

Why Do Men *Benefit* More from Marriage Than Do Women? Thinking More Broadly About Interpersonal Processes That Occur Within *and* Outside of Marriage

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Abstract In this commentary we return to the original question of Wanic and Kulik’s paper, “Why do men *benefit* more from marriage than do women?” We suggest that trying to understand why women suffer more than men in marriage (from conflict or for any other reason) will not, by itself, answer the question. The answers are certainly multifaceted and complex, and there is little reason to pit one possible answer against another. We highlight that when examining gender differences in health in marriage it is important to (a) consider the helpful processes in combination with hurtful ones, b) take a broad view on this question including many types of social processes, and c) consider processes that occur outside of marriage as well as those that occur inside of marriage.

Keywords Marriage · Health · Social Support

Introduction

The paper on which we have been asked to comment begins with a broad question, “Why do men derive more benefit from marriage in terms of both avoiding morbidity and mortality compared to women in U.S. society?” (Wanic

and Kulik 2011, this issue). The authors make a case that men benefit more than do women from marriage because men suffer less than women from conflict, and, in turn, that men suffer less from conflict because they are dominant in marital relationships.

Might women, on average, suffer more from marital conflict than men for just the reasons these authors suggest? We see the authors’ case as plausible, yet not nailed down. Might it also be the case that, as others have suggested (Kiecolt-Glaser and Newton 2001), women, on average, suffer more from marital conflict because they are more invested in marriage? Wanic and Kulik (2011) use this view as a foil for their own view. Yet we see that argument as plausible as well and do not believe the authors have ruled that out. Importantly, we see no reason why the latter explanation needs to be ruled out to make the case the authors wish to make. It is almost certainly true that there exist multiple reasons contributing to the fact that women, on average, suffer more in response to conflict in marriage than do men. Moreover, our personal guess is that when women do suffer from conflict, some suffer both from being subordinate and relationally interdependent, some for one reason or the other, and some for reasons not specified.

Yet our primary reaction to the article was to step back and say, “Wait. Not so fast! Back up!” Let’s return to the original question. Why do men *benefit* more from marriage than do women? Trying to understand why women suffer more than men in marriage (from conflict or for any other reason) will not, by itself, answer the question. Any answer must address *advantages* for men and for women of being married versus unmarried as well as the possible costs. Perhaps men gain more benefits from marriage than do women and costs have nothing to do with the difference observed. Perhaps both men and women benefit from marriage and, in addition, men suffer less from marriage

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than do women resulting in the overall difference in benefits. Perhaps, what happens within marriages has little to do with the answer! Instead, it may be that women are better off relationship-wise outside of marriages than are men. Thus, they benefit less than men do by being married because they do not need marriages (to the same extent) to get the relational benefits that marriages can supply.

Honestly, our personal view is that the answer to the question of why marriage appears to benefit men more than women is almost certainly multifaceted and complex. We see little reason to pit one explanation against another. Instead we suggest broadening the search for plausible and empirically supported answers. Ultimately, striving to understand those processes (including their prevalence among and consequences for men and women) and, very importantly, how they fit (or do not fit) together and interact (or do not interact) with one another is most likely to provide answers to the overall question. Beyond that, such an approach will provide us with a better understanding of the pathways leading to differential variance in the value of marriage *among* men and *among* women because whatever processes are uncovered will likely vary among men and among women as well as, on average, between these groups.

In this commentary we briefly review literature emphasizing that marriage is beneficial for the health of both men and women for a variety of reasons. Next we review evidence that men derive more benefits from marriage and discuss potential reasons for this. Then, we take one, illustrative step toward following our own recommendations that scholars should: a) broaden the pool of possible explanations, b) include answers focusing on why men may *benefit* more (rather than suffer less) from marriage and c) include the possibility that a large part of the answer to the overall question might consist in what happens, relationally, *outside* of marriages for both men and women.

The Benefits of Marriage for Health

It is important to give adequate attention to the pervasive finding that being married, at least in U.S. samples, is associated with greater health for *both* men and women (e.g., Johnson et al. 2000; Kaplan and Kronick 2006; Schoenborn 2004; Waite and Gallagher 2000) and that researchers and theorists already have provided myriad reasons why marriage is beneficial to health. These include, but are not limited to, increased economic resources (Lupton and Smith 2003; Waite and Lehrer 2003), social and psychological support (main effects and stress buffering effects; Cutrona 1996), expanded and more interdependent social networks (Kearns and Leonard 2004) and social integration (Umberson 1987), support for healthy lifestyles (e.g. more social control; Umberson 1987, 1992), and selection effects (i.e. healthy people are

more likely to get married and stay married whereas unhealthy individuals are less likely to marry or more likely to become separated, divorced, or widowed; Goldman 1993). Less commonly considered are the psychological and health benefits of having a close and mutually communal relationship in which partners *both* give and receive support non-contingently. Giving support also has benefits, and the very existence of a mutually responsive relationship may be key to many relationship benefits including feeling both secure and generative and therefore relaxed and happy within a relational context that is expected to endure (Brown et al. 2003; Clark and Monin 2006; Tower et al. 2002; Williamson and Clark 1989).

Evidence That Men Derive More Health Benefits from Marriage and Reasons Why

Although marriage is associated with health benefits for both men and women, research has consistently shown that men derive more benefit than women (Goldman et al. 1995; House et al. 1988; Kaplan and Kronick 2006; Kiecolt-Glaser and Newton 2001). Wanic and Kulik (2011) focus on the argument that men benefit more than women from marriage because men suffer less than women from marital conflict, yet they also acknowledge that there are other non-mutually exclusive hypotheses. They list the following explanations: the greater social support that husbands may gain from their wives than vice versa (Belle 1987; House et al. 1988; Litwak et al. 1989; Uchino et al. 1996; Umberson et al. 1996), women's stronger push for health regulatory and prevention behaviors (Thoits 1992; Umberson 1987), and the reduction of daily hassles for men due to wives' provision of more household maintenance (Bolger et al. 1989; Greenstein 1996; Hochschild and Machung 1999; Thompson and Walker 1989).

Women Derive More Benefits from Relationships Outside of Marriage than Men Do

Yet another plausible explanation for why men benefit more from marriage than women that Wanic and Kulik (2011) do not present is that men and women differ in how much support they give and receive outside of their marriages or romantic relationships. If women have more mutually responsive communal relationships outside of marriage, they may need marriage less than men do in terms of maintaining their health. Multiple lines of research provide evidence for the idea that women benefit more from close relationships outside of their marriages than men do. Research shows that women feel closer to others (Monin et al. 2008), give (Wellman and Wortley 1990) and receive more social support (Turner and Marino 1994), and are more likely to have confidants (Booth 1972) outside of

their marriages than men are. Our work also suggests that women are more likely to express their emotions outside of their marriages than men are (Monin, Feeney, & Clark, unpublished data). Although marriage is still an important source of support and intimacy for both men and women, men may be relying on this source of support more than women do.

For example, in our research we have found that people (both men and women) feel and expect more communal responsiveness in their relationships with females than with males within their extended family networks. We define communal responsiveness as the degree to which a person feels intrinsically responsible for the welfare of another and attends to the other's needs non-contingently. This can include such things as providing instrumental and emotional support to a partner, supporting a partner's goal strivings, and conveying understanding of who a partner is (see Reis et al. 2004; Clark and Monin 2006). The extent to which responsiveness occurs in a close relationship influences how "close," subjectively, that relationship feels (Mills et al. 2004). Our conceptualization of communal responsiveness stems from theory and empirical research on communal relationships. Communal relationships, ideally, are those in which each member cares for the partner's welfare and responds to the other's needs and desires without contingencies (Clark and Mills 1979, 1993; Mills and Clark 1982). Most people have more than one communal relationship. Communal relationships are often exemplified by relationships with family members. An important aspect of communal relationships is that they vary in strength (Mills and Clark 1982; Mills et al. 2004), with strength referring to the degree of communal responsiveness felt toward (or expected from) partners.

In two studies in the U. S., we asked college students to arrange their multiple family members (i.e. parents, siblings, aunts, uncles, and grandparents) within a series of relationship network grids (Monin et al. 2008). These grids measured participants' *own* feelings of communal responsiveness toward their family members and *perceived* feelings of communal responsiveness from each family member relative to one another. In the second study, we also asked participants to complete the relationship network grids in terms of feelings of intimacy (comfort receiving support, with disclosure, and with physical proximity), dependence, obligation, and liking. The results of both studies revealed that (1) people perceived more responsiveness from female family members than male family members and (2) people feel more responsive toward female than toward male family members. The second study also provided evidence that associations between gender and felt and perceived communal responsiveness were mediated by felt and perceived intimacy, dependence, and obligation, but not liking.

By examining peoples' multiple relationships within these two studies we were able to ascertain that (1) female-female family relationships seemed to be the most mutually responsive relationships, (2) male-male family relationships seemed to be the least mutually responsive relationships, and (3) in the male-female relationships, the men felt more supported than in their relationships with men, but the women felt less supported than in their relationship with women. These results suggest that in cross-gender relationships, men derive more communal responsiveness (as well as intimacy, dependence, and obligation) than do women do which makes these relationships especially important for the men. Alternatively, it may be the case that men and women get equivalent amounts of support in cross-gender relationships, but when compared to female-female relationships, women perceive male communal responsiveness as inferior to female communal responsiveness. It is important to note that we did not examine cross-gender romantic relationships in this study, only family relationships; however, these findings still demonstrate that women have more and stronger, mutually responsive relationships than do men within their family networks that are likely to influence their health and well-being in positive ways.

Our findings also suggest a different 'take' on gender differences in relational interdependence which has important implications for gender differences in health and well-being. Oftentimes, women are characterized as being more dependent whereas men are characterized as independent, and women often are characterized as being more nurturing than are men. Our results do not refute such characterizations but suggest that both observations may be due to women typically being involved in more mutually responsive relationships in their social networks than are men. That is, they are in relationships characterized by both *providing* more communal responsiveness to social network members and *receiving* more communal responsiveness from social network members. This involves women being more dependent and being more nurturing. These differences are not so much 'individual differences' as they are differences in the very nature of the individual relationships that make up part of a woman's social world as compared to those relationships that make up a man's social world.

Our findings also cast a different light on the idea that women are unfairly burdened by being primarily responsible for relationship maintenance in families, something that has often been linked to stress, perceptions of inequity of commitment, and resentment (Cancian 1987; Hochschild 1989; Miller 1976; Thompson and Walker 1989) and depression (Kessler and McRae 1982; Nathanson 1980; Verbrugge 1976). Our findings do suggest that relationships between men and women are lop sided, with women feeling less supported than men in cross-gender family

relationships; however women also are involved in more *mutually* communal relationships with other female family members. Thus, other female family relationships may be particularly important for women's well-being. The other side of the coin is that results of our research emphasize the importance of men's family relationships with women, which is consistent with the idea that men receive more health benefits from marriage than women do, especially because mutually communally responsive relationships are important for mental and physical health (Clark and Finkel 2004).

Our perspective is not entirely new, of course. In their analyses of a U. S. nationally representative, two-wave panel survey ("Americans' Changing Lives"), Umberson et al. (1996) demonstrated that there are important differences in men and women's social networks that have implications for gender differences in health. Women reported greater formal and informal social integration (i.e., attendance of meeting/groups and religious services and getting together with and talking on the phone with neighbors and friend), more support from friends, and women said they were more likely to have a confidant than men did. In regard to their family relationships, women reported more social support from their adult children compared to men, and they reported less strain in their relationships with their spouses, mothers, and fathers than did men. Men reported more social support from their spouses than did women. A particularly striking finding was that only 20% of women identified their spouse as their primary confidant whereas 49% of men did. In this study, women were not more emotionally sensitive than men to the quality of their relationships in terms of psychological distress (i.e., depression and alcohol consumption). Instead they concluded that women's greater involvement in positive relationships generally relative to men's is partly responsible for keeping women's depression levels as low as they are. That is, without these positive relationships, women would be even more depressed relative to men than they currently are. They suggested that social structural position influences the form and content of relationships.

Finally, consistent with the argument that women and men differentially gain benefits from relationships outside of marriage, we consistently find in our study samples that women feel and express more emotion with people outside their marriages than men do. Emotion expression is important for psychological and physical health (Clark and Finkel 2004; Monin et al. 2009) because it facilitates social support in communal relationships by signaling: (1) a need or desire for care, (2) a lack of need or the success of care, (3) appreciation for care, and/or (4) care for the partner (Clark et al. 2001; Graham et al. 2008). Emotion expression also communicates intimacy and trust (Monin, et al. 2009).

In a sample of 53 older married individuals (see Monin et al. 2010 for more details about the sample), we found that women reported feeling emotions (a composite index of anxiety, sadness, anger, and happiness using a scale from 1, *hardly ever*, to 6, *very frequently*) more frequently outside of their marriages than men did (women: $M=3.56$, $S D=.88$; men: $M=3.02$, $S D=.77$, $t(52)=2.53$, $p<.05$, unpublished data). Also in a sample of 115 married couples (ages 18 to 62; see Feeney, 2007 for more details of this sample), we found that women reported expressing anxiety, sadness, anger, and happiness (both caused by someone else or by the spouse) to people other than their spouses more frequently than did men (women: $M=3.59$, $SD=1.01$, men: $M=3.03$, $SD=.94$, $t(117)=4.50$, $p<.0001$; Monin, Feeney, & Clark, unpublished data).

We have now presented just a few of the many studies that provide evidence for the idea that men and women differentially rely on their marriages relative to people other than their spouses for their support and intimacy needs—studies which may have important implications for gender differences in the benefits of marriage on health. These findings illustrate the importance of simultaneously considering whether or not, and how, men and women differentially benefit from their marriages as well as from their relationships outside of marriage.

Considerations to Make When Examining Why There Are Gender Differences in the Health Benefits of Marriage

We now return to the broad question that Wanic and Kulik (2011, this issue) present in their article, "Why *do* men gain more health benefits from marriage than do women?" We have suggested that it is essential to: a) consider the helpful processes in addition to hurtful ones, b) take a broad view on this question, consider many types of social processes and not "pit" them against one another, and c) consider processes that occur outside of marriage as well as those inside of marriage. We close by reiterating each point.

It is Essential to Consider Helpful Processes

The target article focuses on the issue of being harmed by conflict and suggests that women suffer more from conflict than men because they occupy subordinate positions in marriage (Wanic and Kulik 2011). That may well be true for women on average (though certainly not all women occupy subordinate roles in marriage.) Yet that alone cannot explain why both men and women appear to benefit from being married relative to being single nor why men show greater apparent relative benefit. If the authors' point is correct and it might well be, at the very least it must be *combined* with a consideration of

other helpful marital processes (or with processes occurring outside of marriage) to explain the differential health benefits of being married versus single for men and for women. Perhaps, to reiterate a possibility raised earlier, both men and women experience jumps in social support as a function of being married *and* that conflict within marriage harms women more than men thereby subtracting more from the benefits of marriage for women than for men.

It is Wise to Take a Broad View on the Question and to Include a Consideration of Many Social Processes

The authors themselves acknowledge a wide array of reasons men may benefit more from marriage than women: their own idea that conflict is more costly for men than women because women are subordinate, the idea that conflict is more costly for men than women because women care more about relationships, the possibly greater social support wives give husbands than vice versa, women pushing for more health regulatory and prevention behavior from partners than do men, and women buffering men from daily hassles more than vice versa (Wanic and Kulik 2011). To this mix we have added another possibility. Perhaps marriage is not as beneficial for women as for men because women have more alternative relationships that provide the same types of benefits.

Should One Explanation be “Pitted” Against One Another?

We think the answer will almost always be no. Instead, we think it very likely that multiple interpersonal processes contribute to the overall observation that men, on average, appear to benefit more from marriage than do women. A far more comprehensive and nuanced set of approaches seems wise to us. After having identified a pool of processes that plausibly explain the overall difference we suggest asking different sorts of questions including ones about for whom or within what type of marriage might each type of process have its effect?

For instance, some women (and some men) do occupy subordinate roles in marriage, others do not; some marriages are characterized by high conflict; others are not. If the authors of the target article are correct, then they ought to be able to show that women who are in marriages in which it is both true that they are subordinate and there is conflict have worse health than women in relationships in which there is neither subordination or conflict or ones in which only one of these variables apply. The same pattern should apply *among* men. Moreover, if their theoretical ideas are correct, women should more often find themselves faced with the combination of subordination and conflict than do men.

To give another example, if we are correct that women may benefit less than men from marriage in part because they have more supportive relationships outside of marriage then we should not only be able to document that women, on average, have more supportive relationships outside of marriage than do men *but also* that people (female or male) who do have very responsive relationships outside of marriage benefit less from marriage than do people who do not have such relationships.

In addition we suggest that any time one is tempted to “pit” one process against another that the researchers stop to first consider whether or not there might be a good, logical, theoretical reason why if one process exists another cannot exist. Usually, we suspect, the answer to this question will be that there is no good reason to assume advocating one explanation requires rejecting the other.

Consider Processes Occurring Outside Marriages as Well as Inside

It is important to keep in mind the greater health benefits for men than for women from marriage are based on comparisons of men who are married versus *those who are not* and women who are married versus *those who are not*. Thus, in addressing the issue of the greater health benefits for men it is just as important to examine what is happening outside of marriage as it is to examine what is happening within marriage. Our own research suggests to us that a part of the answer to the broad question posed is that women have more intimate, supportive relationships outside of marriage than do men. Therefore one reason why marriage affords women less of a benefit than it affords men might well be that they need the marriage less than do men. They have more mutually supportive other relationships which provide opportunities to them both to be caring, which itself can generate better emotional states (Williamson and Clark 1989) and to be cared for (Iida et al. 2008). Note that the existence of these other relationships can also partly explain why, following the death of a spouse, women seem to fare better than do men health-wise (Stroebe et al. 2001). More generally, we think it is important to think outside the box of marriage in identifying processes that might address the broad question of why there are bigger gaps in health between single and married men than between single and married women. Indeed, perhaps it would help to ask some new questions: What benefits do single women derive from their relationships that single men do not? In what health harming activities might single men on average, but not single women or married individuals of either gender on average, engage?

Examining processes inside and outside marriage may also be helpful when examining gender differences in negative reactions to conflict. In doing so, it would be

important to examine the frequency with which men and women engage in conflict (and in conflict when they are in subordinate positions) both within marriage and in their other close relationships outside their marriage. It might also prove to be important to know the gender of the people with whom they engage in conflict. Further, one could ask about feelings of subordination versus domination and feelings of relational interdependence versus independence within each relationship.

We Should be Combining and Integrating Processes to Come Up With New Questions and, Possibly, New Answers to the Puzzle of Why Marriage Appears to Benefit Men More Than Women

Once one broadens the questions one asks and, hence the types of interpersonal and intrapersonal processes one considers, new and interesting issues pertinent to the overarching issue at hand will emerge. We have already emphasized one new set of questions we should be asking: for whom, when and how will each relevant process apply? Thinking about multiple processes in concert, we believe, also will suggest new ideas. For instance, thinking about issues of support inside and outside of marriage, feelings of subordination and distress during conflict inside and outside as marriage, and other processes inside as well as outside of marriage for us raises the possibility that the social comparisons men and women make of their marriage to their other relationships might make a difference for health. Men, on average, may be more content with and relaxed within their marriages because those marriages look pretty good *compared* to their other relationships. Women, on average, may not be so content with and relaxed within their marriages because those marriages do not seem as good *compared* to their other relationships. Contentment and relaxation may influence health.

Finally, it is also important, although not emphasized in this commentary, to recognize the correlational nature of the evidence that being married appears to benefit men more than women. In addition to the possible explanations discussed here, the links between marriage and health observed for males and for females may be determined in part or even completely by other variables that influence both marriage and health.

Conclusion

In this commentary, we have chosen not to join a debate about whether women suffer more from marital conflict than men because of women's subordination *or* relational interdependence (Wanic and Kulik 2011). We think both explanations are plausible and that there is some empirical evidence for both. Moreover, although the phenomenon

that women are more reactive to conflict (for whatever reason) may at least partially explain why women suffer more than do men in marriages that are high in conflict, it does little to explain why men appear to benefit more than women by being married. Not every marriage is high in conflict. It is possible that women's differential suffering to even minimal amounts of conflict account for gender differences in health in marriage, but there are many other plausible explanations for the differences. In this commentary we highlight that when examining gender differences in health in marriage it is important to consider (a) the helpful processes in addition to hurtful ones, b) take a broad view on the questions of why men benefit more from marriage than women do in terms of health, considering many types of social processes, how they fit together and when they apply, rather than "pitting" them against one another, and c) consider processes that occur outside of marriage as well as those inside of marriage.

References

- Belle, D. (1987). Gender differences in the social moderators of stress. In R. C. Barnett, L. Biener, & G. K. Baruch (Eds.), *Gender and stress* (pp. 257–277). New York: Free Press.
- Bolger, N., DeLongis, A., Kessler, R. C., & Wethington, E. (1989). The contagion of stress across multiple roles. *Journal of Marriage and the Family*, *51*, 175–183.
- Booth, A. (1972). Sex and social participation. *American Sociological Review*, *37*, 183–192.
- Brown, S. L., Nesse, R. M., Vinokur, A. D., & Smith, D. M. (2003). Providing social support may be more beneficial than receiving it: Results from a prospective study of mortality. *Psychological Science*, *14*, 320–27.
- Cancian, F. M. (1987). *Love in America: Gender and Self-Development*. Cambridge: Cambridge University Press.
- Clark, M. S., & Finkel, E. J. (2004). Does expressing emotion promote well-being? It depends on relationship context. In L. Z. Tiedens & C. W. Leach (Eds.), *The social life of emotions* (pp. 105–128). Cambridge University Press.
- Clark, M. S., Fitness, J., & Brissette, I. (2001). Understanding people's perceptions of relationships is crucial to understanding their emotional lives. In M. B. Brewer & M. Hewstone (Eds.), *Emotion and motivation* (pp. 21–46). Malden: Blackwell Publishing.
- Clark, M. S., & Mills, J. (1979). Interpersonal attraction in exchange and communal relationships. *Journal of Personality and Social Psychology*, *37*, 12–24.
- Clark, M. S., & Mills, J. (1993). The difference between communal and exchange relationships: What it is and is not. *Personality & Social Psychology Bulletin*, *19*, 684–691.
- Clark, M. S., & Monin, J. K. (2006). Giving and receiving communal responsiveness as love. In R. J. Sternberg & K. Weis (Eds.), *The new psychology of love* (pp. 200–224). New Haven: Yale University Press.
- Cutrona, C. E. (1996). *Social support in couples: Marriage as a resource in times of stress*. Thousand Oaks, CA: Sage.
- Goldman, N. (1993). Marriage selection and mortality patterns: Inferences and fallacies. *Demography*, *30*, 189–208.

- Goldman, N., Korenman, S., & Weinstein, R. (1995). Marital status and health among elderly. *Social Science and Medicine*, *40*, 1717–1730.
- Graham, S. M., Huang, J., Clark, M. S., & Helgeson, V. (2008). The positives of negative emotion: Willingness to express negative emotions promotes relationships. *Personality and Social Psychology Bulletin*, *34*, 394–406.
- Greenstein, T. N. (1996). Husbands' participation in domestic labor: Interactive effects of wives' and husbands' gender ideologies. *Journal of Marriage and the Family*, *58*, 585–595.
- Hochschild, A. R. (1989). *The second shift*. New York: Avon Books.
- Hochschild, A. R., & Machung, A. M. (1999). *The second shift*. New York: Avon Books, Inc.
- House, J. S., Landis, K. R., & Umberson, D. (1988). Social relationships and health. *Science*, *241*(4865), 540–545.
- Iida, M., Seidman, G., Shrout, P. E., Fujita, K., & Bolger, N. (2008). Modeling support provision in intimate relationships. *Journal of Personality and Social Psychology*, *94*, 460–478.
- Johnson, N., Backlund, E., Sorlie, P. D., & Loveless, C. A. (2000). Marital status and mortality: The national longitudinal mortality study. *Annals of Epidemiology*, *10*, 224–238.
- Kaplan, R. M., & Kronick, R. G. (2006). Marital status and longevity in the United States population. *Journal of Epidemiological Community Health*, *60*, 760–765.
- Kearns, J. N., & Leonard, K. E. (2004). Social networks, structural interdependence, and marital quality over the transition to marriage: A prospective analysis. *Journal of Family Psychology*, *18*, 383–395.
- Kessler, R. C., & McRae, J. A. (1982). The effect of wives' employment on the mental health of married men and women. *American Sociological Review*, *47*, 217–227.
- Kiecolt-Glaser, J. K., & Newton, T. L. (2001). Marriage and health: His and hers. *Psychological Bulletin*, *127*, 472–503.
- Litwak, E., Messeri, P., Wolfe, S., Gorman, S., Silverstein, M., & Guilarte, M. (1989). Organizational theory, social supports and mortality rates: A theoretical convergence. *American Sociological Review*, *54*, 49–66.
- Lupton, J., & Smith, J. P. (2003). Marriage, assets, and savings. In S. Grossbard-Shechtman (Ed.), *Marriage and the Economy: Theory and Evidence from Industrialized Societies* (pp. 129–152). Cambridge, England: Cambridge University Press.
- Miller, J. B. (1976). *Toward a New Psychology of Women*. Boston: Beacon.
- Mills, J., & Clark, M. S. (1982). Exchange and communal relationships. In L. Wheeler (Ed.), *Review of Personality and Social Psychology* (pp. 121–144). Beverly Hills, CA: Sage.
- Mills, J., Clark, M. S., Ford, T. E., & Johnson, M. (2004). Measurement of communal strength. *Personal Relationships*, *11*, 213–230.
- Monin, J. K., Clark, M. S., & Lemay, E. P. (2008). Communal responsiveness in relationship with female versus male family members. *Sex Roles*, *59*, 176–188.
- Monin, J. K., Martire, L. M., Schulz, R., & Clark, M. S. (2009). Willingness to express emotion to older adult caregiving spouses. *Emotion*, *9*(1), 101–106.
- Monin, J. K., Schulz, R., Martire, L. M., Jennings, J. R., Lingler, J. H., & Greenberg, M. S. (2010). Spouses' cardiovascular reactivity to their partners' suffering. *Journals of Gerontology: Psychological Sciences*, *65B*(2), 195–201.
- Nathanson, C. (1980). Social roles and health status among women: The significance of employment. *Social Science and Medicine*, *14*, 463–471.
- Reis, H. T., Clark, M. S., & Holmes, J. G. (2004). Perceived partner responsiveness as an organizing construct in the study of closeness and intimacy. In D. J. Mashek & A. Aron (Eds.), *Handbook of closeness and intimacy* (pp. 201–225). Mahwah, NJ: Erlbaum.
- Schoenborn, C. A. (2004). *Marital Status and Health: United States, 1999–2002*, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Atlanta, GA.
- Stroebe, M., Stroebe, W., & Henk, S. (2001). Gender differences in adjustment to bereavement: An empirical and theoretical review. *Review of General Psychology*, *5*(1), 62–83.
- Thoits, P. A. (1992). Identity structures and psychological well-being: Gender and marital status comparisons. *Social Psychology Quarterly*, *55*, 236–256.
- Thompson, L., & Walker, A. J. (1989). Gender in families: Women and men in marriage, work, and parenthood. *Journal of Marriage and the Family*, *51*, 845–871.
- Tower, R. B., Kasl, S. V., & Derefsky, A. S. (2002). Types of marital closeness and mortality risk in older couples. *Psychosomatic Medicine*, *64*, 644–659.
- Turner, R. J., & Marino, F. (1994). Social support and social structure: A descriptive epidemiology. *Journal of Health and Social Behavior*, *35*, 193–212.
- Uchino, B. N., Cacioppo, J. T., & Kiecolt-Glaser, J. K. (1996). The relationship between social support and physiological processes: A review with emphasis on underlying mechanisms and implications for health. *Psychological Bulletin*, *119*, 488–531.
- Umberson, D. (1987). Family status and health behaviors: Social control as a dimension of social integration. *Journal of Health and Social Behavior*, *28*, 306–319.
- Umberson, D. (1992). Gender, marital status, and the social control of behavior. *Social Science and Medicine*, *34*, 907–917.
- Umberson, D., Chen, M. D., House, J. S., Hopkins, K., & Slaten, E. (1996). The effect of social relationships on psychological well-being: Are men and women really so different? *American Sociological Review*, *61*, 837–857.
- Verbrugge, L. M. (1976). Females and illness: Recent trends in sex differences in the United States. *Journal of Health and Social Behavior*, *17*, 387–403.
- Waite, L. J., & Gallagher, M. (2000). *The case for marriage: Why married people are happier, healthier, and better off financially*. New York: Doubleday.
- Waite, L. J., & Lehrer, E. L. (2003). The benefits from marriage and religion in the United States: A comparative analysis. *Population Development Review*, *29*, 255–276.
- Wanic, R., & Kulik, J. (2011). Toward an understanding of gender differences in the impact of marital conflict on health. *Sex Roles*, this issue. doi:10.1007/s11199-011-9968-6.
- Wellman, B., & Wortley, S. (1990). Different strokes from different folks: Community ties and social support. *American Journal of Sociology*, *96*, 558–588.
- Williamson, G. M., & Clark, M. S. (1989). Providing help and desired relationship type as determinants of changes in moods and self-evaluations. *Journal of Personality and Social Psychology*, *56*, 722–734.