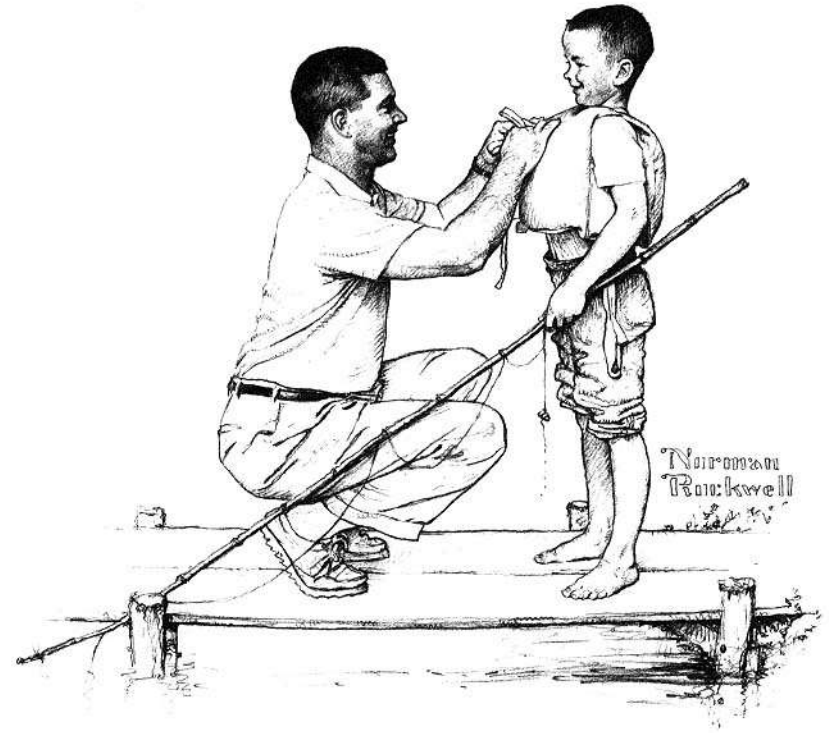




What would work  
(and care) look like  
if it was more equal?  
*/s there a sweet spot?*



Lyndall Strazdins  
Families Australia Policy Forum 2017

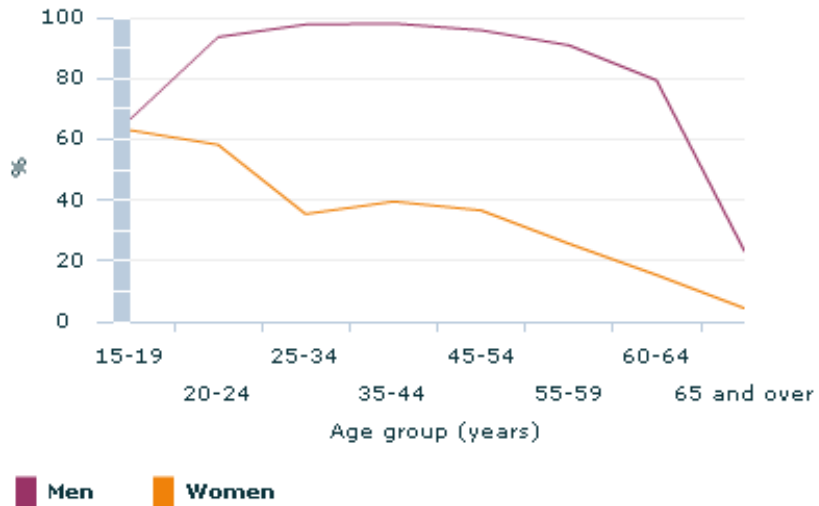
# Australian families now



# Labour force then and now

Age specific labour force participation rates(a)

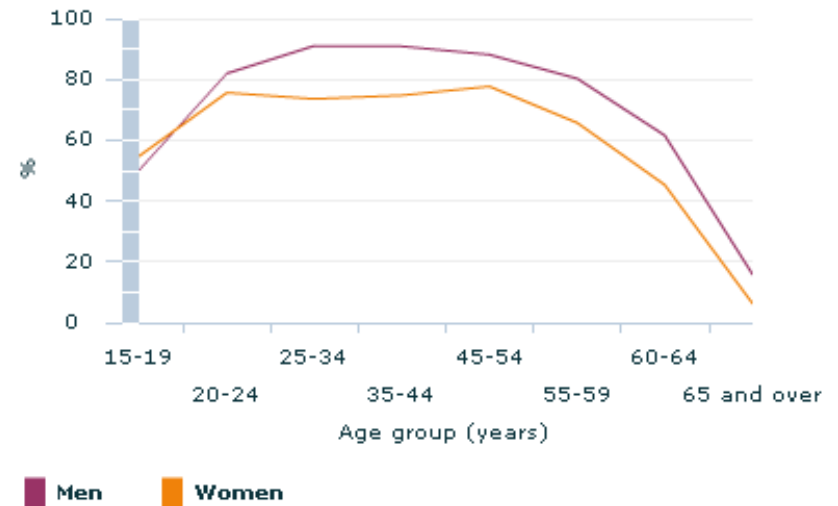
1966



1966

Age specific labour force participation rates(a)

2011



2011

## Its unequal

Women as skilled as men, but

- Less likely to be employed
- Earn 18% less or \$4.10 less hour for hour
- Earn \$700,000 less over their lifetime
- Lower superannuation
- Greater risk for poverty

# Is the answer more work? (for women)



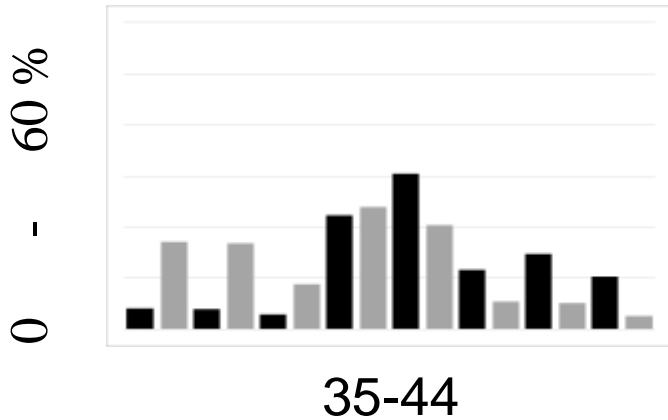
# The hour-glass ceiling

- Ceiling on pay, career choice & advancement
- Time, not merit based
- Pushes women from long hour to shorter hour jobs
- Creates a two tiered labour market, locks in pay inequality

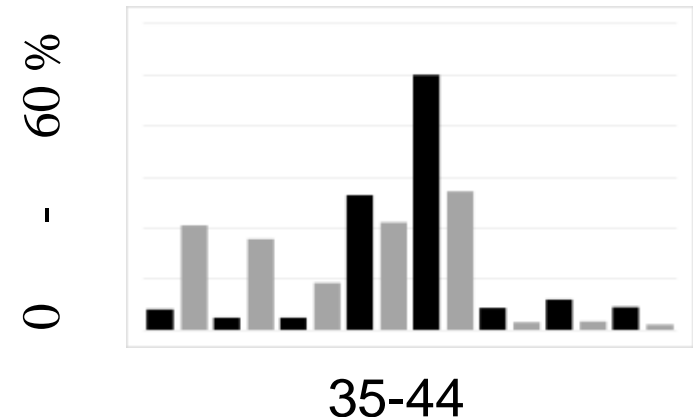


# Gender distribution of work hours OECD 2007

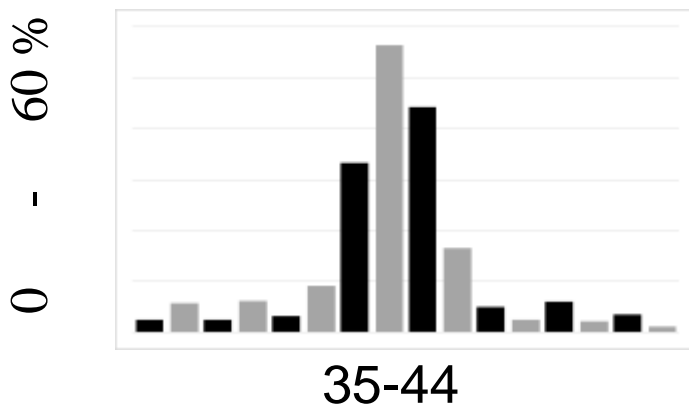
## Australia



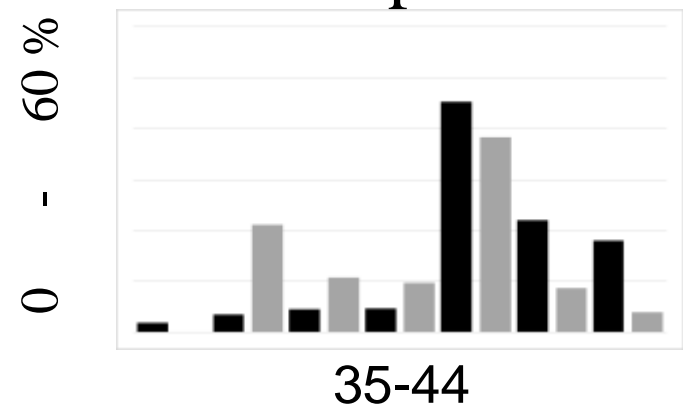
## Germany



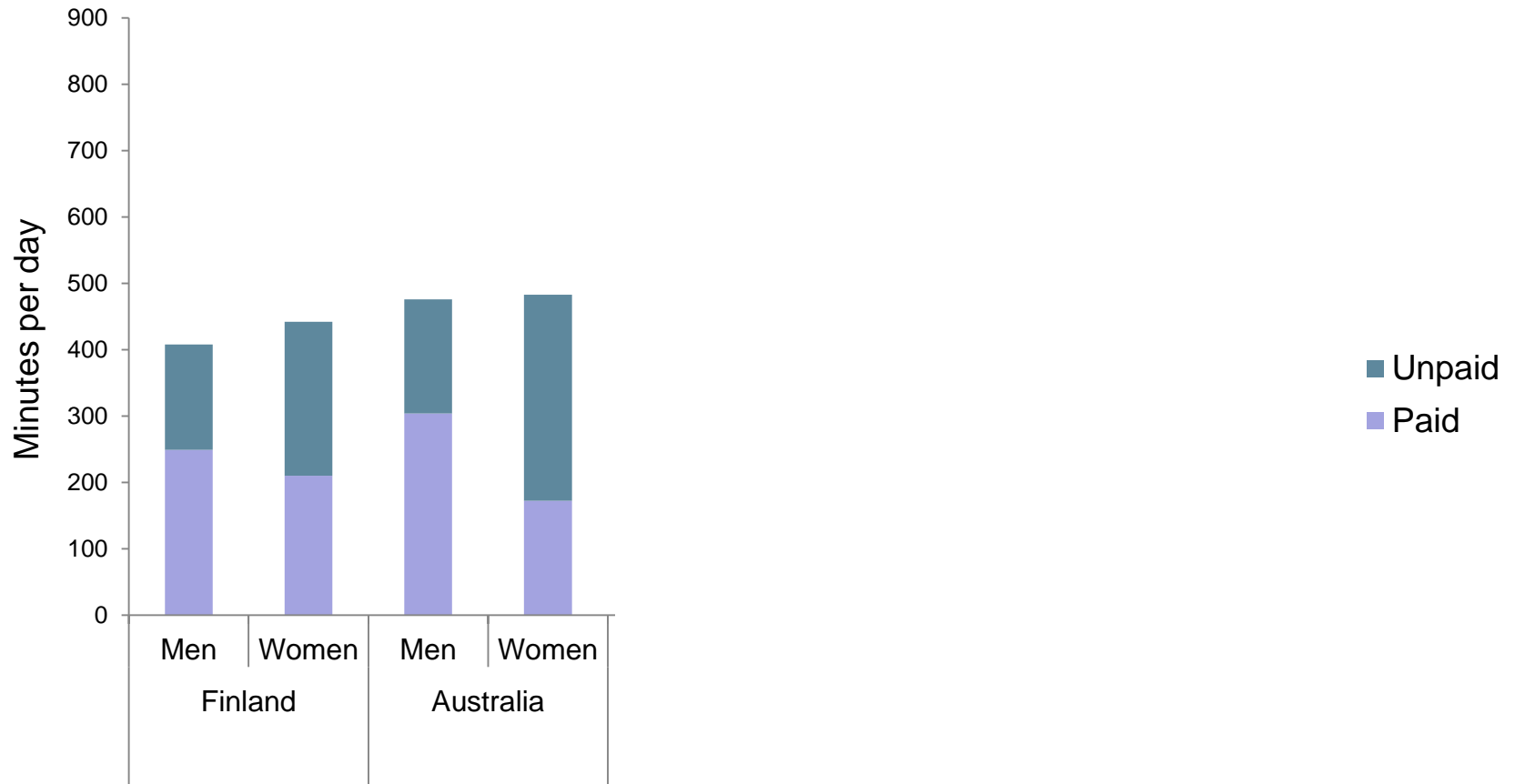
## Finland



## Japan



## Minutes per day, paid and unpaid work (weekdays + weekends) Women and men aged 15-64, Finland and Australia

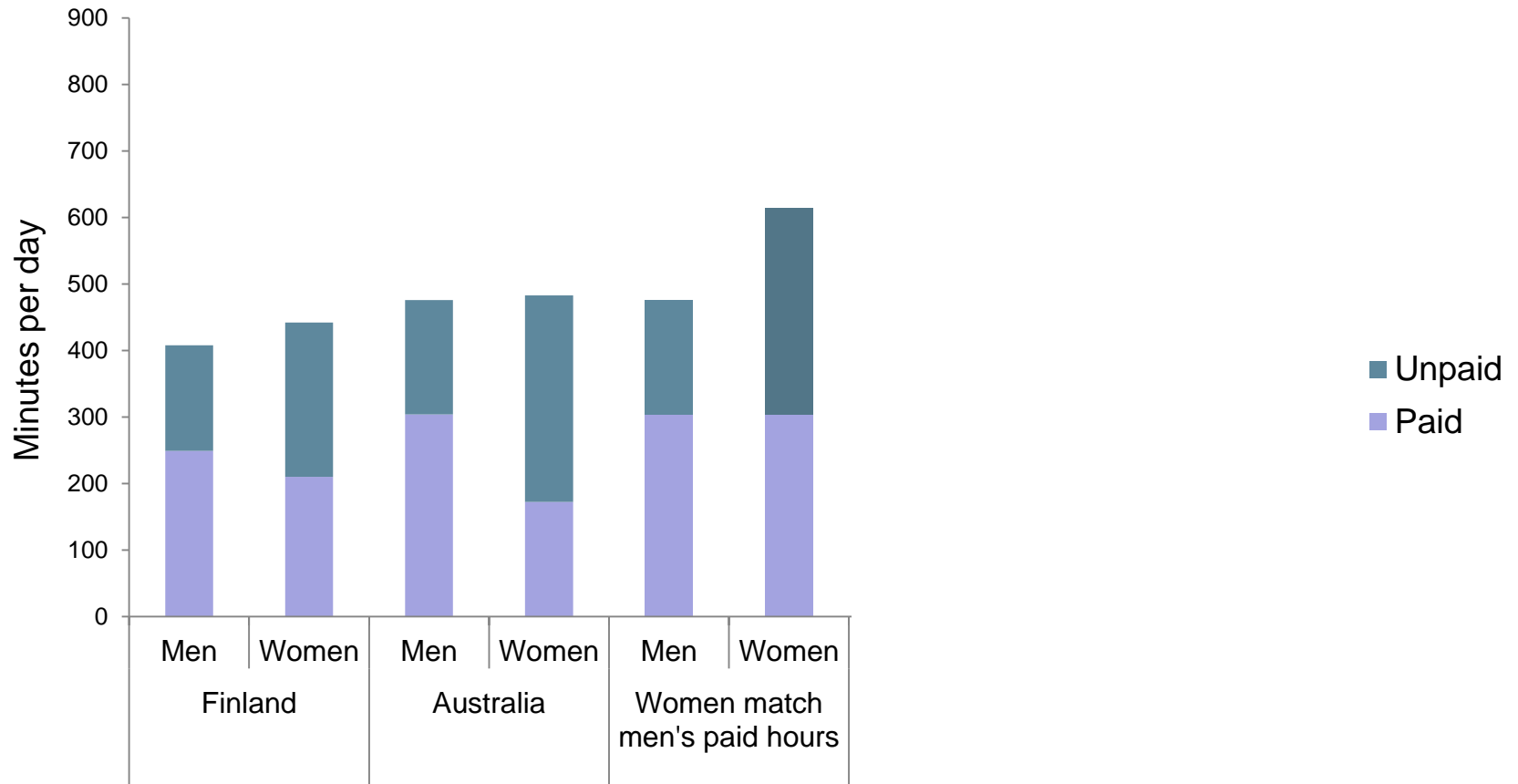


Source: OECD 2015

<http://www.oecd.org/gender/data/balancingpaidworkunpaidworkandleisure.htm>



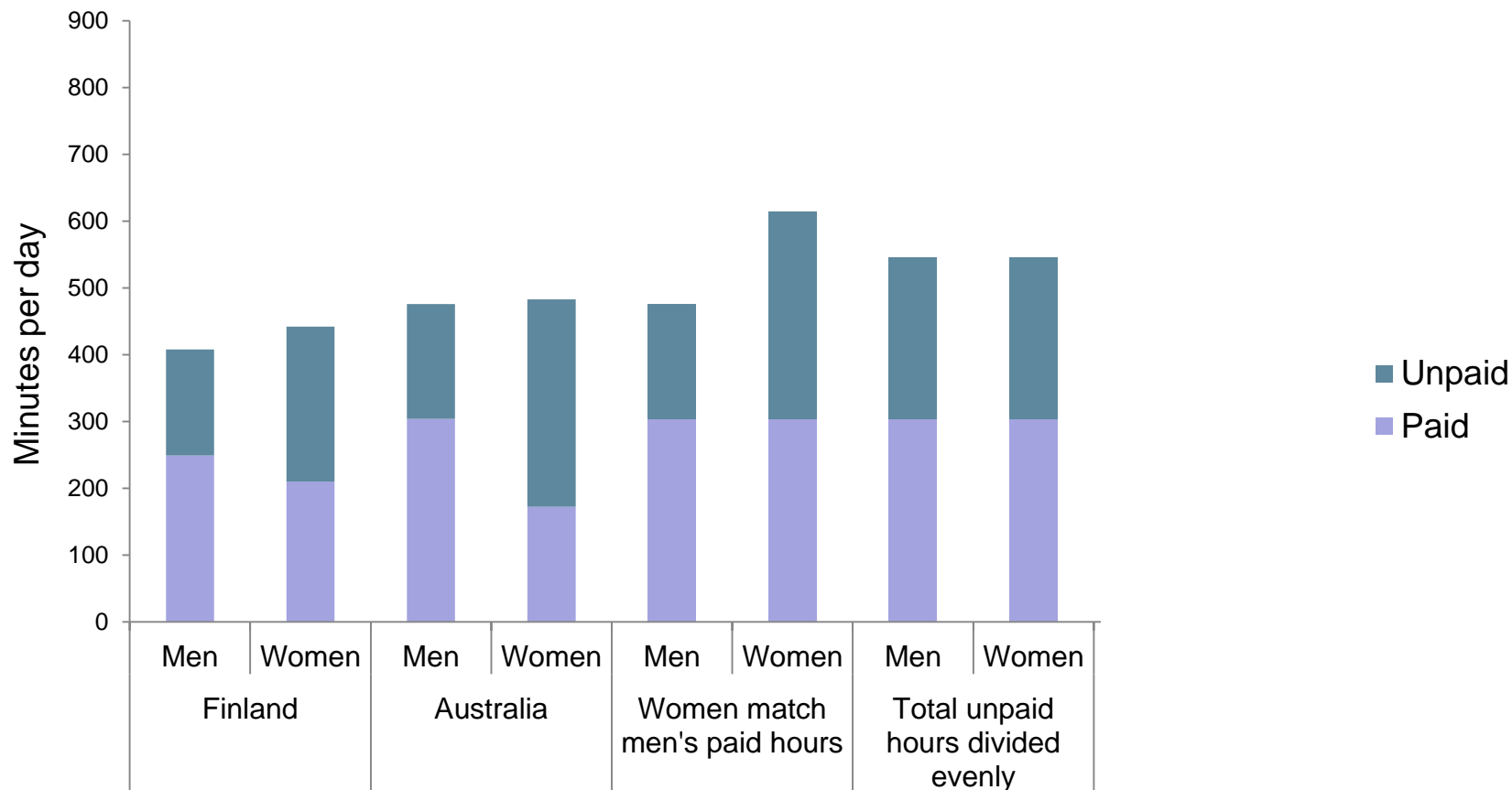
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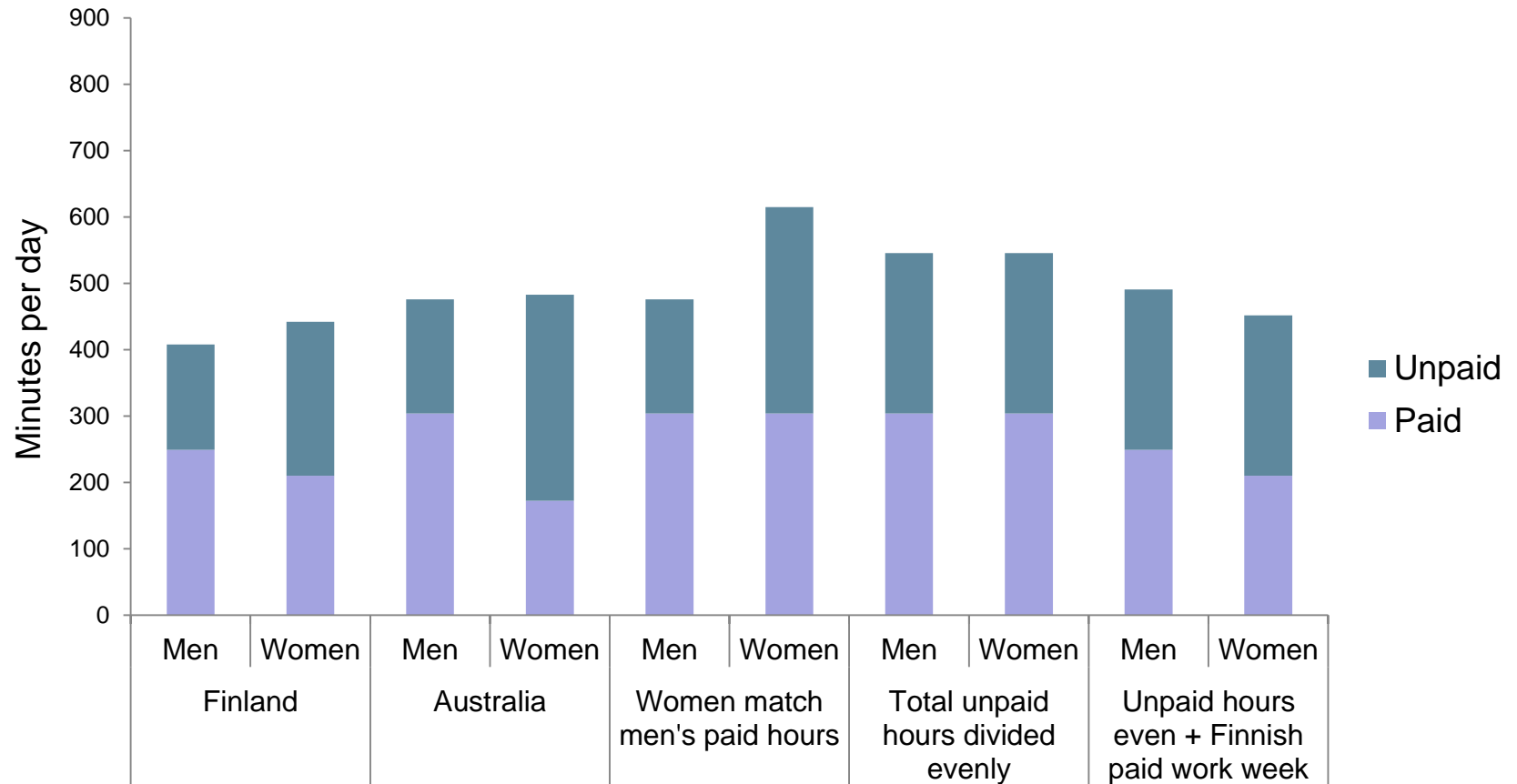
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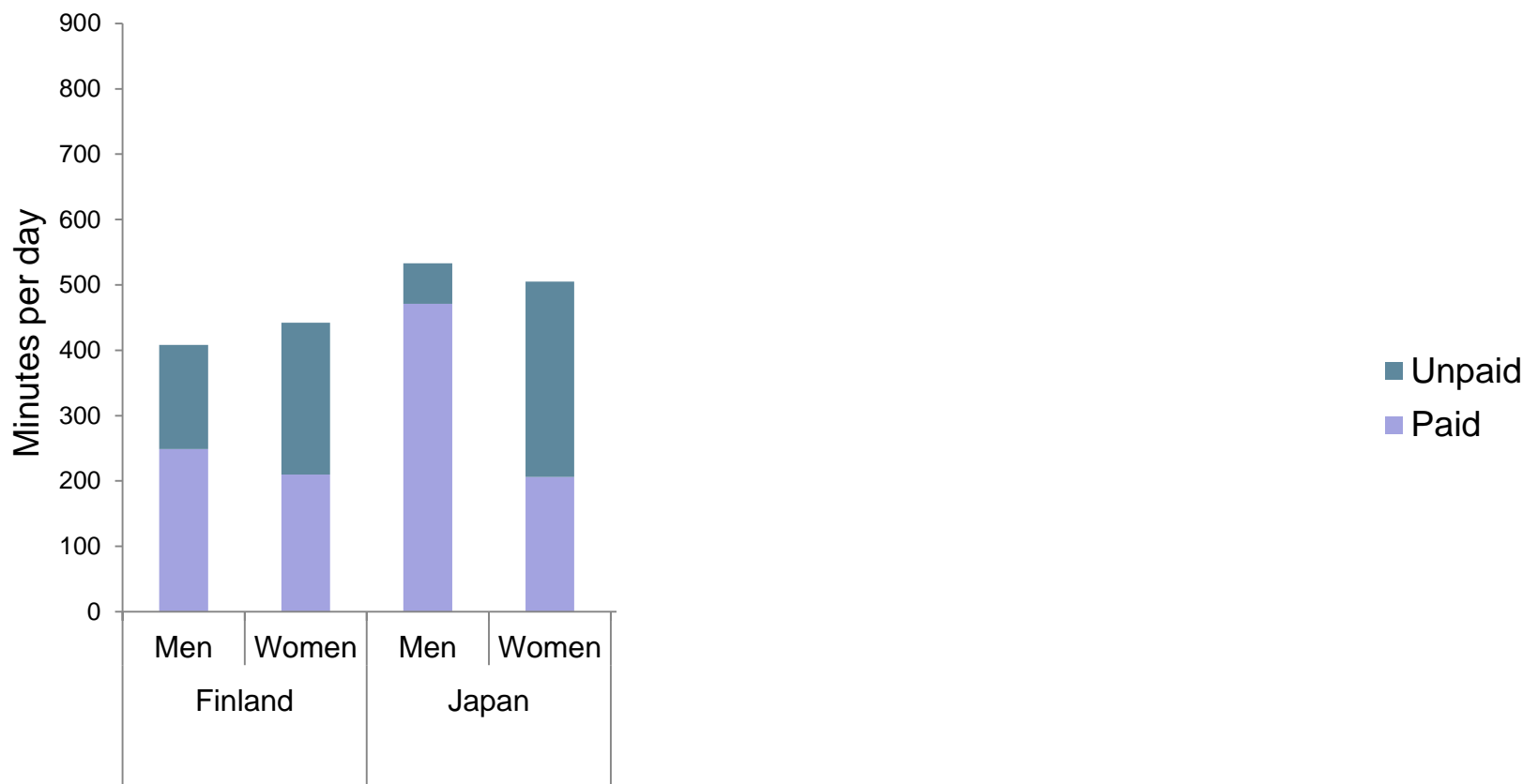
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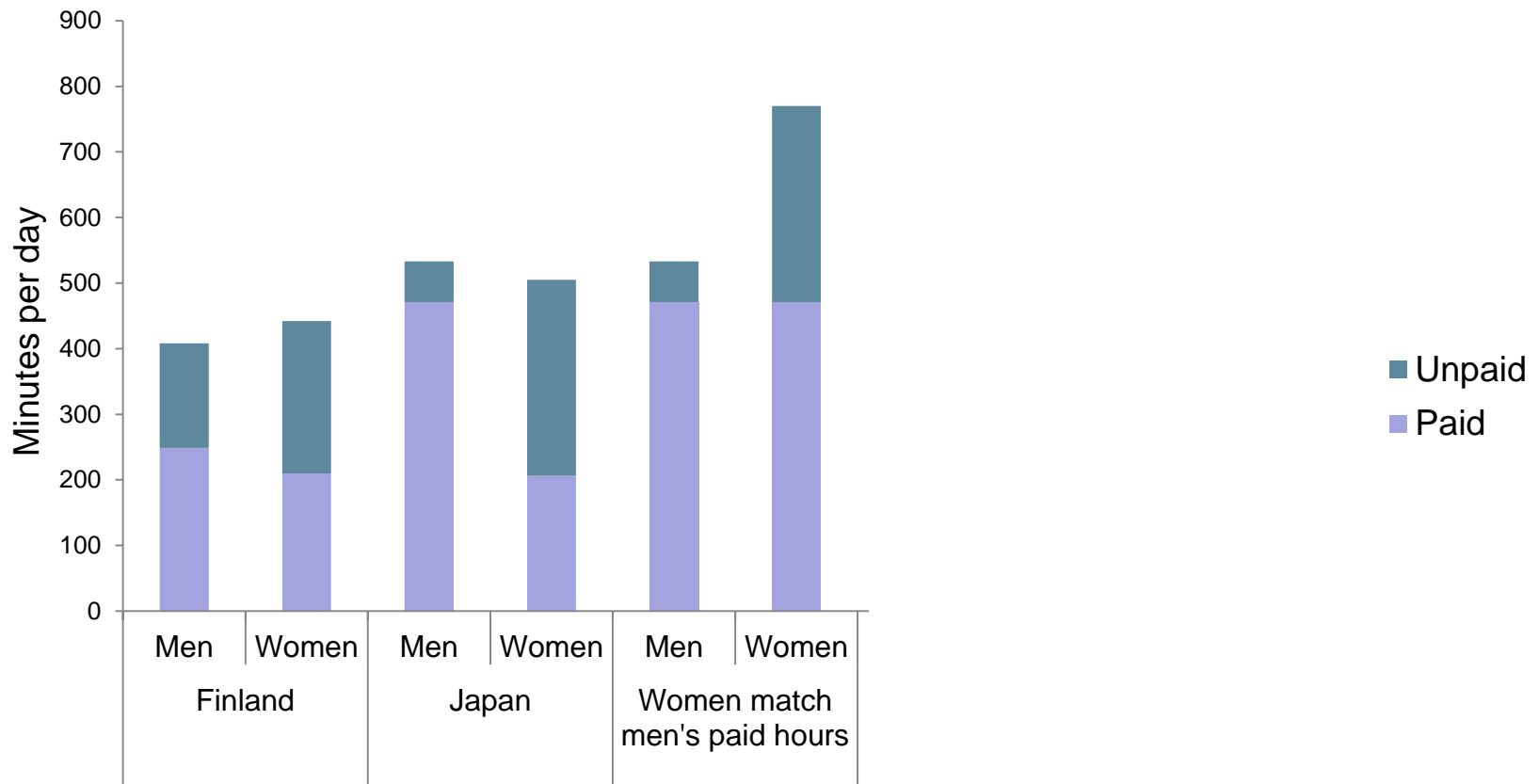
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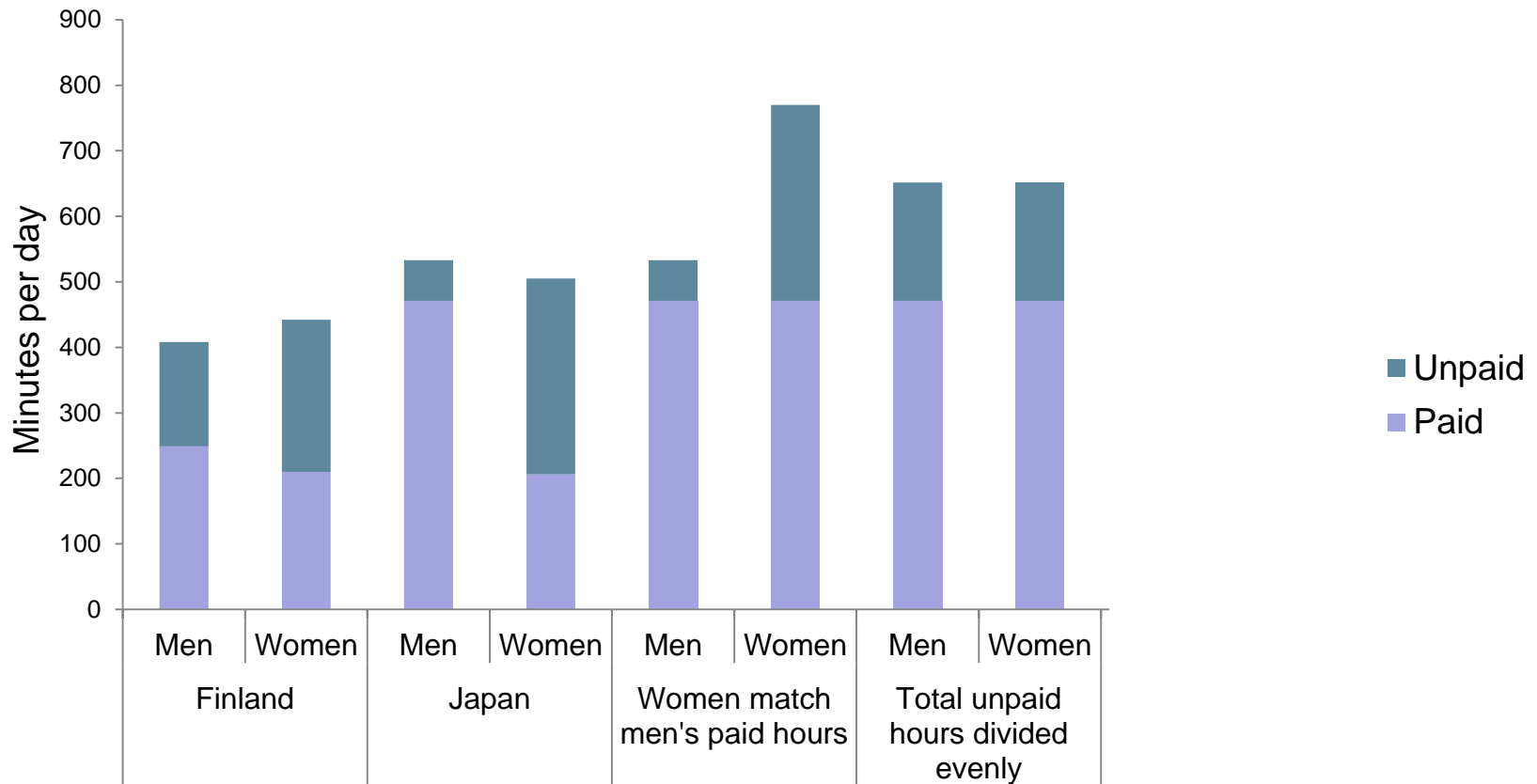
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Source: OECD 2015

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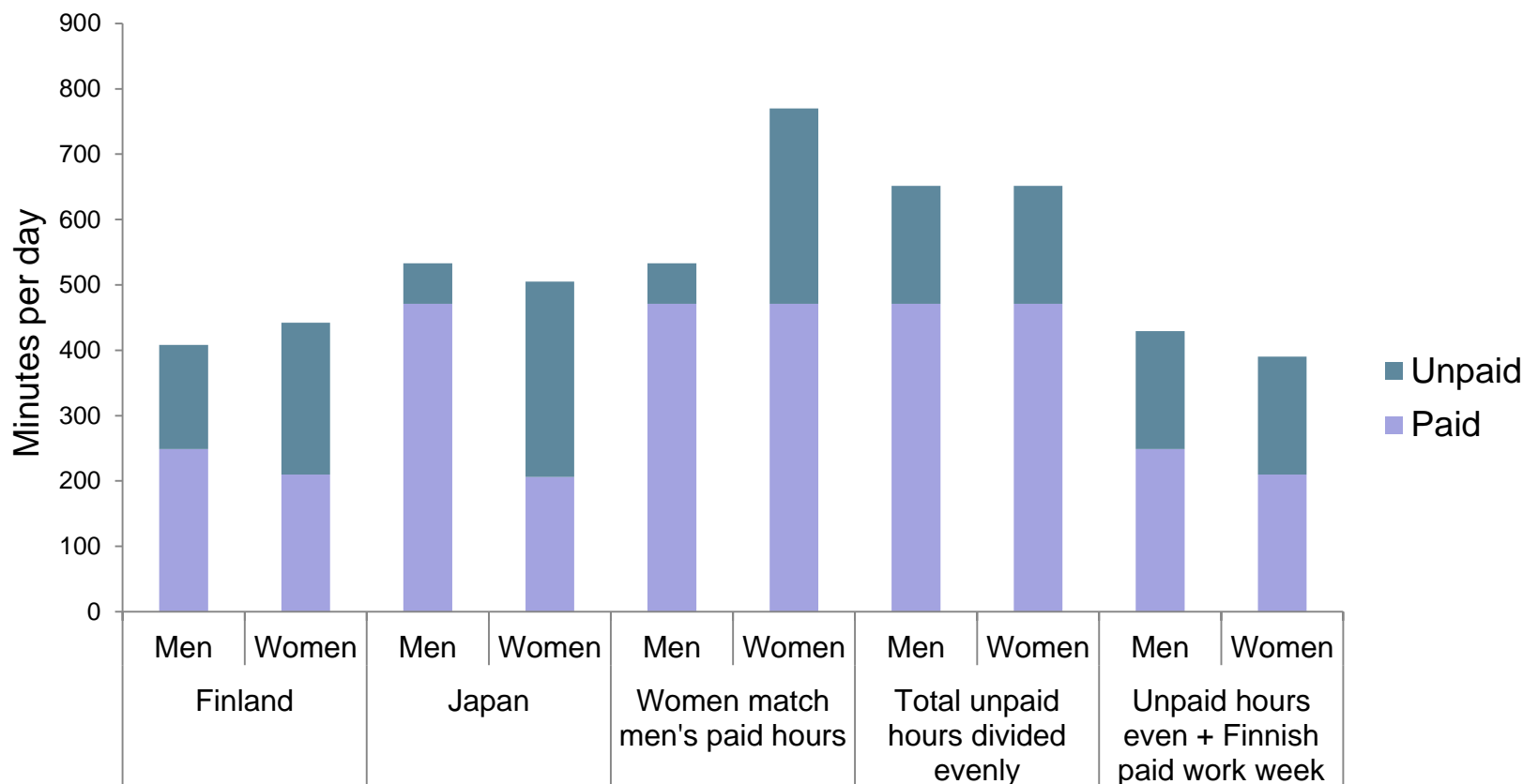
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Source: OECD 2015

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# Questions for family policy

Do we want equality, do we want to boost the economy, could we have both?

Should women work like men?

Can they?

What about care?

What about health?





# New research

Led by Huong Dinh,  
with Jenny Welsh.  
First to consider the  
importance of  
gendered resources  
and time constraints  
outside of work for  
mental health and  
for equality


Social Science & Medicine 176 (2017) 42–51




Contents lists available at ScienceDirect

**Social Science & Medicine**

Journal homepage: [www.elsevier.com/locate/socscimed](http://www.elsevier.com/locate/socscimed)



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**Hour-glass ceilings: Work-hour thresholds, gendered health inequities** 

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**ARTICLE INFO**

**Article history:**  
 Received 5 August 2016  
 Received in revised form 15 January 2017  
 Accepted 17 January 2017  
 Available online 18 January 2017

**Keywords:**  
 Australia  
 Endogeneity  
 Gender inequality  
 Mental health  
 Social determinants of health  
 Work and family  
 Work hours

**ABSTRACT**

Long work hours erode health, which the setting of maximum weekly hours aims to avert. This 48-h limit, and the evidence base to support it, has evolved from a workforce that was largely male, whose time in the labour force was enabled by women's domestic work and care giving. The gender composition of the workforce has now changed, and many women (as well as some men) combine care-giving with paid work, a change viewed as fundamental for gender equality. However, it raises questions on the suitability of the work time limit and the extent it is protective of health. We estimate work-hour-mental health thresholds, testing if they vary for men and women due to gendered workloads and constraints on and off the job. Using six waves of data from a nationally representative sample of Australian adults (24–65 years), surveyed in the Household Income Labour Dynamics of Australia Survey (N = 3828 men, 4062 women), our study uses a longitudinal, simultaneous equation approach to address endogeneity. Averaging over the sample, we find an overall threshold of 39 h per week beyond which mental health declines. Separate curves then estimate thresholds for men and women, by high or low care and domestic time constraints, using stratified and pooled samples. We find gendered work-hour health limits (43.5 for men, 38 for women) which widen further once differences in resources on and off the job are considered. Only when time is 'unencumbered' and similar time constraints and contexts are assumed, do gender gaps narrow and thresholds approximate the 48-h limit. Our study reveals limits to contemporary work-hour regulation which may be systematically disadvantaging women's health.

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**1. Introduction**

In 1930 the International Labour Organisation (ILO) set the maximum working week to 48 h. This remains the current hour limit beyond which, according to the ILO, no worker should exceed because of the potential health and safety risk (Lee et al., 2007; Spurgeon, 2003). These limits were set for a workforce that was once largely male, at a time when gender divisions were normative and paid work and caregiving separate endeavours. Now, in developed economies such as Australia, nearly two thirds of working-age women are in the labour force (one third in 1961, one fifth in 1947 Strachan and Burgess, 2002; Wilkins and Wooden, 2014). Work time expectations are also changing. Economies are digital, business communicates globally, and paid work can and does happen outside a standard eight hour day. For large segments of the labour force this is extending the working week, even while the gender composition is changing.

It is therefore not known if the maximum hour limit protects women's health, or the health of any employee who combines employment with caregiving. Men work more hours than women do in most developed countries (10 h per week averaged over 18 OECD countries, Landivar, 2015), but are able to do so because of their unequal involvement in child care or domestic work (OECD, 2016). Such inequalities in non-work time drive inequalities in the labor market, creating gender gaps in opportunities, income, participation and pay, what we term the hour-glass ceiling (Cha, 2010; Cha and Weeden, 2014; Jacobs and Gerson, 2006). We investigate if they also generate gender gaps in mental health, a leading cause of disability and disease burden worldwide (Whiteford et al., 2013). We seek to identify work-hour - mental health thresholds taking into account men's and women's gendered resources on and off the job, especially their

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<http://dx.doi.org/10.1016/j.socscimed.2017.01.024>  
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# Methodology

- A simultaneous three-equation system:

**Eq1: Work hours** = f(Lagged work hours, **Mental health**, **Wages**, X1)

**Eq2: Wages** = f(Lagged wages, **Mental health**, X2)

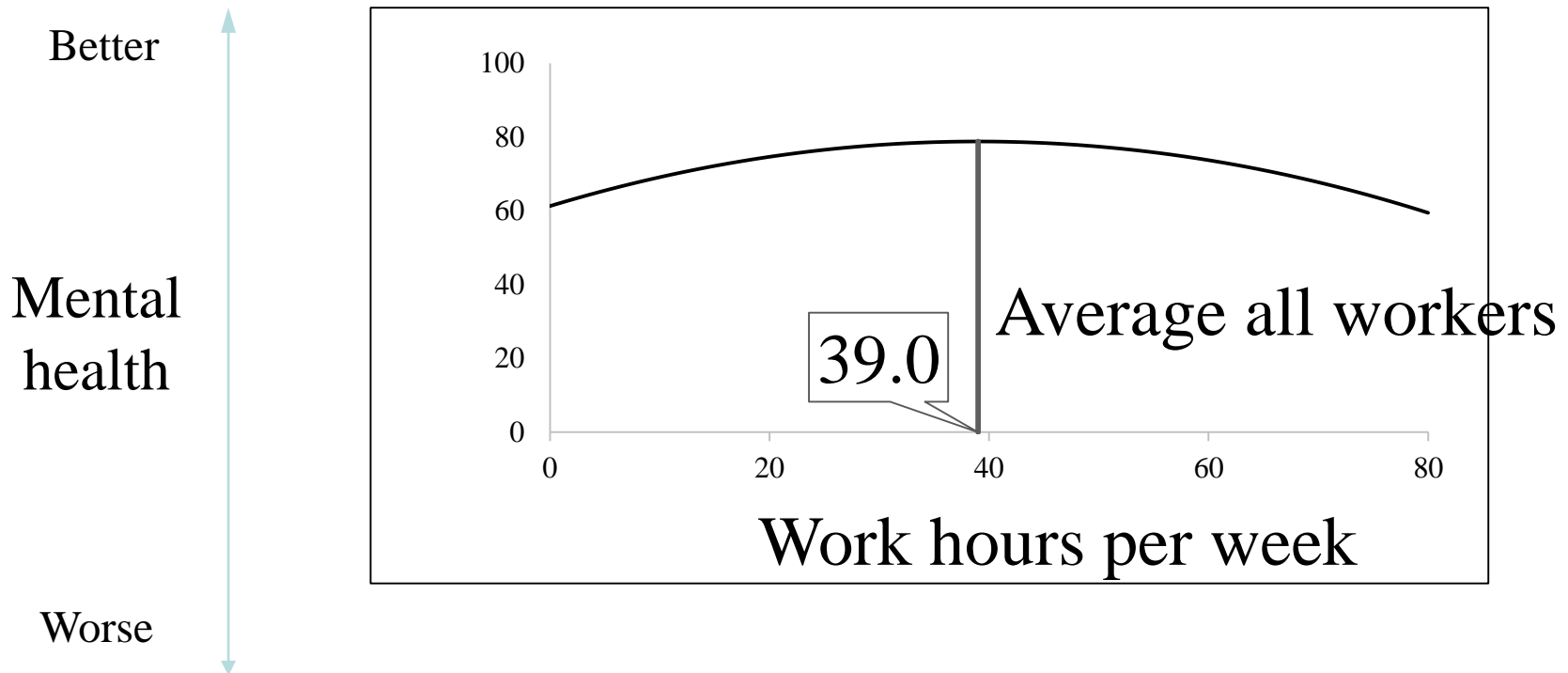
**Eq3: Mental health** = f(Lagged mental health, **Work hours**, **Work hours squared**, **Wages**, X3)

X1, X2, X3 – vectors of covariates (e.g., education, marital status, non-salary household income, domestic and care work time)

# Data

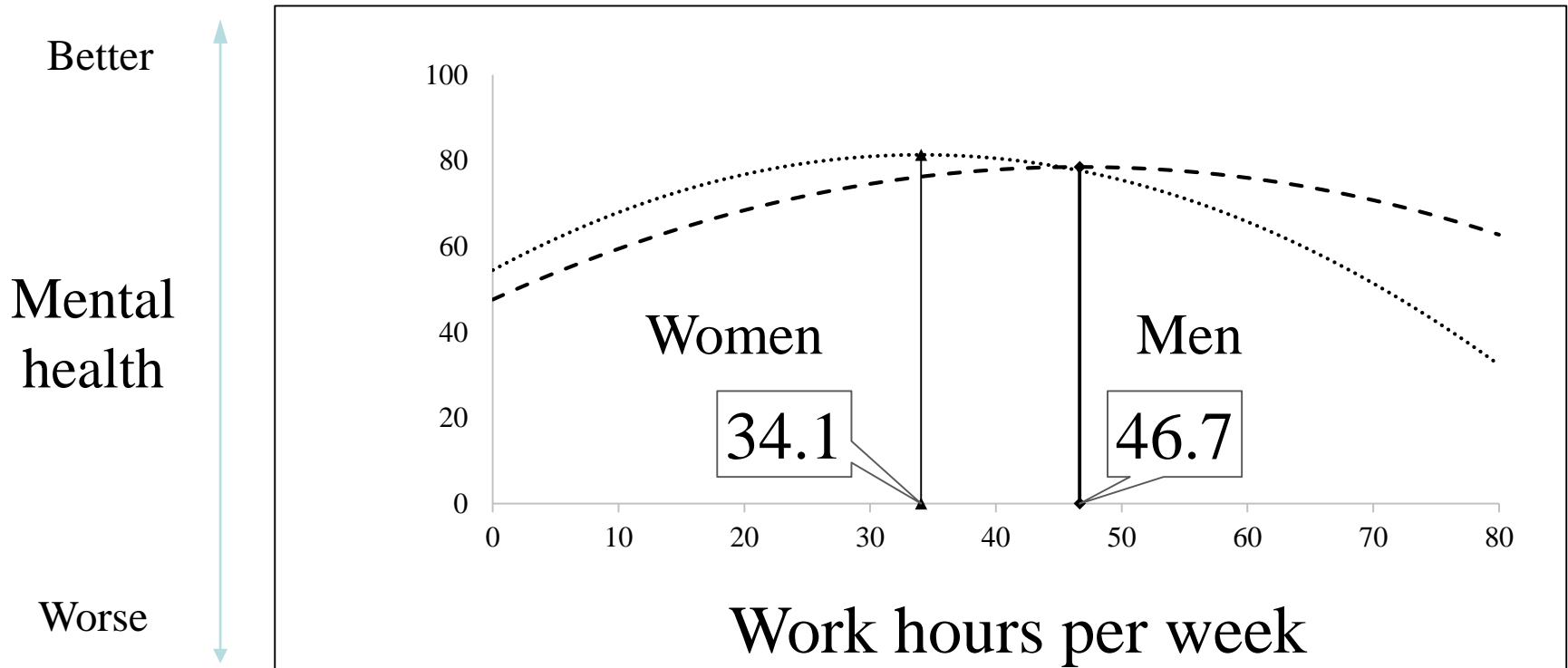
- Six waves of Household Income and Labour Dynamics in Australia Survey (wave 5 –wave 10)
- Employed people, aged from 24 to 65
- Series of equations that do/do not assume men and women are equal on measured and unmeasured variables including non work time demands

# Work hour thresholds averaged over gender, all things being equal

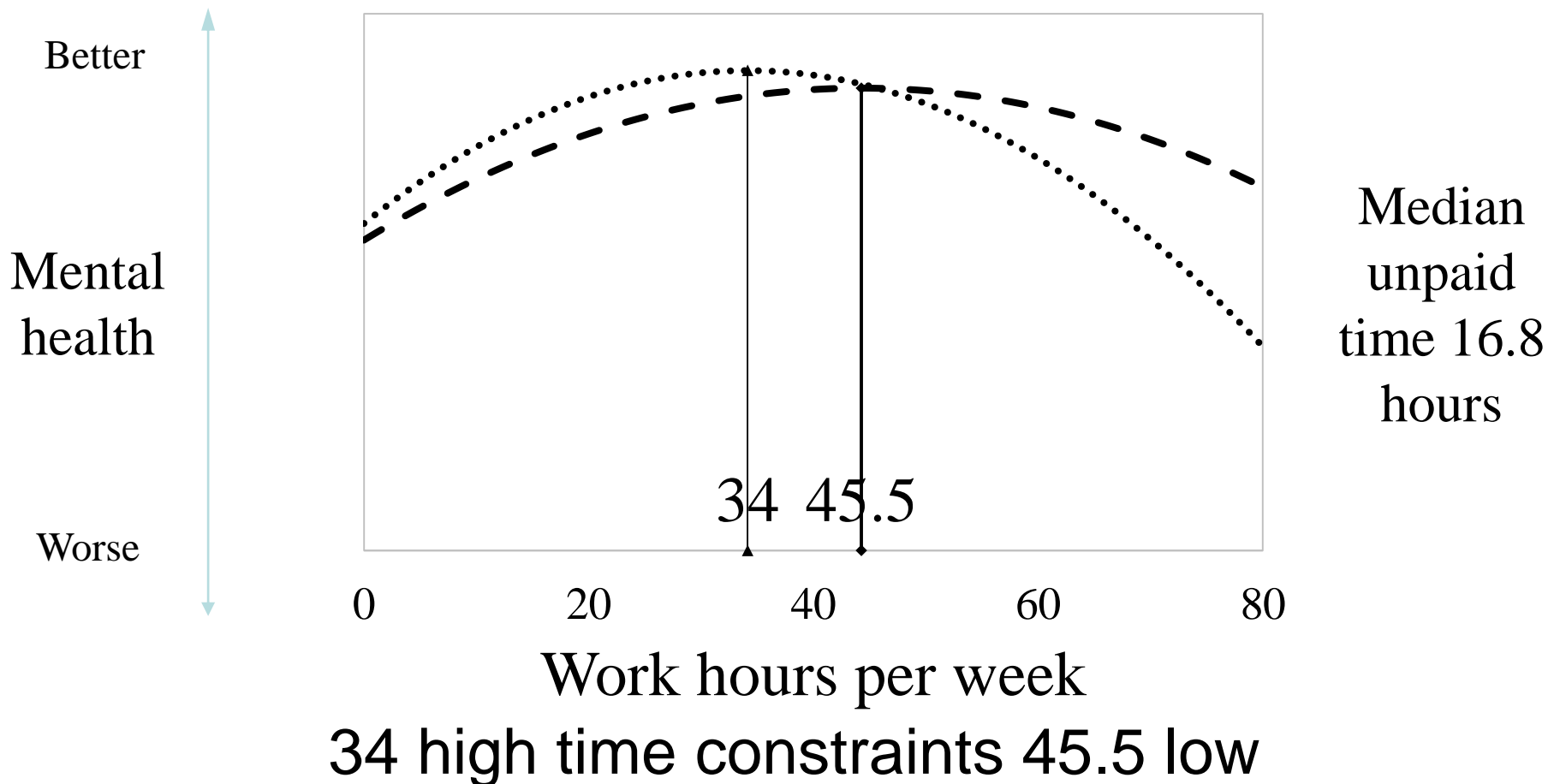


39 hours for everyone

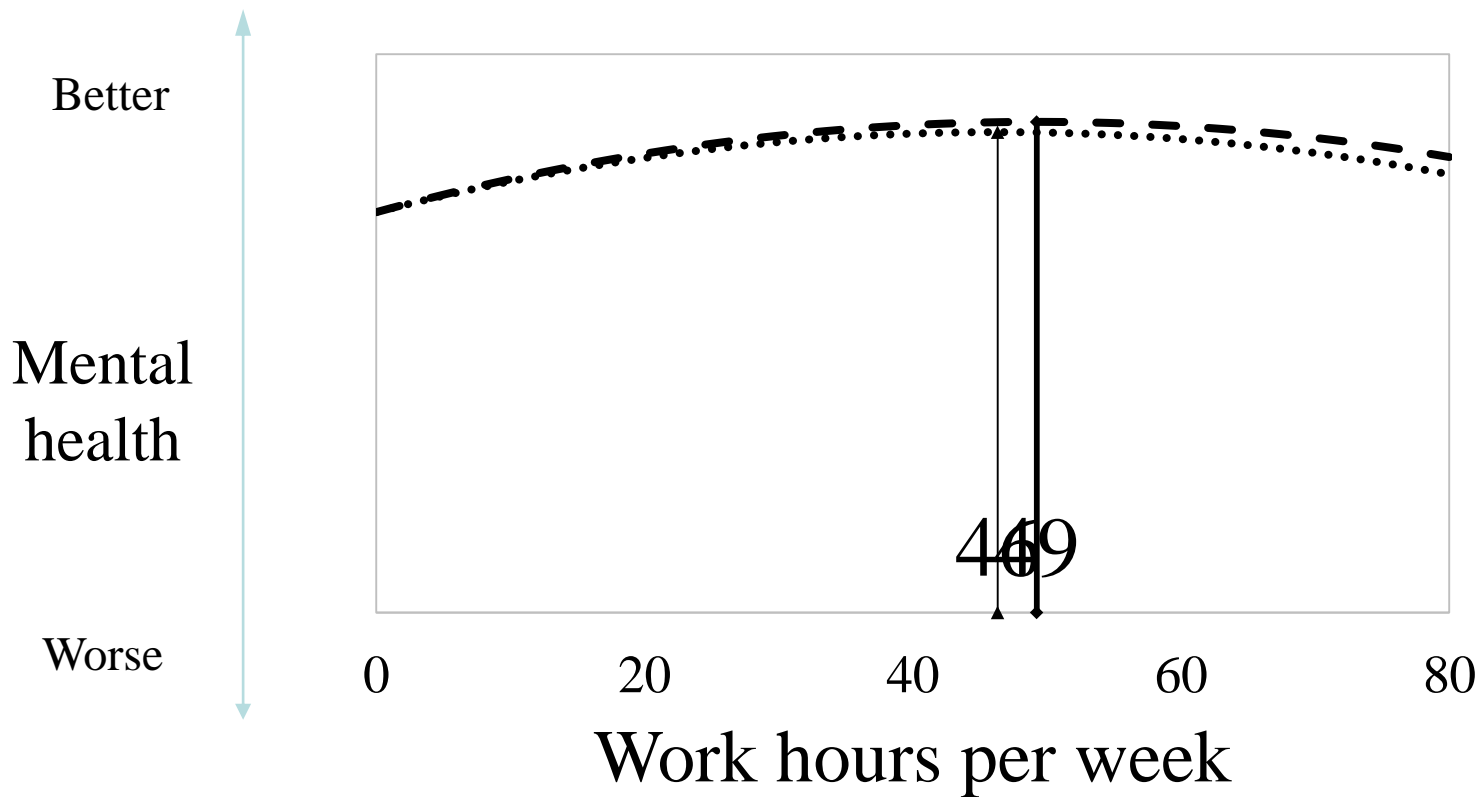
# Work hour thresholds by gender, allowing current inequalities to be estimated



# Work hour thresholds, by time constraints (care and domestic work)

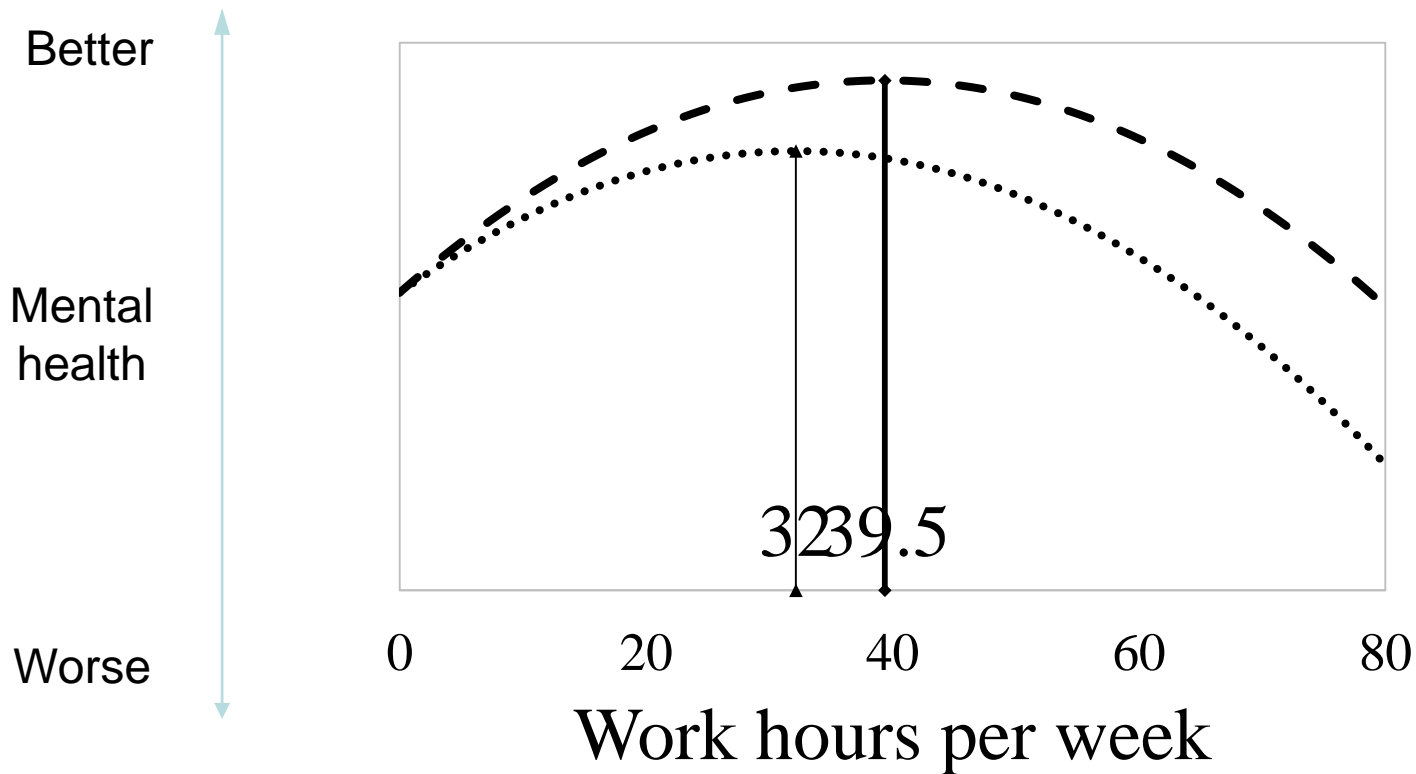


# Work hour thresholds, for workers without care, all else equal



46 for women, 49 for men

# Work hour thresholds, workers with care, all else equal



32 for women, 39.5 for men

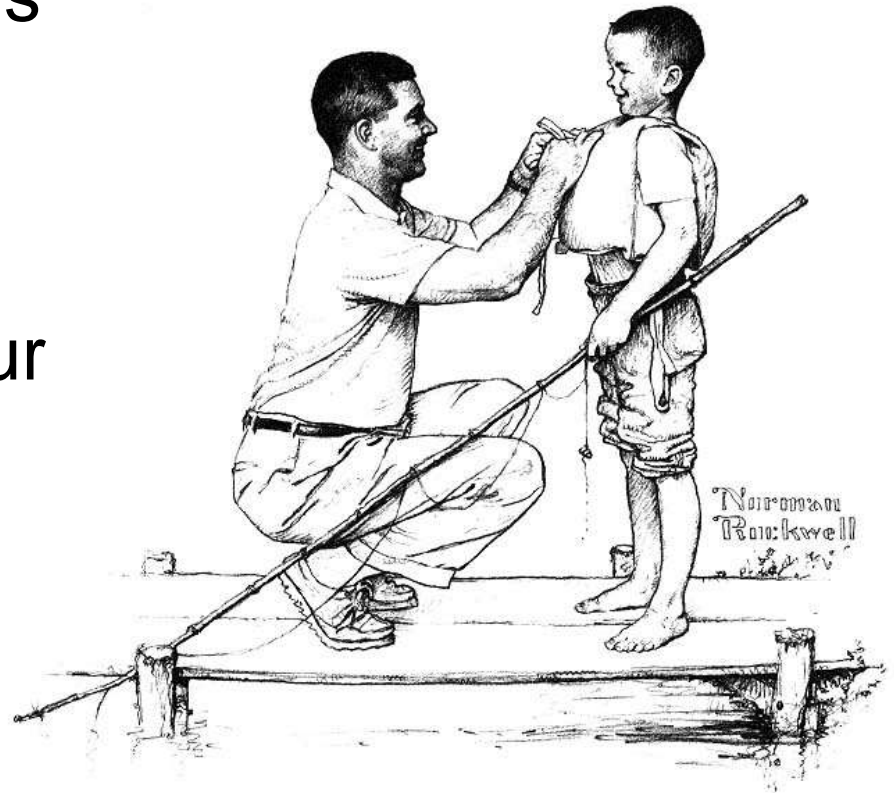


# Summary

- There is a work hour-health ceiling that varies by gender and care
- If women ‘work like men’ they face health trade-offs, as will men who combine work with care
- Health locks in the gender wage gap if long work hours are expected and rewarded

# Not just a problem for women

- Fathers' long work hours
- Generate work-care dilemmas for fathers
  - Underpin gendered inequality in the labour market
  - Shape children's experience of being fathered



# Questions for family policy

Do we want equality, do we want to boost the economy, could we have both?

Should women work like men? Should men work like women?

Can they?



## So what to do?

- Too hard?
- It's the way things are?
- People have to work long hours if economies are to flourish?
- Should we get the economy right then address equality, or health?
- What could we imagine.....



# Paid Parental Leave (PPL)

- Australia achieved its first, legislated paid leave scheme in 2011, just 6 years ago
- 2<sup>nd</sup> last OECD nation to do so



# Policy goals

↑ Women's labour force participation

↑ Gender equality and improve work/life balance

↑ Health and wellbeing of babies and mothers





# Thank you

- Huong Dinh, Jenny Welsh (ANU)
- Jenny Baxter (AIFS), Jianghong Li (WZB)
- ARC Linkage LP100100106
- ARC Future Fellowship FT110100686
- Families Australia

