HOW DO WOMEN'S WORK PATHWAYS FOLLOWING MOTHERHOOD INFLUENCE THEIR HEALTH AT MIDDLE AGE?

RESEARCH PROBLEM & DATA

The benefits of paid work are well documented: work is associated with greater financial stability, higher self-efficacy and self-worth, and better mental and physical health. However, women’s work pathways vary significantly upon the transition to motherhood. The authors evaluate whether the following pathways offer equal health benefits for mothers at middle age: “Steady” working moms averaging 35 or more hours of paid work per week while experiencing little unemployment, “Pulled back” mothers working fewer hours yet also rarely unemployed, “Stay-at-home” mothers who do not engage in paid work following parenthood, and mothers with “interrupted” work pathways who experience persistent unemployment.

Frech and Damaske evaluate the relationships between women’s work pathways and health following the transition to motherhood using over twenty years of data from the National Longitudinal Survey of Youth – 1979 (N = 2,540). The authors adjust for women’s unequal selection into pathways of work, as not all women are equally likely to stay-at-home, work full-time, work part-time, or experience repeated unemployment. They first adjust for mothers’ unequal selection into work pathways and then estimate the relationships between work pathways and mothers’ mental and physical health at age 40.

KEY FINDINGS

- Steady work offers the greatest mental and physical health benefits at middle age. Mothers with interrupted work careers report worse mental and physical health than both full-time and part-time working mothers.
- Not all mothers are equally likely to work full-time. Single mothers, teen mothers, and mothers with pre-pregnancy barriers to finding good work (such as language or transportation barriers) are less likely to work full-time.
- Mothers who follow interrupted pathways begin their work careers disadvantaged compared to their peers. Following an interrupted pathway contributes to further disadvantages and greater health disparities between the interrupted workers and their steady and pulled-back peers.

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JHSB Policy Brief

POLICY IMPLICATIONS

Steady full-time work has clear health benefits, yet not all women have equal access to long-term, full-time employment. Women from disadvantaged backgrounds are most likely to face repeated bouts of unemployment, which is detrimental to their health at middle-age. To promote women’s long-term health, policies should be directed at creating mother-friendly workplaces, particularly for working-class and working-poor mothers. Policies aimed at the retention of working mothers, such as subsidized childcare, paid maternity leave, and paid sick leave would promote both financial stability and physical and mental well-being. The resulting health benefits that would accumulate for mothers later in life would lead to lower health care costs, fewer barriers to mothers finding steady work, and greater financial stability among the working poor.

*Note: The “filled” bars above denote health scores significantly lower than those of full-time working moms (p<.05). Scores are calculated from Model 2 of Table 3.


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