

A Survey of Pediatricians' Attitudes and Practices about Maternal Employment

JORDAN W. FINKELSTEIN, MD
JEANNINE COREIL, PhD

Dr. Finkelstein is Professor of Pediatrics and Director of Adolescent Medicine in the Department of Pediatrics, and Dr. Coreil is Assistant Professor in the Department of Preventive Medicine and Community Health, the University of Texas Medical Branch, Galveston, TX 77550.

Tearsheet requests to Dr. Finkelstein.

Synopsis.....

A survey of 281 members (31 percent) of the Texas Pediatric Society was performed in 1981 to assess members' knowledge of, attitudes toward, and practices regarding mothers who work outside the home. Only 15 percent correctly answered two of three knowledge questions about maternal em-

ployment. Thirty-five percent of the pediatricians failed to inquire about maternal employment. Although only 1 percent advised all mothers not to work, 22 percent said that mothers with children at home should not work.

Most pediatricians had traditional conservative attitudes and opinions (exemplified by the statement "a woman's place is in the home") in regard to two factors, "acceptability of maternal employment" and "effects of maternal employment on children." More liberal views were associated with more recent graduation from medical school, being a woman, having a working wife, being in favor of wife's working status, and knowledge of statistics concerning maternal employment. These results suggest that if the practices of those Texas pediatricians who responded correspond with other pediatricians' practices in the United States, a large proportion of pediatricians may not be providing adequate support for the 17 million working mothers and their children.

AN INCREASING PROPORTION OF AMERICAN women whose families include children and adolescents work outside the home. From 1950 to 1980 the number of working mothers more than tripled, steadily rising from 4.6 million to 16.9 million. The percentage of ever married, employed women with children correspondingly rose from 22 percent to 57 percent (1).

A major concern of those caring for children is the effects of maternal employment on children's health and well-being. Implicit in this concern is the idea that the amount of time mothers spend with their children plays a critical role in determining their children's physical and psychological health and social well-being. Because most mothers now work outside the home, the average amount of time they spend with their children may be reduced. This reduction may produce strong feelings of guilt or induce additional stress in the working mother. Pediatricians may be a source of support for mothers who work outside the home.

The Committee on Psychosocial Aspects of Child and Family Health of the American Academy of Pediatrics (AAP) has issued a statement to AAP members concerning mothers who work (2).

Pediatricians may choose to support and guide mothers as suggested by the Academy's statement, may choose to ignore the issue, or perhaps may adopt practices that are not supportive. The purpose of this study was to determine current attitudes, knowledge, beliefs, and practices concerning working mothers for a sample of pediatricians in Texas. This information can be useful in evaluating the need for programs to assist pediatricians who provide health care for children of working mothers.

Methods

The entire membership of the Texas Pediatric Society (TPS)—906 pediatricians—received a questionnaire in 1981 requesting basic demographic data; information about the employment status of the pediatrician's spouse; and the pediatrician's knowledge, current office practices, attitudes, and beliefs about mothers who work outside the home. The questionnaire had not been administered previously. Many of the questions were suggested by the excellent article on this topic by Zambrana and coworkers (3). Responses to the questions used a

5-point Likert scale, with ratings of strongly agree, agree, undecided, disagree, and strongly disagree (scored 1-5). The data presented in the tables were calculated by adding each respondent's raw scores for each of the items and then ranking the scores. The ranked scores were then grouped by selected characteristics of the respondent (for example, age and sex), and the ranks for each group were summed and averaged. The means of these summed ranks were then compared by appropriate statistical tests. Lower mean rank scores indicate a more conservative or traditional attitude than higher mean ranks. Data analyses included descriptive statistics, Student's *t*, and the Kuskal-Wallis test. Factor analyses of 47 attitude and opinion questions were performed to identify sets of questions that share common underlying themes. The factor analyses used Varimax rotation, with the squared multiple correlation as the prior communality estimate.

Results and Discussion

Demographic. Two hundred and eighty-one of the 906 members, (31.0 percent) responded to the questionnaire. An identical response rate was obtained in a study in which a single mailing of a questionnaire about maternal employment was sent to all AAP members (4). The proportionate responses for men and women in these two surveys were significantly different when comparing men with women in each study ($P < .05$) and when comparing each sex between studies ($P < .05$) (table 1). Mean age for the Texas sample was 49 years (SD, 11), which is slightly older ($P < .05$) than the general membership of TPS (mean age, 47 years) and the AAP sample (mean age, 44 years). Thus, this sample had a somewhat lower proportion of women (by 3 percent) and was slightly older (2 years) than the general membership of TPS. Although these differences are statistically significant, it is not likely that they will introduce a major bias in the results.

Eighty-two percent of the respondents were in the private practice of pediatrics, and 73 percent practiced general pediatrics (85 percent of all TPS members practiced general pediatrics). Seventeen percent of respondents were in academic pediatrics, and 1 percent were in other fields. The year of graduation from medical school ranged from 1927 to 1979; the median year was 1956. At some time, 95 percent of the sample had been married, and at the time of the survey, 90.4 percent were married. Of those who were separated or divorced,

Table 1. Proportion of male and female pediatricians who responded to surveys by the Texas Pediatric Society and the American Association of Pediatrics

Survey	Males		Females	
	Number	Percent	Number	Percent
Texas Pediatric Society:				
Respondents.....	236	84	45	16
All members.....	734	81	172	19
American Academy of Pediatrics (4):				
Respondents.....	4,318	75	1,440	25
All members.....	16,160	87	2,415	13

7 percent (20 persons) said the issue of the spouse's employment was a factor in the dissolution of the marriage.

Fifty-nine percent of the respondents' spouses worked outside the home, which is similar to the national figure (56.7 percent). In the instructions for completing the questionnaire was the following statement: " 'Work' in this questionnaire refers to work outside the home for a salary. Volunteer work is not included unless it is full time outside the home." Of the 59 percent of spouses who worked, 59 percent worked full time and 41 percent worked part time. Eighty-six percent of respondents said their spouses worked because they wanted to, 12 percent because they needed the money, and 2 percent because the respondent wanted the spouse to work. Seventy-nine percent of respondents said their spouses wanted to work, 12 percent said their spouses were ambivalent about working, and 9 percent said their spouse did not want to work. Fifty-seven percent of respondents said they wanted the spouse to work, 28 percent expressed ambivalent feelings, and 15 percent said they did not want their spouse to work. Ninety-one percent of the husbands of women pediatricians worked, and 100 percent of women pediatricians said they wanted their husband to work.

The respondents had a mean of 2.9 children (SD 1.42). The mean age for the youngest child when the spouse first went to work was 6.19 years (SD 7.63; median, 3.0), and the mean age for the oldest child was 9.9 years (SD 10.1; median, 8.5). Thus, half of the children of these respondents had one parent at home with them for at least the first 3 years of life.

Knowledge. Three factual questions about working women in the United States were asked: (a) the proportion of women with children under age 18

Table 2. Percentages of answers about maternal employment, Texas Pediatric Society

Question	Under-estimate	Correct estimate	Over-estimate	Total number
Percentage of working women with children under age 18	28	36	36	271
Percentage of working women with children under age 6	30	36	34	272
Total number of working women, both with and without children	27	26	47	244

who worked outside the home (correct answer in 1981: 57 percent); (b) the percentage of employed women with children under 6 years (42 percent); and (c) the total number of working women (with and without children) (37 million). Only 1 respondent out of 272 answered all three questions correctly, and only 15 percent answered two questions correctly (table 2). The errors tended to be in the direction of underestimating rather than overestimating the proportion of working mothers. The distribution of responses for two of the three questions would be expected by chance alone. This low proportion of correct responses occurred despite the fact that respondents reported having read an average of 1.9 articles (SD, 2.3) in "scientific publications" and 3.1 articles (SD, 3.1) "in the popular press" on the topic of working mothers in the year prior to the study. Only 12.5 percent said they had been exposed to the topic of "working mothers" in their medical training. Thus, despite reported exposure to information, most pediatricians had poor knowledge regarding the extent of maternal employment. This finding has important implications, because 27-30 percent of pediatricians had low estimates of the prevalence of working mothers. Low estimates may affect pediatricians' practices in regard to working mothers by suggesting that this is not common and therefore does not merit much attention.

Current practices. Only 65 percent of the respondents said they routinely ask mothers if they work outside the home. The topic of maternal employment was discussed with all mothers regardless of work status by 13 percent of respondents and "only with those mothers who are working" by 50 percent. It seems that, at best, only half the working mothers have an opportunity to discuss problems relating to their employment with their pediatrician.

All mothers were advised not to work by 1 percent of TPS members, the same proportion that was found in the AAP study (4). Thirty-six percent of TPS respondents advised mothers with children under 2 years of age not to work, compared with 17 percent who gave the advice to mothers with children younger than 6 years. Twenty-two percent said mothers with children at home should not work. Twenty-six percent advised mothers not to work unless they needed the money. This finding is in contrast to 64 percent of AAP pediatricians who thought that mothers with children at home should not work (4).

Half of the respondents said they routinely advised parents to read some book on child care. Only 42 percent indicated that the recommended book had a section on working mothers. In regard to their beliefs about working mothers, the authors of the books were said to be strongly in favor of mothers working by 7.6 percent of the respondents, sometimes in favor by 30.4 percent, neutral by 41.8 percent, somewhat opposed by 13.9 percent, and strongly opposed by 6.3 percent. Although only 1 percent of respondents said that they strongly opposed mothers working, 6.3 percent recommended a book that contains statements strongly opposed to maternal employment.

General attitude and opinion factors. Factor analyses of the 47 attitude and opinion questions identified two major factors in relation to the question of maternal employment (table 3). Factor 1 explained 9.8 percent of the variance in responses, and factor 2 explained 4.2 percent.

The first of the two factors, labeled "acceptability of maternal employment," had 12 items that specified the conditions and consequences for evaluating the acceptability of maternal employment. Statements such as "A mother should never work" and "A mother who works when the family doesn't need the income has failed her child" were included. The second factor was labeled "effects of maternal employment on children," and it had five statements. Two of them were "Children of working mothers have more school problems" and "Children of working mothers are more likely to have adjustment problems of adolescence."

Response patterns for each factor were analyzed by the pediatrician's gender, year of graduation in 10-year increments, work status of pediatrician's spouse (yes or no), respondents' feelings about whether spouses should work (in favor, ambivalent, opposed), and number of correct responses to

three factual questions (two correct or less than two correct). The attitudes were analyzed as ordinal values, and they can be conceptualized as contrasting traditional or conservative attitudes with more liberal views. The more conservative viewpoints support the broad generalization that "a woman's place is in the home" and are reflected by lower mean ranks. The more liberal perspective holds that a woman's place is determined by the same mechanisms used by men to make such decisions. For factors 1 (concerning mothers) and 2 (children), women pediatricians had significantly less restrictive attitudes than male respondents (factor 1, $P < .0003$; factor 2, $P < .0003$; Kruskal-Wallis). Men were more likely than women to set conditions and to think that there are more adverse effects for working women and for their children. These results are perhaps to be expected, because all of the women respondents themselves worked outside the home.

When the results for factors 1 and 2 were analyzed by year of graduation from medical school (table 3), the oldest graduates (1927-36) had a middle-of-the-road position, while the next oldest group (1937-46) had the lowest (most traditional or conservative) response. Responses became less restrictive with each succeeding decade. The difference among 10-year groupings was statistically significant ($P < .001$ for factor 1; $P < .003$ for factor 2; test for trend).

Responses for both factors of those pediatricians whose spouses worked were also significantly more liberal than those whose spouses did not work (factor 1, $P < .0001$; factor 2, $P < .001$; Kruskal-Wallis). However, within the group whose spouses worked, those pediatricians who were opposed to or ambivalent about the spouses' employment had significantly more conservative views ($P < .005$ for factors 1 and 2; Kruskal-Wallis) than those who were in favor of spouses working.

The responses for both factors were also analyzed according to the number of correct responses to the factual questions about the number and proportion of working mothers in the United States. There was a significant difference for factor 1—consequences for mother—($P < .005$) but not for factor 2—consequences for the child—between respondents who answered two of the factual questions correctly and those who answered less than two correctly. The former group (better informed) had more liberal and accepting views.

Selected beliefs. In addition to the statements associated with the factors, there were six other

Table 3. Mean rank of liberalism of responses toward maternal employment for factor analyses of opinions and attitudes, Texas Pediatric Society

Characteristic	Factor 1— Consequences for mother	Factor 2— Consequences for child
Sex:		
Males	1131	1131
Females	179	179
Year of graduation from medical school:		
1927-36	145	205
1937-46	² 112	² 119
1947-56	124	126
1957-66	142	139
1967-76	170	156
Does spouse work?		
Yes	1149	1143
No	106	113
Feelings about whether spouse should work:		
Positive	1104	1103
Ambivalent	72	73
Negative	49	49
Factual information about maternal employment:		
2 of 3 correct answers	1174	145
Less than 2 correct answers	135	140

¹ Significant difference between groups.

² Significant trend between years.

NOTE: Higher mean rank indicates a more liberal attitude or opinion.

questions on attitudes and opinions that were selected for analysis because previous research suggested their importance (3). Each of these items was analyzed by comparing responses according to gender, year of graduation, employment of spouse, and attitude regarding the spouse working.

Several books (5-7) and articles (8-10) stress the importance of maternal satisfaction for children's well-being. A study in which pediatricians were asked to list circumstances under which they would recommend that a mother go to work, found that "maternal needs" represented 37 percent of responses, a greater proportion than all other circumstances (5). In our study, women respondents agreed more often than male respondents ($P < .001$) with the statement "A working mother who enjoys her work is likely to be a better mother." Respondents whose spouses worked ($P < .002$) and who felt positive about their spouses' employment ($P < .002$) were more likely to agree with this statement than those who were ambivalent or negative.

One review suggests that the quality of mother-child interactions is an important factor in children's development (11). Ninety percent of respondents in our study agreed with the statement

"The quality rather than the quantity of time a mother spends with her child is important." There were no sex differences in response pattern, but those respondents whose spouses worked ($P < .01$) and who felt positive about the spouses' employment ($P < .015$) were more likely to agree with the statement than those whose spouses did not work or who were ambivalent or negative about spouses working. There was a significant trend by year of graduation in response to this question. The more recent graduates tended to agree more than the less recent graduates ($P < .03$), with the exception of those graduating between 1927 and 1936.

A collection of papers dealing with dual career families suggests that family dynamics consistently favor careers for men and home responsibilities for women (12). Robbins and coworkers (13) demonstrated that among 100 men and 44 women who were third- and fourth-year medical students at New York University School of Medicine in 1979, "having a career" was the second most important reason for women to attend medical school (58 percent), second only to "helping people" (76 percent). For men, "having a career" was third in order of importance (40 percent), preceded by an interest in science (74 percent) and helping people (72 percent). In our study only 43 percent of all respondents agreed with the statement "A husband's career is more important than a wife's." Men were more likely to agree with the statement than women ($P < .0001$), and men whose spouses did not work ($P < .0004$), or who felt negatively or were ambivalent about spouses working ($P < .0001$) were more likely to agree. Respondents who were more recent graduates were less likely to agree ($P < .0001$).

The literature suggests that there has been no increase in the husband's domestic participation (12). In the New York University study of medical students, women were "stronger" in their beliefs that there should be sharing of financial, household, and child care responsibilities. In actual practice, however, job responsibilities within the household were "extremely conventional." Men were responsible for repairs and garbage removal, and women did the cooking and cleaning. This pattern was observed for both women students and the wives of students. Forty-seven percent of the men thought their wives would take care of any children, while only 9 percent of the women students thought they would be "primarily responsible" for rearing their own children (13). Sixty-six percent of our sample agreed with the statement

"There is a substantial increase in a husband's participation in domestic work if the wife works." There were no significant differences between any of the comparison groups.

Finally, a 1975 survey of 120 gynecologists (116 men, 4 women) found that a substantial proportion of respondents believed that maternal employment had negative effects on mothers (25 percent of respondents) and children (44 percent of respondents) (14). In contrast, only 4 percent of our sample of pediatricians agreed with the statement "Working has a negative effect on women," and only 22 percent agreed that "Maternal employment has a negative effect on children." Men were more likely to agree with both statements than women ($P < .001$), and respondents whose spouses did not work, or who were opposed to or ambivalent about the spouses' employment, were also more likely to agree with these statements ($P < .001$).

Conclusion

A substantial number of Texas pediatricians maintain traditional beliefs and conservative attitudes toward mothers who work outside the home. These views maintain that working is not beneficial or is harmful to women or children. Male pediatricians whose wives work and who are pleased about their wives' working arrangements seem to have significantly more liberal views, as do pediatricians who are more recent graduates and who are better informed about the prevalence of women working outside the home.

A significant proportion of pediatricians did not inquire routinely about maternal employment status; of those who did ask, only half discussed with mothers the issues surrounding maternal employment. It seems likely that many pediatricians are not well informed about maternal employment, and that their advice and practices may be based largely on personal opinions rather than on data because

- The literature on the effects of maternal employment on either mother or child is not voluminous,
- Most existent data on the subject are not in the professional literature read by pediatricians, and
- Only a minority of our survey respondents answered two of three factual questions correctly.

More substantive empirical research on the short- and long-term effects of maternal employment is needed, and the results of such research need to be made available to pediatricians and others providing care to children.

Our survey suggests that a substantial number of pediatricians are not supporting working women with children appropriately. Because 44 percent of office visits by children under 15 years of age are to pediatricians (15), they may be a source of support for mothers who work outside the home. It would seem worthwhile for maternal and child health undergraduate and postgraduate educational programs as well as service programs to focus more attention on and to provide more practical support for working mothers, their children, and health workers providing care to these groups.

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Users of Reproductive Health Clinic Services in a School Pregnancy Prevention Program

MARILYN B. HIRSCH, PhD
 LAURIE S. ZABIN, PhD
 ROSALIE F. STREETT, MS
 JANET B. HARDY, MDCM

When this research was conducted, all the authors were associated with the Johns Hopkins University School of Medicine where Dr. Hirsch is an Assistant Professor in Gynecology and Obstetrics and Dr. Hardy is a Professor in the Department of Pediatrics. Dr. Zabin is also an Assistant Professor in the Department of Population Dynamics at the University's School of Hygiene and Public Health. Ms. Streett is Director of Friends of the Family in Maryland. The research described in this paper was funded in part by the Education Foundation of America.

Tearsheet requests to Marilyn B. Hirsch, PhD, 4606 Hygiene, 615 N. Wolfe Street, Baltimore, MD 21205.

Synopsis.....

Although the potential of school-based programs in the prevention of adolescent pregnancy is well

recognized, few have been evaluated. This paper describes the use of a reproductive health care clinic associated with a school pregnancy prevention program which had demonstrated success. The program operated in one junior and one senior high school in a large city during the 3 school years from 1981 to 1984. Three facets of the 818 users of the program clinic are explored: (a) who enrolled in the clinic, (b) why they enrolled and what contraceptive methods they received, and (c) their continuation with the clinic.

Chi-square analysis and Student's t-tests were used to test for significant differences between the two school and sex groups. Life table and regression techniques were employed to examine clinic continuation.

The main findings are (a) teens of both sexes used the clinic, and junior high males used it in surprisingly large numbers; (b) there were no major school or sex differences in the characteristics of those who enrolled; (c) most students enrolled to obtain a contraceptive method; (d) although many females served by the clinic had previously used another family planning clinic, the