

Poster: 0123

Work Organization and Employed Women's Post-Partum Health

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Broad Importance of the Research Problem: The occupational safety and health needs of employed women with young children are not known, yet 54% of mothers of infants were employed in 2003. The relationship between work organization, particularly job demands and limited control, and worker health is well-established, but recent changes in the organization of work coincide with the rising workforce participation of mothers of young children to create potential health risks, the effects of which are unknown.

Purpose or Objectives of the Study: The objectives of the study are to model the relationship between the organization of work (job stress, work schedule, job flexibility) and total workload (hours of employment and family labor), on the one hand, and women's post-partum health trajectories, as mediated by perceived work-family conflict.

Summary of Methods: The study uses existing data from a prospective longitudinal study of 1364 families (NICHD Study of Early Child Care), collected at 1- month post-partum and at 3-month intervals from 3- to 36-months post-partum. The study uses a structural equation modeling approach that utilizes latent variable growth curve modeling (representing continuous developmental change) and direct effects of covariates on specific time points (representing discontinuous change) to test the hypotheses. The study is supported with funding from the National Institute for Occupational Safety and Health.

Summary of Findings: Preliminary results indicate that work organization is significantly related to women's perceptions of work-family balance, particularly in the first 6-months post-partum. In addition, women who worked more hours reported greater difficulty balancing work and family responsibilities; women's work schedule was marginally related to perceptions of work-family balance. By the time of the NORA Symposium 2006, we will complete the models to test the relationship of work organization, work schedule and workload with health outcomes, as mediated by perceived work-family balance. Our health measures include depressive symptoms, self-report of health status, and health problems (illnesses and conditions).

Abstracts

How the Findings Advance the Field and can be used to Improve Workplace Safety and Health and Related Outcomes: Results from this study will provide important information on employed women's health during the critical three years following childbirth. The study findings will identify aspects of the organization of work that support or place at risk women's health. Knowledge of these factors will facilitate the design and testing of policies and interventions relevant to employers, policy makers and occupational health providers.

How the Findings Relate to a Particular Industry Sector (if applicable): Not applicable. The women in this sample are employed in a variety of industries, with significant concentrations in health care, education and social assistance.

NORA Symposium 2006

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April 18-20, 2006

L'Enfant Plaza Hotel

Washington, DC

NORA

