysis the primary objective has been to examine how being in a non-marital relationship influences psychological well-being in early adulthood. In this analysis, I have shown relationship strain to be an important predictor of psychological well-being in non-marital romantic relationships. Furthermore, after examining the effect of relationship strain separately for daters and cohabiters and examined by gender, relationship strain was only significantly predictive of psychological well-being for cohabiting females. Importantly, relationship status alone was not predictive of psychological well-being. This finding is consistent with the identity theory literature and the social support literature (Stryker and Burke 2002; Walen and Lachman 2000).

### *Relationship Status and Psychological Well-Being*

The findings presented here suggest that mechanisms at work in non-marital and marital relationships differentially influence health outcomes. These findings suggest that relationship status is not predictive of psychological well-being for this population. These findings support hypotheses 1 and 3. Hypothesis 1 proposed that the lack of status transition and the ambiguity present in non-marital romantic relationships would lead to no significant change in psychological well-being as compared to single individuals, a finding supported with the analysis. Hypothesis 3 proposed that individuals with higher levels of relationship strain would have poorer psychological well-being than individuals with lower levels of relationship strain. In the beginning of the paper I discussed three perspectives examining the processes at work to

establish the positive link between marriage and health. These perspectives each stressed different processes. The proposed processes were selection factors, social support and social integration, and views of self and identity. In order to understand the ways in which the present analysis differs from the larger body of work examining relationship status and health it is useful to examine how each process may be at work within this population.

The first process to examine is that of selection factors. The perspective stressing selection factors proposes these factors (such as age, race, gender, presence of children) directly influence an individual's health. Healthier individuals then marry, have higher quality marriages, and are more likely to stay married (Horwitz and White 1998). Although past research is inconclusive as to the role of selection factors (Forthofer, Kessler, Story, and Gotlib 1996; Horwitz, White, and Howell-White 1996; Simon 2002), variables capturing age, gender, the presence of children within a relationship and past psychological well-being were added to the analysis as controls. Even after controlling for these variables, relationship strain was still a significant predictor of psychological distress.

The second process to examine within the marital status and health literature is that of social support and social integration. Within this perspective, the emotional support provided by one's partner, the degree of influence a partner has over the other partner's behavior, and the integration of each partner's attributes provide support for the marriage-health link. As couples spend time together and engage in fewer harmful behaviors than one might alone (Sampson and Laub 2006), the restructuring of leisure time increases the health of individuals within the relationship (Wickrama, Surjadi, and Bryant 2010). It is likely that this process is at work within

the non-marital relationship examined in this analysis. Though these processes are at work, the lower commitment and salience of these non-marital relationships likely reduces the strength of the relationship and health link compared to that found in marital relationships. Relationship quality is important in this context as well. As a person's ability to exercise influence is a function of the degree to which their partner values or depends on their relationship, relationship quality is likely to alter the amount of time and energy put into a relationship. I speculate that individuals that are happy in their relationships are likely to allow strong bonds to form within the relationship, are likely to spend more time in that relationship, and are likely to enjoy emotional support within the relationship. Thus social support and social integration are likely to depend on relationship quality, which then is influential for health and well-being.

The third perspective to examine within the marital status and health literature is that of the role of self and identity. As individuals in emerging adulthood navigate and make their way through this transitional period, they are able to try out a variety of roles and identities. Unlike married individuals, these individuals are less committed to the relationships that they are in (Dush and Amato 2005) and thus these relationships have less of an opportunity to influence their well-being. The identity salience hierarchy utilized within identity theory (Stryker 1980; Stryker and Burke 2002) supports this proposition. As individuals spend more and more time with their romantic partners, forming bonds and enacting roles, this identity becomes more salient to the individual. As non-marital romantic relationships entail less of a time commitment and fewer bonds, the salience of the identity as girlfriend or boyfriend might be less salient to an individual than the identity of wife or husband. While this analysis did not examine marital

relationships, it is likely that the significant difference between the effect of marital status on health found in past research and the lack of effect of non-marital status on health in the current analysis is due in part to the increased salience of a relationship when partners formally commit to each other as in a marriage ceremony. Further work is needed to examine how the salience of a relationship varies for marital and non-marital relationships.

To summarize, to the extent that selection factors influence the relationship between marriage and health, it is possible that they are also at work within non-marital relationships. In an attempt to reduce the effects of selection factors, the present analysis controlled for age, gender, the presence of children, and past psychological distress. Social support and social integration shape the behaviors and values that are present within a relationship (Wickrama, Surjadi, and Bryant 2010). The interactions within a relationship are likely to influence the reports of relationship quality by members of the relationship. As positive interactions within relationships are likely to foster continuing and increased interactions, relationships that are positive and supporting are likely to be characterized as socially supportive and integrated. Relationships that are not positive are likely to be less supportive and rewarding. Identity theory would suggest that the support provided by a relationship conditions the commitment an individual has for that relationship and the salience that relationship has for an individual (Cast and Burke 2002). Thus suggesting that relationship quality influences outcomes like psychological well-being, instead of relationship status itself.

The lack of support for hypothesis 2b (and alternatively, support for hypothesis 2a) suggests that the continuum of commitment proposed by Dush & Amato (2005) that was built

from Ross' (1995) continuum of attachment is not supported in this sample. Support for the hypothesis would have been shown by finding that cohabiting individuals had the highest psychological well-being, followed by dating individuals, with single individuals reporting the poorest psychological well-being. Instead these results suggest that relationship status itself is not significantly predictive of psychological well-being. It is possible that this failure to support the continuum of commitment is a result of small cell size. Further work with a larger sample examining well-being by relationship status would help to clarify this relationship. Coefficients for single, dating, and cohabiting individuals were not significantly different in the large majority of the models presented. Only when including the internal moderator examining relationship status, relationship strain, and gender did the difference between the coefficients for single, dating, and cohabiting individuals become significant. Results of the analysis modeling the internal moderator as a three way interaction indicated that cohabiting females with high relationship strain were significantly different from dating females, single females, and cohabiting males. Figure 1 suggests that there may be differences in levels of psychological distress between cohabiting and dating individuals but these differences were not significant. Results of Figure 1 also suggest that levels of psychological distress are low for cohabiting females in low strained relationships, which highlights the impact of relationship strain on psychological distress.

This analysis fits into a larger body of research examining emerging adulthood and the unique combinations of life transitions that are made during this period. As individuals in societies such as the U.S. leave home in an attempt to create their own life, they have a

considerably large number of choices to make. Should they continue their education? Can they afford to continue their education? Should they follow their parent's footsteps or blaze their own path? Who should they blaze that path with? Research examining this population has focused on the importance of establishing close romantic relationships during the transition to adulthood (Arnett 2000; Demir 2008; Montgomery 2005). The present analysis highlights the importance of relationship quality to this population. As these emerging adults try identities on and begin to form life-lasting relationships, the quality of their romantic relationships often influence the support and importance given to their relationships. As these relationships are not as structurally constraining as marital relationships, the fluidity of these relationships may allow individuals to enter into and leave relationships more freely. Instead of filing for divorce and splitting up assets, these individuals may simply break up and move on to the next partner.

Though this population of young adults presumably has freedom to enter and exit relationships than their married peers, it appears that cohabiting females persist in strained relationships. If the freedom to enter and exit relationships was endless, few low quality non-marital relationships would be expected to persist. However, this is not the case, suggesting that constraints might exist within cohabiting relationships. Future analysis examining the association between relationship strain and psychological well-being would benefit from multiple measures of strain over time and the inclusion of a control for the length of the relationship. Multiple measures of strain over time would give a more complete picture of the climate within the relationship. Likewise, controlling for how long the respondents have been in their current relationship would allow for more certain speculation about constraints within the relationship.



This future work could more clearly examine the impact of structural constraints on relationships.

The present work cannot pinpoint why women stay in strained relationships, but can suggest some processes that may be at work. Structural factors may work against these women in a variety of ways (Johnson, Caughlin, and Huston 1999). It may be that these cohabiting women perceive a lack of alternative partners in their environment; perhaps they have signed a lease with their partner, share monthly bills, or provide their partner with a safe haven and value that offer. These factors and others could encourage women to stay in strained relationships. Emerging evidence suggests that relationship status is significantly predictive of psychological well-being for women which could lead to an increased willingness to stay in lower quality relationships (Simon and Barrett 2010). As previously mentioned, one fourth of the sample has children and being in a cohabiting relationship was significantly related to having children for the entire sample (as shown in the correlation matrix). Analyses examining the interaction between having children and relationship status (as well as having children, relationship status, and relationship strain) were not significant but unmeasured children-related variables could be encouraging these women to stay in their relationships.

In the present population, cohabiting females with high relationship strain reported more distress symptoms than cohabiting males, dating females, and dating males. Cohabiting males with high relationship strain were not significantly different from single and dating males with respect to their reported distress symptoms. These findings provide moderate support for hypothesis 4. Previous research has examined the effect of relationship status on psychological

well-being for men and women by examining gender specific outcomes such as depression and substance abuse (Simon and Barrett 2010). In this analysis I did not include substance abuse as an outcome variable but did examine psychological distress. The only significant gender interaction present in our population was that of relationship strain by relationship status. If substance abuse was included in the model, past research suggests that relationship strain would be significantly predictive of substance abuse for men (Simon and Barrett 2010; Williams 2003). The inclusion of substance abuse into this analysis could possibly account for the difference in males' and females' expressions of distress.

The present analysis examined a population of African American emerging adults. As African Americans tend to marry later in life than Whites and Hispanics (Goldstein and Kenney 2001; Koball et al. 2010) non-marital relationships might be expected to affect their psychological well-being in different ways than non-marital relationships of White and Hispanic individuals. Cohabitation has become an alternative or extended prelude to marriage for many individuals (Edin and Kefelas 2005) and these trends are especially evident in economically distressed African American communities (Clayton, Mincy, and Blankenhorn 2003) where high levels of unemployment and incarceration discourage marriage (Pettit and Western 2004; Western 2006). Recent research by Kurdek (2008) examining racial differences in levels of commitment and predictors of commitment suggests that there are racial differences in the mean levels of predictors of relationship commitment but that the predictors of commitment do not vary by race. Kurdek's (2008) analysis examined a population of same-race couples with at least one partner in college at the time of the survey. The similarity in age groups between Kurdek's

population and the present population suggests that the processes at work in Kurdek's population could also be at work within this population. African Americans also tend to experience poorer health than other racial groups and lower marital quality than Whites (Koball et al. 2010). To the extent that non-marital relationships predict different health trajectories for African American and White individuals, examining variation with race and relationships is important.

As discussed above, in the present analysis, relationship quality significantly predicted psychological distress, even when controlling for prior distress and relationship status. Drawing from the body of literature that has studied the relationship between marital status and psychological well-being, I propose that the mechanisms at work stress the importance of identity and social support. Relationships that are characterized by high levels of support provide a positive environment within which individuals can support and encourage one another. This supportive environment encourages individuals to invest more into the relationship and spend time with their partner. The high quality of the relationship therefore leads to increased psychological well-being. On the other hand, relationships characterized by high levels of strain do not encourage individuals to invest time within the relationship. In unsupportive relationships the identity of boyfriend or girlfriend is not an identity that partners commit to or hold to be more important than other identities. This strained relationship is predictive of psychological distress.

While the present analysis allowed for the examination of the influence of relationship strain on psychological well-being, I was unable to examine the processes at work within this relationship. I am unable to explain why cohabiting females in strained relationships report more distress symptoms than other individuals in non-marital relationships. Future work would benefit

from analyses that are able to examine why relationship quality influences distress for cohabiting women. Work utilizing data relevant to the perspectives proposed to explain the relationship between marriage and health could be applied to non-marital relationships as well. The significance of relationship quality in this population suggests that identity formation and social support and integration are influential concepts for psychological well-being. Selection factors are also likely to influence psychological well-being and future work should continue to be wary of their influence on relationship status and well-being.

#### *Limitations and Conclusions*

There are a few other limitations to the present study. First, the size of the sample limits the analyses that are possible. While I was able to examine variation within three varieties of relationships a larger sample might allow for the inclusion of more categories of relationship status. A larger sample would also increase the ability to detect differences between cohabiting and dating relationships, as suggested by Dush & Amato (2005). The initial sample also included married and engaged individuals but due to the small number in each group (29 and 15 respectively) the two groups were dropped from the analysis. Perhaps a larger sample size would find support for Dush and Amato's (2005) continuum of commitment. An analysis with more relationship categories would also allow for the comparison of non-marital relationships to marital relationships. Secondly, the data were collected from targeted individuals within families in Iowa and Georgia, thus the sample is not generalizable to the larger population. As the present sample is an African American sample, we cannot claim that the results found here hold for other racial groups. It is likely that the processes at work within the present population are at work

within the larger African American society, but further work must be done to test this claim. As Kurdek (2008) noted, Black and White individuals vary with regards to the values and norms regarding marriage because they are socialized in distinct social, cultural, and historical contexts that influence how marriage and family life are viewed. Future work on non-marital relationships for emerging adults is necessary for a more complete picture of the role of relationships within this young population. Finally, since relationship quality was assessed from only one of the partners within the relationship I cannot say with complete confidence that the reported strain is actually present (or absent) in a respondent's relationship. Though I cannot be sure the reported strain reflects what exists within a respondent's relationship, it is *perceived* to be present, and that perception may have an effect on well-being regardless of the actual strain in a relationship. Research using dyadic data could help to provide a more reliable report of relationship quality.

In conclusion, the present analysis examined the influence of relationship status and relationship strain on psychological well-being. The findings suggest the relationship strain is significantly predictive of psychological well-being for cohabiting females but not significantly predictive for dating individuals or cohabiting males. In attempting to explain the significance of relationship quality for cohabiting females I have drawn on work that suggests that identity formation (Stryker and Burke 2002), social support (Wickrama, Surjadi, and Bryant 2010), and structural commitment (Johnson, Caughlin, and Huston 1999) act on an individual and influence psychological distress. Future work in this area is likely to help parse out the processes at work and their influence on health for emerging adults in non-marital relationships.

## VI: REFERENCES

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Table 1: Intercorrelation Coefficients and Summary Statistics by Respondent Gender

	1	2	3	4	5	6	7	8	9	10	11
1 Age	.	<b>0.1702</b>	-0.0047	<b>-0.2745</b>	-0.0246	-0.053	0.0445	-0.0835	0.0835	0.0237	0.0852
2 Children	0.076	.	0.0663	0.0291	-0.0296	0.0098	-0.0954	<b>-0.2006</b>	<b>0.2006</b>	0.027	<b>0.2455</b>
3 Single Parent Family	0.0293	-0.0109	.	-0.0891	0.0535	0.0839	-0.0538	0.0214	-0.0214	-0.1167	<b>0.1294</b>
4 South	<b>-0.2701</b>	<b>-0.1462</b>	0.0984	.	0.0691	-0.0034	0.0365	-0.014	0.014	0.0464	-0.0436
5 Psychological Distress (W4)	0.0477	0.0739	-0.0315	-0.0444	.	<b>0.3526</b>	0.073	-0.0069	0.0069	0.0638	-0.0775
6 Psychological Distress (W5)	0.0288	-0.0767	<b>-0.1151</b>	<b>-0.1438</b>	<b>0.2629</b>	.	0.0728	-0.0694	0.0694	0.1104	-0.0532
7 Relationship Strain <sup>a</sup>	-0.0163	-0.05	-0.0216	-0.0571	0.0951	<b>0.1711</b>	.	-0.0874	0.0874	<b>0.1903</b>	<b>-0.137</b>
8 No Romantic Relationship	0.0117	-0.0138	-0.0465	-0.0596	-0.0238	-0.0411	0.0782	.	<b>-1</b>	<b>-0.7406</b>	<b>-0.396</b>
9 In a Relationship	-0.0117	0.0138	0.0465	0.0596	0.0238	0.0411	-0.0782	-1	.	<b>0.7406</b>	<b>0.396</b>
10 Dating Relationship	-0.095	-0.0548	-0.0058	<b>0.1519</b>	-0.0039	0.0398	-0.0817	<b>-0.7458</b>	<b>0.7458</b>	.	<b>-0.3237</b>
11 Cohabiting Relationship	<b>0.1142</b>	0.0951	0.0742	<b>-0.1244</b>	0.0391	0.0037	-0.0817	<b>-0.3976</b>	<b>0.3976</b>	<b>-0.3148</b>	.
Women											
Mean	21.521	0.29	0.431	0.506	2.728	4.338	-0.053	0.485	0.515	0.371	0.144
Std. Dev.	0.823	0.455	0.496	0.501	2.459	4.751	0.659	0.501	0.501	0.484	0.351
Men											
Mean	21.483	0.246	0.377	0.525	1.967	3.262	0.073	0.475	0.525	0.377	0.148
Std. Dev.	0.896	0.432	0.486	0.5	1.92	4.098	0.792	0.5	0.5	0.486	0.355
Gender Difference					***	**					

Notes: Women below the diagonal, men above the diagonal; N = 578 (334 women, 244 men);  
 Bolded coefficients are statistically significant at p < .05.  
 a. Variable was standardized for full sample.  
 \* p < 0.05; \*\* p < 0.01; \*\*\* p < 0.001

	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6	Model 7
Age	0.964	0.960	0.961	0.963	0.966	0.966	0.966
Children	0.883	0.876	0.886	0.881	0.893	0.890	0.896
Female	1.316***	1.319***	1.336***	1.319***	1.318***	1.378**	1.378**
South	0.825*	0.820*	0.825*	0.813*	0.825*	0.825*	0.834*
Single Parent Family	0.939	0.937	0.940	0.942	0.946	0.949	0.952
Psychological Distress (W4)	1.054***	1.054***	1.053***	1.054***	1.053***	1.053***	1.053***
In a Relationship		1.122	1.112				
Relationship Status x Relationship Strain			1.129*				
Dating Relationship				1.157	1.149	1.206	1.205
Cohabiting Relationship				1.029	1.018	1.087	0.975
Dating Relationship x Relationship Strain					1.079	1.075	1.075
Cohabiting Relationship x Relationship Strain					1.259*	1.265*	0.810
Dating Relationship x Female						0.924	0.924
Cohabiting Relationship x Female						0.900	0.991
Dating Relationship x Relationship Strain x Female							1.002
Cohabiting Relationship x Relationship Strain x Female							1.699†
Constant	4.143	4.269	4.110	3.969	3.725	3.622	3.534
lnalpha	0.483***	0.479***	0.469***	0.478***	0.463***	0.463***	0.456***
Observations	578	578	578	578	578	578	578
Log Likelihood	-1152.566	-1151.537	-1148.861	-1151.103	-1147.569	-1147.429	-1145.68
Chi2	59.342	61.4	66.752	62.267	69.336	69.616	73.121
r2_p	0.025	0.026	0.028	0.026	0.029	0.029	0.031

\*\*\* p<0.001, \*\* p<0.01, \* p<0.05, † p<0.10

Table 3: Negative Binomial Regression Presenting Exponentiated Coefficients of the Role of Romantic Relationships on Psychological Distress Symptom Count by Gender

	Males	Females
Age	0.937	0.981
Children	1.102	0.798
South	0.973	0.763*
Single Parent Family	1.169	0.856
Psychological Distress (W4)	1.066***	1.046***
Dating Relationship	1.196	1.131
Cohabiting Relationship	0.912	0.971
Dating Relationship x Relationship Strain	1.092	1.095
Cohabiting Relationship x Relationship Strain	0.779	1.355**
Constant	5.347	4.032
Lnalpha	0.350***	0.484***
Observations	244	334
Log Likelihood	-441.242	-698.971
Chi2	30.231	38.922
r2_p	0.033	0.027
*** p<0.001, ** p<0.01, * p<0.05		

**Figure 1: Psychological Distress by Relationship Status and Relationship Strain**

