

# Love and Its Effect on Mental and Physical Health<sup>1</sup>

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What do people mean by *love* and *intimacy*? How long does love last? How important is love in the lives of older Americans? Is love important for their mental and physical health? In this chapter, we will review the evidence that psychologists, social psychologists, sociologists, and experts in aging have begun to collect in an attempt to answer these questions.

## DEFINITION OF TERMS: LOVE AND INTIMACY

According to Hatfield and Walster (1978, p. 9), people seem to experience two quite different forms of love—passionate love and companionate love. *Passionate love* is “a state of intense absorption in another. Sometimes lovers are those who long for their partners and for complete fulfillment. Sometimes lovers are those who are ecstatic at

<sup>1</sup> Preparation of this chapter was supported, in part, by a National Institute of Health Grant for Biomedical Research to the University of Wisconsin, Madison, and in part by HEW AOA Grant #90-A-1230 for multidisciplinary research on aging women awarded to the Faye McBeath Institute on Aging and Adult Life, University of Wisconsin—Madison (1977–1979).

finally having attained their partner's love and momentarily, complete fulfillment. A state of intense physiological arousal." *Companionate love* is "the affection we feel for those with whom our lives are deeply entwined."

According to a number of theorists, *intimacy* is a multidimensional concept (Walster *et al.* 1978, Weiss 1977) that includes evaluative, cognitive, and behavioral dimensions (Huston 1974), temporal dimensions of relatedness (Levinger 1974), and involvement-intensity factors (Rubin 1970). Hatfield *et al.* (1979, p. 106) provide a conceptual definition of intimacy: *Intimacy* is "a relationship between loving people whose lives are deeply entwined." They outlined seven characteristics that seem to distinguish intimate from nonintimate relations: (1) intensity of feelings; (2) depth and breadth of information exchange; (3) length of relationships; (4) value of the resources exchanged; (5) variety of the resources exchanged; (6) interchangeability of resources; and (7) unit of analysis: from "you" and "me" to "we."

*Intensity of feelings.* Intimates care about one another. Liking and passionate and companionate love between intimates are much more intense than the affection casuals feel for one another. Perhaps not so obvious is the fact that very often intimate affection is laced with intense feelings of dislike or even hatred. Whatever intimates feel, they feel intensely.

*Depth and breadth of information exchange.* In casual relationships, acquaintances usually exchange only the sketchiest of information. Intimates generally share profound information about each other's personal histories, values, strengths and weaknesses, hopes, fears, and idiosyncrasies.

Altman and Taylor (1973) provide a painstaking analysis of the "social penetration" process. They observe that casuals and intimates differ strikingly in the amount and kind of information they exchange. They conclude that, with few exceptions, as intimacy progresses, "interpersonal exchange gradually progresses from superficial, nonintimate areas to more intimate, deeper layers of the selves of the social actors [p. 6]." The more intimate we are with others, the more information we are willing to reveal to them and the more we expect them to reveal to us. (Additional evidence in support of this contention comes from Huesmann and Levinger 1976, Jourard 1971, Perlmutter and Hatfield 1980, Worthy *et al.* 1969.)

*Length of relationship.* Casual relationships are usually of short duration. Intimate relationships are expected to endure and generally do endure over a long period of time. Toffler (1970) cites husband-wife

relationships and parent-child relationships as the most enduring of all relationships. "Til death do us part" is still our cultural ideal of intimates.

*Value of resources exchanged.* Casuals can please or discomfort us. Intimates can make us ecstatically happy or plunge us into blackest despair. A variety of exchange theorists have observed that as a relationship grows in intimacy, the value of the rewards and punishments a couple can give one another increases (see Aronson 1970, Huesmann and Levinger 1976, Levinger and Snoek 1972).

Many theorists have observed that intimates' rewards are especially potent. Levinger *et al.* (1970) point out that the same reward ("I'm glad I met you") is far more touching when it comes from an intimate than from a casual. In addition, intimates possess a bigger storehouse of rewards than do casuals. People are usually willing to invest far more of their resources in an intimate relationship than a casual one. Thus, intimates are able to provide their partners more valuable rewards (time, effort, intimate information, money, etc.) than are casuals.

Intimates' rewards may be unusually potent—but so are the punishments they can inflict. For example, if a stranger at a party loudly announces that I am a selfish bore, I lose little; I can dismiss his words as those of a shallow person who doesn't really know what kind of person I am. But if my best friend tells me the same thing, I would be crushed—she knows me, and *still* thinks that! Aronson (1970) put it succinctly: "Familiarity may breed reward, but it also breeds the capacity to hurt."

Finally, we should recognize that intimates command one unique and potent punishment: They can threaten to end things.

*Variety of resources exchanged.* Casuals exchange only a few things. Intimates generally provide one another a great variety of resources (see Donnenwerth and Foa 1974, Foa 1971, Teichman 1971, Turner *et al.* 1971).

*Interchangeability of resources.* Casuals tend to be limited to exchanging a narrow band of resources. If students lend their notes to their classmates every now and then, they expect to be repaid in kind when they miss a lecture. If a couple is invited to a neighbor's party, they know full well that unless they reciprocate, they will be considered antisocial and unappreciative. But exchanging invitations to parties is all they need to do unless they want the relationship to progress to a deeper level.

In contrast, intimate relationships exist in a variety of contexts. Couples have a wide range of interpersonal resources at their disposal and freely exchange one type for another. Thus, the wife who owes her

husband money can pay him back in a number of ways. As Sager (1976) observed, intimates spend much of their time negotiating the terms of their relationship. (Some support for this contention comes from Donnenwerth and Foa 1974, Scanzoni 1972, Turner *et al.* 1971.)

*The unit of analysis: From "you" and "me" to "we."* Intimates, through identification with and empathy for their partners, come to define themselves as a unit—as one couple. Examples of this "we-ness" are the joy and pride a father feels at the success and happiness of his child ("That's my boy!"); the distress a wife experiences when her husband has been denied a hoped-for opportunity; the intense pleasure a lover feels while working to make his beloved happy. A variety of theorists have noted that intimates' outcomes often become entwined. Boulding (1973) presents a brilliant elucidation of his point. (Also, see Rubin 1970, Sigall and Landy 1974.)

### THE ENDURANCE OF LOVE

When asked about the possibility of love and intimacy lasting over a life-span, social psychologists are negative: Passionate love is characterized by its fragility. Berscheid and Walster (1978) and Hatfield and Walster (1978) reviewed the sparse evidence that existed in 1978 and concluded: "Passionate love is a fragile flower—it wilts in time. Companionate love is a sturdy evergreen; it thrives with contact [p. 125]." Reedy and Birren (1978) would agree with this conclusion.

This conclusion was based on the flimsiest of evidence, however. Hatfield and Walster (1978) could find only two studies that explored the evolution of passionate and companionate love over time: Driscoll *et al.* (1972) made an intensive study of dating and newlywed college students. They found that early in their relationships, most couples were romantically (passionately?) in love. They reported that as their relationships deepened, however, their feelings began to sound less like passionate love and more like friendship and companionate love. In another study, by Cimbalo *et al.* (1976), couples who ranged from newlyweds to "long marrieds" were interviewed. (Unfortunately for our purposes, the longest any of these "long marrieds" had been married was 17 years.) These researchers found that the longer a couple had been married, the less passionately they loved one another. Their companionate feelings for one another remained, however.

Some social psychologists are skeptical that even companionate love can last forever. Blood and Wolfe (1960) interviewed a random sample of 900 Detroit women to determine how satisfied they were with their

marriages. They found that most couples' marital satisfaction sagged steadily with the passing decades. In the first 2 years of marriage, 50% of wives were "very satisfied" with their marriages; none were notably dissatisfied. Twenty years later, only 6% were still "very satisfied"; 21% were conspicuously dissatisfied (see also Peterson and Payne 1975).

Are social psychologists' negative conclusions justified? Recently, in a series of different studies, researchers interviewed casually and steadily dating couples, newlyweds, and long marrieds about their feelings for their partners. If we examine the trends in these separate studies, it appears that passionate and companionate love may be far heartier than researchers have assumed.

Traupmann *et al.* (1981c) interviewed 189 college men and women who were dating someone casually or steadily. The dating couples varied in age from 17 to 28. (Their average age was 20.) On the average, they had been going together for 13 months at the time they were interviewed.

Traupmann (1978) and Utne (1978) contacted 284 couples who applied for marriage licenses in Madison, Wisconsin, from August to November 1976. They were able to interview 53 of these newlywed couples shortly after their marriages and then again a year later. At the time of the initial interview, couples had been married 3–8 months. They ranged in age from 16 to 45 (the average bride was 24, the average groom 26). The newlyweds had a variety of occupations—accountants, teachers, farmers, construction workers, and businesspeople; a few were students. Most couples had dated approximately 2 years before marrying.

Traupmann and Hatfield (1981b) contacted a random sample of 480 older women living in Madison, Wisconsin. They interviewed 106 older women about their feelings toward their husbands. Unfortunately for our purposes, they did not interview their husbands. These women ranged in age from 50 to 82. (The average age was 54.) At the time of their interviews, the women had been married from 1 to 59 years. (The average length of marriage was 33 years.)

In the studies we have just described, Traupmann *et al.* (1981c), Traupmann (1978), Utne (1978), and Traupmann and Hatfield (1981b) assessed couples' positive and negative feelings for one another. The researchers began by explaining what they meant by passionate versus companionate love; they then asked respondents to think back over the last 3 to 6 months and to indicate how they felt about their partners during that period. "What is the level of passionate love that you feel for your partner? That your partner feels for you? What is the level of companionate love that you feel for your partner? That your partner feels for you?" Respondents were asked to indicate their feelings on the following scale: none at all; very little; some; a great deal; a tremendous amount.

The researchers then observed to the respondents that: relationships go through stages; sometimes, for a period, one partner feels seething resentment toward his or her mate and the way he or she is treated. At other times, he or she may feel hostile or depressed. His or her partner may feel the same way. Sometimes we express these feelings, other times, we keep them inside. They asked respondents to think over the last 6 months or so and indicate the levels of resentment, hostility, and depression that they felt toward their partners and that their partners felt toward them. Again, respondents were asked to estimate their feelings on a scale from none at all to a tremendous amount.

Hatfield and Walster (1978) proposed that although passionate love

TABLE 12.1  
Steadily dating Couples', Newlywed Couples', and Long Married Women's Feelings for Their Partners

Respondents	(N)	How much passionate love do you feel for your partner?	How much companionate love do you feel for your partner?	How much resentment and hostility do you feel for your partner?	How much depression do you feel about your relationship?
Study 1					
Dating couples					
Men	(70)	3.76	4.03	1.98	2.31
Women	(121)	3.80	4.19	1.98	2.34
Study 2					
Newlyweds (Original interview)					
Men	(53)	3.96	4.38	1.63	1.60
	<i>S.D.</i>	(.80)	(.81)	(.68)	(.74)
Women	(53)	3.90	4.72	1.85	1.85
	<i>S.D.</i>	(.69)	(.54)	(.62)	(.77)
Newlyweds (1 year later)					
Men	(53)	3.77	4.19	1.74	1.74
	<i>S.D.</i>	(.89)	(.71)	(.62)	(.79)
Women	(53)	3.60	4.57	1.93	1.85
	<i>S.D.</i>	(.77)	(.57)	(.83)	(.91)
<i>F</i> -tests <sup>a</sup>					
Main effect: Sex		.66	11.45***	3.29	1.71
Main effect: Time		10.48**	5.22*	1.78	.77
Interaction: Sex × Time		.56	.06	.02	.77

continued

TABLE 12.1  
Continued

Respondents	(N)	How much passionate love do you feel for your partner?	How much companionate love do you feel for your partner?	How much resentment and hostility do you feel for your partner?	How much depression do you feel about your relationship?
Study 3					
Older women					
Women married 33 years or less					
Women's guesses as to their husband's feelings					
	(49)	3.46	4.23	2.57	1.56
	<i>S.D.</i>	(.90)	(.72)	(1.17)	(.73)
Women's feelings					
	(45-46)	3.27	4.24	2.55	1.72
	<i>S.D.</i>	(.91)	(.68)	(1.27)	(.96)
Women married 34 years or more					
Women's guesses as to their husband's feelings					
	(57)	3.15	3.96	2.56	1.58
	<i>S.D.</i>	(1.11)	(.76)	(1.10)	(.83)
Women's feelings					
	(51-54)	2.98	3.98	3.06	2.44
	<i>S.D.</i>	(.97)	(.73)	(1.03)	(.73)
<i>F</i> -tests <sup>b</sup>					
Main effect: Length of marriage		2.53	3.06*	1.03	.54

<sup>a</sup> *d.f.* = 1 and 104.

<sup>b</sup> *d.f.* = 1 and 97.

\*  $p < .05$

\*\*  $p < .01$

\*\*\*  $p < .001$

declines precipitously over time, companionate loves does not; they took it for granted that men and women could remain friends for a lifetime.

The data from Tables 12.1 and 12.2 and Figures 12.1 and 12.2 lead us to a somewhat different conclusion—over time, both passionate love and companionate love seem to remain fairly high. Couples start out loving their partners intensely. Both steady daters and newlyweds express "a great deal" of passionate love and "a great deal" to "a tremendous amount" of companionate love for their partners. Typically, women still report feeling "some" passionate love and "a great deal"

TABLE 12.2  
ANOVA for Ratings of Passionate and Companionate Love

Source	<i>df.</i>	Mean square	<i>F</i>
Newlywed sample			
Main effect: Sex	1	1.60	1.77
Subjects/Sex	104	.90	—
Main effect: Time	1	4.57	13.81***
Interaction: Sex × Time	1	.04	.11
Subjects/Sex × Time	104	.33	—
Main effect: Type of Love	1	44.92	62.13***
Interaction: Sex × Type of Love	1	5.90	8.16***
Subjects/Sex × Type	104	.72	—
Interaction: Time × Type of Love	1	.15	.57
Interaction: Sex × Time × Type of Love	1	.15	.57
Subjects/All	104	.27	—
Older women sample			
Main effect: Time Married	1	3.62	4.07
Subjects/Time	94	.89	—
Main effect: Type of Love	1	46.76	92.55***
Interaction: Time/Type of Love	1	.01	.01
Subjects/All	94	.51	—

\*  $p < .05$ .

\*\*  $p < .01$ .

\*\*\*  $p < .001$ .

of companionate love for their mates even after more than 33 years of marriage.<sup>2</sup> There is some decline, however. Other researchers have assumed that passionate love would decline precipitously while companionate love would remain stable over time. Our results do not support this hypothesis, however. Both passionate love and companionate love appear to decline slightly—and, more important, equally—with time (see Table 12.2).

In the newlywed sample, both passionate and companionate love decline, and decline equally, from Year 1 to Year 2 ( $F = 6.65$ , 1 and 104 *df.*,  $p < .05$ ). There is no evidence, however, that passionate love

<sup>2</sup> It is not really legitimate to compare the Traupmann *et al.* (1981c), the Traupmann (1978), Utne (1978), and the Traupmann and Hatfield (1981b) studies, since the samples were selected in slightly different ways (i.e., total populations versus random samples) and were run at slightly different times, albeit in the same location—Madison, Wisconsin. Although the data from these studies must be interpreted with caution, they are worth considering, since these are the only studies that have explored the evolution of passionate love and companionate love over time.

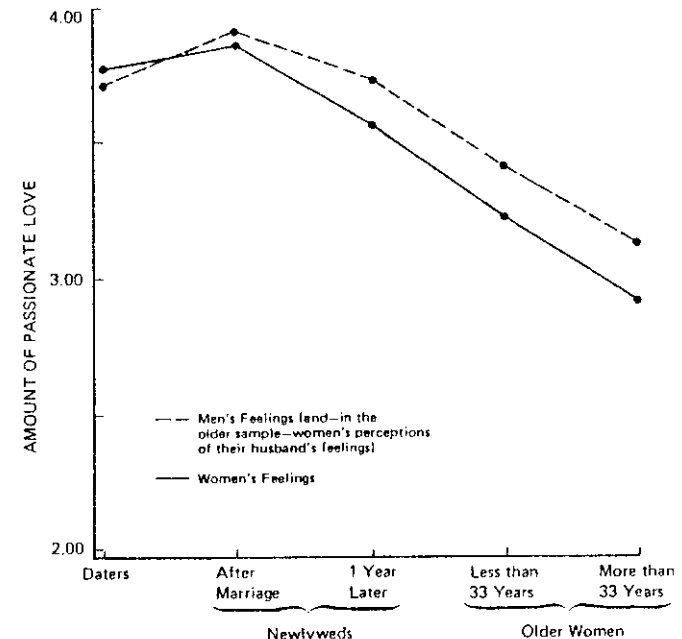


Figure 12.1. Dating couples', newlywed couples', and older women's passionate love for their partners.

declines any more sharply than does companionate love. (Interaction  $F = .89$ , n.s.) (See Hatfield *et al.* [in preparation] for a complete analysis of these data.)

When we compare the feelings of older women, married a relatively short time (1–33 years) with those of older women married a longer time (more than 33 years) we come to exactly the same conclusion. Again, as the means suggest, both passionate love and companionate love do decline slightly from the first to the second quarter-century of marriage ( $F = 4.07$ , 1 and 94 *df.*,  $p < .05$ ). Again, there is no evidence, however, that passionate love declines any more quickly than does companionate love. (Interaction  $F = .01$ , 1 and 94 *df.*, n.s.)<sup>3</sup>

Hatfield and Walster (1978) did not speculate as to how intimates' angry or depressed feelings toward one another change with time. It appears that, over time, couples do become somewhat more angry with

<sup>3</sup> Of course, one could argue that our conclusion that love declines only slightly with time is overly optimistic. The data we are reporting come from couples whose marriages have survived. Couples who cease to love one another may well divorce at unusually high rates and thus fail to appear in our sample.

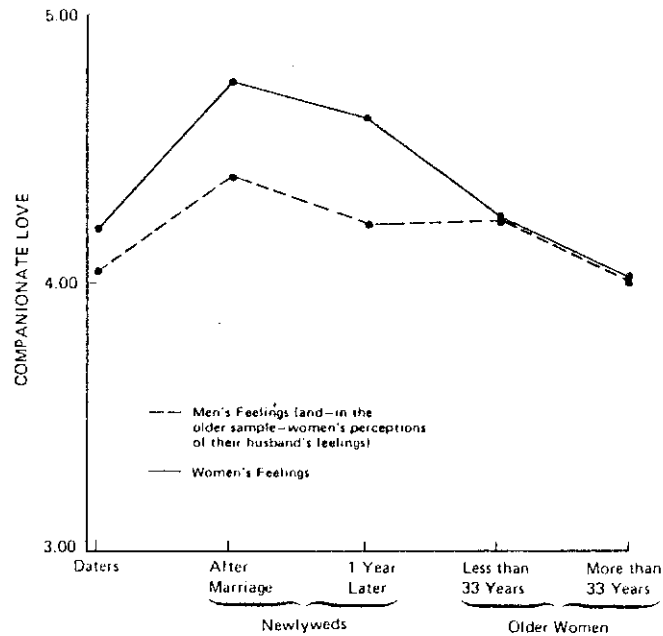


Figure 12.2. Dating couples', newlywed couples', and older women's companionate love for their partners.

one another (see Table 12.1 and Figures 12.3 and 12.4). Newlywed couples report feeling between "none" and "very little" resentment or hostility toward one another. By the time they have been married for 33 years, women express somewhat more anger at their partners—between "very little" and "some."

There is no evidence that there is a significant change in couples' resentment or hostility over time, however. When we look at the newlywed sample, we find that they do not express significantly more anger at one another during the first year of marriage ( $F = 1.78$ , 1 and 104 *d.f.*, *n.s.*). When we examine the feelings of older women, we find no evidence that women's anger at their partner increases very much from the first to the second quarter-century of marriage ( $F = 1.03$ , 1 and 98 *d.f.*, *n.s.*).

The data on feelings of depression suggest that throughout their lives men and women's intimate relationships remain laced with a small amount of depression. Newlywed couples report feelings between "very little" and "some" depression about their relationships. Older women report feeling between "none at all" and "very little" depression. There is no evidence that either newlyweds or older women's depression

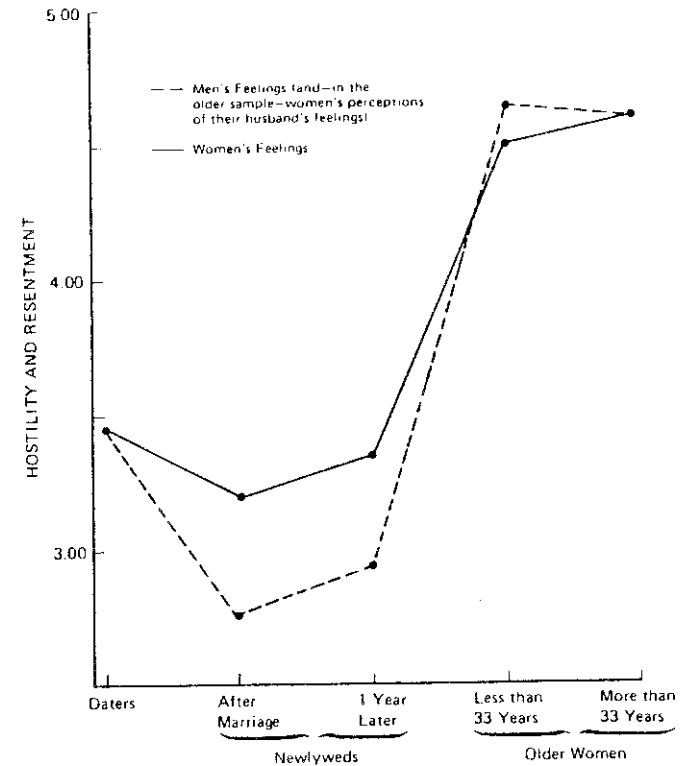


Figure 12.3. Dating couples', newlywed couples', and older women's hostility-resentment toward their partners.

changes significantly over time. ( $F = 1.71$ , 1 and 104 *d.f.* and  $.54$ , 1 and 98 *d.f.*, respectively.)

Overall, the data suggest that social psychologists' assumptions may have been too bleak. Some men and women believe that they stay passionately and companionately in love with their partners throughout their lives. In fact, for most couples, the prospects of love's lasting do seem to be reasonably good. The changes in feelings are small, although statistically significant.

### THE IMPORTANCE OF INTIMACY TO MENTAL AND PHYSICAL HEALTH

Intimacy is generally considered to be a basic human need (see Freud 1922, Maslow 1954). Developmental psychologists have long recognized

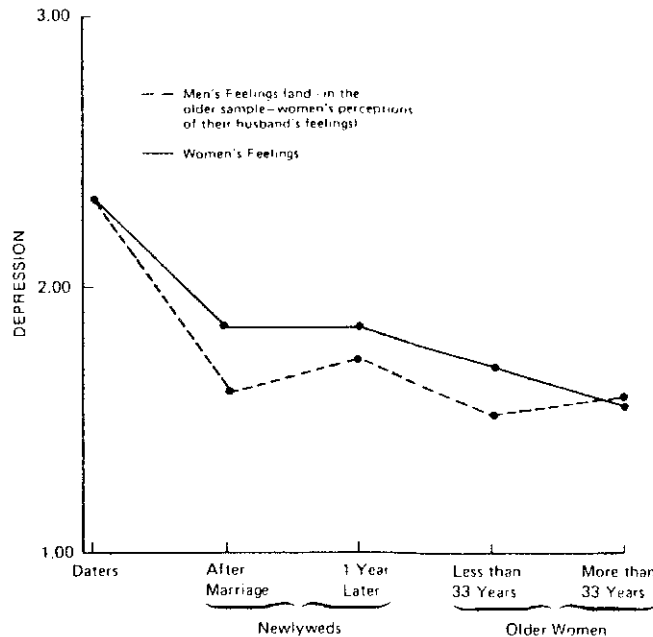


Figure 12.4. Dating couples', newlywed couples', and older women's depression toward their partners.

the importance of love (they use the term *attachment*) in the early development of humans (see Rajecki *et al.* 1978 for a comprehensive review of this literature). Harlow and Harlow's (1965) landmark research with rhesus monkeys demonstrates that contact with a soft, warm mother figure is an essential ingredient in the normal development of primates. Monkeys raised with only wire mothers were fearful, incapable of adequately dealing with stress, and unable to copulate. In the 1950s and 1960s, Bowlby's observations (1969, 1973) of institutionalized infants made it clear that human infants need intimate contact with adults—touching, stroking, hugging, cooing—in order to survive. Infants who were adequately fed but not cuddled became listless, lost weight, and eventually died. It is quite clear, then, that intimate contact is critical for infants and small children.

According to many theorists, one of the major tasks facing adults is the establishment of intimate relations with others (see, for example, Boszormenyi-Nagy 1967, Erikson 1964, Kantor and Lehr 1975, Kaplan 1978). Erikson (1964) has identified the crisis of intimacy versus isolation as the sixth essential stage of human development. Recently, Kaplan (1978) has suggested that adults spend much of their lives resolving the

dilemma between their need for closeness and their need for separateness: "All . . . human love and dialogue is a striving to reconcile our longings to restore the lost bliss or oneness with our equally intense need for separateness and individual selfhood. These reconciliations are called *constancy* [p. 27]." In Kaplan's views, the need for intimacy is part of a larger developmental task—that of achieving a sense of self while establishing close nurturant relations (oneness) with others.

Our view is that the experience of a close, loving, tender relationship should make people feel better emotionally and physically on a day-to-day basis. Intimacy, reflected in passionate love, companionate love, and sexual satisfaction, should have a beneficial effect on men's and women's satisfaction with their intimate relationships and be positively related to their mental health and physical health. Figure 12.5 illustrates these interactions.

(In life, causal relations are inevitably entangled. For example, in this model, sexual satisfaction may improve physical health, but the reverse is probably also true—physical health undoubtedly predisposes or induces people for sexual relations. However, the simplification reflected in Figure 12.5 is a necessary beginning step in the study of an extremely complex phenomenon.)

Is there any evidence that intimacy is critically important for the physical and mental health of older Americans? Some.

Traupmann *et al.* (1981a) provide some evidence that intimacy may have a critical impact on the mental and physical health of older Americans. As part of a multidisciplinary study of aging women, Traupmann *et al.* interviewed a random sample of 240 women living in five areas of the city of Madison, Wisconsin, in June 1978. The women ranged in age from 50 to 82.

Overall, this group was slightly better off than is the typical older American woman. Their median annual income was approximately \$2000 higher than the median income of all older women. The respondents

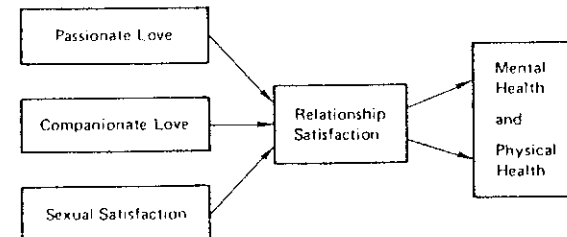


Figure 12.5. Hypothetical relationship between love and mental and physical health: 1. (From Traupmann *et al.* 1981a.)

were very highly educated compared with national averages for women in this age group. (There were about 15 women with master's degrees and three with Ph.D.s in the group of 240.) Most of them (over 75%) reported being in very good health. They were a surprisingly physically active group, with 75% reporting that they get some regular physical exercise every day. About one-third of them were working either part-time or full-time.

The 240 women in the sample were asked to describe the most important person in their lives. If the relationship they described were a sexual one, whether or not it was with their husband, they received the intimacy questions; these are the questions on which the data below are based. Of the 240 women, 106 reported an ongoing sexual relationship. For most of these women, it was with their husband; for a few it was with a spouse equivalent. Demographically, they differed very little from the larger group of 240, except in age. The oldest in the sexually active group was 82.

Traupmann *et al.* (1981a) were interested in the relationship of intimacy and a wide array of other variables to mental and physical health. They proposed a model of this relationship (see Figure 12.6).

The authors assessed the independent variables in a straightforward way: Passionate love and companionate love were assessed as indicated earlier, simply by asking respondents how passionately and companionately they loved their partners. Sexual satisfaction was assessed via two questions: The women were asked how loving and close and how sexually satisfied they felt immediately after a sexual encounter.

Relationship satisfaction was assessed via two questions: Women were asked how satisfied and how happy they were with their relationships.

The authors measured three dependent variables: Satisfaction with life in general, mental health, and physical health. The women's satisfaction with life was assessed via two questions: Women were asked how satisfied and how happy they were with their lives in general. Mental

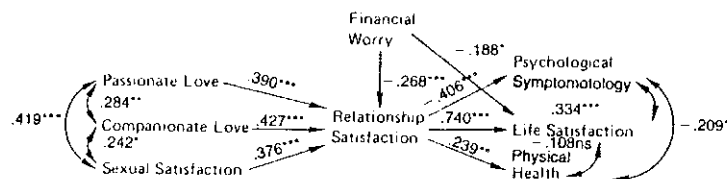


Figure 12.6. Hypothetical relationships between love and mental and physical health: II. (From Traupmann *et al.* 1981a.) Asterisks refer to the following  $p$  values: \* = .05; \*\* = .01; \*\*\* = .001.

health was assessed via a modified version of the Derogatis (1977) SCL-90 Symptoms Check List.<sup>4</sup>

Physical health was assessed by asking women how good their health had been in the preceding year.

Several control variables identified in previous research as important in determining life satisfaction and mental health (see Larson 1978, Pearlin and Johnson 1977)—that is, education, income, respondents' age, spouse's age, and health—were assessed. The authors found only one control variable to be important: financial worry.

## Results

*What are the components of relationship satisfaction?* Passionate love, companionate love, and sexual satisfaction. Traupmann *et al.* found that each of these three components plays an important role in determining the quality of women's close relationships (see Figure 12.6). Passionate love, an intense emotional experience, usually associated with new romance, remains a significant component of older women's intimate lives ( $r = .390, p < .001$ ). Though most of these women have been married for more than 30 years, feelings of passionate love still play a role. Companionate love, a more low-keyed emotion, also appears to contribute significantly to the quality of intimacy ( $r = .427, p < .001$ ). Finally, the sexual satisfaction these women experience with their partner remains a strong, significant component of the overall satisfaction with their intimate relationship ( $r = .376, p < .001$ ). Though about a third of the women refused to answer any questions about their sexuality, those who did felt that sex played a very important role.

*To what extent is intimacy related to psychological well being?* The results suggest that intimacy is an extremely important contributor to psychological well-being. The correlation between relationship satisfaction and psychological well-being was  $-.406 (p < .001)$ . The negative correlation indicates that with an increase in happiness and satisfaction in their relationship, there is a decrease in the number of symptoms of depression, anxiety, and self-consciousness. Thus, as predicted, the quality of intimacy seems to serve as a protection against the depression and anxiety often experienced by middle-aged and older women.

<sup>4</sup> This scale consisted of a symptoms checklist for three of nine Derogatis symptom constructs: Anxiety, Depression, and Interpersonal Sensitivity. It was developed by Dr. Marjorie Klein of the Psychiatry Department at the University of Wisconsin specifically for this research.



The results also suggest that women's satisfaction with their intimate relationship is extremely important to their overall sense of well-being. Satisfaction with one's intimate relationships correlated .74 ( $p < .001$ ) with overall life satisfaction (see Figure 12.6). On the average, women were very satisfied with their intimate relationship ( $X = 7.23$ ) and also with their lives in general ( $X = 7.02$ ).

*To what extent is the satisfaction women experience in their intimate relationship related to physical health?* As can be seen in Figure 12.2, the correlation between how happy they were with their intimate life and how healthy women felt was .239 ( $p < .01$ ). Though the relationship is not so strong as the others, it is remarkably high, considering the many other factors that affect physical health in later life.<sup>5</sup>

Previous literature in aging suggested that the existence of an intimate other is critically important in securing mental and physical health. These data suggest that not merely the existence of an intimate relationship, but the quality of that relationship is an important determinant of mental and physical well-being.

#### Other Evidence on the Importance of Intimacy

The data from Traupmann *et al.* (1981a) suggest that intimacy is a major concern of adults throughout their lives. Other evidence from several sources buttresses that contention.

Recently, researchers have begun to accumulate additional evidence that suggests that intimacy and mental health may be linked. For example, Larson (1978) and George (1978) found that marriage is critically important in helping older Americans maintain a feeling of subjective well-being. Married people have a lower rate of mental illness than do single people (see Briscoe and Smith 1974, Leff *et al.* 1970, Troll *et al.* 1979).

Brown *et al.* (1975) found that a woman who had a husband or boyfriend who acted as a confidant found it far easier to weather a traumatic event. After an intensely stressful event, only 4% of women having an intimate confidant became psychologically disturbed; 38% of women without confidants did. (Similar results were reported by Lowenthal and Havens 1968.) The loss of a marital partner makes one particularly susceptible to problems. Maddison and Viola (1968), Marris (1958), and

<sup>5</sup> As we indicated earlier, these are correlational data. We think it is most likely that intimacy helps maintain mental and physical health. It is of course possible that the relationship works the opposite way—that it is necessary to have good mental and physical health in order to sustain an intimate relationship.

Parkes (1964) found that the newly bereaved were especially likely to have mental problems. A few researchers have suggested that intimacy and mental health might be more strongly correlated for men than for women (see Bernard 1972, Gove 1972).

There is also some evidence that intimacy contributes to the perceived quality of life. People who have someone to share their ideas and feelings with, someone to help them deal with day-to-day problems, are happier than those who do not (see Binstock and Shanas 1976, Birren and Schaie 1977, Cavan 1973, McKain 1969). In a recent review article, Brown and Felton (1978) conclude that a network of close interpersonal ties promotes general life satisfaction and a sense of belonging, worth, and identity. They, too, argue that it is the quality of the individual's interpersonal relationships that is intimately related to well-being.

Recently, researchers have begun to collect data that indicate that intimacy may be related to physical health and longevity. In particular, there appear to be connections between intimacy and the ability to handle stress. According to health statistics, married people are less vulnerable to a long list of diseases and physically disabling conditions than are their peers (Butler 1979, Carter and Glick 1976, Eisenberg 1979, Lynch 1977, National Center for Health Statistics 1976, Somers 1979, Syme 1974). It has repeatedly been observed that those who are married have lower mortality rates than those who are single, widowed, or divorced (Ortmeyer 1974, Price *et al.* 1971).

A supportive marriage seems to increase ability to cope with stressful life events (such as job loss) and to help one avoid psychosomatic symptoms (Cobb 1976, Gore 1978, Kaplan *et al.* 1977, Lowenthal *et al.* 1967, Weiss 1977). In one study of the health consequences of job loss due to factory shutdown, Gore (1978) found that men who had the emotional support of their wives while unemployed had lower cholesterol levels and fewer illness symptoms than did their peers.

The loss of a marital partner is an especially threatening event. Widowhood is tightly linked to increased morbidity and mortality rates. Maddison and Viola (1968), Marris (1958), and Parkes (1964) found that widows have an unusually large number of complaints about their health—especially in the first year following their bereavement.

There is substantial evidence that surviving spouses are at increased risk for death from a variety of diseases (see Berkman and Syme 1979, Clayton 1974, Cox and Ford 1964, Gerber *et al.* 1975, Jacobs and Ostfeld 1977, Kraus and Lillienfeld 1959, Maddison and Viola 1968, Marris 1958, McNeil 1973, Parkes 1964, Rees and Lutkin 1967, Ward 1976, Young *et al.* 1963).

For example, Parkes (1964) found that 213 of 4486 widowers, 55 years of age and older, died within the first 6 months of their bereavement.

This is 40% above the expected rate for that age group. After 6 months, the rates gradually fell back to normal levels. Jacobs and Ostfeld (1977) report that the bereaved are at risk for coronary heart disease and cirrhosis.

In a recent review of the literature on bereavement, Jacobs and Ostfeld (1977) report that, initially, men are harder hit than are women by a spouse's death. However, men remain at risk for only 6 months; women for 2 years. The degree of risk for widowed persons is aggravated by preexisting health problems.

Satariano and Syme (1981) speculate that the stress of bereavement may elevate the risk of death in several ways. It may lead to depression, and the depressed spouse may then neglect his or her own health practices and/or health condition (Belloc 1973, McGlone and Kick 1978). In extreme cases, the depression may lead to drug abuse and/or suicide (Schuckit 1977, Sendbuehler and Goldstein 1977). The stress also may lead to dysfunctions in neuroendocrine balance and, in turn, a reduction in immunity to disease (Timiras 1972).

Haynes *et al.* (1978) found that, among older men and women, marital dissatisfaction and/or marital disagreement were associated with coronary heart disease.

Of course, these data are correlational and must not be interpreted as establishing a casual relationship. Nevertheless, they do suggest that intimacy may be a critical factor in people's lives.

## CONCLUSION

In this chapter we reviewed research that indicates that, although for a few couples love does last a lifetime, for most couples passionate and companionate love continue to decline with the passage of time. We then reviewed evidence from a variety of sources that suggests that intimacy may well be critically important in fostering mental and physical health.

Of course, any collection of research always stimulates more questions than it answers. What kinds of people end up with a good relationship? Why are intimacy and mental and physical health so apparently tightly linked? Are passionate and companionate love of differential importance at different stages in a relationship? How important is sex? Does intimacy promote health, or vice versa? How does intimacy promote health? Do those with mates have happier lives? Do they encounter less stress than do others, or is it merely that they have a ready source of help in times of trouble? Is it important to have a mate or would a good neighbor do as well? Are the changes in couples' love for one another over time

inevitable consequences of age or simply a reflection of historical change in the importance of love versus practicality as the basis of marriage?

We have answered a few questions, but more remain to be explored.

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