NUANCES OF INTERPERSONAL RELATIONSHIPS INFLUENCE OUR HEALTH, NEW STUDY SHOWS

Ambivalent relationships raise our blood pressure

Anyone who has ever pounded a wall or wolfed down a gallon of ice cream over a frustrating relationship would agree: the positive health effects of socializing have a flip side. Recognizing that not all relationships are created equal, a Brigham Young University professor went to great lengths to measure the health effect of relationships based on their varying quality.

Julianne Holt-Lunstad, an assistant professor of psychology, and colleagues found that dealing with those for whom we have mixed or conflicted feelings can raise our blood pressure. In fact, study participants’ blood pressure was higher in those situations than when interacting with people for whom they have clearly negative feelings.

“The conventional wisdom is that stress is bad for our health, and that personal relationships are good because social support helps us deal with our stress,” Holt-Lunstad said. “But some relationships can cause interpersonal stress, so we can’t just lump all our relationships together. Most people can think of someone they might feel ambivalent toward — a mother you love very much but who is also overbearing or critical, or a good friend who’s lots of fun yet very competitive.”

Holt-Lunstad reports her findings in the new issue of the American Psychological Association journal Health Psychology. She was assisted by four co-authors at the University of Utah.

Holt-Lunstad arranged for 102 study subjects to wear portable blood pressure monitors, mostly concealed by their clothes, for three days. The participants pressed a button about five minutes into every social interaction to record their blood pressure, which was logged by the electronic monitors. They also kept detailed diaries of those with whom they dealt each day and answered questions about their relationships. The researchers took extra steps to account for the relatively few times participants forgot to measure their blood pressure or record an interaction.

After analyzing the results and accounting for factors like physical activity and diet, the researchers found that in relationships, mixed feelings seem to be more unsettling, at least as related to blood pressure, than outright hostility.

“When you’re interacting with those you feel aversive or negative toward, these people are predictable and you will either avoid them or you can discount them because you know what to expect from them,” Holt-Lunstad explained. “But for a person you feel both positive and negative toward, there could be hope and an expectation for something positive, and then, when you don’t get the support you wanted, this can be very distressing.”

At the same time, the study results reaffirmed the sense of security we tend to find among family members, said Kathleen C. Light, professor and director of the Stress and Health Research Program at the University of North Carolina School of Medicine.

“This is an important contribution to the field of health psychology because it adds to growing literature on the health benefits associated with close family ties,” Light said. “The investigators used a sophisticated approach and found that not only do people tend to have more frequent positive interactions with family members and spouses, but even when they do have negative interactions with relatives, the blood pressure levels do not rise as much as when negative interactions occur with other people. This may be one reason why people with strong family ties live longer and experience better quality of life.”

Relationships have been shown to have a positive influence on the most common cause of death in most industrialized countries — coronary heart disease. One way relationships may affect heart disease is through their impact on blood pressure. The most accurate measurement of blood pressure is taken while a person is going through his or her daily life. Until Holt-Lunstad’s study, little research has examined whether characteristics of social relationships affect this ambulatory blood pressure level.

“Prior research on social relationships and health has primarily looked at blood pressure in a laboratory setting,” Holt-Lunstad said. “But in our study, they were out in their everyday lives, interacting with people; and we recorded their blood pressure while they were doing it. This methodology affords such nice naturalism and realism and in prior research has been shown to be highly predictive of clinical outcomes.”

Because of the extra precision of the study, Holt-Lunstad can look beyond general axioms that declare social relationships are healthy and negative relationships raise blood pressure in the lab.
or clinic. By recognizing nuance in the relationships, people can begin to evaluate their social networks to consider who might be most beneficial to approach in various circumstances.

"We might know some people who are unreliable in some situations but who are there for us in others," said Holt-Lunstad. "We can be strategic about our coping. If we can avoid seeking support from them in unfavorable circumstances and instead seek them out in situations in which we can count on them, or seek support from someone who is more consistently helpful or understanding, we might be better off."

Research continues in the effort to offer more clues about how we can better understand our relationships and other aspects of our everyday lives to better our long-term health.

"Psychology is really gaining in influence now that our leading causes of death have a high behavioral component," said Holt-Lunstad. "Many of them, like heart disease, develop slowly over time and are chronic, so people need to adjust their lifestyles to prevent and deal with those illnesses."

Co-authors on the study are Bert N. Uchino, Timothy W. Smith, Chrisana B. Cerny and Jill B. Nealey-Moore, all of the Department of Psychology and Health Psychology Program at the University of Utah.

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**PARTICIPANTS NEEDED FOR NEW STUDY**

Professor Julianne Holt-Lunstad is conducting a new health marriage study that measure two physiological processes that impact health: blood pressure and salivary cortisol. Participants will be asked to wear a portable blood pressure monitor for 24 hours and take four saliva samples while going about their normal daily activities. Participants will need to come into a laboratory at BYU twice – at the beginning of the study and at the end – and to complete two questionnaires.

Participants can be married or single. Married couples must be legally married and both members of the couple must be willing to participate. Participants must be between the ages of 25 and 70 years old and fluent in English. Each participant will be compensated $60.

Those interested in participating should contact Professor Holt-Lunstad at 801-422-3522 or by e-mail at julianne.holt-lunstad@byu.edu.

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**UPDATE ON THE JOSEPH F. SMITH BUILDING CONSTRUCTION**

Construction on the new five-level Joseph F. Smith Building on the Brigham Young University campus is moving forward quickly. This building was planned and designed to replace the Smith Family Living Center. It will be the new home of much of the College of Humanities (including the Humanities Research Center, the Center for Language Studies, and the university’s language departments), units from the College of Family, Home and Social Sciences, the School of Family Life, the Family Studies Center, Women’s Research Center, and child and family studies labs.

Heating systems and window installations have begun on the south end of the building. Also, brick masonry (which started on the south end) is three-fourths complete.

The contractor is ahead of schedule and expects to complete construction in August or September of 2004. Inside the Smith Building will be a theater, a large auditorium, 27 classrooms, and 401 faculty and administrative offices. There will be a large, three-level parking garage beneath the building.

This building’s construction was paid for through private donations.