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**Socioeconomic Status and Employee Well-Being:
An Intersectional and Resource-Based View of Health Inequalities at Work**

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ABSTRACT

Socioeconomic status (SES)—one’s objective economic and social standing—has the potential to yield critical implications for employee well-being. Despite the vast multidisciplinary literature on the topic, management scholars have historically treated SES as a control variable and have only recently begun to critically examine the role of SES at work. Because of this, relatively little is still known about the role that work-specific factors play in the relationship between SES and employee well-being, as well as the role of the socio-environmental context (i.e., who is more vulnerable to health inequalities due to demographics or the environmental contexts in which they operate). To integrate the study of SES more fully into management theory and research, we draw on resource-based theories to develop an organizing framework for reviewing and synthesizing the vast literature on this topic that spans multiple disciplines. In so doing, we unpack the dynamic and reciprocal relationship between SES and employee well-being, elucidating the role that work-specific mechanisms (i.e., job demands and resources) play in linking SES to well-being (and vice versa) and clarifying how these have the potential to amplify or attenuate the effects of SES on well-being. Further, we provide evidence for the role of the socio-environmental context in affecting the aforementioned relationships. We conclude with a critique of the literature, highlighting methodological limitations and opportunities for future research. Ultimately, our hope is for research in management and applied psychology to regard SES not merely as a nuisance variable, but as a subject meriting dedicated inquiry.

Keywords: socioeconomic status; well-being; diversity, equity, and inclusion

**SOCIOECONOMIC STATUS AND EMPLOYEE WELL-BEING:
AN INTERSECTIONAL AND RESOURCE-BASED VIEW OF HEALTH
INEQUALITIES AT WORK**

Socioeconomic status (SES), defined as “an individual’s objective economic or social position in relation to others” (Wanberg, Csillag, Douglass, Zhou, & Pollard, 2020: 2), has critical implications in the workplace, particularly for employee well-being. By and large, evidence suggests that employees with lower levels of SES are prone to poorer physical health (Brønholt, Hansen, Islamoska, Christensen, Grynderup, & Nabe-Nielsen, 2021), as well as higher risks for work-related injury (Qi, Liang, & Ye, 2020) and mortality (Noh & Khang, 2021). Further, outside of the work domain, the multidisciplinary body of research on SES and well-being has identified a social gradient, with negative well-being outcomes increasing as SES decreases, not simply when the threshold of poverty is crossed (Matthews & Gallo, 2011). Yet, while there is some consensus around the effects of SES on well-being, relatively little is known about how aspects of work itself impact the relationship between SES and employee well-being.

Indeed, what is missing within research to date is an understanding of how *job demands* and *resources* may affect the perpetuation of lower SES and/or employee well-being, as well as the relationship between SES-related stressors and well-being. However, scholars increasingly recognize that organizations, rather than being neutral entities, often reinforce social hierarchies that influence SES and well-being (Amis, Mair, & Munir, 2020). Reflecting this, there is growing interest around how social and economic inequalities shape organizational life (Leslie & Flynn, in press; Sinclair, Graham, & Probst, 2024), as well as growing interest in how workplace practices—such as unsafe work conditions, healthcare access, workloads, and job insecurity— affect SES and employee well-being (Pfeffer, 2018). For example, while lower SES jobs may carry more health-harming demands, they may also provide limited resources that promote well-

being, making these effects worse over time. Alternatively, while higher SES jobs may carry health-harming demands, they may also come with resources (e.g., job control, supervisor support) that buffer demands (Karasek, 1979). Unfortunately, how such job demands and resources are stratified by SES and how these stratifications are part of a *system* within which SES impacts well-being has not been brought to the fore in management theory and research, limiting our understanding of the role that work-specific factors (i.e., job demands and resources) play in the relationship between SES and employee well-being.

To more fully integrate the study of SES into management theory and research, we draw from resource-based theories (i.e., job demands-resources model [JD-R; Bakker & Demerouti, 2007] and conservation of resources theory [COR; Hobfoll, 1989]) to develop a framework for reviewing and synthesizing research on SES and employee well-being. In so doing, we elucidate the role that work-specific mechanisms play in linking SES to well-being (and vice versa) and clarify how job resources and demands have the potential to amplify or attenuate the effects of SES on well-being. As an additional extension, we use our review to explain how socio-environmental aspects of the context impact the relation between SES and employee well-being, thus identifying *for whom* this relationship may be worsened due to demographics (e.g., age, gender) or the contexts (e.g. organization, culture) within which they operate.

BACKGROUND AND THEORY

We first must understand what we mean by SES and employee well-being. SES is best conceptualized as “a composite measure that typically incorporates economic status—measured by income; social status—measured by education; and work status—measured by occupation” (Dutton & Levine, 1989: 30). SES is a unitary construct with these three indicators—income, occupation, and education—reflecting current, *objective* differences in one’s access to material

and social resources (Antonopolis, 2023; Oakes & Rossi, 2003). Income, the most common indicator of SES, is an indicator of material resources that is typically measured as annual individual/household income or monthly wages (Christie & Barling, 2009). Occupation signals one's social standing through elements of social capital and prestige, reflects one's educational level, and provides one's income (Fujishiro, Xu, & Gong, 2010). Finally, education signals one's social standing *and* captures one's knowledge-related assets (Christie & Barling, 2009).

Importantly, these three indicators are interrelated; for example, one's education often influences occupational opportunities, and one's occupation is a source of income. Yet, meta-analytic correlations among these three indicators are moderate: Income and occupation ($r = .24$); income and education ($r = .31$); education and occupation ($r = .37$) (Loignon & Woehr, 2018). Further, these indicators are not necessarily interchangeable (Darin-Mattsson, Fors, & Kåreholt, 2017), suggesting possible differential relations with employee well-being. Although there is a vast literature on the construct of SES that aims to disentangle the relationships among indicators, differentiate SES from adjacent constructs (e.g., social class), and develop valid measurements of this construct (see Braveman et al., 2005; Krieger, Williams, & Moss, 1997; Loignon & Woehr, 2018; Shavers, 2007 for reviews), an in-depth discussion of this literature is beyond the scope of the current review, as our focus is on understanding the dynamic, reciprocal relationship between SES and employee well-being.¹

¹ The literature on social determinants of health often uses social class and SES interchangeably. Social class is a broader construct that includes both objective access to resources and perceptions of that access (DeOrtentiis, Van Iddekinge, & Wanberg, 2022). Subjective elements reflect judgments of human, social, and cultural capital relative to others (Diemer et al., 2013) and represent *perceived* social standing, which may not align with economic position (Tan et al., 2020). These perceptions can affect well-being as much as objective indicators (Lewin, 1936), and both tend to correlate positively ($r = .32$; Tan et al., 2020). Subjective indicators may be influenced by situational context and perceptions of the past, present, and future (Kish-Gephart et al., 2023). While SES is typically measured objectively, social class can be assessed using objective and/or subjective measures. Our study focuses on *objective* SES to enable comparisons across the multidisciplinary literature.

In addition to SES, it is important to discuss how we define employee well-being given the various ways scholars have assessed this phenomenon (Tay, Batz-Barbarich, Yang, & Wiese, 2023). Per Sonnentag (2015: 263), we define employee well-being as a “concept that refers to people’s evaluations of their lives and to their optimal [physical and] psychological functioning and experience.” This definition is necessarily broad, being both consistent with contemporary management research and reflective of nuances across disciplines. Fitting reviews on employee well-being at work (e.g., Ganster & Rosen, 2013; Sonnentag, Tay, & Neshor Shoshan, 2023; see also Bolino, Henry, & Whitney, 2024), we consider both *psychological* and *physical well-being*, as both types of well-being are part of an ultimate criterion of optimal functioning (Tay et al., 2023). *Psychological well-being* captures subjective experiences (e.g., happiness, satisfaction, depression) and mental functioning, focusing on hedonic (i.e., the subjective experiences of pleasure; the balance of positive and negative thoughts/feelings in individuals’ judgments) and eudaimonic (i.e., the fulfillment and the realization of human potential) well-being (Sonnentag et al., 2023). *Physical well-being* refers to bodily health, assessed by physiological measures (e.g., blood pressure, cortisol levels, disease, illness) or subjective health (e.g., somatic complaints; Ganster & Rosen, 2013). Employee physical health is particularly relevant to organizational researchers, as work is a source of potential injury, disease, and stress, while also being the source of healthcare insurance and services in many countries (Tay et al., 2023).

Having established how we operationalize SES and employee well-being, it is also important to discuss the theory that informed our review and guiding framework. In the current review, we draw from the JD-R model and COR theory to develop an overarching framework (see Figure 1) to structure our review. These theories were selected because the notion of demands and resources affecting SES, employee well-being, and the relationship between the

two are inherent in many studies on the topic. Moreover, JD-R's explanation of how work-specific demands and resources interact to impact employee well-being and COR theory's broad focus on resources and consideration of cultural and contextual factors together provide grounds for identifying how SES comes with different job demands and resources which directly and indirectly influence well-being. As such, these theories are relevant because they provide insight into the processes and mechanisms through which job demands and resources combine to affect SES, employee well-being, and how they relate to one another over time.

According to the JD-R model (Bakker & Demerouti, 2007), work conditions (i.e., job demands and resources) interact to impact employee stress and well-being. Within this framework, job resources refer to physical, psychological, social, or organizational aspects of the job (e.g., autonomy, social support) that help employees deal with stressful situations, bolster motivation, and stimulate personal growth and well-being. In contrast, job demands are physical, psychological, social, or organizational aspects of the job (e.g., exposure to hazardous chemicals, emotionally draining interactions with customers, fast-paced complex tasks) that require physical, cognitive, or emotional effort and/or skills (Bakker, Demerouti, & Euwema, 2005). These demands can be growth-thwarting and often promote burnout over time. Further, although some demands can be growth-oriented, even these demands have a positive relationship with burnout (Podsakoff, Freiburger, Podsakoff, & Rosen, 2023). A key tenet of JD-R is that job resources may be able to offset the detrimental effects of job demands. Such effects can happen as a result of job resources exerting main effects on outcomes—here, job resources stimulate engagement at work and positive organizational outcomes while also reducing ill-being (Bakker & Demerouti, 2017). These effects can also happen through the *buffering hypothesis*—that job resources can attenuate the detrimental effects of job demands on employee well-being, and that

different resources may buffer against different demands, especially if appropriately ‘matched’ (e.g., social resources buffering social demands; de Jonge & Dormann, 2006).

While the JD-R model can help elucidate how specific job demands and resources are stratified by SES and interact to impact employee well-being, we draw from another resource-based theory—COR—to identify how (a) these stratifications are a system within which health inequalities are perpetuated and (b) socio-environmental aspects of the context impact the relation between SES and employee well-being. According to COR theory, individuals strive to obtain, retain, foster, and protect resources they value (Hobfoll, 1989). COR theory describes four main categories of resources (i.e., object, condition, personal, and energy) and argues that stress occurs when resources are threatened or lost (Hobfoll, Halbesleben, Neveu, & Westman, 2018). It has been noted that COR theory’s definition of a resource is so broad that the theory is too generic (Ganster & Rosen, 2013). Still, COR theory provides theoretical principles that explain how resources do not exist in isolation (Halbesleben, Neveu, Paustian-Underdahl, & Westman, 2014), as they are clustered and can accumulate into what Hobfoll (2002) termed *resource caravans*, which exist in ecological conditions called *passageways* that foster or limit resource creation and sustenance. Examples of these conditions are country-level (e.g., welfare policies) or social characteristics (e.g., demographics). Depending on the presence (or absence) of these conditions, employees might experience well-being-enhancing or harming effects.

Particularly relevant to SES, Hobfoll (1989) proposed that individuals with fewer resources are more likely to experience resource loss, with initial resource losses begetting future losses (i.e., loss cycles) that spiral at an increasing rate. For example, consider a lower SES employee working multiple hourly jobs each with physical, emotional, and cognitive demands—because this person is working so many hours, they cannot recover effectively or get adequate

sleep, leading to chronic exhaustion that may spiral into physical health conditions. In contrast, those with more resources are *less* vulnerable to resource loss and *more* likely to experience gain via cycles that may accelerate into spirals (Hobfoll, 1989). For example, developmental opportunities may help employees feel more energized at work and competent in their abilities, and these benefits may build on one another over time—as more resources become available the employee has increasingly more opportunities to gain resources (e.g., expand their network, promotions). Over time, these gains may push an individual into a higher SES bracket.

Thus, the JD-R model and COR theory together provide a framework for integrating the multidisciplinary research on SES and employee well-being. Combined, these theories suggest that (a) work characteristics can be stratified by SES and clustered into *caravans*; (b) resource gain and loss can reciprocally impact baseline resources and well-being outcomes over time; and (c) socio-environmental contextual variables can create *passageways* which can ease or hinder resource access. Further, such an integration helps alleviate concerns that COR theory does not consider how resources interact with demands and that the JD-R model does not consider the influence of personal characteristics, of which employees' SES would certainly be classified.

LITERATURE REVIEW

Method and Coding Procedure

We followed a multi-phase process of sampling, coding, and integrating the literature (see Appendix A). Following a systematic sample selection process (Hiebl, 2023), we first searched the *Web of Science Core Collection* using a list of keyword combinations related to SES and employee well-being in a title search.² This yielded 2,260 unique articles in peer-

² Since the goal was to provide a multidisciplinary review, we did not limit our search to specific journals or temporal boundaries, instead including journals from a wide range of disciplines (e.g., epidemiology, sociology,

reviewed journals. To determine whether articles from this search fit our review, the first and second authors were each randomly assigned 1,127 unique articles for independent coding (0 = exclusion, 1 = inclusion), reviewing each article and excluding those (a) that did not focus on the relationship between SES and employee well-being³; (b) that only studied employment categorically (i.e., employment or unemployment status) without considering aspects or conditions of work; or (c) included participants who were not employees.⁴ When uncertain about an article, the first or second author would provide a second review and would deliberate until consensus was reached. This resulted in a final sample of 151 articles that we used in the current review.⁵ Table 1 provides a summary of the characteristics of all articles included in our review.

The first and second authors independently coded the 151 articles for the following article characteristics: research design, timespan, country(ies), sample size, sample composition, levels of SES studied, SES operationalization (i.e., which/how many of the 3 indicators were considered in the study's operationalization of SES), SES measurement scale(s), employee well-being operationalization, employee well-being measurement scale(s), job demands and/or job resources studied, environmental and individual-level moderators, and main findings. This resulted in an interrater agreement (IRA) of 95% (i.e., [number of agreements/total codes] x 100). A key reason for disagreements was that the sample and measurement descriptions in the

psychology, occupational health medicine, public health, physiology, neuroscience, sports science, and management), but we did require the articles to be written in English.

³ We considered all articles that included SES as a variable (even if only as a control) if we could tie it to well-being. Often, however, SES was listed as demographic information outside of analyses when used as a control. In those cases, we excluded the articles, since we could not draw meaningful conclusions from them.

⁴ As the scope of our review is empirical evidence on SES and well-being *at work*, we only included articles that had samples of employed participants. We were not considering the relationship between SES and employment status, so we excluded articles that had samples categorized by employment status (i.e., articles that examined the differences between groups of employed and unemployed adults).

⁵ The article list with main article characteristic codes is in the OSF (<https://osf.io/9gdpr>). In line with prior work (e.g., Kish-Gephart et al., 2023), our review directly references at least 50% of our sample.

studies varied widely and were often vague. The IRA was calculated by the pre-consensus discussion. However, the first and second author discussed any discrepancies until 100% agreement was reached. The first and second authors then organized the articles into first-order codes describing the main topic of interest (e.g., physical demands, gender, country). After the first-order codes were finalized, the first through fourth authors developed a thematic structure to organize them, comprised of job demands, job resources, demographic characteristics, and environmental characteristics. Thus, our review is organized around elements of our guiding framework (Figure 1), which provides insight into how job demands and resources individually, and in combination, impact SES, employee well-being, and their reciprocal relationships, while also considering how these relationships might be affected by the socio-environmental context.

Recognizing that evidence quality is affected by many factors, throughout our review we aim to give the most attention to the highest quality evidence. Regarding organization, we follow a hierarchy of evidence quality (e.g., Kepes, Bennett, & McDaniel, 2014) by discussing cross-sectional designs first, followed by longitudinal designs given their stronger ability to allow for causal inference. However, we recognize that the quality of the research evidence is influenced by the relevance of the design given the research question and context. For example, while cross-sectional designs have methodological-statistical limitations (e.g., drawing causal inferences) and may be subject to bias (e.g., confounding variables), cross-sectional designs are appropriate to answer questions regarding the association between variables or the prevalence of perceptions or behaviors within a population (Maier, Bennett Thatcher, Grover, & Dwivedi, 2023). Further, there is variation in the quality of cross-sectional designs, with some providing stronger evidence than others due to inclusion of controls or alternative sources of data that mitigate limitations of the design (e.g., Rohrbacher & Hasselhorn, 2022). That said, our resource-based theory of health

inequality is dynamic (i.e., varying over time), and thus generalizability of cross-sectional findings may be limited. Longitudinal designs can offer stronger evidence of causality due to temporal precedence, yet time-separated measurement is not a panacea for data quality—high quality longitudinal designs must also carefully consider the appropriateness of the time interval and reciprocal causation (Spector, 2019; Taris & Kompier, 2014).

Beyond the aforementioned considerations in detailing critical nuance in research design, in our review we also provide information on commonly reported effect sizes (i.e., odds ratios [OR], r , and R^2) for studies when possible. Thus, we take a holistic approach to consider whether the evidence supporting relations reported in our review would be considered weak, moderate, or strong based on our overall assessment of the information (i.e., statistical evidence, consistency of findings, research designs) in each article. To aid in interpretation, we provide a summary table of the strength of evidence for each relationship considered in our review (Table 2).

Below, we consider how this literature has operationalized SES. We then review research that has considered the impact of job demands and resources on SES and employee well-being. This is followed by a discussion of research that has considered (a) demand and resource caravans; (b) reciprocal effects and their implications for loss and gain spirals; and (c) the role of the socio-environmental context in the relation between SES and employee well-being.

SES Operationalization

As discussed previously, SES is a unitary construct with three indicators (i.e., income, occupation, education) reflecting current, objective differences in one's access to material and social resources (Antonopolis, 2023; Oakes & Rossi, 2003). However, we found the literature operationalized SES in inconsistent ways (see Table 1), and only one article in our sample (Tong, Tsoi, & Mak, 2021) used a composite measure comprised of the three indicators. Most

studies operationalized SES as individual indicators, with many (i.e., 41, or 27% of our sample) measuring all three. The second most common operationalization of SES was a single indicator of occupation (i.e., 29 studies, or 19% of our sample).

Importantly, measurement for occupation varied more widely than for income and education. This has been discussed as a broader trend in the SES literature, with scholars arguing that occupational categories have more ambiguous and/or situated meaning as an SES indicator than income or education (Braveman et al., 2005; Fujishiro et al., 2010). Income was predominantly measured by self-report or register-based data (i.e., data from official administrative records maintained by governments or organizations) on annual income levels (i.e., 70 studies), and education was predominantly measured by self-report of highest education level attained (i.e., 80 studies). Occupation was measured using international (i.e., International Standard Classification of Occupations) or country-specific standard classifications (i.e., 39 studies), as well as other categories based on occupation type, hierarchy, and/or skills (e.g., white-collar, blue-collar, managerial; low, middle, high skill) (i.e., 60 studies).

Surprisingly, few papers in this literature reported correlations among SES indicators. Those that did reported moderate-sized correlations, which generally aligns with previous meta-analyses (e.g., Loignon & Woehr, 2018). For example, Christie and Barling (2009) reported moderate correlations among income and education ($r = .30$), income and occupation ($r = .39$), and occupation and education ($r = .38$). Similarly, Ott (1990) reported correlations among income and education ($r = .45$), income and occupation (blue-collar [$r = .24$], white-collar [$r = .29$]), and education and occupation (blue-collar [$r = -.013$], white-collar [$r = .22$]).

Job Demands

Job demands help explain the relation between SES and employee well-being. JD-R

researchers (e.g., Bakker & Demerouti, 2007) argue that factors such as work overload, poorly designed jobs, or emotional demands lead to energy depletion and poor health, with certain demands being more or less prevalent in different industries and occupations. We consider three dominant job demands—physical demands, psychosocial demands, and precarious work—related to SES that emerged from our review. Below, we discuss evidence for (a) each demand being stratified by SES, (b) direct effects of each demand on employee well-being, and (c) the role of each demand in explaining SES gradients in well-being.

Physical demands. Physical demands refer to events and work characteristics that affect individuals via a direct *physical process* versus a psychological one (Ganster & Rosen, 2013). Owing to the nature of the jobs that lower SES employees often hold, researchers have identified a negative relation between SES and exposure to physical hazards (e.g., chemicals and infectious materials; Qi et al., 2020) at work that contribute to ill-being, such that employees with lower SES experience greater exposure ($ORs^6 = .85-2.13$; Lee et al., 2020). Other physical demands associated with lower SES include noise, vibrations from tools and machines (Hemström, 2005), tiring or painful bodily positioning, lifting and carrying tasks (Anderson & Felson, 1988), repetitious movement (van der Wel, Bambra, Dragano, Eikemo, & Lunau, 2015), and unclean or hazardous working conditions (Noh & Khang, 2021; Ott, 1990). In terms of well-being, such physical demands are related to accidents, injury, disease, and death (OSHA, 2018). Indeed, in a sample of 8,960 Finnish employees, Kaikkonen, Rahkonen, Lallukka, and Lahelma (2009) found

⁶ Odds ratios (*ORs*) help detail the likelihood of an outcome occurring in one group versus another. An *OR* of 1.00 indicates no difference between the groups, meaning the outcome is equally likely in both groups. Values *greater than* 1.00 suggest an increased likelihood of the outcome in the first group (e.g., an *OR* of 2.00 means the outcome is twice as likely), while values *less than* 1.00 indicate a decreased likelihood (e.g., an *OR* of .50 means the outcome is half as likely). To interpret *ORs* less than 1.00 in a similar way as those greater than 1.00, we can take the inverse of the *OR*. For instance, an *OR* of .25 means the outcome is four times less likely in the first group ($1 / .25 = 4$).

that physical/chemical exposures accounted for 20% of health inequalities for women and 50% for men. Poor working conditions can also have an impact on felt helplessness (Ree et al., 2014) and can result in early retirement (Polvinen, Gould, Lahelma, & Martikainen, 2013).

While these findings paint a dire picture, it is important to acknowledge that the aforementioned research was cross-sectional, limiting causal inferences. When moving to more sophisticated designs, the link between physical demands, SES, and employee well-being becomes a bit less clear. Several long-term archival data collections (e.g., Wisconsin Longitudinal Study) have considered the effects of SES and physical work conditions on employee well-being. Fitting cross-sectional conclusions, some multi-wave long-term research suggests that blue-collar or physically demanding work can result in worse health later in life (e.g., Akkermans, Brenninkmeijer, van den Bossche, Blonk, & Schaufeli, 2013). For example, a study of 1,295 Dutch employees from 1992-2013 found that relative to higher educated workers, lower educated employees faced more physical demands that resulted in more functional limitations and poor self-rated health (de Breij, Huisman, & Deeg, 2020). Likewise, Schram et al. (2021, $N = 15,028$) found that across sixteen European countries, less educated workers were more likely to (a) perceive their health as poor, (b) engage in unhealthy behaviors, and (c) report unfavorable working conditions in a two-year follow-up during the period of 2005-2014, suggesting limited mobility into better work environments for lower SES employees.

Perhaps the most compelling study, however, used a longitudinal paired sibling design and reported *little* evidence that blue-collar work had a lasting impact on health (Fletcher, 2012, $N = 2,636$ U.S. employees). Fletcher (2012) did identify large effects of blue-collar occupation and various work characteristics (e.g., physical demands, heat, noise) on health measures at ages 50 and 60, but these effects were reduced 50% after controlling for education, IQ, and childhood

health, and further reduced after sibling fixed effects were introduced. These results suggested that health outcomes may be largely explained by family background characteristics.

Conclusions: There is *strong* evidence that physical demands (a) are more common among lower SES employees (e.g., hazardous conditions, repetitious movement), (b) negatively impact employee well-being, and (c) help explain socioeconomic inequalities in well-being.

Psychosocial demands. Psychosocial demands refer to events and work characteristics that affect individuals via a *psychological stress process* versus a direct physical one (Ganster & Rosen, 2013), such as long work hours (Bae, 2021), multitasking (Bauer, Huber, Jenny, Müller, & Hämmig, 2009), or workplace mistreatment and bullying (Niedhammer et al., 2011). Research suggests that *higher* SES employees face more psychosocial demands than their lower SES counterparts (e.g., Koopman, Wanat, Whitsell, Westrup, & Matano, 2003 [$R^2 = .35$]). Moreover, there is evidence that psychosocial demands have a negative effect on employee well-being. For example, Li et al. (2019) found that longer working hours and higher job requirements lead to worsened mental health ($N = 17,101$ U.S. participants), and Rapolienė, Gedrimė, and Mockevičienė (2019, $N = 606$ Lithuanian participants) found that job-related risk factors such as deadlines and competition negatively influenced employee health.

Regarding the effects of psychosocial demands and well-being according to SES, Stadin, Nordin, Broström, Magnusson Hanson, Westerlund, and Fransson (2016, $N = 14,757$ Swedish participants) found that information and communication technology (ICT) demands were common for intermediate and higher SES employees and were associated with elevated job strain, effort-reward imbalance, and poor self-rated health. Borle, Boerner-Zobel, Voelter-Mahlknecht, Hasselhorn, and Ebener (2021, $N = 3,180$ German participants) found these ICT demands may be intensifying for high-skill workers, and this “digital work intensification” had a stronger negative relationship with health than did ICT demands alone.

Higher SES employees also report more ill effects from interpersonal and work-life conflict (Koopman et al., 2003). For example, a cross-sectional study in Japan (Inoue & Kawakami, 2010, $N = 20,313$) found that the positive link between interpersonal conflict and depression was stronger among more (vs. less) educated and non-manual (vs. manual) male employees. Similarly, Kim and Cho (2020, $N = 49,401$ South Korean participants) found work-life conflict was more strongly related to mental health for employees with higher education ($OR = .82$ for men; $OR = .95$ for women) and income ($OR = .96$ for men; $OR = 1.02$ for women). These psychosocial demands may be exacerbated by the longer work hours and higher job overload often experienced by higher SES employees ($R^2 = .24$; Qiu, Bures, & Shehan, 2012). Indeed, Li et al. (2019) found that while higher SES individuals were less likely to report mental illness, the SES-mental health relationship often depends on psychosocial work factors, such as work hours. For employees in management, business, and finance, the optimal workweek was 46 hours, with health outcomes worsening above or below this level.

The research reviewed in this section was cross-sectional, making it difficult to draw strong causal inferences. Moreover, there is opposing research which suggests that *lower* SES employees have worse mental health due to longer work hours (Tong et al., 2021), as well as evidence of nonlinear trends (Li et al., 2019). Although it is difficult to draw strong conclusions from this literature, it is clear that higher SES employees do not always fare better in minimizing exposure to work demands, particularly those that are psychosocial in nature.

Conclusions: There is (a) *weak* evidence that higher SES employees are more likely to face psychosocial demands relative to lower SES employees, (b) *moderate* evidence that psychosocial demands negatively impact employee well-being, and (c) *weak* evidence that such demands help explain socioeconomic inequalities in well-being.

Precarious work. Precarious work is “the individual, psychological experience of insecurity, instability, and powerlessness related to one's work” (Allan, Autin, Wilkins-Yel,

2021: 3). It refers to “work that is unstable and insecure in the continuity and quantity of work,” including uncertain work conditions, unpredictable continuity, and limited rights and protections (Allan et al., 2021: 2). Although SES and precarious work are related, they are conceptually distinct—precarious work reflects a psychological experience, while SES is an *objective* measure of status in relation to others. Similarly, job insecurity bears a resemblance to occupation as an indicator of SES, but unlike SES (and similar to precarious work), job insecurity is a subjective experience (De Witte, 1999; Shoss, 2017) that reflects an assessment of one’s job continuity in their work environment (Greenhalgh & Rosenblatt, 1984; Sverke et al., 2002).

Lower SES workers often hold precarious jobs with lower job security, such as temporary and part-time jobs (Aldabe et al., 2011; Bauer et al., 2009). Research also shows education is negatively related to employment precariousness (i.e., temporariness, disempowerment, vulnerability, low wages, few rights, and uncertain work hours), suggesting a direct relationship between SES and the amount of precariousness experienced while working (Baek, Kim, Lim, Kim, Won, & Yoon, 2023). Moreover, there is evidence that demands associated with precarious work can increase work-related stress and worsen health ($ORs = 1.24-5.79$; Bartoll, Cortès, & Artazcoz, 2014) and psychological well-being ($ORs = 1.27-1.53$; Baek et al., 2023). Indeed, Klug (2020) suggested that the relationship between job insecurity and worsened health emerges quite early in an individual’s career. D’Souza, Strazdins, Clements, Broom, Parslow, and Rodgers (2005) corroborated these effects using a sample of 2,249 Australian participants, finding that job insecurity had a moderate to strong effect on depression, anxiety, and doctor visits.

The relationship between SES and well-being appears to be affected by demands linked to precarious work. Cross-sectional research by Baek et al. (2023) on 46,919 South Koreans indicated that precarious employment accounted for 48.5-63.9% of the higher odds of poor well-

being for employees with less education. Similarly, Tsuboya, Aida, Kawachi, Katase, and Osaka (2014) found that blue-collar work and precariousness were related to poor oral health outcomes for 1,406 participants from Japan. However, D'Souza et al. (2005) found that while job insecurity and strain did predict worse health (e.g., self-reported depression, anxiety, physical health, and doctor visits), these results did not depend on occupational classification status.

Although the evidence discussed so far was from cross-sectional designs, studies that utilized alternative designs provide additional support for the negative effects of precarious work on employee well-being. For example, in a multi-wave representative household panel study from 2001-2014, Klug (2020, $N = 1,522$ German participants) found that subjective job insecurity was associated with worse mental health and lower job satisfaction for individuals with vocational qualifications, as compared to either low-skilled workers or those with university degrees ($R^2 = .02$). Likewise, across three waves of data collected from 2012–2014 on 3,640 Australians, Milner, Blakely, Disney, Kavanagh, LaMontange, and Aiken (2018) found that employees with less education were more likely to report job stressors (e.g., job insecurity) than more educated employees, as well as more likely to report having a long-term health condition.

Conclusions: There is *strong* evidence that precarious work (a) disproportionately affects lower SES employees, (b) negatively impacts employee well-being, and (c) helps explain socioeconomic inequalities in well-being.

Job Resources

While job demands are core influences on employee well-being, job resources also carry critical weight. As mentioned in our discussion of JD-R, job resources carry their own salutatory effects on employee well-being *and* may shield employees from the health-harming impact of demands (Bakker & Demerouti, 2017). Accordingly, we review three categories of job resources

that emerged from our review: job control, social support, and recognition.⁷ Below, we discuss (a) evidence for each resource being stratified by SES, (b) direct effects of each resource on employee well-being, and (c) the role of each resource in explaining SES gradients in employee well-being. Given the importance of the buffering role of resources, we also review evidence that each resource may buffer the negative impacts of demands. As in the demands section, our review is organized according to the hierarchy of evidence (Kepes et al., 2014), with a focus on identifying the highest quality evidence available.

Job control. Job control, often referred to as autonomy or decision latitude, refers to the ability to exert influence over one's work environment, including control over where, when, and how work is performed (Karasek, 1979). Job control was the most common job resource studied in this multidisciplinary literature, and it is a central construct in the work stress and well-being literature (Ganster & Perrewé, 2011). In general, research finds SES and job control are positively related (e.g., Akkermans et al., 2013). For example, Murcia, Chastang, Cohidon, Niedhammer, and Samotrace Study Group (2013, $N = 6,056$ French employees) found managers and professionals had the highest decision latitude, followed by associate professionals and technicians, while manual workers, clerks, and service workers had the lowest.

The evidence also suggests that job control exerts direct effects on employee well-being. For example, using five cycles of data from a prospective cohort study of 3,411 Canadian employees, Smith, Frank, Mustard, and Bondy et (2008) found that low job control in 1994 predicted poorer self-rated health in 2002. This relationship was consistent across education and income levels. Similarly, using two waves of data from the Japanese Life Course Panel Survey Ishida (2013, $N = 3,965$ employees) found that those with more control over their working

⁷ At least one of these resources was studied in over half of the papers in our sample.

patterns and pace were more likely to have improved health from Time 1 to Time 2 ratings.

There is moderate evidence that job control partly explains socioeconomic inequalities in employee health. For example, across two phases from 1991-1993, Martikainen, Stansfeld, Hemingway, and Marmot (1999, $N = 7,177$ U.K. employees) found that decision latitude independently predicted SES differences in changes in physical and mental health over time. Taking a slightly different perspective, Smith et al. (2008) found that while job control explained a small part of SES differences in employee well-being, job control also exerted an additive effect with SES on well-being—the effects of job control on physical activity and health status were not attenuated by other factors linked with lower SES (e.g., environmental stress), but rather, each of these variables had an additive effect on physical activity and health status.

Finally, there was limited evidence that job control buffers the negative impact of job demands. A few papers studied the interaction between job control and demands, and this was through the specific case of job strain, which according to the job demand-control (JDC) model occurs when psychological demands are high and job control is low (Karasek, 1979). Studies found lower SES employees experienced more job strain (e.g., Stadin et al., 2016; Toivanen, 2011) and that job strain was detrimental to employee well-being overall (e.g., Johnson & Hall, 1988). For example, Nilsen et al. (2014) found that higher job strain was associated with 2.62 times higher odds of complex health problems compared to lower job strain (high control/low demands), and this association became nonsignificant after accounting for education.

Hinting at a buffering role of control, a cohort study (de Breij et al., 2020, $N = 1,295$ Dutch participants) found the positive link between autonomy and self-rated health was strongest for less educated workers. Those in jobs with high control and demands (“active” jobs) reported better health and fewer functional limitations compared to peers in high-strain jobs. For less

educated workers, “active” jobs protected against the health harming aspects of higher demands on their own. Further, de Breij et al. (2020) argued that job characteristics mattered more for less educated workers, who had fewer resources to cope with adverse working conditions.

Conclusions: There is *strong* evidence that job control (a) is lower among lower SES employees, (b) positively impacts employee well-being, and (c) helps explain socioeconomic inequalities in well-being, with (d) *weak/limited* evidence that it buffers the negative effects of demands on well-being.

Social support. Social support—direct or indirect emotional and instrumental aid from coworkers and supervisors (House, 1981)—is another common job resource studied in this literature. Yet unlike job control, the evidence for social support following a SES gradient is mixed. Some cross-sectional studies found lower SES blue-collar workers had the least social support, while higher SES white-collar workers had the most (e.g., Choi, 2017; Niedhammer, Chastang, David, & Kelleher, 2008). Other research (Hämmig & Bauer, 2013) found higher SES workers had lower social support. These inconsistencies may stem from variations in the types of social support available in jobs across the SES spectrum. Though some scholars argue higher SES workers may have more opportunities for social support through their networks (Fujishiro et al., 2010), they also tend to work in jobs with higher risks for interpersonal issues (e.g., Inoue & Kawakami, 2010) that *necessitate* social support. Further, higher SES workers tend to experience more supervisor social support, but lower SES employees may have peer support at similar levels as the rest of the SES gradient (Quinn, Otten, Stover, Peckham, & Seixas, 2023).⁸

Consistent across research designs, there is evidence that social support exerts a positive effect on employee well-being (e.g., Brønholt et al., 2021; Tsuboya et al., 2014). For example, Hibbard and Pope (1987, $N = 1,490$ U.S. participants) reported that the degree to which a worker

⁸ Unfortunately, there was not enough evidence in our review to make comparisons across types of social support, so this is a direction for future research.

felt integrated with and supported by coworkers was related to enhanced well-being. Further, Ishida (2013) found that participants who reported increases in cooperation and helping in their work environment were more likely to experience an improvement in self-reported health.

Evidence on whether social support explained SES health inequalities was mixed. Most studies found that social support did not account for SES gradients in well-being (e.g., Soares, Grossi & Sundin, 2007). There were exceptions, though most were from cross-sectional studies (Choi, 2017; Fujishiro et al., 2010). For instance, Niedhammer et al. (2008, $N = 24,486$ French participants) found that accounting for social support reduced SES gradients in self-reported health. Further, Brønholt et al. (2021, $N = 3,338$ Danish participants) found that social support from colleagues and supervisors was related to self-rated health at follow-up six years later.

Interestingly, although evidence suggested that employees draw on social support in times of stress to protect themselves against experiencing exhaustion, fatigue, and both mental and emotional distress (Akkermans et al., 2013; Quinn et al., 2023), there was little evidence of social support buffering job demands. One study of 13,779 Swedish participants from 1976-1977 (Johnson & Hall, 1988) hinted at buffering, showing that lower coworker social support increased the impact of job strain on cardiovascular disease, with higher prevalence rates at all strain levels ($ORs = 1.43-2.55$). Hibbard and Pope (1987) found that for women, being a single parent combined with lower quality intrinsic work characteristics and/or lower social support and integration had synergistic effect on health status, beyond the additive effects of these factors.

Thus, while some studies hint that social support may buffer demands, evidence is insufficient and methodological limitations hinder a clear understanding of the buffering process. More explicitly, most studies are cross-sectional, preventing causal inferences. Moreover, the long intervals between measurements in non-cross-sectional and longitudinal designs (often

annual national surveys) also may make it challenging to capture the buffering effect, indicating a need for alternative methods to probe these relationships further.

Conclusions: There is *weak* evidence that social support (a) is stratified by SES, (b) helps explain socioeconomic inequalities in well-being, and (c) buffers the negative effects of demands on well-being, with (d) *strong* evidence that it positively impacts employee well-being.

Recognition. The third category of job resources that emerged was recognition, which encompasses recognition for one's performance, dedication, and value to the organization, as well as opportunities for advancement, such as promotion and developmental opportunities (e.g., McCluney, Schmitz, Hicken, & Sonnega, 2018). The evidence suggests recognition follows a SES gradient, with higher SES employees receiving more recognition (Tong et al., 2021). For example, in a cross-sectional survey of 27,598 Korean employees, Choi (2017) found that compared to white-collar work, blue-collar and "unskilled" work was significantly associated with low recognition, with almost half of employees in unskilled occupations reporting low job recognition compared to 10% of white-collar workers. Notably, the way recognition was measured varied widely across studies and often overlapped significantly with SES, limiting our ability to draw firm conclusions about its role in the SES-employee well-being relationship. For example, many studies included satisfaction with one's salary in their recognition/reward scale, creating a clear confound with SES that none of the studies in our sample addressed (e.g., Aldabe et al., 2011; Robroek, Rongen, Arts, Otten, Burdorf, & Schuring, 2015).

Consistent across research designs, there is evidence that recognition is important employee well-being (e.g., McCluney et al., 2018; Stadin et al., 2016). For example, Schram et al. (2021, $N = 15,028$ participants) found that potential for professional growth was positively related to health, and McCluney et al. (2018) found objective O*NET ratings of work recognition and advancement opportunities predicted two-year lagged self-reported health,

episodic memory, and mean arterial pressure ($R^2 = .19$). However, recognition was collapsed with other psychosocial work characteristics, preventing an assessment of its isolated impact.

The impact of SES on well-being as a function of recognition received mixed findings. A cross-sectional study (Hämmig & Bauer, 2013, $N = 1,846$ Swiss employees) found blue-collar workers were at a higher risk for having poor promotion prospects, and workers with poor promotion prospects and career opportunities were more than two times as likely to report poor health and stress, 2.8 times as likely to experience burnout, and over 1.5 times as likely to have limited physical functioning and sickness absences. Likewise, using two waves of data from the Swedish Survey of Living Conditions, Hemström (2005, $N = 5,982$ participants) found that developmental and learning opportunities partially mediated the relation between income and self-reported health. Yet, other studies failed to provide evidence that recognition explains SES gradients in well-being (e.g., Lu et al., 2019; Robroek et al., 2015).

Finally, there was limited evidence that recognition buffers the negative impact of job demands. Research drew on the Effort-Reward Imbalance (ERI) Model (Siegrist, 2002) – which suggests stress results from high effort without sufficient reward, while well-being improves with a balanced effort-reward exchange – and found evidence that ERI was more common at low SES levels is generally harmful to well-being. For example, Tong et al. (2021, $N = 1,007$ Chinese participants) found that ERI followed a SES gradient, with higher income groups experiencing the lowest ERI. Likewise, Toivanen (2011, $N = 2,613$ Swedish participants) found ERI was associated with increased odds for psychological distress, poor self-rated health, and musculoskeletal pain, and that adjusting for SES increased these estimates. Stadin et al. (2016, $N = 14,757$ Swedish participants) found that controlling for SES and age, the combination of high demand and low reward was associated with decreased well-being, such that men with high ERI

were over 2 times as likely to report suboptimal self-rated health. Unfortunately, the limited evidence, combined with the cross-sectional design of these three studies, limits our ability to make strong assertions about the buffering role of recognition/rewards on demands.

Conclusions: There is (a) *moderate* evidence that lower SES employees receive less recognition and *weak* evidence that recognition (b) positively impacts employee well-being, (c) helps explain socioeconomic inequalities in well-being, and (d) buffers the negative effects of demands.

DEMAND AND RESOURCE CARAVANS

Although our review thus far has considered job demands and resources in a somewhat separate manner, demands and resources often co-occur and are highly correlated. Groups of resources and demands are referred to as *caravans* in COR theory because they tend to travel together (Halbesleben et al., 2014). Importantly, there is evidence that demands and resources are more or less “grouped” across SES levels, though some researchers argue that higher SES workers face similarly high—albeit qualitatively different—demands as lower SES employees.⁹ The difference is that higher SES employees may have *differential exposure*, or the “unequal social distribution of stressors” (Vanroelen, Levecque, & Louckx, 2010: 866).

Demand Caravans

Aligning with COR theory, we found moderate evidence that the demands for lower SES employees travel together. Research by Bauer et al. (2009) on 10,101 Swiss employees indicated that physical demands such as environmental hazards and injury (e.g., physical strain) that co-occur with monotonous work (i.e., a psychosocial stressor) and job insecurity (i.e., a precarious

⁹ As an example, lower SES workers typically work longer hours and are more likely to work the night shift (Ertel, Berkman, & Buxton, 2011). Likewise, there is evidence that adverse working conditions decrease as educational and occupational levels increase—except for computer work, people work, and long hours, which are more prevalent at higher SES levels (Hämmig, Gutzwiller, & Kawachi, 2014). As further evidence of stratification by SES-related factors, Choi (2017) found that blue- and pink-collar work was related to more adverse work conditions (e.g., atypical work; physical risks; low autonomy, support, and rewards) than white-collar work.

work condition) explain most differences in self-rated health. Part-time work also had a moderate association with worsened work conditions (Bartoll et al., 2014), and evidence also suggests that hazards (e.g., exposure to infectious illness), extra unpaid labor, or inability to take breaks coincide with psychosocial stressors like mistreatment (Quinn et al., 2023).

Finally, using data from 3,338 participants in 2000 and 2006, Brønholt et al. (2021) found that, together, job insecurity and physical demands like ergonomic exposure (e.g., repetitive movement) had a major impact on social inequalities in self-rated health across SES. Conversely, there is evidence that psychosocial stressors caravan together (i.e., time pressure, interruptions, and overtime; Hämmig & Bauer, 2013) at *higher* levels of SES. However, more work is necessary to determine whether other classes of demands co-occur with these psychosocial stressors, particularly given methodological concerns (i.e., much of the research is cross-sectional) and status inconsistencies (i.e., confounding factors that make employees match the resources and demands of a different SES level than would be typical).

Conclusions: There is (a) *moderate* evidence that lower SES employees often face demand caravans at work, experiencing a combination of physical hazards, psychosocial stressors, and precarious work, and (b) *weak/limited* evidence of demand caravans at higher SES levels.

Resource Caravans

There is also moderate evidence that resources travel together in caravans. In a cross-sectional study of 28 countries, Aldabe et al. (2011, $N=12,241$ participants) found that decision latitude, rewards, social support, and trust together weakly explained differences in self-rated health across SES levels. Likewise, a longitudinal study of 3,965 Japanese employees found that self-rated health improved with greater workplace cooperation, access to work advice, and increased decision latitude (Ishida, 2013). However, most research on SES and employee well-being has focused on the cumulative *absence* of resource caravans like autonomy, flexibility, and

career opportunities (e.g., Karmakar & Breslin, 2008; Soares et al. 2007). Much more research is needed to determine whether lower and higher SES caravans differ quantitatively or if there are actual differences in the types of resources that cluster at varying levels of SES.

Conclusions: There is (a) *moderate* evidence that resources primarily accessible to higher SES employees cluster in caravans and (b) *moderate* evidence that lower SES employees often lack such resource caravans entirely.

RECIPROCAL RELATIONSHIPS AND IMPLICATIONS FOR LOSS/GAIN SPIRALS

Most of the research that we have reviewed thus far has focused on understanding how SES impacts well-being. In addition, the majority of these studies utilized cross-sectional designs, limiting our ability to disentangle feedback loops that may exist between SES and employee well-being. Nonetheless, there was some evidence for reciprocal effects that would be suggested by COR theory, as several studies in our review provided evidence that employee health and well-being *influence* SES (e.g., Elstad, 2004; Fletcher, 2012). For example, using five years of data from the German Socio-Economic Panel Study, Kröger (2016, $N = 23,282$) found that health selection (i.e., the selection of those with poor [good] health into lower [higher] status jobs) contributed to health-related inequalities between low-status (e.g., unskilled, blue-collar) and high-status (e.g., white-collar supervisors) workers. Women in the private sector with very good health were 2 percentage points more likely to secure a high-status job in the following year. Additionally, employees with good health were more likely to stay in higher-status jobs, while those with poor health were more likely to remain in lower-status positions.

There is also evidence that employee health partly explains SES gradients in workforce exits. Rohrbacher and Hasselhorn (2022, $N = 2,348$ German participants) linked a national cohort study data with employment register data for both baseline and a six-year follow-up to find that poor physical health accounted for 60% of SES inequalities in early exits into long-term

unemployment. Similarly, using baseline surveys, clinical exams, and register-based data over nine years, Polvinen et al. (2013, $N = 3,674$ Finnish participants) found that manual workers were 2.5 times more likely to face disability retirement compared to upper-grade non-manual workers, with ill-health and working conditions driving these SES differences. Although these studies did not track SES changes over time, they suggest that early workforce exit, ill-health retirement, and long-term unemployment lower SES due to lost income and earning opportunities. Ultimately, while they provide broad national insights into health inequalities, they lack detailed analysis of SES changes over time.

Finally, despite being central to COR theory, loss/gain spirals and cycles have received little attention in management literature (e.g., Halbesleben & Wheeler, 2015). That said, evidence shows these cycles are experienced by low vs. high SES employees differently. For example, in a two-wave longitudinal sample of 1,284 young Dutch workers, Akkermans et al. (2013) found support for JD-R's motivational and health impairment processes. Results indicated autonomy, social support, work pressure, emotional workload, and physical workload were related to future motivation and well-being, and that dedication and emotional exhaustion were related to future health and performance. The health impairment processes were more prominent among more educated employees, while motivational processes were crucial for less educated ones. For less educated employees, there was a reciprocal relationship between dedication and performance and between exhaustion and performance, reflecting a gain cycle for dedication and a loss cycle for exhaustion. This suggests that high performance may help less educated employees offset unfavorable work conditions.

In terms of spirals—which are amplifying loops where reciprocal relationships build over time (Lindsley, Brass, & Thomas, 1995)—Christie and Barling (2009) provided evidence that

the dynamic psychosocial work environment plays a role in indirectly relating SES to employees' physical health. Their longitudinal study with three waves of data from 3,419 Canadian employees found that lower SES employees faced more work stressors and less personal control. Consistent with resource spirals, those who initially reported more (vs. fewer) work stressors perceived *increasingly* less personal control over time, and individuals who reported lower (vs. higher) personal control at baseline reported *increasingly* more work stressors over time. These trajectories correlated with health problems, where declines in control and increases in stressors accelerated health issues. Although these longitudinal studies do not allow for causal conclusions, their findings do support COR theory and the JD-R model.

Conclusions: There is *moderate* evidence that (a) employee well-being influences SES, (b) well-being issues partly explain SES gradients in workforce exits, and (c) gain/loss cycles and spirals differ across socioeconomic groups.

THE SOCIO-ENVIRONMENTAL CONTEXT: CARAVAN PASSAGEWAYS

Caravan passageways are ecological conditions that “support, foster, enrich, and protect the resources of individuals, sections or segments of workers, and organizations in total, or that detract, undermine, obstruct, or impoverish people’s or group’s resource reservoirs” (Hobfoll, 2011: 118). These conditions can be viewed as moderators of the relationship between SES and employee well-being and can explain why the direction or strength of this relationship may differ for some groups of people based on demographic (e.g., gender) or environmental characteristics (e.g., country). These conditions can help further explain why resource and demand caravans may differ for some groups of employees, as demographic and environmental characteristics can facilitate paths to resources or be blocked by additional demands. Thus, these conditions account for circumstances beyond an individual’s own effort or control that may impact their ability to gain resources and improve well-being. Below, we highlight key social and environmental

passageways that moderate the relationship between SES and employee well-being.

Social Context: Demographic Characteristics

While most studies reviewed included demographics as controls, many also considered demographic characteristics as moderators in the SES- well-being relationship or used certain demographic groups as their focal population. We review evidence on three key demographic categories, examining how these characteristics influence access to resources and the unique bundles of demands faced by different demographic groups.

Gender. Because women and men tend to occupy different social positions in the labor market, they tend to encounter different resource and demand caravans. Research has found that compared to lower SES women, lower SES men are more likely to work in jobs with biomechanical, physical, and chemical hazards (Murcia et al., 2013). However, women across SES levels are at higher risk for exposure to biological hazards, violence, bullying, and mistreatment, with lower SES women at the highest risk of these conditions, and women in general experiencing a higher prevalence of poor health than men (Murcia et al., 2013).

Interestingly, explanations for the relationship between SES and employee well-being differed by gender. For instance, a cross-sectional study (Arias-de la Torre, Artazcoz, Molina, Fernández-Villa, & Martín, 2016, $N = 7,396$) found that in the working population of Spain, the prevalence of poor mental health was higher in women than men, and that work-related variables explained the relationship between SES and well-being for men but not women. Other studies found that household work, family responsibilities, and childcare negatively impacted women's well-being ($R^2 = .22$; Rivera, Torres, & Carré, 1997), and women tended to be more negatively impacted by these factors than men (e.g., Pförtner & Schmidt-Catran, 2017). That being said, research also found that women bear the brunt of household and childcare duties regardless of

SES level, but higher SES women tended to have more resources to manage job pressures and work-family role-blurring ($R^2 = .35$, Schieman & Glavin, 2011).

In general, the literature suggests lower SES women suffer from a “double jeopardy” of being exposed to the combined impact of an adverse environment at work *and* the burden of taking on disproportionate levels of care in the home environment. Women are also more likely to work part-time or in informal employment, which Lopez-Ruiz, Benavides, Vives, and Artazcoz (2017) found was linked to being in poverty, doing unpaid care work and being single, and, ultimately, poor physical and mental health, though these effects were trivial.

Conclusions: There is *strong* evidence that gender moderates the relationship between SES and employee well-being. Women experience (a) increased demands and (b) fewer resources compared to men at similar SES levels, exacerbating well-being disparities.

Race, Ethnicity, and Immigration Status. Because our sample is global, and race, ethnicity, and migrant status have different meanings depending on the sociohistorical context of geographic locations, we were unable to determine which races, ethnicities, or groups of immigrants have better or worse well-being outcomes overall. However, as discussed below, the evidence generally suggests that non-majority racial or ethnic groups, immigrants, and migrant workers are generally disadvantaged regarding SES, work demands, resources, and well-being.

Research comparing Black and White U.S. workers suggests that, regardless of SES, Black workers have lower job control (Meyer, 2014), more adverse psychosocial work environments (McCluney et al., 2018), fewer opportunities to develop work skills (Montgomery & Grzywacz, 2022), less healthcare access (Keene & Prokos, 2007), and more physical demands (Anderson & Felson, 1988). Differential access to work resources and demands, as well as experiences of race-based discrimination, may help explain these SES gradients in well-being. For example, Montgomery and Grzywacz (2022, $N=2,177$ participants) found that job

characteristics provided a well-being benefit for White, but not Black, workers, indicating Black workers were unable to reap the same well-being advantages from higher education.

In terms of immigration status, research suggests that, regardless of country, native employees tend to have higher SES and better health (e.g., Ertel et al., 2011). For example, Dunlavy and Rostila (2013) found that compared to non-native Eastern European, Latin American, and other Non-Western workers, native Swedish employees were more likely to have higher SES, higher-level non-manual occupations, less physically demanding work, and lower mental distress. Exposure to adverse working conditions only minimally influenced the risk of poor well-being in this study, meaning non-native workers may be experiencing other well-being-degrading factors. In the U.S. (Weitzman & Berry, 1992) and Spain ($ORs = 2.02$ for mental health and 2.64 for self-perceived health; Cayuela, Malmusi, López-Jacob, Gotsens, & Ronda, 2015), women immigrant workers were found to have lower SES, poorer health, and be less likely to use basic health services, contributing to worsened self-perceived health. Finally, studies on migrant workers who move for work without intending to stay permanently (e.g., Li, Zhai, Zhang, Yang, & Wang, 2021) showed that lower versus higher SES migrants were more likely to lack health insurance, face catastrophic health expenditures (Liu, Zhang, Zhao, & Li, 2019), experience discrimination, and suffer poor health ($OR = 2.97$; Novrinda & Han, 2022).

Importantly, research designs and data quality issues again place significant limits on the inferences that can be drawn. For example, a study on ethnoracial differences in employee health highlighted how data limitations restricted differentiation within broad ethnoracial categories like “other race” (Keene & Prokos, 2007). Further, almost all studies reviewed were cross-sectional. Critically, cross-sectional studies can reveal disparities between groups (i.e., different distributions), but do not distinguish the mechanisms that may drive those group differences (i.e.,

demographic category versus compounded inequality). Thus, future researchers should address these issues by adopting sophisticated research designs that allow for stronger causal inferences. That said, future research must contend with the potential difficulty of tracking immigrants and migrant workers over time, given they are mobile and may be missing health data.

Conclusions: There is *strong* evidence that race, ethnicity, and immigration status moderate the relationship between SES and employee well-being. Racial/ethnic minorities, immigrants, and migrant workers experience (a) increased demands and (b) fewer resources compared to majority workers at similar SES levels, exacerbating well-being disparities.

Age. In general, evidence suggests that workers on the younger *and* older end of the spectrum have unique vulnerabilities. For example, studies found that younger workers are more vulnerable to having lower SES, lower-status jobs, poor mental health (e.g., Tokuda et al., 2009), and precarious employment (Choi, 2017). Compared to younger workers, older workers were more sensitive to the socioeconomic gradients in illness- and disability-related retirement. Studies found that ill-health, low work ability, and physical working conditions contributed to socioeconomic differences in disability retirement (Rohrbacher & Hasselhorn, 2022). Moreover, Polvinen et al. (2013) found the association between SES and disability retirement was stronger for younger (30–49 years) vs. older (50–62 years) disability retirees.

Again, the research designs bring limitations that we urge future researchers to address, as most studies were cross-sectional, necessitating research examining the SES-employee well-being relationship over time. This is especially important as physical and psychological health risks increase with age, making it difficult to isolate the role of SES and employee experiences. Further, one paper (Monden, 2005) explored lifetime exposure to working conditions and found that the sum of exposure to working conditions explained SES gradients in employee health while current working conditions did not. Because older workers have more lifetime exposure to

working conditions, future research should consider long-term work history and health history.

Conclusions: There is *moderate* evidence that age moderates the relationship between SES and employee well-being. Younger and older workers experience (a) increased demands and (b) fewer resources compared to middle-aged workers at similar SES levels, exacerbating well-being disparities.

Environmental Factors

We identified several environmental factors that are likely to moderate the relationship between SES and employee well-being by easing or preventing demands and access to resources. These include global events (e.g., the COVID-19 pandemic), country-level effects (e.g., differences in policies and culture), and organizational characteristics (e.g., variations in culture and policies). Below, we consider these environmental factors and discuss how they might impact the relationship between SES, demands and resources, and employee well-being.

Global Events. Recent research has examined the extent to which global events like the COVID-19 pandemic contribute to pre-existing health inequities for employees across SES strata. Godefroy and Lewis (2022, $N=4,250$ Canadian participants) found that lower SES employees disproportionately bore the risks of poor preparedness in the workplace, resulting in higher infection rates, and these differences in infection rates were not related to nonwork activities, systematic differences in contact with infected during work, rank, hospital environment, or testing policies ($R^2 = .43$). Structural differences were also noted at a national level. Settels (2023) corroborated findings that lower SES occupations were less likely to work remotely, even part-time. However, they noted that these trends could also be partially explained by the national response to COVID-19. Across 8,121 participants in 28 countries, Settels (2023) found that societal digitalization and greater stringency of the governmental response to the pandemic attenuated the effects of education and income on the ability to work from home, respectively, while excess mortality rates widened educational discrepancies in the ability to

work from home and self-perceived health ($R^2 = .25$).

Though these studies were cross-sectional, scholars have utilized longitudinal designs to assess structural differences (e.g., work location) in the context of COVID-19. For example, using four waves of data from December 2019 to July 2021 at 6-month intervals, Kaltainen and Hakanen (2022, $N=532$ Finnish participants) found that individuals with higher (vs lower) education experienced more burnout and boredom when working from home. The authors suggest these differences may be due to telework being associated primarily with working condition improvements for lower SES workers, such as new work practices, increased autonomy, and learning new skills. Similarly, Wielgoszewska, Booth, Green, Hamilton, and Wels (2022) conducted a 3-wave study in the U.K. on differences in well-being outcomes attributed to working from home between essential and non-essential workers. They found that essential workers forced to work from home experienced the worst mental health decline, perhaps due to the frustration of dealing with frequent changes in work-from-home policies (e.g., teachers, administrative workers). The authors note that the relationship between mental health and working from home differed over the course of the pandemic, suggesting that longitudinal designs are imperative to understanding evolving socio-environmental situations.

Together, these studies highlight the importance of addressing SES inequalities in the context of global events. In addition, these studies suggest that organizational and national policies should be closely examined in situ, as events unfold, to determine their potential to increase health disparities between workers of lower and higher SES.

Conclusions: There is *moderate* evidence that global events moderate the relationship between SES and employee well-being. Global events (a) amplify demands on lower SES employees and (b) restrict their access to resources, exacerbating well-being disparities.

Country-level Effects. Our review identified multiple country-level factors moderating

the SES-health relationship, including cultural differences and national policies. Regarding the former, Yoo, Lee, and Kang (2015, $N=91,334$ participants) found that the close ties between education and social status in South Korea may make harassment seem more egregious and distressing to women and higher educated workers, resulting in 2-4 times worsened health outcomes compared to 35 EU countries. Surprisingly, using data from 27 countries, Kwon (2020, $N=30,131$) found countries with higher pay gaps and gender discrimination (e.g., Korea, Estonia, Portugal) also had better well-being and less presenteeism and absenteeism, possibly because distinct gender roles alleviated the dual burden of work and home responsibilities.¹⁰

In terms of policies, Bartoll et al. (2014, $N=16,141$ participants from 27 EU countries) found that while part-time work often involved adverse working conditions, non-permanent contracts, and little chance of promotion, countries with welfare policies for equal treatment between full- and part-time workers saw fewer psychosocial problems among part-time workers. Likewise, van der Wel et al. (2015, $N=22,508$) found that less educated workers and those facing physical and psychosocial demands had better mental well-being in countries with more generous sickness benefits (e.g., Norway, the Netherlands, Sweden, Germany). National retirement policies are also relevant, as de Breij et al. (2019, $N=11,727$) found that less educated workers in the Netherlands, Germany, Denmark, and England had higher risks of poor health, functional limitations, and depression. In the Netherlands, generous early retirement schemes meant poor health was linked to disability exit but not early retirement; in contrast, English workers were more likely to retire early due to ineligibility for social programs.

In summary, there is evidence that country-level characteristics have an impact on the

¹⁰ We note that while gender discrimination may positively impact well-being for *workers*, it does not increase well-being for women; as such we are not recommending gender separation of work and home roles.

relationship between SES and employee health outcomes due to variations in culture (e.g., industrialization and increased social value of manual labor in China; Qi et al., 2020) and policies (e.g., German labor laws that protect health/well-being; Baum, Spinath, & Hahn, 2021). However, all the cross-country comparison studies we reviewed utilized cross-sectional designs. As such, caution should be used when interpreting these findings.

Conclusions: There is *moderate* evidence that national culture moderates the relationship between SES and employee well-being. National culture shapes the (a) intensity of demands and (b) availability of resources, leading to variations in employee well-being outcomes across different cultural and policy contexts.

Organization-level Characteristics. Organization-level characteristics (e.g., culture, climate, policies) can affect the relationship between SES and health. For example, Qi et al. (2020) found that better healthcare and safer work environments in public vs. private companies in China reduced health inequalities due to occupational status. In a cross-sectional study of 366 workers in 49 early care and education (ECE) centers, Otten et al. (2019) found that this sector's work was emotionally demanding, underpaid, and often disrespected, fostering a culture that valued passion over income, recognition, and status. As a result, employees reported poor mental well-being and high rates of food insecurity, which authors suggested could be mitigated by policies to raise wages or provide meals. However, van der Put, Mandemakers, de Wit, and van der Lippe (2020) compared health promotion offerings across SES in 9 countries ($N = 10,063$) and found that higher educated employees took advantage of sports facilities and healthy menus, whereas lower educated employees relied more on health checks.

All told, the findings on the availability of healthcare, benefits, health promotion programs, and compensation suggest that organizational culture and policy play a crucial role in determining how SES and health relate. Moreover, these findings underscore the impact of aligning organization-level interventions with employee needs and reducing the stigma around

lower SES that may prevent organizations from engaging in dialogue to identify those needs.

Conclusions: There is *moderate* evidence that organizational culture moderates the relationship between SES and employee well-being. Organizational culture influences how (a) demands are managed and (b) resources are distributed, potentially mitigating or exacerbating well-being disparities among employees.

DISCUSSION

Given the well-documented link between SES and well-being (e.g., Matthews & Gallo, 2011), we sought to delineate the ways these factors relate to each other within the context of work. Indeed, our review highlights how workplace experiences—namely, the resources work can provide and the demands employees face—can drastically affect employee well-being across SES levels. In this way, our review aligns with Côté’s (2024) call to use theory from the organizational sciences to understand how work may perpetuate inequities. Our integration of the JD-R model (Bakker & Demerouti, 2007, 2017) and COR theory (Hobfoll, 1989) helps explicate the dynamic mechanisms connecting SES and employee well-being. And beyond theoretical contributions, this offers practical intervention points for organizations *if* scholars adopt our model into their research on SES at work. Further, our consideration of the socio-environmental context helps explain how demographic characteristics and environmental factors may facilitate or hinder access to different groups of resources and demands to impact employee well-being.

General Conclusions

Table 2 summarizes the general conclusions and main findings from our review. The most robust and consistent conclusions concern the impact of gender and precarious work demands. Women experience higher demands and lower well-being compared to men, with SES influencing the availability of resources to manage these demands. Additionally, lower SES is strongly linked to precarious work, which detrimentally affects employee well-being. Per our review of this literature, these findings hold across various research designs and over time.

There are also some moderately strong conclusions that can be drawn from our review, though they come with some methodological limitations. For instance, research has consistently linked SES to physical work demands that harm employee well-being, but much of the evidence from this research is based on studies that utilized cross-sectional research designs. Similarly, job control appears to partially explain socioeconomic inequalities in well-being. However, while lower SES employees generally have less job control, more research is needed to determine whether job control can buffer the negative effects of job demands across SES levels. Additional findings indicate that race, ethnicity, immigration status, and age also influence the SES-well-being relationship, with exposure to demands and resources accumulating over time. The impact of context is noted, with global events and structural inequities placing greater demands on lower SES workers and limiting their access to resources, and with variations in national culture and organizational factors impacting the SES-well-being relationship. Organizations play an essential role in providing access to resources and limiting the demands that contribute to health inequalities across employees of different SES levels.

While some findings are consistent, there is a lack of studies in certain areas. For example, there was moderate evidence for demand caravans—where lower SES employees face groupings of demands at work, simultaneously experiencing various combinations of physical hazards, psychosocial stressors, and precarious work. There was a bit less evidence for resource caravans. The evidence suggests that resources that are mostly accessible to higher SES employees (e.g., decision latitude, flexibility) travel together in groupings, but research also suggests that lower SES employees often lack resource caravans entirely. Ultimately, there is a need for more work that consistently measures combinations of stressors and resources in tandem. Additionally, there is moderate evidence of reciprocal effects, where employee health

influences SES and different socioeconomic groups experience differing cycles of gain and loss. The weakest findings relate to the impact of psychosocial demands, social support, and recognition on the SES-well-being gradient. The evidence in these areas is mixed, and further research is necessary to clarify these relationships.

Taken together, the strongest, most consistent conclusions in this literature are around (a) the links between low SES and job demands that are detrimental to well-being and (b) the demographics and contexts that exacerbate the negative impact of SES on employee well-being. Importantly, the literature leaves many unanswered questions, particularly due to methodological constraints that limit the conclusions that can be drawn from this research. These unanswered questions and limitations provide ample opportunity for future research to advance the study of SES and employee well-being. To assist scholarship in moving forward, we identify three themes of unanswered questions and provide ideas for future research: (1) methodological advancements; (2) intersectional perspectives; (3) promoting employee flourishing. We summarize these in Table 3 and describe them in more detail below.

Methodological Advancements

By and large, a majority of the studies in our review utilized cross-sectional methods (i.e., 104; 69% of our sample). This is not entirely surprising as scholars, both organizational or otherwise, are often not exacting in how they treat change over time (George & Jones, 2000), and complex methods require significant resources (e.g., time, energy, money). Further, it is important to acknowledge that this multidisciplinary literature includes many studies in the public, environmental, and occupational health area, fields that often draw data from national surveys. Therefore, while the predominance of cross-sectional surveys limits some conclusions that can be drawn, the large nationally-representative sample sizes from over 60 countries do

afford strengths. Still, as discussed here, there is a need to employ diverse and rigorous methods.

For example, methodological advancements are needed to address construct and measurement issues, as our review indicated unexpected variation in the operationalization of SES. Although all studies in the sample considered SES as nothing other than income, education, and/or occupation, the use of a single indicator may mean studies are not fully capturing SES, and the lack of consistency in the use of the indicators across studies may limit our ability to make comparisons and determine strong conclusions. Future research is needed to disentangle the interrelationships among the three indicators and to develop more valid measures of SES. Experiments may be useful in determining the importance of each SES indicator in forming the construct of SES. For example, do others' perceptions of SES rely more on education, income, or occupation? Does having high education, but low income and occupational category result in a different perception of SES than with low education, but high income and occupation category?

Our review highlights unresolved questions about causality in the SES-employee well-being relationship, as no experiments or quasi-experiments met our inclusion criteria. This is unsurprising, given the practical and ethical challenges of studying vulnerable populations (e.g., lower SES workers) and manipulating variables like income, education, or occupation. However, quasi-experiments, or "natural" experiments, offer promise for strengthening causal inference when random assignment and manipulation are impractical or unethical (Grant & Wall, 2009). For example, organizational changes (e.g., new well-being initiatives, job redesigns) or national events (e.g., healthcare policies, economic downturn) present future research opportunities.

Moreover, there is a need for methodological advancements that align with the relevant theoretical frameworks. Our review highlights how core job demands and resources can play a key role in the relation between SES and employee well-being, with these demands and

resources generally starting to “group” together across SES levels. However, the literature faces significant methodological limitations, with a heavy reliance on cross-sectional designs, which cannot capture the dynamic relationships central to theories like JD-R and COR. Thus, while the JD-R and COR-based framing we used was critical from an organizing framework perspective, the studies we reviewed created a methodological “mismatch” between these theories and the empirical evidence available. Both JD-R and COR are inherently dynamic theories—they describe changes and/or differential exposure to job demands and resources (e.g., Rodell & Judge, 2009; Rosen et al., 2020), which in turn relate to well-being and other important outcomes for employees. Unfortunately, most studies in our review were unable to address these dynamic relationships due to their reliance on static research designs. Therefore, conducting robust theoretical tests of SES and employee well-being is necessary to move the literature forward.

This is where longitudinal methods must be employed to understand relations between resource and demand caravans, as well as their effects on both SES and well-being over time. The reason for this is two-fold. First, from a theoretical perspective, the idea of gain/loss spirals are often evoked in COR theory (Hobfoll, 2011; Sonnentag & Meier, 2024) and require methods that allow for the proper modeling of constructs over time—not just static snapshots in cross-sectional surveys. For example, longitudinal designs could allow for combining organizational records (e.g., performance evaluations, quit data) with both self-report data and biomarker data (e.g., actigraphs/Fitbits, wearable sensors, blood pressure) could help explicate how well-being and health trend with SES and work over time (Ganster & Rosen, 2013). Second, and related more specifically to the study of SES, longitudinal research is needed to capture the incidence and impact of social mobility—both in terms of how long mobility takes, and which groups (e.g., different demographic groups, occupational groups or groups in specific organizations) are best

able to increase in SES over time. We currently lack understanding of how much time must elapse before people experience not only important physical and psychological health outcomes, but also social mobility. For instance, how many months or years does it take after a job change that improves one's income or occupation before there is a shift in one's SES level? Or, which resource and demand caravans contribute to upward mobility, and which are likely to maintain or reduce SES? Future research could use long-term panel-based designs to track changes in job resources as employees move from one job or career-path to the next.

Further, given that demands and resources are likely to combine into caravans (Hobfoll, 2011), a person-centered approach may be necessary to study how SES-related demands and resources affect well-being. Person-centered approaches assume that, for a set of constructs, naturally occurring subpopulations exist, helping understand how variables combine within people (e.g., Gabriel, Campbell, Djurdjevic, Johnson, & Rosen, 2018). This often involves using analytic techniques such as latent profile analysis (LPA) to access profiles of a specific set of interrelated constructs, or fuzzy set qualitative comparative analysis (fsQCA), which considers which attributes out of a set of constructs are necessary to predict an outcome (e.g., physical health, burnout). Importantly, for the latter approach, research within management has begun to take a fsQCA or configurational approach to job demands and resources, looking at how specific configurations of demands and resources produce work exhaustion (e.g., Ong & Johnson, 2023).

Bringing such an idea into the study of SES and employee well-being would offer a fruitful avenue to map out distinct sets of caravans that can potentially exhibit equifinality in helping predict employee well-being for different SES groups—that is, the configurations that help promote well-being for higher SES employees may not be the same for those of lower SES, and within each level of SES, there may be multiple configurations that are equally beneficial for

employee outcomes. For a profile-based approach, person-centered analyses would allow researchers to model profiles of distinct resources and demands, using income, education, and occupation as SES-related antecedents to predict profile-membership. In turn, profiles could be linked to psychological and physical well-being markers; this approach could be both short- and long-term in perspective, considering daily, weekly, and/or monthly fluctuations in profiles.

Intersectional Perspectives

Our review revealed moderate-to-strong evidence that demographic characteristics alter the SES-employee well-being relationship by shaping the intensity of demands and the accessibility of resources, either amplifying or mitigating their effects. However, demographics may take on different meaning in different organizational and social contexts (Liu, Park, Hymer, & Thatcher, 2019). For example, although the evidence generally suggests that workers not in the country's racial or ethnic majority, immigrants, and migrant workers tend to be disadvantaged in terms of SES, work demands and resources, and employee well-being, we were limited in our ability to make comparisons across these demographics because our sample is global, and these demographics hold different meanings depending on the sociohistorical context of geographic locations. Further, studies did not account for the experiences of native or indigenous employee populations. Therefore, more work is needed to understand how demographic and organizational factors intersect to influence these relationships.

This highlights the need to take an intersectional lens (Crenshaw, 1989) which brings attention to how social characteristics that connote differing levels of privilege and oppression interact to shape resource and demand caravans that impact both SES and employee well-being. Organizational research on intersectionality primarily explores workers' experiences of marginalization and inequalities within one's job (Liu et al., 2019). In crafting our review, we

observed that the SES and diversity, equity, and inclusion literatures remain siloed, despite SES being a dimension of diversity in organizations, and despite a known influence of both gender (e.g., Yoo et al., 2015) and race (e.g., McCluney et al., 2018) on the processes we discussed. For example, given that Black employees tend to have poorer self-rated health (McCluney et al., 2018) and women in blue-collar positions tend to experience higher burnout (Soares et al., 2007), what does this mean for the study of Black women in the relation between SES and employee well-being? Logic would suggest that Black women experience the greatest well-being costs when they are employed in blue-collar positions; thus, would being employed in a white-collar job be enough to offset the costs they may experience? Future work should explore such questions as they pertain to the intersection of gender, race, and SES.

Further, our review revealed that disability or worker injury can contribute to workplace exit for lower SES employees. However, beyond disability and injury as important well-being *outcomes*, there are unanswered questions around the role of disability across the employee lifespan in the SES-well-being relationship. It is necessary to acknowledge the challenges that disabled people face in gaining sustainable employment (i.e., well-paid, decent work) and the diverse experiences that disabled employees have *at work*. For example, in addition to facing regular workplace demands, disabled employees often face underemployment, discrimination, and negative attitudes from coworkers (Kaye, Jans, & Jones, 2011) and are more likely to belong to an additional vulnerable demographic (e.g., Black individuals, women; Bureau of Labor Statistics, 2023). As disability can thus directly impact SES, intersect with socio-environmental and work characteristics during employment, and be an outcome of work (e.g., injury), reciprocal and spiral effects related to disability also warrant further investigation.

We also see an immediate need to expand the demographics we reviewed here to include

family structures. For example, prior research often focuses on “traditional” family structures (e.g., Kossek & Laustch, 2018). However, it is likely that same-sex couples face additional challenges and stigmas that could factor into the SES and well-being relationship (e.g., Sawyer, Thoroughgood, & Ladge, 2017). For example, women same-sex couples may be paid less than same-sex male or heterosexual couples; the stigma of being a same-sex couple would then layer on top of these gendered SES challenges. Beyond these structures, understanding how family challenges such as divorce or widowhood affect the SES and well-being relationship would be crucial. Research on divorce has just begun to enter the organizational sciences (e.g., Wanberg, Csillag, & Duffy, 2023). Although some research has found evidence that work-related health challenges associated with lower SES jobs contribute to divorce (e.g., Soares et al., 2007), more work is needed on how divorce and widowhood as a novel, disruptive, and critical shock event affects the SES gradient people belong to, along with the available resources.

Promoting Employee Flourishing

As a last point, our review focused on the outcome of employee well-being—which can contain positive and negative elements (e.g., Sonnentag et al., 2023). However, the SES literature tends to focus more on the negative and an *absence* of well-being rather than on flourishing. As a remedy to this focus on negativity, we see positive organizational scholarship (e.g., Cameron & Dutton, 2003) as well-suited to integrate with the study of SES and employee well-being, as this literature seeks to uncover what makes people and organizations flourish. While it is important to track and be aware of incidents of illness and injury among employees and to aim to remove existing health inequalities, it is equally important to consider what should be built in its place. Thus, future researchers should explore positive health indicators (e.g., resilience), or what helps people thrive *despite* harmful work or socioeconomic circumstances.

Our review of the evidence on resources (i.e., job control, social support, recognition) is an important first step, yet the evidence for these resources in explaining health inequalities was mostly weak. Therefore, we encourage future work to study how employees can identify and build on the existing strengths within themselves and their environments to promote well-being and positive change (e.g., Frankenhuis & Nettle, 2020). Further, although the evidence suggests that organizational-level characteristics serve as an important moderator, there are unanswered questions around the types of organizational cultures that can foster positive health outcomes among employees, especially more vulnerable employees. For example, can inclusive and supportive workplace cultures mitigate the negative impacts of SES on employee well-being? By balancing the focus on addressing deficits with efforts to cultivate the strengths that enable all employees to flourish, future research can provide a more holistic understanding of how organizations can actively promote well-being across diverse socioeconomic groups.

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Table 1
Summary of Sample Characteristics

Review Sample Characteristic	Number of Articles
Publication Year	
1984-1993	8
1994-2003	8
2004-2013	57
2014-2023	78
Domains of Study	
Public, Environmental & Occupational Health (public, environmental & occupational health, health policy & services, environmental sciences)	97
Social Sciences (sociology, management, industrial relations & labor, economics, women's studies, ethics, political science)	20
Health and Medicine (general and internal medicine, primary health care, health care sciences & services; specific areas of medicine [e.g., clinical neurology, endocrinology & metabolism, neurosciences, rehabilitation])	19
Psychology and Behavioral Sciences (applied psychology, clinical psychology, psychiatry)	8
Multidisciplinary Sciences	7
Research Design	
Cross-sectional	104
Longitudinal	31
Non-cross-sectional	16
Timespan of Study/Years of Data	
<1 year	58
1-2 years	41
3-10 years	26
>10 years	15
No information	11
Country(ies) Studied	
Europe	61
North America	35
Asia	33
Other (i.e., Australia and Brazil)	7
Studied Multiple Countries	15
Sample Size Range	
<1,000	21
1,001-5,000	63
5,001-10,000	27
10,001-15,000	16
>15,001	24
Sample Composition – Gender (% women in sample)	
0-29%	12
30-59%	97

60-89%	17
90-100%	13
No information	12
Levels of SES Studied	
All levels	132
High and low	16
Low and non-low	2
Low	1
SES Operationalization	
3 indicators (i.e., income, education, and occupation)	42
2 indicators (income & education [23], education and occupation [22], income and occupation [5])	50
1 indicator (income [4], education [26], occupation [29])	59
SES Measurement	
Income (n=74)	
Income levels/categories (annual income [personal income, household income, annual earnings]; monthly income; hourly wage)	70
Income dichotomized (working poverty vs. non-working poverty)	3
Measurement not specified	1
Education (n=112)	
Education levels/categories (2-7 levels)	80
Years of education	8
Education dichotomized (e.g., completed \geq 4 years of college)	17
Measurement not specified	7
Occupation (n=99)	
Standard classifications (International Standard Classification of Occupations [ISCO] 10 major groups: Managers; Professionals; Technicians & Associate Professionals; Clerks; Service & Sales Workers; Skilled Agricultural, Forestry, & Fishery Workers; Craft & Related Trades Workers; Plant & Machine Operators & Assemblers; Elementary Occupations; Armed Forces); National and country-specific classifications	39
Categories Based on Occupation Type, Hierarchy, and/or Skills (blue collar, white collar, managerial; manual vs. non-manual; managerial, professional, technical, skilled, unskilled; low, middle, high skill)	60
Employee Well-being Operationalization – Types of Well-being Studied (Articles may fit in more than one category)	
General Health and Quality of Life (e.g., self-reported general health, health status, health-related quality of life, subjective well-being)	90
Mental Health and Psychological Well-being (e.g., mental health, depression, psychological distress, anxiety, psychological well-being, burnout)	55
Chronic Conditions and Symptoms (e.g., chronic disease, cardiovascular problems, diabetes, respiratory symptoms, musculoskeletal problems and complaints, sleep problems)	18
Functional Limitations and Work Impact (e.g., absenteeism/sickness)	11

absence/presenteeism, work-related injuries, functional work limitations, disability retirement)	
Health-Related Behaviors (e.g., smoking, alcohol consumption, inactivity)	15
Healthcare Utilization and Access (e.g., medical visits, hospital stays, health insurance coverage/access, cost-related delay of care)	9
Employee Well-being Measurement (Articles may fit in more than one category)	
Composite scales or questionnaires (e.g., Short Form Health Survey [SF-12 or SF-36]; General Health Questionnaire [GHQ-12 or GHQ-28]; Perceived Stress Scale [PSS]; Composite International Diagnostic Interview [CIDI])	70
Single-item self-report of general health	67
Self-reported health symptoms and chronic disease diagnoses	46
Self-reported health behaviors (smoking behavior, alcohol consumption, physical activity)	18
Functional health indicators (e.g., number of work-related injuries, long sickness absence, Work Ability Index)	21
Medical examination	4
Healthcare utilization and access indicators (e.g., number of doctor's visits, hospital stays, healthcare expenditure)	8

Table 2
Main Conclusions and Strength of the Evidence

Job Demands	
Physical Demands	There is strong evidence that physical demands (a) are more common among lower SES employees (e.g., hazardous conditions, repetitious movement), (b) negatively impact employee well-being, and (c) help explain socioeconomic inequalities in well-being.
Psychosocial Demands	There is (a) weak evidence that higher SES employees are more likely to face psychosocial demands, (b) moderate evidence that psychosocial demands negatively impact employee well-being, and (c) weak evidence that they help explain socioeconomic inequalities in well-being.
Precarious Work	There is strong evidence that precarious work (a) disproportionately affects lower SES employees, (b) negatively impacts employee well-being, and (c) helps explain socioeconomic inequalities in well-being.
Job Resources	
Job Control	There is strong evidence that job control (a) is lower among lower SES employees, (b) positively impacts employee well-being, and (c) helps explain socioeconomic inequalities in well-being, with (d) weak/limited evidence that it buffers the negative effects of demands on well-being.
Social Support	There is weak evidence that social support (a) is stratified by SES, (b) helps explain socioeconomic inequalities in well-being, and (c) buffers the negative effects of demands on well-being, with (d) strong evidence that it positively impacts employee well-being.
Recognition	There is (a) moderate evidence that lower SES employees receive less recognition and weak evidence that recognition (b) positively impacts employee well-being, (c) helps explain socioeconomic inequalities in well-being, and (d) buffers the negative effects of demands.
Caravans	
Demand Caravans	There is (a) moderate evidence that lower SES employees often face demand caravans at work, experiencing a combination of physical hazards, psychosocial stressors, and precarious work, and (b) weak/limited evidence of demand caravans at higher SES levels.
Resource Caravans	There is (a) moderate evidence that resources primarily accessible to higher SES employees cluster in caravans and (b) moderate evidence that lower SES employees often lack such resource caravans entirely.
Reciprocal Relationships	There is moderate evidence that (a) employee well-being influences SES, (b) well-being issues partly explain SES gradients in workforce exits, and (c) gain/loss cycles and spirals differ across socioeconomic groups.
Social Context: Demographic Characteristics	
Gender	There is strong evidence that gender moderates the relationship between SES and employee well-being. Women experience (a) increased demands and (b) fewer resources compared to men at similar SES levels, exacerbating well-being disparities.
Race, Ethnicity,	There is strong evidence that race, ethnicity, and immigration status moderate the relationship between SES and employee well-being. Racial/ethnic minorities,

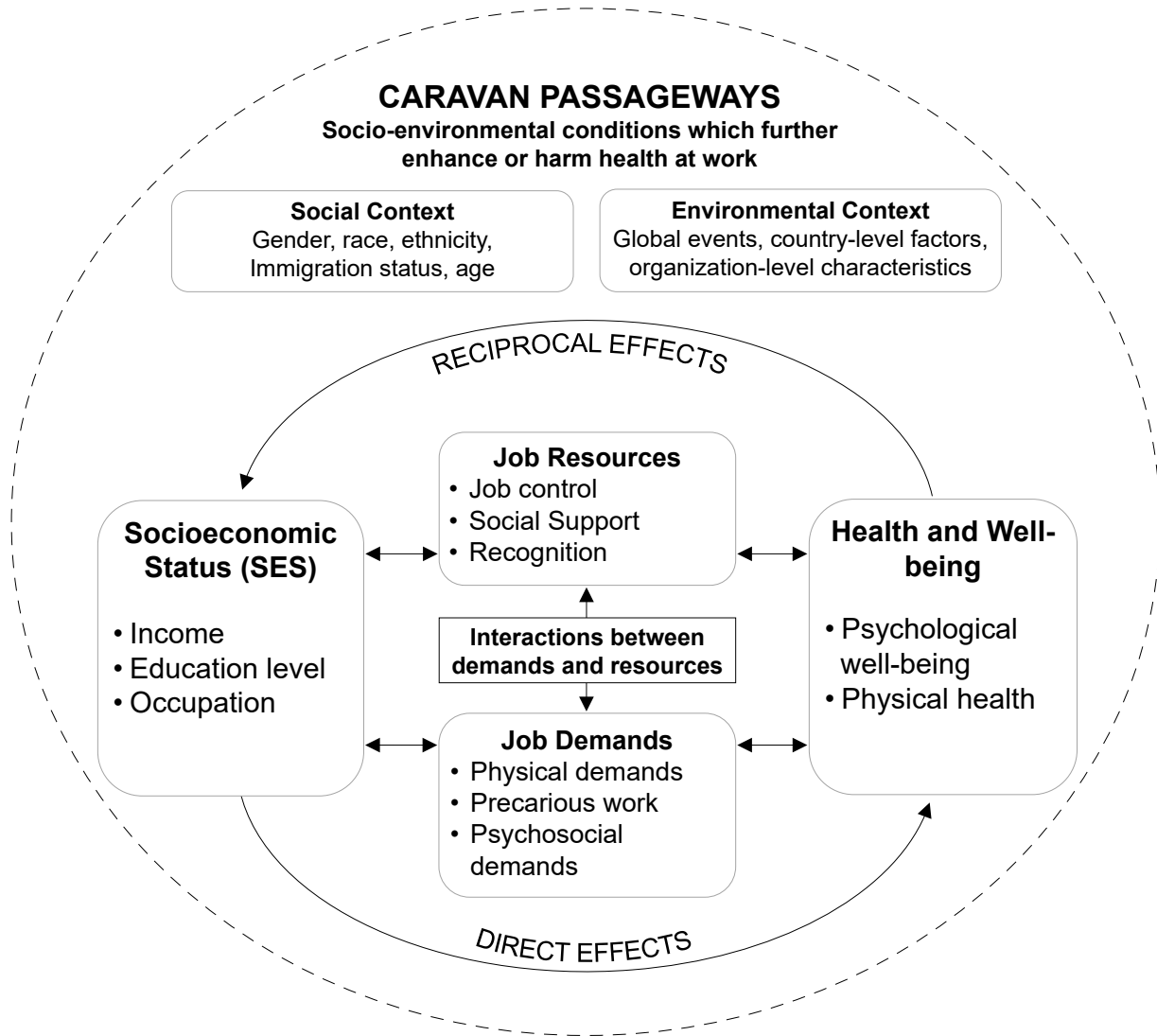
Immigration Status	immigrants, and migrant workers experience (a) increased demands and (b) fewer resources compared to majority workers at similar SES levels, exacerbating well-being disparities.
Age	There is <i>moderate</i> evidence that age moderates the relationship between SES and employee well-being. Younger and older workers experience (a) increased demands and (b) fewer resources compared to middle-aged workers at similar SES levels, exacerbating well-being disparities.
Environmental Factors	
Global Events	There is <i>moderate</i> evidence that global events moderate the relationship between SES and employee well-being. Global events (a) amplify demands on lower SES employees and (b) restrict their access to resources, exacerbating well-being disparities.
National Culture	There is <i>moderate</i> evidence that national culture moderates the relationship between SES and employee well-being. National culture shapes the (a) intensity of demands and (b) availability of resources, leading to variations in employee well-being outcomes across different cultural and policy contexts.
Organizational Culture	There is <i>moderate</i> evidence that organizational culture moderates the relationship between SES and employee well-being. Organizational culture influences how (a) demands are managed and (b) resources are distributed, potentially mitigating or exacerbating well-being disparities among employees.

Table 3
 Future Research Directions and Extensions for the Study of SES and Employee Well-Being

Unanswered Questions Themes	Future Research Directions
Theme 1: Methodological Advancements	<ul style="list-style-type: none"> • Thorough examination of SES construct definition, operationalization, and measurement issues. • Diverse methodological approaches (e.g., quasi-experiments, person-centered analyses, qualitative methods) are needed to better capture the complexities of the SES and well-being relationship. • Research designs must prioritize dynamic processes over time, such as mediation, moderation, reciprocal effects, and gain/loss cycles in the SES and well-being relationship. • Longitudinal research should study changes in SES over time, such as social mobility (e.g., which resource and demand caravans contribute to upward mobility, and which are likely to maintain or reduce SES?).
Theme 2: Intersectional Perspectives	<ul style="list-style-type: none"> • Examine how demographic and organizational factors intersect to explain the relationship between SES and employee well-being. • Treat disability as a demographic characteristic that may influence the SES-well-being relationship, rather than only as a well-being outcome. • Expand the commonly-studied demographics to include diverse family structures (e.g., LGBTQ families).
Theme 3: Promoting Employee Flourishing	<ul style="list-style-type: none"> • Explore more positive health indicators (e.g., resilience) and what helps people thrive despite harmful environmental and/or SES circumstances. • Study how employees can identify and build on the existing strengths within themselves and their environments to promote well-being and positive change. • Identify the types of organizational cultures that can foster positive health outcomes among employees, especially more vulnerable employees.

Figure 1

Organizing Framework Linking Socioeconomic Status (SES) and Employee Well-Being



APPENDIX A

Figure A1

Literature Review Process

