

What are the benefits of being partnered?

Background

Some of the earliest research to demonstrate the importance of social connection to our health and wellbeing emerged from studies among bachelors, war wives, and widows (Cox & Ford, [1964](#); Duval, [1945](#); Moine, [1953](#)). This is perhaps unsurprising given how central our romantic relationships are to the structure of our daily experiences and the course of our lives (Coleman et al., [2013](#); Simpson & Howland, [2012](#)). However, with people marrying later and later in life (Brown et al., [2023](#)), more and more opting to stay single (van den Berg & Verbakel, [2022](#)), and others entering into alternative relationship and cohabitation arrangements (Moors, [2017](#), [2021](#); Esteve et al., [2012](#)), it is necessary to consider what role romantic relationships play in our social health and wellbeing.

Purpose

The purpose of this evidence brief is to examine the effect of relationship status on social health and wellness. In doing so, we recognize that there is considerable variation in the structure, function, and quality of intimate partner relationships and that most research on this topic focuses on a fairly narrow subset of these relationships – with strong bias towards middle-income, opposite-sex, anglo-sphere, two-person relationships. As such, due caution should be taken in generalizing the results of this review. Nevertheless, we believe that such a review is instructive and informative to our understanding of contemporary social life and the factors that structure it.

Evidence from Existing Studies

Are Romantic Relationships Associated with Better Health and Wellbeing?

In examining the literature describing the effects of romantic relationships on wellbeing, there appears to be a clear and consistent positive association (Apostolou et al., [2023](#); Noguchi, [2023](#); Brown et al., [2021](#); Stahnke & Cooley, [2020](#); Boger & Huxhold, [2020](#); Smith, [2019](#); Gomez-Lopez et al., [2019](#); Weisskirch, [2018](#); Whitton et al., [2018](#); Braithwaite & Holt-Lunstad, [2017](#); Pietromonaco & Collins, [2017](#); Slatcher & Selcuk, [2017](#); Umberson et al., [2015](#); Adamczyk & Sergin, [2015](#); Newcomb, [2020](#); Stadler et al., [2012](#); Stack & Eshleman, [1998](#); Reis & Franks, [1994](#)). Though these effects do appear to be stronger for men than women (Clouston, [2014](#)).

The mechanisms through which romantic relationship benefit individuals are diverse. Indeed, romantic relationships foster companionship and help us build out our social networks, they provide stability, they deliver emotional and material supports, and they shape our daily lived experiences (Apostolou et al., [2023](#); Gray & Roberts, [2023](#); Corotta et al., [2022](#); Chin et al., [2021](#); Ditzen et al., [2019](#); Whitton et al., [2018](#); Weisskirch, [2018](#); Baams, [2014](#); Cable et al.,

[2012](#); Braithwaite et al., [2010](#); Ditzen et al., [2008](#); Howe, [2002](#)). Romantic partners also are a source of physical intimacy, often manifest through hugs, kisses, and other forms of social touch. Such physical intimacy has biological effects, including the release of oxytocin, which fosters closeness and trust and reduces stress (Berretz et al., [2022](#); Kolodziejczak et al., [2022](#); Tejada et al., [2020](#); Ditzen et al., [2019](#); Kashdan et al., [2018](#); Schoebi & Randall, [2015](#); Leavitt & Willoughby, [2015](#); Ditzen et al., [2007](#)). Furthermore, romantic relationships provide opportunities for sexual intimacy (Ein-Dor & Hirschberger, [2012](#); Leavitt & Willoughby, [2015](#); Kashdan et al., [2018](#)), helping individuals meet their reproductive needs and sexual desires (Ein-Dor & Hirschberger, [2012](#); Kashdan et al., [2018](#)). We rely on romantic partners to cope and navigate stressful situations by seeking their advice and comfort (Umberson et al., [2015](#); Merz et al., [2014](#); Merz et al., [2014](#); Bodenmann, [1997](#)). In all these ways and more, close relationships contribute to healthy, satisfying, and happy lives.

Does Relationship Quality Mediate the Effect of Relationships on Wellbeing?

However, the benefits of romantic relationships vary from couple to couple and appear to be a function of relationship quality (Londero-Santos, [2021](#); Hawkey et al., [2008](#); Stutzer & Frey, [2005](#); Gove et al., [1983](#)), which itself is dependent on partner investments, shared goals and values, communication quality, conflict management, and an array of other factors (du Plooy & de Beer, [2018](#); Girme et al., [2014](#); Gere & Schimmack, [2013](#); Maatta & Uusiautti, [2012](#); Clement, [2008](#); Litzinger & Gordon, [2005](#); Cramer, [2004](#)). High quality, satisfying relationships are a predictor of wellbeing (Hanus et al., [2022](#); Othman et al., [2022](#); Dush et al., [2008](#)), while poor quality relationships can cause considerable distress and harm (Lawrence et al., [2019](#)). Indeed, relationships that lack intimacy have been shown to have widespread negative effects, lowering our self-esteem, causing a sense of isolation, and leading to poor coping behaviours (Tan et al., [2022](#); Brown et al., [2021](#); Ditzen et al., [2019](#); Whitton et al., [2013](#); Schneirderman et al., [2012](#); Rokach et al., [2007](#)). With poorer quality relationships, our ability to navigate challenges is impaired (Merz et al., [2014](#)) and such relationships pose risks for our happiness, with significant material and emotional adversity experienced upon the dissolution of a relationship (e.g., through divorce or death; Maki et al., [2022](#); Nicolaisen & Thorsen, [2024](#)).

Are Dyadic Romantic Relationships More Important than Other Relationship Types?

Given the differing effects of high and low quality relationships, some researcher questions whether romantic relationships really are the cause of increased happiness among those in these relationships. For example, studies comparing different types of romantic relationships, don't seem to suggest that marriage is innately superior to other relationship arrangements (Grundstrom et al., [2021](#)). As well, evidence has emerged that people who tend to enter into relationships are happier and healthier in the first place; and that getting married appears to have only a small overall benefit when looking at within-person effects (Stutzer & Frey, [2005](#); Lucas et al., [2003](#)). Furthermore, relationship satisfaction is highly variable – beginning very high, dipping as the relationship unfolds, and then eventually rebounding as couples settle in (Buhler et al., [2021](#)) – meaning that the effect of relationships varies over time. Finally, studies suggest that a wide variety of close relationships are associated with positive health outcomes – meaning romantic relationships may not be uniquely beneficial as long as our various social and relational needs are satisfied (Singh et al., [2023](#)).

With these caveats in mind, it is difficult to say based on the existing research whether romantic relationships are better at meeting our needs in comparison to other relationship types or



arrangement. They may very well be – perhaps because of their intensity, duration, or the breadth of needs they fulfill. To explore this question, emerging bodies of research have examined the effects of (1) singlehood, (2) consensual non-monogamy, and (3) other close relationships (e.g., best friends, close friends) on psychosocial outcomes.

Singlehood. Studies of singlehood show that it can present as a risk factor for poorer wellbeing (Hoan & MacDonald, [2024](#)) – but that these negative effects can be reduced through adjustment and support from friends and family (Park et al., [2022](#); Girme et al., [2021](#); Adamczyk, [2016](#)). In fact, some evidence suggests that single people are even better than married individuals at staying in touch and interacting with their broader social networks compared to those in relationships (Fisher et al., [2021](#); Sarkisian & Gerstel, [2015](#)). As well, individuals have a variety of reasons for being single and for some it may be an adaptive or even optimal social strategy (Apostolou et al., [2020](#); Hostetler, [2009](#)). Perhaps of most importance, multiple authors highlight that any negative effects of singlehood may arise from strong social norms that encourage coupling and stigmatize being single – thereby creating significant anxieties about loneliness, attachment, and self-worth (Dupuis & Girme, [2024](#); Mrozowicz-Wronska et al., [2023](#); Grime et al., [2023](#); Yu & Hara, [2023](#); Sprecher & Felmlee, [2021](#); Bergstrom & Vivier, [2020](#); Fisher & Sakaluk, [2020](#); Poortman & Liefbroer, [2010](#); Budgeon, [2008](#); DePaulo & Morris, [2006](#)). Furthermore, as social norms have changed, it appears that the effect of being single on loneliness has declined (Boger & Huxhold, [2020](#)) – supporting the idea that relationship norms may be particularly salient in shaping the effects of these relationships.

Consensual Non-Monogamy. Similarly, studies comparing individuals in monogamous and consensually non-monogamous relationships suggest that consensually non-monogamy is associated with equal, and perhaps even better, relationship quality and wellbeing (Gupta et al., [2023](#); Conley et al., [2012](#)) – though some forms of polygamy (e.g., non-consensual) have been linked to worse outcomes, particularly for women and children (Bahari et al., [2021](#); Rahmanian et al., [2021](#); Al-Sharfi et al., [2015](#); Shepard, [2013](#)). Furthermore, social pressures, and mono-normativity, are observed to be important stressors as they generate stigma for non-monogamous relationship arrangements (Rodrigues, [2024](#)).

Other Close Relationships. Finally, researchers have examined the role that other (non-romantic) close relationships have on wellbeing (Demir et al., [2015](#)). These studies have highlighted the important role that confidants and close friends play in shaping mental health and wellbeing (Antonucci et al., [2010](#)). For example, Hudson et al. ([2020](#)) found that while spending time with friends can be more enjoyable than spending time with partners, this effect disappears when accounting for the activities engaged in with different types of partners. Furthermore, they reported that after statistical adjustments, global well-being was primarily a function of the total amount of time spent with one's romantic partner and not with other types of close relations. Similarly, multiple studies have reported that support from partners and family members has a stronger effect on wellbeing than support from friends (Brannan et al., [2013](#); Demir et al., [2010](#); Bertera, [2005](#); Wallen & Lachman, [2000](#)) – suggesting that the duration, intensity, and durability of relationships may be important to shaping how much these relationships influence wellbeing. Importantly, as with studies examining singlehood and consensual non-monogamy, it is important recognize that cultural norms and expectations about our various relationships may play an important role in shaping their nature and function (Sprecher & Regan, [2002](#)). Yet, nevertheless, it appears that we do hold our romantic partners



in high regard, at least on average (Umemura et al., 2014), and that this privileged position gives our romantic relationships significant influence on our wellbeing (VanderDrift et al., 2012; Zimmer-Gembeck, 1999).

Analyses from The Canadian Alliance for Social Connection and Health

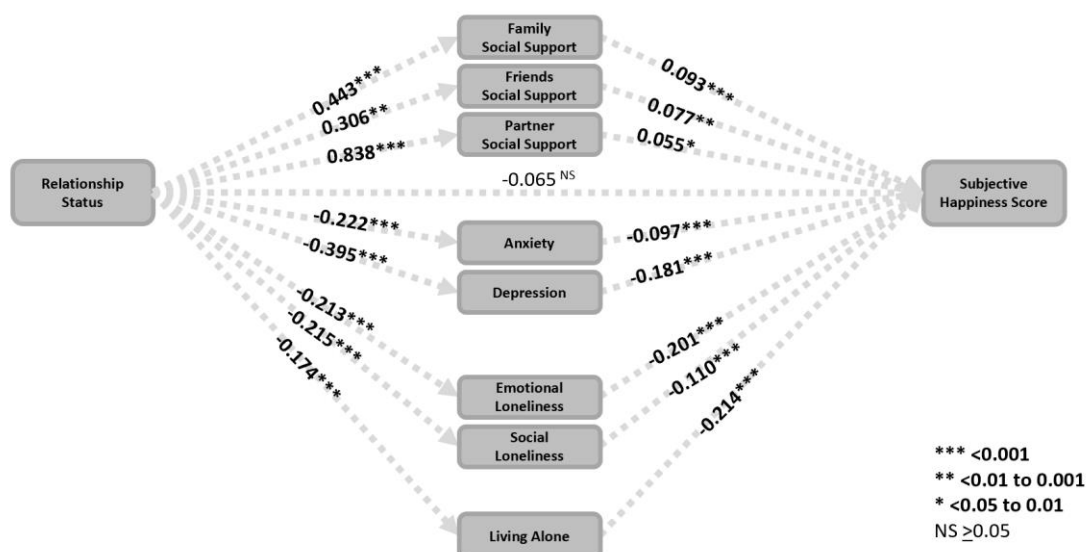
Using data from the 2021 Canadian Social Connection Survey (n = 2,448), we examined the association between relationship status and subjective happiness scores. In doing so, these analyses showed that people in relationships were, on average, happier than those who were not in an intimate relationship (See **Figure 1**).

Figure 1. Bivariable Association Between Subjective Happiness and Relationship Status



To understand the paths by which relationship status shaped subjective happiness, we constructed a structural equation model and conducted a pathway analysis. This allowed us to identify associations between Controlling for demographic characteristics, and whether participants worked from home, this model tested whether the effect of being in a relationship impacted happiness through effects on social support from family members, friends, and significant others, anxiety and depression, emotional and social support, and living alone. Results of this analysis suggested that there was partial mediation across these variables, with 8.8% due to lower anxiety scores, 29.5% due to lower depression scores, 17.1% due to higher support from family, 9.7% due to higher support from friends, 18.9% due to higher support from their partner, 17.6% due to lower emotional loneliness, 9.7% due to lower social loneliness, and 15.3% due to not living alone. When all these factors were accounted for, the effect of relationship became negative and non-significant (See **Figure 2**) – suggesting that being in a relationship that fails to provide these effects may actually have a negative effect.

Figure 2. Structural Equation Model Path Analysis



Next, we then examined whether social support from friends, family, or significant others was the strongest predictor of emotional loneliness, social loneliness, and subjective happiness.

For social loneliness ($n = 2,280$), our findings suggest that friend support plays a pivotal role, exhibiting the strongest negative association ($B = -0.3401$, $SE = 0.0335$, $p < .001$), indicating that higher levels of support from friends are significantly related to lower levels of social loneliness. This effect notably surpasses that of family support, which also negatively correlates with social loneliness ($B = -0.1497$, $SE = 0.0338$, $p < .001$), albeit to a lesser extent. Support from significant others similarly shows a negative relationship with social loneliness ($B = -0.1513$, $SE = 0.0325$, $p < .001$), paralleling the impact of family support. The effects of friend support were statistically stronger than either family support ($p < 0.001$) or support from a significant other ($p < 0.0001$) and the effects of family and significant other support were not statistically different from one another ($p = 0.975$).

Regarding emotional loneliness ($n = 2,282$), the analysis indicates that family support ($B = -0.1291$, $SE = 0.0288$, $p < .001$) and significant other support ($B = -0.1389$, $SE = 0.0276$, $p < .001$) are both negatively associated with emotional loneliness, suggesting these sources of support play a protective role. Conversely, friend support did not independent predict emotional loneliness ($B = -0.0329$, $SE = 0.0285$, $p = 0.2476$), indicating a divergent role of friend support in emotional versus social loneliness contexts. The effects of family versus significant other support were not statistically different ($p = 0.8307$).

Finally, for subjective happiness ($n = 2,282$), support from friends ($B = 0.1376$, $SE = 0.0349$, $p < .001$), family ($B = 0.3161$, $SE = 0.0352$, $p < .001$), and significant others ($B = 0.1592$, $SE = 0.0337$, $p < .001$) were each important – though the effect was stronger for family support compared to friends support ($p = 0.003$) and significant other support ($p = 0.005$), which did not differ from one another ($p = 0.705$).

Discussion

The evidence summarized above describes positive associations between being in a relationship and positive health and social outcomes. However, based on the available evidence studying the significance of romantic relationships within our broader social lives, it is unclear whether dyadic romantic relationships are innately superior to other relationship types and arrangements. Instead, the effect of romantic relationships on wellbeing appears to be strongly contingent on the quality of these relationships, as well as society's broader normative expectations for those who are not in a romantic relationship. That said, stable, loving, close relationships serve a variety of important functions in meeting the diverse relational and social needs of individuals.

In considering the quality of existing studies on this topic, we note that the evidence has a strong focus on closed, dyadic, romantic relationships. More research that explores the benefits and challenges of other types of intimate relationships is needed – particularly as social norms regarding relationships continue to change (Fairbrother et al., [2019](#); Levine et al., [2018](#); Hauptert et al., [2017](#)). As well, while there has been significant progress made in the quality of study designs (e.g., longitudinal studies), continued research is needed to further isolate specific mechanisms and pathways by which romantic relationships provide health and social benefits.



As well, research is needed for other relationship types and configurations to understand how they can provide optimal benefits to those who are and are not in romantic relationships.

Conclusion

Based on the evidence summarized above, we recommend policies and practice that support the development of healthy relationships within and outside the context of romantic relationships. Individuals should be supported to develop healthy social attachments regardless of whether they choose to enter romantic relationships. We also encourage continued research on how to optimize relationship quality across different types of relationships to ensure that individuals can derive the most benefit from their social interactions with others. While romantic relationships may still prove to be among the most efficient strategies for meeting our social and relational needs, it is important to recognize that they may not suit all individuals. Reducing stigma around alternative relationship strategies can mitigate potential harms arising from prejudice against single or non-monogamous individuals.

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