Relationship Quality among Older Cohabitors: A Comparison to Remarrieds

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## Abstract

Later life marital patterns have undergone several shifts over the past couple of decades. Among the changes is the rapid growth of cohabiting unions in the second half of life. Despite the increase in older adult cohabitation, research on this population has been slow to keep up. Using data from the 2010 and 2012 Health and Retirement Study, I investigate both the positive and negative relationship quality of cohabitors relative to their remarried counterparts. Relationship quality is especially important because high quality relationships offer a number of benefits for well-being, whereas poor quality relationships often are detrimental. Across both positive and negative relationship quality, I found no differences between cohabiting and remarried individuals. These findings suggest that cohabiting unions and remarriages among older adults are comparable and that cohabitation in later life may operate as an alternative to remarriage. Cohabitation among older adults has grown dramatically over the past few decades. Since 2000, the number of cohabitors aged 50 and older has more than quadrupled from about 1 million to greater than 4 million (Brown & Wright, 2017; Stepler, 2017). The uptick in gray divorce in the last couple of decades (Brown & Lin, 2012; Kennedy & Ruggles, 2014) coupled with a declining remarriage rate (Brown & Lin, 2013; Sweeney, 2010), suggests that an even greater proportion of older adults will be unmarried and eligible to cohabit in the future. Moreover, evidence indicates that the baby boomers hold more favorable attitudes regarding cohabitation than older cohorts (Brown & Wright, 2016). Therefore, demographic and attitudinal changes among older adults signal that cohabitation later in life will likely continue to become more prevalent, especially because an increasing share of older persons are unmarried and eligible to cohabit (Cooney & Dunne, 2001; Lin & Brown, 2012; Sassler, 2010).

Prior research examining relationship quality among older cohabitors and remarrieds has noted few differences between the groups. It remains unclear whether cohabitors have similar levels of relationship quality as their remarried counterparts because prior studies are limited in that they relied on data that are now old and preceded the rise in older adult cohabitation (King & Scott, 2005) or have used more recent data, but included a small sample size of cohabitors (Brown & Kawamura, 2010). Thus, it is possible that the paucity of differences found between cohabitors and remarrieds on relationship quality could be due low statistical power. Overall, we lack a good understanding as to whether older cohabitors enjoy similar levels of relationship quality as their remarried counterparts.

Using data from the 2010 and 2012 Health and Retirement Study, I assess both positive and negative relationship quality among older cohabitors and remarrieds. With mounting evidence that cohabitation functions as a long-term alternative to marriage in later life (Brown, Bulanda, & Lee, 2012; King & Scott, 2005; Vespa, 2012; Wright & Brown, 2017), relationship quality may be similar for cohabiting and remarried older adults. This study builds on prior scholarship on relationship quality among later life cohabitors by using a large, recent sample of older adults to examine whether relationship quality is similar for older cohabitors and remarrieds. With ongoing family changes in older adulthood, it is essential to develop greater insight into later life nonmarital unions and how they function.

### Background

Marriage and family patterns have rapidly shifted among older adults (i.e., aged 50 and older), including an increasing share who are unmarried (Kreider & Ellis, 2011). Despite the growing proportion of unmarrieds, many older people are not unpartnered, rather they form nonmarital unions (Calasanti & Kiecolt, 2007). Today, almost one of every four cohabiting couples has at least one partner who is aged 50 or older (U.S. Census Bureau, 2014). Cohabitation is growing faster among those in the second half of life than for younger persons (Brown & Wright, 2017). Recently, Stepler (2017) reported that 4 million adults aged 50 and older were cohabiting, a large increase from 2.3 million just a decade prior. Indeed, the growth of later life cohabitation shows few signs of slowing down, especially in light of evidence that baby boomers hold more supportive attitudes regarding cohabitation than older cohorts (Brown & Wright, 2016). Taken together, these trends underscore the importance of developing a greater understanding of cohabiting relationships in later life.

Intimate relationships are a key source of social support in older adulthood (Carstensen, Fung, & Charles, 2003), and thus, play an important role in the well-being of adults. Older adults involved in intimate relationships, especially marriages, tend to enjoy physical and psychological health benefits relative to those who are unpartnered (Carr & Springer, 2010). Prior research suggests, however, that many of the benefits of intimate partnerships depend on the quality of the relationship. On one hand, high marital quality enhances the health benefits accrued from marriage (Kiecolt-Glaser & Newton, 2001). On the other hand, relationships of poorer quality may actually have no health benefits or amplify declining health (Umberson, Williams, Powers, Liu, & Needham, 2006; Zhang, Liu, & Yu, 2016). These links between relationship quality and well-being appear to be particularly salient among older adults (Liu & Waite, 2014; Umberson et al., 2006), highlighting the need for research on relationship quality among older cohabitors.

Yet, to my knowledge, only two studies have investigated relationship quality among older adults in cohabiting unions, despite the surge in later life cohabitation. Although they were less likely to have plans to marry, the relationship quality of older cohabitors surpassed that of younger adults in cohabiting relationships (King & Scott, 2005). More recently, Brown and Kawamura (2010) reported no significant differences between cohabiting and remarried older adults on several dimensions of relationship quality. The only significant difference across the two groups was on relationship happiness, in which remarried individuals were more likely than cohabitors to indicate having very happy relationships.

These prior studies on relationship quality in later life cohabiting unions have a few key limitations. The National Survey of Families and Households (NSFH) data examined by King and Scott (2005) are now dated, having been collected in the late 1980s and early 1990s, preceding the recent growth of cohabitation in later life. Moreover, their study offered a portrait of relationship quality of older cohabitors relative to younger cohabitors, providing little empirical evidence of how older cohabitors compared to married persons in their same age group. The study by Brown and Kawamura (2010) utilized more recent data from the 2005-2006 National Social Life, Health, and Aging Project (NSHAP), but contained a small sample of only

54 cohabitors. It is possible that their findings of few significant differences in relationship quality between cohabitors and remarrieds is due to a lack of statistical power. However, there are theoretical reasons to expect that cohabitation and remarriage are comparable in terms of relationship quality.

### Later Life Cohabitation as an Alternative to Marriage

A large body of literature has focused on the role of cohabitation in the family life course to appraise whether cohabitation serves as a prelude to marriage, alternative to singlehood, or alternative to marriage. There is increasing evidence that later life cohabitation operates as an alternative to marriage (Brown & Wright, 2017; King & Scott, 2005). As previously noted, older cohabitors and remarrieds appeared to have similar levels of relationship quality across several dimensions, although this evidence is equivocal due to small sample size (Brown & Kawamura, 2010). Moreover, cohabiting relationships among older adults tend to be more stable than those of younger adults (King & Scott, 2005), with more recent data indicating that the average duration of older adult cohabiting relationships is almost ten years (Brown et al., 2012). Most cohabiting unions in later life do not transition to marriage. Rather, the modal pathway out of the relationship is through the death of a partner (Brown et al., 2012). Older cohabitors also appear to have comparable levels of psychological well-being as their married counterparts (Wright & Brown, 2017). In short, mounting evidence suggests that cohabitation may be akin to remarriage in later life and that cohabiting unions operate as an alternative to marriage. It is likely, therefore, that cohabitors enjoy many of the benefits from their relationships that marriage affords to remarried individuals. Thus, given these similarities between the two union types, we could anticipate no significant differences in relationship quality for older cohabitors and remarrieds. Profile Differences of Older Cohabitors and Remarrieds

Differences in the profiles of older cohabitors and remarrieds suggest remarried older adults may enjoy higher levels of relationship quality than their cohabiting counterparts. However, many of these profile characteristics are associated with relationship quality and could explain any observed differences between the groups. Remarried older adults tend to be demographically and economically advantaged in comparison to cohabitors (Brown, Lee, & Bulanda, 2006; Brown & Wright, 2017). Remarried adults are older than cohabiting individuals, on average (Brown & Wright, 2017), and age is positively linked to relationship quality (Umberson, Williams, Powers, Chen, & Campbell, 2005). A higher proportion of older cohabitors than remarrieds are racial or ethnic minorities (Brown et al. 2006; Brown & Wright, 2017). Among married older adults, Whites tend to report higher relationship quality than Blacks (Bulanda & Brown, 2007; Bulanda, 2011), though the association between race/ethnicity and relationship quality among older cohabitors is unclear.

Older adults in cohabiting relationships also tend to be economically disadvantaged compared to the remarried. In terms of education, more than one-quarter of remarrieds have at least a college education, compared to about one-fifth of cohabitors (Wright & Brown, 2017). Similarly, remarrieds are more likely to own their homes than cohabitors. Likewise, the remarried have higher household incomes, on average, and are less likely to be below the poverty line than their cohabiting counterparts (Brown et al., 2006; Brown & Wright, 2017). Prior research has shown income to be positively associated with relationship quality, particularly for men (Bulanda, 2011; Rogers & DeBoer, 2001). In short, the economic disadvantages experienced by cohabitors, relative to the remarried, may contribute to greater relationship stress and lower relationship quality among cohabitors. With many of the demographic and economic factors on which cohabitors and remarrieds differ being associated

with relationship quality, I anticipate that holding these variables constant will explain any significant differences between cohabitors and remarrieds on relationship quality.

## The Current Study

In the current investigation, I use data from a nationally representative sample of adults aged 50 and older to assess both positive and negative relationship quality among older cohabitors and remarrieds. This study is important for several reasons. With the aging of the U.S. population and an increasing proportion of unmarried older adults, it is likely that the growth of later life cohabitation over the past few decades will continue to accelerate in the future (Brown & Wright, 2017; Cooney & Dunne, 2001). As the share of older cohabitors expands, it is essential to develop a greater understanding of the meaning of cohabitation and to further decipher how it compares to remarriage. Also, relationship quality often plays a key role in the association between union status and well-being. High quality relationships offer several benefits for well-being, whereas poor quality relationships may be detrimental (Umberson et al., 2006; Zhang et al., 2016). Expanding our knowledge of relationship quality among cohabiting older adults is especially necessary because of its crucial connection to health and well-being.

I anticipate few differences in relationship quality between cohabitors and remarrieds. Although there is important demographic and economic variation in the profiles of older cohabitors and remarrieds (Wright & Brown, 2017), many of these factors are associated with relationship quality. Any difference in relationship quality by union type, therefore, may be a function of demographic characteristics and economic resources. Once these variables are accounted for, I expect relationship quality between cohabitors and remarrieds will be comparable. Moreover, mounting evidence suggests that later life cohabitation operates as an alternative to marriage (Brown et al., 2012; Brown & Wright, 2017; King & Scott, 2005) and that cohabitors may accrue many of the same benefits married persons enjoy from their relationships (Wright & Brown, 2017). Thus, there could be no significant differences in relationship quality between cohabiting and remarried older adults.

The analyses include a number of demographic, economic, health, and social support indicators that are associated with union type and relationship quality. Among the demographic characteristics are gender, race/ethnicity, age, and union duration. Both cohabitation and remarriage are more common among older men than older women (Brown et al., 2006; Brown & Wright, 2017), and men report higher levels of relationship quality than women (Brown & Kawamura, 2010; Bulanda, 2011; Umberson et al. 2005). A higher proportion of remarried than cohabiting older adults are White (Brown & Wright, 2017). Prior research has found higher levels of marital quality among older Whites than Blacks (Bulanda, 2011). Cohabiting older adults are younger, on average, than their remarried counterparts (Brown et al., 2006; Brown & Wright, 2017). Age has a positive association with marital quality (Umberson et al. 2005). I also include union duration, which is often longer among remarrieds than cohabitors (Brown & Kawamura, 2010), and is negatively associated with marital quality (Umberson et al., 2005; VanLaningham, Johnson, & Amato, 2001).

In terms of economic factors, remarrieds tend to be more educated than their cohabiting counterparts (Brown et al., 2006; Brown & Wright, 2017). Education appears to be associated with marital quality in later life (Bulanda, 2011; Kaufman & Taniguchi, 2006), though the direction of the relationship is unclear. A higher proportion of cohabitors than remarrieds are employed (Brown et al., 2006; Brown & Wright, 2017), perhaps due to their younger age. There is a positive association between employment and marital quality among older adults (Bulanda, 2011). Despite higher levels of employment for cohabitors, they have lower household incomes,

on average, than the remarried (Brown et al., 2006; Brown & Wright, 2017). Given the older sample, I use a measure of assets instead of income. The association between assets and relationship quality is unclear. Physical health differences among cohabitors and remarrieds have not been investigated, but there is an association between physical health and relationship quality (Umberson et al., 2006). I tap social relationships through measures of religious attendance and resident children. Cohabitors tend to be less socially connected than the remarried (Brown et al., 2006). Religious attendance is linked to some dimensions of relationship quality (Brown & Kawamura, 2010) and having children at home is associated with lower happiness and interaction (Bulanda, 2011).

I estimate models separately for positive and negative relationship quality. Fincham and Linfield (1997) reported evidence that positive and negative relationship quality are distinct dimensions, not just the inverse of each other. Also, recent research on family relationships indicates that people can simultaneously hold feelings of both positive and negative quality in their close relationships (Lee & Szinovacz, 2016; Pillemer, Munsch, Fuller-Rowell, Riffin, & Suitor, 2012). Moreover, these studies suggest that positive and negative quality may have independent effects. It is possible that union type may have a different association with positive and negative relationship quality. For these reasons, I conduct separate analyses for each type of relationship quality.

## Data and Method

Data for this study came from the Health and Retirement Study (HRS). The HRS is a longitudinal study of a nationally representative sample of a continuous cohort of people born before 1960, as well as their spouses or partners. The HRS is designed to gather information from adults aged 50 and older regarding economics, retirement, health, and family relationships.

Beginning in 1992 with interviews of a cohort born between 1931-1941, the HRS conducts reinterviews every other year and replenishes the sample with a new cohort every six years to ensure representativeness. Respondents are eligible if they are noninstitutionalized at baseline and live in a household. Response rates for baseline interviews range from about 70% to 82% and are higher than 90% for follow-up interviews. The HRS contains oversamples of Blacks, Hispanics, and Florida residents. To account for the unequal probability of selection, nonresponse, and attrition, I weighted the analyses (Ofstedal, Weir, Chen, & Wagner, 2011).

I drew upon the 2010 and 2012 waves of the HRS. Questions tapping relationship quality were included in the Psychosocial Questionnaire, which is a leave behind survey that gathers information on respondents' lifestyles, social relationships, and subjective well-being. Starting with a pilot study in 2006, the Psychosocial Questionnaire is distributed to only half of the sample per wave, such that each half completes the questions every four years. Thus, by combining the 2010 and 2012 waves, there is a complete set of respondents.

In total, there were 22,805 respondents in the 2010 and 2012 waves. I limited the sample to respondents included in the Psychosocial Questionnaire (n = 21,152), who were aged 50 and older (n = 20,351). Respondents in first marriages, who were unpartnered and either divorced, widowed, or never married were excluded (n = 5,021), as were those who did not have valid responses on both measures of relationship quality (n = 3,662). Finally, I retained respondents who did not have a weight of zero. This resulted in a final sample size of 3,550 respondents. Of these respondents, 2,947 were remarried and 603 were cohabiting.

#### Measures

*Dependent Variables.* In the 2010 and 2012 Psychosocial Questionnaires, respondents were asked about their relationship quality with their spouse or partner. From these questions, I

created separate measures of positive relationship quality and negative relationship quality. Positive relationship quality was constructed from three items: how much the spouse/partner really understands the way you feel about things, how much you can rely on your spouse/partner if you have a serious problem, and how much you can open up to your spouse/partner if you need to talk about your worries. Each item was coded as 0 = not at all, 1 = a little, 2 = some, and 3 = a lot. Respondents with nonmissing data on at least two of the items were included. For the final measure, I took the average of the items (Smith, Ryan, Sonnega, & Weir, 2017). Positive relationship quality was a continuous measure that ranged from 0 to 3 and had a Cronbach's alpha of .81.

Negative relationship quality was constructed from four items: how often your spouse/partner makes too many demands on you, how much your spouse/partner criticizes you, how much your spouse/partner lets you down when you are counting on them, and how much your spouse/partner gets on your nerves. As with positive relationship quality, each item was coded as 0 = not at all, 1 = a little, 2 = some, and 3 = a lot. Respondents who were nonmissing on at least two of the items were included, and the final measure was the average of the items (Smith et al., 2017). Negative relationship quality was a continuous measure, ranging from 0 to 3, with a Cronbach's alpha of .79.

*Independent Variable. Union type* was a dichotomous variable in which cohabitors were coded as 1 and remarrieds were coded as 0.

*Demographic Characteristics. Gender* was a dichotomous variable with 1 = man and 0 = woman. *Race/ethnicity* consisted of four categories: White (reference), Black, Hispanic, and other race. *Age* and *union duration* were continuous variables measured in years.

*Economic Characteristics. Education* was an ordinal measure with four categories: less than high school, high school (reference), some college, and college or more. *Employment status* distinguished between full-time employment (35+ hours per week) (reference), part-time employment (less than 35 hours per week), and not in the labor force. *Assets* reflect the households' total wealth, including any second home, measured in dollars. Respondents' assets were then converted to individual assets by dividing the household assets by the square root of the household size (OECD, 2013). The final measure of assets consisted of five categories: in debt, \$0-50,000 (reference), \$50,001-100,000, \$100,001-250,000, and \$250,001 or more.

*Health. Number of chronic conditions* was a continuous measure that summed diagnoses from a doctor on several conditions: a psychiatric disorder, heart disease, hypertension, cancer, lung disease, arthritis, diabetes, or stroke. The number of conditions ranged from 0 to 8.

Social Support. Religious attendance was a continuous measure ranging from 0 to 4 reflecting how frequently the respondent attended religious services in the past year. The variable was coded as 0 = not at all, 1 = one or more times a year, 2 = two or three times a month, 3 = once a week, and 4 = more than once a week. *Resident children* was a dichotomous variable coded as 1 if the respondent had any child living in the household and 0 if not.

## Analytic Strategy

I began by examining weighted descriptive statistics for positive and negative relationship quality, as well as all other covariates in the analysis, separately for cohabiting and remarried older adults. Next, I estimated multivariate ordinary least squares regression models for the continuous outcome variables to assess differences by union type in positive and negative relationship quality net of other factors. To handle missing cases, I performed Multiple Imputation using Chained Equations (MICE) with the *mi impute chained* command in Stata. This procedure imputed the missing values for each variable as a function of the other covariates in the analysis (Raghunathan, Lepkowski, van Hoewyk, & Stoleberger, 2001; van Buren, Boshuizen, & Knock, 1999). The study results were based on 20 random, multiple-imputed replicates. The descriptive and multivariate analyses were weighted to adjust for the complex sampling design of the HRS using the *svy* command in Stata 14.

## Results

#### Descriptive Results

Table 1 presents descriptive statistics for all study variables separately by union type. Positive relationship quality was quite high for both cohabitors and remarrieds, with means of 2.4 and 2.5 (out of 3), respectively. The difference between cohabitors and remarrieds was statistically significant (p < .05), indicating that remarrieds report higher positive relationship quality, on average, than cohabitors. Turning to negative relationship quality, the average levels of negative quality were low across union types. The two groups reported similar levels of negative relationship quality with a mean of 1.0 (out of 3) for cohabitors and 0.9 for remarrieds, a difference that was not statistically significant.

Variation by union type in demographic characteristics is also evident in Table 1. The majority of both cohabitors (57.6%) and remarrieds (54.5%) were men. Cohabitors were disproportionately nonwhite. Compared to the remarried (83.5%), a significantly smaller proportion of cohabitors (71.5%) were White. Similarly, significantly greater shares of cohabitors than remarrieds were Black or Hispanic. Among cohabitors, 15.0% were Black and 9.5% were Hispanic, whereas only 7.7% of remarrieds were Black and another 5.8% were Hispanic. Similar proportions of cohabitors (4%) and remarrieds (3%) were other races. Remarrieds (63.6) were significantly older, on average, than cohabitors (61.8). The union

duration of cohabitors was much shorter, averaging 10.6 years, than the remarried at just over 21 years.

Turning to economics, health, and social support, there were a few differences by union type. The remarried tend to have more education than cohabitors. A greater share of cohabitors, 21.6%, had less than a high school education versus just 12.1% of remarrieds. Moreover, 21.3% of cohabitors had a college degree, compared to 28.3% of remarrieds. Employment was similar across union types, as no significant differences emerged between the two groups. Cohabitors appear to have fewer assets than the remarried. A significantly greater share of cohabitors (32.9%) were in the \$50,001-\$100,000 range than remarrieds (22.2%). At the top of the assets distribution, a higher proportion of remarrieds (35.4%) reported having at least \$250,000 compared to 28.8% of cohabitors. There were no differences by union type on number of chronic conditions. However, frequency of religious attendance (1.5) was higher among remarrieds than cohabitors (1.0). A greater proportion of remarrieds (26.8%) than cohabitors (14.1%) had resident children.

## Multivariate Results

Table 2 presents OLS regression models predicting positive and negative relationship quality. Whereas in the bivariate results remarrieds had higher positive relationship quality than cohabitors, there was no significant difference once control variables were added to the full model, as reported in Model 1. These results support the hypothesis that cohabitors and remarrieds have similar levels of relationship quality, suggesting that cohabitation in later life may serve as an alternative to marriage.

Among the control variables, men reported higher levels of positive relationship quality than women. Compared to Whites, positive relationship quality was significantly lower among Blacks. There were no other significant differences across race, age, or union duration. Respondents with \$100,001 or more in assets had higher levels of positive relationship quality than those with \$50,001 to \$100,000. Neither education nor employment were linked to positive relationship quality. There was variation in positive relationship quality by health, as those with more chronic conditions noted lower levels of relationship quality than those with fewer chronic conditions. Religious attendance and resident children were not associated with positive relationship quality.

Turning now to the analysis for negative relationship quality, the results do not substantively differ from the bivariate findings. As shown in Model 2 of Table 2, the negative relationship quality of cohabitors does not significantly differ from the remarried. Consistent with the results for positive relationship quality, the findings for negative relationship quality indicate no difference between cohabiting and remarried older adults. Moreover, the results support the hypothesis that later life cohabitation may be an alternative to marriage.

Few of the control variables were associated with negative relationship quality among my sample of older adults. Consistent with the pattern of results for positive quality, men reported less negative relationship quality than women. Age was inversely related to negative relationship quality, as negatively quality appears to be lower among older persons. Union duration was positively associated with negatively relationship quality, such that longer duration is linked to higher levels of negative relationship quality. There was no association between race and negative relationship quality. Likewise, none of the economic characteristics included were linked to negative relationship quality. Health was tied to negative relationship quality, as those with more chronic conditions reported higher levels of negative quality than those with fewer

chronic conditions. Neither religious attendance nor resident children had significant associations with negatively relationship quality.

## Discussion

Cohabitation has become increasingly popular among those aged 50 and older, particularly in the last decade (Brown & Wright, 2017; Stepler, 2017). In 2000, 7% of unmarried older adults were in cohabiting relationships, but today that share has doubled to 14% (Brown & Wright, 2017). This study offers several contributions to the literature. It builds on prior research on relationship quality among older cohabitors, which was limited by data from before the growth of later life cohabitation (King & Scott, 2005) and a small sample of older cohabitors that may have lacked the statistical power to uncover differences between cohabiting and remarried persons (Brown & Kawamura, 2010). My study used a large, recent sample of older adults from the 2010 and 2012 Health and Retirement Study to shed new light on relationship quality among older cohabitors and remarrieds by investigating the extent to which levels of relationship quality were similar for cohabitors and remarrieds. It also extends previous work in that my approach included separate analyses of positive and negative relationship quality because research on close relationships suggested that there can be simultaneous feelings of both dimensions within a relationship and that the effects of each may be independent of each other (Lee & Szinovacz, 2016; Pillemer et al., 2012).

Drawing on the findings of prior studies on cohabitation in later life, I hypothesized that there would be no differences in relationship quality between older cohabitors and remarrieds. As anticipated, there were few differences by union type in either positive or negative relationship quality. There was a significant bivariate association between union type and positive relationship quality. Remarrieds reported a higher level of positive relationship quality than their cohabiting counterparts. After the addition of covariates, however, the association between union type and positive relationship quality was not statistically significant. For negative relationship quality, the pattern of results was notably different. Although cohabitors had a slightly higher average level of negative relationship quality, the difference did not achieve statistical significance. There was no association between union type and negative relationship quality in the either bivariate or multivariate analyses.

Overall, the results indicate that there are few differences in relationship quality between cohabiting and remarried older adults. These findings are consistent with the observations of Brown and Kawamura (2010), who noted no significant differences across six out of the seven relationship quality measures considered in their study. Cohabiting and remarried older adults having similar levels of relationship quality aligns with the argument that cohabitation in later life operates as an alternative to marriage (Brown et al., 2012; Brown & Wright, 2017; King & Scott, 2005). It appears that older cohabitors may enjoy many of the same benefits as their remarried counterparts, as their relationships tend to be stable (Brown et al., 2012) and their levels of psychological well-being are similar to the remarried (Wright & Brown, 2017). This study provides further evidence by showing that the relationship quality of older cohabitors and remarrieds is comparable.

Moreover, the pattern of results in the analyses underscores the importance of considering both positive and negative relationship quality. For positive quality, I found significant differences between cohabitors and remarrieds at the bivariate level, though they were explained after the addition of covariates. Alternatively, there were no significant differences at any point for negative quality. Consistent with Fincham and Linfield (1997), the findings suggest that positive and negative quality are not simply the inverse of each other. Rather, they are distinct, separate dimensions of relationship quality. Evidence increasingly indicates that the associations of positive and negative quality with other variables may differ (Lee & Szinovacz, 2016). Thus, this study further demonstrates the usefulness of separating positive and negative dimensions of relationship quality among older adults.

There are some limitations to this study. First, I am not able to draw causal inferences because the data are cross-sectional. To my knowledge, these are the best available data to examine relationship quality among older cohabitors. Future research should expand on this study when longitudinal data are available. Second, it is possible that selection plays some role in the findings of no differences between older cohabitors and remarrieds. Because cohabitation typically carries no legal ties, it is easier to dissolve a cohabiting union than a marriage when one is unhappy with the relationship. Thus, those with poorer relationship quality may have already ended their unions. This would only be an issue to the extent that cohabitors are more likely to terminate their relationships than the remarried. Among older adults, however, cohabiting relationships tend to be quite stable, as most end through the death of one of the partners (Brown et al., 2012). Third, the analysis relies on individual-level data, though I acknowledge that couple-level data would be ideal. The HRS contains data from both respondents and their spouse/partner, but because only half of the sample receives the Psychosocial Questionnaire at each wave, many couples answer the questions about relationship quality at different points in time. Finally, I was not able to capture other types of nonmarital relationships, including living apart together (LAT) and dating relationships. Dating relationships are more common than cohabitation in later life (Brown & Shinohara, 2013) and both are on the rise (Connidis, Borell, & Karlsson, 2017). Future research should extend this work by also considering these forms of nonmarital relationships when appropriate data become available.

Overall, this study provides new insight into later life cohabiting relationships and the role of cohabitation in older adulthood. I uncovered additional evidence that cohabitation is an alternative to marriage among older adults (Brown & Wright, 2017; King & Scott, 2005), as I found that cohabitors are comparable to their remarried counterparts on positive and negative relationship quality. These findings suggest that cohabitation offers many of the same benefits as remarriage in the second half of the life course. As cohabitation continues growing in later life, coupled with the link between relationship quality and well-being, future research should consider whether the association between relationship quality and well-being is the same for marital and nonmarital unions, as well as if positive and negative quality have different associations with well-being.

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Table 1. weighted Descriptive Statis	Union Type		
Variable	Cohabiting	Remarried	
	Mean/%	Mean/%	
Relationship Quality			
Positive relationship quality	2.4	$2.5^{*}$	
Negative relationship quality	1.0	0.9	
Demographic Characteristics			
Woman	42.4%	45.5%	
Man	57.6%	54.5%	
White	71.5%	83.5%***	
Black	15.0%	$7.7\%^{***}$	
Hispanic	9.5%	$5.8\%^{*}$	
Other race	4.0%	3.0%	
Age	61.8	63.6**	
Union duration	10.6	$21.1^{***}$	
Economics Characteristics			
Less than high school	21.6%	$12.1\%^{***}$	
High school	30.9%	31.1%	
Some college	26.2%	28.5%	
College	21.3%	$28.3\%^{**}$	
Full time employment	37.7%	37.6%	
Part time employment	7.9%	5.8%	
Not in the labor force	54.4%	56.6%	
In debt	10.0%	7.8%	
\$0-\$50,000 assets	32.9%	$22.2\%^{***}$	
\$50,001-\$100,000 assets	11.0%	13.1%	
\$100,001-\$250,000 assets	17.3%	21.5%	
\$250,001 or more assets	28.8%	$35.4\%^{*}$	
Health			
Number of Chronic Conditions	1.9	1.9	
Social Support			
Religious attendance	1.0	$1.5^{***}$	
Resident children	14.1%	26.8%***	
Unweighted N	603	2,947	

 $\frac{1}{p < .05, **p < .01, ***p < .001.}$ Analyses are weighted to correct for the complex sampling design of the HRS.

	Positive Ouality		Negative Quality	
	Model 1		Model 2	
	b	SE	b	SE
Union Type				
Cohabiting	-0.07	0.04	0.07	0.05
Demographic Characteristics				
Gender $(1 = man)$	$0.18^{***}$	0.03	$-0.07^{*}$	0.03
White (ref)				
Black	-0.13**	0.04	0.07	0.04
Hispanic	0.06	0.06	-0.08	0.06
Other race	-0.06	0.07	0.05	0.06
Age	0.01	0.01	-0.01*	0.01
Union Duration	-0.01	0.01	$0.01^*$	0.01
Economic Characteristics				
Less than high school	-0.08	0.06	0.01	0.06
High school (ref)				
Some college	0.03	0.03	-0.04	0.04
College	0.06	0.03	-0.03	0.04
Full time employment (ref)				
Part time employment	-0.01	0.06	0.03	0.06
Not in the labor force	-0.03	0.03	0.01	0.03
In debt	-0.01	0.07	0.12	0.06
\$0-\$50,000 assets (ref)				
\$50,001-\$100,000 assets	-0.01	0.05	0.02	0.06
\$100,001-\$250,000 assets	$0.11^*$	0.05	-0.06	0.05
\$250,001 or more assets	$0.11^{*}$	0.04	-0.06	0.04
Health				
Number of chronic conditions	$-0.02^{*}$	0.01	$0.03^{*}$	0.01
Social Support				
Religious attendance	0.01	0.01	-0.01	0.01
Resident children	0.02	0.03	0.02	0.03
Constant	$2.22^{***}$	0.15	$1.30^{***}$	0.15
Unweighted N	3,550		3,550	

Table 2. OLS Regression Models Predicting Relationship Quality

\*p < .05, \*\*p < .01, \*\*\*p < .001.

Analyses are weighted to correct for the complex sampling design of the HRS.