Christiane Spitzmueller
Russell A. Matthews *Editors*

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Editors
Christiane Spitzmueller
Department of Psychology
University of Houston
Houston, TX
USA

Russell A. Matthews
Department of Psychology
Bowling Green State University
Bowling Green, OH
USA

Acknowledgements

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About the Editors

Christiane Spitzmüller, Ph.D. is currently Associate Professor of Psychology at the University of Houston and a visiting scholar at Lagos Business School in Lagos, Nigeria. She completed her undergraduate degree at the University of Koblenz-Landau in Germany. Through a Fulbright Scholarship, she then conducted research and completed her Ph.D. in Industrial and Organizational Psychology at Bowling Green State University, USA. Her research interests are in three major areas: organizational survey research methodology, the work-family interface and employee health and safety. Through her research, she aims to understand how employees' work experiences shape family health and well-being outcomes. Dr. Spitzmüller's research work has been published in the top journals in human resource management, including Journal of Applied Psychology, Personnel Psychology, and Journal of Organizational Behavior. She currently serves on the editorial boards of Journal of Occupational Health Psychology, and Organizational Research Methods. In addition to conducting research, Dr. Spitzmüller has also consulted with organizations, including ExxonMobil and British Petroleum as well as the World Health Organization. Dr. Spitzmüller teaches Occupational Health Psychology, Survey Research Methods and Introduction to Statistics as well as MBA courses at the University of Houston and at Lagos Business School.

Dr. Russell A. Matthews is Assistant Professor of Industrial/Organizational Psychology at Bowling Green State University. Dr. Matthews earned his Ph.D. in I/O Psychology, with graduate certificates in occupational health psychology and quantitative research methods, from the University of Connecticut. His research focuses primarily on the examination of the work–family interface with particular emphasis on the development and application of boundary theory. In tandem, he conducts research on "non-traditional" populations (e.g., older workers, individuals with excessive family demands). He also conducts a significant amount of research on the broader issues of worker health, safety, and well-being with an interest in specific occupations (i.e., educators, first responders). He has a keen interest in methodologically based research questions across these lines of research. To date, Dr. Matthews has published over 45 peer-reviewed articles and book chapters, and

been involved in over 80 national and international conference presentations. His research has been funded by such agencies as the National Institute for Occupational Safety & Health, the Department of Defense, and the Department of the Interior and published in such journals as the Journal for Applied Psychology, Journal of Organizational Behavior, Work & Stress, Journal of Occupational Health Psychology, and Accident Analysis & Prevention.

Work and the Transition to Motherhood: Introduction

Christiane Spitzmueller and Russell A. Matthews

Abstract The transition to motherhood represents a unique life phase and affects all life spheres, including work. Through this chapter, we provide an overview to challenges that face women and families as they transition to being parents. First, we are introducing background data on the characteristics of the interface between work and family. Second, we introduce the chapters in this book, and the angles the chapter authors adopt towards shedding light on our understanding of work and the transition to motherhood.

Keywords Working mothers · Parental leave · Work-family interface

Across the globe, employees venture into a uniquely challenging life phase as they or their partners give birth to or adopt children. The transition from being an employee with no children to being an employee with children is profound, affecting both an employees' work and personal spheres. Work demands, work challenges and non-work priorities are invariably altered even prior to the arrival of a child. Parents, and particularly mothers, experience role demands beyond those imposed by their work roles and non-work responsibilities once they become pregnant and only expand further after childbirth. The addition of role demands that come with pregnancy and childbirth represent only one aspect of the transition from employee to parent or working parent. Particularly women are faced with entirely novel psychological, physiological, social and economic considerations that apply uniquely to them as they transition to having and raising children.

Most women start planning during their pregnancies how they will allocate limited resources to work and family demands. At the same time, perceptions of coworkers and managers change: Coworkers' and managers' evaluation of

C. Spitzmueller (✉)
Department of Psychology, University of Houston, Houston, USA
e-mail: christianes@gmail.com

R.A. Matthews (✉)
Bowling Green State University, Bowling Green, USA
e-mail: ramatth@bgsu.edu

women's ability to cope with work and pregnancy demands can affect how women reconstruct their identity and plan for life after the arrival of their child. Economically, the arrival of an infant mandates that work is not only re-evaluated in terms of its psychological meaning for the parents, but also in terms of its economic costs and benefits to family systems. If women decide to not immediately return to work, they may later experience substantial economic penalties. And decisions about if and when to return to work are influenced not only by personal preference but also by, for example, organizational and societal norms. On the other hand, women who do return to work, be it full-time or part-time, may feel they are missing out on some of their children's milestones and experiences, or feel societal pressures for not fulfilling expectations generally associated with being "good" mother. As such, parents' psychological transition from being employees to being employed parents represents a crossway that profoundly alters family systems.

Despite the tremendous research progress that sheds light on many nuances of the work-family interface (Allen and Eby 2015), the crucial transition phase that employees experience as they become parents has received very limited research attention. Methodological aspects, including access to study populations, are partially to blame. However, lack of access to study populations are only one aspect—development of comprehensive theoretical frameworks that can guide methodologically challenging empirical research pertaining to this life stage constitutes an important research priority as we research work and the transition to motherhood.

Different approaches to understanding the transition to parenthood can be selected. Through this book, we approach the transition to parenthood from two perspectives: First, we emphasize the temporal sequence of identity-based transitions that employees experience as they transition to parenthood. The book's structure follows the temporal sequence of events as children enter their parents' work-life interface, starting with pregnancy, through maternity leave and early infancy. Second, a focus on key stakeholders constitutes a key element to of this volume. Among the stakeholders are mothers—their role transitions, role demands, altered work experiences, well-being, decision to return to work, breastfeeding and effort to reconcile work and other life demands with the demands of children represent a focus on one of the most important stakeholders. At the same time, partners' (we use the term partner in this book in referring to fathers, but also to same-sex partners) lives are oftentimes also drastically affected by pregnancy and childbirth.

Increasing family demands on partners can affect how partners navigate their work and personal spheres as their personal sphere transitions from being a couple's sphere to being a family sphere. Other stakeholders in the transition to parenthood include children, employers, supervisors, coworkers, and societies at large. Further important distinctions in research on the transition to motherhood originate in outcomes. Although organizational behavior research emphasizes organizationally relevant outcomes (i.e. employee productivity, performance and health outcomes that affect the bottom line), approaches originating in economics, sociology, social and developmental psychology and other disciplines demonstrate that prioritization of different stakeholders (e.g. employer needs, family/child needs) can lead to trade-offs with long-term impact on societal outcomes, such as child socialization

and educational progress. Combined, these approaches allow us to further refine theoretical frameworks and define research questions that are theoretically and practically meaningful to individuals, families, organizations, and societies.

Generally, this book is based on North American and European approaches to handling the transition to motherhood. At the same time, research from emerging market economies is included in reviews to ascertain the perspectives we present account for the differences in mothers' transitional experiences across cultural backgrounds.

Work and the Transition to Parenthood—Background Data

According to the United States' Bureau of Labor Statistics Employment Characteristics of Family Summary, approximately 60 % of families with one or more children constitute of dual career families, indicating that almost two thirds of families work to reconcile the demands of two careers with family demands. Similarly, almost 70 % of mothers in the United States were employed in 2014. Among mothers of children under 6, approximately 64 % are employed. And among mothers with infants of one year or younger about 57 % were employed in 2014. This indicates that, at least in the United Sates, more than half of the parents of infants are dealing with simultaneous employment and family demands. In other words, the prevalence of return to work after having a child constitutes such a fundamental life change that significant research is needed to elucidate how, why and when this transition can be successfully accomplished. Notably, the definition of a successful transition has to be based on multiple stakeholder interests and on a multitude of outcomes as they apply to different constituents (e.g. practices that facilitate return to work and job performance also need to be evaluated in terms of their impact on child and family health and well-being).

Organization of This Volume

This volume contains five major sections. In the first section, in addition to the current introductory and overview chapter, Sabat, Lindsey, King, and Jones provide a comprehensive overview of theoretical perspectives that can advance research on the transition to motherhood. Specifically, Sabat et al. introduce social identity, stigmatization, and discrimination theories as they apply to each stage of the employment cycle. They introduce how the application of these theoretical models help to explain how differential hiring practices, unequal career advancement opportunities, ineffective retention efforts, and inaccessible work-family supportive policies exacerbate a transition that can be problematic for the careers of many women. Applying the theoretical models, they examine women as critical stake-holders, but also demonstrate how, why and when inequalities can impact

organizationally relevant outcomes. Through a review of studies on barriers women commonly experience, they discuss how theory-grounded research can explain how barriers are developed and maintained. Of significant importance, in an update and extension of stigma theory, they offer strategies that organizations, leaders, women, and allies can use to effectively improve the workplace experiences of women and mothers through efforts to remediate negative workplace outcomes. Finally, they highlight reasons why addressing these issues are vital for organizations as a whole, and call upon researchers to develop more empirically-tested intervention strategies that utilize all participants in the fight to end gender inequality in the workplace.

Section two of this book is devoted to pregnancy and work and consists of three chapters that highlight the importance of this transitional time period from three unique perspectives. First, Greenberg, Clair and Ladge utilize identity theory to explain how women transition through existing, emerging and temporal identities during pregnancies. Over the past two decades, there has been extensive research across diverse disciplines exploring the treatment of pregnant women in the work context. Greenberg et al. argue that one of the significant challenges women experience during pregnancy relates to their ability to manage their evolving sense of self as work and motherhood intersect—often for the first time. In their chapter, Greenberg et al. maintain a central argument: when women are able to successfully navigate this identity transition process and establish a strong vision of their future self as a working mother, they are more likely to stay engaged and committed to their professions and be more satisfied at work and at home.

Using an identity based perspective, Greenberg et al. explore the transitional period of pregnancy for working women. During pregnancy, women are undergoing an identity transition that relates to three distinct, and often conflicting, identities: their *existing* professional identity, their *emerging* mothering identity, and their *temporary* pregnancy identity. Through drawing on the intersectionality between these three evolving identities and the implications, Greenberg et al. explore the identity work women engage in as they manage the tension between who they want to be and who their organizations want them to be. Greenberg et al. methodologically root their chapter in a qualitative research paradigm and discuss the results of interviews with women, showing a nuanced perspective of working women's identity transitions during pregnancy, and during women's return to work following maternity leave.

In the second chapter of Section Two, Allen, French and Barnett provide a case-study based examination of media reactions to Marissa Mayer. Marissa Mayer, who was appointed to serve as the CEO of Yahoo while pregnant sparked an array of media and social media reactions. Headlines such as "The Pregnant CEO: Should You Hate Marissa Mayer" (Forbes, 7/19/2012), "Marissa Mayer: Is the Yahoo! CEO's Pregnancy Good for Working Moms" (Time, 7/17/2012), and "Marissa Mayer, Yahoo CEO's Pregnancy Reignites a Perennial Debate' (Huffington Post, 7/17/2012) help illustrate media reaction to the news. Through a qualitative analysis of media accounts and news releases commenting on Marissa Mayer's pregnancy and return to work two weeks after she gave birth, Allen et al. develop a set of themes that played crucial roles in the media coverage that followed Marissa

Mayer. The chapter further shows a set of implications of these themes for "ordinary" women who are combining work with pregnancy.

In the third and last chapter of Section Two, Trump, Nittrouer, Hebl, and Ashburn-Nardo explore the experiences of female employees at a variety of stages in their career prior to, while they are, and after they have been pregnant. In addition, Trump et al. explore the perspective of employers who: (a) are considering hiring; and (b) who have employed pregnant women in their organizations. In considering women at various stages of their careers, Trump et al. focus on and review the research and recent data they collected on worries and experiences that women have about becoming, being, and having been pregnant in the workplace. Utilizing theoretical frameworks to explain stereotypes, prejudices, and other attitudes they hold toward pregnant applicants and employees, they provide a data-driven summary of the worries and reflections on being pregnant in the workforce.

The third section of this volume is dedicated to the time period after the birth of the child. Three chapters provide a diversified perspective on this transition. The first chapter examines some of the most important decisions women face at this stage: whether or not to return to work. The second chapter examines the return to work in further detail. The third chapter examines maternity benefits across the globe and their influence on the stakeholders of interest to this volume: Organizations, families, societies, mothers and children.

In the first chapter of this section, Grether and Wiese demonstrate how the re-transition to work after a period of maternity leave has evolved into an important developmental task for most women. Through a micro-economic research lens, the chapter's authors investigate mothers' labor force participation in terms of cost-benefit considerations. Applying a psychological perspective, Grether and Wiese propose that mothers' employment patterns can be explained by the theory of planned behavior and social cognitive career theory. Furthermore, as an important contribution given the emerging nature of this line of research, they integrate the micro-economic and psychological research strands and propose a multidisciplinary theoretical framework to predict maternal employment patterns. Grether and Wiese further show that a better understanding of mothers' (and families') challenges and adjustment processes requires a multi-criteria approach and a deeper examination of the interactive role of individual and contextual characteristics.

In the second chapter of Section Three Fisher, Valley, Toppinen-Tanner and Mattingly, taking a more macro perspective, discuss global public policy for parental leave and the timeframe for returning to work. The authors discuss various outcomes of return to work, including preparedness for return to work, domain satisfaction, work/life balance, breastfeeding continuation, physical health and psychological well-being, as well as work and family-related outcomes. Utilizing job stress models originating in occupational health psychology, such as the job-demands-resources model and role theory, and open systems theory, Fisher et al. offer a rich theoretical perspective on return to work. This perspective incorporates and builds on the research literature on return to work after illness and injuries. They further contribute an overview of practical implications and

interventions that have been conducted to improve mothers' adjustment to work as well as recommendations for additional interventions.

The third chapter of in Section Three, by Zhang, Thomas, Dirr, Thomas, and Spitzmueller, takes an even broader perspective on maternity benefits across the globe. These benefits include, in some countries, health benefits for mother and child, medical leave as well as access to infant care support. In their chapter, Zhang et al. select twenty countries with varying maternity benefits and examine previously published literature to derive conclusions regarding their impact and cost-benefit ratios. Given that a significant amount of prior research on these benefits has been derived in fields outside of Psychology, Zhang et al. introduce a research framework that explains how and why maternity benefits affect child and maternal well-being. Through a discussion of empirical research on maternity benefits, the authors show that across-the board benefits may not be universally successful, and that benefits that positively affect children may not always have positive outcomes for other stakeholders (mothers, employers).

The fourth section of this book contains five chapters that describe women's experiences after their return to work, the impact of these experiences on the family system, and the adjustments required for them to meet multiple role demands and commitments.

In the first chapter of Section Four, Freese, Smith, and Grzywacz examine the influence of maternal employment on child health. In their chapter, Freese et al. develop and present new theoretical ideas linking maternal employment to child health outcomes. They posit that maternal employment requires women (and families) to identify, implement, evaluate, and refine a set of strategies for integrating or balancing work and family responsibilities. Freese et al. give specific attention to how the choices mothers make trigger other decisions and how these decisions may in turn ultimately affect early childhood development.

Freese et al. report on data from the Weaving Work and Family project to illustrate links between the maternal strategies for "weaving" of work and family, and how these strategies may contribute to children's developmental delay. The weaving concept encompasses decisions mothers make to balance work and family, such as the use of non-maternal childcare, behavioral decisions (e.g., cutting back on a mother's own leisure time activities) and psychological decisions (e.g., changing expectations for household maintenance). Freese et al. propose the use of Bronfenbrenner's ecological theory of human development to highlight how attributes of both the mother and her child contribute meaningfully to understanding how working women's "weaving strategies" contribute to risks for child development.

In the second chapter in Section Four, Greer and Morgan examine stereotypes of employed mothers and linkages to work-family conflict and work-family enrichment. The authors provide evidence demonstrating the existence and prevalence of four types of stereotypes associated with working mothers. Based on a large scale quantitative survey, Greer and Morgan utilize stereotyping theories and discuss how mothers' perceptions of stereotypes held by their managers influence task assignments. The authors further use role-theory based frameworks and show that

endorsement of stereotypes relates to negative well-being outcomes among mothers.

In the third chapter of Section Four, Bruk-Lee, Albert and Stone examine breastfeeding among working mothers, its relationship to organizational policy, and its impact on family well-being. From a public health perspective, breastfeeding constitutes a crucial maternal behavior with long-term consequences for mothers, children, and societies overall. Still, breastfeeding rates in the United States and many other countries are lower than what is recommended by physicians and public health officials. In their chapter, Bruk-Lee et al. examine the impact that the workplace has on the lactating working mother. In particular, the chapter summarizes the findings supporting the numerous personal and organizational benefits for lactation programs in organizations. Further, the authors review the workplace characteristics shown to relate to breastfeeding duration rates. Novel research investigating the role of workplace support for breastfeeding on the working mother's psychological well-being and job attitudes is also presented, along with a discussion of much-needed intervention research in the area of breastfeeding at work. Bruk-Lee et al.'s chapter on breastfeeding represents a discussion of a topic that has not found its way into the mainstream literature in organizational behavior or work psychology, but that has significant ramifications for organizations, families, and society at large.

The fourth chapter in Section Four, by Hill, Thomas, English and Callaway utilizes a role-theory grounded framework to examine childcare challenges associated with women's return to work. The authors provide an overview of the types of childcare arrangements commonly used by new mothers, and integrate prior research that investigates the influence of the different child care arrangements on parents' work arrangements, perceived productivity as well as child development.

In the last chapter of Section Four, Ladge, Humberd and McNett focus on the role of fathers in couple's transitions to parenthood. Over the last several decades cultural expectations and ideologies of fathering have shifted significantly. The "new father" or "involved father" discourse has moved us away from the work-focused fathers of prior generations, toward those who are more involved, more nurturing, and more present in their children's lives. Through their chapter, the authors show how new fathers face complex, challenging role transitions that differ in significant ways from those new mothers need to navigate. Using a role theory perspective, the authors support the notion that men's increased child-rearing involvement is at odds with the notion of the "ideal worker". Ladge, Humberd and McNett draw on two empirical studies, the findings of which yield insight into how men experience identity transitions within work and personal domains. In addition, the authors provide recommendations on how managers can facilitate and support their employees' transition into fatherhood and parenthood so that new fathers and their partners are able to realize their full potentials in both the work and family domains.

Note that although we view the role of fathers as crucial in the transition to working parenthood, the majority of this book emphasizes mothers' experiences. In part, the reason for our emphasis on mothers is a more abundant body of theoretical

and empirical research on women's transitions to being working parents. Similarly, this book does not do demographic differences between mothers justice in that only limited attention goes to the experiences of single mothers, or transition experiences of low-income families, or of families with different racial and ethnic backgrounds. We do not view these areas as irrelevant or unimportant, but felt as we were unable to address them in sufficient depth to do them justice, we would not attempt to cover them and risk doing so in a superficial fashion.

In the last section, and in our final, editorial chapter of the book, we highlight themes as they affect the transition to motherhood from multiple stakeholders perspectives, outline opportunities for further intervention-oriented research that is grounded in the theoretical frameworks in this volume, and discuss methodological challenges and opportunities that affect research in this content area. We conclude with a brief outline of a research agenda that can contribute to the successful integration of work and family components to ultimately benefit families and organizations.

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Understanding and Overcoming Challenges Faced by Working Mothers: A Theoretical and Empirical Review

Isaac E. Sabat, Alex P. Lindsey, Eden B. King and Kristen P. Jones

Abstract Working mothers face different sets of challenges with regards to social identity, stigmatization, and discrimination within each stage of the employment cycle, from differential hiring practices, unequal career advancement opportunities, ineffective retention efforts, and inaccessible work-family supportive policies (Jones et al. in The Psychology for Business Success. Praeger, Westport, CT, 2013). Not only do these inequalities have negative effects on women, but they can also have a detrimental impact on organizations as a whole. In this chapter, we review several theoretical and empirical studies pertaining to the challenges faced by women throughout their work-motherhood transitions. We then offer strategies that organizations, mothers, and allies can use to effectively improve the workplace experiences of pregnant women and mothers. This chapter will specifically contribute to the existing literature by drawing on identity management and ally research from other domains to suggest additional strategies that female targets and supportive coworkers can engage into help remediate these negative workplace outcomes. Finally, we highlight future research directions aimed at testing the effectiveness of these and other remediation strategies, as well as the methodological challenges and solutions to those challenges associated with this important research domain. We call upon researchers to develop more theory-driven, empirically tested intervention strategies that utilize all participants in this fight to end gender inequality in the workplace.

Keywords Workplace · Mothers · Women · Pregnancy · Discrimination

I.E. Sabat (✉) · A.P. Lindsey · E.B. King (✉) · K.P. Jones
Department of Psychology, George Mason University, MSN 3F5, 4400 University Drive, Fairfax, VA 22030-4444, USA
e-mail: isabat@gmu.edu

E.B. King
e-mail: eking6@gmu.edu

Mothers are less likely to be hired for certain types of jobs, are paid less for doing those jobs, are less likely to be promoted, and are more likely to experience unequal treatment that leads them to turnover (Jones et al. 2013). These issues need to be addressed given the fact 38 % of the workforce will at some point undergo this transition into motherhood (Williams et al. 2006).

Throughout this chapter, we identify the challenges that mothers and pregnant women face in the workplace as well as offer strategies for overcoming these challenges. First, we will examine the theories that have been identified to explain the unfair treatment that women experience in the workplace in their transition to motherhood. We also provide a review of research studies that demonstrate empirical support for these theories. Indeed, consistent theoretical and empirical evidence supports the notion that mothers face a unique set of challenges in the workplace at all stages of the employment cycle, including recruitment, selection, negotiation, promotion, retention, and leadership. Second, we examine organizational strategies to overcome these challenges, including changes in formal policies as well as informal social cultures. Within this section, we focus primarily on ways to bolster the effectiveness of currently existing strategies. Third, we focus on novel strategies that ally coworkers can engage in to support and advocate on behalf of women in the workplace, such as advocating for more effective work-family policies and confronting instances of prejudice and discrimination. Fourth, we examine strategies that mothers can engage in to potentially counteract the barriers that they face, such as engaging in counter-stereotypical behaviors and providing individuating information.

Within the sections describing organizational, ally, and target remediation strategies, we contribute to the literature by focusing on theoretical underpinnings, future research directions, methodological challenges, and solutions to those challenges in order to provide a useful framework for researchers to draw upon in conducting future research in this area. The ultimate goal of this chapter is to engage all stakeholders in efforts to improve the workplace experiences of women in their transition to motherhood. In the following section, we begin this chapter by providing theoretical and empirical support for the existence of discrimination against working mothers.

Theoretical and Empirical Evidence of Discrimination

Discrimination Faced by Working Mothers

Several theoretical models have been proposed to explain the reasons for discrimination against working mothers. Four of these theories include stigma theory,

the Stereotype Content Model, social role theory, and role congruity theory. These theories explain different facets of the discrimination that is currently experienced by working mothers. Specifically, they assert that discrimination is a product of the specific stigmatizing characteristics of motherhood, the specific content of the stereotypes associated with motherhood, the social roles that have been ascribed to men and women over time, and the incongruity between the motherhood role and the role of an "ideal worker", respectively. We discuss these four theoretical arguments in turn and then outline their existing empirical support.

According to stigma theory, working mothers face discrimination due to the fact that their identities are stigmatized within a workplace context. A stigma is defined as a characteristic that is devalued within a social context (Goffman 1963). Research has since identified various dimensions of stigmatized identities that determine the extent to which they negatively impact interpersonal relationships. These dimensions include the concealability, course, strain, aesthetic qualities, cause, and peril of a given stigma (Jones et al. 1984). One important dimension of stigma is the cause (Jones et al. 1984) or the perceived controllability (Weiner et al. 1988) of a stigma. Based on attribution theory, if a stigma is perceived as controllable, it often elicits decreased sympathy and increased judgment from others. Thus, based on stigma theory, mothers experience substantial stigmatization due to the fact that this identity is viewed negatively within a workplace setting, especially given the fact that this is often perceived to be controllable. As a result, mothers are subject to negative stereotypes and prejudices that often lead to discriminatory outcomes.

A large degree of discrimination against working mothers results from the specific content of the stereotypes associated with this identity. The Stereotype Content Model (Fiske et al. 2002) states that stereotypes exist along two primary dimensions: warmth and competence. When working women transition to motherhood, they risk being subtyped as either homemakers (viewed as high in warmth but low in competence) or female professionals (viewed as low in warmth but high in competence) (Ridgeway and Correll 2004). The dimension of warmth is determined by competition whereas the dimension of competence is determined by status. Status characteristics theory (Berger et al. 1977) suggests that mothers' disadvantaged position in the workplace results from the social status attached to the motherhood role, which detracts from competence-based evaluations (Ridgeway and Correll 2004). Thus, women typically trade perceived competence for perceived warmth as they make the transition to motherhood (Cuddy et al. 2004).

Differential treatment among the sexes with regards to parenthood can also be explained by the social role theory (Eagly 1987, 1997). This theory states that the beliefs that people hold about the sexes derive from their observations of the roles performed by men and women throughout history. Within the U.S. and several other countries, women typically perform the domestic roles whereas men typically perform occupational roles (Shelton 1992). These observed social structures cause perceivers to infer differences in the trait characteristics of women compared to men. Thus, these social roles are a primary cause of gender-related behaviors and

differential treatment of men and women who fall into or violate their prescribed social roles (Eagly et al. 2000). According to this theory, women are viewed as being naturally good at taking care of domestic responsibilities and are encouraged to do so, whereas men are expected to successfully perform their roles of providing financial resources for their families. Thus, while women (especially those with children) are often discouraged from entering high-status positions, men (especially those with children) are often encouraged to do so in order to provide for their families (Eagly et al. 2000). This theory helps explains why men who have children often experience a "paternal boost" in how they are evaluated within an organizational setting.

Lastly, a portion of the differential treatment towards working mothers is due to the perceived conflict in the motherhood and worker roles. Role congruity theory (Eagly and Karau 2002) suggests that the stereotypes of what it means to be a "good mother" are in direct opposition to expectations of "ideal workers". Specifically, people believe that a "good mother" is always there for her children (Kobrynowicz and Biernat 1997), whereas the "ideal worker" (i.e., the most competent worker) foregoes all other commitments in favor of the job (Epstein et al. 1999; Williams 2001). This contrast creates the perception that these two ideals are mutually exclusive or that one cannot simultaneously excel in both roles. Furthermore, this leads to the assumption that as one becomes a mother, she will become decreasingly committed to her job (Ridgeway and Correll 2004).

A plethora of empirical research has corroborated each of these different theoretical arguments. In alignment with stigma theory, research has documented the differential treatment between "mothers" and "others" (Crittenden 2001), with evidence suggesting that on average and controlling for a variety of other factors, working mothers incur a five percent wage penalty per child (Anderson et al. 2003; Budig and England 2001; see Biernat et al. 2004 for a review). This gender gap in wages has been posited as primarily driven by the low salaries of working mothers, as the wage gap between mothers and women without children is significantly larger than the wage gap between women and men (Waldfogel 1998). Field studies have also examined the influence of gender, race, and parental status on job applicant evaluations by sending out identical resumes for accounting jobs and varying these characteristics. Female parents were contacted significantly less than female nonparents, male parents, and male nonparents. (Firth 1982). Thus, in accordance with stigma theory, motherhood is indeed a characteristic that is stigmatized within a workplace setting.

In support of the Stereotype Content Model, Correll et al. (2007) demonstrated that in comparison to both men and women who were not parents, mothers were rated as less competent, committed, and punctual and received lower recommendations for hiring and salary. Similarly, using both a student sample and an employee sample, Heilman and Okimoto (2008) investigated the influence of gender and parental status on participants' ratings of a job candidate and hiring recommendations hiring for a male-typed assistant Vice President position. This study revealed that participants evaluated mothers more negatively than both men and women who were not parents; specifically, mothers were rated lower in

competence and agency and thus were less likely to be recommended for hiring. These results demonstrate that the specific stereotypes associated with motherhood do indeed negatively impact working mothers with regards to their career advancement.

Several studies have also found evidence for a "fatherhood bonus" thereby supporting the tenants of social role theory (Eagly 1987, 1997). A study by Cuddy et al. (2004) examined the effects of gender and parental status on evaluations of competence and warmth. Not surprisingly, female employees without children were evaluated as more competent but less warm relative to female employees with children. However, compared to male employees without children, male employees with children were perceived as equally competent but higher on warmth. Relatedly, a lab experiment by Correll et al. (2007) found that participants rated fathers as more committed, and deserving of a higher starting salary compared to men without children. Thus, in accordance with social role theory, mothers often incur pervasive advancement barriers in the workplace, while males who have children appear to benefit from a "fatherhood bonus" with regard to important workplace outcomes.

Finally, in support of role congruity theory, research has shown that organizations often assume that women are more committed to family than to work. One study found evidence for a role-incongruity bias, such that female employees were perceived to have higher levels of work-family conflict compared to their male counterparts. The results of this study actually found that males reported higher levels of work-family conflict. These inaccurate gender biases persisted even for women who were not married and did not have children (Hoobler et al. 2009). These findings also support the systems-justification theory, which asserts that individuals are motivated to believe in stereotypes that support the status quo (Glick and Fiske 2001). As a consequence, individuals stereotype working mothers similar to ways in which they stereotype housewives (Cuddy et al. 2004).

Despite these commonly held assumptions that mothers are less committed to their jobs, empirical evidence supporting this notion is scant. For example, mothers' commitment as measured by attachment to work identity did not significantly differ from that of other married women and men (Marsden et al. 1993). Furthermore, King (2008) examined not only mothers' and fathers' attitudes towards work and family, but their supervisors' perceptions of their attitudes towards work and family. The study findings suggested that mothers and fathers reported comparable levels of work involvement, commitment, availability, and desire to and flexibility to advance. In spite of this, supervisors perceived mothers as less involved in work and less flexible for advancement, assumptions that partially accounted for the greater advancement of fathers relative to mothers. That is, even though mothers and fathers held similar attitudes towards work and family, their supervisors perceived a disparity in attitudes, ultimately contributing to greater advancement disparities between mothers and fathers. These findings support role congruity theory (Eagly and Karau 2002) whereby mothers are inaccurately perceived to be more committed to their children and less committed to their organizations.

Taken together, these set of theories and empirical findings suggest that negative stereotypes towards employed mothers thwarting their career advancement are not only unjustified, but may also be barring organizations from capitalizing on undiscovered, high-quality talent.

Discrimination Faced by Pregnant Women

The stigmatization against mothers not only emerges when others have knowledge that a female employee has children, it negatively impacts female employees who are on the verge of motherhood. That is, pregnant employees are also perceived as incongruent with the role of an ideal employee. Arguably, these misperceptions occur to a larger degree with pregnant women as compared to working mothers who are not visibly pregnant since pregnancy is a often a visible condition that represents the "epitome of the traditional female role" (Hebl et al. 2007, p. 1499). For instance, participants in one study evaluated the same female employee as more likely to be promoted when they were unaware the employee was pregnant relative to when they were aware of a pregnancy (Morgan et al. 2011). According to the U.S. Equal Employment Opportunity Commission (2011), pregnancy discrimination claims filed in 2011 increased by almost 50 % since 1997. Furthermore, empirical research has demonstrated that pregnant employees experience many forms of negative backlash including discrimination, negative stereotyping, social rejection, and economic disadvantage (Budig and England 2001; Cuddy et al. 2004; Hebl et al. 2007: Williams and Segal 2004).

Because the initial stages of pregnancy represent a concealable stigma, pregnant workers likely face complex decisions about when, how, and to whom to disclose their pregnancies at work. Pregnant workers may be hesitant to tell others about their pregnancy because of the stigma associated with that status, but may also be compelled to reveal their pregnancy to take advantage of valuable resources, a predicament often referred to as the "disclosure dilemma," whereby targets attempt to balance two competing motives, authenticity and self-protection (King and Botsford 2009). As a result, revealing one's pregnant status or pregnancy-related information could make pregnant employees more vulnerable to discrimination, which recent meta-analytic evidence demonstrates is physically and psychologically damaging (Jones et al. 2013). Indeed, recent qualitative evidence suggests pregnant employees downplay or conceal pregnancy-related information in their interactions at work, especially with their supervisors, out of fear that making the pregnancy salient would reduce their power in the situation (Greenberg et al. 2009).

Recent longitudinal evidence suggests the above reasoning echoes the experiences of many expectant mothers. Using a weekly survey methodology, Jones et al. (2013) examined within-person changes in identity management and physical health. Specifically, their results suggested a unidirectional relationship between concealing and physical health wherein concealing led to improved physical health. In contrast, revealing led to declines in physical health and declines in physical

health triggered decreases in revealing. Taken together, these findings suggest discrimination avoidance, rather than need for authenticity, as the dominant mechanism driving disclosure decisions.

Given the plethora of challenges that working women face in their transition to motherhood, we focus the rest of this chapter on outlining strategies that organizations, allies, and targets can engage in to remediate this form of workplace discrimination.

Organizational Strategies

Organizations have the opportunity—and arguably, the obligation—to develop strategies that proactively curtail discrimination towards pregnant women and new mothers. These efforts likely begin at the macro level with policies and practices that are explicitly developed and implemented with this goal in mind. Such policies would also help to shape normative expectations and values that are communicated to employees through supportive organizational cultures. In line with this, we first describe several organizational policies that support women and then consider the elements of climate or culture that reinforce supportive policies.

Formal Policies

A number of organizational policies may be particularly attractive to pregnant women and new mothers to directly help with the practical challenges of balancing work and pregnancy/motherhood demands such as flextime, compressed work weeks, telecommuting, part-time work, concierge services, onsite, emergency or subsidized child care services, paid or extended maternity leave, and high quality health insurance. It has also been argued that clear and consistent standards in the implementation of these policies—rather than flexibility to create idiosyncratic deals between particular women and their supervisors—may serve women best (King and Botsford 2009). As a whole, these kinds of activities have been found to reduce women's experience of conflict between work and family (Butts et al. 2012). Unfortunately, we are not aware of any evidence directly confirming that pregnant women and new mothers necessarily encounter less discrimination in companies that offer such policies.

Some indirect evidence suggests that the proportion of women in an organization—particularly within its highest levels—might relate to women's experiences. Overall, women who work in male-dominated organizations may experience social isolation and gender role exaggeration (Kanter 1977; King et al. 2010). But even in female-dominated organizations, women tend to be underrepresented in positions of power (Valian 1998). A Catalyst study of Fortune 500 companies found that a strong predictor of women's advancement in an organization is the proportion of

women on the Board of Directors (Catalyst 2008). However indirect, this implies that women may experience less discrimination in companies that not only employ, but instead consistently promote women into positions of power. This can be explained by the theory of ingroup favoritism, which suggests that individuals typically prefer members of their own ingroup (Aronson et al. 2010). Because of these pervasive biases, having increased gender diversity in leadership positions in charge of hiring and promotion decisions naturally reduces gender discrimination through the organization.

The strongest evidence we have seen to date suggests that policies are the most influential in determining the success of women (and minorities) to the extent that there are structures of accountability in place (Kalev et al. 2006). Structures of accountability involve a specific role, position, or office that is directly accountable for equality (e.g., a Chief Diversity Officer). In a longitudinal study of over 700 companies, companies with such structures in place earned significant growth in the proportion of women (and minorities) in managerial roles. This study further showed that, although women might benefit in less formal ways from mentoring programs, diversity and sexual harassment training activities, and employee resource groups, these kinds of programs did not ultimately correlate with the growth in the proportion of women in managerial roles. Taking these findings together, policies and programs may only be successful in curbing discrimination toward pregnant women and new mothers to the extent that formal structures of accountability are in place to support their availability and enforcement. Moreover, the effectiveness of organizational strategies may be further enhanced through supportive organizational cultures.

Informal Culture

Policies and structures may do little to support pregnant women and new mothers if they are offered in hostile contexts. Indeed, a recent meta-analysis determined that family-supportive organizational perceptions transmit the effects of family-friendly policies on job outcomes (Butts et al. 2012); in other words, outcomes of family-related policies are achieved in part through individuals' interpretations that such policies convey support for families. Reductions in stereotypes about and bias toward pregnant women and new mothers may similarly be achieved in part through the signals that family-supportive organizational cultures send to employees. That is, people who work in the contexts of family-friendly cultures likely learn that the norms and values of an organization should reflect support for women and families.

Thompson et al. (1999) defined work-family culture of organizations 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" (p. 394). They conceptualized work-family culture as consisting of three components: (1) expectations that work is a priority above family, (2) perceived negative

career consequences for using work-family benefits, and (3) managerial support for family responsibilities. Each is a crucial element of determining an organization's work-family culture (Bailyn 1993; Perlow 1995; Thomas and Ganster 1995). It is important to note that formal and informal components of a family-friendly organization are not entirely independent constructs. It is unlikely that an organization will be perceived to support families if employees do not have, or do not know about, formal policies available to them. In fact, Thompson et al. (1999) showed a direct relationship between the perceived availability of family-friendly benefits and the perceptions of work-family culture.

Across multiple studies, work-family culture has been shown to have meaningful job-related outcomes beyond the effects of formal benefits. In their research, Thompson et al. (1999) found that work-family culture was related to work-family conflict, utilization of benefits, and organizational attachment beyond the effects of the availability of benefits in an organization. Pregnant women who perceived the culture of their organization to be supportive of family were more committed to their organizations and planned to return to work more quickly than those who perceived their organizations' cultures to be unsupportive women (Lyness et al. 1999). Similarly, Allen (2001) found that perceptions that an organization was family supportive affected work outcomes (e.g., work-family conflict, job satisfaction, commitment) over and above the availability of formal work-family benefits and supervisor support.

This finding makes sense given organizational support theory. According to this theory, individuals who sense that their organizations are supportive of them and their needs will reciprocate by caring about the organization's welfare and striving to help the organization reach its objectives. Thus, organizations that are perceived to be supportive will likely experience favorable outcomes for both the employees (such as increased job satisfaction) as well as for the organization itself (such as increased commitment, increased performance, and reduced turnover) (Rhoades and Eisenberger 2002).

It stands to reason that the same cultural forces that help people to balance their work and family demands might also help women overcome the challenges of the transition to motherhood, including reducing the bias they might encounter. Ultimately, it is the human resource professionals, supervisors, coworkers, and subordinates who work with women in their transition to motherhood that must be ambassadors of such policies and culture norms. These individuals must be armed with strategies for acting as allies to pregnant women and new mothers.

Future Research on Organizational Strategies

Although a variety of organizational policies directed at supporting working mothers have been identified, empirical research is still needed to test the effectiveness of these strategies. By conducting such research, scholars can begin to understand which strategies are most effective relative to their cost of

implementation. This type of research would help organizations to more effectively select policies that maximize benefits in supporting working mothers. Although basing research in theory is ideal, researchers in this particular area should use empirically grounded approaches to more quickly and efficiently determine which of the currently utilized organizational strategies is optimal. Indeed, much more empirical and theoretical models are needed within this domain.

An important area of future research is to improve the effectiveness of diversity training programs. Currently, these programs have been shown to produce low levels of effectiveness with results that vary widely from study to study (Kalinoski et al. 2013). Future research may involve testing whether tailoring diversity training to groups that need it the most (such as employees who score highly on tests of implicit or explicit prejudice), framing diversity training programs in certain ways, or allowing for intergroup contact and discussion between mothers and non-mothers can help to improve their effectiveness overall. Scholars in this area should use existing theoretical models, such as organizational support and inter-group contact theories, to help create more effective and valid diversity training programs.

Informal organization cultures that are positive and supportive of working-women have also been shown to reduce discrimination beyond the presence of organizational policies (Allen 2001). Thus, researchers should do more to identify the root causes of organizational cultures that are perceived to be supportive or unsupportive of working mothers. Through this research, we may be able to identify ways to change organizational cultures to be more supportive. Work should also be done to examine the interaction of formal policies and informal cultures that may lead to fair and equitable organizations. Interactive effects could explain the inconsistent findings with regards to the effectiveness of organizational policies and diversity training programs. Indeed, many organizations may institute formal policies simply to receive the financial benefits associated with being perceived as an organization that is supportive of working women. Within these types of organizations, underlying cultural norms of hostility towards working mothers may still permeate. Thus, organizations that do not fully support diversity throughout the recruitment, selection, promotion, and retention phases of the employment cycle may foster resentment from employees that view a mismatch between an organization's espoused values and it's actual treatment of stigmatized employees once they are hired (Lindsey et al. 2013).

Methodological Issues and Solutions Associated with Organizational Strategies

With regards to organizational remediation strategies, we identify four primary methodological concerns. First, research questions on this topic are often limited by our access to organizational data. Organizations are often weary of sharing their

data for the purposes of this research in that our analyses may uncover severe underlying issues related to discrimination, which in their eyes, may lead to negative public perceptions and the possibility of legal action. Second, in order to truly test cause and effect relationships, organizations would have to allow for manipulation versus control-group designs. Organizations often focus solely on receiving immediate benefits to the programs and policies that they institute, and thus, they are often resistant to a design that would partially delay those benefits. Third, in order to examine differences in organizational cultures, researchers would need to acquire data from multiple organizations. Due to the difficulties associated with collecting data from a single organization, research that examines variations among organizational cultures can be extremely challenging. Fourth and finally, research on the transition to motherhood is inherently dynamic in nature. As such, we need more advanced methods to be able to better understand the experiences of women throughout this transition. Also, the examination of remediation strategies requires that we study decreases in discrimination over time. Thus, it is important yet difficult to acquire longitudinal data from participating organizations.

To overcome these issues, researchers must strive to form more long-standing research-practitioner interdisciplinary partnerships (Kossek et al. 2011). Researchers must demonstrate that caring about the effectiveness of supportive policies is important to an organization's bottom line. By doing so, organizations will be more willing to work with researchers to test different strategies to improve conditions for working mothers. Through increased partnerships, researchers may be able to test these theories across several different organizations, using manipulation versus control group designs, across long periods of time. Researchers must demonstrate that using more rigorous methodologies (such as longitudinal, experimental designs) are most effective for understanding the true causal relationships among variables that the organizations are interested in. By doing so, they will be able to conduct studies that provide meaningful impact to an organization's current needs in reducing discrimination and improving conditions for working mothers.

Ally Strategies

In this section, we discuss strategies that allies (e.g., male colleagues and female colleagues without children) can use to aid in the goal of reducing discrimination against pregnant women and mothers in the workplace. Relative to strategies that targets can use, far less research attention has been devoted to prejudice reduction strategies that can be employed by allies. However, we argue that allies have an important role to play in discrimination reduction efforts. Specifically, we will discuss the ally strategies of prejudice confrontation and engaging in advocacy behaviors.

Prejudice Confrontation

One strategy that has shown some promise is that of prejudice confrontation, which can be defined as "verbally or nonverbally expressing one's dissatisfaction with prejudicial and discriminatory treatment to the person who is responsible for the remark or behavior" (Shelton et al. 2006, p. 67). This strategy does not have to involve heated encounters and instead could be enacted by blowing off an inappropriate joke or asking a perpetrator to refrain from making disparaging remarks about a given stigmatized group. Importantly, confrontation has been shown be effective in terms of reducing prejudice when used by targets of prejudice as well as their allies (Czopp et al. 2006).

Importantly, confrontation may be even more effective when coming from allies than when it comes from members of a target group. As an example, women who confront prejudice against other women are often ignored and viewed as complainers whereas men who confront are often seen as authoritative and objective. Although empirical work has yet to support this notion, attribution theory (Weiner 1980) can provide us with some direction as to why this may be true. On one hand, when confrontation is coming from a target of discrimination, people may label that individual as a whiner or complainer who is only confronting because she possesses the stigma in question and thus is motivated to confront by this sensitivity. On the other hand, when confrontation is coming from an ally no such attribution can be made. Thus, individuals may be more likely to take confrontation behavior coming from non-stigmatized allies more seriously due to these attributional processes.

Not surprisingly, both targets and allies report that they do not actually confront as often as they think they should. This is particularly true when they do not believe their confrontation will make a difference, or when they perceive that there may be social costs for confronting (Good et al. 2012; Rattan and Dweck 2010), which may be particularly salient in a workplace environment. This is problematic and alarming, given that discrimination has negative psychological consequences for targets and allies alike. Indeed, research has demonstrated that bystanders experience emotional discomfort when witnessing discrimination (Schmader et al. 2012). So, the question remains: How can we encourage allies to confront the discrimination they witness in the workplace?

Drawing from work on bystander intervention, the *confronting prejudiced responses* (CPR) model proposes several barriers that might prevent individuals from confronting, even when they feel as though action should be taken (Ashburn-Nardo et al. 2008). In order to overcome these barriers, the authors make the following recommendations to promote confrontation in our workplaces: (a) increase the detection of discrimination through workplace education, (b) help people understand that discrimination is serious and needs to be dealt with immediately, (c) empower individuals to increase perceptions of personal responsibility, and (d) teach people how to confront through social modeling and practice (Ashburn-Nardo et al. 2008). If the obstacles to confrontation can be overcome, it could lead to a naturally self-regulating workplace where allies reliably

communicate that prejudice is not to be tolerated. These confrontation behaviors are likely to reduce discrimination through the theory of social norm clarity, which posits that individuals can serve as effective communicators of information regarding the social appropriateness of attitudes, and that these social norms likely influence an individual's subsequent attitudes and behaviors (Martinez 2012; Zitek and Hebl 2007).

Advocacy Behaviors

Advocacy behaviors involve showing outward support for pregnant women and mothers in the workplace (Washington and Evans 1991) that move beyond passive tolerance to active engagement in the effort to change societal norms and influence organizational policies. Unlike prejudice confrontation, these behaviors are directed at organization as a whole rather than specific perpetrators of prejudice. Advocacy behaviors that should specifically help pregnant women and mothers center on calling for better and more progressive organizational policies discussed previously in this chapter.

Allies can and should engage in advocacy behaviors that involve calling for better policies and practices from their organizational leaders. Organizations may adopt more proactive and supportive policies if employees advocate for them due to cognitive dissonance theory (Festinger 1957). This theory asserts that individuals are motivated to reduce any discrepancies that they may have between their attitudes and behaviors. Thus, if organizational leaders are made aware that their current policies and practices do not support working mothers, they may be motivated to change these policies if they view themselves and/or their organizations as egalitarian and supportive of women. In the past, employers have typically begun adopting more supportive policies towards minority groups (e.g., women and African Americans) only after social and political movements had encouraged them to do so (rather than being motivated by economic factors or formal legislation.) Thus, allies can be an influential driver in changing organizational policy regarding pregnant women and mothers if they advocate for better and more progressive organizational policies (Brooks and Edwards 2009; Ruggs et al. 2011; Sabat et al. 2013).

Future Research on Ally Strategies

The study of behaviors that supportive coworkers can engage in on behalf of working mothers is a relatively new field. Research on ally behaviors in general is scant, and there is definitely a need to quantitatively examine the effectiveness of the behaviors discussed above in supporting working mothers. Researchers should continue to examine strategies to help allies overcome the barriers that they face in

confronting prejudice, such as modeling confrontation behaviors within diversity training videos or determining ways to reward confrontation behaviors within the workplace. More research is also needed to understand the different styles of confrontation that lead to the most optimal outcomes in terms of prejudice reduction and behavior change.

Researchers should also continue to examine new possible strategies that allies can engage in to remediate discrimination. We note two strategies in particular that have been suggested by organizational researchers, but have not yet been tested. These include acknowledging one's ally status to others even before any disclosures of pregnancy or motherhood have been made (Sabat et al. 2013). Thus, individuals within the organization who conceal their status or who may one day become pregnant or mothers will feel more freedom to reveal their potentially stigmatizing identities within the workplace. Additionally, expressing increased positivity towards working mothers may also help to support women in their transition to motherhood. Indeed, studies suggest that demonstrating high levels of support towards pregnant women (and other concealable stigmas) will lead to more frequent disclosing behaviors and improved psychological and organizational outcomes (Jones and King 2013).

Methodological Issues and Solutions Associated with Ally Strategies

Current research on ally strategies to remediate discrimination against working mothers suffers from a variety of methodological challenges. Primarily, these challenges stem from the fact that this research area is relatively new. Thus, it suffers from a severe lack of empirical, quantitative studies that experimentally test the effectiveness of different strategies. The few studies that do examine relationships beyond case studies and qualitative analyses of ally behaviors are typically conducted in laboratory settings that utilize convenience samples of undergraduate students. Thus, they often lack ecological and external validity. Additionally, Studies that examine target perceptions typically use indirect measures of constructs that are inherently difficult to measure and often obscured by a variety of self-enhancement biases. As an example, it is difficult to obtain accurate self-report measures of subconscious biases or prejudices, and researchers continue to debate the validity of currently used measures, such as Implicit Association Tests (for a review, see Fiedler et al. 2006). Self-presentation also impacts the accuracy of surveys measuring ally behaviors, such as inaccuracies found in self-report measures on the degree to which allies have confronted instances of prejudice in the past.

More research is clearly needed that empirically test the differential effectiveness of ally strategies. Researchers should work hard to recruit large enough sample sizes of working allies to quantitatively analyze more complex relationships among

these variables and organizational outcomes of interest. Researchers must also be weary of the biases associated with responses to currently used measures, and use caution in framing their questions in order to improve the overall validity of their findings. More specifically, we recommend that researchers use manipulations and designs that are both deceptive in nature in order to circumvent the self-enhancement biases that cause inaccuracies in responses and representative of actual ally behaviors that can be implemented within a workplace setting. It is important to acknowledge the real-world barriers that allies may face in trying to engage in these strategies [such as those proposed by the CPR-Model of Confrontation (Ashburn-Nardo et al. 2008)]. By doing so, researchers will be able to develop and test strategies in a scientifically valid way that empirically demonstrate the relative effectiveness of these strategies. This will help to engage this underutilized resource in efforts to remediate discrimination against working mothers.

Target Strategies

In this section, we discuss strategies that pregnant women and mothers can use to reduce the prejudice and discrimination that they may face in their organizations. Although we do not wish to place the burden of prejudice reduction on pregnant women or mothers, it is important to consider strategies—including individuation and acknowledgment—that women can use to protect themselves from such manifestations of prejudice.

Individuation

According to social categorization theory (Fiske et al. 1999), people can form impressions about others based on individual, personal characteristics (bottom-up processing) or based on group-level characteristics (top-down processing). Due to the tendency to prefer ease and efficiency, perceivers typically rely on these group-level stereotypes to form impressions (Fiske et al. 1999). These social categorizations often influence how people think (cognitive stereotypes) and feel (affective biases) about others (Dovidio and Hebl 2005). However, social identity theory (Tajfel and Turner 1979) and self-categorization theory (Turner 1985) assert that when personal identity is made salient to others, perceptions are more likely to be based on individual characteristics, and a person's individual needs, standards, beliefs, and motives are more likely to be taken into consideration (Dovidio and Hebl 2005). Thus, an effective strategy for pregnant women and mothers to reduce discrimination may be to simply provide additional information that will emphasize their personal identities, a strategy known as individuation. This individuating information can be positive and/or counter-stereotypic in order to de-emphasize the

negative group-based stereotypes associated with their stigmatized identity. Importantly this impression management strategy has been shown to be effective, particularly for individuals possessing stigmas that are visible and deemed to be controllable (e.g., pregnancy, obesity; Fiske and Neuberg 1990; Singletary and Hebl 2009). We outline five empirical studies demonstrating the benefits of this strategy.

First, an early study by Eagly and Karau (1991) found that in the absence of other information, both men and women were likely to prefer male leaders due to gender stereotypes and implicit leadership theories stating that males fit better with prototypes for effective leaders than females. However, once more information on the candidates was provided, both men and women were less likely to rely on gender stereotypes when indicating their preference. Second, a field experiment showed that obese targets experienced less discrimination when they engaged in counter-stereotypic behaviors refuting stereotypes that they are lazy (King et al. 2006). Third, highly successful female leaders were evaluated more positively when they counteracted the stereotype that successful female leaders are not very communal (Heilman and Okimoto 2007). Fourth, a field study found that pregnant female applicants were able to reduce the amount of interpersonal discrimination that they experienced when they provided counter-stereotypical individuating information about their level of commitment and flexibility (Morgan et al. 2013). Fifth and finally, an fMRI study by Wheeler and Fiske (2005) indicated that participants engaged in more deliberative processing of information when they were instructed to look for unique information about racial out-groups. This last finding should not be overlooked, as it indicates individuation actually prompted less biased processing at the neurological level.

It is important to note that individuating information is likely something that coworkers and supervisors often naturally gain over time. Indeed, indirect support for this notion can be drawn from work on intergroup contact, which generally shows that groups start to evaluate each other more favorably after extended periods of contact (Pettigrew and Tropp 2006). Thus, the usefulness of individuation as an impression management strategy is likely maximized if used during the selection process or early in one's tenure at an organization.

Acknowledgment

Another impression management strategy that has shown some promise in terms of reducing experiences of discrimination in the workplace is acknowledgement. Acknowledgement can be defined as recognizing a given stigmatized identity outright when interacting with others. This strategy is thought to be effective because it draws evaluators' attention away from the stigma and allows them to focus on more important, job-related information. Importantly, extant theoretical and empirical literature has supported this rationale and the use of acknowledgement as a prejudice reducing strategy. Self-verification theory asserts that people

strive to have others view them similarly to the ways they view themselves (Swann 2011). Thus, identity management strategies that promote self-verification are likely to lead to more beneficial intrapersonal and interpersonal outcomes.

An empirical study by Hebl and Skorinko (2005) evaluated the effectiveness of acknowledgement of stigmas on interview evaluations of individuals with disabilities. Findings revealed that acknowledgement did improve applicant evaluations, thus supporting the notion that acknowledging a visible stigma and getting it out in the open can allow evaluators to focus on more important and job-related information as opposed to focusing on stigmatizing characteristics. Although this strategy has shown some promise in research, we must provide an important caveat that this strategy has only received support for reducing prejudice against stigmas that are deemed to be uncontrollable. Given that both pregnancy and motherhood are stigmatized identities that are viewed as controllable, acknowledgement may actually backfire by further activating these stereotypical beliefs. Thus, further research is needed to more directly evaluate the effectiveness of this strategy for pregnant women and mothers in the workplace.

Future Research on Target Strategies Finally, researchers should continue to study pregnancy as well as motherhood in terms of how targets manage their visible or invisible stigmatized identities in the workplace, as well as the intrapersonal and interpersonal outcomes. Because the visibility of pregnancy changes over time, one future consideration of researchers in this field may involve the timing of disclosure. Research on the timing of stigma disclosure to this point has been limited and mixed, but it does suggest that based on the specific characteristics of the stigma, there may exist an ideal time in one's tenure to reveal a stigmatized identity in the workplace.

A study conducted by King (2008) asked both homosexuals and heterosexual others to describe the best disclosure experience that they had ever experienced. This study revealed that disclosure timing is important for predicting a positive disclosure experience for heterosexual others. Specifically, the authors were able to show that the disclosure experience was typically more positive for heterosexuals when the disclosure happened later (rather than earlier) in their relationship with the homosexual target (King 2008). A similar experimental study analyzed the effects of timing of disclosure by having participants watch recorded interviews of a gay man that they believed they would be working with on a subsequent task in the lab. Results from this study largely replicated the results from the King (2008) paper in that heterosexuals generally reacted more positively to disclosures when they occurred later in the interview process. More specifically, the study showed that male participants formed more stereotypic impressions, displayed more negative responses, and reacted more aggressively to the gay male in the video when disclosure occurred early (as opposed to late) in the interview process (Buck and Plant 2011). These two studies seem to provide evidence for a primacy effect (Asch 1946) in relation to the timing of disclosure decisions.

On the other hand, the study examining the effects of acknowledgement of a physical disability found that earlier disclosures were actually more effective than

later disclosures (Hebl and Skorinko 2005). Conceptual papers specific to the disclosure of pregnancy have also suggested that later disclosures of this identity would elicit more negative interpersonal outcomes given that the targets may be viewed as withholding important information that may impact the job performance of the interaction partner (Jones and King 2013; King and Botsford 2009). Earlier disclosures of pregnancy may therefore be viewed more favorably by others given the fact that these types of disclosures would allow for more planning and would be perceived as more fair overall. Clearly, more research is needed on the impact of the timing of disclosures of the stigmatized identities of both pregnancy and motherhood in the workplace.

Researchers should also continue to test the effectiveness of current and new strategies from both the perspective of the stigmatized individuals as well as from the perspective of their interaction partners to ensure that there is alignment in the types of strategies that are viewed as effective from both perspectives.

Methodological Issues and Solutions Associated with Target Strategies Several methodological issues plague research on target remediation strategies. First, studies on this topic are typically limited to single source survey data. In order to truly test strategies that targets can engage into improve the differential treatment that they experience, researchers must be able to examine actual employee interactions using multi-source data. However, studies examining the extent to which pregnant women conceal their pregnancy, for instance, would not easily be able to obtain ratings from both pregnant women who conceal and their coworkers or supervisors due to privacy concerns. Second, it is often difficult to obtain large enough samples of participants who are eligible to participate in these types of studies. Quantitative research on target strategies requires large datasets of employed, self-identified pregnant women or mothers. Also, it is difficult to obtain generalizable target samples that demonstrate variability in the extent to which targets have disclosed their stigmatized identities to others. These difficulties are often compounded in research that attempts to examine the intersection of multiple stigmatized identities (such as research on ethnic minority working mothers).

Despite these methodological challenges, progress has been made and researchers should continue to seek new and innovate ways to advance this scientific endeavor. To combat the issues specified above, researchers should use a combination of multiple different methodologies (such as survey studies, lab studies, and field studies) and multiple sources of data in order to triangulate their results across different samples. This would eliminate the challenges associated with the single-source nature of current strategies.

Researchers should also develop new and innovative ways to recruit target samples. New online survey recruitment platforms have been developed, and these may allow researchers to better target specific sub-populations that are of interest. Specifically, these strategies may be helpful for recruiting targets that have not yet disclosed their stigmatized identities (such as pregnancy). Non-disclosed targets may also be more likely to respond fully and accurately in these anonymous

surveys when recruited in this way, compared to more traditional methods of organizationally distributed surveys or snowballing techniques.

Combining Strategies

It is important to study remediation strategies from the perspective of organizations, allies, as well as targets in order to maximize efforts to reduce prejudice. Researchers have begun to address these research questions, yet little work has examined the joint impact of these strategies. Researchers should examine the interaction of these approaches, to understand whether workplaces that utilize a combination of these three approaches witness the most optimal outcomes. Potential crossovers are apparent; diversity training programs may help to improve organizational cultures by also teaching mothers about how to best manage their own identities as well as instructing allies how to identify and effectively confront instances of discrimination.

Accomplishing this feat would allow organizations, targets, and allies to effectively diminish the barriers causing unequal treatment of mothers and fathers in the workplace. In doing so, we can continue to create organizations that improve the workplace experiences of all stigmatized minorities.

Conclusion

The current chapter serves as an overview of the different challenges faced by women in the workplace as they journey to become mothers. Pregnant women and mothers face unwarranted negative workplace consequences due to prescriptive and descriptive stereotypes of mothers being more committed to their children than their careers. Several well-established theoretical models explain the reactions to pregnant women and mothers in the workplace, including stigma theory, Stereotype Content Model, social role theory and role congruity theory. Despite this, there does not yet exist an overarching theory that explains how individuals and organizations can improve these reactions. Gender and parenting roles are so ingrained within our social structure (and arguably, within our biology) that there is not a simple solution for their transformation. Despite the inherent theoretical and methodological difficulties, researchers should continue to investigate effective theory-driven strategies to overcome these issues from all possible perspectives in order to maximally improve the equitable treatment of all working mothers.

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Identity and the Transition to Motherhood: Navigating Existing, Temporary, and Anticipatory Identities

Danna N. Greenberg, Judith A. Clair and Jamie Ladge

Abstract Over the past two decades, there has been extensive research across diverse disciplines exploring the treatment of pregnant women in the work context (Gatrell in Human Relations 1–24, 2013). One of the most significant challenges women experience during pregnancy relates to their ability to manage their evolving sense of self as work and motherhood intersect—often for the first time. Pregnant working women are undergoing an identity transition that relates to three distinct, and often conflicting, identities: their *existing* professional identity, their *emerging* mothering identity, and their *temporary* pregnancy identity. In this book chapter, we engage an identity based perspective to explore this transitional period of pregnancy for working women and how women engage in identity work as they manage the tension between who they are, who they want to be, and who their organizations want them to be. When women are able to successfully navigate this identity transition and establish a strong vision of their future self as a working mother, they are more likely to stay engaged and committed to their professions and be more satisfied at work and at home.

Keywords Pregnancy · Identity · Identity transition · Work-life integration

The term "working mother" is a juxtaposition of oppositional language in which the social status, norms and expected commitment of being a "good mother" are in direct conflict with the expectations of effort, competence, and authority that are required to be an "ideal worker". These competing pressures are often mentioned with regards to the impact they have on issues such as pay and promotion of working mothers (e.g. Correll et al. 2007; Crittenden 2001). For example, the pay

D.N. Greenberg (✉)
Babson College, Wellesley, USA
e-mail: dgreenberg@babson.edu

J.A. Clair
Boston College, Newton, USA

J. Ladge
Northeastern University, Boston, USA

gap between working mothers and non-mothers under the age of 35 is higher than the pay gap between men and women of the same age (Crittenden 2001). Even when human capital factors and workplace factors are held constant, mothers earn less than childless women with an average lower wage of 5–7 % per child (Budig and England 2001).

Beyond their impact on external measures such as pay and promotion, these competing biases also have a significant influence on how working mothers define their self-concept. As women return to work after the birth of a child they often struggle with feelings of inadequacy, and wonder how they will manage the tensions and aforementioned societal contradictions between being a good mother and a good professional (Correll 2013; Cuddy et al. 2004; Johnson and Swanson 2006; Millward 2006). New mothers must reconcile these conflicting feelings and expectations if they are to achieve resolution between their work and mothering identities and form a positive vision of their future self as a working mother (Ladge et al. 2012). While the return to work is an important transition process for new working mothers, we believe questions of identity and reconciliation of competing societal pressures of work and motherhood begin for working mothers long before the birth of their child. For many expectant women, the challenge of managing these competing demands and pressures does not begin the moment a woman puts her child in daycare or the moment she wrestles with a promotion or a need to travel; rather, these challenges begin the moment a woman becomes pregnant and often even before she becomes pregnant (Gross and Pattison 2007).

As many as 80–90 % of women will become pregnant while employed (Johnson 2008) with the majority of these women returning to work following the birth of their child (Chessman Day and Downs 2009; Laughlin 2011). As such it is not surprising that there has been extensive research on the treatment of pregnancy in the workplace across a range of disciplines including psychology, sociology, and management (i.e. Gatrell 2011, 2013; Jones et al. in press; Gross and Pattison 2007). Current research has centered on the negative impact organizations and organizational members have on a women during pregnancy. During pregnancy, working women may find themselves facing termination or denial of promotions, rejection as job applicants, and negative stereotyping due to the conflicting expectations between motherhood and the ideal worker (e.g. Cuddy et al. 2004; Hebl et al. 2007; Jones et al. in press). An expectant woman's colleagues', managers', and customers' responses have been shown to have a significant influence on how women manage their pregnancy while at work (King and Botsford 2009; Jones et al. in press; Ladge et al. 2012).

While it is important to explore the treatment of pregnant women by colleagues, managers, and organizations and the implications these actions have for how a pregnant woman manages her identity, there has been limited research that explores this topic from the perspective of the pregnant working woman herself. The period of pregnancy is a challenging time as she begins the process of balancing the psychological and physiological needs of pregnancy, being an expectant mother, and the demands of work (Gross and Pattison 2007). How a pregnant woman experiences this process and enacts her evolving identity sets the stage for how she

will eventually construct her identity as a working mother and manage the work-life interface. When pregnant women are able to successfully navigate this identity transition process and establish a strong vision of their future self as a working mother, they may be more likely to stay engaged and committed to their professions and be more satisfied at work and at home (Ladge et al. 2012). Despite the importance of the individual to this process, there has been limited research on how expectant working women conceptualize their evolving identities during pregnancy.

We address this gap in the literature as we look at pregnancy from the perspective and experience of the pregnant working woman. Specifically, we engage an identity-based perspective to explore the transitional period of pregnancy for working women. We explore this issue by drawing on extensive qualitative research we have conducted on professional and managerial women's experiences of pregnancy in the workplace. Our research shows that pregnant women experience an identity transition that intersects three distinct, and often conflicting, identities. The transition process begins with the emergence of the *temporary pregnancy* identity. This temporary pregnancy identity is entangled with simultaneous revisions of one's *existing professional* identity and of an *anticipatory mothering* identity. As we explore the intersection of these identities, we also consider how women's different personal and career experiences influence this conceptualization process. Our research highlights the intersection of these three fluctuating identities and the implications this has for pregnant women's evolving conceptualization of the work-home interface.

Literature Review

As this study is focused on how pregnant women conceptualize their evolving, intersecting work and mothering selves, we draw on identity theory and work-life research to form the conceptual basis for our study. As we are interested in women's psychological experience of work-life during pregnancy, we engage identity theory to frame this study rather than role theory. Most work-family research has relied on a role theory perspective and as such has often focused on the competing role and temporal pressures of work-family life while overlooking the cognitive experience of working parents (Ford et al. 2007). As we are interested in pregnant women's understanding of self, we felt it was more appropriate to draw on identity theory to frame our research. Both identity theory and work-life theory are discussed in more detail below.

Identity and Identity Transitions

Scholars conceptualize identity in diverse ways in part because identity draws upon diverse theoretical streams (Petriglieri 2011). Authors need to be careful to define

how they are using identity and the theoretical underpinnings behind the definition they are engaging (Pratt and Foreman 2000). Here we adopt a widely accepted definition that refers to identity as a "self-referential description that provides contextually appropriate answers to the question of 'Who am I?'" (Ashforth et al. 2008: 327). With this definition of identity we also follow the tradition that identity references an evolving, context-sensitive set of self-constructions (Markus and Wurf 1987; Gibson 2003; Alvesson et al. 2008). Inherent to this definition is the expectation that one's self-construction involves multiple, intersecting identities and that identities evolve over time. Both of these points are discussed briefly below.

Research on multiple identities is critical to developing a fuller understanding of an individual's self-conceptualization and how an individual constructs a self-image out of multiple, sometimes conflicting, identities. Psychological research has suggested that most individuals hold between four to seven identities as central to their self-concept at any time and that these identities draw upon diverse group memberships (Roccas and Brewer 2002). Individuals obviously differ in their self-representation of their multiple identities and they differ in the extent to which they may see these identities as conflicting or enhancing (Ramarajan 2009, 2014). At the same time, there is limited research in the organizational context that considers how individuals experience and navigate multiple identities (Pratt and Foreman 2000), in particular concerning the intersection between work and non-work identities.

The evolving nature of identity means that identity transitions are normal to one's identity construction over time. Ibarra (1992: 3) defines identity transition as "…the process of disengaging from a central, behaviorally anchored identity while exploring new possible selves, and eventually, integrating an alternative identity." During the identity transition, individuals often experience ambiguity, angst and anxiety as they find themselves "in-between identities" in a period where their identity feels ill-defined and provisional (Ibarra 2003; Van Gennep 1960). Most organizational scholars who have studied identity transition have primarily focused on work-based transitions that involve the shedding of one work-based identity to adopt a new work-based identity. For example, Ibarra (2003) discusses the example of the identity transition of a psychiatrist who becomes a monk. This conceptualization focuses on identity transition as the movement from Identity A to Identity B.

In our research, we have expanded on this conceptualization as we recognize that identity transitions are not always this simple and that these transitions can involve multiple evolving identities simultaneously. If we assume that an individual's identity is comprised of multiple intersecting identities then it is possible that the adoption of a new identity might not always mean the shedding of a previously established identity. In our earlier work, we refer to this idea as cross-domain identity transitions in which an established work identity A may be altered, not abandoned, in light of a new non-work identity C (Ladge et al. 2012). This definition of cross-domain identity transitions recognizes a more complex process in which one does not necessarily disengage fully from an old work identity, but

rather, applies a new meaning to the work identity in response to a changed non-work identity. As we expand on this idea in light of multiple intersecting identities, it is apparent that organizational scholars need to consider identity transition in a more complex, nuanced manner. In this paper, we explore this complexity in greater depth as we look at three intersecting identities that are in different stages of transition during the professional woman's pregnancy.

Pregnancy and Identity

When individuals experience significant life changes, their sense of self is often called into question (Levinson 1978). Becoming pregnant represents one such life event in which women begin to think about and question who they want to be as a professional, as a wife, as a mother and they begin to conceptualize how they will integrate their new identity as a mother with their previously established identities (Ladge and Greenberg 2015). In particular for professional women, first time motherhood has been identified as a time in which women are questioning who they are, who they should be, and how good they can be as professionals and mothers (Millward 2006; Johnson and Swanson 2006; Buzzanell et al. 2005; Bailey 1999).

Although pregnancy in the workplace is common, pregnant working women still face covert and overt biases (Liu and Buzzanell 2004). In the United States, the occurrences of pregnancy-bias complaints have risen by 40 % in the past decade (Shellenberger 2008). In Great Britain, half of working pregnant women can expect to experience some disadvantages at work (Gross and Pattison 2007). Pregnant women also find their professional identity and legitimacy is attacked in covert ways (Gross and Pattison 2007; Liu and Buzzanell 2004). These injustices arise in part because of the biases organization members may hold against pregnant women. Coworkers often assume motherhood will weaken a woman's commitment to her work performance and her profession (Correll et al. 2007; Gross and Pattison 2007). These covert and overt biases create a complex landscape that pregnant women must navigate.

We explore the changing self-concept of pregnant women in the workplace as we draw upon a multiple identities perspective. In particular, we elaborate on the experience of a cross-domain identity transition occurring as women navigate pregnancy in the work context as described in our prior research (Ladge et al. 2012). In this chapter, we expand on the individual level experience by looking at the stages of transition and the distinct identities that are formed during this process. While other researchers have highlighted how the organizational context may influence a pregnant woman's experiences at work, we expand on this work as we explore how individual differences in a woman's career and pregnancy history also may affect the identity transition process.

Methodology

The data we present here draws from a qualitative study we conducted on first-time mothers' experiences being pregnant at work. Following Miles and Huberman (1994), we chose to use an inductive research approach, as we wanted to build an in-depth understanding of women's experiences of pregnancy from their own perspective. As such, our data gathering and data analysis were guided by an interest in identifying the commonalities and patterns that underlie the pregnant women's experiences as they navigated their organizational context.

We began our research with a pilot study in which we interviewed ten women about their experiences being pregnant at work. Based upon the pilot data and additional literature review, we designed a qualitative, inductive study in which we interviewed thirty women about their experiences being pregnant at work. Women were recruited for this study through a number of venues, including college alumni network groups, human resource professional networks, and local medical and health professionals who work with new mothers.

In total, we interviewed 30 pregnant professional women. All research participants were pregnant with their first child at the time of their interview. We chose to study new mothers because the issues women face with the birth of their first child are more complex and ambiguous than those encountered by experienced mothers (Miller et al. 1996). All research participants were in professional work roles, had at least three years of full-time work experience, and intended to return to work after their maternity leave. All of the participants had completed a college education and over half of the participants had completed a graduate degree. A summary of the demographic data for the research participants can be found in Table 1. It is important to note that for all the women in our study these pregnancies were planned. All of the women were in committed relationships with partners and all wanted a child. While a few of the women got pregnant faster than they anticipated

Table 1 Participant demographics

Age	Mean = 37, range 29–40
Race	82 % Caucasian
	15 % Asian/Asian American
	3 % Multiracial
Organizational level	50 % individual contributor
	50 % manager or above
Organizational tenure	Approximate mean = 5, range = 1.5–15 years
Professional tenure	Approximate mean = 12; range = 7–18 years
Work role examples	Law clerk, project/product manager, IT specialist, consultant, firm partner, financial planning
Industry examples	Accounting, consulting, law, biotechnology, high technology, education, social work, nonprofit, small business owner

and were somewhat surprised, other women had been trying for some time to conceive and had been receiving medical support in order to become pregnant.

Interviews lasted between 60 and 90 min and followed a semi-structured format. Our interview protocol covered three general themes. A first set of questions asked participants to share their thoughts and ideals related to work and pregnancy based on their personal and professional background. We asked women to reflect on their past, present and future as professionals, pregnant women, and working mothers, and the thoughts, feelings and images that arose for them related to these identities. A second set of questions probed women's experiences with their pregnancy and being pregnant at work. A final set of questions explored specific experiences women had had in the workplace related to their pregnancy as well as their strategies for managing their pregnancy in the workplace. All interviews were transcribed, yielding approximately 1200 pages of double-spaced text to analyze.

We coded the data as they were collected and used grounded theory techniques to analyze them (Glaser and Strauss 1967; Strauss and Corbin 1990). We began data analysis by reviewing the transcripts to identify the general themes that women were discussing regarding being pregnant at work. We then focused specifically on the data related to identity transition to identify the general themes that women discussed as they referenced the topic of identity transition (Glaser and Strauss 1967). The authors met to discuss these themes and to review existing research that connected to the themes. The following section highlights the patterns and intersections we found in how women conceptualized the various stages of transition of their pregnancy, professional, and mothering identities.[1]

Findings

The findings from our study support the perspective that women's self-concept as working mothers develops before the birth of a child during pregnancy and likely even before. As the data below shows the process of transitioning to becoming a working mother occurs during pregnancy and involves complex and continual evolution in one's self-concept as one's identity as a pregnant woman, as a professional, and as a mother all evolve. Unlike other identity transition processes in which the focus is on the evolution from one identity state to another, our research shows that the identity transition of becoming a working mother for professionals is more complex as it involves multiple work and non-work identities that are in varying degrees of fluctuation.

Beyond the challenges of integrating a mothering and professional identity, pregnant women were also adjusting to the emergence of the pregnancy identity. What is particularly interesting about the pregnancy identity is that this is a temporary identity that is embedded in a woman's self-concept for a limited time.

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[1]For more details on the methodology please see Ladge et al. (2012).

While pregnancy only lasts nine months, accompanying this experience is an identity that is distinct from motherhood. The expectant women in our study all discussed their adaptation to the emergence of this identity and the physical changes associated with it. We found that the emergence of the pregnancy identity sparks reflection and, often, revision of a woman's professional identity and the emerging mothering identity. Pregnant women did not wait to reassess their professional identity until after their maternity leave; rather, this process began while the temporary pregnancy identity was in transition. Finally, the temporary pregnancy identity also sparks anticipation of one's mothering identity. As expectant women begin to envision their lives as mothers and reassess their lives as professionals in light of their temporary pregnancy identity, these women begin to construct new visions of their future selves.

Below we explain in more detail the simultaneous and intersecting transitioning of these three identities in more depth. While we discuss each identity transition as a separate section, it is important to note that the transition of all three identities is tightly interconnected. In reality, the emergence of the temporary pregnancy identity, the revising of the professional identity and the anticipation of the mothering identity are influencing one another throughout the transition process. How women eventually establish their identity as a working mother is based on how they work through this cross-domain identity transition process (Ladge et al. 2012).

Temporary Pregnancy Identity

While most of the women expressed their excitement about being pregnant, they also voiced their feelings that their temporary pregnancy identity felt like a departure from normal. As Sarah stated, "The challenge is coming to terms for myself with the stress of just being pregnant in general and trying still to be the same person. Whatever that is." Many women used the word "normal" to articulate how they wanted to be seen and how they wanted to see themselves. While temporary, pregnancy represented a departure from these women's normal construction of their identities.

As women began to construct their pregnancy identity, there were three predominant themes that women focused on as influencing their conceptualization of this identity. First, women's experiences of the physical changes of pregnancy often began the process of identifying with one's pregnancy. Women's understanding of their temporary pregnancy identity further unfolded as they considered how to navigate their maternal body in the work context. Thirdly, women's temporary pregnancy identity emerged in how they navigated the public-private boundaries of work. We discuss these three themes in more detail below.

As women developed their temporary pregnancy identity, they also had to learn to navigate their changing physical appearance. While identity transition research often focuses on the emotional and cognitive experience of identity transition, there

is a physical component of the temporary pregnancy identity that is at the forefront. These physical changes can range from increased feelings of tiredness to nausea to food cravings. While there is some disagreement on whether these changes are biological or psychological, they are a part of the physical experience of many pregnant women (Leifer 1980). Even without these physical symptoms of pregnancy, all women will experience a changing body and eventual baby kick. The physical aspect of pregnancy was central to women's emerging construction of their pregnancy identity. As Betina stated, "Well, to be honest it's weird for me to see my body change like this. I feel dumpy all the time. But at the same time I love touching my belly and feeling it move around and kick and watching it grow, even. So it's again, contradictory…" Women were aware that there fascination with their changing body was not as fascinating to their colleagues. As Rosa explained:

> I obsess about being pregnant, obviously, and can't stop thinking about the fact that I'm pregnant, especially when you start getting kicks every ten minutes, but I remind myself that other people are probably a little less interested in the minute by minute play of what's going on in my body…

As we see here, the body can be central to one's self-identity (Giddens 1991). For many women, the physical experiences of pregnancy were the initial triggers that began there emerging self-concept as a pregnant person.

While the aforementioned quotes illustrate that a positive focus on one's baby and changing body enabled women to adjust to their temporary pregnancy identity, for other women it was the negative aspects of their physical body that enabled them to begin to adjust to their pregnancy identity. For some women, as they came to terms with their physical limitations they would let go of their old views of normal and begin to construct their pregnancy identity. As Claire stated,

> And a lot of things obviously have been difficult throughout the pregnancy, being sick and knowing I wasn't working at my full potential. And not being able to always do the things that I could do in terms of - you know, those times I had to bow out of a meeting because I just was so sick I could not be in the meeting. That was very difficult for me. But I really had to take a step back and say, you know what's important? My health is more important than that.

Health concerns often led women to begin a process of adjusting the importance they had been placing on their professional identity to their self-concept as they considered why they had chosen to become pregnant. Through this process they became more accepting of their temporary pregnancy identity.

A second theme that emerged was that pregnant women's understanding of their temporary pregnancy identity arose as they learned to make sense of their pregnant body relative to the professional workplaces. As prior research on the maternal body highlights, it is difficult to mold the pregnant body to fit the idealized images of the controlled, slender professional body (Gatrell 2011, 2013; Haynes 2008). Women often engage in maternal body work as they navigate this disconnect (Gatrell 2013) and it is through this body work that women begin to enact their emerging pregnancy identity. As Paula explains,

I've just tried to remain as professional as possible. So something as little as buying professional maternity clothes. That's the thing I've kind of thought. I need to look professional, regardless if I don't feel like dressing up. I still need to do that. People often ask me how are you feeling, things like that. I'm always quick to say, I'm feeling fine. And not necessarily switch the subject, but let them know that I'm still here and I'm still focused and not - even though inside I wish I was lying in bed at home.

Women accepted, and even in some cases, embraced the physical elements of their pregnant identity while also recognizing that these physical components, be they morning sickness, exhaustion, or changing body, needed to be carefully managed in the workplace so that they were not perceived as a disruption to work and sign of weakness. Women were cognizant of how their emerging pregnancy identity violated the traditional masculine norms of the workplace (Haynes 2008) and therefore many actively managed the contradiction that their maternal bodily image posed to these norms. In the process of managing these disconnects, women's pregnancy identity continued to emerge.

Lastly, women's understanding of their temporary pregnancy identity emerged out of the changing boundary between their private and public lives. Pregnant women often find themselves negotiating the changing borders between their private and professional worlds (Gatrell 2013; Greenberg et al. 2009). While individuals differ in their desire for segmentation or integration of their personal and professional identities (Rothbard et al. 2005), the majority of the pregnant women in this study desired some separation between their professional identity and their pregnancy identity. As Olivia explained, "…just for the sake of being polite I have endured very awkward conversations that really made me uncomfortable. And I don't know why. Why did I let that happen? Why didn't I just walk away." Pregnant women's need for boundary separation is to be expected since segmentation often enables individuals to avoid the conflict and anxiety that arises when personal and professional identities are not compatible (Rothbard and Ramarajan 2009). For pregnant women, the incompatibility between their temporary pregnancy identity and established professional identity arises because the private world of pregnancy and its signaling of sexuality and motherhood directly violate the norms of professionalism (Ashcraft 1999). Part of the challenge of navigating segmented identities was that often a pregnant woman's desire for segmentation did not match the organizational norms. When her coworkers discussed aspects of her personal life that she preferred to keep segmented from work it caused her further discomfort. As Darcy stated, "That's been really funny, you know, just all of a sudden—when you're pregnant, all of a sudden you're just fair game to talk to you about everything." Darcy, like many of the women in our study, had constructed her identity such that there was a fairly distinct boundary between her personal identity and her professional identity. Yet as these women became pregnant, their coworkers would often ask a question that dissolved this boundary. The process of actively managing one's desire for segmentation between one's temporary pregnancy identity and one's established professional identity often acted as a trigger that influenced pregnant women to reevaluate their professional identity in light of their temporary pregnancy identity.

Evolving Professional Identity

As women learned to navigate their temporary pregnancy identity and accept their pregnancy identity as their new "normal," many women began to reflect on if and how their professional identity might need to evolve in light of both their pregnancy identity and their emerging mother identity. While some women were focused on maintaining their professional identity as it had been before their temporary pregnancy identity emerged, many women were already experiencing a shift in their conceptualization and prioritization of their professional identity.

Prior to becoming pregnant, most of the professional women in our study had been highly focused on their careers working long hours, going above what was expected in order to establish their professional identity and to fit into the real, or imagined, norms of the ideal worker (Williams 2000). For some women, scaling back to manage pregnancy needs presented a stark contrast to that of their typical "ideal worker" approach. As Lisa explained,

> But, you know you get to a certain point, where the fatigue, where normally I would push through whatever and I'm less likely to push through anything right now. So I think my desire here at work is definitely going - going down. And where normally I wouldn't put my physical symptoms ahead of anything at work. I'd work through whatever. Now, if the heartburn is just so bad or something then I cut out early. I just don't have - it's just not as important and I'm just not going to do some of that stuff here anymore.

While Lisa is focusing on how the physical aspects of pregnancy are changing *how* she works, we also see her changing how she conceptualizes herself in relation to work. The importance of her work and her professional identity to her self-concept is shifting.

As pregnant women talked about their evolving professional identity they often used the language of shifting priorities to explain their evolving self-concept. Whenever an individual gains more experience and competency in their career, psychological success stemming from work increases which leads to increased centrality of career identity for that individual (Harrington and Hall 2007). As the average age of the women in this study was 36, most of the women were well-established in their careers and their professional identity was important to them. As they began to accept their pregnancy identity, some of the women began to consider the issue of mother-work identity prioritization. As women faced challenges of integrating the demands of their pregnancy at work, they begin to see that they would need to find a way to prioritize the mothering identity in light of their professional identity in the future. This re-prioritization of professional identity relative to pregnancy identity often began with scaling back hours or navigating disruptions to the work day due to doctor's appointments or physical limitations. Elaine stated,

> I was really busting my ass, I was working twelve hour days and only leaving when they kicked me out. And, I don't do it anymore. At like five o'clock, I'm like I have to go home. And, I have a laptop, so I keep thinking well I'll just do the rest of my work at home, but I don't do it. I get home and I have no interest in working, you know. So, I don't think there's

been anything that people can say you dropped the ball in this, you know. But, I really wanted to - I really wanted this (the pregnancy) to be my priority. And it's immediately shifted.

The term "priority" enabled women to clarify how they still felt they were productive and accomplished at work while recognizing that internally they were beginning to see themselves differently as professionals. In their finite sense of self, many women saw their professional identity shrinking as their pregnancy identity expanded.

A small subset of women sought to maintain the same professional identity they'd had prior to the pregnancy, even though they were going through the changes of pregnancy which signaled impending motherhood. However, even for these women, their temporary pregnancy identity led them to reflect on their professional identity. These women were aware that their professional identity could shift and they needed to manage their pregnancy and mothering identity to prevent this from happening. These women carefully managed their interactions with their colleagues and their work in order to keep the organization focused away from the pregnancy and on their work as professionals. Women would typically use clothing, conversations, and nonverbal behavior to carefully construct and preserve their professional identity. As Gloria explained:

> I try to stay extremely professional and I don't really talk a lot about my personal life. So when someone brings something up (about the pregnancy) I give them a very professional response and I don't go on and on about it. I don't want anyone in my work life having a negative impression of a woman because she's pregnant, you know, somehow she's disabled and somehow you have to treat me differently so my expectation and my attitude and my habits are such that people should treat me exactly the same…

In carefully managing how others see her as a professional, Gloria is also articulating how she sees herself. She is focused on maintaining her professional identity as she is aware that the emergence of her pregnancy identity has the potential to change this. So while she is not revising her professional identity, she is reflecting on it and more closely managing it. This reflection process shows that even for women who see their professional identity as unchanged in light of their pregnancy identity, they are actively thinking about the relationship between the two identities.

Anticipated Maternal Identity

The final identity that is in flux during this cross-domain identity transition is the maternal identity. As women adjust to their temporary pregnancy identity and their evolving professional identity, they also begin to consider who they want to be as mothers and how they want to think about themselves as mothers particularly in relationship to their professional identity. Previous research has stated that a woman's sense of self as a mother is established during pregnancy as an

anticipatory parental identity (Leifer 1980). We see this when Mary stated, "So, it's already a conflict without the child even being here. So when I was telling my mother that she was laughing at me. She's like it's starting already and you don't even have the baby yet." Even without a baby to hold or a childcare schedule to manage, pregnant women were anticipating how they might construct their maternal identity and how it would fit with their evolving professional identity.

As women anticipated their maternal identity, they were influenced by many of the societal norms that defined what it means to be a good mother (Fursman 2002; Gatrell 2013; Millward 2006). In response to this societal pressure, many pregnant women struggled with the construct of being a "good" mother and began to anticipate how they would build their maternal identity given these pressures. As Marisa explained,

> I do really want to be a good mother, but I don't think that I'm the type of mother that is going to be at work wishing she was home with her kid. I think that for me I need both spheres. So, I guess what my goal would be is to be able to really separate the two. And when I'm at home, be home. And when I'm at work, be at work…. But I don't know, I wonder how am I going to be a good mother, you know? And, I don't - I haven't figured it out yet,.

The anxiety Marisa is feeling as she anticipates becoming a mother is palpable. It is obvious that she is already considering how she will construct her maternal identity and how it will intersect with her professional identity. She articulates how she sees herself constructing her maternal identity and its relationship with her professional identity but she is concerned about the conflict between her definition of a working mother and what society defines as a "good mother." She is anxious as she anticipates her maternal identity may not be viewed positively in society.

Other women expressed less anxiety around this transition as they used their pregnancy as an opportunity to reflect on what they valued in their lives and to consider their emerging maternal identity in light of these values. As Rachel explained,

> I am thinking about at the end of your life who do you really want to be? What's important to you? What did my parents pass on to me? Who am I? And as a mom - - I think it's a totally different reflection of who I am and that's who I want to necessarily be remembered as at the end of the day, so how important is my career in that identity?

Many women used the pregnancy as a time to reflect on what was important to them and to begin to think about what this means for how they will construct their lives as a working mother.

This quote also illustrates that just as women used the concept of prioritization to construct the relationship between their pregnancy and professional identity, they also used this metaphor to anticipate the relationship between their maternal and professional identity. The recognition of where one's maternal identity would fit relative to professional identity led women to begin to consider how they would enact their lives as mothers.

To summarize, during pregnancy women experienced three overlapping identities that are in varying states of transition. First, women navigated the physical and

psychological challenges of their new temporary pregnancy identity. Although this identity is temporary, it paves the way for the anticipated mothering identity and the emerging identity of becoming a working mother. At the same time, this temporary pregnancy identity forces many women to begin to reconsider, and in some cases alter, their professional identity. We found that some women began altering aspects of their professional identity in anticipation of their mothering identity, while others sought to preserve their professional identity by working harder. Finally, women anticipated their mothering identity and began to conceptualize how they will enact this identity.

Individual Factors Affecting This Identity Transition Process

In our prior research, we have focused extensively on how formal organizational policies and norms or informal interactions with organizational members, influence how women experience the transition to motherhood (Ladge et al. 2012; Ladge and Greenberg forthcoming). In this chapter we want to highlight how women's individual backgrounds influence this process as we were not able to elaborate on this in our prior work. There were two individual factors, pregnancy difficulty and career stage, that strongly influenced how women experienced the intersection between their temporary pregnancy identity, their existing professional identity, and their anticipatory maternal identity. Each of these individual factors seemed to heavily influence how they experienced this cross-domain identity transition process. These factors are discussed in more detail below.

Age played an important role in our findings. Given that challenges of becoming pregnant significantly increase with age, it is not surprising that some of the women we interviewed had trouble getting pregnant. Some of the women discussed years of trying to conceive, the challenges of fertility hormones, and the depression of multiple miscarriages. Yet, the pregnant women who had struggled with issues of infertility often expressed less anxiety and greater clarity as they navigated the cross-domain identity transition process. As Lydia explained,

> it has been so hard for us to get pregnant and stay pregnant, I am really looking forward to being a mom, and working with my husband to try and figure out the best way for me to do that because it will be my most important priority. I want to make sure that I am set up in a way that I can be successful at that, first and foremost, and then figure out the work stuff secondarily.

Some of the uncertainty we saw in prior quotes around how pregnant women expressed the evolving intersection of their professional and personal identities did not exist for women who had experienced fertility issues. Perhaps the extra time, money, and effort that had transpired to become pregnant led these women to be less concerned about potential changes to their professional identity as they had already worked through some of the uncertainties of their evolving identities in their efforts to become pregnant.

The second individual difference that also lessened the uncertainty women felt was career stage. At the average age of 36, many of the expectant women were well-established in their careers. Many of these women, who had worked hard to achieve for years, were aware that they had earned a level of respect from their peers, bosses, and organizations. They had chosen to become established enough in their careers so that they felt more confident managing the intersection between work and non-work identities. Pam explains how she had consciously chosen to focus on her career before embarking on this transition, "I waited 15 years into my career to start a family because I have always been very focused on my career. While I certainly don't know yet what parenthood is going to bring in relation to my career, I am not concerned." While one might see Pam as somewhat naïve about the complexity of the ongoing and emerging identity transitions, she has a confidence that comes from the choices she has made and the respect she has earned around her career. Her calmness comes from the work she has done in her career prior to this transition process. Contrast Pam's experience to Elena who got pregnant while not yet as well-established in her career. "I took this promotion and decided yes I want to focus on my career. And then I got pregnant and then I was like you know can I do both basically? I mean I haven't yet reached the point in my career, where I would have planned on starting a family." Elana's lack of confidence in her current career reputation and accomplishments led her to have greater anxiety about this identity transition process.

For some women, they were actually quite strategic and proactive in how they used their career reputation to navigate the identity transition process. As Julia explained,

> I have taken the initiative to make sure that I clearly establish myself in my career. I've only been here a year and a half, but I've been a top performer. So, I knew I was well established before I go out on leave. But I'm making sure that I have done certain things before I go on leave and planning my path for partner – so if I still decide to continue on that path, I'm not putting myself behind.

While this woman has no more clarity than others regarding her evolving professional identity or how it will intersect with her future mothering identity, she has a confidence about the transition process. She relies on her confidence in her career and her professional reputation to take a proactive approach to manage, rather than be managed, by the identity transitions she was experiencing.

It appears that experiences becoming pregnant and career stage influence how women work through their professional and maternal identities. Both of these individual factors are influenced by age. Some of these women, because of their age, worked hard to get pregnant in the first place, and therefore they felt clearer about the role of their professional and maternal selves. Career stage similarly seemed to afford many women more confidence and status from which they can draw as they need to scale back to manage their pregnancy and future motherhood. As these ideas indicate, age and career stage influence the identity transition process as professional women navigate pregnancy and emerging first-time motherhood and how these new identities will intersect with their established professional identity.

Discussion

The findings from this research expand our current understanding of both work-family and identity theory in multiple ways. To summarize, we find that as women become pregnant for the first time they embark on a unique cross-domain identity transition process in which multiple identities are in different phases of transition at the same time. Multiple identities are changing at once and women are working through questions and concerns that are intertwined. For instance, what does my pregnancy identity imply about my ability to serve as an ideal worker? What will happen to my professional identity as I become more committed to my maternal self? How can I be an ideal mother but also still be a committed professional? This paper also sheds light on the role that individual factors, specifically age and career stage, in the identity transition process that pregnant professional women are experiencing. Our discussion highlights how women who are older and at later career stages have a particular perspective and experience that alters the identity transition process as they navigate a transition into working mother We discuss the theoretical and practical implications of these findings in more detail below.

Identity Transitions: A More Nuanced Understanding

The identity transition process is conceptualized as a straight-forward three phased process. Most research on identity transition is still based in Van Gennep's seminal work (1960) in which he proposes three distinct phases of the identity transition process starting with separation, when an individual disengages from a previous identity; moving to liminality, the period when the individual experiments with their new identity; and ending with integration when the individual incorporates the new social role into their self-identity. Most organizational scholars have implicitly, or explicitly, relied on this stage model as they explore work-based identity transitions (e.g. Ibarra 1992, 2003) Yet, with growing interest among scholars to explore work identities from a perspective that acknowledges the multiple, intersecting identities that comprise an individual's self-concept and affect one's interactions at work (Cuddy and Baily Wolf 2013; Ramarajan 2014), there needs to be more research that considers how multiple identities evolve during the identity transition process.

Our research provides initial insight into this question as we highlight the complexity that arises as multiple identities transition in different timing sequences. In cross-domain identity transitions, where one's work identity is evolving in response to changes in a non-work identity, our research suggests an individual may simultaneously be in periods of separation, liminality, and integration depending on

which identity is in focus. For example, as an expectant woman is *integrating* the temporary pregnancy identity into her self-concept she may create *separation* from her existing professional identity as she considers her emerging maternal identity such that she is in a period of *liminality* with regards to her professional identity. It is evident that the three stage model, while adequate for traditional single-identity transition processes, does not capture multidimensional identity changes that occur when one's work and non-work identities are intersected with one another.

As scholars better appreciate the complexity of multiple work and non-work identities and their implications for organizations, we also need to develop a more complex and nuanced understanding of the cross-domain identity transition process. While our research introduces identity scholars to a more complex transition process, we are not able to develop a more detailed understanding of this complexity with just a cross-sectional research approach. A cross-sectional approach cannot adequately depict how a cross-domain identity transition process evolves and how the fluctuations in the transition process of one identity flow into another identity. Future research must rely on a longitudinal approach in which interviews or diaries might be used to explore how these identities intersect through a transition process that involves multiple identities.

Multiple Identities and Work-Family Research

As the work-family research has evolved over the past two decades to become a more complete, multi-disciplinary research stream, scholars have developed a more nuanced understanding of diverse work-family constructs and their implications for work-family management. In spite of the expansion and clarification of work-family constructs, our research suggests that most work-family scholars still has not given sufficient attention to the identity construct and in particular the need to explore the implications of multiple identities on work-family management. As currently conceptualized and measured, the constructs of work-family conflict and enhancement are primarily focused on role management and the interaction between work and family role responsibilities. While related, we believe identity is a distinct construct as it re-counts how an individual sees themselves and sees the relationship between the multiple identities that comprise their self-construct.

Our research shows during pregnancy professional women are already beginning to reflect upon the centrality and prioritization of their multiple work and non-work identities. They frequently use the term "priority" to talk about how they are and anticipate conceptualizing the relationship between motherhood and professionalism. This conceptualization is influenced by both society and their individual experiences in work and at home. Building off of the research in psychology on multiple identities and identity compatibility (Settles 2006), we believe work-life research would benefit from exploring work and non-work identities in more depth

and from exploring how one's conceptualization of work and non-work identities influences ones management of the work-family interface. This research would enable us to better understand the cognitive interference of the work-family domains which is needed to supplement existing research which has primarily explored this topic by focusing on temporal interference (Ford et al. 2007).

Work-family research can also expand by looking beyond just the interaction of mothering and professional identities to also begin to consider how other identities interact to affect work-family management. Our research shows that age, through its impact on career stage and fertility, strongly influenced this identity transition process. Beyond age, we expect other individual factors such as race, education and cultural background may also influence how pregnant women experience this multiple identity transition process. For example, Cuddy and Baily Wolf (2013) suggest that societal pressures on Black mothers may be reversed such that Black mothers face guilt and perceived selfishness if they do not work compared to White mothers who often face these feelings when they do work. Based on preliminary research, Cuddy and Baily Wolf (2013) suggest that the varied societal norms for White and Black women may mean that race moderates the relationship between gender and working mother biases. With regards to our research, this would suggest that race is an additional identity that needs to be considered in a cross-domain transition. To date, we know of no research that has begun to explored pregnancy and the cross-domain transition process with a focus on the intersection of race, pregnancy, work, and mothering.

Beyond race, there are other individual factors that may also influence this identity transition process. We recognize that our research is focused on a specific population of pregnant working mothers. The women in our sample were all highly educated, older and in committed heterosexual relationships. In addition, all of the women in our study were born and raised in North America. Given the influence that age and career stage had on individual women's experience of the cross-domain identity transition process, we would expect that other individual differences need to be considered further. The experience of single mothers may be vastly different than those in a committed relationship given the career pressures a single mother may experience. Similarly, women who are less well-educated and who are not in professional careers may experience the transition of pregnancy, professional, and mothering identity very differently. Most importantly, countries vary greatly in their support for pregnancy, maternity leave, and working mothers. Powell and colleagues (2009) have discussed the impact that cultural differences may have on women's management of their work-life interface. Similarly, we would expect cultural differences will affect women's evolving self-concept during this transition process. Future research, would benefit from exploring this identity transition process with more diverse populations.

Becoming Pregnant: Expanding the Time Horizon of Work-Family and Identity Research

One of our goals of this research was to expand our understanding of when working mothers begin to manage their work-family interface. Our research highlights that women's understanding of the relationship between their mothering and professional identity begins early in the pregnancy process and that how they eventually integrate their professional and mothering identity into their self-concept is influenced by how they integrated their temporary pregnancy identity into their understanding of themselves. We were not surprised to learn that for some women, their emerging conceptualization of the relationship between their work and non-work identities often begins before conception. This was particularly salient for a few of the women in our study who struggled to become pregnant whose evolving self-concept as mother, professional, and pregnant woman began during the period of infertility.

Unfortunately, women who are experiencing infertility challenges is on the rise in the United States and in the world. In the United States, approximately 11 % of United States women ages 15–44 will struggle with fertility (http://www.womenshealth.gov/publications/our-publications/fact-sheet/infertility.html#b). This number increases with age, with almost 1/3 of women who are over 35 facing issues of infertility. As women struggle with the psychological and physical challenges of infertility and the potential accompanying medical interventions, we would expect they are likely to reconsider the choices they have made to date regarding work and life. We believe it would be valuable to understand how women's experiences during the process of becoming pregnant influence how they experience the identity transition process and begin to construct their vision of their future self as a working mother.

Managerial Implications: Empowering the Pregnant Individual

In discussing how to help managers and organizations better support pregnant women and working mothers, most researchers and practitioners focus on the need to train and coach managers in order to alter their mindset regarding the stigmatization of pregnancy (e.g. Fursman 2002; Jones et al. forthcoming; King and Botsford 2009). Beyond individual managers, organizations also need to look at their policies regarding sick and pregnancy leave along with their organizational culture as all these organizational factors can have a significant influence on a pregnant woman's ability to form an elaborate vision of her future self as a working mother. This in turn will affect the organization's ability to retain mothers post-pregnancy. The organizations that have been the most successful at developing, advancing, and retaining working mothers are those that have put in place an integrated support system that

engages both policy changes around maternity leave and work structures along with mentorship and managerial development (Demirdjian 2009).

While organizational-level interventions are central to providing better support for pregnant working women and working mothers, we also believe there are opportunities for the organization to better empower the pregnant woman to manage this identity transition process and her evolving self-concept. From our research, we found there were just a few participants who took a highly proactive approach to this identity transition process and took actions to begin to enact the intersection between their working and professional identities. As a result of the actions they took, these women appeared to have less anxiety about this transition process and a more positive vision of their future self as a working mother. We believe pregnant women would benefit significantly from more coaching and education on the complexity, anxiety, and challenges that surround this transition process and on how to proactively manage this process rather than be managed by it. In our work with professional women's groups on pregnancy in the workplace, we have used our research to educate women on the identity transition process that happens during pregnancy and to discuss strategies they can take to better manage their own uncertainty in this process and to better prepare for their return to work. For some women, these proactive strategies have included networking with other working mothers about both pregnancy and work-life integration, thinking more strategically about their career in order to position themselves for their next opportunity, talking explicitly with their partner and other family members to begin to tackle their own myths around "good" mothering. Pregnant women will all experience an identity transition process. Providing education and support to pregnant women on how to work through the complexities of this transition process can help to empower them to more successfully enact their working mother identities. More importantly, if more pregnant women push against the norms and societal expectations that challenge their ability to simultaneously execute their roles as mothers and as professionals, they can begin to change the deep cultural norms that bias the workplace against mothers (Correll 2013).

Pregnancy is a pivotal time in the career of a working mother when a woman begins to experience the very real competing demands of being a good mother and a good professional. These competing societal pressures do not just impact the pay and promotion experiences of a pregnant women (e.g. Cuddy et al. 2004; Hebl et al. 2007). Rather, they also impact how a woman understands her evolving identity. Within this context, pregnant women must work through how they are changing as professionals, as pregnant individuals, and as emerging mothers. While pregnant women's individual experiences may differ due to both individual and organizational factors, what most pregnant women have in common is the reality that they are re-assessing their existing professional identity in light of their evolving personal identities. During this transition process, pregnant women begin to form visions of themselves as working mothers. Having an elaborate vision of one's future self as working mothers is what will enable pregnant women to manage, rather than be managed by, the competing demands of motherhood and professional.

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Marissa Mayer: An Analysis of Media Reaction to a Pregnant CEO

Tammy D. Allen, Kimberly A. French and Christina Barnett

Abstract Marissa Mayer made headlines when she became only the 20th female CEO of a Fortune 500 firm in 2012 while also the first woman to take such a position while pregnant. Another firestorm of coverage commenced when she returned to work after two weeks of leave following the birth of her baby. The purpose of the current study is to analyze media and public reaction to a pregnant CEO based on the Mayer case. Using qualitative content analysis, coverage and reaction to Mayer's appointment and pregnancy are used as an inkblot test of current views concerning women's ability to combine motherhood with work. Our findings illustrate the underrepresentation of women in high profile public positions makes them hyper-visible and consequently their personal choices can be seen as about women in general, not just about themselves. While most pregnant working mothers do not undergo the degree of scrutiny faced by Mayer, our findings demonstrate that the motherhood mandate is alive and operational in current society. Implications of findings for future research and practice are discussed.

When Marissa Mayer became only the 20th female CEO of a Fortune 500 firm in 2012, she also became the first woman to ever take such a position while pregnant. Media coverage of the news was widespread. Headlines such as "*The Pregnant CEO*: *Should You Hate Marissa Mayer*" (Forbes, 7/19/2012), "*Marissa Mayer*: *Is the Yahoo! CEO's Pregnancy Good for Working Moms*" (Time, 7/17/2012), and "*Marissa Mayer, Yahoo CEO's Pregnancy Reignites a Perennial Debate*" (Huffington Post, 7/17/2012) help to illustrate reactions. Another firestorm of coverage commenced when she returned to work after two weeks of leave following the birth of her baby with headlines such as, "*Yahoo CEO Marissa Mayer is Making a Huge Mistake by Cutting Her Maternity Leave Short*" (Slate, 10/2/2012).

The purpose of the current chapter is to analyze media reports and reader comments as a way to gauge public reaction to a pregnant CEO via the lens of the Marissa Mayer case. This approach represents a departure from common research

T.D. Allen (✉) · K.A. French · C. Barnett
University of South Florida, Tampa, FL, USA
e-mail: tallen@mail.usf.edu

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methods in organizational psychology that tend to be deductive and primarily focus on individual perceptions and biases. We believe our inductive approach and analysis has the potential to provide insight into broader contemporary societal views regarding women who combine leadership positions and motherhood and consequently reveal unique issues and challenges these women face.

To set the stage, we begin with a brief review of research and theory relevant to motherhood, leadership, and pregnancy. We next present the results of our qualitative analyses. Specifically we identify themes from the media coverage and reader comments of Mayer's pregnancy and her subsequent return to work. Implications of these themes for "ordinary" women who combine work with pregnancy and the transition to motherhood are examined. The chapter closes with a discussion of future directions for research.

Background

Historically women in leadership roles have been subject to stereotypes. Role congruity theory suggests that perceived incongruity between the female gender role and leadership roles leads to evaluating behavior that fulfills the prescriptions of a leader role less favorably when it is enacted by a woman than by a man (Eagly and Karau 2002). In support, a large body of research demonstrates that the characteristics commonly ascribed to leaders are more strongly associated with men than with women (Koenig et al. 2011). These stereotypes hinder the advancement of women into positions of leadership, perpetuating the glass ceiling.

Motherhood amplifies role congruity implications for women's careers, as society not only has role expectations for women, but also for mothers. As articulated by Russo (1976, 1979) societal institutions mandate that motherhood serve as the central component of a woman's identity. Women are required to have children and to serve the every need of those children. Accordingly, the traditional exemplar good mother is one who remains home after the birth of children (Gorman and Fritzche 2002). Moreover, the motherhood mandate rejects the notion that women work to contribute to the financial well-being of the family or for self-satisfaction. Essentially to be a good mother is to be a non-employed mother.

With the advent of attachment parenting and breast-feeding advocacy, motherhood has become further idealized and expectations for intensive mothering have increased (Douglas and Michaels 2005; Loke et al. 2011; Pickert 2012). Some have opined that motherhood itself has become a competitive sport (Martin 2009). The message communicated to women is that to be a decent mother, a woman must devote her entire physical, psychological, emotional, and intellectual being to her children 24 hours a day (Douglas and Michaels 2005). What on the surface appears to be a celebration of motherhood essentially undermines the status of women by turning childrearing into the most elevated of callings and pivoting women out of the workplace (Badinter 2012).

The motherhood mandate is illustrated in research investigating perceptions of employed mothers. Research consistently shows that employed mothers are viewed as less family-oriented, less nurturing, less committed to and less effective at the maternal role relative to non-employed mothers (e.g., Bridges et al. 2002; Etaugh and Folger 1998; Etaugh and Moss 2001; Etaugh and Nekolny 1990; Gorman and Fritzche 2002).

Stereotype-prone judgments regarding combining motherhood with paid work begin at pregnancy (Fuegen et al. 2004). Pregnancy creates a flashpoint at which "womanliness" becomes especially salient and the advent of pregnancy represents a clear departure from the ideal worker norm (Cahusac and Kanji 2014). Norms regarding the ideal worker are framed around the career patterns of the male breadwinner model. Specifically, the ideal worker is always available, has no nonwork responsibilities or interests, and prioritizes work above all else (Williams 2000).

Research shows that pregnant women and mothers are disadvantaged when applying for jobs (e.g., Bragger et al. 2002) and receive lower starting salary recommendations (Correll et al. 2007; Masser et al. 2007). In addition, several studies indicate that pregnant job applicants report experiencing greater interpersonal negativity than do nonpregnant applicants (Hebl et al. 2007; Morgan et al. 2013).

Media Coverage of High Profile Women

Our media analysis approach has been used in the past to reveal sexism. In the 2000 Presidential Republican primary Elizabeth Dole received less coverage on policy-related issues than did her male counterparts (George W. Bush, John McCain, Steven Forbes) (Aday and Devitt 2001). Dole was more likely to receive coverage on personal attributes and attire than were the male candidates. Eight years later sexism was again evident in Hillary Clinton's presidential campaign during which one pundit remarked, "When she comes on television, I voluntarily cross my legs" (Seelye and Bosman 2008).

Women in the public eye and pregnant are held to further scrutiny concerning their fitness as a mother. Jane Swift was pregnant when campaigning to be governor of Massachusetts and later gave birth to twins while in office (Swift 2008). In 2001, she was the first pregnant governor in history, raising the question "*Can Jane Swift fulfill her responsibilities to the public and still be a good mother?*"; a question rarely asked of men (Goldberg 2001). Former Alaska Governor and Vice-Presidential candidate Sarah Palin stated that she hid her pregnancy while Governor over fear that concerns would be raised with regard to her ability to be Governor and be pregnant at the same time (Kantor et al. 2008). Most recently, Loretta Rush was named as the first female chief justice of the Indiana Supreme Court. During interviews she was asked about balancing her responsibilities as a parent and as a jurist, a question that notably was not asked of the three male

candidates for the position (Evans 2014). Such scrutiny is not unique to women in the U.S. Kristina Schröder became the first German cabinet member to give birth while in office and faced criticism concerning the length of her maternity leave (Spiegel Online International 2012). Schröder herself went on to remark on Mayer's pregnancy leave stating that she thought it was a "major concern when prominent women give the public the impression that maternity leave is something that is not important" (Spiegel Online International 2012). In sum, because of their scarcity, high profile women remain the subject of media attention and public scrutiny rooted in ongoing stereotypes concerning the role of women.

Methods

Sample

To conduct our review and analysis, we analyzed a total of 20 online news articles posted in popular online news outlets (e.g., CNN, Slate, The Guardian, The Globe and Mail), as well as online reader commentary in response to these articles. We selected news sites that are among the most popular (e.g., Huffington Post) and that appeal to the business community (e.g., Forbes). Articles were read and added to the sample until data saturation was reached, at which point additional articles did not yield new content above and beyond those in the sample (Miles and Huberman 1994). However, it should be recognized that we cannot infer that our analysis strategy resulted in an analysis that is representative of all media reports on the topic.

The 20 articles were divided into eight segments according to country (U.S. vs. Non-U.S.), time point (CEO Announcement in July 2012 vs. birth announcement in October 2012), and data type (article vs. reader comments). Table 1 displays sampling details, including country, time point, data type, data source, and number of articles/reader comments coded. The same eight U.S. based news outlets were used for both time points. However, non-U.S. based news outlets differed for each time point as we were unable to identify articles from both time periods from the same news agency.

Analysis

All articles were coded independently by two of the authors. The second author served as a facilitator, monitoring the coding process and providing overall feedback on rigor, clarity, and content. The articles were divided by nationality (U.S. vs. Non-U.S.), type of data (article vs. reader comments), and time point (CEO/pregnancy announcement vs. birth announcement). Each combination of

these categories was considered a segment of data. Thus, a total of eight segments of data (2 × 2 × 2) were coded (see Table 1).

An emergent coding strategy was used in which authors developed their own codes independently based on the data in each segment (Miles and Huberman 1994). Informed by the purpose of this chapter, the authors coded themes on reactions to the behavior of Mayer, her ability to function as a mother and a CEO, and anything that spoke to attitudes/stereotypes about mixing motherhood, pregnancy, and career. Each author maintained an Excel codebook with codes, definitions, and exemplary quotes. Codes derived from one segment could be used in another segment if applicable. Each segment was read multiple times in its entirety to identify codes for the segment. Codes were identified using repetition (sentiments repeated multiple times throughout a segment) and constant comparison (grouping of unique sentiments as they arose within segments; Glaser 1965; Miles and

Table 1 Sample structure

Segment	Nationality	Time point	Data source	Number of articles/comments
1	Non-U.S.	CEO	Articles	2
2	Non-U.S.	CEO	The Guardian	102
2	Non-U.S.	CEO	BBC	311
3	Non-U.S.	Birth	Articles	2
4	Non-U.S.	Birth	The Daily Mail	68
4	Non-U.S.	Birth	The Globe and Mail	91
5	U.S.	CEO	Articles	8
6	U.S.	CEO	CNN	171
6	U.S.	CEO	Fox News	0*
6	U.S.	CEO	Forbes	70
6	U.S.	CEO	Fortune	0
6	U.S.	CEO	MSNBC	0
6	U.S.	CEO	Slate	0
6	U.S.	CEO	The Huffington Post	9
6	U.S.	CEO	The Wall Street Journal	11**
7	U.S.	Birth	Articles	8
8	U.S.	Birth	CNN	55
8	U.S.	Birth	Fox News	0*
8	U.S.	Birth	Forbes	0
8	U.S.	Birth	Fortune	0
8	U.S.	Birth	MSNBC	73
8	U.S.	Birth	Slate	0
8	U.S.	Birth	The Huffington Post	89
8	U.S.	Birth	The Wall Street Journal	3

*Did not allow comments
**109 comments were reported on the website, but the coders could only access 11 because they were not Wall Street Journal subscribers

Huberman 1994). The unit of analysis was the segment. Consequently, each individual sentence and/or reader comment was not coded. Instead, the authors pulled exemplary quotes for each code as it was identified during the process.

The two authors met twice to discuss the emergent codes, once for all non-U.S. segments and once for all U.S. segments. Comparing independently derived codes allowed the authors to assess validity and clarity of codes for capturing sentiments expressed in the segments (Armstrong et al. 1997; Miles and Huberman 1994; Ryan and Bernard 2003). All codes that were consistent between coders were noted, and codes that were inconsistent (i.e., one coder created, but the other did not) were discussed and merged with other codes and/or added to a merged master codebook containing agreed upon codes and definitions. Discrepancies were due to hesitancy as to whether codes were relevant or important (e.g., discussion of Mayer's age or physical attractiveness), codes that were slight but distinct variations of one another (e.g., 'Mayer's short maternity leave is hindering maternity leave for others' is a variation of 'Mayer should take more maternity leave to help other expectant mothers'), or codes that differed in specificity (e.g., 'Mayer is stupid' is a subset of 'incompetence as a CEO'). These issues in coder framing are prominent among even the most experienced qualitative data analysts, and do not necessarily indicate a lack of validity in the findings (Armstrong et al. 1997). Of the 48 original unique codes generated, 28 were defined the same between coders. The remaining 20 codes were discussed and agreed upon. In no circumstance was there a code that one of the authors was surprised about or outright disagreed with the alternative author. The authors also discussed and made note of overall impressions that were not captured in coding (e.g., non-U.S. sources did not mention Mayer's husband).

The final 48 codes were then reduced by grouping codes into conceptually broad themes (i.e., qualitative factoring; Miles and Huberman 1994). To create these themes, the lead coder used the cutting and sorting technique (Ryan and Bernard 2003), in which codes were cut and sorted into thematic groups determined inductively by co-occurrence and similarity in meaning; initially, cutting and sorting yielded ten themes. To assess the clarity and validity of these themes, the second coder independently sorted codes into the ten themes based on the theme names and definitions (Ryan and Bernard 2003). Discrepancies in sorting occurred for 14 of the 48 codes. These discrepancies were primarily due to one unclear theme (Mayer's abilities), which was then discussed, redefined, and split into two themes (motherhood choices and CEO). Through discussion, the coders further factored the themes into four meta-themes for parsimonious presentation of the data.

Each author also independently coded source (predominantly in the articles, reader comments, or both) and country (U.S., non-U.S., or both) for all codes to identify patterns in code prevalence for these dimensions.[1]

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[1]Detailed results not presented here. Results are available upon request from the first author.

Results

Final codes, themes, meta-themes, and exemplary quotations are displayed in Table 2. We discuss each of the meta-themes and its subsumed themes and codes in turn.

Gender and Work-Family Performance

Many articles and commenters discussed Mayer's capabilities and choices as a mother, a CEO, and a woman. Most of these discussions centered on the ever-popular question of whether or not women can "have it all" (Slaughter 2012). Some individuals were supportive, pointing out Mayer's numerous qualifications and previous successes working at Google. Others felt Mayer has the intellectual and financial capabilities to provide a good home for a child, noting that her CEO status did not preclude her involvement as a mother. However, these perspectives were generally the minority. Individuals more commonly felt Mayer was doomed to be an absent, work-obsessed mother due to her obligations to the job. Some of the most poignant comments came from Non-U.S. articles, which described Americans (and Mayer) as work-obsessed and selfish, portraying Mayer's "poor child" as a helpless victim. Many also criticized her capabilities as a CEO, commenting that motherhood would detract too much time and attention from the job. In short, the majority of commenters felt Mayer could not have it all, and that she would be naive for thinking she could fully devote herself to roles as both a mother and CEO.

In addition to simultaneously managing performance at work and home, some articles and comments focused solely on Mayer's current and future performance as a CEO. Nearly all objective comments about work performance (e.g., comments about Mayer attending meetings, answering email, making changes at Yahoo) were discussed in U.S. sources. Indeed, six of the eight U.S.-based articles announcing the birth of Mayer's son primarily discussed either Mayer's plans or accomplishments in her role as Yahoo CEO. Focusing on Mayer's work performance communicated competence on the job, and articles that focused on the objective information seemed to portray her in a positive light in comparison to more subjective pieces.

Focusing on CEO performance also highlighted the fact that Mayer's situation is an exemplary glass cliff (Ryan and Haslam 2007). The glass cliff phenomenon occurs when women are promoted to positions that have a high risk of failure (Ryan and Haslam 2007). It is well known that Yahoo is on the verge of failure, and commenters noted that they have cycled through several CEOs in recent years trying to turn the company around. Therefore, her appointment is a high-risk position and may be seen as another form of discrimination against Mayer as a woman and as a mother (Ryan et al. 2007).

Table 2 Qualitative analysis themes and example quotations

Meta-theme	Theme	Code	Example quotation
Gender and work–family performance	Motherhood choices	Bad mother	Poor baby, why have a child when you can't spare it any time to hold it, care for it, and just be a mum. Disgraceful, she should be ashamed not proud
		Not a bad mother	First of all to imply that women that work are abandoning and irrevocably damaging their children is completely offensive to those families where both parents have to work. Are you suggesting that only those rich enough to have a parent stay home can leave children? Secondly not one person on here has any idea what her plans are! How do you know her husband isn't going to stay home? How do you know whether or not her mother is going to care for the child? How do you know anything about what is going to be happening here? Not to mention she has already said she will not be out the normal length of a maternity leave (which I believe is like only 2 months) and even when out would be working remotely. Pleasant? Probably not, but it is possible
		Short maternity leave	"I like to stay in the rhythm of things," she said. "My maternity leave will be a few weeks long and I'll work throughout it"
		Naïve	First of all this women has no idea what she got herself into. Not taking maternity leave, what a great example, I feel sorry for all the women that are working for her. She will denied all the maternity leave paper that comes across her desk. After having a baby you are tired and have less sleep than your body used too. My question is, what is more important the well being of herself and the baby or a company that she works for?
	CEO	Competent	Mayer is a hard-working, highly talented executive with a proven track record. This doesn't suddenly vanish because she's expecting. Yahoo knew they were getting 1.5 people when they hired her
		Incompetence	And Yahoo wonders why its in a mess!! (On its third CEO in no time.) Good luck to Ms Mayer and all who sail in her but do the sisterhood REALLY believe she can give full attention to the job for the next 12 months? (pre and post foaling) I don't believe she can—indeed she is a more rounded person if she cant. Most important lesson from this? Sell Yahoo!
	You can't have it all	CEO incompatible with motherhood	I anticipate she will leave this position post baby for a few years—CEO of any company is a 200 % job that requires significant personal sacrifice—woman or man baby or yacht
		Can't have cake and eat it too	She will be an absentee mother or an absentee CEO. There are only 24 h in the day. Why do women have children if they just want to drop them off at daycare? Great white sharks are more maternal than these women
		Why bother?	Why have a kid if you're not going to raise it?
	Traditional Gender Roles are alive and well	Traditional Gender Roles	And why is this question even coming up? Does anyone ask whether or not a male CEO is a poor father because he isn't staying home full time? I mean come on. Where in the universe is this archaic thinking
		Dad	The key to making this work for both family and Yahoo, according to some of these mothers: a phalanx of nannies, a solid leadership team and a husband ready to shoulder more of the hands-on parental duties

(continued)

Table 2 (continued)

Meta-theme	Theme	Code	Example quotation
	Mayer needs to stay focused on the job	Women should stay at home	Women are good for nothing but making babies
		Glass cliff	Yahoo is in a strategic hole. Anybody taking the job is rather likely to fail. If Ms. Mayer goes the way of previous Yahoo CEOs, a lot of this celebratory press comment will look rather silly
		Yahoo news	Mayer recently held an all-hands meeting with Yahoo's staff to unveil her business strategy, which focuses on expanding Yahoo's user base, talent pool and advertiser partners. She hopes to breathe new life into offerings like Yahoo's aging homepage and its neglected Flickr photo service. She has also shuffled Yahoo's top management and pledged to return $3 billion to shareholders from the sale of Yahoo's Asian assets
		Back to work	Apparently, the new baby hasn't been named yet. Journalist and consultant Jeff Jarvis tweeted that Mayer has emailed a large number of her contacts asking for suggestions for a baby name. That means Mayer's already back online mere hours after giving birth. It seems likely that she won't be missing much work as she recovers
		Business first	Who Cares?????????????? Just do her job and get Yahoo mess fixed...or get out of the way............
Mayer's characteristics	Mayer's characteristics	Unicorn	Maybe she's an outlier—or making a mistake—and shouldn't be held up as an example that mere mortals should emulate
		Wealth and status	The fact that she is very very rich is (obviously) going to be a big help. She, no doubt, already has a full quota of cleaners, gardeners, chefs, and chauffeurs, so she'll just hire extra help for the child. Could she run a major company and raise a family (and make a success of both) without help? Unlikely
		Paying for childcare	The baby was promptly handed to a team of highly-qualified nannies, never to be seen again
		Limited applicability	The vast majority of women going back to work after two weeks have nothing in common with Marissa Mayer. They're dragging their weary butts back to work, and wrapping up their boobs because there's no place to pump at work. They're getting paid by the hour. Or they're military women, like Robyn Roche-Paull, the author of "Breastfeeding in Combat Boots," who went back to work after six weeks because it was required. When her son wouldn't take a bottle, she co-slept with him so he could nurse all night and sleep all day while she was at work
		Job design	They have these things called "computers" and "telephones" now. It's amazing what you can do with them. Why, I've even heard that you can do this thing called "teleconferencing" on them
		Bring baby to work	Business Insider's sources have said that Mayer plans to bring her baby into the office with her. She may even "knock down one wall of her office" to accommodate the little guy
		Age	Mayer, 37, previously has said she would take off just a few weeks of maternity leave
		Workaholic	Seeing Mayer's chosen work-life imbalance might put pressure on all of us to get back to the spreadsheets and clogged inboxes before our bodies and minds are really ready. That seems like a warranted concern to me, both in the general working world and specifically at Yahoo, where Mayer's job is to set the standards

Table 2 (continued)

Meta-theme	Theme	Code	Example quotation
Reactions to motherhood and CEO announcement	Negative implications for women	Setting the bar too high	The one thing I worry about is that some working mothers may try to emulate her a bit. Or that working mothers might feel that they need to be the superwoman executive and ignore those times when they really would want to spend time with their children but feel they can't without feeling they're shirking their working responsibilities
		Hinders maternity leave	Galinsky will be watching carefully to see how Mayer's plans for a brief maternity leave evolve and not only what example she sets, but her explicit messages and policies for the Yahoo workforce around parental and medical leave. "I would be very worried if she didn't figure out ways to encourage other women and men who work for Yahoo to take leave," she says
		Sacrificial cow	In a rather heated email exchange on Monday, some of my Slate colleagues took a libertarian approach to the Great Maternity Leave Debate of 2012, which I'll sum up here as: "Lay off. Mayer should do whatever she wants to do." I agree! She should do whatever she wants to do, but she should want to do something different than what she wants to do. Because it's nuts to ignore that there is a BABY involved here
		Not a role model	"We all applaud her," Slaughter said. "But she's superhuman, rich, and in charge. She isn't really a realistic role model for hundreds of thousands of women who are trying to figure out how you make it to the top AND have a family at the same time"
	Positive implications for women	Breaking ground for women	Yahoo's decision to anoint a soon-to-be mom as its CEO was hailed as a breakthrough for women seeking to prove men aren't the only ones who can balance a high-powered executive lifestyle and early parenthood
		Role model	OK, this woman rocks! I doubt there's a single male CEO out there thinking, "Oh yeah, I could do that"
	What's the big deal?	Why the big fuss?	It is great that Marissa Mayer is pregnant. But intensity of reaction is slightly depressing. Kind of as if they'd hired a yeti
		Pregnancy doesn't matter	There is nothing wrong with her choosing to have a child and continue as CEO. Will she take some time off? Of course. But please explain to me what's the difference between a male CEO taking some time off for medical leave and Mayer having a child?
		Non-Issue if male	If a man had been appointed to that post it would barely have received a brief mention. Because it's a woman, it even gets a discussion on the BBC site. Those who complain that we still don't have equality are right
		Do what she wants	Her choice to take a huge job when she's pregnant isn't going to hurt you, or your daughters, or women in general
		Yahoo doesn't care she has a baby	She clearly is working in an environment that will accommodate her family life. The type of work she does and the people she works with and for will be progressive enough and open to working with a baby in the room with them. She also has the resources to make it work for her....the vast majority of us don't have these options and in most situations it wouldn't be appropriate so I won't be too judgmental on this woman or family. Good for her

(continued)

Table 2 (continued)

Meta-theme	Theme	Code	Example quotation
		Old Hat	I am bemused at the idea that women can't work and be mothers. The idea that women rarely worked outside of the home over 50 years ago is just ridiculous. Many women were maids, washerwomen, etc. and worked 12–14 h a day away from their children. Children throughout time have been left in the care of older siblings and grandparents in order for women to provide for their families
	Support for Mayer	Well wishes	I want to see Mayer succeed as CEO of Yahoo, as well as be a good mother to her child. And since everyone talks about her brilliance, she'll likely pull it off with ease and grace
		Cautious optimism	If she succeeds, it will be a landmark case for women everywhere
		Yahoo for yahoo!	[Mayer's pregnancy] didn't faze Yahoo's board when they were considering her for the job
		Brave	I still love the concept of her moving in life the way she is, because so many women are grappling 'do I do this or do I do that?' You know what's interesting though, the early choices she made as a young woman to go into the world of IT and computer programming that may have been almost as brave as what she is doing today
		Boo you, naysayers	Well, you know what sets a worse precedent? Assuming that Mayer's going to fail, and that this one choice of hers is what's going to change—or not change—attitudes toward pregnant women in the workplace. All this back-fence nattering I'm hearing ("She's in for a rude awakening! She's gonna regret this! Why's she even having kids?") makes me so ashamed. For feminists, for women, for the human race
Other	Other	Publicity stunt	I'd say this is just a publicity stunt by Yahoo to distract unwanted attention from the poor state of their business
		Different types of moms	This is just one more case of "You cry-it-out, I co-sleep. You nurse on demand, I supplement with formula. You give birth in your tub at home with a midwife, I head to the hospital and demand an epidural." Let's call the whole thing off
		National policy	If paternity leave was equal to maternity leave this would be a non-issue and the debate would be over. That's the situation in California (where Yahoo's head office is). Paid Family Leave is available equally for new Mums and Dads (approx 66 % of salary from the state). Therefore there is no discrimination. Why not make it the same in the UK?
		Chili Pepper	She's cute and smart. Just the way I like 'em
		Pregnancy is not the same as medical leave	Mayer is 37, has been CEO for less than a week and it is her right to CHOOSE to have a child. Steve Jobs unfortunately didn't have a choice
		Stupid	Mayer has no brain
		Impressive hubby	Her husband is a lawyer who recently launched Data Collective, an investment fund focused on "big data" startups. The baby born this week is their first child

Mayer's Characteristics

Mayer's unique personal and situational characteristics were prevalent throughout all eight segments. Authors and commenters set her apart from the lay-public, calling her "rare," "an outlier," "exceptional," and "superhuman." People also discussed her ample resources, including the design of her work, which allows her to work from home and bring her baby into work. Paying for childcare was also a very common (and often negatively expressed) sentiment, in which people discussed the army of nannies Mayer and her husband could hire to help care for their child. Less often, people commented that Mayer's career path was exceptionally advanced for a person at 37 years of age. Finally, articles often portrayed Mayer as highly work-centric, devoting super-human time and effort to working. For example, articles noted that she was on her Twitter and emailing coworkers shortly after having the baby. All of these exceptional characteristics make Mayer a proverbial unicorn—a mythical creature with more skills, resources, and work-directed energy than the normal human. However, this unicorn status also sets Mayer apart from lay-people, and many felt her situation was unattainable and inapplicable to the plight of the average working mother.

Reactions to Motherhood and CEO Announcement

Reactions to Mayer's pregnancy and CEO announcement included four variations: negative, positive, supportive, and indifferent. Negative reactors felt Mayer was setting a bad standard for women for two primary reasons. First, as previously mentioned, Mayer's situation was often regarded as inapplicable for the average woman. Consequently, some felt Mayer set a standard that was too high for women without ample education, finances, and job resources. Others felt she served as a bad role model because she focused too much on her new CEO role and not enough on her role as a mother. Consistent with the motherhood mandate, many commenters felt she should extend her leave to make a statement about the importance of being at home with one's child even when occupying a high-status professional position. These sentiments were especially prominent in Non-U.S. articles, which frequently discussed maternity leave length and advocated for extended leave time to facilitate child development.

Positive reactors felt Mayer was creating new hope for women and setting a ground-breaking standard in gender roles. Commenters in all segments described Mayer as a role model for professional women and working mothers. In a similar vein, supportive reactors specifically cheered on Marissa, wishing her well in her new venture as a CEO and mother. Many individuals expressed support for Yahoo's decision, regarding it as informed and supportive of women and mothers. In some articles, authors even shamed nay-sayers, criticizing negative reactors for their failure to support a women who is greatly in need of societal support due to

both her precarious CEO appointment and new motherhood status. Although positive reactions and well-wishes were more common in U.S. sources, many well-wishes were tainted by a cautious optimism. Commenters hoped Mayer would succeed, but also felt the situation seemed stacked against her.

Finally, a substantial portion of individuals expressed apathy, or a "who cares?" attitude when it came to the news of Mayer's CEO and pregnancy statuses. Commenters felt Mayer's pregnancy was not newsworthy because it does not affect her ability to serve as CEO. Commenters sided with Yahoo, saying that if Yahoo doesn't care that she has a baby, lay-people should not care either. Similarly, individuals both in and outside the U.S. noted it is Mayer's private business as to whether and when she would like to have a baby, and she should be able to do what she wants without enduring public scrutiny. Commenters also expressed indifference because pregnant women had been prominent in the workforce for decades. These individuals felt Mayer was not a unicorn, but rather another working mother joining the existing masses of mothers juggling parenthood and work responsibilities. Finally, people felt the announcement should not be a big deal, because if Mayer were a man, her situation would never have made the headlines.

Other

Codes subsumed in the "other" meta-theme did not fit into any of the above themes, but were determined as prevalent, unique, and meaningful in the analysis. With the exception of the "publicity stunt" code, codes subsumed in this meta-theme also occurred relatively less frequently compared to those in the previously discussed meta-themes. Some of these codes were idiosyncratic to the content of the news articles. For example, one CNN article focused on Mayer's "brain" in its title and content, resulting in several comments referencing Mayer as "stupid" or "having no brain." Similarly, a Huffington Post article pointed out different types of moms and the "mom wars" over how to raise children, giving rise to comments about different types of parenting.

Across the U.S. and Non-U.S. articles, authors and commenters described hiring Mayer as a "publicity stunt," primarily done to generate interest and revenue for Yahoo or to distract customers from noticing its failing business. These comments imply Yahoo's decision to hire Mayer was influenced by the novelty of her gender and pregnancy status, rather than her qualifications. Thus, although Mayer purportedly garnered media attention for being a strong mother and executive, many people see her media coverage as Yahoo's attempt to draw in new business.

U.S. articles and commenters focused on more superfluous details, such as Mayer's successful husband or her attractive physical appearance. In contrast, Non-U.S. articles and commenters were more likely to discuss national policies, particularly maternity leave policies. Consistent with the high prevalence of 'bad mother' comments in the Non-U.S. articles, Non-U.S. articles and commenters

tended to favor longer maternity leave policies and discussed the need for such policies to help working mothers.

Discussion

We used media coverage and reader reaction to Marissa Mayer's CEO appointment and pregnancy as a type of inkblot test of current views regarding women's ability to combine motherhood with work. We speculated that an analysis of anonymous blog comments could provide a glimpse into views about pregnancy and female leaders that may not be captured in usual survey research using college students or working professionals. This is important because college students and working professionals may hold views that differ from that of the general population. For example, college students tend to hold more liberal attitudes with regard to social issues (Gross 2012). Further, our methods allow us to unobtrusively observe norms and attitudes at a societal level, rather than the more commonly assessed individual level. Our analysis revealed themes consistent with existing theoretical perspectives as well as new avenues for future research. We discuss these themes and implications for working women in general.

One theme revealed that gender norms and the motherhood mandate are alive and well. Mayer was most often judged with respect to her performance as a mother, particularly in Non-U.S. contexts. These judgments assumed women could not "have it all," and people saw Mayer primarily as a workaholic, absentee mother who would give up her childcare responsibilities by hiring nannies. Women should be aware of phenomenon such as the double-bind created by role incongruity (Eagly 2007) and the glass cliff (Ryan and Haslam 2007), which can serve as subtle forms of discrimination. Indeed role congruity theory and glass cliff theory provide useful perspectives from which future research on mothers and leadership can be developed. The unreasonable standard of parenting set by the motherhood mandate makes it virtually impossible for women to be successful both at home and at work. When people engage in behaviors that align with personal values, they tend to be more satisfied and committed than those whose behaviors do not align with their values (Carlson and Kacmar 2000; Edwards and Cable 2009). Thus, rather than ascribing to detrimentally ambitious societal norms, it should be up individuals to define for themselves what "having it all" means by identifying and fulfilling their own personal work and family values. Tests of theory concerning work-family balance as articulated by Greenhaus and Allen (2011) may be useful in determining how life role priorities shift across the life course, particularly after the birth of children, and correspond to the notion of "having it all."

Second, people were negative and unsupportive of Mayer's appointment. Many attributed Mayer's CEO status to a "publicity stunt," criticized her for being naive, stupid, and a bad mother and expressed doubt as to whether or not she could succeed in her new work and home roles. The conversation could be made more constructive by learning from Mayer's situation and what she is doing successfully,

rather than by searching for her failures. For example, individuals commented on Mayer's ability to access quality childcare and change the design of her work as key to managing the motherhood transition while working. Future research and policy changes could target these issues, making quality childcare more widely accessible and exploring ways in which workplaces could be redesigned to allow mothers to meet caregiving responsibilities without having to forgo work opportunities. Organizational culture that is supportive of women's roles in the home by providing emotional or instrumental support (e.g., paid leave) could also help women in transitioning to motherhood while continuing career progression.

Third, despite this negativity, there was some evidence of people accepting and supportive of professional women and mothers. Comments revealed that many want to see a shift in gender norms, and that men and women should be held to similar standards in both caregiving and work roles. These more egalitarian attitudes are particularly prevalent in the U.S., where articles and comments tended to focus more on Mayer's work performance and capabilities and the presence of her husband when compared to Non-U.S. sources. Several individuals expressed well-wishes and even shamed nay-sayers for being unsupportive of Mayer's and women's career advancement in general.

Finally, the extreme scrutiny placed on Mayer's ability to fulfill the motherhood mandate also highlighted the fact that men hold relatively less responsibility for childrearing in the eyes of the public, particularly in Non-U.S. contexts. Many noted that a male CEO would not receive publicity if his partner was expecting, and Mayer's husband was rarely mentioned. Although our analyses show gender norms for fathers are stereotypical, recent individual level data show both attitudes (Gerson 2010) and behaviors (Craig and Mullan 2010; Harrington et al. 2010) are shifting to favor increased father involvement in the home and caregiving activities. Research shows fathers are influential for their partners' employment experiences and well-being (King et al. 1995), as well as a child outcomes (Stewart and Barling 1996). As the importance of fatherhood continues to gain attention, the intensive pressure and unrealistic standards applied to working mothers may be alleviated. Policies and practices designed to help working women should consider the role of fathers as well (e.g., provision of paternity leave).

Future Research

We offer several additional suggestions for future research to those noted above. New methods and theory for assessing biases associated with combining work and motherhood are needed. The application of conditional reasoning theory and assessment (James 1998; James et al. 2004) to the study of gender-based discrimination may be one potential future research direction. James and colleagues developed conditional reasoning as a new theoretical approach and item format for assessing personality by indirectly testing reliance on cognitive biases associated with specific traits (James et al. 2005). Conditional reasoning tests are different

from traditional self-report measures in that they assess implicit cognitions and inhibit response distortion (LeBreton et al. 2007). They are based on the premise that unseen biases in what people believe to be reasonable points of view reveal their implicit personalities (James and LeBreton 2010). These biases are referred to as justification mechanisms.

To date, conditional reasoning theory has been applied to personality measurement, but the methodology lends itself to other applications. We speculate that individuals with gender biases frame and reason about the world in a unique way. Our findings provide insight into some of the justification mechanisms that individuals use to support bias against pregnant women and mothers and could potentially help serve as a foundation for the development of a conditional reasoning approach to the measurement of gender bias. One illustrative justification mechanism is "children need their mother." Such views are used to rationalize why women should remain at home and out of the workplace. Another is "derogation of target." Derogation of target as a justification mechanism represents an unconscious tendency to characterize those we wish to dominate as evil, immoral, or untrustworthy (James and LeBreton 2010). Comments reflecting concern for children ("Poor baby, why have a child when you can't spare it any time to hold it, care for it, and just be a mum") and the derogation of Mayer ("Mayer has no brain") were prevalent. From a theoretical perspective, system justification theory could be used to further inform such measurement development. System justification theory explains the "process by which existing social arrangements are legitimized, even at the expense of personal and group interest" (Jost and Banaji 1994, p. 2).

Another clear future research need includes longitudinal research designs. One interesting method by which this research could be conducted is through the use of sociometrics. Created by the Human Dynamics group at MIT, the sociometric badge is a wearable sensing device that is used to collect data on face-to-face communication and interaction in real time (Waber 2013). The badge can be worn around the neck with a lanyard and is the size of a smart phone. Data on face-to-face conversations and interactions (including volume of speech, interruptions, turn taking, speaking speed, and duration of different forms of interaction such as listening, speaking, and interrupting) can be collected through the device and the data can also be used to infer emotions or states such as stress, trust, anxiety, and interest. Sociometric methods could be applied to the study of coworker interactions with a pregnant employee as her pregnancy progresses. Such approaches represent a methodological advancement in that data are collected by means other than self-report and are done in real time thus enhancing our understanding of the nature of coworker interactions with pregnant employees during the transition to motherhood in the workplace. This data could be useful in furthering the development of interventions and/or training designed to make employees aware of and ways to eliminate interpersonal negativities shown to pregnant employees.

As long as "firsts" remain for women (e.g., first female president of the United States), women like Marissa Mayer will continue to find themselves in the position of "pioneer." Such women may be more subject to microaggressions as the result of

being viewed as a threat to the status quo (Thomas et al. 2013). Microaggressions are brief but commonplace verbal, behavioral, and environmental incivilities that communicate hostile, derogatory, or negative slights and insults directed at women (Nadal et al. 2013). Research investigating the frequency and content of microaggressions faced by women in visible leadership positions could be useful to prepare and enable women entering such positions.

Conclusion

We note that there are limitations associated with our analyses. We can't infer that the themes we derived from our review of media content and reader comments are representative of any given population. We offer this analysis as one way to triangulate existing research as well as bring potential avenues for future research to the fore. We hope the present findings shed additional light on the barriers faced by women in leadership roles as they transition to motherhood.

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The Inevitable Stigma for Childbearing-Aged Women in the Workplace: Five Perspectives on the Pregnancy-Work Intersection

Rachel C.E. Trump-Steele, Christine L. Nittrouer, Michelle R. Hebl and Leslie Ashburn-Nardo

Abstract The most commonly researched group of women of childbearing age are those who get pregnant and/or have young children in the workplace. Given employers' anticipation that employees will invest the majority of their physical and psychological time and energy to their work (Greenberg et al. 2009), deviations from these expectations often result in negative perceptions of both male and female employees. But stigmatization toward childbearing-aged women is not just reserved for those who are pregnant. Childbearing women who, for a variety of reasons (e.g., choose not to, cannot physically have them), do not have any children (e.g., Lisle 1999) also face stigmatization. Similarly, recent evidence suggests that working women who choose to have only one child also face a barrage of inappropriate questions and associated stigmatization (e.g., Lombino 2011; Zamora 2012). This chapter takes a broad approach to examining the intersection of pregnancy and the workplace by examining five different groups of childbearing-aged employees: women who are not pregnant and do not ever plan to have children (Group 1), women who are not pregnant but plan to have children (Group 2), women who are currently pregnant with their first child (Group 3), women who are currently pregnant and already have at least one child (Group 4), and women who have at least one child and do not plan to have any more children (Group 5). For each group of women, we provide descriptive statistics and a content analysis of items asking them about their biggest worries, advice to past-selves, and how successful they have been at attaining their goals.

Keywords Childbearing-age · Women · Pregnancy · Work · Stigma

R.C.E. Trump-Steele (✉) · C.L. Nittrouer · M.R. Hebl (✉)
Rice University, Houston, USA
e-mail: rachel.c.trump@rice.edu

M.R. Hebl
e-mail: hebl@rice.edu

L. Ashburn-Nardo
Indiana University – Purdue University Indianapolis, Indianapolis, USA

Both women and men experience work-family stress and struggle to balance different spheres of their lives (e.g., Shockley and Singla 2011). Although, research is mixed as to whether women experience greater work-life stress than men (e.g., Bagger et al. 2008; Ford et al. 2007; Keene and Quadagno 2004), women unmistakably experience *different* sorts of stressors when they are navigating whether and when to have children and how many children to have. Moreover, most women of childbearing-age report experiencing workplace stigma regarding their personal decisions about having children.

The most commonly researched group of women of childbearing age are those who get pregnant and/or have young children in the workplace. Given employers' anticipation that employees will invest the majority of their physical and psychological time and energy to their work (Greenberg et al. 2009), deviations from these expectations often result in negative perceptions of both male and female employees. Women who take time away from work to have a child (a) are perceived to be less serious about work and careers, (b) consequently limit themselves in their potential for work success and advancement, and (c) are thought to commit career suicide (Greenberg et al. 2009). Furthermore, policies intended to help pregnant employees and/or those with infants achieve work-life balance are often underutilized because there is often an additional stigma associated with using such policies (Greenberg et al. 2009). But stigmatization toward childbearing-aged women is not just reserved for those who are pregnant. Childbearing women who, for a variety of reasons (e.g., choose not to, cannot physically have them), do not have any children (e.g., Lisle 1999) also face stigmatization. Similarly, recent evidence suggests that working women who choose to have only one child also face a barrage of inappropriate questions and associated stigmatization (e.g., Lombino 2011; Zamora 2012).

This chapter takes a broad approach to examining the intersection of pregnancy and the workplace by examining five different groups of childbearing-aged employees: women who are not pregnant and do not ever plan to have children (Group 1), women who are not pregnant but plan to have children (Group 2), women who are currently pregnant with their first child (Group 3), women who are currently pregnant and already have at least one child (Group 4), and women who have at least one child and do not plan to have any more children (Group 5). For each group of women, we consider the main issues and challenges that they report facing.

Impetus for Considering Women's Intersection of Pregnancy and the Workplace

The majority (over 80 %) of women who enter the workforce today will become pregnant while they are employed (Riley 2013), and many will be pregnant when applying for jobs (Hebl et al. 2007). In a study conducted by Hebl et al. (2007),

visibly pregnant job applicants faced greater hostility than female applicants who were not pregnant. Cuddy et al. (2004) suggest that women who are seen primarily as professionals are viewed as being competent, but interpersonally cold. However, women seen primarily as mothers are viewed as warm but incompetent. In a study conducted by Cunningham and Macan (2007), participants rated women who appeared pregnant significantly lower for hiring; one possible reason was the pregnant applicant was rated as significantly more likely to need time off and to miss work. They found that even when applying for a temporary position (a 3 month job) when only 3 months pregnant, when arguably work would be largely unaffected by pregnancy and the birth of the child, pregnant candidates received significantly lower hiring and starting salary recommendations (Masser et al. 2007). Further, in research by Masser et al. (2007), although pregnant women were rated as being warmer across conditions, no significant difference in competence ratings was found between the pregnant and non-pregnant job applicants. Despite being seen as equally competent, pregnant job applicants were rated as less hirable than non-pregnant applicants. Given society's cultural acceptance of pregnant women's visible identities affirming their societal gender roles (Greenberg et al. 2009), females' experiences on the job may vary as a function of their pregnancy status. Thus, one aim of the present research was to shed light on the work-life interface challenges pregnant women face.

Importantly, though under-researched, women of child-bearing age who have few or no children also face stigmatization in the workplace. For example, women who choose not to have children are seen as selfish (see Sandler 2013), and those with one child are denigrated for leaving their child to be alone (see Babycenter 2014). These latter two groups of women—those without children and those with only one—have been the focus of scant empirical research and their perspectives and work-family challenges are not well understood, underscoring the need for the present research. In short, all working women of child-bearing age experience an involuntary stigma associated with the intersection between pregnancy and work: the stigma of not wanting kids, the stigma of not being able to have kids, the stigma of being pregnant, the stigma of only having a single child, and/or the stigma of being a working mom.

In this vein, this chapter seeks not only to provide a comparison of perceptions between pregnant professional women, pregnant mothers (viewed primarily as mothers), and non-pregnant women, but also to examine the work-life experiences of a wider scope of child-bearing aged women than previously has been considered.

Background for Data Collection

In this chapter, we examine the experiences of female employees between the ages of 20 and 55 who are pregnant with their first child, pregnant and have other children, will not have children, will have only one child, or who have multiple children. In considering women according to these categories, we take a much more

nuanced approach to understanding the worries and experiences that women have about work-life balance. In sum, we focus on how pregnancy decisions involve all women of child-bearing age in the workforce. This work is an attempt to look at not only the differences that may exist between women in these different groups, but also the common experiences shared by women of child-bearing age.

Participants

We solicited for this survey 737 professional women, who, at the time of the survey, had been working for at least three years. We recruited participants via research assistants (undergraduates at a small, southwestern, private university), social media (Facebook, Linked-In, list-serves, and virtual communities), mTurk (Amazon Mechanical Turk is an electronic marketplace where organizations can access an on-demand workforce to complete human intelligence tasks), word-of-mouth, and snowball techniques (referral sampling). Since this is typically a difficult population to access, we used a combination of techniques over an approximate 6 month period to accumulate a large enough sample of women. Snowball sampling was especially effective, particularly if participants who have access to large networks of potential participants are identified and willing to recruit. In total, 553 women between the ages of 20 and 55 who responded to the survey had usable data. These women were 84 % White/Caucasian, 6 % Black/African American, 5 % Asian/Pacific Islander, 5 % Hispanic/American, and 1 % American Indian/Alaskan Native. The average age of our sample was 35, with a range of 20–55 years-of-age. The sample was divided into five groups: 20 % of respondents (112) were not currently pregnant and not planning to have children in the future, 25 % of respondents (137) were not currently pregnant but planned on having children in the future, 6 % of respondents (35) were pregnant with their first child, 7 % of respondents (42) were pregnant and already had children, and 41 % of respondents (227) were not currently pregnant and already had children.

We chose to ask these women about their work histories, pay, and hours. We also wanted to hear from them regarding their partner status, strategies regarding childcare, and experiences requesting maternity leave. Finally, qualitatively, we wanted to compare and contrast what these different groups of women worried about regarding having children and why. Since the premise of this study was that each of these groups experience unique stigmatization, we asked questions that attempted to differentiate the experiences of the members in these different groups and provide themes we could examine.

Methodology

We asked participants to respond to three open-ended questions. First, we asked them to indicate their biggest worry about deciding to have children. Second, we asked them to indicate the goals that they had wanted to accomplish before considering children. And third, we asked them to indicate advice that they would give to other working women who were thinking about having or already had children. Further, we asked them about their preparedness for balancing pregnancy and work and family and work, and their behaviors and beliefs regarding caregiving. We also asked all participants to indicate demographic information including their age, their highest educational attainment, number of hours worked, number of children, and whether or not they took maternity leave.

Analyses consist of descriptive and comparative assessment of both quantitative and qualitative data collected from the participants. Qualitative responses were coded to determine the themes of the responses. Basic frequency calculations were done based on this coding to determine the most common responses. These themes were also compared to and found in the quantitative data collected about participants' worries and advice. Analyses were split into five groups of women: (1) those who were not pregnant and did not wish to ever have children, (2) those who were not pregnant but wanted to have children in the future, (3) those who were pregnant with their first child, (4) those who were pregnant and already had at least one child, and (5) those who already had children and did not anticipate having more. The results below aim to provide a snapshot of the most common concerns and pressures for women in each of these groups.

Results

Out of the total 553 respondents, 81 % took a maternity leave from their workplaces while 19 % did not. In the sections below, we discuss the similarities and differences between the groups and their experiences.

Working Women Who Are not Pregnant and Do not Plan to Have Children (Group 1)

Both base rates and societal expectations dictate that most women will become mothers at some point in their lives. According to reports by the Centers for Disease Control (CDC; Martin et al. 2013), American women today average 1.88 children over their lifetimes. A 2010 Pew Research report indicates that approximately one in five American women remain childfree (Livingston and Cohn 2010). Thus, while

most women do have children and have more than one, there is a substantial number of women (20 %) who do not have any.

Social science research has documented clearly that women in American society are prescribed to be warm, kind, patient, sensitive, and, most importantly, interested in having children (Prentice and Carranza 2002). Thus, women seem to face a particular stigmatization for not wanting to have children. Research suggests these women are stereotyped as being less sensitive, less loving, more poorly psychologically adjusted, and less likely to lead fulfilling lives than women who want children (Jamison et al. 1979; Mueller and Yoder 1997; see also Vinson et al. 2010). People often feel confused by women who indicate that they do not wish to have children, as if they are being "defeminated" (see Safire 1986).

Despite such descriptive and prescriptive pressures to have children, it is noteworthy that the American birthrate is at an all-time low in recorded history; 2012 CDC data reveal a rate of 63 births per 1000 women ages 15–44, the fifth consecutive year of decline (Martin et al. 2013). In addition, 2012 CDC data indicate that women are increasingly delaying the decision to have children (Martin et al. 2013), and such delays increase the likelihood of their not being able to become pregnant (Birrittieri 2005). Collectively, these data suggest that in today's US workforce, more women than ever comprise our Group 1: Women who are not pregnant and do not plan to have children.

Previous Research on Group 1

This group is, perhaps, the least studied group of all five that we examined. Simply put, there is little empirical research on this group of women, particularly when it comes to work-family balance. The assumption may be that because they do not have children, they essentially have no problems balancing work and family. However, many of these individuals are married, have pets, engage in eldercare, and play significant roles in their extended families (e.g., childcare and/or significant involvement with nieces and nephews), prompting some researchers to use the term work-life rather than work-family conflict and/or balance. The fact that childfree women are a growing, yet understudied, population underscores the significance of the present findings.

Empirical and Qualitative Insights from Our Data Collection on Group 1

Our findings revealed that the 132 women who were not pregnant and did not plan to ever have children worked roughly 40 h per week ($M = 40.6$, $SD = 13.5$). They were, on average, 34 years of age ($M = 34.4$, $SD = 9.6$), and most frequently had

earned 5 years of post-secondary education. This group, in response to their *biggest worry* about balancing work and pregnancy, indicated three main reasons that helped dictate and reinforce their decision not to have children. The first of these worries was the *inability to find good childcare for their children*. In fact, 73 % of respondents mentioned "care" or "daycare" in their responses. As one participant reflected, "Child care is a big issue right now. There does not seem to be adequate child care around." Second, others indicated their worries focused on *not having enough time to manage both their professional lives and their home lives*. Specifically, 29 % discussed "balance," "life," "plan," "professional," and "responsibilities" in their responses. As one participant indicated in deciding not to have children, "I would worry that despite my best efforts, I'd wind up leaving the work force for many years to care for my child and would never be able to catch up professionally." Third, others cited the fact that adding children to the mix would make them *unable to manage their finances*. Specifically, out of the people who answered the question, 26 % mentioned "finances" or "money." As one participant put it succinctly in deciding not to have children, "My biggest fear is being able to be financially stable for my child."

In terms of *goal-attainment,* women in this group expressed interest in finding financial stability (29 %), an ideal career fit (16 %), and a supportive partner (7 %). As one participant said, she would simply need to have "advanced to a higher paid position with more flexibility."

Finally, concerning *their advice to future generations of women*, the women in this group indicated a need to be better prepared and planful (21 %), a need to first accomplish more of their career goals (i.e., school, getting to a point where they would not have to work, 18 %) and a need to save money (19 %). Several women advised future generations specifically not to have children. One participant said, "Make sure you have a plan and that you have a lot of support (from partner, family, and at work) or don't have children," and another participant more blatantly said, "Don't have children!"

Other Findings Regarding Group 1

The majority of women in this group had partners (72 %), and 83 % of these women believed either gender could be the primary caregiver. Further, 60 % of women in this group believed the primary caregiver should perform 50 % of childcare duties. Additionally, 60 % of women in this group thought that secondary and primary caregivers should work equal hours. Additionally, it is important to note that while stereotypes about these women would suggest that they are cold or hate children, these ideas did not arise from their answers. Instead, many expressed pragmatic concerns and a different focus.

Women Who Are not Pregnant but Plan to Have Children (Group 2)

Women who are planning to have children 1 day, but have not begun yet, provide interesting insights into the anticipated concerns of having children and working. Based on findings from Group 1, for these women, perhaps being a working mother is an abstract idea that will become concrete only after a collection of resources (e.g., finances, job security). If that is the case, Group 1 could be on average older and face different concerns than those of Group 2.

Previous Research on Group 2

Clearly women who are not pregnant are not protected under the pregnancy EEOC regulations (U.S. Equal Employment Opportunity Commission 2013a). Pregnancy discrimination specifically involves "treating a woman (an applicant or employee) unfavorably because of pregnancy, childbirth, or a medical condition related to pregnancy or childbirth" (U.S. Equal Employment Opportunity Commission 2013a). However, women who are of a certain age and by circumstance or choice are not (yet) pregnant, can face reverse discrimination. Uncomfortable questions or thoughts can come up in interviews: "Do you plan to have kids?", "How old are your kids?", and "When are you going to have kids?" are all varying ways of feeling out a potential hire's position regarding having children themselves. On-the-job, colleagues can be similarly insensitive and even more direct, asking, "Why don't you have kids yet?" and "Is there some reason you don't have kids?" In some cases, the answer may be simple—the woman may not have a partner, may not feel ready, or may want to be more established at work first.

However, the longer these women delay having a baby, the more others may stigmatize them as being childless (Bragger et al. 2002; Cunningham and Macan 2007; Halpert et al. 1993; Masser et al. 2007). That is, they may be perceived as being cold but competent high-status competitors, evoking an envious type of prejudice (i.e., feelings of both respect and resentment) among other women (Cuddy et al. 2004). Regardless, research reveals that women who are childless are rated as more desirable for hiring, promoting, and educating than women who are mothers. How can there be a downside for this group?

If pregnancy for women of a certain age is a cultural norm, what happens when a person does not meet this criteria? Perhaps women without children at home carry more of a burden when working in a team than women (and men) who do have children. Thoughts like, "Oh, she can work the late hours, she doesn't have a family at home" may quickly dominate. Given that women in this group are already perceived to be more competent and cold than women who are mothers, it may

quickly be that these women become the "in-a-pinch" people, the "go-to" employee when someone needs to shift around his/her schedule, work late, or work more. While this may bode well for career success, it also may quickly stifle out any semblance of work-life balance. Moreover, if women in this group experience additional responsibility and pressure at work because they do not currently have children, this may jade their perceptions regarding the feasibility of themselves to simultaneously have children and work. They may begin to feel that these responsibilities become a part of their job descriptions, and that they truly may lose their jobs if their personal commitments preclude them from being able to meet these additional responsibilities. Given the relative dearth of research on this group, we turn to the data to paint a better picture of the experiences of women who fall into this category.

Empirical and Qualitative Insights from Our Data Collection on Group 2

Our findings revealed that the 160 female participants taking our survey who were not pregnant but planned to have children in the future worked roughly 41 h per week ($M = 41.1$, $SD = 13.6$). They were on average 27 years old ($M = 27.4$, $SD = 4.5$), and most frequently had earned five years of post-secondary education. They anticipated that they might work 39 h per week if they became pregnant ($M = 38.5$, $SD = 14.3$), and approximately 33 h per week ($M = 33.3$, $SD = 18.2$) after having a child.

This group indicated that that their *biggest worry* involved the additional work that children would require over the time currently committed to their jobs (28 %), the tradeoff it may have on their careers (23 %), and the impact of leaving/missing work (20 %). Their comments also reflected this as they indicated worrying about "the after hours work on top of the 40 h," "having a child will make me not want to go back to work," and "losing my job because I am pregnant and not able to work as much." Like those women in Group 1 who did not want children, this group (Group 2) also expressed worries about their finances (41 %) and balance issues (13 %).

In terms of *goal-attainment,* women in this group indicated goals that reinforced the fact that women in Group 2 were slightly younger and earlier along in their careers than those in Group 1. Specifically, they wanted to complete their educational goals (53 %); as one participant said, "I have almost completed college. Then I will need a résumé and internship experience." They also wanted to gain financial stability/promotions (20 %); one participant said, "I need financial stability and would like to achieve this prior to pregnancy." And finally, they indicated wanting to be in a relationship with a strong partner prior to having children (15 %). This group may be thought of as planners; women in this group seemed to have certain milestones that they wanted to complete before moving on to having a child.

Finally, concerning *their advice to future generations of women*, the women in this group indicated that women should save as much money as possible (24 %) and advance in their careers as much as they can before having children (17 %). One participant indicated, "Advance as far as you can before you get pregnant so that you can come back from maternity leave in a good position." Another stated, "Be at least somewhat financially stable before children. Get ahead first."

Other Findings Regarding Group 2

Women in this group were generally in their mid- to late-twenties. These women commented that they wished to have their first child between 30 and 35 years-of-age. They anticipated that they would have to work on average 2 h less per week should they become pregnant (from 41 to 39 h/week). Regarding their *preparedness for pregnancy-work balance*, most indicated that they felt unprepared. Regarding their *preparedness for family-work balance* (post-pregnancy), most also commented that they felt unprepared.

Working Women Who Are Currently Pregnant with Their First Child (Group 3)

The third group that we examined included women who were pregnant with their first child. This group was anywhere from being weeks along to being very close to delivering their first child. Thus, balancing work and children was about to become their reality. This group of women, along with the next group (Group 4, women who were currently pregnant and already had at least one child), have been the subject of a substantial amount of research on the effects of pregnancy on workplace concepts such as discrimination and organizational policies intended to reduce such discrimination.

Previous Research on Group 3

Past research has examined the experiences of women while pregnant in the workplace (Ladge et al. 2012; Reitmanova and Gustafson 2008; Mäkelä 2012), while pregnant and applying for jobs (Hebl et al. 2007), while negotiating maternity leave (Greenberg et al. 2009), and when disclosing pregnancy status (King and Botsford 2009: Morgan et al. 2014). Due to the federal protection of this group (pregnant), discrimination faced by its members is fairly well-documented. Many

Americans believe that pregnant employees limit team productivity, should not be hired or promoted, and should be given fewer accommodations by organizations (see King and Botsford 2009). Working mothers in general are viewed as less dedicated to their families than mothers who do not work, and those who do not take a maternity leave after having a child are generally judged more harshly than those who do (Cuddy et al. 2004). This is a relation that is mediated by the perception that no-leave mothers are less committed to their children (Cuddy et al. 2004). Further, mothers who choose to work for personal fulfillment (rather than necessity) are evaluated more negatively (Cuddy et al. 2004).

The nature of pregnancy is that it is, at first, a concealable stigma that involves the complex process of disclosure (King and Botsford 2009). Because disclosure involves dual and contrary motives, to be authentic and to self-protect, it can be a delicate balance. However, women are in fact physiologically different when pregnant. In many cases, their physical appearance will accentuate this difference (Greenberg et al. 2009). Regardless, whether concealable or not, many women fear disclosing their pregnancy due to anticipated backlash. In one example from our study, an academic researcher hired for an assistant professor position during her pregnancy commented that she waited as long as she could (more than 5 months), until the renovations for her new lab had been completed, to disclose her pregnancy. There was contention about where the lab should go, and she was worried about losing her position of negotiating power. Deciding exactly when to disclose can be very challenging—the Family and Medical Leave Act (FMLA) mandates that employees only have to give 30 days notice for intent to take leave, but most pregnant employees disclose within several months of their, on average, 270 days of being pregnant (King and Botsford 2009).

Importantly, research suggests that the total number of pregnant women in the workforce in any given year is small (5 %) and that many of these women (more than 60 %) work throughout their pregnancies without needing any accommodation (Tannenbaum 2012). Furthermore, federal laws neither require employers to provide workplace accommodations to pregnant employees nor do they require paid medical or parental leave. Thus, there is little direct cost to organizations for employing explicitly pregnant women. Furthermore, research suggests that keeping pregnant women in the workforce is good business (Robinson and Dechant 1997). For example, it can lead to cost savings, winning the competition for talent (i.e., having good maternity policies may tip the scale), and business growth from leveraging the perspectives from this diverse group (Robinson and Dechant 1997). In sum, then, it seems that keeping pregnant women in the workforce, helping to accommodate the few that need it, and not discriminating against them would make good business sense. Unfortunately, research shows a substantial amount of continued discrimination on the basis of pregnancy (N = 3541 cases in 2013; U.S. Equal Employment Opportunity Commission 2013a, b) and some reports even suggest it is on the rise (Fair Work Ombudsman 2011).

Empirical and Qualitative Insights from Our Data Collection on Group 3

Our findings revealed that the 43 women who were pregnant with their first child and currently working full-time were on average 28 years old ($M = 28.2$, $SD = 3.4$), and most had earned 5 years of post-secondary education. They reported working approximately 41 h per week ($M = 41$, $SD = 11.9$) before they were pregnant and 41 h per week while pregnant ($M = 40.7$, $SD = 10.4$). They anticipated that they might work 33 h per week ($M = 33$, $SD = 14.3$) after they had a child. Finally, they were planning on taking on average 4 weeks of maternity leave ($M = 4.2$, $SD = 1.2$).

Individuals who were pregnant with their first child indicated that that their *biggest worries* involved an inability to balance (46 %), finding quality and affordable childcare (29 %), and having sufficient finances (21 %). Additionally, this group of woman had concerns about a loss of productivity (25 %) and the lack of workplace flexibility a future child would bring them (13 %). One participant stated that she was particularly worried about her "productivity and loss of professional status," while another indicated that it was worrisome to think about the "unpredictable nature of the hours at my job."

In terms of *goal-attainment,* women in the workplace who were pregnant for the first time reported a desire to achieve more career advancement (29 %). In line with this, a participant explained that she hoped she could "publish the research I did as a postdoc and the last chapter of my Ph.D. thesis." Another goal was to find satisfaction in their personal and professional lives (24 %). In line with this, one participant indicated that she was seeking to "find a career that makes me happy and inspires me." Finally, many indicated a goal to work less (14 %). One person specifically stated that her goal was "not to work as much."

Finally, concerning *their advice to future generations of women*, these first-time pregnant female employees advised others to give consideration to financial concerns (16 %), generally not stress too much about it (16 %), and complete professional goals sooner (5 %). Participants reflecting such advice stated, "save more money," "get your master's degree now and don't wait," and "remember that doing your best doesn't mean things will be perfect."

Other Findings Regarding Group 3

On average the women in this group worked the same amount before they were pregnant as they did while they were pregnant (41 h/week), thereby adding credence to the notion that most pregnant women work just as steadily as do their non-pregnant counterparts. Pregnant employees, however, did anticipate working fewer hours after having their child—approximately 8 fewer hours per week (33 h/week). The majority of women in this group currently had a partner and

planned to remain with their partner throughout the birth of their child. They also expressed a desire for having a supportive partner throughout both pregnancy and the raising of a child. In terms of their *preparedness for pregnancy-work balance*, about half felt well-prepared and half felt unprepared. Regarding their *preparedness for family-work balance* (*post-pregnancy*), over 50 % felt unprepared.

Working Women Currently Pregnant and Who Already Have at Least One Child (Group 4)

Like Group 3, women who are pregnant with their second (or greater) child, face the well-documented stigma of pregnancy, but also potentially from already having a child. Although being a parent may afford a woman protection if she has maintained workplace productivity through earlier pregnancies, it also may lead to additional stigmatization in the workplace. Previous research is not so fine-grained as to distinguish between women who are pregnant with their first child versus those who are pregnant and already have a child (or multiple children) at home, underscoring the importance of our decision to delineate these two potentially distinct experiences from each other.

Empirical and Qualitative Insights from Our Data Collection on Group 4

A total of 46 participants were pregnant women who already had at least one other child. Our findings revealed that they were on average 32 years old ($M = 32.6$, $SD = 4.3$), and they most frequently had earned 5 years of post-secondary education. They reported working approximately 38 h per week ($M = 38.3$, $SD = 10.9$) before they were pregnant and 37 h per week while pregnant ($M = 37.4$, $SD = 8.96$). They anticipated that they might work 33 h per week ($M = 33.1$, $SD = 13.03$) after they had a child. Finally, they were planning on taking on average ten weeks of maternity leave ($M = 9.8$, $SD = 5.6$).

Individuals who were pregnant and already had at least one child at home indicated that their *biggest worry* was balancing the competing demands at both work and home (42 %). As one participant stated, "Balancing two kids with two full-time working parents. Balancing one is difficult enough; I am worried that with two, there won't be any time for relaxation, exercise, time with my husband, etc." Another worry was having sufficient finances, indicated by 18 % of the women, and one participant summed this up cogently by simply stating, "Finances are a big worry." These already-parents also indicated that they were worried about adequate daycare (15 %) with one participant indicating that she was worried about "child care for when my last minute schedule changes arise" and about "being able to take

my kids to after school enrichment activities" if she still needed to work. Finally, these women cited that they were simply worried about being too tired (15 %) with one participant exclaiming that she was worried about having "enough time to do it all and still sleep!"

In terms of *goal-attainment,* women in the workplace who were pregnant with at least one other child at home reported feeling accomplished professionally and personally (53 %), but also had additional (largely) professional goals they identified as still wanting to obtain (40 %). As one woman indicated, "I have not obtained my masters which I had hoped to do before I had kids." Furthermore these women felt they had to compromise the age at which they became pregnant because of their professional goals. As one participant cited, "I delayed pregnancy to obtain my professional goals (which I did), but the downside is that I will be 36 when my second child is born, which is technically a high-risk age category."

Finally, concerning *their advice to future generations of women*, these pregnant female employees who already had at least one additional child at home suggested that women remain calm and flexible. More specifically, they suggested women in their situation should not stress too much (28 %), find a career that is flexible enough to accommodate working parents (or work parttime) (28 %), and to save money (13 %). They specifically cited "Have more children and don't stress." Additionally, they said, "Embrace as many professional experiences/roles as possible to give yourself lots of flexibility for different positions (that might fit your schedule better) when you have a family."

Other Findings Regarding Group 4

Women in this group stated that 28 years of age would have been a good age to have their first child. They also commented that they worked on average 38 h/week during their previous pregnancy(ies). On average, they reported currently contributing 50 % to childcare duties. They expected this to go up to approximately 65 % after pregnancy. In this group, over 50 % of mothers with just one child and currently pregnant in terms of *preparedness for pregnancy-work balance*, conveyed that they were prepared for balancing pregnancy and work. However, over 50 % of mothers of two or more children stated that they were not prepared for balancing pregnancy and work. In terms of *preparedness for family-work balance* (*post-pregnancy*), over 50 % of mothers of just one child and currently pregnant expressed that they were also prepared for balancing family and work. Yet, 50 % of mothers of two or more children also felt unprepared for balancing a family and work. Overall, most women in this group felt prepared for both balancing pregnancy and work and family and work. Indeed, one might assume that these women may have a more realistic idea as to what the experience of being a parent and balancing work is actually like.

Working Women Who Have at Least One Child and Do not Plan to Have More (Group 5)

The final group that we examined consisted of women who already had at least one child, and were not planning on having more. These women were able to speak to many aspects of being a woman of child-bearing age: prior to being pregnant, being pregnant, being a mother, potentially being a mother to more than one child, and potentially being a parent to older children. These women also were able to speak to their potentially evolving perceptions of concerns across these changes.

Previous Research on Group 5

Research such as that of Ladge et al. (2012) addresses the idea that women can assume multiple, discrete identities over the course of their professional lives with respect to being pregnant. Additionally, modern organizations are beginning to offer a growing number of family-friendly policies that are intended to help employees who have personal obligations outside of work manage their work commitments (Greenberg et al. 2009). However, even when women are no longer pregnant, they can confront discrimination in the face of child rearing and family obligations. For example, they may battle an assumption that they are not as committed to their work as women without families and that they are intentionally limiting their potential for work success (Greenberg et al. 2009).

Further, women in this group may be seen as warmer and more communal (Cuddy et al. 2004) because they have families and may be therefore inadvertently enhancing perceptions of their femininity (King and Botsford 2009). However, it is also important to note that the more a woman is associated with her motherhood the less competent she is perceived to be (Cuddy et al. 2004). It seems plausible that gender-based discrimination becomes heightened towards women who are perceived more communally due to their family situation, but possibly more agentic due to the high-status they hold as a working (rather than stay-at-home) woman. This may heighten the incongruity experienced by perceivers of these women, as Heilman's (1983) lack of fit model describes, and lead to greater stereotypes against women with families (despite not currently being pregnant).

Empirical and Qualitative Insights from Our Data Collection on Group 5

Our findings revealed that 227 female employees already had at least one child and did not plan to have more children. These women worked roughly 37 h per week

($M = 37.0$, $SD = 13.1$), were on average 41 years old ($M = 40.8$, $SD = 9.2$), and most frequently had earned five years of post-secondary education (37 %).

These women identified their *biggest worry* as childcare, with 53 % reporting this as a worry. Secondarily, 50 % were worried about work-life balance. As one participant said, it is "hard to divide my attention between my children and my career. Consequently, I worry that both suffer. Those without children will pass me by or be better at their jobs; those without jobs will be better, more patient parents." These women also cited additional worries such as finances (16 %) and loss of job or productivity (6 %).

In terms of *goal-attainment*, these women reflected that they wished they had finished school (31 %) and saved more money along the way (15 %). Furthermore, several women discussed the experience of a tradeoff they made in their lives—either work over family or vice-versa (23 %). For instance, one participant said, "I raised my children myself—that was a goal I attained. I intended to also keep up with my profession; I failed to do that. I regret not keeping up with my profession."

Finally, concerning their *advice to future generations*, these women reported the need to balance better family, social, and work lives simultaneously (17 %). One woman commented, "I have not attained a peaceful, smooth-running household with space for my husband, children and myself to grow physically, spiritually, intellectually. I have continued a few friendships outside of work and family, but have not kept up with most friendships outside these categories. I have achieved being a working mom, taking care of patients. I do not feel as if I am doing either as well as I would like." However, they also advised women not to stress out so much (12 %), to save as much money as they could along the way (11 %), and to be realistic with their goal-setting. For instance, one participant said, "You cannot be supermom, it doesn't exist. Get organized and do a little at a time." Another urged, "Be more financially secure."

Other Findings Regarding Group 5

These women had on average two children and reported wishing they had their first child around 28 years of age. They worked approximately 40 h/week before having children, 35 h/week while pregnant, and 30 h/week after they were pregnant. Many of these women had the responsibility of 95 % of the childcare (21 %), with the second largest group of women contributing to a little more than 50 % of the childcare (20 %), and the third largest group of women contributing to a little more than 80 % of the childcare (18 %). A total of 46 % of women reported that their partner worked more than they did while they were pregnant, while 34 % of women said they and their partners worked equal amounts. A total of 45 % of women reported that their partner currently worked more than they did, while 31 % reported that they and their partners worked equal amounts. Further, women said that in terms of their *preparedness for pregnancy-work balance*, the majority had

felt prepared (57 %). Regarding their *preparedness for family-work balance* (*post-pregnancy*), the majority had actually felt unprepared (59 %).

Discussion

The goal of this chapter was to elucidate the experiences of women of childbearing age in the workplace. Although previous research has documented well the work-life balance issues that working women face, including the stigma associated with pregnancy, our chapter is perhaps the first attempt to capture the range of experiences for *all* women of childbearing age. Our findings suggest that pregnancy is a much larger construct than previous research has suggested. Indeed, all women in this age group must consider the decision of whether or when to have children, and, if so, how many children to have. These decisions have implications for how working women are perceived by others, including whether they experience workplace discrimination. Given the increasing representation of women who work (Department of Labor 2014), such issues are important for researchers and organizations alike.

Theoretical Contributions

By examining the perspectives of five different groups of women of childbearing age—those who are not pregnant and have no plans to become pregnant, those who plan to become pregnant in the future, those who are currently pregnant but have no previous children, those who are currently pregnant and have one or more children, and those who are not currently pregnant but have one or more children—we hoped to demonstrate that, as with any social group, women of childbearing age are not a monolithic entity. Rather, they are quite heterogeneous. Understanding their unique perspectives adds value to the extant literature and helps better inform organizational policy and practice.

So how did these groups differ? First, it is noteworthy that women in Groups 1 (not currently pregnant, no plans to have children) and 5 (not currently pregnant, already had children) were older, on average, than women in the other groups. This could potentially confound the interpretation of some of our results, as age is likely an important moderator of the effect of childbearing decisions on women's experiences. More importantly, women varied across the childbearing continuum in their reported goal attainment, advice for others, and their self-reported experiences with discrimination.

With regard to goal attainment, women without children—whether or not they had plans to have children in the future—emphasized the importance of having a supportive partner as being highly influential in their decision. Women in the other three groups did not emphasize this goal, so it could be that finding a supportive

partner is an antecedent to women seriously considering becoming pregnant while working. Interestingly, the majority of the women who did emphasize partnership reported having a current partner, perhaps suggesting a perceived lack of *sufficient* support or simply a fear of the unknown. Indeed, discussion of this issue is timely, given the recent publication and widespread media coverage of Sheryl Sandberg's *Lean In* and the encouragement of working women to encourage greater input from their partners with family and home responsibilities.

Women also differed in their advice for other women as a function of their own pregnancy status. Those women without children came across as avid planners, advising women to prepare and strategize when navigating decisions about work and pregnancy. In contrast, women who were pregnant and/or already had children were more likely to advise women not to stress about the decisions too much, to remain flexible. Interestingly, *all* of the groups reported feeling unprepared to balance work and family/life. We can only speculate about these discrepancies between the advice women are giving to others versus their own admission of feeling ill prepared for work-life challenges. On one hand, perhaps women who already have children are rationalizing their own choices and experiences, convincing themselves that despite lack of preparation, things turn out okay and should not be something over which to fret. On the other hand, however, it could be that women without the experience of having a child overestimate the difficulties associated with work-life and/or work-family balance. The truth is probably somewhere in the middle. Finding balance *is* hard, but whether one feels the need to stress and plan likely depends on one's own status.

In our sample, 10 % of women who were not pregnant and not interested in having children and 6 % of women who were not pregnant but interested in having children reported that they had experienced discrimination. A total 23 % of women who were pregnant with their first child, 23 % of women who were pregnant and already had a child/children, and 13 % of women who had children and were done being pregnant reported that they had experienced discrimination in the workplace. Given the prevalence and past research documenting rates of discrimination, these numbers are not as high as they might be; however, it is important to note the fact that many people under-report discrimination, particularly the discrimination that they themselves have experienced relative to the discrimination that other members of their ingroup have experienced (Crosby 1984). Moreover, research has shown that *any* amount of discrimination, even when it is seemingly small, can compound to be very influential in deciding careers (Martell et al. 1996; Valian 1999). Hence, the discrimination that our participants reported is noteworthy, worrisome, and worth discussing.

Some women reported experiencing perceived discrimination in terms of when they were obligated to take sick days to care for their children. For example, one woman commented, "After I had my son, a supervisor told me not to take sick days for my children; he hired me, not my kids, and to find a solution to the problem." Other women reported losing the esteem and professional respect of their coworkers after returning from maternity leave. Another participant reported, "After my first child, I went back to work part time in government consulting. My firm pulled me

off of management of projects and gave all of my projects to a man who didn't even want them." Finally, women reported having to endure fallout due to the visible nature of their changing identity. Specifically, one woman described having a "coworker with a supervisor who has made comments to her about being 'too emotional' while pregnant and that she's not doing enough [at work]."

Perhaps most important for our purposes, women's self-reported experiences with discrimination varied as a function of their pregnancy status. Although all groups reported some degree of stigma, those who were not currently pregnant (Groups 1, 2, and 5) reported the least perceived discrimination. This speaks again to the importance of perceived identities (Ragins 2008); those women who were currently pregnant—although at various stages of pregnancy—have a relatively visible stigma. Although physiologically pregnant women *do* differ from non-pregnant women and may therefore behave differently, they are also treated differently and perceive differential treatment.

Although the five groups we examined clearly differed in some regards, they also reported a lot of commonalities. In terms of demographic characteristics, across all groups, these working women averaged about a 40 h work week and were well-educated, averaging 5 years of post-secondary education. They also reported many shared worries, goals, and words of wisdom for others.

More than any other question we asked, women responded most similarly in terms of their worries about the pregnancy-workplace interface. All groups emphasized worries regarding the ability to balance work and family, and all felt ill prepared for such challenges. In addition, women across groups reported financial worries, and most reported concerns about the availability of good childcare.

With regard to goal attainment, women across all groups wished to achieve more professionally. Some specifically expressed goals pertaining to education, including regret that they had not attained a certain level of advanced education prior to having children or fear that having children might preclude achieving their goals. Others expressed goals specifically concerning opportunities for career advancement. Clearly their professional identities were important regardless of their pregnancy status, thus contradicting stereotypes that such aspirations are held only by women who choose to have one child or no children at all.

Across the childbearing continuum, one piece of advice was common: save money. In part, this may be a reflection of the times. Having recently faced a national recession, women may find financial concerns especially salient, regardless of whether they have children, or even plan to have children in the future.

In sum, the differences and commonalities identified in the present research help provide a more complete and accurate picture of working women who are of childbearing age than provided in the extant literature. Most importantly, all of these women faced an inevitable stigma, a catch-22 regarding their pregnancy decisions. The nature of this stigma, however, varied as a function of their pregnancy status, and perhaps even in more ways than they could articulate, influenced decisions about whether to have children and, if so, how many to have. Given the hostile nature of the discrimination reported by currently pregnant women (e.g., snide remarks about taking sick leave, differential treatment regarding their

changing physical appearance, differential and less favorable work assignments), it seems quite likely that concerns about balancing work and family (reported by all women) were shaped by such incidents, whether experienced directly or as third-party witnesses. Clearly, decisions pertaining to childbearing are a meaningful part of all women's lives.

Practical Implications

The present findings lend themselves to a number of practical recommendations for organizations. Consider first the common findings across groups. Given the worries reported across groups in this research, organizations would be well advised to develop comprehensive programs to address work-life balance issues for *all* employees. All the groups surveyed reported feeling unprepared to address these issues adequately, suggesting there is room for organizations to implement policies to help women workers and their partners negotiate this process, as well as cultivate positive, cultural norms for utilizing these programs and policies (which research confirms are inherently stigmatizing). Flexible working hours and promotion policies could allay some concerns women have about starting a family, such as how having children might interfere with career advancement. Universal parental leave (i.e., maternity and paternity) policies, opportunities for telecommuting, and on-site daycare options could likewise reduce career advancement concerns for those who already have children, address worries regarding the availability of adequate and affordable childcare, and alleviate some employer complaints about absenteeism, productivity loss, and turnover. Many of these policies would simultaneously benefit employees without children. For example, flex-time and telecommuting would enable individuals to find time for important life activities that need not revolve around family, such as volunteering and health/fitness programs—programs that have been shown to increase job satisfaction and productivity (Sirgy et al. 2012). In a related vein, organizations might incentive such programs, for example, by sponsoring day-of-service activities and on-site exercise and wellness programs. Finally, given that women across all groups surveyed reported financial concerns and advised other women to save money, organizations could invest in on-site financial planning advice for all employees. It is important to highlight that these provisions should be made for all employees, lest certain groups (e.g., women who have no plans to have children, men) feel marginalized by these well-intentioned policies.

Importantly, the present findings underscore the need for organizations to be attentive not only to their common needs, but also to the unique needs of different groups of women of childbearing age. As previously mentioned, the fact that women who were currently pregnant reported experiencing more discrimination than women in the other groups suggests the need for sensitivity training regarding pregnancy and related changes in identity. In addition, programs (like the aforementioned) that benefit all and thus serve to normalize child/family issues help

create a climate of inclusivity that should reduce the experience of such discriminatory incidents. Finally, given the fact that no women reported feeling well prepared to navigate work-family issues and yet differed in the degree to which they advised others to plan versus not worry, it could be helpful to develop peer mentoring programs in which women help prepare each other.

Limitations

Although the present findings have helped shed light on real issues faced by many working women of childbearing age, we also should note some key limitations where findings should be interpreted with caution. First, the present sample may not fully represent the population. For example, across groups, most women had an average of 5 years of postsecondary education, thus relatively well educated and poorly representative of working women who did not complete or who only completed high school. Indeed, we limited our study to professional women, but certainly working class women may face a variety of additional challenges that remain largely unaddressed in the extant literature. In addition, we did not collect salary data, something that could potentially moderate some of the findings regarding concerns about finances and affordable childcare. For example, it would be interesting to see how women who are the primary earners in their households compare to women who are not, and whether the importance of supportive partners and the division of childcare duties differs between the two groups. Finally, the sample was overwhelmingly White (84 %), thereby not capturing potential cultural differences in gender roles regarding maternity that could qualify some of the present findings. Although this chapter is a step toward understanding work-life challenges and stigma for women across the continuum of childbearing age, future research should address these limitations and expand our scope.

Future Research Directions

Future investigators may want to ask about their regrets and their goals in terms of work life balance. Perhaps also it will be important to have a more marked delineation of worries about work, family, and the balance of the two. There may be other and more meaningful characteristics to consider when defining groups, other than where they fall on the pregnancy spectrum. Further, while we touched on the role of partner support, more could be asked in the future to identify the types of support women find to be the most important and effective. Or, alternatively, perhaps partner support is not actually all that important to certain women, and we are overestimating its role.

Additionally researchers should pay attention to what these women are expressing areas of concern, and what cannot workplaces actually do to address these concerns. Some potential ideas may be utilizing realistic job previews, informative classes, progressive policies, and the beliefs that women are actually allowed to utilize these policies without negative repercussions to the workplace. Importantly, organizations may be able to do more to prepare women for their jobs and provide them with more realistic job previews (O'Brien and Hebl 2014). This could also involve creating cultures where it is not stigmatizing to take advantage of maternity/paternity leave policies and other benefits—what a difference it would make if a company mandated that its employees took advantage of its maternity/paternity policies. How could there be a stigma if it was compulsory?

There are not a lot of on-ramps for people to come back and obtain professional and educational development goals after having children. There are a lot of off-ramps for individuals who are pregnant and want to have families, but it is much easier to leave the workforce than it is to rejoin it post-pregnancy. Similarly, there are policies in place for off-ramps, such as maternity leave, but there are not policies in place to get women back in the workplace. This may include providing childcare. Future researchers and organizations will want to address ways in which the workplaces can help mothers get back to work.

Future research needs to examine how women perceive the tradeoffs involved in workplace balance. Is there an effect, or perceived effect that a woman may not be able to be as successful at either task when trying to balance both? While this seemed to come up from their perspectives in advice and worries, it is possible that this is not actually the case. It will be important to assess what these tradeoffs may actually occur. But also, anecdotal evidence suggests that for some women the attempts to balance are believed to actually make them more effective at both.

In addition, researchers should also strive to develop theory to account for the similarities and differences faced by working women of childbearing age. Throughout the chapter we referenced popular theories that were developed primarily to understand why women are thought to be poorly suited for certain (agentic, masculine) occupations (e.g., Heilman's lack of fit theory) or why women are stereotyped as competent but cold or warm but incompetent (e.g., Cuddy et al.'s stereotype content model), but neither theoretical frame may sufficiently address the unique issues raised by women's pregnancy decisions. For example, why are pregnant women particularly likely to report experiencing stigma? Is it mere visibility of their status or are other factors at play? In addition, why are women who have only one child vilified? They have fulfilled societal expectations by becoming mothers and, assuming their productivity was not adversely affected with this role change, others should perceive that they have fewer family "distractions" that make them less desirable employees. Such questions still left unanswered highlight the need for more theory development in this research domain, as well as for additional empirical studies to address these and other questions.

Conclusion

In conclusion, women who work during their childbearing years arguably face an inevitable stigma. Those who have children are "damned" for being less committed to the organization and yet are expected to navigate work-family challenges on their own. Those who do not have children are "damned" for being selfish and cold and are expected to be exempt from work-family challenges given society's restricted definition of "family." However, they all are faced with the common decision of whether or when to have children, and if so, how many children to have. Our research suggests that respect for all women of childbearing age might go a long way to diffusing stress and creating flexible solutions that make everyone as productive as possible and organizations more efficient and effective. We implore future research to continue considering different categories of child-rearing aged employees, to best meet the needs of these employees and the success of the organizations for which they work.

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Stay at Home or Go Back to Work? Antecedents and Consequences of Mothers' Return to Work After Childbirth

Thorana Grether and Bettina S. Wiese

Abstract The re-transition to work after a period of maternity leave has evolved into an important developmental task for most women. In the present chapter we first give an overview of theoretical approaches that strive to explain mothers' timing of return to work: Micro-economic research investigates mothers' labor force participation in terms of cost-benefit considerations, whereas the focus of socio-cultural approaches is on cross-country differences in gender, culture and institutional support (e.g., parental leave regulations). From a psychological perspective, mothers' employment patterns may be addressed referring to, for instance, the theory of planned behavior and social-cognitive career theory. Here, our aim is to derive an overall model that integrates main components of the aforementioned theoretical strands. Second, we present research that investigated short- and long-term consequences of a mother's timing of return with respect to different life domains and criteria. We are going to focus on children's and mothers' physical and psychological well-being and on immediate stress-related experiences after work return as well as on mothers' future career goals and prospects. We will show that a better understanding of mothers' (and families') challenges and adjustment processes requires a multi-criteria approach and a deeper look at the interactive role of individual and contextual characteristics.

Keywords Maternity leave · Return-to-work decision · Timing of return · Social-cognitive career theory

In post-industrial societies, most women will expect at least one child during the course of their lives (OECD 2012). As the majority of these women work (OECD 2012), they will have to decide how long they will stay at home after childbirth and whether they will change their work schedules after re-entry. Managing this transition out of and back into the workforce has become a normative task for women in young and middle adulthood (see Wiese and Ritter 2012).

T. Grether (✉) · B.S. Wiese
RWTH Aachen University, Aachen, Germany
e-mail: grether@psych.rwth-aachen.de

The purpose of this chapter is three-fold: First, we provide an overview of viable theoretical approaches to explain mothers' return-to-work decisions. Second, we present research on short- and long-term consequences of mothers' timing of return. Here, we summarize outcomes within different life domains such as career development, mothers' physical and psychological well-being, and child development. Finally, we discuss implications for research and interventions in light of mothers' (and families') challenges and adjustment processes during the return-to-work phase.

Antecedents of Mothers' Return to Work After Childbirth

Mothers' return-to-work decisions have been addressed by researchers from different fields. In the following, we will present economic, sociological, and psychological approaches. This cross-disciplinary approach is essential for an integrative understanding of mothers' timing of return. Micro-economic research investigates mothers' labor force participation in terms of cost-benefit considerations. Cross-country and institutional differences in gender culture and support structures (e.g., parental leave regulations) are examples of sociological research topics. From a psychological perspective, individual attitudes, goals, and behavioral strategies must also be considered.

Economic Perspective

Human capital denotes resources a person has acquired during his or her working life through education, training and on-the-job experience, i.e., knowledge, skills, networks, responsibility, and wages (see Becker 1991). Employment gaps impede the growth of human capital and may even cause its depreciation due to lack of use (e.g., loss of skills). Accordingly, one would expect that women who have invested much time and energy into their careers (i.e., who are highly educated and trained), and whose risk of losing human capital is therefore higher, will return to work more quickly. Several studies have supported this assumption; and in the fields of sociology and psychology, researchers often control for women's stock of human capital (e.g., Berger and Waldfogel 2004; Cloïn et al. 2011; Desai and Waite 1991; Drasch 2013; Glass and Riley 1998; Hynes and Clarkberg 2005; Kuhlenkasper and Kauermann 2010; Leibowitz et al. 1992). For example, in a sample of 1158 women from the American National Longitudinal Survey of Youth who had a first birth between 1979 and 1985, Desai and Waite (1991) found that women's pre-birth wages, educational level, and vocational training increased the likelihood of their returning within 3 months after childbirth. However, except for education, there were no effects for leaves longer than 3 months. In more recent studies in Germany (Drasch 2013) and the Netherlands (Cloïn et al. 2011), researchers showed that

women with a higher education level re-entered the labor market more quickly than those with a lower educational level. The effects were most dominant and consistent when comparing the extremes, i.e., highly educated women versus those with little schooling.

From a rational utility perspective, when making employment decisions, both the woman's as well as her partner's human capital are taken into account in order to jointly maximize household utility (Becker 1991). More precisely, couples consider various work-family constellations and choose the combination that yields the highest utility. According to Becker (1991), due to biological differences, women are more involved in childrearing and are willing to allocate more time to household and family chores, whereas men invest more time in market activities. These specialized investments imply lower opportunity costs of refraining from paid work after giving birth for mothers than for fathers. Additionally, as paid childcare is typically necessary as soon as mothers return to the workforce, in particular for women with little human capital (e.g., low education levels), it may be financially unattractive to participate in the workforce. Statistics show that across countries, women are the ones who typically take parental leave after childbirth and often work part-time, even if equal statutory leave options exist for both mothers and fathers (OECD 2012).

Sociological Perspective

In the following, we give a short overview of three sociological explanations for the employment behavior of mothers: a cultural perspective, an institutional approach, and Hakim's preference theory (2003, 2006). From a cultural perspective, cross-country differences in the workforce participation of women with young children are explained by the prevailing gender culture and ideals of childcare. Studies usually operationalize these latter attitudes as the degree to which a population agrees with the idea that, for children under the age of three, care provided by the mother is of particular importance for healthy development (e.g., Pfau-Effinger 2010; Steiber and Haas 2009; Uunk et al. 2005). Women may feel a moral obligation to comply with societal expectations regarding their caregiver role, which may influence their employment decisions (of course, these processes may not necessarily occur consciously). There is some evidence that, in countries with less approval of these attitudes, women are more strongly involved in paid labor (e.g., Pfau-Effinger 2010).

However, country differences in women's length of maternity leave also depend on institutional variations of parental leave, and childcare facilities. As to be expected, institutional support is linked to prevailing gender attitudes (e.g., Sjöberg 2004; Uunk et al. 2005). With respect to parental leave regulations, there are strong variations across countries (Ray et al. 2010). For example, in the United States women are allowed to take 12 weeks of protected maternity leave (if they work for organizations with more than 50 employees and have worked for their current

employer for longer than one year). In contrast, in many European countries, protected maternity leave duration is longer and ranges from 6 months in Belgium to 3 years in France, Germany and Spain (the only exception is Switzerland with 16 weeks) (see Ray et al. 2010). Additionally, in Europe mothers receive financial support for a period ranging between eleven and 42 weeks. With respect to the relationship between leave policies and maternal employment, it has been argued that the right to family-related leave with job protection strengthens mothers' attachment to the labor market. However, very generous leave policies may entice women to stay at home for "too long" in terms of postnatal employability and career consequences (see Meyers et al. 1999; Ray et al. 2010; Rønsen and Sundstroem 2002). Pettit and Hook (2005) concluded that the relationship is best described as an inverted U-shape: No as well as long leave provisions (i.e., about 3 years) decrease mothers' likelihood of being employed, whereas moderate leave lengths increase their attachment to the labor market. The availability of childcare as well as its quality and cost are additional aspects parents may take into consideration in deciding on their future work–family constellation. As already mentioned, limited access to affordable, quality childcare may increase the attractiveness to stay at home in order to personally care for the child. Accordingly, in countries offering more federally funded childcare, mothers are more involved in paid work than in countries with fewer public childcare facilities (e.g., Kangas and Rostgaard 2007; Pettit and Hook 2005; Uunk et al. 2005). Similarly, Kimmel (1998) demonstrated that in the US higher childcare costs were associated with less labor force participation of married mothers.

In contrast to the previous explanations, Hakim's preference theory (2003, 2006) places emphasis on individual values and attitudes. Hakim (2003, 2006) states that women's career choices can be explained to a large extent by these personal values and attitudes rather than social or structural constraints. Hakim (2003, 2006) argues that today's women have more opportunities compared to women decades earlier (e.g., due to birth control, equal legal rights). This allows them to make "genuine" decisions regarding their investments at home and in the workforce that reflect their preferences and goals. Hakim (2006) distinguishes three "sociological ideal types" of women who differ with respect to their work-family preferences (p. 287): home-centered, work-centered, and "adaptive". For home-centered women (estimated to be approximately 20 % of women), private life and caring for one's family and children are most important. Therefore, they will refrain from working if the family's financial situation allows them to do so. In contrast, work-centered women (also approximately 20 % of women), prioritize and invest their time in competitive activities, especially the work domain; these women often remain childless. "Adaptive" women, approximately 60 % in total, are the most diverse and strive to combine employment and family without setting clear priorities. According to Hakim (2003), they prefer part-time schedules or other work arrangements (e.g., temporary work) that facilitate work-family domain balance.

To determine which factors are most important for mothers' work involvement, studies that account for multilevel structure of data are most valuable. Using such an approach and taking into account 13 European countries, Uunk et al. (2005)

found that in countries with more public childcare options, mothers were less likely to reduce their working hours after childbirth than in countries with fewer public childcare provisions. Interestingly, the prevailing national gender culture did not have an additional effect on the prediction of mothers' work involvement (note, however, that the correlation between these gender attitudes and public childcare was high). Similarly, findings by Steiber and Haas (2009) also indicate that factors other than gender culture are more important for mothers' return-to-work decisions. In addition to cultural factors (i.e., the prevailing gender culture as well as societal childcare ideals), they also investigated the role of individual gender-role attitudes and caretaking ideals as well as institutional factors (i.e., childcare coverage, parental leave policies) in the employment of women with pre-school aged children. Considering 26 countries, they found that less traditional personal childcare ideals (i.e., if mothers do not believe that their employment negatively affects the well-being of young children) and, on a national level, more childcare provisions for children under the age of three were associated with a greater likelihood of mothers being involved in paid work. Neither societal gender-role norms nor parental leave regulations had an effect.

Psychological Models and Approaches

Although the transition out of and back into the workforce is very common for mothers, it has been widely overlooked in career theories and psychological research. Acknowledging the interrelatedness of work and family may be particularly important for understanding women's career decisions. According to Super's (1980) "life-span, life-space approach", an individual's career is characterized by repeated cycles of growth, exploration, establishment, maintenance, and decline. If, for example, individuals decide to change their jobs, they return to earlier stages. Furthermore, Super (1980) states that people may simultaneously play different roles throughout their life such as that of worker, homemaker, or parent. The constellation and relative importance of such roles during one's lifetime constitute one's career. In spite of these proposed dynamics in career development and the importance of multi-domain-engagement, most research has focused on permanent, continuous full-time employment and has neglected interruptions and commitment to roles outside of work. Only lately has research begun to address family influences on work decisions (e.g., Greenhaus and Powell 2012; Heras and Hall 2007; Powell and Greenhaus 2012).

Powell and Greenhaus (2012) distinguish between three broad types of work decisions that may be influenced by one's commitment to a family role: role entry (e.g., whether to seek a part-time or full-time job or to look for a job in a specific sector), role participation (i.e., the degree of investment of time and energy in a specific work role), and role exit (e.g., whether to leave a certain job or employer). Maternity leave decisions may fall into one or more of these categories. The majority of mothers will have to make decisions regarding the length of their leave

(in post-industrialized countries, women are typically allowed a protected leave of several weeks to recover from giving birth, see Ray et al. 2010), i.e., a (temporary) role exit. Furthermore, some mothers may want to reduce their working hours after return (i.e., a change in role participation) or may even decide to change their employer (role exit), which is likely to be accompanied by searching for alternative employment (i.e., role entry decisions).

According to Super (1980, p. 293), "fitting a career decision-making model into a life-stage model is difficult" and not within the scope of his approach. In the following, we will therefore present the theory of planned behavior (Ajzen 1991) and Brown's value based model of career decision-making (1996, 2002), which have been previously applied to explain mothers' maternity leave decisions. Furthermore, we will introduce social-cognitive career theory as another promising approach to explain women's career decisions when having a child.

Theory of planned behavior. The theory of planned behavior states that a person's behavior depends on preceding intentions to perform that behavior (Ajzen 1991). These behavioral intentions, in turn, are influenced by personal attitudes, subjective norms, and perceived behavioral control (see Fig. 1). The more favorable attitudes and subjective norms towards a specific behavior are, in addition to high perceived control, the stronger a person's intention to carry out this behavior should be. Similarly, women's personal work-family preferences (see Hakim's preference theory) as well as societal childcare norms (see cultural approach) are discussed by sociologists as central predictors of mothers' re-entry decisions.
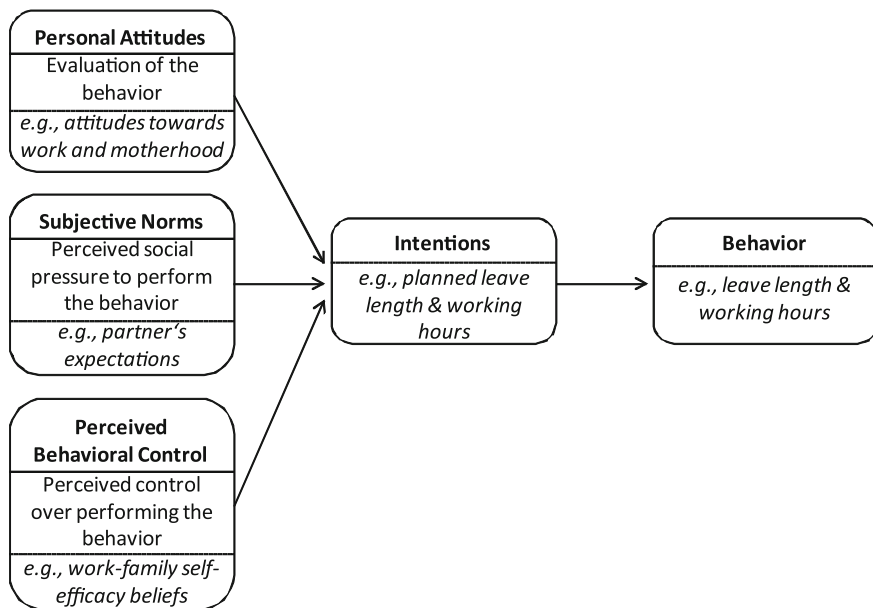

Fig. 1 Mothers' return-to-work decisions embedded in the theory of planned behavior

In psychological research, women's attitudes towards work and motherhood have been more in the focus than normative influences. Pregnant women with positive work attitudes are likely to be more motivated to work. This should be reflected in a subsequently earlier return to work after childbirth and a willingness to work longer hours. For example, employees working full-time were shown to consider their work to be more important than those with a part-time schedule (see meta-analysis by Thorsteinson 2003). Furthermore, with respect to maternity leave, positive pre-birth work attitudes predicted mothers' labor force participation after childbirth (e.g., Amstey and Whitbourne 1988; Glass and Riley 1998; Volling and Belsky 1993). In addition to work involvement, attitudes towards motherhood and childcare are often taken into account. Women who believe that maternal employment is harmful to their children's development may consider it particularly important to personally care for them. As returning to full-time employment reduces the time a mother can spend with her child, women with more concerns might prefer longer leaves and reduced postnatal working hours. Indeed, several studies found that women who agreed less with traditional beliefs about motherhood were more strongly involved in the workforce (e.g., Glass and Riley 1998; Lyness et al. 1999; Steiber and Haas 2009).

With respect to normative influences on maternal employment decisions, in addition to the rather distal cultural context (see above), expectations of one's partner, friends, and coworkers as well as the employing organization could be taken into account. As has been proposed by Moen and Sweet (2002), family and career paths within couples are linked, which means that (expectant) parents are likely to integrate their goals with respect to family and career. As a consequence, when investigating women's employment after childbirth, their partners' work situations and attitudes should not be neglected (see also Kangas and Rostgaard 2007). As shown by Werbel (1998) in a sample of expectant mothers, pre-birth employment intents were associated with perceived spouse preferences. Women who perceived their partners to appreciate maternal employment planned to return more quickly than those who indicated more concerns.

However, partnership represents only one central part of a woman's social context. Especially in situations that are new and associated with uncertainties, one may look for role models (cf. Bandura 1977a). Close friends and peers might serve as such role models with respect to women's workforce participation after childbirth. Although previous research has explored their role for the decision and timing of becoming parents (e.g., Keim et al. 2009; Lois and Becker 2014; Pink et al. 2014), their influence on employment intentions has been neglected so far.

One additional normative reference point for pregnant women is the employing organization and the perceived approval of maternity leave and part-time work schedules. In general, perceptions of a family-supportive climate and few career sanctions due to family commitments are associated with increased organizational commitment and decreased turnover intentions (e.g., O'Neill et al. 2009; Thompson and Prottas 2005). Lyness et al. (1999) showed that pregnant women who perceived a work-family supportive organizational culture intended to return to work rather quickly.

So far, there is only one study by Granrose and Kaplan (1994) that used the theory of planned behavior to predict women's return to work following childbirth. The authors asked female college students to state their intention to return to work within 3 years after childbirth and, approximately 10 years later, assessed their actual behavior. They found that intentions formed in college predicted how soon a woman returned to work after the birth of her first child. College intentions, in turn, were positively associated with favorable perceived consequences of working as well as with approval of work by significant others.

Brown's value based model of career choice. Values are defined as internalized standards against which people may evaluate their behavior (see Brown 2002). According to Brown (1996), values with high priorities are central for career choices. He proposes that decisions that are congruent with a person's value system will result in satisfaction. Furthermore, Brown (2002) acknowledges that individuals for whom social values are very important may be more strongly influenced in their career decisions by expectations of family and friends. The role of personal values and goals is also addressed in Hall's (2004) protean career concept. The protean career is "a career orientation in which the person, not the organization, is in charge, where the person's core values are driving career decisions, and where the main success criteria are subjective" (Hall 2004, p. 1).

Applying Brown's career model, Werbel (1998) examined the influence of personal values, perceived spouse preference, and family income on pregnant women's employment intentions. He regards women's approval of traditional gender roles and their job involvement as indicators of personal values. As mentioned before, women who perceived their partners as more traditional intended to return to work later after childbirth. With respect to values, women who agreed more strongly with traditional gender roles were more inclined to stay at home after childbirth. In contrast, Werbel (1998) found no effect for pregnant women's job involvement. According to the author, family values may be more important in predicting leave decisions, whereas work values may become more influential when investigating homemakers' intentions to return to the workforce.

Social-cognitive career theory. Grounded in social-cognitive theory (Bandura 1986), social-cognitive career theory (Lent and Brown 2013; Lent et al. 1994) was developed to explain mechanisms of career development. The theory suggests that individuals' career choices depend on the interplay of intra-person cognitive variables and extra-person contextual influences (Lent et al. 2000; Lent and Brown 2006). More precisely, it is assumed that a person's career choice depends on preceding goals to perform that behavior. These goals are shaped by people's beliefs about their ability to perform certain tasks (i.e., self-efficacy beliefs) and whether their efforts will be successful (i.e., outcome expectations) as well as their interests. Additionally, the theory includes contextual factors that affect the processes leading to career choices either directly or through moderating effects (see Fig. 2).

The central elements of this approach are self-efficacy beliefs, which are defined as "the conviction that one can successfully execute the behavior required to produce [certain] outcomes" (Bandura 1977b, p. 193). Self-efficacy beliefs enhance
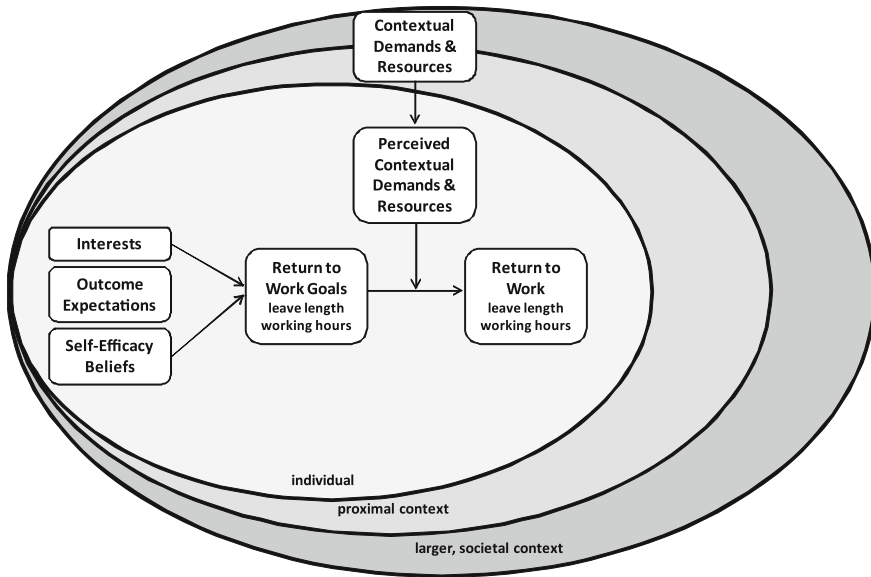
Fig. 2 Mothers' return-to-work decisions embedded in social-cognitive career theory

achievement because they encourage individuals to endorse challenging goals and maintain strong commitment (Bandura 1977b). Several authors have emphasized the importance of these beliefs in highly demanding life situations such as employment transitions (e.g., Gist and Mitchell 1992; Rigotti et al. 2008; Wiese and Heidemeier 2012). For example, Wiese and Heidemeier (2012) found that self-efficacy beliefs predict successful work adaptation during mother's re-entry phase. Furthermore, research in the field of occupational health indicates that self-efficacy beliefs predict an earlier work return after a long-term absence due to illness (Brouwer et al. 2009, 2010). Accordingly, when women feel confident about managing the dual affordances of work and family life, they are likely to plan to return after a rather short leave in spite of presumably high childcare demands. In contrast, in the above-mentioned study by Granrose and Kaplan (1994), self-efficacy beliefs were negatively related to women's intentions to return to work within 3 years after childbirth. The authors argue that women's intentions to stay home are more socially acceptable and may be less difficult to realize than simultaneously managing work and family life. Consequently, women may be more convinced to successfully realize return plans when they are less challenging to implement. Given these contradictory findings concerning self-efficacy beliefs and leave length, more attention must be paid to self-efficacy's actual role in the decision-making process.

Outcome expectations describe anticipated consequences of a certain career choice, e.g., the expectation to earn a lot of money when deciding to become an engineer. With respect to maternity leave decisions, such expectations may concern potential consequences for the child's well-being, the mother's career advancement,

or reactions of important others. These latter expected social reactions are similar to "subjective norms" in the theory of planned behavior (Ajzen 1991) and "social values" in Brown's value based model of career choice (1996, 2002).

In addition, Lent et al. (1994) take into account occupational interests, i.e., "patterns of likes, dislikes, and indifferences regarding career-relevant activities and occupations" (p. 88). They are similar to attitudes and values that have been presented as parts of the previously discussed models.

Intentions are an important predictor of an individual's actual behavior (see Ajzen 1991). However, several studies demonstrated deviations between the pre-birth plans of expectant mothers and their actual return-to-work behavior (e.g., Amstey and Whitbourne 1988; Harrison and Ungerer 2002; Hock et al. 1980; Houston and Marks 2003; Volling and Belsky 1993; Werbel 1998). For example, Coulson et al. (2012) investigated 186 mothers who, before childbirth, had intended to return to work within 12 months postpartum. One year after childbirth, 17 % had changed their mind and were still at home. Social-cognitive career theory (Lent et al. 1994) takes into account contextual supports and barriers that may affect whether or not people implement career-related choices. The role of parental leave regulations and childcare support as societal opportunity structures was already mentioned above. Financial circumstances may be another relevant factor to take into account. On the one hand, planned workforce participation might be especially pronounced in families in which a mother's income is economically indispensable. For example, there is evidence that mothers without partners return to work sooner than those in a partnership (e.g., Drobnič 2000; Glass and Riley 1998; Kuhlenkasper and Kauermann 2010). On the other hand, labor force participation is facilitated by an above-average economic situation because financial resources enable a family to hire outside help for household and childcare tasks. At the same time, a higher income is often associated with higher human capital, which, in turn, is known to foster mothers' return to work.

In the following, we will focus on support by one's supervisor and partner. Work-family supportive supervisor behavior refers to the extent to which a supervisor facilitates an employee's coordination of work and family demands (Kossek et al. 2011). Meta-analytic evidence suggests that perceiving one's supervisor as supportive with respect to work and family demands is negatively related to work-family conflicts (Kossek et al. 2011). Furthermore, supervisor support has been shown to have positive effects on return to work after sick leave (e.g., Janssen et al. 2003; Väänänen et al. 2003) and negatively associated with turnover intentions (e.g., Batt and Valcour 2003). Accordingly, women who perceive their supervisor as supporting the coordination of work and family can be expected to intend to return more quickly and work more hours than women who feel less supported. However, one might speculate that during pregnancy mothers perceive those supervisors as most supportive who express that they will support them regardless of whether they decide to return after a shorter or longer leave as well as regardless of whether or not they plan a significant reduction in working hours. In other words, a supervisor might be perceived as work-family supportive if he/she encourages a woman to take a short leave and work long hours if that is what the mother wants. However, a

supervisor might also be seen as supportive if he/she encourages a pregnant woman to take a relatively long leave or work few hours if she chooses to do so.

In her meta-analysis, Byron (2005) found negative relations between family/spouse support and the perception of work-family conflicts. Harrison and Ungerer (2002) showed that mothers who had returned within the first 12 months after childbirth felt more supported by friends and family members 1 year after giving birth than women who had not yet returned. Therefore, it seems likely that perceiving one's partner as supportive is negatively related to women's planned length of maternity leave and positively related to their planned postnatal working hours. Again, however, women may regard their partner as supportive if he encourages them to pursue their employment preferences irrespective of what those preferences are.

The birth of a child may also be associated with unexpected demands and experiences that influence whether a mother sticks to her pre-birth intentions. On the one hand, she may recognize that she enjoys being with the child more than expected and, therefore, might decide to stay home longer than originally planned. On the other hand, a child's difficult health status might increase parental time demands and strain, which may make a postponement of mother's re-entry more likely. For example, Spiess and Dunkelberg (2009) found that a child's severe health problems had a negative effect on women's labor force participation in the first year after childbirth. The implications of a child's low adaptability may differ from situations in which children suffer from serious health impairments that require intensive care. For example, findings by Coulson et al. (2012) suggest that a difficult temperament does not lead to a postponement of mothers' return to work. The authors compared mothers who had returned within one year as planned during pregnancy with those who decided to extend their maternity leave. The strongest predictor of returning to work within one year after childbirth was the infant's temperament—mothers who regarded their children as more difficult were more likely to have returned. The authors explain their unexpected finding with a possible desire to escape from an unpleasant and demanding situation at home.

Integrating the theory of planned behavior (Ajzen 1991), Brown's (1996) value based model of career choice and social-cognitive career theory (Lent et al. 1994), attitudes towards work and motherhood as well as self-efficacy beliefs can be regarded as central predictors for pregnant women's return-to-work intentions. The realization of these intentions may be influenced by contextual demands and resources. Furthermore, maternity leave decisions are embedded within a multi-layered environment, i.e., the immediate proximal context consisting of, for example, the partner, friends and supervisor as well as a larger, societal context including federal parental leave regulations and societal childcare ideals (see Fig. 2).

A more complex model that acknowledges the importance of different environmental systems for human development is Bronfenbrenner's (1989) ecological systems theory. Building on Bronfenbrenner's seminal work, Voydanoff (2007) describes work and family as microsystems that consist of specific activities, roles, and relationships. At the same time, interrelated microsystems such as family and

work represent a mesosystem. Functioning within and across the work and family domains may be influenced by exosystems, i.e., mesosystems that include microsystems in which individuals do not participate themselves, such as their partners' work setting. For example, a spouse's work setting and his flexibility of work scheduling might influence a mother's decision regarding her adaptation of working hours after childbirth. Microsystems, mesosystems, and exosystems are embedded in the macrosystem, which is characterized by specific cultural and structural opportunity structures and constraints (e.g., legal leave regulations and gender-specific beliefs and norms).

According to Voydanoff (2007), one direction for future research is to investigate the work-family mesosystem from a temporal process perspective. Such a perspective entails a focus on tracking the effects of changes in one life domain (e.g., the transition to parenthood, job entry) on the functioning in other domains over time. Accordingly, returning to work after maternity leave should be conceptualized as a process that comprises different sub-tasks and phases (see also Miller et al. 1996). For some women, this process might begin long before they become pregnant—for instance, if they reflect about when in the course of their careers they would like to have a child. During pregnancy and after childbirth, questions regarding the timing of return to work might evolve into an important decisional task. While being a homemaker, some women maintain contact to their co-workers and supervisors, thereby preparing their re-entry. The return-to-work transition is not completed on the day of re-entry but rather comprises the time until women view themselves and are seen by others as fully (re)integrated organizational members.

Consequences of Mothers' Return to Work After Childbirth

In the following, we will provide a brief overview of different perspectives on mothers' return to work after childbirth. In addition, we will summarize findings from a longitudinal project that focuses on mothers' experiences during this transition back to the workforce.

Within organizational research, leaves have been considered primarily with respect to mothers' career development. Several authors found mothers' withdrawal from the workforce and part-time schedules to have adverse consequences on subsequent income development and job advancement (e.g., Aisenbrey et al. 2009; Gangl and Ziefle 2009; Judiesch and Lyness 1999). Another research strand focuses on mothers' health and the amount of time necessary to recover from childbirth (e.g., Gjerdingen et al. 1990; Hyde et al. 1995; Staehelin et al. 2007). From a health perspective, the effects of maternal employment have also been investigated with respect to breastfeeding (e.g., Hawkins et al. 2007; Lindberg 1996). Summarizing the state of the art of medical research, Galtry and Callister (2005) suggest a leave

length of 6 months to be reasonable for full physical recovery from childbirth and good breastfeeding opportunity structures. Other authors examined consequences of parental leave and external childcare on children's emotional, social, and cognitive development (e.g., Goldberg et al. 2008; Hill et al. 2005; Lucas-Thompson et al. 2010; NICHD 1998, 2003). Depending on perspective (e.g., physician, employer, child, partner, society), one could draw different conclusions with respect to what constitutes the "optimal" leave length.

When women finally return to work after a period as a homemaker, they are faced with various demands. They must reorganize family life (e.g., childcare, household, leisure activities), accommodate to the new situation at the workplace, and, if it was their first maternity leave, adapt to the role of being an "employed mother" (see Wiese and Knecht 2015). Furthermore, even if mothers return to their former employer, they might be confronted with several changes. There might be new members in the team. Or, if a mother decides to work fewer hours after her return, she might adopt a different role within her previous team. Additionally and in particular after longer leaves, women might have to catch up with recent developments in their organizational fields (see Wiese and Knecht 2015). In sum, processes in this life situation can be assumed to be multi-facetted and complex. So far, however, they have received surprisingly little scientific attention.

In the following, we mainly refer to a longitudinal project that was conducted in Switzerland (German-speaking cantons), Germany, and Austria (for more details, see Jaeckel et al. 2012; Seiger and Wiese 2011; Wiese and Heidemeier 2012; Wiese and Ritter 2012). One central project aim was to analyze the trajectories of adjustment during mothers' re-entry phase. The overall project design comprised four measurement points: T0 took place 2 weeks before mothers' first day back at work ($n_0 = 301$), whereas the subsequent measurement points took place approximately 5 weeks (T1; $n_1 = 267$), 11 weeks (T2; $n_2 = 238$), and 6–8 months (T3; $n_3 = 208$) after the return to work. In addition, a subsample of 149 women took part in a 14-day diary study beginning 2 weeks after re-entry. It should be noted that parental leave regulations in the three countries are quite different. In Austria and Germany, protected parental leave options exist for mothers and fathers, who are both allowed to take up to 3 years leave. In Switzerland, where most study participants reside, only mothers have a statutory leave option with a maximum length of 16 weeks. In the present sample, leave length ranged from a few weeks to 18 years. However, more than 80 % of the participants had returned to work within the first 3 years after childbirth. After their return to work, they mostly held part-time positions (94 %), which is very common for mothers in these countries (OECD 2012).

Wiese and Heidemeier (2012) investigated the role of mothers' intentional self-regulation for their work adjustment after job re-entry. Self-regulatory components included self-efficacy beliefs and strategies of goal-setting and pursuit. They were assumed to be particularly beneficial for work adjustment when mothers face high contextual demands and have few contextual resources. Based on data from the three measurement points after re-entry (see above), they found that work

adjustment increased over time. Moreover, both self-efficacy beliefs and self-regulatory strategies predicted successful work adjustment.

As expected, contextual demands (i.e., work-related stress and a greater number of children) predicted poorer adjustment to work, whereas a greater number of weekly working hours (an indicator of contextual resources) positively predicted work adjustment. Certainly in a sample of primarily part-time employees, the number of hours spent at work may be regarded as a resource that helps mothers to more easily re-adapt to workplace tasks and demands. Two cross-sectional studies conducted in Israel and the U.S. found negative associations between working hours and work adjustment (Feldman et al. 2001, 2004). However, these samples comprised a much greater percentage of full-time employees; and their adjustment measure included items on work-family conflicts, which are known to be positively associated with working hours (Buehler and O'Brien 2011). Wiese and Heidemeier's (2012) measure of work adjustment, in contrast, comprised solely statements referring to the core aspects of organizational socialization, i.e., knowing one's tasks and the organizational culture as well as becoming socially integrated.

In line with their assumptions, the authors report that self-regulation is especially important for individuals who face high demands and/or have only few resources. For example, they found job stress to be less detrimental to work adjustment when women reported greater degrees of intentional self-regulation.

Unexpectedly, supervisor support, which was shown to be a resource for organizational newcomers (e.g., Jokisaari and Nurmi 2009), did not predict work adjustment during the process of mothers' job re-entry. The present analyses showed that, overall, the mean levels of perceived supervisor support were low and even decreased over time. It is possible that support from coworkers is more relevant.

Reciprocity of social support at the workplace plays an important role for employees' occupational self-efficacy beliefs. This was shown by Jaeckel et al. (2012), who also used data from the present project. Women who received a high amount and provided a low amount of social support reported the lowest self-efficacy beliefs. In contrast, women who received low amounts and provided high amounts of support reported the highest self-efficacy beliefs. However, as expected, this negative effect of over-benefitting was not found at the beginning of re-entry but rather emerged later in the return process. During the first weeks after re-entry, receiving help from coworkers without necessarily providing much support might be perceived as natural. After some months, not being able to adhere to the evolving norm of support reciprocity might be self-threatening and, therefore, have adverse effects on an employee's self-efficacy beliefs. Another potentially important source of support during re-entry is one's partner. Seiger and Wiese (2011) demonstrated that partner support failed to predict mothers' work adjustment but was beneficial for their emotional well-being.

Using standardized diary data collected at the beginning of organizational (re)-entry (see above), Wiese and Ritter (2012) investigated feelings of regrets about having returned to work as an alternative adjustment indicator. Interestingly, they found daily return regrets to predict lowered organizational commitment as well as

the intention to terminate one's employment relationship and a preference for fewer working hours. Return-to-work regrets—representing a proximal adaptation criterion—appear to be relevant for outcomes that are regarded as more distal success criteria of organizational socialization.

Concerning the prediction of daily regrets, Wiese and Ritter (2012) found both day-specific and person-specific factors to be relevant. As hypothesized, daily family-related stress experiences predicted working mothers' return regrets. In addition, emotional instability and not feeling sufficiently prepared for the return increased daily regrets. Daily regrets were also higher among women who reported financial constraints as a reason for their return to work.

Please note that early returners (<7 months) reported more daily return regrets, whereas late returners not only reported fewer regrets but were also more resilient when experiencing family stress: While early and late returners did not differ in the mean levels of family stress, family stress experiences only resulted in regrets among early returners. Hence, in terms of return-to-work regrets, leave length appeared to be a resilient factor. This is important to note because in I&O-psychology, leave length has mainly been conceptualized as a risk factor for future career development (see above).

Clearly, a more comprehensive view of adaptive leave length decisions requires an integrative evaluation of different outcome criteria. Psychologically, the crucial task in terms of the timing of return is to determine when a mother has optimal resources for successful return (see Wiese and Ritter 2012). Instead of focusing on one aspect, multiple factors must be taken into account such as the health status of mother and child, financial constraints, opportunity structures in one's occupational field and stress management strategies.

Future Research Avenues

Given the high percentage of mothers who return to work after a period of full concentration on family life, the transition out of and back into the workforce has evolved into a meaningful developmental task for many women. Although common, it has received relatively little attention by researchers working on developmental regulation in early and middle adulthood.

One important next step is to investigate the psychological processes and mechanisms before and during leaves as well as during the re-entry phase. Therefore, a systemic approach is warranted that takes into account the multilayered social environment in which these processes are embedded. For example, an analysis of the negotiation and planning processes of maternity leave with different social partners (i.e., spouse and supervisor), including, for instance, communication strategies, requirements for their effectiveness, and satisfaction with agreements, would be a promising avenue to follow in future research. With respect to re-entry, future studies might address the development of parents' behavioral strategies and routines that facilitate the management of work and family demands.

As has been pointed out before, maternity leave decisions are very complex. Therefore, the integration of different perspectives on what constitutes a successful return is required. Such a comprehensive evaluation should take into account both short- and long-term consequences. The complexity of mothers' employment decisions is also reflected in the numerous ways in which women adapt their working situation to the birth of a child. These may comprise decisions with respect to leave duration, the employing organization, or the adaptation of the work schedule. Of course, such constellations should also be taken into account in research examining the consequences of maternity leave. For example, returning after a long period on a full-time schedule may have different career consequences than deciding to return quickly and permanently work part-time.

Future research should not ignore the fact that decisions and preferences concerning mothers' employment situation after childbirth may change. After their re-entry, some women may decide to leave the workforce again or, if they stay in the workforce, they may change their working hours several times (see Wiese and Ritter 2012). There is still a lack of knowledge concerning such changes. Exploring reasons for and effects of such changes are further topics for upcoming studies. Initial findings suggest that congruence between preferences and actual employment status positively impacts mothers' well-being (see Hock and DeMeis 1990; Holtom et al. 2002; Klein et al. 1998).

There is evidence from longitudinal studies that the relationship between attitudes towards maternal employment and non-parental care and mothers' return behavior is not unidirectional but rather reciprocal (e.g., Berrington et al. 2008; Kan 2007; Schober and Scott 2012). For example, if women decide to return to work quickly, it is likely that their views on maternal employment will become more favorable over time. Possible explanations for such an attitude adaptation may include positive experiences with the new role as an employed mother or, alternatively, the desire to reduce cognitive dissonance which may arise when one's behavior and beliefs are contradictory (see Festinger 1957). Investigating these changes in attitudes is another important avenue for future research.

Future studies might identify additional factors on individual, partnership, and organizational levels that differentiate between women who realize their pre-birth re-entry plans and those who deviate from them. Self-regulatory approaches might be most helpful to better understand the processes that underlie the more or less successful implementation of the original plans (e.g., Bagozzi 1992; Gollwitzer 1990; Heckhausen and Gollwitzer 1987). All such approaches acknowledge the importance of selecting and planning one's goals for goal achievement (see also Achtziger et al. 2012). Accordingly, thoroughly planning their re-entry should help mothers realize their pre-birth return intentions (see also Coulson et al. 2012; Houston and Marks 2003). Note, however, that it is not necessarily maladaptive to deviate from one's original plans in light of, for instance, changing contextual opportunity structures and demands (see Wrosch et al. 2003).

Overall, men's employment situations are still less affected by childbirth than women's (OECD 2012). In contrast to maternity leave, paternity leave and fathers' decisions to work part-time have, therefore, been less frequently the subject of

investigations. There are, however, some recent studies from countries in which paternity leave is more common (e.g., in Norway: Bratberg and Naz 2014; Rege and Solli 2013; in Sweden: Bygren and Duvander 2006; Duvander 2014). With fathers becoming more involved in childcare, future research should also investigate determinants of fathers' decisions to take family-related leave or reduce working hours and compare these determinants with those of mothers. Similarly, future studies that investigate the effects of paternity leave on fathers' well-being and career advancement, for instance, are also warranted. Interestingly, there is already much research with respect to the effects of maternal employment on child development, whereas fathers' work involvement has not yet been discussed as a potential risk factor.

Methodological Challenges and Prospects

In order to track mothers' experiences during their maternity leave process, longitudinal research designs are most appropriate and highly warranted. For an in-depth analysis, more than two measurement points (e.g., one during pregnancy and one after childbirth) should be preferred. Furthermore, the last measurement in most previous studies takes place no later than one year after childbirth (e.g., Harrison and Ungerer 2002; Hock et al. 1980; Houston and Marks 2003). In order to assess long-term consequences and especially in countries in which some mothers stay at home for several years, study designs with prolonged time periods are most valuable. When investigating contextual influences of the maternity leave process, we recommend applying multilevel approaches that take into account that individuals are clustered within couples, families, peer groups, organizations, and nations.

Moreover, we recommend the use of various methods to assess mothers' emotions, beliefs, and attitudes instead of focusing solely on self-report questionnaires and cross-sectional data. For example, to reduce social desirability biases, attitudes and stereotypes (e.g., gender role attitudes) could also be assessed via implicit association tests. In addition, *reports* from significant *others* may also provide new insights. Furthermore, diary approaches may allow a more precise examination of individual experiences in the face of work-family experiences and reduce biases associated with long-term retrospective recall (see Wiese and Ritter 2012).

Practical Implications

There are different ways in which career counselors, employing organizations, and governments can support expectant mothers and their partners before and after childbirth.

For making optimal decisions concerning their work participation after child-birth, women should gather information with respect to, for instance, legal leave regulations, organizational support, career consequences, and child development. Reliable, federally funded information portals that include current policy regulations as well as understandably portrayed research findings from different disciplines may also aid mothers in making leave-related decisions.

Additionally, an active exchange with working and non-working mothers may help pregnant women obtain a realistic view of motherhood and introduce them to different work-family models, which may help them plan their return to work and work-family reconciliation. As a consequence, satisfaction should increase, whereas doubts and regrets related to their return to work should decrease.

As others' expectations may impact women's maternity leave decision, mothers should be supported in acting upon their own convictions. In order to become aware of their own preferences and values, women might seek professional advice from a career counselor. Possible issues are one's personal family and career goals but also the perceived expectations of others' towards one's new role as mother. With respect to work-time arrangements, the advantages and disadvantages of part-time employment and flextime must be weighed and may represent an additional important topic for career counseling. On the one hand, working few hours may slow down the work adaptation processes (Wiese and Heidemeier 2012). On the other hand, a high number of working hours is positively related to work-family conflicts (Buehler and O'Brien 2011). The optimal number of working hours is, of course, dependent on the specific resources and demands of the employee. This also holds true regarding the question of leave length.

Furthermore, because childbirth concerns (expectant) mothers' and fathers' lives, parents' work participation following childbirth should be a joint decision involving both partners. For example, when facing childbirth couples may deliberatively discuss maternity (and paternity) leave as well as childcare responsibilities and non-parental childcare. Several aspects such as legal leave regulations and other family policies, breastfeeding intentions, childcare options, their current and future job situation as well as financial aspects may be considered in these negotiations (see Galtry and Callister 2005).

Employers are typically interested in planning reliably—the more precise a mother's return-to-work plans are and the greater the likelihood that she will adhere to them, the better the organization will be able to handle her maternity leave. There is some evidence (e.g., Coulson et al. 2012; Houston and Marks 2003) that planning plays an important role in the realization of pre-birth return intentions. We strongly recommend that supervisors and their pregnant female staff members dedicate some time during pregnancy to discussing their expectations with respect to leave-taking, return, and re-entry. In countries in which legal leave options allow long absences, employers might consider creating incentives that encourage women to return more quickly, e.g., a bonus for returning within a certain period.

With respect to individual resources that are helpful during job re-entry, self-efficacy beliefs play an important role (Wiese and Heidemeier 2012). Therefore, interventions that increase these beliefs can be expected to be beneficial.

Here, employees might be encouraged to remember past success in coping with prior career transitions or other difficult work situations. Since not only self-efficacy beliefs but also actual self-regulatory behaviors promote work adaptation (Wiese and Heidemeier 2012), one might also consider self-management trainings. Another training focus is stress-management. Please note, however, that offering trainings may also be problematic: In the very beginning of job re-entry, employees might not have the time to participate in several kinds of trainings. Particularly employees at high risk for health impairments (e.g., those with very high workloads) may not take advantage of training programs if participation is voluntary (see Wiese and Knecht 2015). In addition, it might be helpful to encourage mothers to discuss their work-family experiences in order to learn from and support each other.

We consider it promising that employers support mothers (and fathers) with respect to balancing work and family demands. These activities may comprise, for instance, assistance in finding an appropriate child care arrangement and "emergency" childcare as well as part-time schedules and a family-friendly organizational climate.

Finally, governments may support young families by providing reasonable parental leave regulations that allow mothers to physically recover from childbirth and breastfeed but, at the same time, are not restricted to women. Furthermore, subsidizing high quality childcare, especially for very young children, may also be beneficial.

Conclusion

Although the return to employment after family-related leave is a challenge that the majority of women face at least once in their lives, it has rarely been examined from a lifespan perspective in psychological research. Successfully managing this transition in which work and family experiences are substantially interrelated is a crucial task for mothers and their families. Here, an exclusive view on objective career success criteria appears to be insufficient. Other success criteria might involve the couple's evaluation of the family's overall life situation or the health of the mother and child.

Research on maternity leave and work-return behavior clearly profits from an integrative view on processes of decision-making and decisional consequences. With respect to both decision-making and decisional consequences, individual attitudes, beliefs, and regulatory behaviors as well as also micro-, meso-, and macrosystemic influences must be taken into account. Here, it might be particularly important to consider interactions between individual behavior and contextual resources and demands. As demonstrated with respect to the re-entry into working life, mothers' use of self-regulatory strategies, for instance, can mitigate the adverse effects of high contextual constraints and low contextual resources. For a better understanding of the unique and interactive role of individual and contextual characteristics, an interdisciplinary perspective integrating theories and research from the fields of economics, sociology, and psychology is valuable and highly warranted.

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Parental Leave and Return to Work

Gwenith G. Fisher, Morgan A. Valley, Salla Toppinen-Tanner and Victoria P. Mattingly

Abstract The transition to parenthood represents an exciting time for many adults, yet can also pose challenges for working parents trying to balance this new and important role. Due to a mix of political, economic, workplace and personal factors, the majority of parents return to work following the birth of a child in the Western countries. Public policy for parental leave and the timeframe for returning to work vary significantly across countries. For example, in some Scandinavian and European countries, mothers are away from work for 10 months to 3 years, whereas most mothers in the U.S. who return to work do so within 6–12 weeks. In this chapter we take a global perspective to discuss the parental leave and return to work process. Our theoretical background includes a multi-disciplinary perspective, integrating theories from the work-family and return to work literatures. Structured as a four-stage process (pre-leave, away on leave, initial transition, and post-transition back to work), we review current parental leave policies and practices, as well as individual and workplace factors that affect the return to work process. We also describe interventions that have been conducted during this process to improve parents' transitions and adjustment. We conclude with practical implications and discuss future research directions.

Keywords Parental leave · Maternity leave · Return to work · Breastfeeding and work

Over the past 40 years, family structure and the proportion of parents who work has shifted dramatically. For example, in 1968 only 27 % of mothers with children under the age of 18 participated in the U.S. workforce, compared to 71 % of mothers in 2014 (U.S. Bureau of Labor Statistics 2014). Both parents participate in

G.G. Fisher (✉) · M.A. Valley · V.P. Mattingly
Department of Psychology, Colorado State University, Fort Collins, USA
e-mail: Gwen.Fisher@colostate.edu

S. Toppinen-Tanner
Development of Work and Organizations, Finnish Institute
of Occupational Health, Helsinki, Finland

the workforce in more than half of married-couple families (60.2 %) with children under 18 and in married-couple families with children younger than 6-years-old (55.3 %; U.S. Bureau of Labor Statistics 2014). Among unmarried mothers with children younger than 18 years of age, 69.4 % were in the labor force in 2012 (U.S. Bureau of Labor Statistics 2013). In the U.S., more than half (57.1 %) of mothers with infants are in the labor force (U.S. Bureau of Labor Statistics 2014). Labor force participation among women in Europe has increased from 55 % in the 1990s to 66 % in 2008 (Cippollone et al. 2013). In Norway, 80 % of women of child-bearing age are in the workforce (Statistics Norway 2010). In Australia, 66.8 % of women with school-age children are working (Chapman et al. 2001). Although the share of part-time work varies between the countries, the degree of work partici-pation has increased markedly among women everywhere.

Given the high proportion of mothers in the labor force as well as the increased rate with which fathers take time off from work to care for children following childbirth or adoption (Bygren and Duvander 2006; Hyde et al. 1993), understanding women's and men's use of parental leave and time away from work after the birth or adoption of a child and the adjustment upon return to work is an increasingly important work and family issue. We use the term "parental leave" to refer to all periods of childcare (including subsidized, paid, or unpaid) away from work life. There are multiple reasons why this topic warrants attention in the organizational psychology literature. Although becoming a parent can be a very happy and exciting time, the transition to parenthood has been found to be quite stressful (Alstveit et al. 2011; Barnes 2013). This transition is associated with increased marital distress and dissatisfaction for many new parents (Belsky and Kelly 1994). Second, prior research has found that how women prioritize family and work when they return to work following parental leave is dictated to a great extent by family leave policies (McGovern et al. 2000; Singley and Hynes 2005). Parental leave policies are related to women's continued employment (e.g., whether and when they return to work), division of household labor (Cleveland et al. in press), parental bonding, as well as infant and maternal health (Kamerman 1999, 2006; Tanaka 2005). Lastly and importantly, the return to work transition may significantly impact one's work—including one's own work performance, as well as key stakeholders in the organization (e.g., supervisor, coworkers, and subordinates). Return to work after parental leave represents an important developmental transition, especially for women, which has largely been neglected in previous research (Alstveit et al. 2011; Millward 2006; Wiese and Heidemeier 2012).

Although research on work/family issues has grown exponentially over the last three to four decades, little work/family research has specifically examined the transition of returning to work following parental leave. Prior research that has examined this transition has been published in many different fields of study. Therefore, the primary aim of this chapter is to provide an integrative review of the literature across many disciplines to guide future research and practice, particularly for organizational scholars and HR practitioners.

In this chapter we conceptualize parental leave and return to work as a process that unfolds over time and involves many stakeholders. We will describe this process and the societal, family, work, and individual factors related to adjustment

in returning to work following parental leave. We will discuss various outcomes of return to work, including preparedness for return to work, domain satisfaction, work/life balance, breastfeeding continuation, physical health and psychological well-being—many of which are common outcomes in work/family research more generally. We will also describe interventions that have been conducted to improve mothers' adjustment to work as well as recommendations for additional interventions, practical implications and future research directions.

Theoretical Background

We begin by drawing upon three theories to guide our understanding of the process of taking parental leave and returning to work: role theory, job demands-resources theory, and open systems theory. Next we describe each of these theories and then explain how they may be integrated to understand the return to work process.

Role theory (Greenhaus and Beutell 1985; Kahn et al. 1964) is central to our understanding of parental leave and return to work among mothers and fathers. Role theory stipulates that an individual's roles (e.g., worker, mother, spouse) each consist of demands that must be met to successfully perform that role. Becoming a parent adds a social role to what one needs or is expected to do. Therefore, one of the primary adjustments that becomes necessary when a new parent returns to work is learning how to manage demands in the new role. According to role theory (Kahn et al. 1964), family and work role demands often compete for time and can produce strain or behavior-related role pressure incompatibility (Greenhaus and Beutell 1985). For employed parents, the need to reconcile work and family roles impacts how they manage and prioritize demands across both life domains. A great deal of work/family literature has conceptualized work/family conflict as a stressor that occurs when demands in one role (e.g., work) are incompatible with demands in another role (e.g., parent).

The job demands-resources model (Bakker and Demerouti 2007; Demerouti et al. 2001) is useful for guiding our understanding of parental leave and return to work. This model stipulates that job demands are "physical, social, or organizational aspects of a job that require sustained physical or mental effort and are therefore associated with certain physiological or psychological costs" (Demerouti et al. 2001, p. 501). Examples of job demands include physical demands, emotional demands, and work pressure. Job resources, on the other hand, refer to physical, psychological, social, or organizational aspects of the job that facilitate achieving work goals or serve to reduce job demands and the associated physiological and psychological costs. Examples of job resources include supervisor coaching, having clear expectations of one's work role, and autonomy. Based on the job demands-resources model, workers are less likely to experience deleterious effects of work if job demands are low or resources are available to buffer against negative job demands. Demerouti et al. (2012) described the job demands-resources model in relation to the work/family interface. Specifically, these researchers described job demands and job resources, as well as family demands and family resources related to the experience of work/family conflict.

Open systems theory (Katz and Kahn 1978) refers to the extent that individuals and organizations exist in the context of social systems comprised of permeable boundaries such that interactions and exchanges take place between the external environment, the work organization, the worker, and the worker's family. This is consistent with ecological systems theory (Bronfenbrenner 1977), which purports that there are multiple interconnected levels of influences on an individual. Open systems theory suggests that there are factors at multiple levels that may influence whether and for how long one takes parental leave as well as one's ability to adjust when returning to work after leave. Examples include individual values, family needs, organizational policies and norms, as well as national policies and societal norms.

Parental Leave and Return to Work: A Process

Return to Work from Illness or Injury

To facilitate understanding of the return to work process, we briefly review the return to work literature, which has traditionally focused on the process of returning to work following illness or injury. Return to work after injury or illness has been the focus of both academic research and clinical medical practice for many years. This robust literature has addressed the factors and interventions that lead to decreased lengths of leave, improved recovery from symptoms, as well as what enables workers to remain in the workforce in the long-term (e.g., Franche et al. 2005; Krause et al. 1998, 2001; Spelten et al. 2002). Return to work after parental leave differs from return to work after injury in several important ways. For example, new mothers require time to physically recover from childbirth, but the challenges to returning to work for both mothers and fathers after parental leave relate to new and changing roles and family structures rather than primarily physical limitations alone. Whereas the goal of research and interventions focusing on returning to work after injury or illness is typically to reduce work disability duration, lost work days and associated costs for both the employer and employee (Franche et al. 2005; Krause et al. 1998), length of time away from work for parental leave is not as important as the goal of easing the transition of assuming additional family role responsibilities. Moreover, more regulations and guidance appear to be in place for return to work following occupational injury or disability relative to parental leave. Despite these differences, the literature about return to work after injury can inform our understanding of the process of return to work after parental leave because the processes share some commonalities—primarily the need to transition back to work after an extended absence. As such, there are conceptual models presented in the return to work after injury literature that may help clarify how we understand return to work after parental leave.

For example, Young et al. (2005) proposed a developmental conceptualization of return to work following illness or injury in which they call attention to the role of key stakeholders, both people and organizations, in the dynamic and evolving process of returning to work after absence. They point out that stakeholders have changing relevant concerns, motives, and goals that lead to important outcomes at each stage of the process: away from work, re-entry into the workplace, retention or maintenance once the worker has returned, and ultimately advancement. These same stages and the impact of changing stakeholder needs, motives and goals may apply well in the dynamic process of returning to work after parental leave.

One exception in the context of parental leave and return to work is the additional stage of pre-leave planning, because the parent knows in advance that they will have a child. The pre-leave stage involves the physical changes among mothers, as well as the social and psychological factors that become salient in anticipating and preparing for parenthood which affect both parents. Another key difference is that in the return to work after injury process, stakeholders are likely employees, employers, and medical providers, whereas in the process of returning to work after parental leave, key stakeholders also include the worker's family.

Stages of Parental Leave and Return to Work

We suggest that there are four stages in the parental leave/return to work process: pre-leave, away on leave, transitioning back to work, and full integration back at work. These stages take place sequentially, although the length of time spent in each stage may vary considerably across individuals. Open systems and ecological systems theories suggest that there are factors at multiple levels that may influence any or all of the stages of this process. Each of the stages and ways in which multilevel factors may affect the process are described next.

Pre-leave

The first stage of the parental leave process is pre-leave. As stated previously, one characteristic of parental leave, compared to other types of family, medical, or disability leave, is that typically the time away from work is anticipated. Because a pregnant worker knows that she will be away from work for some period of time, anticipating the leave offers an opportunity for planning. Prior research has identified three types of planning: planning with one's employer, planning with one's partner, and planning for childcare (Harrison and Ungerer 2002). The amount of planning done during pregnancy is positively related to whether a mother returns to work following parental leave (Coulson et al. 2012).

Based on the job demands-resources model, the pre-leave stage is an ideal time to assess anticipated demands and identify resources needed for this process.

During the planning stage, the worker may think about or plan for the length of time during which he or she anticipates being away from work, become familiar with government and employer leave policies, consult with the Human Resources department as needed, and communicate plans with one's supervisor, and other key stakeholders in the organization (e.g., coworkers and subordinates, and possibly customers, if relevant; Coulson et al. 2012). One of the challenges with the pre-leave stage is that in many cases the worker may not know precisely when he or she will commence parental leave. In some cases, parental leave may begin earlier than anticipated (such as when a baby arrives prior to the expecting mother's due date, or due to pregnancy complications or other health issues that preclude continued work while pregnant). Galtry and Callister (2005) highlighted the fact that the earlier a worker begins maternity leave prior to having the baby, the less time she will have available to remain away from work *after* the baby arrives.

During the pre-leave stage, the worker may develop expectations for what work and non-work life will be like after the child arrives. These expectations may be shaped by non-work roles and demands, such as household chores and household division of labor (e.g., who will do grocery shopping, meal preparation, laundry, etc.) as well as work demands, including work hours. Such expectations may be driven by family or couple norms for household division of labor (Cleveland et al. in press), as well as workplace norms and culture (e.g., culture of long work hours; family supportive organizational perceptions; Allen et al. 2013). Factors that may be important during the pre-leave stage include the expecting mother's mental and physical health and energy level, amount of time until anticipated leave begins, negotiation skills, support (e.g., spousal, family, supervisor or coworker support) and workplace characteristics (e.g., percentage of women in the organization; Bygren and Duvander 2006).

Away on Leave

The second stage involves actually being away on leave. An important factor in whether and how long a parent takes time away from work depends upon formal leave policies (Han et al. 2009; McGovern et al. 2000; Singley and Hynes 2005). Parental leave policies may be enacted by national or state government legislation, or established by the work organization. Parental leave policies may be conceptualized as a resource associated with providing workers with time away from work to adjust to new family roles. Next we describe parental leave policies and use of leave.

Parental Leave Policies

There are two primary types of public policies related to parental leave. The first relates to protected leave time—how long an employer will retain the worker's job

in the organization. The second concerns whether the time away from work is paid or unpaid. Countries around the world vary widely regarding parental leave policies. For example, ten countries (Poland, Estonia, Spain, Lithuania, The Czech Republic, Slovakia, Germany, Hungary, France and Finland) provide at least three years of protected leave time for mothers or in some cases fathers, with a median of thirteen months of protected leave time across all countries in the Organisation for Economic Co-operation and Development (OECD; Livingston 2013). Although policies may permit either the mother or father to take leave time, in practice mothers are more likely to take extended time away from work compared to fathers. The United States lags far behind 37 other countries in the OECD, with 12 weeks of protected leave time. For detail regarding paid and protected leave time by country, please see the article by Livingston (2013). Regarding fathers, 25 of the 38 countries in the OECD studied by Livingston (2013) offer guaranteed paternity leave, which is time away from work available specifically for new fathers. For example, Norway, Ireland, Iceland, Slovenia, Sweden and Germany each offer at least eight weeks of protected paternity leave. Other countries have considerably less generous paternity leave policies. Specifically, Greece, Luxembourg, the Netherlands, South Korea, Austria and Hungary have paternity leave that is guaranteed for one week or less (Livingston 2013). One important note is that the issue of maternity and paternity leave is further complicated by policies in which leave time is divided between mothers and fathers, such that if one parent doesn't take his or her share, the other parent cannot use that time.

Recently Allen et al. (2013) made an excellent contribution to the literature by examining work/family conflict in relation to parental leave, sick leave, and annual leave policies in multiple OECD countries. Based on their study, Allen et al. (2013) concluded that reports of work/family conflict were negatively related to the amount of sick leave available to employees and therefore sick leave policy may be a more useful solution to help employees manage work and family demands compared to parental leave policy. However, we would not expect work/family conflict to be strongly related to parental leave policy—work/family conflict is more likely to take place during later stages in the return to work process (i.e., our stage three or stage four—once the employee returns to work). We recommend additional research to further understand the mechanisms at play regarding the relation between work/family conflict and leave policies.

The second type of policy concerns whether parents receive pay while on parental leave (i.e., paid maternity or paternity leave). Most countries have national policies mandating paid and protected parental leave (Kamerman 2006). For example, the European Union mandates three months of parental leave within its member states. Among the countries that offer at least eight weeks of paternity leave, all except Ireland mandate that at least some of the paternity leave time away from work be paid.

The situation regarding paid leave in the U.S. is quite different compared to the E.U. Specifically, the U.S. lags considerably as one of four countries in the world that does not mandate paid maternity leave for working mothers (Hegewisch and Hara 2013). At the time this chapter was written, three U.S. states (California, New

Jersey, and Rhode Island) have established paid maternity leave policies. Most states in the U.S. rely on employers to voluntarily provide paid parental leave—yet only 21 % of employers offer paid maternity leave and only 17 % offer paid paternity leave (Society for Human Resource Management 2015).

In addition to public policies regarding the length of protected and paid parental leave, some public policies have been enacted to govern non-parental childcare benefits and early childhood benefits. The focus of this chapter is on parental leave and does not address public policies related to childcare or childhood benefits. However, as we will discuss later, arranging for acceptable and affordable childcare is an important step to facilitate worker and child well-being during later stages in the parental leave/return to work process.

Use of Parental Leave

Access to job-protected parental leave rose substantially in the U.S. after the enactment of the Federal Family and Medical Leave Act (Han et al. 2009). The FMLA was signed into U.S. law in 1993, providing 12 weeks of job-protected unpaid leave for workers who meet certain qualifications such as having worked at least 12 months for an employer with 50 or more employees (U.S. Department of Labor). It is important to note that this federal policy and many related state policies exclude workers employed by small businesses. The expansion of paternal leave policies was associated with an increase in leave taking as well as increase in time spent on leave for mothers and fathers, although this increase benefitted college-educated or married parents more than less-educated or single parents (Han et al. 2009).

Despite the increased access to job-protected parental leave in the United States, utilization and length of leave remains less than ideal in the U.S. Only two-thirds of new mothers report taking leave after the birth of their child (U.S. Department of Health and Human Services 2011). For mothers who take leave, the average parental leave is 10.3 weeks, and almost 80 % of first time mothers who worked during their pregnancy return to work within 12 months of the birth of their child (Laughlin 2011). A recent survey of fathers in U.S. corporations found that 84 % of fathers take some time off following the birth of their child, with most taking less than two weeks of parental leave after the birth of the child (Harrington et al. 2011). Almost all of the dads returned to work in the same job after parental leave.

Although use of parental leave varies across countries, several studies suggest that there is a trend toward an increased utilization of parental leave after childbirth, especially among fathers (e.g., O'Brien 2009; Kaufman et al. 2010). Use of parental leave has important implications for parents, families, workplaces, communities and governments throughout the world.

Potential Moderators

The away-on-leave stage of the parental leave/return to work process is typically characterized by maternal recovery from childbirth, parental bonding, and a focus on family roles. There are a variety of individual, family, and work-related factors that may moderate the length of time workers remain on leave as well as their experiences during this stage. Examples include maternal physical and mental health (Carlson et al. 2011; Coulson et al. 2012) including post-partum depression, infant temperament and health, job satisfaction (Brough et al. 2009), financial considerations (Hofferth and Curtin 2006), and social support (Houston and Marks 2003).

Vast cross-national differences in the length of time that parents, and especially mothers, are away from work demonstrate that national policies and norms are also important factors. Additionally, there are large gender differences such that women typically take significantly more time away from work than men—due to the need for recovery from childbirth, breastfeeding, and traditional gender roles. Women may be away from work for months or even years, whereas men are more likely to be away for days or weeks (Han et al. 2009; Harrington et al. 2011). While on leave, parents may also need to reassess their pre-leave intentions regarding whether and when to return to work depending on situations they face. More specifically, a parent may need to return to work sooner or later than originally planned due to family financial factors or mother or child health issues, among other factors.

Boundary management is another issue relevant to being away from work. Work/family literature over the last decade has highlighted the importance of boundaries between work and home in understanding both the negative and positive aspects of the work/family interface (i.e., conflict and facilitation; Bulger et al. 2007; Matthews et al. 2010). Some workers may establish clear boundaries and abstain from work during parental leave, whereas others may have more flexible boundaries (e.g., check work-related email, engage in some work, although possibly at a reduced level of effort) while being generally away on leave. Future research should examine attachment to or detachment from work during this time to identify work patterns. Such research could examine antecedents (e.g., individual characteristics) as well as consequences related to boundaries and work engagement during parental leave.

Initial Transition Back to Work

As previously described, most fathers and a majority of mothers return to work after the transition to parenthood. Most of the important factors discussed regarding this stage are more relevant for maternity rather than paternity leave, primarily because mothers are much more likely to have been away from work for a longer period of time than men.

Two key factors in the transition process include the length of time that the worker has been away (Feldman et al. 2004) and infant temperament (Coulson et al. 2012). Feldman et al. (2004) found that a shorter maternity leave time (<12 weeks) was related to higher levels of maternal depression, a higher negative impact of birth on one's self esteem and marriage, less knowledge of infant development, less preoccupation with the infant, and higher levels of career centrality. Among men, longer paternity leave time was associated with positive perceived employer reactions, higher levels of marital support, more preoccupation with the infant, and higher levels of family role salience. In terms of infant temperament, Coulson et al. (2012) found that mothers who reported that their child had a more difficult temperament were more likely to return to work than those with children with less difficult temperaments. Regarding leave duration and parent mental health, Galtry and Callister (2005) suggested that the issue is not really whether a parent should work vs. stay home, but rather whether one's actual role fits their desired role.

Other factors that have been identified as related to when and how well workers transition back to work include job satisfaction, hours worked per week prior to maternity leave, anticipated length of leave, hours per week anticipated upon returning to work, and availability of affordable high quality childcare (Coulson et al. 2012). Feldman et al. (2004) found that marital support and career centrality positively related to both mothers' and fathers' adaptation back to work (including self-perceptions of job performance). In addition, work hours and depression were negatively related to adaptation among mothers (Feldman et al. 2004). Taken together, these results are consistent with the job demands-resources model. We suggest that higher work and/or family demands (such as longer work hours, less childcare availability) would be associated with lower levels of well-being during the adjustment process, whereas resources (e.g., social support) would be associated with better adjustment.

Carlson et al. (2011) conducted a longitudinal study to identify organizational factors related to work/family experiences, health, and turnover among working mothers of infants. Carlson et al.'s results indicated that mothers in better physical and mental health were less likely to turnover. In addition, they found that workers with non-standard work schedules (e.g., jobs requiring night and weekend work hours) were more likely to experience work/family conflict, and schedule control served to buffer the negative effects of some job demands on work/family conflict.

Other research has identified individual and contextual factors as important for adjustment during the return to work process. Specifically, Wiese and Heidemeier (2012) conducted a longitudinal study across three waves (between 5 and 24 weeks after returning to work) and found that self-efficacy and self-regulatory strategies (selection, optimization, and compensation; SOC) predicted better work adjustment. In addition, these researchers identified an interaction such that contextual characteristics interacted with intentional self-regulation. Among mothers with many family obligations (indicating high levels of stress at work, and working for only a few hours per week), it was particularly useful to apply self-regulatory strategies.

We propose that the ideal timing for returning to work is based on many factors—including work and family demands and resources. For example, returning to work sooner than a parent is "ready" to return to work may interfere with the adjustment process. Although returning to work earlier may provide financial resources, it may also be associated with physical or emotional costs (e.g., not having fully recovered physically; anxiety related to separating from one's child). On the other hand, returning to work later may offer important benefits to one's family/child (e.g., facilitating emotional bonding and attachment, increased odds of continued breastfeeding), but make the process of adjusting back to one's work role demands more challenging. Empirical research supports this general proposition. For example, a Finnish study showed that the transition to motherhood not only affects personal goals in the family domain, but also affects goals in the work domain (Salmela-Aro et al. 2000). Furthermore, taking leave or time away from work may impact one's career in the long run. For instance, European economists have shown that wages are reduced approximately 3–5.7 % per year on leave (Ejrnæs and Kunze 2013). Therefore, it takes about years to make up the wage difference due to a child birth compared to others who didn't have a baby.

Breastfeeding/Lactation Needs

One of the reasons why women take such a long maternity leave is to support breastfeeding their infant. In the United States, the American Academy of Pediatrics (AAP) recommends that mothers exclusively breastfeed their infants for the first six months (i.e., not feed infants anything other than breastmilk) and continue breastfeeding (while supplementing with solid foods) until the child is at least 12 months old. When a breastfeeding mother is at work and not near her infant, she will need to periodically express milk. Failure to do so disrupts the body's demand/supply process that sustains breastfeeding, and can otherwise be physically uncomfortable and lead to health problems (e.g., mastitis) if a breastfeeding mother does not express milk frequently enough.

Maternal employment is one of the most influential factors affecting breastfeeding initiation and continuation rates, with full-time employment posing a particular risk for breastfeeding discontinuation (Fein et al. 2008; Mandal et al. 2010; Spitzmueller et al. 2015). Specifically, despite AAP recommendations, only about 79 % of women in the U.S. initiate breastfeeding, 19 % exclusively breastfeed at 6 months, and only 27 % breastfeed during the entire first year (U.S. Centers for Disease Control 2014). Working mothers who are breastfeeding need physical facilities available for expressing milk, as well as psychosocial supports to facilitate the process. Spitzmueller et al. (2015) sought to identify pregnant women's perceived employer support for breastfeeding as a predictor of women's breastfeeding goal intentions prior to birth. Although pre-birth breastfeeding goal intentions and the baby's age upon the woman's return to work predicted overall breastfeeding duration, workplace factors did not predict breastfeeding duration. However, social

norms and perceived support for breastfeeding after return to work predicted whether women managed to successfully combine employment and exclusive breastfeeding. Additional research is needed to better understand the role of workplace factors related to mothers' breastfeeding behavior.

Sleep Deprivation

Another issue that many parents of infants face is sleep deprivation, due to interrupted sleep to feed or care for a baby who doesn't sleep through the night. Parents are likely to first experience sleep deprivation before returning to work (i.e., during the prior stage). However, needing to perform one's job when not obtaining sufficient sleep (in terms of sleep quantity and/or quality) can be quite challenging and even dangerous (Harrison and Horne 2000). Sleep deprivation is associated with reduced productivity, performance, and safety at work (Rosekind et al. 2010). Furthermore, sufficient sleep may be conceptualized as a resource, and important to minimize psychological strain (Barber et al. 2010).

Post-transition Back to Work

The final stage in the parental leave/return to work process is what we term the post-transition stage, referring to the period after the worker has adjusted to being back at work. This adjustment can be understood as technical or psychological. For example, consider an individual who worked full-time prior to taking parental leave. If the worker initially returns to work part-time prior to eventually resuming full-time work, this stage will begin once the worker has resumed his/her full-time schedule. For others it may be indicated by a worker feeling "back in the groove." The timeline for reaching this stage is likely to vary across individuals. For example, some may adjust quickly, and others may not. Even after women physically recover from childbirth, the parental role for both mothers and fathers may include other issues, such as work interference with family (WIF), or family interference with work (FIW). According to role theory, and as many parents know from experience, WIF and FIW are likely to be chronic or episodic issues related to the work/family interface, and not specific to managing the work/life interface with an infant or toddler. For a review of antecedents of WIF and FIW, see the meta-analysis conducted by Byron (2005).

Two important organizational factors related to workers' experiences during the post-transition stage include family supportive organizational perceptions (FSOP; Allen 2001; Booth and Matthews 2012) and family supportive supervisor behaviors (FSSB; Hammer et al. 2011). This relates back to open systems theory, in so far that factors at multiple levels impact the success of one's transition back to work. It is important to have a work environment in general that supports employees' needs to meet family demands (i.e., FSOP) as well as supervisor support specific to helping

employees balance work and family demands (Hammer et al. 2011). Other factors related to positive experiences during this stage include high levels of marital/spousal support, fewer work hours, lack of job stress and role overload, low levels of negative affectivity, and low levels of depression (Brough et al. 2009; Byron 2005; Feldman et al. 2004). Similar to what we have discussed in prior sections of this chapter, extant research has identified many important resources for facilitating the process of returning to work after parental leave.

Interventions

Despite the obvious challenges of returning to work after childbirth both to psychological well-being of the parents and to some extent to workplaces, very few interventions have been developed and evaluated to support workers during the transition back to work following parental leave. One exception is an intervention designed to address general well-being among employees in which Vuori et al. (2012) used a randomized controlled field trial designed to facilitate career management and improve mental health among working new parents. This intervention relied on prior research demonstrating that cognitive-behavioral interventions, which often have been based on enhancing self-efficacy (Bandura 1986) or proactive coping, have shown beneficial outcomes regarding employee well-being and mental health (Jané-Llopis et al. 2003). Self-efficacy refers to individual's cognitive-motivational ability to strive towards one's goals and serves as an important resource for goal-oriented behavior. In addition to self-efficacy, employees need resilience to cope with setbacks and challenges they encounter (Vuori et al. 2012). Together, self-efficacy and resilience are resources that build what has been termed *career management preparedness* (i.e., an individual resource to manage one's career successfully and adapt to the challenges of sometimes unpredictable environments especially during career transitions; Vuori et al. 2012). Interventions developed to increase career management preparedness among workers could potentially help ease the transition back to work following parental leave.

According to the conservation of resources theory, personal resources may serve as 'general resistance resources' (Hobfoll et al. 2003). This means that enhancing these resources probably has positive effects on many outcomes and may be especially beneficial during a transitional phase from one domain to another (i.e., from family life to working life). This is consistent with the job demands-resources model as well (Demerouti et al. 2012).

A resource-enhancing goal-oriented approach seems feasible for supporting the transition from parental leave to working life. Prior research among Austrian and German mothers found that self-efficacy beliefs and self-regulatory strategies predicted positive work adjustment over time (Wiese and Heidemeier 2012). Other research also supports planning and goal-setting as means for better adjustment after returning to work from parental leave (Houston and Marks 2003).

Occupational career transitions can be seen as opportune phases for supporting psychological well-being. Previous research shows that workers' preparedness for transitions can be strengthened (Vuori et al. 2012). Preparedness means having confidence with one's own career management skills, motivation for managing one's career, and readiness to deal with setbacks (Vuori and Toppinen-Tanner 2015). Researchers at the Finnish Institute for Occupational Health (e.g., Toppinen-Tanner, Vuori, and colleagues; FIOH) developed a group method to be implemented among parents still on parental leave but planning to return to work. The group method trainers were recruited from child welfare clinics and the public daycare units of six municipalities and trained at the FIOH. All parents (i.e., women) in the area during their visits to child welfare check-ups or local playgrounds and open daycare centers were provided with the opportunity to participate in the training. Altogether 233 women were recruited and completed the baseline questionnaire survey. These mothers were then randomly assigned to either the group training workshop or control group, the latter of which received an information package instead of group activities during the intervention. The workshops were based on a method that had been previously developed at the FIOH and called "Towards Successful Seniority" (Vuori et al. 2012). More information about this intervention currently in progress at the time this chapter was written is available on the FIOH website: http://www.ttl.fi/successfulseniority.

Preliminary results evaluating the immediate effects of the randomized controlled study were positive, showing that the group activities significantly increased career management preparedness among mothers planning to end their parental leave and return to work. Participants in the workshop reported significantly higher levels of self-efficacy related to return to work and work-life balance. It is possible that in this group of participants "resources build resources," as suggested by the conservation of resources theory (Hobfoll 1989). The positive effect of the intervention was further confirmed by the qualitative feedback provided by the participants. Specifically, participants indicated that the intervention gave them practical tools and tips about balancing work and family, and empowered and strengthened their self-esteem as mothers and employees.

In the future, and after the parents fully transition back to work, we believe these resources accumulate as positive longitudinal effects on satisfaction with different life domains, well-being, and better work-life balance and psychological well-being.

Practical Implications

Understanding the parental leave and return to work process has many practical implications for workers, families, and organizations. First, not all workers have access to protected or paid leave time. Research summarized earlier in this chapter highlights the benefits of parental leave for workers and families. In some countries,

responsibility for provision of paid leave falls to employers and organizations. Therefore we recommend that organizations develop and clearly communicate policies to workers, and foster an organizational culture that permits employees to *use* the policies available to them without penalty or perceived penalty. We also need to recognize that parents and particularly mothers with a lower socioeconomic status in the U.S. are less likely to have access to protected or paid leave, and are also less likely to have job flexibility or autonomy to serve as resources to facilitate taking leave time and managing work and family roles.

Prior research points to the benefits of family-friendly policies, including flexible working hours and other workplace policies, to help support employees' work-life balance by helping employees manage work-family conflict (Bulger and Fisher 2012; Greenhaus and Allen 2011). This includes building and sustaining family supportive organizational perceptions and perhaps training supervisors and coworkers how to best support new parents who are employed in their organization (Hammer et al. 2011). Our review also suggests the importance of planning and preparing for being away on parental leave, setting realistic expectations about the parenthood transition and return to work process early on, and educating others (e.g., supervisors, coworkers) about one's needs.

From the working life perspective, a longer time away on parental leave means that there are often substantial work-related changes (e.g., in work tasks, composition of work teams, organizational-level changes etc.) that occur during the time away. Often there are no policies for ongoing dialogue between the workplaces and the mothers during the family leave. It would be beneficial to create such policies to promote integration after return, as many parents express concerns about work-related changes and how they may affect their future return to the workplace.

One of the reasons to support the return of mothers to working life is related to equality between genders. It has been shown that especially in societies where full-time participation of both genders in the workplace is valued, there is a risk that women on long family leaves endanger their labor market position and economic independence (Ejrnæs and Kunze 2013). Shared parenthood and more equal division of household labor benefits the well-being of the whole family (Cleveland et al. in press). A great deal of research points to the importance of spousal/marital support pre-birth, but our four-stage model of parental return to work leads us to believe that such support is just as important during parental leave, upon transition back to work, and on an ongoing basis as well. Clear communication of needs and negotiation of shared responsibility may help new parents understand one another's demands and identify resources to weather what can be a very happy but also stressful and uncertain time.

Future Research

Future research is needed to further our understanding of the parental leave and return to work process. Much of the research that has been conducted to date has been done across a variety of disciplines, including organizational psychology,

developmental psychology, family studies, sociology, economics, medicine, public health, and public policy. We suggest the need for an interdisciplinary, holistic conceptual model to serve as a framework for future research. Following the development of a holistic model, we call for interdisciplinary longitudinal research that takes into account the dynamic, multi-level nature of this process. Because we conceptualize parental leave and return to work as a dynamic process, it is critical to understand how this process unfolds over time, in addition to the workplace, family, and individual differences related to how employees experience this process. We call for improving our understanding of antecedents to planning for parental leave, as well as individual differences and organizational contextual variables (e.g., job level) that serve to moderate relations between parental leave, return to work, and various outcomes. We also call for cross-cultural research to examine this process in the context of varying leave policies and cultural norms. Lastly, we encourage researchers to develop and evaluate interventions at multiple levels and across stages of the parental leave and return to work process, evaluating outcomes from multiple constituents at multiple levels (consistent with Carlson et al.'s (2011) approach to examining individual and organizational outcomes).

We recommend additional research to further understand the mechanisms at play regarding the relation between work/family conflict and parental leave policies. To the extent that an important segment of the U.S. workforce is not covered by the FMLA or related state policies, we need to investigate the return to work process among these workers as well. We also encourage additional research to identify work and psychosocial issues (e.g., positive and negative supervisor and coworker support) related to breastfeeding among working mothers. Clearly, research opportunities to further our understanding about the parental return to work process are abundant.

Although there is a long agenda ripe for future research on this topic, there are a number of methodological issues worth noting. First, expecting parents represent a relatively small segment of the workforce and it may be challenging to obtain a representative sample of workers who are pregnant or partnered with a pregnant woman. Secondly, we conceptualized return to work after parental leave as a process that unfolds over time. Therefore longitudinal research is required for investigating this process. Lastly, we have identified numerous factors at multiple levels of analysis, further adding to the complexity of empirical research to holistically study this topic.

Summary and Conclusions

We conceptualized parental leave and return to work as a process, and reviewed literature from multiple disciplines to discuss issues regarding parental leave and return to work. The process of taking parental leave and returning to work is a complex issue embedded in an open system with constituents at multiple levels inside and outside work organizations. The topic is particularly complex due to vast

differences in protected leave and paid parental leave policies around the world. Furthermore, these policies are subject to change, which poses challenges when interpreting results. This chapter identified stages of the parental leave/return to work process, discussed interventions, and summarized practical implications as well as future research suggestions. Overall we think this is an important topic and we hope research in this area will flourish to facilitate the well-being of working parents and their families.

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Global Maternity Benefits and Their Impact on Maternal and Child Well-Being

**Jing Zhang, Candice Thomas, Bobbie Dirr, Rissa Cone
and Christiane Spitzmueller**

Abstract Maternity benefits across the globe vary widely by country. In some countries, they include health benefits for mother and child, medical leave, and/or access to infant care support, although in other countries benefits are rather limited. In this chapter, we provide an overview of global maternity benefits that are legally required within countries and discuss the evidence pertaining to their effectiveness in promoting maternal and child well-being. Following a brief description of maternity policies in different countries, we reviewed the global similarity and variances in these policies. Although maternity benefits are beneficial in improving maternal and child well-being, it may not affect all outcomes equally and positively. By summarizing the maternity policies' influence on mothers' work choices, psychological/mental health, and child health, we provide a holistic picture of the benefits and costs of maternity leave. We also comment on the methodological barriers to the study of maternity benefits and end with a list of suggestions for researchers, policy makers, and organizations.

Keywords Maternity policies · Maternal well-being · Child health

Given the steady increase of women working for pay across industrialized and developing countries, family-supportive work polices that regulate maternity benefits and employment, are becoming more important (Staehelin et al. 2007). Maternal policies are generally defined as polices that allow parents to continue working while also providing care for their children. Maternal policies include but are not limited to: maternity/parental leaves, flexible work arrangements for parents, out-of-home childcare, and other public policies that affect caregivers' efforts to combine work and family responsibilities, such as laws about working hours, tax policies, and the public pension system (Kelly 2005). In this chapter, we provide an

J. Zhang (✉) · C. Thomas · B. Dirr · R. Cone
University of Houston, Houston, USA
e-mail: jingzhang.prc@gmail.com

C. Spitzmueller
Department of Psychology, University of Houston, Houston, USA

overview of global maternity benefits that are legally required and discuss the evidence pertaining to their effectiveness in promoting maternal and child well-being.

From a societal and political perspective, maternal policies have been adopted for several reasons, such as improving women's economic independence, increasing gender equality and social equality, increasing infants and mothers' psychological and physical health (Queneau and Marmo 2001), and sustaining a stable labor force. The failure to adopt family-supportive policies may have adverse impact on employees and their families. In addition, organizations failing to provide adequate support for families may ultimately face difficulty in attracting and retaining top talent (Korabik et al. 2003).

Even though maternal polices are generally believed to be beneficial to mothers, children, and the society as a whole, they also have their costs to employers and employees. Oftentimes, as discussed in other chapters (e.g. chapter by Greber and Wiese on decisions to return to work) employers face a number of uncertainties surrounding employees' maternity leave. For instance, the employee may not be able to predict how soon they will return. Additionally, many organizations are uncertain whether women returning from maternity leave will be able to successfully reconcile family and organizational demands (such as frequent travel, long hours). Costs may arise for employees utilizing maternal polices (i.e. where child care is partially subsidized), in addition to costs for organizations. For example, because maternal policies (e.g., maternal leave) are generally applied to female employees (Ondrich et al. 1996), organizations at times utilize parents' leave to justify the wage penalty many women continue to experience.

Given these potential pitfalls and the complexity of maternity policies, a significant amount of additional research evidence is needed to demonstrate to policy makers whether maternity benefits are of benefit to society, and under what conditions their value to children, family, employers and society as a whole can be maximized. Therefore, the current chapter serves two primary purposes: (1) to outline what maternity policies countries require legally, and how these policies/benefits impact organizations, mothers, and infants in both positive and negative ways; and (2) highlight gaps in the literature and provide directions for future research.

There is large variation in the breadth and content of policies adopted across the globe. In addition, variability not only exists across different countries' legal frameworks, but also within countries. Particularly in countries where legally required benefits are not extensive, many organizations opt to provide benefits that go above and beyond what is legally required. Within countries, maternity benefits and policies are also not static over time: Change in the last several decades has been widespread across industrialized countries due to the cyclical nature of global economic development and transformations in family structure (e.g., increase in dual-earner families; Gauthier 2002). Both of these aspects (i.e., cross-culture and variability) have led to significant complexities for researchers interested in investigating and comparing the benefits and drawbacks of different maternity benefits.

Even though not all research findings are consistent across countries and although much of the research on maternity benefits remains descriptive, researchers around the world have been able to progress a research agenda with the goal of shedding light on measurable outcomes of maternity benefits, as well as contextual factors that determine whether benefits lead to desirable outcomes. Altogether, these studies can be classified into two groups: monocular and multi-core. Monocular studies focus on only small numbers of countries and cover multiple aspects of both policies and outcomes. For instance, Rønsen and Sundström (2002) compared Finland, Norway, and Sweden on a number of family policies for a two-decade period, namely from 1972 to 1992. In contrast, multi-core studies compare multiple countries on one or two aspects of maternal benefits (most of them focus on maternal leave) and a single outcome. Representative of this classification of studies is a literature review by Hegewisch and Gornick (2011) which compared the effects of various maternal polices on mother's employment across Organization for Economic Co-operation and Development (OECD) countries.

Since both cultural differences and combinations of policies affect the outcomes of maternity policies, a comprehensive summary of various maternity polices around the world and their effect on both mother and children is necessary. Until now, literature examining multiple countries, maternity policies, and outcomes has been scant (for exceptions, please see Korabik et al. 2003). This chapter aims to fill this gap. Through this chapter, we aim to provide an updated review of various maternity benefits around the world. Moreover, we itemize the influences of maternity policies on the mothers' mental health, work experiences, and child development and health. By identifying several methodological barriers in studying global maternity polices, we point out directions for future studies utilizing pre-dominant theoretical frameworks originating in the work-family interface literature. Finally, we provide suggestions for policy makers and employers aiming to utilize the most beneficial policies to maximize desirable outcomes for individuals, families, employers, and societies.

Variance and Similarity of Policies in Different Countries

Global maternity policies are heterogeneous. As a consequence, a fully comprehensive and exhaustive assessment of all policies and their consequences is beyond the scope of this chapter. Instead, we offer a generalized perspective of policies offered across cultural and national contexts, as well as an analysis of similarities and differences between them as they affect relevant outcomes for women, families, and employers.

Maternity Benefits/Policies in European Countries. Finland, Norway, and Sweden are typically characterized as having high state support for families and mothers, with Swedish parents currently enjoying the longest paid parental leave globally (480 days). Both Finland and Norway offer financial support or significant

tax deductions for families, and sponsored or subsidized childcare facilities or care (Gauthier 2002). In addition, the Scandinavian countries legally guarantee that mothers can reduce working hours while limiting employers' ability to derive negative repercussions on the basis of women taking advantage of maternity policies. However, the detailed legal framework governing maternity leave still varies substantially within Scandinavia: for instance, in Finland mothers can reduce working hours until their child is in their first term of school; in Norway mothers can reduce only a limited number of hours while they are breastfeeding; and in Sweden mothers can reduce to 75 % of full time until the child is aged 7 (Rønsen and Sundström 2002).

Germany, France, and the Netherlands typically offer a medium level of support for families and mothers through cash support for families and relatively long maternal leaves. The level of support tends to depend on employment status and is generally targeted towards the mother (Gauthier 2002), although legal frameworks are written to support cases where fathers function as primary caregivers. Additionally, when an individual qualifies for maternal support, these countries each provide fully paid leave with both a job guarantee and ability to work part-time upon that individual's return. In Germany mothers are entitled to up to 3 years of protected leave with approximately 14 weeks of paid maternity leave, while mothers in France and the Netherlands are entitled to 16 weeks of paid maternity leave (OECD 2010, 2014).

Countries in southern Europe such as Italy, Greece, Portugal, and Spain, typically have high degrees of variation between them. Employees in Italy, Greece, Portugal, and Spain are entitled to between 16 and 21.7 weeks of paid maternity leave (varies by country; OECD 2014). In many cases, benefits in these countries are a mixture of universal and private benefits. In general however, there tends to be a more limited level of financial support and tax deductions to facilitate the economic well-being of families. Along with that, parental leave and childcare support vary significantly (Gauthier 2002).

The United Kingdom (UK) and Switzerland offer comparatively limited maternal benefits: There is little cash support to families except those with high need, medium to short maternity leaves, and childcare is typically the responsibility of the parents or the private sector (Gauthier 2002). And though the UK offers mothers up to 52 weeks of maternity leave, only some of that time is paid. Switzerland offers only 16 weeks of job-protected, paid maternity leave and mothers are not allowed to return to work within the first 8 weeks after the child's birth (Ray 2008; OECD 2010).

Maternity Benefits/Policies in North America. The United States (U.S.) provides low federal support for maternal benefits, although employer support varies by industry and organization. Approximately 21 % of companies offer parental leave above the twelve weeks of unpaid job protected leave that is legally entitled to employees based on the Family and Medical Leave Act (FMLA; SHRM 2015). Overall, financial and tax-based support for families is limited to those with significant financial need (i.e. who live below the poverty line). Similarly, the available short parental leave in the United States is contingent upon women having worked sufficiently long enough with their employer to qualify. Further, unless employers

provide supplemental voluntary support for maternity leave, most maternity leave in the United States is unpaid (79 %; SHRM 2015) or requires the utilization of previously accrued sick days (Gauthier 2002). In the U.S., parental leave is lumped into family leave policies without a specific parental leave policy and does not include statutory paid leave. Canadian benefits are more comprehensive and provide longer leave of approximately one year, including up to 17 weeks of pregnancy leave and up to 37 weeks of parental leave during the child's first year.

Maternity Benefits/Policies in Australia and New Zealand. Broadly speaking, Australia and New Zealand offer only limited legally mandated maternity benefits. Financial incentives and tax deductions are implemented to reduce the financial strain many young families experience. For the most part, childcare provision is the responsibility of parents and the private sector, with state-sponsored parental leave being relatively minimal (Gauthier 2002). However, although leave times are relatively brief, mothers in New Zealand have paid leave at 100 % of their former salary and also have access to additional paid leave for pregnancy related medical attention (Ray 2008). Maternity leave in Australia is paid out differently than in many other countries: Mothers are provided a lump-sum for each newborn child, regardless of whether or not the mother takes leave from work (Ray 2008).

Maternity Benefits/Policies in Japan. In general, Japan is characterized as providing somewhat limited maternity benefits. As such, Japan only offers very limited financial support to families, maternity leave is brief, and childcare provision is primarily the responsibility of the parents or the private sector. Female workers are allowed to take six weeks of pre-birth and eight weeks of post-birth leave, with 60 % of their wages paid through governmental social insurance (Tanaka 2005). In 1999, Japan offered an average of 12 weeks of maternity leave (Gauthier 2002). In 2001, 53.5 % of Japanese private companies provided childcare leave (Ministry of Health and Welfare of Japan 2002). The availability of paid maternity leave also varies by organization and salary, depending on employer enrolment in the national health system (Ray 2008).

Maternity Benefits/Policies in Developing Countries. So far, we have discussed benefits in many industrialized countries, but are benefits and policies also available for mothers in developing countries? Balancing work and family responsibilities for new mothers is ubiquitous and is not unique to Western cultures. How do developing countries provide support for working mothers and families? Unfortunately, for the most part, maternity policies and benefits in developing countries are limited and those that exist demonstrate considerable variance in who can access them. Oftentimes, employment law is not particularly punitive towards employers in discouraging gender-based discrimination. For instance, in Nigeria many shift work positions are legally limited to being available only to men, even if women are able to demonstrate adequate suitability for the position. While most developing countries have some formal maternity benefits in place—such as paid maternity leave for some women—many women are not eligible for these benefits due to a variety of factors such as their participation in informal employment. Malaysia, for example, does offer paid maternity leave benefits for working mothers; however, the provision of benefits often depends on demographic,

occupation, and employment factors. Within Malaysia, being of Indian decent, having higher education, and holding a full-time and year-round job, for example, are all associated with an increased probability of receiving paid maternity leave (Bernasek and Gallaway 1997).

Global Similarity and Convergence of Policies

Although there are vast dissimilarities in the types of maternity policies and benefits offered by countries, there are several observable, general global trends. Overall, within the last 20 years, there has been significant increase in support for parental leave (Gauthier 2002). However, this increase has manifested in a variety of different ways such as through the introduction of new policies (e.g., United Kingdom), adjusting current policies to be more supportive (e.g., Japan), or broadening parental leave to include fathers or offering subsidized preschool and crèche spots (e.g., Germany; Norway). So, although there is a tendency towards increasing support, there is little evidence for convergence of policies as there remains marked diversity in the type and level of support for parental leave (Gauthier 2002).

Similarly, many trends can be seen (see Table 1) in the types of benefits offered. For example, most industrialized countries, particularly those within the European Union, offer some form of maternal leave (Brunin and Plantenga 1999). However, while several countries may offer a particular benefit (e.g., paid leave), the qualifications for these benefits (e.g., length of employment prior to birth of child) and the specific details of the policy (e.g., paid leave is for only 18 of the possible 40 weeks in the UK) remain highly variable across countries. In addition, there remains a gap in our understanding of the availability and impact of policies and benefits for mothers in non-Western and developing nations. For instance, while some developing nations legally endorse maternity benefits, large percentages of the economy are informal and hence not easily governed by legal frameworks. Similarly, the enforcement of policies and legal frameworks is relatively limited in most countries, reducing the degree to which an employer can be held accountable for compliance. To build a comprehensive global perspective on motherhood and the workplace, this is an area that will need to be addressed in future research.

Global Differences in Benefits/Policies Across Countries

How do maternity benefits and policies vary across countries? Overall, there is a high degree of cross-national variance, which can be observed both in specific policy components (e.g., leave flexibility) and in general trends (e.g., offering cash support). While the scope of this chapter prevents detailed analysis of global policy divergence, the differences in general trends (see Table 1) are helpful in developing an initial understanding of where differences between countries exist. Summarily,

Table 1 Comparison of maternity policies across countries

Country	Cash support	Length of maternal leave	Universal coverage	Paid leave	Job guarantee	Right to reduced hours	State sponsored child care
Finland	Medium	Long	Yes	Yes	Yes	No	Yes
Norway	Medium	Long	No	Yes	Yes	Yes	Yes
Sweden	Medium	Long	No	Yes	Yes	Yes	Yes
Germany	Medium	Long	No	Yes	Yes	Yes	Limited
France	Medium	Long	Yes	Yes	Yes	Yes	Limited
Netherlands	Medium	Long	Yes	Yes	Yes	Yes	Limited
Greece	Low	Short	No	Yes	Yes	Yes	No
Italy	Low	Short	No	Yes	Yes	No	No
Portugal	Low	Short	No	Yes	Yes	Yes	No
Spain	Low	Short	No	Yes	Yes	Yes	No
U.K.	Low	Short	No	Yes	Yes	No	No
Switzerland	Low	Short	No	Yes	Yes	Yes	No
Canada	Low	Short	No	Yes	Yes	No	No
U.S.	Low	Short	No	No	Yes	No	No
Australia	Low	Short	No	Yes			No
New Zealand	Low	Short	No	Yes	Yes	Yes	No
Japan	Low	Short	No	No	Yes	No	No

Note Many of the benefits described above require a qualifying period of employment to be eligible for the benefits. To be qualified as providing "long" length of maternal leave, the policy allows the mother who gives birth to a child to take maternal leave and extend leave for 42 weeks or longer. To be qualified as providing "medium" cash support, the wage replacement rate is above or equal to 80 %. Bradshaw and Finch (2002), Gornick et al. (1997), Ray (2008), Rønsen and Sundström (2002)

there is variation between countries in the provision of financial support, length of maternity leave, provision of paid maternity leave, guaranteed job after returning to work, right to reduced hours after returning to work, and federal provision of child care support. For example, while both Norway and Sweden offer paid maternity leave, Norway only offers maternal leave if the mother was employed 6 of the last 10 months before giving birth, while Sweden requires that the mother had earnings for at least 240 days prior to childbirth (Rønsen and Sundström 2002).

The Benefits and Costs of Maternity Leave

The provision of significant amounts of maternity leave creates significant costs for governments and employers who pay salaries and benefits during leave. Hence, a thorough and empirically grounded understanding of the immediate and long-term benefits of such policies is needed to guide further decision making on maternity

leave and the best ways to design parental leave systems. Most work-supportive legislation, regulations, and research focus on leave policies, such as maternity leave and parental leave. We will follow these lines of research by devoting the majority of our discussion on maternity leave and its effects. Maternity leave is employment leave put aside for the mother; it is a short-term absence from paid work resulting from pregnancy, delivery, or birth. Conversely, parental leave is employment leave which can be taken by either parent to take care of a newborn, sick, or adopted child (Joesch 1997).

In examining outcomes of maternity leave and related policies, it is relevant to delineate the myriad of possible outcomes and stakeholders that can potentially be affected. Criteria that can be, and to some degree have been, integrated in research on outcomes of maternity leave and related policies can pertain to the mother, the child, the family system, employers, and society as a whole as stakeholders. For each stakeholder group, outcomes can include health outcomes, subjective well-being and attitudinal outcomes, as well as economic costs and benefits. For mothers, satisfaction with being a new parent, parental self-efficacy, degree of post-partum depression, adjustment to maternal role demands, within-family conflict, and economic stability (e.g. whether the mother will experience reduced retirement savings because of longer parental leave times) are among the relevant outcomes that need to be understood for a comprehensive picture on the benefits and costs of maternity leave to emerge. For infants, outcomes that can be included in further research include health benefits from extended breastfeeding, cognitive development, social adjustment later in life, and the emergence of healthy parent-child attachment patterns. The stability and health of family systems are also relevant outcomes. Fathers represent another stakeholder group, and further research needs to delineate whether and how maternity benefits can ensure fathers adjust to their parental role.

From the perspective of society as a whole, research-based quantification of the economic benefits of health and well-being improvements that can be derived from maternity benefits need to be conducted in more detail. It is also necessary for research on maternity benefits to include multiple outcomes, and not necessarily expect that maternity benefits affect all outcomes equally and positively. For instance, longer maternity leave may lead to increased likelihood of women encountering challenges as they return to work. These challenges may include issues around re-entering the workforce, as a woman's old position may have been filled, and navigating spousal expectations for a woman's contribution to household and childcare that may be based on the mother's schedule during the leave period. In the following sections we review research on the impact of maternity policies on a host of outcomes, but emphasize the dearth of research that comprehensively investigates how benefits affect various stakeholders' outcomes.

By using data from the U.S. Food and Drug Administration's Infant Feeding Practices Study, Roe et al. (1999) tested the simultaneous-equation model of the relationship between maternal employment and breastfeeding and found that paid maternity leave policies support higher breastfeeding rates and longer breastfeeding duration, but the effects of breastfeeding on work leave is insignificant. Breastfed

babies are likely to suffer from fewer infections than babies who are not breastfed; therefore, mothers who breastfeed often need less time off to attend to sick babies. As a consequence, this can result in increases in employee performance and decreases in healthcare costs. At the same time, ovarian and breast cancer rates among women who breastfeed are substantially lower than among women who never breastfed, lending further support to the notion that maternity leave relates to substantial and sustained health benefits for families and societies.

Moreover, by using a dataset from 17 OECD countries across four time periods, Winegarden and Bracy (1995) found that paid maternity leave increases the labor-force participation of young women. Similarly, in comparing Norwegian and Swedish women's after-birth activities, Rønsen and Sundström (1996) found that the entitlement to paid maternity leave is associated with increased work-force participation for mothers and young women. Moreover, maternity leaves can also distally increase human capital by providing positive developmental opportunities for children. Various studies (e.g., Tanaka 2005) suggest that longer maternity leave is positively related to child development. It is hence likely that maternity leave can function as an early support system for children, which in the long run may contribute to child adjustment and learning.

Even though some countries have leave policies implemented, the leave is not always paid. While maternity leave in general provides a time to recover from childbirth and care for the infant, unpaid leave may limit the positive effects listed above due to financial strain. For instance, although certain employees are qualified to take up to 12 weeks of unpaid sick leave according to FMLA in the United States, most employees (78 %) do not utilize FMLA because of financial concerns (Brady-Smith et al. 2001). In addition, among employees who did take days off, 37 % reported they cut their leave short because they could not afford a longer unpaid leave (Kelly 2005). Thus the magnitude of benefits of these maternal leave policies reported above tends to be conservative given the limited usage. Future research about the actual usage of these policies can shed more light on our understanding of the actual benefits.

Even though maternity polices are beneficial, they are not without cost. Maternal leave, which allows women to leave the organization for a long period of time and retain their prior position, may cause several problems for the employer. First, the employer may find a substitute or rearrange duties for remaining employees to cover the responsibilities of the mother on leave based on the duration of her leave. For instance, in France, 86 % of employees on leave were substituted during their leave (OECD 1995: 190). Furthermore, some countries mandate provision of paid maternal leave with the responsibility for payment shared with the employer. For instance, in Germany, employers bear around 35 % of the financial burden of maternal leave payments (Alewell and Pull 2011).

In addition, the uncertainty of maternal leave of how long women take maternal leave is problematic for employers to plan for. Similarly, after taking leave, mothers may decide not to come back which can create additional challenges for employers who are mandated to retain and offer a position to the returning parent, while also striving to meet organizational demands and schedules. The severity of this issue

varies across countries depending on the policies adopted. For instance, in Germany, an employer faced with a pregnant employee may also have to accommodate her decision to take a 3-year-leave period and still risk permanently losing the employee afterwards (Alewell and Pull 2011). Comparatively, the uncertainty is lower for US employer because of the relatively short length of leave provided through the Family Medical Leave Act (12 weeks).

The Effect of Maternity Policies on Mothers' Work Choices

Researchers have demonstrated and documented that mother friendly policies allow more women to take a job, especially women with young kids (Gornick and Meyers 2005; Queneau and Marmo 2001). However, there are other concerns with regard to an increase in the wage gap between women and men and other inequalities that may appear after more family-supportive practices are introduced. In this section, we will focus on the effects various policies (i.e., employment leave, childcare facilitates, and part-time employment) have on women's work related experiences.

Maternity Leave

When provided with maternity leave, women are more likely to join the work force before having children, and will also return to work sooner after giving birth to a child (Hofferth and Curtin 2006; Summers 1989). Maternity leave of a moderate length is positively related to overall female employment, especially when it is paid, and the effects are stronger for women of childbearing age (Kelly 2005; Ruhm 1998). Moreover, it has been shown that women who have access to leave are more likely to return to their previous employers after childbirth (Waldfogel 1998).

   With regard to the possible cost of maternity leave on mother's work, employers who bear the costs of mandated benefits appear likely to pay the relevant employees lower wages (Hofferth and Curtin 2006; Mitchell 1990). These effects may be less influential in some countries, such as Sweden, where the adverse effects are more predictable, and in other countries where the maternal leave is short and unpaid (Galtry and Callister 2005). For instance, Ruhm (1998) found that only "lengthier leave is associated with substantial (2–3 %) reductions in relative wages." (p. 287).

Other Maternal Benefits

It has been shown that childcare availability, cost, and quality matters with regard to mother going back to work after giving birth to a child (Galtry and Callister 2005). For instance, in Canada, Lefebvre and Merrigan (2008) found that the childcare

policy, coupled with the transformation of public kindergarten from part-time to full-time, significantly increased the likelihood of mothers' continued paid employment. Moreover, it was found that higher childcare costs reduced women's employment rates (Anderson and Levine 2000).

How Different Policies Affect Mothers' Psychological/Mental Health

Maternity benefits are provided in many countries across the globe, but what empirical evidence do we have in evaluating their impact on mothers' psychological health? Although the economic and labor force impacts of maternal policies are often the focus of organizational research on maternal benefits, it is critical to also understand the impact these policies have on maternal psychological and mental health. Within many countries, maternal leave policies and maternal benefits were initially implemented to promote mother and infant health. However, while there are an increasing number of studies assessing child health and economic impacts of maternal benefits (Brady-Smith et al. 2001; Brooks-Gunn et al. 2002; Waldfogel 2001), there are relatively few studies that assess the impact on maternal mental health. Therefore, this section is dedicated to the discussion of the current research that has been done on the effects of maternal policies from the perspective of maternal mental health.

While there are a variety of different maternity benefits that can impact maternal psychological health, research in this area consistently finds that the benefit of these policies depends on additional factors such as the fit with the mother's role preferences, infant and mother health, social support, and the quality of the benefits. Thus, while much of the research discussed below regarding different policies and maternity benefits generally suggests that these benefits are associated with positive mental health outcomes, the strength of these benefits is influenced, and may even depend, on these additional factors (e.g., individual and organizational factors). Simply having a policy in place does not lead to positive maternal mental health. Most importantly, to capitalize on the advantages of such policies, the policies must be in alignment with the mother's preferred role and the mother must choose to participate in the benefits provided. Moreover, even in the countries with generous benefits by international standards, such as, Norway and Sweden, utilization and access to benefits are still not universal (e.g. contingent upon time of service before starting maternity leave).

Maternity leave is a common benefit available to mothers that has received considerable research attention due to its common inclusion in national maternity policies. For new mothers, the period of time after the birth of a child is a complex phase that is characterized by time-intensive infant care, changes in role identities, and recovery from potential infant and maternal health problems (e.g., Gjerdingen et al. 1991). Maternity leave not only provides mothers with the time to care for

their new infant but also has other multifaceted functions such as provision of physical and psychological recovery from childbirth and early infant care, time for breastfeeding, and maternal-infant bonding. While many studies assess maternity leave in general, it is important to keep in mind that the benefits of maternity leave can occur through a complex set of processes. We will briefly discuss some of these ways through which maternity leave can influence maternal health before discussing the overall findings on the effects of maternal leave.

Recovery, bonding, and breastfeeding are three ways that maternity leave can impact maternal psychological health. Aside from spending time with and caring for the new infant, maternal leave also provides mothers with time to recover strength and energy drained from both the childbirth process and early infant care (Tulman and Fawcett 1991). In addition, maternal leave supports the establishment of regular biological rhythms for the mother and child that aide in the promotion of attachment and maternal self-confidence (Weinraub and Jaeger 1991). Maternal leave also indirectly promotes positive psychological outcomes for mothers by providing mothers with better opportunities for breastfeeding due to the decrease in hindrances to breastfeeding brought about by the workplace (e.g., time and space restraints).

As discussed elsewhere in other chapters, breastfeeding has been documented to help mothers' mental health by promoting positive psychological outcomes such as emotional well-being, self-esteem, and bonding with their child (Labbok 2001). Returning to work is a common reason for ceasing breastfeeding (Fein et al. 2008; Mandal et al. 2010); however, supportive and flexible work environments may provide an environment that is conducive to continuing breastfeeding (Lindberg 1996). Overall, maternity leave influences maternal health through a variety of mechanisms and while most studies (and policies) discuss leave in general, it is always helpful to remain aware of the different ways through which leave can impact health.

In general, most studies support the positive effects of maternity leave on the mother's mental health; however, there is some disagreement around these effects and there continues to be discrepancies about the optimal length of leave. For example, Chatterji and Markowitz (2004) found that early return to work after childbirth was associated with increased risk of depression symptoms but not related to meeting the threshold of symptoms required for clinical depression diagnoses. They further claim that increases in the length of maternal leave, holding other factors constant, can notably decrease depressive symptoms (Chatterji and Markowitz 2004). Longitudinal studies have also shown that mothers who return to work after only a short period of maternity leave—with short leave typically defined as returning to work within six to twelve weeks postpartum and long leave defined as returning to work beyond six months postpartum—have increased risk of experiencing decreased mental health (e.g., depressive symptoms; Gjerdingen and Chaloner 1994). Furthermore, this risk increases when the short maternity leave is in combination with other risk factors for decreased mental health such as poor social support, fatigue, poor general health, or low partner support (Gjerdingen and Chaloner 1994; Hyde et al. 1995). These studies indicate that while short maternal

leave can negatively impact mental health, the effects of brief maternity leave are exacerbated by poor environmental and physical health factors.

However, not all research supports the negative effects of returning to work. For example, Hock and DeMeis (1990) did not find any significant difference in maternal anxiety, depression, or self-esteem between women who were not employed, employed part-time, and employed full-time one year after the child's birth. In these studies, the length of leave—including both paid and unpaid leave—was not directly associated with mental health (Hock and DeMeis 1990; Hyde et al. 1995; McKim et al. 1999).

As research in this area has accumulated, it is becoming clearer that rather than simply the length of maternity leave, the determining factor in predicting maternal mental health is the role quality (e.g., fit, satisfaction, and support) and alignment of leave with the mother's preferences and needs (Klein et al. 1998; Lero 2003). Research suggests that discrepancy between the actual and preferred role (e.g., involvement in employment or staying at home) can lead to negative psychological health outcomes for the mother such as increased risk of depression (Hock and DeMeis 1990; Hyde et al. 1995; McKim et al. 1999). Further supporting the important influence of role quality on maternal health, Klein et al. (1998), found increased psychosocial distress both for mothers who had returned to work but were experiencing low flexibility and demand overload as well as mothers who had stayed home but were experiencing role restriction.

In addition, financial factors including whether or not the leave is paid can influence the relationships between length of leave and maternal health outcomes such that increased financial stress can lessen some of the positive effects of leave. Therefore, it is possible that long maternity leaves could be associated with negative outcomes if the length of the leave does not fit with the mother's preferences or financial needs. Based on results such as these, it seems that the focus on leave or benefits independent of other factors such as maternal preferences or role quality is misguided: the impact of maternal benefits on maternal psychological health is greatly impacted by fit between the policies and maternal needs.

Outside of maternity leave, there are many other organizational policies and benefits that can influence maternal psychological health. These most often utilized and discussed in the literature include flexible scheduling and dependent care benefits.

Formal flexibility policies such as telecommuting provide alternative ways for individuals to meet the needs of both their work and family roles. The benefits of flexibility within the workplace are founded on the principles of boundary theory, which focuses on both the salience of each role (work and family) and the permeability of the boundaries between the roles (i.e., how easy it is to transition between roles; Ashforth et al. 2000). Within this theory, flexibility polices can facilitate integration between the work and family domains. As there are individual differences in the preferences for the level of permeability between the work and family roles, the benefits of these policies on employees will depend on the alignment between the level of flexibility offered by the policy and the degree of the mother's preference for integration (Ashforth et al. 2000; Clark 2000).

Overall, the use of flexibility policies has been associated with decreased depression in working mothers (Thomas and Ganster 1995). Unfortunately, flexibility policies are not always the full solution for maternal stress as they are often claimed to be. Hammer et al. (2005) found that the provision of flexible workplace policies were not always conducive to better mental health for mothers. They found that in some cases, conflict and stress between the work and family domains can increase when policies are in place because it encourages the mother to take on a larger family responsibility—often at the expense of her personal health needs (Hammer et al. 2005). However, the results around the negative effects of flexibility are not conclusive. Although some women may take on more family responsibilities than they should when provided with flexible workplace policies, Kossek et al. (2006) still found that on average, depressive symptoms were lower for women who took advantage of flexibility policies such as telecommuting.

Another family supportive initiative commonly offered through countries' maternal policies or through organizations is the provision of dependent care or financial assistance with dependent care. However, the impact of these policies on maternal mental health is currently understudied. Provision of childcare or child care financial assistance helps alleviate the financial burden of childcare which can help to decrease maternal stress. Unfortunately though, the research in the area of psychological health and childcare provision is inconclusive and controversial. Even with the decreased financial burden of paying for childcare, participation in care for their infant by a non-parent has been shown to be associated with negative psychological health of the mother (Baker et al. 2005). Due to the economic stressors and changing workforce, however, outside childcare is often needed to balance work demands. It seems that as with other benefits, the impact of childcare, is not based solely on the provision of these benefits but, is highly dependent on additional factors such as quality of care (Ratnasingam et al. 2012).

In response to concerns about parental stress from balancing work and their caretaker responsibilities, many countries and organizations have implemented family-friendly practices such as maternity leave, flexible scheduling, and childcare. As we have seen, there are a variety of different policies and benefits that can positively impact maternal psychological health. Many of these policies have been shown to have short- and long-term impacts on women's mental health. However, provision of policies does not automatically mean positive outcomes. There are a variety of additional factors that influence the effect policies have on mental health such as use of policies, supervisor support, fit with the mother's preferences, social support, and quality. Policies in and of themselves do not determine mental health, rather there is a complex set of personal, interpersonal, and contextual factors that interact to influence maternal health outcomes. It will be important, as research continues to explore the impacts of maternity benefits on mothers, to expand the current literature by moving beyond benefit type and focusing on the interaction between type and context.

While there are a variety of different maternity benefits that can impact maternal psychological health, research in this area consistently finds that the benefit of these policies depends on additional factors such as the fit with the mother's role

preferences, infant and mother health, social support, and the quality of the benefits. Thus, while much of the research discussed below regarding different policies and maternity benefits generally suggests that these benefits are associated with positive mental health outcomes, the strength of these benefits is influenced, and may even depend, on these additional factors (e.g., individual and organizational factors). Simply having a policy in place does not lead to positive maternal mental health. Most importantly, to capitalize on the advantages of such policies, the policies must be in alignment with the mother's preferred role and the mother must choose to participate in the benefits provided. Moreover, even in the countries with generous benefits by international standards, such as, Norway and Sweden, utilization and access to benefits are still not universal (e.g. contingent upon time of service before starting maternity leave).

Child Health Outcomes and Maternity Leave

Do maternity leave policies improve the health of employees' children? Probably the most convincing evidence that it does improve child health is that certain maternity leave policies are linked to fewer infant deaths. When combining data from 16 countries, Tanaka (2005) found that more weeks of job-protected paid leave were linked to a decrease in infant mortality rates. Unfortunately, unpaid leave is not as effective, because often mothers return to work more quickly when leave is unpaid or experience increased stress due to the financial burden of taking off from work. In addition, there may be many mediating factors between maternity leave policies and infant deaths. For instance, child care provided by the parent may lead to more regular checkups and immunizations (Berger et al. 2005), which may explain the relationship with infant mortality. Throughout the following paragraphs we will discuss a multitude of child health benefits, including lower infant mortality when maternity leave is longer.

Could small amounts of leave lead to improved child health? Berger et al. (2005) used data from the National Longitudinal Survey of Youth (NLSY) to investigate links between mothers' return to work within 12 weeks of giving birth and their children's health. When controlling for important factors, such as family income and demographic factors, women who returned to work within 12 weeks were less likely to take their children for regular medical checkups, have their child immunized for DPT/Oral Polio, and breastfeed for 4–5 fewer weeks than mothers that returned to work after 12 weeks, yet there was no difference in behavioral problems (Berger et al. 2005). Baum (2002), controlling for mother's social economic status and other variables, also using the NLSY data, found that children's cognitive ability was related to the amount of maternity leave taken by their mother. Thus it does, in fact, seem that a short amount (i.e. 12 weeks) of maternal leave can impact child health outcomes.

Baker and Milligan (2008) provide a unique quasi-experimental study conducted in Canada. They studied mothers giving birth before and after December 31st,

2000, a date when a major change in public policy on maternity leave was made. Mothers giving birth before this date were given a maximum of 6 months of job-protected paid maternity leave. For mothers giving birth after this date, the amount of job-protected paid maternity leave was extended to a year in most provinces. While the study is not a purely experimental study, the design is arguably better than correlational studies.

Results from this study found that the policy reform was associated with a shift in attitudes towards taking maternity leave and use of childcare programs. The proportion of mothers who remained on leave at 3, 6, 9, 12 months postpartum increased after the policy reform (Baker and Milligan 2008). In addition, although paid maternity leave was offered to mothers through three months both pre- and post-reform, this study found that more women were on leave at 3 months postpartum after the policy reform than before the reform. This change in use of maternity leave without a change in benefits for this time period postpartum suggests that the mothers are not only taking longer maternity leaves because the new policy offers them longer paid leave but, also that these policies may be shifting attitudes towards taking maternity leave.

Children were healthier after the policy change than before. At 9 months, the mothers post-reform were more likely to be still breastfeeding than mothers pre-reform (Baker and Milligan 2008). At 7–12 months, children born post-reform had lower rates of child asthma, allergies, and chronic health conditions than children pre-reform (Baker and Milligan 2008). Similar results were found when the children were 13–24 months for child ear infections rates (lower rates post reform).

Methodological Barriers and Future Directions

Two of the greatest barriers to the study of maternity benefits are that (1) a common conceptualization and definition of maternity policy does not exist and (2) general conceptual framework that includes different types of support offered by different countries is also lacking. Without a consistent definition and comprehensive understanding of the benefits offered by each country, the study of maternity policy and benefits remains disjointed and makes it challenging to disentangle the impacts and effects of these policies. The various contexts of each country make it harder to compare the effects of these policies on employees, organizations, and society. To begin to remedy this, future studies should identify work-family policy design objectives and goals, and link these to systematic measurement.

This lack of comprehensive and comparable basic statistics—such as the actual usage of policies and the proportion of parents who are not eligible—limits the ability to generate specific conclusions about usage. Also, as we have seen, the research about differences based on countries and user demographics (e.g., religion or ethnicity) are sparse. Given the limited information about user demographics, we are not able to test the interactive effects of user's status on policies' usage.

For instance, women in higher status jobs may have easier access to maternity benefits; however, they are also more likely to have easier access to a host of other benefits. In contrast, women in lower status jobs, with more limited access to maternity related benefits, who actually have access to any maternity benefit may actually benefit more from less. This further confines our understanding of the diversity in usage and the experience of using maternity policies. Thus, we were unable to draw conclusions about the experience of parents who do not use eligible leave and parents who are unable to use leave because they are not eligible (Moss and Deven 2006).

In addition, although much of the research discussed earlier supports the provision of maternal policies, less is known about how the implementation of these policies influences societal, organizational, and maternal policies. Therefore, to help understand how policy change and the implementation of maternity policies influences attitudes, behavior, and other outcomes, research conducted during the periods before, during, and after a major policy change in maternal policy is necessary. To provide the most benefit to our understanding of maternal policy, this research should strive to be longitudinal and track opinions of employees and employers, as well as how the policy change affects gender equality and the health of employees and their families. A full examination of the cost of benefits of the new policies is needed to determine the success of such policy reform.

We argue that one important element of future research on maternity benefits should focus on maternity policies in non-Western and developing countries. The majority of the research conducted in the realm of maternity policies is conducted in Western/developed countries; however, the experiences of mothers and organizations in these countries may be different from mothers in non-western or developing countries. For instance, legally mandated parental leave may be unrealistic in some countries due to a governments' limited capacity to provide basic infrastructure and services to citizens or in countries where most jobs are part of the informal economy. Even in situations such as these, further research should investigate what types of comparatively low cost solutions (e.g. the provision of flextime to new mothers) can serve as preliminary benefits that employers and governments in developing countries may be able to provide without requiring significant nation and employer-based resource expenditures. In addition, the gender role expectations in non-western countries may be different and pose unique challenges to mothers in these countries. Thus, it is important that the influence of these challenges on maternity policies and outcomes be understood to best develop maternity policies that will maximize benefits to parents, children, organizations, and society.

In order to advance our understanding of the benefits and drawbacks of the different leave policies, further attention to the tenets of identity and role theory are likely to be useful. Whether women, children, families, and societies reap the intended benefits of maternity policies is likely contingent upon women's identification with maternal and career roles. Women who base their identity strongly on their careers may not be as positively affected by generous maternity policies as women whose primary focus is on their role as mothers. We would argue that these relationships would hold particularly in organizations that employees do not

perceive as family supportive. In fact, mothers with a career-oriented identity may view the utilization of maternity benefits as accepting help that their employer only grudgingly provides, potentially resulting in fear of career-related repercussions.

We also recommend that research on the outcomes of maternity benefits be of interdisciplinary nature, ideally containing methodological design aspects derived in economics for the measurement and costs of benefits, and research from organizational behavior, development psychology, and education to further examine the impact of policies on mothers, children, families and society.

General Suggestions for Policy Making and Organization

In order to better support employment and family life, policy makers should take a holistic approach in considering maternity policies (Deven and Moss 2002). Tijdens (2002) regards parental leave as one of four pillars to reconcile employment and family alongside equality plans in legislation, collective bargaining, and enterprises. Maternity policies should be considered as an integrated package of supports to avoid "gaps" in support, for example, when the parental leave ends, a good-quality, affordable childcare should be available (Adema 2012).

Policy makers need to define their objectives for maternal policies and, as changes in legislation take place, implement rigorous evaluation efforts to understand whether policies fulfill previously defined objectives (Moss and Deven 2006). For instance, creating large-scale national and world wide data collection efforts can shed light on eligibility for, usage and impact of maternal policies among diverse groups. Currently, only a limited number of organizations sponsor international and comparative cross-cultural research on maternity benefits and similar phenomena. A stronger emphasis on the possible benefits of cross-cultural research in this area is likely to benefit our understanding of the types of benefits that will most systematically affect family, individual and organizational well-being.

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Maternal Employment and Child Health: Conceptual and Empirical Foundations for Work and Family "Weaving Strategies"

Jennifer S. Freese, Amy M. Smith and Joseph G. Grzywacz

Abstract The goal of this chapter is to further theoretical understanding of the potential impact of maternal work on child health outcomes. We discuss limitations of role theory as a framework and utilize the concept of "weaving strategies" as family adaptive mechanisms that working women use to reconcile work and parenting demands. We present an empirical, structured interview-based study (n = 217 mothers) of maternal weaving strategies and their relationship with a host of child health outcomes. Six maternal weaving strategies were identified through factor analysis: positive reframing of work, modifying standards, time management, quick meals, selective socialization and limiting work. There was clear variability in use of alternative weaving strategies by marital status, race, household poverty status, and maternal work schedules. As expected, given the multidimensionality of child health, associations of different weaving strategies with discrete child health outcomes at different points in children's first year of life varied.

Keywords Work-family conflict · Child health · Maternal work · Parental work

An increasing number of children in contemporary society are raised in households where mothers work. Nearly two-thirds (63.9 %) of married households with children ages 6–17 in the United States (U.S.) were dual earner (U.S. Department of Labor 2014). The growth of dual-earning has been especially pronounced in households with children under three years of age. Whereas 34.3 % of women in the U.S. who had a child less than three worked outside the home in 1975, in 2014 61 % of women with a child less than three worked (U.S. Bureau of Labor Statistics 2014).

J.S. Freese
Department of Human Development and Family Science,
Oklahoma State University, Tulsa, USA

A.M. Smith · J.G. Grzywacz (✉)
Department of Family and Child Sciences, Florida State University,
Tallahassee, USA
e-mail: jgrzywacz@fsu.edu

Work and family research has historically focused on the consequences of women's employment for children. Operating under the prevailing mindset that occupying multiple roles (i.e., the roles of "mother" and "employee") would lead to strain and demise, the work-family literature was launched by a series of studies examining variation in children's developmental outcomes by maternal employment status. Although the literature is now clear that maternal employment has benign and potentially positive effects on children's development when the child-care environment is strong (Burchinal et al. 2010; Hansen and Hawkes 2009; NICHD Early Child Care Research Network 2002, 2006; Vandell et al. 2010), the implications of mothers' employment for children's health has been comparatively overlooked. As with historical precedent, we do not believe that maternal employment per se affects children's health. Rather, we contend that the everyday decisions and strategies used by working parents to achieve work and family responsibilities have potential implications for children's health.

We conceptualize children's health holistically; a "healthy" child is one who is typically developing in the physical, cognitive, and socioemotional realms. There is a large body of evidence linking various aspects of maternal employment to children's cognitive development or school readiness (Burchinal et al. 2010; Han 2004; Hansen and Hawkes 2009; NICHD Early Child Care Research Network 2002, 2006; Vandell et al. 2010) and children's socioemotional development (Daniel et al. 2009; Grzywacz et al. 2011). However, there is comparatively little research focusing on the physical domain of child development and more general indicators of "health" that summarize the child's overall well-being.

The overall goal of this chapter is to advance theorizing about the potential child health consequences of maternal employment. To be clear, it is unlikely that maternal employment per se affects children's health; rather, we argue it is the everyday activities through which working mothers "do" work and family, or working mothers' strategies for weaving their work and family lives (i.e., weaving strategies), that affects children's health. To achieve this goal, this chapter will accomplish 4 primary aims; it will: (1) conceptualize "weaving strategies" and provide theoretical or empirical examples of weaving strategies that have the potential to affect children's health; (2) describe the weaving strategies used by mothers of infants across a 12 month period starting when infants were 4 months of age and ending at 16 months of age; (3) report exploratory results linking alternative weaving strategies to indicators of children's health across the physical, cognitive, and socio-emotional domains of development; and (4) articulate ideas for advancing this under-developed domain of research.

Theoretical Foundation

Role theory is a common foundation used in many studies of work and family. The fundamental point underlying role theory is that every social system, like a "family" or an "employer" is comprised of a series of positions or "roles" (Kahn et al. 1964).

A prototypical family may be comprised of the roles of "father," "mother," "husband," "wife," "son" and "daughter," while a prototypical employer may have roles like "employee," "co-worker," "supervisor" and "subordinate". Each role within the system complements, and is interdependent with, other surrounding roles in supporting the overall needs of the system. Therefore, the overall success of the social system is dependent upon individuals taking on the prescribed responsibilities and behavior patterns associated with each role occupied.

Several perspectives and corresponding areas of research have emerged from role theory. The first and dominant perspective in the work-family literature is that of role strain. The key idea surrounding role strain is that accumulations of responsibilities and behavior patterns required of different roles (e.g., "mother" and "employee") invariably lead to excessive strain because of overload, greater potential for role conflicts and possible ambiguity of appropriate role behavior (Goode 1960). Several more contemporary researchers have used the role strain theory to study the consequences of caregiving (Gordon et al. 2012; Quittner et al. 1992), and the experiences of individuals in high-demand occupations such as medicine (Callister et al. 2000; Robinson 2003). It is noteworthy that research guided by role strain theory rarely considers the strain of multiple role occupancy within a social system (e.g., occupying the role of "daughter", "wife," and "mother" within a family), but more often focuses on multiple role occupancy across different social systems. Further, a recent socio-cognitive model presented by Lynch (2007) argues that roles are more flexible than originally thought; consequently, any experienced strain would arise from the inflexibility of the role rather than role occupancy per se. The second dominant theoretical perspective in the work-family literature is that of role accumulation. Role accumulation theorists acknowledge that strain may arise from multiple role occupancy, but the myriad benefits like role privileges and ego gratification that accompany occupying multiple roles exceed the challenges experienced (Sieber 1974). Most recently attention has been drawn to the notion of role enhancement, which argues the consequences of multiple role occupancy depend on the quality of the fit among the roles and their ability to produce synergies across the roles (Baruch and Barnett 1986; Hong and Seltzer 1995; Marks 1977; Marks and MacDermid 1996; Sieber 1974).

Despite the contributions of role theory to the work and family literature, it is not well-equipped for understanding the consequences of one individual occupying two distinct roles (i.e., "employee" and "mother") for another individual (i.e., the woman's child). The developing literature on crossover (Westman 2002) is potentially useful; however, implicit in the crossover explanation is the reality that, ultimately, children are affected by a parent's multiple role occupancy by the degree or extent to which the parent satisfies his or her parenting role. Or, put more simply, if performance in the parenting role is compromised by multiple role occupancy, child health and development will suffer. Consequently, understanding how occupancy in two distinct roles affects children's health requires focused attention on how working adults parent, or the strategies used by working parents to protect, nurture, and socialize their children. Work-family researchers, particularly those in the U.S., frequently overlook the mundane and invisible activities undertaken by

mothers (and parents in general) like personal care, menu planning and meal preparation, setting boundaries and creating routines that are essential for normative child development and health.

"Weaving Strategies:" Conceptual Foundations

Over twenty years ago, Moen and Wethington (1992) articulated "family adaptive strategies" and defined them as "actions families devise for coping with, if not overcoming, the challenges of living and for achieving their goals in the face of structural barriers" (p. 234). Moen and Wethington argued that several forces shape families' adaptive strategies. They maintained that structural forces inherent in the overall organization of society may enable or limit the types of strategies used by families. Whereas some families may be able to overcome challenges through the market (e.g., hiring a nanny, paying someone to clean), others do not have access to these strategies. Within the constraints imposed by structural limitations, Moen and Wethington argued that rational choice and personal preference shape a family's adaptive strategies. Finally, they argued that a family's adaptive strategies are influenced by historical location as well as individual and family stage of life.

The family adaptive strategies model views family as a unit and can be used to understand several circumstances, but the ideas are rarely used in the work-family literature. Hattery (2001) coined the term "weaving strategies" to describe the strategies used by mothers to satisfy work and family responsibilities in a culture dominated by notions that "good mothers" are those who are intensively involved in their children's lives. Voydanoff's (2002) conceptualization of work-family adaptive strategies is also based on Moen's and Wethington's thinking. Work-family adaptive strategies, according to Voydanoff, are behaviors, psychological devices, and organizational activities used by families and family members to lessen work-family role strain.

Combining Hattery's contention that working mothers navigate in a culture dominated by intensive mothering, and Voydanoff's focus on the behaviors and psychological devices used to lessen role strain, we suggest that working mothers' weaving strategies consists of three elements. The first and perhaps most influential element of a working mother's weaving strategy lies in the selection and use of non-maternal childcare. In the U.S. childcare is the lynchpin of a woman's weaving strategy because infants and children require constant supervision, and the basic ability to meet work and family responsibilities falls into disorder when childcare falls apart. The main forms of non-maternal childcare are partner/paternal care, care by other family members, use of early childhood education centers, and in-home day care. Estimates from the Survey of Income and Program Participation (U.S. Census Bureau 2013) indicated that approximately 17.9 % of women rely upon the other parent, 23.7 % rely upon the infant's grandparents, 23.5 % rely upon an early childhood education center, and approximately 11.2 % rely upon non-relative family daycare or care provided for the infant in the provider's home as primary

sources of childcare while working. According to the survey, 18.4 % of working mothers with infants use multiple childcare arrangements, while fully 38.7 % have no regular care.

The second element of a working mother's weaving strategy involves the behaviors and overt actions used by working mothers to meet family responsibilities, particularly in the context of parenting. These behaviors are manifest in a variety of different ways such as cutting back on their own leisure time activities (Mattingly and Bianchi 2003; Jacobs and Gerson 2001; Muller 1999; Nickols and Fox 1983); relying on take-out, pre-prepared, or convenience foods in meal planning (Grzywacz et al. 2011; Jackson et al. 1985; Muller 1999; Nickols and Fox 1983); avoiding breastfeeding or early weaning (Fein and Roe 1998; Lindberg 1996; Roe et al. 1999; Visness and Kennedy 1997); and reallocating major household and childcare tasks to spouses/partners or older children, or using paid services (Bianchi et al. 2000; Coltrane 2000; Muller 1999).

The third element of the weaving strategy is the psychological devices or tools that integrate decisions about non-maternal childcare and behaviors for meeting family responsibilities into a coherent strategy. Underlying the specific manifestations of this element of women's weaving strategies are perceptions of the personal and family value of being employed, the relative salience or the hierarchical placement of the "mother" role relative to other roles, and her appraisals of what being a "good mother" means. Specific manifestations of the psychological element of women's weaving strategies reported in the literature (Hattery 2001; Hays 1996; Hochschild 1989; Thompson and Walker 1989) are decisions to modify standards surrounding motherhood (e.g., "are 'home cooked' meals essential to being a good mother?"), a woman's responsibilities concerning household maintenance (e.g., does a "good mother" dust regularly or simply write "joy" in the dust that has accumulated on the desk?), and expectations about appropriate male and female behavior (e.g., "does a good mother solicit help from fathers?"). Likewise, beliefs about the value of women's employment for self (e.g., "Working is good for my own personal growth."), for children (e.g., "I am a good role model for my children.") and for the family (e.g., "my working is essential the family life I want") also underlie the psychological element of women's weaving strategies.

"Weaving Strategies:" Illustrative Examples

Although the three-part structure is important, the value of the weaving strategy concept lies in the integration of the elements into a coherent whole. In the remainder of this section we provide illustrative examples of alternative weaving strategies and the non-maternal childcare, behavioral and psychological tactics that may be used to implement the strategy. The first illustrative weaving strategy is "saving time," or the general world view that insufficient time is the key barrier to effective integration of work and family. Under the "saving time" strategy, childcare decisions are prioritized by their implications for the temporal demands placed

on the mother (and broader family system), such as proximity to home or work, as opposed to other considerations such as teacher-child ratios or quality ratings. Saving time can become behaviorally manifest by cutting back meal preparation time through heavy reliance on frozen or pre-packed meals or eating out, rather than meals prepared with fresh or minimally processed foods. Another manifestation of the "saving time" strategy is through outsourcing house cleaning to a paid provider, delegating the activity to another family member, or simply doing it less frequently. These behavioral manifestations may be accompanied by psychological readjustments that may be necessary to reconcile notions of "good mother" with the use of pre-packaged or commercially-prepared meals, or beliefs about the consequences of not enrolling children in extra activities to avoid additional time demands.

"Maximum efficiency" is another weaving strategy that may be developed by working mothers. Whereas the fundamental challenge to combining work and family for the "time saver" is an insufficient amount of time, mothers who endorse a maximum efficiency strategy believe the fundamental challenge to combining work and family is making the best use of the time given. With regard to childcare decisions, a maximum efficiency strategy would lead a mother to prioritize placing all of her children in the same childcare arrangement, or targeting a childcare facility that has a before- and after-school program with direct transportation to her older children's school. Behavioral manifestations of the maximum efficiency weaving strategy include heavy reliance on time management, schedule coordination, and prioritizing specific work and family responsibilities. Establishing routines that support automatic behavior as opposed to thoughtful behavior and cooking enough food to have leftovers are additional manifestations of this strategy. A mother may also use psychological readjustments to handle efficiency. She may place higher value on the accomplishment of some tasks than others, especially if it allows for more goals to be accomplished.

"Goal realignment" is another prototypical strategy used to balance demands, though it may not be a viable option for all parents. Cutting back on work hours or putting careers on hold may be the way goals are realigned in some families. However, if the family depends on dual income, this may not be an acceptable choice. Psychologically a mother may feel it is more beneficial to be at home with a child than to earn an income, despite the financial strain that may occur. Conversely, a family that before had a stay at home mother, may decide the income is more important to their family at that time.

Conceptual Linkages Between Weaving Strategies and Child Health

We believe there are two main pathways through which maternal weaving strategies may affect infant and child health. The first is a direct pathway and is perhaps best exemplified by the health protective effects of breast feeding. Substantial evidence indicates that early weaning or completely avoiding breastfeeding, one possible tactic supportive of a "saving time" weaving strategy, compromises

optimal development (Drane and Logeman 2000; Leach 1994; Oddy et al. 2003). Another example of a direct effect of a weaving strategy is the substantial evidence linking non-maternal childcare quality to child development outcomes. A weaving strategy, such as a "time saving" or "maximum efficiency", may allow qualities of the childcare provider to become overshadowed by the convenience of the childcare arrangement. If this occurs, evidence from several studies suggests the weaving strategy will have negative implications for children's development and potentially health outcomes (Burchinal et al. 1996, 2000; Dunn 1993; NICHD ECCRN 2000, 2001, 2002; Peisner-Feinberg and Burchinal 1997; Pierrehumbert et al. 2002; Vandell and Corasaniti 1988).

The second pathway linking maternal weaving strategies to child health and development is indirect, through maternal well-being. Manifestations of a "saving time" weaving strategy, like waking up early to prepare children's meals or cutting back on personal relaxation or self-care may result in mothers' being physically or emotionally unable to meet their children's needs. Maternal well-being is also affected directly by components of maternal weaving strategies (e.g. cutting back on sleep to "make time"), and indirectly through perceptions of work-family fit. Mothers can have increased stress and depressive symptoms due to ineffective weaving strategies that result in a lack of family-work balance. Maternal elevated stress or psychological strain can interfere with optimal infant growth and development. The escalating strain of combining work and family post-partum can leave working mothers less emotionally available to their infants (Killien et al. 2001; Repetti and Wood 1997; Rosenblum and Andrews 1994; Wahler and Dumas 1989). Active father involvement in both child-rearing and household tasks plays an important role in minimizing role strain and helping new mothers balance work and family (Barnett and Rivers 1996; Zimmerman et al. 2003). Mothers exposed to heightened levels of stress feel less capable in their parenting, which can translate into being less responsive to children and greater likelihood of responding to infants in a negative way (Gondoli and Silverberg 1997; Landry et al. 1997; Pianta and Egeland 1990; Snyder 1991; Taylor et al. 1997; Weinraub and Wolf 1983). Maternal stress in early infancy also affects long-term developmental trajectories (Landry et al. 1997).

Methodological Challenges in Studying Weaving Strategies and Child Health

Studying child health is riddled with challenges, and many of these challenges become manifest in attempts to study how parents' paid employment and their weaving strategies may shape child health outcomes. Most notable are the challenges associated with ontogenesis or the fact that children's development and health are not static phenomena. Rather, they both are subject to substantial change, frequently within wide ranges of normality as the child matures and becomes more complex. The needs of an infant and corresponding parental responsibilities are meaningfully different than those of a preschool, school-aged or adolescent child.

The new demands and responsibilities imposed by ontogenesis require ongoing adjustment and adaption; therefore, activities used by working parents to satisfy both parental and employment responsibilities at one point may become less effective as the child grows older. Further, the activities of daily life for working parents change as additional children are born and family complexity increases. All of these issues require study designs that capture normative changes in children's development and health, and measurement strategies that are rigorous yet flexible in application to different contexts and stages of development.

Another methodological challenge confronting research on the effects of paid employment on children's health is that "health" is a broad concept with wide ranges of normality. Can a child on the autism spectrum be "healthy" despite having a diagnosed condition? If so, what criterion is used to identify "health" and how are those criterion integrated with those of children not on the spectrum? In light of the fact that one in seven children has a health care need (National Survey of Children with Special Health Care Needs 2010), and the blurry distinction between "health care need", "developmental delay" and "disability", it is exceedingly difficult to study how parents' paid employment may affect children's "health". A final challenge is that of sampling and recruitment. It is not inconceivable that individuals recruited into research are those who are managing their work and family demands comparatively well. How well findings obtained from these samples inform the broader universe of employees with children, particularly those not typically targeted by research (e.g., single mothers), is unclear.

Weaving Strategies: Implications for Children's Health

In the next two sections of this chapter we provide preliminary results illustrating the potential value of weaving strategies as a concept for understanding the child health implications of maternal employment. The data presented are from "Weaving Work and Family: Implications for Mother and Child" study, a project funded by *Eunice Kennedy Shriver* National Institute on Child Health and Development. The goal of the "Weaving" project was to develop a better understanding of the consequences of maternal weaving strategies, or tactics used to integrate work and family responsibilities, on both mothers' health and their infants' health and development. The project recruited a representative community-based sample (n = 217) of mothers of infants who returned to full-time employment by the time their infants were 4 months old. Mothers were interviewed when infants were 4, 8, 12, and 16 months of age.

Study Sample

Of the 518 mothers who were selected for recruitment through a stratified, random sampling procedure, 288 mothers remained eligible after inclusion criteria (18 years

of age, working at least 30 h per week, and planning on returning to work 30 or more hours a week by 4 months postpartum) 217 agreed to participate and completed an interview survey at three points in time: the Time 1 interview (4 months postpartum), the Time 2 interview (8 months postpartum), and a Time 3 interview (12 months postpartum). The average respondent age was 31 years. Of those sampled, 72 % were White, 27 % were Black, 1 % were Asian, and the majority (79 %) were married.

Several studies have been published using data from this sample (Carlson et al. 2011; Clinch et al. 2009; Darcy et al. 2011; Grzywacz et al. 2010; Tucker et al. 2010). None of the previously published studies reported data obtained from explicit measures of maternal weaving strategies, described next.

Independent Variables: Behavioral and Psychological Components of Women's Weaving Strategies

The Dual Earner Coping Scale (DECS; Skinner 1983), a 58-item instrument designed to evaluate alternative ways dual earner couples manage their daily responsibilities, provided the primary instrument for assessing strategies used to weave work and family. The DECS was trimmed and modified to meet the needs of the broader Weaving project. The DECS was trimmed in two primary ways. First, all items asking about reallocation of household tasks to other family members (e.g., spouse, older children, other adult in the household) were eliminated because the assessment battery had an alternative section focused on who performed household chores, including various child-rearing tasks (e.g., bathing children, changing diapers, etc.) and household maintenance (e.g., cleaning, laundry, etc.) activities. The second major trimming was elimination of items whose content assumed the presence of a spouse or older child. These items were eliminated because being married was not an inclusion criterion; consequently, not all participants would have been able to answer these questions. Ultimately, 34 of the DECS items were modified to accommodate a frequency-based response set (i.e., never to all the time) as opposed to the original affective response set (i.e., strongly agree to strongly disagree) items to enable greater focus on behavior. Original factor analyses (Skinner and McCubbin 1981) suggested the fielded items would produce several distinct behavioral components of women's weaving strategies (i.e., *planning* [e.g., "I do certain housekeeping tasks at a regular time each week"], *reliance on prepared meals* [e.g., "Eating out frequently"], *obtaining help from others* [e.g., "hiring outside help to assist with housekeeping and home maintenance"] and *cutting back* [e.g., "Getting by on less sleep than I'd really like to have"]), as well as distinct psychological components (*modifying standards* [e.g., "Lowering my standards on 'how well' household tasks must be done"] and *maintaining perspective* [e.g., "Believing that working is good for my personal growth"]). Results of exploratory factor analyses are reported below.

Dependent Variables

Development. The Ages and Stages Questionnaire (ASQ) was used to measure five indicators of infant development at 4, 8, 12, and 16 months. Thirty questions addressed the child's behavior or ability in five developmental areas: *communication*, *gross motor control*, *fine motor control*, *problem solving*, and *personal-social*. Parents indicated whether the child "always" does the behavior, "sometimes" does it or is starting to do it, or is "not yet" doing it. The ratings for each area of development are converted to numerical scores on an interval scale and analyzed (Bricker et al. 1988; Squires et al. 1995). The ASQ was designed as a screening instrument but is appropriate for field research (Bricker et al. 1988; Squires et al. 1997, 2002).

Child total health. Child health was assessed with several items asked of mothers. Apart from a physical exam, which partially relies on caregiver statements explaining the purpose for the visit and examination, mother or other caregiver report is the dominant form health evaluation. First, mothers were asked to rate the overall health of their child on a scale of 1 (poor) to 5 (excellent). Next, mothers were asked two questions about bodily pain experienced by the child: one question focused on the frequency of pain in the past month on a scale of 1 (none of the time) to 5 (all of the time), and a second focused on the level of discomfort caused by experienced pain in the past month on a scale of 1 (none at all) to 5 (a lot). Third, mothers were asked whether the child experienced (yes/no) 12 distinct symptoms in the past month. Finally, mothers were asked 10 questions: five asking the degree to which mothers were worried about their child in discrete health-related areas (e.g., eating habits, behavior, sleeping), and five asking how much impairments in these same health-related areas impaired her own functioning. These items have been established as valid and reliable indicators of infant and toddler quality of life (Raat et al. 2007). Each of the child health items were coded such that better health had higher values, the coded items were then transformed, summed, and standardized to a 0–100 point scale with higher values indicating better child health.

Results

Factor analyses. Responses to the 34 DECS items fielded at each interview (i.e., when the children were 4, 8, 12, and 16 months of age) were submitted to an exploratory factor analysis using a maximum likelihood extraction with oblimin rotation. This analysis produced 10 factors with eigenvalues greater than 1.0; however, the scree plot suggested the last four factors were relatively indistinguishable. Items were kept if the factor loading was higher than 0.40 on only one factor with no split loadings and they had a reasonable association with other factor

items. Consequently, six factors containing 19 items were retained; these 19 items accounted for 32 % of the total variance (Table 1).

The first factor consisted of seven items reflecting an internal dialogue about the positive or beneficial aspects of being a working mother; consequently, we labeled this factor *positive reframing of maternal work*. The second factor consisted of two items reflecting the state of leaving household chores undone or done at a sub-standard level that we labeled *modifying standards*. The third factor consisted of four items measuring alternative activities to organize or maximize "family time" that we labeled *time management*. The fourth factor consisted of two items assessing the use of time-saving strategies for meal planning/preparation that we labeled *quick meals*. The next factor we labeled tor *selective socialization* because the items capture a selection or prioritization process used to shape individual and family social interactions. The sixth factor consisted of two items reflecting boundaries placed on work responsibilities that we labeled *limiting work* (Table 1).

Temporal variability in weaving strategy components. Analyses of the weaving strategy components identified from the DECS items indicated they remain relatively stable over time (Table 2). The mean value for each weaving strategy component remains unchanged from observation to observation, as well as across the entire study period. Similar stability across the study period was observed for non-maternal childcare (Table 3). However, sample descriptions frequently mask considerable person-level variability (Bolger et al. 2003); consequently, we plotted the average use of several weaving strategies for a randomly selected subsample (n = 10) of ten study participants (Fig. 1). At the individual level, there is evidence of considerable variability in the frequency in which different weaving strategy components are used. For example, whereas person 5 and 6 have generally constant levels of *time management*, person 9 and person 3 reported decreasing and increasing use of *time management*, respectively, as their children aged (Fig. 1).

Between-person differences in use of weaving strategy components. The weaving strategies used by working mothers varied by several sociodemographic factors (Table 4). Maternal weaving strategies consistently differed by marital status, such that married women reported greater reliance on *modifying standards*, whereas unmarried women reported greater reliance of *positive reframing*. Three of the six weaving strategies differed by maternal race such that White mothers had greater reliance on *time management* and *modifying standards*, whereas non-White mothers had greater reliance on *positive reframing*. Four of the six weaving strategies differed by poverty status. Whereas women living below poverty had greater reliance on *positive reframing*, women whose household earnings were above poverty reported greater use of *time management*, *modifying standards*, and *limiting work*. The only weaving strategies that did not have significant group differences by poverty status were *selective socialization* and *quick meals*. Lastly, group differences were evident by maternal work schedule such that women with a non-standard work schedule reported greater reliance on *positive reframing*, whereas women with a standard work schedule reported more frequent use of *modifying standards* and *time management*.

Table 1 Results of exploratory factor analysis[a] of items assessing distinct components of working mothers weaving strategies for combining work and family

Item	Factor					
	1	2	3	4	5	6
Positive reframing						
… tell yourself family is better because of your working	0.63					
… tell yourself that working makes you a better parent	0.79					
… find yourself accentuating good things about being working mother	0.58					
… you tell yourself that working makes you a better spouse partner	0.75					
… tell yourself that being a working mom makes you a good "role model" for children	0.79					
… tell yourself that working is good for personal growth	0.71					
… tell yourself that overall there are more advantages than disadvantages to working	0.71					
Modifying standards						
… leave some things undone around the house …		0.65				
… lower your standards for how well household tasks are done		0.80				
Time manage						
… keep regular routine of doing household tasks each day			0.51			
… plan "family time" into schedule			0.66			
… schedule family activities so that the occurred at regular time each day or week?			0.63			
… stick to schedule of work and family related activities			0.60			
Quick meal						
… buy convenience foods that are fast and easy to prep				0.66		
… get take-out food or eat out for family meals				0.74		
Select social						
… look for encouragement from members of family about balancing work and family					0.53	
… talk with friends about challenge of combining work and family					0.51	

(continued)

Table 1 (continued)

Item	Factor					
	1	2	3	4	5	6
… cut back on home entertaining					0.43	
… cut back on things that you see as "extra activities"					0.42	
Limit work						
… limit time at work so that you have more time for family						−0.65
… limit your involvement on the job-saying no to thing you could be doing?						−0.51

All items led with the stem, "In the past 3 months how often did you…" Response options were 1 "Never," 2 "Rarely," 3 "Sometimes," 4 "Often," and 5 "Very Often"
[a]Results obtained using a maximum likelihood extraction with oblimin rotation

Table 2 Average frequency of use for each weaving strategy component in the past 3 months by observation

Strategy	Observation (child age)							
	T1 (4 months)		T2 (8 months)		T3 (12 months)		T4 (16 months)	
	M	(SD)	M	(SD)	M	(SD)	M	(SD)
Positive reframing	2.97	(0.85)	3.24	(0.86)	3.18	(0.88)	3.25	(0.85)
Modifying standards	3.69	(0.94)	3.72	(0.83)	3.66	(0.84)	3.67	(0.86)
Time management	3.85	(0.68)	3.95	(0.64)	3.95	(0.71)	3.94	(0.67)
Quick meal	3.67	(0.80)	3.53	(0.75)	3.55	(0.78)	3.52	(0.78)
Selective socialization	3.30	(0.77)	3.27	(0.66)	3.05	(0.64)	3.05	(0.69)
Limiting work	2.85	(0.97)	2.84	(0.88)	2.83	(0.91)	2.78	(0.81)

Response options were 1 "Never," 2 "Rarely," 3 "Sometimes," 4 "Often," and 5 "Very Often"

Weaving strategy components: Implications for Child Health. An exploratory analysis of the association between working mothers weaving strategy components and multiple indicators of child health and development yielded a mixed set of findings (Table 5), which we summarize and illustrate in the remainder of this section. The first main finding from these correlations is the absence of a clear and consistent pattern of correlations at each child age. The developmental domain of communication is the only child health outcome associated with a weaving strategy component at each stage of development. Specifically, greater use of *positive reframing* or the extent to which mothers' internal dialogues emphasized the positive or beneficial aspects of being a working mother, was associated with higher scores on child communication at all four observations (i.e., 4, 8, 12 and 16 months). But this is the only occurrence across six outcomes and six components of work and family weaving strategies.
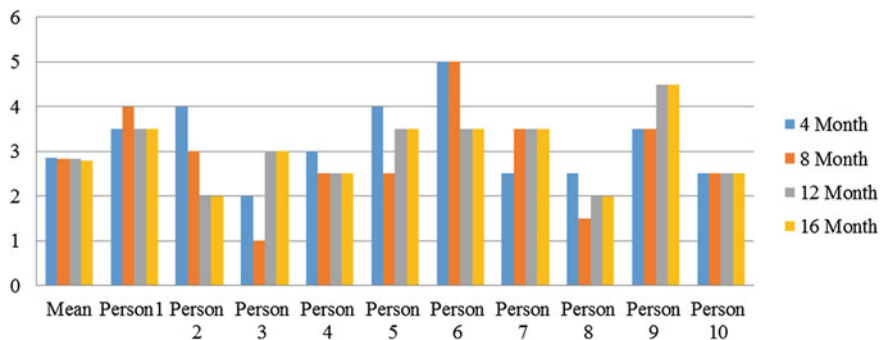
Fig. 1 Intrapersonal variation in the use of the "limiting work" weaving strategy by observation (age of child)

Table 3 Non-maternal childcare component of mothers weaving strategies by observation (age of child)

	T1 (4 months)		T2 (8 months)		T3 (12 months)		T4 (16 months)	
	%	n	%	n	%	n	%	n
Husband/partner	11.1	(24)	10.1	(20)	7.7	(15)	9.1	(17)
Kith/Kin	31.5	(68)	28.1	(56)	28.9	(56)	24.7	(46)
Family daycare	12.5	(27)	12.1	(24)	13.4	(26)	13.4	(25)
Community childcare	31.5	(68)	33.2	(66)	35.6	(69)	35.5	(66)
Multiple	5.1	(11)	6.5	(13)	3.6	(7)	6.5	(12)
Non-family	8.3	(18)	10.1	(20)	10.8	(21)	10.8	(20)

Table 4 Average frequency of use for each weaving strategy component by sociodemographic characteristics

	Married		Racial minority		Household in poverty			
Non-standard schedule								
Strategy	Yes	No	Yes	No	Yes	No	Yes	No
Positive reframing	**3.01**	3.62	**3.37**	3.06	**3.76**	3.09	**3.44**	3.01
Modifying standards	**3.80**	3.20	**3.39**	3.78	**3.05**	3.73	**3.50**	3.75
Time management	2.04	1.84	**1.71**	2.12	**1.71**	2.03	**1.90**	2.04
Quick meal	3.63	3.41	3.49	3.62	3.49	3.60	3.54	3.60
Selective socialization	3.20	3.13	3.19	3.18	3.16	3.19	3.20	3.17
Limiting work	2.84	2.73	2.84	2.81	**2.52**	2.85	2.77	2.86

Values are estimated means across all four observations. Responses ranged from 1 = Never to 3 = Sometimes to 5 = Very Often. **Bolded** estimates are significantly ($p < 0.05$) different from the adjacent value based upon results obtained from independent samples t-tests

Table 5 Correlations with weaving strategies and child development outcomes

	Child age months	Positive reframing	Modifying standards	Time management	Quick meals	Selective socialization	Limit Work
Child health	4	0.07	-0.09	0.01	-0.07	-0.03	-0.05
	8	0.13	-0.03	0.03	-0.11	-0.02	-0.06
	12	0.10	-0.16*	-0.04	-0.13	-0.15*	-0.05
	16	0.17*	-0.20**	0.10	-0.05	-0.11	-0.01
Communication	4	0.19*	-0.07	-0.03	0.12	0.02	0.04
	8	0.15*	0.05	0.03	-0.05	0.01	-0.03
	12	0.19**	-0.08	0.13	0.08	0.07	-0.03
	16	0.17*	-0.10	0.26**	0.06	0.01	0.04
Gross motor	4	-0.02	0.06	0.02	0.05	0.08	0.00
	8	-0.03	-0.03	-0.05	-0.12	0.01	-0.08
	12	0.10	-0.14	0.02	-0.15*	-0.14	-0.11
	16	0.13	-0.11	-0.04	-0.12	-0.09	-0.05
Fine motor	4	0.04	0.04	-0.00	0.07	-0.00	-0.06
	8	0.02	0.00	0.10	-0.01	0.03	-0.03
	12	0.02	-0.02	0.01	0.05	-0.04	0.04
	16	0.05	0.01	0.05	-0.05	-0.08	-0.04
Problem solving	4	0.19**	-0.00	-0.05	0.23**	-0.01	-0.09
	8	0.08	-0.01	0.12	0.10	-0.02	0.05
	12	-0.01	0.01	0.19*	-0.04	-0.11	0.02
	16	0.16*	0.02	0.07	-0.09	-0.09	0.01
Personal-social	4	-0.01	-0.07	-0.00	0.03	0.14*	-0.01
	8	0.06	0.07	0.17*	0.08	0.16*	0.04
	12	0.17*	-0.14	0.21**	0.09	-0.05	-0.11
	16	0.15*	-0.00	0.12	-0.15*	-0.11	-0.04

* p < 0.05 ** p < 0.01

A more common scenario is that components of women's work and family weaving strategies had implications for child health outcomes at some stages of development, but not others. For example, higher levels of *positive reframing* was associated with better overall child health ($r = 0.17$, $p < 0.05$) at the 16 month observation, but the magnitude of the correlations of this psychological component of women's weaving strategies was 24–56 % smaller and non-significant at the 4, 8 and 12 month observation. Similarly, more frequent use of *selective socialization* was associated with poorer overall child health at the 12-month observation ($r = -0.15$, $p < 0.05$), but the correlations of this behavioral component of women's weaving strategies with children's health were smaller and non-significant at other observations.

Next, not a single component of women's weaving strategies was associated with several child health outcomes. *Positive reframing* was associated with four of the six indicators of child health. In addition to associations already described, more frequent use of *positive reframing* was associated with better problem solving when children were 4 and 16 months of age, and more frequent use of *positive reframing* was associated with better personal-social development at 12 and 16 months of age. Use of *time management* was associated with three outcomes: more frequent use of *time management* was associated with enhanced child communication at 16 months, better problem solving at 12 months, and elevated personal-social development at both 8 and 12 months. *Quick meals* was associated with three of the six outcomes, such that greater reliance on *quick meals* was associated with poorer gross motor skills among 12 month-old children, better problem solving skills among 4 month-old children, and poorer personal-social development among 16 month old children. *Modifying standards* was only associated with one child health outcome, such that more frequent use of *modifying standards* was associated with poorer child health at 12 and 16 months. *Limiting work* was not associated with any child health outcome.

Third, there was variability in the apparent sensitivity of some child health outcomes in contrast to others. Child health was associated with distinct components of women's weaving strategies: *positive reframing*, *modifying standards*, and *selective socialization*. Communication was associated with *positive reframing* and *time management*. Gross and fine motor development were both, by and large, unassociated with women's weaving strategies. Problem solving was associated with *positive reframing*, *time management*, and *quick meals*. Finally, personal-social development was associated with *positive reframing*, *time management*, *quick meals*, and *selective socialization*. Interestingly, personal-social development was associated with *selective socialization* in early infancy (i.e., 4 and 8 months), but then personal-social development appears to be more strongly associated with *time management* as the child transitions from infancy to toddler (i.e., 8 and 12 months), and *positive reframing* appears to take on greater salience as the toddler develops (i.e., 12 and 16 months).

Finally, the magnitude of most of these associations was small. The significant correlations ranged from a low of ±0.15 to a high ±0.26. A closer evaluation if these associations revealed two distinct forms of associations. The first form is

(a)

Mean Child Communication Skills at 16 months

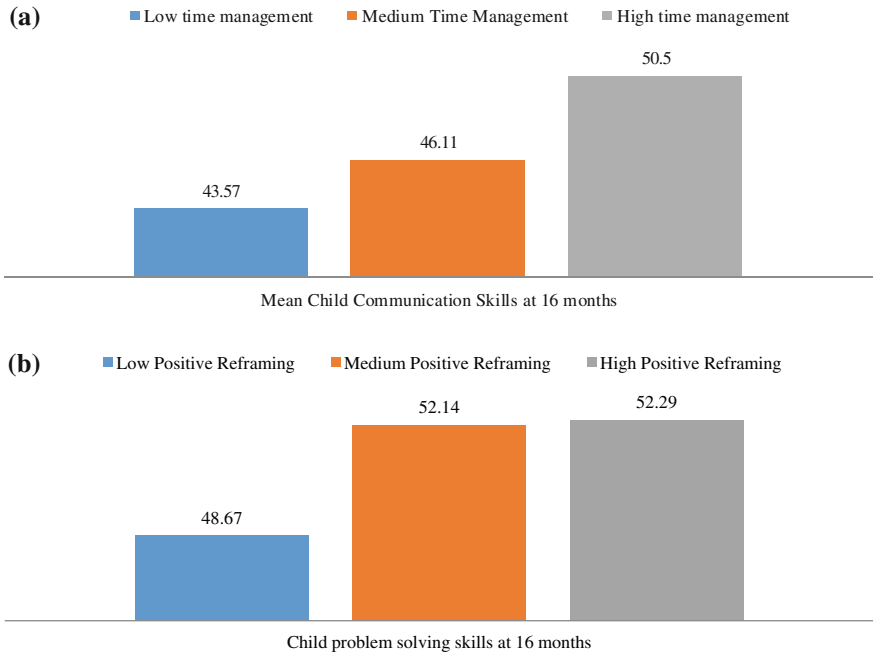**(b)**

Child problem solving skills at 16 months

Fig. 2 **a** Apparent linear association between use of "time management" and children's communication skills at 16 months. **b** Apparent non-linear association between use of "positive reframing" and children's problem solving skills at 16 months

linear, and is illustrated by the clear stochastic "stair step" association between the frequency of women's use of time management at 16 months and children's communication skills (Fig. 2a). The second type of association is better characterized as a "threshold effect". This type of association is illustrated in the problem solving outcome at 16 months: there is no difference in this child health outcome between medium and high frequency users of *positive reframing*, but children of women who rarely use this weaving strategy component has strikingly lower problem solving skills (Fig. 2b).

Discussion

Empirical Results

The presented results make several contributions to the maternal employment and child health literature. First, these results contribute to the literature by demonstrating the ability to isolate and assess distinct components of working mothers' strategies for combining work and family. Recognizing that "what gets measured

gets done," the ability to assess components of women's "weaving strategies" allows researchers to advance a concept introduced over 20 years ago (Moen and Wethington 1992) that has recently resurfaced (Hattery 2001; Voydanoff 2004). Clearly, though, more measurement research is needed to strengthen the assessment of working women's weaving strategies. Indeed, that only 19 of the 34 items were retained by the factor analysis and only 32 % of the total variance was explained highlights the importance of constructing a new instrument wherein each item contributes meaningfully to one component of a weaving strategy and each component is represented by multiple items.

Our demonstration of the sources of variation in different components of working mothers' weaving strategies also contributes to the literature. It is noteworthy that, in the aggregate, there was little temporal variability in the frequency that different weaving strategies were used. Although it is possible that apparent stability in sample means over time may mask individual-level variability (Bolger et al. 2003), it was surprising that more sample-level variability was not seen recognizing that development is particularly rapid in the infancy and early toddler period. The absence of sample-level variability may reflect weaknesses in assessment, both in terms of the items used and the sensitivity of the options for responding to items. Indeed, there is an entire literature describing the weaknesses and challenges of "vague quantifiers" in scientific measures (Coventry et al. 2010; Lenzner 2012; Wanke 2002). However, it is also possible that the components of working mothers' weaving strategies are, in fact stable, but the specific manifestations may be more labile. For example, use of quick meals as one component of an overall strategy focused on time saving could vary by season (more dining out during spring and summer, whereas more delivery meals in winter), or it may be relatively immutable to infant development in that infant/toddler requirements may have little impact on overall family meal planning. Family meal planning in general, and subsequent implications for quick meals, may change as children age and develop alternative taste preferences (Mennella 2014). Observed sources of between-person variability in components of women's weaving strategies are also noteworthy. That positive reframing is more commonly used by single mothers, African American mothers, those living in poverty, and those in a nonstandard schedule job all suggest that socioeconomically disadvantaged mothers may have little choice but to change their mindset, whereas White, married and non-impoverished women may have more options available (e.g., time management, limiting work).

To the focus of this chapter, the most salient results are those suggesting an association between distinct components of women's weaving strategies and discrete child health outcomes. These results reflect one of the first attempts to consider children's health holistically. Although a wide body of maternal employment research has studied child development outcomes (Burchinal et al. 2010; Han 2004; Hansen and Hawkes 2009; NICHD Early Child Care Research Network 2002, 2006; Vandell et al. 2010), these may be the first data considering physical health, physical development (i.e., fine and gross motor) along with measures of cognitive and socioemotional development in the same study. Although observed

associations were generally small, they provide compelling evidence of the potential value of studying how variation in mothers' strategies for weaving work and family may shape children's health. Just as the quality of non-maternal childcare was found to play a key role in understanding the potential influence of maternal employment on child development (NICHD Early Child Care Research Network 2002, 2006), we maintain that maternal employment per se is not an active agent in shaping child health. Indeed, maternal employment likely has benign or possibly positive consequences for child health through increased household earnings and greater access to health care through employer sponsored health insurance. But, these benign or modestly positive consequences could be undermined and made negative if women (and families) construct strategies for combining work and family that do not consider the short and long-term health implications of the actions used to implement those strategies. This is a ripe area for further work and family research.

The overall pattern of correlations observed in this study highlights and reinforces two key methodological challenges confronting this domain of research. The first key challenge is the complexity of "health" as a concept. Our results, as simple as they were, suggest that no single component of a working mother's weaving strategy is consistently associated with multiple child health outcomes. Put differently, each domain of child health appears to be differentially sensitive to components of working mothers' strategies for weaving work and family. The second key challenge is the complexity of a developing child. Our results indicated very little evidence that weaving strategy components had comparable associations with the same health outcome at different points in time. This is a common challenge confronted by developmental psychologists and pediatricians. Work-family researchers will need to adopt some of study design (e.g., recruiting stratified samples across distinct developmental periods; birth cohort studies), measurement (e.g., developing and implementing naturalistic observational methods (Repetti et al. 2013) or increased used of tasks that elicit phenomenon of interest) and analytic tools (e.g., latent growth models, actor-partner interdependence models) used by developmental psychologists and pediatricians to build a better understanding of the child health implications of maternal employment and the strategies used to weave work and family.

General Discussion

As work and family researchers turn their collective attention toward more specific domains of research, like the putative effects of maternal employment on child health, it is essential that attention be given to how working mothers "do work and family." In this chapter we argued that work-family "weaving strategies" is a fruitful area for theorizing and inquiry. We posited that historical and emerging notions that adult workers are active agents in their daily work and family lives, and that working mothers (and fathers) actively implement a strategy for satisfying the

role expectations of parent and employee (Grzywacz and Carlson 2007; Moen and Wethington 1992). Although substantial theory argues that weaving strategies and selected tactics for implementing those strategies likely vary in complexity by family configuration and social status, all working mothers have a strategy for accomplishing their work and family roles. Our preliminary data indicated that discrete components of working mothers weaving strategies are associated with several indicators of child health, suggesting the strategies underlying these specific components may be important for understanding the child health implications of maternal employment.

There is substantial theoretical and practical value in pursuing the ideas presented in this chapter. Theoretically, the ideas presented in these chapters are steeped in historical and contemporary work-family research. Nearly 25 years ago Moen and Wethington (1992) introduced the notion of adaptive strategies, and several eminent work-family researchers have used this concept in recent theorizing (Voydanoff 2004). Most recently, during the 2014 conference of Work and Family Research Network, Jeffrey Greenhaus made an explicit call for research focused on the decisions made within families to structure and navigate daily work and family life. By building on existing theoretical ideas researchers interested in maternal employment and child health can more quickly engage in theoretically informed research. Practically, shifting work and family research toward greater focus on the strategies used by working mothers and families to weave their work and family lives offers greater promise for developing and implementing concrete strategies individuals and employers can use to promote employee well-being on the job and off. However, our encouragement to focus on weaving strategies should not be interpreted as though the challenges working mothers face in combining work and family result from poor decisions: in many cases that is equivalent to blaming the victim. Rather, the focus on effective weaving strategies must consider decisions on both the employer (e.g., scheduling alternatives, realistic role expectations) and the employee.

Useful research is conceptually driven; consequently, our closing discussion of high priority areas for research is informed by a theoretically-based conceptual framework (Fig. 3). The proposed framework has four key ideas. First, working mothers' strategy for weaving work and family impacts children's health. However, the health consequences for children are posited to be indirect through a variety of physical, interpersonal, and intrapersonal exposures. Physical manifestations of working mothers weaving strategies (i.e., "physical exposures") can take multiple forms, such as decisions to breastfeed or physical attributes of a selected childcare alternative such as cleanliness, availability of alternative toys and learning experiences. Likewise, interpersonal exposures can take multiple forms ranging from variation in the amount of time parents spend reading to children, to emotional outbursts directed at the child from sleep deprivation, to parental conflict resulting from focused attention on the child at the expense of focused attention to the adult relationship. Finally, the intrapersonal exposures reflect the myriad of psychological activities of the developing child including the stress response and associated

activation of the hypothalamic-pituitary-adrenal (HPA) axis, developing skills in emotion regulation, and the evolving sense of self and personal value.

The second key idea of the proposed framework is weaving strategies. Although the exploratory analyses in this chapter were focused on specific components of working mothers' weaving strategies, we maintain it is the cognitive structure underlying these components (i.e., the weaving strategy itself) that is most relevant to understanding the potential child health implications of maternal employment. The proverbial "Band-Aid on an infection" metaphor is appropriate here such that, little progress will be gained in helping working mothers (and fathers) better combine their work and family lives if researchers and practitioners focus exclusively on specific behaviors used to "do" daily work and family life: the source of the success or failure is not understood in the manifestations, it is understood in the latent phenomenon. This contention is illustrated in our purposeful use of "weaving strategy" as reflective latent construct (Edwards and Bagozzi 2000) wherein the observable indicators are presumed to be a reflection of an underlying notion or phenomenon.

Consistent with ecological systems theory (Bronfenbrenner 1979; Bronfenbrenner and Ceci 1994), the third key idea is that weaving strategies are shaped by attributes of both the individual and environment. Like Bronfenbrenner's and Morris' (1998) contention that disposition (e.g., personality), resource (e.g., self-efficacy), and demand (e.g., gender) characteristics act on person-environment interactions in distinct ways, we believe that discrete individual attributes will contribute to the construction of distinct weaving strategies. Further, the form and power of the weaving strategies will be shaped by environmental circumstances in the immediate microsystem (e.g., partner's work schedule), the mesosytem (e.g., previous experiences at the work-family interface), exosystem (e.g., workplace policies), macrosystem (e.g., regulations governing work time), and chronosystem (e.g., location in developmental and historical time). The last key idea from our conceptual framework is that child health is complex and multidimensional. Although trite and potentially pedantic, it is essential for work-family researchers to embrace the importance of the idea. If we seek to understand the implications of maternal employment on child "health," we must ensure that our assessments of child "health" adequately represent the universe of health manifestations. This notion is illustrated in Fig. 3 by our purposeful use of child "health" as a formative latent construct wherein the latent construct is believed to emerge from the observable manifestations (Edwards and Bagozzi 2000).

With this framework in place, we believe there is two high priority research areas needed to advance understanding of the child health consequences of maternal employment. First, theoretically-based research designed to isolate key "exposures" linking maternal weaving strategies with child health outcomes is needed. We provided several examples of physical, interpersonal, and intrapersonal exposures in our description above, but this list is intended to be illustrative rather than exhaustive. Work and family researchers are encouraged to review diverse literatures ranging from infectious disease to environmental epidemiology to developmental psychology and family sociology to delineate the range of plausible exposures affecting child health outcomes, and to determine the most meaningful
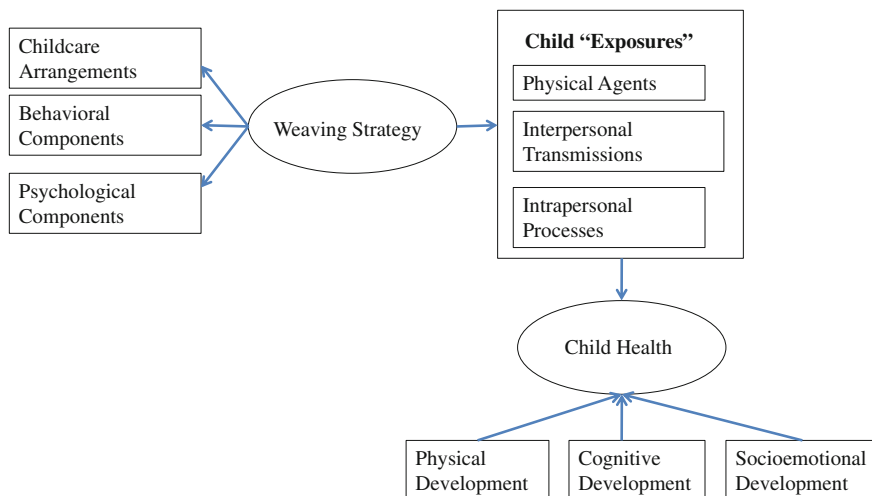
Figure 3. Conceptualization of maternal "weaving strategies" and their potential
influence on holistic child health

Fig. 3 Conceptualization of maternal "weaving strategies" and their potential influence on holistic child health

exposures for protecting child health. Of course, an essential element of this body of research is purposefully delineating which health outcomes are linked with which exposures recognizing that successful management of child asthma, optimal development of a child with autism, and maintaining health weight-for age is each likely have very distinct "exposures." Consequently, identifying exposures that are prevalent and operate across a variety of child health outcomes is essential.

Second, exploratory and confirmatory research to identify, characterize and quantify the weaving strategies used by working parents is needed. Qualitative and ethnographic studies are needed to identify and characterize the weaving strategies used by working parents in different industries, and across different cultural contexts. Survey studies are needed to determine if identified weaving strategies can be captured using quantitative data, and if so, to build understanding of how discrete weaving strategies are created, maintained and refined. In essential element of this area of research is deliberate attempts to highlight how weaving strategies used by working mothers articulate with broader elements of family life including the weaving strategies of fathers or partners.

Concluding Remarks

The overall goal of this chapter was to advance theorizing about the potential child health consequences of maternal employment. We argued that focusing attention on the strategies used by working mothers to combine, or weave, their work and family

lives is both theoretically and practically useful. We presented evidence that core components of maternal weaving strategies can be measured, that these components vary both within individuals over time and across individuals, and that components of working mothers weaving strategies are correlated with discrete and diverse child health outcomes at different ages. As with any new area of inquiry, the presented ideas and data require further refinement through theoretical debate and empirical inquiry. Nevertheless, the arguments and data suggest that focusing on weaving strategies is likely useful for protecting the health of an increasing number of children whose mothers make valuable contributions to the world economy by engaging in the labor force.

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Employed Mother Stereotypes and Linkages to Work-Family Conflict and Enrichment

Tomika W. Greer and Whitney Botsford Morgan

Abstract Social psychological theories were used to explain stereotypes of mothers in the workplace. Further, the extent to which mothers' harbor these negative stereotypes and perceive that their managers agree with such stereotypes was explored. Survey participants reported their level of agreement with the stereotypes that employed mothers are incompetent employees, inflexible employees, not committed to their jobs, and require special accommodations compared to other groups of employees. Data were collected from 680 women. ANOVA results revealed that the non-mothers reported higher agreement with the stereotype statements than mothers. Correlations showed significant relationships between agreement with the stereotypes and increased work-family conflict. Agreement with the stereotypes was also negatively related to work-family enrichment. Regression analyses also revealed that (dis)agreement with these stereotypes predict whether or not working mothers believe they are getting assigned to important projects and tasks. The chapter concludes with suggestions for reducing the prevalence of negative stereotypes of working mothers. Future research opportunities include clarifying relationships between stereotypes of working mothers and outcomes of interest by considering demographic variables, life/career stages, and the impact of stereotype threat.

Keywords Working mothers · Stereotypes · Work-family conflict · Work-family enrichment

T.W. Greer (✉)
University of Houston, Houston, TX, USA
e-mail: twgreer@central.uh.edu

W.B. Morgan
University of Houston—Downtown, Houston, TX, USA

Historically, American women have tended to separate paid employment from motherhood; however, since World War II, mothers of young children are increasingly more common in the United States workforce (Cohany and Sok 2007; Rosenfeld 1996). Indeed, within 12 months of birthing a first child, 79 % of new mothers who worked during their pregnancy return to paid employment (Laughlin 2011). However, this was true for only 25 % of new mothers in the 1960s (Laughlin 2011). As a result, it is increasingly important to understand the employed mother segment of the population as there is a growing number of women in this category. In this chapter, we focus on women's transitions from childless employees to employed mothers—a situation that most American women are in within a year of giving birth.

When women return to work following the birth of a child, they may suffer from issues of low confidence or self-esteem (Greer 2013). This is particularly true when women experience a break in their employment, including a period of maternity leave. It is, therefore, vitally important for women to experience a workplace environment that supports their new needs as a mother and an employee upon their return to work as they transition into employed motherhood. When the workplace is not supportive of new mothers rejoining the workforce, the transition becomes particularly challenging and may lead to failed attempts to successfully combine employment and motherhood (Ladge and Greenberg 2015).

At the root of the challenges experienced by a mother returning and adjusting to work following the birth of her child is the prevalence of stereotypes in the work environment in which she is employed. Stereotypes are the descriptors attributed to individual persons based on their membership in a given social group. For instance, societal norms may dictate certain stereotypes about men and women based on their gender. Stereotypes about women include attitudes that tend to characterize women on two continuums: competence and warmth (Fiske et al. 2002). Such attitudes can lead to emotion-based prejudice. The in-group is generally viewed as both warm and competent. However, employed mothers are at risk of being perceived as cold, despite perceptions that they are competent (Cuddy et al. 2004). Given that employed mothers are viewed as less competent than childless employed women, employers may be less interested in hiring and promoting mothers (Cuddy et al. 2004) compared to other demographic groups. Drawing upon social psychological research, we propose that prevalent stereotypes about employed mothers ultimately question their performance capacity and dedication to work, which can affect perceived psychological outcomes, including work-family conflict and work-family enrichment.

Work-family conflict (WFC) exists when an employee's work and family responsibilities are incompatible in some way. For instance, employees may perceive that they do not have enough time to meet the demands of the multiple roles, the stress of one role may impede performance in another role, or the behaviors enacted in one role are incompatible for success in another role (Greenhaus and Beutell 1985). Work-family conflict is often conceptualized as a bi-directional

construct in which work can interfere with family (WIF) or family can interfere with work (FIW).

On the other hand, work-family enrichment (WFE) occurs when involvement in work or family enhances performance or affect in the alternate role (Carlson et al. 2006). For example, the development of skills in one role may positively impact another role or positive affect may spillover into another role. Like work-family conflict, work-family enrichment is also conceptualized as a bidirectional construct in which work can enrich family life (WFE) or family life can enrich the work experience (FWE).

If women are to successfully transition into motherhood and remain valuable employees, they would ideally report low work-family conflict and high work-family enrichment, suggesting that their roles minimally conflict with each other are, in fact, conducive to improving overall performance and affect in both work and family roles.

Consequential Stereotypes of Mothers

Reduced Performance Capacity

Undergoing the transition to motherhood is a highly salient process, as there are physical changes that cue and reinforce to all parties that the employee is becoming a mother. Pregnancy and motherhood are suggested to be the epitome of femininity (see Hebl et al. 2007), which outside of the workplace is highly valued and even revered, but inside the workplace is devalued (Ridgeway and Correll 2004). Specifically, Ridgeway and Correll (2004) established motherhood as a status characteristic, as there are widely held stereotypes of mothers that are associated with fewer job-related opportunities and experiences compared to childless employees and even fathers within the context of the workplace.

For example, a laboratory experiment demonstrated that mothers were rated lower on perceived competence and awarded lower starting salaries than fathers (Correll et al. 2007). Similarly, Cuddy et al. (2004) revealed that when female consultants are described as having children (vs. no children), they are rated less competent. These phenomenon are labeled as the "motherhood penalty" (see Correll et al. 2007) or "maternal wall" (see Crosby et al. 2004), and such notions are reinforced by salary data that supports a wage gap between employed mothers and fathers (Budig and England 2001). This wage gap also persists over time (Avellar and Smock 2004). The body of empirical research largely supports the notion of motherhood as a status characteristic, which damages perceptions of mothers' performance capacity (i.e., ability and effort) in their jobs.

A complementary framework that explains why and how there is persistent stereotyping regarding mothers' reduced performance capacity is benevolent

sexism, which is the seemingly positive component in ambivalent sexism theory (Glick and Fiske 1996). Although sexism is traditionally thought of as hostile in nature, ambivalent sexism theory suggests that the seemingly positive component—benevolence—fosters ideologies that women should be protected and revered (Glick and Fiske 1996). Such ideologies manifest through both verbal and non-verbal displays, including calling a woman "sweetie" or holding a door open for her to walk through. Empirical research demonstrates that benevolence is a driver of differential developmental or stretch opportunities for men and women in the workplace (see King et al. 2012). Specifically, King et al. (2012) revealed that women were less likely to receive negative feedback and experienced less challenging work experiences than men, suggesting that benevolent ideologies may limit peoples' beliefs in women's capabilities and women's opportunities to participate in challenging work.

Although empirical research on benevolent ideologies has largely been done among all women, it is highly likely that since motherhood exacerbates stereotypes of femininity, mothers are arguably more likely than non-mothers to be the victims of benevolent sexism. Thus, ideologies of protectionism toward mothers in the workplace may contribute to the maintenance of stereotypes of mothers' reduced performance capacity.

Lack of Dedication to Work

In addition to the stereotype that employed mothers have reduced competence or performance capacity, there is also the stereotype that mothers lack dedication to work. This is largely rooted in social role theory which categorizes men as breadwinners and women as homemakers or caregivers (Eagly 1987). Such social and cultural standards reinforce notions that women may not be fully committed to work (Ridgeway and Correll 2004). In fact, King (2008) demonstrated that although mothers report similar levels of dedication to work as fathers, supervisors evaluate mothers as less committed than fathers. Such ideologies are exacerbated by contemporary approaches to work (e.g., ideal worker norm) and parenting (e.g., intensive mothering).

The ideal worker norm (Kelly et al. 2010) reinforces the notion that employees should dedicate long hours and take little time off from work. Given that social standards lead us to expect mothers to excel in their roles as homemakers and caregivers, it makes it impossible for mothers to also fulfill expectations of the ideal worker. This predicament fuels the stereotype that mothers are not dedicated to work. Some organizations acknowledge the systems of advantage for workers without caregiving responsibilities, and have launched initiatives (e.g., flextime) to combat this issue (see Ryan and Kossek 2008).

However, as Allen (2001) suggested, the implementation of family-friendly benefits alone will not serve as a panacea to work-family conflict; it is also important to examine family-supportive organizational perceptions (FSOP; i.e.,

global perceptions of employees) that affect conflict and other key work outcomes including turnover, commitment, and satisfaction. Specifically, organizations that are low on FSOP have effectively established a climate wherein the ideal worker norm is likely highly pervasive, and therefore, make it challenging for employed mothers to fulfill coworkers', supervisors', or other personnel's expectations regardless of whether family-friendly benefits are available. Moreover, Wayne et al. (2013) suggested that affective commitment or emotional attachment derived from positive FSOP attitudes leads to positive outcomes, including reduced work-family conflict. Together, these findings suggest that both family-friendly benefits and associated employee perceptions may affect the work experiences of mothers. It is important to recognize how both benefits and employee perceptions affect expectations for, and likely question, employed mothers' dedication to work.

At the same time, contemporary parenting ideologies place increasing pressure on employed mothers in the family domain such that they must give their full time and attention to children. In fact, Parker and Wang (2013) reveal that today's mothers spend more time with their children than mothers did in the 1960s; today's mothers also spend double the time with their children compared to fathers. This prevailing notion of complete commitment to children or intensive mothering (Blair-Loy 2004; Hays 1996) is incongruous with employed mothers' ability to be fully committed to her work, thus reinforcing this stereotype. It is important to note that researchers argue that such assumptions are at the normative or cultural level and do not reflect reality (Ridgeway and Correll 2004), suggesting that such stereotypes may be largely inaccurate. However, such pernicious stereotypes that call into question mothers' dedication to work may lead both mothers and others to harbor negativity that may result in negative outcomes for employed mothers.

In summary, we suggest that social psychological theories explain two prevailing stereotypes of mothers in the workplace: reduced performance capacity and lack of dedication. In this chapter, we examine the prevalence of such stereotypes among mothers and non-mothers, explore the extent to which mothers' harbor such stereotypes and perceive their managers agree with such stereotypes, and discuss the implications of stereotyping on work-family conflict and enrichment.

Prevalence of Employed Mother Stereotypes

To explore the prevalence of stereotypes about employed mothers, we collected data from a sample of 680 professionally-employed women in the United States. We focused on women in the workplace as a means of understanding the degree of damaging consequences when women agree with the aforementioned stereotypes about employed mothers. At the time of data collection, 436 of the women were mothers and 244 reported that they did not have any children. The mothers had between 1 and 7 children; with 214 mothers reporting 2 children, 128 mothers reporting 1 child, and 67 mothers reporting 3 children. Almost all of the mothers (n = 324) still had at least one child living at home with them. The women ranged

in age from 21 to 70 years with the median age being between 40 and 41 years old. Most of them (n = 460) were married. Nearly half of the women (n = 293) had a male supervisor, about 200 of the women had a female supervisor, and 159 women said that they did not have a direct supervisor as these women were likely independent contractors and/or self-employed. The women worked in a large variety of industries with Education (15 %) being the most common, followed by Information Technology (8 %), Energy and Utilities (7 %), Legal Services (6 %), Non-Profit Charitable Organizations (6 %), and Management Consulting Services (5 %).

As a means of measuring agreement with stereotypes about employed mothers, we crafted five statements that are based on the stereotypes that employed mothers have reduced capacity to perform in their jobs and that they are less dedicated to their paid work. Note that the statements below are derived from research on stereotypes, and not grounded in empirical data. The following stereotype statements were used to measure the prevalence of the stereotypes:

1. Employed mothers are less committed to their work because they have children.
2. Employed mothers have more absences from work because they have children.
3. Employed mothers are preoccupied with their family life even while they are at work because they have children.
4. Employed mothers are less productive employees because they have children.
5. Employed mothers are less dependable employees because they have children.

Table 1 is a display of the level of agreement with these stereotypes among the employed women that we surveyed. Overall, we found that about 11 % of the women who responded to the survey agreed that employed women are less

Table 1 Prevalence of negative stereotypes of employed mother among employed women

Stereotype statements	Mothers			Non-mothers		
	Disagree (%)	Neutral (%)	Agree (%)	Disagree (%)	Neutral (%)	Agree (%)
Employed mothers are less committed to their work because they have children	85.5	5.8	8.8	74.9	11.1	14.0
Employed mothers have more absences from work because they have children	51.0	11.0	37.9	35.0	17.3	47.7
Employed mothers are preoccupied with their family life even while they are at work because they have children	69.2	14.5	16.3	59.1	24.4	16.5
Employed mothers are less productive employees because they have children	94.0	3.4	2.5	88.0	9.9	2.1
Employed mothers are less dependable employees because they have children	93.5	3.5	3.0	87.2	8.3	4.5

committed to their work because they have children, 40 % agreed that employed mothers have more absences from work because they have children, 16 % agreed that employed mothers are preoccupied with their family life even while they at work, 2 % agreed they that employed mothers are less productive employees, and 4 % agreed that employed mothers are less dependable employees. These data suggest that these stereotypes of employed mothers persist to some degree among employed women. In particular, a notable portion of these women recognize absenteeism as a stereotype associated with employed mothers.

Differences Between Mothers and Non-mothers

Based on ANOVA results (shown in Table 2) for the five stereotype statements, the non-mothers were more likely to be in agreement with each of the stereotypes. These significant differences suggest that mothers do not necessarily agree with the stereotypes about employed mothers, whereas women who do not have children are more likely to agree that employed mothers are less committed to their work, have more absences from work, are preoccupied with their family life while at work, are less productive employees, and are less dependable employees because they have children.

Table 2 ANOVA results to detect differences in agreement with stereotypes between mothers and non-mothers

		Sum of squares	df	Mean square	F
Employed mothers are less committed to their work because they have children	Between groups	17.216	1	17.216	16.421[***]
	Within groups	707.700	675	1.048	–
	Total	724.916	676	–	–
Employed mothers have more absences from work because they have children	Between groups	25.144	1	25.144	15.092[***]
	Within groups	1126.272	676	1.666	–
	Total	1151.416	677	–	–
Employed mothers are preoccupied with their family life even while they are at work because they have children	Between groups	13.719	1	13.719	10.977[***]
	Within groups	843.581	675	1.250	–
	Total	857.300	676	–	–
Employed mothers are less productive employees because they have children	Between groups	10.468	1	10.468	20.297[***]
	Within groups	348.137	675	0.516	–
	Total	358.606	676	–	–
Employed mothers are less dependable employees because they have children	Between groups	9.215	1	9.215	16.078[***]
	Within groups	386.281	674	0.573	–
	Total	395.496	675	–	–

[***]$p < 0.001$

Relating Employed Mother Stereotypes to Work-Family Outcomes

Regarding the consequences of agreement with these stereotypes, we considered the associations between agreement with the stereotype statements and work-family conflict and enrichment. Work-family conflict was measured using a 10-item scale from Netemeyer et al. (1996). The work-family conflict scale consisted of 10 items and had strong reliability (WIF: $\alpha = 0.91$; FIW: $\alpha = 0.88$) for this particular sample of women. Work-family enrichment was measured using 18 items from Carlson et al. (2006). The scale also had strong reliability (WFE: $\alpha = 0.94$; FWE: $\alpha = 0.92$) among the sample of women.

Unfortunately, as shown in Table 3, agreement with these stereotypical beliefs is significantly correlated with work-family outcomes. For instance, all five of the stereotype statements that were measured in this study were significantly, and positively, correlated with both directions of work-family conflict. This finding suggests that when women harbor negative stereotypes, they also report higher work-family conflict. Though this cross-sectional data does not indicate causality, it is interesting to ponder these variables in terms of cause and effect: Have women who struggled with work-family conflict decided that the stereotypes must be true? Or, is it that women who believe in the stereotypes then perceive that the work and family roles are in conflict? Do these associations reflect causal realities for mothers? Are they merely perceptions of causality for the non-mothers?

In a similar vein, all five of the stereotype statements were significantly and negatively related to both directions of work-family enrichment. This finding suggests that when women agree with the stereotypical statements, they also report less work-family enrichment. As with conflict, it is interesting to consider if these variables are causally related and whether enrichment lessens the agreement with stereotypes or if agreement with stereotypes lessens work-family enrichment.

Interestingly, when we consider the mothers and the non-mothers separately, the pattern of correlations between the stereotype statements and the work-family variables are different between the two groups of women. Mothers who agreed that employed mothers are less committed to their work also reported more WIF and FIW. These mothers reported less WFE and their beliefs were not related to their reports of FWE. However, non-mothers who agreed that employed mothers are less committed to their work reported more WIF and less FWE. Their beliefs about this stereotype were not related to their reports of FIW and WFE.

Mothers who agreed that employed mothers have more absences from work also reported higher WIF, higher FIW, less WFE, and less FWE. For non-mothers, agreement with this stereotype was only significantly related to less FWE. This finding for non-mothers could be evidence that they see this stereotype more as a fact and it has nothing to do with whether they are experiencing any conflict in their own roles.

Mothers who agreed that employed mothers are preoccupied with their family life even while they are at work reported higher WIF, higher FIW, lower WFE, and

Table 3 Correlations among stereotype statements, work-family conflict, and work-family enrichment

Stereotype statements	Entire sample of women				Mothers (n = 436)				Non-mothers (n = 244)			
	WIF	FIW	WFE	FWE	WIF	FIW	WFE	FWE	WIF	FIW	WFE	FWE
Employed mothers are less committed to their work because they have children	0.13**	0.18***	−0.14**	−0.16***	0.13*	0.29***	−0.14**	−0.08	0.16*	0.06	−0.10	−0.19**
Employed mothers have more absences from work because they have children	0.13**	0.20***	−0.14**	−0.21***	0.16**	0.29***	−0.12*	−0.15**	0.10	0.07	−0.13	−0.24**
Employed mothers are preoccupied with their family life even while they are at work because they have children	0.19***	0.27***	−0.18***	−0.20***	0.18***	0.33***	−0.15**	−0.14**	0.24***	0.19***	−0.18***	−0.21**
Employed mothers are less productive employees because they have children	0.17***	0.24***	−0.18***	−0.19***	0.17**	0.31***	−0.12*	−0.09	0.22***	0.18**	−0.20**	−0.21**
Employed mothers are less dependable employees because they have children	0.12**	0.21***	−0.17***	−0.20***	0.08	0.27**	−0.06	−0.08	0.19**	0.16*	−0.26**	−0.28**

* p < 0.05
** p < 0.01

lower FWE. Non-mothers who agreed that employed mothers are preoccupied reported similar work-family outcomes.

Mothers' agreement that employed mothers are less productive employees was positively correlated with their reports of WIF and FIW; and negatively related to WFE. Similarly, non-mothers' agreement with this stereotype was associated with more WIF, more FIW, less WFE, and less FWE.

Mothers' agreement with the stereotype that employed mothers are less dependable employees was only significantly, positively correlated with their report of FIW. On the other hand, non-mothers' who agreed with this stereotype reported higher WIF, higher FIW, less WFE, and less FWE.

Perceptions of Managers' Beliefs

We also asked the employed mothers about their perceptions of their managers' agreement with the stereotype statements. Employed mothers' responses ($N = 401–405$) to these statements about their managers are an estimate of whether the mothers feel that their managers support their roles as employed mothers. Employed mothers that reported that their managers agreed with the stereotype statements, also reported higher WIF and higher FIW. As shown in Table 4, a significant, positive correlation was found for each stereotype statement that the women attributed to their managers' beliefs. However, the mothers' perceptions of the managers' beliefs were not significantly related to their reports of either FWE or WFE. These correlations are consistent with the idea that manager support of combining work and family is related to work-family conflict for employed mothers. Unfortunately, these findings also suggest that even when mothers do not

Table 4 Correlations among perceptions of managers' beliefs in stereotypes, work-family conflict, and work-family enrichment

Stereotype statements	WIF	FIW	WFE	FWE
My manager expects me to be less committed to my work because I have children	0.15[**]	0.30[**]	0.00	−0.01
My manager expects me to have more absences from work because I have children	0.10[*]	0.32[**]	−0.02	0.00
My manager expects me to be preoccupied with my family life even while I am at work because I have children	0.14[**]	0.27[**]	−0.03	0.00
My manager expects me to be a less productive employee because I have children	0.15[**]	0.28[**]	−0.02	−0.02
My manager expects me to be a less dependable employee because I have children	0.23[**]	0.32[**]	−0.08	−0.01

[*]$p < 0.05$
[**]$p < 0.01$

perceive that their manager agrees with the negative stereotypes, their work-family enrichment is not affected.

Because the data are cross-sectional, we cannot assume any causal relationships between the variables. However, it is important to recognize that mothers who agreed with the stereotypical statements also reported that their managers' agreed with the stereotype statements. For each of the five stereotype statements that we examined, there was a significant correlation between the mothers' agreement with the stereotype and their perception that their manager also agreed with the stereotype. We surmise that these mothers could be projecting their own perceptions of employed mothers onto their managers. These perceptions that their managers endorse stereotypes of employed mothers are associated with the mothers' reports of work-family variables.

Another disturbing finding in this data is that mothers' perceptions of their manager's agreement with the stereotypes predict their response to the following item: "My manager does not assign me to work on important tasks and projects because I have children." Linear regression analysis results are presented in Table 5 and indicate that each of the stereotype statements regarding the managers is a significant predictor of the mother's perception that she is not getting important work and projects because she is an employed mother. These findings support the notion of the motherhood penalty (Correll et al. 2007), which many employed mothers become victims of, whether by conscious choice or not. The motherhood penalty includes less important work assignments, fewer work hours, and lower pay. Additionally, while mothers maintain employment, the motherhood penalty obstructs their upward mobility and opportunities for increasing responsibilities and work-related achievements.

Taken together, the findings support the idea that employed mothers who believe in negative stereotypes about employed mothers also believe that their managers hold these stereotypes, which predicts the employed mothers' perceptions of not being given the important work and projects. Essentially, the prevalence of negative stereotypes of employed mothers among mothers, themselves, is related to perceptions of less supportive managers and less important work assignments.

Table 5 Regression analysis results predicting "My manager does not assign me to work on important tasks and projects because I have children."

Stereotype statements	R^2
My manager expects me to be less committed to my work because I have children	0.49
My manager expects me to have more absences from work because I have children	0.30
My manager expects me to be preoccupied with my family life even while I am at work because I have children	0.43
My manager expects me to be a less productive employee because I have children	0.58
My manager expects me to be a less dependable employee because I have children	0.61

Managing Stereotypes of Employed Mothers

Our data suggest that the majority of women do not agree with negative stereotypes about employed mothers and their performance in the workplace. However, the data also show that the stereotypes exist to some degree and may be present in a given workplace. If we were to extrapolate our data to the entire population of women in the United States, we would see relative large numbers of women who endorse the stereotypes of employed mothers.

Given the reality that stereotypes of employed mothers include the ideas that they are hindered by reduced performance capacity and are less dedicated to their work than other employees, it is imperative to consider the consequences of the prevalence of such stereotypes in the workplace. Based on the data that we have collected and analyzed, we surmise that two critical consequences of negative stereotypes of employed mothers are that those mothers who agree with the stereotypes suffer from increased work-family conflict and decreased work-family enrichment. As a result, they have more difficulties juggling the multiple roles of motherhood and employment than mothers who may not endorse such ideologies or non-mothers who do not face such stereotypes. In addition, they do not reap the positive experiences and benefits that might spillover between their work and family roles. Ultimately, it appears that these mothers may be susceptible to self-fulfilling prophecies that suggest that employment and motherhood are incompatible.

Research has shown that women can reduce their susceptibility to the motherhood penalty in hiring and in the allocation of resources and opportunities in the workplace by expressing their devotion to their work (Aranda and Glick 2014) and their flexibility in the workplace (Botsford Morgan et al. 2013). However, we agree with Aranda and Glick (2014) that persuading women to express their devotion to work may undermine their authentic selves and may paint an inaccurate picture of who they really are. Therefore, we caution mothers against adopting such strategies unless it reflects their genuine beliefs. We advocate for identifying and eradicating agreement with employed mother stereotypes as an important aspect of helping mothers transition to employed motherhood. By combating such stereotypes, especially in the workplace, organizations can contribute to more successful transitions to employed motherhood. When negative stereotypes about employed mothers are addressed and debunked, employed mothers and their co-workers can start to base a mother's performance on her actions rather than on preconceived notions related to her parental status.

To manage the prevalence and consequences of negative stereotypes of employed mothers in the workplace, an assessment of the origin of such stereotypes is warranted. Many of the stereotypes are rooted in societal norms regarding women's traditional role as caregiver and men's traditional role as breadwinner. Beyond that, the stereotypes may also persist as a result of low family supportive organizational perceptions (FSOP; Allen 2001) or how "family-friendly" work accommodations are developed and implemented (Hampson 2013). Mothers are most likely to take advantage of such accommodations (Thompson et al. 1999),

which may also contribute to the stereotypes about employed mothers. One way to combat stereotypes of mothers is for organizations to be supportive of families. FSOP mediates the relationship between supervisor support and work-family conflict, which reinforces the importance of the perceptions in the overall work environment, in addition to the perceptions of the manager.

In eradicating the prevailing stereotypes in the workplace, attention needs to be brought to the existence of the stereotypes. Managers and co-workers need to understand the implications of harboring negative stereotypes of employed mothers and recognize a woman's struggles with work and family as simply that—her own individual circumstance at the time—not a representation of all employed mothers. Further, there is a need for employed mothers, themselves, to be empowered to identify their victories when not exemplifying the negative stereotypes and to recognize and advocate for their value beyond the motherhood penalty.

Future Research Opportunities

Our findings allow for initial discussion about the prevalence of negative stereotypes of employed mothers among employed women, both mothers and non-mothers. Our data can also offer initial ideas about how these stereotypes might be related to work-family outcomes, specifically work-family conflict and work-family enrichment among employed mothers. However, there are ample opportunities to extend this research to better explain the relationships among the variables that we examined, as well as other outcomes.

We propose that there is a need to investigate and understand the origin of negative stereotypes about employed mothers. Historically, mothers have been scarce in the United States workforce. It was not until World War II that more women began to remain in the workforce after giving birth to children. Since World War II, mothers have become the fastest growing demographic in the workforce (Cohany and Sok 2007; Rosenfeld 1996). It appears that even as mothers have become more common in the workforce, there are perceptions that it is difficult for them to simultaneously meet the demands of employment and motherhood within their life space. We propose that these lingering perceptions have fueled the modern stereotypes (i.e., reduced performance capacity and lack of dedication to work) that we address in this chapter. Research attention should be devoted to further exploring why these perceptions have lingered and how the stereotypes have perpetuated through our societal culture, organizational cultures, and family cultures.

Demographic Variables

We also recognize that stereotypes related to work and family integration among employed mothers may be primarily associated with women of a certain economic

status. The average woman who responded to our survey had earned at least a Bachelor's degree, was employed in a full-time salaried job position, and earned around $80,000 per year. Thus, our results and discussion are generally limited to women of higher socioeconomic position. We fully recognize that the stereotypes that we explored in this chapter may be more frequently attributed to women with this status.

Research suggests that low-wage mothers also deal with stereotypes in the workplace. However, the stereotypes that low-wage mothers face tend to be of a "personal irresponsibility" nature (Dodson 2013). For example, in July 2014, a mother in South Carolina allowed her 9-year-old daughter to play alone at a park while she worked her shift at a nearby fast food chain restaurant. Reportedly, the park was a 6 min walk from their home and a 7 min drive from the fast food restaurant where the mother was working. The child had a key to the house and a cell phone with her. Upon the discovery that the child had been left alone at the park, the mother was arrested and charged with unlawful conduct towards a child. This chain of events sparked an intense debate about whether the arrest should have happened or not. One side of the argument says that the mother did nothing wrong and that parents are too over protective. The other side of the argument says that it isn't safe to leave a 9-year-old girl along in a public park for hours at a time. But, at the root of this issue is that there is a mother who had run out of child care options, is working a low wage job, and is stereotyped as irresponsible despite her efforts to care and provide for her daughter by maintaining a job.

Many low-wage mothers tend to be in job positions that do not allow for high quality child care, a stay-at-home parent, or flexible work arrangements. This situation exacerbates the stereotypes that may be attributed to these mothers. As a result, there is a need to better understand how low-wage mothers are stereotyped and the effects that this may have on their families. In the case of the aforementioned 9-year-old girl, she was taken into custody by the Department of Social Services, despite there being no initial evidence that her mother was an irresponsible mom—just that she was a mom in a low wage job dealing with conflict between her work and family responsibilities.

While the popular discourse requires that organizations begin to identify and establish policies and practices that cater to employed mothers in professional positions; stereotypes of mothers who earn low wages may trigger less positive responses (Dodson 2013). Our hope is that continued research across socioeconomic statuses will result in fair and equitable treatment that also establishes more accommodations for low-wage earners who seek resources and assistance for balancing their work and family needs.

It is also necessary to extend the study of the prevalence of negative stereotypes of employed mothers to other demographics. Our data only captured the perceptions of employed women. A holistic understanding of this phenomenon and the prevalence of the stereotypes will require inquiry into the beliefs of others in the workplace—including fathers and other men who are not fathers. Given the role of societal norms in shaping the stereotypes of employed mothers, we suggest that other members of society, including unemployed men and women—especially

those who choose to be unemployed—also be included in future studies regarding the prevalence of stereotypes of employed mothers. It would be especially helpful to understand how these other society members' perceptions shape the beliefs of the employed mothers and their reports of work-family conflict and work-family enrichment.

Life and Career Stages

It is also conceivable that the life stage and/or the career stage of a mother may actually impact the stereotypes that are attributed to that particular mother. Given that the transition to motherhood is a very salient process as the mother undergoes physical changes that cue coworkers of her expectant status, research suggests that pregnant women experience greater interpersonal hostility than non-pregnant women (see Botsford Morgan et al. 2013; Hebl et al. 2007), reinforcing negative stereotypes of women making the transition to motherhood. However, we propose that it is plausible for stereotypes of mothers to shift over time, particularly as the age of her child(ren) increases. We do not purport that older children need less attention than younger children, but that over time the saliency of pregnancy diminishes and, therefore, the stereotypes attributed to the mother may wane.

Like pregnancy, which is temporal in nature and a dynamic stigma (Jones et al. in press), we suggest that stereotypes of mothers may fluctuate over time. To that end, we propose that future methodologies employ longitudinal research to understand the dynamic nature of motherhood beyond the initial transition from being a female employee to an employed mother. Moreover, our correlations suggest significant relationships between mothers' agreement with negative stereotypes of employed mothers, perceptions of supervisors' agreement with the stereotypes, work-family conflict, and work-family enrichment. However, with further exploration of these relationships to potentially identify causality, more answers can be given regarding how best to tackle stereotypes, combat the motherhood penalty, and improve work-family interactions. The required longitudinal research should, ideally, employ both qualitative and quantitative methods (see Kossek et al. 2011) to capture the subtleties and complexities of stereotypes and their effect on employed mothers over various life and career stages. A variation in data collection methods may also help to overcome some of the methodological challenges that accompany the study of sensitive topics, like stereotyping.

Stereotype Threat

Given the evidence that stereotypes about employed mothers do exist, continued consideration has to be given to how these stereotypes might affect employed mothers. While the employed mothers in our sample generally did not agree with

the stereotypes, there was evidence that agreement with the stereotypes could lead to negative outcomes for employed mothers. Accordingly, we think it is important for future research to be devoted to the notion of stereotype threat as it pertains to employed mothers. "…[S]tereotype threat refers to the predicament that exists when individuals perceive that their behavior could be interpreted through the lens of negative stereotypes about one of their social groups" (Greer 2011, p. 84). Stereotype threat has been associated with a variety of unwanted consequences regarding performance and achievement. However, most stereotype threat research has been focused on females and African-Americans in intellectual environments (for instance, Carr and Steele 2009; Steele and Aronson 1995).

It is certainly possible that employed mothers will also suffer decreased performance and achievement when plagued with stereotype threat. This is especially true given the possibility that when employed mothers encounter negative stereotypes of employed mothers, they may feel pressured to ensure that they do not exemplified the negative stereotypes (Greer 2011). As a result, they experience heightened anxiety and exert exceptional energy to suppressing stereotypes about their social group (Carr and Steele 2009). By expanding the study of stereotype threat as it applies to employed mothers, we can better understand how the prevalence of such stereotypes may impair employed mothers' achievement and performance.

Finally, additional outcomes of harboring negative stereotypes of employed mothers should also be considered in future research. We suggest the researchers turn their attention to outcomes including mothers' turnover intentions, job satisfaction, and job performance. Ultimately, outcomes such as these have personal implications as well as organizational implications. Turnover intentions, job satisfaction, and job performance are directly related to organizational effectiveness and linking negative stereotypes of employed mothers to these outcomes will create additional awareness and urgency around addressing the stereotypes. Such awareness and urgency will help facilitate smoother transitions to employed motherhood.

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Lactation and the Working Woman: Understanding the Role of Organizational Factors, Lactation Support, and Legal Policy in Promoting Breastfeeding Success

Valentina Bruk-Lee, Deborah Albert and Kerri L. Stone

Abstract This chapter explores the organizational factors shown to impact a woman's ability to successfully combine breastfeeding and work. As such, we explore the role of support for breastfeeding at work, flexible work arrangements, organizational policies, and other work characteristics on women's work attitudes and well-being, as well as on, breastfeeding initiation and/or duration. The chapter discusses interventions to overcome organizational barriers, with a focus on employer education efforts and workplace lactation programs, both of which promote breastfeeding continuation upon return to work while resulting in numerous corporate benefits. Last, we conclude with a timely overview and interpretation of the complex legal landscape surrounding this critical topic in the United States, including a discussion of recent changes in legislation intended to afford the lactating working mother additional protection in the American workplace.

Keywords Workplace lactation · Breast milk pump · Breast milk expression · Nursing at work · Workplace breastfeeding · Breastfeeding support

New mothers are faced with a myriad of stressful and demanding challenges regarding childcare and return to work decisions. Among these is the critically important choice to initiate breastfeeding and to sustain it upon rejoining the workforce. Increased public health campaigns have attempted to raise awareness of the importance and benefits of choosing breast milk and of the common traps that women often face in successfully breastfeeding. While the "breast is best" message has had widespread promotion, only 18.8 % of the U.S. population meets the recommendation to breastfeed exclusively for the first six months of infant life (U.S. Centers for Disease Control and Prevention 2014). The issue is complex, as it

V. Bruk-Lee (✉) · K.L. Stone
Florida International University, Miami, FL, USA
e-mail: vblee@fiu.edu

D. Albert
UC Davis Medical Center, Sacramento, CA, USA

spans beyond the boundaries of work and is affected by a variety of factors ranging from issues of public health relevance to legal rights and protections offered to women in our society.

Decade-long national goals promoted by the Healthy People 2020 initiative specifically highlight the need to both increase the proportion of mothers who breastfeed their babies and improve the duration and quality of breastfeeding. This goal places special emphasis on the influence of the social and physical environment, such as the workplace, on breastfeeding success (U.S. Department of Health and Human Services 2014). In recent years, the Surgeon General, the Centers for Disease Control and Prevention (CDC), and the Office on Women's Health (OWH) called specific attention to the promotion of breastfeeding and delineated the employment related restrictions that created barriers in supporting this initiative. While the 2014 CDC Breastfeeding Report Card indicates a general trend of rising breastfeeding rates, the data indicates a sharp decline between indicators of exclusive breastfeeding at three and six months.

A large body of research supports the medical, neurodevelopment, and psychological benefits of breastfeeding for infants and mothers (for a comprehensive summary see Ip et al. 2007). For example, studies have shown that breastfed infants have a reduced incidence and severity of several diseases, such as diarrhea, otitis media, respiratory tract infections, urinary tract infections, bacterial meningitis, bacteremia, necrotizing enterocolitis, insulin dependent diabetes, and lymphoma (Leon-Cava et al. 2002). Breastfeeding also reduces the chance for sudden infant death syndrome and improves chances for dental health (Palmer 1998). Indeed, the benefits of breastfeeding to the child may be said to be both nutritive and immunological. Maternal health benefits are also impressive, including lowered risk of ovarian cancer, reduced menstrual blood loss, weight loss, and enhanced self-esteem and confidence (Leon-Cava et al. 2002). Further, the incidence rate of breast cancer can be reduced in developed countries by increasing breastfeeding duration, although the exact mechanism by which it serves to protect maternal health is unknown (see Möller et al. 2002). Cost savings of $13 billion dollars per year have been estimated across as many as 10 pediatric illnesses if 90 % of U.S. families complied with the recommended six months of exclusive breastfeeding (Bartick and Reinhold 2010). This same study estimated as many as 911 preventable infant/child deaths per year associated with the increased risk for sudden infant death syndrome, necrotizing enterocolitis, and lower respiratory tract infection posed by suboptimal breastfeeding rates.

Given the many cited benefits of breast milk, what factors may be influencing the choice to initiate and maintain breastfeeding among working U.S. women? While a thorough answer to this question requires an ethnographic examination of cultural and societal influences on breastfeeding norms, focal to this chapter is the notion that employment outside of the home is a significant contributor to the low percentage of women following the recommendations of the American Academy of Pediatrics (AAP), the World Health Organization (WHO), and the CDC regarding breastfeeding milestones in the United States. This is a critically important factor given that over half of the women with infants less than 12 months of age are active

members of the labor force (U.S. Department of Labor, Bureau of Labor Statistics 2007).

While the decision to initiate breastfeeding may be less dependent on maternal employment and more so on the length of maternal leave before returning to work postpartum (Calnen 2007; Nobel & The ALSPAC Study Team 2001), studies have consistently shown a negative relationship between post-partum maternal employment and breastfeeding duration across various ethnic, education, and age groups (Johnston and Esposito 2007; Ong et al. 2005; Ryan et al. 2006), with lower rates for women working longer hours (Gielen et al. 1991). Indeed, mothers working full-time are 25 % less likely to breastfeed six months after birth than non-working mothers (Ryan et al. 2006). With limited protections under the Family Medical Leave Act, the majority of women are returning to employment after an average of 12 weeks of maternity leave, coinciding with the critical period of breastfeeding decline illustrated by the CDC Breastfeeding Report Card. Further, while almost every state now has legislature protecting a mother's right to breastfeed in public, less than half had laws regarding breastfeeding in the workplace prior to the signing of the Healthcare Reform Bill (National Conference of State Legislatures 2014). As a result, combining work and breastfeeding is a salient issue for organizations and the modern day working mother.

This chapter discusses the organizational factors that impact women attempting to successfully combine breastfeeding and work, as well as the theoretical backdrops against which these issues can be further examined. The chapter also addresses issues of workplace accommodations, with a special emphasis on workplace lactation programs and their many benefits to both organizations and lactating working women. Last, we conclude with a timely overview and interpretation of the legal landscape affecting this critical topic. In this chapter, the term *breastfeeding at work* refers broadly to the act of expressing or pumping breast milk at work to feed an infant at a later time, as well as to the actual act of feeding the infant directly from the breast during the workday. The vast majority of research cited, however, is primarily focused on pumping, given the low base rate of workplaces with babies at work policies (more on this in a later section).

The Lactating Woman and the Organization

The transition back to work after birth is often an emotionally taxing period for new mothers. Feelings of guilt, worry, and anxiety are commonly prompted by issues of childcare planning and separation from the infant. However, individual differences among women influence their ability to cope with this transition and its challenges. Indeed, DeMeis et al. (1986) concluded that a woman's preference for work was a more salient factor in influencing her feelings about the separation from her child than her actual employment status. Past experience with breastfeeding and the desire to do so are also critical (see Johnston and Esposito 2007) in aiding success. Nonetheless, the lactating woman determined to maintain the breastfeeding

relationship with her infant is faced with additional planning and, depending on her work, may encounter a variety of external obstacles to goal attainment.

Workplace support for breastfeeding has received growing attention as a means of ameliorating the already challenging task of balancing work with milk expression (Rojjanasrirat 2004). Greene and Olson (2008) developed a measure to assess perceptions of emotional and instrumental support by the organization and the people in it. In this regard, support for breastfeeding at work extends beyond having a physical space to express breast milk, which can be offered by means of compliance with company or legal mandates, but with little socio-emotional support behind it.

Manager and Coworker Support for Breastfeeding at Work

Current research has sought to explore the role that workplace support for breastfeeding by supervisors and/or coworkers could have on breastfeeding duration, the psychological well-being of the lactating woman, and outcomes of organizational relevance. In a two time wave study of over 300 working breastfeeding women in the U.S., support by supervisors/coworkers was significantly related to a variety of outcomes, including burnout, post natal depression, work-family conflict, self-rated performance, organizational commitment, and job satisfaction (Bruk-Lee and Buxo 2013). Evidence from this research also suggests that support for breastfeeding by others at work can have a unique effect on women's levels of burnout and post natal depression that cannot be accounted for by post partum material and emotional support provided by others in the household. Similarly, Miller et al. (1996) found that the support of the attending physician was a major factor contributing to residents' breastfeeding success.

However, a large percentage of companies continue to lack a formal breastfeeding policy and data suggests that a majority of managers showed mixed feelings about the need for one in the workplace (Chow et al. 2011). Employers who knew of other organizations that supported breastfeeding were more likely to report positive attitudes towards it, although only 20 % believed that human milk provided health benefits that formula could not (Bridges et al. 1997). Overall, women have consistently reported that their managers serve as organizational constraints in their ability to pump breast milk at work (see Thompson and Bell 1997; Witters-Green 2003) and evidence points to a relationship with breastfeeding duration (Tsai 2013). Data from the national Infant Feeding Practice Study II also indicated that a lack of supervisory support for breastfeeding at work significantly raised the likelihood of weaning from exclusive breastfeeding during the first six months of the infant's life. Consistent with these findings, Bruk-Lee and Buxo (2013) reported that of the women who reported weaning, only 6 % of women indicated that their healthcare provider influenced them in some way to stop expressing milk, while 30 % pointed to their employer or supervisor as the reason for doing so.

Findings also suggest that childless women perceive lactation friendly policies less fairly than do other working groups (Seijts 2004), which could further alienate the breastfeeding mother and reduce the buffering effects of a supportive work environment. While breastfeeding accommodations are reasonable in cost, Zinn (2000) stated that "coworkers may be as difficult as the employer to convince about the importance of breastfeeding and the need to support the mother" (p. 218). The increased pressure from coworkers for the returning mother to carry her weight combined with her desire to pass "unnoticed" after having taken maternity leave benefits makes the new mother particularly vulnerable to skipping pumping breaks, which are so essential in maintaining milk supply. However, women who have combined work and breastfeeding are essential in supporting new mothers to find ways in which they can cope with organizational barriers, balance their work/life demands, and promote acceptance for workplace lactation. Findings suggest that coworkers' attitudes towards breastfeeding are typically more favorable for those who have been exposed to a breastfeeding or pumping mother at work (Suyes et al. 2008).

Issues of Maternity Leave, Work, and Space

Compelling research indicates that flexible or part-time work and longer maternity leave support better breastfeeding rates for working mothers. Hence, organizational policies and benefits can play a significant role in workplace lactation and serve as either facilitators or hindrances. Haider et al. (2003) found that work requirements greater than or equal to 32 h per week reduced breastfeeding by 3.1 % compared to nonworking mothers. Among female physicians, shorter maternity leave and full time employment were associated with decreased breastfeeding duration (Authur et al. 2003). Similar conclusions were reached from a nationwide study of 2431 mothers pointing to the higher risk of breastfeeding cessation for women returning to work at 12 weeks or earlier and for those working full-time (Lindberg 1996). Moreover, each week of additional maternity leave has been found to increase breastfeeding duration by almost half a week, with the lowest breastfeeding duration found among women returning to work in the first 10 weeks after delivery (Roe et al. 1999). More recent research on the reconciliation of work and breastfeeding points to parental leave that exceeds six weeks as a significant contributor to breastfeeding continuation (Guendelman et al. 2009). This is a particularly concerning fact for working women in the U.S., which is cited to be the only industrialized nation without a national policy for paid maternity leave (Heymann et al. 2007). Due to recent economic pressures, women have returned to work sooner, putting low income women at an even higher risk for early weaning. In a recent opinion essay regarding the role of paid maternity leave and breastfeeding, Calnen (2007) stated that "the toll that families will have to pay for [the separation of mother and child during first several months after delivery] in the years to come has yet to be calculated" (p. 42).

Factors regarding the characteristics of work can also affect a mother's ability to express breast milk (Jacknowitz 2008). Alternative work arrangements, including part-time work and flextime, reduce the amount of time that the mother/infant pair is separated and support breastfeeding goals. For example, control over one's work schedule is advantageous in allowing women discretion over the time based demands of pumping. Indeed, flexible break options typically facilitate workplace lactation efforts which, on average, require approximately one hour total spread over several breast milk expression periods (Slusser et al. 2002). Recent findings showed that 37 % of women requested permission prior to pumping and that 13 % reported at least sometimes being denied a pumping break (Bruk-Lee and Buxo 2013). While women in the professional ranks are more likely to have access to greater privacy at work and autonomy, their increased work demands also pose unique challenges to this group (Brown et al. 2001). Nonetheless, salaried women are more likely to express breast milk at work than hourly paid mothers (Ortiz et al. 2004). For some occupations, such as school teachers, the nature of the work creates impediments that interfere with appropriate pumping breaks. Military women also cite temporary duty assignments, military obligations, and military rank as leading issues impacting breastfeeding success (Stevens and Janke 2003).

Additional physical constraints of work are commonly cited by lactating working women. Lacking a private suitable place to pump and store breast milk is commonly acknowledged. Thompson and Bell (1997) noted that low-income mothers who qualified for the special supplemental nutrition program for women, infants, and children (WIC) expressed concerns about their boss, time to pump, privacy, and ability to store their milk at the job. Too often, women are forced to use a bathroom, storage space, or their car in lieu of an adequate private space to breastfeed or pump. With recent changes to the Fair Labor Standards Act, qualifying employers are tasked with providing a dedicated private functional lactation space. However, data from focus groups reveal that some employers consider this type of requirement to be too taxing on their already limited space or simply consider the investment too costly (Brown et al. 2001). The need for a dedicated lactation space is not only an issue of privacy and comfort, but one of hygiene as well.

Work Family Balance and Stress Based Perspectives on Workplace Lactation

Research on workplace lactation has primarily focused on evaluating the effectiveness of programs on impacting outcomes of interest, with an emphasis, of course, on breastfeeding initiation and duration. Much of the research, however, has been atheoretical and driven by the need to isolate correlates, antecedents and consequences associated with breastfeeding at work. While this is a necessary start in exploring the relevance of breastfeeding in relation to the workplace, there are

various theoretical frameworks that can be used to further advance knowledge in a more nuanced way.

One such framework is based on the concept of work-family balance. Clearly, the demands placed on the new mother returning to work are many and span both the family and work spheres. Achieving a state of work-family balance upon transitioning back to work may seem like a daunting goal for many women and one that is constantly redefined based on the unique challenges of motherhood and employment at different stages. In fact, women often struggle with reconciling the idea of being a "good mother" with also being a "good employee" and are commonly left with the feeling that they cannot be both. In essence, then, what is work-family balance? The issue of balance can be traced to the principles of role theory (Katz and Kahn 1978), from which the concept of role conflict, defined as the conflicting demands and expectations placed on a person's work role, is expanded to spheres of work and family. Specifically, Greenhaus and Beutell (1985) referred to work-family conflict as "a form of interrole conflict in which the role pressures from the work and family domains are mutually incompatible in some respect" (p. 77). However, a more holistic look at work-family balance also considers the possibility for work-family positive facilitation in which the experiences and skills gained in one of the two domains aids functioning in the other (e.g., Grzywacz and Marks 2000). Early linking mechanisms have been proposed to help explain the relationships between various domains of work and family life (see Edwards and Rothbard 2000). Among these, for example, is the notion that spillover from one sphere to the other can happen for both the losses and gains associated with each role. In this regard, when considering the balancing act of the working lactating woman, both the stressors encountered in these roles and, perhaps, the "reaffirmation for the [lactating working] mother of the quality of her parenting" (Corbett-Dick and Bezek 1997, p. 13) can negatively or positively influence her sense of balance between work and family life.

Despite the many obvious avenues for research supported by using a work-family balance framework, few have drawn on existing related theories. Among these, Cardenas and Major (2005) expanded on the obstacles and organizational solutions available to address the needs of breastfeeding women at work by identifying time-based, strain-based, and behavior-based conflicts experienced by women attempting to continue breastfeeding upon their return to employment. In response, several workplace interventions were identified, which were aimed at addressing the various sources of work-family conflict, including lactation programs, support systems, flexible work arrangements, and onsite/subsidized child care options. More recent research also evaluated the role of workplace support for breastfeeding on breastfeeding goal intentions and duration using a work-family framework. In particular, the researchers reasoned that the time and behavior based demands of breastfeeding at work would compete with work-related demands and expectations; however, the availability of resources such as support and accepting workplace norms could promote balance between the roles (Spitzmueller et al. 2015).

A second and equally promising avenue for theory based research is tied more specifically to the notion of stress. Rojjanasrirat (2004) notes that workplace stress serves as a major obstacle to successful continued breastfeeding. In some cases, stress can interference with proper milk let-down, the process whereby oxytocin triggers the flow of breast milk, hindering the ability to pump at work. For these moms, it is widely recommended that they condition the let-down reflex by focusing on reminders of the baby, using visualization, and engaging in relaxation strategies. These recommendations can prove challenging for women pumping in inadequate spaces, at risk for interruptions, or under heavy workloads.

As cited earlier, issues of workplace support and organizational constraints can interfere with goal attainment for women hoping to reach recommended breast-feeding milestones. As such, these serve as conditions of the work environment that are commonly appraised by women as threats to their well-being, thus consistent with a transactional view of stress (e.g., Lazarus 1991). Under such a view, the breastfeeding mother judges her demands to exceed her available resources, highlighting an incompatibility between her work and breastfeeding that triggers and promotes the stress process. The strain reaction elicited by the experienced workplace stressor can be emotional (e.g., guilt), physical (e.g., engorgement due to skipped pumping sessions), or psychological (e.g., depression) in nature and can be immediate or experienced over a long term period.

The emotion-centered model of job stress (Spector 1998) presents an ideal framework from which to start theorizing about issues of workplace lactation. The model assumes a directional flow in which perceived stressors lead to emotional reactions that terminate in strains. Hence, the relationship between stressors and experienced strains is indirectly channeled through the experience of the emotional states induced. For women trying to pump during the workday, the experience can be highly emotional. For many, feelings of worry and anxiety are induced by a preoccupation with the amount of breast milk that her body is able to produce. Shame and embarrassment have also been cited with the experience (Bentovim 2002), particularly in unsupportive workplaces. Hence the centrality of emotions is relevant here.

The emotion-centered model of stress also accounts for individual differences and characteristics that may conditionally influence the stress process. While it has been applied in a variety of contexts (see Spector and Bruk-Lee 2008), an adapted model is recommended as a starting point from which we can begin to explore the complex processes by which work can impact a lactating woman's decision to continue breastfeeding, and her well-being, job attitudes and work behaviors (see Fig. 4.3.1).

As can be seen, the working breastfeeding woman may perceive elements of her work or the act of breastfeeding/pumping at work as stressful. These factors can include the workload, constraints of the work environment, and the demands of expressing breast-milk, among many others. These stressors bring about a variety of strains affecting the working woman (e.g., burnout, depression, work-family conflict, breastfeeding cessation, and engorgement) and the organization (e.g., commitment, performance, withdrawal, and job attitudes) which are, at least in part,
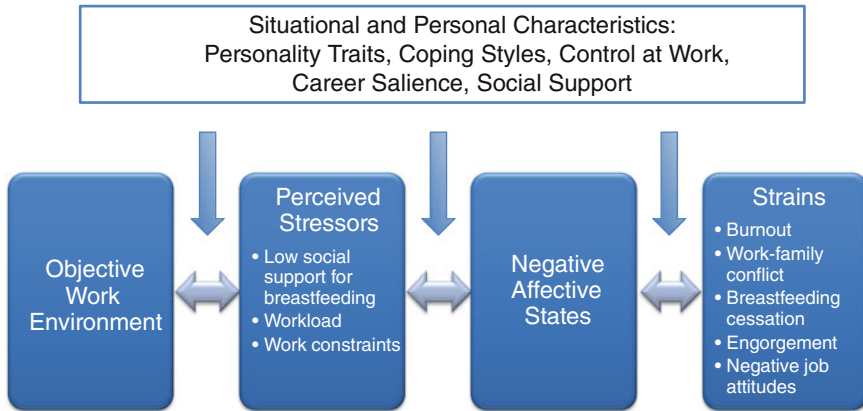
Fig. 4.3.1 Using an emotion-centered model of job stress in the study of workplace lactation

mediated through negative emotional states. However, these relationships can also be affected by the woman's coping strategies, control at work, and personality characteristics such as trait anxiety and core self-evaluation. Broadly speaking, women using problem-focused coping strategies, having more control over the specific workplace stressor, displaying stronger core self-evaluations, or reporting lower levels of trait anxiety are expected to experience weaker resulting strains. A large body of literature supports the importance of these variables in the stress process (e.g., Kammeyer-Mueller et al. 2009; Karasek 1979; Lazarus and Folkman 1984; Spielberger 1979). Further, while workplace support has been widely treated as a buffer in the stress literature, such that, for example, it ameliorates the impact of job stressors on well-being (e.g., Frese 1999), it is also possible that the *lack* of support per se acts as the perceived stressor. Such a model also supports testing the differential impact and role of socio-emotional and instrumental workplace lactation support (e.g., lactation rooms and education) on the stress process experienced by breastfeeding women.

Interventions to Help Women Overcome Barriers

Due to the many economic pressures plaguing today's single-earning families, the rising number of dual earning households, and women out-earning their husbands, women at work are reluctant to ask for additional reasonable accommodations from their employers to support breastfeeding. This notion is further supported by prior research indicating that family-friendly policies may be underutilized due to employee concerns regarding status (Glass 2000). Recently, the Society for Human Resource Management (2009) determined that one in four companies provided accommodation for breastfeeding.

The term "corporate lactation" barely came to fruition in the 1980s and despite the growing number of women in the workforce today, corporate lactation programs remain largely uncharted territory. Yet, mass media campaigns and federal mandates and laws, as well as the 2011 Surgeon General's "Call to Action" (U.S. Department of Health and Human Services 2011) to support breastfeeding, have raised increased awareness of workplace lactation issues. Within the context of work, the Call to Action enlisted the following targeted goals:

- "Work toward establishing paid maternity leave for all employed mothers" (pg. 50).
- "Ensure that employers establish and maintain comprehensive, high-quality lactation support programs for their employees" (p. 51).
- "Expand the use of programs in the workplace that allow lactating mothers to have direct access to their babies" (p. 52).
- "Ensure that all child care providers accommodate the needs of breastfeeding mothers and infants" (p. 53).

These four action areas are intended to increase the quality of life for working mothers. Indeed, according to the International Labour Organization (2012), "One of the five essential elements of maternity protection is enabling mothers to continue breastfeeding upon returning to work" (p. 2). Clearly, a supportive work environment is a key to success for women trying to balance the transition to work, challenges of motherhood, and stress of maintaining an adequate milk supply. Although factors such as the employee's healthcare support, maternity care, and home and societal conditions are very important (Johnson and Esposito 2007), these are outside of the control of the workplace.

Educating Organizations on the Benefits of Workplace Lactation Programs

While it is true that many employers lack an understanding of the importance of supporting the lactating woman or the impact that workplace policies can have on the long term success of the breastfeeding relationship between mother and child, findings also suggest that employer/employee education regarding the benefits of breastfeeding at work can help to increase the promotion and support of workplace lactation programs (Seijts and Yip 2008).

In this vein, the Health Resources and Services Administration unleashed a comprehensive national project called *The Business Case for Breastfeeding* (U.S. Department of Health and Human Services 2008). The resource kit includes colored pamphlets featuring working women in a variety of job settings and was specifically developed with American businesses in mind. The compelling argument presented is one that organizations could identify with, emphasizing the business benefits and bottom line impact of supporting breastfeeding. Despite the fundamental premise

that breastfeeding is best, the education focuses on showing businesses that workplace lactation support is a win-win proposition. Previously, breastfeeding education focused completely on the health benefits to the child and mother, however, *The Business Case for Breastfeeding* presents evidence to show that workplace lactation support lowers healthcare costs (U.S. Department of Health and Human Services 2008; Cohen et al. 1995), reduces absenteeism (Cohen et al. 1995), retains valuable employees (Cohen et al. 1995; Ortiz et al. 2004), creates positive public relations and loyal employees (Cohen et al. 2002), and helps the company follow legislative mandates (Slavit 2009). Additionally, results from three large scale organizational case studies show that breastfeeding mothers and babies save $240,000 annually in healthcare expenses, which has a compelling organizational impact (Slavit 2009).

As part of *The Business Case for Breastfeeding* initiative, a national program was conducted to train more than 3000 educators and health providers on how to use the available resources with businesses in local communities. However, within a very short period of time, it became apparent that a top-down approach was also needed in order to secure commitment from top level management, who could in turn, help to shape a corporate climate in support for breastfeeding at work. Indeed the promotion and sustainability of family-friendly organizations starts with positive and supportive leadership (see Hammer et al. 2011). For example, the University of California system has a strong policy to support nursing women in all of their 10 college campuses, five medical centers, three national labs, and many other medical and educational locations (see exhibit 4.3.1). The system further provides a President's Award for Lactation Accommodation to the best program within the system. Having a policy at the system level has a strong impact as it assures employees that these programs will not fall apart with changes in personnel.

Workplace Lactation Programs: Breastfeeding Success and Key Components

Breastfeeding duration rates for mothers employed in organizations with formal lactation programs have been found to be equivalent to breastfeeding duration rates in non-working mothers (Cohen and Mrtek 1994). Similarly, attendance at breastfeeding support groups encourages goal-setting and longer breastfeeding duration (Chezen and Friezen 1999). Some lactation programs have also emphasized the critical role of the father in influencing feeding choices and encouraging the mother. Cohen et al. (2002) studied the effectiveness of a paternal lactation program, which provided lactation counseling for the father and partner, and breast pumps for the partner to use at home or work. Not only did the percentage of men choosing to participate in the program increased across the years, but their partners (most of whom were employed) continued to breastfeed at six months after birth and displayed similar breastfeeding rates to the organization's working mothers.

> Lactation consultants, flexible lactation support policies and a collaborative support network help the award-winning Breastfeeding Support Program at the University of California, Davis to offer 48 pumping rooms across the university's central campus and a nearby Sacramento health campus that is home to UC Davis Medical Center.
>
> Lactation consultants play a central role in supporting pump room users at both campuses. On the central campus in Davis, a staff lactation consultant leads classes, runs support groups and consults with mothers who have breastfeeding concerns. At the Sacramento campus, a team of consultants provides prenatal classes, a weekly breastfeeding support group and one-on-one consultations with employees to navigate pumping and feeding challenges.
>
> An online registration process connects employees at both campuses to the consultants, a list of pumping locations and a roster of resources and benefits available through various university work-life balance programs.
>
> A proactive, flexible support program helps make breastfeeding convenient and sustainable from a time and productivity standpoint. Pumping stations are incorporated into plans for new construction and the university allows office, closet and restroom space in existing buildings to be converted into exclusive pumping areas as well. An institutional policy aims to limit the walk between a mother's work station and a nearby pumping station to no more than five minutes.
>
> The program employs a "takes a village" philosophy to cultivate support and resources from several arenas across the university. On the Davis campus a student housing office helps to provide furniture, a Women's Research Center hosts educational classes and members of a Venture Club purchase hospital-grade pumps. Lactation support on the Sacramento campus program combines efforts from several departments including human resources, environmental services, volunteer services and the lactation program for patients.
>
> The UC Davis Breastfeeding Support Program will be featured in an upcoming "Business Case for Breastfeeding" special University and Schools publication through the U.S. Department of Health and Human Service's Office on Women's Health.

Exhibit 4.3.1 Making Breastfeeding Work at UC Davis

These findings suggest that workplace lactation programs span gender roles and with some modification can benefit all employees. The predictive success of a variety of lactation program components has also received attention. Specifically, Balkam et al. (2011) focused on the availability of prenatal breastfeeding classes, telephone support, return to work consultation, and access to lactation rooms. Both the number of services in which women participated and having a return to work consultation to discuss issues related to maintaining breastfeeding at work predicted breastfeeding duration at six months after birth.

While it is most common for women to express breast milk at work for later use, feeding the infant directly from the breast increases and reinforces bonding between the pair, supports neurological and psychological development of the baby, and supports duration of breastfeeding. Indeed, patterns of mother-child bonding may be influenced by physiological mechanisms triggered by the act of breastfeeding

(see Strathearn et al. 2009). Therefore, babies-at-work programs can be a beneficial in select work settings. For example, employees who work for daycare centers, small offices, and child friendly environments could potentially arrange this option. At this time, however, more research is needed on their effectiveness and strategies for proper implementation.

Characteristics of the Workplace Lactation Space

Basic lactation space requirements include a private non-bathroom room with a door that locks, a table, chair, and electrical outlet. However, employers can go beyond the basics and provide a sink, refrigerator, natural lighting, breast pump, and lactation consultant support. The physical location must be conveniently located to maximize its use, as remote lactation rooms would present additional time management challenges to planning break times. The UC Davis case study (see exhibit 4.3.1) describes a "5-minute rule" in which lactation spaces are strategically placed to not exceed a five minute walking distance from the employee's primary place of work. In this exemplary effort, every new building has a pump room included in its blueprint.

Although the actual breast pump is hardly addressed in worksite lactation programs, the functionality of the breast pump becomes a vital topic when a mother is absent from her baby for 20–50 h per week, as longer periods of separation can influence breastfeeding success. Most lactation consultants would agree that multi-user pumps, sometimes referred to as hospital grade pumps, are more effective than consumer pumps at emptying the breast (Meier et al. 2008). The Affordable Care Act (ACA) requires most health insurances to cover the expenses associated with the use of a breast pump, which brings the need for breast pump usage and accessibility to the forefront in the American health industry. However, this has also caused the insurance and Durable Medical Equipment (DME) industry to respond with poorer pump options. Indeed, a report from the National Women's Law Center (2015) concludes that adequate support and equipment are often inaccessible due to cumbersome administrative barriers posed by some insurance companies. Further, insurance coverage can be limited to the use of manual pumps, an often ineffective option for working mothers. The report delineates additional barriers to receiving the coverage intended by the ACA to provide comprehensive lactation support, including access to equipment.

The Legal Landscape of Workplace Lactation

The most accurate thing that can be said about the protected status of employees who wish to express breast milk in the workplace in 2014 is that it is very much in flux, though a longstanding tide against legal protection seems to be turning. With the passage of key laws and new interpretations of older laws on both the state and

federal levels, the idea that protection can exist is becoming more widely accepted. Challenges to plaintiffs, however, in the form of limitations of these laws' language and interpretations, persist.

Federal Laws and Claims

There are various federal laws that afford employees certain rights that may touch upon breastfeeding, but a close analysis of each statute as a vehicle for recourse and its interpretation by the courts reveals sharp limitations on the protections afforded. A brief listing of these follows:

1. *Title VII of the Civil Rights Act of* 1964 protects employees from workplace discrimination and harassment on the basis of sex. *The Pregnancy Discrimination Act of 1978* (PDA) amended Title VII to specify that the phrase "because of sex" "include[s]… because of… pregnancy, childbirth, or related medical conditions," and to ensure that "women affected by pregnancy, childbirth, or related medical conditions shall be treated the same [as all other employees] for all employment-related purposes". The PDA does not mandate reasonable accommodations for pregnancy or for lactation.

2. *The Americans with Disabilities Act of* 1990 (ADA) prohibits workplace discrimination against employees because of their status as "disabled" within the meaning of the Act and mandates the affording of reasonable accommodations to such employees.

3. *The Family Medical Leave Act* (FMLA) mandates that covered male and female workers receive up to twelve weeks of unpaid leave within one year after major life events such as the birth or adoption of a baby, serious health conditions which render an employee unable to work, and situations in which an employee needs to be a caretaker for a family member with a serious health condition (Family and Medical Leave Act, 29 U.S.C. § 2612 2013). While this law may be useful for breastfeeding mothers who are covered by the statute and are able to take unpaid leave, once they return to work, the FMLA offers them no protection with respect to any requests to express breast milk at the workplace.

4. *The Patient Protection and the Affordable Care Act* of 2010 (PPACA), which amends Sect. 7 of the Fair Labor Standards Act (FLSA), mandates that an employer provide (1) "a reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child's birth each time such employee has need to express the milk"; and (2) "a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk" (Patient Protection and Affordable Care Act, 29 U.S.C. § 207(r)(1)-(3) 2013). Although the space provided need not be dedicated exclusively for this purpose, it must be available upon demand. The Act explicitly states that employers are not required to compensate employees for the time they spend expressing breast milk, although to the extent that breaks are compensated for all employees, a lactating woman making use of one should be treated no

differently than anyone else (Patient Protection and Affordable Care Act, 29 U.S.C. § 207(r)(1)-(3) 2013).

However, the PPACA has somewhat limited applicability (Zech 2013). In order to invoke its protections, an employee must be a nonexempt employee under the FLSA (Fair Labor Standards Act, 29 U.S.C. §213 2004); Reasonable Break Time for Nursing Mothers 2010). If, for example, a woman works for an employer with fewer than fifty employees, the employer will be exempt from compliance to the extent that compliance would confer an undue hardship on it. Further, if a woman's job is considered managerial, executive, or professional in nature, among other categories, she may be an exempt employee not covered by the Act.

Until the PPACA was enacted, plaintiffs making claims predicated upon their inability to express breast milk in the workplace had been largely unsuccessful in their attempts to vindicate their rights under Title VII, the PDA, and the ADA. Many courts simply have not traditionally been amenable to the notion that expressing breast milk at work is tantamount to discrimination against women on the basis of pregnancy, a pregnancy-related condition, or sex. (Martinez v. N.B.C., Inc. 1999; Bond v. Sterling, Inc. 1998; Barrash v. Bowen 1988; Wallace v. Pyro Mining Co. 1991; Puente v. Ridge 2009; McNill v. New York City Dep't of Corr. 1996; Fejes v. Gilpin Ventures, Inc. 1997).

In 2012, a district court in Colorado explicitly held that Title VII did not "extend to breast-feeding as a child care concern" (Falk v. City of Glendale 2012, p. 3). The court elaborated, however, that "[a] plaintiff could potentially succeed on a claim if she alleged and was able to prove that lactation was a medical condition related to pregnancy, and that this condition, and not a desire to breastfeed, was the reason for the discriminatory action(s) that she suffered" (Falk v. City of Glendale 2012, p. 3). Moreover, the court noted that a sex discrimination case could lie where employees were generally permitted bathroom breaks, but a lactating employee was denied breaks because she would be expressing breast milk (Falk v. City of Glendale 2012, p. 3). That plaintiff nonetheless failed on her claims.

The tide may be turning, however. In 2013, the Fifth Circuit Court of Appeals reversed a district court's holding that being fired for expressing breast milk was not, as a matter of law, sex discrimination in violation of Title VII (E.E.O.C. v. Houston Funding II, Ltd. 2013). The Court of Appeals stated that "lactation is a related medical condition of pregnancy for purposes of the PDA. Lactation is the physiological process of secreting milk from mammary glands and is directly caused by hormonal changes associated with pregnancy and childbirth" (E.E.O.C. v. Houston Funding II, Ltd. 2013, p. 428). The court further observed that "the issue here is not whether [the plaintiff] was entitled to special accommodations. .. but, rather, whether [the defendant] took an adverse employment action against her, namely, discharging her, because she was lactating and expressing milk" (E.E.O.C. v. Houston Funding II, Ltd. 2013, p. 429). This is significant because it refocuses the query away from what some consider the specious issue of whether gender ought to be "accommodated" under Title VII, and onto the true issue of seeing discrimination in the face of a request to express breast milk at work as

discrimination because of a pregnancy-related condition, and thus, discrimination because of sex.

Further, some courts are open to the idea that the failure to accommodate a nursing mother may, in fact, constitute pregnancy-based discrimination (E.E.O.C. v. Houston Funding II, Ltd. 2013; Martin v. Canon Business Solutions 2013; Lara-Woodcock v. United Air Lines, Inc. 2013). In a recent Colorado district court opinion, the court noted that:

> "[b]ecause human physiology is such that one only lactates as a by-product of pregnancy . . . accommodation of the need to express breast milk readily fits into a reasonable definition of pregnancy, childbirth, or related medical conditions. As such, Plaintiff's access to facilities to express breast milk is relevant to whether Defendant discriminated against her based on her pregnancy" (Martin v. Canon Business Solutions 2013, p. 8).

The PPACA, as mentioned, contains the most explicit mandate protective of lactating mothers in the workplace. However, its construction by courts looks to have limited its effectiveness. In 2012, a federal district court in Iowa decided that the PPACA did not create a private right of action against an employer that violates its requirements (Salz v. Casey's Mktg. Co. 2012). The court held that while an employee alleging violations of the Act may file a complaint with the Department of Labor, who could subsequently pursue injunctive relief in federal court, she may not initiate her own suit in court (Salz v. Casey's Mktg. Co. 2012). This is significant as the reality underlying how relief must be sought means that, as a practical matter, the timing of this process may impede a victim from retaining her employment or successfully meeting her breastfeeding goals. Further, victims are not seen to have any damages for lost wages or to compensate her for harm to her health or child.

State Laws and Breastfeeding at Work

There are currently twenty-seven states in addition to Puerto Rico and the District of Columbia with laws pertaining to the expression of breast milk in the workplace (National Conference of State Legislatures 2014). Most of these entail requirements that employers furnish employees with both adequate time to express breast milk and a private, secure room in which this may be done (e.g., Ark. Code Ann. § 11-5-116 2009; Cal. Lab. Code §§ 1030-1033 2002; Conn. Gen. Stat. § 31-40w 2001; Me. Rev. Stat. tit. 26, § 604 2009; Minn. Stat. § 181.939 1998; Mont. Code Ann. § 39-2-215, 39-2-216, 39-2-217 2007). It is explicitly stated in many of these laws that a bathroom or a toilet stall is inadequate space and some states, like Indiana, also require the expenditure of "reasonable efforts" to procure a refrigerator in which employees can store expressed breast milk (IND. CODE §§ 5-10-6-2, 22-2-14-2 2008). The vast majority of states are explicit about not requiring that the mandated breaks be paid, although the type of employer to which the statutes apply (public or private) and threshold number of employees they must have do vary.

Some jurisdictions, like the District of Columbia and New York, explicitly include breastfeeding as part of its definition of discrimination on the basis of sex (D.C. Code § 2-1402.82 2007; N.Y. Lab. Law § 206-c 2007). Others, like Washington and Texas, stop short of legislating the allocation of break time and space, and instead create "mother-friendly" or "infant-friendly" designations for employers who promulgate policies that support workplace breastfeeding (TEX. HEALTH & SAFETY CODE ANN. § 165.003 1995; WASH. REV. CODE § 43.70.640 2001). In some instances, statutes contain directives for state agencies, like Oklahoma's and Rhode Island's mandate that the Department of Health "issue periodic reports on breastfeeding rates, complaints received and benefits reported by both working breastfeeding mothers and employers" (OKLA. STAT. tit. 40, § 435 2006); R.I. GEN. LAWS § 23-13.2-1 2003).

It is important to note that while some state statutes address themselves to both breastfeeding and pumping breast milk, most only address themselves to pumping, which has led some researchers to posit that the statutes' "relative effectiveness" may vary (Murtagh and Moulton 2011, p. 217). Scholars have also noted that since less than half of the state laws in place have enforcement mechanisms and so many contain "provisions that likely dilute their effectiveness," the impact of these laws remains to be seen (Murtagh and Moulton 2011, p. 217).

Failed Proposed Law and Current Reform Efforts

The Breastfeeding Promotion Act has been introduced and reintroduced since the 105th Congress (1997–1998) until the 112th Congress (2011–2012). It would have amended Title VII to include lactation and the expression of breast milk as protected conduct under the PDA and expanded the PPACA (Breastfeeding Promotion Act of 2011, 2011). Thus, there would be more protection for lactating women at the federal level. The bill, however, never made it out of committee, and despite the fact that it has been introduced and reintroduced over again, it has never been passed.

Many individuals and breastfeeding advocacy groups, like the National Breastfeeding Center, have taken issue with the limitations and drawbacks of the PPACA's ambit of protection (Wittmeyer 2014; Hollander 2014; Saint Louis 2013). For example, the provision contains no penalty for employers who fail to comply, so many worry about its effectiveness and deem enforcement mechanisms illusory (Zech 2013, p. 17). Cries for reform continue, with many saying that only time will tell what, if any, legislative reform or judicial interpretation will provide truly comprehensive protection to all female employees who wish to express or pump breast milk in the workplace.

Concluding Remarks and Future Research Directions

The current mass media messages and public health campaigns urging women to choose breastfeeding, coupled with restrictive maternity leave options in the U.S. and inconsistent workplace lactation policies, can make the transition back to work a very stressful event for new mothers. On the bright side, a growing number of companies are valuing the benefits of healthy work and experiencing firsthand the return on investment from creating and sustaining work cultures that value health promotion and wellness (Bennett et al. 2003). Indeed, estimates suggest that organizations can get up to threefold their investment in workplace lactation programs (Tuttle and Slavit 2009), which perhaps makes this an ideal time to pursue answers to the many questions still left unanswered.

Much work is still needed to comprehend the processes underlying the influence of workplace factors on breastfeeding duration and the well-being of lactating working women. For example, the role of employment related maternal separation anxiety (Hock et al. 1989) may have important implications for balancing breastfeeding and work. That is, women may respond differently to the stressors associated with breastfeeding at work if they feel more guilt and worry from having to leave their children in non-maternal care while they work. Further, what role does career salience, or the importance of work in one's life, play in breastfeeding initiation and duration among working women in various occupations? The effectiveness of various coping strategies in buffering the strains associated with a non-supportive breastfeeding work environment has been large unexplored. Further, while breastfeeding duration is a critically important outcome, more focus is needed on the woman's strain experience. How does combining work and breastfeeding impact job attitudes and behaviors? Does breastfeeding support at work help offset the occurrence of post natal depression in working women? Indeed, the cross over effects between home and work for breastfeeding mothers are obvious and the impact of organizational policies on breastfeeding decisions has long term public health implications for future generations. Studies investigating the impact of workplace stress on the breastfeeding mother-child relationship are needed. Does the time away at work serve to enrich the time spent with the child when reunited or does the stress accumulated during work spillover onto the parenting techniques used at home? Similarly, does the physical separation from the infant caused by returning to work place any limitations on the health and psychological benefits derived from breast milk for the mother or child? These and other questions require an interdisciplinary approach to research that can more fully consider the many factors influenced by combining work and breastfeeding demands.

Which workplace lactation component is most useful to parents? Previously cited preliminary research suggests some variation among the wide range of options available, but published empirical evidence on babies-at-work programs is scarce at best. To advance this question, psychometrically sound measures of employee lactation program satisfaction and effectiveness are needed. While quite a bit of

research has focused on socio-economic status differences in breastfeeding initiation and duration, its impact on workplace lactation outcomes by means of access to better childcare or quality breast pumps has not been sufficiently explored. Further, what impact will the ACA have on the use of high quality breast pumps by working women, as insurance companies may seek ways to minimize costs associated with their requirement to make pumps available?

This chapter is largely shaped by the current conditions surrounding the breastfeeding working woman in the U.S. and recognizes that societal and cultural norms for breastfeeding play a significant influence on workplace acceptance. We have seen a strong national commitment towards breastfeeding promotion, highlighted by the rising numbers of Baby-Friendly Hospitals. We are hopeful that the emergent focus on physical and psychological wellness by organizations will be a lasting one and that, with the growing number of breastfeeding mothers rejoining the workforce, systematic efforts to educate employers, lactation accommodations, and support will be readily available.

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The Importance and Impact of Child Care on a Woman's Transition to Motherhood

Rachel T. Hill, Candice Thomas, Lucy English and Kim Callaway

Abstract Given the high rate of mothers participating in the labor force, child care decisions are a critical component of reconciling work and family roles and can have lasting effects on the child, the parents, and the organization for which the mother works. Due to the importance of child care in the experience of work-family integration, this chapter aims to discuss the implications of child care on workplace, family, and well-being outcomes for mothers who return to work after childbirth. Drawing on role theory as a theoretical lens, the primary purpose of the chapter is threefold: (1) review the various types of child care available and their relevant statistics; (2) provide a focused examination of the extant literature regarding the effects of center-based child care, specifically employer-sponsored child care; and (3) delve into the ways organizations are getting involved by providing a review of the benefits and challenges of employer-sponsored child care. Finally, the methodological difficulties of conducting research in this domain are explored and suggestions for future research are provided.

Keywords Working mothers · Center-based child care · Employer-sponsored childcare · On-site child care · Organizations · Employee

As the number of dual-earning couples and working mothers increases, non-maternal child care is an important component of working parents' experience of dual participation in work and family roles. Currently, 70 % of mothers with children under the age of 18 are part of the U.S. workforce and 64 % of mothers who work have children younger than 6 years old, meaning that over 10 million mothers must find child care while they work (Bureau of Labor Statistics 2014). It

R.T. Hill (✉)
Louisiana State University, Baton Rouge, LA, USA
e-mail: rachelthill20@gmail.com

C. Thomas
University of Houston, Houston, TX, USA

L. English · K. Callaway
Bright Horizons Family Solutions, Watertown, MA, USA

is therefore important that the impact of early child care on the parents and children be well understood.

Although Americans largely agree that women belong in the workforce and that both men and women should contribute to household income (Pew Research Center 2009), working women continue to face challenges in integrating their work and family roles. This often results in work-family conflict, or the occurrence of work demands interfering with family or family demands interfering with work (Greenhaus and Beutell 1985). Work-family conflict is a prominent stressor for employees that affects a variety of outcomes within the work and family domains such as job satisfaction, work engagement, job performance, well-being, and family functioning (e.g., Almeida et al. 1999; Frone 2000; Greenhaus et al. 2006; Grzywacz and Bass 2003).

Due to the importance of child care in the experience of work-family integration, this chapter aims to discuss the implications of child care on workplace, family, and well-being outcomes for mothers who return to work after childbirth. Drawing on role theory as a theoretical lens, the primary purpose of the chapter is threefold: (1) review the various types of child care available; (2) provide a focused examination of the extant literature regarding the effects of center-based child care, specifically employer-sponsored child care; and (3) delve into the ways organizations are getting involved by providing a review of the benefits and challenges of employer-sponsored child care. In addition, we also explore the methodological difficulties of conducting research in this domain and provide suggestions for future research.

Role Theory: A Theoretical Framework for Understanding the Importance of Child Care

Working parents often face a unique set of demands from their roles within the work and family domains. When the demands from these roles are high, they can contribute to feelings of strain and overload for working parents.. To support the importance of child care in the experience of new parents returning to work, we draw on role theory, specifically research on role strain and role conflict. According to role theory, individuals identify with various social positions, or roles, which are characterized and often perpetuated by expected behavior patterns (Biddle 1979; Katz and Kahn 1978). Working adults hold multiple roles throughout their lives including, for example, parent, child, spiritual observer, student, coworker, and leader. Specific to the intent of this chapter, we focus primarily on the roles of *mother* and *employee*.

Historically, social roles were more gendered with women fulfilling the responsibilities of housewife, caring for the children and the home, while men identified with the social role of breadwinner, a dichotomy supported by gender-role theory (Wood and Eagly 2002). However, cultural and industrial

changes have blurred these traditional social roles, especially for women, over the past century (Inglehart and Norris 2003). As cited previously, in the U.S. in 2013, 70 % of all mothers with children under the age of 18 were in the labor force (BLS 2014). Yet, the paradigm of gendered roles often sets certain expectations for women despite the advancement of more balanced households. As a result, women who hold the roles of both mother and employee are faced with more inter-role conflict and strain within their roles, which is often manifested in work-family conflict (Gutek et al. 1991).

Child Care Options and Prevalence

In the U.S., many women rely on child care to help them balance their roles of mother and employee, as well as to reduce work-family conflict. Of the roughly 20 million children under the age of 5 in the U.S., 61 % are in a regular child care arrangement, or any form of child care that is used on a regular basis (Laughlin 2013). There are a variety of child care options ranging in quality and affordability. The most common form of child care is by a relative, which includes mothers, as well as fathers, grandparents, or siblings. Relative care represents 42 % of child care arrangements. This type of care often takes place in the child's home or in the relative's home, costing very little or nothing for the parents. Research has found that parents who live within 30 miles of a relative or have another adult living in the home are more likely to choose relative care over other types of care (Hofferth and Wissoker 1992).

However, there are several other child care options for working mothers. Based on data from the U.S. Census, more than one-third of children under five are in non-relative care, which includes in-home care (4 %), family child care homes (8 %), and center-based child care settings (24 %) (Laughlin 2013). In-home care is care that is provided by a babysitter, professional nanny, friend, or neighbor that takes place in the child's home. Family child care homes are a care arrangement where the child is brought to the care provider's home where he or she is typically cared for with one or more other children, often including the provider's children. In center-based care, children spend their day at a facility that cares for many children often organized by age into several classrooms. Child care centers may be operated by a variety of entities, including churches, community organizations, or employers, as well as for-profit child care providers (Pungello and Kurtz-Costes 1999). Based on research conducted by the National Institute of Child Health and Human Development (NICHD), which followed approximately 1000 children during their first four and a half years of life, children are placed in family child care homes and center-based care at nearly equal rates overall (20 and 22 %, respectively). However, the prevalence of each of these types of care differed depending on age, with higher usage of family child care homes during the infant and toddler stage and more center-based care at the age of 3 or older (NICHD Early Child Care Research Network 2002).

It is estimated that children of employed mothers spend an average of 26 h in non-parental child care each week (Laughlin 2013). Finding high quality child care centers and preschools is a necessity for many dual-earning couples, especially those who do not choose care by a relative. However, high-quality center-based child care is often difficult to secure which can result in parents sacrificing in terms of cost, location, and/or quality (Chaudry et al. 2012). Because of this, in addition to other factors, many parents find it necessary to use a combination of center-based care and home-based care with babysitters, nannies, and relatives.

The U.S. Census Bureau estimates that almost 12 % of children under 5 with working mothers have no regular child care arrangement, and 27 % are using multiple arrangements (Laughlin 2013). Unfortunately, this suggests that many working mothers struggle to find reliable child care and thus may experience additional strain as they frequently must obtain child care at the last minute or risk missing work. Additionally, working parents may also be forced to switch child care providers throughout their child's preschool years due to reasons such as cost, reliability, parental preferences, and changes in employment status. For instance, parents may prefer for an infant to be cared for in a more "home-like" care arrangement and then move them to a center-based arrangement when they reach 2 or 3 years old (Riley and Glass 2002). Given all these factors, research has shown that 56 % of children under 6 change child care arrangements at least once during a two year period (Miller 2006) with nearly 40 % of children experiencing a change in their care arrangement from 6 to 15 months of age (Tran and Weinraub 2006). The inconsistency of care as children transition between child care providers, as well as the fallibility that accompanies having no or multiple child care arrangements, is a logistical challenge for many working parents and may have a negative impact on the child (Morrissey 2009; Sandstrom and Huerta 2013). The awareness of this potential negative impact can only add stress to an already challenging situation.

In addition to regular care arrangements, parents can also utilize back-up emergency care for situations when care is needed unexpectedly (e.g., due to a last minute change in work schedule or a sick child). Parents who have access to back-up care programs are able to arrange last minute care at designated back-up care centers or in-home care by a qualified child care professional. This type of child care support helps working mothers specifically, as they are usually the parent who responds to urgent child care needs, often by missing work (Maume 2008). Although emergency back-up care may alleviate some strain and inconvenience for working parents, it is typically only offered through employers; only 3 % of organizations currently offer back-up care (Matos and Galinsky 2012) and often require the employee to pay an additional co-pay as part of their employee benefits package.

Given that many parents require child care so that they can work, and that these parents can be limited in their selection of a child care arrangement due to cost, scheduling, location, and other factors, research has shown that there are both positive and negative outcomes associated with non-parental care arrangements. In terms of peer-reviewed literature, research shows that children who receive

center-based care score higher on cognitive assessments than children in home-based care (Bradley and Vandell 2007; Burchinal 1999; Vandell 2004). However, regardless of the type of arrangement, children in high-quality child care had better pre-academic and language skills (Li et al. 2013). Despite the identified academic benefits of child care, high quantities of non-parental care can affect children negatively, especially when paired with other factors such as low quality of care, poor parenting, and low socioeconomic status. According the NICHD, large amounts of child care of any kind were shown to predict increased behavior problems at 2 years old based on reports by caregivers (2002). Yet, quality of parenting can have a marked effect on some of these predicted outcomes. By 6th grade, children who were in non-parental care, but experienced high quality parenting had lower levels of teacher-rated externalizing problems and conflict and high levels of social skills, social-emotional functioning, and work habits, as well as high academic performance (Belsky et al. 2007). It appears that while early child care can positively affect academic and social performance, these results are variable and dependent on a multitude of factors, including quality of child care, quality of parenting, socioeconomic status, and number of hours in care.

Current Status of Women in the Workplace

Mothers who have recently given birth to or adopted a child represent a unique population in the workforce that is often at increased risk of leaving. Although women's participation in the labor force has increased overall in the last 40 years, from 44 % in 1972 to 57 % in 2012, it has been on the decline since 2000 when almost 60 % of women were working or looking for work (Bureau of Labor Statistics 2014). Over the past decade, fewer women report participating in work, causing researchers to wonder why. For example, Matthews and Fisher (2012) suggest that one factor influencing new mothers to remain home to care for their children is a function of the changing nature of employment of their older parents. Specifically, Matthews and Fisher note that increasingly older adults must remain in the workforce longer for their own financial welfare (i.e., retirement age continues to increase). However, beyond being an employee and a parent, these individuals are likely to also be grandparents. As noted previously, care provided by grandparents accounts for a meaningful percentage of child care arrangements. If grandparents are no longer a viable option to provide care, mothers (and fathers) must find other arrangements or stay at home themselves to care for the child (Matthews and Fisher 2012). Accordingly, there has been a rise in stay-at-home mothers. In 1999, the percentage of mothers who stayed home with their children instead of working reached a modern era low of 23 %, but immediately began to increase and was up to 29 % in 2012 (Cohn et al. 2014).

Although these changes seem small, they have large ramifications for the workforce and organizations. If women decide to leave their jobs, not only do organizations lose experienced and qualified employees, they also lose financially.

It is estimated that, in part because of costs to hire and train a new employees, employee turnover costs range from 12 % to upwards of 40 % of the company's pre-tax income (Saratoga 2006). For organizations who offer paid maternity leave, the cost of losing a new mother is even higher. From a professional standpoint, the decision to leave the workforce due to family obligation also has a negative effect on the woman's future career projections. Research has shown that mothers taking a long break after the birth of a child increase the risk of a downward career move and reduce the likelihood of obtaining an upward move (Aisenbrey et al. 2009). Therefore, to promote the successful integration of work and family roles after child birth, and help to retain mothers in the workforce, it is essential that we better understand the stressors this population is facing and what organizational constraints are hindering their transition back into the workplace.

Of the many factors that influence a mother's decision to return to work following childbirth, the cost, availability, and feasibility of quality child care are likely the most important components in parents' decision making process (Coulson et al. 2012). On average, child care expenses make up 7–10 % of family income (Laughlin 2013; Child Care Aware 2013). A study by the Census Bureau in 2010 found that for a mother who has more than one child under 5, child care is likely to be more than her salary unless she has particularly high earnings (Kreider and Elliott 2010).

As a result, many working mothers must make the decision to leave their jobs in order to stay home with their children or use their entire paycheck to have someone else take care of them. Infant care is by far the most costly given the lower required adult to child ratios, as compared to older children, marking the birth of a child as a prime time for working mothers to evaluate whether continuing in the workforce is worth the money and time away from their newborn. Based on Census data from 2006–2008, 56 % of women pregnant with their first child worked full-time during their pregnancy (Laughlin 2011). This statistic jumps to 87 % for women with bachelor's degree or higher. After childbirth, 59 % of these women returned to work within three months and 79 % were back at work within a year (Laughlin 2011). However, that means that approximately one out of five new mothers did not return to work. Although many of these women might have known all along that they would become a stay-at-home mother upon childbirth, it is likely that others would have liked to return to work but did not have the resources available to do so. Employer-sponsored child care centers, specifically those that offer programs for new mothers, are likely to increase the number of female employees who return from maternity leave.

Although the high cost of child care may be one reason the number of stay-at-home mothers is increasing, a lack of family-related supports from the organization might also be a contributing factor in the turnover of new and existing mothers. Recently, there has been a new trend involving well-educated women, who often can afford child care, leaving the work force or "opting out" of employment following child birth (Belkin 2003; Cohn et al. 2014). These "opted-out" women represent only 1 % of all mothers and 4 % of stay-at-home mothers, but 10 % of all mothers with a Master's degree or higher. Although

women with less education are driving the growth of stay-at-home moms more than those with advanced degrees, losing these highly educated women is problematic for organizations that are striving to attract and retain them (Cohn et al. 2014). Additionally, many of these accomplished women report that they did not truly opt out, but were instead pushed out due to difficulties and lack of support balancing work and family demands (Stone 2007).

The Role of Family-Friendly Benefits

Many organizations recognize the struggle parents are experiencing between work and family roles and have made strides in trying to help workers balance these roles by offering a variety of family-friendly benefits. According to a 2009 survey of highly educated women, of those who had taken a career break, 69 % would not have done so if family-friendly policies were more available from their employer (Hewlett et al. 2010). Offering policies and benefits that help employees manage their work and family lives communicates that the organization is supportive of employee well-being and thus, contributes to increased organizational commitment (Chiu and Ng 1999; Grover and Crooker 1995; Thompson et al. 2004). Additionally, family-friendly offerings help to reduce absenteeism, employee strain, and turnover (Baltes et al. 1999; Ginsberg 1998; Batt and Valcour 2003; Halpern 2005). These types of policies and benefits can range from the ability to work from home, to longer maternity leaves, as well as paternity and adoption leave, to subsidies for child care.

In a recent meta-analysis on the effect of policies such as these, Butts, Casper, and Yang found support for a model that suggests family-friendly policies improve various work outcomes through two primary mechanisms (2013). The first, perceived corporate concern, represents a more affective route to positive work attitudes. The availability of policies signals to employees that the organization cares about their personal and family well-being, and thus they are more satisfied employees. The reduction of work-family conflict is the second pathway, indicating a tangible and instrumental effect of work-family support policies. By actually using on-site child care, for instance, employees can experience less work-family conflict, which can lead to better work outcomes for the company. This rationale has been voiced frequently by work-family advocates, but has lacked the empirical support until now.

The provision of an on-site or near-site child care center for children of employees is one organizational benefit that receives considerable discussion (Connelly et al. 2004; Alsever 2014). Despite the attention, only 7 % of companies actually offer child care (Matos and Galinsky 2012). A look at the history and current status of on-site child care centers shows that compared to other countries, the U.S. government has left much of the responsibility of addressing issues of work-family policies to employers, similar to the approach taken with health insurance (Hacker 2002; Kelly 2005). In 1981, through the Dependent Care

Assistance Program (DCAP), the U.S. Congress attempted to encourage child care benefits within organizations by offering tax breaks for the provision of on-site child care. However, it appears that several consulting firms who specialized in employee benefits interpreted the new tax laws as a way to tie dependent care expense accounts into the cafeteria benefit plans they were currently marketing to companies (Kelly 2003). Instead of allocating tax-free dollars to the construction or subsidization of employer-sponsored child care, organizations allowed employees to divert a portion of their pre-tax income to child care expenses. This satisfied employees who desired child care benefits, as well as executives who did not have to devote capital to the implementation of this benefit (Kamerman and Kahn 1987; Kelly 2003).

As a result, whereas on-site or near-site child care exists at less than 10 % of companies, 62 % offer dependent care assistance plans (Matos and Galinsky 2012). Although employees can use their pre-tax income to pay for child care, the solution of DCAPs does not increase the amount of available child care or reduce the actual tuition costs for working parents. However, this does not mean the existence of DCAPs and other forms of child care assistance should be revoked. The availability of child care assistance has been shown to increase employee retention among other positive outcomes (Babu and Raj 2013) and can be a valuable benefit for small organizations who do not have the funds for a child care center. On-site child care centers can be an investment for organizations, but 18 % of employers with more than 1000 workers have an on-site center (Matos and Galinsky 2012). These organizations see that an employer-sponsored child care center represents a resource that can help working mothers more easily integrate their work and family roles (Payne et al. 2012).

Women working for employers with on-site centers may be more likely to have more time in both roles due to a shortened commute time, easier access to breastfeeding, or the ability to have lunch with their child (Payne et al. 2012). As opposed to other work-family related benefits, such as flexible work arrangements and extended maternity leave, on-site child care can allow working mothers to be present at work and feel less threatened by the stigma that they are working less or have become a poor performer by having children (for relevant review see, Sprung et al. 2015). Additionally, the length of maternity leave taken by a mother has been shown to negatively predict gender occupation equality and decrease the chances of a women being promoted into a managerial role (Mandel and Semyonov 2005, 2006). Employer-sponsored child care can be a viable way for women to maintain their career while remaining close to their children. Yet, many of the benefits of child care, specifically on-site child care, have not been substantiated in the academic literature. Where research does exist, we review it below.

Research on Child Care

We begin our discussion of the research on child care arrangements by first examining the general effects of child care and child care support. With this grounding, we focus specifically on child care offered by the organization. In

general, as noted previously, the availability of high quality child care has been found to be associated with a variety of positive outcomes such as increased likelihood of return to work after childbirth (Simonsen 2010) and decreased employee absenteeism (e.g., Gordon et al. 2008). Looking specifically at absenteeism, one reason that having reliable, high quality, child care is so beneficial is that it reduces the likelihood of provider unavailability.

Whether or not a provider is able to provide consistent and reliable care can vary depending on the type of child care facility (e.g., center-based or home care) and the number of care providers. For example, by virtue of the greater staffing resources often associated with center-based care, mothers who use child care centers are less likely to miss work because of provider unavailability (Gordon et al. 2008). Conversely, due to the potential for provider unavailability or instability of scheduling, home-based care, either in a family day care or by a nanny, can serve as an additional stressor for working parents (Henly and Lyons 2000; Lowe and Weisner 2004; Scott et al. 2005). Gordon et al. (2008) found that parents who use small home-based providers are more likely to miss work due to their child care arrangement falling through. For example, if the caregiver in a family child care home is unable to work on a given day (e.g., due to illness), the parents will have to either find last minute alternative care or take time off of work to care for their child. The reliability of center care often provides a more stable environment which may lead to decreased strain and absences for working parents.

Employer-sponsored child care and child care support offered by the organization have been shown to be associated with a variety of positive outcomes. Although there is little evidence for a relationship between provision of on-site child care and employee performance, benefits such as child care provision or support are commonly associated with organizational membership outcomes, such as improved recruitment and retention, as well as positive attitudes regarding managing work and family responsibilities (e.g., Kossek and Nichol 1992; Allen 2001). To best understand how on-site child care and child care support can impact organizations, we will discuss the current research on the effects of these benefits on employee absenteeism, recruitment, retention, and organizational attitudes.

Absenteeism can be a problem for mothers with young children that are often sick or whose normal child care arrangements are suddenly canceled. With access to reliable care at an on-site child care center or through back-up care services, working parents are less likely to miss work due to provider unavailability (i.e., child care provider being sick or the center being closed; Gordon et al. 2008). In addition to provider unavailability, child illness can also be a threat to parents' attendance at work. One support that organizations can offer to help overcome this is the provision of emergency care or services that allow for the care of sick children. Parents without access to a reliable child care center or emergency care services may be more likely to have more missed days from work because of the difficulty of securing last minute non-parental care (Usdansky and Wolf 2008). In addition to the possible negative effects of absenteeism on organizational processes, this absenteeism also has implications for employee retention: missed days due to child care can lead to higher rate of mothers exiting the workforce (Gordon et al.

2008). Organizations can help avoid these absences by providing reliable child care and emergency care options.

In addition to absenteeism, the impact of employer-sponsored child care on recruitment and retention efforts is important for organizations that are competing for top talent in their industry, as well as for companies hoping to reduce turnover costs. Recruitment and retention efforts are often more positively affected by enrollment in an employer-sponsored center than performance and absenteeism outcomes; but the effects of employer-sponsored care on retention and recruitment still often depend on factors beyond simple child care availability such as quality of the care and parental satisfaction with the care (Kossek and Nichol 1992). However, there is some general support for the association between provision of employer-sponsored child care and recruitment and retention (e.g., Rothausen et al. 1998, Kossek and Nichol 1992). Employees using an employer-sponsored center are more likely to report that the center is a factor in deciding to stay with the company, as well as recommending employment to a friend, as compared to employees on the waiting list for the center (Kossek and Nichol 1992). Similarly, when comparing employees currently using employer-sponsored child care, with employees on a waiting list for the center, and all other employees (including employees who had used the center in the past, might use it in the future, or had no intent on using the center), current and future center users are more likely to recommend or stay at their organization due to the on-site center (Rothausen et al. 1998). In addition to child care centers, the provision of employer-sponsored child care assistance is also important in retention (Babu and Raj 2013) and recruitment (Casper and Buffardi 2004).

In addition to the direct services that child care assistance and on-site child care facilities offer working mothers, these benefits might also impact employee outcomes through increased perceptions of organizational support and their effects on organizational commitment or job related affect. Previous research has shown employer-sponsored child care benefits have a positive impact on the work attitudes and perceptions of employees, both users and non-users. In one study, users of the work-site center were more likely to hold positive attitudes toward managing their work and family responsibilities (Kossek and Nichol 1992). Similarly, other child care benefits, such as financial support for child care and dependent care benefits, are associated with increased positive attitudes towards their employer and decreased work-family stress for current employees (Morrissey and Warner 2009) as well as anticipated organizational commitment for job applicants (Casper and Buffardi 2004).

Of specific interest to the study of employer-sponsored child care is the organizational support construct, family-supportive organization perceptions (FSOP). Defined as the extent to which employees view their organization to be supportive of their family lives, FSOP is associated with many positive organizational outcomes (Allen 2001). For example, positive FSOP is related to increased employee affective commitment, reduced work-family conflict, higher job satisfaction, and lower turnover intentions (Allen 2001; O'Driscoll et al. 2003; Wayne et al. 2013). FSOP is influenced by a variety of organizational factors such as the number of

family-friendly benefits offered, benefit usage, and perceived family support from the supervisors (Allen 2001). Therefore, it is possible that the provision of on-site child care and child care benefits can be associated with positive organizational outcomes through their impact on FSOP.

In addition to being a mechanism through which child care influences employee outcomes, FSOP is also an important moderator that influences the degree to which employer-sponsored child care center is associated with positive outcomes. Through the lens of the organizational support theories, the use of on-site child care is only beneficial for employees when they perceive the organization to be supportive of their family roles and are satisfied with the child care provider (Ratnasingam et al. 2012). This suggests that perceptions of organizational support for family life are an important component of the employer-sponsored child care experience. Provision of these benefits (child care and child care assistance) to parents is only one way to indicate the organization's support for employee family lives. The benefits will have the most impact if they occur in conjunction with positive FSOP environments (Ratnasingam et al. 2012).

While our understanding of how employer-sponsored child care impacts employees and organizational outcomes is growing, there still remain critical gaps that limit our ability to fully understand the effect of these benefits on working mothers. Specifically, the contradictory findings for many of the outcomes of on-site child care suggest that there are additional moderators that influence how on-site child care impacts mothers. For example, community level factors (e.g., population density) and time of year (e.g., winter versus summer) may play a critical role in the availability of quality care options and need for alternative arrangements. As such, the positive effects of child care support are often not as straightforward as simply offering a service; many other factors play a role in how these benefits impact working mothers, like the perceptions of organizational support and quality of care (e.g., Ratnasingam et al. 2012). It is therefore critical that we continue to investigate the complex nature of child care and continue to identify both care and organizational based predictors of positive maternal outcomes.

An Applied Example: Bright Horizons Family Solutions

To further build on the research regarding the impacts of child care benefits and on-site child care provision, we will now focus our attention on a specific organization that specializes in child care benefits: Bright Horizons Family Solutions (Bright Horizons). Applying the experience of this organization will provide us with a contextual example of how these benefits can be implemented in organizations and the types of outcomes that are associated with child care provision. Bright Horizons develops and operates on- or near-site child care centers for organizations, and coordinates emergency back-up care when an employee's regular child care arrangements fall through. Bright Horizons is one of the largest

global dependent care services providers, operating more than 750 child care centers, and shares partnerships with over 850 employers in a variety of industries (Bright Horizons, n.d.). The company's 30 years of experience in this arena offers a unique perspective into the functioning and outcomes of a high quality service option that is available to organizations.

To help promote a more comprehensive understanding of the complex factors and outcomes associated with on-site child care, the research and consulting division of Bright Horizons—Horizons Workforce Consulting (HWC)—has conducted research to determine the effect that affordable, accessible, and high-quality child care has on employees. Based on these studies, the following section highlights issues surrounding the return to work and continuation at work—from the perspective of both the working mother and the organization—that have been identified by HWC. Specifically, to fully understand these two groups, three sources of information will be utilized: (1) focus groups conducted with employees of organizations looking to provide or improve their child care benefits, (2) organizational impact data collected from a survey of current parent users of employer-sponsored child care, and (3) well-being data collected from parents of both employer-sponsored and community based child care.

The Parent-Employee Perspective

Once a couple decides to start a family, the decision for each parent to remain in the workforce after the birth or adoption of a child is near the top of the list of work-family choices they must make. Below, we provide some discussion around how employer-sponsored child care influences a mother's decision to return to work. These findings are based on data from more than 40 focus groups at organizations across industries over the past five years. Participants in the focus groups were employees at companies who were considering adding dependent care services to their benefits package. The focus groups consisted of mostly parents with young children, but also non-parents, employees who were planning to start a family, and employees whose children were grown.

Feeling Wanted: Based on responses in the focus groups, it is clear that organizations should actively work to promote a culture that fosters perceptions of family support and importance. One way to show employees that the organization values family and non-work roles is to provide child care on-site or near the workplace. This signals that the employer acknowledges the importance of employees' caregiving responsibilities and supports their ability to manage work and family. Another best practice identified by the focus groups is to begin positive communication of organizational support upon the employee's announcement that she is expecting or adopting a new child. For example, one large financial organization utilized communications that expressed their supportive expectation that the employee would return. Communicating the expectation that she will return helps to normalize new motherhood in the workplace and allows the employee to

feel comfortable about staying. Based on the discussions in the focus groups, these communications should also include a list of relevant resources available to support the employee, such as health benefits, child care, nursing mothers' rooms, etc.

Options for Transitioning Back: Another important factor in the decision to return to work that was identified in the focus groups is flexibility in parental leave arrangements and an option for a return-to-work transition that fits the needs and desires of the mother, her partner, and her child or children as well as those of the organization itself. The ideal length of leave after childbirth varies. Some mothers are ready to return to work quickly, while others want more time with the baby. Research has shown that the length of leave can be related to psychological resilience in the mother's daily experiences with stress. Longer leaves predicted fewer regrets overall and women were less affected by home stress. Additionally, shorter maternity leaves may compound with other risk factors such as marital concerns, and place mothers at a higher risk of depression (Hyde et al. 1995). While the benefits of longer leaves and more flexible return to work options are clear for women, they also have implications for organizations. Wiese and Ritter found that return to work regrets predicted withdrawal intentions (2012). If there are health complications for mother or baby, or other complicating factors, it will be important to be flexible, sometimes minute-to-minute as the family figures out how to handle the fragile early days of new babyhood.

Lactation Considerations: Parents in the focus groups also discussed the desire for lactation programs sponsored by the employer. According to the American Academy of Pediatrics (1997), organizations can benefit from offering lactation programs by seeing reduced health care costs and reduced employee absenteeism due to child illness. If a new mother plans to breastfeed her baby, she will need accommodations that feel comfortable when she pumps during the day. In addition to a comfortable, equipped private room to pump, she will want to know that her manager and co-workers are supportive of the time she needs for lactation. Without access to employer-sponsored lactation services, most mothers stop breastfeeding upon returning to work due to the inability to find enough time or space to express milk adequately (Hills-Bonczyk et al. 1993). On- or near-site child care can aid in this dilemma by providing lactation rooms and equipment for use throughout the day in addition to child care. This also supports a new mother's transition back to work as she can actually see and breastfeed her child during the work day rather than just pumping.

Child Care: Based on the feedback in focus groups, and consistent with the larger research reviewed above, parents primarily take three factors into consideration when trying to secure appropriate child care: affordability, quality, and availability. Finding the right balance between these three is a significant challenge for new parents that can impact the mother's decision to return to work. The focus groups conducted by Horizons Workforce Consulting inform us that both the culture of the organization and the benefits offered are important in a new mother's decision to return to work.

Other supports: Programs such as back-up child care, which may be available in child care centers at the workplace or in the community, as well as in the home, send the message that children are important and the culture supports employees in their desire to be successful parents. Back-up care and other dependent care resources are also tangible tools that parents can use to manage their work and family roles, which benefits both the employee and the organization. In a truly parent-friendly culture, employees will know that they are supported when they are able to prioritize the needs of their families.

The Employer Perspective

Having discussed issues critical to parents from the perspective of the parent-employee, we turn our attention to the employer's perspective. Given the many points at which employees choose to leave the workforce in favor of their family responsibilities, many employers have seen the efficacy of providing on- or near-site child care centers (for full-service and/or back-up care) as a resource (among many) that they can use to provide family support and help to support continued participation in the workforce.

When an employer develops a child care center to meet the needs of its employees, there is a positive impact on critical business outcomes such as recruitment, retention, absenteeism, productivity, and overall employee well-being. It is often the case that child care is available in the community but it may not be of high quality, may be too expensive, or may not offer the hours of care necessary to match employees' work demands. This is true in many types of workforces. One extreme example is the healthcare industry where patient caregivers often work 12-hour-shifts while a typical child care center in the community is open 10–11 h per day.

Employers benefit from the ability to design a program that is customized to the specific needs of its workforce and the strategic business needs of the organization. Some customizations include: (1) hours of care match employee work schedules; (2) tuitions which take into account affordability for employees; (3) sufficient spaces to accommodate employees' needs, particularly for infants and toddlers (care that is usually in critically short supply in the community); (4) the level of quality the program offers, ensuring that the center provides high quality care that is consistent with the organization's culture and employer brand.

To accomplish all of the above, employers often provide support to the economics of the center. Some common types of support include providing the building, outfitting the building to be appropriate for the care of children, and providing a quality subsidy so that parent tuitions do not need to bear the full cost of teacher salaries and benefits, lower child-to-teacher ratios, and extended length of day. For example, this model is utilized by a large healthcare provider in a state with high teacher-to-child ratios and low market rate tuitions. This particular

employer wanted the quality of child care to match the award-winning care provided by their employees to the patients in their hospitals. Lowering the teacher-to-child ratios naturally requires a significant increase in parent tuitions to cover the cost of additional center personnel. Instead of passing the cost on to parents, the employer covered the cost of the quality subsidy, thereby giving their employees access to high quality care not currently available in the community at a cost that is affordable to most of its workforce.

Although many employers who sponsor on-site child care centers do so because their leadership believes it is "the right thing to do", there are also measurable impacts that support the organization's strategic business goals. The following data is the result of the Lasting Impact Survey conducted by Horizons Workforce Consulting. In 2014, the Lasting Impact survey was administered to parents with children in employer-sponsored Bright Horizons child care centers to identify what impact employer-sponsored child care had on employees and the organizations in which they worked. Over 3000 parents responded to the anonymous and voluntary survey, a response rate of 33 %. Although not a nationally representative sample (the sample tends to have a higher social economic status than average), responses were obtained from participants representing more than 200 organizations across 30 industries. Based on the responses to this survey, many insights were gathered regarding the benefits of using an on-site child care center.

Ninety percent of respondents indicated that they are more likely to continue to work for their organization because of employer-sponsored child care. Fifteen percent report having turned down or declined to pursue a potential job change because of the lack of child care at the future employer and, of those who turned down a job due to child care, 68 % said the job offer was for a higher salary. Employer-sponsored child care also improves employee attitudes and recruitment efforts with almost all survey respondents agreeing that it makes their organization an "Employer of Choice" (93 %) and makes them more likely to recommend the company to other working parents (96 %). It also aids in succession planning with 83 % of parents saying they are more willing to pursue or accept a higher position.

The Lasting Impact survey data also provides insight into how employer-sponsored child care affects parents at work. The majority of parents reported that they are better able to concentrate on the job (95 %), work a scheduled shift (93 %), and meet job performance expectations (93 %) because of the access they have to child care on-or near-site. They also report being better employees by effectively collaborating with other employees (86 %), participating in training (83 %), and volunteering to do things not formally required (79 %).

In addition to the more typical business case measures described above, forward-thinking employers are also concerned about their employees' overall well-being, knowing that an employee that feels successful in their personal and professional lives will likely be a more satisfied and productive employee. To explore this issue, Horizons Workforce Consulting, conducted a survey of full-time employees across the United States in 2012 to understand the impact of employer-sponsored dependent care supports on various indicators of well-being. The sample groups included employees recruited through online research panels as

well as those answering the annual Bright Horizons Parent Satisfaction Survey. The comparison groups used here were (1) parents of children under the age of 13 who do not have access to employer-sponsored child or adult care programs, and (2) parents of children under the age of 13 who have access to and have used child or adult care supports sponsored by their employer, during the past year. Analyses controlled for differences in age and income.

Based on regression analyses on this self-report, cross-sectional data, it was found that individuals who used employer-sponsored dependent care were three times less likely to be in treatment for high blood pressure or diabetes, are two times less likely to be in treatment for high cholesterol, and are significantly less likely to experience minor health problems including headache, fatigue, and upset stomach. On the job, access to dependent care results in employees being more than twice as likely to stay with their employer for another year, and more likely to trust their employers to treat them fairly, communicate honestly, and help them weather economic difficulties. Employer-sponsored child care users are more than three times as likely to report having good relationships with their coworkers, which enables them to function well collaboratively and in teams. These findings show how employer-sponsored child care can promote the well-being of employees and the organization as a whole.

Academic researchers often survey parents whose children are enrolled in a wide variety of center types (e.g., employer-sponsored, community-based, small, large), whereas Horizons Workforce Consulting utilizes current parents of children enrolled in Bright Horizons centers. Furthermore, Bright Horizons centers are accredited by National Association of the Education of Young Children (NAEYC) and are regarded as providing high quality child care. Perhaps this contributes to the significant results regarding the impact of employer-sponsored child care.

Regardless, as the data from this study clearly suggest, implementation of high quality (based on accreditation by the NAEYC) child care solutions, designed to meet the needs of the workforce, can have positive organizational outcomes that can help support the overall business strategy. However, the mere existence of family-friendly policies will not always improve the satisfaction and engagement of employees (Ratnasingam et al. 2012; Allen 2001). Organizational decision makers must be careful not to use on-site child care as a bandaide for a potentially much larger and systematic problem. Many companies may struggle with fostering a family-supportive climate and hope to improve this issue by providing employer-sponsored child care which is likely a step in the right direction.

Methodological Challenges Within This Program of Research

Based on the research conducted through Horizons Workforce Consulting, we have seen how dependent care programs and policies offered by an organization can positively affect the well-being and productivity of working parents. Despite

evidence from these studies for the provision of on-site child care, research on employer-sponsored child care is mixed, making it difficult to tease out the true relationships and find consensus between both applied and academic interests. One of the first investigations into the impact of on-site child care on work outcomes by Miller (1984) exposed a number of methodological flaws in prior research on the subject, such as poorly designed studies and missing data, many of which still plague the topic today. In order to investigate the value of employer-sponsored child care for working mothers, historically common design issues should be highlighted.

Despite the costs and resources companies expend to provide child care services to their employees, it is often difficult for organizations to empirically show the benefits and return on investment of doing so (Connelly et al. 2004). Organizations that do collect data on their center or are interested in doing so may not see the merit in partnering with academic researchers, especially if they believe they can handle the data collection and analysis on their own. Additionally, obtaining buy-in from top-level executives for such research can be challenging. Those who are able to get permission to survey employees may also run into trouble getting working parents to participate in the online survey, focus groups, or interviews they have designed given how busy these parents may be.

As such, researchers often must make do with the access and data they are provided. One way scholars have continued to investigate employer-sponsored child care and other work-family benefits with limited or no direct access to usage data is to consider instead the availability of such benefits and how they relate to improvements in relevant work outcomes (Ratnasingam et al. 2012). Although the effect of perceived availability of on-site child care has provided some pertinent findings regarding increased perceived organizational support and recruitment efforts (Grover and Crooker 1995), using perceived availability as a predictor limits the full scope of understanding the true effects of offering this kind of child care benefit.

Another common way researchers have made conclusions about employer-sponsored child care is by bundling it with other child care benefits (e.g., subsidies, referral assistance, etc.) or broader family-friendly benefits (flexible work arrangements; e.g., Perry-Smith and Blum 2000; Wang and Walumbwa 2007). This is a worthwhile approach for organizations and individuals who are interested in seeing the larger impact of work-family related offerings, but does not allow the effects of on-site centers on employee outcomes and attitudes to be isolated. The prevalence of investigating employer-sponsored child care through perceived availability and bundling methods represents additional methodological challenges to answering the question of how having child care on or near an organization helps women transition back to and remain at work.

A more universal issue with previous studies on the effects of on-site child care is the frequency of cross-sectional data, which prevents researchers from making true causal claims. Although cross-sectional designs have provided a wealth of information regarding the impact of employer-sponsored child care on positive work outcomes for working parents and their employers, alternative methodologies

are encouraged in order to further expand our understanding. Quasi-experiments using vignettes or longitudinal designs built to obtain lagged effects are examples of alternatives to cross-sectional research. A recently conducted longitudinal study on employed postpartum mothers indicated that both job and home spillover are associated with maternal mental and physical health (Grice et al. 2011). However, the influence of child care on this relationship was not measured, reflecting a need to consider type of child care as a control variable or third variable. Furthermore, there are a number of mediators and moderators that have yet to be explored, but may play a large role in the results from research examining employer-sponsored child care.

Recommendations and Future Research

Given the methodological challenges discussed above, as well as the need to replicate existing findings, the topic of on-site child care and its impact on working parents is ripe with opportunities for future research. The topic of generational differences has received a considerable amount of attention in both the popular press and academic literature over the past several years. Although there is still no true consensus on if and how the Millennial generation (born 1980–2000) differs from the other generational cohorts (Deal et al. 2010; Ng et al.2010; Twenge and Campbell 2008; Twenge et al. 2010), particular trends have been highlighted. For example, several sources have found Millennials place increased importance on work-life balance and expect their employers to help them to achieve it (e.g., Beutell and Wittig-Berman 2008; Glass 2007; Howe and Strauss 2007). As more Millennials graduate college and enter the workforce, it will be important to track how organizations adapt to meet their supposed high expectations, perhaps increasing their dependent care supports including employer-sponsored child care and/or emergency back-up care.

On the other hand, new research from Friedman (2013) finds that the rate of college graduates who plan to have children has dropped from 78 % in 1992 to 42 % in 2012. According to Friedman, the anticipated conflict between work and family does not directly affect a women's plan to have children (2013). It seems that women have accepted that the conflict is inevitable in contrast to the "have it all" mantra that has been preached by previous working women (e.g., Bertrand 2013; Slaughter 2012). However the anticipated conflict does play a role in their future career decisions as they relate to family. Women graduating in 2012 were more likely to agree that being a parent would limit their career success compared to female graduates in 1992 (Friedman 2013). This pragmatic attitude toward work-life balance is important for researchers to begin studying, especially as it relates to the family-friendly benefits offered by organizations. While companies should continue to improve the policies and practices such as employer-sponsored child care, which encourage women to stay and grow in the workplace, they should

also recognize the inescapability of work-family conflict and make efforts to ensure working mothers feel empowered to achieve the career they desire.

Related to the recommendation of studying the newest generation of workers and their perception of employer-sponsored child care, longitudinal research is necessary to gather causal data on the circumstances that cause mothers to periodically rethink their decision to stay at work over the course of childhood. Although a cross-sectional study asking working mothers retroactively what types of child-related things caused them to consider leaving work is a good first step in this research, it restricts the population to women who ended up staying in the workforce or have returned and lacks women who have decided to remain at home. A methodologically sound study following new mothers as they return from maternity leave until their child graduates high school would truly give organizations insight into the needs and thoughts of a working mother. The results of such a study would likely translate into rationale for some degree of employer-sponsored child care, among other family-friendly benefits.

By uncovering the common issues and obstacles of working mothers, organizations can better plan and execute employer-sponsored child care, yet they can also benefit by customizing the child care center or program to fit their business strategy and workforce needs. Many organizations partner with community child care centers or may haphazardly design a work-site center to accommodate the working parents they employ. Although research conducted on these types of arrangements may see a positive impact on employee and organizational outcomes, it is more likely that there is room for improvement.

Common examples of misalignment between employer-sponsored child care and business strategy are a mismatch in the work shifts of employees and the hours a partnered child care center is open, or tuition rates that are too expensive for the majority of employees. These kinds of practical considerations may be costly to the organization, both financially and attitudinally. Future research may be warranted to investigate how the impact of employer-sponsored child care may differ for organizations that purposefully designed and customized their center to meet organizational needs versus organizations who took advantage of an existing center in close proximity to the worksite. This type of research would provide insight to executives who are interested in knowing which factors influence positive change for their employees.

A final recommendation for future studies of employer-sponsored child care is to consider the outcome of employee resiliency. Although frequently associated with the traditionally studied employee attitudes of job satisfaction and employee engagement, resiliency reflects an ability to bounce back or recover from stress. Resiliency was originally used to describe "surviving employees" of corporate restructuring or downsizing (Luthans 2002), but is also an important characteristic for all employees and organizations. Given the research from Friedman on the perceived inevitability of work-family conflict, organizations may want to examine how child care and other dependent care supports promote employee resiliency in addition to general job satisfaction. The former may have a greater impact on organizational culture, as well as the bottom line. Previous research on resiliency

has shown it to be negatively related to a variety of health outcomes (e.g., depression, fatigue, physical symptoms) when tested on both healthy and ill samples (Smith et al. 2008). By connecting employer-sponsored child care to employee resiliency, organizations may be able to make a greater impact on lives of their employees and the longevity of their workforce.

Conclusion

Given the high rate of women participating in the labor force, it is clear that mothers are making decisions about who will care for their children if or when they return to work. The cost, quality, and availability of child care plays a large role in this decision making process. Although many families are fortunate to have grandparents or other relatives in the area to watch the children while they work, a large number of parents rely on formal and informal child care through centers, family child care homes, and in-home care, such as nannies. Often parent-employees also have educational and experiential goals for their children that cannot be met by informal caregivers. Organizations offer child care centers as a way to help employees better manage their work and family responsibilities, as well as to potentially improve performance and retention rates. However, a variety of additional factors identified in the academic literature warrant further research. Future research would benefit from an increased focus on how employer-sponsored child care and other family-friendly benefits impact future generations and additional employee outcomes, such as resiliency, as well as utilizing more longitudinal research designs to truly understand the impact of employer-sponsored child care.

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The Other Half: Views of Fatherhood in the Organization

Jamie J. Ladge, Beth K. Humberd and Jeanne McNett

Abstract This chapter addresses fatherhood in the context of the workplace and family. We begin with a review of the current literature on fatherhood to consider the primary theoretical perspectives that are relevant to understanding men's transitions to fatherhood: gender, identity, and work-life integration. Then we discuss the transition to fatherhood in the context of various fathering views, organizational life, and family life. We also discuss methodological considerations in studying the transition to fatherhood both in relation to mothers and independent of mothers. We conclude with a summary of practical implications and recommendations for organizational action.

Keywords Involved fathers · Identity · Work-life integration

While most of the focus on parenting concerns in the workplace has been largely on women's experiences as they transition to motherhood, navigate maternity leave and venture back to work, fathers have often been left out of the discussion. Only recently have scholars in management, sociology, law and psychology disciplines begun to draw attention to the experiences of fathers in the workplace (e.g., Burnett et al. 2011; Cooper 2000; Dowd 2000; Gregory and Milner 2011; Harrington et al. 2010, 2011; Humberd et al. 2014; Levine and Pittinsky 1997). With more working mothers advancing in their careers, fathers need to become part of the work-family conversation as they take on more equal parenting. In particular, as men are now expected to be more involved, nurturing and present in their children's lives (Burnett et al. 2011; Gregory and Milner 2011; Wall and Arnold 2007), they too have to navigate the work-family struggles in relation to the transition to parenthood. The stigma of being a working parent is beginning to be shared among mothers and fathers (Mundy 2012). Therefore, in this chapter, we focus specifically

J.J. Ladge (✉) · J. McNett
Northeastern University, Boston, USA
e-mail: j.ladge@neu.edu

B.K. Humberd
University of Massachusetts, Lowell, USA

on the other half of the equation in women's transitions to motherhood—the fathers who take this journey alongside of them.

In the work domain, fathers face a number of unique circumstances that are distinct from those of mother's transitions to becoming a working parent. First, men's increased involvement in parenting places them at odds with the notion of the "ideal worker," one "whose life centers on his full-time, life-long job, while his wife or another woman takes care of his personal needs and children," leaving him free to focus with commitment and dedication on his work (Acker 1990: 149). While research has long acknowledged that images of the ideal worker are problematic for women (Williams 2001), men now too face the challenge of role conflict as they desire to be involved as fathers and as workers. Secondly, while research documents the scrutiny and stigma that women experience as mothers in the context of work, recent work suggests men may experience both challenges and benefits as fathers in the context of work (Cooper 2000; Humberd et al. 2014; Ranson 2001). Finally, while work-family policies and programs have become the norm in organizations today, men are often constrained from utilizing such benefits because of the greater penalties they suffer—formally (in terms of pay) and informally (in terms of stigma and backlash)—for doing so (Allard et al. 2007; Coltrane et al. 2013; Halrynjo 2009; Rudman and Mescher 2013).

Many studies explore the work-family conflict concerns of both mothers and fathers and have added greatly to our knowledge of this process (e.g., Hill 2005; Winslow 2005; Milkie and Peltola 1999; Bond et al. 1998). Yet, our knowledge about how men navigate the transition to fatherhood in the context of their organizations and careers is still relatively limited. In particular, with changes in the structure of the traditional family, women's increased presence in the workforce, and the rise in dual-career couples, it has never been more important to understand the changing expectations on both mothers AND fathers. Therefore, in this chapter, we bring attention to the complexities associated with how men experience fatherhood in the context of their work and family contexts.

This chapter is organized as follows. First, we first review the current literature on fatherhood to consider the primary theoretical perspectives that are relevant to understanding men's transitions to fatherhood. Next, we discuss the transition to fatherhood in the context of various fathering views, organizational life, and family life. We also discuss methodological considerations in studying the transition to fatherhood both in relation to mothers and independent of mothers, which may foster future research directions. Finally, we conclude with a summary of practical implications and recommendations for organizational action.

Theoretical Perspectives Relevant to Fatherhood

Three primary theoretical lenses are relevant to the study of fatherhood: gender, identity and work-family integration. In this section, we review this literature in order to draw insight into men's experiences navigating the transition to fatherhood.

Fatherhood Through a Gender Lens

In the past few decades, scholars have recognized that men's gender identity and masculinity is important area that is worthy of scholarly attention in its own right (Ely and Meyerson 2008). For individual men, masculinity refers to how the expectations and norms of the gender system are incorporated into how men see and present themselves as *men* (Meyerson and Ely 2010). At a broader level, hegemonic masculinity considers the dominant view of masculinity to which men are compared to and judged by others in any given time and place (Connell 1987). Relevant to considerations of fatherhood, then, is the idea that assumptions about men as workers have traditionally been encompassed within this hegemonic masculine standard; that is, providing for their family is something that men are expected to do as fathers (Townsend 2002). Yet, as more women take on positions of power and leadership and men and women share in the home-based responsibilities, this dominant view of masculinity may be shifting. Recent work highlights the discourse of "involved fatherhood", which suggests that men are more involved in fathering today than ever before (Harrington et al. 2011; Wall and Arnold 2007). In contrast to the traditional narrative of the "breadwinning father" who is primarily expected to be a financial provider for his family, "involved fathering" suggests that the ideal father is one who "should be flexible enough to both earn a wage and be able to help fix dinner and read a bedside story" (Burnett et al. 2011: 164). Yet, even if such involvement is espoused as part of the expected standard for today's fathers, scholars suggest there is little evidence of whether and how individual men actually incorporate these new expectations into their fathering practice (Coltrane 1996; Gregory and Milner 2011; LaRossa 1988; Loscocco and Spitze 2007). Thus, although newer perspectives of fathers are emerging, traditional notions of fathers as providers still exist and seem somewhat resistant to change, particularly given broader institutional structures and arrangements that entrench such traditional expectations (Gerson 2009).

Importantly, as all hegemonic standards are necessarily situated within a particular time and place, it is notable that this discourse of "involved fatherhood" is primarily a Western conceptualization associated with white, middle-class men (e.g. Cooper 2000; Finn and Henwood 2009; Griswold 1993; LaRossa 1988; Plantin 2007; Plantin et al. 2003). Research suggests that it is among this group of men— well-educated, working professionals—that disparate models of fatherhood are most evident (Ranson 2001). As Griswold (1993) suggests: "*For these men, pushing a pram becomes less of the sign of a wimp than a public symbol of their commitment to a more refined, progressive set of values than those held by working-class men still imprisoned by outdated ideas of masculinity* (p. 254)." In addition to the United States, other developed nations with rising numbers of dual career couples (e.g. United Kingdom, Sweden) similarly discuss the degree to which men are grappling with the question of how to be both a good worker and involved father (Burghes et al. 1997; Plantin 2007). This population of men in particular faces multiple and potentially conflicting dimensions of masculine standards.

Given these conflicting expectations, recent work considers more specifically how fathers experience the "involved father" discourse in the context of their work (e.g., Cooper 2000; Miller 2010; Ranson 2001). Collectively, this work discusses men's decisions to utilize flexible work arrangements (Bailyn 1993; Shockley and Allen 2012) and reduce their schedules (Vandello et al. 2013), how men behaviorally manage the competing domains of work and family (Greenhaus and Beutell 1985), and how paternity leave can enable a more involved fatherhood (Miller 2010). Beyond this, scholars have recently begun to consider what it means to be fathers in the context of their particular work and home lives from an identity lens, which we discuss next.

Identity and Role Transitions

Identity has been an important construct in understanding role transitions, which involve both the psychological and physical engagement and disengagement between roles (Ashforth et al. 2000), and thus is a relevant theoretical perspective to considering the transition to parenting. Broader research on role transitions focuses on role transitions involving permanent and sequential movement (e.g. leaving an old job) of one role to another (e.g. transitioning into a new job) (Ashforth 2001). Additionally, other research on role transitions focuses on more frequent and recurring transitions between two distinct role identities, such as between home and work, (Ashforth 2001; Ashforth et al. 2000). Recent work on cross-domain identity changes considers how the transition to a new identity alters an existing identity, such as when becoming a mother shifts one's professional identity (Ladge et al. 2012). We expect that much of these cross-domain effects would in some respect be similar in men's transitions to fatherhood but that they may have their own unique experiences based on gendered norms and expectations which we explore later in the chapter.

When a transition involves taking on a new role, an individual is likely to be engaging in a process of figuring out who they are and want to be in that role (Ibarra 1999). Although identities may stabilize as the transition process is completed, events or cues from the environment may trigger destabilization or shifts in the meaning or content of a given identity (Ashmore et al. 2004; Ladge et al. 2012). This has been shown to be the case for women as they initiate the transition to motherhood (Ladge et al. 2012; Ladge and Greenberg forthcoming). However, less scholarly work has focused in-depth on men's transition to fatherhood even though men too may experience cues or events that trigger a destablization or questioning of their identity. For example, when their spouses return to work, being a father may take on a new meaning as there is now a shared responsibility assumed by both parents in caring for an infant.

Given that men must navigate gender expectations of what it means to be a man, a worker and a good dad, they, too, likely experience identity shifts as they transition to fatherhood. In line with this, a recent study finds that that new fathers hold

multiple images within their fathering identities—provider, role model, partner, and nurturer—which are invoked via various norms and expectations from their work and home lives (Humberd et al. 2014). This research suggests that new fathers, particularly those who have working spouses, are pushed and pulled in many different directions as they take on the fathering role amidst broader shifts in cultural ideals of fathering (Humberd et al. 2014). For example, if a father desires to be heavily involved in the care of his child but the demands and flexibility of his work (e.g., working long hours, traveling, and/or staying late in the office) prevent him being the kind of father he aspires to be, he must redefine who he is and can be as a father. In a similar vein, other work suggests that some mothers prevent their husbands from participating in the primary caregiving activities, a concept known as maternal gatekeeping (Allen and Hawkins 1999). This too may be a force for altering a man's self-construction as a father. This push and pull that men experience may explain why so many fathers are experiencing greater work-family conflict than ever before (Galinsky et al. 2013). Given this, the final stream of literature we explore next focuses on work-family integration issues as they relate to men's transitions to fatherhood.

Work-Family Integration

Work-family research in the management and organizational research domain has proliferated over the past several decades (Eby et al. 2005). Several studies point to distinct differences in the effects of work on family and of family on work domains for men and women. Evidence is mixed as to whether men and women experience different levels of work-family conflict, with some scholars finding minimal differences (Duxbury and Higgins 1991; Eagle et al. 1997) and one study finding that men report higher levels of work-family conflict than do women (Parasuraman and Simmers 2001). However, some researchers have found that, although mothers and fathers who experience work-family conflict have lowered job satisfaction, the long-term effects of work-family conflict were greater for women then they were for men (Grandey et al. 2005). We surmise that this may be a result of the identity threat that mothers experience over men in their workplace in response to societal roles and expectations (Pleck 1977).

More recent studies looked at the importance and prioritization of work and family among mothers and fathers. These studies suggest that individuals who are more family oriented are more likely to experience increased work-family conflict, which will have negative career implications (Carr et al. 2008). Thus, fathers who are less traditional and more involved would be expected to experience greater levels of work-family conflict. Conversely, the integration of work and family domains has also been shown to influence one another positively, through work-family facilitation (Frone 2003), but these outcomes vary by sex (e.g. Duxbury and Higgins 1991; Rothbard 2001) such that men's work enriches family while women's family enriches her work (Rothbard 2001). However, these studies are limited in that they do

not consider differences in parenting values and expectations. Further, the samples in these studies tend to be homogenous focusing on men in professional and managerial roles where expectations may differ from those men working who may be employed hourly or engaged in shift work. Lastly, the ages of children must be considered because of important differences in fathers' experiences based on their children's ages. For example, fathers with children ages 6 and under spend more than twice as much time with their children than fathers with children between the ages of 6 and 18 (http://www.bls.gov/tus/tables/a6_0711.htm). Thus, there are likely systematic differences in fathering views between new dads and more established fathers.

Lastly, there is a body of research that explores the ways in which both work and family factors may inhibit men's desires to be more involved parents (or mothers' desires to be less involved at home). For example, a number of personal and organizational factors have been linked to a father's attitudes and experiences of work and family conflict (Duxbury and Higgins 1991; Greenhaus et al. 1989; Loerch et al. 1989; Wallace 1999). First, having a working spouse may pose a threat to a husband's work and life satisfaction (Staines et al. 1986). It is no surprise that there is greater work-family conflict for men in dual-career versus traditional marriages (Higgins and Duxbury 1992). Perhaps having a working spouse lessens the time men can devote to work, thereby weakening the masculine, bread-winning self-perceptions that subsequently lower work and life satisfaction (Eby et al. 2005; Parasuraman et al. 1989). It is also not surprising that men who are highly invested in their careers, who work long hours and long days, and who have great work demands tend to have higher levels of conflict (Carlson and Perrewé 1999; Greenhaus et al. 1987; Nielson et al. 2001; Shamir 1983; Parasuraman and Simmers 2001; Tenbrunsel et al. 1995; Yang et al. 2000; Ford et al. 2007). Lastly, supportive organizational workplaces and supervisors aid in reducing work-family conflict for men and women (Allard et al. 2007; Carlson and Perrewé 1999; Greenhaus et al. 1987; Thompson et al. 1999). In dual career couples, high work involvement and less schedule flexibility was strongly related to work family conflict for both men and women, yet greater family involvement predicted women's work-family conflict but not men's (Hammer et al. 1997). However, working mothers are more likely to restructure their work conditions to meet family needs than are their male counterparts (Karambayya and Reilly 1992), and consequently benefit more (both psychologically and logistically) from supportive work-environments (Staines and Pleck 1986).

Together, this scholarly work demonstrates differences in work-family experiences among men and between men and women, and underscores the perception that men are not immune from experiencing conflict and pressures between the two domains. However, it is important to note that much of the aforementioned research was conducted a number of years ago, begging the question of to what extent these dynamics still hold for today's men and shed light on current issues. In 2011, the Families and Work Institute published a report titled "the New Male Mystique" in which they noted that work-family struggles have worsened for men over the years, making the issues facing men across work and family domains particularly salient

for individuals and organizations (Aumann et al. 2011). In their study, they discuss: "*although men live in a society where gender roles have become more egalitarian and where women contribute increasingly to family economic well-being, men have retained the "traditional male mystique"—the pressure to be the primary financial providers for their families. As such, men who are fathers work longer hours than men the same age who don't live with a child under 18. However, men are also much more involved in their home lives than men in the past, spending more time with their children and contributing more to the work of caring for their homes and families. In other words, men are experiencing what women experienced when they first entered the workforce in record numbers—the pressure to "do it all in order to have it all.*" (Aumann et al. 2011; p. 1)

Views of Fatherhood and Implications for the Transition to Parenthood

The aforementioned review of the literature calls attention to the enduring conflicts inherent in expectations of fatherhood. While notions have evolved from the traditional father as a disciplinarian and breadwinner that is absent much of the time, to a more contemporary father that is involved in daily family life and is emotionally available and actively parenting, ideals still abound from all perspectives. What, then, does this mean for men's transition to fatherhood today? Here we explore in more depth the expectations associated with these varying views of fathering, and later, the implications they have for individual men's transition to fathering in relation to their organizations and families.

The traditional model of fatherhood in the context of the organizational life has been described in various ways. The most oft-used description of traditional fathering is "*breadwinner*", with its appealing aptness—bread, the very staple of life is combined with victory. The view of father as breadwinner links to a "provide and reside" model of fathering, which assumes that fathering exists within a marriage-like relationship comprised of heterosexual partners (Aryee and Luk 1996; Coltrane 1997). Neatening up reality by ignoring the many modifications to the family structure that result from family changes, a view of father as breadwinner does not consider the impacts of separation, divorce, remarriage, cohabitation, and single parenthood. The term "*organization man*", which draws from Whyte's eponymous study (1956), has been used to capture the domestic absence of traditional fathers, describing them as: "the ones of our middle class who have left home, spiritually as well as physically, to take the vow of organization life, and it is they who are the mind and soul of our great self-perpetuating institutions." (Whyte 1956: 3). In a more recent article, fathers are depicted as "*ghosts*" (Burnett et al. 2013) to traditionally ignored paternity in the workplace. As these terms suggest, traditional views of fathers involve gender roles that divide work and home life into male and female spheres. Thus, within an organizational context, such views remain

consonant with the concept of "the ideal worker" as one who is unencumbered by outside obligations and can be fully and singly devoted to his work (Williams 2001).

In contrast to these traditional images, the evolving view of fatherhood that has received attention in recent popular media and some scholarly work is referred to as the "involved father." This view of fathering modifies the gendered assumptions underlying the traditional depictions discussed above. In popular media we now see advertisements of more "involved fathers" taking their children to school, dealing with Clorox in the laundry, getting up at midnight to eat cookies with their kids, and changing diapers. Further, the fathers depicted in television programs such as "Modern Family," "Parenthood," and "Up All Night" offer viewers multiple approaches to fatherhood beyond the traditional depiction of Ward Cleaver, the father in "Leave It to Beaver." These changes in popular accounts echo the desired shift in broader discourses toward a more involved sense of fathering.

Russell and Hwang (2004) define involved fathering in terms of three dimensions: engagement with the child (both time and affective aspects), accessibility (being available to the child), and responsibility. Such fathers are emotionally present for their children (Cabrera et al. 2000; Pleck and Pleck 1997; Burnett et al. 2011), and are increasingly involved at home (Bianchi et al. 2006; Burnett et al. 2011; Gregory and Milner 2011; Wall and Arnold 2007), contributing, for example, to the cooking of meals, reading of bedtime stories, and coordination of children's drop off and pickups at daycare. Importantly, the involved father shares responsibility for *both* the domestic life of his family *and* for its economic well-being. Involved fathering thus suggests that today's father may be liberated from the traditional responsibility of shouldering the burden of the economic responsibilities on his own as he presumably now shares this responsibility with a working spouse.

Given these shifting perspectives on fatherhood, how might the transition to fatherhood for individual men differ, depending on the dominantly held fatherhood perspective? Indeed, men's degree of involvement will vary in relation to the work status and aspirations of their spouses. For example, a non-working spouse who is able to devote much of her time to engagement with the child is likely to reduce the father's involvement, while a working spouse who is fully engaged with her career is likely to lead to a relatively more engaged father (Lamb 2000). Further, the liberation from traditional notions of fathering could involve a more difficult transition to parenting if the expectations for fathers are aligned more with typical expectations for women in the parenthood transition. Specifically, being a more involved father often means sharing in the parenting responsibilities (Doucet 2004), which means that personal and work-related adjustments are inevitable. Making these adjustments will likely challenge men to think more intricately about all of their life roles than they have traditionally had to do in the past. Thus, involved fathers today are likely to experience greater role strain in both their work and family domains (Galinsky et al. 2013). On the other hand, fathers who remain in a more traditional role (likely because they have a spouse who remains in the home full-time) may experience the transition to parenting as a smoother process because they are absolved of much of the primary parenting responsibilities, unless their

spouse expects more involved parenting from them. Yet, there may still be challenges in this transition for traditionally-oriented fathers, because they now bear even more responsibility for supporting their family. In some respects, these fathers may resolve any guilt they feel by using their breadwinner status as an emotional shield of defense—that is, their work becomes an excuse for what may be perceived as a lack of involved fathering. Together, these ideas emphasize that new fathers do not make the transition to fatherhood in a vacuum; rather their work and personal contexts, as well as their own view of fathering will shape the transition.

Regardless of the dominant fatherhood perspective, the transition to fatherhood is a period of change, for men may begin viewing themselves differently and viewing others around them differently, as well. As Palkovitz (2007) points out, "*As men make the transition to fatherhood, they take on a new status not only in their own eyes, but their families, friends, coworkers, and neighbors view fathers differently than they do men who are not fathers. Fathers are regarded as having greater responsibility and therefore are expected to exhibit different qualities and character than men who are not fathers…As they become fathers, men are challenged to rise to a new, higher level of functioning in relationships, work, and personal conduct* (2007: 28)." Given these various views and experience of fathering, we explore next how becoming a father is experienced in relation to work and home life.

Fatherhood Transitions in Relation to Organizations

As we have already established, it is evident that for middle-class men in Western societies, being a good father and a good worker are part of what it means to be a man (Townsend 2002). Within this, the concept of "ideal worker" suggests a worker whose primary focus is allocated to and identity derived from work involvement (Williams 2001). Research has addressed the negative impact of expectations tied to the ideal worker (e.g., Hochschild 1997; Williams 2001, 2010), and some studies have begun to focus on the experiences of working fathers in light of the shifting ideologies of fathering from traditional to involved (e.g. Cooper 2000; Humberd et al. 2014; Miller 2010; Ranson 2001). Yet, despite some recent attention, we still know surprisingly little about the experience of fatherhood in the context of work. Further, little seems to have changed within organizations to support the shifting expectations of fathering. Though depictions of the involved father abound in popular culture, it seems to be less of an experienced reality within the organization. In the U.S., for example, there is no national-level requirement for paternal leave, and only 17 percent of organizations offer paternity leave (SHRM 2015). Further, when paternity leave is offered, it is usually, at most, two weeks' time, and studies confirm that most fathers take one to two weeks off after the birth of their child (Harrington et al. 2010). From a global perspective, only two major nations offer no paid paternal leave: the U.S. and China (World Policy Forum, Catalyst 2012). Other countries appear to more readily acknowledge the need

for leave during the shift to fatherhood. For example, many European countries require organizations to offer generous paid leaves to their male employees upon the birth of a child, such as Sweden at 61 weeks, Germany at 52 weeks, Norway at 48 weeks, the U.K. and France at 28 weeks, and Italy at 26 weeks. Additionally, Canada offers 38 weeks. Although in the United States no federal requirement for paternity leave exists, some states—such as California, New Jersey and Rhode Island—recently have required organizations to offer paid paternity leave benefits (Catalyst 2013). There is also the option of unpaid paternity leave, but such a choice reduces family income at a time when expenses increase, a difficult decision for a family in transition to parenting to make.

In addition to paternity leave and other formal policies, research suggests that organizational culture also plays a role in the gap between the ideals of involved fatherhood and organizational reality. Even when there are parental leave and work-family policies in place, fathering is often not recognized as a serious and time-consuming role in the informal culture of the organization. For example, studies report on the backlash faced by fathers who have taken parental leave (e.g., Wayne and Cordeiro 2003). One study found that men who took leave for birth or eldercare were rated more negatively than their male counterparts who did not take leave. The same study also indicated that male evaluators were more judgmental of male leave-takers than were female evaluators (Catalyst 2012). Other studies similarly demonstrate that men are perceived as poor workers and are rewarded less when they request family leave or flexible hours to care for a newborn child, or when they report high levels of caregiving (e.g., Berdahl and Moon 2013; Vandello et al. 2013). Consistent with these research findings, a recent *Wall Street Journal* article addressing the issue of why men do not use available paternity leave suggests that they fear losing status at work, and that they are influenced by lingering stereotypes about the traditional father's role in a family (Weber 2013). Therefore, more typically, men end up adopting informal or stealth methods for managing their work and family demands (Harrington et al. 2010; Reid 2011). For example, a qualitative study of new fathers found that when these men used flexibility to be available for childcare responsibilities (e.g., drop or pick-up at daycare; attending a child's physician appointment), they did so by informally asking their managers on occasion or in a more secretive manner, rather than via a formal arrangement (Harrington et al. 2010).

Research suggests that age plays a role in how fathers view their own responsibilities as fathers, with older fathers (40 and up) significantly more likely to see their responsibilities as fathers in a traditional breadwinning sense than those under the age of 40 (Harrington et al. 2011). According to the National Study of the Changing Workplace (Galinsky et al. 2013), women and men's views about work and family roles converged to a point where they were not significantly different. These results were strikingly different in 1977 suggesting drastic generational shifts in attitudes and values around parenting. The study also revealed the most significant shift occurred in men in dual career relationships. Additionally, it was revealed that millennial fathers spend more time with their children today (4.1 average hours per week) as compared with older generations of fathers

(2.4 h per week) (Galinsky et al. 2013). Perhaps as newer generations of "millennials" grow in influence in their organizations, the stigma placed on the use of paternity leave and other flexible arrangements may be reduced.

Collectively, existing research emphasizes that fathers are involved in a continuous series of shifts as they transition to fatherhood and navigate the formal and informal context of their organizations as fathers. Reflecting this, a recent study of new fathers discusses the ways in which organizations can both enable and constrain men's new roles as fathers as men try to figure out who they are and can be as fathers in the context of their work (Humberd et al. 2014). Father involvement has been operationalized as time-based, that is the number of hours spent during the work-week on childcare (Hill 2005; Raley et al. 2012). Complicating this are the espoused shifting of ideals toward involved fathering, which are not fully realized in day to day life of fathers and organizations (Mescher et al. 2010). Thus, as men transition to fatherhood in the context of their work, they may want to be more involved at home, yet they find themselves in organizations where the traditional ideal of fatherhood is deeply embedded, if not in the formal policies, then in the culture.

Fatherhood Transitions in Relation to the Family

One of the more significant changes men make when they become fathers is reducing involvement in leisurely and social activities so that they can spend more time with their kids (Palkovitz 2007). Research suggests that father involvement is positively related to the psychological well-being of other family members. One such study found that spouses and children of involved fathers report higher levels of health and well-being (e.g., Twamley et al. 2013). Another study found that daughters who grew up with involved fathers had higher levels of life satisfaction and self-esteem (Allgood et al. 2012). There are also several important spousal benefits. When men share in the caregiving and other family responsibilities, it allows women to advance in their careers, which consequently benefits organizations in their employee retention efforts (Mundy 2012, 2014). Many organizations continue to struggle with what's been coined the "hidden brain drain" where highly successful women opt out of their careers to care for the children (Hewlett et al. 2005). Having involved fathers may also offers societal benefits as it shifts the stigma and gives way to shared parenting habits while reducing the second shift burden that tends to fall largely on mothers (Hochschild 1989). Fathers themselves benefit and reportedly live longer, healthier lives than non-fathers Gray and Anderson (2010).

Just as mothers have to navigate the transition to motherhood, fathers face similar challenges but often in relation to his spouse's work status. Men's transition to fathering involves a process of learning to navigate the disparate fathering images that are often shaped by personal and organizational contexts (Humberd et al. 2014). There are some aspects of men's transitions to parenthood that are similar to

those of women, but differences exist as well; and consideration of these differences could be addressed through an array of methodological considerations which we describe next.

Methodological Considerations in Studying the Transition to Fatherhood

Despite the vast amount of work that is relevant to understanding men as fathers, current research on fatherhood transitions, particularly in relation to organizational life, is quite limited. Further, the work that does exist focuses on samples that lack demographic and racial diversity, and primarily consider the experience of fathers that are middle-to-upper class, highly educated individuals, and working in professional roles. Although it is argued that these individuals may be the most subjected to expectations of involved fathering, there are likely important differences in the transition experiences of fathers from diverse demographic backgrounds and working class occupations that need further exploration. Additionally, cross cultural samples are limited, as most recent work on fathering in the workplace is conducted within particular countries, and even regions of those countries. Further, the above discussions emphasize that fathering is a context sensitive role that is likely experienced differently across the domains of home and work. Therefore, methods should be designed to gain insight from a variety of contexts (both at work and home related).

Another significant methodological concern with existing research on fathers is that it tends to be single source data, most often reported by the fathers themselves. Specific to fathers' time-based involvement, it may be important to consider a fathers' time spent with children in light of the spouses' involvement. Further, research might better consider the implications of what it means when the father feels as though they are very involved in the family but the rest of his family feels that he could be more involved, based on competing reports of a fathers' time-based involvement. Overall, future research could usefully take a family "systems" perspective in an effort to gain perspective from the entire family unit as opposed to a single source of self-reported data.

Perhaps most importantly, to truly study the *transition to* parenting requires a longitudinal design that can capture the evolution of various stages in the transition process, both individually and societally. Specifically, longitudinal and multi-method research designs would be necessary to capture the changing nature of fatherhood in relation to changing workforce demographics. For example, qualitative studies could be used to capture the individual level experience men face as they transition to parenting and then as they experience subsequent transitions (additional children, milestones, etc.). An understanding of how men mentally prepare to become fathers and the capturing of any personal changes they may experience when anticipating the birth of a child may also help. Yet, while such a

design allows for the capturing of the evolution of fathering self-views and experiences over time, one of the key issues is retaining participation over time. Additionally, quantitative studies could be used as a complement to track demographic trends and factors that influence different models of fatherhood such as organizational (e.g. impact of the use of paternity leave, organizational culture) and personal factors (e.g. influence of spouse, own parents, other relationships and support systems), as well as the shifting discourses of fathering at a broader level. Lastly, consideration of different work scenarios of fathers and the role industry, job type and other factors play in influence self-views of fathers and the transition experience would be important. An understanding of the difference in men working full-time, part-time and those who decide to stay at home full-time would be worthwhile. Another consideration is to explore the timing of becoming a father. Most of the current literature on timing childbirth is focused on mothers, but men play a large part in making these decisions.

Taking together, we have outlined several areas of opportunity in expanding our understanding of working fathers and the transition to parenting. Studying a range of demographic characteristics and occupations would serve organizations well in trying to determine the level of support that fathers need to be successful both at home and in their work roles. In particular, generational differences, race, sexual orientation and cross-cultural differences would provide insights into understanding factors that shape fathering ideals and the daily experience of fathering across competing ideals. Also, future research should seek to gain perspective on understanding differences among occupational choices of men and the extent to which they consider their work-family needs in making such choices. Lastly, we know little about the impact of having subsequent children for fathers. For example, do men experience a re-definition of fatherhood or further identity conflict upon the birth of a second child? How do children's age impact father involvement? Alternatively, how does career stage, industry, and organizational factors intersect with these familial factors? Much of the current research in this area pertains largely to women, and as such, there is much room to contribute to our understanding of the experience of fatherhood over the life course.

Practical Implications and Recommendations

Research has long supported the idea that perceived organizational support strongly influences job satisfaction (Holtzman and Glass 1999) and overall employee health and well-their organizations in order to feel confident, identify with their multiple roles, and successfully navigate the transition. When employees do not feel supported, they are more likely to lower their career aspiration and change or quit their jobs (Eisenberger et al. 2002; Allen et al. 2003). In addition, research shows that when fathers spend more time with their children, positive work outcomes are present, such as greater job satisfaction and commitment (Ladge et al. Working paper). Involved fathers also report reduced intentions to withdraw from work.

Turnover is costly to organizations, so it is in the organization's best interest to create conditions that allow fathers to be involved at home and at work.

While organizations have made significant progress in the quest for work-life balance, they need to keep pace with changing employee needs. Work-life programs need to continue to strive to be gender-neutral and flexible. The informal areas of many organizations offer the greatest yet most difficult to access opportunity for improvements. The informal social context at work plays a large role in shaping how men experience themselves as fathers in the context of their work. Leadership can attempt to influence these informal norms by showing the leaders' support for the organization's commitment to involved fatherhood. In addition to expanding flexible work programs, the organization can support the existence of informal arrangements, and fathering can be reconsidered in light of the needs of working fathers. Working fathers are the best source of information about the help they need.

Within most organizational cultures, there is still a strong cultural perspective that when men become fathers, little will change on the work front. However, as fathers take on more equal responsibility for care giving and other family responsibilities, workplace norms must change, as well. Organizations should recognize and appreciate that fathers may want to reduce their workload temporarily, based on their new responsibilities. Employers would do well to consider fatherhood as a more serious and time consuming role than they have previously.

In addition to having positive effects on men, enlightened paternal policies also support women. They increase a father's participation in domestic roles, support women's participation in the labor force, and promote gender equity across both domains (Mundy 2014). It is important that organizations recognize and appreciate that parenting has evolved to a dual-partner process. Much like many mothers, fathers should not be held to ideals that are based on outdated gender norms and expectations. Employers need to consider fatherhood as serious and time-consuming role.

In closing, we know little about how men experience the role of father with the organizational context. What we do know suggests that fatherhood is a time of tension and ambiguity in this context. Within the organization, there is pressure toward more traditional understandings of fatherhood, which conflicts with men's desire and need to be more involved at home,. At the same time, there is an opportunity for organizations to offset these effects through formal and informal support for the transition to fatherhood.

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Future Research Directions on Work and the Transition to Motherhood

Christiane Spitzmueller and Russell A. Matthews

Abstract A multipronged approach is proposed within this concluding chapter in order to propel research on work and the transition to motherhood. Specifically, the continued application of interdisciplinary approaches, the utilization of value and identity based theoretical frameworks, a stronger focus on long-term cost calculations, further intervention research, an emphasis on influential demographic differences, and additional cross-cultural research form crucial steps towards advancing research on the work-motherhood interface. Leveraging these inter-related approaches will allow scholars to promote individual and family well-being at the intersection of work and transition to motherhood, while defining practically and theoretically meaningful research questions that can inform public policy and management practice.

What are next steps scholars should consider regarding research on the transition to motherhood? What can researchers do to promote individual and family well-being at the intersection of work and transition to motherhood? How can we define practically and theoretically meaningful research questions that can inform public policy and management practice? We propose that further interdisciplinary approaches, the utilization of value and identity based theoretical frameworks, a stronger focus on long-term cost calculations, further intervention research, an emphasis on influential demographic differences, and additional cross-cultural research form crucial steps towards advancing research on the work-motherhood interface.

C. Spitzmueller (✉)
Department of Psychology, University of Houston, Houston, USA
e-mail: christianes@gmail.com

R.A. Matthews (✉)
Bowling Green State University, Bowling Green, USA
e-mail: ramatth@bgsu.edu

Interdisciplinary Approaches

Across the chapters in this book, it is apparent that the dynamic nature of pregnancy, identity, and family management require the integration of a myriad of complementary research perspectives. Ultimately, a broad, interdisciplinary focus that includes, among others, developmental psychologists, sociologists, political scientists, economists, and family systems researchers in research teams along with organizational behavior experts will lead to a richer and more comprehensive understanding of the transition.

For example, collaborative relationships that appear likely to result in significant research outcomes include networks of organizational behavior researchers and developmental psychologists. We argue that developmental psychologists can be instrumental in contributing to the definition of criteria within family systems and in the domain of child health and well-being. To this end, the integration of survey-based field research in organizational settings with experimentally oriented laboratory work that taps child outcome is likely to further the definition of meaningful outcomes (i.e. executive functioning performance, attachment) that can lead to positive long-term outcomes. These collaborative efforts can contribute to broadening the methodological skill sets of organizational behavior researchers to include observation-based research in children. Further, adapting methodologies commonly found in economics and political science, it may be possible to estimate financial costs and benefits of programs aimed at stakeholders involved in the transition to motherhood. For example, an interesting example for cost estimates of transition to motherhood include work on the costs of sub-optimal breastfeeding rates among U.S. parents. This research documents monetary savings, as well as potential to improve health outcomes among mothers and children using cost calculation methods (Bartick and Reinhold 2010).

Similarly, collaborations between organizational behavior researchers, family studies researchers and sociologists are likely to broaden methodological approaches. For instance, the breadth of qualitative research training common in sociology, anthropology and family studies graduate programs can enhance phenomenon-driven research on the work-motherhood interface. Mixed-method studies containing both qualitative and quantitative elements can lead to a richer understanding of nuanced aspects of the transition and gauge stakeholder perspectives comprehensively and directly (Matthews et al. 2011). We also encourage organizational behavior researchers to consider extensive collaborations with family studies scholars since theoretically relevant aspects such as family life course development frameworks, among others, receive more attention in family studies and sociology than in organizational behavior research.

Much is also to be gained from collaborative work with researchers who study employees' transitions to retirement (for relevant discussion see Matthews and Fisher 2012). Research in this area commonly utilizes dyadic designs where nested data structures are accounted for both empirically and theoretically. At the same time research on the transition to retirement utilizes norms, values, attitudes, other

individual differences and demographic information provided by both partners to investigate how well-being in retirement can be achieved (Gustman and Steinmeier 2000; Henretta et al. 1993; Moen et al. 2001; Smith and Moen 2004; Szinovacz 1996). The data structures analyzed in these studies are not dissimilar to what studies on couples' transitions to parenthood consist of, and book chapters as well as methodological information originating in the retirement literature can be translated and applied to research on work and the transition to parenthood. Of course, these approaches are most applicable to traditional family models (mother, father, child/children) than to single-parent households, which would lend themselves more to the use of diary studies and other experience sampling methodologies that can track individuals' well-being and health over time. Similarly, the field could benefit substantially from more extensive use of archival datasets, such as the ones collected by the National Institutes of Health. Although these data sets are not generally collected with work-family research in mind, they oftentimes contain demographic information that would allow for meaningful analyses based on parents' work experience and work characteristics.

Value and Identity Based Theoretical Frameworks

The concept of value and identity congruence are promising venues that can be explored as boundary conditions that impact whether outcomes of return to work are positive, neutral or negative. As highlighted in several chapters of this volume, scholars may wish to engage in research that allows us to better understand a mother's value congruence, and how to promote "fit" between her values, her personal environment and her work environment (for relevant discussion see, Kristof-Brown et al. 2005). In the past, the more prevalent approach to studying values was not necessarily in conjunction with parents' value systems (Cite). Extensions of research work on value and identity can determine whether women's perceptions of centrality of work and home roles play a role in whether and how "fit" with home and work environments is achieved (e.g., Edwards and Rothbard 2005). For instance, women who perceive their maternal role as more essential to their identities and values than their work role are likely to approach the transition differently and may, as a result, experience different outcomes. Simultaneously, congruence may not only be affected by maternal perspectives, but also by fathers' value-based expectations of women's roles in homes and work environments. Particularly research focusing on the entire life course could lead to meaningful additional theoretical and empirical insights.

Identity changes also occur in men's lives as they become fathers. Still, research on fathers' transitions to being working parents is relatively nascent. More research is needed that explores how, why and when fathers shift their roles and identities and integrate their new parental responsibilities in their self-concept. Again the notion of "fit" between values, identity and centrality of work and home roles could

be an exciting way to shed light on what can make fathers' transitions successful for them, their families and their employers.

Cost and Benefit Calculations

From the perspective of organizations considering an investment in family and mother friendly workplace policies, practices and benefits, short-term cost calculations oftentimes trump long-term benefit calculations. As a research field, we need to further contribute to research on organizationally relevant, long-term benefits of family and mother friendly workplace practices. Investigations of absenteeism, voluntary turnover, mental health outcomes, disability leave and health care costs can constitute outcomes in more research. Inclusion of these criteria will most likely provide further evidence-based support for the implementation of family and mother friendly interventions.

However, even if research on broader, organizationally relevant behaviors that tie directly to cost is conducted, its effects on organizational practice will be limited unless researchers take steps beyond publishing in peer-reviewed journals and books. Efforts to write practitioner-oriented papers, publications in trade and industry journals, talks at human resource practitioner oriented conferences may contribute to the availability of relevant research to professionals. This can, in return, enhance organizations' discussions of long-and short-term costs of not implementing family and mother friendly organizational policies and practices.

Cost-benefit calculations are also crucial if research on the work-motherhood interface should inform policy development at community, state and country levels. Ultimately, a long-term focus on benefits for families and societies is crucial and needs to supplement more short-sighted of a focus on immediate costs of family-friendly policies to employers, communities, states and national budgets. Similar to the much-needed expansion of outreach to human resource practitioners and other organizational stakeholders, researchers interested in affecting outcomes for organizations, mothers and families may also need to proactively engage political decision makers. The development of evidence-based recommendations for dissemination to political decision makers can form one step. Another step may constitute the dissemination of research findings in more popular press outlets with the ultimate goal of informing both decision makers and voters about the costs and benefits of family and mother friendly workplace practices and policies.

Intervention Research

Even though intervention research has been a stronger focus in the last few years than in prior decades, research on the interface of work and the transition to motherhood needs more systematic, methodologically rigorous intervention

research. Intervention research in organizations is inherently challenging, irrespective of the content domain. Research on the work-motherhood interface poses additional challenges. First, most small, mid-sized and large organizations only have a relatively small number of pregnant women and mothers transitioning to parenthood at any one time. In many organizations, low sample sizes at the outset can lead to low statistical power in quantitative intervention research, rendering sample sizes of pregnant women and mothers in most organizations to be limitations on what intervention research can accomplish. Ideally, the formation of organizations organized in a consortium for research at the work-motherhood interface could alleviate the lack of organizational settings available for rigorous intervention research. At the same time, qualitative intervention research schemes rely less on large sample sizes and control-group designs. Thus, the utilization of qualitative intervention research may constitute an option in organizations where sample sizes of pregnant women and mothers would be insufficient to facilitate more systematic studies.

Second, intervention research oftentimes withholds or delays benefits to subgroups of the study population in order to gain a more systematic understanding of benefits and effects. Oftentimes, organizational stakeholders are uncomfortable with the notion of withholding or delaying the provision of benefits to subgroups of populations in order to ascertain intervention effects are due to the intervention and not other organizational changes that occur simultaneously. In these cases, advocacy for rigorous methodological solutions needs to be paired with pragmatic approaches that meet organizational needs while still maintaining a level of research rigor that allows research conclusions to be valid. Most importantly, as researchers, we need to devote further attention to building effective scientist-practitioner collaborations with human resource practitioners interested in deriving evidence-based approaches to the effective integration of mothers into the workforce.

Further advances in the area of intervention research can also be realized if statistical and methodological toolboxes that are necessary for effective intervention research are summarized in books. For instance, handbooks on topics such as intervention methodologies in work-family research and multilevel modeling of longitudinal data in work-family studies are direly needed tools. Handbook and summary chapters on multilevel modeling would be particularly useful since data structures inherent in research on work and the transition to motherhood inherently involve nested data structures (e.g. at the family, department, organizational, national level). The availability of these tools to researchers interested in extending their current research programs to include intervention, longitudinal and multilevel studies on work and the transition to motherhood will likely advance our knowledge base substantially.

Studies examining a broad set of costs and benefits of maternity policies are also direly needed. Although the use of experimental designs may not be feasible to study policy changes, quasi-experimental designs can take advantage of policy changes and different time frames for implementation across different states, regions, industry sectors and nations.

From an intervention standpoint it may also be meaningful to conduct research/training around workplace "champions". In many organizations, these workplace champions advocate for better maternity benefits, reduced discrimination and better integration of working mothers. Even though ample anecdotal and popular press evidence supports that these champions play a pivotal role in improving the mother-friendliness of many workplaces, little is known about their motives. Even less is known with regards to the behaviors and strategies that they may use to advocate for women who are transitioning to being working mothers.

Further intervention research could take advantage of the prevalent utilization of "off-the-shelf" training programs (or training programs that are developed in a generic fashion to be sold, oftentimes in an online format) to organizations. Managers often purchase access to these "off-the-shelf" training programs. However, despite the utilization of these programs in many organizations, scholars have not tapped these programs for intervention research to examine their effectiveness systematically. Again, partnerships with organizations developing these training programs will be essential if the effectiveness and impact of these interventions is to be systematically studied and understood. The cost for developing online training programs has decreased substantially over the past decades. Hence, it may also be feasible for academics to develop online intervention tools, market these to organizations and derive research data from their distribution to create an evidence-based perspective on the interventions' impact on women, families, children and organizations.

Demographic Differences at the Work-Motherhood Interface

With regards to demographics, we argue that a number of key demographic variables have received less research attention than they should. More specifically, research on single parents, single fathers, the role of religious affiliation at the transition to parenthood, same-sex couples, small-to-mid-size employers, couples that work for the same organization, low-income households and households with multiple children need to be the subject of more investigation.

Generally speaking, although many of these demographic groups are examined in the broader work-family research literature, research at the interface of work and the transition to parenthood is particularly challenging in that access to populations of pregnant women and new mothers and fathers is difficult as is. If further demographic limitations are imposed, the design and execution of studies, and particularly participant recruitment, may end up being substantially more resource-intensive. Still, theoretical models that describe how women transition to being working mothers need to account for the psychological and economic impact of these demographics to understand whether models work irrespective of the demographic backdrop of respondents. Methodologies such as MTurk (a google-developed panel that provides access to participants for a small fee) may provide access to some of these otherwise hard to reach populations.

Cross-Cultural Research at the Work-Motherhood Interface

As discussed in several chapters in this volume, governments and organizations across the globe vary widely in how they accommodate women in their transition to being working parents. Cultural expectations and cultural norms pertaining to parenting roles are, in most countries, closely aligned with leave policies. For instance, consistent with strong gender equality norms, in several European countries fathers are strongly encouraged through government policies and parental leave benefits to actively participate in raising their children. The interplay of cultural norms and government policies around work leave and return to work provide an exciting opportunity for studying national culture, cultural norms regarding maternity, government maternity benefits and policies through some of the theoretical lenses proposed in this volume, such as identity theory and weaving models. What is probably needed to advance research in this area are research consortia consisting of work-family research groups across the globe to develop a joint research agenda and data collection plans around working women's transition to motherhood. These cross-cultural studies will likely shed light not only on cultural differences, but also on the effectiveness of policies and organization-level interventions in impacting the well-being of mothers, families and organizations.

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