Socioeconomic status (SES) encompasses not just income but also educational attainment, financial security, and subjective perceptions of social status and social class. Socioeconomic status can encompass quality of life attributes as well as the opportunities and privileges afforded to people within society. Poverty, specifically, is not a single factor but rather is characterized by multiple physical and psychosocial stressors. Further, SES is a consistent and reliable predictor of a vast array of outcomes across the life span, including physical and psychological health. Thus, SES is relevant to all realms of behavioral and social science, including research, practice, education, and advocacy.

SES AFFECTS OUR SOCIETY

SES affects overall human functioning, including our physical and mental health. Low SES and its correlates, such as lower educational achievement, poverty, and poor health, ultimately affect our society. Inequities in health distribution, resource distribution, and quality of life are increasing in the United States and globally. Society benefits from an increased focus on the foundations of socioeconomic inequities and efforts to reduce the deep gaps in socioeconomic status in the United States and abroad.

SES IMPACTS EVERYONE’S LEVELS OF WORK STRESS AND HEALTH

Work is central to the psychological health and well-being of individuals and communities (Blustein, 2008). Vocational and industrial–organizational psychology have demonstrated the importance of work and how it promotes connection to the broader social and economic world, enhances well-being, and provides a means for individual satisfaction and accomplishment (Blustein, 2006; Brown & Lent, 2005; Hall, 1996; Spector, 2005).

Workplace Stressors

Multiple factors can affect the physical health and psychological well-being of workers. Research indicates that job strain and repetitive and hazardous work conditions may have detrimental effects on physical health. Stress experienced and perceived can affect one’s psychological well-being. Work stress research has examined the psychological demands of workload, workers’ perceived sense of control over their performance, safety stressors, work organization, and work atmosphere (Aittomäki, Lahelma, & Roos, 2003; Clarke, 2006; Dembe, Erickson, Delbos, & Banks, 2005; Gillen, Baltz, Gassel, Kirsch, & Vaccaro, 2002; Landsbergis, Cahill, & Schnall, 1999; MacDonald, Harenstam, Warren, & Punnett, 2008).

Health

Work stress has been identified as a risk factor for hypertension, diabetes, upper extremity musculoskeletal problems, back problems, and cardiovascular disease.

- High demands and low decision control have predicted heart disease in white collar workers (Kuper & Marmot, 2003).
- Job strain has been shown to increase blood pressure in men of low SES (Landsbergis, Schnall, Pickering, Warren, & Schwartz, 2003).
- Exposure to cumulative job strain in white collar workers revealed modest increases in systolic blood pressure (Guimont et al., 2006).
- Fatigue and sleep deprivation are correlated to mandatory and voluntary overtime and are also associated with work-related accidents in blue collar workers (Barger et al., 2005; Cochrane, 2001).
• Smoking prevalence among blue collar workers is double that of white collar workers. This difference may be explained by the additional psychological stressors low income brings (Barbeau, Krieger, & Soobader, 2004; Sorensen, Barbeau, Hunt, & Emmons, 2004).

• Male infertility has been associated with job burnout for persons working in industry and construction (Sheiner, Sheiner, Carel, Potashnik, & Shoham-Vardi, 2002).

**Family vs. Work Conflict (Managing Multiple Roles)**

In addition to workplace social supports, familial support is essential to the psychological well-being of those under job strain. Those managing multiple roles may be at added risk of stress due to competing responsibilities at work and at home. Higher incidence of children with chronic health conditions, learning difficulties, and child care issues create the added need for flexibility as parents try to balance these conflicting responsibilities (Richman, Johnson & Buxham, 2006). Quality child and elder care programs are needed to help caretakers fulfill their obligations at work and at home.

• Lower wage workers are more likely to work for small businesses and therefore less likely to have access to health insurance, paid vacations, and sick days. They are also less likely to be allowed to use paid time off for sick child care (Richman et al., 2006).

• Higher rates of job dissatisfaction and job-related stress have been observed in workers with more frequent overtime requirements, little managerial support, and less work flexibility (Richman et al., 2006).

• A study of dual-earner middle-class families revealed that the majority are not pursuing two high-powered careers, in order to reduce stress and balance life–work responsibilities (Becker & Moen, 1999).

• Lower wage workers are more likely to work part-time, at lower hourly rates, with few to no benefits and often mandatory part-time schedules—all of which create work–life challenges for families and single parents (Richman et al., 2006).

• Research on the attitudes of employers revealed that the majority did not regard flexibility as an option for their low-wage workers and expressed little sympathy for the employees’ needs (Richman et al., 2006).

**Job Insecurity & Unemployment**

Job insecurity is the perception of being threatened by job loss (Mohr, 2000), which can have consequences on an individual’s health and well-being.

• The fear of job loss has a significant impact on physical and mental health; the effect on mental health is greater than the effect on physical health (Sverke, Hellgren, & Näsvall, 2002).

• A study found that physical health decline was related to fear of job loss in blue collar workers, automobile workers in particular (Heaney, Israel, & House, 1994).

• Higher blood pressure for women and weight loss among those with higher job insecurity was found in blue collar workers (Ferrie, Shipley, Stansfeld, & Marmot, 2002).

• Involuntary job loss for older adults was connected to health declines and even morbidity (Wilson & Mossakowski, 2009).

• Unemployment not only correlates with distress but also causes it (Karsten & Moser, 2009). The negative effects of unemployment are illustrated by declines in psychological and physical health (Wanberg, 2012).

**GET INVOLVED**

• Consider SES in your education, practice, and research efforts.

• Stay up to date on legislation and policies that explore and work to eliminate socioeconomic disparities. Visit the Office on Government Relations for more details: http://www.apa.org/about/gr/pi/

• Visit APA’s Office on Socioeconomic Status (OSES) website: www.apa.org/pi/SES

• Visit APA’s Work, Stress and Health website: http://www.apa.org/pi/work/

References can be found at http://www.apa.org/pi/SES/resources/publications/fact-sheet-references.aspx