2012-03-25

Does This Marriage Make Me Look Fat? Marital Quality as a Predictor of Body Weight, Activity Level, and Eating Habits

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Schade, Lori C.; Sandberg, Jonathan; and Busby, Dean, "Does This Marriage Make Me Look Fat? Marital Quality as a Predictor of Body Weight, Activity Level, and Eating Habits" (2012). FHSS Mentored Research Conference. 38.
https://scholarsarchive.byu.edu/fhssconference_studentpub/38

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Research has established a link between marital quality and health (Umberson, Williams, Powers, Liu & Needham, 2006). Specifically, marital interaction studies have documented that conflictual interactions, which over time are associated with decreased marital quality, have direct effects on cardiovascular, endocrine, immune, and neurosensory systems (Kiecolt-Glaser & Newton, 2001). Weight, activity level, and eating habits are frequently associated with health indicators. Body weight in early adulthood is specifically associated with a longitudinal health trajectory (Zajacova & Burgard, 2010). However, there is a paucity of research related to marital quality and these specific factors. This study is an exploratory attempt to clarify links between marital quality and specific health indicators of weight as a problem in the marriage, activity level, and eating habits.

Participants:
- N = 374 Married Couples
- Male mean age 38.09, SD 12.44; Female mean age 35.82, SD = 11.77
- Couples self-selected to participate in the Relationship Evaluation (RELATE) questionnaire
- Male ethnicity was Caucasian (81.8%), African/Black (6.7%), Latino (4.5%), Asian (1.9%), Mixed/Biracial (1.6%); Native American (5%) and Other (5%)
- Male ethnicity was Caucasian (82.1%), African/Black (5.9%), Latino (3.5%), Asian (4.0%), Mixed/Biracial (2.1%); and Native American (8%) (3.9%)
- 93% of males reported some college; 96% of females had some college
- Male religious affiliations were Latter-day Saint/Mormon (28.9%), Protestant (21.4%), none (17.1%), Catholic (13.8%), Jewish (4.8%); Islamic (1.9%); Buddhist (5%); Hindu (3%); and Other (1.1%)
- Female religious affiliations were Latter-day Saint/Mormon (28.3%); Protestant (24.6%); Catholic (15.8%); None (12.8%); Jewish (5.3%); Buddhist (5%); Hindu (3%); and Other (1.1%)

Procedures:
- Couples answered questions on a Likert-type scale for questions related to marital satisfaction, stability, and problem areas, and the scales were combined to form one latent variable for marital quality
- Couples answered questions about whether or not weight was a problem in the relationship, and self and partner scores were combined into one latent variable for weight as a problem in the relationship
- For activity level, higher scores indicated higher activity level
- For eating habits, higher scores indicated being more careful about eating habits
- Age, education level and years married were added as control variables
- Structural equation model was evaluated using AMOS (Arbuckle, 2008)

Results indicate that the higher the wife’s relationship quality, the more her weight is perceived to be a problem in the relationship. It is likely that as women experience greater marital quality, they are more invested in the relationship and increasingly concerned about keeping their weight at healthy levels. For male relationship quality, the effect was the opposite. As male relationship quality increased, the perception of weight as a problem for both themselves and their wives decreased. It is possible that as husbands experience greater levels of relationship quality, they are not concerned about the specifics of weight and are able to overlook this area as a problem in the relationship.

The positive relationship between female relationship quality and husband activity level may indicate that husbands with happy wives are more likely to be active. The negative relationship between husband relationship satisfaction and activity level may indicate that as they are unhappy in their relationships, they are less motivated to be active.

Clinicians may use this information to increase sensitivity about assessing for specific health factors in the relationship. Since marital quality is associated with activity level, it may affect weight, which may account for some of the explanation for why weight is reported to be less problematic in higher quality relationships for men. The different findings between men and women for weight as a problem may be a topic for explicit discussion between couples in marital therapy. Differing attitudes about specific health and weight issues may require negotiation.

References
- Arbuckle, J. L. (2008). Amos 17.0 user’s guide. Chicago, IL: SPSS.