

Introduction to Work–Life Balance

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Scholars have demonstrated, based on several decades of research, that work–life balance is a critical component of psychologically healthy workplaces (Hammer & Zimmerman, 2011). In 1977, while Rosabeth Moss Kanter wrote about “the myth of separate worlds,” employees and organizations began to face the undeniable connections between work and nonwork (Kanter, 1977). Employees were choosing organizations that provided more family-supportive policies, and eventually, employers began to implement workplace supports that were attractive to prospective employees. In the 1980s, scholars started to examine workplace and family characteristics that contributed to work–family conflict (e.g., Greenhaus & Beutell, 1985), and companies, such as IBM, developed new initiatives to support employees, leading to an increased focus on healthy organizational practices. By 1990, the health of workers and the health of organizations were addressed in several seminal articles contributing to the emphasis of work–life balance in the development of healthy workplaces (e.g., Ilgen, 1990; Zedeck, 1992). The present chapter briefly reviews work–life balance constructs, theoretical frameworks, antecedents and outcomes of work–family conflict, work–family conflict and health, and work–family balance best practices. A discussion of avenues for future research is then provided.

Work–Life Constructs

The term *work–life balance* has been used with increasing frequency in the work–life literature over the past 10 years (Kossek, Baltes, & Matthews, 2011), with the extension of the term *work–family* to *work–life*, which has typically been seen by scholars as a

positive attempt to be more inclusive of our broader nonwork lives (Fisher, Bulger, & Smith, 2009). Further, the majority of empirical research to date has focused on work–family, as opposed to work–life, despite the trending in corporations to provide work–life programs that are available to all employees. As such, we use the terms work–life and work–family interchangeably in our discussion within the chapter while using the actual concept name examined when referring to prior empirical work.

Despite the popular press attraction to the term work–family *balance*, the work–family scholarly work has been dominated by the constructs of work–family *conflict* and work–family *positive spillover/enrichment/facilitation*. Work–family conflict has been defined as a type of interrole conflict in which the demands of work and family roles are mutually incompatible (Greenhaus & Beutell, 1985) and is the construct that has received the most research attention from work–life scholars. Greenhaus and Beutell (1985) proposed three sources of work–family conflict: time-based, strain-based, and behavior-based conflict. Time-based conflict arises when time pressures in one role restrict the amount of time that can be devoted to the other role. According to Greenhaus and Beutell, antecedents of time-based conflict include the number of hours worked per week, inflexibility with one's work schedule, and the number and age of dependent children at home. Strain-based conflict arises when strain in one role (e.g., family) affects successful performance of role responsibilities in another (e.g., work). Examples of strain-based conflict include role ambiguity, poor supervisory support, family disagreement about gender roles, and absence of familial or spousal support. Behavior-based conflict, the most infrequently studied form of conflict, arises when patterns of behavior in one role are incompatible with behaviors in another. Greenhaus and Beutell suggest that these pressures will be experienced as stressful only to the degree that the individual experiences negative consequences for not meeting role demands.

Additionally, the positive side of work–life integration leading to healthy workplaces includes positive spillover, enrichment, and facilitation. *Positive spillover* has been defined as the transfer of positively valenced affect, skills, behaviors, and values from the originating domain to the receiving domain, thus having beneficial effects on the receiving domain (Edwards & Rothbard, 2000; Hanson, Hammer, & Colton, 2006). *Enrichment* occurs when resources (e.g., skills, social capital, flexibility) or positive affect is generated in one role, such as the family domain, that then improves the quality of life in another role, such as work (Greenhaus & Powell, 2006). Finally, *facilitation* refers to the extent to which an individual's involvement in one particular life domain (e.g., family) provides gains (i.e., developmental, affective, capital, or efficiency) that contribute to enhanced functioning in another domain of life (e.g., work; Wayne, Grzywacz, Carlson, & Kacmar, 2007). Each of these constructs has been identified as bidirectional, in that the nonwork domain can influence the work domain and, conversely, the work domain can influence the nonwork domain.

More recently, scholars have introduced the concept of work–life *balance*. Greenhaus and Allen (2011) defined work–family balance as “an overall appraisal of the extent to which individuals' effectiveness and satisfaction in work and family roles are consistent with their life values at a given point in time” (p. 174). It should be noted that the use of the term *balance* has been critiqued by scholars

as a misrepresentation of the reality of working families who rarely achieve a *balance* between work and nonwork. Further, this definition arises from a person–environment fit perspective, in which individuals assess their effectiveness in both family and work roles against internal standards. Given the lack of a consistent operationalization of work–life balance and, hence, lack of consistent empirical research on the construct, the current chapter will focus on an overview and update of the work–life/work–family literature that is dominated at this time by work–family conflict. Before doing so, however, we provide a brief overview of work–family theoretical frameworks.

Overview of Work–Family Theoretical Frameworks

Role theory (Katz & Kahn, 1978), systems theory (Bronfenbrenner, 1977), border theory (Nippert-Eng, 1996), and boundary theory (Clark, 2000) will be briefly reviewed in the following sections, as all contribute to our understanding of the work–life interface. Although role theory and systems theory have been discussed readily in the work–life literature, border and boundary theories offer more updated innovative approaches to theoretical understanding of the work–life field.

Role Theory

According to the seminal work of Kahn, Wolfe, Quinn, Snoek, and Rosenthal (1964), roles that we occupy are the result of expectations of others about appropriate behavior in a particular position. Roles may contribute positively to one another through the spillover of positive affect, behaviors, and skills, such as work–family positive spillover (Hanson et al., 2006). Roles may also be incompatible, such that engaging in one role makes it more difficult to engage in the other, also known as work–family conflict (Katz & Kahn, 1978). Research has generally identified two directions of work–family conflict and positive spillover (i.e., work to family and family to work), each with different antecedents and outcomes (Frone, 2003; Frone, Russell, & Cooper, 1992). Work demands and resources are most often associated with work-to-family conflict and work-to-family positive spillover, respectively. Similarly, family demands and resources are most often associated with family-to-work conflict and family-to-work positive spillover, respectively.

Systems Theory

Systems theory (Bronfenbrenner, 1977; Bronfenbrenner, McClelland, Wethington, Moen, & Ceci, 1996) introduces the role of context to better understand the inter-relatedness between the work and nonwork spheres of life from the individual-to

societal-level institutions. A system can be defined as "Any two or more parts that are related, such that change in any one part changes all parts" (Hanson, 1995; p. 27). This is a holistic approach that considers all parts of a system as relevant, since all parts are interrelated. Research on crossover effects (Westman, 2001) takes a systems perspective by considering the influence of the family context (e.g., Hammer, Allen, & Grigsby, 1997; Westman, Etzion, & Danon, 2001; Westman, Vinokur, Hamilton, & Roziner, 2004) and the work context (e.g., Westman, Bakker, Roziner, & Sonnentag, 2011; Westman & Etzion, 2002) on the work-life interface.

Boundary Theory

Boundary theory was adapted for the work-family literature by Nippert-Eng (1996) in an effort to examine how individuals establish and maintain boundaries between multiple life roles (e.g., work, family, school, etc.). Individuals intentionally create boundaries, which may be cognitive, physical, and/or behavioral in nature, between different roles in an attempt to simplify and order their environment (Ashforth, Kreiner, & Fugate, 2000). These boundaries tend to be idiosyncratically constructed, in that they are impacted by a variety of both individual-level and organizational-level factors (Nippert-Eng, 1996). Furthermore, individuals vary in the process of navigating between boundaries (Kossek, Ruderman, Braddy, & Hannum, 2012). Nippert-Eng describes a continuum on which individuals may either choose to integrate or segment various life domains.

Work-Family Border Theory

Clark (2000) introduced work-family border theory to explain how individuals manage both work and family domains and the borders between each in order to attain balance. According to this theory, work-family balance is defined as "satisfaction and good functioning at work and home, with a minimum of role conflict" (p. 751). Clark draws on Nippert-Eng's (1996) conceptualization of "integration" and "segmentation" between work and family roles to examine how individuals choose to integrate or segment their roles. Borders between roles can be characterized by their permeability and flexibility, which describes the degree to which elements from other domains are allowed to enter and the extent to which a border may contract or expand, respectively. Recent research by Kossek and colleagues (2012) further integrates role and boundary theories and validated a measure that assesses boundary management profiles (i.e., the Work-Life Indicator). Results of their research demonstrated that low-control boundary management profiles were related to negative work and family outcomes compared to high-control profiles.

Antecedents and Outcomes of Work–Family Conflict

Work–family conflict leads to unhealthy workplaces, and therefore, scholars have spent quite a bit of time trying to understand the factors that contribute to such conflict with an eye toward the development of best practice interventions for reducing such conflict. Literature suggests that work interference with family may have different antecedents and outcomes than family interference with work, with work-related demands being most often associated with work-to-family conflict and family-related demands being most often associated with family-to-work conflict (e.g., Frone et al., 1992). Much of this literature has been reviewed elsewhere (e.g., Crain & Hammer, 2013; Eby, Casper, Lockwood, Bordeaux, & Brinley, 2005; Hammer & Zimmerman, 2011), and thus, the focus of the next section of the chapter will be on briefly summarizing existing findings and additional updates to the literature. By understanding, and then mitigating, the causes of work–family conflict, scholars can work toward improving the health of workplaces through interventions targeted at modifiable antecedents of work–family conflict.

Antecedents of work–family conflict

Individual differences A number of individual difference variables have been explored as having an influence on work–family conflict, with gender being at the forefront, especially in the earlier research on work and family (e.g., Pleck, 1977). For example, Byron (2005) reported that gender has a near-zero relationship to work-to-family conflict ($\rho = -0.03$) and is only weakly related to family-to-work conflict ($\rho = 0.06$), suggesting that men and women experience similar levels of interference in both domains. It should be noted, however, that the relationship between gender and work–family conflict may vary based on cultural norms and ideologies related to expectations of appropriate role behavior of men and women across cultures (Mortazavi, Pedhiwala, Shafiro, & Hammer, 2009) and may also vary with regard to when the study occurred, with earlier research being more likely to demonstrate stronger gender differences than more recent research. Additionally, personality characteristics such as mastery, hardiness, positive affectivity, and extraversion have been associated with lower levels of both work-to-family and family-to-work conflict (Bernas & Major, 2000; Grandey & Cropanzano, 1999; Grzywacz & Marks, 2000).

More recently, a study by Allen and Kiburz (2012) examined employees' trait mindfulness as a predictor of work–family balance. Mindfulness was significantly associated with higher levels of work–family balance. Sleep quality and vitality were found to be significant mediators of this process, such that higher levels of mindfulness were associated with improved sleep quality and higher levels of vitality, which were in turn associated with higher levels of balance.

Family-related antecedents Family characteristics such as age and number of children are related to work–family conflict (e.g., Hammer & Neal, 2009), and hours, type, and quality of care provided to aging relatives are also related to work–family conflict (e.g., Neal, Chapman, Ingersoll-Dayton, & Emlen, 1993; Neal & Hammer, 2007; Scharlach, 1994). More specifically, meta-analytic results based on 27 studies report a weighted average correlation between the number of children and work-to-family conflict to be 0.09 and with family-to-work conflict to be 0.16 (Byron, 2005). To our knowledge, there are no known meta-analyses of the relationship between elder-/parent-care characteristics and work–family outcomes. Socioeconomic status is also related to work–family conflict, with households reporting lower annual income and workers reporting higher levels of income inadequacy experiencing great work–family conflict (e.g., Neal & Hammer, 2007).

Work-related antecedents Work-related antecedents tend to be more strongly associated with work-to-family conflict as opposed to family-to-work conflict (Byron, 2005). Consistent with the job demands–control (JDC) theory (Karasek, 1979), high job demands (e.g., work hours) and low control over work hours contribute to work–family conflict. For example, the number of hours worked and unpredictable and/or inflexible work schedules are related to work–family conflict (e.g., Adkins, & Premeaux, 2012; Hammer, Neal, Newsom, Brockwood, & Colton, 2005; Matthews, Swody, & Barnes-Farrell, 2011). It should be noted, however, that although Adkins and Premeaux (2012) took a more nuanced approach to their research and found a linear relationship between work hours and work-to-family conflict, they found an inverted-U curvilinear relationship between work hours and family-to-work conflict such that at a certain point the positive relationship between work hours and family-to-work conflict decreased. They suggested that at some point, work hours push an employee to the point of enlisting the help of additional supports at which point the negative effects may decline. Additionally, Valcour (2007) found that the relationship between work hours and work–family balance in a sample of call center employees was moderated by the degree of reported control over work time. Based on Byron's (2005) meta-analysis, the work characteristic with the strongest relationship with work–family outcomes was job stress, with a mean correlation with work-to-family conflict of 0.48 and a mean correlation with family-to-work conflict of 0.29, suggesting that job stress interventions may be useful in not only reducing general stress but also in reducing more specific work–family conflict and stress.

Research also suggests that the contextual effects of a supportive organizational culture and supportive supervision are beneficial in reducing work–family conflict and improving the health of workplaces (e.g., Allen, 2001; Hammer, Kossek, Yragui, Bodner, & Hanson, 2009; Thompson, Beauvais, & Lyness, 1999). A supportive organizational work–family culture is defined as “the shared assumptions, beliefs, and values regarding the extent to which an organization supports and values the integration of employees’ work and family lives” (Thompson et al., 1999, p. 392) and

is a characteristic of a healthy workplace. Such informal workplace support is key to positive organizational functioning by impacting the health and well-being of workers and ultimately the health and well-being of the organization. For example, workplace culture, or the attitudes of supervisors and coworkers, may influence whether employees even feel comfortable enough to use work–family policies (Hammer, Kossek, Zimmerman, & Daniels, 2007). A recent meta-analysis by Kossek, Pichler, Bodner, and Hammer (2011) found that work–family-specific supervisor support most strongly relates to work-to-family conflict compared to general supervisor social support, with a weighted mean correlation of -0.22 . This finding was consistent with the findings of Hammer et al. (2009), which demonstrated the significant effects of family-supportive supervisor behaviors (FSSB) on work–family conflict and positive spillover over and above that of general supervisor support. FSSB also was shown to improve performance over time through its beneficial effects on increasing work–family enrichment (Ode-Dusseau, Britt, & Greene-Shortridge, 2012). Similar findings were reported by Greenhaus, Ziegert, and Allen (2012) who found that family-supportive supervision led to reduced work–family conflict and, in turn, to higher work–life balance.

Interestingly, when it comes to more formal workplace supports such as use of dependent care (e.g., childcare, parent-care subsidies, and use of flexible work schedules), the effects of utilization of these formal policies are not fully understood (Kelly et al., 2008) and may even lead to increased work–family conflict in some cases as a result of the support enabling people to engage even more in work and/or family roles (Hammer, Neal et al., 2005). This distinction between the formal/structural work–family environment and the informal/relational environment was addressed in a special issue of *Human Relations* in 2010 (Kossek, Lewis, & Hammer, 2010). Kossek et al. (2010) suggested that employers, scholars, and corporate policymakers should move work–family from the margins to the mainstream of organizational functioning. For example, they argued for examining work–life initiatives as broad organizational change initiatives that should be considered for all workers. Such initiatives should also be considered in terms of both formal and informal organizational changes. The results of a meta-analysis on the relationship between work–family policy availability, policy use, and work–family conflict demonstrated that both availability and use were related to work–family attitudes and that relationships were mediated by work–family conflict and family-supportive organizational policy perceptions (Butts, Casper, & Yang, 2013). Butts et al. further suggested that policy availability acted as a signal that the organization cares about its employees. Similar findings were reported by the Mesmer-Magnus and Viswesvaran (2006) meta-analysis, as well as by Valcour, Ollier-Malaterre, Matz-Costa, Pitt-Catsoupes, and Brown (2011).

One line of research on formal/structural work–life supports is that of telecommuting and virtual work. One such study of the effects of “virtual offices” (i.e., employees are granted the technology needed to do their work and are given the authority to work wherever it makes sense to accomplish work tasks; Hill, Ferris, & Martinson, 2003) found that qualitatively, IBM employees working from virtual

offices reported increased blurring between work and home boundaries, as well as an increased feeling of “always working.” However, a number of virtual office workers also reported that the increased mobility enabled them to better fulfill their household responsibilities and strengthen family relationships (Hill, Miller, Weiner, & Colihan, 1998). A follow-up study by Hill and colleagues (2003) found that virtual workers responded more negatively on measures of work–life balance than did both traditional office workers and home office workers, with much of this lack of balance being due to their difficulty in drawing the line between work and nonwork. These findings are consistent with research showing both increases and decreases in work–family conflict related to telecommuting (e.g., Golden, 2012; Golden, Veiga, & Simsek, 2006).

In addition to research regarding telework and work–life balance, researchers have also examined the effects of an open-rota scheduling system (i.e., a team-based scheduling approach associated with increased scheduling flexibility) intervention on nursing teams (Pryce, Albertsen, & Nielsen, 2006). Those employees in the intervention groups reported significantly higher levels of work–life balance post intervention when compared to the control group. Research also suggests that unpredictability in work routines promotes work–family conflict, given that work variability and working weekends or rotating shifts both relate to higher conflict (Fox & Dwyer, 1999; Shamir, 1983). From these findings, it appears that greater schedule flexibility is beneficial for work–life balance, via decreased work–family conflict, although the challenges associated with working in a “virtual office” may present demands that are detrimental to employee work–life balance.

What much of the research on telecommuting and work schedules demonstrates is that greater control over work in terms of time, place, and process contributes to increased individual autonomy and results in decreased work–family conflict, which in turn results in a number of beneficial work, family, and health outcomes (e.g., Golden, 2012; Kelly & Moen, 2007; Kelly, Moen, & Tranby, 2011).

Outcomes of work–family conflict

Work-related outcomes Of all work-related variables, job satisfaction is the most extensively examined outcome. In their meta-analysis, Kossek and Ozeki (1998) found a weighted mean correlation of -0.23 between work–family conflict and job satisfaction, similar to the -0.24 for work-to-family conflict reported by Allen, Herst, Bruck, and Sutton (2000). With regard to behavioral work outcomes, research has generally shown that both work-to-family conflict and family-to-work conflict are predictive of *family*-related absenteeism, tardiness, and interruptions at work (Goff, Mount, & Jamison, 1990; Hammer, Bauer, & Grandey, 2003). Likewise, family-to-work conflict is predictive of *work*-related absenteeism and tardiness and poor work-related role performance (Frone, Yardley, & Markel, 1997). Meta-analytic results from Allen et al. (2000) demonstrated small to moderate weighted mean correlations between work-to-family conflict and turnover intentions (0.29),

organizational commitment (-0.23), absenteeism (-0.02), and job performance (-0.12). Odle-Dusseau et al. (2012) found that work–family enrichment, but not work–family conflict, was related to performance of workers as reported by their supervisors.

Based on data analyzed from the National Institute for Occupational Safety and Health (NIOSH) Quality of Worklife Survey, Smith and DeJoy (2012) found that work–family interference and safety outcomes were related, suggesting that work–family conflict may be a risk factor for safety. Similarly, in a study of healthcare professionals, family-to-work conflict was related to safety compliance and safety participation, demonstrating that higher levels of family-to-work conflict are related to lower levels of safety (Cullen & Hammer, 2007). Cullen and Hammer suggested that this relationship is mediated by cognitive failure, such that family-to-work conflict leads to increased workplace cognitive failure and that the potential errors that may result from such workplace cognitive failure may lead to decreased safety on the job. More recently, Lapierre, Hammer, Truxillo, and Murphy (2012) found a positive relationship between family-to-work conflict and workplace cognitive failure; thus, together, these studies suggest that workplace cognitive failure may serve as a mediating mechanism to explain the positive relationship between family-to-work conflict and safety on the job; however, more research is needed on additional mechanisms.

Family-related outcomes Meta-analytic results from Allen et al. (2000) indicated that work-to-family conflict has a weighted mean correlation of -0.28 with life satisfaction, -0.23 with marital satisfaction, and -0.17 with family satisfaction. Given that work–family conflict is significantly related to work and family stress and that stress is significantly related to health, we review the limited research on work–family conflict and health outcomes in the following section. Thus, there are important organizational, as well as individual, outcomes associated with work–family conflict that make this both a legitimate business and societal concern (Kelly et al., 2008).

Work–family conflict and health

In addition to being a risk factor for workplace safety (e.g., Cullen & Hammer, 2007; Smith & DeJoy, 2012), work–family conflict is also a risk factor for both psychological and physical health (e.g., Allen & Armstrong, 2006; Greenhaus, Allen, & Spector, 2006; Hammer, Cullen, Neal, Sinclair, & Shafiro, 2005; Thomas & Ganster, 1995).

Psychological health Recent research has focused on sociodemographic and workplace factors that contribute to poor mental health of workers, demonstrating significant relationships with work hours and a number of other psychosocial workplace factors (LaMontagne, D'Souza, & Shann, 2012). Furthermore, job stress as a contributor to poor mental and physical health has been receiving more attention (LaMontagne, Keegel, Louie, & Ostry, 2010). Based on extensive reviews of the

job stress intervention literature, both individual and organizational interventions for reducing job stress prove promising (LaMontagne & Keegel, 2010) and should be considered when scholars and practitioners are considering work–life interventions more specifically.

Consistent with the arguments of Lamontagne et al. (2010), Frone (2000) found that employees who reported experiencing work-to-family conflict were 3.13 times more likely to have a mood disorder, 2.46 more likely to have an anxiety disorder, and 1.99 times more likely to experience a substance disorder than were individuals who were not experiencing this type of conflict. In addition, individuals experiencing family-to-work conflict were 9.49 times more likely to have an anxiety disorder, 11.30 times more likely to have substance dependence, and 29.66 times more likely to have a mood disorder than were individuals not experiencing this type of conflict. Furthermore, Hammer, Cullen et al. (2005) found that work–family conflict and work–family positive spillover together accounted for 8% and 7% of the variance in depressive symptoms for women and men, respectively, and even accounted for a small but significant amount of variance in spouses' depressive symptoms for wives (i.e., 5%).

Physical health The relationship between work–family conflict and physical health outcomes has typically been measured either objectively by actually assessing physical health conditions or subjectively by collecting self-reports. Arguing that work–family conflict is a risk factor for health and well-being, Kim et al. (2013) found significant relationships between work–family conflict and musculoskeletal pain in a group of hospital workers. In another correlational/observational study, researchers found a significant relationship between work–family-supportive supervisors/managers and improved sleep duration of workers (Berkman, Buxton, Ertel, & Okechukwu, 2010). Additional research has focused on the relationship between work–family conflict and sleep-related outcomes (e.g., Sekine, Chandola, Martikainen, Marmot, & Kagamimori, 2006) and the relationship between family-to-work positive spillover and sleep quality (Williams, Franche, Ibrahim, Mustard, & Layton, 2006), suggesting this is an important area for continued development given the increasing knowledge we have about sleep as a predictor of poor health (e.g., Buxton & Marcelli, 2010).

We conclude, based on the research on job stress and cardiovascular disease (CVD) (Belkic, Landsbergis, Schnall, & Baker, 2004; Landsbergis et al., 2003; Schnall, Landsbergis, & Baker, 1994), that work–family conflict and stress will likely have similar detrimental effects on health. There is limited research in this area, although the Work, Family, and Health Network is currently conducting a large randomized controlled study to examine the effects of workplace programs that reduce work–family conflict to ultimately impact the health of workers (<http://www.kpchr.org/workfamilyhealthnetwork/Public/default.aspx>).

In a seminal study relating family responsibilities to health outcomes, Brisson and colleagues (1999) found that higher levels of family responsibilities were associated with significant increases in diurnal systolic and diastolic blood pressure among

white-collar women holding university degrees. In these women, combined exposure of large family responsibilities and high job strain tended to have a greater effect on blood pressure than the exposure to either one of these factors alone.

It has also been suggested that work-family conflict leads to decreased health behaviors such as decreased exercise and fewer family dinners and poorer eating habits (Allen & Armstrong, 2006). Furthermore, there is evidence that positive spillover between work and family is related to improved subjective and objective health outcomes (van Steenbergen & Ellemers, 2009). In a large-scale cross-sectional study of professional workers, the authors showed that both work-family conflict and positive spillover were related to objective health outcomes (i.e., cholesterol level, body mass index (BMI), physical stamina). It was further found that work-family facilitation at Time 1 predicted better cholesterol and BMI at Time 2 in a follow-up study of only 58 of the Time 1 participants 1 year later (van Steenbergen & Ellemers, 2009).

Organizational and Policy Implications

Our review offers several organizational implications. First, we conclude that supervisor support and control over work are two critical organizational levers for work-family conflict reduction. Second, based on the literature review, we suggest that organizations seeking to assist their employees by providing formal work-family supports should be aware of the importance of informal support in making these formal work-family initiatives successful. Informal work-family support, such as supervisor support, may affect whether employees feel encouraged, or even allowed, to use family-supportive benefits or policies and whether use of these supports is related to the benefits intended. Third, we suggest organizations focus on encouraging and training managers, supervisors, and employees to be supportive of the work-family needs of all employees. For example, supervisor and manager training may be focused on how work and family roles interact and how providing support can have benefits for not only the individual in her/his family role but also for the individual in her/his role as employee.

One of the few work-family interventions that have been rigorously tested to date was an evaluation of an FSSB training program developed by Hammer, Kossek, Anger, Bodner, and Zimmerman (2011), demonstrating improved reports of health, job satisfaction, and decreased turnover intentions among the employees of the supervisors who were trained. In addition, organizations may consider training employees on how to assist each other in their efforts to manage work and family demands by sharing information (e.g., regarding childcare or eldercare) and/or by helping each other at work (e.g., trading shifts). Fourth, going beyond training, organizations can demonstrate commitment to supporting the work-family needs of employees by formally rewarding supervisors who exhibit support. Fifth, organizations should inquire about the particular needs of their employees (e.g., via employee surveys) to best determine what types of support are desired.

If organizations support the work–family needs of their employees, leading to reduced work–family conflict, employees in turn will likely be more committed, be safer, perform better, and be healthier, leading to overall more positive organizational outcomes. Interestingly, virtually nothing is known about the effects of such practices on work–family positive spillover.

What has not been addressed at this point is the need for larger-scale policy changes, especially in the United States, to better support working families and, in turn, to help reduce work–family conflict. Several cities and one state have recently enacted paid family leave laws, with 20 additional cities and states working toward the law. In 2006, San Francisco became the first city in the nation to guarantee access to earned paid sick days for all workers, and since then, the District of Columbia, Milwaukee, Seattle, and Portland, OR, have passed paid sick days standards. In 2011, Connecticut became the first state in the nation to pass a paid sick days law, and three states (California, New Jersey, Washington) and the District of Columbia have enacted paid family leave laws for parenting and caregiving. What is clear is that there is much room for progress, at least in the United States, which pales in comparison to most Western countries that provide paid family leave ranging from 3 months to 3 years at the state/federal level. If public policy in the United States was better aligned with the needs of working families, less of a burden/expectation would be placed on corporations to help reduce work–life conflict (Hammer et al., 2006). One example of this is the recent focus in the United States on the provision of organizational support for lactation stations. Such organizational supports for nursing mothers are virtually nonexistent in countries such as Canada and most European countries because of the provision of paid maternity leave in excess of 1 year, and thus, breastfeeding at work becomes much less of an issue.

New Directions in the Work–Family Field

Although there has been substantial research in the area of work–family conflict, there are several avenues of research that need to be examined further. Here, we address some of the methodological limitations of the existing research and make recommendations for future work in the area. Casper, Eby, Bordeaux, Lockwood, and Lambert (2007) conducted a methodological critique of the work–family literature. They noted several limitations of the literature, including the cross-sectional nature of work–family research, the use of single-source data, and the use of individual levels of analysis. They suggested that to advance scholarly research, study designs have to be improved in the future. Because many of the studies to date have been cross-sectional, future research should employ longitudinal designs for the sake of establishing causality. Furthermore, we argue that there is a lack of evidence-based work–family interventions designed to reduce work–family conflict and/or increase work–family positive spillover (e.g., Kelly et al., 2008). Although practitioners are seeking tools, very few established work–life programs and policies

have been formally tested and validated. Much of what we know about what works is based on anecdotal, observational, or correlational data.

Additional research is needed to understand the potentially detrimental effects of work–family conflict not only on the spouses (as evidence by the crossover literature, e.g., Hammer et al., 1997) but also on the children of workers. An excellent example is the recent study of the relationship between work characteristics and child health outcomes (Johnson & Allen, 2013). Additionally, work–family conflict effects on workplace safety outcomes are limited, just as we know little about the effects of work–family conflict on specific health outcomes such as CVD, hypertension, BMI, and certain stress-related disease markers such as cortisol.

Work, family, and recovery

Recovery from work has been described as a process during which work demands are removed and individuals are able to restore and replenish resources that were lost during the workday (Meijman & Mulder, 1998). Sonnentag and Fritz (2007) found four distinguishable recovery experiences, including psychological detachment, relaxation, nonwork control, and mastery. Recovery from work has been linked to a number of important well-being outcomes, including lower levels of burnout, and increased positive mood, life satisfaction, and general well-being (Fritz & Sonnentag, 2005; Fritz, Sonnentag, Spector, & McInroe, 2010; Fritz, Yankelevich, Zarubin, & Barger, 2010). Recovery experiences also have been linked to improved performance outcomes, including task performance, creativity, personal initiative, and organizational citizenship behaviors (Binnewies, Sonnentag, & Mojza, 2009).

Several recent studies have begun to empirically test the relationships between recovery from work and work–family variables. For example, recovery during work breaks has been linked to increased work–family facilitation (Sanz-Vergel, Demerouti, Moreno-Jimenez, & Mayo, 2010). Additionally, psychological detachment has been shown to moderate the relationship between work–family conflict and psychological strain and life satisfaction (Moreno-Jimenez et al., 2009). Specifically, individuals with lowered psychological detachment experienced greater levels of psychological strain and lowered life satisfaction. Finally, psychological detachment has been shown to buffer the relationship between family-to-work interference and workplace cognitive failure (Lapierre et al., 2012). Although these studies have begun to illuminate the relationship between recovery from work and the work–family interface, there are still a number of questions that need to be answered. Furthermore, we know little about the role of partners and family members in facilitating one's recovery from work (see Hahn, Binnewies, & Haun, 2012; Hahn & Dormann, 2013, for exceptions). In terms of building psychologically healthy workplaces, implications from the recovery literature include encouraging employees to use available vacation time and being aware of the importance of breaks during work.

Work, family, and sleep

Given increasing demands at work and at home, sleep is a primary outcome that is affected by multiple role responsibilities. It has been suggested that the number of hours spent in work and nonwork roles has a negative impact on the amount of sleep we are getting (Barnes, Wagner, & Ghumman, 2012). Barnes et al. argued that we should include sleep in work–life theories. Furthermore, in addition to the research on the negative impacts of poor sleep quality and sleep duration on health (e.g., Buxton & Marcelli, 2010), there is a growing body of research on the negative effects of sleep on organizational outcomes such as injuries (Barnes & Wagner, 2009), unethical workplace behavior (Barnes, Schaubroeck, Huth, & Ghumman, 2011), and decision making in teams (Barnes & Hollenbeck, 2009). Though sleep is a large part of employees' nonwork lives, organizations can enact policies that are supportive of employee sleep, such as limiting the use of work-related forms of communications (e.g., phone calls, e-mails) during nonwork hours (Fritz, Ellis, Demsky, Lin, & Guros, 2013).

Work–home resources model

The field of work–family research to date has been characterized by the consistent use of several theories as reviewed earlier in this chapter (e.g., role theory, systems theory, boundary theory, and work–family border theory). In a recent article in the *American Psychologist*, ten Brummelhuis and Bakker (2012) introduced the work–home resources model in an attempt to explain both positive and negative work–home processes integrally. This model builds off of the commonly used conservation of resources (COR) theory (Hobfoll, 1989, 2002), which posits that individuals strive to maintain, protect, and build their resources and that stress occurs when individuals are either threatened with losing or actually lose these resources.

The work–home resources model builds upon COR theory by suggesting that contextual demands and resources (i.e., those found in the social context) are the cause of conflict and enrichment, respectively. In turn, personal resources (i.e., those proximal to the self, such as personality traits) are the linking pins between the work and home domains. Furthermore, key resources (i.e., characteristics of the person, including optimism and self-efficacy) and macro resources (i.e., contextual factors including public policies and cultural values) are proposed to attenuate work–family conflict while increasing work–family enrichment. Finally, the model differentiates between long-term and short-term processes of conflict and enrichment. In short-term processes, demands and volatile resources (time, physical energy) affect volatile resources in the other domain; in long-term processes, more structural demands and resources (such as one's social network) in one domain in turn impact structural resources in the other domain. This model seeks to illuminate the black box that is the relationship between work and home domains and, as such, does not include explicit measures of work–home interference, instead focusing on the underlying mechanisms

that link the two domains. ten Brummelhuis and Bakker (2012) suggested a number of future research directions based on this model, including a comprehensive research program to empirically test the proposed model and the development and validation of scales of both work and home resources. Finally, other avenues include examining the combined effects of both enriching and depleting effects, as well as examining the relative importance of each of these effects.

Organizational Best Practices and the Corresponding Need for Intervention Evaluation

The current trend in organizations to increase work-life balance and decrease work-family conflict has been to implement workplace flexibility and has come in many forms. For example, a recent effort reported in *HR Magazine* by Unilever, an Anglo-Dutch company, involved reducing the requirement of face time, saving the company millions of dollars from decreased travel, decreased office space, and increased flexibility that allowed workers to exercise more and eat healthier, resulting in reduced healthcare costs (Grossman, 2013). Of course, the findings are exciting, but this program was not rigorously tested and the assumptions are that the increased revenues were due to the increase of what they called the "Agile Workforce." This wave of flexibility has taken off in U.S. companies as well, with the expectation that such flexibility is a low cost benefit that can be provided when times are lean and high-quality workers are seeking more balanced lives. However, the workplace flexibility has been met with some backlash, as has been seen in by the decision of the corporate headquarters of Best Buy to eliminate the Results-Only Work Environment (ROWE) program they had implemented several years ago, despite research findings on the programs' beneficial effects on work-family conflict reduction of workers (Kelly & Moen, 2007; Kelly et al., 2011). Most recently, we saw the CEO of Yahoo eliminating the telework program because of the belief that employees were more creative and engaged when they interacted in the office. Therefore, what have been deemed as best practices by the Families and Work Institute and Society for Human Resource Management partnership around workplace flexibility have still faced resistance, despite evidence to the contrary. Notably, almost all indicators of workplace flexibility have increased from 2005 to 2012, based on the Families and Work Institute's National Study of Employers (Matos & Galinsky, 2012).

To our knowledge, the only work-family best practice intervention that has been rigorously evaluated is that which has come out of the Work, Family, and Health Network (see <http://www.kpchr.org/workfamilyhealthnetwork/Public/default.aspx>). The Work, Family, and Health Network has been the largest national effort to support primary prevention work-life intervention studies that lead to improved health and well-being of workers, their families, and organizations. While results of the larger randomized field experiment are not yet published, the initial pilot studies are the first to provide evidence of a work-life supervisor training intervention

effects on health (i.e., Hammer et al., 2011) and health behaviors (Moen, Kelly, Tranby, & Huang, 2011; Moen, Lam, Ammons, & Kelly, 2013; mentioned in the section entitled “Organizational Best Practices and the Corresponding need for Intervention Evaluation”). The work–life intervention studied by Hammer and colleagues was based on family-supportive supervisory training and self-monitoring and led to improved supervisor support for work and family and beneficial effects on worker job satisfaction, turnover intentions, and self-reported physical health symptoms. We suggest that future rigorous research is needed to evaluate effective interventions that lead to healthy workplaces.

Concluding Comments

While this chapter is an update and extension of existing work–life/work–family conflict literature, it is our hope that the focus on new theoretical perspectives, new research findings, new organizational and public policy recommendations, as well as new avenues for research will provide a road map for extending both the research and practice that supports working families. The combination of research reviewed here, as well as the growing number of family-friendly policies being implemented in cities across the country, leaves us with hope that there are a number of potentially useful avenues for organizations seeking to build healthy workplaces.

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