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Parental Educational Attainment and Offspring Subjective Well-being and Self-Beliefs in Older Adulthood

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Abstract

This research examines whether parental educational attainment and subjective childhood socioeconomic status (SES) is associated with adult offspring well-being and self-beliefs (broadly defined). Participants from the Health and Retirement Study were included if they completed the leave-behind questionnaire in 2006 or 2008 ($N=10,827$; $M_{\text{age}}=68.38$; $SD=9.81$; range=50–101). Participants reported on their own and both parents educational attainment, subjective childhood financial situation, and financial difficulties in childhood at study entry and on well-being in 2006/2008. Linear regression was used to examine the association between offspring education, parental education, childhood SES and three aspects of well-being and self-beliefs: positive affect (e.g., positive emotions, optimism), negative affect (e.g., loneliness, hostility), and cognitive evaluation (e.g., life satisfaction). Participants with more education reported higher well-being (median $\beta=.12$). Parental educational attainment, subjective childhood SES, and a significant financial event during childhood were associated with more positive affect, less negative affect, and higher life satisfaction (median $\beta=.05$); these associations held controlling for offspring education. The educational and financial environment of childhood may hamper well-being into older adulthood; the offspring's own experiences and achievements do not completely attenuate the association with these aspects of the childhood environment.

Keywords

affect; life satisfaction; early life; intergenerational; parent education

Subjective well-being is a broad term that refers to how individuals feel about themselves and their lives (Diener, Oishi, & Lucas, 2003). It encompasses several components, including the experience of positive emotions (e.g., positive affect), the experience of negative emotions (e.g., negative affect), and a cognitive evaluation of one's life (e.g., life satisfaction). The importance of well-being and related self-beliefs across the lifespan has been well-documented. In addition to well-being as an outcome to strive for in and of itself, it is associated with both short-term and long-term health outcomes. Individuals with higher well-being, for example, have healthier immune function, better cardiovascular health, perceive their health to be in better condition, and ultimately live longer lives than

individuals with lower well-being (Howell, Kern, & Lyubomirsky, 2007). These associations may be due, in part, to engagement in more health-promoting behaviors, such as greater physical activity, better quality of sleep, and less smoking (Boehm & Kubzansky, 2012)..

Given the importance of well-being to health in older adulthood, there is considerable interest in identifying factors that promote it. Well-being is a complex construct that has multiple predictors that range from genetic factors (Okbay et al., 2016) to present circumstances. In addition to the individual's current life situation, there is a cumulative effect of life experience on well-being at any given point in time (Lynch, Kaplan, & Shema, 1997). A lifespan approach to health and well-being recognizes that these experiences start to accumulate at least as early as birth (Alwin & Wray, 2005). From this perspective, factors such as the socioeconomic status (SES) of the individual at various points in life can be independent correlates of well-being. Present circumstances or achievements in adulthood, for example, may not attenuate the lasting effects of early deprivation (Evans & Cassells, 2014). As such, SES at any point in the lifespan may have independent correlates with well-being at a later point.

This perspective is supported by findings that experiences early in life can have long lasting associations with well-being in adulthood (Shonkoff et al., 2012). For example, individuals who had adverse childhood experiences, such as a parent with a mental illness, a parent who struggled with substance abuse, or a physically abusive parent, report less satisfaction with life and more depressive symptoms in adulthood (Nurius, Green, Logan-Greene, & Borja, 2015). Broader aspects of the childhood environment also have been implicated in adult well-being. Individuals who grew up in economically deprived neighborhoods or households in poverty have lower well-being than individuals from more affluent backgrounds, an effect that persists even if the individual achieves economic stability in adulthood (Evans & Cassells, 2014).

Although the childhood environment is often implicated in adult well-being, much of this research has focused on broad markers of the social and economic environment (Frijters, Johnston, & Shields, 2014). Less attention has focused on specific aspects of early life socioeconomic status (SES). For example, parental education is a characteristic of every family that may have a lasting effect on offspring. Education is well known to have positive benefits. Individuals who achieve higher education tend to have better outcomes in adulthood, including a higher income (Baum, Ma, & Payea, 2013), better mental health (Sutin et al., 2013), and live longer (Lager & Torssander, 2012). There is evidence that the benefits of parent education extend to offspring and persist past childhood. Offspring who have parents with more education, for example, have better physical (Moody-Ayers, Lindquist, Sen, & Covinsky, 2007) and mental (Park, Fuhrer, & Quesnel-Vallée, 2013) health in adulthood, associations that could be due either to shared genetic influences or to environmental factors.

Previous research on the lasting association between the early socioeconomic environment and adult well-being has typically aggregated several markers of early childhood adversity and dichotomized parental education as more or less than an 8th grade education (Luo & Waite, 2005). Other aspects of the early life environment may also be associated with adult

outcomes. In addition to parent education, for example, the financial situation of the family in early childhood has lasting effects on the physical and mental health of offspring (Braveman & Barclay, 2009). As such, it may be financial resources, not parents' level of education per se, that matters for offspring well-being in adulthood. Disaggregating childhood SES into its specific components will help pinpoint which aspects are independently associated with greater well-being in adulthood. It is also well established that the individual's own level of education contributes strongly to better physical and mental health across adulthood (Kahneman & Krueger, 2006; Lager & Torssander, 2012; Sutin et al., 2013). Parent education is a strong predictor of offspring educational attainment (McGue, Rustichini, & Iacono, in press), which may account for the association between parent education and offspring well-being in adulthood.

The present research takes an intergenerational lifespan approach to examine whether parental educational attainment is associated with offspring well-being (broadly construed) in older adulthood. We take an inclusive approach to well-being and self-beliefs and include 23 measures that cover multiple aspects of positive affect, negative affect, and evaluation. We include constructs that are not strictly well-being (e.g., optimism, hostility) but that fall broadly under positive and negative aspects of self-beliefs. We use this broad construal to be able to examine the extent to which parent education contributes to nuanced aspects of well-being and psychological functioning in adulthood and whether the associations are general or specific to specific constructs measured. We expect that adult offspring who grew up with parents with higher educational achievement will have higher well-being and more positive self-beliefs than offspring who grew up with parents with less education. As a point of comparison, in addition to parental education, we examine the association between offspring education and well-being and the association with two other markers of early life SES, subjective childhood financial situation and whether the family experienced financial difficulties (e.g., father unemployed at some point during childhood). Finally, in supplemental analyses, we also address whether these associations are independent of personality traits.

Method

Participants and Procedure

Participants were from the Health and Retirement Study (HRS), an ongoing longitudinal study of American adults over the age of 50 and their spouses (Sonnega et al., 2014). HRS is a study of aging that includes measurements of various aspects of physical, psychological, and cognitive functioning in older adulthood. HRS data is available for public download here: <http://hrsonline.isr.umich.edu/>. Since we were interested in well-being in the second half of life, we limited the sample to participants over the age of 50 (i.e., we did not include spouses who were younger than 50; age range of analyzed sample=50–101). Participants were given a large battery of psychological measures as part of a leave-behind questionnaire that was returned by mail. Approximately one-half of HRS participants were administered this questionnaire in 2006; the other half were administered the same measures in 2008 (combined $N=10,827$). Some measures, however, were only included starting at the 2008 assessment ($n=5,915$; see below).

Measures

Education—At their first assessment at enrollment in the HRS, participants were asked about several aspects of their life history, including their own and both of their parents' level of education. Participants reported how many years of school their mother and their father completed; the maximum education was used in the analysis (i.e., the highest level of education of the mother or the father, whichever was higher). Participants also reported their own number of years of education.

Subjective childhood financial situation—Participants were asked to “think about your family when you were growing up, from birth to age 16. Would you say your family during that time was pretty well off financially, about average, or poor?” Response options were recoded such that higher values indicated the perception that the family was well off financially.

Childhood financial difficulties—Participants were asked three questions about financial difficulties within the family during childhood. Specifically, participants were asked if, sometime before the age of 16, “did financial difficulties ever cause you or your family to move to a different place?” “was there a time when you or your family received help from relatives because of financial difficulties?” and “was there a time of several months or more when your father had no job?” Participants responded yes or no to each item. A response of yes to one or more of these items indicated that the family had experienced significant financial difficulties during the participant's childhood.

Life Satisfaction—Participants completed the 5-item satisfaction with life scale (Diener, Emmons, Larsen, & Griffin, 1985) as a measure of cognitive well-being. Items (e.g., “In most ways my life is close to ideal.”) were rated on a scale from 1 (*strongly disagree*) to 6 (*strongly agree*) in the 2006 assessment and from 1 (*strongly disagree*) to 7 (*strongly agree*) in the 2008 assessment. To account for this difference, scale scores were standardized ($M=0$, $SD=1$) within wave before the waves were combined. The alpha reliability for this scale was .88.

Purpose in life—The 7-item purpose in life subscale was drawn from the Ryff Measures of Psychological Well-being (Ryff, 1989). Participants were asked to, “Please read the statements below and decide the extent to which each statement describes you.” Items (e.g., “I have a sense of direction and purpose in my life.”) were rated on a scale from 1 (*strongly disagree*) to 6 (*strongly agree*). The alpha reliability for this scale was .75.

Subjective social status—The MacArthur Scale of Subjective Social Status was used to measure how participants perceived their status in society. This single-item measure consisted of a picture of a ladder and participants were instructed to “mark an X on the rung on the ladder where you would place yourself.” There were 10 rungs, with 1 representing the lowest perceived social status and 10 representing the highest status.

Satisfaction with life domains—In 2008 only, participants rated seven single items about satisfaction with specific life domains (e.g., your home, your family life) on a scale

from 1 (*completely satisfied*) to 5 (*not at all satisfied*). Participants made the ratings based on how they felt right now. Responses were reverse-scored to indicate greater satisfaction.

Depressive symptoms—Depressive symptoms were measured with a brief 8-item version of the Center for Epidemiological Studies Depression Scale (CESD). Participants were asked whether they felt (yes/no) each of eight symptoms for most of the time during the last week. Of these items, 5 measured negative affect and 3 measured well-being (reversed scored into the total scale). The negative and positive items on the CESD sometimes have divergent correlates and trajectories (A. R. Sutin et al., 2013; Angelina R Sutin et al., 2013) and thus were scored separately in CESD negative affect and CES well-being, as well as the total CESD score.

Anxiety—Five items from the Beck Anxiety Inventory were used to measure recent feelings of anxiety (Beck, Epstein, Brown, & Steer, 1988). Specifically, participants were asked, “Please read the statements below. How often did you feel that way during the past week? The best answer is usually the one that comes to your mind first.” Items (e.g., “I had fear of the worst happening.”) were rated on a scale from 1 (*never*) to 4 (*most of the time*). The alpha reliability was .82.

Hopelessness—The experience of hopelessness was measured with four items (e.g., “The future seems hopeless to me and I can’t believe that things are changing for the better”) (Beck, Weissman, Lester, & Trexler, 1974). Participants rated each item from 1 (*strongly disagree*) to 6 (*strongly agree*). The alpha reliability for this scale was .85.

Loneliness—Participants completed a 3-item version of the UCLA loneliness scale that was developed for use in large-scale surveys (Hughes, Waite, Hawkey, & Cacioppo, 2004). Participants were asked, “The next questions are about how you feel about different aspects of your life. How much of the time do you feel...” and responded to each item (e.g., “you lack companionship”) on a scale from 1 (*often*) to 3 (*hardly ever or never*). Items were reversed scored such that higher scores reflected greater loneliness. The alpha reliability was .88 for this scale.

Hostility—Five items from the Cook Medley Hostility Inventory (Cook & Medley, 1954) were used to measure cynical hostility. Each item (e.g., “I think most people would lie in order to get ahead.”) was rated on a scale from 1 (*strongly disagree*) to 6 (*strongly agree*). Alpha reliability of the scale was .88.

Anger—The Spielberger Anger Expression Scale (Forgays, Spielberger, Ottaway, & Forgays, 1998) was used to measure two aspects of anger: anger-in (a trait-like disposition to respond with anger) and anger-out (a more state-like anger response). Instructions for this scale were, “Here are some statements that describe how people react or behave when they are feeling angry or mad. Thinking of the times you feel angry, for each statement please indicate how often you react or behave this way. Respond quickly to these without thinking much, as your first impulse is usually the best answer.” Items (e.g., “When I am feeling angry or mad, I argue with others.”) were rated on a scale from 1 (*almost never*) to 4 (*almost always*). Alpha reliability was .78 for anger-in and .88 for anger-out.

Optimism and pessimism—Participants completed the revised version of the Life Orientation Test (LOT-r), a measure of optimism and pessimism (Scheier, Carver, & Bridges, 1994). Two subscales can be scored from this 6-item measure: Optimism (e.g., “In uncertain times, I usually expect the best.”) and Pessimism (e.g., “If something can go wrong for me it will.”). All items were rated on a scale from 1 (*strongly disagree*) to 6 (*strongly agree*). The alpha reliability was .79 and .77, for optimism and pessimism, respectively.

Affect—In 2008 only, participants completed a 25-item version of the Positive and Negative Affect Schedule-Expanded Form (Watson, Clark, & Tellegen, 1988). Participants rated items on the experience of positive (e.g., proud) and negative (e.g., ashamed) affect on a scale from 1 (*very much*) to 5 (*not at all*). Ratings were made based on how participants felt within the last 30 days and reversed scored such that higher scores reflected having experienced more affect. The alpha reliability was .92 and .89 for positive and negative affect, respectively.

Personality traits—Participants completed the Midlife Development Inventory (MIDI; Lachman & Weaver, 1997). Participants were asked how much 26 adjectives that assessed Neuroticism (e.g., moody); alpha=.71, Extraversion (e.g., talkative; alpha=.74), Openness (e.g., creative; alpha=.79), Agreeableness (e.g., helpful; alpha=.78), and Conscientiousness (e.g., organized; alpha=.67) described them on a scale ranging from 1 (*a lot*) to 4 (*not at all*). Items were re-scored in the direction of the label of each trait.

See Smith and colleagues (2017) for more detailed information about the measurement and psychometric properties of each measure in the HRS.

Statistical Approach

Linear regression was used to test whether education was associated with each well-being measure, controlling for participant age, sex, race, and Hispanic ethnicity. Hierarchical regressions were run with offspring education on the first step and maximum of parent education on the second step¹; age, gender, race, and ethnicity were also included on the first step as covariates. Listwise deletion was used for missing data. As a supplemental analysis, we included personality traits as an additional covariate to test whether these associations are independent of personality because offspring personality is associated with both education (Sutin, Stephan, Luchetti, Robins, & Terracciano, 2017) and well-being (DeNeve & Cooper, 1998).

Linear regression was likewise used to examine the association between subjective financial status in childhood and financial difficulties and each measure of well-being, controlling for participant age, sex, own education, race, and Hispanic ethnicity. In addition to these covariates, the maximum of parent education was included in the analysis to determine whether these different aspects of the early childhood socioeconomic environment had independent associations with the measures of well-being in adulthood. Personality traits

¹The results were similar when mother and father years of education were analyzed instead of maximum parent education.

were included as an additional covariate in supplemental analyses. Across all analyses, p was set to $<.01$.

Results

Table 1 shows the descriptive statistics for all study variables. Table 2 shows the relation between education and the 23 measures of well-being. With few exceptions, higher parent education was associated with more positive affect, less negative affect, and higher evaluations of life satisfaction; offspring education was likewise associated with nearly every aspect of well-being. Most of these associations remained significant when personality traits were included as an additional covariate, with some exceptions (see Table 2).

Table 3 shows the independent associations between subjective childhood financial situation and childhood financial difficulties and offspring well-being in adulthood. The three markers of childhood SES were only moderately correlated: parent maximum education correlated .23 ($p<.01$) with subjective childhood financial situation and $-.10$ ($p<.01$) with financial difficulties and subjective childhood financial situation correlated $-.35$ ($p<.01$) with financial difficulties. After controlling for offspring and parent education, both subjective childhood SES (positive) and financial event (negative) were associated with life satisfaction, subjective SES, satisfaction with home, town, and health, CESD total score, anxiety, hostility, anger in, and CESD well-being. In addition, a significant financial event in childhood was also associated with lower satisfaction with leisure activities, family, financial situation, and life, CESD negative affect, loneliness, and negative affect. Most of these associations remained significant when personality traits were included as additional covariates (Table 3).

Discussion

The present research shows that a specific component of the childhood socioeconomic environment – parental educational attainment – has long-lasting associations with offspring well-being and self-beliefs in adulthood. Into the last decades of life, individuals who grew up with parents with more years of education had higher psychological well-being. These associations were similar across the three broad categories of well-being examined in this study. Although the offspring's educational achievement likewise contributes to higher well-being in older adulthood, it does not completely attenuate the effect of parents' education.

The findings of this study support lifespan models of psychological functioning and suggest that specific characteristics of the early life environment set a foundation for psychological well-being in older adulthood. These findings are consistent with related literatures that show that adverse childhood experiences, poverty, and neighborhood deprivation in childhood are associated with worse mental health in adulthood (Evans & Cassells, 2014; Nurius et al., 2015). Evidence from related lines of research and the current analyses suggest that these associations are not due only to the greater financial resources that come with more education. Offspring who grew up with parents who had more years of education, for example, score lower in Neuroticism and higher in Extraversion in adulthood, even after accounting for family income during childhood (Sutin et al., 2017). In addition to financial

resources, individuals with more education tend to develop better emotion regulation strategies, such as greater use of reappraisal and less use of suppression (Wiltink et al., 2011). Children learn such strategies from observing their parents and engage in similar strategies to manage negative emotions (Gunzenhauser, Fäsche, Friedlmeier, & Suchodoletz, 2014). This modeling of effective emotion regulation may provide offspring with the tools to manage difficult situations and promote well-being across adulthood, even into old age.

There is also consistent evidence that poverty in childhood has long-lasting correlates across adulthood. Children who grow up in poverty, for example, display more helplessness and more externalizing (but not internalizing) symptoms in early adulthood (Evans, 2016). Children with more adverse childhood experiences report more symptoms of depression and health risk behaviors in young adulthood, which may be mechanisms through which early life adversity leads to lower well-being in adulthood (Giovannelli, Reynolds, Mondì, & Ou, 2016). These correlates might also act through changes in emotion regulation and brain function associated with poverty. Adults who lived in poverty as children have diminished emotional processing (Javanbakht et al., 2015) and difficulty with emotion regulation, which is mediated by diminished activation of the dorsolateral prefrontal cortex and is independent of adult income (Liberzon et al., 2015).

The associations may also be due to shared genetics between parent and child. That is, it is possible that shared genetics could account for the relation between parent education and adult offspring well-being in older adulthood. There is a genetic component to both education and well-being and some evidence of a modest genetic overlap between the two (Okbay et al., 2016). Further, more complex behavioral genetic designs are starting to better tease apart genetic versus environmental effects of parent characteristics on offspring psychological outcomes (McAdams et al., 2014). Evidence from other constructs, however, suggests that the relation is unlikely to be due entirely to genetics. The relation between parent education and adult offspring personality traits, for example, held in a sample of participants who were adopted (Sutin et al., 2017). Since adoptive parents and children do not share genetics, this finding suggests that the association between parent education and personality is transmitted in part through the environment.

Our approach to well-being and self-beliefs was fairly comprehensive and encompassed 23 measures that assessed various aspects of cognitive well-being, negative affect, and positive affect. It is of note that the association between parent educational attainment and offspring well-being was similar across these different categorizations of well-being. The association between parent education and subjective social status was particularly of note. The anchors for the subjective social status measure specifically included an assessment of the individual's education (i.e., the bottom rung was described as the people who have "the least money, least education, and the worst jobs or no jobs" to the top rung that described people who have "the most money, most education, and best jobs"). As to be expected, individuals' own education was strongly associated with where individuals placed themselves on this ladder. Yet, even after accounting for the educational achievement attained by offspring, parent education was still associated with how individuals made this assessment. This pattern suggests that perceptions of social standing, even in very old age, reflect the circumstances in which individuals grew up.

There may be reciprocal relations between offspring education and well-being, such that individuals who have higher well-being tend to stay in school longer and individuals with more years of education tend to have higher well-being (Samuel, Bergman, & Hupka-Brunner, 2013). It is impossible to disentangle such reciprocity with observational data. This issue of reverse causality, however, is less problematic for parent education since offspring well-being in older adulthood cannot have an effect on parents' educational attainment. By examining specific environmental and genetic factors, future research can advance knowledge on mechanisms through which parental education may impact the offspring well-being into old age.

The present research had several strengths, including a large sample, multiple measures of well-being in older adulthood, and reports of both parents' level of education and other markers of childhood SES. There are also some limitations that could be addressed in future research. For example, we could not differentiate age from cohort. There have been tremendous changes in the meaning and structure of education across the 20th century (Pew Research Center, 2013) and the wide age range of our sample (50–101) means that a parent's level of education may not mean the same thing across the entire sample. It is possible that there may be cohort effects in the association between parent education and offspring well-being. In addition, we did not have an objective measure of the income or wealth of the participant's family in childhood; our analysis relied on the participant's perception of their childhood financial circumstances. Participant reports of parent education and financial events are less likely to be biased than reports of the family's financial situation, whereas how participants remember their family's financial situation may be colored by comparisons with other families in childhood and their own financial situation in adulthood. Parent education, in contrast, is typically a characteristic of the parent that is not influenced by offspring perceptions. It would thus be useful to have objective measures of childhood SES in future studies. Despite these limitations, the present research shows that education does not just benefit the individual but has intergenerational transfer of benefits, benefits that continue into old age.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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Table 1

Descriptive Statistics for Study Variables

Variable	Frequency or Mean (SD)		
	Total Sample	Men	Women
Demographic factor			
Age	68.38 (9.81)		
Sex (female)	59%	--	--
Race (African American)	10%	9%	11%
Race (Other or unknown)	4%	4%	4%
Hispanic Ethnicity	7%	6%	7%
Education			
Self	12.96 (2.89)	13.17 (3.07)	12.82 (2.74)
Maximum parent education	9.92 (4.20)	10.20 (4.06)	9.74 (4.28)
Markers of Childhood SES			
Subjective financial situation	1.78 (.56)	1.75 (.56)	1.79 (.55)
Financial difficulties	34%	35%	33%
Cognitive Well-being			
Life Satisfaction (z-score) ^a	.05 (.98)	.08 (.94)	.04 (1.01)
Purpose in Life	4.63 (.92)	4.62 (.90)	4.63 (.93)
Subjective Social Status	6.59 (1.71)	6.77 (1.68)	6.46 (1.72)
Satisfaction with ^b			
Home	4.19 (.88)	4.26 (.81)	4.16 (.91)
Town	4.17 (.87)	4.16 (.86)	4.19 (.86)
Leisure activities	3.89 (.93)	3.97 (.89)	3.84 (.94)
Family	4.07 (.90)	4.15 (.85)	4.03 (.91)
Financial situation	3.47 (1.31)	3.57 (1.08)	3.43 (1.16)
Health	3.38 (1.05)	3.45 (1.00)	3.36 (1.06)
Life	3.76 (.93)	3.83 (.88)	3.76 (.94)
Negative Affect			
CESD Negative Affect	1.11 (1.53)	.94 (1.39)	1.23 (1.62)
CESD Total	1.73 (2.10)	1.51 (1.91)	1.89 (2.20)
Anxiety	1.55 (.57)	1.50 (.54)	1.59 (.58)
Pessimism	2.51 (1.26)	2.62 (1.25)	2.44 (1.25)
Hopelessness	2.29 (1.24)	2.31 (1.23)	2.28 (1.25)
Loneliness	1.46 (.53)	1.43 (.51)	1.48 (.54)
Anger In	2.17 (.67)	2.17 (.66)	2.16 (.68)
Anger Out	1.49 (.50)	1.54 (.52)	1.46 (.48)
Hostility	2.89 (1.11)	3.10 (1.09)	2.74 (1.10)
Negative Affect ^b	1.74 (.61)	1.64 (.56)	1.78 (.62)
Positive Affect			
Optimism	4.56 (1.13)	4.54 (1.09)	4.56 (1.16)
CESD Well-being	2.38 (.80)	2.42 (.77)	2.34 (.82)

Variable	Frequency or Mean (SD)		
	Total Sample	Men	Women
Positive Affect ^b	3.58 (.79)	3.60 (.77)	3.63 (.78)

Note. Ns up to 10,827 depending on available data. SES=socioeconomic status. CESD=Center for Epidemiological Studies Depression scale.

^aFor the life satisfaction only, the response scale changed from 1–6 in the 2006 assessment to 1–7 in the 2008 assessment. To account for this difference, the scale scores were standardized ($M=0$, $SD=1$) within wave before the waves were combined.

^bThe 2008 HRS assessment only.

Table 2

Association Between Education and Well-Being

	Education			
	Self	<i>p</i>	<i>r</i> ²	Max Parent
Cognitive Well-Being				
Life Satisfaction	.10 (.08, .12)	.000	.026	.06 (.03, .08)
Purpose in Life	.19 (.17, .21)	.000	.060	.07 (.04, .09)
Subjective Social Status	.34 (.32, .36)	.000	.133	.06 (.04, .08)
Satisfaction with ^a				
Home	.05 (.03, .08) ^b	.000	.042	.04 (.01, .07)
Town	.05 (.02, .07) ^b	.001	.035	.06 (.03, .09)
Leisure Activities	.06 (.03, .08) ^b	.000	.023	.07 (.04, .10)
Family	.01 (-.02, .03)	.664	.015	.03 (.00, .06)
Financial Situation	.13 (.10, .15)	.000	.098	.00 (-.03, .03)
Health	.12 (.09, .14)	.000	.015	.05 (.02, .08) ^b
Life	.12 (.09, .14)	.000	.021	.06 (.03, .09)
Negative Affect				
CESD Negative Affect	-.20 (-.22, -.18)	.000	.059	-.08 (-.10, -.06)
CESD Total Score	-.17 (-.19, -.15)	.000	.041	-.09 (-.11, -.06)
Anxiety	-.16 (-.18, -.14)	.000	.045	-.07 (-.09, -.05)
Pessimism	-.26 (-.28, -.24)	.000	.086	-.09 (-.11, -.07)
Hopelessness	-.26 (-.28, -.24)	.000	.083	-.08 (-.10, -.06)
Loneliness	-.11 (-.13, -.09)	.000	.018	-.06 (-.08, -.04)
Hostility	-.22 (-.24, -.21)	.000	.112	-.07 (-.09, -.05)
Anger In	.00 (-.02, .02)	.896	.012	-.02 (-.04, .00)
Anger Out	-.07 (-.09, -.05)	.000	.021	.00 (-.03, .02)
Negative Affect ^a	-.10 (-.13, -.07) ^b	.000	.026	-.05 (-.08, -.02)
Positive Affect				
Optimism	.09 (.07, .11) ^b	.000	.014	.05 (.03, .07) ^b
CESD Well-being	.09 (.04, .08) ^b	.000	.006	.08 (.06, .10)

Education						
	Self	<i>p</i>	<i>r</i> ²	Max Parent	<i>p</i>	<i>r</i> ²
Positive Affect ^a	.22 (.19, .24)	.000	.061	.07 (.04, .10)	.000	.064

Note. *N*s range from 5,546 to 10,827 depending on available data. Coefficients are standardized beta coefficients (95% confidence interval) from linear regression, controlling for age, sex, race, and ethnicity; analysis of parent education also controlled for offspring education. The *r*² is the variance accounted for in the model. CESD=Center for Epidemiological Studies Depression scale.

^aThe 2008 HRS assessment only.

^bReduced to non-significant when further adjusted for offspring personality traits.

* *p*<.01.

Table 3
Association Between Markers of Childhood Socioeconomic Status and Adult Well-Being

	Family SES	<i>p</i>	<i>r</i> ²	Financial Event	<i>p</i>	<i>r</i> ²
Cognitive Well-Being						
Life Satisfaction	.04 (.02, .06) ^b	.000	.029	-.05 (-.06, -.03)	.000	.029
Purpose in Life	.01 (-.01, .03)	.191	.063	-.01 (-.03, .01)	.341	.063
Subjective Social Status	.09 (.07, .11)	.000	.143	-.06 (-.08, -.04)	.000	.139
Satisfaction with^a						
Home	.05 (.02, .08)	.000	.048	-.09 (-.11, -.06)	.000	.053
Town	.05 (.02, .08)	.000	.042	-.08 (-.10, -.05)	.000	.044
Leisure Activities	.02 (-.01, .05)	.085	.034	-.06 (-.09, -.04)	.000	.038
Family	.02 (-.01, .05)	.139	.022	-.06 (-.09, -.03)	.000	.025
Financial Situation	.02 (-.01, .04)	.234	.096	-.06 (-.09, -.04)	.000	.100
Health	.05 (.02, .08)	.001	.019	-.06 (-.08, -.03)	.000	.019
Life	.03 (.00, .06)	.072	.025	-.05 (-.07, -.02) ^b	.000	.027
Negative Affect						
CESD Negative Affect	-.02 (-.04, .00)	.021	.063	.04 (.02, .06)	.000	.064
CESD Total Score	-.04 (-.06, -.02) ^b	.000	.048	.05 (.03, .07)	.000	.049
Anxiety	-.04 (-.06, -.02)	.000	.051	.05 (.03, .07)	.000	.051
Pessimism	-.01 (-.02, .01)	.502	.092	.02 (.00, .04)	.038	.092
Hopelessness	-.01 (-.03, .01)	.210	.087	.02 (.00, .04)	.059	.087
Loneliness	-.03 (-.04, -.01)	.011	.021	.04 (.02, .06)	.000	.022
Hostility	-.03 (-.05, -.01)	.000	.117	.04 (.02, .06)	.000	.117
Anger In	-.03 (-.05, -.01) ^b	.002	.013	.03 (.01, .05) ^b	.001	.014
Anger Out	.00 (-.02, .02)	.817	.020	.02 (.00, .04)	.024	.021
Negative Affect ^a	-.01 (-.04, .02)	.360	.028	.06 (.03, .08)	.000	.031
Positive Affect						
Optimism	.02 (.00, .04)	.058	.016	.00 (-.02, .02)	.740	.016
CESD Well-being	.05 (.03, .07) ^b	.000	.013	-.04 (-.06, -.02)	.000	.013
Positive Affect ^a	.00 (-.02, .03)	.862	.054	.00 (-.03, .02)	.742	.054

Note. Ns range from 4919 to 10606 depending on available data. Coefficients are standardized beta coefficients (95% confidence interval) from linear regression, controlling for age, sex, race, ethnicity, offspring education, and parent education. The r^2 is the variance accounted for in the model. CESD=Center for Epidemiological Studies Depression scale.

^aThe 2008 HRS assessment only.

^bReduced to non-significant when further adjusted for offspring personality traits.

[#] $p<.01$.