

Brief Report

Marriage trends among Americans with childhood-onset disabilities, 1997–2013

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Abstract

Background: People with disabilities are less likely to marry than people without disabilities. Trends in marriage and assortative mating among people with disabilities have not been investigated.

Hypothesis: This study tested if marriage likelihood converged between adults with childhood-onset disabilities and their peers, and if married adults with childhood-onset disabilities became more likely to have a spouse without disabilities.

Methods: U.S. data from annual National Health Interview Surveys were used to identify adults ages 18–44 surveyed between 1997 and 2013 ($N = 562,229$). Childhood-onset disability was defined by self-report of physical conditions limiting the respondent's activities since age <18 years. Weighted multivariate logistic regressions were used to compare trends in ever marrying and current marriage to a spouse without reported disabilities between adults with childhood-onset disabilities and adults without childhood-onset disabilities.

Results: Across survey years, the decline in odds of having ever married was stronger among adults with childhood-onset disabilities (OR = 0.94; 95% CI: 0.93, 0.95; $p < 0.001$) than among adults without childhood-onset disabilities (OR = 0.96; 95% CI: 0.96, 0.96; $p < 0.001$), and divergence in these trends was statistically significant ($p = 0.001$). Employment and college attendance were positively correlated with marriage among people with childhood-onset disabilities. Among adults married at the time of the survey, those with childhood-onset disabilities were less likely to have a spouse without reported disabilities.

Conclusions: The American retreat from marriage has been accelerated among adults with childhood-onset disabilities, with high rates of in-marriage to other people with disabilities persisting in this group. © 2016 Elsevier Inc. All rights reserved.

Keywords: Disability; Marriage; Emerging adulthood; Assortative mating

Social integration of people with disabilities has been a focus for activism, research, and legislation in recent decades.^{1–3} Growing up with a disability influences people's transition to adulthood, a period characterized by completing formal education, beginning full-time work, entering a committed romantic relationship, and having children.⁴ People growing up with a disability are less likely to marry compared to people without disabilities.^{5–9} For example, among American young adults, disability was associated with 14% lower hazard of entry into first marriage.⁷ This delay of marriage among young adults with disabilities may delay transitions to other adult roles, including employment, parenthood, and independent living.^{5,10} Diverse barriers to romantic relationships have been identified among people growing up with disabilities.^{9,11} People with disabilities experience limited

opportunities to meet romantic partners, discrimination by potential partners, and negative self-perceptions of their body and sexuality.^{9,11,12} According to a recent synthesis of the literature, relationship formation among people with disabilities may also be subject to criticism from their families, their partner's families, or health care providers.¹¹

Assortative mating on disability status may further limit the marriage market for people with disabilities.¹³ Inter-marriage has been described as the final frontier of social integration; for example, racial/ethnic intermarriage indicates the blurring of social boundaries among racial and ethnic groups.¹⁴ Considering the role of disability in the marriage market, people without disabilities may be wary of marrying a person with disabilities due to stereotypes linking disability to asexuality, dependence, and other unfavorable characteristics.¹¹ Meanwhile, people growing up with disabilities may be likely to seek out peers with disabilities who can relate to the challenges they experience.^{11,15} The resulting segregation of people with

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disabilities within peer networks may increase their exposure to potential partners who also have a disability, but decrease their exposure to potential partners who do not have disabilities. Thus, people with disabilities may be disproportionately unlikely to marry a person without disabilities because they are excluded from the peer networks formed by people without disabilities, even if they participate in the same social activities.

Despite evidence that disability rights legislation and activism have improved the social integration of people with disabilities,^{16–18} no research has tested whether marital outcomes among people with disabilities have converged with marriage rates among people without disabilities, or whether assortative mating on disability status has diminished over time. This study examines how lifetime experience of marriage and the choice of spouse have changed in recent years among Americans with childhood-onset physical disabilities. The following hypotheses are tested: (1) that odds of marriage among people with childhood-onset disabilities have increased, closing the gap in marriage rates across disability status, and (2) that odds of married people with childhood-onset disabilities having a spouse without disabilities have increased, consistent with declining assortative mating on disability status. These trends may reveal whether Americans with physical disabilities are becoming increasingly socially integrated, or are experiencing ongoing social exclusion, as reflected in their romantic relationships.

Methods

Data

Data were obtained from the National Health Interview Survey (NHIS), a repeated cross-sectional survey of non-institutionalized civilians conducted annually by the Centers for Disease Control and Prevention (CDC). Secondary analysis of these de-identified data did not require Institutional Review Board approval. Annual NHIS data and documentation are maintained online by the CDC.¹⁹ The 1997–2013 surveys were pooled to create the study dataset. Earlier years were excluded due to different survey methodology and disability definitions, as documented in the 1997 survey description.²⁰ The 1997–2013 sample contained records for 1,598,006 individuals. To identify the relationship between childhood-onset disability and current marital status, this sample was restricted to 588,552 people aged 18–44 years at interview, of whom 578,759 contributed data on these variables. The age limit of 44 years was consistent with U.S. surveys describing relationship and fertility population characteristics.²¹ As physical and mental disabilities may differentially influence chances of marriage, 9,793 people who reported disability related to any mental health conditions were excluded. Exclusion of 16,530 people missing covariate data led to a final sample of 562,229 cases (96% of age-eligible respondents).

Outcomes

Marital status included never married, married, separated, divorced, widowed, or “living with partner,” with a follow-up question assessing whether the respondent had ever married. NHIS data included same-sex and different-sex relationships since 1997,²² although same-sex marriages were not legally recognized until recent years. The primary outcome compared respondents who had ever married (currently married, separated, divorced, widowed, or previously-married cohabiters) and respondents who had never married. Among currently married respondents, a secondary outcome of marriage to a spouse without reported disabilities was coded as 1 if the spouse had no chronic condition limiting their activities, and 0 otherwise.

Disability status

The NHIS measure of disability was revised in 1997 to capture a broad range of health conditions limiting adults' participation in activities.^{20,23} Disability status was ascertained as follows:

Are you limited in any way in any activities because of physical, mental or emotional problems? What conditions or health problems cause your limitations? [Interviewer hands card with limitation categories to the respondent and codes the response.] How long have you had [this condition]? [Interviewer codes number of days, weeks, months, or years, or notes condition present since birth.]

Childhood-onset disability was defined as a condition that limited the respondent's activities and began before age 18, based on the reported duration since onset.

Covariates

Control variables included gender, age (years), race/ethnicity (non-Hispanic White; non-Hispanic Black; Hispanic; or other), educational attainment, and employment. Educational attainment was coded as less than high school (0–11 years of schooling), high school or equivalent (12 years of schooling), some college or an associate's degree (13–15 years of schooling), and four-year college degree (≥ 16 years of schooling). Employment status was dichotomized as employed (including respondents who had a job but were not currently working) and not employed (including respondents out of the labor force for any reason).

Statistical analysis

Descriptive statistics were presented as means or proportions with 95% confidence intervals (CI), stratified by disability status. Logistic regression models of each outcome (ever marrying; marriage to a spouse without disabilities) included the number of years (trend) since 1997

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