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Combining a job and children: contrasting the health of married and divorced women in the Netherlands?

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Abstract

The research question of this paper is whether the combination of paid employment and taking care of children promotes or damages the health of married and divorced women in the Netherlands. To answer this question, data are used from 936 women aged 30–54 years who were either living with a partner ($N = 431$) or divorced and living alone ($N = 505$). The findings show that combining a job outside the home and childcare does not harm women's health, irrespective of the length of the working week and the age of the children. In fact, some work–childcare combinations are associated with better health. This is true for both married and divorced women and especially holds true in the case of a part-time job and having older children. Two effects are responsible for the findings: enjoying good health enables mothers to work outside the home (selection effect) and working outside the home promotes mothers' health (health effect). © 2002 Elsevier Science Ltd. All rights reserved.

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Introduction

In the Netherlands, female labour force participation has increased substantially in recent decades. Whereas no more than a quarter (26%) of all women aged 15–65 worked outside the home in 1960, this proportion had climbed to over a third (37%) in 1989 and to more than a half (51%) in 1999 (NCBS, 1960, 1989, 1999). The increase in female labour force participation may be attributed almost entirely to changes within the group of married women (Pott-Buter, Tijdens, Plantenga, & Janssens, 1998). Whereas in the past it was not customary—or in some cases even forbidden¹—for married women to have a paid job, a substantial

proportion of married women now remain active in the labour market. The percentage of married women with a paid job rose from 7² in 1960 to 31 in 1989 and to 45 in 1998 (NCBS, 1960, 1989, 1998a). Note, however, that most of these jobs are part-time. A majority of women decide to work fewer hours following the birth of their first child (Van der Lippe, 1993; Van der Vinne, 1998).

Successive time budget surveys have shown that this strong increase in paid employment among married women has not led to a substantial redivision of unpaid work between men and women (Van den Broek, Knulst, & Breedveld, 1999; Van der Lippe, 1997). Household and family responsibilities are still largely the domain of women. In 1995, women spent an average of 21.9 h a

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¹In the past, women in certain professions were dismissed on the grounds that they became married or pregnant. Dismissal of female civil servants upon marriage was abolished in 1957; for teachers, the law was abolished in 1958. It was not until 1976 that the Dutch parliament passed a law under which dismissal upon marriage or pregnancy was forbidden for all women (Van Eijl, 1997).

²This percentage is given in the population census. The actual percentage of married women in paid employment was higher. Until fairly recently, seasonal employment, domestic services and work by women in family businesses were not included in national censuses; jobs of less than 15 h a week were also excluded (Moreé, 1992). Moreover, a substantial proportion of married women in part-time, paid employment preferred to be registered as housewives (Pott-Buter et al., 1998).

week on housework and 3.7 h on caring for children and other household members (total 25.6 h); in 1975 this figure was 28.6 h (25.5 h housework and 3.1 h caring duties). Men, on the other hand, spent an average of 2.9 h more per week on household and family responsibilities in 1995 than in 1975: an increase from 8.2–11.1 h a week. Men, moreover, tend to spend these hours on the less tedious aspects of housework and childcare (Knijn, 1992; Van der Lippe, 1993, 1997). These days, for example, they are more inclined to wash the dishes, vacuum the house and put the children to bed, but tasks such as cleaning the kitchen floor, the windows or the lavatories, ironing and changing nappies are primarily left to their wives. So, for married women in general and mothers in particular working outside the home generally means having to take on an additional role: women still tend to assume prime responsibility for homemaking duties, alongside their paid jobs.

Divorce does not improve women's circumstances but leads to undertaking increased household and childcare responsibilities. Divorced women are almost always granted custody over their children. Co-parenthood is still very uncommon in the Netherlands (Kalmijn & De Graaf, 1999). Even today, the most common parental access arrangement is that the children stay with their fathers every other weekend and that public and school holidays are divided amongst both parents. This means that as a rule, responsibility for day-to-day childcare is assumed by divorced women, and that they must inevitably combine these duties with paid employment.

It has been said that combining work and children could damage women's health. Having to divide one's attention and time between 'babies and briefcases' could, for example, lead to a conflict of roles and put a strain on women, which in turn could result in fatigue, stress and, eventually, in illness (Van Poppel, 1996). Balancing work and children could, conversely, improve women's health since working outside the home could make a welcome change from the less pleasant activities and situations at home, and vice versa. In this article, we shall examine the effects of combining a job and childcare on the health of married and divorced women aged 30–54 years. The central research question is: Does combining work and children promote or damage the health of married and divorced women?

Past research

The study of the relationship between women's various roles and their state of health is not new (Dutch studies: Bekker, 1995; Guérin, De Heus, & Diekstra, 1997; Groenendijk, 1998; Van Reekum, 1988; Veerman & Verheijen, 1984. Non-Dutch studies: for a review, see Baruch, Biener, & Barnett, 1987; Menaghan & Parcel, 1990; Repetti, Matthews, & Waldron, 1989; Waldron,

Weiss, & Hughes, 1998).³ The main focus in earlier work was women's role as employees and mothers.⁴ Studies arrived at the almost unanimous conclusion that combining a job outside the home and childcare *seems* to promote women's health rather than to have a harmful effect on their health. However, in most cases this conclusion is drawn because there appears to be a positive correlation between health status and the two individual roles. In other words, both paid employment and having children are individually and positively related to women's state of health.⁵ As a result, working mothers tend to be in better health than housewives. Only a few Non-Dutch studies also found a relationship, either positive or negative, between health status and the combination of employment and motherhood (e.g., Nathanson, 1980; Waldron & Jacobs, 1989).

These findings are often explained by the *role accumulation* hypothesis, namely that each individual role encompasses specific elements that promote people's health. For example, a job outside the home offers social contacts, professional challenges, a sense of responsibility, self-respect and self-worth as well as an income of one's own and less financial dependence on one's (ex-) partner or the state. Childcare, on the other hand, offers intimacy and affection, responsibility for dependents and an opportunity to be of importance to others. People who combine both these roles are able to develop their talents to the full, which is an enriching experience and makes it less likely that they will feel stuck in a rut. Apparently, this welcome variety in one's life outweighs the time and energy one needs to invest in these roles.

Despite the overwhelming consensus between these studies, the findings should be interpreted with due care. Almost all the studies measured women's health at one

³ Health has several dimensions. The studies we refer to focus on the differences between women in mortality, physical health or psychological distress. Measurement of the latter two greatly differs. For instance, subjective health, chronic diseases, mobility problems, limitations to carry out activities of daily living and the use of medicine, are just a few examples in which physical health is measured.

⁴ Some studies also address the role of women as wives, in addition to examining their role as employees and mothers. Note, however, that these studies tend to be interested in the degree to which women's health is *protected* by marriage rather than in the effect on women's health of caring for others, in this case for the partner.

⁵ Agreement between the studies is strongest with respect to the positive relationship between women's health and paid employment. There is less agreement regarding the positive relationship between women's health and the presence of children: a number of studies did not find any significant health differences between childless women and mothers (for an overview, see Macintyre, 1992; Ross, Mirowsky, & Goldsteen, 1990).

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