

Full-time work means better health for mothers ^[1]

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EXCERPTS:

"This is not about advice for women," the University of Akron sociologist Adrienne M. Frech said of her latest research, which showed that women who work steadily full-time after the birth of their first child report better physical health than women who don't.

Dr. Frech and her co-author, Sarah Damaske, considered nearly 30 years of data provided by 2,540 mothers as participants in the National Longitudinal Study of Youth. They sorted the women into four mutually exclusive work pathways: "steadily working women, women who pulled back from full-time work following the first birth, women with repeated bouts of unemployment while attempting to work full-time - interrupted work careers - and stay-at-home mothers who did not work for pay and did not seek work."

They found that the steadily working mothers were relatively advantaged before giving birth to their first children, and that the advantages, at least in the area of the women's mental and physical health, did not just continue as they reached age 40, but increased (even when the researchers controlled for other variables). "It's not just that they were advantaged before," Dr. Frech said. "Even when you remove all the statistical noise, there are apparently added advantages from work."

Not surprisingly, that result (which was presented Monday at the American Sociological Association's annual conference and will be published in December's *Journal of Health and Social Behavior*) has the media calling Dr. Frech and her colleague in search of career advice for women. "I worry that it's being misinterpreted as researchers saying that stay-at-home-moms made bad choices," Dr. Frech said.

The authors don't want their work seen as a judgment on an individual woman's choice to work or stay home. For most women, Dr. Frech argued, the positive relationship between full-time work and health is less about "choices" than about "constrained choices."

Other recent research has shown that a majority of women (62 percent in 2009) prefer part-time work and that part-time employment can have benefits for mothers and families when compared to other alternatives. That apparent dichotomy did not surprise Dr. Frech.

"It makes sense that women will look for part-time work when they become parents," she said. "They're choosing within the constraint of us as a society expecting women to be the primary caregiver, and considering added challenges. But we asked 'what selects women onto these different paths?' Women aren't all equally able to find full-time work."

Looked at as a segment of society, rather than as a segment of the upper middle class, "the kind of woman who works part-time is a different kind of woman," Dr. Frech said. "She's more likely not to have worked a full-time job at all before she gave birth. She's more likely to have barriers of transportation or language."

Many such women are steered onto different "work pathways" by their histories and their resources. It's those differences, often determined by culture or policy, that Dr. Frech said she believes set women up for the later health and other advantages that correlate with the ability to stay consistently in the work force. Worse off with respect to their health were the women whose work pathway reflected the least autonomy, even within constrained choices: those women who experienced repeated bouts of unemployment while looking for full-time work. The researchers write:

The women who followed interrupted work pathways were the most disadvantaged group before becoming pregnant. Life course scholars have long argued that the disadvantages that individuals face early in life compound over time, often with deleterious effects on health and well-being.

But in order to consider what creates inequities of opportunity among all women, we need to keep research like Dr. Frech's from getting lost as we defend our own choices. Amid balanced coverage of this research comes the inevitable provocations. "Let the Mommy Wars Begin Anew," trumpets a headline on "Take Part." *ForbesWoman* asks (at the end of a more balanced piece) "What kind of mom are you? Better yet, is there a point in defining it?"

"What kind of mom are you?" is a question that only a woman with access to education, transportation and child care gets to answer for herself. For most women, this research emphasizes, the question is what kind of mom you had the opportunity to be, and how those opportunities helped shape not just your parenting, but your health. But neither is the question we really need to be asking. What can we change to allow all women a better chance at real choices, and how?

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Region: United States ^[2]

Tags: gender ^[3]

mother's labour force participation [4]
work/life balance [5]

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