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Marital conflict and health: Processes and protective factors

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Abstract

Marital conflict has been identified as a risk factor for poor health in marriage partners and their children. However, the mechanisms through which marital conflict influences health have not been fully elucidated. Furthermore, there is variability in health outcomes associated with marital conflict. The current endeavor proposes that the impact of marital conflict on physical health is due, at least in part, to excessive sympathetic arousal and incorporates the Polyvagal Theory to explain how vagal regulation (an index of parasympathetic regulation) may aggregate or attenuate the risk for poor health outcomes in the context of conflict. Examination of intervening variables, such as vagal regulation, allows for elucidation of the relation between marital conflict and health problems in children and adults. Specifically, this paper proposes that individuals with high vagal regulation will be protected from the impact of marital conflict on physical health by the mitigation of detrimental sympathetic arousal, whereas individuals with low vagal regulation will be more vulnerable to the effects of marital conflict on health. Support for this proposition is provided through the presentation of literature on vagal regulation as a protective factor against negative health outcomes in children exposed to marital conflict.

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1. Introduction

The relation between marriage and physical health has been recognized for many decades and explored in various forms. Initially, it was thought that marital status per se was protective of the health of marriage partners. This idea spawned many large-scale studies examining the relation between marital status and health (e.g., Berkson, 1962; Carter & Glick, 1976; Gove, 1973; Ortmeyer, 1974; Verbrugge, 1979). Although these studies partially supported the proposed association between marital status and health, they also indicated that the relation was more complex than previous formulations indicated. Following this first generation of research, a movement developed that continues to the present to explore specific characteristics of marriage that relate to the physical health of the partners and children of the marriages. Presently, missing from this literature to our knowledge is an explication of the physiological processes that can account for the relation and particularly those that act as moderators (i.e., factors that change the relation between risk and outcome variables when present; Baron & Kenny, 1986).

This paper posits to connect some of the gaps in a portion of this body of literature by reviewing research related to the effects of marital conflict on physical health, providing a conceptualization of the physiological processes active in the association, and proposing a physiological model of moderation of the relation. As such, the first aim of this paper is to review empirical explorations of the relations between marital conflict and the physical health of marriage partners and their children. After the review, this paper will present a potential pathway by which conflict may influence health, namely through chronic or excessive sympathetic activation. In this context, the literature related to physiological reactivity (changes from baseline levels of arousal in response to challenging or stressful conditions) to conflict will be presented. Finally, the primary objective will be addressed by explicating the role of vagal regulation as a moderator in the relation between marital conflict and physical health, drawing heavily from the Polyvagal Theory that will be explained in more detail in following section (Porges, 1995b, 1997, 1998), which implicates sympathetic arousal as more detrimental than parasympathetic arousal.

Although vagal regulation has not been studied among adults as a moderator of the association between marital conflict and physical health, assertion of its usefulness for study is supported by empirical literature in other areas. Validation comes from the implication that vagal regulation can avoid pernicious sympathetic arousal (such as the arousal that occurs during marital conflict) which is linked to the development of health ailments (Burns, Friedman, & Katkin, 1992; Cacioppo et al., 1995). Further support stems from research demonstrating that vagal regulation is associated with adaptive emotional regulation (the capacity to manage strong emotion and organize resources towards the attainment of an external goal; Katz & Gottman, 1997) and is protective for children exposed to marital conflict in behavioral problems, peer relations, academics, and physical health domains (El-Sheikh, Harger, & Whitson, in press; Katz & Gottman, 1995, 1997).

Research explicating the role of moderators, such as vagal regulation, in the relations between marital variables (e.g., conflict) and physical health is essential due to the pertinence of the results to a vast population of individuals. Furthermore, there has been a recent call in

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