Domestic Workload and Multiple Roles
Epidemiological findings on health and sickness absence in women

Akademisk avhandling

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The thesis is based on the following papers:

I Staland-Nyman C, Alexanderson K, Hensing G
Associations between strain in domestic work and self-rated health:
A study of employed women in Sweden

II Staland-Nyman C, Alexanderson K, Hensing G
Sickness absence in women – what are the associations with different aspects of
domestic work?
Submitted

III Staland-Nyman C, Spak L, Hensing, G
Occupation, partner and parent: what are the associations of single and multiple
roles with self-rated physical health, psychiatric disorder and sickness absence in
women?
Submitted

IV Staland-Nyman C, Andersson L, Spak F, Hensing G
Exploring consequences of sickness absence – a longitudinal study on changes in
self-rated physical health
Accepted for publication in WORK: A Journal of Prevention, Assessment and
Rehabilitation

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ABSTRACT

Aim: The objective of this thesis was to analyse the importance of specific exposures in women’s lives to health and sickness absence; more precisely to study the association between domestic work, multiple roles and the experience of being sick-listed, and self-rated health, psychiatric disorders and sickness absence.

Method: The thesis was based on two datasets. ‘Women’s health and living conditions’ (WHL) is a cross-sectional study on 1 417 employed women aged 17 to 64 years old. Data was collected with a questionnaire, and register and employee data on sickness absence. ‘Women and alcohol in Göteborg’ (WAG) is a prospective cohort study on 1 799 women in eight age cohorts born from 1925 to 1980. Data was collected with a screening questionnaire, interviews and register-based sickness absence. Several aspects of domestic work, multiple roles and experience of sickness absence were analysed in relation to self-rated health (SF-36), psychiatric disorders (DSM-III and IV) and sickness absence. The study on multiple roles emanated from the role strain and role enhancement hypotheses and roles were analysed as single roles and as combinations of roles. Changes in self-rated physical health were assessed in relation to experience of sickness absence over five year. Cross-sectional and longitudinal analyses were conducted using multivariate regressions analyses.

Results: Domestic job strain and a lack of domestic work equity and marital satisfaction were associated with lower self-rated health particularly vitality and mental health. The former was not associated to sickness absence, but the latter was. Women with domestic workload due to children and adults with special needs had higher odds for medium-long sick-leave spells, while parental responsibility gave lower odds for any sick-leave spell. Occupation was related to lower odds for poor self-rated physical health and sickness absence, while the parental role was associated with higher odds for sickness absence. Compared with women who had all three roles women with occupation and partner role had lower odds for negative health outcomes. Support was found for the role strain hypothesis in the cross-sectional analyses of role combinations while neither of the hypotheses was supported in the five year follow up. A lower proportion of those who had experience of being sick-listed reported good health at both baseline and follow up. Women with psychiatric disorders had higher odds for a change from poor to good self-rated physical health over the five years if they had been sick-listed.

Conclusion: Domestic workload was associated to health and sickness absence in women, but there were inconsistencies in the findings on children and being a parent and on multiple roles. From a public health perspective, deeper knowledge on the importance of women’s engagement domestic work and its different dimensions is important for promoting women’s health. A multidimensional assessment of domestic work is important and the content and complexity of domestic work and of different roles needs to be further explored in relation to health and sickness absence in women.

Keywords: Domestic work, domestic workload, multiple roles, sickness absence, psychiatric disorders, self-rated health, women

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