

# Pregnancy at Work: A National Survey

Helen Russell, Dorothy Watson and Joanne Banks



# *Pregnancy at Work: A National Survey*

Helen Russell, Dorothy Watson and Joanne Banks

Published by the HSE Crisis Pregnancy Programme and the Equality Authority  
June 2011

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ISBN: 978-1-905199-29-7

*The views expressed in this report are those of the authors and do not necessarily reflect the views or policies of the sponsors.*

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## *Foreword by the Acting Director of the HSE Crisis Pregnancy Programme*

It gives me great pleasure to introduce this survey report, the final of three reports exploring women's experiences in paid work during and after a pregnancy in Ireland. The Crisis Pregnancy Programme (CPP) is very pleased to have had the opportunity to partner with the Equality Authority on this project. In the current economic climate, collaborations of this nature are all the more important in identifying similar research and policy interests, achieving efficiencies in costs and effort and increasing the application and impact of research.

The project, initiated by the Crisis Pregnancy Agency in partnership with the Equality Authority in 2008, sought to address an information gap on the relationship between workplace culture and experiences of pregnancy in Ireland. Previous studies suggested that certain working environments may contribute to a woman defining her pregnancy as a crisis pregnancy and the Agency decided that it was timely to investigate this issue more thoroughly.

This survey report describes the experiences of 2,300 women who had a baby between July 2007 and June 2009. It documents their experiences at work during their pregnancy and examines patterns in maternity leave taken and return to employment.

There are a number of significant findings in this report that increase our understanding of what and how workplace factors impact on experiences of crisis pregnancy. Overall, 33 per cent of mothers said their pregnancy had been emotionally traumatic or represented a crisis for them. Of this group, job-related issues emerged as a contributory factor for 27 per cent of women in employment. They reported reasons such as 'work plans' or 'work commitments' or 'concern about the reaction of employers or co-workers to pregnancy' when describing their pregnancy as a crisis pregnancy. Financial worries were a consideration for approximately 49 per cent of women experiencing a crisis pregnancy.

Analysis of the survey data reveals a strong association between experiences of unfair treatment at work during pregnancy and crisis pregnancy. Women who experienced more than one form of unfair treatment were at an increased risk of experiencing a crisis pregnancy. On the positive side, the availability of flexible working practices was associated with a reduced likelihood of crisis pregnancy for women in employment. Mothers who experienced lower levels of work–family conflict during their pregnancy were less likely to report a crisis pregnancy.

These findings will have an important bearing for the CPP in the development of its strategic plan 2012–2016. They will inform the level and degree to which contributory factors to crisis pregnancy prevalence in Ireland, such as reconciliation of work and family life, are prioritised and addressed as policy issues.

I would like to thank Dr Helen Russell, Dr Dorothy Watson and Dr Joanne Banks of the Economic and Social Research Institute and Wendy Kehoe and her colleagues in Amárach Research for their professionalism in gathering high-quality data and preparing an informative report. I also thank the Department of Social Protection for facilitating access to the sample of women.

I am grateful to the members of the project's Advisory Group, Laurence Bond (Equality Authority), Dr Margret Fine-Davis (Trinity College, Dublin) and Maeve O'Brien (CPP), for their invaluable contribution throughout all stages of this project. I also thank the former Board of the Crisis Pregnancy Agency and Caroline Spillane, former CPP Director, for their involvement in the project's initiation.

Finally, I would particularly like to express thanks to the women who responded to the survey for providing invaluable and extremely useful data about their lives and experiences.

**Dr Stephanie O'Keeffe**  
Acting Director  
HSE Crisis Pregnancy Programme

## *Foreword by the CEO of the Equality Authority*

*Pregnancy at Work: A National Survey* is the third, and final, report arising from a major research project commissioned by the HSE Crisis Pregnancy Programme and the Equality Authority. It reports the findings of the first nationally representative survey of women's experiences in paid work during and after pregnancy. The Equality Authority is very pleased to have had the opportunity to work with the HSE Crisis Pregnancy Programme in this project.

One important objective of this survey was to provide baseline data on the extent and nature of pregnancy-related discrimination in Ireland. While the majority of women felt that their employer was supportive during pregnancy, up to 30 per cent reported experiencing unfair treatment. Clearly, pregnancy discrimination remains a significant barrier to full equality for women in the Irish labour market.

This study also provides detailed data on the take-up of maternity and parental leave. Although 92 per cent of women took paid maternity leave, just 41 per cent took unpaid maternity leave. This and related findings highlight the inequitable outcomes that arise from a system of unpaid leave provisions, which not everyone can equally afford to take up.

Importantly, this survey also examines the impact of women's experiences at work on their pregnancy: 13 per cent of women stated that their health was negatively affected by employment during pregnancy and 8 per cent experienced a crisis pregnancy in which work issues were a contributing factor.

All of these findings demonstrate the need to ensure that women are aware of their rights regarding pregnancy at work, and that they are supported in vindicating those rights. It is also essential that employers accept and embrace their responsibilities in this regard. This report also highlights the need to develop public policy to promote the better reconciliation of work and family life and it provides essential evidence to inform such policy development.

On behalf of the Equality Authority, I would like to thank the authors, Dr Helen Russell, Dr Dorothy Watson and Dr Joanne Banks of the Economic and Social Research Institute, for their expert and insightful report. Thanks also to Wendy Kehoe and her colleagues at Amárach Research and Helen Faughnan and her colleagues in the Department of Social Protection for their essential input to the survey.

I would also like to thank Dr Margret Fine-Davis of Trinity College, Dublin; Caroline Spillane, Maeve O'Brien and Dr Stephanie O'Keeffe of the HSE Crisis Pregnancy Programme; and Laurence Bond, Head of Research at the Equality Authority, for all their work on this project.

Finally, I would particularly like to thank all the women who responded to the survey for their invaluable contribution.

**Renee Dempsey**  
Chief Executive Officer  
The Equality Authority

## About the Authors

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## *Acknowledgements*

This study has been a team effort and as researchers we have benefited greatly from the input and assistance of a wide range of people. Wendy Kehoe, Corona Naessens and David Dunleavy of Amárach Research ensured that the fieldwork and data entry ran smoothly and efficiently. Their expertise was key in providing respondents with a range of options for completing the survey. Helen Faughnan, Ambrose Dunne and their colleagues at the Department of Social Protection made the survey possible by providing us with a sampling frame and distributing the questionnaires on our behalf. We are extremely grateful for their support for the project and their timely practical assistance. James Williams and Pauline Needham of the Economic and Social Research Institute provided valuable help in sample selection and Martina Clarke, also of the ESRI, provided expert research assistance.

We would like to thank Maeve O'Brien of the Crisis Pregnancy Programme (CPP), who managed the research project with efficiency and good humour and who provided valuable input at all stages of the study from questionnaire development through to publication. We are also very grateful to the members of the project's Advisory Group – Dr Stephanie O'Keeffe (CPP), Laurence Bond (Equality Authority) and Dr Margret Fine-Davis. They provided helpful input into the questionnaire development, brochure design and interview protocols and gave us insightful and constructive feedback on the analysis and report drafts. We are also grateful for the thoughtful comments provided by an internal ESRI reviewer.

Finally, we are greatly indebted to the 2,300 women who found time in their busy lives to share their experiences of employment during and after pregnancy. Their participation was essential to the research project and we are extremely grateful for their time and contribution.

The authors remain solely responsible for the contents of the report.

## Executive Summary

### *About the Study*

The aim of this study is to fill the gap in knowledge around women's experiences in paid work in Ireland during pregnancy and after childbirth using data from the first nationally representative survey of mothers. The survey was conducted in the autumn of 2009 and involved mothers who had given birth between July 2007 and June 2009.

The six main objectives of the study are:

- To investigate women's experiences of pregnancy at work with a view to assessing levels of pregnancy-related discrimination in Ireland.
- To shed light on the job and organisational factors that influence the likelihood of unfair treatment of women during pregnancy, in order to identify the organisational practices that minimise unfair treatment and to assist in the development and targeting of supports and policy interventions.
- To examine the impact of experiences at work during pregnancy on crisis pregnancy (experiencing the pregnancy as emotionally traumatic or a personal crisis).
- To assess the take-up of maternity and parental leave among women who had given birth in the survey's two-year reference period, to identify problems in relation to taking such leave and to determine the extent of employer top-ups to these leave arrangements.
- To examine women's transitions back into employment after childbirth and to investigate the role of preferences, constraints and opportunities in both the decision to return to work and the timing of that return.
- To compare women's employment conditions before and after childbirth.

### *Treatment by Employer During Pregnancy*

Two-thirds of the women who were the focus of this study had been in employment during pregnancy. The majority of these women felt that their employer was supportive (71 per cent) and most were satisfied with their treatment at work during pregnancy (63 per cent). Nevertheless, a significant minority of women in employment during pregnancy experienced problems:

- Up to 30 per cent of women reported unfair treatment during pregnancy.
- At its most extreme, unfair treatment involved dismissal; this was reported by 5 per cent of women employed during pregnancy.
- Other forms of unfavourable treatment included loss of salary or bonus or denial of promotion (10 per cent); being given unsuitable work or workloads (12 per cent); receiving unpleasant comments from managers/co-workers (8 per cent); and being discouraged from attending antenatal appointments during work time (8 per cent).
- Unfair treatment was most common among women working in the retail and wholesale sector, in organisations with few flexible work arrangements and/or in organisations without a formal equality policy. Unfavourable treatment was less common in small organisations (1 to 9 employees).

- Younger women and women expecting their second child were more likely to have experienced unfair treatment than other pregnant women.
- 72 per cent of women who experienced unfair treatment during pregnancy took no action. Where action was taken, the most common form was reporting the problem to a manager/supervisor (19 per cent).

### *Health and Safety*

Most women who were in employment during pregnancy reported that their health was not negatively affected by their job during pregnancy (87 per cent). Nevertheless, a significant minority of women in employment during pregnancy experienced problems:

- 13 per cent of women stated that their physical or mental health had been adversely affected by employment during pregnancy (either 'a great deal' or 'quite a bit').
- 8 per cent of women experienced a crisis pregnancy where work issues were a contributing factor.
- 12 per cent of women reported problems around unsuitable work or workloads.

### *Crisis Pregnancy*

One-third of the women stated that their pregnancy was emotionally traumatic or represented a personal crisis for them at some stage; in most cases they did not report job-related reasons. Sixty per cent of mothers aged under twenty-five years and 58 per cent of lone mothers experienced their pregnancy as a personal crisis. A high risk of crisis pregnancy was also found among mothers who were limited in their daily activities (long-term illness/disability) at the time of the survey (61 per cent), although we cannot be sure whether this limitation was also present during their pregnancy. The main findings regarding crisis pregnancy and employment were:

- Rates of crisis pregnancy were slightly lower among women who had been employed at some stage during their pregnancy (29 per cent) than among those who were not employed during their pregnancy (39 per cent). However, this is mainly due to age and family differences between employed and non-employed women. Nevertheless, because of the high rates of employment among women of childbearing age, 60 per cent of women reporting crisis pregnancy were in employment.
- There was a strong association between unfair treatment at work during pregnancy and crisis pregnancy: 40 per cent of mothers experiencing one form of unfair treatment and 51 per cent of those experiencing two or more forms of unfair treatment reported that their pregnancy had been emotionally traumatic or a personal crisis (compared with 26 per cent of mothers who did not experience unfair treatment).
- Work-related factors were an issue for 27 per cent of working women who had a crisis pregnancy.

### *Maternity Leave*

The main findings regarding maternity leave for those women who were in employment during pregnancy were:

- 92 per cent of women took paid maternity leave. Women who were self-employed or who worked in temporary/casual jobs or part-time employment during pregnancy were less likely to take paid maternity leave.
- 41 per cent of women took unpaid maternity leave, mostly taking it in addition to paid leave. Taking combined paid and unpaid leave was related to the mother's ability to afford a period of unpaid leave.
- 48 per cent of women received a top-up payment from their employer in addition to state maternity benefit. Receipt of such payments was higher among women who were already more financially secure.
- 32 per cent of women experienced problems around maternity leave. The most commonly experienced difficulties involved the length of the period of leave.

### *Parental Leave*

The main findings regarding parental leave for those women who were in employment during pregnancy were:

- Only 18 per cent of women who had returned to work had requested to take any parental leave; however, since leave can be taken at any point until the child reaches eight years of age, more women may avail of this at a later stage.
- 19 per cent of women who had applied for parental leave had their request refused, or it was granted but not in the requested form.
- Take-up of parental leave is linked to women's ability to afford it.

### *Return to Work*

The main findings regarding return to work after childbirth for those women who were in employment during pregnancy were:

- Most women had returned to work by the time of the survey (71 per cent), usually to the same employer, and a further 22 per cent intended to return to work within two years.

- Most women who returned to work did so either at the end of the statutory paid maternity leave period (35 per cent) or at the end of the period of statutory paid and unpaid maternity leave (31 per cent). About one in eight of the mothers took less than the 26 weeks' statutory paid leave entitlement.
- Remaining outside the labour market after childbirth was associated with low earnings potential, larger family size and working in a temporary/casual job or for a small organisation during pregnancy.
- Early return (before the end of statutory paid maternity leave) was linked to financial constraints and job insecurity.
- The most substantial change in working conditions on a mother's return to employment, compared with her job during pregnancy, was a reduction in her working hours: 33 per cent of mothers who had worked full time during pregnancy reduced their working hours after the birth.
- 21 per cent of women who returned to work felt that their opportunities for training had decreased.
- 24 per cent of women who returned to work felt that their opportunities for promotion had decreased.

### *Policy Implications*

A number of policy implications arise from this research:

- **Family-friendly workplaces** are associated with a range of favourable outcomes for the health and well-being of the female workforce. Such workplaces have in place a policy on equality and diversity and offer flexible working options. The importance of creating and sustaining family-friendly workplaces needs to be stressed.
- **Flexible employment practices** should be encouraged and implemented on a wider basis. In particular, the availability of part-time hours is important in facilitating a mother's return to the labour market.
- **Improved information for women** regarding their entitlements around pregnancy, maternity leave and return to work is needed. In particular, younger women, women with lower levels of education and non-Irish women should be targeted.
- **Greater employer awareness** of the entitlements of women workers must be achieved, especially on aspects of maternity protection that are less well known such as regulation around return to previous job, health and safety requirements and parental leave. In the context of health and safety, the requirement to carry out a risk assessment for pregnant workers and to put in place corrective measures should be emphasised. Variations in risk factors across industries suggest that strategies tailored to specific sectors of the economy would be useful. For example, consideration should be given to targeting information on equal treatment of women at the retail and wholesale sector.
- **Health and safety regulations** should be broadened to include the more common health risks for pregnant workers such as fatigue relating to working time (long hours, shift work, night work), occupational stress and long periods of standing or sitting.
- **An expansion in paid maternity leave or parental leave** would benefit vulnerable mothers and their children. It would allow parents to care for their child for his or her first year, if they so choose, and reduce financial pressures for very early returns to work among lower income groups. Although cost-increasing measures may not be feasible during the current recession, the present system involving a significant element of unpaid leave leads to inequitable outcomes. Financial constraints and job insecurity may be forcing women to return to work earlier than they would like and earlier than is optimal for their child's development. The preferred option, among mothers who can afford it, is to take a longer period of maternity leave than the six months' statutory paid leave and to take a period of parental leave in the first two years of their child's life. UNICEF recommends a benchmark parental leave entitlement of one year's leave at 50 per cent of earnings (subject to a floor for low-income parents and a ceiling for the more affluent).
- **The risk of a crisis pregnancy** was higher among younger women, non-married women, women expecting their third or subsequent child and women with a disability. These groups may require specific support strategies to be addressed by agencies such as the HSE Crisis Pregnancy Programme.


### *Further Research*

Further investigation is needed to increase understanding of:

- The low take-up of maternity benefits among the self-employed and those on temporary contracts.
- The low take-up of parental leave and the reasons why some employers refuse to grant parental leave at all or in the form requested.
- Employers' knowledge of, and attitudes towards, maternity protection legislation and health and safety regulations, and the difficulties they face in implementing such legislation. Such a survey would provide a useful starting point in promoting health and safety for the female workforce.





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## Chapter 1: Introduction

## 1.1 Focus of the Study

Women have made substantial gains in labour market participation in recent decades and larger numbers of women are now maintaining paid work throughout their pregnancies. Nevertheless, women continue to face a risk of disadvantage in the workplace because of their unique reproductive function of bearing children (Moyle, 2002). In addition to recognising the increased health and safety concerns and problems associated with reintegration into employment, maternity protection and anti-discrimination legislation internationally has therefore sought to address the greater risk of unfavourable treatment and discrimination in the workplace for pregnant workers (Russell and Banks, 2011).

In the UK, a growing number of research projects are exploring the issue of pregnancy in the workplace. These studies make use of information from various sources, including data from legal caseloads involving pregnancy discrimination at work (James, 2004; Gregory, 2004), quantitative and qualitative research on women who experience disadvantage as a result of pregnancy (Adams et al., 2005; Callender et al., 1997; La Valle et al., 2008; Davis et al., 2005) and studies of pregnancy in the workplace from the employer's perspective (Young and Morrell, 2005).

In Ireland, however, there has been little research focused on women's experiences in paid employment during pregnancy or on their return to work after childbirth. A recent review of literature relating to pregnancy discrimination at work (Russell and Banks, 2011) highlights the dearth of empirical evidence exploring women's experiences at work during pregnancy (McDonald and Dear, 2006). Moreover, recent analysis of legal caseloads in Ireland over a ten-year period points to the need for greater awareness of the factors that potentially increase the risk of pregnancy-related discrimination (Banks and Russell, 2011).

To begin to address this shortfall, the HSE Crisis Pregnancy Programme in partnership with the Equality Authority commissioned this survey, which provides the first nationally representative sample of women's experiences of employment during pregnancy, maternity leave and return to work. The experiences of these mothers who are working outside the home can be taken to represent those of new mothers in the labour force generally. The survey was carried out in the autumn of 2009 and the sample of 2,300 women who had recently given birth responded through Internet, postal and telephone questionnaires.

A key objective of this study is to examine women's perceptions of their treatment at work during pregnancy in order to identify the main factors influencing unfair treatment and the level of compliance with health and safety practices in the workplace. International research using surveys and analyses of legal caseloads has highlighted the incidences of discrimination and dismissal in the workplace as a result of pregnancy (James, 2004; Gregory, 2004; HREOC, 1999; Adams et al., 2005). Much of this literature points to the type of employer and the nature of employment as major factors influencing discrimination and dismissal. In Ireland, previous research has shown that unplanned pregnancies, relationship difficulties and financial difficulties can lead to crisis pregnancies, i.e. pregnancies that are experienced as emotionally traumatic or as a personal crisis (Rundle et al., 2004). This report specifically focuses on workplace pregnancies and includes an assessment of whether the women had felt their pregnancies were emotionally traumatic and represented a personal crisis. This focus is particularly timely in the current economic downturn, which, through increased financial worries or job insecurity, could influence the perception of pregnancy as a crisis.

The second major focus in this study is women's experiences and treatment during maternity leave. Little is known about the take-up of different types of leave in an Irish setting. Existing research shows that the decision to go back to work after the birth of a child is influenced by individual characteristics such as education and partnership status; by organisational characteristics such as occupation and contract type; and by institutional policies such as family-friendly work arrangements and maternity benefits (La Valle et al., 2008; Saurel-Cubizolles et al., 1999). This study examines the take-up of maternity leave in Ireland and seeks to understand the factors influencing it and any difficulties women encounter as a result.

The third major research area in this study is women's experiences of returning to work. International research highlights how breaks in career around childbirth affect occupational position and pay when women return to work. Much of the focus of this literature is on the influence of job characteristics on return-to-work decisions and women's earnings (Russell et al., 2006; Macran et al., 1996). The present study provides a unique insight into such decisions by examining the timing of women's return to work in Ireland and comparing their jobs before and after childbirth,

particularly any changes in the number of hours worked, pay, industry and contract status. Our aim here is to identify and understand the reasons why women return to the same job, return to work with a different employer or do not return to work at all.

## 1.2 A Brief Literature Overview

In this section we provide a summary of the key themes from national and international literature on pregnancy at work (see Russell and Banks, 2011, for a detailed literature review). Although much research has been carried out on issues around gender, employment and work–life balance, little empirical research has focused on women's experiences of the workplace during pregnancy and of their return to work. The following sections outline key findings from the existing body of research.

### 1.2.1 Employment During Pregnancy

International research on women's experiences of employment during pregnancy, pregnancy discrimination and unfair treatment has made use of a number of methodologies, including legal case analysis, quantitative surveys and in-depth qualitative studies. This research has shown a greater risk of pregnancy-related discrimination and dismissal *during* pregnancy and before women begin their maternity leave.

Although legal cases represent only a small proportion of the actual incidences of discrimination, studies of caseloads show interesting patterns, many of which can be found in broader surveys. Research in Ireland and the UK has shown that pregnancy-related legal cases are spread across a range of occupations; however, the retail and wholesale sector and the personal services sector are over-represented among such cases (Banks and Russell, 2011; James, 2004; Gregory, 2004). Also, evidence of a greater risk of pregnancy-related discrimination has been found for women with one year's service or less.

Women's experiences of work during pregnancy have also been highlighted in the Equal Opportunities Commission's research in the UK, which used quantitative survey methods to explore perceptions of treatment at work (Adams et al., 2005). Similar to the caseload research, this EOC study found that aspects of the job have a greater influence than women's personal characteristics on the likelihood of experiencing unfair treatment and it estimated that 45 per cent of women experience tangible discrimination in the workplace. Again, this research found that the level of pregnancy-related discrimination is highest in the retail and wholesale sector. In contrast, the UK Maternity Rights Survey (MRS) found that 11 per cent of women felt they had been unfavourably treated (La Valle et al., 2008). The difference in the prevalence of pregnancy-related workplace discrimination may be explained by the different way in which questions in these surveys were posed: the EOC study presented women with a list of specific experiences and asked if any applied to them, whereas women in the MRS were simply asked if they had been unfavourably treated in the workplace.

Another area addressed in research on pregnancy-related workplace discrimination is the types of action women take in response to unfair treatment and, in particular, the disincentives to taking a case (Davis et al., 2005). Studies show that these disincentives include the additional stress caused by the tribunal process; the impact of taking a case on future employment prospects; and financial pressures or worries. Adams et al. (2005) also examined employer practices around pregnancy and found that in 55 per cent of cases employers had failed to carry out a risk assessment; moreover, 19 per cent of women reported not being allowed time off to cope with the illness of their baby or being denied flexible working arrangements on their return to work. Problems often emerge prior to the start of maternity leave, for example reluctance to let women go to antenatal appointments during work time. A number of studies suggest that women working in the private sector are at greater risk of pregnancy-related discrimination than those in the public sector (Young and Morrell, 2005; Adams et al., 2005). Greater awareness and implementation of equality policies in the public sector may explain these differences.

The EOC study (Adams et al., 2005) and the MRS (La Valle et al., 2008) highlight how flexible working arrangements can reduce the likelihood of pregnancy-related workplace discrimination. The provision of flexible working arrangements may indicate that the employer is aware of and concerned for employee welfare. These studies also found that firm size influenced the risk of discrimination: women working in smaller firms faced a higher risk of discrimination and employers in smaller firms expressed more negative views about pregnant workers (Young and Morrell, 2005; Adams et al., 2005). Younger women and women with shorter job tenures were found to be particularly

vulnerable. Employers may not be aware that there are no length-of-service requirements for protection from unfair dismissal due to pregnancy. On the other hand, studies did not show higher rates of discrimination for part-time workers (La Valle et al., 2008).

Among the consequences of pregnancy-related discrimination in the workplace is a loss of earnings through changing jobs or not returning to work at all (Hogarth and Elias, 2005). Moreover, studies have shown that unfair treatment at work impacts on women's emotional and physical well-being and their experience of crisis pregnancy. In their review of research, Redmond et al. (2006) stress that the likelihood of having a crisis pregnancy is strongly related to work-life balance policies adopted by employers, workplace culture and maternity arrangements. Qualitative research has highlighted women's experiences of emotional distress, pressures on personal relationships and financial hardship as a result of discrimination during pregnancy (Davis et al., 2005). In terms of physical well-being and, in particular, risks to women's health at work during pregnancy, research into the association between working conditions and adverse pregnancy outcomes shows that prolonged working hours, shift work, lifting, standing and heavy physical loads may contribute to pre-term delivery (Bonzini et al., 2007).

### ***1.2.2 Motherhood and Career Choice***

Given the persistence of occupational segregation, there is some debate in the literature as to whether women who intend to become mothers are more likely to choose particular kinds of jobs. The evidence – most of it from the United States – is very mixed. On the one hand, men and women rate occupational characteristics differently, with women placing a higher value on flexibility to rearrange work schedules (Bridges, 1989). In addition, being married, having children and working part time are characteristics associated with a woman being in a female-dominated occupation (Okamoto and England, 1999). On the other hand, while girls and boys aspire to different kinds of jobs, there is little evidence that particular fields appeal to girls because they will be easier to combine with their future role as a mother (see review by England, 2005). In analysis of the National Longitudinal Survey (NLS) of Youth in the US, Okamoto and England (1999) found no evidence that planning to be at home with children at the age of thirty-five led either men or women to choose female-dominated occupations. Analysis of the NLS suggests that fertility expectations have only a small impact on the work plans of young women, whereas work plans exert a major impact on their childbearing plans (see review in Hakim, 2002).

There is little evidence that female-dominated occupations are more associated with a lower level of human capital depreciation (as evidenced by a drop in wages following a break) than traditionally male jobs (Okamoto and England, 1999). It can be difficult to disentangle the attractiveness to women of family-friendly workplaces from the impact of occupational segregation: some female-dominated occupations (such as teaching, nursing and social work) are found almost exclusively in the public sector, where family-friendly work organisation is more common (Narcy et al., 2009).

### ***1.2.3 Returning to Work After Childbirth***

The way in which women are reintegrated into the workplace following an interruption for childcare is considered crucial for gender equality in the labour market (Russell and Banks, 2011). The body of research dealing with women's transitions back to work and the factors influencing these decisions has increased in recent decades. Studies highlight the complexities involved in the decision to return to work and show that personal, job and policy factors interact to create different sets of opportunities and costs for women (Russell and Banks, 2011).

Among the personal characteristics that affect the decision to return to work are levels of education, the job held prior to pregnancy, work experience and earnings (McRae, 1993; Smeaton and Marsh, 2006; Russell et al., 2006). Women with higher human capital were likely to return to work sooner than women with lower human capital. A higher level of education, in particular, was found to be a strong predictor of earlier return to employment in the MRS (La Valle et al., 2008). Irish studies also found education to be a factor and results show that women with a third-level qualification were significantly more likely to be back in employment after the birth (Russell et al., 2006). This effect is most likely linked to both the stronger financial incentives and non-financial motivations for women in more privileged positions to resume employment; these factors include higher earnings, the ability to afford childcare, greater job satisfaction and concern for advancement prospects. In addition to education, studies show pre-birth job tenure and occupation to be significant predictors of return (Waldfoegel et al., 1999; Saurel-Cubizolles et al., 1999).

Demographic and family characteristics, such as the woman's age, the number and age of other children and a partner's presence and characteristics, are also important, although patterns for demographic characteristics varied

across the countries studied (Saurel-Cubizolles et al., 1999; Waldfogel et al., 1999). This variation suggests that the influence of personal characteristics is conditioned by policy regimes, such as the childcare, tax and welfare systems. Research into the effects of a partner's characteristics and earnings has had mixed findings, with some studies showing the influence of her partner's class on a woman's return to work weakening over time (McCulloch and Dex, 2001) and others finding that a woman's probability of resuming work within one year increased as her partner's wage decreased (La Valle et al., 2008). Irish studies, however, show that a partner's employment status or income have no significant impact on the probability of women returning to work (Russell and O'Connell, 2004).

Studies also show the influence on patterns of return to work of job and organisational characteristics, such as contractual conditions and whether flexible working arrangements are available. Security of tenure can also be influential and research shows that for women in a permanent position it is more likely that the employer will encourage a return to work and that the employee will want to return. Saurel-Cubizolles et al. (1999) found that the employment contract and the sector influenced the likelihood of returning to employment within twelve months of childbirth. Studies show a positive impact of working in the public sector, which may arise as public sector employees are better protected – in terms of security of employment, formalised employment practices and union representation – and may have more access to family-friendly work policies than private sector employees (La Valle et al., 2008; Jonsson and Mills, 2001).

Statutory maternity and parental leave entitlements are likely to influence the timing of a mother's return to work. In Germany, for example, studies show that leave policies have a significant impact on the timing of a mother's return to employment (Ondrich et al., 1996). In France, Italy and Spain, Saurel-Cubizolles et al. (1999) found that the timing of return to employment after childbirth is consistent with the national leave arrangements. Where State and employer provisions are lacking or inadequate, women's likelihood of returning to work is reduced and gaps in their employment are much more common. Supplementary payments provided by employers have greater importance in countries where State provision is lower (such as the US).

### 1.3 Methodology of the Study

This survey provides the first nationally representative sample of women's experience of work in Ireland during pregnancy, on maternity leave and on their return to work. This unique dataset provides detailed information on perceptions of treatment at work during pregnancy and the influence of personal and job characteristics on women's experiences. Moreover, the survey questionnaire (see Appendix B) produced rich data on women's experiences during maternity leave and in particular new information on the take-up of leave entitlement in an Irish context. The data give a detailed insight into the difficulties around taking leave and the extent to which employment or job characteristics influence this process. The results of the survey also provide important insights into the factors influencing women's decisions to return to work and the timing of their return. The data allow for comparisons between women's jobs before and after the birth, examining job-related characteristics such as contract status, pay and hours worked.

#### 1.3.1 Sampling

The sample for the survey was selected by the Department of Social and Family Affairs<sup>1</sup> (DSFA) from its database of recipients of the universal child benefit. The sample comprised women whose youngest child was born between July 2007 and June 2009. To protect the confidentiality of the data, only the DSFA had access to contact details for the women included in the sample. Although we were primarily interested in mothers who had been in employment during pregnancy, there was no way to identify these from the DSFA records. Consequently, the sample included mothers who had not been in employment during pregnancy and we collected details on their background characteristics and the reasons they had left their previous job if they had been in employment in the past.

The sampling strategy was designed by the researchers. Information was available to the DSFA on the mother's marital status and nationality and on the date of birth of the child. Details on the structure of the population based on these characteristics was provided to the researchers in aggregated, anonymised form. The researchers developed the sampling instructions for a stratified<sup>2</sup> random sample of 5,000 women. As previous research suggested that response rates would be lower for non-Irish and for single mothers, these groups were oversampled. The sampling

1 This government department became the Department of Social Protection in 2010.

2 Based on the quarter of birth of the child, the mother's nationality (Irish or non-Irish national) and her marital status (lone parent or married/cohabiting parent).

instructions were sent to the DSFA, which selected the sample and issued a unique identification number to each mother so that responses could be tracked to ensure that those who completed the survey would not receive a reminder.

The DSFA posted details of the survey – including the paper questionnaire (see Appendix B) and information on how to complete the survey online – to the 5,000 mothers sampled. The recipients had the option of completing either the enclosed paper questionnaire or the questionnaire on the Internet. Women who completed the paper questionnaire returned it to Amárach Research, which entered the data onto computers and combined the datasets from the postal and web surveys. To facilitate women with literacy difficulties or for whom English was not their first language, the recipients were also offered the option of completing the survey by telephone interview – they could avail of this option by texting their unique ID number to Amárach Research.

The first mailshot was sent in September 2009, with a follow-up issued in October 2009. In all, 1,992 mothers responded by post, 273 responded online and 35 completed the questionnaire with an interviewer on the telephone. The overall response rate to the survey was 46 per cent of mothers (2,300 women), which is a highly satisfactory response for a postal survey.

### **1.3.2 Data Weighting**

To ensure that the results were representative of all mothers, the data were weighted using information from the DSFA on characteristics of mothers who had given birth in the two-year period, Census 2006 data and the Quarterly National Household Survey (QNHS) microdata for Q2 2008 on characteristics of mothers of children aged up to four years. The following nine characteristics were used in the weighting scheme: quarter of birth, marital status of mother, nationality of mother (five categories), age group of mother, family type, education of mother, employment status of mother, occupation of mother (where had returned to work) and hours worked category (where had returned to work).

Table A1.1 in Appendix A shows the characteristics of mothers in the sample compared with the characteristics of all mothers (from DSFA, Census 2006 and QNHS figures). Lone mothers were somewhat under-represented in the completed sample, as were older mothers and mothers with more than one child. The weighting scheme corrects for this imbalance. Results based on the weighted data can therefore be generalised from the sample to the population. In presenting the findings of this survey all the percentages reported are based on the weighted survey data and are therefore representative of the general population of mothers with young children.

## **1.4 Report Outline**

Chapter 2 is an overview of the demographic and employment characteristics of women who gave birth between July 2007 and June 2009. These findings are based on data from all participants in the survey; the remaining chapters focus on the experiences of those mothers who were in employment during pregnancy.

In Chapter 3 we examine women's experiences in the workplace during pregnancy. We assess the extent to which a mother's personal characteristics and the characteristics of her job influence perceived supportiveness of the employer and the risk of unfair treatment. We also consider issues around health and safety at work during pregnancy, looking at the aspects of the job that women felt negatively impacted on their health and the symptoms they experienced as a result. A third focus in this chapter is the issue of crisis pregnancy and we explore the reasons given by women who found their pregnancy emotionally traumatic.

In Chapter 4 we consider the take-up of paid and unpaid maternity leave and of unpaid parental leave among the women surveyed. We examine the difficulties they experienced around taking leave and the influence of their personal characteristics and the characteristics of their job during pregnancy on the uptake of leave.

In Chapter 5 we investigate the factors that influence women's decisions to return to work (to the same or a different job) or to remain outside the labour force altogether following the birth. We examine the timing of women's return to work and compare aspects of their jobs before and after the birth, such as hours worked, pay, industry, type of contract and level of responsibility.

Chapter 6 is an overview of the findings and policy implications of this study.



Chapter 2:  
Profile of Survey Respondents

## 2.1 Introduction

In this chapter we begin with an overview of the demographic characteristics of the women who participated in the survey, all of whom gave birth between July 2007 and June 2009. We then provide details of the job characteristics of the two-thirds of women who were in employment during their pregnancy,<sup>3</sup> with a particular focus on the dimensions that have proved influential in previous research into pregnancy and work experiences (such as employment sector, occupation and tenure).

**As discussed in the previous chapter, throughout this report all the percentages presented are based on the weighted survey data and are therefore representative of the general population of mothers with young children. The actual (unweighted) base number of cases is also given for reference in notes to the figures and tables and, in some instances, within the tables themselves. It is important to note that the unweighted raw numbers will not necessarily correspond to the weighted percentages.<sup>4</sup>**

## 2.2 Personal Characteristics of Mothers

The background information on the women surveyed and their families includes age, marital status, number of children and ethnicity. The data in this section are from the full sample of mothers and we compare the characteristics of mothers who were in employment during pregnancy with those of mothers who were not in employment during pregnancy.

Figure 2.1 shows the age categories of the mothers surveyed. The majority of women were between 30 and 39 years old at the time of the survey: 30 per cent were aged between 30 and 34 years and a further 33 per cent were between 35 and 39 years. Those who worked during their pregnancy were even more likely to be in the 30 to 34 and 35 to 39 age groups.

**Figure 2.1: Mothers by age group**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

The women were asked about their qualifications and the highest level of education they had completed at the time of the survey (see Figure 2.2). The largest group of mothers (29 per cent) had completed second level to non-degree, closely followed by the 28 per cent who had completed higher second level (Leaving Certificate or equivalent) and the 26 per cent who had completed degree level or higher. Smaller groups of women had left education early: 5 per cent after primary school and 12 per cent after junior cycle.

Figure 2.2 also shows a strong association between employment during pregnancy and women's educational status. Compared with all women surveyed, those who were in employment during pregnancy had higher levels of

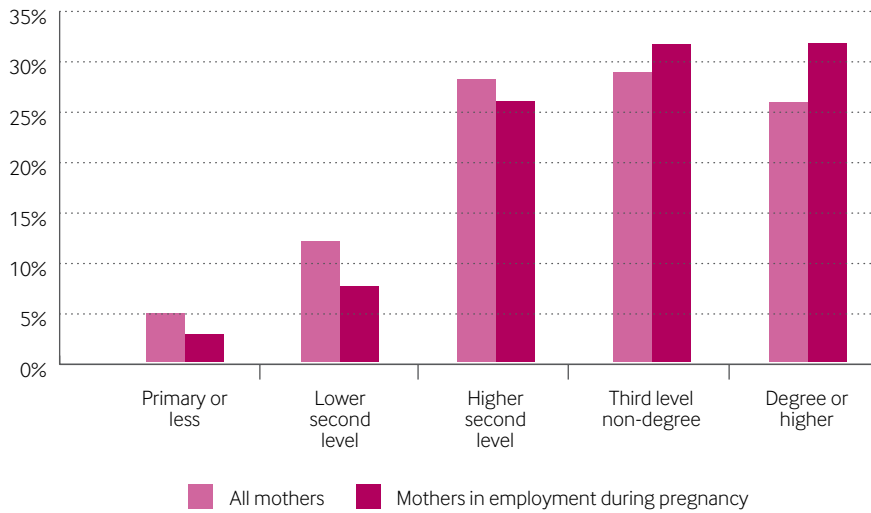
<sup>3</sup> Mothers who were in employment during pregnancy were over-represented among those who completed the survey (77 per cent). When the findings were adjusted to represent the population of mothers (i.e. respondent numbers weighted to population figures), 67 per cent of mothers were employed during pregnancy.

<sup>4</sup> The unweighted figures will not necessarily correspond to the weighted percentages because the weights correct for under-representation of some groups (see Appendix Table A1.1). See Figure 5.1 for population numbers.



education and, in particular, were more likely to have a degree or higher level qualifications (32 per cent compared with 26 per cent).

**Figure 2.2: Mothers by highest level of education**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

As shown in Table 2.1, one-third of women with no second-level qualification had been in employment during pregnancy, compared with 83 per cent of women with degrees.

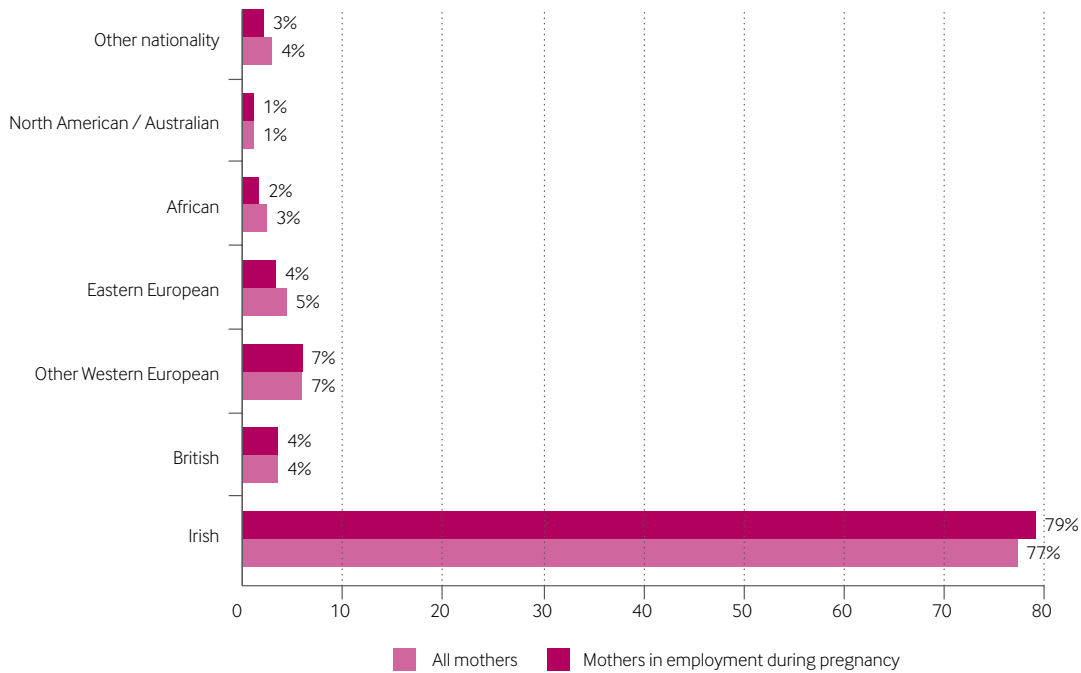
**Table 2.1: Employment during pregnancy by highest level of education**

	Primary or less	Lower second level	Higher second level	Third level non-degree	Degree or higher	Total
Yes (%)	33.0	43.3	62.2	73.6	83.4	67.2
No (%)	67.0	56.7	37.8	26.4	16.6	32.8
Total (%)	100.0	100.0	100.0	100.0	100.0	100.0
N	112	282	645	670	591	2300

Base: All mothers (N=2,300).

The majority (77 per cent) of mothers surveyed were Irish. The next largest groups were women from other Western European countries (7 per cent) and women from Eastern Europe (5 per cent). As illustrated in Figure 2.3, there were minor differences between those employed during their pregnancy and the full group of all mothers as Irish women were marginally more likely to have been at work during pregnancy.

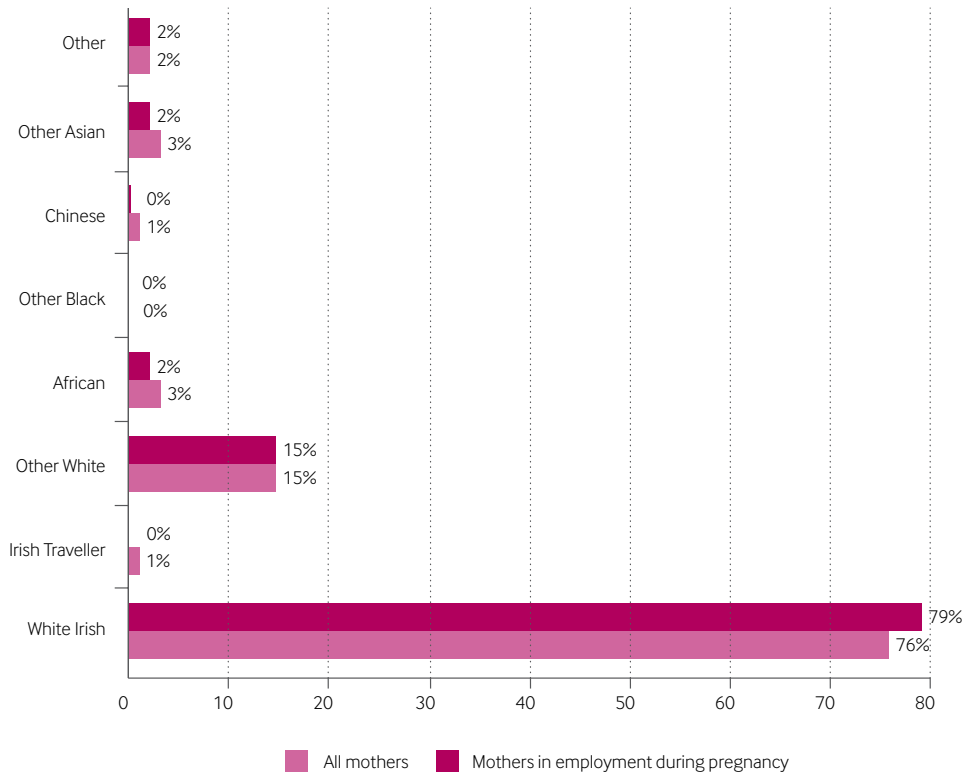
**Figure 2.3: Mothers by nationality**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).  
 Note: Percentages rounded to nearest whole number.

Figure 2.4 shows the ethnicity of all mothers and of those who were in employment during pregnancy. The mothers were predominantly 'White Irish' (76 per cent) and a further 15 per cent classified themselves as 'Other White'. Just a small proportion of the women surveyed were African (3 per cent) or Asian (4 per cent). White Irish mothers are slightly over-represented among those who worked during their pregnancy (79 per cent).

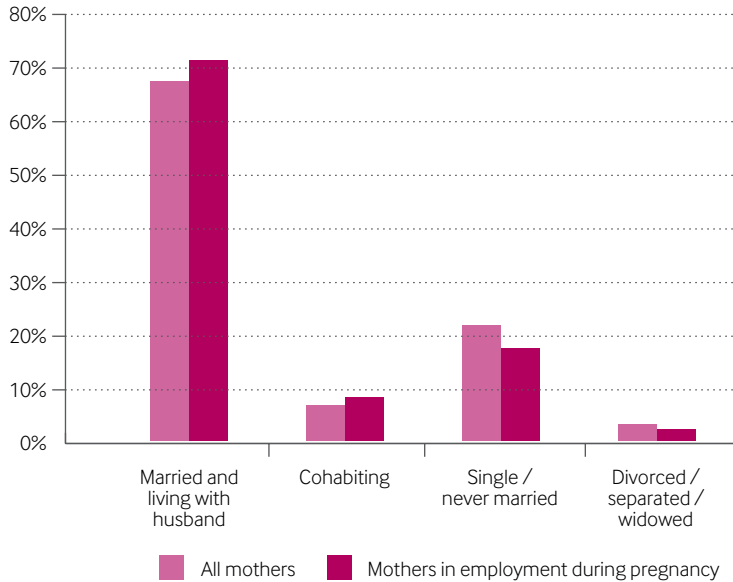
**Figure 2.4: Mothers by ethnicity**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).  
 Note: Percentages rounded to nearest whole number.

Turning to partnership status, the majority (67 per cent) of women were married and living with their husband, and a further 7 per cent were cohabiting (see Figure 2.5). Of the remaining mothers, 22 per cent described themselves as single or never married and 3 per cent as divorced, separated or widowed. Mothers who worked during their pregnancy were slightly more likely to be married compared with all mothers (72 per cent versus 67 per cent) and less likely to be single/never married (17 per cent versus 22 per cent).

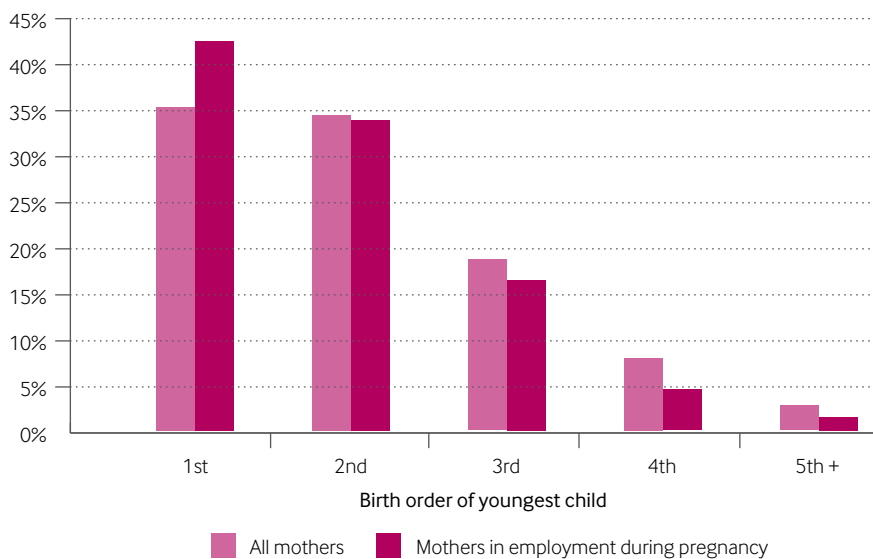
**Figure 2.5: Mothers by partnership status**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

Mothers were asked the number and ages of children living with them (see Figure 2.6). Thirty-five per cent were first-time mothers and a further 35 per cent had two children. Nineteen per cent of mothers had given birth to their third child and 8 per cent their fourth. Just 2 per cent of mothers had five or more children. Women who worked during their pregnancy were more likely to have been first-time mothers compared with all of the women surveyed (43 per cent versus 35 per cent).

**Figure 2.6: Mothers by birth order of youngest child**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

Eighty-one per cent of first-time mothers had been employed during their pregnancy, compared with 60 per cent of the mothers who had given birth to a second or subsequent child (see Table 2.2).

**Table 2.2: Employment during pregnancy by birth order**

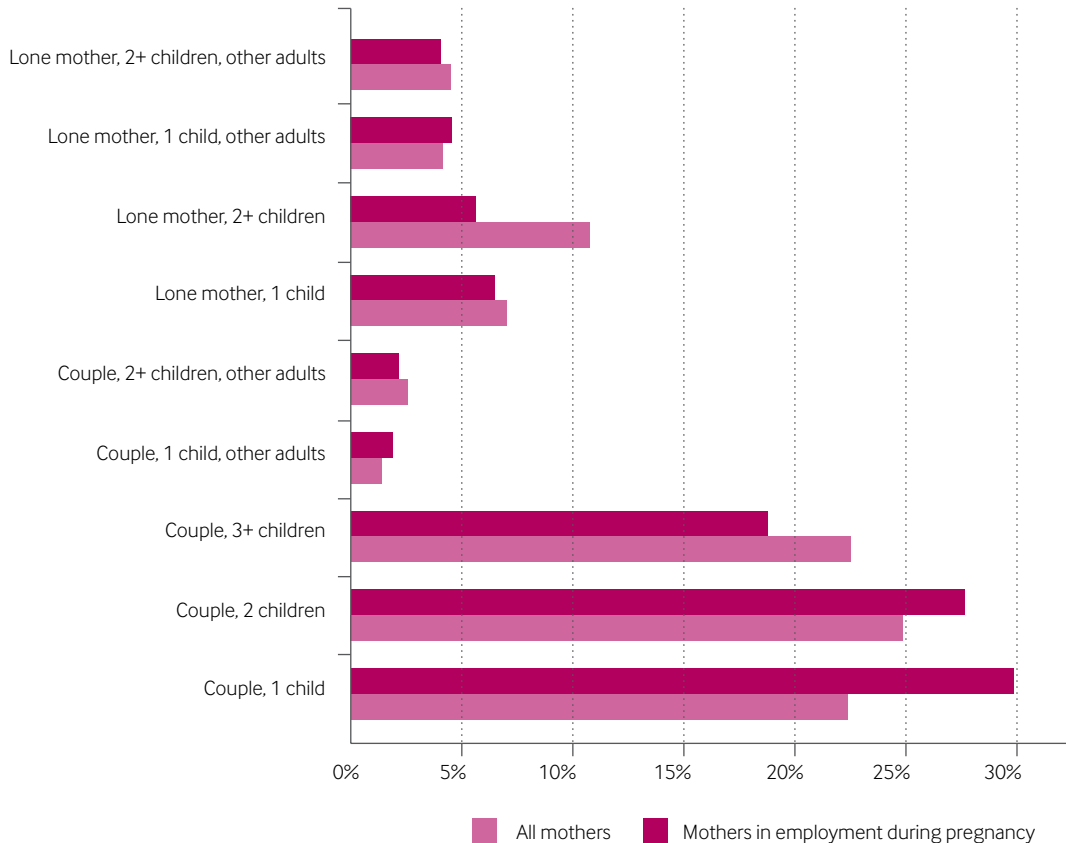
	1st child	2nd or subsequent child	All
Yes (%)	80.9	59.7	67.2
No (%)	19.1	40.3	32.8
Total (%)	100.0	100.0	100.0

Base: All mothers (N=2,300).

Using the information provided by the survey we were able to create a profile of the household type of the mothers. Figure 2.7 shows the percentage of mothers in each type of household. The majority of women were in couple households with children: 25 per cent with two children, 23 per cent with three or more children and a similar percentage with one child. Just over 10 per cent were lone mothers with two or more children and 7 per cent were lone mothers with one child and no other adults in the household.

When we compared the full sample of women with those who were in employment during their pregnancy, it was clear that employment rates during pregnancy differed by women’s family circumstances. Those in employment during pregnancy were more likely to be in a couple household with one child (30 per cent compared with 23 per cent) or a couple household with two children (28 per cent compared with 25 per cent); they were less likely to have three or more children or to be a lone mother.

**Figure 2.7: Mothers by household type**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

Forty-eight per cent of lone mothers' had *not* been in employment during pregnancy, compared with 28 per cent of women living with a partner (see Table 2.3).

It should be noted that partnership status information was collected at the time of the survey (i.e. after the birth) and therefore some of the women defined as lone mothers may have been living with a partner during their pregnancy (or vice versa).

**Table 2.3: Employment during pregnancy by household type**

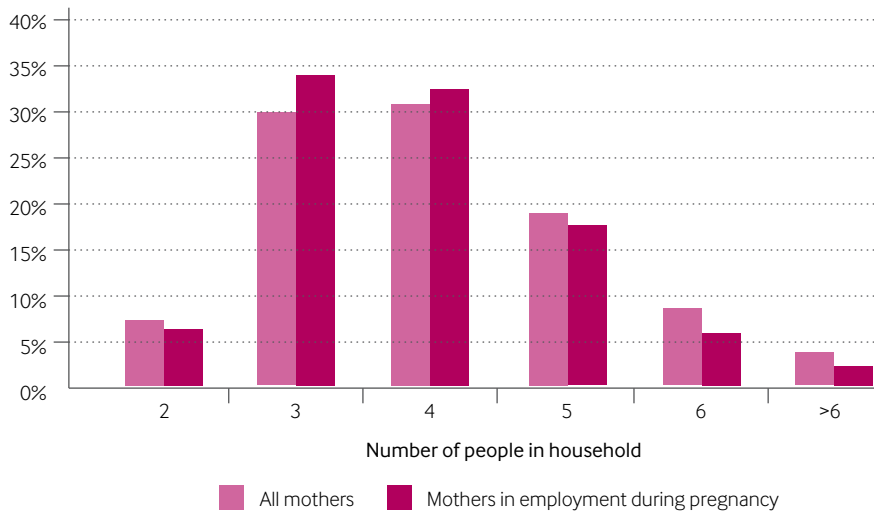
	Two parents	Lone mother	All
Yes (%)	72.5	52.1	67.2
No (%)	27.5	47.9	32.8
Total (%)	100.0	100.0	100.0

Base: All mothers (N=2,300).

These findings mean that when considering the experiences of pregnant women in the workplace it is important to keep in mind that this is a selective group and that women with lower qualifications, women with bigger families and lone mothers are less likely to be included.

Women were asked to provide information on the total number of people in their household. Figure 2.8 shows that 31 per cent of mothers were from households with four people and 30 per cent were from households with three people. When compared with the full sample of mothers, women who were employed during their pregnancy were more likely to be from households with three or four people.

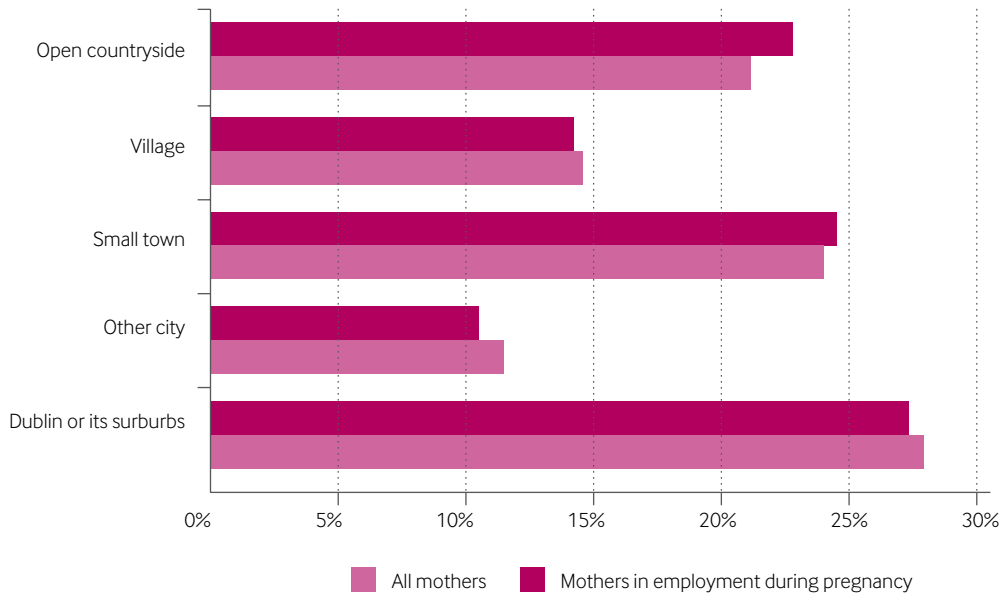
**Figure 2.8: Mothers by household size**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

Figure 2.9 shows the percentage of women living in each type of location, in terms of its urban or rural status. Almost four in every ten mothers lived in a city: 28 per cent in Dublin or its suburbs and 12 per cent in other Irish cities. Twenty-four per cent were from a small town, 15 per cent from a village and 21 per cent from the countryside. There were only slight differences between all mothers and those who had been in employment during pregnancy, with marginally more women who had been employed during pregnancy living in the 'open countryside' or a small town.

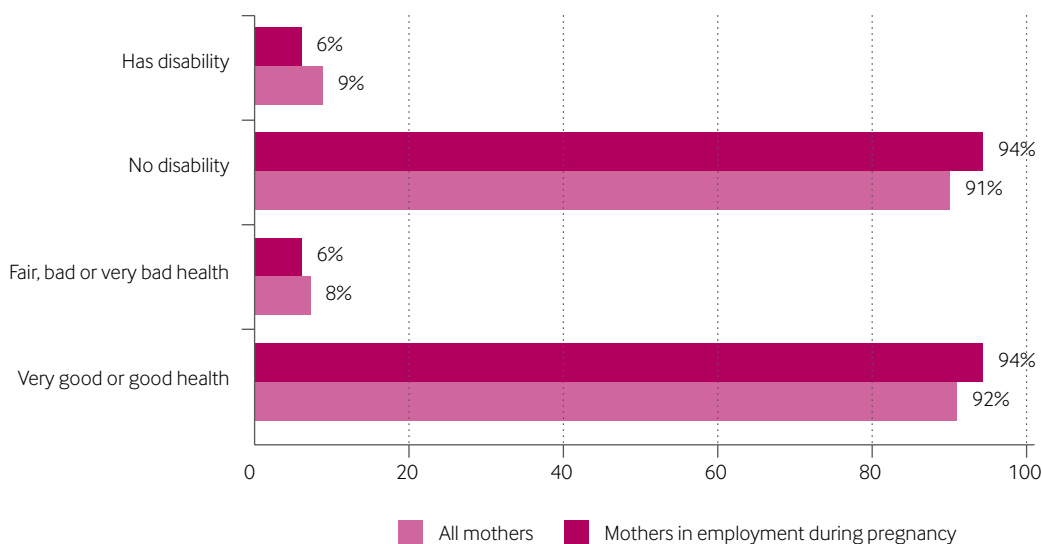
**Figure 2.9: Mothers by urban or rural location**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

In Figure 2.10 we can see the health and disability status of the mothers. More than nine out of ten mothers rated their health as very good or good at the time of the survey and the proportion was slightly higher among those mothers who had been employed during pregnancy. Thus, 8 per cent of all mothers regarded their health as very bad, bad or fair; this figure is somewhat lower (6 per cent) among mothers who were in employment during pregnancy. Overall, 9 per cent of the mothers reported having a disability at the time of the survey; the figure is lower (6 per cent) among those who had been employed during pregnancy. This means that the mothers who were in employment during pregnancy had slightly better health and were slightly less likely to have a disability than the group of mothers as a whole.

**Figure 2.10: Mothers by health and disability status**



Base: All mothers (N=2,300); women who were in employment during pregnancy (N=1,769).

Examining various aspects of the profile of the women surveyed in this study provides a greater understanding of mothers in the labour force more generally. The next section focuses on the labour market characteristics of those women who had been in employment during their pregnancy.

## 2.3 Employment Characteristics During Pregnancy

This section focuses on the job-related characteristics of the two-thirds of mothers who were in employment during their pregnancy (see Table 2.3). The majority of these women were employees (93 per cent) and the remainder were self-employed (see Table 2.4). Among the employees, 88 per cent had permanent contracts and 12 per cent had been in non-permanent employment including temporary or fixed-term contracts and casual work.

Most of the mothers had worked full time during their pregnancy (74 per cent worked at least 30 hours per week). The biggest group (43 per cent) worked between 30 and 39 hours per week, with 27 per cent working between 40 and 49 hours and 4 per cent working 50 or more hours. Of the mothers who had worked part time, most worked between 20 and 29 hours per week (17 per cent). Part-time work is strongly linked to the presence of other children: 36 per cent of women expecting their second or subsequent child worked part time during their pregnancy, compared with only 13 per cent of first-time mothers.

In order to establish the extent to which workplaces are family friendly, respondents were asked to indicate whether six types of flexible work arrangements were available to them in their job during pregnancy, even if they had not taken them up. The arrangements listed were part-time hours, flexible hours (or flexitime), the option to work from home during normal working hours, term-time working, job-sharing and the availability of time off for family reasons such as to care for a sick child.

About three-quarters of the women were in workplaces that provided at least one of these flexible working options. The biggest group of mothers (28 per cent) were in workplaces where only one of these arrangements was available (usually part-time hours or flexible hours), but 20 per cent of mothers had two of these options available and 27 per cent had three or more flexible options available. As expected there was a divergence between public and private sector workers: 19 per cent of women in the public sector had access to four or more flexible work options, compared with 8 per cent of women in the private sector.

**Table 2.4: Employment during pregnancy by job characteristics**

	%	N
Self-employed	6.9	75
Employee*	93.1	1694
<i>of which</i> Permanent	87.6	1466
Non-permanent	12.4	228
<b>Hours worked per week</b>		
1–9	1.2	23
10–19	7.9	115
20–29	16.9	271
30–39	43.2	820
40–49	26.9	463
50 or more	3.8	62
<b>Flexible work arrangements</b>		
0	25.1	449
1	28.2	490
2	20.3	371
3	15.2	250
4 or more	11.3	209

*Base: Women who were in employment during pregnancy (Unweighted N=1,769).*

*Note: Percentages are based on weighted data and the actual base (unweighted) number of cases reported. The number of cases may sum to less than 1,769 due to missing information.*

*\*A very small number of women on State employment schemes have been included with employees.*

Seventy per cent of the women who were in employment during pregnancy worked in the private sector and 30 per cent in the public sector (see Table 2.5). An examination of the more detailed industrial sector categories shows that the biggest employment sectors for the women who were in employment during pregnancy were health (19 per cent), retail and wholesale (17 per cent) and financial and business services (16 per cent).



**Table 2.5: Employment during pregnancy by industrial sector**

	%	N
Public sector (incl. semi-state)	30.0	548
Private sector	70.0	1218
Production	11.4	212
Retail and wholesale	16.7	261
Hotels and restaurants	7.2	109
Transport and communication	6.0	85
Financial and business services	15.8	346
Public administration and defence	5.7	79
Education	10.0	184
Health	19.1	356
Other services	6.5	101
Agriculture and construction	1.6	28

Base: Women who were in employment during pregnancy (Unweighted N=1,769).

Note: Percentages are based on weighted data and the actual base (unweighted) number of cases reported. The number of cases may sum to less than 1,769 due to missing information.

Table 2.6 shows the occupational distribution of women who were in paid work during their pregnancy. The biggest groups are clerical occupations such as secretary or office clerk (25 per cent), associate professional/technical occupations such as nurse, youth worker, physiotherapist or laboratory technician (17 per cent) and personal and protective service occupations such as dental nurse, playgroup leader or garda (17 per cent). One woman in seven had a professional occupation such as teacher, doctor, legal professional or engineer. Eleven per cent worked in a managerial or administrative job such as an executive officer or higher grade in the civil service or a manager in the private sector, and the same percentage worked in sales occupations such as sales assistant, telephone salesperson or merchandiser.

The percentages working in manual occupations are very low: 1 per cent of women who were in employment during pregnancy worked in craft or skilled manual jobs such as weaving, knitting, carpentry or plumbing; 2 per cent operated plant and machinery (mostly factory workers or drivers); and 1 per cent worked in other unskilled occupations such as cleaner, courier or porter.

**Table 2.6: Employment during pregnancy by occupation**

	%	N
Managerial and administrative	11	125
Professional	14	343
Associate professional and technical	17	459
Clerical and secretarial	25	339
Craft and related workers (skilled manual)	1	22
Personal and protective services	17	249
Sales	11	173
Plant and machine operations	2	36
Other	1	13

Base: Women who were in employment during pregnancy (Unweighted N=1,769).

Note: Percentages are based on weighted data and the actual base (unweighted) number of cases reported. The number of cases may sum to less than 1,769 due to missing information.

On average the women in the study had been in their jobs for just over five and a half years (66.5 months) before they took leave for the birth of their youngest child (see Table 2.7). However, some had much shorter or longer tenures: 11 per cent had been with their employer for less than one year and 15 per cent for over ten years.

**Table 2.7: Job tenure before the birth**

	%	N
Less than 1 year	10.8	214
1 to 2 years	17.1	283
2.1 to 5 years	25.0	462
5.1 to 10 years	31.7	536
Over 10 years	15.4	218
Mean job tenure (months)	66.5	

Base: Women who were in employment during pregnancy (N=1,769).

Note: Time in job until month stopped working before the birth. Percentages are based on weighted data and the actual base (unweighted) number of cases reported. The number of cases may sum to less than 1,769 due to missing information.

Thirty-one per cent of women who had been employees during pregnancy were union members (see Table 2.8). Almost three out of every five employees worked in an organisation that had a formal policy on equality. About one in three did not know whether their workplace had such a formal policy and about one in ten had been employed in a workplace that did not have a formal equality policy.

**Table 2.8: Employment during pregnancy by union membership/equality policy**

	%	N
<b>Were you a union member?</b>		
No	69.0	1142
Yes	30.9	541
<b>Was there an equality policy at your workplace?</b>		
No	8.6	156
Don't know	32.8	556
Yes	58.6	971

*Base: Women who worked as employees during pregnancy (N=1,694).*

*Note: Percentages are based on weighted data and the actual base (unweighted) number of cases reported. The number of cases may sum to less than 1,694 due to missing information.*

## 2.4 Summary

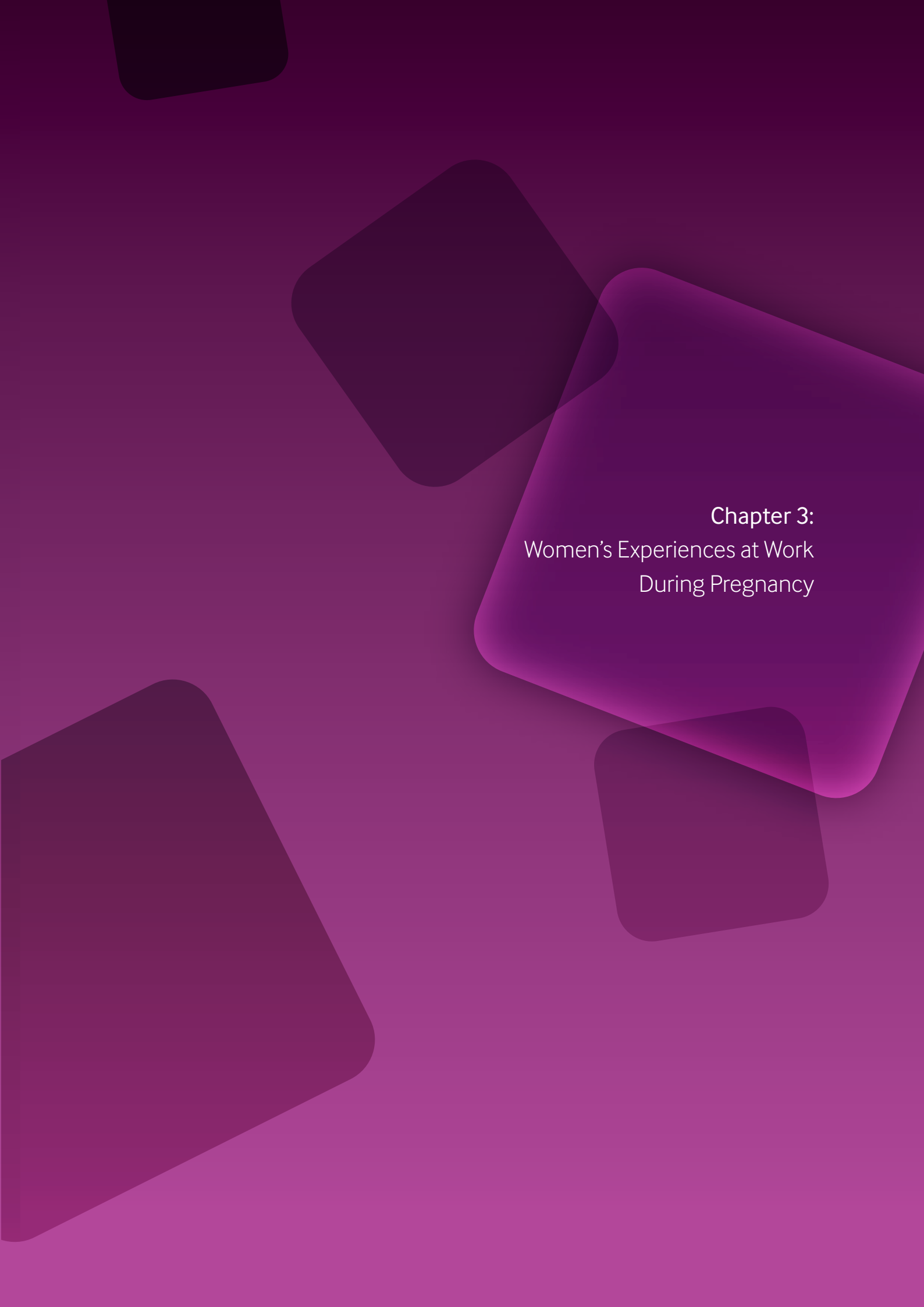
In this chapter we described the characteristics and profile of the respondents in this study. We first provided an overview of the demographic profile of the women who participated in the survey. Comparing the full sample of mothers with the two-thirds of mothers who were in employment during pregnancy, we examined such attributes as age, education, nationality, ethnicity, partnership status, number of children, household type, location and health and disability status. We found that women with higher levels of education and those who were first-time mothers were more likely to have been in employment during pregnancy and that lone mothers and mothers of three or more children were less likely to have been in employment during pregnancy.

Turning to the labour market characteristics of women who had been in employment during their pregnancy, we described the types of jobs they had occupied. We found that women had on average been in that job for just over five and a half years; that 70 per cent worked in the private sector; that 74 per cent worked at least thirty hours per week; and that 93 per cent were employees rather than self-employed or employers. The most common occupations were in the clerical/secretarial, associate professional/technical and personal/protective services areas, and the most common sectors were health, financial/business services and retail and wholesale.

Just over one-quarter of the women who had been in employment had worked part time during their pregnancy and this was strongly linked to the presence of other children. Three-quarters of the women who had been in employment during their pregnancy had worked in organisations that offered at least one flexible work practice designed to facilitate work–life balance. Previous research has shown that employment conditions have significant consequences not only for treatment during pregnancy but also for the transition back to employment following childbirth.

Our focus in subsequent chapters is on the two-thirds of mothers who had been in employment during their pregnancy. We begin, in Chapter 3, by examining their experiences at work during pregnancy.



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**Chapter 3:**  
Women's Experiences at Work  
During Pregnancy

### 3.1 Introduction

In this chapter we investigate women’s experiences at work during pregnancy. Employment during pregnancy is regulated by equality and employment legislation, which has been strengthened in recent years, yet relatively little is known about the extent to which these rights are protected at the individual level. The survey results present the first opportunity to investigate the experience of pregnant women in the workplace in Ireland. One goal of the analysis in this chapter is to identify the types of work practice that are supportive of women during pregnancy. A second goal is to determine whether particular groups of women or types of job are associated with higher vulnerability to difficulties. These findings will be important in identifying sections of the economy and groups of women that need to be targeted with information, support and/or measures to improve compliance.

The focus in this chapter is on women who were employees during pregnancy. As noted in Chapter 2, two-thirds of mothers were in employment at some time during their pregnancy. This group of mothers was the main focus of the questionnaire and completed a series of questions on their work experiences during and after pregnancy (see Appendix B).

In Section 3.2 we outline women’s perceptions of their treatment in the workplace during pregnancy and the extent to which they were supported by their employer. We investigate the factors that influence perceived unfair treatment, covering both the employment characteristics and the family and personal circumstances of the women. In Section 3.3 we focus on women’s health in the workplace during pregnancy. In Section 3.4 we explore the relationship between employment, working conditions and crisis pregnancy – for which our initial analysis covers all the women surveyed, including those who were not in employment during pregnancy, in order to discuss the issue of crisis pregnancy in the wider social context.

### 3.2 Experiences at Work During Pregnancy

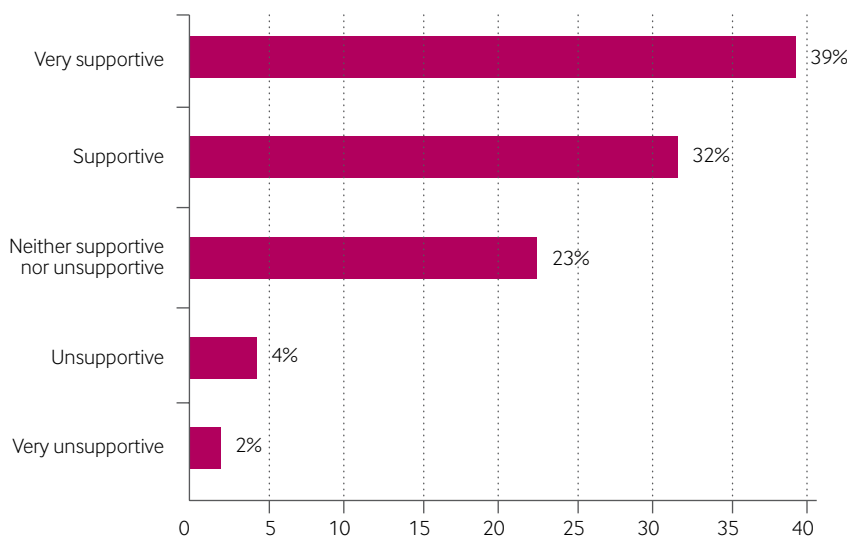
Women’s evaluations of their treatment at work during pregnancy were examined in a variety of ways: through their assessments of their employer’s supportiveness, their satisfaction with how they were treated and whether they felt they had been treated unfairly due to their pregnancy.

#### 3.2.1 Employer Supportiveness

The women were asked two general questions on how supportive their employer was towards them during pregnancy and how satisfied or dissatisfied they felt with how they were treated at work during pregnancy.

Figure 3.1 shows that the great majority of women surveyed felt that their employer had been supportive or very supportive during pregnancy (71 per cent), with only 6 per cent of respondents saying that their employer had been unsupportive or very unsupportive.

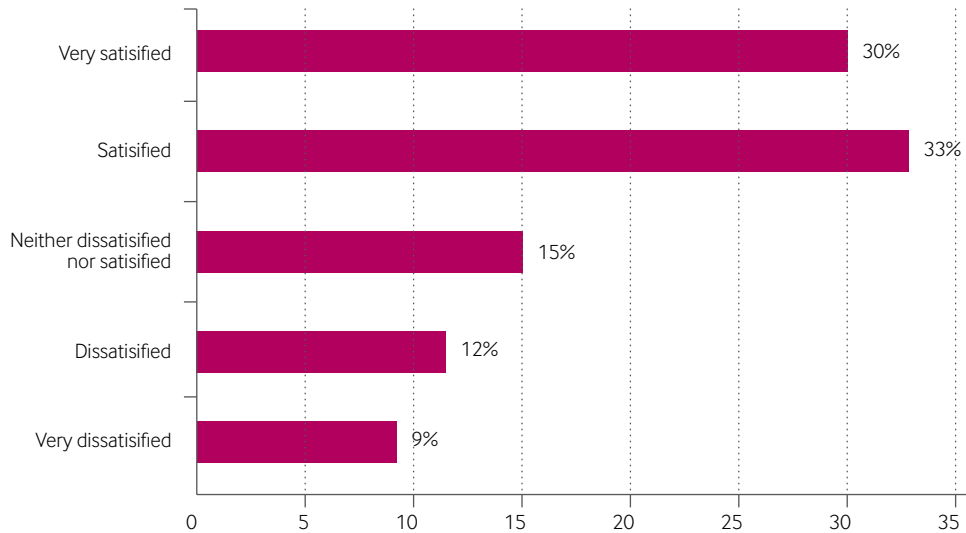
**Figure 3.1: Perceived supportiveness of employer during pregnancy**



Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

Figure 3.2 shows that the majority of women who were employees (63 per cent) also said that they were satisfied with how they were treated at work during pregnancy: 30 per cent were very satisfied and 33 per cent were satisfied. Just over one in five respondents (21 per cent) expressed dissatisfaction, with 12 per cent dissatisfied and 9 per cent very dissatisfied.

**Figure 3.2: Satisfaction with treatment at work during pregnancy**



Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

### 3.2.2 Measuring Unfair Treatment

The women were asked whether they had experienced any unfavourable treatment at work due to their pregnancy. Following the wording used in the UK's Maternity Rights Survey (MRS) (La Valle et al., 2008), respondents were asked a global question: *During your pregnancy do you think you personally were treated unfairly at work as a result of your pregnancy?* The question links the perceived unfair treatment directly to the pregnancy and confines the period to the duration of the pregnancy. Women may also be subject to unfair or discriminatory behaviour while on maternity leave or on their return to work and we examine these issues in Chapters 4 and 5.

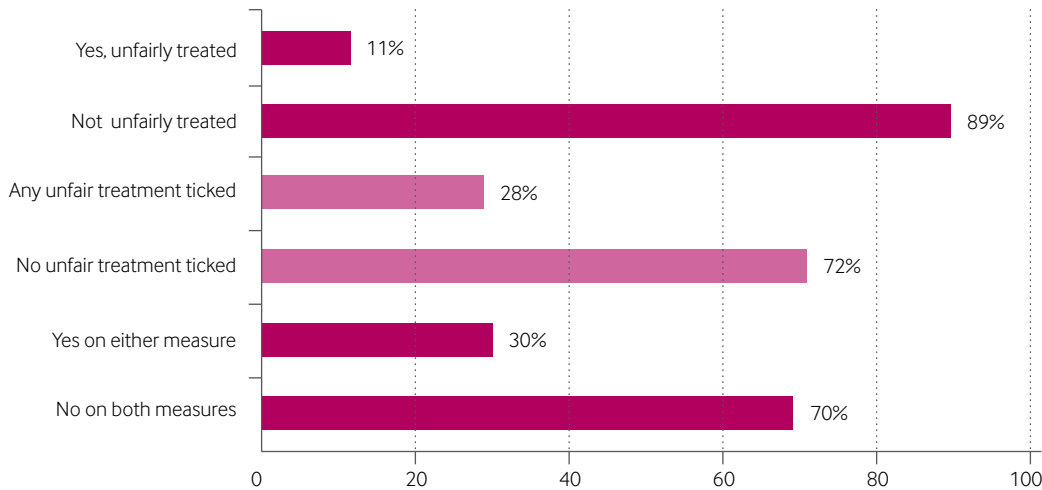
According to responses to this question, 89 per cent of mothers who were employees during pregnancy did not feel they had been unfairly treated at work, while 11 per cent felt they were unfairly treated as a result of their pregnancy (see Figure 3.3).

Respondents were then presented with a list of thirteen<sup>5</sup> possible experiences and asked to tick any that applied (see Table 3.1). The items were drawn from both the MRS and the Equal Opportunities Commission (EOC) Survey of Pregnancy Discrimination (Adams et al., 2005). This list was presented to all women regardless of how they had answered the global question on unfair treatment, on the basis that the provision of more concrete examples of behaviour in the questionnaire may elicit a response even if the respondent had answered 'no' to the previous question. Again the question required respondents to link the experience to their pregnancy: *Do you think that during your pregnancy you were treated unfairly at work in any of the following ways as a result of your pregnancy?* The responses are summarised in Table 3.1.

When presented with a list of negative experiences the proportion of women reporting that they had experienced unfair treatment as employees during their pregnancy increased to 28 per cent (see Figure 3.3), and 14 per cent reported multiple forms of unfair treatment. Overall, 36 per cent of the women who identified one form of unfair treatment had answered 'yes' to the earlier global question, but this increased to 48 per cent among women who identified two or more forms of unfair treatment.

<sup>5</sup> Including an 'other' category, which respondents were asked to specify.

**Figure 3.3: Alternative measures of unfair treatment during pregnancy**



*Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).*

The types of unfair treatment reported by women who had answered 'no' to the global question on unfair treatment were very similar to those who had answered 'yes' (see Appendix A, Tables A3.1 and A3.2), which suggests that the experiences listed in the detailed question did not include any that would routinely be perceived as fair. The main exception to this was that discouragement from attending an antenatal clinic during work hours was more likely to be mentioned among women who had said 'no' to the global unfair treatment question. While such discouragement may not be automatically considered unfair by the women affected, there is an entitlement to attend antenatal appointments in work time under employment protection legislation and therefore it is legitimate to include these responses.

As illustrated in Figure 3.3, taking responses to both questions together, 30 per cent of women reported unfair treatment during pregnancy, including a small percentage who said they were treated unfairly but did not specify the nature of the experience.

### 3.2.3 Nature of Unfair Treatment

As shown in Table 3.1, the most commonly reported form of unfair treatment at work during pregnancy was being 'given unsuitable work or workloads', with almost 12 per cent of employees reporting this as a problem. Further comments on the questionnaires indicate that this category includes factors such as standing for long periods, not being given breaks/rest periods, extensive work-related travel, having to work night shifts, long hours, heavy workloads and exposure to infection. Such issues are covered by health and safety legislation and we will return to the matter of exposure to working conditions that may place the health of pregnant workers at risk in Section 3.3 when we consider the impact of employment on women's health during pregnancy.

Other common negative experiences were unpleasant comments by managers or co-workers (8 per cent) and being discouraged from attending antenatal appointments during work time (8 per cent). The remaining responses cover a range of experiences which vary in their potential consequences.

The most serious forms of unfair treatment relate to job loss. Despite protection from dismissal during pregnancy under equality legislation, nearly 5 per cent of women were made redundant or dismissed or were treated so poorly that they felt they had to leave as a result of their pregnancy. Job loss has serious financial consequences for pregnant women: as well as the loss of earnings, if job loss occurs in the first twenty-six weeks of pregnancy, the woman loses out on her entitlement to maternity benefit.



**Table 3.1: Type of unfair treatment experienced at work during pregnancy**

	%
Given unsuitable work or workloads	11.6
Discouraged from attending antenatal classes	7.8
Unpleasant comments from employer/manager/colleagues	8.2
Shift hours changed against wishes	3.8
Unfairly criticised or disciplined about performance	3.8
Failed to gain a promotion or otherwise sidelined	5.2
Denied access to training	3.6
Reduction in salary or bonus	2.9
Pay rise or bonus that was less than peers	2.4
Treated so poorly that had to leave	2.8
Made redundant or dismissed	2.0
Threatened with redundancy or dismissal	0.9
Other	0.7
<b>% mentioning any unfair treatment</b>	<b>28.2</b>
<b>% mentioning more than one type of unfair treatment</b>	<b>13.8</b>

*Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).  
Note: Multiple responses allowed.*

A further 10 per cent of women reported experiences that involve other forms of financial loss: a reduction in salary or bonus (including loss of bonus), getting a smaller pay rise or bonus than peers or being sidelined for a promotion. A change of work shift against the woman's wishes (4 per cent) may also have resulted in a loss of salary if it involved a reduction in hours, however, this information was not systematically recorded. Denial of training opportunities was reported by 4 per cent of women and may also have longer term consequences for women's rewards and promotion opportunities.

There is a strong negative association between perceived unfair treatment or dissatisfaction with treatment and evaluations of employer's supportiveness during pregnancy. For example, 90 per cent of women who said their employer was unsupportive or very unsupportive reported unfair treatment, compared with 11 per cent of women who said their employer was very supportive. Similarly, 52 per cent of those who were dissatisfied with treatment reported unfair treatment of some sort, compared with 10 per cent of those who were very satisfied.

### **3.2.4 Factors Influencing Unfair Treatment**

Overall, 30 per cent of women who were employees reported unfair treatment of some sort at work during pregnancy (including women who did not specify the type of unfair treatment experienced). Setting aside the type of unfair treatment experienced, we examined the factors associated with an increased risk of unfair treatment. These risk factors can be related to the job and working environment or to the characteristics of the women themselves, such as age or nationality. To identify the factors that are most important, we ran a logistic regression model (see Appendix A, Table A3.4). In the following discussion we focus on those characteristics that had a significant effect on whether the mother reported unfair treatment at work during pregnancy.

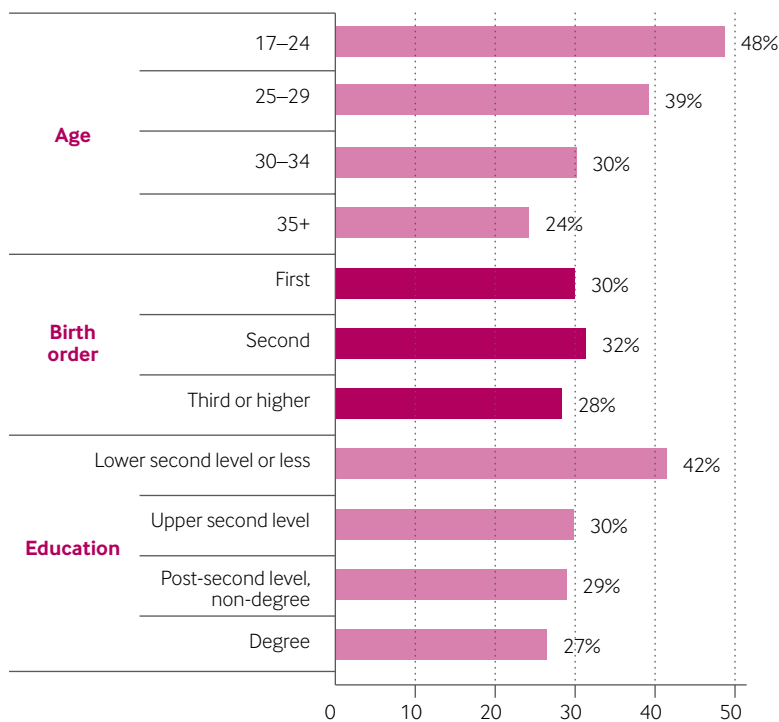
### Treatment during pregnancy by individual characteristics

Previous research shows that the personal characteristics of workers can influence experiences at work during pregnancy.

As illustrated in Figure 3.4, we found that unfair treatment at work was strongly related to the pregnant women's age, with 48 per cent of employees aged 17 to 24 years and 39 per cent of those aged 25 to 29 years reporting that they were unfairly treated during pregnancy, compared with 30 per cent of employees in the 30 to 34 age group. This is consistent with UK research findings, which show that younger women are more likely to report 'tangible discrimination' (Adams et al., 2005 – see discussion and Table A3.3 in Appendix A). When we controlled for other characteristics, younger employees remained significantly more likely to have experienced unfair treatment at work during pregnancy, but after the age of twenty-five there were no significant differences by age.

Figure 3.4 also shows that women who worked as employees and were expecting their second child were slightly more likely than first-time mothers to have experienced unfair treatment at work (32 per cent compared with 30 per cent). This difference remained statistically significant when we controlled for other characteristics of the woman and her job, but became non-significant when we controlled for supportiveness of the employer. These findings suggest that employer support is particularly important to mothers expecting their second child, as they already have childcare commitments in addition to the pregnancy. There was no significant difference between first-time mothers and mothers expecting their third or subsequent child, however.

**Figure 3.4: Unfair treatment during pregnancy by individual characteristics**



Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

Figure 3.4 shows that mothers with lower second-level education or less were more likely to have experienced unfair treatment at work during pregnancy (42 per cent, compared with 27 per cent of mothers with degrees). However, education is linked to characteristics of the job, particularly to occupation, and when we controlled for these and other characteristics of the mother the differences by level of education were no longer statistically significant (see Appendix A, Table A3.4).

Other characteristics of the mother and her family, such as nationality, marital status, health, disability status, partner's employment status/occupation and urban/rural location, did not have a significant association with experiencing unfair treatment at work during pregnancy (see Appendix A, Table A3.4).

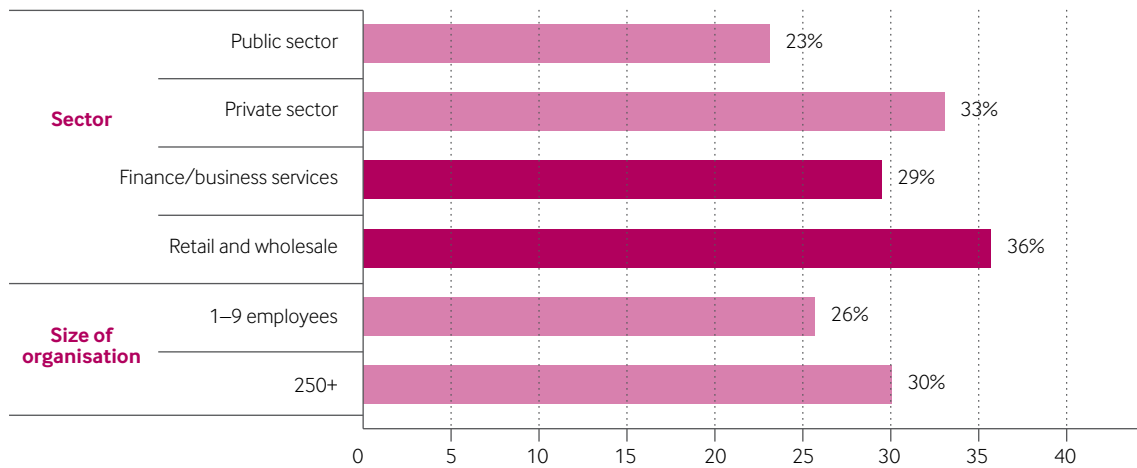
### Treatment during pregnancy by employment characteristics

While individual and family characteristics have some influence on experiences at work during pregnancy, it is also highly likely that a woman’s position in the workforce and specific work conditions will influence her treatment at work.

Figure 3.5 shows the percentage of employees who experienced unfair treatment at work during pregnancy by sector and size of organisation. Women working in the private sector during pregnancy were somewhat more likely to report unfair treatment (33 per cent) than women in the public sector (23 per cent). Within the private sector, there was also quite an amount of diversity, with women in financial and other business services less likely to report unfair treatment than women in retail and wholesale (29 per cent and 36 per cent, respectively). When other characteristics were controlled, the only difference that remained statistically significant was the higher rate of unfair treatment in retail and wholesale than in other sectors (see Appendix A, Table A3.4).

Women who worked in smaller organisations were less likely to have experienced unfair treatment: 26 per cent of women in organisations with fewer than ten employees, compared with 30 per cent of women in organisations with 250 or more employees. Other differences by size of organisation are not statistically significant in the model (see Appendix A, Table A3.4).

**Figure 3.5: Unfair treatment during pregnancy by sector and size of organisation**

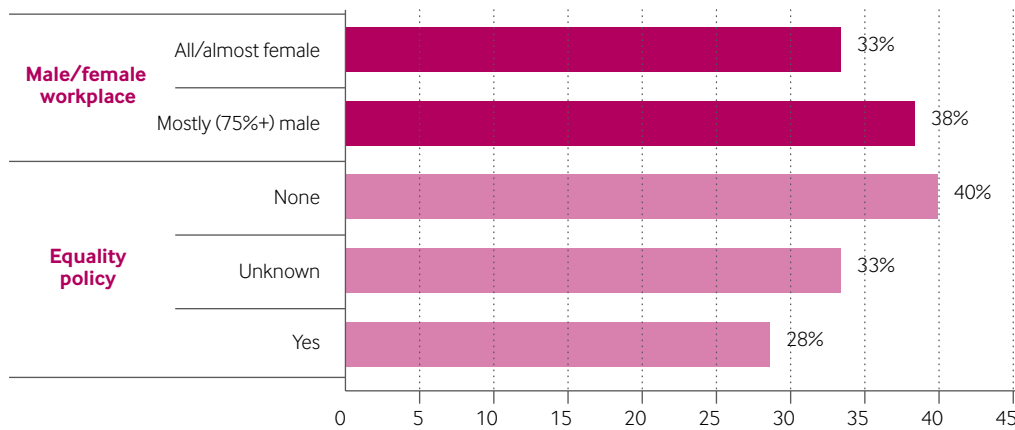


Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

One occupational group stands out as having a higher risk of unfair treatment during pregnancy: women working in skilled manual or craft occupations. As there were only a very small number in the sample (22 cases), we have not charted the occupations here. Other differences by occupation are not statistically significant (see Appendix A, Table A3.4).

Figure 3.6 shows that women who worked in male-dominated workplaces when pregnant were more likely to feel that they had been treated unfairly: 38 per cent of women who had worked in workplaces that were mostly (three-quarters or more) male had experienced unfair treatment, compared with 33 per cent of women in mostly female workplaces. The difference between these two groups remained statistically significant when other factors were controlled, although workplaces that are three-quarters female or evenly split between women and men did not differ from those that are almost all female (see Appendix A, Table A3.4). However, when we controlled for the supportiveness of the employer (see Appendix A, Table A3.4, Model 2), the difference based on the gender breakdown of the workplace became non-significant. This suggests that the differences between male-dominated and female-dominated workplaces are linked to the better preparedness of employers in female-dominated workplaces for managing the needs of pregnant employees.

**Figure 3.6: Unfair treatment during pregnancy by gender composition of the workplace and by equality policy**

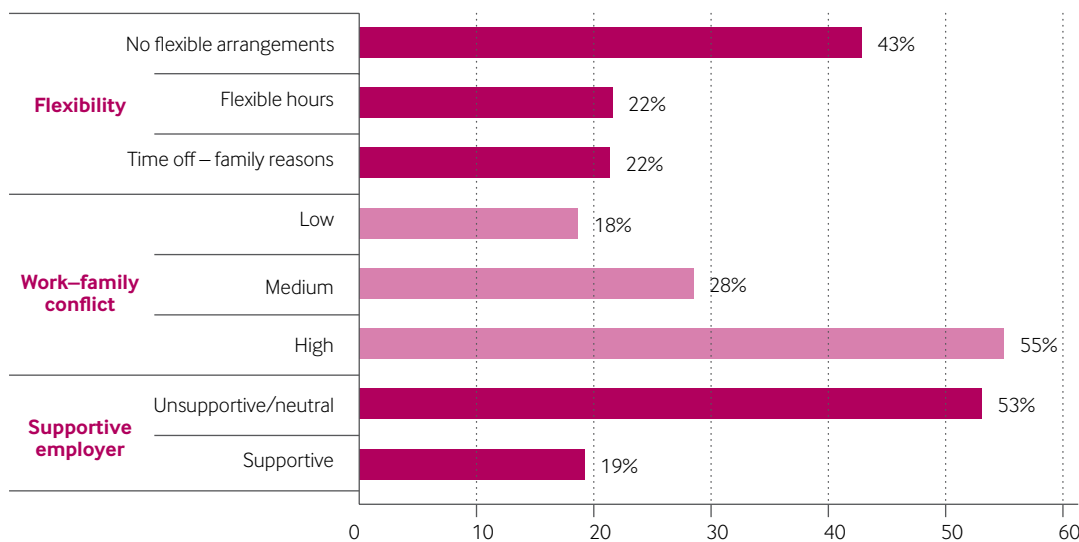


Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

Workplaces with a formal equality policy were also associated with a lower rate of unfair treatment: 40 per cent of women who had worked during pregnancy in organisations without a formal equality policy reported unfair treatment, compared with 28 per cent of those where such a policy was in place. We noted in Chapter 2 that almost one-third of women did not know whether their workplace had a formal equality policy (see Table 2.8). Figure 3.6 shows that these women occupy an intermediate position in terms of their perception of unfair treatment (33 per cent). The impact of a formal equality policy on unfair treatment is no longer significant when supportiveness of the employer is controlled (Appendix A, Table A3.4, Model 2). This outcome suggests that the positive features of workplaces with a formal equality policy are linked to general supportiveness of the needs of the female workforce.

There was a strong association between the availability of flexible work arrangements and the rates of self-reported unfair treatment. The statistical model suggested that flexible hours and the availability of time off for family reasons (such as to care for a sick child) were most important. Figure 3.7 shows that 43 per cent of women working in organisations with no flexible working arrangements reported unfair treatment, compared with only 22 per cent where either flexible hours or time off for family reasons was available. These differences remained statistically significant when other factors were controlled, although the availability of flexible hours became non-significant when we controlled for the supportiveness of the employer (see Appendix A, Table A3.4, Model 2).

**Figure 3.7: Unfair treatment during pregnancy by job characteristics**



Base: Women who worked as employees during pregnancy (self-employed excluded) and who provided information on treatment at work (N=1,662).

The proportion of employees reporting unfair treatment at work during pregnancy was substantially higher among women who had an unsupportive or neutral employer (53 per cent) than among those who had a supportive employer (19 per cent). The link between supportiveness and unfair treatment remained strong when other job and personal characteristics were held constant (see Appendix A, Table A3.4, Model 2).

Women who experienced high levels of work–family conflict during pregnancy were more likely to report unfavourable treatment at work. Indeed, over half of women (55 per cent) who experienced high levels of work–family conflict reported unfair treatment, compared with only 18 per cent of women who experienced low levels of work–family conflict. The impact of work–family conflict remained statistically significant when other characteristics were controlled (see Appendix A, Table A3.4).

The following job characteristics were found to be unrelated to unfair treatment at work during pregnancy: earnings, tenure, hours worked and contract status (permanent or temporary).

### 3.2.5 Actions Taken in Response to Unfair Treatment

Women who reported unfavourable treatment at work on the basis of their pregnancy were asked if they had taken any action in response. Almost 72 per cent of these women had taken no further action (see Table 3.2). This level is somewhat higher than that reported in the UK, where Adams et al. (2005) found that in response to pregnancy-related discrimination: 55 per cent of the women took no action, 13 per cent took a formal action of some sort and a further 34 per cent raised the issue with an employer/manager. The proportion taking no action in the present study is also somewhat higher than that found in an Irish study of all forms of discrimination, where 60 per cent of those who had experienced discrimination in the preceding two years took no further action and 6 per cent made an official complaint or took legal action (Russell et al., 2008).

**Table 3.2: Action taken in response to unfair treatment**

	%	N
No action	71.7	331
Went to manager/supervisor	19.4	88
Went to personnel/HR department	9.2	33
Went to trade union	2.0	11
Went to solicitor	2.3	11
Made formal complaint	2.9	15
More than one action	6.2	23

*Base: Women who had experienced unfair treatment and who responded to question on action taken (N=460), including those who did not specify the type of unfair treatment.*

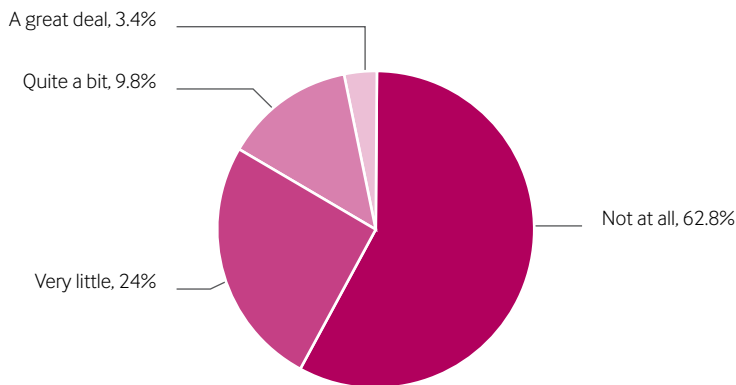
*Note: Multiple responses allowed. Percentages are based on weighted data and the number of cases refers to the actual (unweighted) number of respondents to the survey.*

As Table 3.2 shows, of those who took further action, the majority pursued organisational channels of complaint by either going to a manager or supervisor or taking their complaint to the personnel/human resources department. Only a tiny fraction (2 per cent) of the women affected took a legal route in response to the unfair treatment they had experienced. The number who took action was too small to conduct further analysis on the factors that influenced the type of action taken.

### 3.3 Health and Employment Conditions During Pregnancy

The literature on the impact of working conditions on pregnancy outcomes tends to focus on two main areas: the occupational factors that are suspected of having negative effects, or the specific effects on women or their babies. A review of literature by Russell and Banks (2011) identified adverse outcomes from five common workplace practices: prolonged working hours, shift work, lifting, standing and heavy physical workload. In this survey respondents were asked whether their physical or mental health had been negatively affected in any way by their employment during pregnancy. While the majority of women had not been affected, 13 per cent stated that their health had been affected 'quite a bit' or 'a great deal' by working conditions during their pregnancy (see Figure 3.8).

**Figure 3.8: Was physical or mental health negatively affected by employment during pregnancy?**



*Base: All women who were in employment during pregnancy (N=1,769).*

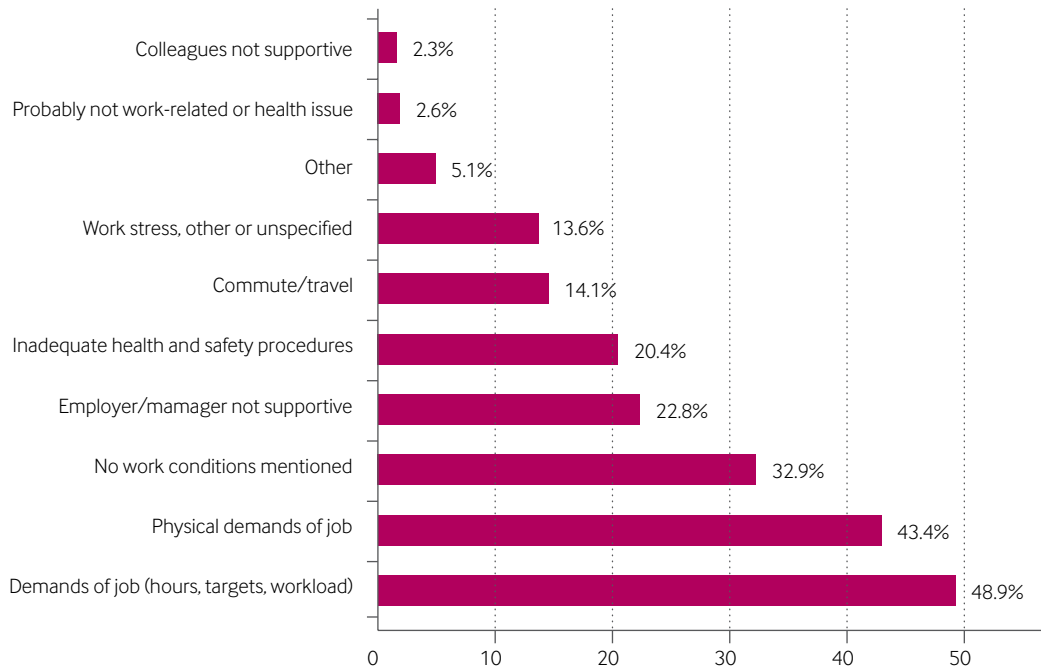
The health and safety of pregnant women in employment is protected through the Safety, Health and Welfare at Work Regulations 2007 (HSA, 2007). Under these regulations, employers are required to carry out a risk assessment to evaluate any risks to a pregnant employee's safety or health and to identify any possible adverse effects on the pregnancy or breastfeeding of an employee. If any risks are uncovered, the employer must protect the employee by taking protective measures, adjusting working conditions or working hours or, if none of these alternatives is possible, placing the employee on sick leave. The specific hazards mentioned in the Irish health and safety guidelines are listed in Box A3.1 in Appendix A.

Those women who reported that their health had been affected 'a great deal' or 'quite a bit' were asked to describe how their health was affected by means of an open question. The responses can be broken down into two categories: those that identify the job factors that influenced health during pregnancy (outlined in Figure 3.9) and those that describe the symptoms experienced (see Figure 3.10). Some of the respondents gave both job factors and symptoms, while others mentioned just one or the other.<sup>6</sup> Note that the number of cases is low (N=199) and therefore these results should be treated with caution.

A large proportion (43 per cent) of respondents who reported that their health had been negatively affected stated that the physical demands of the job had impacted on their health during their pregnancy. The physical demands at work included standing, walking, heavy lifting, physical exertion or heavy work during pregnancy and are similar to those found in other Irish and international research (Niedhammer et al., 2009; Bonzini et al., 2007; Mozurekewich et al., 2000). This figure possibly reflects the proportion of women working in the services sectors (see Chapter 2, Table 2.5), who may find it extremely difficult during their pregnancy to perform the full range of duties associated with their job (Banks and Russell, 2011).

Almost half of the women whose health had been affected (49 per cent) mentioned the general demands of the job, which included having to meet set targets, the length of hours worked and the workload expected of them. Another 23 per cent reported problems with their employer or manager not being supportive during their pregnancy or being too demanding of their time. Twenty per cent stated that the reason their health was affected was due to inadequate health and safety procedures in their workplace, which suggests that the necessary risk assessments may not have been carried out by their employers.

<sup>6</sup> One-third of those responding gave only a symptom/health problem without identifying the work conditions that may have caused or aggravated the problem; 12% mentioned a job factor but did not describe the specific health problem.

**Figure 3.9: Factors influencing health problems of pregnant workers**

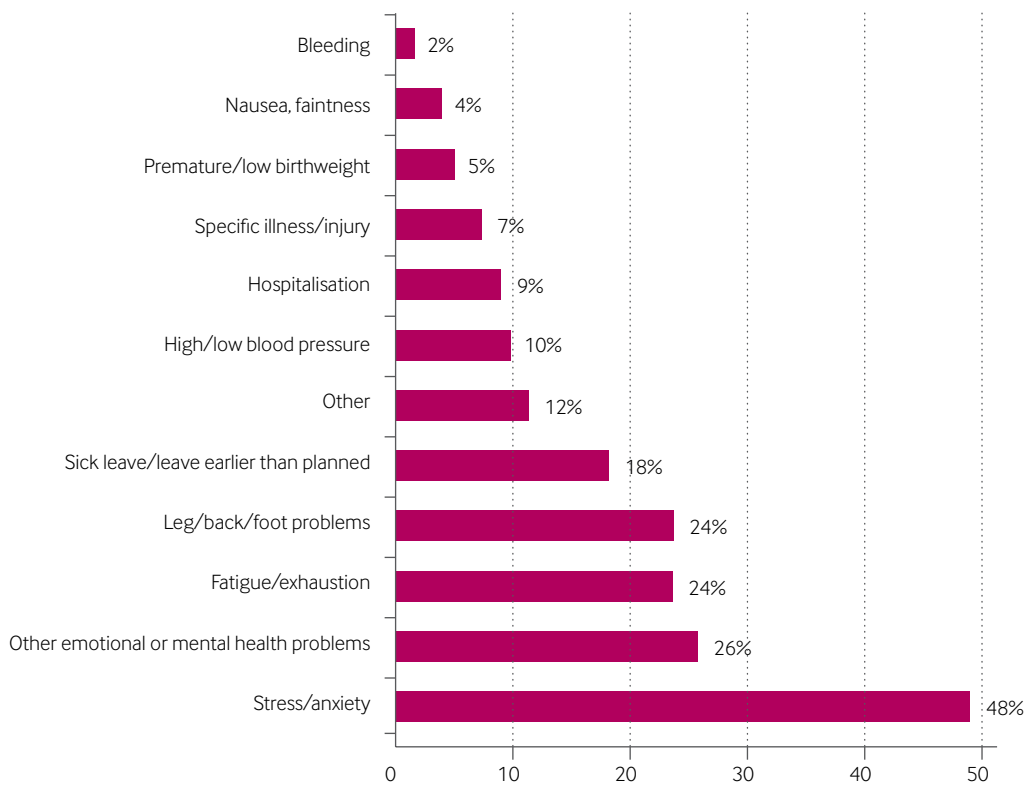
Base: Women who reported that work affected their mental or physical health 'quite a bit' or 'a great deal' (N=199).

Note: Multiple responses allowed.

Health researchers have drawn linkages between working long hours and/or poor working conditions and pregnant employees' experiences of stress and poor health and, in some cases, have found a significant association with low birthweight and pre-term births (Niedhammer et al., 2009). Other research has found that women who take early maternity leave often do so because of reasons related to health, tiredness, inability to carry out certain duties or poor working conditions (La Valle et al., 2008); increased blood pressure, migraines or effects on the health of their baby (EOC, 2005).

The women reporting negative health effects in the present survey also gave details of how their health was affected by work during their pregnancy (see Figure 3.10). By far the most common impact identified was stress or anxiety, with nearly half of the women who experienced negative health effects identifying work-related stress during their pregnancy (48 per cent). Other common negative health effects included emotional or mental health problems (26 per cent) and fatigue, tiredness or exhaustion (24 per cent).

**Figure 3.10: Health problems experienced by pregnant workers**



Base: Women who reported that work affected their mental or physical health 'quite a bit' or 'a great deal' (N=199).

Note: Multiple responses allowed.

It is noteworthy that the hazards associated with long hours, occupational stress and problems related to long periods of standing or sitting are not mentioned in the Irish health and safety regulations and guidelines on pregnant workers (see Appendix A, Box A3.1).<sup>7</sup> These risks are, however, prominently outlined in the European Commission's guidelines (see Appendix A, Box A3.2). In fact, the list of hazards in the Irish regulations is considerably shorter than in the European guidelines and is focused on chemical hazards and more uncommon risks. The risks that were identified frequently by women in the survey are therefore not emphasised to Irish employers through the national health and safety guidelines.

The information available to employers and employees in Ireland is more limited and less accessible than that available in the UK, where there is detailed online and printed information on the nature of risks during pregnancy and on the precautions that can be taken to avoid them.<sup>8</sup>

### 3.3.1 Personal Factors and Health Among Employed Pregnant Women

Next we examine which groups of pregnant women are most vulnerable to health problems in the workplace and consider which organisation types, jobs and work conditions are associated with health risks. As in the previous section, the discussion is informed by a statistical model that identifies the most important risk factors for experiencing negative health effects (see Appendix A, Table A3.5).

The influence of personal characteristics on the likelihood of work-related health problems during pregnancy is examined first (see Figure 3.11). Younger mothers (aged 17 to 24 years) are at a higher risk: 15 per cent reported their health was affected 'quite a bit' and a further 9 per cent reported their health was affected 'a great deal'. Younger mothers remained at higher risk when we controlled for other characteristics of the mother and her job. However, the differences between age groups were no longer statistically significant when we controlled for treatment at work

7 However, under the 'Pregnant at Work Frequently Asked Questions' heading on the Health and Safety Authority's website, 'Stress and/or bullying' is included in the list of general hazards: [www.hsa.ie/eng/Workplace\\_Health/Sensitive\\_Risk\\_Groups/Pregnant\\_at\\_Work\\_FAQ\\_Responses/Pregnant\\_at\\_Work\\_FAQ\\_Responses.html](http://www.hsa.ie/eng/Workplace_Health/Sensitive_Risk_Groups/Pregnant_at_Work_FAQ_Responses/Pregnant_at_Work_FAQ_Responses.html) (last accessed May 2011).

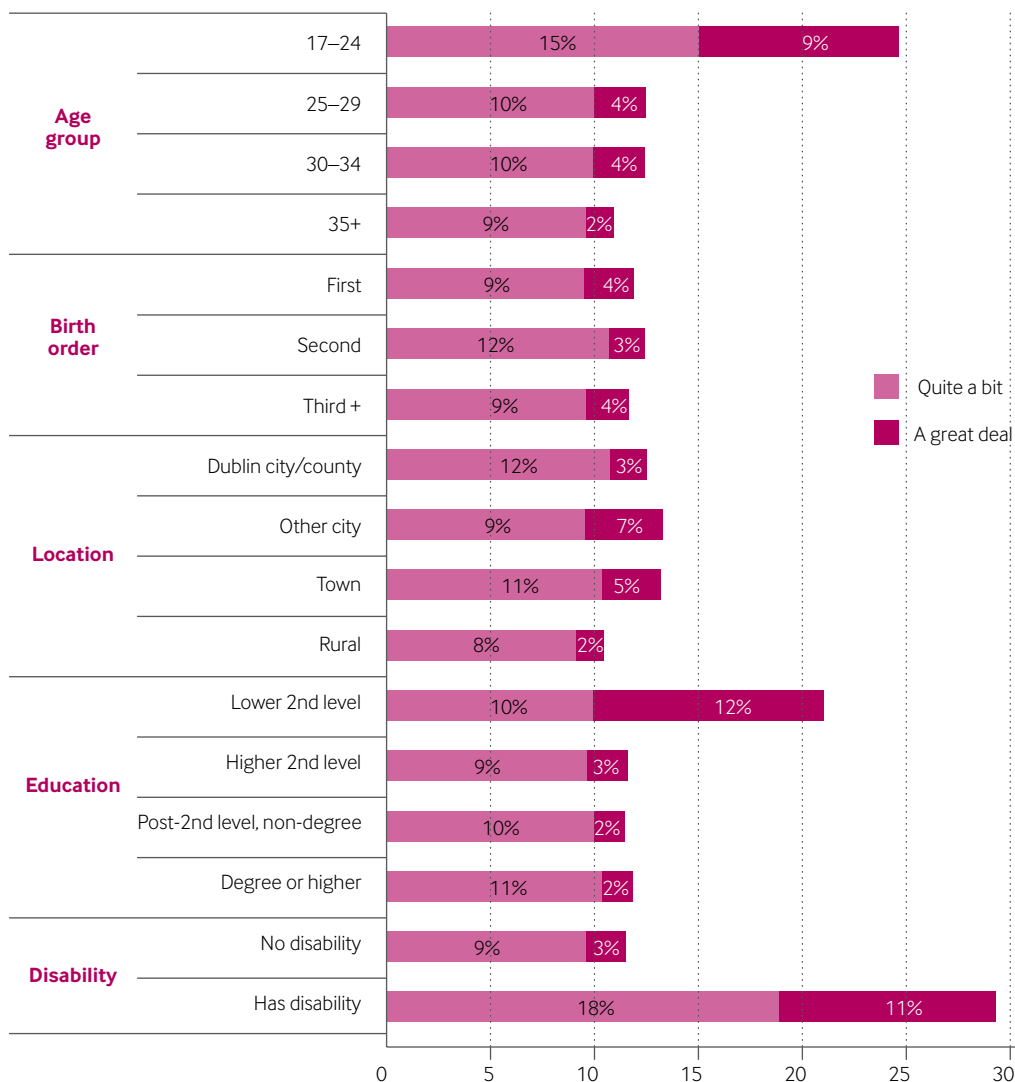
8 See the UK Health and Safety Executive's website: [www.hse.gov.uk](http://www.hse.gov.uk) and HSE (2003) for example.



during pregnancy (Appendix A, Table A3.5, Model 3). We saw in the previous section that younger mothers were more likely to have experienced unfair treatment during pregnancy and when we controlled for unfair treatment and the supportiveness of the employer, the differences between age groups disappeared.

Mothers who had given birth to their second child were also at a higher risk of experiencing negative health effects as a result of work during pregnancy. About one in eight (12 per cent) of this group was affected 'quite a bit' and a further 3 per cent 'a great deal'. This difference remained statistically significant when other characteristics of the mother and her job were controlled, but was no longer significant when we controlled for unfair treatment. We saw in the previous section that mothers were more likely to report unfair treatment during their pregnancy with their second child. There was no difference in health risk due to work between women who were expecting their first or their third or subsequent child.

**Figure 3.11: Reporting negative health effects by personal characteristics**



Base: Women in employment during pregnancy (Valid N=1,724).

There were some differences by whether the mother lived in an urban or rural area. These were very slight, as shown in Figure 3.11, but when we controlled for treatment at work during pregnancy, mothers living in small towns were more likely to experience negative health effects when working during pregnancy than mothers living in rural areas. It is not clear what is underlying this pattern. It may be that employers in small towns are generally supportive, as we did not see a difference until supportiveness and unfair treatment were controlled in the model (see Appendix A, Table A3.5, Model 3).

In Figure 3.11 we see that mothers with lower levels of education were considerably more likely to experience negative effects on their health during pregnancy. One-tenth of mothers with lower second-level education or less reported that their health was affected 'quite a bit' and almost one in eight reported that their health was affected 'a great deal'. However, education is associated with age and with the kinds of jobs these women have and when we controlled for other characteristics of the mother and of the job, the difference between mothers with low levels of education and mothers with degrees was no longer significant (see Appendix A, Table A3.5, Model 1). In the models it was mothers with some education beyond second level but not degree level (e.g. a certificate or diploma) who were distinct and their risk of negative health effects was lower than that of mothers with degrees. This pattern persisted when we controlled for the presence of a formal equality policy and experiences at work during pregnancy.

Women with a disability were more likely to have experienced negative health effects due to work during pregnancy: 18 per cent were affected 'quite a bit' and a further 11 per cent were affected 'a great deal'. We thought carefully about whether to include this in the model as disability was measured at the time of the survey and may not have been present during pregnancy. As the other coefficients in the model did not change dramatically when we included disability, we decided to retain it because of its importance. It should be interpreted with caution, however, as the disability may have resulted from the negative health consequences of work during pregnancy rather than preceding them.

Other characteristics of the mother and her family, such as marital status, the number of adults in the household, nationality and partner's economic status, were not significantly associated with the risk of negative health effects while working during pregnancy when the above characteristics were controlled.

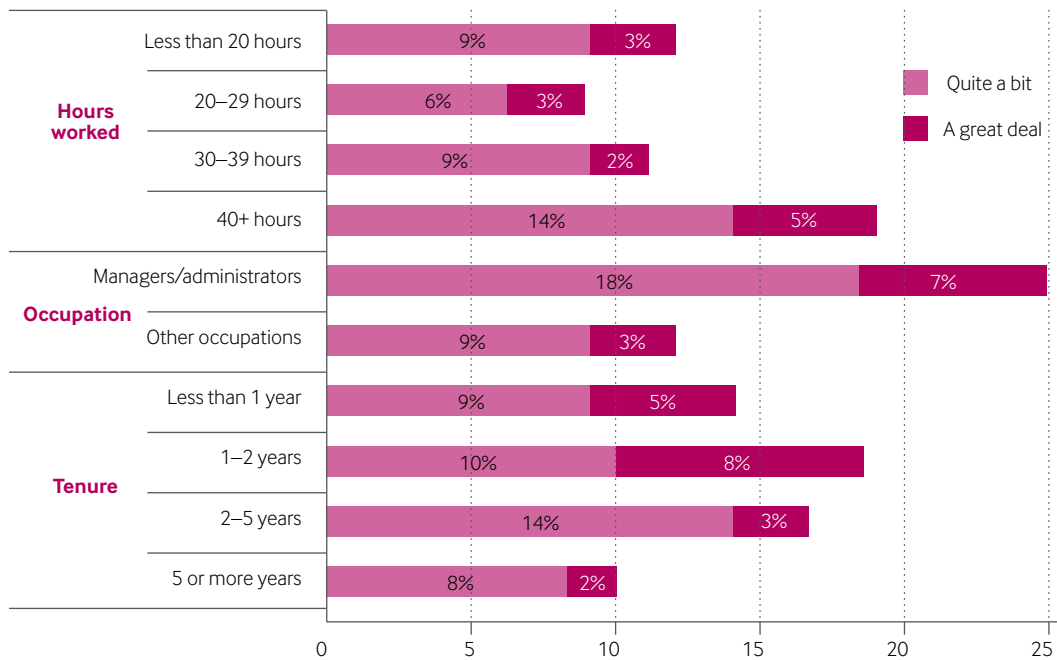
### ***3.3.2 Work Characteristics and Health Among Pregnant Women***

In order to understand health and pregnancy in the workplace, we compared the proportions of women reporting that their health was negatively affected across a range of work characteristics (see Appendix A, Table A3.5). Those job characteristics that were significant are discussed below.

Figure 3.12 shows the percentage of women whose physical or mental health was affected negatively during pregnancy by their hours worked, occupation and job tenure. In terms of hours worked, the model suggests that women who worked less than 20 hours per week were at higher risk of negative health effects, but this was only apparent when we controlled for treatment at work (supportiveness of employer and unfair treatment). Before controlling for other characteristics, women working over 40 hours were at a higher risk, with 19 per cent affected 'quite a bit' or 'a great deal'. This group of women did not differ significantly from women working 30 to 39 hours when other characteristics were controlled, however.

The only occupational groups that stood out in terms of an increased risk of negative health consequences when working during pregnancy were managers/administrators and skilled manual (craft) workers. In Figure 3.12 we see that 25 per cent of managers/administrators reported that their health had been negatively affected by their employment during pregnancy, compared with 12 per cent of women in other occupations. As the number of skilled manual workers who answered the question about health effects was small (20 cases), we did not chart the figures for this group. Once we controlled for the presence of a formal equality policy in the workplace, these two occupational groups no longer differed significantly from others.

Women with longer job tenures were less likely to have experienced negative health consequences. In Figure 3.12 we see that 14 per cent of women who had been in the job for less than one year and 18 per cent of women who had been in the job for one to two years experienced negative health consequences, compared with only 10 per cent of women who had been working in the job for five or more years. Once we controlled for the presence of an equality policy and treatment at work during pregnancy, job tenure made no difference (see Appendix A, Table A3.5).

**Figure 3.12: Reporting negative health effects by hours worked, occupation and tenure**

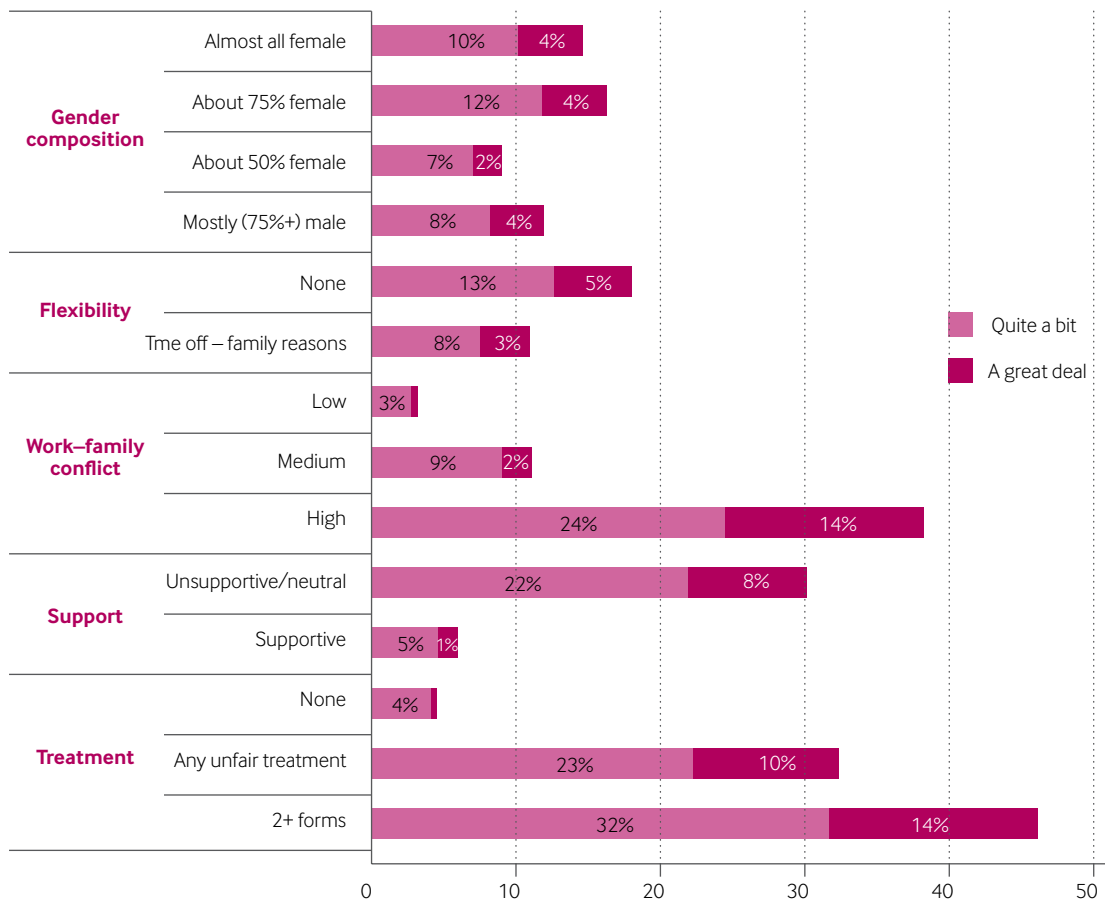
Base: Women in employment during pregnancy (Valid N=1,716).

International literature has shown that women in firms without flexible working arrangements are more likely to have experienced problems with their employer during their pregnancy and maternity leave (Callender et al., 1997). In the present survey, respondents were asked to indicate whether six different flexible work arrangements were available to them during pregnancy: working from home, having flexible hours or flexitime, job-sharing, working part-time hours, term-time working and unpaid time off for family reasons. One-quarter of respondents stated that none of these six flexible working arrangements was available (see Chapter 2, Table 2.4).

We examined whether negative health effects at work during pregnancy were linked to the existence of flexible work arrangements. The results of the model indicate that the availability of time off for family reasons, such as to care for a sick child, is important: women who had this option available were less likely to report health problems linked to their job. In Figure 3.13 we see that 11 per cent of women with this flexible option available reported negative health consequences, compared with 18 per cent of women in workplaces with none of the six flexible options. The other forms of flexibility (such as part-time working, flexible hours and being able to work from home) had no impact with other factors controlled. When we controlled for treatment at work during pregnancy (supportiveness of employer and unfair treatment), the availability of time off for family reasons was no longer significantly associated with health risks. This suggests that informal support from the employer may be fulfilling the same type of function for workers as the formal availability of time off for family reasons.

Conflict between work and family commitments was an important correlate of work-related health problems during pregnancy and remained important when other personal and job characteristics (including supportiveness and unfair treatment) were controlled. In Figure 3.13 we see that only 3 per cent of women who experienced low levels of work–family conflict reported negative health effects. The figure is 11 per cent for women reporting medium levels and 38 per cent for women reporting high levels of work–family conflict during pregnancy.

**Figure 3.13: Reporting negative health effects by gender composition of the workplace, flexibility and treatment at work during pregnancy**



Base: Women who worked as employees during pregnancy (Valid N=1,698).

The pattern by the gender composition of the workplace, shown in Figure 3.13, suggests that pregnant women in workplaces with roughly equal numbers of men and women were less likely to experience health problems due to their work during pregnancy (9 per cent). In the model the gap between women in these workplaces and women in workplaces that were three-quarters female remained significant (the latter having a higher risk) until we controlled for treatment at work during pregnancy. Paradoxically, when we controlled for treatment at work during pregnancy, women in male-dominated workplaces appeared to have a lower risk of negative health effects (see Appendix A, Table A3.5, Model 3).

We also examined the extent to which employees’ negative health experiences during their pregnancy were influenced by the level of support they perceived from their employers. Figure 3.13 shows that women who perceived their employer as supportive were much less likely to report negative health effects due to their job during pregnancy (6 per cent, compared with 30 per cent where the employer was seen as unsupportive or neutral).

There is a strong link between unfair treatment and negative health consequences. Only 4 per cent of women who reported no unfair treatment felt that their health had been negatively affected during pregnancy by their employment, compared with 33 per cent who reported any unfair treatment and 46 per cent who reported two or more forms of unfair treatment. These effects remained very strong when we controlled for other characteristics of the women and their jobs during pregnancy. This finding underlines the importance of ensuring a positive approach to managing pregnancy in the workplace.

### 3.4 Crisis Pregnancies and Employment

As described in Russell and Banks (2011), negative experiences at work during pregnancy can precipitate a crisis for women. The workplace may also play an important role for women experiencing crisis pregnancies for reasons that arise outside work. Moreover, a crisis pregnancy is most likely to coincide with the age at which most women enter a critical phase in their employment experience or career (Crisis Pregnancy Agency, 2007).

In this section we initially broaden our focus to include all women who responded to the survey, regardless of whether they were in employment during pregnancy. When examining employment characteristics, we will return to focus on those who were in employment during pregnancy.

In this survey, 33 per cent of women stated that their pregnancy was emotionally traumatic or represented a personal crisis for them at some stage during the pregnancy (see Table 3.3). This compares with a study by Rundle et al. (2004) which found that 28 per cent of respondents aged 18 to 45 years who had experienced pregnancy had experienced a crisis pregnancy.

**Table 3.3: Reports of crisis pregnancy**

	%	N
Yes	33	699
No	67	1557
Total	100	2256*

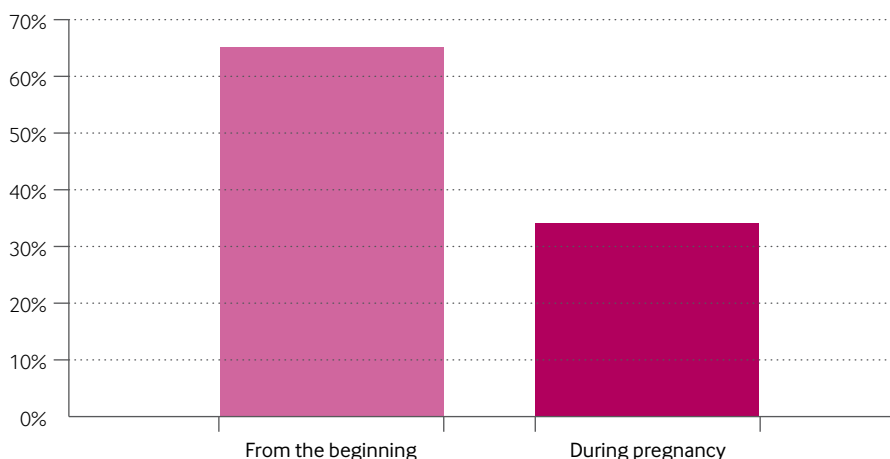
Base: All mothers, including those who were not employed during pregnancy (N=2,300).

Note: Percentages are based on weighted data and the number of cases refers to the actual (unweighted) number of respondents to the survey.

\* 44 respondents did not answer this question.

As Figure 3.14 illustrates, the majority (65 per cent) of those who reported a crisis pregnancy in the survey stated that difficulties arose from the beginning of their pregnancy rather than developing during their pregnancy due to a change in circumstances.

**Figure 3.14: Timing of crisis pregnancy**



Base: Women who reported a crisis pregnancy (N=699).

To enable us to understand why they considered their pregnancies emotionally traumatic, the respondents were asked to choose all that applied from a list of fifteen reasons<sup>9</sup> (see Table 3.4). The most common reason identified by respondents was financial (49 per cent of those who experienced a crisis pregnancy) followed by the fact that the pregnancy was not planned (44 per cent) and by medical difficulties associated with the pregnancy (42 per cent). Other reasons included relationship difficulties (28 per cent), not being married (22 per cent), concern regarding the reaction of family (18 per cent), work commitments or plans (15 per cent), having given birth recently (12 per cent) and the reaction (or fear of the reaction) of the employer or co-workers (9 per cent).

<sup>9</sup> Including an 'other' category, which respondents were asked to specify.

The rates of crisis pregnancy were lower among women who had been employed at some stage during their pregnancy (29 per cent) than among those who were not employed during their pregnancy (39 per cent). However, the reasons identified by working mothers were broadly similar to those discussed above for all mothers who had experienced a crisis pregnancy. As shown in the second column of Table 3.4, the most frequently cited reasons given by those women who worked during pregnancy were financial (49 per cent), medical difficulties (45 per cent) and that the pregnancy was not planned (37 per cent).

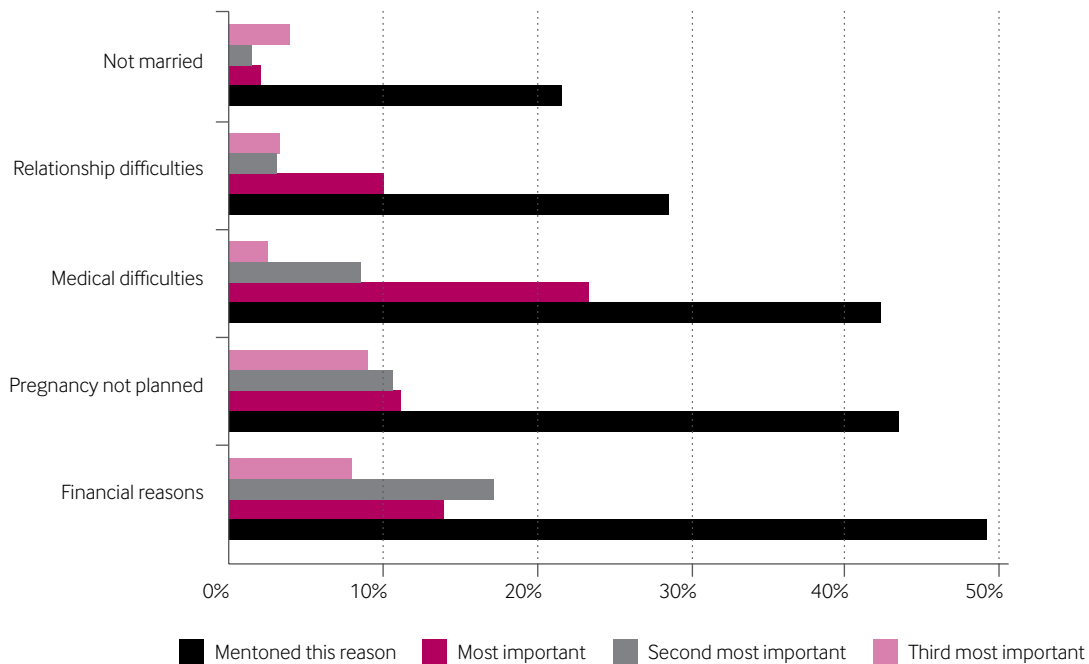
Among women who worked during pregnancy and reported a crisis pregnancy, 19 per cent cited work commitments or plans and 14 per cent cited the reaction (or fear of reaction) of employer/co-workers as a contributing factor. Since some mothers gave both of these reasons, work-related factors were an issue for 27 per cent of working women who had a crisis pregnancy. As 29 per cent of women who worked during pregnancy experienced a crisis pregnancy, this means that 7.7 per cent of all women who worked during pregnancy experienced a crisis pregnancy and cited reasons related to their work.

We also asked respondents to identify the first, second and third reasons that the pregnancy was emotionally traumatic or a personal crisis. This gives a slightly different ranking of reasons, as can be seen in Figure 3.15. While financial difficulties were mentioned as one of the reasons by the largest group of women, medical difficulties were more often identified as the most important reason (23 per cent), followed by financial difficulties (14 per cent) and the fact that the pregnancy was not planned (11 per cent).

**Table 3.4: Reasons given for crisis pregnancy**

	All mothers who reported a crisis pregnancy %	Mothers who worked during pregnancy and reported a crisis pregnancy %	All mothers who reported a crisis pregnancy		
			Most important reason %	2nd most important reason %	3rd most important reason %
I had given birth recently	12	9	5	3	2
My family was complete	5	4	1	1	1
I was too young	11	8	2	2	3
I was not married	22	19	3	2	5
Relationship difficulties	28	25	10	4	5
Relationship new/not steady	12	12	3	4	2
Pregnancy not planned	44	37	11	11	8
Pregnancy not wanted	4	3	3	2	2
Financial reasons	49	49	14	18	8
Medical difficulties	42	45	23	8	4
Work commitments/plans	15	19	2	5	4
School/college commitment/	6	4	1	3	1
Family reaction (or fear of)	18	17	2	2	5
Reaction of employer/co-workers (or fear of)	9	14	3	3	3
Other	16	16	17	4	2
<i>Not stated/refused</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>28</i>	<i>47</i>

Base: Women who reported a crisis pregnancy (N=699). Women who reported a crisis pregnancy and who worked during their pregnancy (N=494). Note: Multiple responses allowed.

**Figure 3.15: Top five reasons given for crisis pregnancy**

Base: Women who reported a crisis pregnancy, including those not in employment during pregnancy (N=699).

### 3.4.1 Crisis Pregnancies and Personal Characteristics

Figure 3.16 shows the relationship between the personal characteristics of the mother and the risk of crisis pregnancy. As background to this presentation, we ran a statistical model (see Appendix A, Table A3.6) to identify which characteristics of the mother and, for those in employment during pregnancy, of the job had a significant relationship to the risk of crisis pregnancy with other factors controlled.<sup>10</sup>

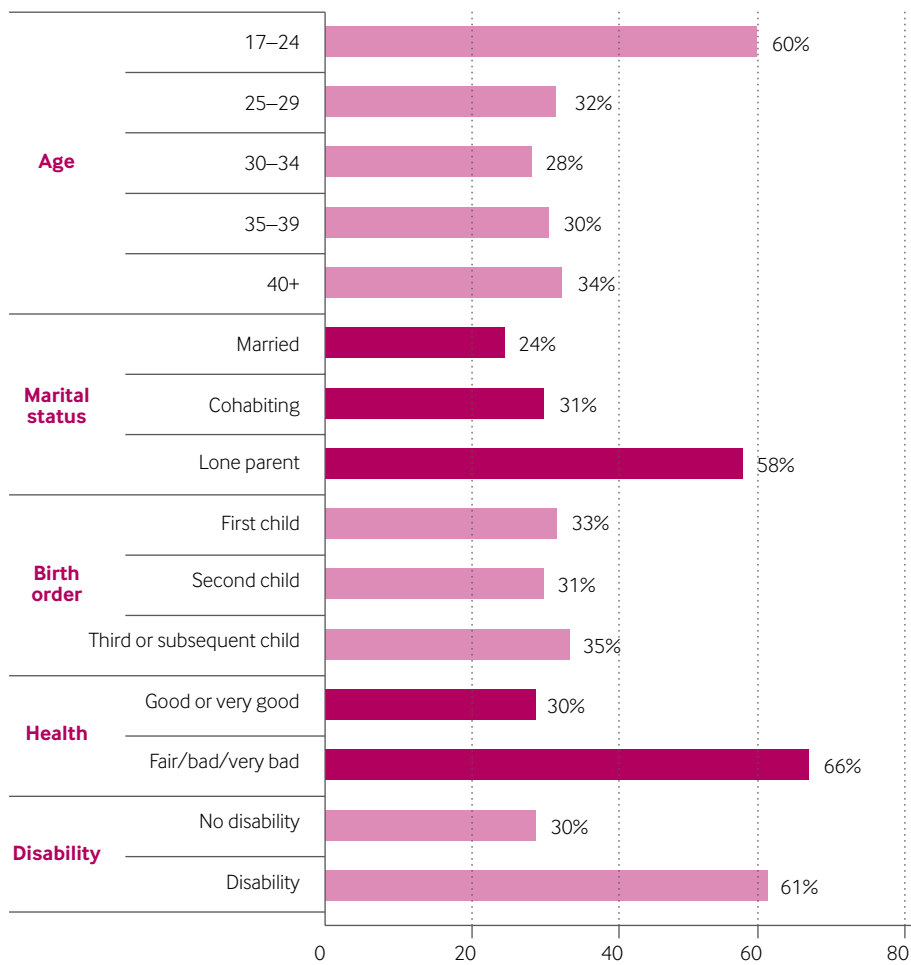
The age of the mother had a considerable impact, with the youngest mothers being most likely to identify their pregnancy as a personal crisis at some point: 60 per cent of young mothers (those aged under twenty-five years) experienced a crisis during their pregnancy with their youngest child, compared with 28 to 34 per cent for other age groups. Again, this corresponds with previous Irish research on crisis pregnancies, which found that 55 per cent of 18 to 25 year olds who had been pregnant had experienced a crisis pregnancy (Rundle et al., 2004). When we controlled for other factors, the differences between the older age groups were not statistically significant, but the youngest mothers remained more likely to have had a crisis pregnancy.

Mothers who are lone parents (58 per cent) or who are cohabiting (31 per cent) were more likely to have experienced a crisis pregnancy than married mothers (24 per cent).

Mothers who had given birth to their third or subsequent child (35 per cent) were more likely to have had a crisis pregnancy than mothers who had given birth to their first (31 per cent) or second (33 per cent) child. The difference between first and second births is not statistically significant with other factors controlled, but the risk remains higher for mothers expecting their third or subsequent child.

<sup>10</sup> It is worth recalling here that all the respondents were mothers and that none of the pregnancies discussed in this report ended in miscarriage or abortion.

**Figure 3.16: Crisis pregnancy by personal characteristics**



Base: All mothers including those not in employment during pregnancy (Valid N=2,253).

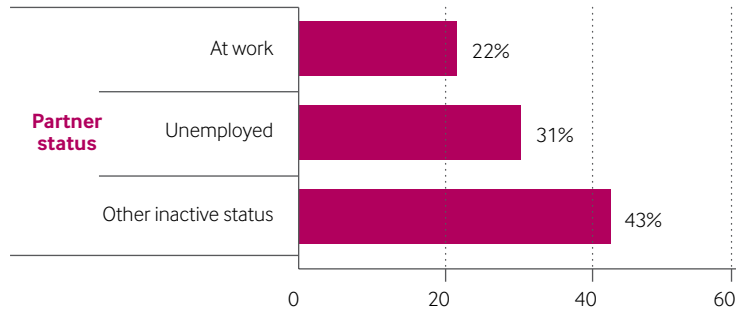
Health and disability were also strongly associated with crisis pregnancy. Mothers who rated their health at the time of the survey as fair, bad or very bad were considerably more likely to have had a crisis pregnancy (66 per cent) than mothers who rated their health as good or very good (30 per cent). A similarly high rate of crisis pregnancy was found for mothers who were limited in their daily activities at the time of the survey (61 per cent). When we controlled for other factors, disability was still associated with an increased risk of crisis pregnancy. Health status was not statistically significant once we controlled for perceived unfair treatment at work.

Levels of education and nationality did not have a significant impact on the risk of having experienced a crisis pregnancy when other personal characteristics of the mother were controlled (see Appendix A, Table A3.6).

### 3.4.2 Crisis Pregnancies and Partner Characteristics

We also checked whether partner characteristics were associated with the risk of crisis pregnancy. Figure 3.17 shows that mothers whose partner was unemployed (31 per cent) or otherwise inactive (43 per cent) at the time of the survey were more likely to have had a crisis pregnancy than mothers whose partner was at work (22 per cent). When we controlled for other characteristics such as age and marital status, mothers with an unemployed partner did not differ significantly from mothers with a working partner. However, having an 'otherwise inactive' partner (such as a partner who is a student or unable to work due to illness or disability) remained significantly associated with a higher risk of crisis pregnancy. There was no significant association between the partner's occupation and the risk of crisis pregnancy when the personal characteristics of the mother were controlled (see Appendix A, Table A3.6).



**Figure 3.17: Crisis pregnancy by partner characteristics**

Base: All cohabiting or married mothers, including those not in employment during pregnancy (N=1,888).

### 3.4.3 Crisis Pregnancies and Employment Characteristics

As noted above, the rates of crisis pregnancy were lower among women who had been employed at some stage during their pregnancy (29 per cent) than among those who were not employed during their pregnancy (39 per cent). However, as we saw in Chapter 2, women who were employed in pregnancy differed from those who were not employed on a range of characteristics such as age and number of children, which are also relevant to crisis pregnancy. When we controlled for the age and family circumstances of the mother, employment during pregnancy did not significantly affect the risk of crisis pregnancy.<sup>11</sup> Nevertheless, because of the high rates of employment among women of childbearing age, 60 per cent of women reporting crisis pregnancy were in employment. We found that the reasons for crisis pregnancy were broadly similar whether women were or were not in employment during pregnancy (see Appendix A, Table A3.7).

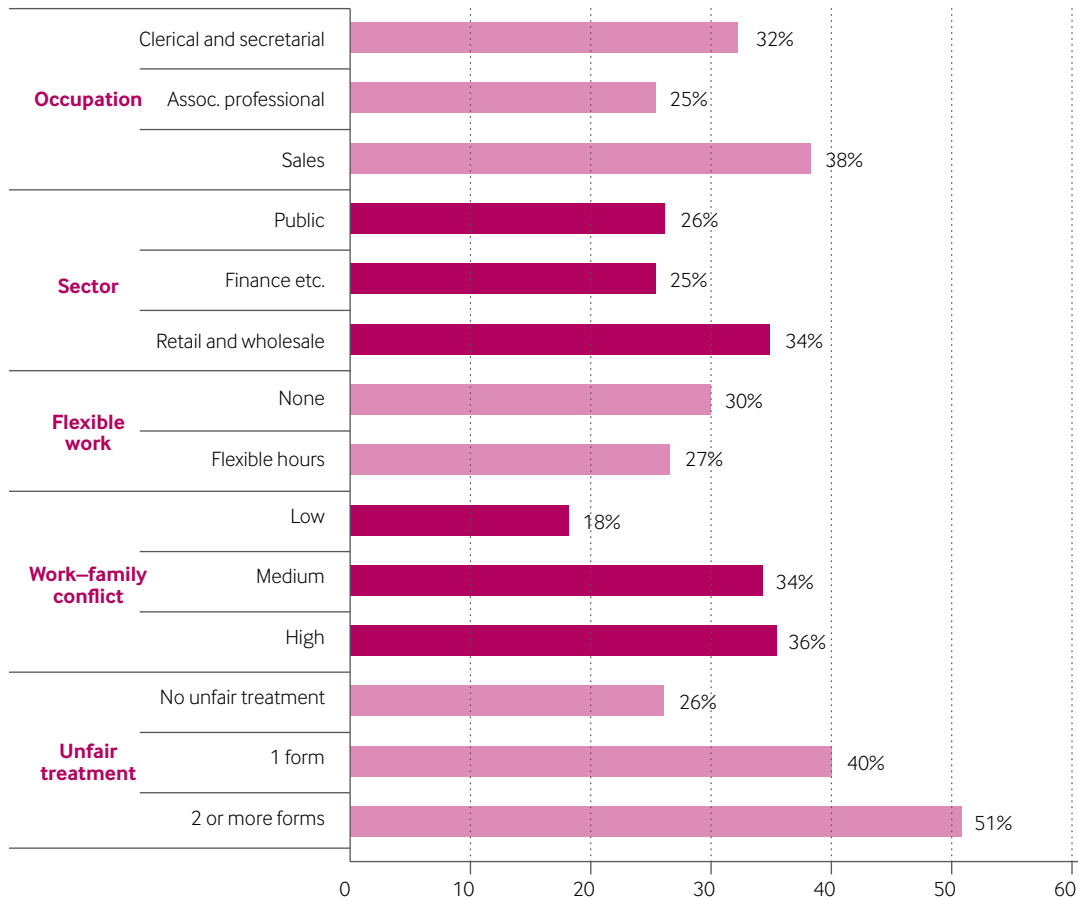
For those mothers who had worked during pregnancy, we examined the impact of characteristics of their job on the risk of crisis pregnancy (see Appendix A, Table A3.6). In the model, with other characteristics controlled, women working in associate professional or clerical occupations were more likely to experience a crisis pregnancy than those in sales occupations. As shown in Figure 3.18, this was not evident overall before the controls were included, where women working in sales occupations were more likely to have experienced a crisis pregnancy (38 per cent) than women in clerical (32 per cent) or associate professional (25 per cent) jobs. Most women in sales occupations will be working in the retail and wholesale sector, and we can see from Figure 3.18 that women in this sector were more likely to have had a crisis pregnancy (34 per cent) than women working in the public sector (26 per cent) or in financial and other business services (25 per cent). The higher risk for women in the retail and wholesale sector persisted when other characteristics (including unfair treatment) were controlled (see Appendix A, Table A3.6, Model 3).

Flexible working arrangements were also important. An in-depth examination of the different types of working arrangements (see Appendix A, Table A3.6) revealed that women in workplaces where flexible hours were available were less likely to have experienced a crisis pregnancy. Although the impact of flexible hours on the likelihood of experiencing a crisis pregnancy was no longer significant when we controlled for perceived unfair treatment (see Appendix A, Table A3.6, Model 3), we saw earlier that the availability of flexible hours itself reduced the perception of unfair treatment. Flexibility in the workplace, then, is an important component of the kind of positive work environment that contributes to reducing the stress women may experience around pregnancy and work.

Mothers who experienced lower levels of work–family conflict during their pregnancy were less likely to have had a crisis pregnancy (18 per cent, compared with 34 to 36 per cent among mothers who experienced a medium or high level of work–family conflict, see Figure 3.18), and this remained statistically significant in the model.

<sup>11</sup> The effect remained statistically significant when age was controlled, but dropped in magnitude. It dropped further when marital status was controlled and became non-significant when the number of children was controlled.

**Figure 3.18: Crisis pregnancy by characteristics of job during pregnancy**



Base: Women in employment during pregnancy (Valid N=1,759).

There was a strong association between unfair treatment at work during pregnancy and crisis pregnancy: 40 per cent of mothers who experienced one form of unfair treatment and 51 per cent of those who experienced two or more forms of unfair treatment reported that their pregnancy had been emotionally traumatic or a personal crisis (compared with 26 per cent of mothers who did not experience unfair treatment).<sup>12</sup> In the model, with other factors controlled, women who experienced more than one form of unfair treatment were at increased risk of having a crisis pregnancy (Appendix A, Table A3.6, Model 3).

Characteristics of the job during pregnancy that were not associated with having experienced a crisis pregnancy were: contract status (permanent, self-employed, casual/temporary), working part-time hours, size of workplace, percentage of the workforce that is female, job tenure, hourly earnings and the perceived supportiveness of the employer.

### 3.5 Summary

In this chapter we focused on the two-thirds of mothers of children born during the two-year reference period who had been in employment during pregnancy and we examined in some detail the nature of their experiences. The majority (71 per cent) felt that their employer had been supportive or very supportive during their pregnancy and most employees (63 per cent) were satisfied with their treatment. Nevertheless, a significant minority felt that they had been treated unfairly during pregnancy. As these results are not an objective assessment, the survey cannot establish whether the treatment reported by women would fall under the legal definition of discrimination. However, self-reported measures in this study are systematically related to health and other outcomes that strengthen the legitimacy of self-reported data. International data also demonstrate that self-reported findings are consistent with findings from more objective measures (Russell et al., 2008; Blank et al., 2004).

<sup>12</sup> Supportiveness of employer was also tested in the model instead of unfair treatment and was insignificant.

We also saw in this chapter that the way the survey question was posed made a difference in terms of our estimates of the prevalence of unfair treatment. When we focused on responses to a single global item on unfair treatment, we found that 11 per cent of women felt they were unfairly treated. When we examined responses to thirteen examples of unfair treatment, we found that the percentage more than doubled to 28 per cent. Combining the two measures gave an estimate of 30 per cent of those women who had worked during pregnancy. Our explanation for this is that the specific detailed questions brought to mind aspects of their job or experience that some respondents had not immediately thought of when answering the global question on 'any unfair treatment'. Thus, the measure based on the detailed question is likely to be more inclusive but it is also likely to include types of experience that the respondent may not have judged 'unfair' at the time they occurred.

The most commonly identified forms of unfair treatment were: being given unsuitable work or workloads, which was experienced by one in eight employees during pregnancy (12 per cent); being discouraged from attending antenatal classes (8 per cent); and unpleasant comments from employers, managers or colleagues (8 per cent). Nearly 5 per cent of women who had worked during pregnancy lost their jobs through redundancy, dismissal or being treated so badly that they felt they had to leave the job.

The risk of unfair treatment at work during pregnancy was higher for younger women and women expecting their second child. Women working in the retail and wholesale sector were more likely to have experienced unfair treatment, while women working in the smallest organisations (1 to 9 employees) were less likely to have experienced unfair treatment. Unfair treatment was also more common among women in skilled manual (craft) occupations. There was evidence of a link between a workplace culture that supports work–life balance and treatment during pregnancy in that women who worked in organisations with a formal equality policy or that offered flexible hours and time off for family reasons, and women who experienced low levels of work–family conflict during pregnancy, were less likely to have experienced unfair treatment.

About one-quarter of the women affected took action in response to unfair treatment at work during pregnancy, usually going to their immediate manager or supervisor (19 per cent) and/or the HR department (9 per cent).

In Section 3.3 we examined women's perceptions of any negative health effects associated with their job during pregnancy. The majority of women reported that their health had not been negatively affected at work during pregnancy. Of the 13 per cent who reported negative impacts, the most common effects were stress or anxiety, other emotional or mental health problems, problems with the legs/feet or back and fatigue/exhaustion. Women whose health was affected often identified the demands of the job (such as workloads and deadlines) or the physical nature of the job (including standing, walking, lifting and physical exertion) as resulting in negative health effects.

Women working in managerial/administrative or skilled manual (craft) occupations during pregnancy were at greater risk of negative health effects, but these patterns disappeared when we controlled for treatment at work. As we might expect, women who felt that their manager or employer was supportive during pregnancy were less likely to report negative health effects. There was also a strong link between negative health effects and experiencing unfair treatment during pregnancy. These findings highlight the important role of employer supportiveness and fairness in protecting the physical and mental health of pregnant employees.

We noted that the work-related health problems which this survey identified as being those most commonly experienced by pregnant women – fatigue/exhaustion due to working time, occupational stress and long periods of standing/sitting – are not included in the list of hazards outlined in Irish health and safety regulations (in contrast to the European and British guidelines where they are given more prominence).

In Section 3.4 we examined the issue of crisis pregnancy. For the initial part of this analysis, we included all mothers whether or not they had been in employment during pregnancy. Overall, around one-third of mothers felt that their pregnancy, at some stage, represented a personal crisis for them or was emotionally traumatic. The rates of crisis pregnancy reported among women in this survey are comparable to figures found amongst surveys of women who have ever experienced a pregnancy.

The type of reason most often cited for crisis pregnancy was financial (49 per cent), which is likely to reflect the onset of economic recession in 2008/2009. The next most commonly cited reasons were that the pregnancy was not planned (44 per cent) and medical difficulties (42 per cent). Work-related issues emerged as a contributory factor for 27 per cent of those women experiencing a crisis pregnancy who were at work during their pregnancy, or 7.7 per cent of all mothers who were in employment during pregnancy. Medical difficulties were most often identified as the *most important* reason (23 per cent of mothers who had experienced a crisis pregnancy).

Younger women, women who were not living with a partner, women expecting their third or subsequent child and mothers with health problems or who have a disability were more likely to have experienced a crisis pregnancy. The results across the chapter suggest that the youngest group of women were disadvantaged in a number of respects: not only were they more likely to experience their pregnancy as a crisis or as emotionally traumatic, but they were also more likely to be treated unfairly at work and to report health problems related to work.

Women who were in employment during pregnancy were less likely to experience their pregnancy as emotionally traumatic or as a personal crisis (29 per cent versus 39 per cent of women who were not in employment during pregnancy) but this is due to differences in the age, health and family circumstances of the two groups. In terms of job characteristics for those mothers who were in employment during pregnancy, women working in the retail and wholesale sector were more likely to have had a crisis pregnancy, and, when we controlled for other factors, women working in associate professional or clerical occupations were at a higher risk than women in sales occupations. Women who felt they were treated unfairly at work during their pregnancy were also more likely to have experienced a crisis pregnancy.

The availability of flexible working hours during pregnancy was associated with a reduced likelihood of crisis pregnancy for those in employment. Flexible working arrangements are therefore found to have a positive impact on the experience of employment during pregnancy across all three dimensions examined: unfair treatment, health impacts and crisis pregnancy. The impact of flexible working on greater well-being is supported by international research. In their study, Fine-Davis et al. (2004) argue that work–life balance has a direct relationship to the health and well-being of employees and found a significant relationship between potential flexibility in the workplace and workers' satisfaction with their health.

The background is a solid purple color with several overlapping, rounded square shapes in various shades of purple and magenta, creating a layered, geometric effect.

## Chapter 4: Maternity and Parental Leave

## 4.1 Introduction

This chapter explores the take-up and distribution of statutory leave among mothers who gave birth between July 2007 and June 2009. In Ireland, women who have paid the requisite social insurance contributions are entitled to twenty-six weeks of paid maternity leave and a further sixteen weeks of unpaid maternity leave. Additionally, all parents are entitled to fourteen weeks of unpaid parental leave. However, relatively little is known about the pattern of take-up of maternity and parental leave in Ireland, and whether women are receiving their entitlements or encountering difficulties around maternity and parental leave at the workplace.

We begin by examining maternity leave: the pattern of take-up, the extent of supplementary payments from employers and any problems experienced in relation to maternity leave. As Redmond et al. (2006, p. 84) note, 'Statutory and official employment policy can often be undermined by practices and the workplace culture in individual organisations.' Company policies may also exceed statutory provisions, which is why we examined the incidence and distribution of employer additions to maternity benefit. We will then turn to parental leave and examine its take-up, the form in which it is taken and any related problems.

## 4.2 Maternity Leave

Overall, 92 per cent of women said that they had taken paid maternity leave – i.e. leave with the receipt of maternity benefit,<sup>13</sup> 5 per cent said they had not taken any and 2 per cent did not know.<sup>14</sup>

Under the eligibility requirements, the main reasons women may not qualify for paid maternity leave are:

- inadequate social insurance contributions due to short service, self-employment or informal employment, or
- leaving employment (voluntarily or involuntarily) more than sixteen weeks before the birth of the child.

Women may also fail to take up paid maternity leave due to lack of knowledge of entitlements or of application procedures on the part of the individual or her employer.

Apart from paid maternity leave, maternity protection legislation in Ireland provides for a period of sixteen weeks' *unpaid* maternity leave, which must be taken immediately after the completion of paid maternity leave. The leave can be taken only in one block and cannot be postponed. Women are not entitled to any State maternity benefit for this period of leave. To avoid confusion between statutory and other types of leave, respondents were informed that the maximum amount of statutory unpaid leave was sixteen weeks. Aside from paid maternity leave, 41 per cent of the mothers surveyed had taken unpaid leave. Most of this group had also taken paid leave: 39 per cent of mothers took both paid and unpaid leave and 2 per cent took unpaid leave only.

### 4.2.1 Maternity Leave and Personal Characteristics

In this section we examine the characteristics of mothers that were significantly related to the patterns of take-up of maternity leave. As background to this presentation, we ran a statistical model to check which factors were important to the uptake of maternity leave, controlling for all other factors. We checked for differences by characteristics of the mother (age, relationship status, birth order of the child, nationality, level of education, disability and self-reported health status at the time of the survey) and by characteristics of the job she held during pregnancy (contract type, industry, size of organisation, occupation, job tenure, hourly earnings, availability of flexible working arrangements and whether the workplace was female-dominated). For women who were married or cohabiting, we also examined characteristics of their partner's situation (economic status and social class). Finally, we controlled for the women's perceptions of important aspects of the job they had held during pregnancy (work–family conflict, supportiveness of the employer and experience of unfair treatment) as well as whether they experienced financial hardship during maternity leave. The full model is shown in Appendix A (see Table A4.1).

Our focus here is on those characteristics that were statistically significant in explaining differences in the pattern of maternity leave taken, when other factors were controlled. We have excluded the small percentage of mothers

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13 If respondents answered 'no' or 'don't know' to taking paid maternity leave but subsequently answered 'yes' to receiving maternity benefit, they were coded to 'yes'.

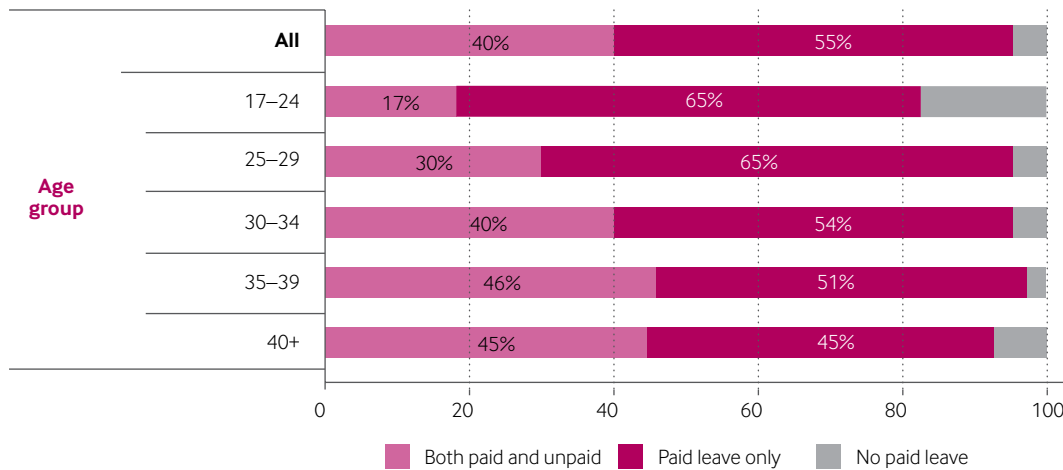
14 As the questionnaire was concerned with establishing take-up and length of leave rather than knowledge of entitlements, respondents were informed that the maximum entitlement to statutory paid leave was twenty-six weeks and sixteen weeks' unpaid leave. Women on maternity leave at the time of the survey were asked how long they intended to take.

for whom we did not have information on the type of leave taken (2 per cent). The analysis is therefore based on mothers who were in employment during pregnancy and in respect of whom we had information on the type of leave taken (1,738 cases). For clarity of presentation, we have combined those women who took no leave at all (3 per cent) and those who took unpaid leave only (2 per cent) in a single category: 'no paid leave'.

It is interesting to consider mothers who took both paid and unpaid leave, as this group is likely to be in the most advantaged position: they had sufficient resources to be able to afford a period of unpaid leave in addition to the paid leave. These resources may have been provided from their own savings, through the support of a partner or by their employer making a supplementary payment in addition to maternity benefit.

Figure 4.1 illustrates the uptake of maternity leave overall and in terms of the age of the mother. It shows that 40 per cent of mothers took both paid and at least some unpaid leave, 55 per cent took paid leave only and 5 per cent took no paid leave (no leave at all or unpaid leave only). The youngest mothers (under the age of twenty-five) were least likely to take combined paid and unpaid leave (17 per cent), while mothers aged over forty were most likely to do so (48 per cent). The youngest mothers were also most likely to take no paid leave (17 per cent).

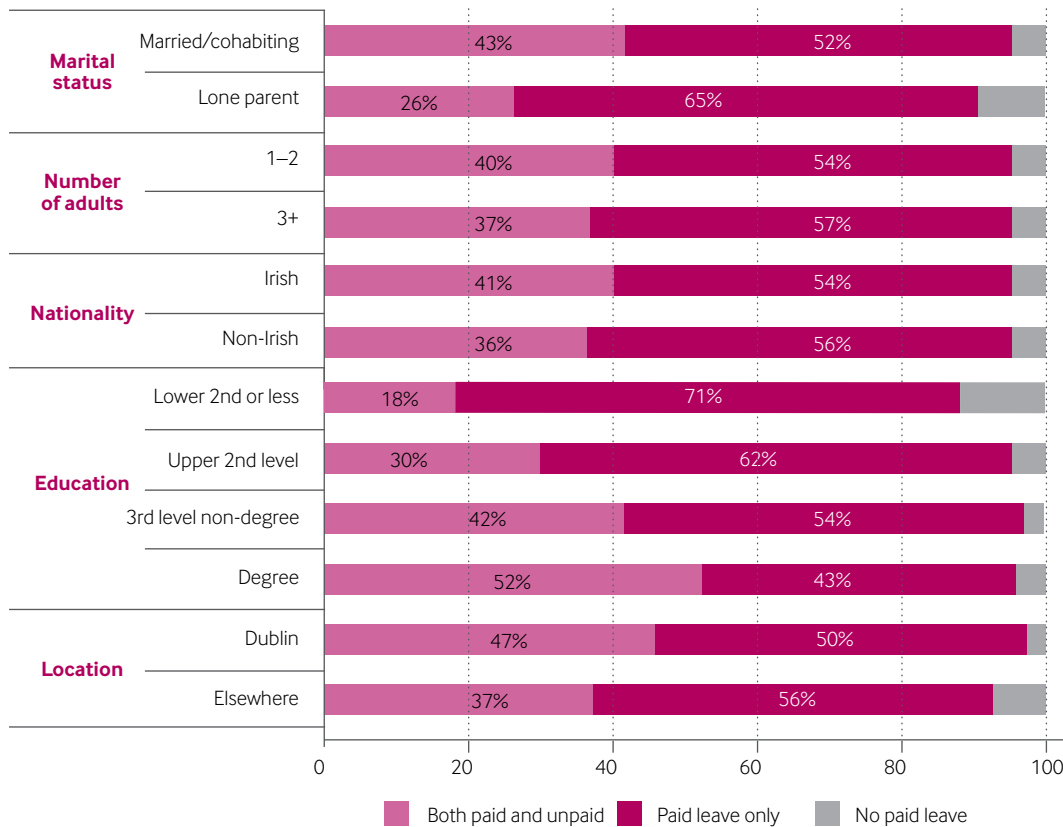
**Figure 4.1: Maternity leave by age of mother**



Base: Women in employment during pregnancy who gave information on type of leave taken (N=1,738).

Figure 4.2 examines the take-up of leave by other personal characteristics of the mother. There was no significant difference between married and cohabiting mothers, when other factors were controlled, but lone mothers were less likely to take combined paid and unpaid leave (26 per cent, compared with 43 per cent of married or cohabiting mothers). As a consequence, nearly two-thirds of lone mothers took only paid leave – and no unpaid leave – compared with just over half of married or cohabiting mothers.

**Figure 4.2: Maternity leave by other personal characteristics**



Base: Women in employment during pregnancy who gave information on type of leave taken (N=1,738).  
 Note: There were only 112 cases of mothers with lower second-level education or less in the sample.

Figure 4.2 shows that 36 per cent of non-Irish mothers took both paid and unpaid leave compared with 41 per cent of Irish mothers. The model (see Appendix A, Table A4.1) showed that non-Irish mothers were more likely to take only paid leave without taking any additional unpaid leave. Women who have made social insurance contributions in another country covered by EU regulations can combine their insurance records to qualify for maternity benefit in Ireland. The lower rate of take-up of additional unpaid leave may arise from a lack of knowledge of entitlements or from difficulty in affording to take unpaid time off.

A mother's level of education also had an important influence on the pattern of take-up of leave. Mothers with lower second-level education or less were more likely to take only the period of paid leave (71 per cent), with just 18 per cent taking both paid and unpaid leave. The corresponding figures for mothers with a degree were 43 per cent taking only paid leave and 52 per cent taking both paid and unpaid leave.

The number of adults in the household also made a difference to the take-up of leave. Where there were three or more adults in the household, the mother was somewhat less likely to take combined paid and unpaid leave (37 per cent, compared with 40 per cent of mothers in households with one or two adults). This may be because there is more help available with childcare and housework, meaning that the mother has less need to take a period of unpaid leave.

Finally, there was a significant difference between mothers living in Dublin and in other areas: Dublin mothers were more likely to have taken paid leave (97 per cent) when compared with mothers from elsewhere (93 per cent).

With other factors controlled, neither the health and disability status of the mother at the time of the survey, nor birth order, were significantly associated with the take-up of leave.

Overall, then, we see that women in less privileged positions were less likely to take combined paid and unpaid leave. Lone parents, non-Irish nationals and mothers with lower levels of education were all significantly less likely



to take additional unpaid leave. The group of women who took no paid leave at all were similar in having lower levels of education, but these women also tended to be younger (under the age of twenty-five). These patterns are not accounted for by characteristics of the job during pregnancy, which were taken into account in the model in Appendix A, Table A4.1, although aspects of the job such as earnings and nature of the contract may also be important.<sup>15</sup>

#### **4.2.2 Maternity Leave and Employment Characteristics**

The picture that is emerging so far, based on the pattern by level of education and marital status, is one where mothers in a more privileged or secure position can take both paid and unpaid leave while less privileged mothers either take no paid leave or take only paid leave. We now turn to the characteristics of the job during pregnancy to see whether this pattern is also found. Of course, the characteristics of the mother and the characteristics of the job are related, particularly the association between education and occupation and between age and job tenure. Our interpretation of the patterns will be guided by the model in Appendix A, Table A4.1, where we examined the impact of all factors taken together. Figure 4.3 shows the pattern by characteristics of the job held during pregnancy, selecting those characteristics that had a significant impact with other factors controlled.

The self-employed and those employees on temporary or casual contracts were very similar in the pattern of their leave. Both groups were less likely to have availed of any paid leave (79 per cent) when compared with mothers employed in permanent jobs (98 per cent). When we controlled for other characteristics of the mothers and their jobs during pregnancy, the self-employed and temporary/casual workers remained less likely to have taken any paid leave. However, where they had taken paid leave they did not differ from permanent employees in their tendency to take a period of unpaid leave as well.

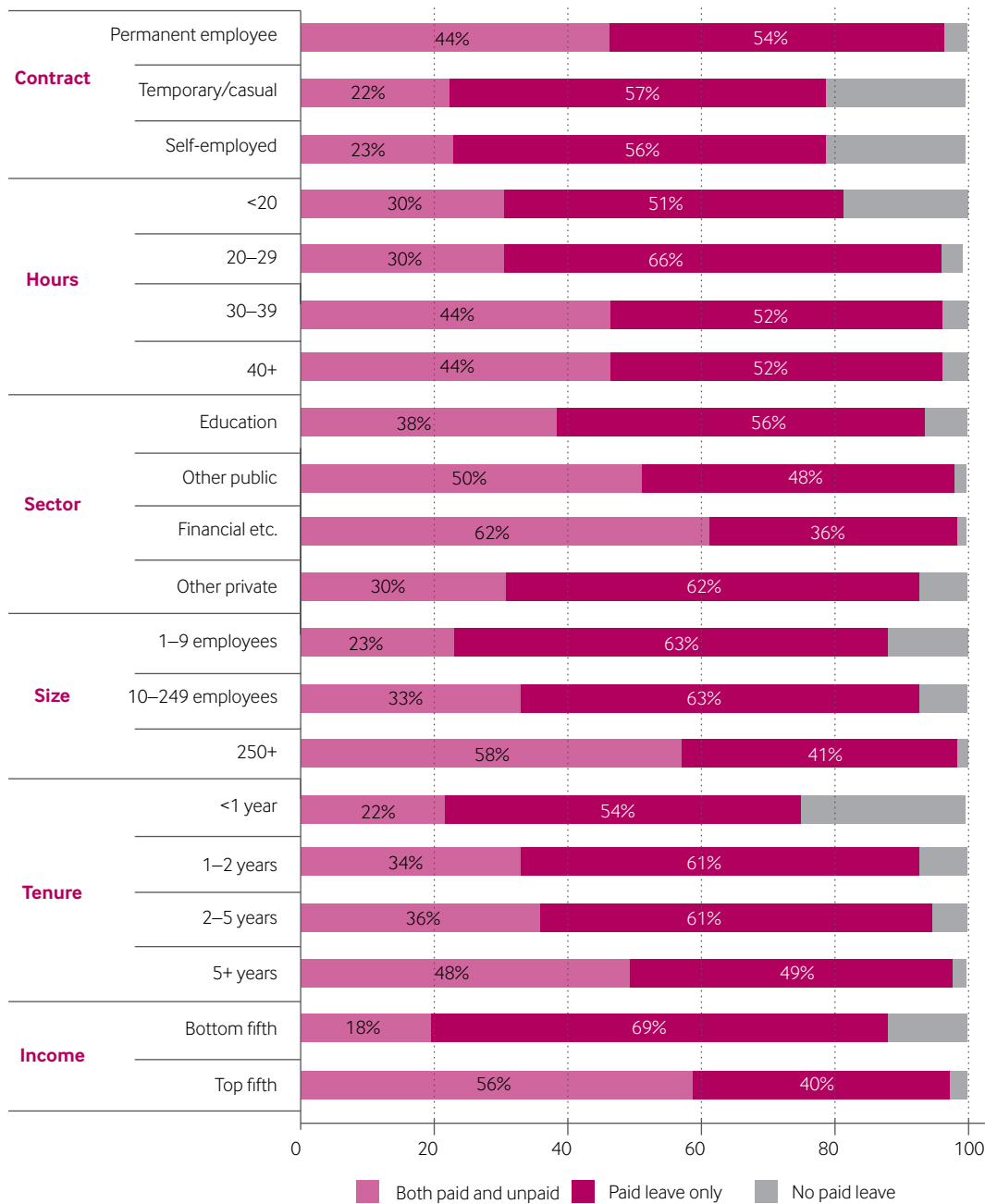
In the case of the self-employed, the situation may be linked to the stricter eligibility criteria for maternity benefit. Those in self-employment are entitled to maternity benefit if they have paid fifty-two weeks' PRSI contributions (Class S) in the relevant tax year. This is a longer qualification period than that for employees, who must pay at least thirty-nine weeks' PRSI contributions to qualify. Factors beyond social insurance contributions may prove to be an even greater barrier to taking leave for the self-employed. In the case of sole traders, taking any extended leave is likely to result in loss of business and perhaps business closure. Indeed, this likelihood was expressed by one of the self-employed survey respondents: 'If I went on leave and claimed State maternity benefit I could lose all my contacts and work . . . [I am] just not able to risk losing my work for a few weeks off to claim State benefits.'

The position of women employed on temporary or casual contracts is very similar to that of self-employed women in relation to the difficulties of taking paid leave; although in this case, non-take-up of leave may also be related to failure to meet the eligibility criteria.

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<sup>15</sup> Neither are the differences fully accounted for by employer-provided supplementary payments during maternity leave, as discussed in Section 4.2.5.

**Figure 4.3: Maternity leave by characteristics of job during pregnancy**



Base: Women in employment during pregnancy (Valid N=1,667).

Note: As the number of cases for self-employed women is low (N=92), the figures are subject to a wide margin of error.

Hours worked in the job during pregnancy also made a difference to the take-up rates of maternity leave. Women who worked less than 20 hours per week were the group most likely to take no paid leave, while women who worked 20 to 29 hours were the most likely to take only paid leave. The pattern is evident in Figure 4.3, where we see that 19 per cent of mothers working less than 20 hours took no paid leave and that two-thirds of women working 20 to 29 hours per week before the birth of the child took paid leave only, compared with just over half of mothers working 30 to 39 hours. Other differences by hours worked were not statistically significant in the model (see Appendix A, Table A4.1).

There were also some differences by sector of employment, as shown in Figure 4.3. Women working in the public sector were more likely to take paid leave only (and no additional unpaid leave) when other characteristics were controlled. Women working in financial and other business services were more likely to take combined paid and unpaid leave: 62 per cent of women in this sector took combined paid and unpaid leave, compared with 30 per cent of women working elsewhere in the private sector. The pattern for women working in the public sector was not

evident until other characteristics were controlled. Size of organisation had a considerable impact and this is likely to be correlated with sector, as most public sector jobs are in large organisations.

Women working in the largest organisations (250 or more employees) were in the most favourable position. In Figure 4.3 we can see that 58 per cent of women who worked in the largest organisations took combined paid and unpaid leave, compared with 33 per cent of mothers who worked in organisations with between 10 and 249 employees, and with 23 per cent in organisations with fewer than ten employees. Women in the smallest organisations were also disadvantaged in terms of access to paid leave: with other characteristics controlled, women in organisations with fewer than ten employees were most likely to have taken no paid leave.

Women who had been in the job for less than one year at the time of their maternity leave were less likely to take paid leave (76 per cent, compared with 97 per cent of women who had been in the job for five or more years). Some of this pattern is undoubtedly due to them not having sufficient social insurance contributions to qualify for maternity leave. Once they qualified for paid leave, however, women with shorter job tenures did not differ from other mothers in taking unpaid as well as paid leave, when other characteristics were controlled (see Appendix A, Table A4.1).

In the case of earnings, we again see the pattern observed for women with shorter job tenures: women with lower hourly earnings were less likely than women with higher earnings to take paid maternity leave and when they did take paid leave they were less likely to take a period of unpaid leave as well. For instance, only 18 per cent of women in the bottom earnings category took combined paid and unpaid leave, compared with 56 per cent of women in the top earnings category. Even when we controlled for other personal and job characteristics (such as education, temporary/casual contracts, sector and so on), these differences remained statistically significant.

A number of other characteristics of the job were also examined but were found not to be statistically significant in their impact on take-up of leave with other factors controlled (see Appendix A, Table A4.1). These included occupation, union membership and the presence of a policy on equality in the workplace.

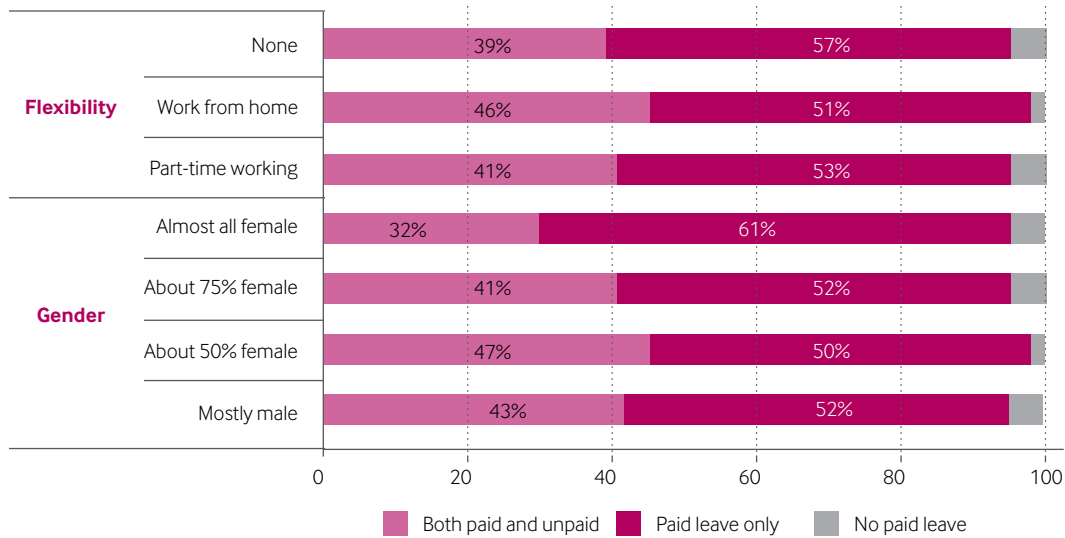
Figure 4.4 explores the association between take-up of maternity leave and the availability of flexible working. Flexible working arrangements include the ability to work from home, flexitime, part-time hours, job-sharing, term-time working and being able to take time off for personal reasons such as to care for a sick child.

When we controlled for other factors, only the availability of part-time working was significantly associated with the pattern of maternity leave. Before controlling for other factors, women in workplaces where part-time work is available were somewhat more likely to take combined paid and unpaid leave (41 per cent, compared with 39 per cent where no flexible options are available); this difference remained significant when other characteristics were controlled. On the other hand, although not apparent in Figure 4.4, women who were able to work from home were *less* likely to take combined paid and unpaid leave in the model. This may be because working from home allowed them to organise their schedule around the needs of childcare, meaning that they did not need to take a period of unpaid leave. The other kinds of flexible working arrangements had no significant impact on the take-up of leave (see Appendix A, Table A4.1).

Figure 4.4 also explores whether the workplace is female-dominated, male-dominated or more balanced and reveals an unexpected impact. Workplaces employing a higher percentage of women might be expected to be more likely to have good maternity leave policies in place. However, when we controlled for other characteristics, women in workplaces that are three-quarters female were less likely to have taken paid leave than women in workplaces with an even balance of men and women. Before including controls, women in workplaces with an even gender composition were most likely to take combined paid and unpaid leave (47 per cent, compared with only 32 per cent in workplaces that were almost all female). When we controlled for other characteristics, such as sector, size and characteristics of the mother, only workplaces that were three-quarters female were distinct from workplaces that were evenly balanced: women in workplaces that were three-quarters female were more likely to take unpaid leave only, or no leave.

Other aspects of the woman's job and workplace that did not have a significant impact in the model included the presence of an equality policy, as noted above, the perceived supportiveness of the employer, and work–family conflict in the job during pregnancy.

**Figure 4.4: Maternity leave by availability of flexible working arrangements and gender composition of workplace during pregnancy**



Base: Women in employment during pregnancy who gave information on type of leave taken (N=1,738).

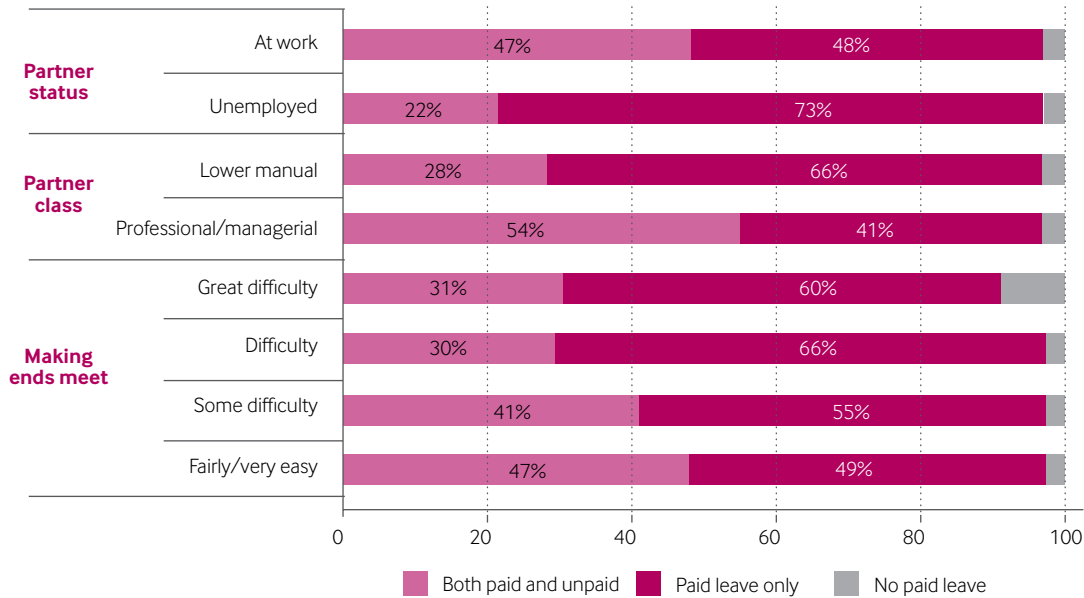
#### 4.2.3 Maternity Leave and Financial Hardship/Partner Employment

The results so far have suggested that taking combined paid and unpaid leave is characteristic of women who are in a more advantaged position: it is associated with higher levels of education and income, being married or cohabiting rather than a lone parent, longer job tenure and permanent employment. Such findings indicate strongly that financial pressure accounts for women not taking unpaid maternity leave in addition to paid maternity leave.

Experiencing financial hardship during maternity leave is indeed associated with not taking combined paid and unpaid leave (see Appendix A, Table 4.1). Figure 4.5 shows that 31 per cent of those women who experienced great difficulty in making ends meet during maternity leave took combined paid and unpaid leave, compared with 47 per cent of those who were able to make ends meet easily.

For those women who were married or cohabiting, we also examined the impact of their partner’s economic status. We anticipated that economic support from a partner’s earnings might enable women to take a period of unpaid leave in addition to the paid leave and this was evident in the results. Women with an unemployed partner were only half as likely to take combined paid and unpaid leave as women with a working partner (22 per cent versus 47 per cent). Women with a partner working in a lower manual job, which typically has a lower salary, were also less likely to take combined paid and unpaid leave than those with a partner in a professional or managerial job (28 per cent versus 54 per cent). These patterns remained statistically significant when other characteristics were controlled (see Appendix A, Table A4.1).

**Figure 4.5: Maternity leave by financial hardship and partner employment**



Base: Women in employment during pregnancy who gave information on type of leave taken (N=1,738; N=1,516 for partner status and partner class).

#### 4.2.4 Reasons for Not Receiving Maternity Benefit

In order to further explore the reasons for non-take-up of paid leave, respondents were asked why they did not receive any maternity benefit. Note that the number of cases of mothers who did not receive maternity benefit is small (127), meaning that the figures given here are subject to a wide margin of error. The most common reason given for not receiving benefits, as shown in Table 4.1, was an inadequate social insurance contribution record (43 per cent). A further 28 per cent of women who did not get maternity benefit said they had stopped work too soon. Fifteen per cent of the women said they had not got maternity benefit because they were self-employed or worked for a family member – as mentioned above, this does not in itself disqualify someone from receiving benefit but requires payment of social insurance contributions.

**Table 4.1: Reasons women did not receive maternity benefit**

	%
Stopped work too soon	27.7
Did not pay enough social insurance contributions	42.9
Self-employed/family business	14.4
Contract ended, redundancy, dismissal	5.9
Didn't know I was eligible/did not apply	9.1
Paid by employer/received 'maternity payment'	7.4
Other	4.8

Base: Women in employment during pregnancy who said they did not receive maternity benefit (N=127).  
 Note: Multiple responses allowed.

A number of the answers given suggest that there is some confusion around the eligibility requirements for maternity benefit. Just over 9 per cent of the women who did not get maternity benefit said they did not know if they were eligible and some of the other reasons given introduced factors that are not formally linked to qualification for maternity benefit, such as number of hours, working on a fixed-term contract or being with an employer for only a limited period.

The method of payment also appears to have caused some confusion. Claimants can opt to have maternity benefit paid directly to their employer, who in turn pays the claimant through the payroll system. It is likely that some employees did not realise that they had received maternity benefit and instead believed that they had been paid directly by their employer. Some or all of the respondents identified in Table 4.1 as receiving 'maternity payment' (7.4 per cent) may in fact have been paid maternity benefit through their employer.

#### **4.2.5 Employer-provided Maternity Payments**

Some employers do offer an additional tier of support for women during pregnancy and after childbirth. Cross-national research shows that employer-provided supports for reconciling work and family life are important, even in the context of extensive State provision (Evans, 2001; Glass and Estes, 1997). Previous research also shows that employer-provided supports tend to be much more stratified than those provided by the State, with employees in higher occupational positions often receiving the greatest support.

In an analysis of extra-statutory leave in fifteen countries, Ireland was found to rank fifth from the bottom in terms of employer additions to maternity leave (Evans, 2001). The findings were based on the 'Second European Survey of Working Conditions', carried out in 1995/96, where 67 per cent of female employees in Ireland reported that their employer provided extra-statutory maternity leave. The high rates reported in all countries are likely to partly reflect respondent error, since employees are less likely to know about firm-level maternity policies if they have not availed of them personally. Until now there have been no reliable national figures on the extent of employer-provided maternity payments in Ireland.

We found that 48 per cent of women who took maternity leave and were employees during pregnancy received an additional maternity payment from their employer. Here we provide some details on the factors associated with receipt of such payments for this group of women, guided by the results of a statistical model shown in Appendix A, Table A4.2.

Table 4.2 shows the odds of receiving an employer top-up payment during maternity leave by the personal characteristics of the mother (and her partner). These findings are based on a model that controlled for characteristics of the woman and her family and characteristics of her job during pregnancy. An odds ratio greater than one indicates a greater likelihood of receiving a supplementary payment, while an odds ratio lower than one indicates a lower likelihood, compared with the reference category.

Receipt of top-up payments was strongly related to the mother's level of education and also to her age, nationality and marital status. Mothers educated to Leaving Certificate level were about half as likely as mothers with a degree to have received a supplementary payment from their employer. The oldest mothers (aged forty and over) and lone mothers were also less likely to have received top-up payments. Mothers with an unemployed partner were less likely than mothers with a working partner to have received top-up payments. Non-Irish mothers were less likely to have received top-up payments from their employer than Irish mothers.

Other personal characteristics, such as the mother's health and disability status at the time of the survey, the number of adults in the home, the number of other children and location, were not significantly associated with the receipt of supplementary payments from the employer (see Appendix A, Table A4.2).

**Table 4.2: Receipt of employer-provided payment by personal and partner characteristics**

		Odds
Age group (Ref=30–34)	17–24	n.s.
	25–29	n.s.
	35–39	n.s.
	40 and over	0.44
Marital status (Ref=married)	Cohabiting	n.s.
	Lone parent	0.49
Nationality (Ref=Irish)	Non-Irish	0.54
Education (Ref=degree)	Low second level or less	n.s.
	Higher second level	0.53
	Third level, non-degree	n.s.
Partner's current status (Ref=at work, white collar)	Partner unemployed	0.54
	Other economic status	n.s.
	Lower manual class	n.s.

Base: Women who were in employment during pregnancy (excluding self-employed) and who took maternity leave (N=1,375).

Note: See Appendix A, Table A4.2 for the full model, which also controls for characteristics of the job. 'n.s.' indicates not statistically significant. 'Ref' means reference category.

Table 4.3 shows the odds of a woman receiving top-up payments from her employer during maternity leave by job characteristics. Again, the figures refer to mothers who took maternity leave and who were employees during pregnancy. Mothers who worked less than twenty hours per week during pregnancy, those working in the retail and wholesale sector and those working for small organisations were less likely to have received top-up payments. Women working in the public sector or in financial and other business services, those with longer job tenures and those with higher hourly earnings were more likely to have received top-up payments. The difference between the public and private sectors is striking: women working in the public sector were over 2.6 times as likely to have received employer supplementary payments as women working in the private sector (apart from financial and other business services). The association with earnings is also very strong: with other factors controlled, a 1 per cent increase in hourly earnings was associated with an increase in the odds of receiving an employer supplementary payment of just over 1 per cent.<sup>16</sup>

We also examined the association between receipt of top-up payments and flexible working arrangements. The ability to take time off for family reasons was significantly associated with receiving top-up payments, with other factors controlled (see Appendix A, Table A4.2 for the full model). Table 4.3 shows that women in workplaces offering this kind of flexibility were 1.4 times as likely to have received top-up payments from their employer as those in workplaces without this arrangement. Other flexible arrangements were not significantly associated with receipt of top-up payments.

Mothers who perceived their employer as supportive during their pregnancy were also more likely to have received top-up payments (1.78 times as likely). Of course, the provision of a supplementary payment could in itself be part of the reason the employer was seen as supportive. It is likely that the perceived supportiveness of the employer, the availability of flexible practices and the provision of supplementary payments during maternity leave are all part of a human resources policy that emphasises work–life balance for employees. Workplaces with an explicit policy on equality and diversity were also associated with employer top-up payments during maternity leave (twice as likely as workplaces without such a policy).

<sup>16</sup> Natural log of the odds coefficient (2.86) = 1.05.

There was a small positive association between experiencing work–family conflict in the job during pregnancy and receipt of top-up payments: women experiencing high levels of work–family conflict were 9 per cent more likely to receive top-up payments when other factors were controlled.

**Table 4.3: Receipt of employer-provided payment by job characteristics during pregnancy**

		Odds
Hours during pregnancy (Ref=30–39)	Less than 20	0.28
	20–29	n.s.
	40+	n.s.
Industry during pregnancy (Ref=other private sector)	Education	2.76
	Other public sector	2.61
	Finance and business services	1.67
	Retail and wholesale	0.34
Employees in organisation (Ref=250+)	1–9	0.30
	10–19	0.29
	20–49	0.44
	50–99	0.47
	100–249	n.s.
Job tenure (log)		1.36
Hourly income (log)		2.86
Work–family conflict		1.09
Flexible arrangements (Ref=none)	Time off – family reasons	1.40
Equality policy (Ref=none)	Equality policy present	2.07
	Unknown	n.s.
Supportiveness (Ref=unsupportive/neutral)	Employer supportive	1.78

Base: Women who were in employment during pregnancy (excluding self-employed) and who took maternity leave (N=1,375).

Note: See Appendix A, Table A4.2 for the full model, which also controls for characteristics of the mother and her family. 'n.s.' indicates not statistically significant. 'Ref' means reference category.

We saw earlier that temporary or casual employees were more likely to take no maternity leave at all. Among those who did take leave, however, this group did not differ significantly from permanent employees in the receipt of top-up payments when other factors were controlled. There were no differences by the occupation of the mother during pregnancy or by the percentage of the workforce that was female (see Appendix A, Table A4.2).

#### 4.2.6 Duration of Paid and Unpaid Maternity Leave

Under Irish legislation, women are entitled to a maximum of twenty-six weeks of paid maternity leave (i.e. leave with maternity benefit). This maximum level of entitlement has been in place since 2007 and covers the whole period of the sample. Respondents who said they had taken paid leave were asked how long they had taken (or intended to take if they were currently on leave) and were informed that the maximum statutory entitlement for paid leave was twenty-six weeks. Overall, 87 per cent of women who availed of paid maternity leave took up the full entitlement of twenty-six weeks, 11 per cent took a shorter and 2 per cent a longer period of leave. Those women who took leave amounts greater than the statutory entitlement may have been including other types of leave or they may have had additional benefits provided by their employer.



There was substantially more variation in the duration of unpaid leave than in the duration of paid leave. As we saw earlier, only 41 per cent of mothers took any unpaid leave. Of those who did take unpaid leave, 47 per cent took the full statutory entitlement of sixteen weeks,<sup>17</sup> 20 per cent took one to four weeks and 33 per cent took five to fifteen weeks. Despite receiving a prompt on the upper limit, almost 9 per cent of women reported taking over sixteen weeks of unpaid leave, which is likely to incorporate other types of leave such as a career break or parental leave.

We will defer a fuller discussion of the duration of leave and the timing of a woman's return to work until Chapter 5, where we examine a statistical model of return to work.

#### **4.2.7 Problems Relating to Maternity Leave**

The entitlements and protection of women taking maternity leave are set out in law and these measures have been considerably enhanced in recent years (see Banks and Russell, 2011), however, very little is known about how this legislation is working in the Irish workplace from the perspective of employees. Working practices and work culture may create difficulties around maternity leave without contravening the law. For example, Redmond et al. (2006, p. 84) point out that the 'ongoing practice of not providing cover for women on maternity leave puts pressure on them and their colleagues', which can lead to resentment among colleagues and to negative attitudes around maternity and parental leave more generally. Fine-Davis et al. (2005) found that levels of perceived resentment over women taking extended leave for childcare were higher in Ireland and France than in Italy and Denmark. Some employers may be reluctant to grant employees the rights to which they are entitled under law. In such extreme cases it is likely that relatively low-skilled, or easily replaced, employees will be most vulnerable.

Overall, 32 per cent of women who were in employment during pregnancy experienced difficulties related to their maternity leave (see Table 4.4). The most commonly cited problem was that their employer did not provide adequate cover during the period of leave (8 per cent); furthermore, 4 per cent of women said that lack of cover had created resentment among their work colleagues.

A significant proportion of the complaints related to the duration of the leave. Seven per cent of women felt pressurised to take sick leave or time off before they were ready to take maternity leave. If there is a risk to a pregnant woman's health in her current role, her employer is required, under health and safety legislation, to assign her other duties and if this is not possible she can be placed on sick leave.

Five per cent of women felt pressurised by their employer to return from maternity leave sooner than they wanted to and 4 per cent returned earlier than they had planned because of job insecurity or financial pressure.

Being contacted too often about work-related queries or requests while on maternity leave was a problem for 5 per cent of women who had been employees during pregnancy. Disputes about the job that they would do on their return from leave were also a problem for 4 per cent of these women. Under Irish maternity protection legislation, women are entitled to return after statutory maternity leave to the same job, under the same contract and to terms and conditions that are not less favourable than those in place when leave commenced.<sup>18</sup> However, where it is not 'reasonably practicable' for the employer to allow the employee to return to her old job, the employee is entitled to be offered suitable alternative employment under a new contract by the employer, the terms and conditions of which cannot be less favourable than the original contract (Equality Authority, 2010).

A further 5 per cent of women felt that they were sidelined while on maternity leave or failed to get a promotion that they deserved. Three per cent of women were made redundant or dismissed while they were on maternity leave, which amounts to 41 women in the current sample.

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<sup>17</sup> This includes 9 per cent who reported taking more than sixteen weeks' unpaid leave.

<sup>18</sup> The contract must incorporate any improvement to the terms and conditions that the employee would have been entitled to if she had not been absent.

**Table 4.4: Problems experienced during maternity leave**

	%
Encouraged by employer to start maternity leave earlier than would have liked	2.7
Encouraged to take time off or to take sick leave before ready to start maternity leave	6.5
Employer did not provide adequate cover during leave	8.4
Contacted too often with work-related queries or requests during leave	5.2
Resentment from colleagues because no cover was provided	3.5
Felt pressurised by employer to return to work sooner than wanted	4.5
Returned earlier than would have liked because of fear of losing job [or financial pressure]	4.2
Dispute about the job returning to	4.1
Sidelined or failed to get promotion	4.5
Dismissed or made redundant while on maternity leave [incl. company closure]	2.9
Other – hours/wages were changed without notification/agreement	1.4
Other – request for flexible hours on return was refused	0.6
Other problems	1.1
% recording any problem	32.0
% recording more than one problem	12.8

Base: Women who worked as employees during pregnancy and who took maternity leave (N=1,428).

Note: Multiple responses allowed.

Problems indicating a denial of employment rights included those relating to the duration of leave, disputes about the job content, and redundancy/dismissal while on leave. Depending on the circumstances involved, denial of promotion opportunities and changes in hours without agreement could also constitute unfavourable treatment on the ground of pregnancy/gender. Other practices such as providing inadequate cover, contacting too often with work requests and denying flexible work hours on return may represent poor employment practices but are not covered by legislation.

Looking at the distribution of maternity leave problems helps to highlight certain groups of women who may be more vulnerable. This is useful from a policy perspective as it identifies where there may be problems in terms of employer compliance and where employees may need extra supports. As background to this discussion, we ran a statistical model to identify those characteristics of mothers and of their jobs that were most important in predicting the presence of problems with maternity leave (see Appendix A, Table A4.3). We focus, in the following, on those patterns which were identified as most significant in that model and note, where appropriate, where no significant differences were found when other factors were controlled.

Younger mothers were more likely to experience problems with maternity leave, as shown in Table 4.5. Mothers under the age of twenty-five were more than twice as likely as mothers in their early thirties to report problems with maternity leave. There were no significant differences among the other age groups.

Where there are three or more adults in the household, which as we suggested earlier may be an indication of the availability of additional help with childcare and housework, mothers were less likely to have experienced problems related to maternity leave. Somewhat paradoxically, non-Irish mothers were only about half as likely as Irish mothers to report problems and mothers with higher second-level education were about half as likely as mothers with a degree to report problems. These findings may reflect a greater awareness of entitlements on the part of Irish mothers and those with higher levels of education, which may in turn lead them to identify problems more readily.

**Table 4.5: Maternity leave problems by characteristics of mother and job during pregnancy**

		Odds
Age group (Ref=30–34)	17–24	2.36
	25–29	n.s.
	35–39	n.s.
	40 and over	n.s.
Number of adults in household (Ref=1–2)	3 or more	0.61
Nationality (Ref=Irish)	Non-Irish	0.53
Education (Ref=degree)	Low second level or less	n.s.
	Higher second level	0.50
	Third level, non-degree	n.s.
Work–family conflict		1.19
Flexibility (Ref=none)	Job-share	0.60
Equality policy (Ref=none)	Equality policy present	0.58
	Unknown	n.s.
Supportiveness (Ref=unsupportive/neutral)	Employer supportive	0.50

Base: Mothers who had been employees during pregnancy and who had taken maternity leave (N=1,484).

Note: See Appendix A, Table A4.3 for the full model. 'n.s.' indicates not statistically significant. 'Ref' means reference category.

With other factors controlled, we found no significant differences based on the marital status of the mother, the number of children, the health and disability status of the mother at the time of the survey and the employment status or social class of the partner (see Appendix A, Table A4.3).

In terms of job characteristics, mothers who experienced conflict between work and family commitments before the birth were nearly 20 per cent more likely to experience problems with maternity leave.

There is evidence from the present survey of an association between particular flexible working practices and a reduced level of problems with maternity leave. The model found that the availability of job-sharing was associated with a reduced prevalence of problems, but that other flexible working practices (the ability to work from home, time off for family reasons, part-time hours, flexible hours and term-time working) had no significant impact. The importance of job-sharing can be intuitively appreciated as it involves structuring tasks and responsibilities so that they can be shared, which is likely to facilitate cover during a period of maternity leave. Women in workplaces where job-sharing is available were only 60 per cent as likely to experience problems related to maternity leave.

Those women in workplaces with a formal policy on equality or who described their employer as supportive during pregnancy were also less likely to experience problems related to maternity leave.

There were no differences in the problems related to maternity leave associated with contract status, occupation, sector, size of firm, female-dominated workplace, job tenure, earnings or types of flexibility other than job-sharing (see Appendix A, Table A4.3).

We anticipated that employees in smaller firms would report more problems around maternity leave, since small employers in the UK have reported problems in managing maternity leave because of, for example, inadequate staff to provide cover or needing to re-employ the woman in the same position when she returns to work. It might also be expected that small firms would be less aware of employment legislation as they are less likely to have a dedicated

human resource specialist or to have a specific equality policy in place. However, there was no significant relationship between size of organisation and problems related to maternity leave in the survey results when other factors were controlled. We also noted in Chapter 3 that women who worked in smaller firms were less likely to have experienced unfavourable treatment during pregnancy. This suggests that there may be countervailing forces operating in smaller firms, such as better management–staff relationships (O’Connell et al., 2010). These findings may also reflect a greater ease in achieving flexibility and family-friendly arrangements in small and medium-sized enterprises because of an organisational structure characterised by informality, flexibility, high levels of interaction and access by employees to senior management. In such an environment it may be easier to tailor working arrangements to individual need rather than following agreed guidelines laid down at national level (Humphreys et al., 2000).

We checked whether there was an association between the type of leave taken (paid leave, unpaid leave or both paid and unpaid leave) and problems with maternity leave, but there was no significant association when the characteristics of the woman and her job – including the supportiveness of her employer – were controlled. Neither was receipt of employer-provided supplementary payments significantly associated with problems with maternity leave, with these factors controlled.

## 4.3 Parental Leave

Parental leave is available in addition to maternity/paternity leave to allow parents to take care of an infant or young child. The provision and take-up of parental leave varies cross-nationally depending on whether individual countries provide paid or unpaid parental leave periods. In Ireland, parental leave remains unpaid and the Parental Leave Acts 1998 and 2006 allow mothers and fathers to take fourteen weeks’ leave for children up to eight years old or up to sixteen years old in the case of children with a disability (Banks and Russell, 2011). Understanding patterns in the uptake of parental leave can provide a better insight into the types of leave taken and the social and economic factors and key barriers influencing take-up.

### 4.3.1 Uptake of Parental Leave

Take-up rates of parental leave are high in countries such as Denmark, Finland and Sweden, where schemes are flexible and underwritten by high earnings-replacement levels. Take-up of parental leave by women is also high in most of the EU member states that formerly had communist economies such as the Czech Republic, Hungary, Poland and Slovenia. Take-up rates of parental leave by mothers are much lower elsewhere, including countries where parental leave is unpaid such as Cyprus, Greece, Portugal, Ireland and the UK (EFILWC, 2007b).

The last systematic study on parental leave in Ireland was carried out in 2002 by the Department of Justice, Equality and Law Reform (DJELR). A survey of public and private sector employers was undertaken to ascertain the uptake of parental leave since the introduction of the Parental Leave Act in 1998. It found that only 20 per cent of eligible workers had taken this leave since its introduction, with women accounting for the largest share of parental leave takers (84 per cent), and that the absence of payment was the biggest disadvantage to workers availing of such leave (DJELR, 2002). In relation to how parental leave is divided between males and females, a 2001 study found that parental leave in Ireland was taken up by 5 per cent of males and 40 per cent of females (EFILWC, 2007a).

In the following discussion we focus on those mothers who worked as employees during pregnancy and who had returned to work at the time of the survey or planned to return and who provided information on whether they had requested parental leave (N=1,458). Of this group, just 18 per cent had requested parental leave (see Table 4.6).

The picture is somewhat complicated by the fact that women who had not yet returned to work at the time of the survey may have already requested parental leave or indeed may have been taking parental leave. However, even when we restricted the sample to those who had re-entered employment since the birth, the proportion who had requested parental leave was only slightly over 18 per cent (see Table 4.6).

**Table 4.6: Requests for parental leave**

	Women who had returned or who planned to return to work %	Women who had returned to work %
Yes	17.7	18.3
No	82.3	81.7
Total	100.0	100.0

Base: Women who had worked as employees during pregnancy, who had returned to work or planned to return to work and who provided information on whether they had applied for parental leave (N=1,458); excluding women who had not yet returned to work (N=1,042).

Of those who requested parental leave, just over 80 per cent were granted their request, 10 per cent were refused and 9 per cent were granted leave but not in the form that they had requested.

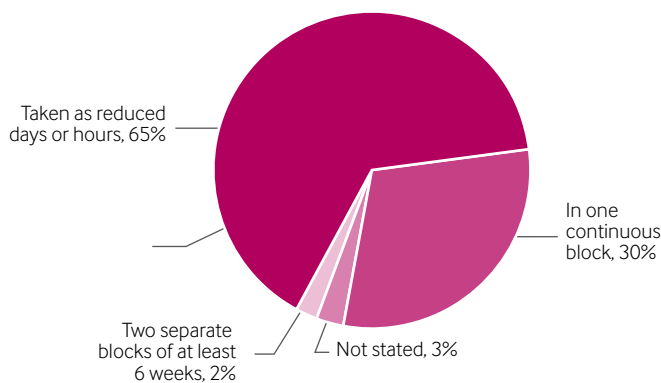
### 4.3.2 Form and Duration of Parental Leave

In many countries, parental leave does not have to be taken in one continuous spell on expiry of maternity (or paternity) leave. In Ireland, parents have some timing flexibility with their parental leave, in that they may use it any time before their child’s eighth birthday (or sixteenth birthday for a child with a disability) and may take it in one continuous block, two separate blocks or in the form of reduced hours or days (Banks and Russell, 2011).

The 2002 DJELR study on parental leave in Ireland found that 69 per cent of organisations made continuous blocks of fourteen weeks’ parental leave available to their employees, 60 per cent offered staff blocks of full weeks and 43 per cent offered some other arrangement for taking parental leave.<sup>19</sup> The research found, however, that employees taking parental leave favoured forms other than a continuous block of fourteen weeks or blocks of full weeks: 9 per cent of all eligible employees availed of parental leave in the form of a reduced working week (days/hours), 5 per cent took a continuous fourteen-week period and 8 per cent took blocks of full weeks (DJELR, 2002).<sup>20</sup>

Figure 4.6 shows the form in which leave was taken for those women in the present study who had taken parental leave (N=231). The majority (65 per cent) took it as reduced days or hours. Most of the remainder (30 per cent) took parental leave as one continuous block and a small proportion (2 per cent) took two separate blocks of at least six weeks each.

**Figure 4.6: Form of parental leave taken**



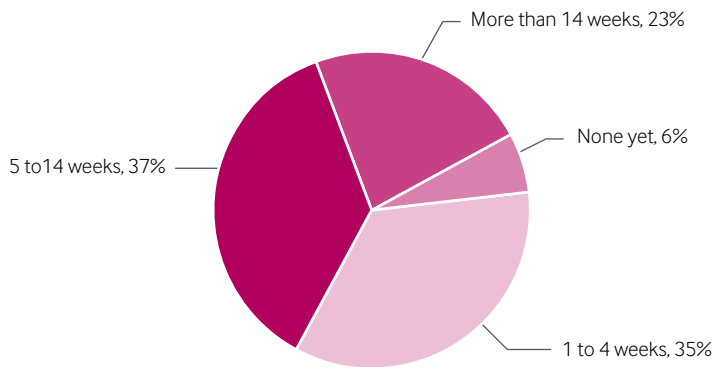
Base: Mothers who took parental leave (N=231).

19 This research examined the uptake of parental leave by occupation, employment sector, etc., and extrapolated the data to estimate the uptake for the overall labour force. The representative sample consisted of some 655 employers employing 67,182 employees.

20 The study does not report the proportions as a percentage of those taking leave.

The maximum period of parental leave available to employees is fourteen weeks. Respondents were asked to record how much parental leave they had taken to date in relation to their youngest child. Due to the difficulty of calculating the duration of leave for those taking it in the form of reduced hours or days, this question was asked of women who took leave in block form only (N=75). At the time of the survey, 35 per cent of these mothers had taken one to four weeks; 37 per cent had taken five to fourteen weeks and 6 per cent had not yet taken any parental leave (see Figure 4.7). It should be noted that parental leave can be taken until the child is aged eight and so those who had not taken the full fourteen weeks may well avail of this entitlement at a later stage.

**Figure 4.7: Number of weeks of parental leave taken**



Base: Mothers who had taken/applied for parental leave in block form (N=75).

Almost one-quarter of respondents said they had taken more than fourteen weeks, which suggests there was uncertainty around entitlements even among those who had availed of parental leave. Some of this additional leave could have been taken in the form of a career break.

### 4.3.3 Parental Leave and Personal and Employment Characteristics

In this section we discuss those characteristics of the mother and of her job during pregnancy that were significantly associated with parental leave requests, and note whether the request was granted. This discussion is guided by the results of a statistical model to identify the most important factors (see Appendix A, Table A4.4). We based the analysis on women who had returned, or planned to return, to work and who provided information on whether they requested parental leave (N=1,458). Our focus here is on those factors that were statistically significant.

There were few significant differences by characteristics of the mother. When we controlled for the impact of the job during pregnancy, there were no differences by the mother's age or level of education, number of adults in the household or number of children. Cohabiting mothers who requested parental leave were less likely to have their request refused or not granted in the form they had requested (see Table 4.7). Lone mothers and married mothers did not differ significantly. We also checked for differences by the health and disability status of the mother, but these were not significant when other factors were controlled.

There is evidence of a link between taking parental leave and affordability. Women with an unemployed partner were four times less likely to request parental leave than women with a working partner, indicating the constraint on choice associated with the household's financial position, which is likely to characterise many households during a period of recession. Women with higher earnings were more likely to have requested parental leave.

Women who worked long hours before the birth were 60 per cent less likely to request parental leave. There was no significant difference between women who worked part time and those who worked 30 to 39 hours per week during their pregnancy.

Those working in the public sector (outside of education) were more likely to have requested leave. Otherwise, there were no differences between the sectors of employment.

A recent European research study on parental leave patterns across countries at firm level found that size of organisation influenced the uptake of parental leave. For the EU21, some 40 per cent of small establishments with 10 to 19 employees had one or more employees on parental leave over the previous three years, rising to more than 90 per cent of large establishments with more than 200 employees (EFILWC, 2007b). Of course, the size of firm will be associated with the probability of having at least one employee who is eligible to take such leave.

We found some differences by size of organisation in the present study, but these did not follow a linear pattern, making it difficult to draw clear conclusions. Compared with women working in the largest organisations (250 or more employees), women working in organisations with 20 to 49 employees were less likely to have their request for leave refused or granted in a form other than the form requested. Women working in organisations with 100 to 249 employees, the second largest size category, were more likely than women in the largest organisations to have requested parental leave.

**Table 4.7: Parental leave by characteristics of mother and job during pregnancy**

		Odds		
		Requested, granted fully (Ref)	Did not request	Requested, not granted (fully)
Marital status (Ref=married)	Cohabiting	1.00	n.s.	0.22
	Lone parent	1.00	n.s.	n.s.
Partner current status (Ref=at work)	Partner unemployed	1.00	4.08	n.s.
	Other economic status	1.00	—	—
Hours during pregnancy (Ref=30–39)	Less than 20	1.00	—	—
	20–29	1.00	n.s.	n.s.
	40+	1.00	1.60	n.s.
Sector (Ref=other private sector)	Education	1.00	n.s.	n.s.
	Other public sector	1.00	0.56	n.s.
	Finance etc.	1.00	n.s.	n.s.
	Retail and wholesale	1.00	n.s.	n.s.
Employees in organisation (Ref=250+)	1–9	1.00	n.s.	n.s.
	10–19	1.00	n.s.	n.s.
	20–49	1.00	n.s.	0.21
	50–99	1.00	n.s.	n.s.
	100–249	1.00	0.58	n.s.
Hourly income (log)		1.00	0.59	n.s.

Base: Women who were employees during pregnancy, who had returned to work or planned to return and who provided information on whether they requested parental leave (N=1,458).

Note: See Appendix A, Table A4.3 for the full model. 'n.s.' indicates not statistically significant. 'Ref' means reference category. '—' indicates too few cases in the relevant category to calculate an estimate.

## 4.4 Summary

In this chapter we examined the take-up of maternity and parental leave by mothers who had been in employment during their pregnancy. The majority of women surveyed had taken paid maternity leave (92 per cent), with 39 per cent taking both paid and unpaid leave. Eighty-seven per cent of women who availed of paid maternity leave took the full entitlement of twenty-six weeks. Take-up rates of paid maternity leave were lower among the self-employed and temporary/casual workers (both 79 per cent) than among permanent employees (98 per cent). Younger mothers and women working part time also had somewhat lower take-up rates of paid maternity leave.

About two-fifths of the women surveyed took unpaid maternity leave, with about half of these women taking the full sixteen weeks allowed. Most of those who took unpaid leave had also taken paid leave. Taking a period of unpaid leave in addition to paid leave was clearly related to the capacity of the family to afford it and characteristics of the woman related to her earnings and security in her job as well as the availability of the financial support of a partner were important. For instance, only 18 per cent of women with lower second-level education, 18 per cent of women in the bottom fifth in terms of hourly earnings, 22 per cent of temporary/casual employees, 22 per cent of women who had been in their job less than one year and 26 per cent of lone mothers took both paid and unpaid leave, compared with 40 per cent overall. It was also evident that permanent employees (44 per cent) and those working for organisations with at least 250 employees (58 per cent) were more likely than the self-employed (23 per cent) or women working in organisations with fewer than ten employees (23 per cent) to take combined paid and unpaid leave.

Being able to maintain living standards while on maternity leave is facilitated for those women employees (48 per cent) who received top-up payments from their employer while on maternity leave. Receipt of such a payment was more common among women who were already more financially secure or had the support of a partner, women with higher hourly earnings during pregnancy, women with degree-level education, married or cohabiting women, women who worked in the public sector and women who were able to take time off for family reasons. More vulnerable women, such as lone mothers, non-Irish mothers, women with lower earnings and those with an unemployed partner were less likely to be in jobs where their employer provided supplementary payments. Mothers who worked less than twenty hours per week during pregnancy, those working in the retail and wholesale sector and those working for small organisations were also less likely to have received top-up payments.

Just under one-third of women who were employees during pregnancy had experienced problems related to maternity leave. These included inadequate cover being provided by their employer (8 per cent), being encouraged by their employer to take time off or to take sick leave before they wanted to begin maternity leave (7 per cent), being contacted by their employer too often during maternity leave (5 per cent), feeling pressurised to return sooner than they wanted (5 per cent) and resentment from work colleagues (4 per cent). Younger women and women who had difficulty in balancing work and family commitments during pregnancy were more likely to experience problems related to maternity leave. Women with lower levels of education and non-Irish nationals were less likely to report problems related to maternity leave; this may be because they had less awareness of their entitlements and therefore did not identify problems.

Take-up of parental leave was relatively low at the time of the survey: just 18 per cent of women who had returned to employment had requested parental leave. This figure is lower than previous estimates for Ireland, which suggested that 20 per cent of all eligible workers and 40 per cent of female workers take parental leave. The difference may arise because the children in our sample were all born between July 2007 and June 2009 and therefore were aged up to two years and three months at the time of the survey, yet parental leave can be taken until the child is eight years old (or sixteen in the case of a disabled child). Therefore the take-up rate amongst our sample group is likely to increase over time. Also, the previous estimates for Ireland were based on surveys of employers and it is likely that they have imperfect information on the number of their employees who are eligible for parental leave (which requires knowledge about the ages of their employees' children). The take-up rate in the present survey continues to place Ireland towards the bottom of the ranking in the EU, and far below the top-ranking countries, where over two-thirds of those eligible make use of parental leave (EFILWC, 2007a).

There was little variation in the take-up of parental leave by the personal characteristics of the mother, such as her age, education, marital status and number of children, when other factors were controlled. There were some differences by characteristics of the job in which the woman worked during pregnancy, including higher rates of




take-up in the public sector (apart from education). There was also evidence of the link between parental leave and the issue of affordability in that applications for parental leave were more common among women with a working partner or with higher hourly earnings.

Four per cent of mothers who had returned (or intended to return) to work, or 19 per cent of mothers who had requested parental leave, had their request for parental leave denied or granted in a form other than that requested. There was little variation in the denial of requests by characteristics of the mother or of her job during pregnancy, apart from the fact that cohabiting women and women in organisations with 20 to 49 employees were more likely to have their request granted in the form requested.

The results reported in this chapter suggest that those in more disadvantaged positions in the labour market are least likely to take up statutory leave entitlements. The degree of stratification in experience was particularly pronounced for the uptake of unpaid maternity leave, where women with greater economic resources were much more likely to avail of this provision. The distribution of employer-provided maternity benefit was also strongly skewed towards the more advantaged groups and those in higher level occupations. These benefits may be seen as part of the wider reward package for more privileged groups as employers seek to recruit and retain these employees. However, location in the public sector or in large private sector firms can give access to these employer benefits to a more diverse group of women. These differences potentially reinforce longer term disadvantage across social class groups, as women who are offered less support or flexibility may be more likely to drop out of the labour force for a longer period. In Chapter 5 we examine women's return to work or their decision to remain out of work following the birth of their child, where these differences between women's opportunities and constraints can be examined in greater detail.



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## Chapter 5: Return to Work

## 5.1 Introduction

In this chapter we focus on the two-thirds of women who were in employment during pregnancy and examine their decisions about work after the birth of their child, including decisions to return to the same or a different job, or to leave the labour force.

As noted in Russell and Banks (2011), 56 per cent of Irish mothers of pre-school children are in employment, although the proportion is lower for lone mothers (45 per cent). Access to affordable childcare and earnings potential are likely to be among the key factors in determining whether a woman can return to work following the birth of her child. Other personal factors include the mother's age, the number and ages of other children, partnership status and attitudes to gender roles. Characteristics of the job are also likely to be important, particularly the availability of flexible working arrangements and job security. At the broader institutional level, maternity leave and parental leave entitlements are important.

In Section 5.2 we focus on women who changed employer after the birth of their child or who left the labour market. Their reasons for leaving work or changing employers give an insight into the challenges faced by all mothers in balancing work and family responsibilities during a period of recession. In Section 5.3 we focus on those women who had returned to work at the time of the survey, and compare key characteristics of their job before and after the birth to understand the extent of change in terms and conditions of employment. In Section 5.4 we analyse the factors influencing the decision to return to work and the timing of the return after the birth.

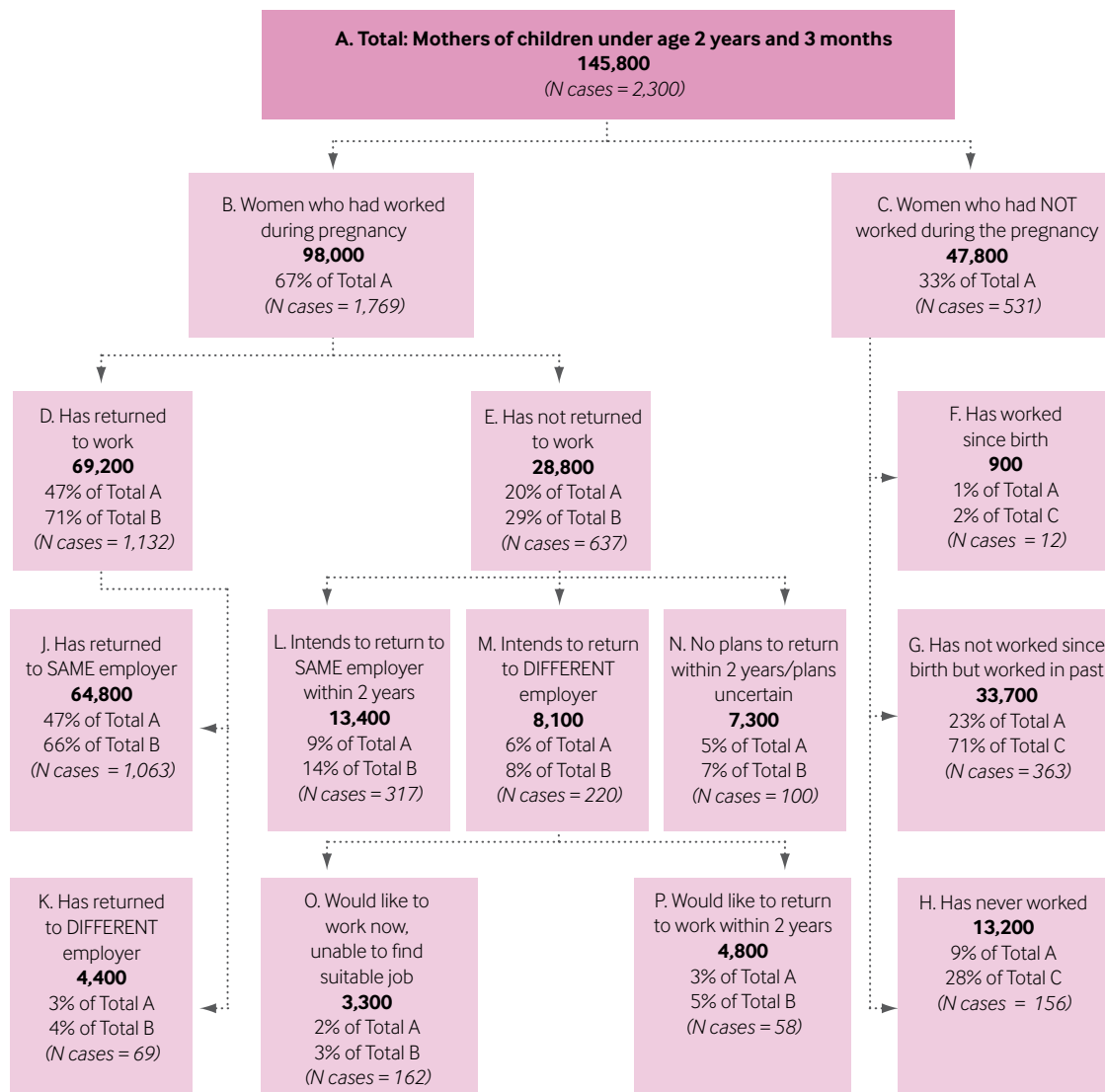
## 5.2 Reasons for Changing Employer or Leaving Previous Job

In this section we focus on women who changed employer or left a job around the time of the birth of their child. Three different groups of women were asked their reasons for this change in the survey and it is useful to begin with an overview of these groups. Figure 5.1 shows the situation of the women at the time of the survey, distinguishing the different pathways taken by mothers. Two-thirds of the mothers had worked during their pregnancy; of those who had not, 71 per cent had worked in the past – we have little information on the jobs these women held, but we did ask their reasons for leaving their previous job and we present these results in Section 5.2.3.

For women who were in employment during pregnancy, their labour force attachment was very strong. At the time of the survey, 71 per cent had already returned to work, almost always to the same employer (66 per cent), and 14 per cent intended to return to the same employer. A further 8 per cent intended to seek a different job. Three per cent of these women would have liked to be working again but had been unable to find a suitable job. Only 7 per cent had no plans to return to work within the next two years or their plans were uncertain.

Three groups of women were asked why they had left their previous job. One comprises those women who had returned to a different employer or who intended to work with a different employer (groups K, O and P in Figure 5.1). The second group comprises those women who had been in employment during pregnancy but who had left that job and had no immediate plans to return to work (group N). The third group includes women who were *not* in employment during pregnancy, but who had worked in the past (group G). We discuss the reasons given by each in the remainder of this section.

**Figure 5.1: Employment situation of mothers before and after the birth (estimated numbers in the population and number of cases in the survey sample)**



Base: Women who had given birth in the two-year reference period, between July 2007 and June 2009, and who were surveyed in the autumn of 2009 (N=2,300).

### 5.2.1 Reasons for Changing Employer

As noted above, most of the women who had returned to work had returned to the same employer. Of the women who had worked during pregnancy, only 4 per cent were working with a different employer and a further 8 per cent intended to work with a different employer. In Figure 5.2 we examine these women's main reasons for changing employer. As more than one reason may have been given, the figures sum to more than 100 per cent. We caution the reader that as the number of cases is small (281 women gave reasons) the differences in the percentages need to be greater than seven percentage points to be statistically significant.

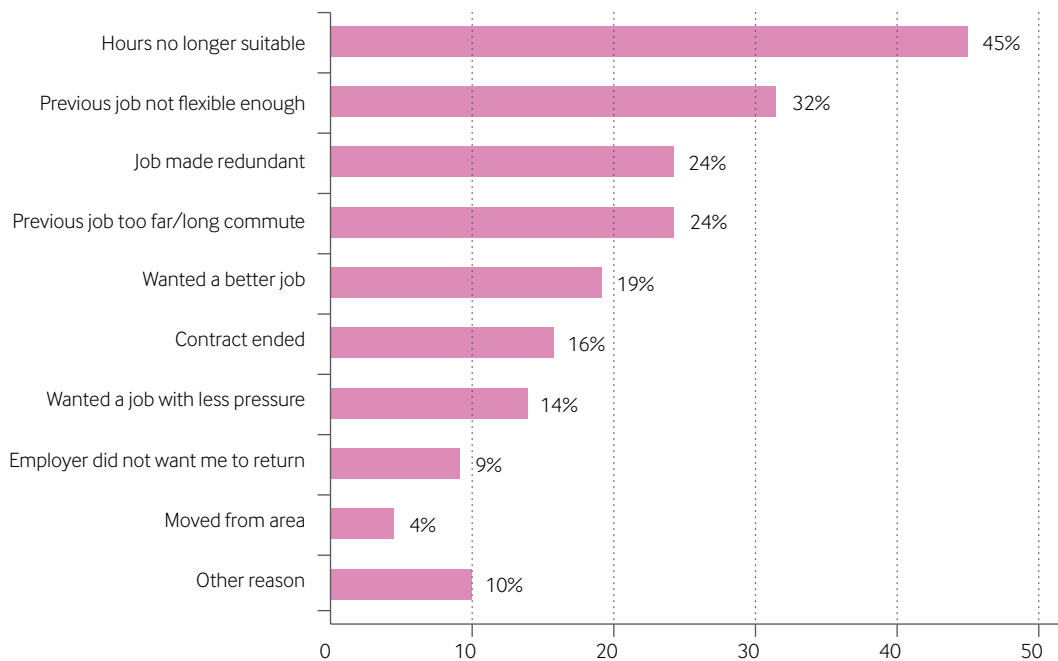
The reasons given largely reflect anticipated difficulties in balancing work and family roles. Problems with the hours (45 per cent) and flexibility (32 per cent) of the job during pregnancy were the most frequently cited reasons for changing or intending to change employer. The length of the commute was cited by almost one-quarter of women who had changed or intended to change employer. Wanting a job with less pressure (14 per cent) may also be due to the challenges of balancing work and family life.

There was evidence of the impact of the economic downturn in that almost one-quarter of the women who had changed or intended to change employer had been made redundant from their previous job. The 16 per cent whose contract had ended may also have been victims of the recession as non-renewal of temporary contracts became more common.

The reasons for changing employer also included some that were not related to motherhood: almost one-fifth of women made this decision because they wanted a better job. Other reasons that were cited less often included: moving away from the area (4 per cent) and the employer not wanting the woman to return (9 per cent). It is not clear whether the latter reason was related to the recession or to difficulties with the employer. The 'other reasons', which were given by 10 per cent of the women who changed jobs, included closure of the business, childcare difficulties or costs, the decision to start a business and illness.

The women were also asked which of their reasons for leaving their previous job was the most important. The challenges of work–life balance and the economic recession were very evident in the reasons they identified as most important: the hours were no longer suitable (27 per cent), the previous job was too far from home (9 per cent), the job was made redundant (17 per cent) or the contract ended (10 per cent).

**Figure 5.2: Reasons for changing or intending to change employer**



*Base: Women who were in employment during pregnancy, who had returned to work/intended to return to work with a different employer and who gave a reason for their decision (N=281).*

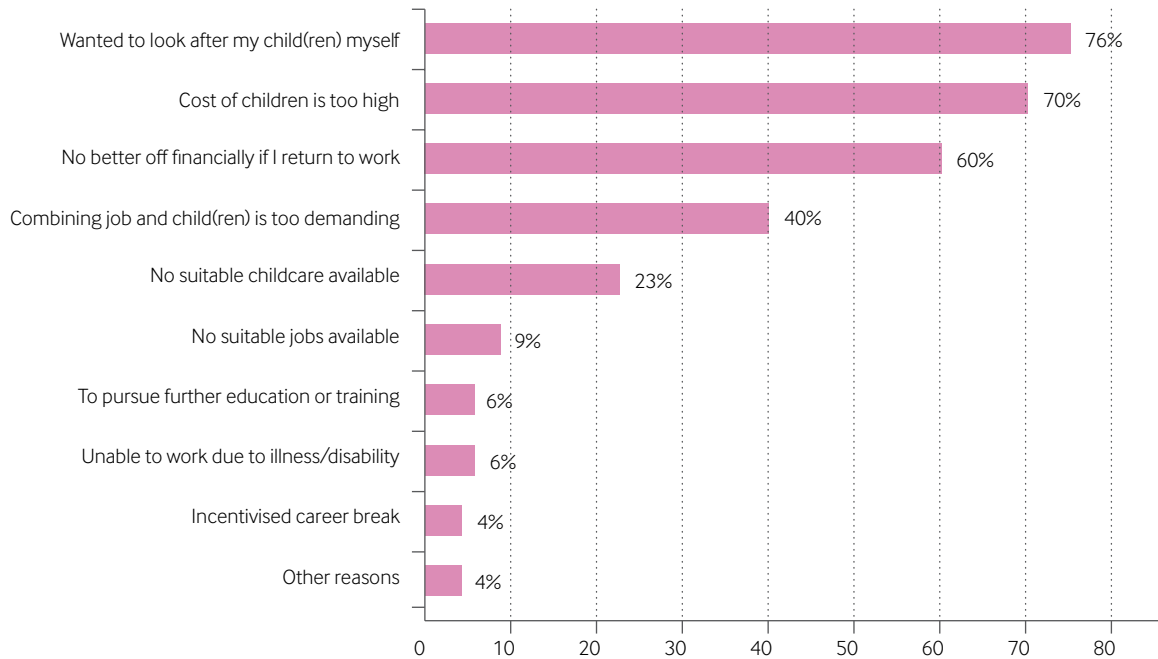
*Note: Multiple reasons allowed.*

### 5.2.2 Reasons for Not Returning to Work

Of the women who were in employment during pregnancy, 7 per cent had not returned at the time of the survey and did not intend to return within the next two years. The main reasons given by these women are shown in Figure 5.3. Caution is advised in interpreting these results as the number of cases is very small (73 women gave reasons).<sup>21</sup>

The reasons given most often were that the woman wanted to care for her child(ren) herself (76 per cent) or encountered difficulties with the cost of childcare (70 per cent). Problems with the availability of childcare (23 per cent) were also important, as was the fact that returning to work would leave the woman no better off financially (60 per cent). A substantial minority of these women also felt that combining work and caring for children was too demanding (40 per cent). Other reasons, each cited by less than one in ten women, were: the lack of suitable jobs, the desire to pursue further education or training, illness or disability and taking an incentivised career break.

<sup>21</sup> The margin of error around the figures is about eleven percentage points.

**Figure 5.3: Reasons for not returning to work**

Base: Women who were in employment during pregnancy but had no plans to return to work within two years and who gave a reason for their decision (N=73).

Note: Multiple reasons allowed.

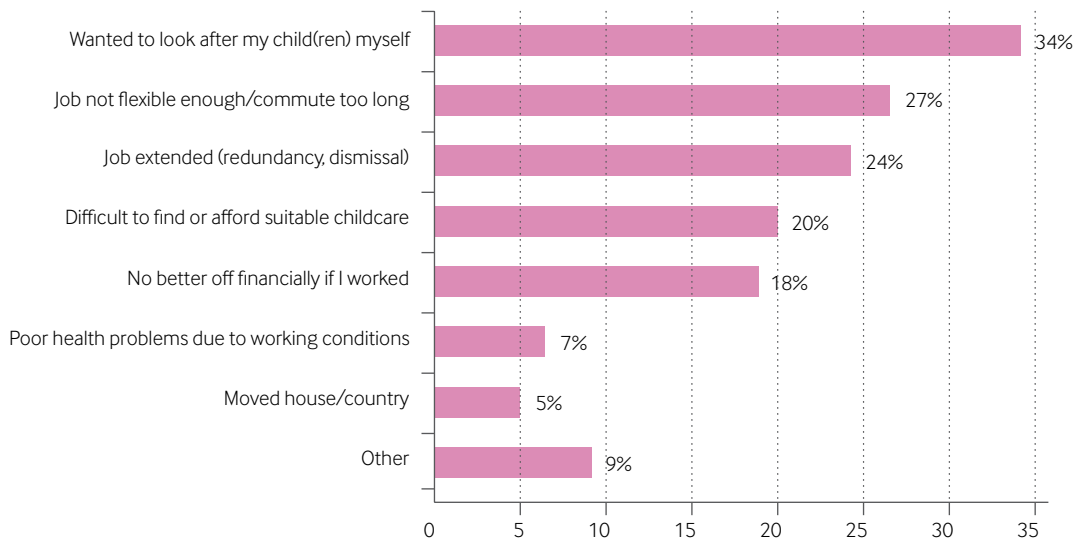
### 5.2.3 Reasons for Leaving Previous Job

Another group outside the labour market comprises those mothers who were not in employment during pregnancy (one-third of all mothers). Those who had worked in the past but had left the job (70 per cent of this group) were asked for their reason(s) for leaving their last job. The reasons given are shown in Figure 5.4.<sup>22</sup>

As many of these women left work before the economic recession, reasons such as business closure and redundancy, while important, were not dominant (24 per cent). About one-third of the women wanted to look after their child(ren) themselves (34 per cent). However, reasons related to the cost and availability of childcare (20 per cent) and to difficulties in combining work and family life (27 per cent) were frequently cited. A related reason – that the woman would be no better off financially if she worked (18 per cent) – was also important.

<sup>22</sup> The margin of error around these figures is about five percentage points.

**Figure 5.4: Reasons women who were not in employment during pregnancy gave for leaving previous job**



*Base: Women not in employment during pregnancy who had worked in the past and who gave a reason for their decision to leave their most recent job (N=362).*

*Note: Multiple reasons allowed.*

### 5.3 Comparison of Job Before and After Childbirth

In this section we examine the characteristics of the women’s jobs before pregnancy and after pregnancy in terms of hours, pay, occupational category, industrial sector, contract status, responsibility, opportunities, flexible work arrangements and work–family conflict. Although most of the women who had returned to work had returned to the same employer, they may have returned to a different job with that employer or the hours worked may have been changed. Previous Irish research on work–life balance found that 62 per cent of women made modifications to their working hours on becoming a parent (Drew et al., 2003), and of these, 90 per cent decreased their working time.

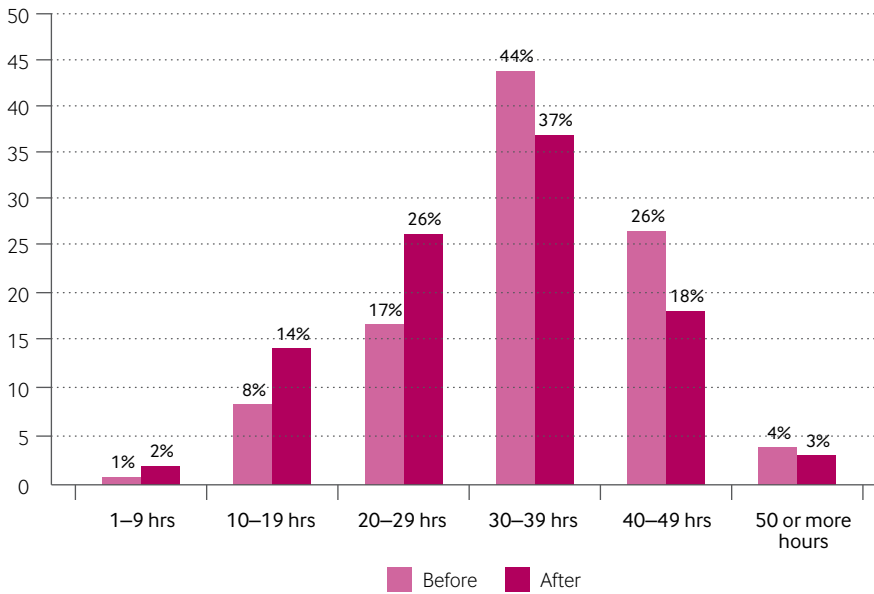
#### 5.3.1 Hours Worked

We turn first to the hours worked in the job during pregnancy and in the job following the birth for those women who had returned to work. In Chapter 2 we saw that about three-quarters of the women had worked full time during pregnancy and about one-quarter had worked part time (less than 30 hours per week). Figure 5.5 shows in more detail the percentage of these mothers working each number of hours before and after the birth. It is clear that the shape of the distribution of hours worked shifted, with a substantial increase in part-time working following the birth. Before the birth of their youngest child, 74 per cent of the mothers had worked 30 or more hours per week, with the biggest group (44 per cent) working 30 to 39 hours per week.

After the birth, the percentage of mothers working 30 or more hours per week had dropped to 58 per cent, with 37 per cent now working 30 to 39 hours per week. At the same time, the percentage of women working part time had increased: from 17 per cent to 26 per cent for those working 20 to 29 hours and from 8 per cent to 14 per cent for those working 10 to 19 hours.



**Figure 5.5: Weekly working hours before and after the birth**

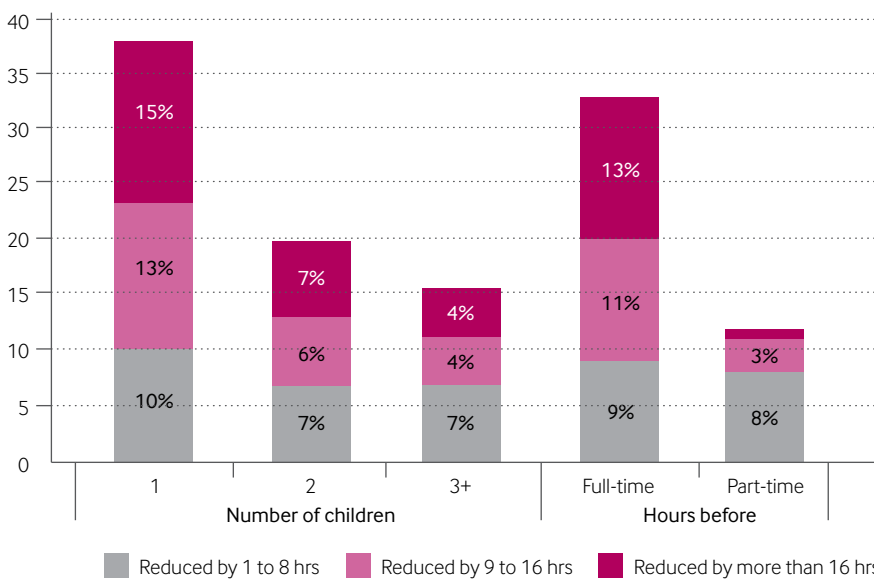


Base: Women who were in employment during pregnancy and who had returned to work at the time of the survey (N=1,132).

As we might expect, women who worked full time before the birth were more likely to reduce their hours worked. Figure 5.6 shows that about 12 per cent of women who worked part time (less than 30 hours per week) before the birth reduced their hours, mostly by between 1 and 8 hours per week. On the other hand, among women who worked full time before the birth (30 hours per week or more), almost one-third reduced their hours: 13 per cent by 16 or more hours per week, 11 per cent by 9 to 16 hours per week and 9 per cent by 8 hours or less per week.

Reducing the hours worked is also associated with first births (see Figure 5.6). About 15 per cent of mothers who had given birth to their third or subsequent child reduced their hours worked, compared with 38 per cent of mothers who had given birth to their first child. First-time mothers were also more likely to cut their hours by a larger amount: 15 per cent reduced their hours by 16 or more per week, compared with only 4 per cent of mothers who were expecting their third or subsequent child.

**Figure 5.6: Change in hours worked by number of children and hours worked before the birth**



Base: Women who were in employment during pregnancy and who had returned to work at the time of the survey (N=1,132).

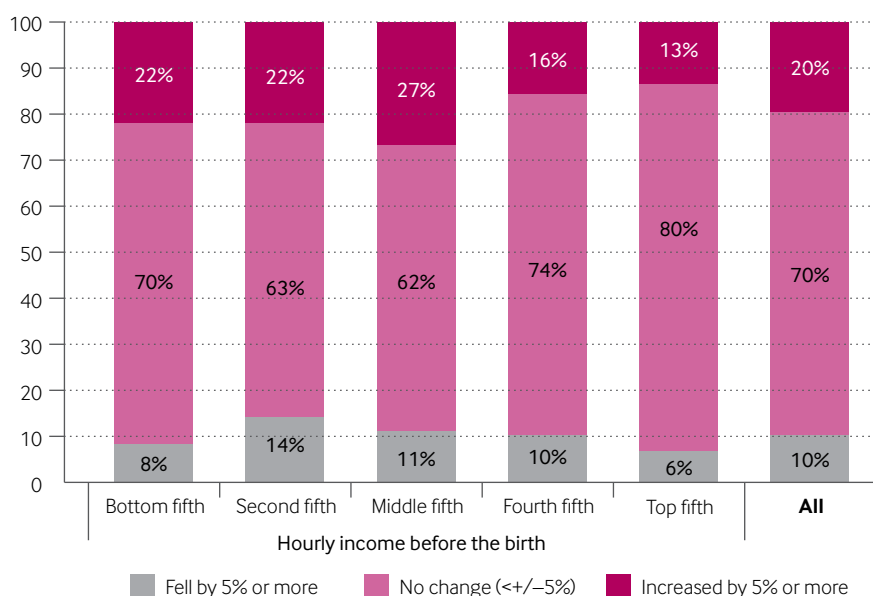
It is clear that the proportion of women working part time had increased substantially following the birth. The reduction in hours worked will inevitably result in a loss of earnings for these women.

### 5.3.2 Hourly Pay

In examining changes in hourly earnings before and after the birth, it is important to keep in mind that the maternity leave of many of these women spanned the onset of the recession in late 2008. Although public sector pay cuts did not come into effect until January 2010 (after the survey fieldwork), there may have been a reduction in the amount of overtime available as part of general budgetary restrictions in the public sector as well as in the private sector. There is little statistical information available to date on changes in private sector earnings, but we would expect to see some evidence of a fall in hourly pay and overtime pay in that sector as well.

In fact, however, the median hourly earnings before and after the birth are very close, with the median after the birth very slightly higher at €15.72 per hour (compared with €15.43 per hour before the birth). Figure 5.7 shows the extent of change in gross hourly pay after the birth for those women who had returned to work, by their earnings category before the birth. Hourly earnings were very similar (changed by less than 5 per cent) before and after the birth for 70 per cent of mothers who had returned to work by the time of the survey. One woman in ten had a decrease in income of 5 per cent or more, while one in five had an increase of 5 per cent or more.

**Figure 5.7: Change in gross hourly pay after the birth**



Base: Women who were in employment during pregnancy, who had returned to work at the time of the survey and who provided information on earnings, excluding outliers (N=1,032).

There is no clear pattern by the earnings level before the birth. Women in all income groups were more likely to experience an increase than a decrease in income but there is some suggestion of greater stability at the top of the distribution: 80 per cent of women in the top hourly earnings category before the birth had little or no change in their income.

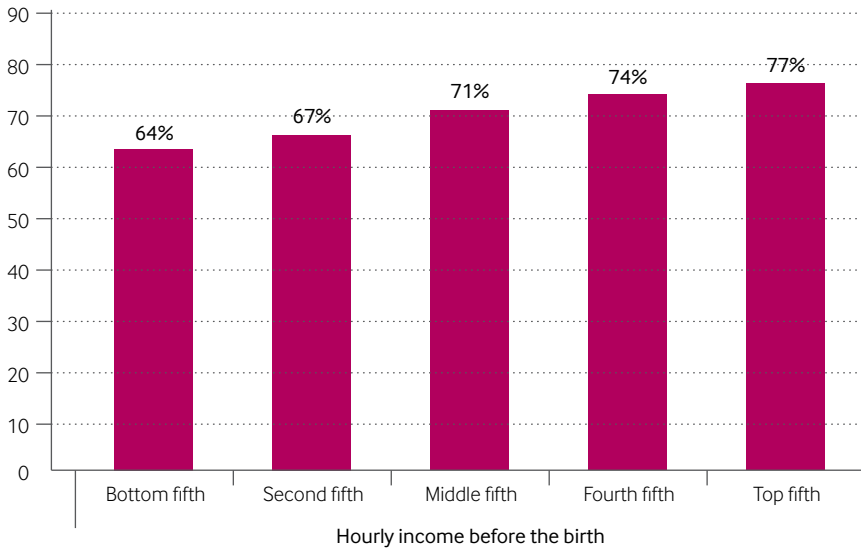
Women who had returned to work with a different employer were more likely to have experienced a change in their pay. As there were only 62 women in the sample who had returned to a different employer,<sup>23</sup> we must treat these figures with caution. The figures suggest that more of these women changed to jobs with higher rather than lower hourly earnings: something in the region of half of the women moved to jobs with hourly earnings that were 5 per cent or more higher than those in the job they held during the pregnancy, whereas about one-quarter moved to jobs with lower hourly earnings.

It is worth bearing in mind that there will be some self-selection in the decision to return to work based on the earnings the woman expects. It is clear from the discussion in Section 5.2 on the reasons given for not returning to work that a mother's decision is conditioned by her earnings potential, with issues such as the ability to afford childcare and the concern that she would be no better off if she returned to work featuring strongly. We can see this in Figure 5.8, which shows the intentions of women regarding return to work broken down by hourly earnings

23 The unweighted figure is 69, see Figure 5.1.

category in the job before birth. While most women in all five of the broad earnings categories had returned to work by the time of the survey, there were substantial differences by hourly earnings category. For instance, 77 per cent of women in the top fifth in terms of hourly earnings had returned to work, whereas this was true of only 64 per cent of women in the bottom fifth. The association between expected earnings and the decision to return to work suggests that mothers who anticipate a drop in hourly earnings may be less likely to return to work.

**Figure 5.8: Return to work by hourly earnings category before the birth**

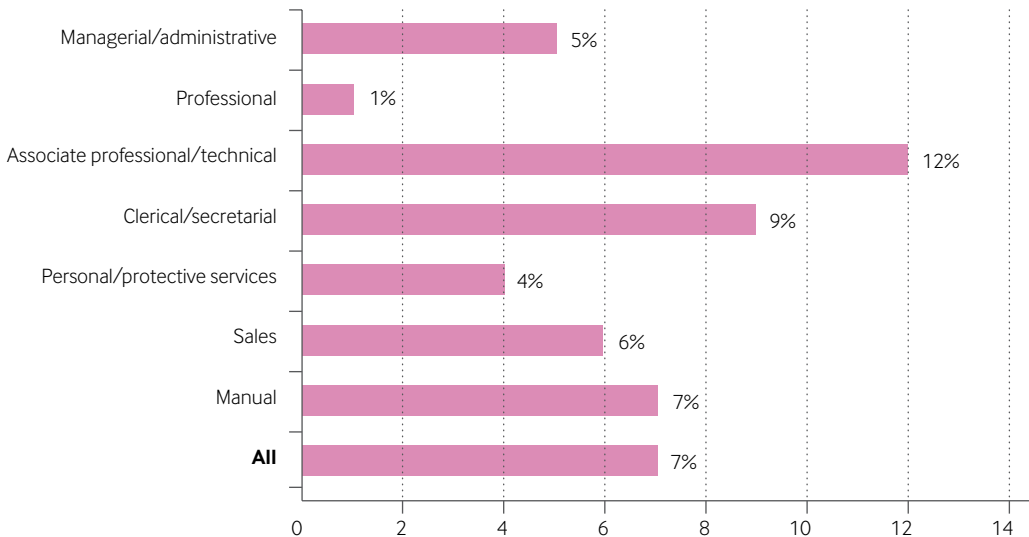


Base: Women who were in employment during pregnancy and who provided information on earnings, excluding outliers (N=1,665).

### 5.3.3 Occupation and Industry

Most women who had returned to work after the birth had also returned to the same occupation, with only 7 per cent of women returning to work in a different occupation, as shown in Figure 5.9. There is no clear pattern by the status of the occupation before the birth, apart from the fact that very few professional women changed occupation. Women at what we might think of as opposite ends of the social class spectrum were less likely to change to a different occupation, with some intermediate groups more likely to change. For instance, 6 per cent of women in sales occupations and 7 per cent of women in manual occupations changed occupations, but the percentage was also low (5 per cent) among women in managerial/administrative jobs. Women who had worked in associate professional/technical occupations (12 per cent) and in clerical/secretarial jobs (9 per cent) were more likely to have changed to a different occupation.

**Figure 5.9: Changed occupation by occupation before the birth**

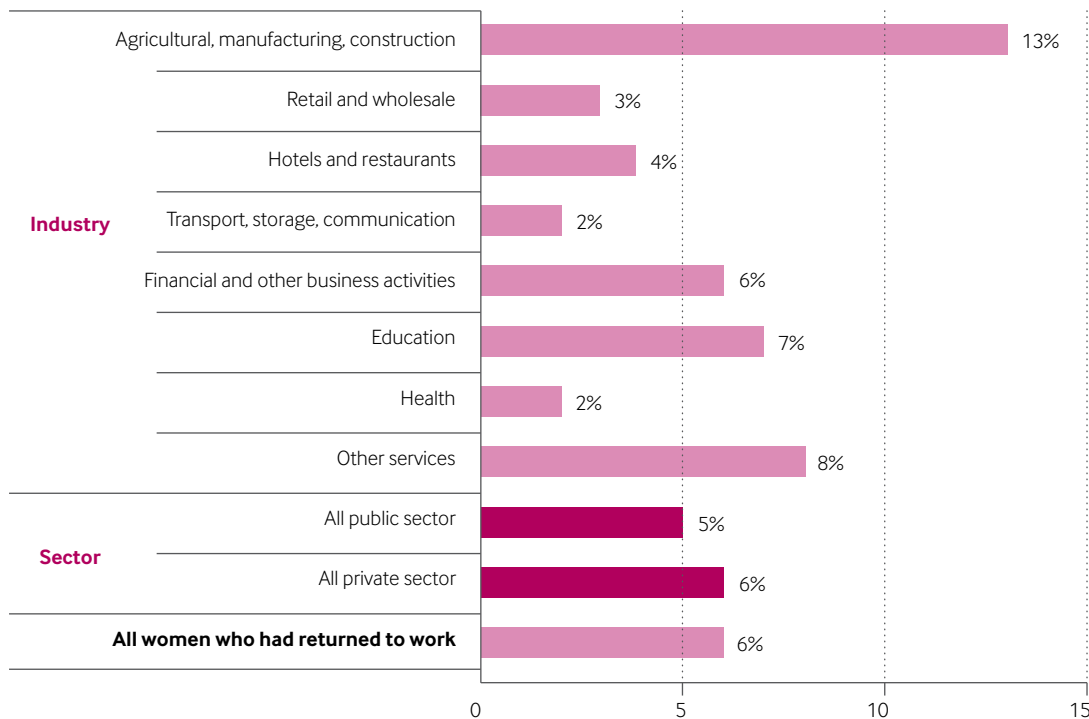


Base: Women who were in employment during pregnancy and who had returned to work at time of the survey (N=1,132).

Further investigation revealed that women working in associate professional/technical occupations who changed employer were more likely to have been made redundant (40 per cent, compared with 24 per cent overall as shown in Figure 5.2), which may account for the higher rate of occupation change among this group. They were also more likely than other mothers who changed employer to have found their hours no longer suitable (67 per cent, compared with 45 per cent overall) and to give reasons related to lack of flexibility (60 per cent, compared with 32 per cent overall) and length of commute (40 per cent, compared with 24 per cent overall).

Most women had also returned to jobs in the same industry, as seen in Figure 5.10. Only 6 per cent of women who had returned to work moved to a new industrial sector, with more movement out of agricultural, manufacturing and construction jobs (13 per cent) and less movement out of retail and wholesale (3 per cent), health (2 per cent) or transport, storage and communication (2 per cent) jobs.

**Figure 5.10: Changed industrial sector by industry before the birth**



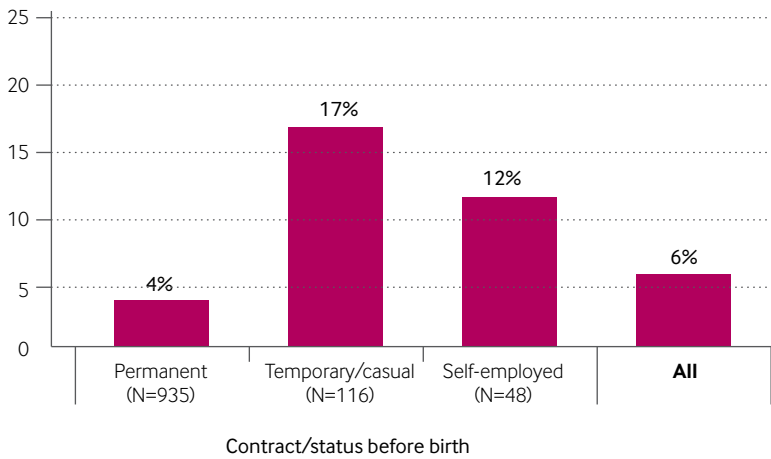
Base: Women who were in employment during pregnancy and who had returned to work at time of the survey (N=1,132).

Overall, the percentages remaining in the same part of the public sector are similar to the percentages remaining within the same industry in the private sector.

### 5.3.4 Contract Status

From Figure 5.11 we see that most women who had returned to work had gone back to the same employment status they held before the birth, with only 6 per cent resuming employment in a different status or contract type. Permanent employees were less likely to move to a different status or contract (4 per cent) than the self-employed (12 per cent) or temporary/casual employees (17 per cent). Note that because of the relatively small number of women in the sample who had been self-employed (N=48) or on temporary/casual contracts (N=116), we cannot be sure that the observed difference between these two groups is statistically significant. Both are significantly different from permanent employees, however. The women who had been self-employed or temporary/casual employees during pregnancy but who had changed status since the birth most often moved to permanent employee status, whereas the permanent employees who changed contract status were most likely to move to temporary/casual employment contracts (see Appendix A, Table A5.1).

**Figure 5.11: Changed employment status by status during pregnancy**

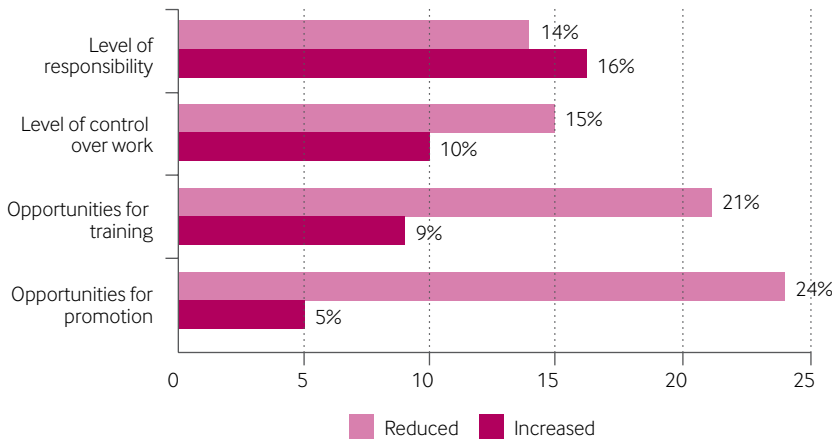


Base: Women who were in employment during pregnancy and who had returned to work at time of the survey (N=1,132).

### 5.3.5 Responsibility, Control and Opportunities

Figure 5.12 compares the job before the birth of the child with the job after the birth in terms of the mother’s level of responsibility, level of control over her work, opportunities for training and opportunities for promotion. Again, the figures refer to those women who had worked during pregnancy and who had returned to employment at the time of the survey.

**Figure 5.12: Changes in responsibility, control and opportunities at work after the birth**



Base: Women who were in employment during pregnancy and who had returned to work at time of the survey (N=1,132).

For all of these job characteristics, the majority of women (70 to 75 per cent) experienced no change, although there is more change than was the case for the employment contract. In the case of opportunities for training and promotion, 29 to 30 per cent of women felt that their situation had changed after the birth, with most feeling they had fewer opportunities than previously: 21 per cent felt they had fewer opportunities for training and 24 per cent of employees felt they had fewer opportunities for promotion (the self-employed were not asked whether opportunities for promotion had changed). Women were more likely to feel that their level of control over their work had decreased (15 per cent) than to feel that it had increased (10 per cent). There was a more even split in the case of level of responsibility, with almost equal proportions of women feeling that it had increased (16 per cent) as that it had decreased (14 per cent).

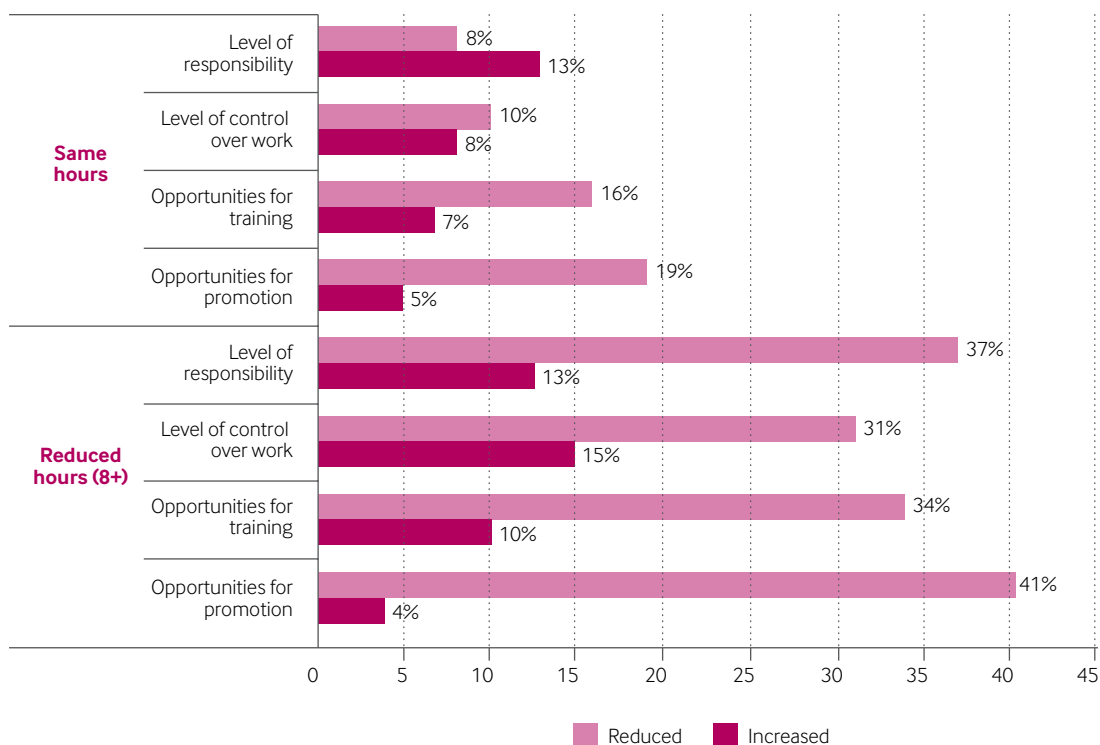
The bulk of these changes occurred among women who had returned to the same employer. There are not enough cases to examine women who changed employer separately, but we checked the figures with these women excluded. Focusing on women returning to the same employer changed the findings reported in Figure 5.12 by only one or two percentage points.

The changes in levels of control and opportunity were linked to a reduction in hours worked. Figure 5.13 shows the percentage of women experiencing change by whether they reduced their hours worked. It is clear that women who reduced their working week by eight or more hours experienced more change than women whose hours remained roughly the same (within plus or minus one hour per week). This change was more likely to be negative than positive: 37 per cent of women who reduced their hours experienced a reduced level of responsibility; only 15 per cent felt they had a greater level of control over their work, compared with 31 per cent who felt they had less control over their work.

Women who reduced their hours after the birth were twice as likely to feel that they had fewer opportunities for training and promotion as women whose hours remained the same. Just over one-third of women who reduced their hours felt they had reduced opportunities for training (compared with 16 per cent of women whose hours remained the same) and 41 per cent felt they had fewer opportunities for promotion (compared with 19 per cent). There were some women working fewer hours who had experienced positive changes in terms of increased control (15 per cent), training opportunities (10 per cent) and opportunities for promotion (4 per cent), but the numbers were smaller than the numbers reporting a negative impact.

It is striking that 16 per cent of those women whose hours had not changed reported fewer opportunities for training and 19 per cent reported fewer opportunities for promotion. Given the negative changes in the economy in the year preceding the survey, however, we cannot, with confidence, attribute this change to the impact of parenthood. It may be that the economic recession was responsible for some of these unfavourable outcomes.

**Figure 5.13: Changes in responsibility, control and opportunities at work by change in hours worked**



*Base: Women who were in employment during pregnancy and had returned to work at time of the survey and who reduced their hours by more than eight per week (N=156) or kept the same hours (N=704), excluding those who did not report their hours.*

### 5.3.6 Flexible Working Arrangements

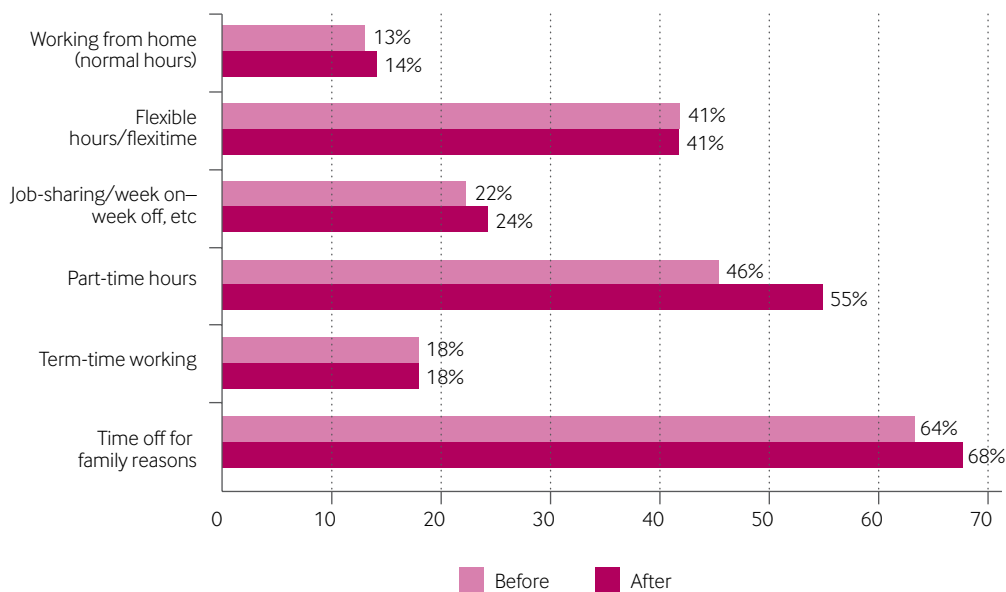
At this point we turn to the availability of flexible working options during pregnancy and after the birth. One feature of these job characteristics is that a substantial proportion of the women did not know whether they would be available to them, ranging from about 12 per cent for flexible hours to 28 per cent for term-time working. This suggests, particularly in the case of the job before the birth, that the women had not investigated these possibilities.

Figure 5.14 shows the availability of flexible working arrangements in the job during pregnancy and in the job after the birth for those women who had returned to work. We excluded cases where the women did not know whether

the practices were available before calculating the percentages. Note that the figures on availability of flexible working arrangements in the job during pregnancy include all women who were in employment during pregnancy, whereas the figures for the job after the birth are for women who had returned to work at the time of the survey.

Two things need to be kept in mind in interpreting these figures. First, most of the changes will be driven by the small number of women who altered their jobs, but there was some change as well among women who returned to the same employer.<sup>24</sup> Second, the availability of these flexible working practices is likely to have had an impact on whether mothers returned to the same job or even returned to work at all. For instance, we saw earlier that 66 per cent of the women who were in employment during pregnancy had returned to the same job, but the percentages who did so were higher among women who had these flexible working practices available to them in the job during pregnancy (70 to 75 per cent, with the higher figure for the availability of working from home).

**Figure 5.14: Availability of flexible working arrangements before and after the birth**



*Base: Women who were in employment during pregnancy (excluding 'don't knows') (N=1,312) for before the birth and women who had returned to employment at time of the survey (N=830) for after the birth.*

The most commonly available flexible arrangement was time off for family reasons (such as to care for a sick child): 64 per cent of women had this option available to them in the job before the birth, increasing slightly to 68 per cent among women who had returned to work. Part-time working was available to 46 per cent of women during their pregnancy, increasing to 55 per cent among those who had returned to work. This is the flexible arrangement where we see most change between the jobs before and after the birth and affirms the earlier finding that the most common reason for changing employer was that the hours were no longer suitable.

Forty-one per cent of women had flexible hours (or flexitime) available during their pregnancy and the proportion was very similar among women who had returned to work. Twenty-two per cent of women had job-sharing or week-on/week-off arrangements available in the job before the birth, with very slightly more having this available in the job after the birth (24 per cent). Term-time working (18 per cent) and working from home during normal working hours (13 to 14 per cent) were less widely available but there was little very change in the jobs before and after the birth.

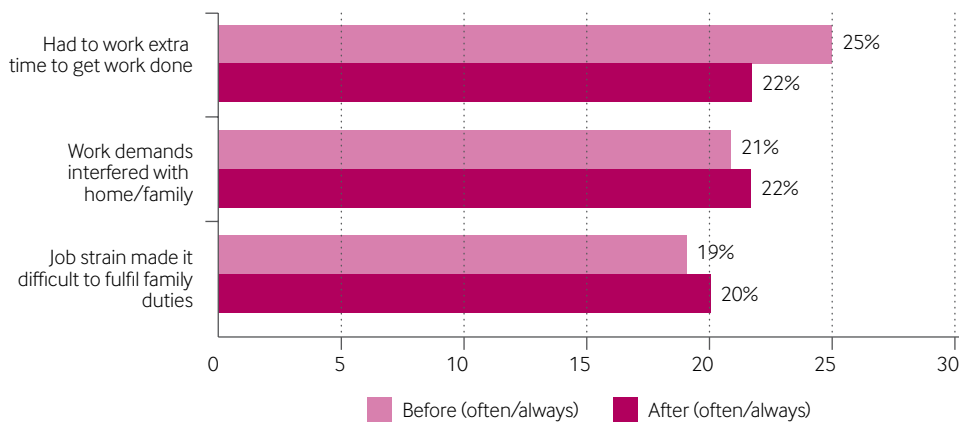
While change in the availability of flexible working arrangements was more common among those women who changed their employer, it was also found among women who had returned to the same employer, perhaps because they returned to work in a different division or with a different set of responsibilities.

<sup>24</sup> The number of women in the sample who returned to a different employer is too small to show figures separately.

### 5.3.7 Work–Family Conflict

In some cases work demands cause difficulties in a woman’s family life. Figure 5.15 compares the women’s jobs during pregnancy with their jobs after the birth in terms of a number of work–life conflicts. About 25 per cent of women who had worked during their pregnancy found that they regularly (always or often) had to work extra hours to get the job done; the corresponding figure was somewhat lower (at 22 per cent) among those women who had returned to work by the time of the survey. The percentage of women who found that the demands of the job made it difficult to fulfil family duties was about the same before and after the birth (21 to 22 per cent). Around one in five women who were in employment during pregnancy regularly experienced strain that made it hard to fulfil family duties; again, this percentage remained about the same among women who had returned to work. There is little evidence from these figures, then, that the women who had experienced conflict between work and family life in their job during pregnancy were able to substantially reduce this conflict after the birth of their child.

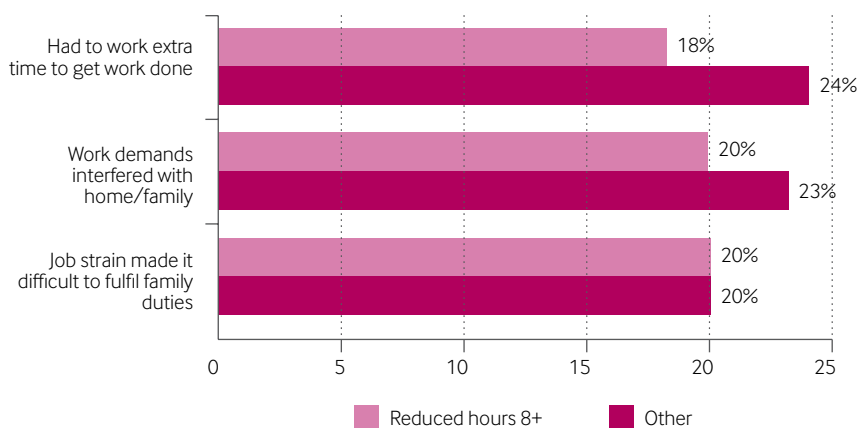
**Figure 5.15: Regular work–family conflict before and after the birth**



*Base: Women who had been in employment during pregnancy (N=1,769) for the job before the birth; and women who had been in employment during pregnancy and who had returned to employment at time of the survey (N=1,132) for the job after the birth.*

Figure 5.16 examines the level of work–family conflict experienced by women who reduced their working time by eight or more hours per week compared with other women. The figures suggest that women who substantially reduced their hours were less likely to experience conflict arising from job pressure or work demands but were no different in terms of job strain. For instance, 18 per cent of women who reduced their working time by eight or more hours regularly (always or often) had to work extra hours to get the work done and 20 per cent found that work demands interfered with family life, compared with 24 per cent and 23 per cent, respectively, of other women who had returned to work. There was no difference between women who reduced their hours and other women in terms of the percentage who found that job strain made it difficult to carry out family duties.

**Figure 5.16: Regular work–family conflict after the birth by whether hours worked were reduced**



*Base: Women who had been in employment during pregnancy and had returned to employment at time of the survey (N=178 for women who reduced their hours by eight or more; N=902 for others).*



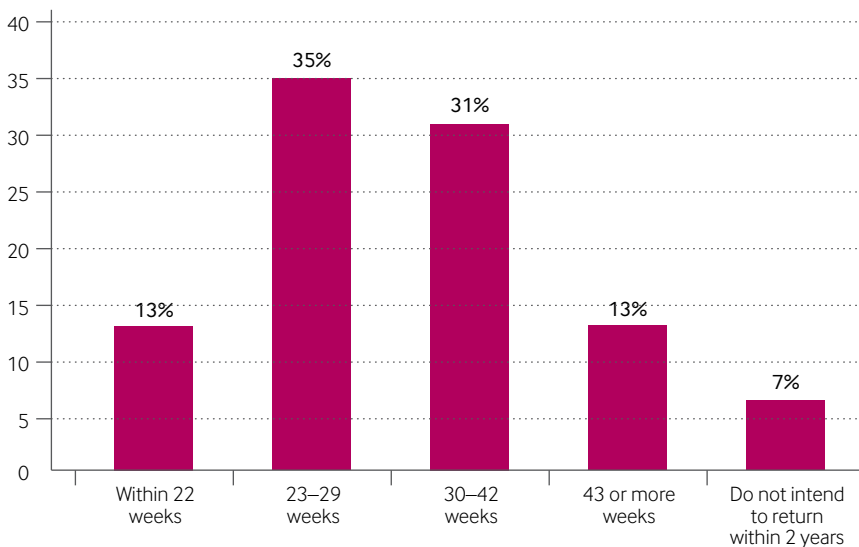
Overall, then, women who had substantially reduced their hours were in a somewhat better position in terms of work–family conflict, but the improvement was relatively modest in magnitude, compared with women who worked the same or slightly reduced hours.

### 5.4 Timing of Return to Work

In this section we focus on the mothers who had been in employment during pregnancy and either had returned or planned to return to employment. In examining how long after the birth of their child they returned or intended to return to work, it is worth keeping in mind that the women differed in terms of the time that had elapsed since the birth. At the time of the survey, some women were still on maternity leave and some had returned to work. For those mothers who had not yet returned to work, we have taken account of when they intended to return to work. Only 7 per cent of the mothers who had been in employment during pregnancy did not intend to return to work within two years or had no definite plans to return.

As we might expect from the discussion of maternity leave in Chapter 4, the biggest group returned to employment around the twenty-sixth week after the birth (marking the end of their paid maternity leave period): 35 per cent returned to work between 23 and 29 weeks (see Figure 5.17). There was some fluctuation about the 26-week figure because some women also took annual leave following the birth and most women took two weeks of maternity leave before the birth.

**Figure 5.17: Timing of return to work**



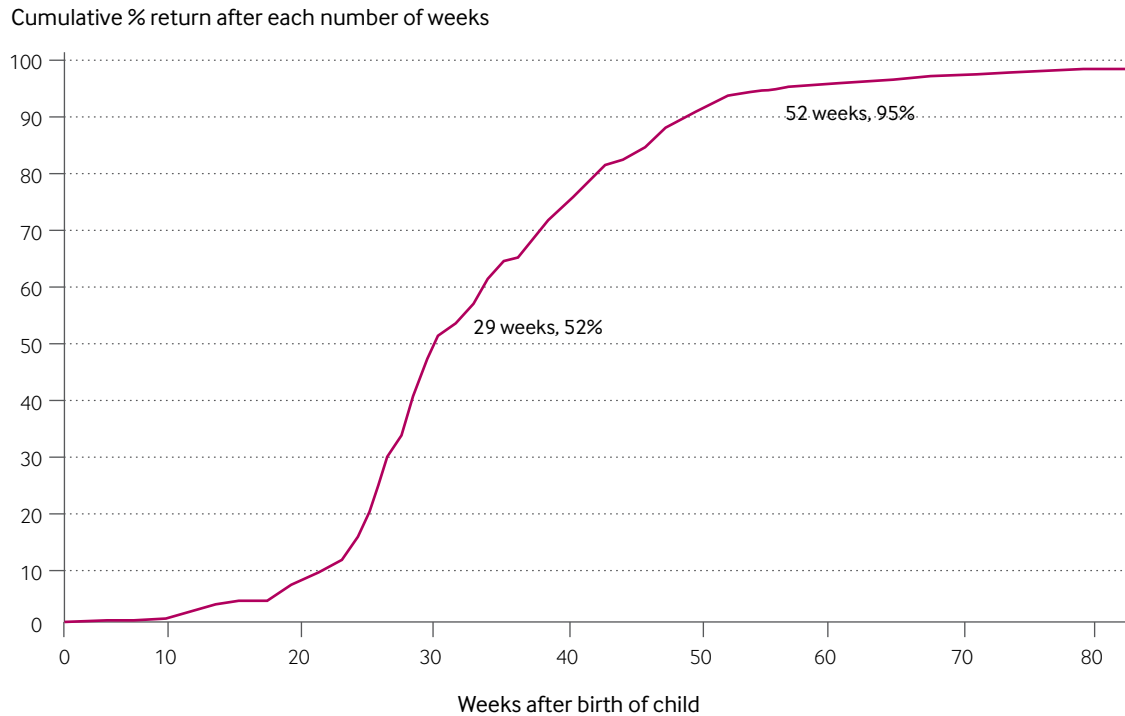
*Base: Women who had been in employment during pregnancy (N=1,769).*

The timing of return to work also reflects, as we saw in Chapter 4, that a substantial proportion of women took unpaid maternity leave in addition to paid leave. The percentages in Figure 5.17 will differ somewhat from the figures in Chapter 4 since they refer to the timing of return to work rather than (as in Chapter 4) whether unpaid leave was taken. There will be some fluctuation around the 26 weeks’ and 42 weeks’ statutory leave durations where women take different amounts of maternity leave before the birth and where women may be including other types of leave (such as annual leave or sick leave) in their time away from work. Turning to Figure 5.17, we see that 31 per cent of women returned or intended to return to work between 30 and 42 weeks after the birth, and a further 13 per cent returned or intended to return more than 42 weeks after the birth but within two years. Leave in excess of 42 weeks is more than the combined 26 weeks of paid maternity leave and 16 weeks of unpaid maternity leave. These longer periods of leave may include some annual leave, periods of parental leave or a career break arranged with the consent of the employer.

A substantial minority of women – 13 per cent of the mothers who had worked during pregnancy – had returned to work less than 23 weeks after the birth of their child. In some cases the early return may have been due to the use of a greater proportion of maternity leave before the birth. Later in this section we will examine the characteristics of the women and their jobs that were associated with returning to work at different stages.

Figure 5.18 shows the cumulative proportion of women who had returned at each stage (for those women who had returned to work by the time of the survey). We can clearly see the steep rise in the numbers returning to work after about 22 weeks. Over half of the women had returned to work by 29 weeks after the birth and 95 per cent had returned within a year of the birth.

**Figure 5.18: Return to work by number of weeks after the birth**



Base: Women who had been in employment during pregnancy and who had returned to work at the time of the survey (N=1,132).

In the remainder of this section we look at how characteristics of the women themselves (such as age and education), of their family life and of their job during pregnancy affected their decisions regarding their return to the labour market.<sup>25</sup>

### 5.4.1 Timing of Return to Work – Model

The base for our analysis was those women who had worked during pregnancy. We distinguished five groups of women:

1. Those returning to work early, i.e. from 1 to 22 weeks after the birth of their child (13 per cent of mothers who had worked during pregnancy).
2. Those returning to work at approximately the end of paid maternity leave, i.e. from 23 to 29 weeks (35 per cent).
3. Those returning to work after the end of paid maternity leave and up to the end of statutory unpaid maternity leave, i.e. from 30 to 42 weeks (31 per cent).
4. Those returning to work between 43 weeks and two years after the birth of their child (13 per cent).
5. Those not intending to return to work within two years of the birth of their child (7 per cent).

We began by examining the impact of characteristics of women and their families on the likelihood that a woman will be found in one of these five groups. We then examined the impact of job characteristics on the timing of return to work. The results are based on a model that simultaneously controlled for characteristics of the mother and her family and characteristics of her job during pregnancy. As the model is large, it is split into two tables (Tables 5.1 and 5.2) to facilitate discussion of the findings. Only statistically significant effects are shown in the tables.

We took as the reference group those mothers who had returned, or intended to return, to work between 30 and 42 weeks after the birth of their child – this timing corresponds roughly to the length of paid plus unpaid maternity

<sup>25</sup> Women who would have liked to work but who were unable to find a suitable job were classified on the basis of time elapsed since the birth. If maternity leave was taken, they were assumed to have begun to seek work at the end of maternity leave.

leave. We asked to what extent characteristics such as age and education affected the likelihood of a women returning to work earlier, later or not within two years when compared with this group. We saw above that the timing of women's return to work is not linear; rather, it is shaped by social policy in terms of the legislation on maternity leave entitlement and economic supports in the form of maternity benefit provided to mothers. It is also likely to be affected by the availability of childcare, the earnings potential of women relative to the cost of childcare, the availability of work that enables a balancing of work and family commitments, receipt of supplementary payments from the employer during maternity leave and other sources of income in the household. Mothers who rely on their own income without the contribution of a partner, for instance, are likely to have difficulty in affording to remain outside the labour market for a period of unpaid maternity leave.

#### **5.4.2 Return to Work and Personal/Family Characteristics**

Table 5.1 shows the impact of the mother's personal characteristics and those of her family on the timing of her return to work, with characteristics of the job (as shown in Table 5.2) controlled. The figures can be interpreted as the odds of returning to work at a given stage rather than of returning after paid and unpaid leave combined (the reference stage). Odds greater than one indicate a greater likelihood and odds lower than one indicate a lower likelihood. For instance, we see in Table 5.1 that lone mothers were three times as likely as married mothers to return to work early and that where there are three or more adults in the household (perhaps indicating a greater level of help available with housework and childcare) the mother was only about 39 per cent as likely (odds = 0.39) to return to work later than 42 weeks.

Once we controlled for characteristics of the job during pregnancy, a woman's age had no remaining impact on the timing of her return to work, and there was no difference between married and cohabiting mothers. Lone mothers, however, were more likely than married mothers to return to work early (before 23 weeks).

Women were more likely to return to work early (before 23 weeks) or after the period of paid leave (23 to 29 weeks) following the birth of their second or subsequent child than after the birth of their first child. This may reflect the fact that these mothers already had experience of balancing work and family commitments, as all of them had worked while also caring for their older child(ren). Following the birth of the third or subsequent child, mothers were more likely to plan to remain outside the labour force for at least two years. This may well reflect a response to the increasing cost of childcare for three or more children.

Where there are three or more adults in the household, as noted above, mothers were less likely to return to work late (after 42 weeks). This may reflect the availability of help with childcare and housework.

Non-Irish mothers were more likely to return to work relatively early (before 30 weeks).

Low levels of education had a strong impact: mothers with less than full second-level education were more likely than mothers with a degree (the reference category for education) to either return to work relatively early (before 30 weeks) or to remain outside the labour market for more than two years. This non-linear impact of education on labour market participation is likely to reflect two processes. One is that their jobs may be less well paid, which makes taking a period of unpaid leave more difficult. The second is the trade-off between work and childcare or work and social welfare. For mothers with lower earnings, their earnings are less likely to cover the costs of childcare so that returning to work would leave them no better off financially. Similarly, the loss of social welfare income, combined with the costs of childcare, may make it difficult for mothers with lower earnings potential to return to the labour market.

The salience of financial pressures in women's timing of their return to work is evident in the impact of partner characteristics. Women with an unemployed partner were more likely to return before 30 weeks, without taking any unpaid leave.

The differences between urban and rural location did not follow any clear pattern and only affected returning late (43 weeks to two years) compared with returning after combined paid and unpaid maternity leave. We might have expected at the outset that women living in larger urban areas would have an easier time finding a job that offered the flexibility needed to balance work and family life, but this is not evident here. In fact, women living in Dublin were

more likely than rural women to return to work relatively late (43 weeks to two years). The same pattern is found for women living in small towns (more likely to return between 43 weeks and two years), but not for mothers living in other cities.

**Table 5.1: Odds of returning to work at each stage rather than after paid and unpaid maternity leave by personal/family characteristics**

		Early return: 1–22 weeks	After paid leave: 23–29 weeks	After paid and unpaid leave: 30–42 weeks	Late return: 43 weeks – 2 years	Non-return: not within 2 years
Marital status (Ref=married)	Cohabiting	n.s.	n.s.	1.00	n.s.	n.s.
	Lone parent	3.04	n.s.	1.00	n.s.	n.s.
Birth order (Ref=first)	Second child	1.83	1.36	1.00	n.s.	n.s.
	Third or higher child	2.70	1.71	1.00	n.s.	3.17
Number adults in household (Ref=1–2 adults)	3 or more	n.s.	n.s.	1.00	0.39	n.s.
Nationality (Ref=Irish)	Non-Irish	1.87	1.62	1.00	n.s.	n.s.
Education (Ref=degree)	Low second level or less	2.65	2.28	1.00	n.s.	6.70
	Higher second level	n.s.	n.s.	1.00	n.s.	n.s.
	Third level, non-degree	n.s.	n.s.	1.00	n.s.	n.s.
Partner current status (Ref=partner employed)	Partner unemployed	n.s.	1.98	1.00	n.s.	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.	1.00	1.68	n.s.
	Other city	n.s.	n.s.	1.00	n.s.	n.s.
	Town	n.s.	n.s.	1.00	1.73	n.s.

Base: Women who had been in employment during pregnancy (N=1,769).

Note: Job characteristics are controlled in Table 5.2. See Appendix A, Table A5.2 for the full model. Nagelkerke pseudo R-squared = .382. 'n.s.' indicates not statistically significant; only statistically significant ( $p \leq 0.05$ ) effects are shown. 'Ref' means reference category.

We checked whether a number of other characteristics of the mother and her family had an impact on the timing of her return to work. A woman's personal health and disability status did not affect the timing of her return to work, with other characteristics controlled. It should be noted that these mothers were a somewhat select group in terms of health status as they all had worked during pregnancy. We also checked whether the social class of a partner's occupation was important, but when we controlled for partner's unemployment and characteristics of the woman's job during pregnancy, partner's occupation had no significant effect.

### 5.4.3 Return to Work and Employment Characteristics

In this section we examine whether aspects of the job during pregnancy, as well as the woman's own and her partner's characteristics, had an impact on the timing of the return to work after childbirth.

Based on previous research and on results reported in earlier chapters, we would expect to see the following outcomes:

- Size of organisation: research in Sweden and the UK (La Valle et al., 2008; Jonsson and Mills, 2001) found that women who worked in large organisations were more likely to return to work after childbirth.

- Sector: research in the UK and elsewhere in Europe has found that women who worked in the public sector were more likely to return to work after childbirth (La Valle et al., 2008; Jonsson and Mills, 2001; Saurel-Cubizolles et al., 1999). In general, public sector employees are better protected than private sector employees (e.g. given better leave packages) and may have more family-friendly work arrangements available.
- Gender composition of organisation: male-dominated workplaces would be expected to have fewer work–life balance arrangements in place.
- Self-employment: as self-employed women are less likely to have access to paid leave, we would expect them to return to work sooner than employees.
- Part-time work during pregnancy: this indicates prior flexibility on the part of the employer, which is likely to ease the transition back into employment; however, it also suggests prior family commitments. Previous research has found that women who worked part time during their pregnancy were more likely to be employed one year after childbirth (Smeaton and Marsh, 2006).
- Flexible work arrangements: both the Equal Opportunities Commission’s survey (Adams et al., 2005) and the Maternity Rights Survey (La Valle et al., 2008) in the UK highlighted the importance of flexible work arrangements in influencing a mother’s decision to return to work after childbirth.
- Temporary or casual contracts: as these terms of employment are indicative of a reduced level of commitment between the employer and the employee, women on temporary or casual contracts would be expected to be less likely to return to work after childbirth (e.g. Saurel-Cubizolles et al., 1999).
- Job tenure: a longer job tenure would be expected to indicate a greater level of mutual commitment between the employer and the employee and therefore to be associated with a return to work after childbirth. The impact on the timing of that return is less clear: women may either return early because they feel a sense of commitment to the job or, alternatively, a greater sense of security of employment may allow women to take a longer period of leave.

We examined both the decision to return to work and then the timing of that return as some aspects of the job that we would expect to be positively associated with return to work may also be associated with a longer period of maternity leave, such as the level of employment protection provided.

A number of characteristics of a woman’s job during pregnancy were found to have an impact on the timing of her return to work, controlling for her own and her household’s characteristics, and these are shown in Table 5.2. Self-employment during pregnancy has a particularly strong impact: self-employed women were nearly five times as likely as employees to return to work early. This is consistent with the finding earlier in the report that self-employed women were less likely to have access to paid maternity leave.

Women who worked on temporary or casual contracts during their pregnancy differed in a number of respects from women who were permanent employees. Like the self-employed, they were more likely than permanent employees to return to work early, although the pattern of early return was not as strong as it was for the self-employed. They were also more likely than permanent employees to return between 23 and 29 weeks – roughly coinciding with the end of paid maternity leave. And they were also over five times as likely as permanent employees to intend to remain outside the labour force for two years or more.

There were no differences based on the occupation of the mother once we controlled for education, earnings and other job characteristics. There were, however, some differences by sector. Women working in education were very unlikely to remain outside the labour market. The hours and breaks available in this sector may make it easier for women to achieve a balance between work and family. Women working in financial and other business services such as accountancy, insurance and legal services were somewhat more likely to take a longer break (more than 42 weeks). Women working in the retail and wholesale sector were more likely to return to work early (before 23 weeks or between 23 and 29 weeks).

**Table 5.2: Odds of returning to work at each stage rather than after paid and unpaid maternity leave by characteristics of the job during pregnancy**

		Early return: 1–22 weeks	After paid leave: 23–29 weeks	After paid and unpaid leave: 30–42 weeks	Late return: 43 weeks –2 years	Non-return: not within 2 years
Contract status (Ref=permanent)	Temporary/casual	2.83	1.59	1.00	n.s.	5.30
	Self-employed	4.96	n.s.	1.00	n.s.	n.s.
Industry during pregnancy (Ref=other private sector)	Education	n.s.	n.s.	1.00	n.s.	0.05
	Other public sector	n.s.	n.s.	1.00	n.s.	n.s.
	Finance etc.	n.s.	n.s.	1.00	1.75	n.s.
	Retail and wholesale	2.29	1.76	1.00	n.s.	n.s.
Number of employees (Ref=250+)	1–9	4.47	2.93	1.00	1.96	2.52
	10–19	2.44	2.32	1.00	n.s.	n.s.
	20–49	3.75	2.05	1.00	n.s.	n.s.
	50–99	3.05	2.07	1.00	n.s.	n.s.
	100–249	n.s.	n.s.	1.00	n.s.	n.s.
Job tenure (log)		0.80	n.s.	1.00	n.s.	n.s.
Hourly income (log)		n.s.	0.65	1.00	n.s.	n.s.
Gender composition (Ref=roughly even)	Almost all female	0.52	n.s.	1.00	n.s.	n.s.
	About 75% female	n.s.	n.s.	1.00	n.s.	n.s.
	Almost all male	n.s.	n.s.	1.00	1.81	n.s.
Flexible arrangements (Ref=none)	Work from home	n.s.	1.67	1.00	n.s.	n.s.
	Job-share	n.s.	n.s.	1.00	2.20	2.23
Job change (Ref=stayed with pre-birth employer)	Changed job	1.63	n.s.	1.00	n.s.	0.23

Base: Women who had been in employment during pregnancy (N=1,769).

Note: The women's personal characteristics are controlled in Table 5.1. See Appendix A, Table A5.2 for the full model. Nagelkerke pseudo R-squared = .382. 'n.s.' indicates not statistically significant; only statistically significant ( $p \leq 0.05$ ) effects are shown. 'Ref' means reference category.

The figures by size of organisation may be capturing some of the differences between women who work in the public and private sectors, as most public sector employment is in large organisations. Women working in the largest organisations (100 or more employees) were less likely to return to work early (before 30 weeks), which may in itself be indicative of greater provision of benefits. Women working in the smallest organisations (1 to 9 employees) were more likely to intend to remain outside the labour market for two years or more and were also more likely to return to work later (43 weeks to 2 years).

Job tenure and earnings are also important. Women who worked for longer periods in the same job were less likely to return to work early (before 23 weeks). This could be because they felt secure enough to take their full statutory entitlement of maternity leave. It could also be because women tend to stay longer in workplaces that facilitate work–family balance.

Women with higher earnings were less likely to return to work after the period of paid leave without taking any unpaid leave. Their higher incomes while at work were clearly important in enabling them to afford a period of unpaid maternity leave.

The percentage of the workforce that is female did not have quite the impact expected. We anticipated that female-dominated workplaces would offer a degree of flexibility that would make it more likely that women employees would return to work, but the percentage of female staff had no impact on whether mothers returned to work. However, it did affect the timing of their return: workplaces where almost all the employees are women were associated with a reduced likelihood of very early return (before 23 weeks) and those with very few women (one-quarter or less) were associated with a late return (after 42 weeks). These findings suggest that something about the way work is structured in male-dominated workplaces may make it difficult to balance work and family responsibilities when the child is very young.

A number of characteristics of the job had no significant impact when other factors were controlled. These included hours worked during the pregnancy and the woman's occupation. While part-time work clearly offers benefits in terms of balancing work and family commitments, and we saw that many women moved from full-time to part-time hours after the birth of their child, working part time before the birth did not appear to make a difference to the timing of women's return to employment.

Table 5.2 also shows the impact of flexible working arrangements on the timing of a mother's return to work. The availability of flexible arrangements in the job during pregnancy had less impact than we expected. The flexibility to do some work from home was associated with returning between 23 and 29 weeks after the birth (after paid leave, without taking any unpaid leave). It is likely that the flexibility to manage the hours worked afforded by this option reduced the need to take any unpaid leave. Somewhat paradoxically, the availability of job-sharing was associated with returning to work later (after 42 weeks) or not returning at all within two years. It may be that some unmeasured characteristics of the work in organisations that permit job-sharing led to this outcome. The availability of flexible hours, term-time working, part-time work and time off for family reasons had no impact on the timing of a mother's return to work, or on whether she returned at all.

The final significant association in Table 5.2 is for job change. We might have anticipated that women who changed to a different job after the birth would be likely to return to work later, but this did not appear to be the case. Women who returned (or intended to return) to a different employer were in fact 1.6 times as likely to return to work early and only about one-quarter as likely to intend to remain outside the labour force for two years or more. The latter relationship suggests that when women answered that they intended to return to a different employer, they had a definite job and a definite (and sooner) starting date in mind. Some of the women who intended to return to work more than two years after the birth may well end up working in a different job, but that was not their intention at the time of the survey.

Other characteristics of the job during pregnancy had less of an impact than we expected. The perceived supportiveness of the employer and the presence of an equality policy were not significant. The extent of work-family conflict in the job during pregnancy had no impact on the timing of a mother's return to work, with other factors controlled.

## 5.5 Summary

In this chapter we examined women's reasons for changing their job or not returning to work after childbirth. We compared the jobs women held during pregnancy with their jobs after the birth and we examined factors affecting the timing of their return to work. At the time of the survey about half of the mothers had worked since the birth of their youngest child and, of the two-thirds of mothers who had worked during pregnancy, 71 per cent had returned to work and a further 22 per cent had definite plans to return to work within two years of the birth.

We examined the reasons why women chose not to go back to work after the birth of their child. The reason given most often was that the mother wanted to care for her child(ren) herself. However, difficulties with the cost of childcare also emerged.

While the majority of women returned to the same employer, some did change employer following the birth. The reasons for this were largely to do with anticipated difficulties in balancing work and family life. Women stated that unsuitable hours, a lack of employer flexibility, the challenges of commuting to work and/or the desire for a less pressurised work environment influenced their decision to change employer. The economic recession also appeared to play a part, with many women having changed or intending to change jobs because they were made redundant.

When we examined the characteristics of the job, comparing the job during and the job after pregnancy, we found a clear reduction in the numbers of hours worked and a substantial increase in part-time hours after the birth of the child. There was little difference in occupational category before and after the birth as most women had returned to the same employer. Women who had worked during pregnancy in associate professional and technical occupations were most likely to have changed occupation (12 per cent) and those who had worked in manufacturing and construction sectors were most likely to have changed industrial sector (13 per cent). Moreover, most women experienced no change in their levels of responsibility, control and opportunity at work. Of those who did, the biggest change was in opportunities for training and promotion, with 21 to 24 per cent of the women feeling they had fewer opportunities after the birth (with higher percentages among women who had reduced their hours worked).

There was little difference in the availability of flexible working arrangements in the job before and after the birth. The availability of part-time working changed more than the other flexible working practices (from 46 per cent before to 55 per cent after the birth), confirming the importance of part-time work to women seeking a balance between work and family life.


The timing of women's return to work was strongly shaped by maternity leave entitlements, with the biggest group (35 per cent of women who had worked during pregnancy) returning to work around the end of the period of paid maternity leave and the second largest group (31 per cent) returning within the time bounded by the length of statutory paid and unpaid maternity leave.

Employment during pregnancy strongly influenced the likelihood of women returning to employment after the birth. We found that over nine out of ten mothers who had been in employment during pregnancy had returned or planned to return to work within two years. About two-thirds of the women who had worked during pregnancy had returned to the same employer and a further 14 per cent intended to return to the same employer.

The decision to return to work and the timing of that return were also shaped by the woman's individual and family circumstances and by the characteristics of the job during pregnancy. Low education levels, having three or more children, having been in a temporary/casual job or having worked for a small organisation during pregnancy were all characteristics associated with remaining outside the labour market. Financial insecurity (such as being a lone parent), job insecurity (such as shorter job tenure or being a temporary/casual worker during pregnancy) and self-employment tended to be associated with returning early (before the end of the twenty-six weeks of statutory paid maternity leave). As we saw in Chapter 4, self-employed mothers were more likely to lack access to paid maternity leave, so financial pressures undoubtedly played a role here.

In a number of respects, the same characteristics were associated with remaining outside the labour market and early (before the end of the period of paid maternity leave) return to work. The characteristics of these mothers suggest that both early return and remaining outside the labour force may be capturing an element of pressure or constraints on choice. For instance, women who had a temporary contract or casual working arrangement during pregnancy, women with lower levels of education and women with three or more children were more likely either to return early to work or to remain outside the labour market.



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Chapter 6:  
Conclusion and  
Policy Implications

## 6.1 Introduction

The great majority of women of childbearing age are active in the labour market, so the issue of pregnancy in the workplace is directly relevant to a large proportion of Irish women at some point in their working lives.<sup>26</sup> Our study found that two-thirds of mothers (of children born between July 2007 and June 2009 and aged under two years and three months at the time of the survey) were employed during their pregnancy.<sup>27</sup> This figure rose to 81 per cent for those expecting their first child.

The treatment of women at work during pregnancy is strongly regulated in Ireland, as elsewhere in the EU, through equality legislation, unfair dismissal legislation, health and safety regulations and the Maternity Protection Acts. Women's return to the workplace following pregnancy is also regulated by the Maternity Protection Acts, which specify the length of leave women are entitled to and the conditions that must be met on their return to employment.

Despite this large body of legislation, very little is known about women's experiences in the workplace during pregnancy in Ireland. This report seeks to fill the gap in knowledge around this important issue using the first nationally representative study of women in employment during pregnancy: a survey of 2,300 women who gave birth between July 2007 and June 2009. In this concluding chapter we draw together the key findings from our analyses of the survey data under a number of headings that highlight the policy implications of the results.

## 6.2 Unfair Treatment in the Workplace

Unfavourable treatment in the workplace has both immediate and longer term consequences for women. The immediate impact can include financial loss and loss of other benefits and entitlements, psychological stress, and poor health outcomes for mothers and their babies. Longer term consequences can include exclusion from the labour force, loss of status, reductions in opportunities and earnings, and conflict between work and family life.

Analysis of pregnancy-related employment discrimination cases found that 54 such cases were decided in the Equality Tribunal and the Labour Court under equality legislation between 1999 and 2008 (Banks and Russell, 2011). However, there are strong disincentives to taking such a case, given the often intense time pressures on women who are pregnant or have a very young child and the anticipated stress in taking such action. It is therefore likely that these cases represent only a small fraction of such instances of unfavourable treatment in the workplace.

While the majority of women in this survey said that their employer was supportive during pregnancy (71 per cent) and most were satisfied with their treatment during pregnancy (63 per cent), a significant minority of women experienced problems in the workplace around their pregnancy and maternity leave.

- Up to 30 per cent of women reported unfair treatment during pregnancy.
- 21 per cent of women were dissatisfied with their treatment at work during pregnancy.
- 32 per cent of women experienced problems around maternity leave.

Under Irish law, discrimination occurs when a person or group is treated less favourably than others on the basis of gender, civil status (formerly marital status), family status, age, disability, race/nationality, sexual orientation, religious belief and/or membership of the Traveller community. Unfair treatment on the basis of pregnancy falls under the gender and family status grounds.

The information collected in the survey relates to women's self-reports of whether they were treated unfairly at work because of their pregnancy. While the experiences they described may contravene the spirit of the equality legislation and in some cases may contravene maternity protection legislation, we cannot, on the basis of the survey information alone, say that these cases would constitute discrimination in the courts. Nevertheless, these data provide us with a level of information on the treatment of pregnant women at work that is nationally representative and that cannot be derived from the results of legal actions which are pursued in only a fraction of cases.

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26 In Q1 2009, 77 per cent of Irish women aged 25 to 34 years were in the labour market, with somewhat lower rates among those aged 20 to 25 years (68 per cent) and 35 to 44 years (69 per cent).

27 This is almost identical to the figure in the British Millennium Cohort Study (Dex and Ward, 2007), which found that 68 per cent of women were in employment during pregnancy with cohort child.

The type of unfair treatment experienced included job loss (4.8 per cent of mothers who were in employment during pregnancy); other forms of financial loss such as loss of salary, bonus and/or promotion (10 per cent); and other tangible disadvantage such as being given unsuitable work or workloads (12 per cent), denial of training opportunities, shift hours being changed without agreement and being discouraged from attending antenatal appointments during work time. Some women experienced less tangible forms of unfavourable treatment, which were nonetheless potentially distressing, such as unpleasant comments from managers/co-workers (8 per cent), unfair criticism about performance (4 per cent) and threats of redundancy/job loss (1 per cent).

The risk of unfavourable treatment was higher in the retail and wholesale sector, in organisations with fewer flexible work arrangements, in organisations without a formal equality policy and among women in skilled manual (craft) positions. Unfair treatment was less common in small organisations (1 to 9 employees). In terms of individual characteristics, younger women and women expecting their second child were more likely to have experienced unfair treatment. Unfair treatment was also more likely to be reported by women who experienced high levels of work–family conflict during pregnancy.

### Policy implications of these findings

- Flexible working arrangements and an explicit equality policy are important components of a family-friendly workplace and their availability contributes to ensuring equal treatment of women at work.
- There is a need to target information on entitlements during pregnancy to the retail and wholesale sector.
- Information on employment rights needs to be targeted at younger women.

## 6.3 Health and Safety of Pregnant Women in the Workplace

Most women who were in employment during pregnancy reported that their health was not negatively affected by their job (87 per cent), but 13 per cent of women stated that their physical or mental health during pregnancy had been adversely affected either 'a great deal' or 'quite a bit' by their job. Among this latter group, stress or anxiety was the most commonly reported problem, affecting just under half of the women. Other common negative health effects included other mental health problems (26 per cent) and fatigue/exhaustion (24 per cent).

Issues around stress and fatigue also arose in the assessment of unfair treatment among women who said that they had been given unsuitable work or workloads during pregnancy. This situation was reported by 12 per cent of women who had been employed during pregnancy and included issues such as standing for long periods, insufficient rest breaks, long hours, travel requirements for work and working night shifts in late pregnancy. The medical literature indicates that factors such as long working hours, shift work and physical work demands are associated with adverse outcomes such as low birthweight. Yet, as was noted in Chapter 3, these common health risks are not highlighted in Irish health and safety regulations for pregnant employees, although they feature prominently in EU legislation and advice to employers.

Negative health effects attributed by women to their job were also strongly associated with unfair treatment during pregnancy: 46 per cent of women reporting two or more forms of unfair treatment stated that their health had been adversely affected by their work during pregnancy, compared with 4 per cent of women reporting no unfair treatment. The relationship of cause and effect is uncertain here: unfair treatment may lead to health problems through increased stress or poor working conditions, or perhaps an unsupportive working environment leads to both discrimination and poor health.

Again, flexible working practices appear to reduce the occurrence of negative health effects: 18 per cent of women in workplaces with no flexible work practices reported health problems, compared with 11 per cent of women in workplaces that allowed time off for family reasons. However, when we controlled for treatment at work during pregnancy (supportiveness of employer and unfair treatment), the availability of time off for family reasons was no longer significantly associated with health risks. This suggests that informal support from the employer may be fulfilling the same type of function for workers as a formal availability of time off for family reasons.

Only 3 per cent of women who experienced low levels of work–family conflict during pregnancy reported negative health impacts, compared with 38 per cent of women who experienced high levels of work–family conflict.

### Policy implications of these findings

- Attention should be focused on the implementation of health and safety legislation in Irish workplaces, in particular the requirements to carry out a risk assessment for pregnant workers and to put in place corrective measures.
- The focus of the health and safety regulations should be broadened to include the more common health risks for pregnant workers such as fatigue relating to working time (long hours, shift work, night work), occupational stress and long periods of standing or sitting.
- The development of more accessible, and possibly sector-specific, health and safety information is likely to be beneficial for both employers and employees.
- The availability of flexible working arrangements is an important component of a family-friendly workplace and contributes to the good health of women at work.

## 6.4 Crisis Pregnancy

This study adds to the available evidence around crisis pregnancy by providing additional information on the link between experiences at work and a pregnancy that is emotionally traumatic or represents a personal crisis for the mother.

Overall, 33 per cent of women reported such a crisis pregnancy and 27 per cent of working women who experienced a crisis pregnancy (7.7 per cent of all women in employment during pregnancy) attributed this (at least in part) to work-related issues. This was because of conflict with work commitments and plans and/or the reaction of their employer or co-workers to the pregnancy (or the fear of that reaction). However, the proportion experiencing a crisis or emotional trauma was *lower* among women who were in employment during pregnancy, which may well be due to selection effects or to the fact that fewer women in employment during pregnancy were under the age of twenty-five.

Financial issues also featured prominently, with 49 per cent citing this as a reason for reporting a crisis pregnancy and 14 per cent identifying this as the most important reason. Financial considerations are likely to be closely linked to the employment situation of the woman and, if applicable, her partner, and the findings highlight the impact of the recession that began during the period of the study.

There was a strong link between crisis pregnancy and unfair treatment at work during pregnancy: over half of the women who had experienced two or more forms of unfair treatment while employed during pregnancy reported a crisis pregnancy. While these results are significant they are not necessarily causal, as we have not controlled for other possible confounding factors and have included all types of crisis (the majority of women did not give job-related responses). Nevertheless, the findings suggest that flexibility at work, especially flexible hours, and careful protection of the rights of pregnant workers may well assist women to cope with difficulties that arise in relation to pregnancy.

### Policy implications of these findings

- The availability of flexible working arrangements, particularly flexible hours, is important to the well-being of women workers and is associated with a lower incidence of crisis pregnancy.
- Unfair treatment at work during pregnancy is associated with a higher incidence of crisis pregnancy.
- A number of distinct groups of women face a higher risk of crisis pregnancy: younger women, non-married women, women expecting their third or subsequent child and women with a disability. These groups may require different support strategies led by bodies such as the HSE Crisis Pregnancy Programme.

## 6.5 Maternity Leave

This study provides important new data on the distribution and take-up of maternity leave, parental leave and employer additions to maternity leave entitlements. The lack of representative data on these issues has inhibited research on the effectiveness of State and employer policies in Ireland up to this point.

Overall, a very high proportion of women who were in employment during pregnancy took paid maternity leave and received maternity benefit (92 per cent). This rate is significantly higher than the percentage found in recent UK studies; where, for example, Dex and Ward (2007) found that 81 per cent of mothers who were in a job while pregnant had taken maternity leave. The mothers in the present study who did not take paid maternity leave mainly comprised those women who were self-employed or working in temporary/casual jobs during pregnancy. Women who worked less than twenty hours per week during pregnancy were also less likely to have taken paid leave.

Take-up of unpaid leave, in addition to paid leave, was significantly lower and was more differentiated by women's occupational and educational background. About two in five mothers took unpaid maternity leave, most of them taking it in addition to paid leave. Taking combined paid and unpaid leave was clearly related to the ability of the woman and her family to afford it, and take-up rates were lower among women with lower earnings during pregnancy, women who worked part time, women with lower levels of education and women with shorter job tenures. The availability of economic and other supports from a partner was also important, with lower take-up rates among lone mothers or those whose partner was unemployed or in a low-skilled occupation. There were also some differences by characteristics of the employing organisation: women working for larger organisations (including most public sector jobs) were more likely to take unpaid as well as paid leave.

Overall, 48 per cent of women received a supplement to maternity benefit from their employer. Receipt of such additional payments was more likely among women who were already more financially secure: women with higher hourly earnings during pregnancy, women with degree-level education, married or cohabiting women and women whose partner was at work. Receipt of supplementary payments from the employer was also higher among women who had worked in the public sector or in the financial and other business services sector and for larger employers.

Just under one-third of women who had been employees during pregnancy experienced problems around maternity leave. The most commonly experienced difficulties involved the length of the period of leave, i.e. being pressurised into leaving work earlier or returning to work sooner than desired. Other problems included inadequate cover while on leave (8 per cent), being contacted too often on work-related business while on leave (5 per cent), being sidelined for promotion (5 per cent), and disputes around the content of the job to which the woman would return (4 per cent). A number of the problems encountered by the survey respondents were likely to have constituted unfavourable treatment due to pregnancy and/or involved a contravention of women's entitlements under maternity protection legislation, although it is not possible to say what proportion of the problems fall into this category on the basis of the survey information alone.

Younger women and women who had difficulty balancing work and family commitments during pregnancy were more likely to experience problems related to maternity leave. These problems were less common in workplaces that had an equality policy or where job-sharing was available. Women who perceived the employer as supportive during pregnancy were also less likely to report problems related to maternity leave. Counter to expectations, women with higher levels of education and Irish nationals were more likely to report problems than women with lower levels of education or non-Irish mothers. This may be because a greater awareness of entitlements among Irish nationals and highly educated women helped them to identify problems more readily.

### Policy implications of these findings

- The preferred option, among mothers who can afford it, is to take a longer period of maternity leave than the six months of statutory paid leave.
- Measures should be taken to increase awareness of entitlements around maternity leave and should target employers, women with lower levels of education and non-Irish nationals in particular.
- The low take-up of maternity benefits among the self-employed and those on temporary contracts needs further examination in order to devise appropriate strategies to improve income protection during maternity leave for these groups. Such strategies may include providing the self-employed with more information on the benefits of compliance and the risks of non-coverage.

## 6.6 Parental Leave

Take-up of parental leave was low among women in the survey; only 18 per cent of women who had returned to employment had requested any parental leave. This leave can be taken at any point until the child reaches eight years of age, so more women are likely to avail of it over the whole period of eligibility. Nevertheless, these figures indicate that relatively few women are making use of this leave in the first two years of their child's life.

Problems with employer support for parental leave were revealed by the finding that 10 per cent of women who applied for parental leave were refused, with a further 9 per cent not being granted parental leave in the form they requested.

Like unpaid maternity leave, take-up of parental leave is connected to women's resources and security: women with a partner who is unemployed or who has lower earnings than themselves were less likely to have requested parental leave. The sector in which the woman worked was also important, with higher take-up rates in the public sector (outside of education).

### Policy implications of these findings

- The preferred option, among mothers who can afford it, is to take a period of parental leave in the first two years of the child's life.
- There is a need to create greater awareness among employers in the private sector of the entitlements to parental leave.
- Further investigation is needed into the take-up of parental leave and the reasons for employer refusal to grant leave or refusal to grant leave in the form requested.

## 6.7 Return to Work Following Pregnancy

The study analysed in detail women's return to the labour force for those women who had been in employment during pregnancy. The majority (71 per cent) of women had returned to employment by the time of the survey, with 66 per cent returning to the same employer and 4 per cent returning to work with a different employer. Turning to the 29 per cent who had not returned to work, 14 per cent intended to return to the same employer and 8 per cent intended to seek a different job. Only 7 per cent of the mothers who had been in employment during pregnancy had no plans to return to work within two years.

Previous research on women's transitions in and out of the workforce around childbirth has highlighted a complex and multiple range of influences (Russell et al., 2002; Fine-Davies et al., 2005; see review in Russell and Banks, 2011). Women's personal preferences interact with a range of opportunities and constraints that operate at the individual, organisational and policy levels. The international literature also reflects the conditions women face on their return to employment and suggests that breaks around childbirth lead to a deterioration in occupational position, pay and other working conditions. These issues are addressed in this report.

### 6.7.1 Timing of Return

Of the women who had been in employment during pregnancy, only 7 per cent had no plans to return to work within two years. The biggest group returned at about the end of the paid maternity leave period (26 weeks). There was some fluctuation around the 26-week mark as some women had annual leave to take as well and women varied in the number of weeks taken before the birth. Allowing for this, we found that 35 per cent of mothers returned between 23 and 29 weeks after the birth. Another large group (31 per cent) returned or intended to return between 30 and 42 weeks after the birth – the period bounded by the term of statutory paid plus statutory unpaid maternity leave. Thirteen per cent of mothers returned or intended to return 43 or more weeks after the birth. These mothers may have been taking a period of parental leave after their maternity leave, or they may have been taking some annual leave or a career break organised with their employer. About one mother in eight took a shorter period than the statutory entitlement of 26 weeks' paid maternity leave.

Over half of the women had returned to employment within 30 weeks of the birth. This is a relatively short break in employment by international standards, although it is close to British figures.<sup>28</sup> There is a growing body of evidence that individualised infant care, usually by parents, for the first year of the child's life is most beneficial from a child development perspective.<sup>29</sup> A period of just over one year of paid plus unpaid leave (including parental leave) is now available to women in Ireland, however, extension of *paid* leave to cover this period is recommended by UNICEF (2008), Start Strong (2009), NESF (2005) and NWCI (2005). For example, UNICEF states:

... the interests of the very young are best served by policies that make it easier for at least one parent to care for the child during the first 12 months of life. Accordingly, the value of the first benchmark – parental leave entitlement – has been set at a level of one year's leave at 50 per cent of earnings (subject to a floor for low-income parents and a ceiling for the more affluent).

### 6.7.2 Factors Influencing Women's Return to Work

As mentioned above, the majority of women who had been in employment during pregnancy had returned to employment by the time of the survey, but 7 per cent had left the labour market or, at least, had no plans to return within two years. Among women who had left the labour market, both push and pull factors were evident in their decisions. The most commonly cited reason was women's preference to look after their child(ren) themselves (about three-quarters), followed very closely by the barrier of high childcare costs and the lack of a financial return, which is likely to arise from a combination of childcare costs, earnings potential and, in some cases, loss of welfare benefits.

Low earnings potential, having three or more children, being a temporary/casual employee or working in a small organisation during pregnancy were found to be associated with a decision to remain outside the labour market. Women with lower levels of education were significantly less likely to have returned to work.

Financial constraints and job insecurity also influenced the pattern of return. Women who returned to employment early (before 23 weeks) and women who remained outside the labour market were similar in many respects. Both of these patterns were more common among women with lower levels of education, women working in temporary/casual jobs and those on leave with their third or subsequent child.

Another group of women tended to return to employment relatively early (before 29 weeks) but did not show an increased tendency to drop out of the labour force. This pattern was characteristic of lone mothers, women who had given birth to their second child, non-Irish mothers, women with shorter job tenure, those with an unemployed partner and those experiencing financial hardship during maternity leave. The self-employed also fit this pattern. This suggests that financial pressures, including more difficult access to maternity benefits, may be driving early return to work for these women.

Other job characteristics were influential. Availability of working from home was associated with returning after paid leave, suggesting that the flexibility afforded by this arrangement allows women to achieve a balance between work and family life without taking any unpaid leave. Job-sharing was, somewhat unexpectedly, associated with a later (more than 42 weeks) return or non-return to work. This may reflect unmeasured characteristics of the job, such as routinised work or an element of impersonality in the workplace.

Unfair treatment during pregnancy, employer supportiveness and the presence of an equality policy were not significantly linked to the return to employment, when other factors were controlled.

There were no overall differences between those working in the public and private sector, but those in the education sector had a very low likelihood of leaving the labour market. Those working in financial and other business services were more likely to return relatively late (after 42 weeks), while those working in the retail and wholesale sector tended to return early (less than 30 weeks after the birth).

28 In the UK, 76 per cent of women who went on maternity leave were back in work within six months of the birth, while 21 per cent of women employed while pregnant but who stopped work (i.e. did not take leave) were back in work by six months. Overall, 72 per cent of those in employment during pregnancy were back in employment by nine to ten months after the birth (Dex and Ward, 2007).

29 *The Economic Journal*, February 2005; see also Waldfogel, 2006 and UNICEF, 2008.

### 6.7.3 Working Conditions Following Childbirth

Previous research suggests that returning to the pre-birth employer is critical in maintaining occupational position and avoiding deterioration in pay and conditions (see review in Russell and Banks, 2011). Given that the maximum period of statutory maternity leave in Ireland (paid plus unpaid leave) is less than one year, maintaining this continuity involves a relatively early return to work in European terms.

Indeed we found that of those mothers who had returned to employment by the time of the survey the great majority had returned to their previous employer (93 per cent). This suggests somewhat more continuity in employment than has been observed in similar samples of British women.<sup>30</sup> Consequently, very little occupational change was observed among returners, with only 7 per cent changing occupations. There was also a strong continuity in the type of contract (permanent, non-permanent or self-employed), with only 6 per cent of women who had returned to work reporting a change.

There were changes, however, in some aspects of women's working conditions. The most substantial change occurred in working hours: almost one-third of mothers who had been in full-time employment during pregnancy worked reduced hours after the birth, with 24 per cent reducing their working week by more than eight hours. Comparing wages before and after the birth, we see that the median hourly earnings are very close and that 70 per cent of mothers had similar (within plus or minus 5 per cent) hourly earnings before and after the birth. One woman in ten had a fall in hourly earnings of 5 per cent or more, while one in five had an increase in hourly earnings of 5 per cent or more.<sup>31</sup>

A substantial proportion of returning mothers felt that their opportunities for training and promotion at work had decreased when compared with their situation pre-pregnancy (21 per cent and 24 per cent, respectively). Similar proportions of women felt that their level of responsibility at work had increased (16 per cent) as decreased (14 per cent) on their return after childbirth. A slightly higher proportion felt that their control over their work had decreased (15 per cent) than increased (10 per cent). However, the majority in all cases reported no change. The bulk of the changes that did occur were among women who had returned to the same employer and were associated with a reduction in the number of hours worked. Women who reduced their hours by eight or more per week were twice as likely to feel that they had fewer opportunities for training and promotion as women whose hours remained the same.

Surprisingly little change was recorded at the aggregate level in the extent of work–family conflict reported by the women in their job before and after the birth. It is likely that the reductions in hours cancelled out the influence of increased family commitments.<sup>32</sup>

Overall, then, Irish women's high probability of returning to their previous employer allows them to benefit from the legislation prohibiting occupational downgrading and change in contract status. However, despite the high retention with the previous employer and relatively quick return to work, there was evidence of negative impacts on working conditions. The survey occurred during a period of economic recession, therefore the decline in wages found among a minority (10 per cent) of the women who had returned to work may be part of a more general trend rather than being linked to taking leave around childbirth. O'Connell et al. (2010) report that 21 per cent of employees experienced a decline in pay levels in their current job in the preceding two years.<sup>33</sup> However, in contrast to the situation of the mothers in this study, employees in general felt that their level of responsibility had increased over the same time period and only 4 per cent felt their responsibility on the job had declined; similarly, half of employees felt that their control/autonomy had increased and just 3 per cent that it had declined (O'Connell et al., 2010).

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30 Adams et al. (2005) found that 87 per cent of mothers had returned to the same employer; La Valle et al. (2008) reported a very similar rate: 86 per cent; and Dex and Ward (2007) reported that 81 per cent of mothers who had re-entered employment went back to their previous employer.

31 Calculation of hourly wages means that the change in hours is controlled and therefore does not account for the change in wages.

32 There may be differences at the individual level, for example conflict may increase among women who do not reduce their hours of work. This analysis is not undertaken in the report.

33 The public sector pension levy led to a reduction in net pay.



### Policy implications of these findings

- Financial constraints and job insecurity may be forcing women to return to employment earlier than they would like and earlier than is optimal for the development of their child(ren).
- The availability of part-time hours is important in facilitating women's return to the labour market.

## 6.8 The Role of the Employer

The results outlined in this report highlight the important role of the employer in the promotion of gender equality and good practice around pregnancy in employment. While the State sets the standards at the national level through legislation and employment regulations, the way in which these are implemented at an organisational level and the broader organisational culture are crucial in determining whether employees are treated equally and fairly and can avail of their legal entitlements.

Flexible working arrangements were found to be associated with a range of favourable outcomes for women in employment during and after pregnancy. Women in flexible workplaces were less likely to report unfair treatment during pregnancy, less likely to experience negative health effects due to their work and less likely to report problems with regard to maternity leave. The availability of reduced hours *on return* to work is important. Among women who changed employers, 45 per cent gave the reason that their hours were no longer suitable and 32 per cent said their previous job was not flexible enough. Among women who did not return to work, 40 per cent said that combining work and motherhood was too demanding; this outcome was also likely to be associated with hours worked.

The size of the organisation in which women were employed had an impact on the duration of their leave in that larger employers were more likely to provide top-up payments that enabled women to afford a longer period of leave. There was no association between size of firm and problems with maternity leave, contrary to our initial expectations. The absence of specialised human resource managers in smaller firms – who might be expected to reduce problems – may be counteracted by better relationships between management and staff, as has been found in other research (O'Connell et al., 2010). This positive assessment by women working in smaller firms is important, since other studies have emphasised the problems encountered by the small and medium-sized enterprise (SME) sector when dealing with employee protection legislation and flexible working (Framework Committee for Equal Opportunities at the Level of the Enterprise, 2002; Young and Morrell, 2005). The findings of this survey suggest that the SME sector is successfully managing maternity leave amongst its employees.

There were few differences in outcomes for women by sector of employment once the size of the organisation and the personal characteristics of the woman were controlled. However, the retail and wholesale sector stood out as being associated with a higher risk of unfair treatment and of crisis pregnancy.

### Policy implications of these findings

- There is a need for improved information for employers and employees on anti-discrimination legislation relating to pregnancy and on aspects of maternity protection that are less well known (for example, regulation around return to previous job, health and safety regulations and entitlement to parental leave).
- There is a need to promote good practice and to monitor employers' compliance with health and safety legislation around pregnancy, in particular the extent to which risk assessments are carried out. A useful starting point would be a survey of employers to determine their knowledge of, and attitudes towards, maternity protection legislation and health and safety regulations, and to identify the difficulties they face in implementing such legislation.
- The importance of family-friendly workplaces, which have a policy on equality and diversity and flexible working options, needs to be stressed; such workplaces are associated with a range of favourable outcomes for the health and well-being of the female workforce. Hence, wider implementation of flexible employment practices should be encouraged.
- Variations in risk factors across industries suggest that strategies tailored to specific sectors of the economy would be useful. For example, consideration should be given to targeting information about equal treatment of women at the retail and wholesale sector.

## 6.9 Inequalities in Women's Experiences

Women with higher educational qualifications were more likely to return to employment following the birth of their child and to have preserved their relationship with their previous employer. Women from higher educational and occupational backgrounds also had greater opportunity to avail of unpaid leave (both maternity and parental leave) and therefore could extend their leave period beyond the twenty-six weeks covered by maternity benefit.

Other groups – including lone mothers and those with lower earnings – were under financial pressure to return to employment early. There was evidence that partner unemployment and feelings of economic insecurity were pushing mothers into an early return to work. It is likely that financial pressures have intensified with the current economic recession. Other research has shown that women who take breaks in employment longer than the two-year reference period of this survey are more likely to experience a deterioration in conditions, including occupation and pay (see review in Russell and Banks, 2011).

While financial pressures may be encouraging an early return to employment for some less-advantaged women – particularly lone parents, non-Irish nationals and women with an unemployed partner – there are other disadvantaged groups who are likely to opt out of the labour market altogether. In the latter category are women with low levels of education and those working in temporary/casual employment. These findings of stratified opportunities around the return to employment after childbirth are important because they are likely to lead to a widening of inequalities between women.

### Policy implications of these findings

- Although cost-increasing measures may not be feasible during the current recession, the existing system involving a significant element of unpaid leave leads to inequitable outcomes. Vulnerable mothers – lone mothers, mothers with an unemployed partner – and their children would benefit from an expansion in *paid* maternity leave or parental leave. This would allow parents to care for their child during his or her first year, if they so choose, and would reduce financial pressures for very early returns to work among lower income groups.

The background is a solid purple color with several overlapping, rounded square shapes in various shades of purple and magenta, creating a layered, geometric effect. The text is centered on one of these shapes.

## Appendices and References

## Appendix A: Tables

Table A1.1: Population and completed sample characteristics

		Population (from national sources)		Unweighted sample data		Weighted sample data	
		A. N cases	B. %	C. %	D. (C-B)	E. %	F. (E-B)
Quarter of birth	Q3 2007	20318	14%	11%	-3%	14%	0%
	Q4 2007	18757	13%	10%	-3%	13%	0%
	Q1 2008	17629	12%	10%	-2%	12%	0%
	Q2 2008	18864	13%	13%	0%	13%	0%
	Q3 2008	20057	14%	14%	0%	14%	0%
	Q4 2008	19192	13%	13%	0%	13%	0%
	Q1 2009	18114	12%	14%	2%	13%	0%
	Q2 2009	12903	9%	15%	6%	9%	0%
Marital status	Married	97828	67%	66%	-1%	67%	0%
	Cohabiting	10281	7%	17%	10%	7%	0%
	Lone parent	37725	26%	17%	-9%	26%	0%
Nationality of mother	Irish (incl. unknown)	110250	76%	77%	1%	77%	1%
	British	5435	4%	2%	-1%	4%	0%
	Other Western Europe	11512	8%	2%	-6%	7%	-1%
	Eastern Europe	6594	5%	9%	5%	5%	0%
	Africa	4856	3%	4%	0%	3%	0%
	North America/Australia	1026	1%	1%	0%	1%	0%
	Mid-East/Rest of World	6161	4%	6%	1%	4%	0%
Age group QNHS Q2/08, micro For children 0-4	15-19	1211	1%	1%	0%	1%	0%
	20-24	12220	8%	8%	0%	9%	0%
	25-34	70360	48%	56%	8%	48%	0%
	35-44	58688	40%	35%	-5%	42%	2%
	45+	3355	2%	0%	-2%	1%	-2%
Marital, children (Based on CSO 06 for children 0-4) adj to N by mar stat from DSFA for mothers w' child 0-2	Married, 1 child	27657	19%	23%	4%	20%	1%
	Married, 2 children	36102	25%	25%	0%	24%	-1%
	Married, 3+ children	34069	23%	18%	-5%	23%	0%
	Cohabiting, 1 child	5484	4%	10%	6%	4%	0%
	Cohabiting, 2+ children	4797	3%	8%	4%	3%	0%
	Lone mother, 1 child	20253	14%	8%	-6%	11%	-2%
	Lone mother, 2+	17472	12%	9%	-3%	14%	2%
Education QNHS Q2/08 micro for children 0-4	Primary or less	7083	5%	5%	0%	5%	0%
	Lower second level	17559	12%	7%	-5%	12%	0%
	Higher second level	41091	28%	20%	-8%	28%	0%
	Second level +	42426	29%	31%	2%	29%	0%
	Degree or higher	37675	26%	38%	12%	26%	0%
Economic status	Employee	76158	52%	60%	8%	52%	0%
	Self-employed	6662	5%	3%	-1%	5%	0%
	Unemployed	3154	2%	7%	5%	2%	0%
	Not in labour force	59860	41%	30%	-11%	41%	0%
Occupation QNHS Q2/08 micro for children 0-4	Managers/administrators	11289	14%	8%	-6%	12%	-1%
	Professional	13497	16%	21%	4%	15%	-1%
	Associate professional/technical	14333	17%	26%	9%	16%	-1%
	Clerical	19612	24%	19%	-4%	24%	1%
	Personal services	12708	15%	13%	-2%	16%	1%
	Sales	8737	11%	9%	-1%	11%	1%
	Manual occupations	2644	3%	4%	0%	5%	1%
Hours worked QNHS Q2/08 micro for children 0-4	00-10	3698	4%	4%	-1%	3%	-1%
	11-20	17708	21%	16%	-5%	20%	-1%
	21-30	19122	23%	23%	-1%	23%	0%
	31+	42292	51%	57%	6%	53%	2%

Table A1.1: Population and completed sample characteristics, continued

		Population (from national sources)		Unweighted sample data		Weighted sample data	
		A. N cases	B. %	C. %	D. (C-B)	E. %	F. (E-B)
Industry, if work QNHS Q2/08 micro for children 0-4	Manufacturing/construction	10245	12%	13%	0%	12%	0%
	Retail and wholesale	12653	15%	15%	-1%	17%	2%
	Financial and business	13908	17%	21%	4%	16%	-1%
	Public administration	4699	6%	4%	-2%	5%	0%
	Education	8987	11%	11%	0%	10%	-1%
	Health and social care	17736	21%	21%	0%	20%	-1%
	Other services	14592	18%	16%	-1%	20%	2%
Union membership	Union member	28881	38%	39%	1%	37%	-1%

Source: Department of Social and Family Affairs (DSFA) (quarter of birth, marital status and nationality figures); Census 2006 (CSO) (marital status by number of children by mothers of children aged 0 to 4 years); Quarterly National Household Survey (QNHS) microdata for Q2 2008 (economic status, education, occupation, hours worked, industry and union membership).

Note: Some population statistics are reported only for mothers of children under the age of four years, which might be expected to differ from mothers of children aged up to two years and three months in that more of them will have returned to work after maternity leave. The economic status reported in the table for survey respondents includes those intending to return to the same employer with mothers 'at work'.

**Table A3.1: Type of unfair treatment by answer to global unfair treatment question (% of women mentioning each type of treatment)**

	All %	Yes at C3 %	No* at C3 %
Given unsuitable work or workloads	11.6	48.1	7.3
Discouraged from attending antenatal classes	7.8	17.1	6.7
Unpleasant comments from employer/manager/colleagues	8.2	38.8	4.5
Shift hours changed against wishes	3.8	16.0	2.3
Unfairly criticised or disciplined about performance	3.8	24.1	1.7
Failed to gain a promotion or otherwise sidelined	5.2	27.3	2.5
Denied access to training	3.6	12.6	2.5
Reduction in salary or bonus	2.9	10.4	2.0
Pay rise or bonus that was less than peers	2.4	9.4	1.5
Treated so poorly that had to leave	2.8	18.0	0.9
Made redundant or dismissed	2.0	12.0	0.7
Threatened with redundancy or dismissal	0.9	6.0	0.3
Other	0.7	6.0	0.6
% mentioning any unfair treatment	28.2	82.1	22.7
% mentioning more than one type of unfair treatment	13.8	61.4	8.4
N	1432	156	1276

Base: Women employed as employees during pregnancy (self-employed excluded).

Note: Multiple responses allowed.

\* 'No' also includes 'don't know' and non-response.

Table A3.1 compares the type of unfair treatment reported by women who answered 'yes' (11 per cent) with the original unfair treatment question and those that answered 'no'. The no category also includes a small number of women who answered 'don't know' or who did not respond to the global question. Of those who answered 'no' to the original question, 23 per cent subsequently reported at least one form of unfair treatment. The majority of those who answered 'yes' (61 per cent) recorded two or more negative experiences, with an average of 2.5. It is possible that it is this accumulation of experiences that makes this group more likely to answer 'yes' to the global question.

In order to standardise the comparison across the two groups, we calculated the type of treatment reported as a percentage of all the unfair treatments recorded. In other words, the base became the number of treatments rather than the number of individual respondents. These results show that the distribution of responses is very similar for the two groups. The main difference that arises is that discouragement from attending antenatal classes is more common among women who originally answered 'no' or 'don't know' to the unfair treatment question. This suggests that this experience may not always be perceived as unfair by pregnant women.

Table A3.2 presents the same information as a percentage of responses.

**Table A3.2: Type of unfair treatment by answer to global unfair treatment question (as % of responses)**

	Yes	No/don't know
	% of responses	
Given unsuitable work or workloads	19.3	21.8
Discouraged from attending antenatal classes	7.0	19.9
Unpleasant comments from employer/manager/colleagues	15.7	13.3
Shift hours changed against wishes	6.5	6.8
Unfairly criticised or disciplined about performance	9.9	5.2
Failed to gain a promotion or otherwise sidelined	11.2	7.5
Denied access to training	5.2	7.5
Reduction in salary or bonus	4.2	6.1
Pay rise or bonus that was less than peers	3.9	4.4
Treated so poorly that had to leave	7.3	2.8
Made redundant or dismissed	5.0	2.1
Threatened with redundancy or dismissal	2.3	0.7
Other	2.3	1.9
	100.0	100.0
<i>N of responses</i>	383	427

**Table A3.3: Nature of unfair treatment, Ireland and Britain**

	Ireland %	Britain %
Given unsuitable work or workloads	48.1	40
Discouraged from attending antenatal classes	17.1	20
Unpleasant comments from employer/manager/colleagues	38.8	32
Shift hours changed against wishes	16.0	—
Unfairly criticised or disciplined about performance	24.1	18
Failed to gain a promotion or otherwise sidelined	27.3	16
Denied access to training	12.6	10
Reduction in salary or bonus	10.4	7
Pay rise or bonus that was less than peers	9.4	8
Treated so poorly that had to leave	18.0	21
Made redundant or dismissed	12.0	—
Threatened with redundancy or dismissal	6.0	—
Bullied by line manager/supervisor	—	2
Other	6.0	19
% mentioning any unfair treatment	82.1	
% mentioning more than one type of unfair treatment	61.4	
N	156	332

Note: Multiple responses allowed. Responses are reported only for women who said 'yes' to the initial unfair treatment question. The Irish figures do not contain women who said 'don't know' or 'no' to the initial question but who subsequently identified one or more types of unfair treatment. '—' indicates not asked.

The Maternity Rights Survey (MRS) in the UK (La Valle et al., 2008) found that 11 per cent of women felt that they had been treated unfairly during pregnancy, which is identical to the proportion of Irish women responding to the same global question without examples of specific treatment. The EOC study (Adams et al., 2005) based on a non-random sample of British mothers estimated that 45 per cent of women experienced 'tangible discrimination' relating to their pregnancy, maternity leave and return to work; this category covered all the responses outlined in Table A3.2 except the unpleasant comment category, but also included additional experiences around maternity leave and return to work (see Russell and Banks, 2011, for a discussion of the methodology and scope of this EOC study). Adams et al. (2005) reported that 7 per cent of women were made redundant, dismissed or treated so badly that they felt they had to leave as a result of pregnancy and a further 14 per cent of women reported other forms of financial loss such as salary reduction, failure to gain promotion or pay rise and loss of non-salary benefits. The broader reference period used (i.e. including maternity leave and the return period) along with differences in sampling and question format are likely to have contributed to differences between the Irish and British results, even if the underlying rates of unfair treatment were the same. (See Russell and Banks, 2011, for further details of the methodology used.)

The nature of unfair treatment reported by British women in the MRS is also similar to that reported in Ireland. Among UK women who said they were treated unfairly, 40 per cent were given unsuitable work/workloads, 32 per cent received unpleasant comments, 20 per cent were discouraged from attending antenatal classes and 18 per cent were unfairly criticised. The Irish figures were marginally higher on nearly all the overlapping items, with the exception of 'attending antenatal classes', 'treated so poorly had to leave' and 'other', which suggests that Irish women were more likely to make multiple responses.



Table A3.4: Model of self-reported unfair treatment (odds)

		Model 1	Model 2
Age group (Ref=30–34)	17–24	<b>2.57</b>	<b>2.45</b>
	25–29	n.s.	n.s.
	35–39	n.s.	n.s.
	40 and over	n.s.	n.s.
Marital status (Ref=married)	Cohabiting	n.s.	n.s.
	Lone parent	n.s.	n.s.
Birth order (Ref=first)	Second child	<b>1.35</b>	n.s.
	Third or higher child	n.s.	n.s.
Number adults in household (Ref=2)	3 or more	n.s.	n.s.
Nationality (Ref=Irish)	Non-Irish	n.s.	n.s.
Disability (Ref=no disability)	Has disability	n.s.	n.s.
Health (Ref=good/excellent)	Fair, bad, or very bad	n.s.	n.s.
Education (Ref=degree)	Low second level or less	n.s.	n.s.
	Higher second level	n.s.	n.s.
	Third level, non-degree	n.s.	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	n.s.	n.s.
	Other economic status	n.s.	n.s.
	Lower manual class	n.s.	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.
	Other city	n.s.	n.s.
Contract status (Ref=permanent employee)	Town	n.s.	n.s.
	Temporary/casual	n.s.	n.s.
Hours during pregnancy (Ref=30–39)	Self-employed	—	—
	Less than 20	n.s.	n.s.
	20–29	n.s.	n.s.
Occupation (Ref=sales)	40+	n.s.	n.s.
	Managers and administrators	n.s.	n.s.
	Professionals	n.s.	n.s.
	Associate professionals	n.s.	n.s.
	Clerical	n.s.	n.s.
	Craft (skilled manual)	<b>3.98</b>	<b>3.83</b>
	Personal and protective services	n.s.	n.s.
Industry during pregnancy (Ref=other private sector)	Plant etc. operators and other	n.s.	n.s.
	Education	n.s.	n.s.
	Other public sector	n.s.	n.s.
	Finance and business services	n.s.	n.s.
Size of organisation by number of employees (Ref=250+)	Retail and wholesale	<b>1.79</b>	n.s.
	1–9	<b>0.54</b>	<b>0.53</b>
	10–19	n.s.	n.s.
	20–49	n.s.	n.s.
	50–99	n.s.	n.s.
Job tenure (log)	100–249	n.s.	n.s.
		n.s.	n.s.
Hourly income (log)		n.s.	n.s.
Work–family conflict Flexible arrangements available (Ref=none)		<b>1.35</b>	<b>1.28</b>
	Work from home	n.s.	n.s.
	Flexible hours	<b>0.75</b>	n.s.
	Job-share	n.s.	n.s.
	Part-time work	n.s.	n.s.
	Term-time work	n.s.	n.s.
Gender composition of workplace (Ref=roughly even)	Time off – family reasons	<b>0.58</b>	<b>0.70</b>
	All/almost all female	n.s.	n.s.
	About 75% female	n.s.	n.s.
Equality policy (Ref=none)	Almost all male	<b>1.49</b>	n.s.
	Equality policy present	<b>0.61</b>	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Unknown	n.s.	n.s.
	Employer supportive	—	<b>0.26</b>

Base: Women who were employees during pregnancy, excluding those who did not supply complete information (N=1,683).

Note: Nagelkerke R-squared = .228 for Model 1 and .301 for Model 2. '—' indicates variable not included. 'n.s.' indicates not statistically significant ( $p \leq 0.05$ ). 'Ref' means reference category.

### **Box A3.1: Hazards listed in Irish pregnancy protection regulations and guidelines**

#### **List 1: General Hazards**

- Physical shocks – including direct blows to the abdomen
- Vibration – of whole body
- Handling a load
- Noise
- Excessive heat and cold
- Movement and postures which are abrupt or severe or give rise to excessive fatigue
- Ionising radiation
- Non-ionising radiation
- Biological agents – including viruses, bacteria, etc.
- Chemicals – including substances that cause cancer, mercury, anti-cancer drugs and carbon monoxide

#### **List 2: Hazards Specific to Pregnancy**

- Pressurisation chambers
- Rubella
- Toxoplasma
- Lead and lead substances
- Underground mine work

#### **List 3: Hazards Specific to Breastfeeding**

- Lead and lead substances
- Underground mine work

*Source: Protection of Pregnant, Post Natal and Breastfeeding Employees Regulations (HSA, 2007).*

### **Box A3.2: Hazards listed in the European Commission's guidelines**

Hazards and issues covered in the European Commission's guidelines on the assessment of risks to pregnant workers and workers who have recently given birth or are breastfeeding:

- Mental and physical fatigue and working time (long hours, night work and shift work)
- Postural problems connected with the activity of new or expectant mothers
- Working at heights
- Working alone
- Occupational stress
- Standing activities
- Sitting activities
- Lack of rest and other welfare facilities in the workplace
- Risk of infection or kidney disease as a result of inadequate hygiene facilities
- Hazards as a result of inappropriate nutrition
- Hazards as a result of unsuitable or absent facilities related to breastfeeding and expressing milk
- Shocks, vibration or movement
- Ionising radiation
- Non-ionising radiation
- Extremes of cold or heat
- Work in hyperbaric atmosphere
- Biological agents
- Chemical agents, including: mercury, antimetabolic (cytotoxic) drugs; substances that can be absorbed through the skin (includes some pesticides); carbon monoxide; lead
- Manual handling of loads
- Movements and postures
- Travelling, inside and outside the workplace
- Underground extractive industries
- Work with display screen equipment (VDUs)
- Work equipment and personal protective equipment and clothing

*Source: European Commission, 2000, cited in European Agency for Health and Safety at Work, 2003.*

Table A3.5: Models for negative effect of work on health (odds)

		Model 1	Model 2	Model 3
Age group (Ref=30–34)	17–24	<b>2.65</b>	<b>2.90</b>	n.s.
	25–29	n.s.	<b>1.67</b>	n.s.
	35–39	n.s.	n.s.	n.s.
	40 and over	n.s.	n.s.	n.s.
Marital status (Ref=married)	Cohabiting	n.s.	n.s.	n.s.
	Lone parent	n.s.	n.s.	n.s.
Birth order (Ref=first)	Second child	<b>1.77</b>	<b>1.64</b>	n.s.
	Third or higher child	n.s.	n.s.	n.s.
Number adults in household (Ref=1–2)	3 or more	n.s.	n.s.	n.s.
Nationality (Ref=Irish)	Non-Irish	n.s.	n.s.	n.s.
Disability (Ref=no disability)	Has disability	<b>2.20</b>	<b>2.10</b>	n.s.
Education (Ref=degree)	Low second level or less	n.s.	n.s.	n.s.
	Higher second level	n.s.	n.s.	n.s.
	Third level, non-degree	<b>0.62</b>	<b>0.57</b>	<b>0.56</b>
Partner current status (Ref=at work, white collar)	Partner unemployed	n.s.	n.s.	n.s.
	Other economic status	n.s.	n.s.	n.s.
	Lower manual class	n.s.	n.s.	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.	n.s.
	Other city	n.s.	n.s.	n.s.
	Town	n.s.	n.s.	<b>1.70</b>
Contract status (Ref=permanent)	Temporary/casual	n.s.	n.s.	n.s.
	Self-employed	n.s.	—	—
Hours during pregnancy (Ref=30–39)	Less than 20	n.s.	n.s.	<b>2.23</b>
	20–29	n.s.	n.s.	n.s.
	40+	n.s.	n.s.	n.s.
Occupation (Ref=sales)	Managers and administrators	<b>2.57</b>	n.s.	n.s.
	Professionals	n.s.	n.s.	n.s.
	Associate professionals	n.s.	n.s.	n.s.
	Clerical	n.s.	n.s.	n.s.
	Craft (skilled manual)	<b>4.96</b>	n.s.	n.s.
	Personal and protective services	n.s.	n.s.	n.s.
	Plant etc. operators and other	n.s.	n.s.	n.s.
Industry during pregnancy (Ref=other private sector)	Education	n.s.	n.s.	n.s.
	Other public sector	n.s.	n.s.	n.s.
	Finance and business services	n.s.	n.s.	n.s.
	Retail and wholesale	n.s.	n.s.	n.s.
Size of organisation by number of employees (Ref=250+)	1–9	n.s.	n.s.	n.s.
	10–19	n.s.	n.s.	n.s.
	20–49	n.s.	n.s.	n.s.
	50–99	n.s.	n.s.	n.s.
	100–249	n.s.	n.s.	n.s.
Job tenure (log)		<b>0.83</b>	n.s.	n.s.
Hourly income (log)		n.s.	n.s.	n.s.
Work–family conflict Flexible arrangements available (Ref=none)	Work from home	n.s.	n.s.	n.s.
	Flexible hours	n.s.	n.s.	n.s.
	Job-share	n.s.	n.s.	n.s.
	Part-time work	n.s.	n.s.	n.s.
	Term-time work	n.s.	n.s.	n.s.
	Time off – family reasons	<b>0.65</b>	<b>0.65</b>	n.s.
	Gender composition of workplace (Ref=roughly even)	All/almost all female	n.s.	n.s.
	About 75% female	<b>1.63</b>	<b>1.68</b>	n.s.
	Almost all male	n.s.	n.s.	<b>0.54</b>
Equality policy (Ref=none)	Equality policy present	—	n.s.	n.s.
	Unknown	—	n.s.	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Employer supportive	—	—	<b>0.35</b>
Unfair treatment (Ref=no)	Any unfair treatment	—	—	<b>2.49</b>
	2+ forms	—	—	<b>2.69</b>

Base: Women who were in employment during pregnancy (N=1,724) for Model 1; excluding self-employed (N=1,641) for Models 2 and 3.

Note: Nagelkerke pseudo R-squared: = .254 for Model 1; .260 for Model 2; .395 for Model 3. '—' indicates variable not included in this model. 'n.s.' indicates not statistically significant (at p<.05). 'Ref' means reference category.

Table A3.6: Models for crisis pregnancy (odds)

		Model 1	Model 2	Model 3
Age group (Ref=30–34)	17–24	<b>2.07</b>	<b>2.33</b>	<b>2.30</b>
	25–29	n.s.	n.s.	n.s.
	35–39	n.s.	n.s.	n.s.
	40 and over	n.s.	n.s.	n.s.
Marital status (Ref=married)	Cohabiting	<b>1.84</b>	<b>2.00</b>	<b>2.05</b>
	Lone parent	<b>4.71</b>	<b>5.94</b>	<b>6.14</b>
Birth order (Ref=first)	Second child	n.s.	n.s.	n.s.
	Third or higher child	<b>1.57</b>	<b>1.74</b>	<b>1.89</b>
Number adults in household (Ref=1–2)	3 or more	n.s.	n.s.	n.s.
Nationality (Ref=Irish)	Non-Irish	n.s.	n.s.	n.s.
Disability (Ref=no disability)	Has disability	<b>2.79</b>	<b>2.56</b>	<b>2.46</b>
Health (Ref=good/excellent)	Fair, bad, or very bad	<b>2.34</b>	<b>1.78</b>	n.s.
Education (Ref=degree)	Low second level or less	n.s.	n.s.	n.s.
	Higher second level	n.s.	n.s.	n.s.
	Third level, non-degree	n.s.	n.s.	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	n.s.	n.s.	n.s.
	Other economic status	<b>2.01</b>	<b>2.26</b>	<b>2.27</b>
	Lower manual class	n.s.	n.s.	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.	n.s.
	Other city	n.s.	n.s.	n.s.
	Town	n.s.	n.s.	n.s.
Worked during pregnancy		n.s.	—	—
Contract status (Ref=permanent)	Temporary/casual	—	n.s.	n.s.
	Self-employed	—	n.s.	—
Hours during pregnancy (Ref=30–39)	Less than 20	—	n.s.	n.s.
	20–29	—	n.s.	n.s.
	40+	—	n.s.	n.s.
Occupation (Ref=sales)	Managers/administrators	—	n.s.	n.s.
	Professionals	—	n.s.	n.s.
	Associate professionals	—	<b>2.08</b>	<b>2.17</b>
	Clerical	—	<b>2.24</b>	<b>2.49</b>
	Craft (skilled manual)	—	n.s.	n.s.
	Personal etc. services	—	n.s.	n.s.
	Operators and other	—	n.s.	n.s.
Industry during pregnancy (Ref=other private sector)	Education	—	n.s.	n.s.
	Other public sector	—	n.s.	n.s.
	Finance etc.	—	n.s.	n.s.
	Retail and wholesale	—	n.s.	<b>1.76</b>
Size of organisation by number of employees (Ref=250+)	1–9	—	n.s.	n.s.
	10–19	—	n.s.	n.s.
	20–49	—	n.s.	n.s.
	50–99	—	n.s.	n.s.
	100–249	—	n.s.	n.s.
Job tenure (log)		—	n.s.	n.s.
Hourly income (log)		—	n.s.	n.s.
Work–family conflict		—	<b>1.22</b>	<b>1.19</b>
Flexible arrangements available (Ref=none)	Work from home	—	n.s.	n.s.
	Flexible hours	—	<b>0.75</b>	n.s.
	Job-share	—	n.s.	n.s.
	Part-time work	—	n.s.	n.s.
	Term-time work	—	n.s.	n.s.
	Time off – family reasons	—	n.s.	n.s.
Gender composition of workplace (Ref=roughly even)	All/almost all female	—	n.s.	n.s.
	About 75% female	—	n.s.	n.s.
	Almost all male	—	n.s.	n.s.
Equality policy (Ref=none)	Equality policy present	—	—	n.s.
	Unknown	—	—	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Employer supportive	—	—	n.s.
Unfair treatment (Ref=no)	Any unfair treatment	—	—	n.s.
	2+ forms	—	—	<b>2.39</b>

Base: All mothers (N=2,256) for Model 1; mothers who were in employment during pregnancy (N=1,739) for Model 2; employees during pregnancy (N=1,656) for Model 3; excluding those with missing information.

Note: Nagelkerke R-squared = .175 for Model 1; .221 for Model 2; .246 for Model 3. 'n.s.' indicates not statistically significant ( $p \leq 0.05$ ). '—' = not included in model. 'Ref' means reference category.

**Table A3.7: Most important reason for crisis pregnancy by employment status during pregnancy**

	In employment during pregnancy %	Not in employment during pregnancy %
1 Had given birth recently	3.6	5.4
2 Family was complete	0.9	0.3
3 Too young	1.4	6.7
4 Not married	3.2	2.0
5 Relationship difficulties	12.0	7.4
6 Relationship new/not steady	4.3	3.4
7 Pregnancy not planned	8.6	18.2
8 Pregnancy not wanted	4.7	1.0
9 Financial reasons	10.4	12.8
10 Medical difficulties	24.6	20.5
11 Work commitments/plans	1.6	1.0
12 School/college commitments/plans	0.7	1.0
13 Family reaction (or fear of family reaction)	2.3	2.7
14 Reaction of employer/co-workers	2.5	0.0
15 Other	18.5	17.5
16 Not stated	0.9	0.0
	100.0	100.0

Base: All women who reported a crisis pregnancy and who were in employment during pregnancy (N=443) or were not in employment during pregnancy (N=297).

**Table A4.1: Odds of taking paid leave only or no paid leave versus taking both paid and unpaid leave (from multinomial regression)**

		Paid leave only	Unpaid only or no leave
Age group (Ref=30–34)	17–24	n.s.	3.73
	25–29	n.s.	n.s.
	35–39	n.s.	n.s.
	40 and over	0.59	n.s.
Marital status (Ref=married)	Cohabiting	n.s.	n.s.
	Lone parent	2.06	n.s.
Birth order (Ref=first)	Second child	n.s.	n.s.
	Third or higher child	n.s.	n.s.
Number of adults in household (Ref=1–2)	3 or more	0.61	n.s.
Nationality (Ref=Irish)	Non-Irish	1.68	n.s.
Education (Ref=degree)	Low second level or less	2.81	4.12
	Higher second level	n.s.	2.60
	Third level, non-degree	n.s.	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	2.31	n.s.
	Other economic status	n.s.	n.s.
	Lower manual class	1.55	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	0.37
	Other city	n.s.	n.s.
	Town	n.s.	n.s.
Contract status (Ref=permanent)	Temporary/casual	n.s.	5.41
	Self-employed	n.s.	19.57
Hours during pregnancy (Ref=30–39)	Less than 20	n.s.	4.22
	20–29	1.54	n.s.
	40+	n.s.	n.s.
Industry during pregnancy (Ref=other private sector)	Education	1.74	n.s.
	Other public sector	1.51	n.s.
	Finance and business services	0.69	n.s.
	Retail and wholesale	n.s.	n.s.
Size of organisation by number of employees (Ref=250+)	1–9	2.36	6.37
	10–19	2.39	8.91
	20–49	3.11	10.95
	50–99	1.96	4.21
	100–249	1.64	n.s.
Job tenure (log)		n.s.	0.48
Hourly income (log)		0.61	0.39
Work–family conflict		n.s.	n.s.
Flexible arrangements available (Ref=none)	Work from home	1.48	n.s.
	Flexible hours	n.s.	n.s.
	Job-share	n.s.	n.s.
	Part-time work	0.72	n.s.
	Term-time work	n.s.	n.s.
	Time off – family reasons	n.s.	n.s.
Gender composition of workplace (Ref=roughly even)	All/almost all female	n.s.	n.s.
	About 75% female	n.s.	2.67
	Almost all male	n.s.	n.s.
Financial hardship		1.33	n.s.

Base: Women who were in employment during pregnancy and who provided information on their pattern of leave (N=1,738).

Note: Nagelkerke R-squared = .377. 'n.s.' indicates not statistically significant ( $p \leq 0.05$ ). 'Ref' means reference category. Other variables that did not have a significant effect and that are not shown in the table are disability, self-rated health, occupation, equality policy at workplace and supportiveness of employer.

Interpretation example: Compared with mothers aged 30 to 34 (the reference age category), mothers aged 40 and over are less likely (59 per cent as likely or odds are 0.59) to take paid leave only rather than to take both paid and unpaid leave. Odds lower than 1 indicate a lower likelihood; odds greater than 1 indicate a greater likelihood.

**Table A4.2: Employer supplementary payments during maternity leave (odds)**

		Receiving employer top-up
Age group (Ref=30–34)	17–24	n.s.
	25–29	n.s.
	35–39	n.s.
	40 and over	0.44
Marital status (Ref=married)	Cohabiting	n.s.
	Lone parent	0.49
Birth order (Ref=first)	Second child	n.s.
	Third or higher child	n.s.
Number adults in household (Ref=1–2)	3 or more	n.s.
Nationality (Ref=Irish)	Non-Irish	0.54
Disability (Ref=no disability)	Has disability	n.s.
Health (Ref=good/excellent)	Fair, bad, or very bad	n.s.
Education (Ref=degree)	Low second level or less	n.s.
	Higher second level	0.53
	Third level, non-degree	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	0.54
	Other economic status	n.s.
	Lower manual class	n.s.
Location (Ref=rural)	Dublin city/county	n.s.
	Other city	n.s.
	Town	n.s.
Contract status (Ref=permanent)	Temporary/casual	n.s.
	Self-employed	—
Hours during pregnancy (Ref=30–39)	Less than 20	0.28
	20–29	n.s.
	40+	n.s.
Occupation (Ref=sales)	Managers and administrators	n.s.
	Professionals	n.s.
	Associate professionals	n.s.
	Clerical	n.s.
	Craft (skilled manual)	n.s.
	Personal and protective services	n.s.
	Plant etc. operators and other	n.s.
Industry during pregnancy (Ref=other private sector)	Education	2.76
	Other public sector	2.61
	Finance and business services	1.67
	Retail and wholesale	0.34
Size of organisation by number of employees (Ref=250+)	1–9	0.30
	10–19	0.29
	20–49	0.44
	50–99	0.47
	100–249	n.s.
Job tenure (log)		1.36
Hourly income (log)		2.86
Work–family conflict		1.09
Flexible arrangements available (Ref=none)	Work from home	n.s.
	Flexible hours	n.s.
	Job-share	n.s.
	Part-time work	n.s.
	Term-time work	n.s.
	Time off – family reasons	1.40
Equality policy (Ref=none)	Equality policy present	2.07
	Unknown	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Employer supportive	1.78

Base: Women who were employees during pregnancy and who took maternity leave (N=1,375).

Note: Nagelkerke pseudo R-squared = 0.556. 'n.s.' indicates not statistically significant ( $p \leq 0.05$ ). 'Ref' means reference category. One other characteristic that did not have a significant impact and is not shown above is the percentage of the workforce that is female.

**Table A4.3: Experiencing problems related to maternity leave (odds)**

		Odds
Age group (Ref=30–34)	17–24	2.36
	25–29	n.s.
	35–39	n.s.
	40 and over	n.s.
Marital status (Ref=married)	Cohabiting	n.s.
	Lone parent	n.s.
Birth order (Ref=first)	Second child	n.s.
	Third or higher child	n.s.
Number adults in household (Ref=1–2)	3 or more	0.61
Nationality (Ref=Irish)	Non-Irish	0.53
Disability (Ref=no disability)	Has disability	n.s.
Health (Ref=good/excellent)	Fair, bad, or very bad	n.s.
Education (Ref=degree)	Low second level or less	n.s.
	Higher second level	0.50
	Third level, non-degree	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	n.s.
	Other economic status	n.s.
	Lower manual class	n.s.
Location (Ref=rural)	Dublin city/county	n.s.
	Other city	n.s.
	Town	n.s.
Contract status (Ref=permanent)	Temporary/casual	n.s.
	Self-employed	—
Hours during pregnancy (Ref=30–39)	Less than 20	n.s.
	20–29	n.s.
	40+	n.s.
Occupation (Ref=sales)	Managers and administrators	n.s.
	Professionals	n.s.
	Associate professionals	n.s.
	Clerical	n.s.
	Craft (skilled manual)	n.s.
	Personal and protective services	n.s.
	Plant etc. operators and other	n.s.
Industry during pregnancy (Ref=other private sector)	Education	n.s.
	Other public sector	n.s.
	Finance and business services	n.s.
	Retail and wholesale	n.s.
Size of organisation by number of employees (Ref=250+)	1–9	n.s.
	10–19	n.s.
	20–49	n.s.
	50–99	n.s.
Job tenure (log)		n.s.
		n.s.
Hourly income (log)		n.s.
Work–family conflict		1.19
Flexible arrangements available (Ref=none)	Work from home	n.s.
	Flexible hours	n.s.
	Job-share	0.60
	Part-time work	n.s.
	Term-time work	n.s.
	Time off – family reasons	n.s.
Gender composition of workplace (Ref=roughly even)	All/almost all female	n.s.
	About 75% female	n.s.
	Almost all male	n.s.
Equality policy (Ref=none)	Equality policy present	0.58
	Unknown	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Employer supportive	0.50

Base: Women who worked as employees during pregnancy and who had taken maternity leave (N=1,484).

Note: Nagelkerke R-squared = 0.181. 'n.s.' indicates not statistically significant ( $p \leq 0.05$ ). 'Ref' means reference category.



**Table A4.4: Odds of not requesting or requesting but not being granted (or not being granted in the form requested) parental leave versus requesting and being granted parental leave (nominal regression)**

		Did not request	Not granted (fully)
Age group (Ref=30–34)	17–24	n.s.	n.s.
	25–29	n.s.	n.s.
	35–39	n.s.	n.s.
	40 and over	n.s.	n.s.
Marital status (Ref=married)	Cohabiting	n.s.	<b>0.22</b>
	Lone parent	n.s.	n.s.
Birth order (Ref=first)	Second child	n.s.	n.s.
	Third or higher child	n.s.	n.s.
Number adults in household (Ref=1–2)	3 or more	n.s.	n.s.
Nationality (Ref=Irish)	Non-Irish	n.s.	n.s.
Disability (Ref=no disability)	Has disability	n.s.	n.s.
Health (Ref=good/excellent)	Fair, bad, or very bad	n.s.	n.s.
Education (Ref=degree)	Low second level or less	n.s.	n.s.
	Higher second level	n.s.	n.s.
	Third level, non-degree	n.s.	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	<b>4.08</b>	n.s.
	Other economic status	—	—
	Lower manual class	n.s.	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.
	Other city	n.s.	n.s.
	Town	n.s.	n.s.
Contract status (Ref=permanent)	Temporary/casual	n.s.	n.s.
	Self-employed	—	—
Hours during pregnancy (Ref=30–39)	Less than 20	—	—
	20–29	n.s.	n.s.
	40+	<b>1.60</b>	n.s.
Industry during pregnancy (Ref=other private sector)	Education	n.s.	n.s.
	Other public sector	<b>0.56</b>	n.s.
	Finance and business services	n.s.	n.s.
	Retail and wholesale	n.s.	n.s.
Size of organisation by number of employees (Ref=250+)	1–9	n.s.	n.s.
	10–19	n.s.	n.s.
	20–49	n.s.	<b>0.21</b>
	50–99	n.s.	n.s.
	100–249	<b>0.58</b>	n.s.
Job tenure (log)		n.s.	n.s.
Hourly income (log)		<b>0.59</b>	n.s.
Work–family conflict		n.s.	n.s.
Flexible arrangements available (Ref=none)	Work from home*	—	—
	Flexible hours	n.s.	n.s.
	Job-share	n.s.	n.s.
	Part-time work	n.s.	n.s.
	Term-time work	n.s.	n.s.
	Time off – family reasons	n.s.	n.s.
Equality policy (Ref=none)	Equality policy present	n.s.	n.s.
	Unknown	n.s.	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Employer supportive	n.s.	n.s.

Base: Women who worked as employees during pregnancy, who had returned (or planned to return) to work and who provided information on parental leave (N=1,458).

Note: The reference category is: granted parental leave fully. Nagelkerke pseudo R-squared = .218. 'n.s.' indicates not statistically significant. 'Ref' means reference category. Other non-significant variables (not shown in the table) are occupation and percentage of workforce that is female.

\* This variable was omitted due to collinearity problems.

**Table A5.1: Association between type of contract before and after the birth**

Type of contract After the birth	Before the birth		
	Permanent %	Temporary/casual %	Self-employed %
Permanent	96	13	12
Temporary/casual	3	83	1
Self-employed	1	4	88
	100	100	100
<i>N</i>	935	116	48

*Base: Women who were in employment during pregnancy and who had returned to work by the time of the survey, excluding those with missing information (N=1,099).*

**Table A5.2: Odds of returning to work at different stages or of remaining outside the labour market (nominal regression)**

		1 to 22 weeks	23 to 29 weeks	30 to 42 weeks (Ref)	43 weeks to 2 years
Age group (Ref=30–34)	17–24	n.s.	n.s.	1.00	n.s.
	25–29	n.s.	n.s.	1.00	n.s.
	35–39	n.s.	n.s.	1.00	n.s.
	40 and over	n.s.	n.s.	1.00	n.s.
Marital status (Ref=married)	Cohabiting	n.s.	n.s.	1.00	n.s.
	Lone parent	3.04	n.s.	1.00	n.s.
Birth order (Ref=first)	Second child	1.83	1.36	1.00	n.s.
	Third or higher child	2.70	1.71	1.00	n.s.
Number of adults in household (Ref=1–2)	3 or more	n.s.	n.s.	1.00	0.39
Nationality (Ref=Irish)	Non-Irish	1.87	1.62	1.00	n.s.
Disability (Ref=no disability)	Has disability	n.s.	n.s.	1.00	n.s.
Health (Ref=good/excellent)	Fair, bad, or very bad	n.s.	n.s.	1.00	n.s.
Education (Ref=degree)	Low second level or less	2.65	2.28	1.00	n.s.
	Higher second level	n.s.	n.s.	1.00	n.s.
	Third level, non-degree	n.s.	n.s.	1.00	n.s.
Partner current status (Ref=at work, white collar)	Partner unemployed	n.s.	1.98	1.00	n.s.
	Other economic status	n.s.	n.s.	1.00	n.s.
	Lower manual class	n.s.	n.s.	1.00	n.s.
Location (Ref=rural)	Dublin city/county	n.s.	n.s.	1.00	1.68
	Other city	n.s.	n.s.	1.00	n.s.
	Town	n.s.	n.s.	1.00	1.73
Contract status (Ref=permanent)	Temporary/casual	2.83	1.59	1.00	n.s.
	Self-employed	4.96	n.s.	1.00	n.s.
Hours during pregnancy (Ref=30–39)	Less than 20	n.s.	n.s.	1.00	n.s.
	20–29	n.s.	n.s.	1.00	n.s.
	40+	n.s.	n.s.	1.00	n.s.
Occupation (Ref=sales)	Managers and administrators	n.s.	n.s.	1.00	n.s.
	Professionals	n.s.	n.s.	1.00	n.s.
	Associate professionals	n.s.	n.s.	1.00	n.s.
	Clerical	n.s.	n.s.	1.00	n.s.
	Craft (skilled manual)	n.s.	n.s.	1.00	n.s.
	Personal and protective services	n.s.	n.s.	1.00	n.s.
	Plant etc. operators and other	n.s.	n.s.	1.00	n.s.
Industry during pregnancy (Ref=other private sector)	Education	n.s.	n.s.	1.00	n.s.
	Other public sector	n.s.	n.s.	1.00	n.s.
	Finance and business services	n.s.	n.s.	1.00	1.75
	Retail and wholesale	2.29	1.76	1.00	n.s.
Size of organisation by number of employees (Ref=250+)	1–9	4.47	2.93	1.00	1.96
	10–19	2.44	2.32	1.00	n.s.
	20–49	3.75	2.05	1.00	n.s.
	50–99	3.05	2.07	1.00	n.s.
	100–249	n.s.	n.s.	1.00	n.s.
Job tenure (log)		0.80	n.s.	1.00	n.s.
Hourly income (log)		n.s.	0.65	1.00	n.s.
Work–family conflict		n.s.	n.s.	1.00	n.s.
Flexible arrangements available (Ref=none)	Work from home	n.s.	1.67	1.00	n.s.
	Flexible hours	n.s.	n.s.	1.00	n.s.
	Job-share	n.s.	n.s.	1.00	2.20
	Part-time work	n.s.	n.s.	1.00	n.s.
	Term-time work	n.s.	n.s.	1.00	n.s.
	Time off – family reasons	n.s.	n.s.	1.00	n.s.
Gender composition of workplace (Ref=roughly even)	All/almost all female	0.52	n.s.	1.00	n.s.
	About 75% female	n.s.	n.s.	1.00	n.s.
	Almost all male	n.s.	n.s.	1.00	1.81
Equality policy (Ref=none)	Equality policy present	n.s.	n.s.	1.00	n.s.
Supportiveness of employer (Ref=unsupportive/neutral)	Unknown	n.s.	n.s.	1.00	n.s.
	Employer supportive	n.s.	n.s.	1.00	n.s.
Job change (Ref=no change)	Changed job	1.63	n.s.	1.00	n.s.

Base: Women who were in employment during pregnancy (N=1,769).

Note: Nagelkerke R-squared = .382. 'n.s.' indicates not statistically significant. 'Ref' means reference category.

## Appendix B: Questionnaire



ID Code: **WORK12345**



### National Survey of Women's Experiences in Paid Work during and after Pregnancy

#### QUESTIONNAIRE

Thank you for agreeing to take part in this very important survey. All of the information you give us is confidential and we will not use your name anywhere. The information we get will help us to understand the kinds of services and supports that pregnant woman in paid work and working parents need. The survey will only take 15 minutes to complete.

Please read these instructions carefully before you begin. If you have any questions FREEPHONE 1800 303080 for help.

There are **three ways** you can answer the questionnaire:

- 1. 📞 BY PHONE:** To complete the survey over the phone, you can freetext your **ID Code** at the top of this page to **50444**. A member of the research team will contact you within 2 working days to carry out a phone interview with you.  
or
- 2. 💻 ON THE INTERNET:** You can complete the survey on line at [www.amarach.com/work.htm](http://www.amarach.com/work.htm). The website will ask you to enter your **ID Code** at the top of this page. We use this **ID Code** for security reasons to make sure that people who are not picked cannot complete the survey. This website is completely secure and will not ask for your name and address at any point.  
or
- 3. ✉️ BY POST:** You can fill in the questionnaire attached and post it back to Amárach Research in the pre-paid envelope provided. Our address is Amárach Research, 11 Kingswood Business Centre, Kingswood Road, Citywest Business Campus, Dublin 24.

If you are answering on the internet  or by post  for most of the questions you will need to tick the box beside the answer that applies to you. For example:

**Q1. Are you a member of a trade union?** Yes <sub>1</sub> No <sub>2</sub>

In some questions you will be asked to tick any of the boxes that apply to you. For example:

**Q2. Which of the following arrangements are available to you at your job? Please tick all that apply.**

Working from home ..... <sub>1</sub>  
 Flexible hours/flexitime..... <sub>2</sub>  
 Part-time hours ..... <sub>3</sub>

Some questions will not apply to you. When this happens you will need to skip to the next question that applies to you. The instructions will tell you which question you need to skip to. For example, if you tick the 'No' box below, you will skip to question 8. If you tick the 'yes' box, you will just go to the next question.

**Q3. Have you been in paid employment since your youngest child was born?**

Yes ..... <sub>1</sub> No..... <sub>2</sub> → **Go to Q8**

The questionnaire has five sections: **A**, **B**, **C**, **D** and **E**. If you were **not** in paid employment while pregnant with your youngest child you will just complete some questions in **Section A**, **Section D** and **Section E**.



**SECTION A: Experiences during and after your pregnancy with your youngest child**

**A1** What is date of birth of your youngest child \_\_\_\_\_ (Day) \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)

**A2** Were you in paid employment at any stage of your pregnancy?

Yes, employee or self-employed .... <sub>1</sub>

No ..... <sub>2</sub> → Go to **Section D** (bottom of page 6)

**NOTE:** If you had more than one job during pregnancy, please think of the job closest to the birth of your youngest child. If you had more than one job at the same time, think of the job that involved the most hours per week.

**A3** When did you begin work with that employer \_\_\_\_\_ month \_\_\_\_\_ year  
(if self-employed record when you started your business)

**A4** When did you stop working before the birth \_\_\_\_\_ month \_\_\_\_\_ year

**A5** And how many weeks before the birth was this? \_\_\_\_\_ weeks

**A6** Have you returned to paid employment or self employment since your youngest child was born?

Yes..... <sub>1</sub> → Date of return \_\_\_\_\_ (month) \_\_\_\_\_ (year) → Go to A7

No ..... <sub>2</sub> → Go to A8

**A7** Is this with the same employer as during your pregnancy? (Please tick one box)

Yes, same employer..... <sub>1</sub> → Go to **Section B**    No, Different employer ..... <sub>3</sub> → Go to A11

Yes, returned to own business.. <sub>2</sub> → Go to **Section B**    No, started own business .... <sub>4</sub> → Go to A11

**A8** Which of the following best describes your current situation with regard to work?

I am still on maternity leave ..... <sub>1</sub> → Go to A9

I am not on maternity leave but prefer not to work for the moment ..... <sub>2</sub> → Go to A9

I would like to be in paid work but have not been able to find a suitable job ..... <sub>3</sub> → Go to A11

**A9** When do you plan to return to employment?

Within the next six months                      In six months to one year                      In one to two years                      More than two years away                      Do not plan to return to employment

<sub>1</sub> → Go to A10

<sub>2</sub> → Go to A10

<sub>3</sub> → Go to A10

<sub>4</sub> → Go to A12

<sub>5</sub> → Go to A12

**A10** Do you plan to return to the same employer/employment as during your pregnancy?

Yes..... <sub>1</sub> → Go to **Section B**

No, plan to seek different employment..... <sub>2</sub> → Go to A11

**A11** What are the main reasons you did not (or do not plan to) return to the job you had during your pregnancy? [Please tick all that apply to you]

- 1. My contract ended..... <sub>1</sub>
- 2. My job was made redundant ..... <sub>2</sub>
- 3. My employer did not want me to return..... <sub>3</sub>
- 4. The hours were no longer suitable..... <sub>4</sub>
- 5. My previous job was not flexible enough..... <sub>5</sub>
- 6. I want(ed) a better job ..... <sub>6</sub>
- 7 My previous job was too far from home/long commute. <sub>7</sub>
- 8. I want(ed) job with less pressure / responsibility ..... <sub>8</sub>
- 9. Other reason (please specify, below)..... <sub>9</sub>

**A11b** And which were the three most important reasons?

Please enter the numbers from the list above. For example, if reason number 6 was the most important reason, enter the number “6” next to “Most important”.

**Most important reason** \_\_\_\_\_

**Second most important** \_\_\_\_\_

**Third most important** \_\_\_\_\_

(Now go to **Section B**)

**A12** What are the main reasons that you have not returned to work/do not plan to return to work? [Please tick all that apply to you]

- 1. I want to look after my child(ren) myself ..... <sub>1</sub>
- 2. There is no suitable childcare available..... <sub>2</sub>
- 3. The cost of childcare is too high..... <sub>3</sub>
- 4. Combining job and child(ren) is too demanding ..... <sub>4</sub>
- 5. I'm no better off financially if I return to work..... <sub>5</sub>
- 6. There are no suitable jobs ..... <sub>6</sub>
- 7. I intend to pursue further education or training ..... <sub>7</sub>
- 8. Other reason (please specify, below) ..... <sub>8</sub>

**A12b** And which were the three most important reasons?

Please enter the numbers from the list above. For example, if reason number 7 was the most important reason, enter the number “7” next to “Most important”.

**Most important reason** \_\_\_\_\_

**Second most important** \_\_\_\_\_

**Third most important** \_\_\_\_\_

(Now go to **Section B**)

**SECTION B: Job during pregnancy and job after pregnancy**

Please answer the questions in Column X about the job you held when you were pregnant with your youngest child.

*If you have not worked since the birth of your youngest child, please complete column X but skip column Y.]*

Please answer the questions in Column Y about the first job you held after the birth of your youngest child, even if it is the same job as X, as some aspects of the job may have changed.

**X. Job during Pregnancy \***

**B1x** In which of the following sectors did you work?

- Public Sector (civil service, health, education) ..... <sub>1</sub>
- Semi-State sector (e.g. ESB, VHI, An Post, etc.) .. <sub>2</sub>
- Private Sector ..... <sub>3</sub>

**B2x** Please describe as fully as possible the exact nature of this job. For example, receptionist (rather than office worker), assembly of computers (rather than factory worker).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**B3x** What was the main activity of the business or organisation where you worked?

\_\_\_\_\_

\_\_\_\_\_

**B4x** Which of the following best described your employment situation?

- Employee ..... <sub>1</sub>
- Employer (incl. farming) ..... <sub>2</sub>
- Self-employed (incl. farming) ..... <sub>3</sub>
- State employment scheme ..... <sub>4</sub>

**B5x** How many people did you employ, supervise or manage?

\_\_\_\_\_ (if none write 'None')

**B6x** How many hours per week did you *usually* work in that job (include any regular paid or unpaid overtime)

\_\_\_\_\_ hours per week

**B7x** Were you employed on a permanent basis, on a temporary/contract basis or a casual basis?

- |                                       |                                       |                                       |                                       |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Permanent                             | Temporary/contract                    | Casual                                | Self Employed                         |
| <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>3</sub> | <input type="checkbox"/> <sub>4</sub> |

**B8x** How many people worked in your organisation (i.e. in all branches, outlets, departments throughout the Republic of Ireland)?

- |  |  |   |
|--|--|---|
| 1-9..... <input type="checkbox"/> <sub>1</sub>   | 50-99..... <input type="checkbox"/> <sub>4</sub> |   |
| 10-19 .... <input type="checkbox"/> <sub>2</sub> | 100-249 .. <input type="checkbox"/> <sub>5</sub> |   |
| 20-49 .... <input type="checkbox"/> <sub>3</sub> | 250+ ..... <input type="checkbox"/> <sub>6</sub> | Don't know..... <input type="checkbox"/> <sub>7</sub> |

**B9x** Of all those employed in your place of work (i.e. in your local branch, dept, outlet) what proportion were women?

- |                                       |                                       |                                       |                                       |                                       |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| All or almost all                     | About three quarters                  | About half                            | About a quarter                       | Hardly any                            |
| <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>3</sub> | <input type="checkbox"/> <sub>4</sub> | <input type="checkbox"/> <sub>5</sub> |

*(Questions continue on next page, column X)*

**Y. First Job After Birth of Youngest Child**

**B1y** In which of the following sectors do/did you work?

- Public Sector (civil service, health, education) ... <sub>1</sub>
- Semi-State sector(e.g. ESB, VHI, An Post, etc.) <sub>2</sub>
- Private Sector ..... <sub>3</sub>

**B2y** Please describe as fully as possible the exact nature of this job. For example, receptionist (rather than office worker), assembly of computers (rather than factory worker).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**B3y** What is/was the main activity of the business or organisation where you work?

\_\_\_\_\_

\_\_\_\_\_

**B4y** Which of the following best describes your employment situation?

- Employee ..... <sub>1</sub>
- Employer (incl. farming) ..... <sub>2</sub>
- Self-employed (incl. farming) ..... <sub>3</sub>
- State employment scheme ..... <sub>4</sub>

**B5y** How many people do/did you employ, supervise or manage?

\_\_\_\_\_ (if none write 'None')

**B6y** How many hours per week do/did you *usually* work in that job (include any regular paid or unpaid overtime)

\_\_\_\_\_ hours per week

**B7y** Are/Were you employed on a permanent basis, on a temporary/contract basis or a casual basis?

- |                                       |                                       |                                       |                                       |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Permanent                             | Temporary/contract                    | Casual                                | Self Employed                         |
| <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>3</sub> | <input type="checkbox"/> <sub>4</sub> |

**B8y** How many people work/worked in your organisation (i.e. in all branches, outlets, departments throughout the Republic of Ireland)?

- |  |  |   |
|--|--|---|
| 1-9 ..... <input type="checkbox"/> <sub>1</sub>  | 50-99..... <input type="checkbox"/> <sub>4</sub> |   |
| 10-19 .... <input type="checkbox"/> <sub>2</sub> | 100-249 .. <input type="checkbox"/> <sub>5</sub> |   |
| 20-49 .... <input type="checkbox"/> <sub>3</sub> | 250+ ..... <input type="checkbox"/> <sub>6</sub> | Don't know..... <input type="checkbox"/> <sub>7</sub> |

**B9y** Of all those employed in your place of work (i.e. in your local branch, dept, outlet) what proportion are/were women?

- |                                       |                                       |                                       |                                       |                                       |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| All or almost all                     | About three quarters                  | About half                            | About a quarter                       | Hardly any                            |
| <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>3</sub> | <input type="checkbox"/> <sub>4</sub> | <input type="checkbox"/> <sub>5</sub> |

*(Questions continue on next page, column Y)*

\* If you had more than one job during this pregnancy please describe the most recent job. If two jobs were held at the same time, please answer about the one with the most hours

**X. Job during Pregnancy (continued)**

**B10x** What was your usual pay in that job *before* any deductions for tax, social insurance, pension etc.?

Amount: € \_\_\_\_\_

**B11x** And what period did this amount cover? Please tick one box to indicate whether this amount was hourly, weekly, monthly, annually etc.

- Per hour ..... <sub>1</sub>      Per calendar Month... <sub>5</sub>
- Per week ..... <sub>2</sub>      Per year..... <sub>6</sub>
- Per two weeks ..... <sub>3</sub>      Other (please specify).. <sub>7</sub>
- Per four weeks ..... <sub>4</sub>      \_\_\_\_\_

**B12x** Were you a member of a trade union?  
Yes ..... <sub>1</sub>      No..... <sub>2</sub>

**B13x** Were any of the following arrangements available to you (even if you did not take them up)?

- |   | Yes                                      | No                                       | Don't Know                            |
|---|--|--|---------------------------------------|
| 1. Working from home in normal working hours.....                   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 2. Flexible hours/Flexitime .....                                   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 3. Job sharing/week on-week off etc.....                            | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 4. Part-time hours.....   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 5. Term-time working.....   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 6. Time off for family reasons, e.g. to care for a sick child ..... | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |

**B14x** How often did you find that  
*Always    Often    Some    Hardly    Never*  
*times    Ever*

- (a) You had to work extra time, over and above the formal hours of the job to get through the work ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>
- (b) The demands of your work interfered with your home and family life ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>
- (c) Your job produced strain that made it difficult to fulfil family duties ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>

**B15x** Did your employer have a formal policy on equality in the workplace?  
Yes ..... <sub>1</sub>      Not applicable (self-employed) .. <sub>3</sub>  
No ..... <sub>2</sub>      Don't know ..... <sub>4</sub>

*If you have returned to work, don't forget to answer column Y. If you have not returned to work, please now go to **Section C** on the next page*

**Y. Job After Birth of Youngest Child (continued)**

**B10y** What is/was your usual pay in that job *before* any deductions for tax, social insurance, pension etc.?

Amount: € \_\_\_\_\_

**B11y** And what period does/did this amount cover? Please tick one box to indicate whether this amount is/was hourly, weekly, monthly, annually etc.

- Per hour ..... <sub>1</sub>      Per calendar Month .. <sub>5</sub>
- Per week ..... <sub>2</sub>      Per year..... <sub>6</sub>
- Per two weeks ..... <sub>3</sub>      Other (please specify).. <sub>7</sub>
- Per four weeks ..... <sub>4</sub>      \_\_\_\_\_

**B12y** Are/Were you a member of a trade union?  
Yes ..... <sub>1</sub>      No..... <sub>2</sub>

**B13y** Are/Were any of the following arrangements available to you (even if you have not taken them up)?

- |   | Yes                                      | No                                       | Don't Know                            |
|---|--|--|---------------------------------------|
| 1. Working from home in normal working hours.....                   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 2. Flexible hours/Flexitime .....                                   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 3. Job sharing/week on-week off etc. ....                           | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 4. Part-time hours.....   | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 5. Term-time working .....  | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |
| 6. Time off for family reasons, e.g. to care for a sick child ..... | <input type="checkbox"/> <sub>1</sub> .. | <input type="checkbox"/> <sub>2</sub> .. | <input type="checkbox"/> <sub>3</sub> |

**B14y** How often do/did you find that  
*Always    Often    Some    Hardly    Never*  
*times    Ever*

- (a) You have to work extra time, over and above the formal hours of the job to get through the work ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>
- (b) The demands of your work interfere with your home and family life ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>
- (c) Your job produces strain that makes it difficult to fulfil family duties ..... <sub>1</sub>..... <sub>2</sub>..... <sub>3</sub>..... <sub>4</sub>..... <sub>5</sub>

**B15y** Does/Did your employer have a formal policy on equality in the workplace?  
Yes ..... <sub>1</sub>      Not applicable (self-employed)..... <sub>3</sub>  
No ..... <sub>2</sub>      Don't know ..... <sub>4</sub>

**B16y** Overall how did the job you returned to after the birth of your child compare to the job you held during your pregnancy in terms of ...

- |  | More  | Same  | Less  | Not applicable (self-employed)        |
|--|---|---|---|---------------------------------------|
| Levels of responsibility .....         | <input type="checkbox"/> <sub>1</sub> ..... | <input type="checkbox"/> <sub>2</sub> ..... | <input type="checkbox"/> <sub>3</sub>       |                                       |
| Opportunities for promotion .....      | <input type="checkbox"/> <sub>1</sub> ..... | <input type="checkbox"/> <sub>2</sub> ..... | <input type="checkbox"/> <sub>3</sub> ..... | <input type="checkbox"/> <sub>4</sub> |
| Levels of control over your work ..... | <input type="checkbox"/> <sub>1</sub> ..... | <input type="checkbox"/> <sub>2</sub> ..... | <input type="checkbox"/> <sub>3</sub>       |                                       |
| Opportunities for training.....        | <input type="checkbox"/> <sub>1</sub> ..... | <input type="checkbox"/> <sub>2</sub> ..... | <input type="checkbox"/> <sub>3</sub>       |                                       |

**B17y** Are you still working in this job?  
Yes .... <sub>1</sub> → Go to **Section C**      No ..... <sub>2</sub>

**B18y** What is the main reason you left?

*(Please go to **Section C** on the next page)*

**SECTION C: More on your experiences related to your pregnancy with your youngest child**

*If you were self-employed in the last job you held during pregnancy, please skip to question C6*

- C1 Overall how supportive would you say your employer was towards you during your pregnancy?**  
 Very supportive ... <sub>1</sub> Supportive ..... <sub>2</sub> Neither supportive nor unsupportive .... <sub>3</sub> Unsupportive .... <sub>4</sub> Very unsupportive..... <sub>5</sub>
- C2 Overall how satisfied or dissatisfied were you with how you were treated at work when you were pregnant?**  
 Very Dissatisfied ... <sub>1</sub> Dissatisfied..... <sub>2</sub> Neither dissatisfied nor satisfied..... <sub>3</sub> Satisfied..... <sub>4</sub> Very Satisfied ..... <sub>5</sub>
- C3 During your pregnancy do you think you personally were treated unfairly at work as a result of your pregnancy?** Yes ..... <sub>1</sub> No ..... <sub>2</sub>
- C4 Do you think that during your pregnancy you were treated unfairly at work in any of the following ways as a result of your pregnancy? (Please tick all that apply.)**
1. I was given unsuitable work or workloads ..... <sub>1</sub>
  2. I was discouraged from attending antenatal classes during work time ..... <sub>2</sub>
  3. I received unpleasant comments from my employer/manager/colleagues ..... <sub>3</sub>
  4. My shift hours changed against my wishes ..... <sub>4</sub>
  5. I was unfairly criticised or disciplined about my performance at work ..... <sub>5</sub>
  6. I failed to gain a promotion I felt I deserved or was otherwise sidelined ..... <sub>6</sub>
  7. I was denied access to training that I would otherwise have received ..... <sub>7</sub>
  8. I had a reduction in my salary or bonus ..... <sub>8</sub>
  9. I received a pay rise or bonus that was less than my peers at work ..... <sub>9</sub>
  10. I was treated so poorly that I felt I had to leave. .... <sub>10</sub>
  11. I was made redundant or dismissed ..... <sub>11</sub>
  12. I was threatened with redundancy or dismissal ..... <sub>12</sub>
  13. Other (please specify) \_\_\_\_\_ <sub>13</sub>
  14. I was not treated unfairly in any of these ways ..... <sub>14</sub> → Go to C6
- C5 Did you go take any action in response to this treatment? Please tick all that apply.**
1. Yes, went to immediate supervisor/manager..... <sub>1</sub>
  2. Yes, went to Human Resources/Personnel Department ..... <sub>2</sub>
  3. Yes, went to Trade Union..... <sub>3</sub>
  4. Yes, went to a Solicitor ..... <sub>4</sub>
  5. Yes, made a formal complaint ..... <sub>5</sub>
  6. Other ..... <sub>6</sub>
  7. No, did not take any action..... <sub>7</sub>
- C6 Was your physical or mental health negatively affected by your employment during your pregnancy?**  
 Not at all <sub>1</sub> → Go to C8 Very little ..... <sub>2</sub> → Go to C8 Quite a bit... <sub>3</sub> A great deal ..... <sub>4</sub>
- C7 Please describe how your health was affected**

\_\_\_\_\_

\_\_\_\_\_
- C8 Did you take (or are you taking) any maternity leave in relation to your youngest child? (Do not include periods of sick leave or annual leave/holiday entitlement. Since 2007 the maximum entitlement is 26 weeks for paid and 16 weeks for unpaid maternity leave. If currently on leave please state how long you intend to take.)**
- Paid maternity leave** Yes ..... <sub>1</sub> → If yes, **How many weeks?** \_\_\_\_\_  
 No ..... <sub>2</sub>
- Unpaid maternity leave** Yes ..... <sub>1</sub> → If yes, **How many weeks?** \_\_\_\_\_  
 No ..... <sub>2</sub>
- C9 When you were on maternity leave for the birth of your child, would you say that your household was able to make ends meet financially?**  
 With great difficulty. <sub>1</sub> With difficulty .. <sub>2</sub> With some difficulty .. <sub>3</sub> Fairly easily .. <sub>4</sub> Easily .. <sub>5</sub> Very easily... <sub>6</sub>



**C10 Did you receive Maternity Benefit?** Yes ... 1 → Go to C12 No ... 2

**C11 Why did you not receive any maternity benefit?**

Stopped work too soon ..... 1

Did not pay enough social insurance contributions..... 2

Other reason (please specify) \_\_\_\_\_ 3

**C12 Did your employer provide any extra payments or top-up of maternity benefit?** (since 2007 the maximum Maternity Benefit payment is €280 per week. Some Employers 'top up' these payments)

Yes.....1 No ..... 2 Not applicable, self employed ..... 9 → Go to **Section E**, page 7

**C13 Thinking about your experience of maternity leave, which, if any of the following statements applied or currently apply to you. Please tick all that apply/applied**

1. I was encouraged by employer to start my maternity leave earlier than I would have liked. .... 1
2. I was encouraged to take time off or signed off on sick leave before I was ready to start my maternity leave ..... 2
3. My employer did not provide adequate cover during my maternity leave ..... 3
4. I am/was contacted too often with work-related queries or requests during my leave ..... 4
5. I felt/feel resentment from colleagues because no cover was provided while I was on leave ..... 5
6. I felt /feel pressurised by my employer to return to work sooner than I wanted to ..... 6
7. I returned (or will return) earlier than I would have liked to because of concern about losing my job ..... 7
8. I had a dispute with my employer about the job I would do on my return ..... 8
9. I felt I was sidelined or that I failed to gain a promotion I felt I deserved..... 9
10. I was dismissed or made redundant while I was on maternity leave..... 10
11. Other problems, please specify ( \_\_\_\_\_ ) . 11
12. I experienced no problems related to maternity leave..... 12

**C14 Did you request to take parental leave in relation to your youngest child?** By parental leave, we mean unpaid leave from employment up to a total of 14 weeks per child, which can be taken up until the child is age 8.

Yes..... 1 No... 2 → Go to **Section E** Not applicable, did not return to work ... 3 → Go to **Section E**

**C15 Was your request granted?**

Yes, fully 1 → Go to C16 Yes, but not as much 2 → Go to C16 No... 3 → Go to **Section E**  
 or in the form I wanted ..

**C16 If yes, how was your parental leave taken?**

In one continuous block ..... 1 →

Two separate blocks of at least 6 weeks ..... 2 →

Taken as reduced days or hours..... 3

**C17 How many weeks in total have you taken so far (for your youngest child)?**

\_\_\_\_\_ (weeks)

**Please now go to Section E**

**Section D: For women who were not employed at any time during pregnancy**

**D1 If you were not employed at any time during pregnancy with your youngest child, could you please tell us when you were last employed?**

\_\_\_\_\_ month \_\_\_\_\_ Year Never Employed ... 1 → Go to **Section E**

**D2 What was the main reason you stopped working at your previous job?** (Please tick all that apply).

1. My job was ended by employer (e.g. contract ended, job made redundant, employer out of business, dismissed)..... 1
2. My job was difficult to combine with family life (hours not suitable / too long, job not flexible enough, commute too long)..... 2
3. It was difficult to find or afford suitable childcare ..... 3
4. I wanted to look after my child(ren) myself ..... 4
5. I was no better off financially if I worked ..... 5
6. Other reasons (please specify) \_\_\_\_\_ 6

**Please now go to Section E**

**SECTION E: Some background on you and your family**

**And now, finally, we have some important questions about you and your family. As with all the information you provide, your answers will be completely confidential.**

**E1 We would like to check a few details about your household. Including yourself, how many people are there in your household?** Please count people who use the same living room or share at least one meal per day.  
Total number of people in household \_\_\_\_\_ (include yourself, children and other adults)

**E2 Please list the age of any of your own or your partner's children who are living with you (including foster children and step-children). Please list their ages, starting from the oldest to youngest.**  
[Note: the initials are for your convenience only and will not be recorded]

Initials of child under 18	Age

Initials of child under 18	Age

Initials of child under 18	Age

**E3 Please think about your pregnancy with your youngest child. Was this at any stage emotionally traumatic or did it represent a personal crisis for you?**

Yes.....  1 No.....  1 → Go to E7

**E4 Could I ask you to briefly explain why you would describe this pregnancy as emotionally traumatic or as a personal crisis?** [Please tick all that apply]

- 1. I had given birth recently .....  1
- 2. My family was complete.....  2
- 3. I was too young .....  3
- 4. I was not married.....  4
- 5. Relationship difficulties .....  5
- 6. Relationship new / not steady .....  6
- 7. Pregnancy not planned .....  7
- 8. Pregnancy not wanted .....  8
- 9. Financial reasons .....  9
- 10. Medical difficulties.....  10
- 11. Work commitments/plans .....  11
- 12. School/college commitment/plans .....  12
- 13. Family reaction (or fear of family reaction) .....  13
- 14. Reaction of employer/co-workers (or fear of reaction)  14
- 15. Other (please specify) \_\_\_\_\_  
.....  15

**E5 And which of these would you say were the three main reasons?**

(Please record number from the list above e.g. if reason number 13 was most important, write '13' in beside 'Most important')

**Most Important** \_\_\_\_\_ **Second Most Important** \_\_\_\_\_ **Third Most Important** \_\_\_\_\_

**E6 Did these difficulties arise from the beginning of the pregnancy or did the difficulties develop during the pregnancy due to a change in circumstances**

From beginning ...  1 During pregnancy ...  2

**E7 What was your age at your last birthday** \_\_\_\_\_ years

**E8 Which of the following best describes the highest level of education which you have completed to date:**

- Primary level .....  1 PLC, Certificate or Diploma .....  5
- Some secondary (no exam) .....  2 Third level Degree .....  6
- Junior/Inter/Group certificate/lower second level .....  3 Post-graduate level qualification .....  7
- Leaving Certificate/upper second level.....  4 Other (please specify) \_\_\_\_\_ .  8

**E9 In addition to this education, have you completed any technical or vocational training course of at least one years duration?** Yes...  1 No...  2 → Go to E11

**E10 If Yes , what qualification did you receive?**

- NFQ level 4 or 5; FETAC Level 4/5 Cert; NCVA level1/2; FAS Specific Skills .....  1
- Completed Apprenticeship/ Advanced Certificate/Higher Certificate.....  2
- Other (please specify) \_\_\_\_\_ .....  3

**E11 What is your nationality?** \_\_\_\_\_

**E12 What is your ethnic or cultural background?**

Please choose ONE section from A to D then tick the appropriate box.

- A. White
  - Irish .....  1
  - Irish Traveller.....  2
  - Any other White background .....  3
- B. Black or Black Irish
  - African.....  4
  - Any other Black background.....  5
- C. Asian or Asian Irish
  - Chinese .....  6
  - Any other Asian background .....  7
- D. Other, including mixed background.....  8

**E13 What is your current legal marital status?**

- Married .....  1
- Single and never married .....  2
- Separated/Divorced .....  3
- Widowed .....  4

**E14 Are you currently living with a partner?**

Yes, with husband.....  1      Yes, with partner.....  2      No.....  3 → Go to E17

**E15 What is your husband's or partner's employment status?**

- Self employed (including farmer) .....  1
- Employee.....  2
- Unemployed .....  3
- Unable to work due to sickness/disability .....  4
- Full-time study/training.....  5
- Retired .....  6
- Other (please specify) .....  7

**E16 What is your partner's main occupation? If your partner is not currently at work, please describe your partner's usual occupation. Please describe as fully as possible.**

**E17 In general would you say your health is...?**

- Excellent.....  1
- Very good.....  2
- Good.....  3
- Fair .....  4
- Poor.....  5

**E18 Is your daily activity limited by a long term illness, health problem or disability?**

Yes .....  1      No.....  1

**E19 Which of the following best describes the area where you live?**

- Dublin or suburbs .....  1
- Other City .....  2
- Small Town.....  3
- Village .....  4
- Open countryside .....  5

**Thank you very much for completing this questionnaire.**  
**Please be sure to post as soon as possible to be included in the An Post €1,000 prize draw!**  
**No postage is needed – use the pre-paid envelope**

## References

- Adams, L., McAndrew, F. and Winterbotham, M. (2005) *Pregnancy Discrimination at Work: A Survey of Women*, Working Paper Series No. 24, Manchester: Equal Opportunities Commission
- Banks, J. and Russell, H. (2011) *Pregnancy Discrimination in the Workplace: Legal Framework and Review of Legal Decisions 1999 to 2008*, Dublin: HSE Crisis Pregnancy Programme and the Equality Authority
- Blank, R.M., Dabady, M. and Citro, C.F. (eds.) (2004) *Measuring Racial Discrimination*, Washington DC: The National Academies Press
- Bonzini, M., Coggan, D. and Palmer, K.T. (2007) 'Risk of prematurity, low birthweight and pre-eclampsia in relation to working hours and physical activities: a systematic review', *Occupational and Environmental Medicine*, vol. 64, pp. 228–243
- Bridges, J.S. (1989) 'Sex differences in occupational values', *Sex Roles*, vol. 20, pp. 205–211
- Callender, C., Millward, N., Lissenburgh, S. and Forth, J. (1997) *Maternity Rights and Benefits in Britain 1996*, Research Report No. 61, London: Department of Social Security
- Crisis Pregnancy Agency (2007) *Research on Crisis Pregnancy, Parenting and Employment Policy*, vol. 1, no. 4
- Davis, S., Neathey, F., Regan, J. and Willison, R. (2005) *Pregnancy Discrimination at Work: A Qualitative Study*, Manchester: Equal Opportunities Commission
- Dex, S. and Ward, K. (2007) *Parental Care and Employment in Early Childhood*, Manchester: Equal Opportunities Commission
- DJELR (2002) *Report of the Working Group on the Review of the Parental Leave Act 1998*, Dublin: Stationery Office
- Drew, E., Humphreys, P. and Murphy, C. (2003) *Off the Treadmill: Achieving Work Life Balance*, Dublin: National Framework Committee for the Development of Family Friendly Policies
- Economic Journal, The* (2005) special issue: 'Parental leave, early maternal employment and child outcomes', vol. 115, no. 501
- EFILWC (2007a) *Parental Leave in European Companies*, Dublin: European Foundation for the Improvement of Living and Working Conditions
- EFILWC (2007b) *Work–Life Balance – Solving the Dilemma*, Dublin: European Foundation for the Improvement of Living and Working Conditions
- England, P. (2005) 'Gender inequality in labour markets: the role of motherhood and segregation,' *Social Politics*, vol. 12, no. 2, pp. 264–288
- EOC (2005) *Greater Expectations: Final Report of the EOC's Investigation into Discrimination Against New and Expectant Mothers in the Workplace*, Manchester: Equal Opportunities Commission
- Equality Authority (2010) *Your Maternity Leave Rights Explained: Guide to the Maternity Protection Acts 1994–2004*, Roscrea: Equality Authority; available online at: [www.equality.ie/index.asp?locID=106&docID=53](http://www.equality.ie/index.asp?locID=106&docID=53) (accessed April 2010)
- European Agency for Health and Safety at Work (2003) *Gender Issues in Safety and Health at Work: A Review*, Luxembourg: Office for Official Publications of the European Communities; available online at: <http://osha.europa.eu/en/publications/reports/209> (last accessed May 2011)

- European Commission (2000) 'On the guidelines on the assessment of the chemical, physical and biological agents and industrial processes considered hazardous for the safety or health of pregnant workers and workers who have recently given birth or are breastfeeding (Council Directive 92/85/EEC)', Communication from the Commission, COM(2000) 466 final/2, Brussels
- Evans, J.M. (2001) *Firms' Contribution to the Reconciliation Between Work and Family Life*, OECD Occasional Papers No. 48, Labour Market and Social Policy, Paris: Organisation for Economic Co-operation and Development (OECD)
- Fine-Davis, M., Fagnani, J., Giovannini, D., Hojgaard, L. and Clarke, H. (2004) *Fathers and Mothers: Dilemmas of the Work–Life Balance*, Dordrecht: Kluwer
- Fine-Davis, M., McCarthy, M., Edge, G. and O'Dwyer, C. (2005) *Work–Life Balance and Social Inclusion in Ireland: Results of a Nationwide Survey*, Dublin: National Flexi-Work Partnership
- Framework Committee for Equal Opportunities at the Level of the Enterprise (2002) *Promoting Equality of Opportunity in Small and Medium Sized Enterprises*, Dublin: Equality Authority, IBEC and ICTU
- Glass, J. and Estes, S. (1997) 'The family responsive workplace', *Annual Review of Sociology*, vol. 23, no. 1, pp. 289–313
- Gregory, J. (2004) *A Review of Employment Tribunal Decisions from May 2002 to December 2003*, Manchester: Equal Opportunities Commission
- Hakim, C. (2002) 'Lifestyle preferences as determinants of women's differentiated labor market careers', *Work and Occupations*, vol. 29, pp. 428–459
- Hogarth, T. and Elias, P. (2005) *Pregnancy Discrimination at Work: Modelling the Costs*, Working Paper Series No. 39, Manchester: Equal Opportunities Commission
- HREOC (1999) *Pregnant and Productive: It's a Right Not a Privilege to Work While Pregnant*, Sydney: Human Rights and Equal Opportunities Commission
- HSA (2007) *Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007: Chapter 2 of Part 6: Protection of Pregnant, Post Natal and Breastfeeding Employees*, Dublin: Health and Safety Authority
- HSE (2003) *A Guide for New and Expectant Mothers Who Work*, London: Health and Safety Executive
- Humphreys, P.C., Fleming, S. and O'Donnell, O. (2000) *Balancing Work and Family Life: The Role of Flexible Working Arrangements*, Dublin: Department of Social, Community and Family Affairs
- James, G. (2004) *Pregnancy Discrimination at Work: A Review*, Manchester: Equal Opportunities Commission; available online at: <http://hesa.etui-rehs.org/uk/dossiers/files/pregnancydiscriminationatwork.pdf> (accessed April 2009)
- Jonsson, J.O. and Mills, C. (2001) 'The sooner the better? Parental leave duration and women's occupational career', in J.O. Jonsson and C. Mills (eds.), *From Cradle to Grave: Life-Course Change in Modern Sweden*, Durham: Sociology Press
- La Valle, I., Clery, E. and Huerta, M.C. (2008) *Maternity Rights and Mothers' Employment Decisions*, Department of Work and Pensions Research Report No. 496, London: TSO; available online at: <http://research.dwp.gov.uk/asd/asd5/rports2007-2008/rrep496.pdf> (last accessed May 2011)
- Macran, S., Joshi, H. and Dex, S. (1996) 'Employment after childbearing: a survival analysis', *Work, Employment and Society*, vol. 10, no. 2, pp. 273–296
- McCulloch, A. and Dex, S. (2001) 'Married women's employment patterns in Britain', in H.-P. Blossfeld and S. Drobnič (eds.), *Careers of Couples in Contemporary Societies. From Male Breadwinner to Dual Earner Families*, Oxford: Oxford University Press

- McDonald, P. and Dear, K. (2006) 'Pregnancy discrimination in Queensland: internal labour market issues and progress to formal redress', in J. Bailey, K. Broadbent, L. Edwards, P. McDonald and G. Whitehouse (eds.), *Our Work . . . Our Lives. Proceedings of the National Conference on Women and Industrial Relations, 12–14 July 2006, Queensland, Australia*, Brisbane: Queensland Working Women's Service Inc. and Griffith University, pp. 124–136
- McRae, S. (1993) 'Returning to work after childbirth: opportunities and inequalities', *European Sociological Review*, vol. 9, no. 2, pp. 125–138
- Moyle, S. (2002) 'Pregnancy in the workplace: employer obligations to pregnant employees', speech delivered at the NSW Young Lawyers, Sydney, 22 October
- Mozurekewich, E.L., Luke, B., Anvi, M. and Wolf, F.M. (2000) 'Work conditions and adverse pregnancy outcomes', *Obstetrics & Gynecology*, vol. 95, no. 4, pp. 623–635
- Narcy, M., Lanfranchi, J. and Meurs, D. (2009) 'Do women choose to work in the public and nonprofit sectors? Empirical evidence from a French national survey', Centre d'études de l'emploi/Centre for Employment Studies Working Paper No. 111-2, January
- NESF (2005) *Early Childhood Care and Education*, Report No. 31, Dublin: National Economic and Social Forum
- Niedhammer, I., O'Mahony, D., Daly, S., Morrison, J.J. and Kelleher, C.C. (2009) 'Occupational predictors of pregnancy outcomes in Irish working women in the Lifeways cohort', *BJOG: An International Journal of Obstetrics and Gynaecology*, vol. 116, no. 7, pp. 943–952
- NWCI (2005) *An Accessible Model of Childcare*, Dublin: National Women's Council of Ireland
- O'Connell, P.J., Russell, H., Watson, D. and Byrne, D. (2010) *The Changing Workplace in 2009: The NCPP-ESRI National Workplace Survey of Employees*, Dublin National Economic and Social Council
- Okamoto, D. and England, P. (1999) 'Is there supply side occupational sex segregation?', *Sociological Perspectives*, vol. 42, no. 4, pp. 557–582
- Ondrich, J.C., Spiess, K. and Yang, Q. (1996) 'Barefoot and in a German kitchen: federal parental leave and benefit policy and the return to work after childbirth in Germany', *Journal of Population Economics*, vol. 9, pp. 247–266
- Redmond, J., Valiulis, M. and Drew, E. (2006) *Literature Review of Issues Related to Work–Life Balance, Workplace Culture and Maternity/Childcare Issues*, Dublin: Crisis Pregnancy Agency
- Rundle, K., Leigh, C., McGee, H. and Layte, R. (2004) *Irish Contraception and Crisis Pregnancy [ICCP] Study, A Survey of the General Population*, Report No. 7, Dublin: Crisis Pregnancy Agency
- Russell, H. and Banks, J. (2011) *Pregnancy and Employment: A Literature Review*, Dublin: HSE Crisis Pregnancy Programme and the Equality Authority
- Russell, H. and O'Connell, P.J. (2004) 'Women returning to employment, education and training in Ireland: An analysis of transitions', *The Economic and Social Review*, vol. 35, no. 1, pp. 1–25
- Russell, H., Smyth, E., Lyons, M. and O'Connell, P.J. (2002) *'Getting out of the House': Women Returning to Employment, Education and Training*, Dublin: Liffey Press
- Russell, H., Halpin, B., Strandh, M. and Zielfe, A. (2006) 'Comparing the labour market effects of childbirth in Ireland, Sweden, the UK and Germany', ESRI Working Paper No. 170, Dublin: Economic and Social Research Institute; available online at: [www.esri.ie/pdf/WP170.pdf](http://www.esri.ie/pdf/WP170.pdf) (last accessed May 2011)

Russell, H., Quinn, E., King-O'Riain, R. and McGinnity, F. (2008) *The Experience of Discrimination in Ireland: Analysis of the QNHS Equality Module*, Dublin: Equality Authority and Economic and Social Research Institute

Saurel-Cubizolles, M.-J., Romito, P., Escriba-Aguir, V., Lelong, N., Mas Pons, R. and Ancel, P.-Y. (1999) 'Returning to work after childbirth in France, Italy, and Spain', *European Sociological Review*, vol. 15, pp. 179–194

Smeaton, D. and Marsh, A. (2006) *Maternity and Paternity Rights and Benefits: Survey of Parents 2005*, DTI Research Report No. 50, London: Department of Trade and Industry (DTI)

Start Strong (2009) *Children 2020: Giving Children a Strong Start in Life*, Dublin: Start Strong

UNICEF (2008) *The Child Care Transition, Innocenti Report Card 8*, Florence: UNICEF Innocenti Research Centre

Waldfogel, J. (2006), *What Children Need*, Cambridge MA: Harvard University Press

Waldfogel, J., Higuchi, Y. and Abe, M. (1999) 'Family leave policies and women's retention after childbirth: evidence from the United States, Britain and Japan', *Journal of Population Economics*, vol. 12, pp. 523–545

Young, V. and Morrell, J. (2005) *Pregnancy Discrimination at Work: A Survey of Employers*, Working Paper Series No. 20, Manchester: Equal Opportunities Commission

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ISBN: 978-1-905199-29-7

