Statement of Research Interests Amy J. Rauer

My research program focuses on intrapersonal, interpersonal, and social-contextual factors that serve to enhance or undermine romantic relationship quality across the lifespan, and how the quality of one's romantic relationships are in turn linked to well-being in adulthood. Utilizing a developmental perspective, my research has further sought to explicate the extent to which the antecedents and consequences of relationship quality may depend on when in the lifespan they are experienced.

One line of research has examined how the early environment shapes romantic functioning and stability in young adulthood. Though there has been growing concern that the institution of marriage is becoming obsolete in younger generations, finding happiness with a long-term partner remains an important goal for most younger adults. Despite the uniformity of this goal, my research with Greg Pettit suggests that the extent to which young adults can initiate and sustain romantic relationships varies considerably. This variability appears to be forecast by earlier differences in familial and peer relationships. For example, my research has found young adults who had problems with their parents in childhood (e.g., harsh discipline, differential treatment) not only were less involved in romantic relationships but the quality of these relationships once they entered into them was compromised.

Augmenting this work, a second line of my research focuses on those individuals who are able to cultivate and maintain happy marriages later in middle adulthood. Although most adults desire a happy marriage, we know relatively little about what these relationships look like for those able to achieve this goal. Contrary to Tolstoy's assertion about the uniformity of happy families, my work on happily married couples reveals meaningful variability in how they interact, both within and across couples and across different types of marital interactions. This variability is critical if our goal is to promote happy, healthy marriages, as it means that we must design programs that can be tailored to meet the needs of different types of couples, a conclusion consistent with my prior work on risky relationships. Specifically, we found that equally distressed individuals often experience different combinations of risk factors, which means that no single approach toward strengthening relationships is likely to be effective for all individuals. I have begun to further explore this idea in work with Francesca Adler-Baeder that examines the extent to which a variety of intrapersonal, interpersonal, and social-contextual factors (e.g., race, income, marital status) moderate how relationship-enhancing programs work to promote relationship quality.

The importance of identifying the antecedents of relationship quality becomes clear when considering the serious consequences of unhealthy relationships for couples' well-being. In work with Mona El-Sheikh, we have found that the negative effects of relationship dysfunction reverberate not only through the day but also into the night. Our research shows that middle-aged couples who engage in more psychological and physical aggression towards each other have poorer subjective and objective sleep quality both concurrently and over time. Further, we find that these negative effects are exacerbated by spouses' intrapersonal characteristics (e.g., mental health), again underscoring the importance of explicating the variables that serve to either exacerbate or ameliorate risk within intimate relationships.

My current work ties together these lines of research by examining the antecedents and consequences of marital quality in older adulthood, a particularly appropriate developmental period for this line of inquiry. Work with my colleagues at the RAND Corporation on the nationally representative Health and Retirement Study, funded by the Michigan Retirement Research Center and the RAND Center for the Study of Aging, indicates that certain segments of the older population may be especially vulnerable to worse outcomes later in life (e.g., poorer health, less wealth) as a result of accumulating previous negative marital experiences. To understand the mechanisms underlying these links, I was funded by the Fetzer Institute to collect observational, physiological, and interview data from 64 high-functioning, older couples to explore compassionate love as one such mechanism. The specific objectives are to: (1) describe the nature of compassionate love in marriage in older adulthood; (2) examine the mental and physical health consequences of compassionate love; and (3) identify the individual and dyadic correlates that distinguish those who respond compassionately to their partner's needs and rise to the challenge of caretaking from those who do not. Our work suggests that the links between compassionate love and health may be more complex in older adulthood than at earlier points in the lifespan, with the receipt of compassionate love appearing to actually undermine older spouses' health. Even the most well-intentioned support can erode older adults' feelings of competence – a concern given that many have viewed spousal caregiving as an expedient fix for a health care system overwhelmed with the needs of an ageing society

Given the unprecedented growth in the number of older adults in the United States coupled with rising health care costs, it has become increasingly important to understand how partners promote each other's' well-being and under what conditions. To address this critical and timely issue, my future research will follow these couples over time as they begin to transition into caregiving. This will help us not only understand how to promote health through relationships, but begin to determine how to help older adults sustain loving relationships when they are confronted with the challenges of aging.