Older Couples and Health—the dynamics of spousal relationships in very late life

A research project conducted by Dr Ruth Walker and Professor Mary Luszcz of the Flinders Centre for Ageing Studies, Flinders University with support from the Australian Research Council (Linkage—LP0669272) and partner organisations: Office for the Ageing, ECH, Alzheimer’s SA and Relationships Australia SA

Context

Late-life husband and wife relationships are increasingly recognised as an important factor in promoting health, particularly in terms of the health, social, emotional, financial and practical needs of older people. Knowledge of these dynamics and how they affect both members of a couple remains scarce.

This research aimed to provide an in-depth examination of how couples from the age of 70 to well into their 90s negotiate the challenges of ageing. It contributes directly to the national research priority of Ageing Well, Ageing Productively. The participants are drawn from the Australian Longitudinal Study of Ageing (ALSA), arguably the only national study that enables examination of the changing dynamics of couple relationships, over a period of more than 15 years. Outcomes include: understanding how the physical or mental status of one member of the couple affects the other; how widowhood impacts on the surviving partner; and, how environmental, socio-demographic, and individual differences factors moderate these relationships.

Based on data from 565 couples who were part of the ALSA at baseline, and using a combination of quantitative and qualitative research methods, the project had three specific aims, to explore:

- dynamics of how having a partner adds to, or detracts from,
- factors that contribute to the longevity of marriages
- how attitudes to where older couples currently live change according to changes in health status and/or socio-environmental factors.

Key points

- Very little is known about the dynamics of long-term marriage.
- Older spouses can influence one another’s well-being over time. In relation to morale, wives are more influential, however in the case of cognitive function, husbands are more influential.
- Teamwork, shared interests, love and attraction are the key facets that older couples view as important in sustaining long-term marriage. Having satisfying social relationships with children and friends are also found to be related to higher levels of marital satisfaction.
- Demands and pressures relating to caring for a spouse and other relatives can be associated with poor well-being in older women, as demonstrated by poor sleep.
- Most older couples intend to, and end up, staying in their own homes, with widowhood the most significant precursor to moving.

“Marriage creates a world of shared meaning and experience from which it is difficult to disengage...The permanent presence of a spouse, which might evoke negative as much as positive affect, is nonetheless vital in creating a secure and predictable environment” (Jerrome, 1993:246)
Findings

The Evidence Base—review of the existing literature

What do we know about marriage in later life? The first part of this research project involved a systematic review of the literature to identify and evaluate research that has focused explicitly on the dynamics of the marital relationship in late life. We focused only on those studies which included data from both spouses, and excluded those that had predominantly a ‘caregiving’ focus as we were more interested in those studies that examined the broader relational aspects of the marriage.

45 studies were identified and reviewed. These studies were grouped into three broad thematic areas:

- marital relations and satisfaction:
  The issues found to affect marital relations and satisfaction in late-life included equality of roles, having adequate communication, and transitions to living apart.

- similarities in emotional states or physical health:
  There was strong evidence for couple concordance in depression, that marital relationships affect ill-health, longevity and recovery from illness, and that conversely ill-health impacts on the marriage itself.

- the interplay between marital quality and wellbeing:
  This research suggests important gender differences in the impact of marital dynamics on health, with wives well-being more affected by marital quality.

Well-being: morale & cognition

There is growing evidence that husbands’ and wives’ emotional well-being is related, and in some instances can influence the other spouse. We aimed to determine if such an effect could be found over the long term in older couples’ level of morale and cognitive function.

We conducted two separate studies, modelling 11-year longitudinal data of around 300 couples from ALSA to explore whether levels of well-being (morale and cognition respectively) in one partner predicted change in that domain in the other partner.

Spousal interrelations emerged and were found to be gender-specific. In the case of morale, wives were more influential in driving change in husbands in that wives initial levels of morale were found to predict subsequent change in husbands’ morale. In contrast, for cognitive functioning, husbands’ were found to predict change in wives, but not the reverse.

Marital Satisfaction

We sought to gain insight into the factors that contribute to longevity of marriages, both at an interpersonal and broader social contextual level. To do this, we conducted separate semi-structured interviews with 40 husbands and 40 wives (mean age 76 years) who had been married, on average, for 52 years.

Firstly, couples were asked about the factors they believe contribute to the longevity of their marriage. Secondly, we measured whether satisfaction with social networks (confidant, children, other relatives and friends) influenced marital satisfaction.

Love and attraction, shared interests, compatibility and working together as a team were most commonly mentioned by older couples as contributing to the longevity of their marriage.

Being satisfied with friends and children social networks (but not other relatives) was found to predict marital satisfaction.

This research highlights that both interpersonal and broader social contexts might both be important in understanding the ‘success’ of long-term marriages.
Older Women & Sleep

Older women are over-represented in terms of sleep difficulties and the use of sleep medication, both of which are linked to poor well-being.

Recent research has suggested that understanding and addressing the high prevalence of sleep difficulties in older women requires going beyond a purely physiological focus to address the role of social contextual pressures and demands.

Furthermore, difficulties with sleep offer an ideal opportunity to explore the everyday lives of older women, and to pick up on the way that their role as a spouse may impact on sleep as an indicator of broader well-being.

To do this, we conducted in-depth interviews with 12 community-dwelling oldest-old women (average age 86 years) in the ALSA, who currently experience sleep difficulties.

When asked about how sleep difficulties had evolved over their life course, five themes emerged. These were: significant life stages, contingent lives, daily concerns in relation to ageing, invisibility and stigma.

For most women, sleep difficulties were shaped by demands associated with spousal and family relationships at different times in the life course.

Day-to-day facets related to ageing and the transition to widowhood can also be associated with considerable anxiety and sleep difficulty.

Housing Intentions and Transitions

There is little research examining changes in living arrangements amongst older couples and the impact of transitions within the couple relationship over time.

Data from 565 couples in ALSA were examined to determine how intentions to move were associated with subsequent residential location over a period of 2 years. Of particular importance was the transition to widowhood, changes in health status and contextual influences such as socioeconomic status and social support.

Overall, there was considerable concurrence in terms of husbands and wives’ intentions to move, with most not planning to move. In most cases couples’ intentions matched subsequent outcomes, e.g. they either planned to move and moved or were not considering moving and stayed in their current residence.

The group whose intentions were not met tended to be somewhat older, widowed, and to have moved into residential care. Socioeconomic characteristics and availability of social support did not tend to play a role in whether residential objectives were met.

POLICY IMPLICATIONS

- To ensure that governments are responsive to the needs of older adults, healthy ageing policies need to acknowledge the marital context as an important factor in terms of well-being.
- The burden of caring and the transition to widowhood are key factors affecting the well-being of older spouses, wives in particular. Developing a strategy for, and greater awareness of, the pressures facing older women should be a priority for government and social service providers.
- Older couples wish to remain in their own homes, however widowhood tends to represent a significant precursor to moving. Government policy needs to place a high priority on ensuring support (financial, emotional, practical) to older widow(er)s to prevent unnecessary entry to residential care.
- The late-life marital relationship demonstrates remarkable resilience and represents a vital partnership in old age. Such relationships need to be appreciated and supported, at a community level but also by government services and policy.

- Strategies for enhancing healthy marriages in younger couples could adopt older couples as role models to prevent increasing rates of divorce and marital breakdown.
References: