



Neighborhood cohesion and daily well-being: Results from a diary study[☆]



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ARTICLE INFO

Article history:

Available online 6 August 2013

Keywords:

United States
Positive affect
Negative affect
Physical symptoms
Daily stressors
Neighborhood cohesion
Multi-level models

ABSTRACT

Neighborhood cohesiveness has documented benefits for health. Furthermore, high perceived neighborhood cohesion offsets the adverse health effects of neighborhood socioeconomic adversity. One potential way neighborhood cohesion influences health is through daily stress processes. The current study uses participants ($n = 2022$, age 30–84 years) from The Midlife in the United States II and the National Study of Daily Experiences II, collected between 2004 and 2006, to examine this hypothesis using a within-person, daily diary design. We predicted that people who perceive high neighborhood cohesion are exposed to fewer daily stressors, such as interpersonal arguments, lower daily physical symptoms and negative affect, and higher daily positive affect. We also hypothesized that perceptions of neighborhood cohesion buffer decline in affective and physical well-being on days when daily stressors *do* occur. Results indicate that higher perceived neighborhood cohesion predicts fewer self-reported daily stressors, higher positive affect, lower negative affect, and fewer physical health symptoms. High perceived neighborhood cohesion also buffers the effects of daily stressors on negative affect, even after adjusting for other sources of social support. Results from the present study suggest interventions focusing on neighborhood cohesion may result in improved well-being and may minimize the adverse effect of daily stressors.

Published by Elsevier Ltd.

People are strongly influenced by their environment. Environments marked by chronic stress are related to poorer health outcomes (for review see [Diez Roux & Mair, 2010](#)). Conversely, positive aspects of the neighborhood provide health benefits. Social cohesion, considered a group characteristic, refers to resources (e.g., trust) among members of a group ([Kawachi, Subramanian, & Kim, 2008](#)). Neighborhood cohesion is related to better self-rated health and lower depressive symptoms (for a review see [Murayama, Fujiwara, & Kawachi, 2012](#)). In addition to a direct association, neighborhood cohesion also buffers the effects of neighborhood impoverishment on health ([van der Linden, Drukker, Gunther, Feron, & van Os, 2003](#)). The current study examined how an individual's perception of neighborhood cohesion relates to mental and physical health directly as well as indirectly by

buffering the effects of daily stressors. We hypothesized that perceived neighborhood cohesion would be related to fewer self-reported daily stressors and physical symptoms, and lower daily negative and higher daily positive affect. We further hypothesized that perceived neighborhood cohesion would buffer the effects of daily stressors on positive and negative affect and physical symptoms.

Neighborhood cohesion and health

Several large studies have found associations between neighborhood cohesion and both physical and mental health. Among US adults, individuals' perceptions of neighborhood cohesion and safety are positively associated with self-rated physical and mental health, even after adjusting for sociodemographics and perceived social support ([Bures, 2003](#)). In England, older adults living in a deprived neighborhood were individually asked to rate cohesion in their neighborhoods. Among these respondents, people were more likely to report poorer physical and emotional health if they perceive their neighborhoods as unsafe. However, safety concerns are significantly lower among individuals who report higher

[☆] This research was supported by National Institute on Aging Grants awarded to David M. Almeida (P01 AG020166 and R01AG019239), and is based upon work supported by the National Science Foundation Graduate Research Fellowship Program under Grant No. DGE-0808392 awarded to Jennifer W. Robinette.

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perceptions of neighborhood cohesion (Greene, Gilbertson, & Grimsley, 2002). In Wales, individuals' greater perceived neighborhood cohesion is directly related to better mental health and buffers the effect of deprivation on health (Fone et al., 2007). Similarly, neighborhood deprivation is associated with higher rates of mental health service use, but aggregate ratings of neighborhood cohesion as reported by the residents buffers these effects among the Dutch (van der Linden et al., 2003). Another study in the U.S. has found that high aggregate ratings of neighborhood trust are related to low mortality rates, but only after adjusting for neighborhood sociodemographics (Hutchinson et al., 2009).

Daily stressors and health

Although researchers have documented the benefits of neighborhood cohesion, the mechanism underlying this association is unclear. Neighborhood cohesion may lead to better health outcomes by both reducing exposure to daily stressors and by buffering the effects of stressors on health outcomes. Daily stressors people encounter in a routine week such as a work deadline are relatively minor, yet these stressors influence our affective well-being (Almeida, 2005). Positive affect is lower, and negative affect and self-reported physical symptoms are higher, on days when people experience a stressor. Associations between daily stressors and daily positive and negative affect persist even after adjusting for potential confounding characteristics (e.g., neuroticism; Piazza, Charles, Sliwinski, Mogel, & Almeida, 2012). Moreover, the effects of minor stressors accumulate over time and have the potential to create more serious affective disturbances (e.g., anxiety and depression; Charles, Piazza, Mogel, Sliwinski, & Almeida, 2013) and poorer physical health (Piazza et al., 2012).

Both individual and neighborhood characteristics are related to the frequency with which one experiences stressors (stressor exposure) as well as one's response to those stressors (stressor reactivity). For example, stressor exposure is higher among more educated individuals than those with a high school education, yet higher levels of education are related to less reactivity; on days when a stressor is experienced, negative affect and physical symptoms increase less among more highly educated individuals than their less educated peers (Grzywacz, Almeida, Neupert, & Ettner, 2004). Moreover, older adults report fewer daily stressors than younger adults (Neupert, Almeida, & Charles, 2007). Age shares a more complicated association with reactivity. Older adults are less affectively reactive to some stressors, such as potential arguments that are avoided (Charles, Piazza, Luong, & Almeida, 2009), but are equally reactive to others, such as unavoidable issues relevant to older age (e.g., death; Kunzmann & Gruhn, 2005). In a study assessing a broad range of daily stressors, affective reactivity increased with age (Sliwinski, Almeida, Smyth, & Stawski, 2009).

Neighborhood characteristics may also influence stressor exposure and reactivity. One study found that individuals reporting low neighborhood trust exhibited heightened affective reactivity to daily stressors (Caspi, Bolger, & Echenrode, 1987). This prior study assessed women from low income backgrounds living in Boston. The current study builds on these findings by using a large sample of men and women from across the United States, a more comprehensive assessment of positive and negative affect, and comparing across diverse neighborhoods and people who vary in education level.

Social support and stress

One concern with studies examining neighborhood cohesion and health is that findings reflect benefits of social support in

general, not social features specific to the neighborhood. A large literature attests to the protective effects of perceived social support from one's family and friends (for a review see Cohen & McKay, 1984). Psychologists posit that social networks function in many ways, including provision of emotional or instrumental support, companionship, and behavioral control. Although each of these functions has the potential to produce conflict (e.g., when the support provision is poorly timed), social networks often enhance our well-being through psychological, physiological, and behavioral pathways (Rook, August, & Sorkin, 2011).

Our current analyses are situated within the framework suggested by Kawachi et al. (2008), where neighborhood cohesion represents a unique aspect of social support garnered from neighborhoods. Others have similarly defined neighborhood cohesion as exchanges, perceived or received, that occur among members of a neighborhood community (Carpiano, 2006) and is considered a 'true' neighborhood social feature (Subramanian, Lochner, & Kawachi, 2003), distinct from other forms of support. The present study examines this neighborhood feature's association with daily stress processes after adjusting for individuals' perceived social support from friends, family, and spouses to identify the unique effects of neighborhood cohesion.

Neighborhood socioeconomic status and health

Neighborhood socioeconomic status (SES), defined as average income, unemployment, or some composite measure, has been implicated in several indices of health. Although studies yield mixed results, lower neighborhood SES is usually related to poorer health (Diez Roux & Mair, 2010) and lower neighborhood cohesion (Murayama et al., 2012). Furthermore, the health benefits of neighborhood cohesion are often enhanced in lower SES neighborhoods (van der Linden et al., 2003). The current study includes neighborhood SES, defined as the average income of a participant's census tract (CT), as a covariate so we may explore unique contributions of neighborhood cohesion. Additionally, we will explore whether the effects of neighborhood cohesion on daily stress processes persist across the full range of CT income.

The current study

The current study uses diary data to explore associations between perceived neighborhood cohesion and daily stress processes. The decision to examine these stressors was based on literature suggesting stressors of an interpersonal nature are reported significantly more often than other types of stressors (Almeida, 2005). Benefits of diary data include analyses of within-person fluctuations in daily well-being and relations between stressor exposure and reactivity in a natural setting. Additionally, diary designs minimize the effects of memory biases on key outcomes because participants report the events the day they occur (Bolger, Davis, & Rafaeli, 2003). In the current study, we hypothesize that perceived neighborhood cohesion is related to both reduced exposure and reactivity to daily stressors in people's personal lives. Consistent with previous research (Bures, 2003; Murayama et al., 2012), we expect that higher perceived neighborhood cohesion will predict fewer daily stressors, lower daily levels of negative affect and physical symptoms, and higher levels of positive affect. We also predict neighborhood cohesion will buffer the effects of daily stressors on these outcomes. In sum, we hypothesize that perceptions of the neighborhood social environment will carry over into people's personal lives, reducing both exposure and reactivity to daily stressors, such as those arising from interpersonal, work, and family-related issues. Data from the Midlife in the United States II Survey (MIDUS II) and the National Study of Daily Experiences II (NSDE II) are used to test these

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