Pathways to a good life? Multiple social roles in early adulthood and later mental health in different labor market contexts

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Introduction

There is evidence that childhood conditions and conditions throughout the life course have an impact on health in later life (Brandt, Deindl, Hank 2012; Hamil-Luker & O'Rand 2007; Berg, Lindeboom& Portrait, 2006; Dannefer 2003; Deindl 2013; Kuh et al. 2003). A major influence on our health is the impact of our employment history (e.g. Marmot et al. 1991). Stressful working conditions, times of unemployment or insecure work contracts are known to have long lasting impact on one's mental health. Aside from that, moving in with a partner and starting a family are also defining life course events that have been shown to affect health and well-being later in life. Therefore, the most important social roles over the life course are employment, partnership and parenthood and especially during the so called "rush-hour" of life when the start of one's career and family life come together everyday stress is at a peak (Frissen 2000). With strong increases in women's participation in the labour market in the second half of the 20th century, the mental health implications of combining these work and family roles has received more attention in public and private spheres. There are two main theoretical streams about the relationship between multiple social roles and well-being: one is based on the idea of role strain (or role stress) and the other one on the idea of role enhancement (also role accumulation or role expansion) (Rozario, Morrow-Howell & Hinterlong, 2004). Role strain theories suggest that multiple roles form competing demands on limited time and energy of the individual with increased risks for conflict and stress (Goode 1960; Marks 1977). On the other hand, role enhancement theories (Sieber 1974) argue that multiple roles also increase positive outcomes that can act as resources to counterbalance higher demands.

In this paper, we compare for the first time life courses from 22 EU countries to look at the impact of combined work and family roles on mental health later in life. Using the harmonized life history data of the Survey of Health, Ageing and Retirement in Europe and the English Longitudinal Study of Ageing (Wahrendorf et al. 20019 a & 2019b), we apply sequence analysis combined with cluster analysis to build five clusters, separately for men and women, combining the three main social roles (employment, partnership and parenthood) between the age of 25 till 40, the so called "rush-hour" of life. These clusters form the basis for our path-models, where we estimate the direct and indirect effect of these life histories on later life mental well-being. Using this approach, we are able to differentiate whether there is a direct effect of combining multiple social roles on mental well-being or whether this effect is mediated by socio-economic. and cross-country differences.

Data & Methods

We use harmonized life history data of the Survey of Health, Ageing and Retirement in Europe (SHARE) (Börsch-Supan, Brandt, Hunkler, et al. 2013; Börsch-Supan, Brandt, and Schröder 2013) and the English Longitudinal Study of Ageing (ELSA) (Steptoe et al. 2013) provided by the Gateway to Global Ageing (Wahrendorf, Deindl, Beaumaster, Phillips, and Lee 2019a, 2019b). For each respondent we use data from the first interview he/she conducted and combine those with information of SHARE- and ELSALIFE.

Our main dependent variable is mental health measured through depressive symptoms. SHARE uses Euro-D as measurement for depression (see Prince et al. 1999 for details on Euro-D).

We apply sequences analysis to group similar work-family histories into clusters. These clusters were used in a path-model to assess the direct and indirect impact on mental health. The life histories contain three different states: having a job (yes or no), living together with a partner (yes or no), and having a child under 18 (yes or no). These states allow for eight possible combinations: 1. Work, no kids, no partner, 2. Work, kids, no partner, 3. Work, no kids, partner, 4. Work, kids, partner, 5. No work, no kids, no partner, 6. No work, kids, no partner, 7. No work, no kids, partner, 8. No work, kids, partner. We expected women and men to differ in their life courses therefore all models were calculated separately for men and women.

We used Optimal Matching (OM) to quantify the distances between each pairs of work-family sequences with substitution costs set to 1 and indel costs set to 0.5 (Abbott and Tsay 2000). We used the resulting distance matrix to group sequences into clusters using cluster analysis (Ward-linkage). We prefer a five cluster solution for women and men which are supported by PBC and ASW and had a reasonable solution. We use the TraMineR, WeightedCluster, and Cluster package in R for the sequence analysis (Gabadinho et al. 2011).

Results

Cluster analysis revealed five main patterns of life course social roles that differ somewhat between men and women. For men, we found that the largest group of men combined stable employment with stable partnership and children (Cluster CM1 – "Stable work and family") and a second group of men combined stable work without family or with late family formation (Cluster CM2 – "Stable work, no family"). The third group of men had work, children but no partner for most of early adulthood (Cluster CM3 – "Working single parent"), a fourth group had stable work and a partner but no children (Cluster CM4 – "Childless workers with partner") and a final group had no work with or without family (Cluster CM5 – "No work"). For women, we found a similar largest group combining stable employment with stable partnership and children (Cluster CW1 – "Stable work and family"). The second group had stable work but no stable family, (Cluster CW2 – "Stable work, no family"), a third group of women combined work and children but had no stable partnership (Cluster CW3 – "Working single parent"), the fourth group had a stable partnership and children but no paid work (Cluster CW4 – "Stable family, no work") and a final group of women had neither work nor stable family (Cluster CW5 – "No work or family").

Multivariate path-model show impact of work-family clusters for economic conditions, functional limitations and depression in men and women respectively. For men and women combining stable work with a stable family (partner and kids) is favorable for economics and health outcomes. Non-working women and single mothers also experienced indirect effects on depression through their economic situation. Unemployed men or men without family reported higher levels of depression. Unemployment and being a single father also have an indirect impact on depression via economic conditions and health. Moreover, these results also differ between countries, with lower employment rates reducing role enhancement for women, but not so for men.

Discussion

In summary, findings show that work-family trajectories in early adulthood are characterized by inheritance of multiple roles for a large majority of men and women in Europe. There are some gender differences: While men are more often working without family, women are more often not working with family. For both genders, combining paid work, partnership and parenthood between the ages 25 and 40 is associated with better mental well-being. Additionally, our results confirm empirical studies that find benefits of stable employment for mental health later in life regardless of family situation with one important exception: working single mother have the lowest well-being at older age. Overall, our findings support role

enhancement theory, showing that despite potential conflicts combining work and family in early adulthood can be beneficial for men and women in the long term, while past episodes of non-employment or living without a partner were associated with higher depressive symptoms at older age.

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