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DEMOGRAPHIC GROUP DIFFERENCES IN DOMAIN-SPECIFIC WELL-BEING

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Although research is available on group differences for overall well-being, little research has explored group differences for domain-specific well-being. Therefore, we examined differences in overall and domain-specific well-being across several demographic variables: gender, income, marital status, age, ethnicity, education level, employment status, occupation, and housing tenure. We analyzed data from 1,087 participants on the I COPPE Scale, which provides scores for overall, interpersonal, community, occupational, physical, psychological, and economic well-being. Group differences were found across multiple domains with small to large effect sizes. While there were no gender differences, compared with those in the same demographic variable, higher income earners, married, elderly, Hispanic, educated, white-collar professionals, and homeowners reported the highest levels of well-being. The unemployed reported the lowest level of well-being on all but one of the domains–the interpersonal domain. Findings suggest people report different levels of well-being based on their unique demographic and life circumstances.

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Research supports the distinction between overall well-being and domain-specific well-being. Whereas the former refers to global assessments of satisfaction with life, the latter pertains to satisfaction with areas such as health, relationships, financial security, employment, and sense of community (Diener, Scollon, & Lucas, 2009). For the purpose of

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JOURNAL OF COMMUNITY PSYCHOLOGY, Vol. 44, No. 4, 499–515 (2016)
Published online in Wiley Online Library (wileyonlinelibrary.com/journal/jcop).
 DOI: 10.1002/jcop.21784

clarity, we will use the term overall well-being (OWB) to refer to subjective well-being, overall quality of life, and overall life satisfaction.

While many empirical studies link OWB to demographic variables such as income, gender, and age (Diener & Ryan, 2009), not much is known about group differences in domain-specific well-being (DSWB). Our study contributes to this research by using the I COPPE Scale, designed to measure self-report scores of DSWB in the following domains: **I**nterpersonal, **C**ommunity, **O**ccupational, **P**hysical, **P**sychological, and **E**conomic (Myers et al., 2014; Prilleltensky et al., 2015).

Rather than examine well-being through an omnibus lens, as is the approach used in the majority of research studies, we use this domain-specific tool to provide a more accurate and informed depiction of well-being. The value of these specific domains for well-being has been previously documented (Prilleltensky et al., 2015). Using this tool, we examine both OWB and DSWB among diverse groups (see Table 1 for participant demographics). We then analyze group differences based on gender, income, marital status, age, ethnicity, education level, employment status, occupation, and housing tenure. To our knowledge, no other study has examined demographic group differences in DSWB. Existing research on demographic group differences in well-being is inconsistent because of the use of disparate measures of well-being. It is our aim, by using a coherent and consistent approach (i.e., the I COPPE Scale), to establish a baseline literature for main effects.

In the following section, we review existing research for nine demographic variables and their relationships with self-reports of DSWB. Overall, the research is quite disparate, with scant evidence in some of the domains.

Ethnicity

The majority of studies involving ethnic groups in the United States suggest group differences do exist for DSWB. Whites typically report higher levels of OWB compared with minority groups (Hughes & Thomas, 1998). On indices associated with interpersonal well-being, Blacks score lower than Whites (Locher et al., 2005). Similarly, reports indicate that Blacks have lower occupational (Sloan, Newhouse, & Thompson, 2013) and economic well-being (Rank, 2009). Studies reveal differences in physical well-being for minority groups, with poor health emerging across the lifespan for those groups (August & Sorkin, 2010). Differences in psychological well-being exist, with Hispanics (Mui, 1996) and African Americans (Travis & Velasco, 1994) reporting higher levels of psychological distress than Whites, though evidence for this remains mixed (Nuru-Jeter, Williams, & LaVeist, 2008).

Gender

Studies consistently show no significant relationship between gender and OWB (Roothman, Kirsten, & Wissing, 2003). Physical (Fleishman & Lawrence, 2003) and psychological levels of well-being (Stone, Schwartz, Broderick, & Deaton, 2010) are higher for men compared with women. Similarly, studies suggest a relationship between gender and economic well-being, with women having lower financial literacy and at a higher risk of having insufficient savings at retirement compared with men (Lusardi & Mitchell, 2008). The evidence on gender and occupational well-being is contradictory, with some studies reporting gender differences (Lambert, Hogan, & Barton, 2001) and others reporting none (Cifre, Vera, Rodriguez-Sanchez, & Pastor, 2013).

Table 1. Participant Demographics

Variable	*n*	*(%)*
Gender		
Women	580	(53)
Men	507	(47)
Age		
18–25 years (emerging adults)	133	(12)
26–34 years (young adults)	211	(19)
35–54 years (mid-life)	439	(40)
55–64 years (old)	208	(19)
65 years or older (elderly)	96	(9)
Ethnicity		
White	352	(32)
African American	31	(3)
Hispanic	674	(62)
Asian	12	(1)
Native American	9	(<1)
Other	9	(<1)
Education level completed		
High school or less	241	(23)
Some college or vocational/technical school (2 years)	435	(40)
College graduate (4 years) and higher (master's, JD, PhD, MD)	389	(36)
Other	2	(<1)
Current marital status		
Divorced or separated	130	(12)
Married	553	(51)
Living with partner	87	(8)
Single	279	(26)
Widowed	38	(4)
Employment status		
Full-time	495	(46)
Part-time	153	(14)
Retired	174	(16)
Unemployed	265	(24)
Occupation		
Management and professional	332	(31)
Service	256	(24)
Sales and office	176	(16)
Manual labor	166	(15)
Current household income		
Rather not say	46	(4)
Under $19,999	176	(16)
$20,000–$29,000	133	(12)
$30,000–$49,000	239	(22)
$50,000–$74,999	257	(24)
$75,000 and above	236	(22)
Housing tenure		
Owner	670	(62)
Renter	415	(38)
Unknown	2	(<1)

Note. $N = 1087$.

Age

Research on the relationship between age and OWB is inconsistent. Some researchers claim that OWB is fairly stable across the lifespan (Diener & Suh, 1998), but others argue that OWB increases with age (Keyes, Shmotkin, & Ryff, 2002) and then decreases in very old age (Baird, Lucas, & Donnellan, 2010). On indices of interpersonal well-being, people score highest around middle age and score lowest in the oldest ages (Easterlin, 2006). In relation to community well-being, older residents report a stronger sense of community than younger residents (Prezza & Constantini, 1998). With respect to occupational well-being, older workers report a level of higher job satisfaction compared with their younger peers (Robinson, 2002). Physical well-being tends to decrease as people age (Easterlin, 2006). Research on age and psychological well-being is inconsistent (Stone et al., 2010). Similarly, research on age and economic well-being is mixed, with some reporting that it increases steadily from the 30s, with the biggest increase late in life (Easterlin, 2006), and others suggesting that it peaks in mid-life and decreases as people grow older (Tsou & Liu, 2001).

Education

In the United States, people who are more educated have greater OWB than those who are less educated (Rentfrow, Mellander, & Florida, 2009). Research on educational level and occupational well-being has been inconclusive, with some suggesting a positive relationship (Tsou & Liu, 2001), a negative relationship (Clark & Oswald, 1996), or no relationship (Idson, 1990). People with higher levels of education typically report greater physical (Marmot, Ryff, & Bumpass, 1997), psychological (Keyes, 2012), and economic well-being (Tsou & Liu, 2001) than those with less education.

Marital Status

Research shows the positive effect of marriage on virtually all domains of well-being (Coombs, 1991). Married individuals report higher levels of OWB than their unmarried or divorced counterparts (Diener, Gohm, Suh, & Oishi, 2000). Studies highlight the benefits of marriage, which include psychological (Coombs, 1991), interpersonal (Shapiro & Keyes, 2008), community (Symoens, Van de Velde, Colman, & Bracke, 2014), physical (Bookwala, Marshall, & Manning, 2014), and economic well-being. Studies also demonstrate the negative financial effect of divorce in particular (Symoens et al., 2014).

Employment Status

Employed individuals have greater OWB than do unemployed individuals (Clark & Oswald, 1994). With regard to interpersonal well-being, research cites the interpersonal benefits of employment (Darity & Goldsmith, 1996). Employment appears to be positively related to community well-being (Layard, 2005) and unemployment is associated with decreased community participation (Ganley, 2004). The strong positive relationship between employment status and physical well-being is well documented (McKee-Ryan, Song, Wanberg, & Kinicki, 2005). Individuals who work full-time have significantly greater psychological well-being compared with individuals who work part-time or are unemployed (Murphy & Athanasou, 1999). Similarly, there is a positive association between employment status and economic well-being (Prawitz et al., 2006).

Income

Research suggests a positive relationship between income and DSWB; higher income leads to higher levels of OWB (Kahneman & Deaton, 2010). Income also affects interpersonal well-being, with financial stress being associated with weaker relationships (Mansfield, Dealy, & Keitner, 2013). Financial resources have been found to affect perceptions of community satisfaction (Junk, Fox, Cann, & Tripple, 1997). Studies reveal the benefits of higher income (Jones & Wildman, 2008) and the negative consequences of lower income (Spencer, Thanh, & Lousie, 2013) on physical well-being. Low income is strongly associated with poorer psychological well-being (Sareen, Afifi, McMillan, & Asmundson, 2011); however, the benefits of income plateau at around $75,000 (Kahneman & Deaton, 2010). As would be expected, income is positively associated with economic well-being (Hsieh, 2004).

Occupation

People in high-status occupations report higher levels of OWB than those in working class groups (Rentfrow et al., 2009). Workers from higher occupational classes have greater physical well-being than workers representing lower occupational classes (Lahelma, Martikainen, Rahkonen, Roos, & Saastamoinen, 2005). Findings on the relationship between occupation and psychological well-being are mixed, with some studies reporting that a relationship exists (Lahelma et al., 2005) and others finding none (Rentfrow et al., 2009).

Housing Tenure

Homeownership is associated with better OWB (Zumbro, 2013). With regard to community well-being, the research is mixed, with one study reporting that homeowners have greater neighborhood satisfaction than renters (Ellaway & Macintyre, 1998) and another study reports no difference (Potter & Coshall, 1986). Most research on the association between housing tenure and physical well-being indicates that homeowners report better physical health than renters (Ellaway & Macintyre, 1998). Research has documented a relationship between housing tenure and psychological well-being, specifically that renters fare worse than homeowners (Macintyre et al., 2003).

STUDY AIMS

Inconsistent findings in the literature concerning DSWB and demographic profiles prompted this study's two main aims. The first aim was to determine if OWB and DSWB scores differed significantly across the following demographic variables: gender, age, ethnicity, education, marital status, employment status, income, occupation, and housing tenure. The second aim was to examine the nature and extent of potential differences (i.e., effect size) at the demographic subgroup level (e.g., age category, years of education, marital status, income levels).

METHOD

Participants

Data for the current study came from two validation studies that used the I COPPE Scale, which is a new multidimensional well-being tool (Prilleltensky et al., 2015). All participants were adults (aged 18 years and older), were English speaking, and resided

in the United States. Data from Study 1 came from 426 participants from the general population (i.e., various ethnicities) and ranged in age from 20 to 88 years (mean [*M*] = 50.86, standard deviation [*SD*] = 13.57). Study 2 data were provided by 661 respondents who self-identified as Hispanic/Latino(a) and ranged in age from 19 to 88 years (M = 44.92, SD = 14.61). We combined the data for both studies and created one database comprising 1,087 cases for analyses. See Table 1 for participant demographics for the combined sample.

Participants were informed in the consent form that the primary purpose of the study was to test the validity of a well-being survey. The survey battery tapped personal well-being satisfaction across the six I COPPE life domains and OWB. All consenting respondents also completed well-established comparison instruments corresponding to I COPPE and OWB to establish convergent validity. Upon full completion of the one-time survey battery, each respondent received a credit of $1 from the panel recruitment company, which directed participants to this study's anonymous and secure survey website. For further details of study procedures, materials, and development of the I COPPE Scale, see Prilleltensky et al. (2015).

Measures

Demographic questionnaire. A nine-item questionnaire was developed for the study to collect demographic information (see Table 1 for demographic information collected).

I COPPE Scale (Prilleltensky et al., 2015). The I COPPE Scale comprises 21 items designed to measure seven well-being scores: interpersonal, community, occupational, physical, psychological, economic, and overall. Each score was measured with the same three items relating to three time periods: past (a year ago), present (now), and future (a year from now). Participants rated their responses to a stem question per item concerning the life domain of interest on a scale ranging from 0 (*worst*) to 10 (*best).* For example, the question stem for the interpersonal domain is as follows:

> On the vertical scale below, the top number ten represents the best your life can be. The bottom number zero represents the worst your life can be. When it comes to relationships with important people in your life, on which number (do you stand now? did you stand a year ago? will you stand a year from now?).

Participants reported levels of satisfaction using the Cantril (1965) ladder method, which comprises a vertical visual analogue with interval numbered steps provided at each rung of the visual ladder.

Statistical Analyses

Statistical analyses were performed for each of the nine demographic variables. For each demographic variable with more than two subgroups (e.g., age), a one-way analysis of variance was performed; for each demographic variable with two subgroups (e.g., gender), an independent sample t test was performed. As seen in Table 1, where frequency distributions of each demographic variable were presented, Welch t test and F test (available in SPSS version 21.0) were used to adjust for unbalanced sample sizes among subgroups. Effect size (i.e., η^2) was calculated for the omnibus t test and F test, and Cohen's d was reported for the post hoc pairwise comparisons of subgroups within each demographic

variable. According to Cohen (1988), 0.01, 0.06, and 0.14 were used as guidelines to determine small, medium, and large for η^2 and 0.2, 0.5, and 0.8 were used to determine small, medium, and large Cohen's *d*.

Based on the study aims described previously, two research questions were formed:

> Research question 1: Are there significant group differences on self-report scores of the I COPPE Scale as measured by omnibus tests?
> Research question 2: Which demographic subgroups are significantly different from each other on scores of the I COPPE Scale, and what is the magnitude of the differences?

RESULTS

Research Question 1

Table 2 depicts the omnibus tests for the I COPPE Scale scores by demographic groups. Among the nine demographic variables, gender was the only variable that had no significant effect on all the I COPPE Scale domains, meaning that I COPPE Scale scores did not differ significantly between men and women on all the domains. The omnibus tests of most of the domains of the I COPPE Scale for the other eight demographic variables were significant (e.g., age, income), indicating that the I COPPE Scale scores of a certain subgroup of each of these demographic variables were significantly different from the scores of at least one other subgroup.

Most effect sizes accompanying these significant omnibus tests were small to medium (i.e., η^2 0.01–0.06), meaning that each demographic variable explained around 1% to 6% of total variance of the I COPPE Scale scores. Exceptions were found in education and housing tenure regarding the magnitude of effect sizes: The effect sizes of several domains of the I COPPE Scale were negligible. For example, the physical well-being scores were significantly different among education levels, $F(2, 573.58) = 4.20$, $p = 0.015$, but the effect size was negligible (i.e., $0.007 < 0.01$); the psychological well-being scores were significantly different among types of housing tenure, $t(777.47) = -2.22$, $p = 0.027$, but the effect size was also negligible (i.e., $0.006 < 0.01$).

In summary, scores of most I COPPE Scale domains differed significantly among subgroups for all the demographic variables except gender. The magnitudes of effect sizes, however, were small to medium, indicating that the demographic variables had an important but nonlarge effect.

Research Question 2

In addition to the omnibus tests of the effects of the demographic variables on the I COPPE Scale scores, pairwise comparisons of subgroups within each demographic variable were also examined, to locate the differences in both significance tests and effect sizes. Table 3 presents significant pairwise comparisons, with Cohen's *d* values reported as the effect sizes for demographic subgroups and the significant I COPPE domains. The blank cells in Table 3 indicate there were no significant pairwise comparisons.

Age. Emerging adults showed significantly higher levels of overall and physical well-being compared with young adults, adults, and older adults. Adults, older adults, and elderly

Table 2. Omnibus Tests for I COPPE Scale Scores

Basic Demographics		
Gender	*t-statistic, df, p value*	η^2
Overall	$t(956.83) = 0.60$, p = 0.726	0.000
Interpersonal	$t(930.40) = 1.31$, p = 0.905	0.002
Community	$t(955.00) = 0.02$, p = 0.508	0.000
Occupational	$t(949.36) = 1.02$, p = 0.846	0.001
Physical	$t(941.32) = 0.32$, p = 0.626	0.000
Psychological	$t(941.26) = 0.91$, p = 0.816	0.001
Economic	$t(931.63) = 0.19$, p = 0.575	0.000
Age	*F-statistic, df, p value*	η^2
Overall	$F(4, 372.73) = 3.41$, p = .009[a]	0.011
Interpersonal	$F(4, 365.05) = 6.23$, p < .001[a]	0.023
Community	$F(4, 364.80) = 6.75$, p < .001[a]	0.021
Occupational	$F(4, 363.73) = 2.63$, p = .034[a]	0.012
Physical	$F(4, 361.32) = 4.59$, p = .001[a]	0.014
Psychological	$F(4, 366.76) = 4.14$, p = .003[a]	0.015
Economic	$F(4, 363.40) = 2.51$, p = .042[a]	0.010
Marital status	*F-statistic, df, p value*	η^2
Overall	$F(3, 252.99) = 7.09$, p < .001[a]	0.022
Interpersonal	$F(3, 242.97) = 13.74$, p < .001[a]	0.044
Community	$F(3, 251.14) = 4.84$, p = .003[a]	0.016
Occupational	$F(3, 246.10) = 8.33$, p < .001[a]	0.026
Physical	$F(3, 246.45) = 2.76$, p = .043[a]	0.011
Psychological	$F(3, 247.72) = 3.65$, p = .013[a]	0.012
Economic	$F(3, 241.63) = 7.20$, p < .001[a]	0.023
	Ethnicity	
Ethnicity	*F-statistic, df, p value*	η^2
Overall	$t(651.27) = 4.32$, p < .001[*]	0.020
Interpersonal	$t(658.56) = 1.05$, p = 0.292	0.001
Community	$t(637.59) = 3.98$, p < .001[*]	0.017
Occupational	$t(597.16) = 3.96$, p < .001[*]	0.018
Physical	$t(955.00) = 5.23$, p < .001[*]	0.028
Psychological	$t(622.09) = 3.47$, p = .001[*]	0.013
Economic	$t(639.93) = 5.00$, p < .001[*]	0.027
	Resources	
Education	*F-statistic, df, p value*	η^2
Overall	$F(2, 595.61) = 4.03$, p = .018[*]	0.007
Interpersonal	$F(2, 538.10) = 0.07$, p = 0.931	0.000
Community	$F(2, 547.13) = 0.91$, p = 0.404	0.002
Occupational	$F(2, 545.41) = 1.67$, p = 0.061	0.004
Physical	$F(2, 573.58) = 4.20$, p = .015[*]	0.007
Psychological	$F(2, 576.94) = 3.12$, p = .045[*]	0.005
Economic	$F(2, 567.48) = 7.53$, p = .001[*]	0.014
Employment status	*F-statistic, df, p value*	η^2
Overall	$F(3, 401.13) = 8.08$, p < .001[*]	0.026
Interpersonal	$F(3, 350.37) = 2.66$, p = 0.050	0.008
Community	$F(3, 386.86) = 6.39$, p < .001[*]	0.022
Occupational	$F(3, 385.79) = 16.64$, p < .001[*]	0.060
Physical	$F(3, 383.50) = 10.71$, p < .001[*]	0.033
Psychological	$F(3, 398.63) = 6.35$, p < .001[*]	0.021
Economic	$F(3, 395.38) = 12.97$, p < .001[*]	0.043
Occupation	*F-statistic, df, p value*	η^2
Overall	$F(3, 437.87) = 5.02$, p = .002[*]	0.016

(*Continued*)

Table 2. Continued

Basic Demographics		
Interpersonal	$F(3, 427.59) = 4.17$, $p = .006^*$	0.014
Community	$F(3, 429.26) = 4.91$, $p = .002^*$	0.017
Occupational	$F(3, 425.55) = 4.76$, $p = .003^*$	0.015
Physical	$F(3, 414.48) = 4.64$, $p = .003^*$	0.014
Psychological	$F(3, 397.84) = 1.90$, $p = 1.29$	0.007
Economic	$F(3, 421.15) = 6.38$, $p < .001^*$	0.021
Income	*F-statistic, df, p value*	η^2
Overall	$F(4, 449.67) = 12.28$, $p < .001^*$	0.053
Interpersonal	$F(4, 444.79) = 5.94$, $p < .001^*$	0.028
Community	$F(4, 448.07) = 7.74$, $p < .001^*$	0.034
Occupational	$F(4, 444.09) = 14.17$, $p < .001^*$	0.065
Physical	$F(4, 440.58) = 7.00$, $p < .001^*$	0.029
Psychological	$F(4, 446.17) = 5.79$, $p < .001^*$	0.026
Economic	$F(4, 442.70) = 18.92$, $p < .001^*$	0.081
Housing tenure	*t-statistic, df, p value*	η^2
Overall	$t(834.57) = -2.06$, $p = .039^*$	0.005
Interpersonal	$t(752.45) = -3.33$, $p = .001^*$	0.015
Community	$t(765.75) = -3.94$, $p < .001^*$	0.020
Occupational	$t(791.09) = -3.65$, $p < .001^*$	0.017
Physical	$t(672.23) = -1.31$, $p = 0.905$	0.002
Psychological	$t(777.47) = -2.22$, $p = .027^*$	0.006
Economic	$t(798.85) = -4.26$, $p < .001^*$	0.022

Note. df = degree of freedom.
[a]Significant findings at $p < 0.05$.

showed significantly higher levels of interpersonal well-being compared with young adults. The elderly showed significantly higher levels of community, occupational, psychological, and economic well-being compared with young adults, adults, and older adults. In summary, in most of the I COPPE Scale domains except physical well-being, the older people grow, the higher their level of well-being. The magnitude of the effect sizes of the higher level of well-being of older people compared with young people ranged from small to medium (0.27–0.63).

Marital status. Married people showed a significantly higher level of well-being in most I COPPE Scale domains compared with those who were divorced or separated, single, and living with partners. In addition, single people showed a significantly higher level of physical well-being compared with those who were divorced or separated, but not higher than other subgroups. The effect sizes ranged from small to medium (0.21–0.46).

Ethnicity. Hispanic/Latino people showed significantly higher levels of overall, community, occupational, physical, and economic well-being compared with White people. The effect sizes also ranged from small to medium (0.27–0.33). Other ethnicity groups (e.g., African American) were not significantly different from each other in any of the I COPPE Scale domains.

Education. People with a bachelor's degree or higher showed a significantly higher level of economic well-being compared with those with a high school education or less. Overall, physical, and psychological well-being were also higher for people with a university degree

Table 3. Cohen's d Values for Significant Omnibus Tests

Variable	*Group comparisons*	*Ov.*	*I*	*C*	*O*	*Ph.*	*Psy.*	*E*
Gender	No significant differences							
Age	Emerging adults *higher* than:							
	Young adults	.37						
	Adults	.31				.38		
	Older adults					.40		
	Adults, older adults, elderly *higher* than:							
	Young adults		.27 to .54					
	Elderly *higher* than:							
	Young adults			.63			.43	
	Adults			.43	.35		.35	.32
	Older adults			.39	.36		.36	
Marital	Married *higher* than:							
	Divorced or separated	.36	.41		.32	.30		.32
	Single	.31	.46	.27	.38		.21	.32
	Living with partner			.36				.35
	Single *higher* than:							
	Divorced or separated					.31		
Ethnicity	Hispanic/Latino(a) *higher* than:							
	White	.29		.27	.25	.33		.33
Education	Bachelor's degree or higher *higher* than:							
	High school education or less							.27
	Some college or vocational education	.17				.37	.17	
Employment	Unemployed *lower* than:							
	Full-time workers	.38		.30	.58	.42	.29	.49
	Part-time workers	.39			.48	.43	.37	.34
	Retired	.27		.40			.36	.45
Occupation	Management and professional *higher* than:							
	Service	.30	.29	.31	.28			.35
	Manual labor	.27			.28	.31		
Income	$30,000–$50,000 *higher* than:							
	Less than $20,000	.48	.34	.42	.58		.32	.53
	$20,000–$30,000	.33			.33			.35
	$50,000–$75,000 *higher* than:							
	Less than $20,000	.44	.35	.43	.57		.35	.58
	$20,000–$30,000		.32	.32				.41
	$75,000+ *higher* than:							
	Less than $20k	.65	.47		.72	.44	.47	.81
	$20,000–$30,000	.51			.46	.47		.66
	$30,000–$50,000							.33
Housing tenure	Owners *higher* than:							
	Renters	.13	.21	.25	.23		.14	.27

Note. Ov. = Overall; I = Interpersonal; C = Community; O = Occupational; Ph. = Physical; Psy. = Psychological; E = Economic.

compared with those with some college or vocational education. In summary, people who received more education showed a significantly higher level of well-being in some of the I COPPE Scale domains, but not all of them (i.e., interpersonal, community, and occupational well-being). The effect sizes were smaller than other demographic variables (0.17–0.37).

Employment. The general pattern was that employed or ever employed people (e.g., retired), no matter what type of employment (i.e., full-time, part-time), showed a

significantly higher level of well-being in most I COPPE Scale domains except interpersonal well-being compared with unemployed individuals. The effect sizes ranged from small to medium (0.29–0.58). As for occupation type, people who worked in management and professional sectors showed a significantly higher level of well-being compared with those who worked in service and manual labor except psychological well-being in most I COPPE domains. The effect sizes ranged from small to medium (0.27–0.35).

Income. Most pairwise comparisons were significant and with larger effect sizes than other demographic variables (0.32–0.81). In general, people who earned more showed a significantly higher level of well-being in most I COPPE domains compared with people who earned less, with the exception that once people made more than $30,000 to $50,000, they did not show a significantly higher level of well-being in most I COPPE domains except economic well-being.

Housing tenure. Homeowners showed a significantly higher level of well-being in most I COPPE Scale domains except physical well-being compared with renters. The effect sizes were the smallest among all other demographic variables (0.13–0.27).

Judging by the magnitude of effect sizes, education and housing tenure had the smallest effects in the various I COPPE domains of well-being. Income, on the other hand, was the most important factor affecting all I COPPE domains.

DISCUSSION

Research examining OWB and DSWB across several demographic variables has produced inconsistent results. One of the factors associated with this inconsistency has been the absence of a single, comprehensive instrument to assess well-being in multiple domains. The goal of this study, therefore, was to shed light on the research by comparing various domains of well-being across groups using a single, comprehensive instrument–the I COPPE Scale.

Overall, this study contributes to the literature by consolidating various demographic variables and different domains of well-being into one investigation, demonstrating group differences in levels of well-being and showing that specific variables contribute to well-being more than others, particularly income. Results indicated that a significant difference existed among subgroups in eight demographic categories: ethnicity, age, education, marital status, employment status, income, occupation, and housing tenure. No differences were found for the gender category. Small to medium effect sizes, however, suggested that group membership accounted for only a small amount of the variance of well-being.

In examining the nature and extent of demographic differences, results indicated that education and housing tenure had the smallest effects on various aspects of well-being while income had the highest. Results from this study supported previous research on well-being and demographic variables in most areas. For instance, married people showed higher levels of well-being, as did employed people (Coombs, 1991). Type of occupation also mattered, with people in management and professional positions demonstrating a higher level of well-being compared with those in service and manual labor jobs (Marmot et al., 1997). Additionally, results showed in every domain except physical well-being that the older people grow, the higher the level of their well-being, but not for the emerging adult group (Easterlin, 2006). These results largely concur with findings in the literature reviewed above.

Interestingly, the results of this study found that the Hispanic/Latino group showed higher levels of overall, community, occupational, physical, and economic well-being compared with the White group. This finding supports research suggesting the well-being gap among ethnic groups is narrowing (Hughes & Thomas, 1998) and coincides with studies that actually report a potential for ethnic minority groups to have greater OWB (Smith & Silva, 2011). Regarding Latino groups in particular, a higher level of self-reported well-being could be related to immigration status, because people emigrating from oppressive, economically bleak, or dangerous situations in their countries of origin report a higher level of well-being upon arriving to the United States. More research to uncover the relationship between immigration status and well-being in specific domains is necessary.

Perhaps the most substantial finding of this study is the differences found across income levels. In general, higher income was correlated with greater well-being in most I COPPE domains, but only up to a point. Those in the highest income bracket, for instance, did not differ significantly from the second highest or middle-income groups in the well-being domains, except the economic domain. These findings suggest that income matters to well-being, but that the differences among groups are mostly seen when a large economic gap exists. This finding is in line with reports by Kahneman and Deaton (2010) concerning the ceiling effect of more income.

It seems clear from these results that resources play an undeniable role in personal well-being. Income seems to matter in that it provides access to necessary resources. A certain level of wealth may protect against various stressors across a number of domains. But money is only one type of resource. The results indicate that other resources such as education, healthy relationships, professional status, and employment also contribute to well-being. While financial resources may be regarded as an objective good, supportive relationships and the respect afforded by education and high-status occupations can be considered subjective goods. Thus, the results of our study support the notion that the presence of objective and subjective resources contribute to higher levels of well-being.

Future Directions

Future directions for research investigating the relationship among various demographic variables and domains of well-being should concentrate on poten-tial interactions between these variables and outcomes. Studies examining these constructs have largely focused on one demographic variable and one well-being outcome. Thus, a broader understanding of the effects of group memberships in the domains of well-being is necessary. For example, do elderly people who live with a spouse but have low income report a higher level of well-being compared with those with high income but are single? What type of resource, and under what conditions, has more of an impact in overall and specific domains of well-being?

Potential compensatory mechanisms may also be at play when one demographic domain is not high. It is possible that people compensate for depressed areas of well-being by activating strengths in other domains. For example, if income is not adequate, people may compensate for this with subjective resources such as supportive relationships. Ample research supports the presence of psychological compensation, leading us to speculate that the same may happen across domains of well-being (Dixon & Backman, 1995).

It may also be possible to further study a sample of individuals with a high level of well-being with depressed scores in some demographic variables, such as poor education or income, to see if high scores in other domains act in a compensatory fashion.

Compensation may occur across not only demographic variables but also outcomes. For example, a person with a low level of physical well-being may report a high level of OWB due to high-level interpersonal and psychological well-being scores. The ability of individuals and groups to compensate can be a promising area of study and include interventions in developmental, personality, social, clinical, counseling, and community psychology.

Implications

In addition to shaping future research, the current findings have implications for clinical practice and the broader community context. For clinicians, recognizing the effects of specific demographic variables helps guide the services offered. For example, an obvious need exists for services for the low-income groups, a demographic particularly vulnerable to lower levels of well-being. By developing partnerships with organizations that serve low-income groups, clinicians are better able to target resources such as employment opportunities or financial literacy programs, which can improve DSWB beyond clinical service provisions.

Examining the effects of demographic variables in specific domains of well-being can help us understand where, specifically, certain groups may be experiencing low levels of well-being. Identifying demographic groups that may have significantly lower levels of well-being or that may be especially vulnerable to lower levels of well-being in particular domains could, in turn, influence community-level interventions or interventions targeting specific populations to improve well-being outcomes. For instance, employment was significantly correlated with several domains of well-being, and people who are employed report higher levels of OWB and DSWB. Therefore, communities with high levels of unemployment are likely to experience lower levels of well-being, and interventions targeting employment, specifically, may yield positive effects in multiple well-being domains.

Similarly, divorced people showed lower levels of well-being in multiple domains compared with their single or married counterparts. Recognizing the specific areas of well-being in which divorced individuals are vulnerable may influence more nuanced support for this population. Additionally, identifying areas that seem especially important to well-being (e.g., income level) may help focus efforts to change policies or practices that target income inequality or social mobility to improve well-being, particularly for the most vulnerable groups.

Last, understanding the effects of overcompensation in different domains of well-being may provide a useful tool to help individuals or communities who are unable to change certain objective characteristics. For instance, determining that elevating levels of interpersonal well-being may compensate for low levels of economic well-being in OWB could shape the direction of interventions in certain communities. Future research identifying which domains of well-being appear most amenable to change and the mechanisms or influences for how to do this would be beneficial.

Limitations

A limitation of this and other studies dealing with self-reports of well-being is that they do not capture the full picture of well-being because of excluding objective measures of well-being such as longevity, child abuse rates in a community, teenage pregnancy, economic inequality, and others. Therefore, the conclusion that demographic variables have limited effect on subjective assessments of well-being must be tempered by the finding that objective conditions such as economic inequality do make a big difference

in objective measures of well-being, such as illness, longevity, and psychosocial problems (Prilleltensky, 2012).

Conclusion

In synthesis, by using the I COPPE Scale we were able to uncover demographic group differences across various domains of well-being. Our main contribution to the well-being literature is in expanding the study of demographic differences from OWB to six types of DSWB: interpersonal, community, occupational, physical, psychological, and economic. The findings indicate that objective resources, such as income, and subjective resources, such as supportive relationships, contribute to OWB and DSWB. Future research should explore interactions among demographic and outcome variables and compensatory mechanisms at play to achieve high levels of well-being despite challenges in life.

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