

The Association Between Generational Status and Well-Being



Chloe Basch, Quantitative Analysis Center, Wesleyan University

Introduction

- On average, first-generation immigrants exhibit stronger health indicators upon arrival, but they diminish in the second generation. (Bostean, 2013; Hamilton, 2011; U.S. Department of Health and Human Services [HHS], 2023)
- While this association has been established in existing scholarship, few studies have integrated a holistic view of wellbeing across generations. (Rumbaut & Portes, 2014)
- Limited nationally representative research explores how wellbeing varies across immigrant generations, or whether second-generation socioeconomic gains correspond to higher subjective wellbeing despite ongoing social stressors.

Methods

Sample

• Respondents (n=556) were drawn from the 2021 General Social Survey (GSS). The GSS is a nationally representative survey of the adult, non-institutionalized U.S. population conducted by NORC at the University of Chicago (2022)

Measures

- Wellbeing was assessed using variables including questions on demographic, economic, health, and subjective wellbeing characteristics.
- A wellbeing score was aggregated based on physical, mental, or social health. These include self-reported variables such as level of life satisfaction, level of happiness, and mental health ratings. The data was reverse coded and scored from either 1-3 or 1-5 based on responses then added together to create a composite wellbeing score.
- Family income was categorized as "high"(>\$100,000), "mid-high"(\$70-100,000), "mid-low" (\$30-70,000) and "low"(\$0-30,000).
- Respondents were categorized as first-generation U.S.-born, whose parents were not U.S.-born or second-generation U.S.-born whose grandparents were foreign born but parents were U.S.-born.

Research Questions

- Does generational status (first or second generation) in the United States impact immigrant livelihood and wellbeing?
- To what degree does income affect immigrant livelihood?

Results

Univariate

• Second generation immigrants are shown to have a mean wellbeing score of 20.7, and first generation immigrants are shown to have a mean wellbeing score of 19.4 (See Figure 1)

Bivariate

- An Analysis of Variance Analysis (ANOVA) test showed that there is a significant relationship between generation status and wellbeing (P=.003). Second generation immigrants have a wellbeing score of 1.5 points higher than second generation immigrants (coefficient: 1.4999)
- Using ANOVA again, the analysis finds a significant relationship between generation status and income (P=0.04), suggesting that second generation people make \$15,110 more on average (Coefficient = 1.511)

Multivariate

- When accounting for generational status, race, sex, and family income, generational status and family income were statistically significant (P=0.031, P=0.000 respectively)
- Sex (P=.896) and race (P=.352) do not impact the relationship between generation status and wellbeing score after controlling for income

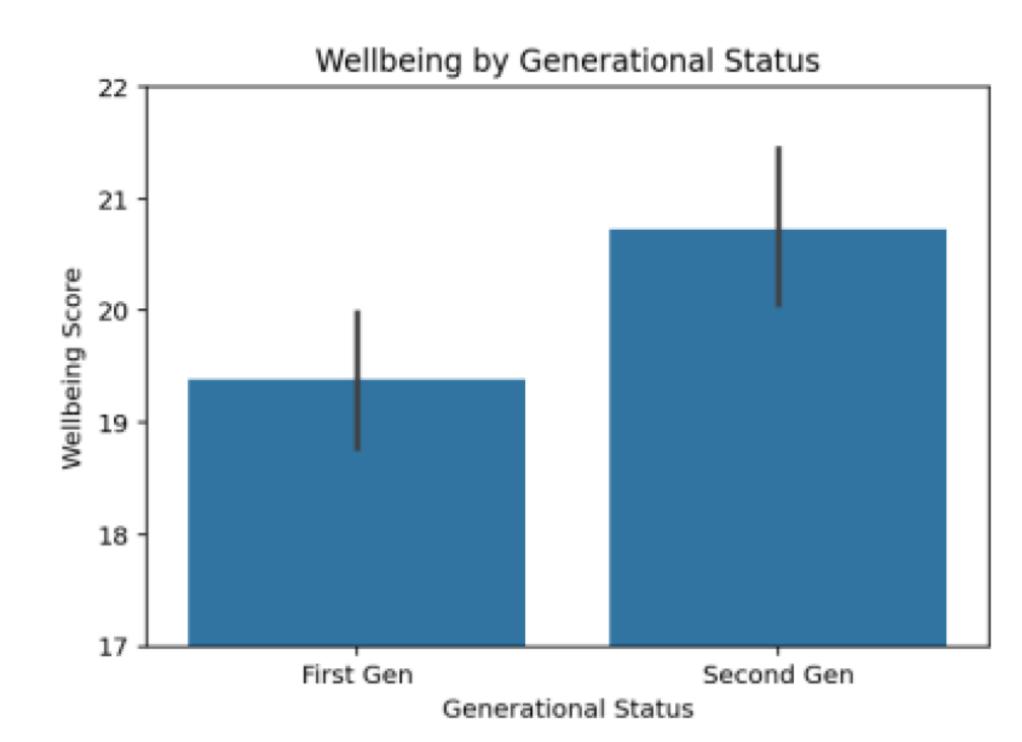


Figure 1. Wellbeing scores of first and second generation immigrants.

Multivariate cont.

The study finds that the wellbeing score generally increases with income (See Figure 2)

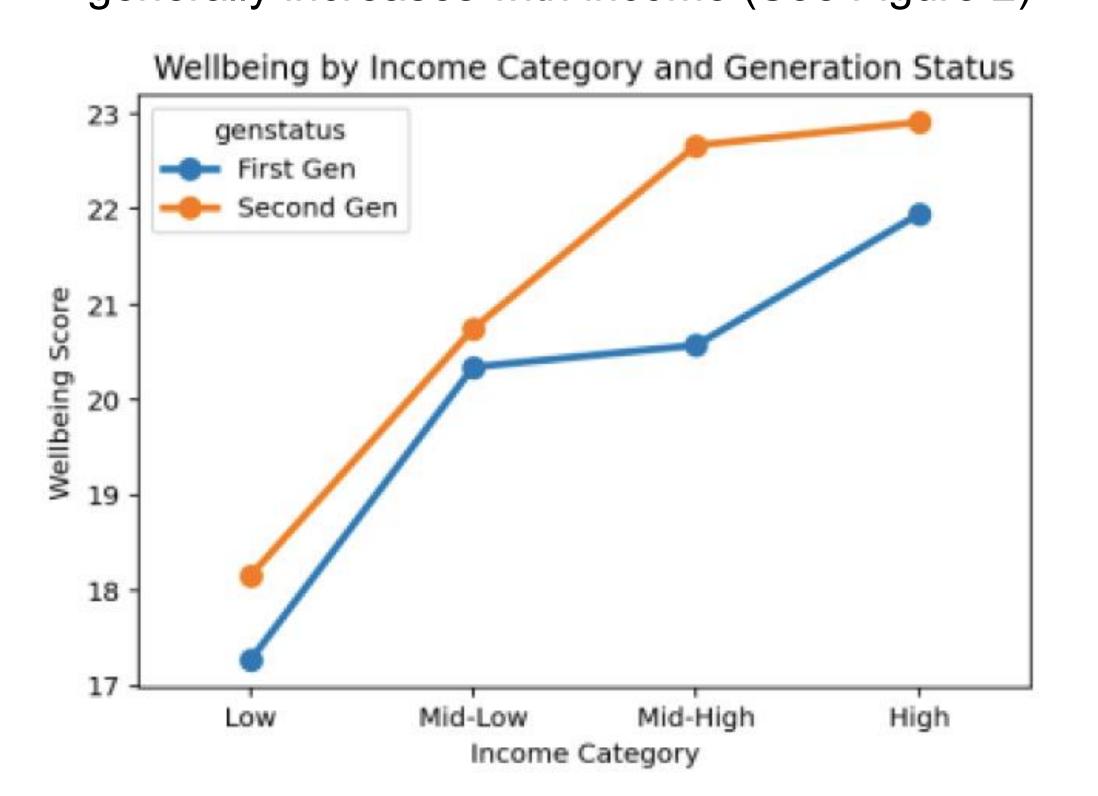


Figure 2. Wellbeing of immigrants as it corresponds with income level and generation status.

Discussion

- The significant correlation between generation status and wellbeing disagrees with the findings of the literature that first generation immigrants exhibit higher health.
- Data from the GSS show that second generation immigrants have a higher wellbeing score than first generation.
- Data from the GSS show that second generation immigrants have a significantly higher family income, which is found to significantly correlate with wellbeing score.
- After controlling for income, sex and race had no significance with wellbeing score, suggesting that income and generation status are the primary variables associated with wellbeing in this analysis.
- Further research is needed and should include a larger sample size. This research should focus on physical health, marital status, and other potential health indicators that aren't factored into this analysis.

References

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