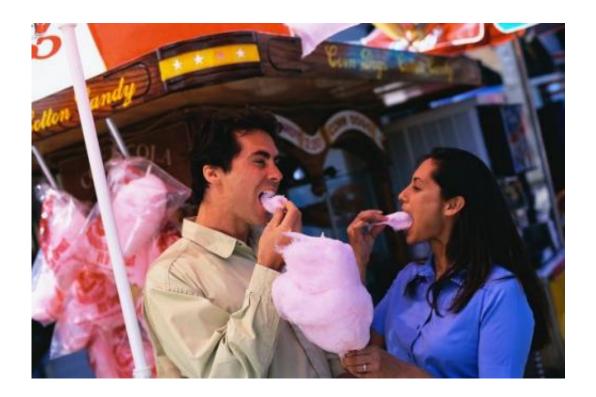


Could your relationship be contributing to your weight gain?

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(Medical Xpress)—A University of Arizona study is looking at whether couples develop unhealthy eating and activity habits as a way of coping with relationship stress or bonding with their partner.

The obesity epidemic in the **United States** has been linked to a number



of factors – environmental, political, economic. One University of Arizona researcher now is looking at how a person's relationship with his or her <u>romantic partner</u> might also play a role.

Emily Butler, associate professor of family studies and human development, is leading a study that looks at how certain relationship dynamics in romantic couples might lead to <u>unhealthy habits</u> and ultimately unwanted <u>weight gain</u>.

"We're looking at the kinds of emotional and interpersonal <u>behavioral</u> <u>patterns</u> going on in couples and to what extent those predict unhealthy versus <u>healthy eating</u> and activity habits and eventually weight gain or weight maintenance," said Butler, who directs the UA's <u>Health</u> & Interpersonal Systems Research Group.

The study, funded by the National Institutes of Health, is focused on romantic couples who recently moved in together and are just starting to establish shared lifestyle habits.

Researchers will look for two common relationship patterns and how those patterns might be linked to health behaviors.

The first is the "demand-withdrawal" pattern, in which one partner, often with the best intentions, pressures the other to change a habit; the other partner, feeling nagged, pulls away and engages even more in the criticized habit, perhaps as a means of self-medication or emotion regulation, Butler said.

Clinical observations in the context of alcohol addiction suggest that one partner's urging of another to stop drinking can actually lead them to drink more to deal with the tension, however, this hasn't been examined relative to food, Butler said.



"We predict that one way couples can get themselves into a bad pattern is if one person is maybe struggling a little more with weight and the other person, trying to be helpful, starts nagging them and getting on their case," she said. "The person struggling with the bad habits feels even worse, and there's at least some evidence that people will eat as sort of a self medication or emotional regulation."

While some may turn to food to cope with negative emotions, others may engage in unhealthy habits because they are actually associated with positive feelings in a relationship, which can be equally problematic, Butler said.

Therefore, she and her researchers also will look at whether study participants exhibit what is known as the "symptom system fit" pattern, in which partners engage in certain behaviors together that seem to benefit the relationship in some way, even if those behaviors are unhealthy to the individual.

For example, previous research by Butler and her collaborators showed that couples in which both partners were smokers interacted more positively when discussing a disagreement if they were both able to smoke during the discussion.

"You have some symptom of unhealthy behavior, and that behavior gets maintained because it in some way fits the relational system, either by creating closeness or avoiding conflict," Butler said.

Butler expects the same to be true when it comes to eating and physical activity habits.

"If we see evidence of couples sharing in excessive eating or sedentary activities together in ways that actually bond them and make them feel warm and fuzzy about each other, those couples could get in trouble over



time," Butler said. "Those unhealthy eating and activity patterns would be very hard to break because they're contributing in a good way to the relationship."

Butler is working with David Sbarra, associate professor of psychology; Cynthia Thomson, professor of public health; and a team of post doctoral, graduate and undergraduate researchers on the two-year study, which is currently recruiting participants.

She hopes to look at approximately 80 healthy couples, married or unmarried, who moved in together within the past year, ideally within just six months.

"That's a real transitional point. You've got two people who've been going about their lives doing their health habits however they do them, and now they come together and need to negotiate shared lifestyle habits," Butler said. "How often do we eat out? Do we spend our money on healthier food or don't we? When do we eat? What do we eat? Do we go to the gym?"

Couples will be asked to engage in discussions of various lifestylerelated questions, which researchers will review for evidence of either demand-withdrawal or symptom system fit. Participants also will be weighed and measured and complete in-depth interviews about their diet and activity habits.

They will then be asked to independently keep a 10-day diary, answering a series of questions about their emotions toward their partner and about the amount of food they have eaten or the amount of physical activity they have engaged in, relative to what is normal for them.

After six months, participants will complete a follow-up assessment of their weight and body fat percentage, as well as their mental health,



physical health and relational well-being.

Butler believes a person's interpersonal relationships may play a bigger role in weight regulation than we think.

"The <u>obesity epidemic</u> is a lot about politics and economics and neighborhoods, but we all live in those environments, and there are plenty of people who are not gaining weight, so the goal is to study the things that an individual or a family can do regardless of their economic situation and the stresses on them," she said. "The one thing people can do under a lot of stress is make their own decisions."

Butler hopes her study's findings will help aid in the development of effective family weight loss and healthy weight-maintenance therapies.

"I think what we can hope to learn is some of these individual differences between couples that would allow us to more accurately target couple-level, and eventually family-level, weight maintenance or loss interventions that would work with the kind of dynamic going on," she said. "How these different couples are going to succeed is going to be very different depending on what's going on between them around health behavior."

Provided by University of Arizona

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