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Work-family trajectories and multidimensional wellbeing. Evidence from France.

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Long Abstract

Background/objectives:

As professional and family trajectories become more complex and intertwined (Drobnič & Guillén 2011; Van der Lippe & Peters 2007), with major consequences for inequalities in wellbeing in European societies, it is important to consider a unitary and holistic perspective on life-course (Aassve et al 2007). In recent decades, family trajectories have become more diverse as marriage rates decline while divorce rates and the prevalence of lone parenthood and complex blended families increase (Thomson, 2014; Zaidi and Morgan, 2017; Buchman and Kriesi, 2010). At the same time, declining employment security, growing flexibility and uncertain social mobility as well as increasing boundaries between work and private life cause the two domains to be ever more intertwined (Barbieri 2009; Kovalenko & Mortelmans 2014). This increased complexity of the life course has important implications for individuals' health and wellbeing.

There is consistent evidence that life events do affect health and well-being. Being married is associated with better mental and physical health (Carr and Springer, 2010; Umberson et al., 2010), while union dissolution and lone parenthood are negatively associated to physical and mental health (Simon 2002; Hughes et al. 2009; Amato 2010; Ploubidis et al. 2015; Biotteau et al. 2018) as well as subjective and social wellbeing (Gardner et al. 2006; Marks et al. 1998; Williams et al. 2006; Zimermann and Hameister 2019). Within the work sphere, job insecurity, periods of unemployment and downward mobility have been shown to affect life satisfaction (Dolan & Lordan 2013; Hellgren & Sverke 2003; Oesch & Lipps 2013; Wahrendorf 2015).

While several studies have focused on the spillovers of one domain on the other (Charles and Stephens 2004; Del Bono et al. 2015; Kreyenfeld and Andersson 2014) or on how balancing work and family influences wellbeing (Lacey et al. 2016; Warren 2015), less is known about how the two life domains' trajectories interact and affect health and wellbeing (Aassve et al. 2007; Aisenbrey and Fasang 2017). Recent research on the process of cumulative disadvantages has shown that critical negative trajectories in different domains cumulate over the life course to generate greater vulnerability in later life (McDonough et al. 2015) in terms of health (Lacey et al 2017) and lower life satisfaction. On the other side, long-term strong ties to a combination of full-time paid employment, parenthood and partnerships are associated with improved subjective wellbeing in early old age, while work-family life courses characterised by weaker ties to any one of these domains had lower levels of subjective wellbeing in their early sixties (Lacey et al 2016).

Empirical evidence has also suggested that the impact of work-family trajectories and critical events on wellbeing is heterogeneous and depends on individual demographic and socioeconomic characteristics (DiPrete and Eirich, 2006; McDonough et al 2015; Thomas et al., 2017). First of all, work-family trajectories and their effects on well-being are gender specific (Lacey et al, 2016; Aisenbrey and Fasang, 2017), as most critical life events in both family and work domains tend to affect women more negatively than men (Keizer, Dykstra and Poortman 2010; Madero-Cabib and Fasang 2016; Melchior et al. 2007; Stone et al 2015). Besides gender differences, an unequal distribution of resources across socio-economic groups in itself creates inequality in physical and mental health (Turner and Avison, 2003; Marmot, 2005; Kahneman & Deaton 2010; Taylor & Seeman 1999). Second, resources influence the likelihood of experiencing critical life events (Burgard et al 2007; Kasl and Jones 2000; McDonough et al. 2015). Third, resources dictate the resilience following critical events by buffering their negative consequences and hence they are expected to moderate the relationship between critical events and wellbeing. (Elder, 2001).

Finally, the existing evidence also points to the fact that wellbeing as an outcome requires a clear conceptual base and it should include multiple indicators (Chavez et al., 2005). A number of researches have highlighted the multidimensionality of wellbeing, and the differential effects that critical family events or transitions have with respect to domain-specific wellbeing, or different health indicators (Infurna and Luthar, 2017, Bernardi & al 2017). It is therefore crucial to include separate measures of well-being domains in the study of professional and family trajectories and well-being (Luhman et al 2012; Lacey et al. 2016).

By adopting sequence analysis (Abbott, 2000 ; Studer, 2012), this study builds on recent literature to adopt a holistic life course perspective to study work-family intersection and its association with several dimensions of well-being. Furthermore, it explores variations in these associations, depending on gender and socio-economic individual characteristics.

Data and Methods:

We use data from the French Health and Occupational Trajectory, a population-based longitudinal survey collected in two waves (2006 and 2010) that includes long-term detailed retrospective information on work, parental, and partnership histories, as well as on current and past health problems. Missing data on work status was imputed following Brendan Halpin's chained multiple imputation procedure (Halpin, 2012), which preserves and takes into account longitudinal consistency in life course sequence data. Five imputed data sets were created resulting in complete work and family histories from age 18 to 50, for 2069 men and 2822 women aged 50 and above in 2010. For each year, we distinguish five distinct employment statuses (full-time employed, part-time employed, unemployed, non-employed and still studying), three parental statuses (no children, at least one child < 3 years, at least one child <16 years), and two partnership statuses (single, in partnership). We combine standard and multichannel sequence analysis with *Partitioning Around Medoids* classification to identify long-term dominant patterns of employment history, family history, and joint employment-family histories. Employment histories and joint employment-family histories are classified separately for men and women since their working life courses are very different (McMunn et

al. 2015). Our analysis proceeds in two steps. First, we describe men and women long-term occupational and family trajectories patterns and their intersection. Then, we use regression modelling to estimate the associations between those patterns and multidimensional measures of well-being: self-reported health, depressive mood, sleeping disorders, social well-being, and professional well-being. We examine how those associations differ among men and women. We control for age, social origin, early socio-economic position, education, migration background, and past health problems. All the models are estimated using Rubin's rules (Rubin, 1987) for multiply imputed data.

Preliminary results

Work and family trajectories patterns differ for men and women. While family trajectories are similar, and can be identified by a common five-clusters classification, men and women experience highly different employment trajectories. On average, women spent more time unemployed and in part-time employment than men, while men spent more time in full-time employment. In addition, women experienced a higher number of working status transition and showed a higher entropy value, which means that they experienced more complex and unstable employment trajectories. Consequently, we distinguish four clusters of employment histories for women and two clusters for men, and ten clusters of work-family histories for women. Men employment histories are less correlated with their family histories, which makes interaction effects more relevant than multi-channel classification to explore work-family intersection for them.

Our results show that both work and family histories are significantly associated with distinct dimensions of well-being (Figure 1). For both men and women, work histories characterized by weaker ties with the labour market are associated with a decrease in most well-being indicators, and separated lone parents experience a lower social well-being than early parents in continuous partnership. Family trajectories are associated with sleeping disorders for women, but not for men; they are associated with professional well-being for men, but not for women. We also find significant associations between joint work-family trajectories and all considered well-being indicators. Work-family histories characterized by earlier transitions into parenthood and partnership, lone parenthood after union dissolution, absence of parenthood, work interruptions (with or without return on the labour market), or part-time employment, are associated with lower well-being as measured by various indicators. These results unveil work-family trajectories that interfere with distinct dimensions of well-being. The final version of the paper will include interaction effects for men.

Figure 1 : Association between work histories, family histories, and well-being indicators in 2010.

		Depressive mood	Sleeping disorders	Professional well-being	Social well-being	Bad Perceived Health
		Estimate (STE)	Estimate (STE)	Estimate (STE)	Estimate (STE)	Estimate (STE)
Women	**Early family**	*Ref*	*Ref*	*Ref*	*Ref*	*Ref*
	Early large family	-0,108 (0,123)	-0,093 (0,057)	**0,213 . (0,115)**	-0,105 (0,125)	-0,115 (0,2)
	Late family	0,071 (0,179)	**-0,168 * (0,083)**	0,124 (0,167)	-0,221 (0,175)	-0,366 (0,336)

	No child	0,195 (0,241)	**-0,277 * (0, 112)**	-0,256 (0,225)	0,208 (0,256)	0,386 (0,389)
	Separated Parent	0,148 (0,148)	-0,091 (0,071)	-0,108 (0,143)	**-0,257 . (0,15)**	0,225 (0,234)
	Full-time employed	*Ref*	*Ref*	*Ref*	*Ref*	*Ref*
	Full-time returners	-0,049 (0,158)	0,028 (0,076)	-0,173 (0,146)	**0,37 * (0,166)**	0,043 (0,249)
	Mostly non-employed	**0,394 ** (0,129)**	0,044 (0,064)	**-0,724 *** (0,128)**	0,127 (0,136)	**0,46 * (0,21)**
	Mostly part-time employed	-0,073 (0,166)	-0,097 (0,076)	**-0,43 ** (0,151)**	**0,288 . (0,17)**	0,235 (0,266)
Men (Model 2)	**Early family**	*Ref*	*Ref*	*Ref*	*Ref*	*Ref*
	Early large family	0,006 (0,171)	-0,02 (0,061)	**-0,237 * (0,113)**	-0,128 (0,247)	0,167 (0,234)
	Late family	-0,017 (0,214)	0,02 (0,075)	**-0,457 ** (0,139)**	**-0,375 . (0,267)**	-0,085 (0,307)
	No child	-0,108 (0,29)	-0,003 (0,101)	**-0,889 *** (0,187)**	**-0,564 * (0,321)**	-0,083 (0,412)
	Separated Parent	**0,45 . (0,267)**	0,152 (0,107)	-0,287 (0,196)	**-0,696 ** (0,326)**	**0,777 * (0,354)**
	Full-time Employed	*Ref*	*Ref*	*Ref*	*Ref*	*Ref*
	Interrupted/part-time	**0,644 ** (0,218)**	**0,24 * (0,096**	**-0,64 *** (0,175)**	**-0,64 * (0,264)**	**0,563 * (0,282)**

Figure 1 : Association between work-family histories, and well-being indicators in 2010.

	Depressive mood	**Sleeping Disorders**	**Social Well-Being**	**Professional Well-Being**	**Self-Perceived Health**
	Estimate (STE)	Estimate (STE)	Estimate (STE)	Estimate (STE)	Estimate (STE)
Late family Full-time employed	*Ref*	*Ref*	*Ref*	*Ref*	*Ref*
Early Family Early Non-Employed	**0,737*** (0,22)**	**0,273 . (0,099)**	-0,038 (0,324)	**-0,757 *** (0,199)**	0,531 (0,376)
No child Full-time Employed	**0,639** (0,227)**	-0,044 (0,099)	**-0,642 * (0,302)**	-0,209 (0,2)	0,42 (0,408)
Standard family Full-time employed	**0,487* (0,218)**	**0,278** (0,094)**	-0,312 (0,3)	-0,052 (0,19)	0,433 (0,373)
Late family Part-time employed	0,189 (0,237)	0,074 (0,099)	**-0,579 . (0,307)**	**-0,611 ** (0,2)**	**0,674 . (0,383)**
Late family Late non-Employed	**0,655** (0,237)**	**0,176 . (0,106)**	-0,171 (0,344)	**-0,523 * (0,215)**	**0,733 . (0,39)**
Early family Mostly FT employed	0,357 (0,224)	**0,236 * (0,097)**	-0,03 (0,319)	-0,051 (0,196)	0,049 (0,395)
Separated parent Full-time Employed	**0,449 . (0,235)**	0,115 (0,103)	**-0,573 . (0,314)**	-0,303 (0,208)	0,073 (0,427)
Separated parent Work interruptions	**0,634* (0,267)**	0,157 (0,124)	**-0,674 . (0,356)**	**-0,884*** (0,25)**	**0,898 * (0,417)**
Standard Family Full-time Returners	**0,715*** (0,211)**	**0,274 ** (0,094)**	-0,17 (0,306)	**-0,361 . (0,189)**	0,49 (0,36)

Source : Health and Professional Itinerary Survey (2010)
- All models are adjusted for past health events, education, social origin, early socio-economic position, age, partnership status in 2010, and migration history.
- Significance threshold: p < 0,001 = * ; p < 0,01 = ** ; p < 0,05 = * ; p < 0,1 = .**

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