

Demographic aspects of human wellbeing
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Union dissolution(s) and multidimensional well-being

Evidence from the Health and Professional Itineraries Survey

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Introduction

- Increasing diversity and complexity of family trajectories
 - Decreasing marriage rates
 - Increasing divorce and remarriage rates
 - More and more people face the consequences of union dissolutions for wellbeing in terms of health, financial resources, social network (Amato 2010)
 - More and more people experience multiple transitions over their life-course

Previous studies

- Evidence of impact of family trajectories and critical events on individuals' wellbeing
 - Married individuals usually found with better physical and mental health (Umberson et al 2010) and life satisfaction (Stutzer and Frez 2006)
 - Experience of divorce and lone parenthood negatively affects health and life satisfaction (Amato 2010; Biotteau et al 2018; Gardner et al 2006)
 - Individuals who remarry show better adjustment to dissolutions (Wang and Amato 2004)

Previous studies

- Heterogeneity of effects depending on gender and socio-economic characteristics
 - Women are usually affected more negatively by critical family transitions because of loss of financial resources and lone parenthood (Lacey et al 2016; Bonnet 2015; Biotteau et al 2018)
 - However, men experience decrease in well-being due to loss of social network
 - Individuals with less resources are more likely to experience critical events and suffer more their consequences (Burgard et al 2007; Mc Donough et al., 2015), while education, employment, income, social networks may help people cope with divorce-related stress (Wang and Amato 2004)

Previous studies

- Evidence on multiple dissolutions:
 - “serial marriers” women show higher levels of psychological distress (Brody et al 1988)
 - married women who had multiple divorces have higher levels of distress (Kurdek 1990) and increased risk of developing a serious health condition (Dupre and Meadows 2007)
 - accumulation vs adaptation processes (Luhman and Eid 2008)
 - Negative health effects of divorce transitions diminish with time (Dupre and Meadows 2007)

Multidimensional wellbeing

- Importance of considering different dimensions of well-being
 - Little consensus on how to define and measure wellbeing (e.g. Pollard and Lee 2003)
 - Multidimensionality of wellbeing (Cronin de Chavez et al 2005): considering one unidimensional notion leads to the loss of valuable information (Keyes 2007)
 - Differential effects of critical family events on domain-specific wellbeing (Hughes and Waite 2009; Infurna and Luthar 2017, Bernardi et al 2017)

- Are past union dissolutions associated with different dimensions of well-being?
 - Does the association vary depending on the number of dissolutions experienced and the time from last dissolution?
 - Does the association vary depending on gender and resources?

Data and Methods

- *Santé et itinéraire professionnel* (SIP):
 - representative sample of French population aged 20-74
 - Collected in 2006 and 2010
 - Our sample: 9,037 individuals aged 25-65 with retrospective information on partnership histories and current well-being
- Well-being:
 - General self-reported health (1-5 scale, dichotomised)
 - Experience of depressive symptoms in the last 2 weeks
 - Sleep disorders (1-4)
 - Satisfaction with professional career (1-10)

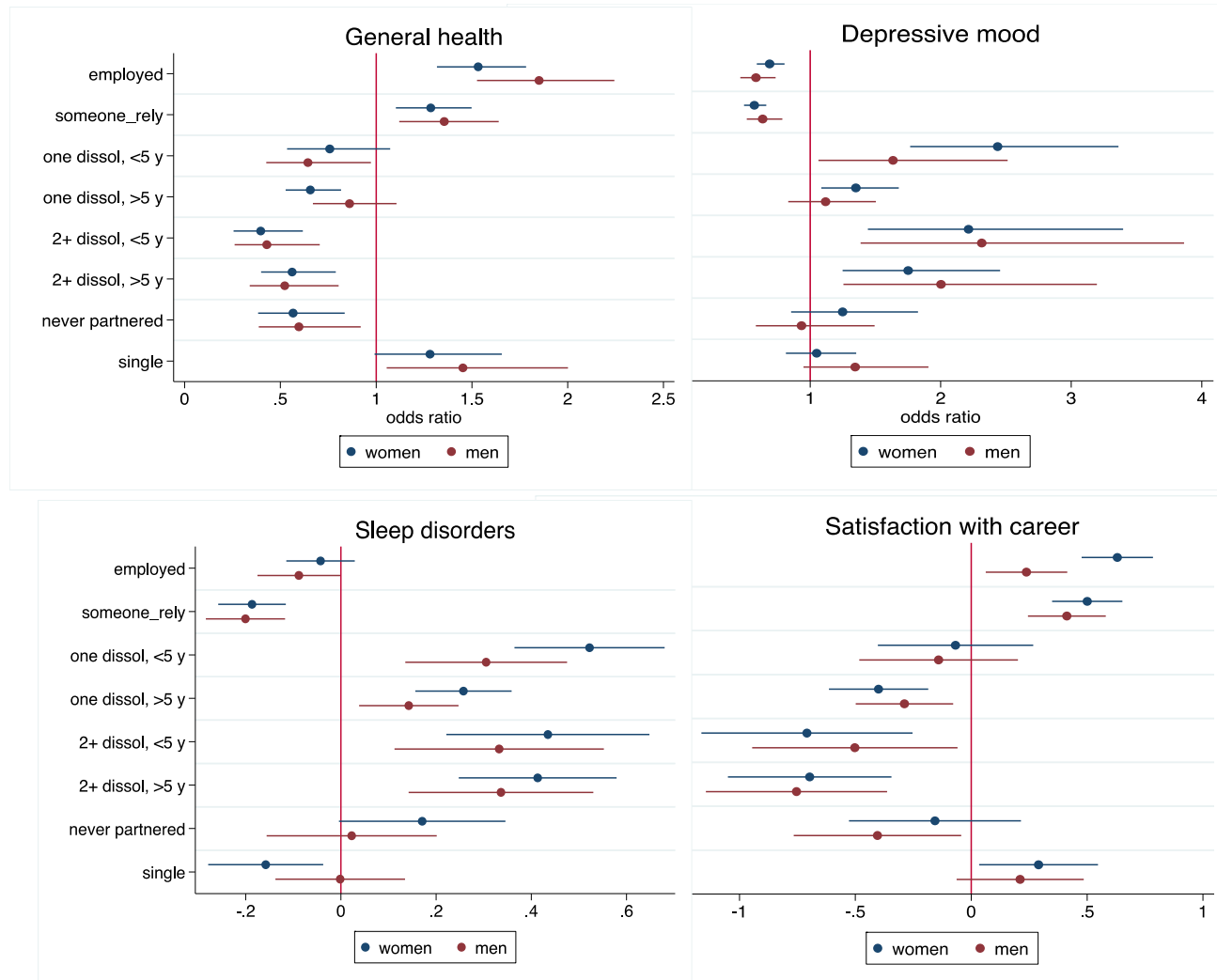
Data and Methods

- Dissolutions: end of a union that lasted at least 1 year, or less but with children
 - Categorised by number and timing before 2006
 - One dissolution, <5 years before; one dissolution, >5 years; 2+ dissolutions of which last one <5 years; 2+ dissolutions of which last one >5 years
- Controls: age, education, father's education, number of kids; household income; employment and partnership status in 2006
- Linear regression and logistic models
- Resources: educational level, income, employment status, social network (*does the individual has anyone to rely on, yes/no*), current partnership status

Descriptive characteristics, by number of dissolutions

	No dissol	One dissol, <5 years	One dissol, >5 years	2+ dissol, <5 years	2+dissol, >5 years	Never partnered
Age (years)	46.3	42.7	49.1	44.2	49.7	39.7
Female	52.5	59.9	62.4	54.8	65.2	47.3
Lower secondary educ	56.2	53.7	58.6	54.0	65.4	45.3
Upper secondary educ	16.3	19.4	16.5	15.3	14.6	14.5
Tertiary educ	27.4	26.8	24.8	30.6	20.0	40.20
Father high educ	8.4	9.6	9.6	11.7	9.4	11.4
Mother high educ	5.9	5.3	4.9	6.3	5.0	9.9
Low HH income (<1350 E)	10.8	44.10	32.5	48.5	41.3	40.9
Middle HH income	48.9	41.4	41.1	40.6	36.5	39.7
High HH Income (>3500 E)	36.5	12.1	23.6	9.6	19.7	12.7
Employed	72.8	71.2	67.5	69.4	65.4	77.0
Student	0.2	0.5	0.0	0.1	0.0	1.4
Unemployed	4.8	9.9	8.0	12.5	12.9	9.6
Retired	12.1	7.7	15.5	6.2	11.2	5.2
Has someone to rely on	80.1	81.8	74.3	75.7	71.3	78.8
Number of kids	2.1	1.7	1.9	1.7	2.1	0.2
Single in 2006	0.0	8.5	5.0	8.2	5.7	100
N	5438 (61.2%)	549 (6.7%)	1594 (17.9%)	239 (2.7%)	339 (3.8%)	684 (7.7 %)

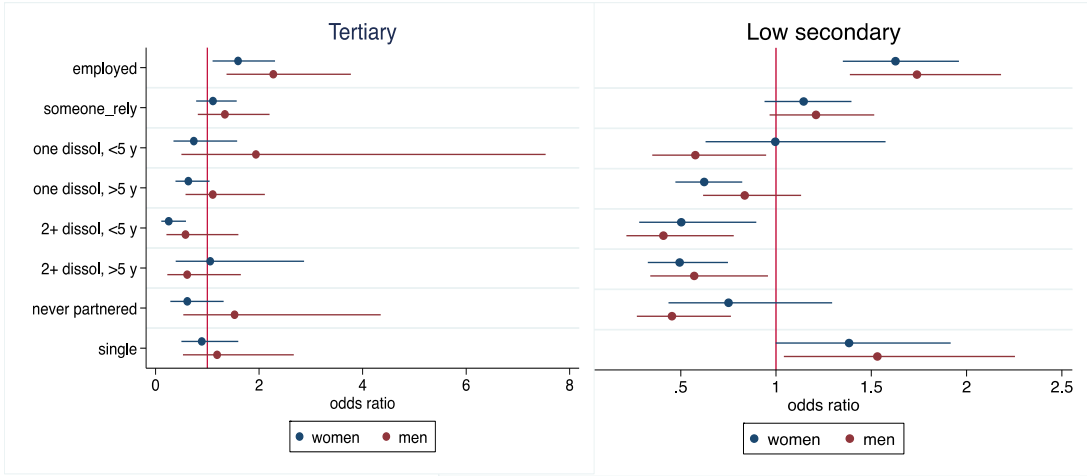
Results: dissolutions and wellbeing, by gender



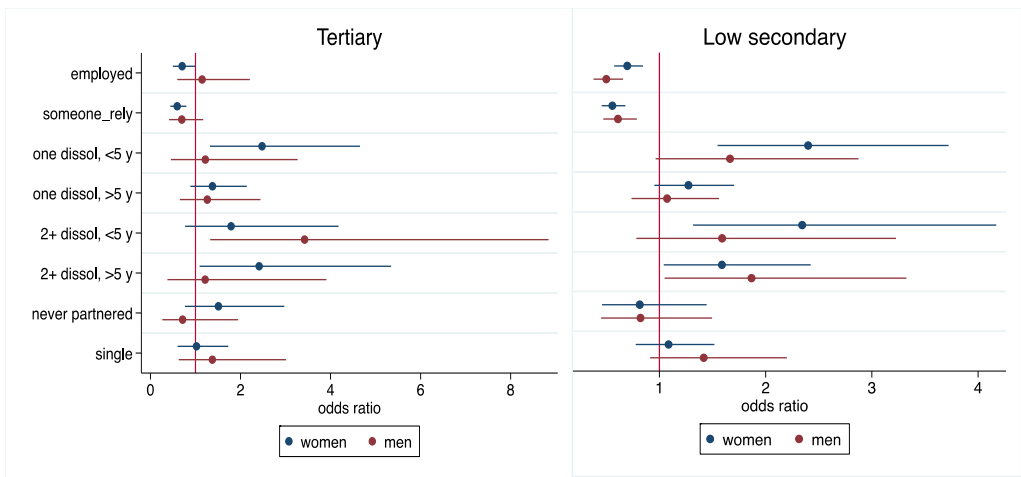
Results: Dissolutions and wellbeing, by education



Self-perceived health



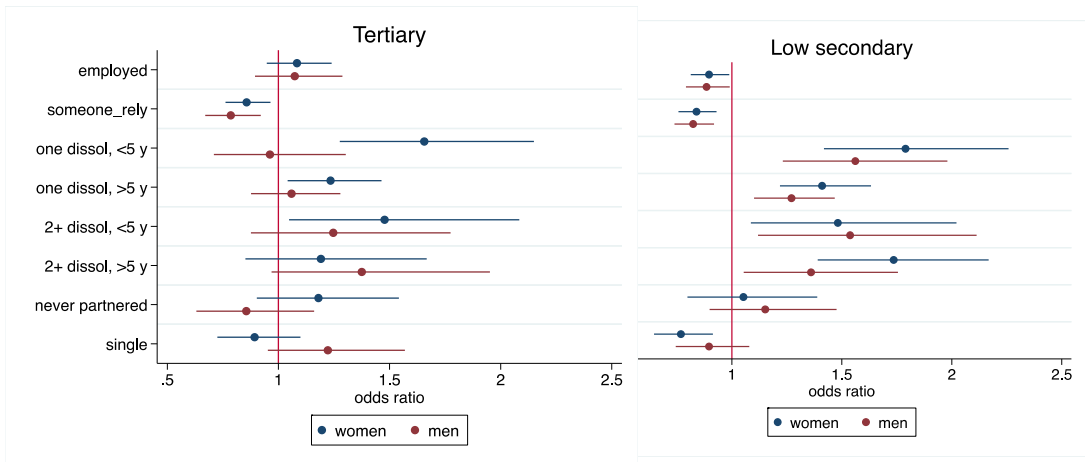
Depressive symptoms



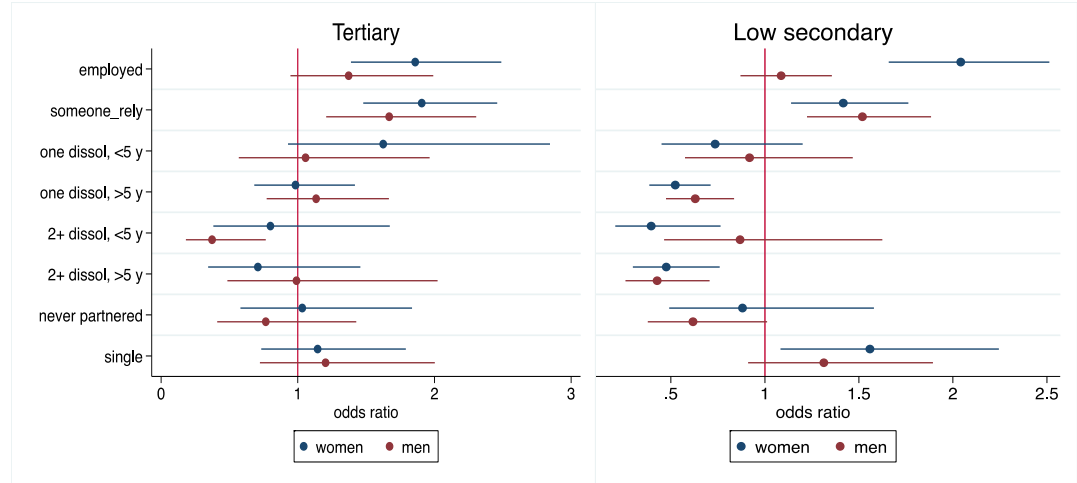
Results: Dissolutions and wellbeing, by education



Sleep disorders

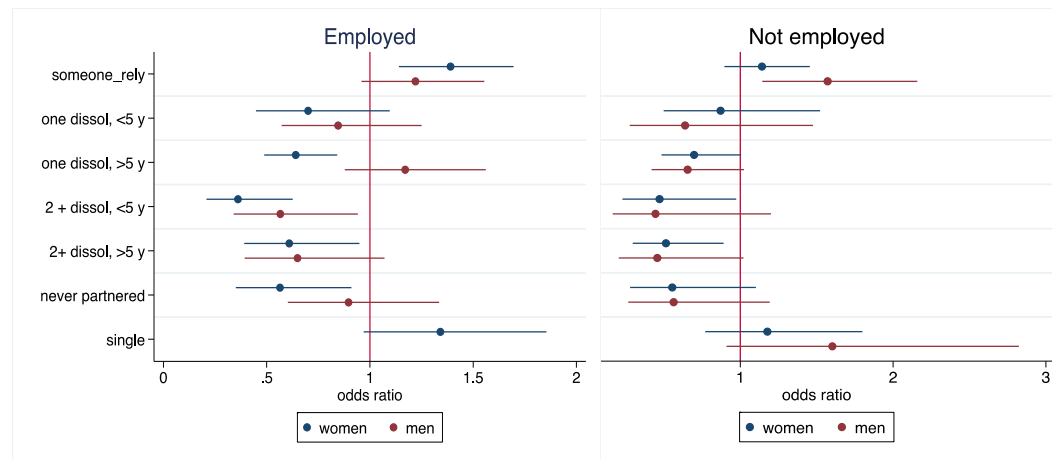


Satisfaction with career

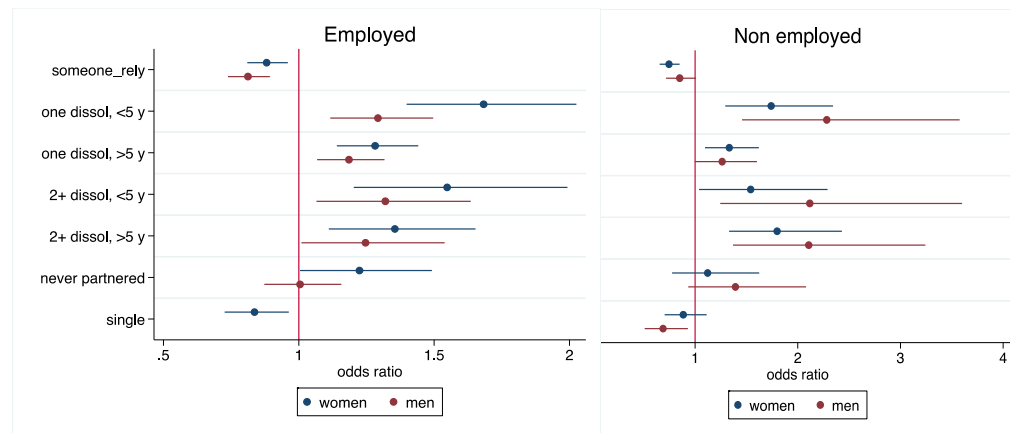


Dissolutions and wellbeing, by employment status

Self-perceived health

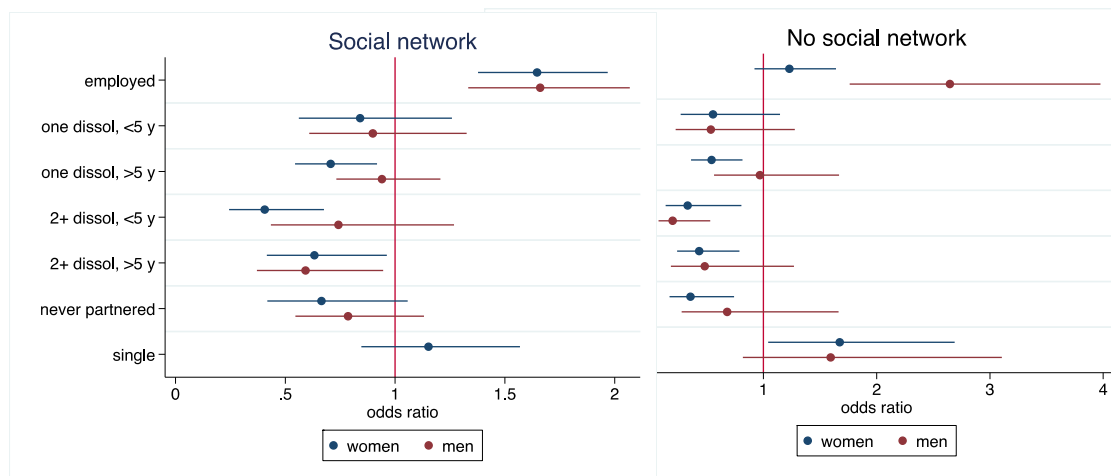


Sleep disorders

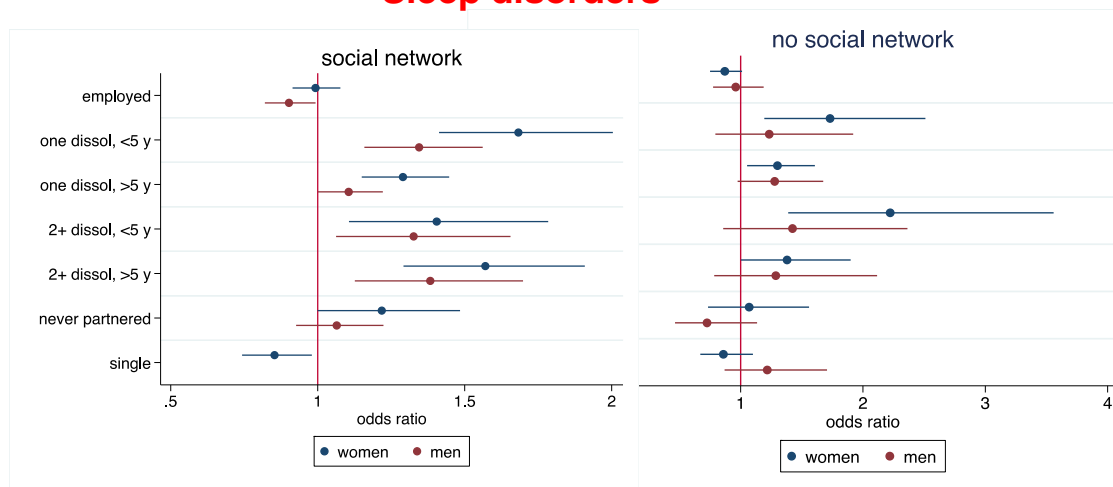


Dissolutions and wellbeing, by social network

Self-perceived health



Sleep disorders



Preliminary conclusions

- Past dissolution(s) and well-being associated net of current partnership status
- Associations vary depending on the number of dissolutions and the dimension of well-being considered
 - Experiencing more than one dissolutions is negatively associated with all dimensions of well-being
 - Experiencing one dissolution is associated to mental health in the short term. More varied is the association with physical health
- The associations vary by the socio-economic status of individuals

Next steps

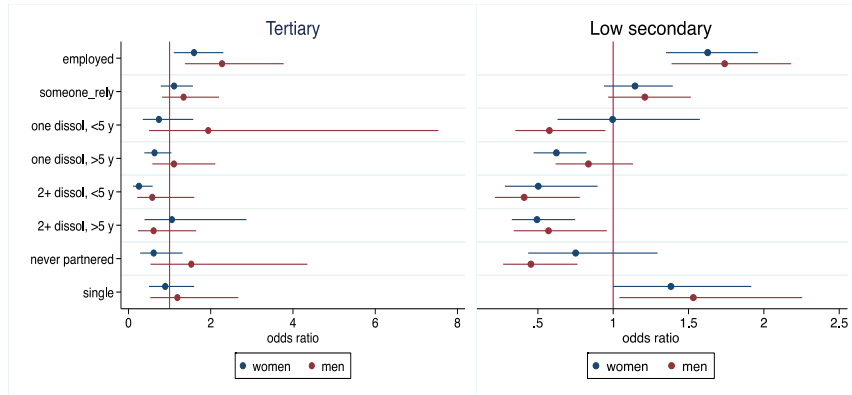
- Analysis of union dissolutions occurring between 2006 and 2010 and change in wellbeing
- Consider separately number of events and timing (with interactions)
- Interactions btw dissolutions and gender and SES to test if differences are significant
- Inclusion of measures of the time spent by the individuals in a union

Thank you!

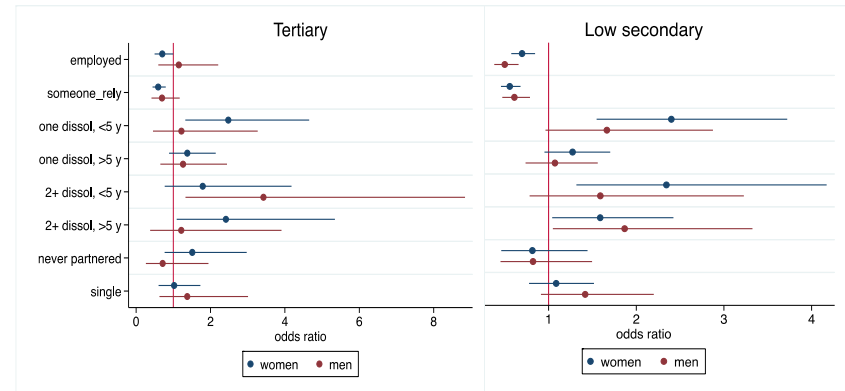


Dissolutions and well-being, by education

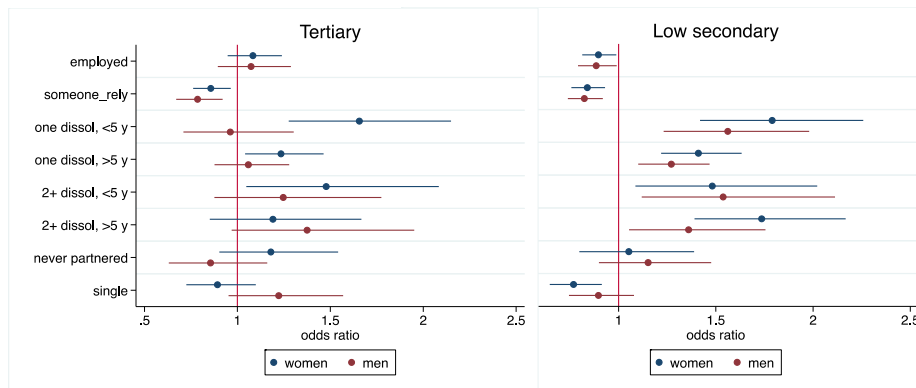
Self-perceived health



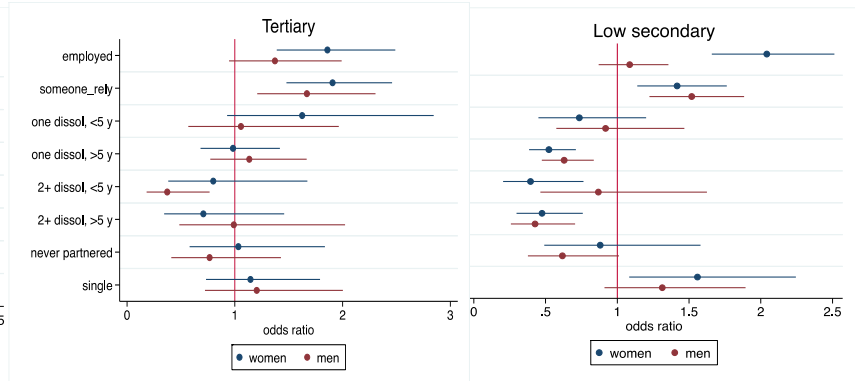
Depressive symptoms



Sleep disorders

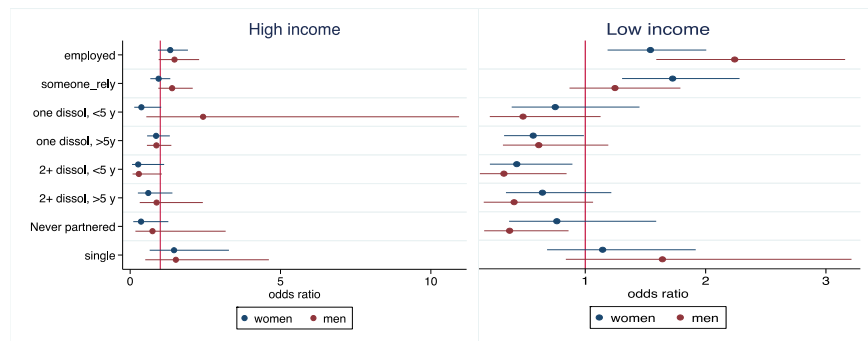


Satisfaction with career

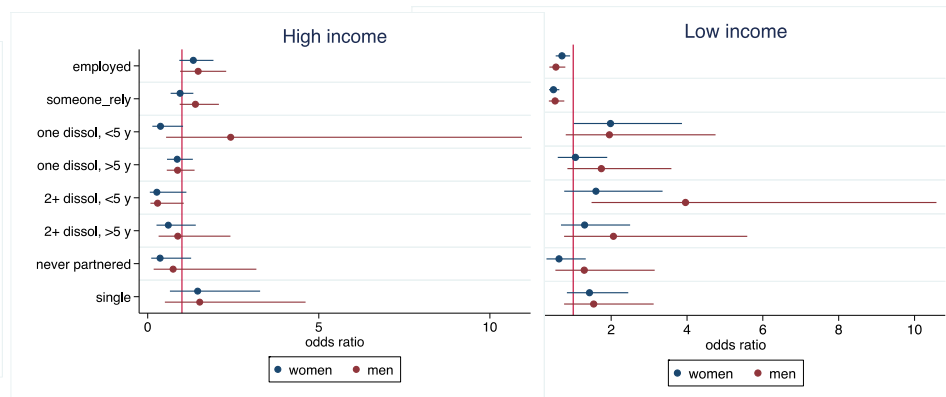


Results: Dissolutions and well-being, by income

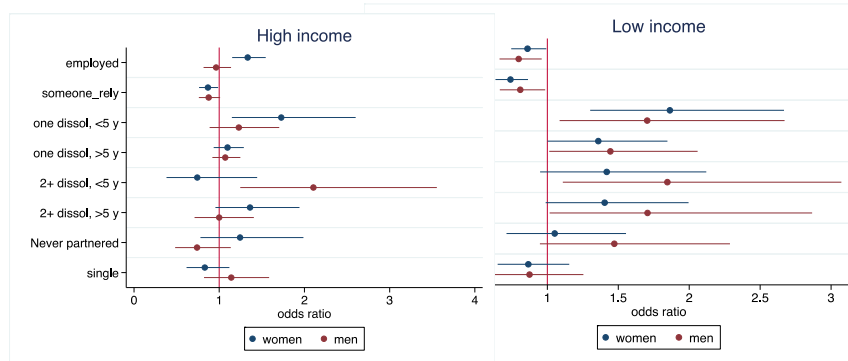
Self-perceived health



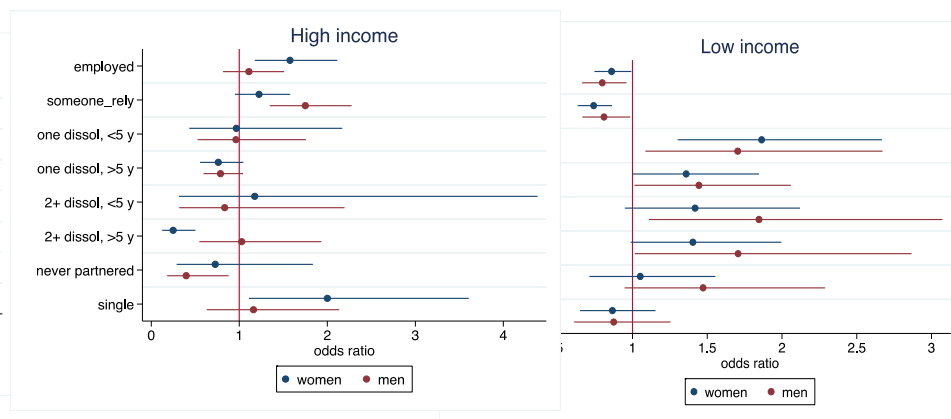
Depressive symptoms



Sleep disorders

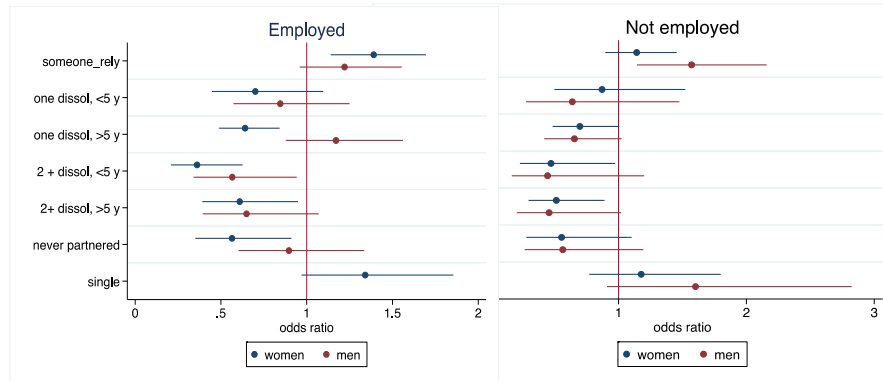


Satisfaction with career

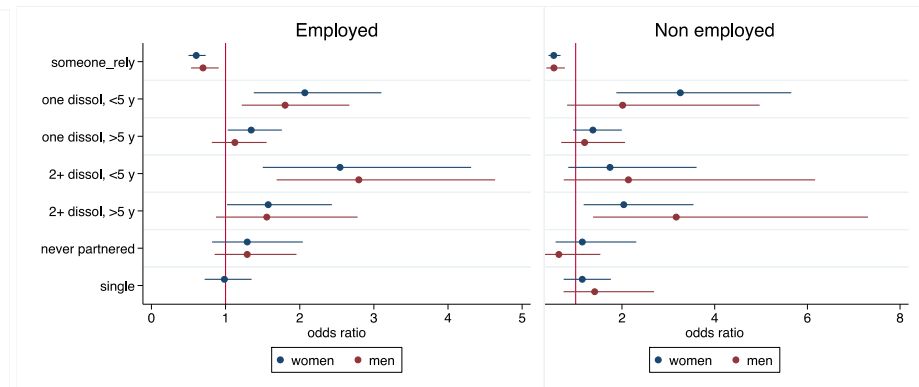


Dissolutions and well-being, by employment status

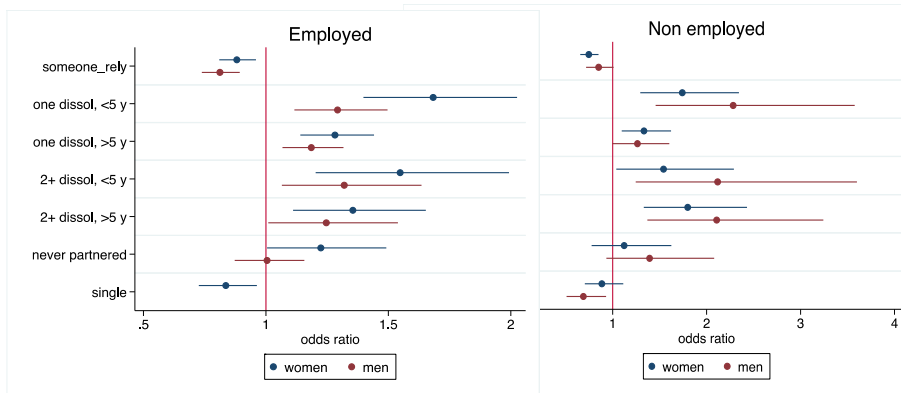
Self-perceived health



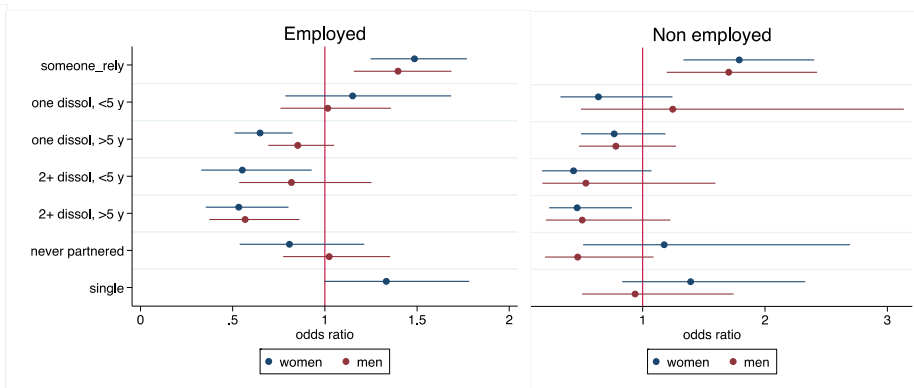
Depressive symptoms



Sleep disorders

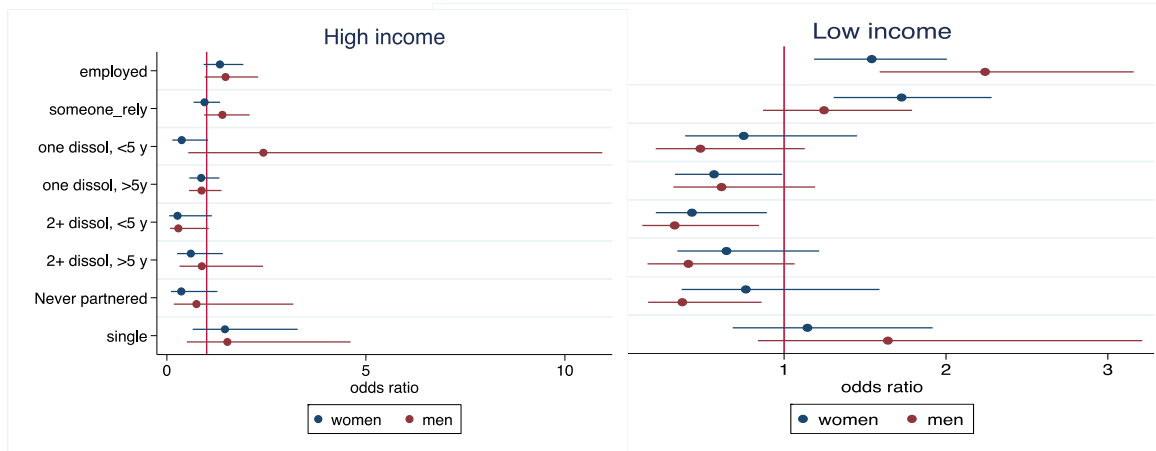


Satisfaction with career



Results: Dissolutions and well-being, by income

Self-perceived health



Sleep disorders

