

Reducing Work–Life Conflict: What Works? What Doesn't?

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Foreword

Foreword

We all play many roles: employee, boss, subordinate, spouse, parent, child, sibling, friend and community member. Each of these roles imposes demands on us, which require time, energy and commitment to fulfill. Work–family or work–life conflict occurs when the cumulative demands of these many work and non-work life roles are incompatible in some respect, so that participation in one role is made more difficult by participation in the other role.

The issues associated with balancing work and family are of paramount importance to individuals, the organizations that employ them, the families that care for them, the unions that represent them, and governments concerned with global competitiveness, citizen well-being and national health. Although much has been written about the topic, only a handful of "high-impact" studies have been conducted on this subject in Canada.¹

The 2001 National Work–Life Conflict Study was conducted to address this gap in our knowledge by providing a rigorous empirical look at the issue of work–life conflict. The research study was undertaken with the following objectives in mind:

- to provide a clearer picture of the extent to which work–life conflict is affecting employees and employers in Canada
- to help organizations appreciate why they need to change how they manage their employees by linking conflict between work and life to the organization's "bottom line"
- to expand the overall knowledge base in this area
- to suggest appropriate strategies that different types of organizations can implement to help their employees cope with multiple roles and responsibilities

This research study, and the reports it has generated to date, have given business and labour leaders, policy makers and academics an objective "big picture" view on what has happened in Canada in the last decade, the current situation with respect to this issue, and the costs associated with not addressing the challenges working Canadians have combining work and non-work roles and responsibilities.

¹ These studies are listed in Reports One to Four.

Report Series

Report Series

This report is the fifth in a series of six as noted below:

Report One: The 2001 National Work–Life Conflict Study puts the series into context by describing the sample

of employees who participated in the research and examining the various "risk factors" associated with

work-life conflict.

Report Two: Work-Life Conflict in Canada in the New Millennium: A Status Report makes the business case for

 $change\ by\ looking\ at\ how\ high\ levels\ of\ role\ overload, work-to-family\ interference, family-to-work\ interference,$

caregiver strain and spillover from work to family affect employers, employees and their families.

Report Three: Exploring the Link between Work-Life Conflict and the Use of Canada's Health Care System

focuses on how work–life conflict affects Canada's health care system (i.e. quantifies the system demands associated with high work–life conflict and attempts to put some kind of dollar value

on how much it costs Canada to treat the health consequences of such conflict).

Report Four: Who Is at Risk? Predictors of High Work–Life Conflict identifies key risk factors for role overload,

work-to-family interference, family-to-work interference and caregiver strain.

Report Five: Reducing Work–Life Conflict: What Works? What Doesn't? examines what employers, employees

and their families can do to reduce work-life conflict.

Report Six: Work-Life Conflict in Canada in the New Millennium: Key Findings and Recommendations

from the 2001 National Work-Life Conflict Study provides a summary of the key findings and

recommendations coming from this research program.

It is hoped that the production of six specialized reports rather than one massive one will make it easier for the reader to assimilate key findings from this rich and comprehensive research initiative. Each report has been written so that it can be read on its own. Each begins with an introduction that includes the specific research questions to be answered in the report, a summary of relevant background information and an outline of how the report is organized. This is followed by a brief outline of the research methodology. Key terms are defined and relevant data presented and analyzed in the main body of the report. Each report ends with a conclusion and recommendations chapter that summarizes the findings, outlines the policy implications and offers recommendations.

Theoretical Framework

Theoretical Framework

There is a vast academic literature dealing with the issue of work–life conflict. A complete review of this literature is beyond the purview of this series of reports and counter to our primary objective, which is to get easily understood and relevant information on work–life conflict to key stakeholders (governments, policy makers, employees, employers, unions). That being said, readers who are interested in the theoretical underpinnings of this research are referred to the Theoretical Framework, which is shown in Reports One, Two and Three of this series.²

Organization of Report Five

Report Five is broken down into six main chapters. Chapter One provides an introduction to the report, defines key terms and delineates the research objectives. Details on the methodology used in the study are covered in Chapter Two. Included in this chapter is information on the sample, the measurement instrument, the data analysis undertaken in this phase of the research, and the reporting protocols followed. Chapters Three, Four and Five are each devoted to a different set of possible moderators of work—life conflict. Chapter Three looks at the link between a number of organizational interventions (i.e. flexible work arrangements, supportive management, supportive services and policies) and work—life conflict. Chapter Four examines the effectiveness of a number of individual coping mechanisms (i.e. having fewer children, delaying starting a family, working harder, prioritizing) on work—life conflict. The relationship between a number of different family coping strategies (i.e. work different hours than spouse, planning family time, gendered division of labour) and work—life conflict is explored in Chapter Five. Each of the results chapters is structured as follows. First, relevant literature that justifies the link between the construct and levels of work—life conflict is summarized. This is followed by empirical data quantifying the effectiveness of the different coping strategies at reducing the four types of work—life conflict included in this analysis (i.e. role overload, work-to-family interference, family-to-work interference and caregiver strain). Conclusions, policy implications and recommendations are presented in Chapter Six.

² See Appendix A for a complete list of the reports that have been published using data from the 2001 National Work–Life Conflict Study. The web links for each of these reports are also provided.

³ While Report Four in the series focused on predictors of work-life conflict, Report Five focuses on moderators.

Chapter One Introduction

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1.1 Background

Work-life conflict is defined as a form of inter-role conflict in which work and family demands are mutually incompatible so that meeting demands in one domain makes it difficult to meet demands in the other (Edwards & Rothbard, 2000; Greenhaus & Beutell 1985). This definition implies a multi-directional relationship where work can affect family and vice versa (Frone, 2002). When work and family are in conflict, obtaining rewards in one domain requires foregoing rewards in the other (Edwards and Rothbard, 2000). Work-life conflict can be considered to have two major components: the practical aspects associated with time crunches and scheduling conflicts (i.e. an employee cannot be in two different places at the same time), and the perceptual aspect of feeling overwhelmed, overloaded or stressed by the pressures of multiple roles. In our research, we conceptualize work-life conflict broadly to include:

- Role overload: This form of work-life conflict occurs when the total demands on time and energy associated with the prescribed activities of multiple roles are too great to perform the roles adequately or comfortably.
- Work-to-family interference: This type of role conflict occurs when work demands and responsibilities make it more difficult to fulfill family-role responsibilities (e.g. long hours in paid work prevent attendance at a child's sporting event, preoccupation with the work role prevents an active enjoyment of family life, work stresses spill over into the home environment and increase conflict with the family).
- Family-to-work interference: This type of role conflict occurs when family demands and responsibilities
 make it more difficult to fulfill work-role responsibilities (e.g. a child's illness prevents attendance at work,
 conflict at home makes concentration at work difficult).
- Caregiver strain: Caregiver strain is a multi-dimensional construct defined in terms of "burdens" in the caregivers' day-to-day lives, which can be attributed to the need to provide care or assistance to someone else who needs it (Robinson, 1983).⁴

⁴ It should be noted that research on caregiver strain has typically focused on strains associated with the provision of elder care or care for a disabled dependent rather than those linked to child care itself. Consistent with past practices, in this study, caregiver strain was used to measure strain and burden associated with elder care only.

1.1 Background

To this point, our research initiatives⁵ have determined that:

- Work and life are no longer separate domains for a significant proportion of the Canadian workforce.
- The four components of work–life conflict have differential impacts on the physical and mental health of employees.
- High levels of role overload have become systemic within the population of employees working for Canada's largest employers. The majority of employees in our 2001 sample (58%) reported high levels of role overload.
- The percent of the workforce with high role overload has increased by 11 percentage points over the past decade.
- Just over one in four (28%) of the Canadians in our 2001 sample report that their work responsibilities interfere with their ability to fulfill their responsibilities at home (i.e. high work-to-family interference). This is the same proportion with high levels of this form of conflict as was observed in 1991.
- Family-to-work interference is not common in Canada at this time: Only 10% of the sample reported
 high levels of family-to-work interference. The percentage of working Canadians who give priority to
 family rather than work has doubled over the past decade. This increase is largely because the number
 of employees with elder care responsibilities has increased over the past decade.
- Three times as many Canadians give priority to work at the expense of their family (i.e. report high work-to-family interference) as give priority to family at the expense of work (i.e. report high family-to-work interference).
- The amount of time Canadians spend in work-related activities increased between 1991 and 2001. Whereas one in ten of the Canadians in our 1991 sample worked 50 or more hours per week, one in four does so now; during this same time period the proportion of employees working between 35 and 39 hours per week declined from 48% to 27%. This increase in time in work was observed for all job groups and all sectors.
- The majority of Canada's largest employers cannot be considered to be best practice employers: Only about half of the employees who participated in this study were highly committed to their employer, satisfied with their job and viewed their organization as "an above average place to work." One in three reported high levels of job stress and one in four was thinking of leaving their current organization once a

⁵ See Appendix A for a complete list of the reports that have been published using data from the 2001 National Work–Life Conflict Study.

1.1 Background

week or more (i.e. had high intent to turnover). Absenteeism (especially absenteeism due to physical and mental health issues) also appears to be a substantial problem for Canadian employers, with half of the respondents reporting high levels of absenteeism (defined as 3 or more days of absence in the 6 months prior to the study being conducted).

- Conditions within Canadian organizations have declined over time. Three times more employees reported high job stress in 2001 than in 1991. The percent of the sample with high job satisfaction and commitment was significantly lower in 2001 than in 1991.
- Many individuals working for Canada's largest employers are in poor mental health: Over half of the respondents reported high levels of perceived stress; one in three reported high levels of burnout and depressed mood. Only 41% were satisfied with their lives and one in five was dissatisfied. Almost one in five perceived that their physical health was fair to poor. These data are disturbing as they can be considered to be a "best case scenario" as they reflect the mental health status of employed Canadians, many of whom can be considered to have "good" jobs.
- The physical and mental health of Canadian employees has deteriorated over time: 1.5 times more employees reported high depressed mood in 2001 than in 1991. Similarly, 1.4 times more employees reported high levels of perceived stress in 2001 than in 1991.
- Organizational culture and work demands put employees at risk of role overload and work-to-family interference (i.e. the two most important predictors of this form of work-life conflict). With respect to work demands, both role overload and work-to-family interference are positively associated with hours per month in unpaid overtime, hours spent in work per week, hours per week in supplemental work at home (SWAH) and time away from home in job-related travel. Organizational cultures that focus on hours (i.e. advancement limited if you do not work long hours or if you say no to more work), emphasize work or family (i.e. family responsibilities and family leave are perceived to limit advancement) and are not supportive of balance are also linked to higher levels of role overload and work-to-family interference.
- Non-work demands, family type and adult role responsibilities are the most important predictors of
 caregiver strain and family-to-work interference. Both of these forms of work-life conflict are positively
 associated with hours per week providing elder care, hours per week in child care and responsibility for
 elder care. Caregiver strain is strongly associated with the provision of elder care.

1.2 Objectives of the Research

Only one important question remains to be answered—what can be done to reduce the various forms of work–life conflict? We attempt to answer this question by identifying policies, programs and supports that organizations can implement and strategies that families and individuals can use to restore work–life balance.

1.2 Objectives of the Research

Researchers have long been interested in understanding the strategies that individuals and families employ to cope with stressful events and circumstances. Coping can be defined as any response to external stressors that serves to prevent, avoid or minimize emotional distress (Pearlin & Schooler, 1978). Coping behaviour has five functions: (1) to decrease the individual or family's vulnerability to distress by eliminating or managing those factors that contribute to stress; (2) to strengthen and maintain the resources that serve to protect the individual or family from harm or distress (e.g. family cohesiveness, adaptability); (3) to reduce or eliminate stressor events and their corresponding hardships; (4) to actively influence the individual or family's environment by doing something to change the social circumstances; and (5) if stress cannot be avoided, to control the impact of the stress and its destabilizing impacts on the individual or family (McCubbin et al., 1980). By understanding which types of coping strategies are used in different types of situations and the effectiveness of these coping measures in various stress situations, we can generate valuable insights that can help individuals, families and organizations to support the management of stress.

Coping has often been studied as the response to catastrophic life events such as unemployment, disease, death, family separation, bankruptcy, etc. However, researchers have also acknowledged that coping takes place as an ongoing response to "normative" stresses that occur gradually and persistently, such as the conflict produced when work and family interests collide (Burr & Klein, 1994; McCubbin & Patterson, 1983; Pearlin & Schooler, 1978).

Although much has been written about coping strategies and processes, there has been a lack of integration among the researchers studying family coping, individual coping and organizational support for coping (Burr & Klein, 1994). As a result, these three fields have developed in relative isolation, despite the obvious overlap in their content. It is our intent in this report to provide a holistic picture of how strategies applied by the key stakeholders in the work–life equation—the individual, the family and the organization—help employees cope with work–life conflict.

Accordingly, the key objective of this report is to identify coping strategies that are associated with lower levels of the four forms of work–life conflict: role overload, work-to-family interference, family-to-work interference and caregiver strain. Three sets of moderators will be examined:

- organizational interventions (i.e. flexible work arrangements, supportive management, supportive services and policies)
- **individual coping strategies** (i.e. having fewer children, delaying starting a family, working harder, prioritizing)
- **family coping strategies** (i.e. work different hours than spouse, planning family time, gendered division of labour)

1.2 Objectives of the Research

Specifically, this research seeks to answer the following questions:

- 1. How do Canadian employees cope with competing work and family demands? Specifically: What resources do Canadian organizations provide to help employees cope with work and family conflict? What personal coping strategies are used by Canadian employees? What strategies are used within families? What strategies are being used frequently? Infrequently?
- 2. What advice can we offer organizations interested in reducing the levels of role overload, work-to-family interference, family-to-work interference and caregiver strain in their workforce?
- 3. What advice can we provide to individual employees about how best to cope with role overload, work-to-family interference, family-to-work interference and caregiver strain?
- 4. What advice can we offer to Canadian families about how best to cope with role overload, work-to-family interference, family-to-work interference and caregiver strain?
- 5. How do gender, job type and dependent care⁶ status affect:
 - the use of these different coping strategies
 - the type of advice we would offer (i.e. what coping strategies are more effective for women? for men? for employees with dependent care? for employees without dependent care? for managers and professionals? for those in other positions?).⁷

⁶ Defined in this study as an employee who spends at least one hour a week in child care, elder care or both.

⁷ Defined in this study to include employees in technical, clerical, administrative, production positions, etc.

1.3 Why Do We Need a Study Like This One?

Our data suggest that a substantive proportion of the Canadian workforce is having difficulty balancing work and family demands. The numbers from our research can be used to create a compelling case for action.⁸

Why do we need to reduce the number of Canadians reporting high levels of role overload?

Approximately 60% of Canadian employees report high levels of role overload. The consequences of high role overload, as identified in this study, are staggering. Compared to their counterparts with low levels of role overload, employees with high role overload are:

- 13 times more likely to be thinking of leaving their current employer because their work expectations are unrealistic
- 12 times more likely to report high levels of burnout
- 6 times more likely to report high levels of job stress
- 5 times more likely to be thinking of leaving their current employer because they want more time for their family and/or themselves
- 4 times more likely to say they are thinking of leaving their current employer because they are frustrated with their work environment and because their work environment is non-supportive
- 4 times more likely to have high levels of absenteeism due to physical, mental or emotional fatigue and to report high levels of perceived stress
- 3 times more likely to report high levels of depressed mood, have sought care from a mental health professional, and say that they are in poor physical health
- 3 times more likely to say they are thinking of leaving their current employer because their values are not the same as those of their organization
- twice as likely to have received medical care on an outpatient basis, to have made 6 or more visits per year to a physician, to have made 8 or more visits per year to another health care professional, to have required inpatient hospital care, and to have spent more than \$300 per year on prescription medicine for personal use
- twice as likely to report high intent to turnover
- twice as likely to miss work due to child care problems and to miss three or more days of work in a 6-month period due to ill health

⁸ To assist readability: (1) relative risk data are rounded off to the closest whole number, and (2) only relative risks of greater than 2 are shown in this summary.

- half as likely to report that their family is well adapted
- half as likely to report high levels of job satisfaction, to have a positive view of their employer, and to report high levels of life satisfaction

The financial costs of high levels of role overload are also staggering. We estimate:

- the direct costs of absenteeism due to high role overload to be approximately \$3 billion per year. Direct and indirect costs of absenteeism due to role overload are estimated to be between \$4.5 (conservative estimate) and \$6 billion per year.
- the direct cost of physician visits due to high role overload to be approximately \$1.8 billion per year
- the direct cost of inpatient hospital stays due to high role overload to be approximately \$4 billion per year
- the direct cost of visits to the hospital emergency department due to high role overload to be approximately one quarter of a billion dollars per year

In other words, a better understanding of how to reduce role overload should assist the Canadian government in reducing the demands on Canada's health care system and help Canadian organizations become more productive. It should also result in improved levels of family functioning (often linked to things like crime rates and family violence) and Canadians who are healthier, both physically and mentally.

Why do we need to reduce the number of Canadians reporting high work-to-family interference?

A similar case can be made for addressing the high levels of work-to-family interference reported by just over one in four (28%) in our sample. Compared to their counterparts with low work-to-family interference, employees with high work-to-family interference were:

- 7 times more likely to say they are thinking of leaving their current organization because they want more time for their family and/or themselves, and because their work expectations are unrealistic
- 6 times more likely to report high levels of job stress and high levels of burnout
- 4 times more likely to say they are thinking of leaving their current organization because their work environment is non-supportive, and because their values are not the same as those of their organization
- 3 times more likely to report high intent to turnover
- twice as likely to report high levels of depressed mood, high levels of perceived stress and to report that they are in poor physical health
- twice as likely to have missed work due to physical, emotional or mental fatigue, to have sought care from a mental health professional, to have received care on an outpatient basis, to have made 6 or more visits

per year to a physician, to have required inpatient hospital care, to have visited a hospital emergency room, and to have spent more than \$300 in the past year on prescription medicine for personal use

- one-third as likely to frequently engage in activities associated with high levels of family integration
- one-third as likely to report high levels of job satisfaction
- half as likely to live in families with high levels of adaptation
- half as likely to report high levels of family satisfaction, parental satisfaction and life satisfaction
- half as likely to have a positive view of their organization as a place to work and to report high levels of organizational commitment

The financial cost of high levels of work-to-family interference are also considerable. We estimate:

- the direct costs of absenteeism due to high levels of work-to-family interference to be \$1 billion per year in direct costs alone (costs increase to \$1.5 to \$2 billion if one also includes the indirect costs of this absenteeism)
- that the direct costs to the health care system of treating disorders associated with high levels of work-to-family interference to be approximately \$2.8 billion per year (two thirds of a billion dollars per year in physician visits, \$2 billion per year in inpatient hospital stays and just over \$100 million per year in visits to hospital emergency department)

In other words, Canadian employers that use the findings from this study to reduce the number of employees in their organizations who are experiencing high work-to-family interference should have fewer problems recruiting and retaining employees (a large competitive advantage in today's tight labour market) and lower benefits costs. Similarly, governments that are concerned with ballooning health care costs and long wait times should be able to apply the findings from this study to these issues. Finally, Canadian families should also benefit from anticipated improvements in the physical and mental health of their members.

Why do we need to reduce the number of Canadians reporting high family-to-work interference?

While family-to-work interference is not common in Canada at this time (only 10% of the Canadians in our sample reported high levels of family-to-work interference), Canadian employers and governments need to determine ways to reduce this type of interference as demographic projections suggest that it will increase as the Canadian population ages. Why else should key stakeholders seek ways to reduce family-to-work interference? From our data we can offer the following motivations. Compared to their counterparts with low family-to-work interference, employees with high levels of this form of interference were:

- 7 times more likely to miss 3 or more days of work in a 6-month period due to child care problems
- 3 times more likely to have been absent from work (all causes combined)
- twice as likely to say their health is fair/poor, to report high levels of perceived stress, to report high levels

of burnout, to report high levels of depressed mood, to have missed 3 or more days of work in the past 6 months (all causes combined), to have missed work due to physical, emotional or mental fatigue, to have missed 3 or more days of work in the past 6 months due to physical health problems, and to have sought care from mental health professionals

• half as likely to report high levels of family adaptation, high parental satisfaction, high family satisfaction, high life satisfaction and high job satisfaction

The financial costs of this form of work–life conflict, while not as overwhelming as those associated with overload and work-to-family interference, are still substantial. We estimate:

- the direct costs of absenteeism due to high levels of family-to-work interference to be just under half
 a billion dollars a year in direct costs (approximately \$1 billion per year when indirect costs are also
 included in the total)
- the direct costs to the health care system of treating disorders associated with high levels of family-to-work interference to be approximately \$514 million per year (\$215 million per year in physician visits, \$247 million per year in inpatient hospital stays and \$52 million per year in visits to hospital emergency department)

The findings from this research should be especially useful for employers concerned with recruiting and retaining staff, as our research found that employees with high levels of family-to-work interference reported the lowest levels of organizational commitment and job satisfaction, and the highest levels of job stress and intent to turnover of any of the respondents. Also cause for concern are data that show that employees with high levels of family-to-work interference report the lowest levels of family life satisfaction, parental satisfaction and family well-being.

Why do we need to reduce the number of Canadians reporting high levels of caregiver strain?

Approximately one in four of the individuals in this sample (26%) experience what can be considered to be high levels of caregiver strain: physical, financial or mental stress that comes from looking after an elderly dependent. Again, we can draw on the data from our previous research in this area to provide a number of sound arguments as to why organizations and governments need to identify and implement strategies to reduce caregiver strain. Compared to their counterparts with low caregiver strain, employees with high caregiver strain were:

- 13 times more likely to miss 3 or more days of work in a 6-month period due to elder care problems
- twice as likely to miss work because they were mentally, emotionally or physically fatigued, to report high levels of depressed mood, to report high levels of perceived stress, to report high levels of burnout, to have sought care from a mental health professional, to say their health is fair/poor, to have made 6 or more visits per year to a physician, to have received care on an outpatient basis, to have made 8 or more visits per year to another health care professional, to have required inpatient hospital care, to have visited a hospital emergency room, and to have spent \$300 in the last year for prescription medicine for personal use

On the other hand, employees with low levels of caregiver strain were twice as likely as those with high levels of this form of conflict to report high life satisfaction. Of particular concern are findings that show respondents with high levels of caregiver strain appear to be at the highest risk with respect to perceived stress, depressed mood and impaired physical health. They are also the least likely to be satisfied with their lives.

The financial costs of high levels of caregiver strain are also overwhelming. We estimate:

- the direct costs of absenteeism due to high levels of caregiver strain to be just over \$1 billion per year (indirect costs are estimated at another \$1 to \$2 billion)
- the direct costs of inpatient hospital stays due to high caregiver strain to be approximately \$4 billion per year, of physician visits to be approximately \$1 billion per year and of visits to a hospital emergency department to be approximately \$100 million per year (i.e. total cost of approximately \$5 billion for these three services)
- that companies could save approximately \$128 per employee per year in prescription costs alone if they could reduce caregiver strain

These costs can be expected to increase in the future as the proportion of the workforce with elder care responsibilities increases (see Higgins and Duxbury, 2002 for a discussion of this issue).

Reducing work-life conflict, regardless of the form it takes, will benefit all Canadians

These findings leave little doubt that high work–life conflict is associated with several indicators of physical and mental health problems at the employee level. Employees who are stressed, depressed and burnt out are not as productive as those in good mental health. Stress, depression and burnout are also linked to increased absenteeism, greater use of prescription medicine and employee assistance programs (EAP) and lower levels of creativity, innovation and risk taking, which, in turn, can all be expected to negatively impact an organization's bottom line and Canada's ability to be globally competitive. We have also ascertained that high work–life conflict has a negative impact on the organization's bottom line, impairs an employee's health (both physically and mentally), reduces participation in and enjoyment of family roles, negatively impacts employees' abilities to enjoy and nurture their families and increases health care costs.

If things remain as they are, the proportion of the Canadian workforce at risk with respect to work–life conflict can be expected to increase due to a number of well-documented demographic and structural changes in the family⁹ and in the nature of work¹⁰ (Barnett, 1998; Frone, 2002; Hammer et al., 2002). It is hoped that the findings from this report will help policy makers and employers put into place strategies, policies and interventions that stem the work–life conflict tide. This report should also prove useful to Canadians who wish to make lifestyle changes to restore balance to their lives. The methodology section is divided into three parts. Information on the sample is presented first. This is followed by a brief discussion, in section 2.2, of the procedures used to collect the data. The statistical techniques used in this report are covered in section 2.3.

⁹ Changes noted in the literature include the greater number of female employees, increased divorce rates, increased life expectancy, a higher portion of dual-income and single-parent families, an increased number of families with simultaneous child care and elder care demands, a redistribution of traditional gender-role responsibilities and an increase in the interdependency between work and family.

¹⁰ Changes reported in the literature include globalization, sophisticated office technology, the need to deal with constant change, the movement toward a contingent workforce and growth in atypical forms of work.

Chapter Two Methodology

Chapter Two Methodology

The methodology section is divided into three parts. Information on the sample is presented first. This is followed by a brief discussion, in section 2.2, of the procedures used to collect the data. The statistical techniques used in this report are covered in section 2.3.

2.1 Who Responded to the National Work–Life Conflict Study?

The sample for the National Work–Life Conflict Study was drawn from 100 Canadian companies with 500+ employees. Forty of these organizations operated in the private sector, 22 were from the public sector and 38 were from the not-for-profit sector. Private sector companies from the following sectors were included in the sample: telecommunications, high technology, retail, transportation, pharmaceutical, financial services, entertainment, natural resources and manufacturing. The public sector sample included 7 municipal governments, 7 provincial government departments and 8 federal public service departments/agencies. The not-for-profit sector sample consisted of 15 hospitals/district health councils, 10 school boards, 8 universities and colleges, and 5 "other" organizations that could best be classified as not-for-profit/greater public service (e.g. social service, charity, protective services).

A total of 31,571 employees responded to the survey. The sample is distributed as follows:

- Just under half (46%) of the respondents work in the public sector. One in three works in the not-for-profit sector and 20% are employed by a private sector company.
- Just over half (55%) of the respondents are women.
- Just under half (46%) of the respondents work in managerial and professional positions, 40% work in non-professional positions (e.g. clerical, administrative, retail, production) and 14% work in technical jobs.
- Just over half (56%) of the respondents have dependent care responsibilities (i.e. spend an hour or more a week in either child care or elder care).

A full description of the sample can be found in Reports One (demographics, demands), Two (work–life conflict and its impact), Three (impact of work–life conflict on use of health care system) and Four (predictors of work–life conflict) of this series (see Appendix A for bibliographic details). Key details that may be of interest to the readers of this report are given below.

Demographic Profile of Respondents

The 2001 survey sample is well distributed with respect to age, geographic area of residence, community size, job type, education, personal income and family income. The mean age of the respondents is 42.8 years. Approximately half of the respondents are highly educated knowledge workers (i.e. managers and professionals). The majority of respondents (75%) are married or living with a partner and are part of a dual-income family (69% of the sample). Eleven percent are single parents. Twelve percent live in

2.1 Who Responded to the National Work–Life Conflict Study?

rural areas. One quarter of the respondents indicate that money is tight in their family, which is consistent with the fact that 29% of respondents earn less than \$40,000 per year. One in three of the respondents has high school education or less.

Most respondents have responsibilities outside of work. Seventy percent are parents (average number of children for parents in the sample is 2.1); 60% have elder care responsibilities (average number of elderly dependents is 2.3); 13% have responsibility for the care of a disabled relative; 13% have both child care and elder care demands (i.e. are part of the "sandwich generation"). The fact that the demographic characteristics of the sample correspond closely to national data provided by Statistics Canada (see Higgins & Duxbury, 2002) suggests that the findings from this study can be generalized to a larger population.

Sample Profile: Levels of Work-Life Conflict

Four types of work–life conflict are examined in this study: role overload, work-to-family interference, family-to-work interference and role overload. Role overload occurs when the total demands on time and energy associated with the prescribed activities of multiple roles are too great to perform the roles adequately or comfortably. The majority of employees in our sample (58%) are currently experiencing high levels of role overload. Another 30% report moderate levels of role overload. Only 12% of the respondents report low levels. Our research suggests that the proportion of the workforce experiencing high levels of role overload increased substantially from 1991 to 2001 (i.e. by approximately 11%).

Work-to-family interference occurs when work demands and responsibilities make it more difficult for an employee to fulfill family-role responsibilities. One in four Canadians in this sample reports that work responsibilities interfere with their ability to fulfill responsibilities at home. Almost 40% of respondents report moderate levels of interference. The proportion of the Canadian workforce with high levels of work-to-family interference has not changed appreciably from 1991 to 2001.

Family-to-work interference occurs when family demands and responsibilities make it difficult for an employee to fulfill work-role responsibilities. Only 10% of the Canadians in this sample report high levels of family-to-work interference. Another third report moderate levels of family-to-work interference. Our data suggest that the percentage of working Canadians who experience this form of interference has doubled over the past decade.

Approximately one in four respondents experiences what can be considered to be high levels of caregiver strain: physical, financial or mental stress that comes from looking after an elderly dependent. While most respondents (74%) rarely experience this form of work–life conflict, 26% report high levels of caregiver strain.

Who has more problems balancing work and family responsibilities? The evidence from this research is quite clear—employed Canadians with dependent care responsibilities. Employees who have child and/or elder care responsibilities report higher levels of role overload, work-to-family interference, family-to-work interference and caregiver strain than their counterparts without dependent care. The fact that employed parents and elder caregivers have greater difficulty balancing work and family is consistent with the research in this area and can be attributed to two factors: greater non-work demands and lower levels of control over their time.

Job type is associated with all but one of the measures of work-life conflict explored in this study. Managers and professionals are more likely than those in "other" jobs to experience high levels of overload and work-to-family interference. This finding is consistent with the

2.1 Who Responded to the National Work–Life Conflict Study?

fact that the managers and professionals in this sample spent significantly more time in paid employment and were more likely to perform unpaid overtime than colleagues who worked in clerical, administrative, technical and production jobs. Those in "other" jobs, on the other hand, are more likely to report higher levels of caregiver strain from the financial stresses associated with elder care.

Women are more likely than men to report high levels of role overload and high caregiver strain. This is consistent with the finding that the women in this sample devote more hours per week than men to non-work activities such as child care and elder care and are more likely to have primary responsibility for non-work tasks.

2.2 Methodology

A 12-page survey produced in a mark-sensitive format with a unique bar code given to each organization participating in the study was used to collect the data. This survey was divided into nine sections: your job; your manager; time management; work, family and personal life; work arrangements; work environment; family; physical and mental health; and "information about you." Virtually all of the scales used in the questionnaire are psychometrically sound measures that have been well validated in other studies. The measures used to quantify work–life conflict are summarized in Box 1. The measures used to quantify the various moderators examined are provided in Box 2 (Organizational Interventions), Box 3 (Individual Coping Strategies) and Box 4 (Family Coping).

Box One Measurement of Work-Life Conflict

Overload was assessed in this study using five items from a scale developed by Bohen and Viveros-Long (1981). Role overload was calculated as the summed average of these five items. High scores indicate greater role overload. In this study, Cronbach's alpha for this scale was 0.88.

Work interferes with family was measured by means of a 5-item Likert scale developed by Gutek, Searle and Kelpa (1991). Work-to-family interference was calculated as the summed average of these five items. High scores indicate higher levels of perceived interference. In this study, Cronbach's alpha for this scale was 0.92.

Family-to-work interference was assessed by means of a 5-item Likert scale developed by Gutek, Searle and Kelpa (1991). Family-to-work interference was calculated as the summed average of these five items. High scores indicate higher levels of perceived interference. In this study, Cronbach's alpha for this scale was 0.87.

Caregiver strain was quantified using a modified three-item version of Robinson's (1983) Caregiver Strain Index (CSI). This index measures objective (rather than subjective) burden in three areas. Respondents were asked to indicate (using a 5-point Likert scale) how often they had difficulty in caring for an elderly relative or dependent because of physical strains, financial strains or because it left them feeling completely overwhelmed. Options given included never, monthly, weekly, several days per week or daily. Total caregiver strain was calculated as the summed average of these three items. Higher scores indicate greater strain. This measure has been used in a number of studies with good results (Robinson reports a Cronbach alpha of 0.91). In this study, the Cronbach alpha was 0.78.

2.2 Methodology

Box Two Measurement of Organizational Interventions

Perceived flexibility: This is defined as the amount of flexibility respondents perceive they have over their work hours and their work location. A 4-item measure of perceived flexibility was developed by Duxbury and Higgins for use in their 1991 work–family study. The measure has evolved over time and now includes 10 items. Respondents were asked how easy or difficult it is for them to: vary their work hours, spend some of their time working at home, take holidays, take time off to attend a course, interrupt their work day for personal reasons and then return to work, receive personal calls when they are at work, balance work and personal/family commitments, keep family commitments, and take a paid day off when either a child is sick or a crisis occurs with an elderly relative. Respondent responses are captured using a 5-point scale (where a 1 = very difficult, a 3 = neither easy nor difficult, and a 5 = very easy). Perceived flexibility is calculated as the summed average of these 10 items. Higher scores reflect greater perceived flexibility. This measure has been used in a number of studies and has very high internal reliability (reported Cronbach's alpha coefficients range from 0.85 to 0.91). In this study Cronbach's alpha was .86. As outlined in Chapter Three, we also collected data on what work arrangement the individual formally worked.

Supportive manager and non-supportive manager: The extent to which the respondents perceived that the individual they reported to was supportive (i.e. assisted their efforts to get their job done effectively given their personal circumstances) and non-supportive was assessed using two behaviourally based measures that were developed and tested by Duxbury and Higgins over a 5-year period. Non-supportive management is assessed using a 6-item measure (i.e. has unrealistic expectations on how much work can be done) while the supportive manager measure includes 9 items (e.g. gives recognition when I do my job well, listens to my concerns, provides me with challenging opportunities). In all cases, respondents were asked to indicate the extent to which they agree or disagree that their manager had engaged in each of these 15 behaviours over the past three months. Responses were collected using a 5-point Likert scale (1 = strongly disagree, 3 = neutral, 5 = strongly agree). The supportive manager score was calculated as the summed average of the 9 supportive behaviours (higher scores indicate a more supportive manager). The non-supportive management score was calculated as the summed average of 6 non-supportive items (higher scores represent a more non-supportive management scale was .86).

Supports in organization: Previous research (Bohen and Viveros-Long, 1981; Frone and Yardley, 1996; Sekaran, 1986) was used to generate a list of 13 benefits and services that have been found to help employees cope with stress and work–life imbalance. We adapted the methodology developed by Bohen and Viveros-Long and asked respondents the following question: "Organizations can help employees by offering various services. A number of such services are listed below. If the services listed below are not available or you do not use them, please mark the appropriate yes or no answer and skip to the next service. If you use the service, please indicate the extent to which it helps you cope with work/personal/family issues. "Three sets of data are generated from this measure: (1) the percent of respondents who work for a company that offers each of the 13 services (response choice was yes or no), (2) the percent of respondents who actually use each of these services (response choice was yes or no), and (3) the extent to which those who use the service feel it helps them cope (5-point Likert scale where 1 = helps me cope to a very little extent, 3 = helps me cope to a moderate extent, and 5 = helps me cope to a very great extent).

2.2 Methodology

Box Three Measurement of Individual Coping Strategies

Individual coping: Coping has been defined as the "means by which individuals and organizations manage external or internal demands that tax or exceed the individual resources (Pearlin and Schooler, 1978). "The research literature has defined a number of coping strategies, including:

- changing the situation (direct action)
- changing the way one thinks about the situation (cognitive reappraisal)
- focusing on the stress reaction (symptom management)
- social support (getting help or encouragement from others)

This scale looks at individual coping strategies. The 13-item measure was originally developed in 1995 by the authors for use in a longitudinal study using items from measures developed by Hall (1972) and Pearlin and Schooler (1978). It is used here for comparability purposes. Key coping behaviours (both positive and negative) in each of the above four areas were included in the measure. While many of these coping strategies are to be encouraged (positive coping behaviours include talking things over with family and friends, prioritizing, getting help from family and friends), some (i.e. have a drink, use drugs) can be considered "negative coping behaviours." Respondents are asked in the survey to indicate how frequently they use each of the following strategies to cope with stress, anxiety and depression. They were given the following choices: 1 = never, 2 = monthly, 3 = weekly, 4 = several days per week, and 5 = daily. Higher scores reflect greater use of the coping strategy. In this analysis, we use the individual items rather than the scale to determine the effectiveness of the different coping strategies at coping with role overload, work-to-family interference, family-to-work interference and caregiver strain.

Having children: At the request of Health Canada, we included two questions in the survey that linked work–life conflict to the decision to have children. Respondents were asked to what extent they agreed with the following statements:

- have had fewer children because of the demands of my job.
- have not yet started a family because of my career.

A 5-point scale Likert scale (1 = strongly disagree, 3 = neutral, 5 = strongly agree) was used to collect responses. In all cases, higher scores indicate greater agreement with the statement.

These items were developed for this study.

2.3 Statistical Analysis

Box Four Measurement of Coping Strategies Used Within Family

Coping strategies used within family: Family coping behaviours were assessed using 18 questions from Skinner and McCubbin's (1987) Dual Employed Coping Scale (DECS). The complete DESC is a 5-point, 58-item Likert-style measure designed to identify and assess coping behaviours that spouses find helpful in managing work and family roles when one or both partners are employed outside the home. Items are in the form of strategies used by the couple in dealing with the pressures of their situation. The complete DESC is extremely comprehensive and its strategies often overlap. In this analysis, 17 items were selected from the DESC to quantify the following coping strategies:

- strengthening and modifying roles within the family unit (i.e. encouraging children to help out, specifically planning family time together)
- putting family first (i.e. limiting my job involvement so I will have time for the family, planning work changes around family needs)
- sacrificing own needs and standards (i.e. getting less sleep than I would like to have, leaving things undone around the house, trying to be flexible, cutting down on outside activities)
- procuring help from others (i.e. hiring help to care for children, buying more goods and services, relying on extended family members for help)

An additional question was added to the measure (i.e. hiring help to care for elderly dependents) to reflect the increased need for elder care in our society). Respondents were asked to indicate their level of agreement or disagreement to which each of the family coping strategies described their coping style. A Likert scale where 1 = strongly disagree, 3 = neutral and 5 = strongly agree was used for responses. The overall scale achieved a Cronbach alpha of .76.

Off-shifting: Many individuals in this sample work different hours than their partner to reduce the need for outside help for child care and/or elder care responsibilities. The following question was included in the survey to identify which respondents used this strategy: "Do you choose to work different hours than your partner in order to better manage child care or elder care responsibilities?" Two responses were allowed: yes and no.

2.3 Statistical Analysis

Data were summarized and analyzed using frequencies and analysis of variance (ANOVA). To assist the reader, key statistical terms are defined briefly in Box Five. Greater details on the use of ANOVA can be found in Duxbury and Higgins, 2005 (see Appendix A).

2.3.1 Frequencies

Box Five Terms Used in Discussing Statistical Analysis

Analysis of Variance (ANOVA): A technique that can be used to determine if statistically significant differences occur in means between two or more groups.

F-test: Statistic used to evaluate whether the means of groups are statistically different. If two or more means are unequal, we say we have a significant ANOVA.

p-value: Level of statistical significance. Traditionally, p-values of 0.05 or less are considered to be statistically significant.

Dependent variable: The outcome variable of the research (i.e. role overload, work-to-family interference, family-to-work interference, caregiver strain).

Independent variable: A variable that is expected to influence the dependent variable (i.e. coping strategy, work arrangement, management support).

 R^2 (*R-squared*): The amount of variance in the dependent variable that is explained by the independent variables. This statistic is used to determine the strength of the association between dependent and independent variables and ranges from 0 to 1. The closer R^2 is to 1, the stronger the association. Researchers often multiply the R^2 value by 100 and talk about the percent of the variation in the dependent variable (in this case work–life conflict) explained by the independent variable (the various coping strategies examined).

Bonferroni adjustment: This is a more conservative approach to hypothesis testing, which is done to control for what researchers call a type 1 error (i.e. the error of rejecting a null hypothesis when it is true). It is a simple procedure where the p-value of 0.05 (the common rejection level) is divided by the number of dependent variables included in the analysis to get a more conservative rejection level.

2.3.1 Frequencies

As a first step in all analysis, we calculated either (1) the percent of the total sample that used a particular coping strategy, or (2) the availability within the work environment of a particular potential moderator such as perceived flexibility. The methods used to operationalize "use" and "availability" in this analysis are summarized in Box Six.

2.3.1 Frequencies

Box Six Measurement of Use/Availability of the Different Coping Strategies

Work arrangement: Use was operationalized as follows:

- Percent who indicated that they worked a regular work arrangement, flextime, compressed work week (CWW), tele-work, part time (see Chapter Three for operational definitions)
- Percent who indicated that they worked a shift schedule (answered yes to working either a fixed shift or a rotating shift)
- Percent who performed guerrilla tele-work (spent more than an hour each week working from home during regular work hours)

Perceived flexibility: Availability was operationalized into three categories:

- Low flexibility (mean of less than 2.5)
- Moderate flexibility (mean of 2.5 to 3.5)
- High flexibility (mean of greater than 3.5)

Supportive manager: Availability was operationalized into three categories:

- Non-supportive manager (mean of less than 2.5)
- Mixed manager (mean of 2.5 to 3.5)
- Supportive manager (mean of greater than 3.5)

Non-supportive manager: Availability was operationalized into three categories:

- Non-supportive manager (mean of greater than 3.5)
- Mixed manager (mean of 2.5 to 3.5)
- Not non-supportive manager (mean of less than 2.5)

Supportive benefits: Use was measured as follows:

- Used (on survey indicated yes that this benefit was available in their organization, and yes that they used it)
- Did not use (on survey either indicated that no, this benefit was not available in their organization, or indicated that yes, the benefit was available but no they did not use it)

Individual coping strategies: Use was measured as follows:

- Rarely (combination of never and monthly)
- Weekly (weekly)
- Daily (combination of several times a week and daily)

$Delayed\ starting\ family/Had\ fewer\ children/Off-shift\ work\ hours:$

• Use defined as percent who indicated yes to this item

Family coping strategies: Use was measured as follows:

- $\bullet\,$ Rarely (combination of disagree strongly and disagree that they use strategy)
- Sometimes (indicted that they used occasionally)
- Often (combination of agree and agree strongly that they use this strategy)

To examine the impact of gender and job type on the use of the different coping techniques, we divided the sample into four groups (male managers/professionals¹¹, male other, female managers/professionals, female other) and then calculated frequencies for each of these groups using the method outlined above.

To examine the impact of gender and dependent care status on the use of the different coping strategies, we divided the sample into four groups (males with dependent care, males without dependent care, females with dependent care, females without dependent care) and again calculated frequencies by group.

Chi-squared analysis was performed to determine which groups were more or less likely to use the different coping strategies/ have access to the different supports within their work environment. Given the very large sample size, between-group differences of 1% or more were statistically significant. In this report, we limit our discussion to differences that were both significant and substantive (between-group difference of 5% or more).

This data analysis strategy will give us a greater appreciation of how gender, job type and dependent care status are related to the various moderators of work–life conflict explored in this study. It will also allow us to target our recommendations about how employees in these different demographic groups can best cope with the four different forms of work–life conflict.

2.3.2 ANOVA

We used a statistical technique called ANOVA to determine how effective the various coping strategies/environmental supports examined in this report are at reducing work–life conflict. A summary of the various ANOVAs calculated in these analyses is given in Box Seven.

Empirically, the previous reports in this series determined that the four dependent variables included in this analysis, as well as some of the independent variables (i.e. perceived flexibility, decision to have children), are significantly associated with gender, job type and dependent care status (see Duxbury & Higgins, 2001, 2003; Higgins & Duxbury, 2002 for a review of the relevant theory and findings). To minimize the impact of uncontrolled confounds on our findings, we did each of the ANOVAs in Box Seven twice. In the first set of analysis, we controlled for gender and job type by including an independent variable in the ANOVA (gender by job type), which was operationalized as follows:

- 1. Male managers/professionals
- 2. Male other
- 3. Female managers/professionals
- 4. Female other

¹¹ In this report, those in the "other" job group include those who work in technical, administrative, clerical and production positions. Those in the manager/professional group self identified themselves as working in these types of positions. A complete discussion of the operationalization of job type in this study can be found in Higgins and Duxbury, 2002.

In the second set of analysis, we controlled for gender and dependent care status by including an independent variable in the ANOVA (gender by dependent care), which was operationalized as follows:

- 1. Male no dependents
- 2. Male dependents
- 3. Female no dependents
- 4. Female dependents

This data analysis strategy will give us a greater appreciation of how gender, job type and dependent care status are related to the various moderators of work–life conflict explored in this study. It will also allow us to target our recommendations about how employees in these different demographic groups can best cope with the four different forms of work–life conflict.

Box Seven anovas

ANOVAs Done to Look at Effectiveness of Organizational Interventions

Overall impact of *alternative work arrangements* examined using work arrangement as the independent variable and each form of work–life conflict as the dependent variable (i.e. 4 ANOVAs)

Overall impact of *perceived flexibility* examined using total perceived flexibility measure as the independent variable and each form of work-life conflict as the dependent variable (i.e. 4 ANOVAs)

Impact of the different types of flexibility examined individually using each of the 10 items making up the measure as the independent variable and each form of work-life conflict as the dependent variable (i.e. 40 ANOVAs)

Overall impact of *supportive manager* determined using total supportive manager measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 4 ANOVAs)

Overall impact of **non-supportive manager** determined using total non-supportive manager measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 4 ANOVAs)

Impact of the 16 different supportive and non-supportive behaviours examined individually using each of the behaviours making up the measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 64 ANOVAs)

Impact of the different organizational supports examined using each of the 13 supports making up the measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 52 ANOVAs)

ANOVAs Done to Look at Effectiveness of Individual Coping Strategies

Impact of *personal* coping strategies examined using each of the 13 items making up the measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 52 ANOVAs)

Impact of *decision to have fewer children* examined using this strategy as the independent variable and each form of work–life conflict as the dependent variable (i.e. 4 ANOVAs)

Impact of *decision to delay* or not have children examined using this strategy as the independent variable and each form of work–life conflict as the dependent variable (i.e. 4 ANOVAs)

Impact of **off-shifting** examined using this strategy as the independent variable and each form of work-life conflict as the dependent variable (i.e. 4 ANOVAs)

ANOVAs Done to Look at Effectiveness of Family Coping Strategies

Impact of *family* coping strategies examined using each of the 18 items making up the measure as the independent variable and each form of work–life conflict as the dependent variable (i.e. 72 ANOVAs)

There are three statistics of interest in the ANOVA run:

- *The interaction term:* If this is significant, it means that the ability of the moderator to reduce work–life conflict varied depending on either the gender by job type or gender by dependent care of the respondent.
- The main effect for the moderator: If this is significant, it means that the level of this form of work-life
 conflict (i.e. overload) varies depending on the level of the moderator (i.e. supportive manager, mixed
 manager, non-supportive manager). In other words, the moderator has a significant impact on work-life
 conflict.
- The main effect for either gender by job type or for gender by dependent care: If this is significant, it means that the level of this form of work–life conflict (i.e. overload) varies depending on the level of the gender by job type or gender by dependent care.

In each of these cases (i.e. interaction term, main effect) there are two statistics of interest: the significance level of the F statistic, and the R^2 (i.e. the amount of the variation in work–life conflict explained by the independent variables). The following conventions were employed during data analysis:

- We used an R² of 4% or greater (i.e. .04) as an arbitrary determination of substantiveness (i.e. the moderator is linked to work–life conflict in a meaningful way and/or worthy of note).
- To compensate for the large number of tests being performed, significance levels for the F test were set at p = .01 or less.

While a complete set of findings is given in the Appendices, only those results that met both these criteria are discussed in detail.

ANOVA analysis was done as follows. The interaction term was examined first. If the interaction was significant and substantive, then we examined the mean work-life score reported for the different demographic groups at low, medium and high use (or low, medium and high availability) of the moderator. If the interaction term was not significant, we looked at the main effect for the moderator to determine the relationship between the moderator and work-life conflict. If the main effect for the moderator was significant and substantive, then we looked at the mean work-life score for the three levels of the moderator variable. If the main effect for the moderator was not significant and substantive, we concluded that this coping strategy did not reduce/increase work-life conflict. Finally, it should be noted that we do not include an in-depth analysis of the gender by job type or gender by dependent care main effects. Such analysis can be found in Duxbury and Higgins, 2003.

Chapter Three Reducing Work–Life Conflict: What Can Organizations Do?

Chapter Three Reducing Work–Life Conflict: What Can Organizations Do?

For some time, Canadian organizations have focused on "streamlining," "downsizing" and "doing more with less." Our research would suggest that the considerable restructuring that has taken place within many Canadian workplaces over the past few decades and workplace practices that are driven by concern for the "bottom line" rather than recruitment, retention and motivation of employees has taken a toll on both employers and employees alike. As noted in Chapter One of this report, employee engagement and organizational commitment have been negatively impacted, productivity has declined, workloads have increased, demands on Canada's health care system have escalated, and the incidence of stress, burnout and work–life conflict has risen dramatically (Duxbury & Higgins, 2003; Higgins & Duxbury, 2002; Higgins et al., 2004).

Future success in an increasingly competitive business environment will depend on making the most of one's employees. While Canadian organizations have long held that "people are our most important resource," the policies and practices currently in place in many organizations do not reflect this view. Canadian employers, faced with an impending labour force shortage, are searching for ways to stay "lean and mean" but effective (Johnson et al., 1999). Dealing with the issue of work–life balance offers one strategy employers can use to increase their ability to recruit and retain employees in a "sellers market" for labour.

There are two broad categories of support that organizations can provide their employees to help them obviate and cope with work–family conflict. First, organizations may provide formal supports such as family-oriented policies and benefits (e.g. parental leave, ability to take time off and make it up later, flextime, job sharing, sick child care, and flexible work arrangements), which give employees autonomy over their hours and their absence from work. Second, the organization can supply a number of informal supports such as a family-friendly organizational culture (e.g. flexibility around hours and location of work) and supportive managers (Behson, 2005; Hall, 1990; Warren & Johnson, 1995), which may help employees deal with work–life conflict.

The types of support offered, and the level of organizational commitment to work–lifestyle issues, varies widely across companies. This part of the report examines the prevalence of four organizational initiatives or practices that the research literature suggests may help employees balance work and family demands:

- alternative work arrangements
- perceived flexibility with respect to hours and location of work
- supportive management
- supportive policies

3.1 Why Do Canadian Organizations Need to Focus on Work–Life Balance?

This section also empirically links each of these potential work–life moderators to the incidence of the four forms of work–life conflict: role overload, work-to-family interference, family-to-work interference and caregiver strain. Such information should prove invaluable for managers who are trying to develop the business case for change and policy makers who seek to affect change.

This chapter is divided into six sections. In section 1, we provide a number of key reasons why organizations should consider implementing policies and practices to support work–life balance. The case for change presented in this section goes beyond the typical dollars and cents approach¹² and instead links work–life conflict to the ability to recruit and retain employees. Section 2 evaluates the degree to which flexible work arrangements help employees cope with the different forms of work–life conflict. Specifically, we look at the link between work–life conflict and a number of formal alternative work arrangements, including working a "9-to-5" workday, flextime, compressed work week, part-time work, formal tele-work and shift work. In section 3, the discussion focuses on the impact of perceived work-time and work-location flexibility and other informal arrangements such as guerilla tele-work on work–life conflict. Section 4 explores how the behaviour of an employee's immediate manager may exacerbate or ameliorate work–life conflict. Section 5 investigates the relationship between the use of various family-oriented benefits and policies and role overload, role interference and caregiver strain. The chapter concludes in section 6 with an overview of how organizations can reduce the incidence of role overload, work-to-family interference, family-to-work interference and caregiver strain in their workforce.

3.1 Why Do Canadian Organizations Need to Focus on Work–Life Balance?

The link between recruitment and retention of knowledge workers and the availability of work–life policies and supports (Duxbury & Higgins, 2001, Kurland & Bailey, 1999) provides a compelling reason for Canadian organizations to take another look at this issue. The need to benchmark human resource initiatives such as the implementation of flexible work arrangements and family-friendly benefits and policies against competitors, both within and outside the country, has increased dramatically as Canada, and the rest of the industrialized world, enters a "sellers" market for workers in general and skilled labour in particular (AFT Public Employees, 2002; Certified General Accountants Association of Canada, 2005). A number of demographic trends have contributed to these projected labour force shortages, the chief of which is a global aging of the population due to a worldwide transition over time from "high fertility and mortality rates to low fertility and delayed mortality" (Certified General Accountants Association of Canada, 2005, p. 35). The magnitude of these changes can be illustrated by considering the situation in Europe and Canada.

Europe is currently facing unprecedented demographic change. In 2003, it reported a natural increase in population of just 0.04% per annum (Commission of the EU, 2005). In 2005, the fertility rate in all EU-25 nations was well below the 2.1 rate needed for population replacement and had fallen below 1.5 in two thirds of the EU-25 states (Commission of the EU, 2005). EU projections

 $^{^{\}rm 12}$ The financial case for change can be found in Higgins et al., 2004 and Duxbury and Higgins, 2003.

3.1 Why Do Canadian Organizations Need to Focus on Work–Life Balance?

indicate that by 2010, the working aged population (age 15 to 64) will be in decline in all EU-15 and EU-25 nations and older cohorts will become more numerous than younger cohorts as baby boomers move through the age pyramid (Commission of the EU, 2005). It is estimated, in fact, that the working age population will drop by 20.8 million between 2005 and 2030 (Commission of the EU, 2005).

The situation in Canada is very similar to that reported in the EU. Canada's fertility rate dropped below 2.1 in 1972 and has not done much better than 1.5 since 1998 (Beaujot, 2001). Government forecasts indicate that between 2011 and 2015 the Canadian labour force will grow only by 0.5%. No labour force growth is expected from 2016 to 2025 (Certified General Accountants Association of Canada, 2005). These trends can be attributed to two factors: a decline in the labour force participation rate for baby boomers, and the fact that the "millennium bust cohort" that is due to enter the labour market is relatively small because of the decline in fertility rates. Mass exits and retirements from the workforce will create a shortage of skilled workers which, combined with an older workforce, is expected to hinder efforts to increase economic output and productivity in Canada (Certified General Accountants Association of Canada, 2005). The magnitude of the problem in Canada is reflected in estimates that suggest that within the next decade Canadian employers will be faced with a situation where for every two people who are retiring there will be less than one person to take their place.

This phenomenon (aging populations, lower birth rates) is (with the exception of Africa) going to become a global challenge over the next three decades. While pressure is going to be highest in the EU, Japan and North America, the Commission of the EU (2005, p. 17) notes that all developed regions of the world will "need to redesign policies and institutional arrangements to resolve the problems." Specifically, organizations and policy makers will need to focus on implementing employee-friendly benefits, policies and practices that can be linked to more effective recruitment and retention of employees in general and younger employees in particular.

Key factors that have been found to affect skill shortages include the geographic mobility of workers and working conditions that make it difficult to attract and/or retain workers (Certified General Accountants Association of Canada, 2005). Canadian organizations with cultures that focus on hours (i.e. advancement limited if you do not work long hours or if you say no to more work), emphasize work or family (i.e. family responsibilities and family leave are perceived to limit advancement) and are non-supportive of balance, are likely to experience problems recruiting and retaining talent in such a market.¹³ While immigration, on its own, is unlikely to solve this problem (projections by the Commission of the EU (2005) indicate that the global need for skilled labour will far outstrip supply), countries able to attract skilled immigrants will be more competitive than those that cannot. The EU has recognized this fact and in the Lisbon Agenda pledges to "resolutely implement policies designed to get people into jobs"—and attract skilled immigrants to work in the EU (Commission of the EU, 2005, p. 18). The policies being considered by the EU include flexible work arrangements, paid personal leave and on-site day care, to name a few. The link between flexible work arrangements and a greater ability to attract skilled labour has been recognized by policy makers and researchers (OECD, 2005).

¹³ Our research (Duxbury and Higgins, 2005) suggests that approximately half of Canada's largest employers have such a culture.

3.1 Why Do Canadian Organizations Need to Focus on Work–Life Balance?

The retention of competent employees, particularly baby boomers, is also fundamental to survival in a "sellers" market for labour. Substantial movement of the baby boomers out of the workforce strains businesses, which then need to devote resources to recruit and retain talent (Christensen & Pitts Catsouphes, 2005). Reversing the early retirement trend (the average age of retirement in Canada in 2002 was 61.2 years) and implementing policies that encourage older employees to delay retirement have been identified as effective ways to enlarge the effective labour force and combat skill shortages (Certified General Accountants Association of Canada, 2005; Commission of the EU, 2005).

The question then becomes, how do we retain the services of our skilled baby boomers? At the present time, a mismatch exists between the need for organizations to retain the talent of older workers and the availability of viable options that would keep them in the workforce. Motivating workers to stay longer in the workforce requires progressive policies that balance work and family life and introduce greater choice (Certified General Accountants Association of Canada, 2005, p. 80). Similarly, the Organisation for Economic Co-operation and Development (OECD) (2005) has recommended that policies geared to extending work life be a priority for countries with an aging population.

Now is clearly the time for countries and organizations worried about impending labour force shortages to consider implementing flexible work arrangements (Christensen & Pitts Catsouphes, 2005). A number of sources report that the implementation of flexible work arrangements such as compressed work weeks, pro-rated part time work, job sharing and tele-work are being explored in many countries (Certified General Accountants Association of Canada, 2005; OECD, 2005, Commission of the EU, 2005). In such an environment, it is important that organizations and policy makers know how the benefits they offer compare with employment opportunities elsewhere (AFT Public Employees, 2002). To this end, this report provides relevant benchmark data on the use of the following employee-friendly benefits in Canada in 2001: alternative work arrangements, flexible work environments, supportive managers, and formal benefits and policies such as paid personal days off work, emergency leave, child and day care referral, etc. Such an analysis will provide valuable benchmark data with respect to the use of various employee-friendly policies and practices in Canada at the start of the millennium. Findings from this phase of the research should prove useful to groups that wish to establish trends for the use of these different arrangements, companies that wish to evaluate how they are doing with respect to this issue, and other countries that wish to compare their data with Canadian data.

This study also examines to what extent these various benefits and policies actually help employees balance competing work and family demands. Such information is critical to policy makers and companies seeking advice as to what types of work-life policies and practices to implement and how to maximize the benefits they receive given their spending in the area (i.e. maximize their return on investment). These data will also allow organizations and governments to target their interventions to a particular type of work-life conflict or to a specific group of employees (i.e. female managers and professionals, women with children).

3.2 Alternative Work Arrangements

3.2 Alternative Work Arrangements

According to the *Financial Post*,¹⁴ the dictatorship of time—the power of the 5-day, 9-to-5 schedule that determines how people organize their lives—is eroding. Unfortunately, our data suggest that this erosion is not occurring fast enough to satisfy many public and private sector employees who both want and need greater work-time and work-location flexibility (Higgins & Duxbury, 2002). While the current needs of our society require a diversity of work schedules, the majority of Canadians employed by the largest employers work "regular" morning to late afternoon hours. In 2001, just over half (52%) of the respondents to our survey worked a "regular" work day (i.e. little to no formal flexibility with respect to arrival and departure times; no work-location flexibility); 21% worked flextime (approximately the same percent as reported in our 1992 work-family study); 13% worked a compressed work week and 14% worked "atypical" schedules. Formal job sharing and tele-work programs were rare, with only 1.3% of the sample using job share arrangements and 1% formally tele-working. These data are very similar to those obtained by Statistics Canada in its 1995 Alternative Work Arrangement Study and lead to the same conclusion: the use of flexible work arrangements in Canadian organizations is relatively low. This lack of work flexibility causes problems for employees with conflicting family demands since: (1) excessive work hours limit time with one's family; (2) the work day either starts too early or ends too late, restricting quality time with the family; and (3) work schedules often do not mesh with child care arrangements and other family activities.

Organizations that insist on regular work schedules have the same expectations of employees, regardless of family situation, and fail to recognize the impact of the work domain on the family domain. Sensitivity to family interests by employers has lagged behind the emergence of these concerns as an issue for employees. Working mothers still bear the primary burden of balancing work and family responsibilities, and are more likely to require a flexible work arrangement. Men with young children are also bringing increased expectations for work flexibility to the workplace. There is nothing inherently magical about the traditional 5-day, 40-hour work week. A number of researchers, in fact, feel that many organizations use this schedule solely as a result of tradition. Organizations have recently become interested in alternative ways to schedule work. The literature mentions nine factors that have played an instrumental role in this development: (1) an increase in the number of women participating in the workforce; (2) interest in and adoption of new lifestyles; (3) an increase in the number of single-parent and dual-provider households; (4) new relationships between work and education; (5) the aging of the workforce; (6) the growth of the service sector; (7) the pressures of unemployment and inflation; (8) a change in the way people perceive both work and leisure time; and (9) technological conditions that have created a favourable climate for computer-based work to be done at home (Johnson et al., 1999).

Despite the fact that increasing numbers of employees want flexible work arrangements, "resistance is strong and obstacles are many. Upper management is reluctant to introduce change; unions are reluctant to negotiate some arrangements (i.e. tele-work, part-time work); supervisors find it difficult to manage workers on flexible arrangements; and employees who cannot participate are often resentful of those who can" (The Bureau of National Affairs, 1989: 24).

¹⁴ The 9-to-5 Routine Headed for Extinction, *Financial Post* (May 20, 1991), p. 15.

3.2.1 Measurement of Alternative Work Arrangements in This Study

Why should organizations consider implementing flexible work arrangements? As noted earlier, in a "sellers" market for labour, whether or not an organization offers work-arrangement flexibility could turn out to be an important factor in its ability to recruit, retain and motivate top quality staff. Other reasons for considering such an option include the fact that research has noted that work arrangement flexibility increases an employee's ability to control, predict and absorb change in both the work and family settings. Increased perceptions of control are, in turn, associated with lower levels of stress and work–life conflict, improved employee commitment and morale, increased productivity and lower absenteeism (Duxbury et al., 1992).

3.2.1 Measurement of Alternative Work Arrangements in This Study

Three questions were used in this study to determine the type of work arrangements used by participating organizations. Respondents were asked to fill in the phrase that best described how their work was arranged. They were offered the following options:

- Regular: You work a set number of hours each week, arriving and departing at the same time each day.
- Flextime: You vary your arrival and departure times around a "core" time when you should be at work.
- Compressed Work Week (CWW): You get one working day off every week or two in return for longer hours.
- Part time: You work a reduced number of hours each week.
- Job sharing: You share the same job with another on a part-time basis.
- Work-at-home/Tele-work: You spend part of your regular work week working at home.
- Other: Your schedule does not conform to any of the above.

To assess the extent to which employees were allowed to work from home on an informal basis (i.e. commonly referred to as "guerrilla tele-work"), we asked employees to indicate if they spent any time working at home during regular hours. Those respondents who indicated they did were asked the average number of hours per week that they engaged in such activities. Respondents who spent at least an hour a week engaged in this form of work were considered in this analysis to perform guerrilla tele-work. Finally, we asked respondents to indicate if they worked a fixed shift, a rotating shift or no shift at all. For analysis purposes, respondents who worked either a fixed shift or a rotating shift were considered shift workers.

3.2.2 Use of Alternative Work Arrangements in Canadian Firms

3.2.2 Use of Alternative Work Arrangements in Canadian Firms

Data on the use of these different work arrangements are shown in Table 1. These data are very similar to those obtained by Statistics Canada in 1995, suggesting that Canadian firms look much like they did a decade ago with respect to the use of alternative work arrangements. This is unfortunate given the changes that have been observed with respect to the Canadian workforce in this same time period. So what conclusions can be drawn from these data about the use of alternative work arrangements in Canada's larger organizations?

The use of flexible work arrangements in Canada's larger organizations is relatively low

The use of flexible work arrangements in Canada is relatively low. Just over half (59%) of the respondents work a "regular" work day; 23% work flextime (approximately the same percent as reported in the 1995 Statistics Canada study); 14% work a compressed work week and 4% work part time. Formal job sharing and tele-work programs are rare. Only 1.3% of the sample job share; 1% formally work from home. The sample job share is the sample job share; 1% formally work from home.

Data on the use of the various work arrangements are shown in Table 2 broken down by gender, job type and dependent care status. While the use of compressed work week arrangements is not associated with job type or gender or dependent care status, the use of all the other work arrangements can be linked to these factors.

Table 1: Use of Alternative Work Arrangements

Work Arrangement	Percent Using
Regular work day	58.9
Flextime	23.1
Compressed work week (CWW)	14.2
Part time	3.9
Formal tele-work	1.1
Shift work	23.3
Guerilla tele-work	16.1

Note: The totals are different than those reported in Report One due to the following factors: (1) respondents who worked part time were included in the sample for this analysis but removed from consideration in Report One, and (2) respondents who worked "other work arrangements" were not included in the sample for this analysis but were part of the sample for Report One.

¹⁵ It should be noted that the low use of part-time work in this sample is consistent with the fact that contingent and contract workers were not included in the sample.

¹⁶The low sample size means that we cannot examine the impact of formal tele-work arrangements on work-life conflict.

3.2.2 Use of Alternative Work Arrangements in Canadian Firms

Table 2: Impact of Gender, Job Type and Dependent Care of Use of Alternative Work Arrangements

Work Arrangement	Male		Female	
	M/P	0	M/P	0
Regular work day	54.5	64.1	52.2	62.7
Flextime	32.3	18.6	27.8	16.1
Compressed work week (CWW)	12.6	16.4	13.6	13.3
Part time	0.5	0.9	6.4	5.9
Shift work	21.8	28.6	17.7	24.9
Guerilla tele-work	19.9	11.2	22.5	9.1
	D	No D	D	No D
Regular work day	59.4	58.3	60.2	58.1
Flextime	27.3	26.4	17.3	22.3
Compressed work week (CWW)	12.6	14.5	14.6	14.3
Part time	0.7	0.7	7.8	5.9
Shift work	21.8	27.4	21.8	28.0
Guerilla tele-work	23.0	13.9	19.0	12.7

Note: Use of regular, flextime, CWW and part-time schedules should sum to approximately 100% (rounding error means that the total will not be exactly 100%). Respondents could combine the use of shift work and guerilla tele-work with any of the other work arrangements.

Managers and professionals more likely to work flextime arrangements

With one exception (part-time work), the use of alternative work arrangements is not associated with gender. It does, however, vary with job type. Managers and professionals are almost twice as likely as those in "other" positions to use flextime work arrangements and perform guerrilla tele-work. Those in other positions, on the other hand, are more likely than their counterparts in managerial and professional jobs to work a fixed work schedule and perform shift work. In other words, employees in management and professional positions (regardless of gender) are more likely than those in other positions to use work arrangements that offer greater work-time and work-location flexibility.

Women are more likely than men to use part-time work arrangements

Regardless of their family situation or job type, women were significantly more likely to use part-time work arrangements than men. This gender difference is consistent with what has been reported by Statistics Canada (1995). The fact that this gender difference in use of part-time work could be observed regardless of dependent care status suggests that different groups of women have different reasons for working part time. In other words, employees should not assume that women who seek to work part time are doing so because they want to/need to spend more time on child care/elder care.

Women with responsibilities for dependent care are less likely to work flextime

Women with child and/or elder care responsibilities are less likely than any other group to use flextime arrangements. This finding is unfortunate as it suggests that many employees who have greater need for such arrangements do not have access to them. It also suggests that organizations still persist in ignoring family circumstances when designing work schedules. In other words, the "myth of separate worlds" still appears to be the operating principle in many of Canada's largest employers.

Employees with dependent care responsibilities are more likely to perform guerrilla tele-work

Men and women with dependent care responsibilities are more likely to perform guerrilla tele-work than their counterparts without dependent care. It may be that these employees use this work arrangement to get work-related tasks done when they need to stay home to look after a sick child or an elderly parent. Such an arrangement could provide a win-win solution for both employer and employee.

Employees without dependent care responsibilities are more likely to perform shift work

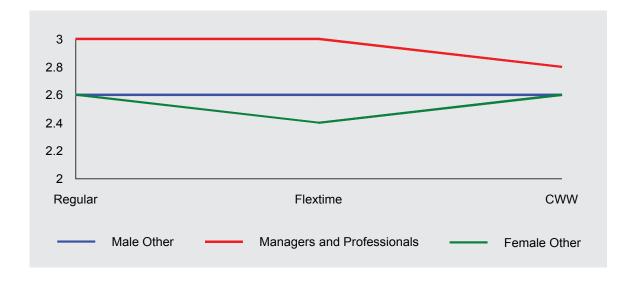
Employees without dependent care responsibilities are, regardless of their gender, more likely to perform shift work than their counterparts with dependent care. This is an interesting finding. It may be that employees with dependent care responsibilities try to avoid this work schedule as they perceive that such work arrangements make it more difficult for them to fulfill their caregiving commitments. Alternatively, it may be that employers are more likely to assign shift work to employees who have fewer obligations outside of work. While their motives in this regard might be altruistic, they might also perceive that such a strategy will reduce absenteeism and turnover.

3.2.3 And So What? The Link Between the Use of Alternative Work Arrangements and Work–Life Conflict

Data analysis done to determine how the use of various alternative work arrangements impact work-life conflict is provided in Appendix B and discussed in the sections below. The link between work-life conflict and working a regular 9-to-5 work day versus flextime or a compressed work week are discussed first. This is followed by an examination of how part-time work arrangements affect the various forms of work-life conflict. Examination of the impact of shift work and guerrilla tele-work on work-life conflict is dealt with in the final two parts of this section.

Figure 1: Relationship Between Work Arrangement, Gender, Job Type and Work-to-Family Interference

Gender by Job Type. Work-to-Family Interference and Work Arrangement



Work arrangement is not associated with role overload

The data indicate that role overload is not significantly impacted by how one's work day is arranged.

Compressed work weeks are associated with lower work-to-family interference for managers and professionals

Work arrangement is significantly associated with the extent to which work interferes with family.¹⁷ The relation is not, however, straightforward and depends on the gender of the employee as well as the type of job performed (Figure 1). For managers, regardless of gender, working a compressed work week is associated with reduced levels of work-to-family interference. This suggests that compressing work hours into fewer days gives employees with higher work demands time that they can use to deal with family concerns and issues. Working a compressed work week does not, however, have an impact on work-to-family interference for those in other positions within the organization.

Flextime is associated with lower work-to-family interference for women in other positions

Women in other positions (i.e. clerical, administrative, technical) within the organization who work flextime report lower levels of work-to-family interference than their counterparts who work a regular work day or a compressed work week. No such impact can be observed for their male counterparts (in fact, work arrangement is not related to this form of work–life conflict for men in other positions). Additionally, flextime does not have an impact on this form of work–life conflict for men and women in managerial and professional positions.

¹⁷ Relationship significant and substantive in analysis that controls for gender and job type. Not substantive in gender by dependent care analysis.

Regular work schedules are associated with lower levels of family-to-work interference

Work arrangement is significantly associated with the extent to which family demands and responsibilities are perceived to interfere with work. Men and women with dependent care responsibilities who work a regular, fixed work schedule (i.e. the beginning and end of their work day is fixed) report the lowest levels of interference (mean of 2.1), while their counterparts who work flextime report the highest (mean of 2.3). This increase may be because flextime arrangements make it difficult for an employee to say no to family demands (especially if their spouse or partner works a less flexible arrangement)—thereby increasing this type of interference. Alternatively, it may be that family members are more likely to expect the partner/parent who works flextime (as opposed to a fixed schedule) to be able to interrupt their work day or reschedule their work to deal with a family emergency or attend a family event. Such expectations would increase this form of work–life conflict for such individuals. Where does a compressed work week fit into this picture? The data indicate that employees who work a compressed work week report levels of interference that are between these two extremes (mean of 2.2).

Employees with dependent care who use flextime arrangements report lower caregiver strain

Work arrangement is significantly associated with caregiver strain. ¹⁹ Men and women with dependent care responsibilities who work flextime arrangements report the lowest levels of caregiver strain (mean of 1.6) while their peers who work a 9-to-5 day (mean of 1.9) and a compressed work week (mean of 1.8) report higher levels of strain. These findings suggest that flextime arrangements give employees a greater ability to fulfill responsibilities associated with their role as elder caregiver (e.g. take a dependent to a doctor's appointment) during work hours. Unfortunately, our data suggest that this greater level of flexibility seems to come at a cost—higher family-to-work interference.

Employees who work part time report lower levels of role overload

Part-time work arrangements are significantly associated with lower levels of role overload.²⁰ The data from both the gender by job type (Figure 2a) and gender by dependent care analysis (Figure 2b) paint the same picture with respect to the association between role overload and working part time:

- With one exception (employees without dependent care), part-time work is associated with lower levels of role overload.
- Part-time work is more effective in reducing role overload for men than women, regardless of job type or dependent care status.

These findings indicate, not surprisingly, that one way to reduce role overload is to spend less time in paid employment. The data showing that men realize a larger reduction in role overload than women suggest that when women move to part-time status, they devote a greater percent of the time that was previously devoted to work to non-work roles than their male counterparts. It is also interesting to note that women in managerial and professional positions realize very little gain from working part time.

¹⁸ Relationship is significant and substantive in analysis that controls for gender and dependent care status. Not substantive in gender by job type analysis.

¹⁹ Relationship is significant and substantive in analysis that controls for gender and dependent care status. Not substantive in gender by job type analysis.

 $^{^{20}}$ An R² of .040 in the gender by job type analysis and an R² of .048 in the gender by dependent care analysis.

Additional analysis of the data (not shown) sheds light on this finding. This analysis found that women in managerial and professional positions who work part time spend more time in work than any other group of part-time employees (almost 30 hours a week). They also spend more time in dependent care activities than their counterparts who are working full time. As a result, the total number of hours women in this group devote to work and family activities is not much less than their counterparts who are working full time.

Employees who work part time report lower levels of work-to-family interference

The data also indicate that employees with dependent care responsibilities who work part time will also realize significantly lower levels of work-to-family interference. In other words, one way to reduce the extent to which work roles and responsibilities make it difficult to meet demands at home is to reduce to part-time status. The relationship between work-to-family interference and work and part-time work for men and women with and without dependent care is shown in Figure 3. The following observations can be made by looking at this figure:

- With one exception (men without dependent care), part-time work is associated with lower levels of work-to-family interference.
- Part-time work is more effective in reducing this type of interference for men and women with dependent care responsibilities than for those without responsibilities outside of work.
- While part-time work is associated with lower work-to-family interference for women without dependent care responsibilities, it has no association with this form of work-life conflict for men in this group.

These findings suggest that reducing one's work status to part time is one strategy that men and women with dependent care responsibilities who are experiencing high levels of work-to-family interference should consider.

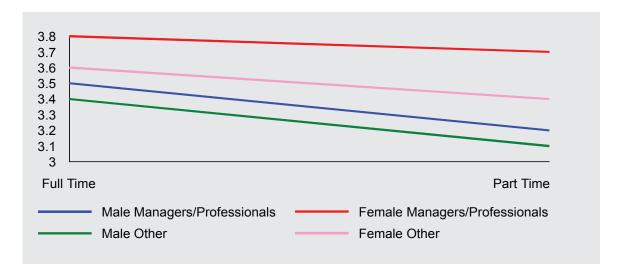
Part-time work is associated with higher levels of family-to-work interference for women

Part-time work is significantly associated with the extent to which family interferes with work.²¹ The relation is not, however, straightforward and depends on the gender of the employee as well as their dependent care status (Figure 4). First, it is clear that working part time is an effective strategy for reducing family-to-work interference for men with dependent care responsibilities. Men with dependent care responsibilities who work part time report significantly lower levels of family-to-work interference than their counterparts who work full time. The same cannot be said for any of the other groups in the analysis. Regardless of their dependent care status, women who work part time report higher levels of family-to-work interference than those who work full time. Similarly, men without dependent care who work part time report higher levels of this form of interference than their peers who work full time. It is hard to determine what these findings mean without longitudinal data. They may indicate that people who find that family demands are interfering with their work move to part-time status as a way to cope with these issues (i.e. high family-to-work interference increases the likelihood that someone will work part time). Alternatively, it may be that employees who work part time as a way to cope with dependent care responsibilities are more likely to feel that their family is getting in the way of their work (i.e. part-time work leads to greater perceptions of family-to-work interference).

²¹ The relationship is significant and substantive in the analysis that controls for gender and dependent care status. It is not substantive in the gender by job type analysis.

Figure 2: Role Overload and Part-Time Work

a. Relationship Between Part-Time Work, Gender, Job Type and Role Overload



b. Relationship Between Part-Time Work, Gender, Dependent Care Status and Role Overload

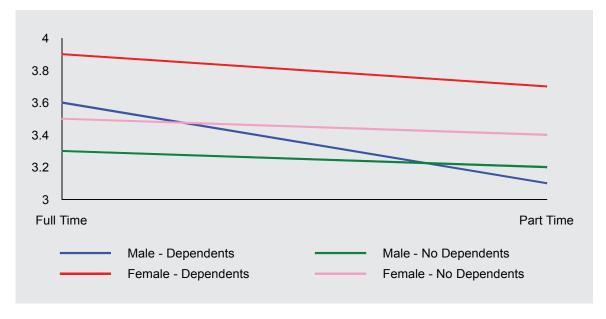


Figure 3: Relationship Between Part-Time Work, Gender, Dependent Care Status and Work-to-Family Interference
Work-to-Family Interference and Part-Time Work

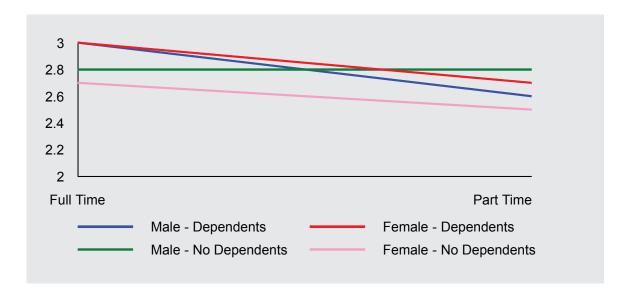
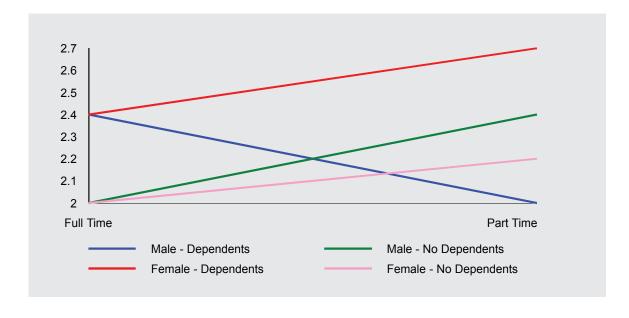


Figure 4: Relationship Between Part-Time Work, Gender, Dependent Care Status and Family-to-Work Interference
Family-to-Work Interference and Part-Time Work



Part-time work does not help employees cope with caregiver strain

Data from this study are unequivocal—part-time work does not help employees cope with caregiver strain (the relationship is neither significant nor substantive in either the gender by job type or the gender by dependent care analysis).

Men with dependent care who work shifts report lower levels of role overload

With one exception (male shift workers with dependent care), shift work is not associated with role overload.²² Data on the relationship between shift work, gender by dependent care status and role overload are shown in Figure 5. As can be seen, shift work has no impact on role overload for men and women without dependent care and for women with dependent care. For men with dependent care, however, shift work has an unexpected benefit—reduced role overload. Examination of the time in dependent care data (not shown) helps to explain this finding. Men who perform shift work spend fewer hours a week in child care than their counterparts who do not work shifts (perhaps because they are not available when family chores are typically performed or because they are too tired after working their shift to pick up family tasks). Finally, it is interesting to note that no such difference was observed for the women in the sample. In fact, women with dependent care reported the highest levels of overload of any group regardless of how their work day was arranged.

Shift work is associated with higher levels of work-to-family interference

Shift-work arrangements are significantly associated with higher levels of work-to-family interference.²³ The impact of shift work on this form of work-life conflict is not, however, straightforward and depends on gender by job type (Figure 6a) and gender by dependent care analysis (Figure 6b). The following conclusions can be drawn by examining these figures:

- Managers and professionals report higher levels of work-to-family interference than those in other positions, regardless of whether or not they perform shift work.
- With one exception (women without dependent care), employees who perform shift work report higher levels of work-to-family interference than those who do not work shifts.
- Shift work is not associated with work-to-family interference for women without dependent care.
- Women in "other" positions within the organization who work shifts experience the most difficulties with
 work-to-family interference (i.e. report greatest increase in work-to-family interference from no shift to
 shift conditions).

 $^{^{22}}$ An R² of .024 in the gender by job type analysis and an R² of .045 in the gender by dependent care analysis.

²³ An R² of .058 in the gender by job type analysis and an R2 of .042 in the gender by dependent care analysis.

Figure 5: Relationship Between Shift Work, Gender, Dependent Care Status and Role Overload

Role Overload and Shift Work

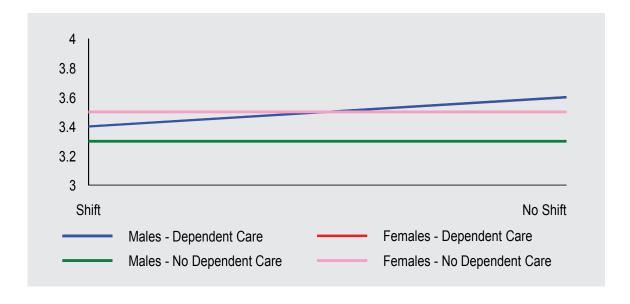


Figure 6: Work-to-Family Interference and Shift Work

a. Relationship Between Shift Work, Gender, Job Type and Work-to-Family Interference

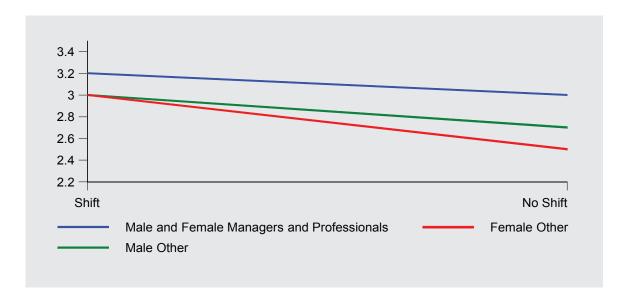
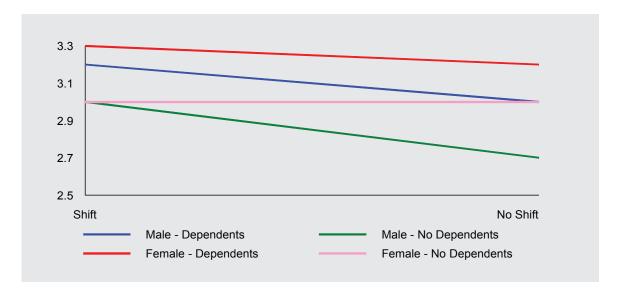


Figure 6: Work-to-Family Interference and Shift Work

b. Relationship Between Shift Work, Gender, Dependent Care Status and Work-to-Family Interference

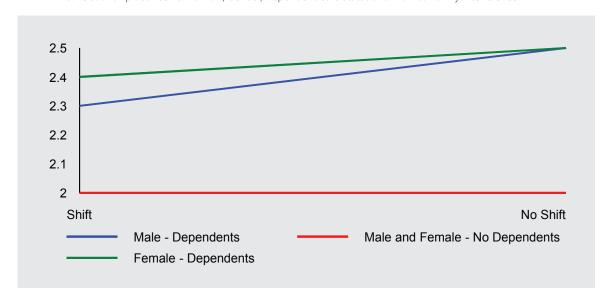


Several key points can be made using these data. First, employees with dependent care responsibilities, regardless of their gender, appear to find shift work problematic. This finding is consistent with the research literature in the area, which has noted that shift work makes it more difficult for the employee to attend family events that take place when they are working or sleeping. This study would suggest that one way these individuals could reduce work-to-family interference is to avoid (if possible) or minimize the amount of shift work they commit to when their children are young or elderly dependents require care. This recommendation is consistent with the fact that men and women without dependent care who work shifts experience fewer problems with this work arrangement than their counterparts with heavier responsibilities at home.

Second, shift work appears to be more problematic (at least with respect to this form of work–life conflict) for employees in "other" positions within the organization. Women in other positions, in particular, seem to find it difficult to meet family demands when working shifts. While it is difficult to determine why this is the case, there are several likely possibilities. First, as noted in Higgins and Duxbury (2002), employees in this sample who work in managerial and professional positions report significantly higher incomes than those in other jobs. It may be that this higher income provides managers and professionals who work shifts with the means to purchase family supports when they are working shifts. Alternatively, it may be that managers and professionals, by virtue of their position within the organization, have more control of what shifts they work and when they work such shifts. This interpretation suggests that organizations could help reduce the work-to-family interference levels of shift workers by giving them more control over their shift schedule (i.e. allow employee input into the shift schedule, permit trading of shifts between employees).

Figure 7: Relationship Between Shift Work, Gender, Dependent Care Status and Family-to-Work Interference

b. Relationship Between Shift Work, Gender, Dependent Care Status and Work-to-Family Interference



Employees with dependent care who work shifts are less likely to report family-to-work interference

Knowing whether or not an employee performs shift work explains a significant amount of the variation in family-to-work interference when gender and dependent care are also taken into account.²⁴ Similar to what was observed with respect to role overload, the link between shift work and reduced family-to-work interference is greatest for men with dependent care responsibilities (Figure 7). While women with dependent care who work shifts also report lower levels of family-to-work interference than their counterparts who do not perform shift work, the difference is not as great as observed for men. The fact that family demands are less likely to intrude on work done outside of the traditional 9-to-5 band can likely be attributed to the large number of Canadians who off-shift work with their spouse. As reported previously (Higgins & Duxbury, 2002), one in three of the employees in our sample arranges their work schedule so that they and their partner can share child care (i.e. work a different shift than their partner so that they do not need to arrange any kind of child care).

Shift work is not associated with caregiver strain

The data indicate that shift work is not associated with caregiver strain (relationship is not significant in either the gender by job type or gender by dependent care analysis). In other words, working shifts does not make it easier or harder to deal with issues associated with elder care.

²⁴The relationship between shift work and family-to-work interference was not significant in the gender by job type analysis.

3.3 Perceived Flexibility

Guerrilla tele-work is associated with increased role overload and interference

The results of this study pointed out that employees with dependent care responsibilities were more likely to perform guerrilla tele-work. We suggested that parents might use this type of work arrangement to combine dependent care responsibilities with paid employment (e.g. opt to work from home when a child is sick rather than phone in sick). Examination of the link between guerrilla tele-work and work-life conflict indicates that employees who engage in this strategy report higher levels of role overload, work-to-family interference and family-to-work interference. Furthermore, the fact that none of the interaction terms was significant indicates that this strategy is problematic for men and women regardless of the type of job they perform or whether or not they have dependent care.

The data indicate that guerrilla tele-work is more problematic from a role interference perspective (employees with dependent care who perform guerrilla tele-work report mean levels of both forms of interference that are 0.3 higher than those who do not perform informal work from home during regular hours) than from a role overload perspective (difference in means of only 0.2). This suggests that it is difficult for employees to separate work and non-work roles when they are tele-working. The higher levels of role overload in both sets of analysis also indicate that individuals who use this strategy experience greater time-related pressures. Taken together, these findings indicate that employees minimize the use of this work arrangement. It appears that combining work and family roles under the same roof during work hours increases work–life pressures—at least when such work arrangements are used informally.

3.3 Perceived Flexibility

One of the most problematic aspects of the issue of time is what has been termed schedule incompatibility. Since society makes certain events possible only at certain times, timing becomes important in determining the effects of working hours. Work schedule incompatibility affects members of a family and their ability to spend time together. Conflict is also caused by the clash of an employee's work schedule with events at school and the ability to access necessary services (e.g. doctor, dentist).

Work-time and work-location flexibility have the potential to balance work and family demands by increasing an employee's ability to control, predict and absorb change in work and family roles. If the organization provides flexibility for when and where work is performed, then the employee can select the most efficient hours and locale according to work style, the demands of other family members, and the scheduling of leisure activities. In many organizations, patterns of informal accommodation are evolving as a normal part of the interaction among employees. These informal accommodations are permitted by the employer but are not the result of any formal organizational policy. Instead, they are negotiated or provided on a case-by-case basis (typically they depend on who your manager is).

This section of the report is divided into two main parts. In the first section, we use data to describe how much flexibility Canadian employees perceive they have over when and where they work. Results for the total sample are examined first, followed by breakdowns of the data by gender by job type and gender by dependent care. Part two provides the analysis of the following question: Do higher levels of perceived flexibility help employees cope with work–life conflict? Analyses done using the complete measure are presented first, followed by an in-depth analysis of the relationship between each of the forms of perceived flexibility and work–life conflict.

3.3.1 How Much Flexibility Do Canadian Employees Actually Have Over Their Work Day?

3.3.1 How Much Flexibility Do Canadian Employees Actually Have Over Their Work Day?

Data on perceived flexibility for the total sample is summarized in Table 3. These data paint a mixed picture with respect to the amount of flexibility Canadian employees perceive they have over their work schedule and work location. While a plurality of the respondents (39%) have moderate levels of informal flexibility and one in three respondents has high flexibility (33%), a substantial percent of the sample (29%) feel that they have little control over their work day.

Table 3: Perceived Flexibility for Total Sample

	% of the sample with		
	Low Flexibility	Moderate Flexibility	High Flexibility
Perceived Flexibility: Total Measure	28.6	38.7	32.7
Moderate Flexibility: Plurality Find It Easy to			
Engage in This Activity			
Take paid day off when child is sick	26.2	20.1	53.7
To have meals with family	26.1	22.6	51.3
Take holidays when want	27.2	22.0	50.8
Interrupt work day for personal/family reasons and			
then return	29.2	20.0	50.8
Vary work hours	34.7	18.5	46.8
Variable Flexibility: Sample Bi-modally Distributed			
with Respect to This Activity			
Take paid day off when elderly relative needs you	31.6	24.0	44.5
To arrange work schedule (i.e. shifts, overtime) to meet	38.2	22.7	38.1
personal/family commitments			
Take time off to attend course or conference	31.9	25.7	32.5
Low Flexibility: Majority Find It Difficult to Engage			
in This Activity			
To be home when children get home from school	74.4	13.5	12.1
Spend some of regular work day working at home	70.5	13.2	16.3

3.3.1 How Much Flexibility Do Canadian Employees Actually Have Over Their Work Day?

Examination of the different items that make up the informal flexibility scale indicate that there is a large amount of variation in what types of informal flexibility are available to workers in this sample. The items can be divided into three broad groups:

- **Low:** The majority of respondents report lower levels of flexibility with respect to this item.
- **Variable:** Almost equal numbers of respondents report lower levels of flexibility with respect to this item as report high flexibility.
- Moderate: While a substantive proportion of the sample report that they have high flexibility with
 respect to this item, a significant number (one quarter to one third of the sample) say that they find
 it difficult to engage in this particular activity. In other words, flexibility with respect to this item is bimodally distributed.

There are five items that can be classed as being "moderately" easy (i.e. easy for almost half the sample, hard for about 25%). Items in this grouping include: (1) take holidays when you want, (2) interrupt work for personal/family reasons and then return, (3) take a paid day off when your child is sick, (4) have meals with family, and (5) vary work hours. A number of these items (flexibility with respect to holidays, being home in time to have dinner with the family) are accommodations taken for granted by many of today's employees, regardless of family situation. Three of these items (ability to interrupt work day to deal with personal issues, paid time off to deal with sick children, vary work hours) are accommodations that more progressive companies provide their employees. The need for such accommodations has increased concomitantly with the rise in employed parents. The fact that 50% of respondents indicate that such accommodations are available to them indicates that many of the companies in our sample have introduced programs to help employees with dependent care responsibilities.

There are three items in the "variable flexibility" grouping:

- $\bullet \hspace{0.4cm}$ take paid day off when elderly dependent needs you (45% find difficult, 32% find easy)
- arrange work schedule to meet personal/family commitments (38% find difficult, 38% find easy)
- take time off to attend course or conference (32% find difficult, 33% find easy)

The fact that a larger proportion of the sample say that it is easy for them to take a paid day off to care for a sick child than are able to exercise the same right with respect to elder care (almost twice as many respondents indicated it was difficult for them to get paid time off to deal with elder care needs than indicated problems with respect to child care) suggests that many organizations still see work—life balance issues through a child care lens. Given our data on caregiver strain, it is important that Canadian employers expand their view and implement paid days off for elder care issues. The finding with respect to time off during regular hours to attend a course is also disturbing, as it suggests that career development is not seen as a shared responsibility in many Canadian companies (i.e. training during working hours not supported). This would suggest that employees with child care and elder care responsibilities that limit their ability to attend training activities in the evening or on weekends have a choice between:

3.3.1 How Much Flexibility Do Canadian Employees Actually Have Over Their Work Day?

- attending such sessions anyway (thereby increasing their work–life conflict)
- not attending, thereby jeopardizing their ability to advance

Finally, the fact that almost 40% find it difficult to arrange their work schedule to meet personal or family commitments suggests that many employers still believe in the "myth of separate worlds." While such a view might have been defensible when the typical Canadian family consisted of a male breadwinner with a wife and children at home, it is untenable today.

There are only two items (spend some of day working from home, and be home when children get home from school) in the "difficult" group. Seventy percent of the sample find it hard to work from home; 16% find it easy. These data are consistent with the informal tele-work data presented earlier (16% of the sample are able to work from home on an informal basis). They also support the idea that while organizations are prepared to offer some employees flexibility with respect to when they work, they are more reluctant to give them flexibility with respect to where that work is done. The fact that three quarters of the sample find it difficult to be home from work when their children get home from school is also not surprising given the data on work-to-family interference (i.e. Duxbury & Higgins (2003) reported that three quarters of Canadian employees experience moderate to high levels of work-to-family interference). These data also illustrate the point made earlier with respect to how scheduling conflicts (i.e. need to be in two distinct places at exactly same time) can contribute to work-life conflict.

An examination of the between-group differences in the various items in the informal flexibility measure gives us a better appreciation of who does and who does not have work-time and work-location flexibility. Complete data on the association between perceived flexibility, gender and job type and between perceived flexibility, gender and dependent care are given in Appendix C. Key differences among these groups are discussed below.

3.3.2 The Impact of Gender, Job Type and Dependent Care on Perceived Flexibility

Our data indicate that perceived flexibility is associated with gender, dependent care status and job type. Key differences are noted below. The data discussed in this section are found in Appendix C.

Men are more likely than women to report high flexibility, regardless of dependent care status

Significant gender differences were observed in 60% of the items included in the perceived flexibility measure.²⁵ These gender differences are particularly worthy of note in that they could be observed regardless of whether or not the respondent had dependent care responsibilities.

²⁵ When dependent care status is taken into account, there are no gender differences with respect to perceived flexibility in the following areas: take time off for a course and have meals with the family.

3.3.2 The Impact of Gender, Job Type and Dependent Care on Perceived Flexibility

Women were more likely than men to say that it was difficult for them to vary their work hours, work at home during the day, take their holidays when they wanted, interrupt their work day for personal reasons and then return, and take a paid day off work to care for a sick child or an elderly dependent. Men were more likely than women to say it was easy for them to accomplish all of these tasks.

Women are more likely than men to say it is difficult for them to take paid time off for dependent care

Four of the above gender differences are particularly worthy of note as they could be observed when job type is also taken into account. Women, regardless of their job type or dependent care status, were more likely than their male counterparts to say that it was difficult for them to work at home during the day, interrupt their work day for personal reasons and then return, and take a paid day off work to care for a sick child or an elderly dependent. These findings are of concern given the fact that the women in the sample were more likely than the men to have primary responsibility for child care and elder care in their families.

The men in the sample were more likely than women to say that they had moderate levels of flexibility in all but one of these areas (they were more likely than women to find it easy to vary their work hours).

Employees with dependent care responsibilities find it more difficult to arrange their schedule to meet personal/ family commitments

There was only one difference in perceived flexibility that was associated with dependent care status: employees with dependent care, regardless of gender, were more likely to say that it is difficult for them to arrange their schedule to meet personal/family commitments. Men and women without dependent care responsibilities, on the other hand, were more likely than their counterparts with dependent care to say that it is easy for them to arrange their schedule to meet personal/family commitments. Mothers and females with elder care responsibilities were more likely than any other group to find such activities difficult (43% say they have little flexibility in this area). These findings are unfortunate as employees with dependent care responsibilities are likely to have a greater need for such flexibility. These data also refute the idea that mothers or women with elder care are given preferential treatment in the workplace.

Female managers and professionals have less flexibility than other employees

Most of the gender differences in perceived flexibility go away when job type is controlled for. Those that do exist are between male managers and professionals and female managers and professionals. No gender differences were observed in perceived flexibility for employees in other jobs. Female managers and professionals were more likely than their male counterparts to find it difficult to vary their work hours, take their holidays when they want, take time off for a course, or arrange their schedule to meet personal or family commitments. Furthermore, the female managers and professionals in the sample were significantly more likely than females in other jobs to find it difficult to take their holidays when they want, to take time off for a course, to interrupt their work day for personal reasons and then return, to take a paid day off to care for a sick child or an elderly dependent and to be home when their children get home from school. With two exceptions, no such job type differences were observed within the male sample.²⁶

²⁵ Male managers and professionals are more likely than men in other jobs to find it easy to vary their work hours and to take time off for a course.

3.3.3 And So What? What Is the Relationship Between Perceived Flexibility and Work–Life Balance?

It is unlikely that women managers and professionals have less opportunity to vary their hours than other employees. Rather, these data suggest that women in these groups are less likely than others to either take advantage of the opportunities for flexibility that are available, or to ask for special favours with respect to leave of absence, work hours, etc. We can only speculate as to why this might be the case. Plausible explanations include the idea that female managers and professionals are more concerned than either their male counterparts or employees in other positions with how their employer will view them if they vary their hours, arrange their day for family commitments, etc. (i.e. concerned that others will label them as being on a "mommy track," perceive that they do not take their career seriously). Alternatively, it may be that women in these groups feel more pressure to set a good example for those who report to them or feel that putting family ahead of work would limit their career advancement. Other studies should try to determine the extent to which these work pressures are self-imposed (i.e. women who get ahead in Canadian organizations are less likely to let family intrude with work) or imposed by the culture (i.e. due to working in an organization that rewards employees who put work ahead of family).

Managers and professionals are less able to vary work hours

Finally, it is important to note that male and female managers were significantly more likely than their counterparts in other jobs to find it difficult to vary their hours of work but easier to work at home during regular hours. In other words, managers and professionals have higher work-location flexibility but lower work-time flexibility. These findings are interesting as they suggest that the demands of managerial and professionals jobs are such that it is difficult for managers to change when they come in or leave. These findings are consistent with our data showing that the workloads of managers and professionals have increased dramatically over the past decade (Duxbury & Higgins, 2003). It would appear that flexibility over one's work hours goes down as work loads go up. Interestingly, the same cannot be said for work-location flexibility. As noted in Duxbury and Higgins (2003), managers spend a significant amount of time per month performing unpaid overtime at home in the evening and on the weekend. It appears that one benefit of this work style is that tele-work is more accepted at this level of the organization than it is for those in other jobs (i.e. they have demonstrated that they can work productively at home and they likely have the technology at home required to support their efforts).

3.3.3 And So What? What Is the Relationship Between Perceived Flexibility and Work–Life Balance?

Data analysis done to determine how perceived flexibility impacts work–life conflict is provided in Appendix C. The link between total perceived flexibility and work–life conflict are discussed first. This is followed by an overview of the impact of the various facets of perceived flexibility on each dimension of work–life conflict.

3.3.3.1 Impact of Perceived Flexibility (Total Measure) on Work–Life Conflict

3.3.3.1 Impact of Perceived Flexibility (Total Measure) on Work–Life Conflict

Perceived flexibility helps employees cope with role overload

This analysis indicates that perceived flexibility helps employees cope with role overload. Employees with higher perceived flexibility report less role overload than those with moderate flexibility who, in turn, report less overload than those with low perceived flexibility, regardless of job type or dependent care status. The fact that perceived flexibility is significantly and substantively associated with role overload in both the gender and job type and the gender and dependent care analysis emphasizes the importance of perceived flexibility for today's employees.

The impact of perceived flexibility on role overload is not, however, straightforward and depends on gender and job type (Figure 8a) and gender and dependent care (Figure 8b). The following conclusions can be drawn by examining these figures:

- With one exception (women in other positions with low flexibility), managers and professionals report higher levels of role overload at every level of perceived flexibility than those in other positions. Women in other positions with low flexibility also report very high levels of role overload.
- Men and women with dependent care responsibilities report higher levels of role overload at all levels of perceived flexibility than those without dependent care responsibilities.
- When dependent care status is taken into account, women report higher levels of role overload than men at all levels of flexibility.
- Males in other positions and men without dependent care responsibilities report the lowest levels of role overload at every level of perceived flexibility.

Despite these differences, it is important to note that for all of these groups of employees, the higher the perceived flexibility the lower the role overload. These data, therefore, support the idea that employees with more control over the work–life interface are more able to cope with role overload.

Perceived flexibility helps employees cope with work-to-family interference

Perceived flexibility has a very strong impact on the incidence of work-to-family interference for men and women, regardless of job type and dependent care status. For both men and women, employees with high perceived flexibility report less work-to-family interference than those with moderate flexibility who report less work-to-family interference than those with low flexibility, regardless of job type (Figure 9a) or dependent care status (Figure 9b). These findings indicate that increasing employees' levels of perceived flexibility helps them cope with work-to-family interference.

3.3.3.1 Impact of Perceived Flexibility (Total Measure) on Work–Life Conflict

Figure 8: Impact of Perceived Flexibility on Role Overload

a. Gender by Job Type

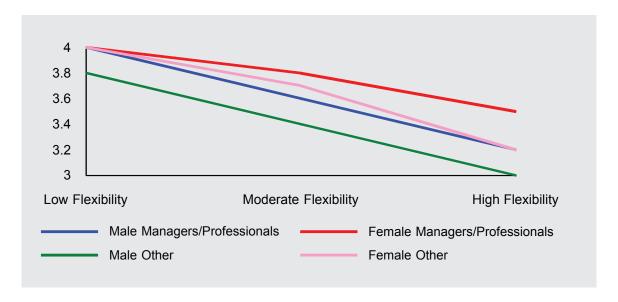
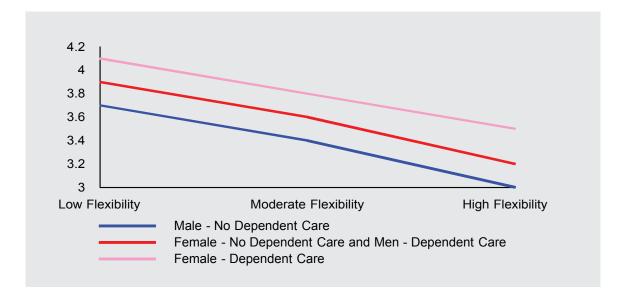


Figure 8: Impact of Perceived Flexibility on Role Overload

b. Gender by Dependent Care



3.3.3.1 Impact of Perceived Flexibility (Total Measure) on Work–Life Conflict

Figure 9: Impact of Perceived Flexibility on Work-to-Family Interference

a. Gender by Job Type

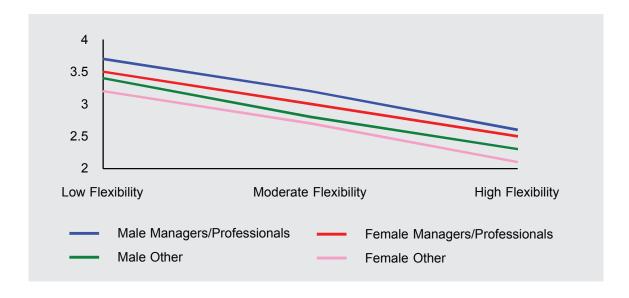
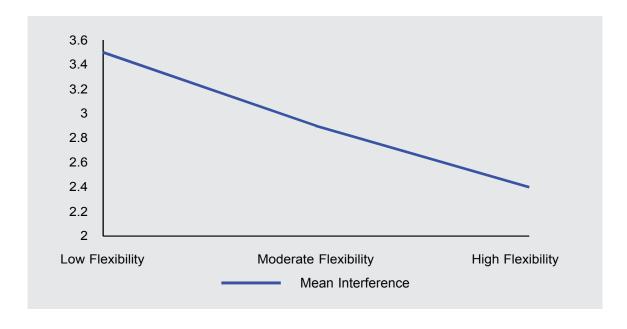


Figure 9: Impact of Perceived Flexibility on Work-to-Family Interference

b. Gender by Dependent Care



Perceived flexibility provides some support for employees with respect to family-to-work interference

While the data indicate that perceived flexibility provides some support for employees in terms of dealing with family-to-work interference, the impact is not as dramatic as observed with role overload and work-to-family interference. Examination of the data in Appendix C indicates that the limited benefit of perceived flexibility with respect to this type of work-life conflict can be attributed to the fact that it really only helps one group of employees: females in other positions with dependent care responsibilities.

Perceived flexibility does not help employees cope with caregiver strain

The data show that perceived flexibility does little to help employees cope with caregiver strain.

3.3.3.2 Impact of the Different Forms of Flexibility on Work–Life Conflict

The measure of perceived flexibility included in this analysis includes 10 ways in which organizations can increase the amount of control their employees have over their work schedule. To help employers evaluate which of these strategies would have the most positive impact in their organization, we examined the extent to which each of these 10 flexibility strategies helped employees cope with each of the four types of work–life conflict considered in this study. Furthermore, to help employers target their interventions appropriately we looked at whether or not the employee's gender, job type and dependent care status have an impact on the extent to which the various forms of flexibility helped employees cope with work–life conflict.

 Table 4:
 Impact of Dimensions of Perceived Flexibility on Work–Life Conflict: Gender by Dependent Care Analysis

 a. Significant Interactions

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Total Measure	$F = 3.4$, $\alpha = .003$ $R^2 = .123$	ns	ns	ns
Vary working hours	ns	ns	$F = 3.2$, $\alpha = .004$ $R^2 = .051$	ns
Take holidays when want	$F = 604.2, \ \alpha = .002$ $R^2 = .088$	ns	ns	ns
Take time off for course/conference	$F = 3.5$, $\alpha = .002$ $R^2 = .110$	$F = 3.2$, $\alpha = .003$ $R^2 = .111$	ns	ns
Take paid day off when child is sick	$F = 4.8, \ \alpha = .000$ $R^2 = .073$	$F = 4.5$, $\alpha = .003$ $R^2 = .088$	ns	ns
Arrange work schedule to meet personal/family commitments	ns	ns	$F = 3.6$, $\alpha = .001$ $R^2 = .051$	ns

Note: \triangle is the mean difference in the level of work-life conflict experienced by a respondent who has low flexibility and a respondent who has high flexibility. \triangle is only shown for linear relationships (i.e. strategy positively or negatively associated with work-life conflict).

The discussion in the section below focuses only on those forms of flexibility that substantively impact an employee's ability to cope with work–life conflict. Substantiveness was determined by first looking at the R² of the ANOVA and identifying forms of flexibility that explained approximately 4% of the variance in work–life conflict. We then calculated the difference between the level of work–life conflict experienced by someone who has high levels of this form of flexibility and someone who has moderate and low levels. Strategies with little to no association with work–life conflict (defined as non-significant finding and/or a difference of less than 0.3) are not mentioned in the discussion below. The interested reader can, however, find the complete set of data on which this section is based in Appendix C or consult Table 4 (summarizes key findings from gender by dependent care analyses) and Table 5 (summarizes key findings from gender by job type analysis).

Table 4: Impact of Dimensions of Perceived Flexibility on Work–Life Conflict: Gender by Dependent Care Analysis b. Main Effects

Measure of Perceived Flexibility	Overload	Work to Family	Family to Work	Caregiver Strain
Total measure	Interaction	F = 2280.5, α = .000 R ² = .177, Δ = -0.9	F = 15.5, α = .000 R ² = .057, Δ = - 0.4	F = 207.4, α = .000 R ² = .048, Δ = - 0.3
Vary working hours	F = 335.6, α = .000 R ² = .066, Δ = -0.4	F = 675.8, α = .000 R ² = .077, Δ = -0.6	Interaction	F = 9.6, α = .000 R ² = .051, Δ = - 0.3
Vary work location (i.e. tele-work)	F = 109.1, α = .000 R ² = .049, Δ = -0.3	$R^2 = .024$	$R^2 = .042 *$	$R^2 = .042 **$
Take holidays when want	Interaction	F = 1273.5, α = .000 R ² = .113, Δ = -0.8	$F = 69.4, \ \alpha = .000$ $R^2 = .048, \ \Delta = -0.3$	$R^2 = .045$ *
Take time off for course/conference	Interaction	Interaction	$R^2 = .052 **$	$R^2 = .050 **$
Interrupt work day for family reasons and return	F = 666.3, α = .000 R ² = .095, Δ = -0.6	F = 1233.2 α = .000 R ² = .114, Δ = -0.8	$R^2 = .005$	$F = 16.1 \ \alpha = .000$ $R^2 = .048, \ \Delta = -0.3$
Take paid day off when child is sick	Interaction	Interaction	$R^2 = .018$	$R^2 = .039$
Take paid day off for elder dependent	$F = 326.3, \alpha = .000$ $R^2 = .082, \Delta = -0.6$	F = 590.3, α = .000 R ² = .094, Δ = - 1.0	$F = 118.2, \alpha = .000$ $R^2 = .043, \Delta = -0.3$	R ² = .047 **
Have meals with family	$F = 608.5$, $\alpha = .000$ $R^2 = .088$, $\Delta = -0.6$	F = 1479.4, α = .000 R ² = .135, Δ = -0.9	F = 89.3, α = .000 R ² = .042, Δ = -0.3	F = 21.5, α = .000 R ² = .048, Δ = - 0.3
Be home when children get home from school	$R^2 = .067 **$	F = 257.9, α = .000 R ² = .054, Δ = -0.7	$R^2 = .023$	$R^2 = .031$
Arrange work schedule to meet personal/family commitments	F = 862.2, α = .000 R ² = .116, Δ = -0.7	F = 1863.9, α = .000 R ² = .135, Δ = -0.9	Interaction	F = 24.8, α = .000 R ² = .051, Δ = - 0.3

Note: To be shown on this table, the flexibility strategy has to meet the following criteria:

 $\label{proportion} \textit{Explain a substantive proportion of the variation in work-life conflict (i.e.~an~R^2~of~0.04~or~more)}.$

F test for the use of strategy main effect must be significant while the interaction effect (i.e. use of strategy by gender/dependent care status) is not significant.

Levels of work–life conflict experienced by employees who have high flexibility are significantly different than those reported by those with low flexibility (i.e. $a \Delta$ of 0.3 or more in work–life conflict between these two groups)

^{*} indicates that although the R^2 meets the cut-off criteria, the main effect is not significant

^{**} indicates that although the R^2 meets the cut-off criteria, the Δ is smaller than 0.3

^{***} indicates that the association between use of the strategy and work–life conflict is not linear

Table 5: Impact of Dimensions of Perceived Flexibility on Work–Life Conflict: Gender by Job Type Analysis

a. Significant Interactions

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Total measure	$F = 4.4$, $\alpha = .000$ $R^2 = .117$	$F = 7.3$, $\alpha = .000$ $R^2 = .195$	ns	ns
Vary working hours	ns	$F = 4.1, \ \alpha = .001$ $R^2 = .091$	$R^2 = .008$	ns
Take holidays when want	$F = 582.1, \ \alpha = .000$ $R^2 = .071$	$F = 1246.9$, $\alpha = .000$ $R^2 = .126$	$R^2 = .007$	ns
Take time off for course/conference	$F = 4.8, \ \alpha = .000$ $R^2 = .126$	$F = 7.4$, $\alpha = .000$ $R^2 = .128$	$R^2 = .012$	ns
Interrupt work day for family reasons and return	$F = 4.8, \ \alpha = .000$ $R^2 = .095$	$F = 4.3$, $\alpha = .000$ $R^2 = .126$	$R^2 = .012$	ns
Take paid day off when child is sick	$F = 6.1$, $\alpha = .000$ $R^2 = .075$	$F = 9.1$, $\alpha = .000$ $R^2 = .113$	$R^2 = .015$	ns
Take paid day off when elder dependent needs care	$F = 4.5$, $\alpha = .000$ $R^2 = .087$	$F = 9.4$, $\alpha = .000$ $R^2 = .111$	ns	ns
Be home when children get home from school	ns	ns	$R^2 = .022$	ns
Arrange work schedule to meet personal/family commitments	$F = 3.9$, $\alpha = .000$ $R^2 = .112$	$F = 3.7$, $\alpha = .000$ $R^2 = .175$	$R^2 = .022$	ns

Table 5: Impact of Dimensions of Perceived Flexibility on Work-Life Conflict: Gender by Job Type Analysis

b. Main effects

Measure of Perceived Flexibility	Overload	Work to Family	Family to Work	Caregiver Strain
Total measure	Interaction	Interaction	Interaction	$R^2 = .036$
Vary working hours	F = 348.8, α = .000 R ² = .055, Δ = 0.4	Interaction	Interaction	$R^2 = .037$
Vary work location (i.e. tele-work)	$R^2 = .036$	$R^2 = .037$	$R^2 = .001$	$R^2 = .028$
Take holidays when want	Interaction	Interactio n	Interaction	$R^2 = .033$
Take time off for course/conference	Interaction	Interaction	Interaction	$R^2 = .037$
Interrupt work day for family reasons and return	Interaction	Interaction	Interaction	$R^2 = .037$
Take paid day off when child is sick	Interaction	Interaction	Interaction	$R^2 = .032$
Take paid day off for elder dependent	Interaction	Interaction	$R^2 = .018$	$R^2 = .035$
Have meals with family	F = 618.2, α = .000 R ² = .078, Δ = -0.6	F = 1525.7, α = .000 R ² = .155, Δ = -0.9	Interaction	$R^2 = .048 **$
Be home when children get home from school	F = 195.9, α = .000 R ² = .066, Δ = - 0.4	F = 326.1, α = .000 R ² = .076, Δ = - 1.0	Interaction	$R^2 = .024$
Arrange work schedule to meet personal/family commitments	Interaction	Interaction	Interaction	$R^2 = .035$

Schedule flexibility effective at reducing role overload

With one exception,²⁷ increased levels of all forms of schedule flexibility examined in this analysis were associated with lower levels of role overload, suggesting that increased flexibility does help employees cope with the demand element of work–life conflict.

Ability to vary work hours helps all employees cope with role overload

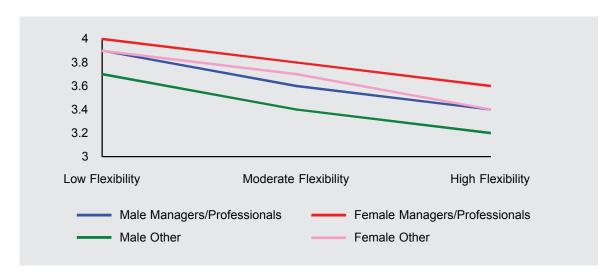
We can identify three types of schedule flexibility that are negatively associated with role overload regardless of gender, dependent care status and job type:

- The ability to be home in time to have meals with family ($\Delta = -.6$)
- The ability to vary work hours (i.e. arrival and departure times) ($\Delta = -.4$)
- The ability to be home when children get home from school ($\Delta = -.4$)

All three of these forms of flexibility make it easier for employees to be home in the 4:00 to 7:00 p.m. time frame—a critical period for family activities and integration (i.e. help children with homework, have family meals together). It is hard to determine the direction of causality in these findings. It may be that employees with fewer demands are more able to vary their work hours and be home at a specific time. Alternatively, the ability to schedule hours to match a family routine may reduce demands associated with child care, meal preparation and travel. The fact that all employees, regardless of their demands, find such flexibility useful suggests that this type of flexibility does help them cope with role overload.

Figure 10: Relationship Between Take Holidays When Want and Role Overload

a. Gender by Job Type



²⁷ Tele-work in the gender by dependent care analysis. When dependent care responsibilities were taken into account, the ability to tele-work was found to be associated with lower levels of role overload for men and women (Δ.3). This relationship was not particularly strong (R2 .049).

Figure 10: Relationship Between Take Holidays When Want and Role Overload

b. Gender by Dependent Care

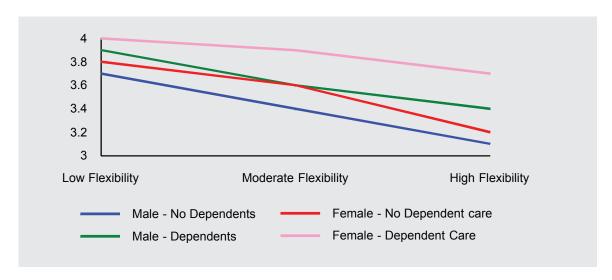


Figure 11: Relationship Between Take Time Off for Course and Role Overload

a. Gender by Job Type

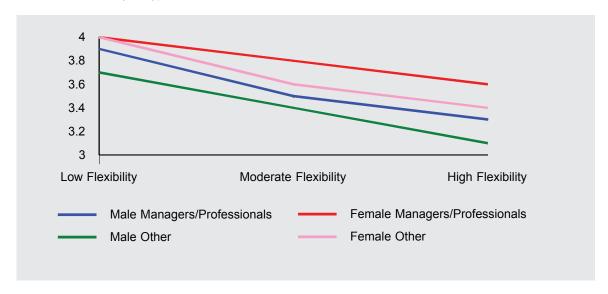
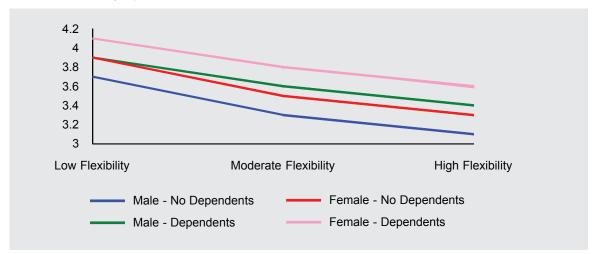


Figure 11: Relationship Between Take Time Off for Course and Role Overload

b. Gender by Dependent Care



Ability to take holidays when one wants associated with lower role overload for those without dependent care

As can be seen in Figures 10a (gender by job type) and 10b (gender by dependent care), the ability to take holidays when one wants is associated with lower levels of role overload for both men and women, regardless of dependent care status or job type. Not all groups, however, benefit equally from this type of flexibility. Who realizes the greatest reductions in role overload from this type of flexibility?

- Men and women without dependent care responsibilities, regardless of their gender ($\Delta = -.6$)
- Men with dependent care responsibilities ($\Delta = -.5$)
- Men and women in the other job grouping (Δ = -.5)
- Men in managerial and professional positions ($\Delta = -.5$)

Women with dependent care (Δ = -.3) and females in managerial and professional positions (Δ = -.4), on the other hand, realize significantly smaller reductions in role overload due to this form of flexibility.

These data suggest that vacations can provide needed relief from heavy demands and overload if they can be scheduled as needed by the employee. The fact that this type of flexibility is more effective in reducing role overload for men and women without dependent care responsibilities and less so in reducing overload for women with dependent care suggests that vacations help relieve demands associated with work rather than family.

The ability to attend a conference or course associated with lower role overload

Employees who find it easy to take time off work to attend a course or a conference report substantially lower levels of role overload than those who find it hard. As can be seen by examining the relationships shown in Figures 11a (gender by job type) and 11b (gender by dependent care), the relationship is not straightforward; in many cases, employees realize a more significant drop in role overload when they move from low levels of this form of flexibility to moderate levels than they do when they move from moderate to high. It is also interesting to note that, similar to the findings with respect to flexibility around vacation time, this form of flexibility appears to have less of an impact on role overload for female managers and professionals ($\Delta = -$. 4) than for other groups of employees.

It is hard to determine the direction of causality in these findings. It may be that employees with fewer demands are more able to engage in training and go to conferences. Alternatively, the ability to get away from the normal work and non-work routines may help employees put things into perspective and thus reduce overload.

Figure 12: Relationship Between Take Paid Day Off for Child Care and Role Overload

a. Gender by Job Type

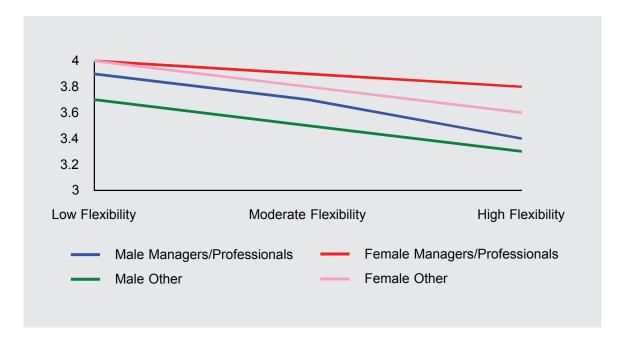
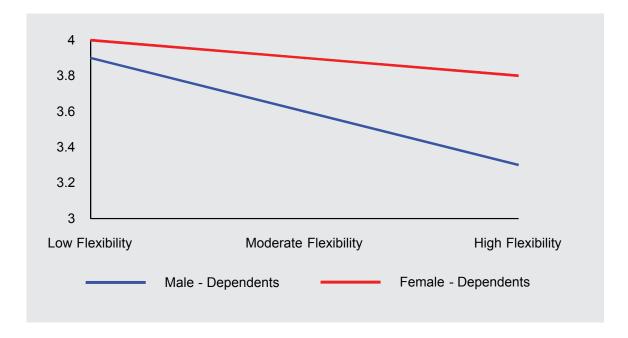


Figure 12: Relationship Between Take Paid Day Off for Child Care and Role Overload

b. Gender by Dependent Care



Men who can take a paid day off to care for a sick child are more able to cope with role overload

While the ability to take a paid day off to look after a sick child is associated with lower levels of role overload for all employees, the data in Figures 12a (gender by job type) and 12b (gender by dependent care) indicate that this form of flexibility benefits men more than women. Women with dependent care responsibilities realize only a small decline in role overload ($\Delta = -.2$) when they are at high levels of this flexibility. This compares unfavourably with the decline in role overload of -.6 reported by their male counterparts.

A similar finding can be observed when we look at the data through a job type lens. Male managers and professionals with high levels of this form of flexibility realize the greatest reductions in role overload (Δ = -.5). Men and women in other positions who feel that it is easy to take a paid day off if their child is sick also experience lower levels of role overload than their peers without such flexibility (Δ = -.4). Unfortunately, the ability to take paid time off to care for a sick child has little impact on role overload levels of female managers and professionals (Δ = -.2).

It is hard to say why female managers and professionals with dependent care realize less of a benefit from paid time off to care for a sick child than their male counterparts or women in other positions. It may be that these women are more likely to try to maintain high levels of performance in both roles (i.e. try to get work done while caring for a sick child).

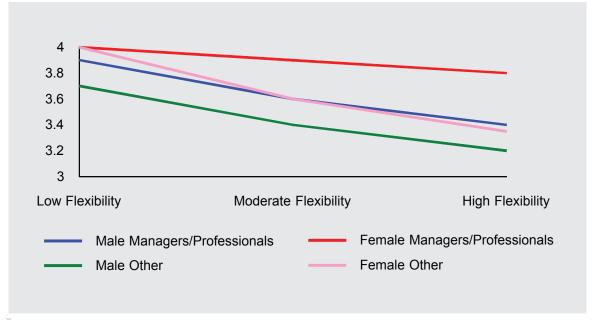
The ability to deal with family concerns during work hours is associated with lower overload

The results with respect to the final three types of schedule flexibility (arrange work day to meet family commitments, take a paid day off work for elder care, interrupt work day to deal with family issue and then return) are very interesting. In all three of these cases, increased flexibility is associated with lower levels of role overload. It can be argued that these three forms of flexibility all give employees the ability to deal with planned or unplanned family-role responsibilities during regular work hours. It is plausible that these types of flexibility make it possible for employees to deal with family concerns at their convenience rather than having to either expend effort to find someone else to do the task or deal with the personal or family issue at a time that is less convenient or during "downtime."

In the gender by dependent care analysis, the relationship between these forms of flexibility and overload is very straightforward: the more employees perceive that they can take a paid day off work to care for a sick child, the lower their role overload, regardless of gender or dependent care status.²⁸

These relationships are not, however, as straightforward when job type is taken into account. As can be seen in Figures 13, 14 and 15, the extent to which these forms of flexibility help employees cope with role overload depends on both gender and job type. The fact that the gender by job type interaction was significant while the gender by dependent care interaction was not suggests that job type, rather than family situation, influences how effective each of these forms of flexibility are at helping employees deal with role overload.

Figure 13: Relationship Between Paid Day for Elder Care and Role Overload Gender by Job Type



Arrange one's work to meet personal/family commitments (R^2 0.116, Δ -.7), interrupt one's work day to deal with personal/family issues and then return to work (R^2 0.095, Δ -.6), and take a paid day off work to care for an elderly relative (R^2 .082, Δ -.6).

Figure 14: Relationship Between Ability to Arrange Work Schedule and Role Overload

Gender by Job Type

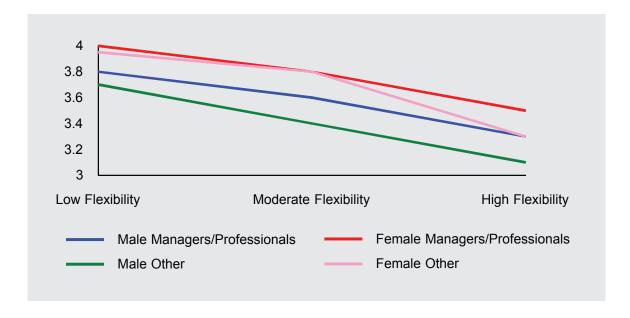
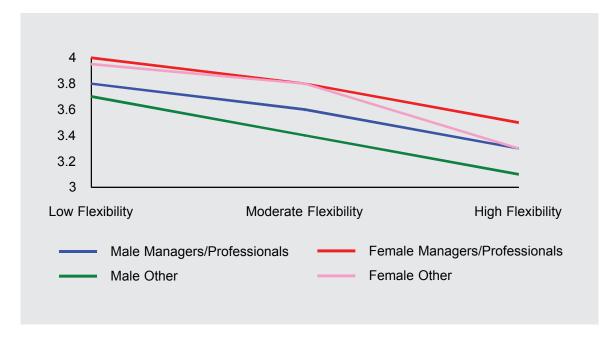


Figure 15: Relationship Between Ability to Interrupt Work Day and Role Overload

Gender by Job Type



The following conclusions can be drawn from the data in Table 5 and in Figures 13, 14 and 15.

- The ability to arrange a work schedule to meet personal/family commitments and to interrupt a work day for personal/family reasons and then return are strongly associated with role overload. The association between taking a paid day off to care for an elderly dependent and role overload is also well above our 4% cut-off criteria.
- In all three cases, females in other positions realize the most benefit (i.e. greatest drop in role overload) from these types of flexibility, while female managers and professionals achieve the least.

These findings are similar to what was observed with respect to the ability to take holidays when one wants, attend a course and take a paid day off for child care. Future research needs to be done to identify why these forms of flexibility do not help high-achieving women cope with role overload to the same extent as they do other types of employees (including high-achieving men).

Schedule flexibility effective at reducing work-to-family interference

With one exception (tele-work), all of the forms of schedule flexibility examined in this analysis were associated with lower levels of work-to-family interference, suggesting that increased flexibility does help employees cope with the scheduling element of work-life conflict. In fact, the data indicate that perceived flexibility is more strongly associated with this form of work-life conflict than any of the other manifestations of work-life conflict considered in this study.

Ability to vary work hours helps all employees cope with work-to-family interference

Employers who are concerned about work-to-family interference need to do two things: make it easier for employees to be home in time to have meals with the family and/or when their children get home from school. The importance of these two forms of flexibility in helping employees cope with this form of work–life conflict can be illustrated by the following facts:

- The difference in interference levels between employees who perceive that it is easy for them to be home during the critical 4:00 to 7:00 p.m. time frame and those who find this action to be difficult is among the largest observed in this study (Δ = -.9 for being home for dinner and Δ = -1.0 for being home when children get home from school).
- The R² in these analyses are substantially higher than the cut-off of 4%.
- These two forms of flexibility are associated with substantively lower levels of this form of interference, regardless of gender, job type or dependent care status.

These findings make intuitive sense. Employees who are able to schedule their work hours to harmonize with their family routines (particularly eating dinner together, which has been identified as critical to effective functioning) are less likely to feel that their work interferes with the performance of critical family roles. Common sense does not, however, mean common practice, as only half the employees in our sample say they find it easy to be home in time for dinner with their family and 12% find it easy to be home when their children get home from school. Attention to these areas should yield huge dividends for both employers and employees, as focusing on increasing flexibility in these areas will have the added benefit of helping employees cope with role overload.

The effectiveness of many forms of schedule flexibility depends on the employee's job type

Five forms of flexibility can be seen to help men and women cope with work-to-family interference, regardless of their dependent care status:

- Take paid day off to care for an elderly relative ($\Delta = -1.0$)
- Arrange work to meet personal/family commitments ($\Delta = -.9$)
- Take holidays when you want ($\Delta = -.8$)
- Interrupt work day then return ($\Delta = -.8$)
- Vary work hours ($\Delta = -.6$)

What can an employer do to help employees deal with work-to-family interference? The data suggest that strategies that make it easier for employees to coordinate work and non-work-role commitments and deal with planned or unplanned family-role responsibilities and commitments are effective at reducing work-to-family interference. The effectiveness of these forms of flexibility at reducing interference is reflected in the high R^2 (range from 8% to 14%) and high Δs (-.6 to -1.0).

The results with respect to these forms of flexibility are very similar to those observed with role overload. In both analyses, the extent to which three of the forms of flexibility (paid day off for elder care, arrange work day, and interrupt work and return) were associated with lower work–life conflict depended on both gender and job type. The work-to-family interference analysis identified two additional forms of schedule flexibility (vary work hours, take holidays when you want) that also follow this pattern. This pattern of findings reinforces our conclusion that it is job type rather than dependent care status that makes the difference in the effectiveness of the various forms of perceived flexibility at reducing work–life conflict.

Figure 16: Relationship Between Ability to Arrange Work Schedule and Work-to-Family Interference

Gender by Job Type

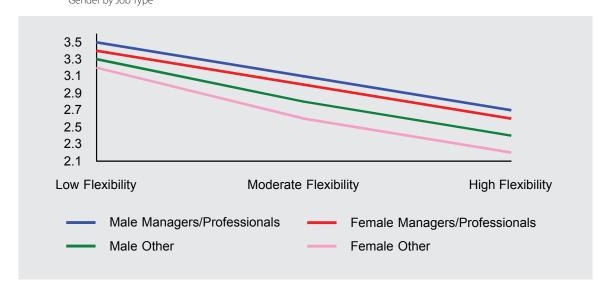


Figure 17: Relationship Between Take Holidays When Want and Work-to-Family Interference

Gender by Job Type

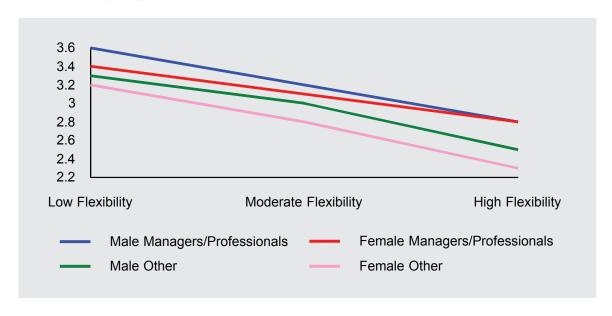


Figure 18: Relationship Between Ability to Interrupt Work Day and Work-to-Family Interference

Gender by Job Type

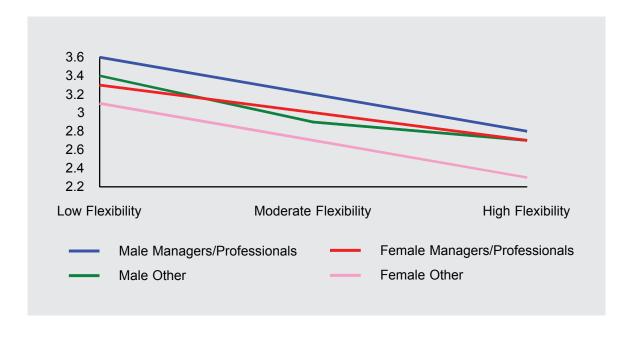


Figure 19: Relationship Between Paid Day Off for Elder Care and Work-to-Family Interference

Gender by Job Type

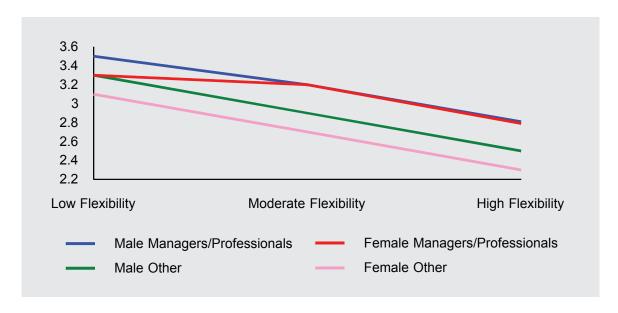
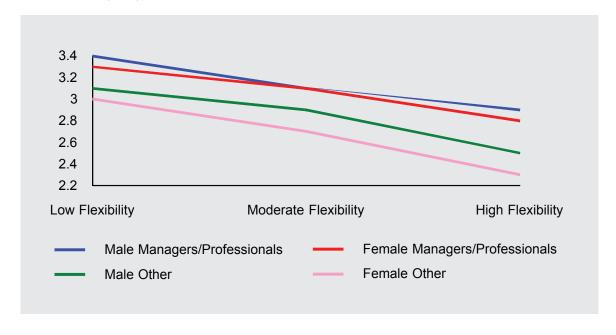


Figure 20: Relationship Between Ability to Vary Work Time and Work-to-Family Interference

Gender by Job Type



So what role do gender and job type play with respect to the relationship between these forms of flexibility and work-to-family interference? The answer to this question is found by examining the data in Table 5 and Figures 16 to 20. The following key observations can be drawn from these data:

- Higher levels of five forms of flexibility are associated with lower levels of work-to-family interference for both men and women when job type is taken into account.
- All five forms of flexibility are strongly associated with the amount of interference experienced by employees. The R²s are very high, ²⁹ as is the difference in work-to-family interference experienced by those with high and low levels of each of these forms of flexibility.
- Females in other positions realize the most benefit (i.e. greatest drop in work-to-family interference) from four out of five of these types of flexibility
 - Arrange work to meet personal/family commitments ($\Delta = -1.0$)
 - Take holidays when you want ($\Delta = -.9$)
 - Interrupt work day then return ($\Delta = -1.0$)
 - Vary work hours ($\Delta = -1.0$)
- Female managers and professionals are significantly less likely than any other group examined in this study to experience a substantive drop in work-to-family interference at higher levels of the following forms of flexibility:
 - Interrupt work day then return ($\Delta = -.6$)
 - Vary work hours ($\Delta = -.5$)
 - Take paid day off to care for an elderly relative (Δ = -.4)
 - Take holidays when you want ($\Delta = -.4$)
- Men and women in other positions within the organization are more likely than their counterparts in
 managerial and professional positions to experience lower levels of work-to-family interference for the
 following four types of flexibility: vary work hours, interrupt work day then return, arrange work day to
 meet personal family commitments, and take paid day off to care for an elderly dependent. The level of
 flexibility required to realize these benefits varies with the form of flexibility being considered.
- Moderate levels of two forms of flexibility, ability to arrange one's work day (Figure 16) and ability to take a paid day off to care for an elderly dependent (Figure 19) are associated with a substantial decline in the amount of interference experienced by those in other jobs (especially women).
- High levels of two forms of flexibility, ability to take holidays when one wants (Figure 17) and ability to vary one's work hours (Figure 20) are required before one can observe a decline in work-to-family interference for those in other positions.
- None of these forms of flexibility was associated with work-to-family interference for men and women in managerial and professional positions.

²⁹ Arrange work to meet personal/family commitments (R² .175); Take holidays when you want (R² 0.126); Interrupt work day then return (R² 0.126); Take paid day off to care for an elderly relative (R² .111); Vary work hours (R2 .091)

These findings are very similar to what was observed for role overload. Again, we are left wondering why perceived flexibility appears to help those in other positions (especially women) cope with work–life conflict (in this case, work-to-family interference) but is less useful for managers and professionals in general and female managers and professionals in particular. What is it about the managerial and professional work role (or alternatively, the type of people who tend to occupy these positions) that dampens the salutary effects of perceived flexibility—especially for women? Future studies should seek the answer to this question.

The extent to which taking time off for a course and paid time off for child care affects work-to-family interference depends on gender, job type and dependent care

The relationship between two of the forms of flexibility considered in this study (ability to take time off work to attend a course or conference and to take a paid day off work to care for a sick child) and work-to-family interference is quite complex and varies depending on the employee's gender, job type and whether or not they have dependent care status.

Figure 21: Relationship Between Time Off for Course and Work-to-Family Interference

a. Gender by Job Type

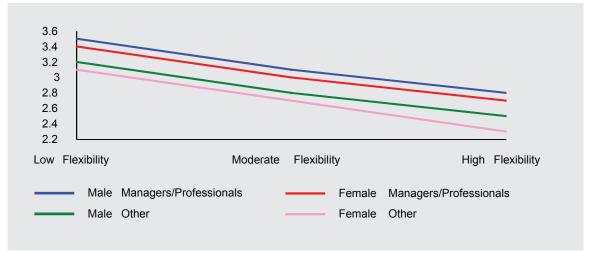


Figure 21: Relationship Between Time Off for Course and Work-to-Family Interference

b. Gender by Dependent Care

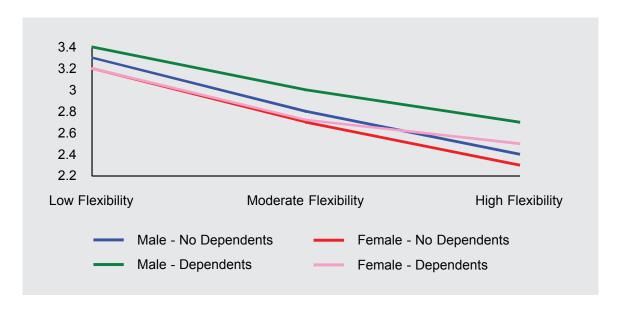


Figure 22: Relationship Between Paid Day Off for Child Care and Work-to-Family Interference

a. Gender by Job Type

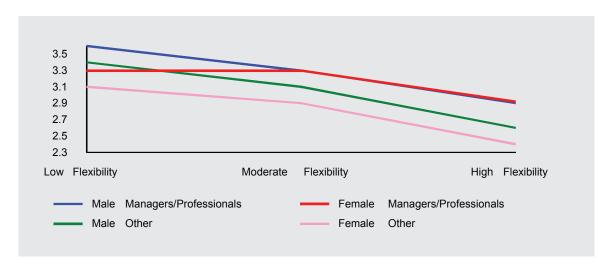
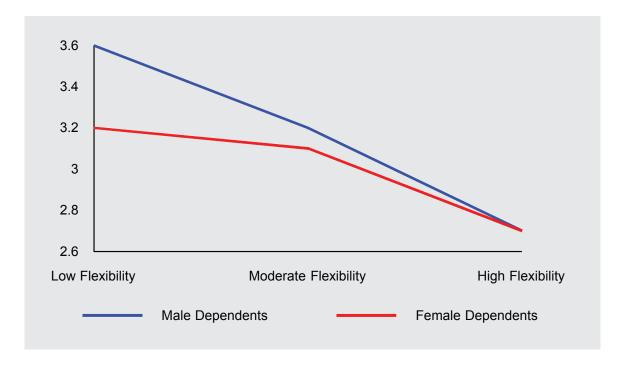


Figure 22: Relationship Between Paid Day Off for Child Care and Work-to-Family Interference

b. Gender by Dependent Care



Flexibility to attend a course or conference more beneficial to those without dependents

The data linking flexibility with the ability to take time off for a course and work-to-family interference is shown in Figure 21a and 21b. The following observations can be made for this relationship. First, the fact that employees without dependent care experience a greater drop in work-to-family interference ($\Delta = -.9$) than their counterparts with dependent care ($\Delta = -.7$) indicates that non-work factors such as dependent care can reduce the utility of this form of flexibility in reducing work-to-family interference. For example, it may be that employed parents see the need to go to a conference or course for work as an example of how work interferes with family. Nevertheless, it is important to note that even if they have this perception, those who do attend conferences or courses that are employer sponsored report lower work-to-family interference. It may be that it is more difficult for those with dependent care responsibilities to leave their family in the first place, but once away the "holiday" from family demands results in reductions in interference. Second, consistent with many of the other findings from this analysis, the data show that females in management and professional positions receive less benefit from this type of flexibility ($\Delta = -.7$) and men and women in other positions in the organization ($\Delta = -.7$). This reinforces our call for further research into why women in management and professional positions do not realize the same benefits from schedule flexibility as other employees.

Ability to take a paid day off work to look after a sick child benefits men more than women

The data linking flexibility with the ability to take a paid day off to care for a sick child is shown in Figure 22a and 22b. While this form of flexibility is associated with lower levels of work-to-family interference for all employees in the sample, the data indicate that the relationship between this form of flexibility and interference depends on gender and job type. Figure 22a indicates that the ability to take a paid day off for child care benefits men with dependent care responsibilities more than their female counterparts (reduction in interference of -.9 for men with dependent care compared with -.5 for women with dependent care). Furthermore, the data show that telling female employees that they can have this flexibility some of the time but not others (i.e. moderate flexibility) will do little to reduce the amount of work–life conflict they experience. This would suggest that for women to benefit from this form of flexibility, they need to know that if their child is sick, they can always get a day off with pay.

Figure 22b indicates that within the management and professional group, men benefit more from the introduction of paid time off for child care (Δ = -.5) than their female counterparts (Δ = -.2). No such gender difference was observed for those in the other group, where both men and women experienced the same decline in interference (Δ = -.4) from this form of flexibility. Finally, consistent with many of the other findings from this study, it can be seen that female managers and professionals realize fewer benefits from this form of flexibility than either their male counterparts or females in other positions.

Perceived flexibility has little impact on incidence of family-to-work interference

Only three of the forms of flexibility considered (take holidays when want, vary work schedule, arrange work schedule to meet family commitments) have a significant impact on the extent to which employees experience family-to-work interference. In all three cases, the relationship was relatively weak (i.e. explained only 5% of the variance in this form of work–life conflict and was only able to reduce conflict by a minimal amount ($\Delta = -3$). Furthermore, the fact that all three significant differences were observed only in the analysis that took dependent care status into account suggests that job type has little to do with the effectiveness of these different coping strategies. Rather, it would appear that it is circumstances at home that affect the extent to which perceived flexibility helps employees cope with family-to-work interference.

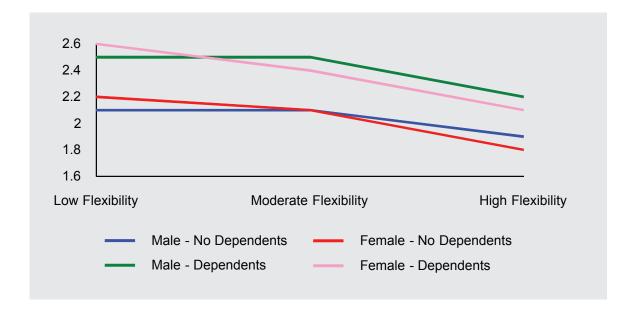
Increased flexibility with respect to hours of work is key to the reduction of family-to-work interference

What should employers that wish to reduce family-to-work interference focus on? The findings from this study indicate that giving employees more flexibility with when they can take their holidays will alleviate family-to-work interference to some extent, as will increasing flexibility in work hours.

While flexibility with respect to varying one's work hours is negatively associated with family-to-work interference for both men and women, regardless of dependent care status, the relationship varies depending on the employee's situation status. For those without dependent care status, the relationship is linear—the greater the ability to vary one's work hours the lower the interference. For those with dependent care, on the other hand, having moderate flexibility in varying one's work hours does not reduce family-to-work interference at all. This type of flexibility has to be available daily for it to be associated with a reduction in work-to-family interference for men and women with dependents.

Figure 23: Relationship Between Ability to Arrange Work Schedule and Family-to-Work Interference

Gender by Dependent Care



The findings with respect to the ability to arrange one's work schedule to meet personal commitments show a very different pattern (Figure 23) than the other forms of flexibility discussed earlier. First, this form of flexibility has a more positive impact on women than men (i.e. women report a greater drop in family-to-work interference at higher levels of this form of flexibility than men, regardless of dependent care status). Second, when gender is taken into account this form of flexibility has a more positive impact on people with dependent care status than those without. Finally, women with dependent care responsibilities, in particular, appear to benefit from this form of flexibility ($\Delta = -.5$ in family-to-work interference).

Perceived flexibility has little impact on the incidence of caregiver strain

The findings for caregiver strain were very similar to those noted for family-to-work interference. Only four of the forms of flexibility (arrange work schedule to meet family commitments, interrupt one's work day and then return, be home to have meals with family, and vary work hours) have a significant impact on the extent to which employees experience caregiver strain. Again, in all cases, the relationships were relatively weak ($\Delta = -.3$) and could be observed only in the analysis that took dependent care status into account. This type of work–life conflict stems from the home environment (i.e. need to care for an elderly dependent). Work interventions such as increasing an employee's ability to deal with an unexpected crisis at home and facilitating an employee's ability to get home in time, while helpful, do not reduce this form of stress to any appreciable extent. This suggests that employers that wish to support employees who need to care for elderly dependents should look at strategies other than perceived flexibility for solutions.

3.4 Supportive Managers

3.4 Supportive Managers

Our research has clearly demonstrated that work and family policies are ineffective if supervisors do not support them (Duxbury & Higgins, 1995). While employees want increased work-time and work location flexibility, simply offering flexible work arrangements and family-friendly benefits is not enough. There is a tremendous amount of inequity in organizations today because supervisors act as gatekeepers to many of the benefits offered by the firm. Who you work for within an organization has become more important than where you work. Employees who work for "supportive" supervisors who trust and respect their employees and who base their decisions on circumstances rather than "the book" report less stress and greater productivity than employees who work for managers who deny their employees any sort of flexibility (even when such arrangements are technically available) (Duxbury & Higgins, 1995). Formal policies alone are insufficient to ensure that employed parents are able to satisfy the role demands of work and family. Our research indicates that organizations need to alter the behaviour of their managers and supervisors to facilitate any form of permanent change. They also have to measure progress in these areas and make managers accountable for how they treat their people (Duxbury & Higgins, 1995).

Investigations by a number of researchers also point to the important role the immediate manager has to play with respect to work–life conflict. Galinsky and Stein (1990), for example, determined that the relationship with the supervisor is one of the most powerful predictors of work and family problems. They found that supervisor support lowers stress while lack of supervisor support increases stress. They also found that supervisor support of work and family issues occurs when supervisors: (1) feel that handling family issues, especially as they affect job performance, is a legitimate part of the role; (2) are knowledgeable about company policies that apply to family issues; (3) are flexible when work and family problems arise; and (4) handle employees' work and family problems fairly and without favouritism. It is interesting to note that these authors believe that having a supportive supervisor is roughly equivalent to having a supportive spouse with respect to its effects on stress (National Council of Jewish Women, 1988, cited in Galinsky & Stein, 1990).

Warren and Johnson (1995) can also be used to illustrate the important role the manager has to play in helping employees cope with demands at work and at the work–life interface. Their research found that the items that made the most difference in reducing strain were flexibility in work scheduling, permitting employees to come in late or leave early, to take occasional days off without pay and to receive phone calls from family at work.

Thompson et al. (1999) made the link between work culture and management behaviour. They defined work–family culture as "the shared assumptions, beliefs and values regarding the extent to which an organization supports and values the integration of employees' work and family lives" (p. 394). They went on to identify the three components of work–family culture as: (1) organizational time demands and the expectation that employees will prioritize work above family, (2) perceived negative career consequences associated with utilizing work–family benefits or devoting time to family responsibilities, and (3) managerial support and sensitivity to employees' family responsibilities. They argued that the availability of family-friendly benefits is not sufficient to help employees cope with work–family conflict and stress, as many employees will be hesitant to

3.4.1 Are Managers in Canada's Largest Organizations Supportive of Their Employees?

make use of such benefits for fear of being stigmatized. They also found that employees working in supportive work–family cultures were more likely to make use of formal work–family benefits, were more committed, less likely to quit their jobs and reported less work–family conflict. The first two dimensions of culture (i.e. culture of hours and work and family) were examined in Report Four of this series. The final dimension of culture, management support, is considered in this analysis.

A number of progressive organizations are responding to this issue by providing training to supervisors. This training focuses on sensitizing managers to work–family issues and showing supervisors how to behave in a manner that facilitates employees using the benefits to which they are entitled. The question remains, however: What makes a supportive supervisor? The measures of supervisor support used in this study (see Box Two) were developed and tested by Duxbury and Higgins over a 10-year period. The measures focus on behaviours associated with being a supportive or a non-supportive supervisor. Identification of key supportive and non-supportive behaviours provides organizations with a useful tool in the performance appraisal process, behaviourally based hiring and promotion decisions, managerial education programs, upward feedback exercises, and sensitivity training.

This section of the report is divided into three main parts. In the first section, we use two scales, the supportive manager measure and the non-supportive manager measure to delineate how many employees perceive that their manager is supportive (i.e. frequently engages in supportive behaviours), non-supportive (i.e. frequently engages in non-supportive behaviours) and mixed (i.e. sometimes engages in supportive behaviours, sometimes engages in non-supportive behaviours). Parts two and three look at the data analysis to answer the following two questions: Does having a manager who is perceived to be supportive help employees cope with work–life conflict? Does having a manager who is perceived to be non-supportive make it more difficult for employees to cope with work–life conflict? To answer these questions, we will look at the impact of management support/non-support on men and women, with and without dependent care, in management and professional jobs, and in other jobs. In both cases, analyses using the complete measure are presented first. This is followed by an in-depth analysis using each of the supportive and non-supportive behaviours included in the measures. As before, the discussion in the section below focuses only on supportive/non-supportive behaviours that significantly and substantively impact an employee's ability to cope with work–life conflict. The complete set of data on which this section is based can be found in Appendix D.

3.4.1 Are Managers in Canada's Largest Organizations Supportive of Their Employees?

Figure 24 provides data on the number of employees in this sample (n = 26,796) who work for managers they perceive to be supportive, non-supportive and mixed as assessed using the supportive and non-supportive manager measures.

3.4.1 Are Managers in Canada's Largest Organizations Supportive of Their Employees?

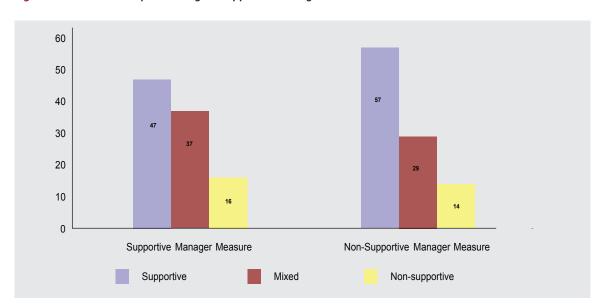


Figure 24: Percent of Sample Working for Supportive Manager

Less than half of the sample work for a supportive manager

The data collected using the supportive manager measure indicate that:

- Just under half the employees in this study (47% of respondents) work for managers who frequently engage in the nine supportive management behaviours.
- 37% work for "mixed managers" who are not consistent with respect to the extent to which they engage in supportive behaviours (i.e. exhibit some behaviours but not others)..
- 16% work for managers who rarely undertake any of the supportive actions included in the supportive manager measure.

One in seven works for a non-supportive manager

The data collected using the non-supportive manager measure indicate that:

- 13% of the respondents work for a non-supportive manager who uses the six behaviours that employees have identified as typifying a non-supportive manager on a daily basis.
- Just under one in three of the employees in this study (29% of respondents) works for a manager who is not consistent in the extent to which they engage in the six management behaviours that employees find to be non-supportive (exhibit some behaviours and not others).
- Just over half (57%) work for managers who rarely display what employees consider non-supportive behaviours.

Management support is not a continuum

When we started our research on management support, we envisioned this construct as a continuum with supportive management on one end and non-supportive management on the other. Our data indicate that while the supportive and non-supportive manager measures are strongly correlated (i.e. r = 0.60) they measure two quite different constructs and are not a continuum. In other words, the opposite of a supportive manager is one who is not supportive, while the opposite of a non-supportive manager is one who is not non-supportive. The breakdown of the sample using both the non-supportive and supportive manager measures can be found in Table 6. The following is a summary of the perceptions of employees about their managers:

- A plurality of respondents (42%) work for a manager who is supportive no matter what criteria are considered (i.e. frequently engages in supportive behaviours, rarely engages in non-supportive behaviours).
- Just over one in five (22%) of the employees who responded to our survey work for a manager who
 is inconsistent with respect to application of supportive behaviours but has the advantage of rarely
 displaying non-supportive behaviours.
- A substantive number of employees in the sample (14%) report to an individual who is inconsistent with respect to use of both supportive and non-supportive behaviours.
- One in ten of the Canadians in our sample reports to a manager who rarely engages in supportive behaviours and scores within the mixed range with respect to the non-supportive behaviours.

The above discussion suggests that there is value in looking at the impact of the two sets of management behaviours separately. Findings from this analysis are summarized in the sections below.

3.4.2 And So What? Are Employees Who Work for a Supportive Manager Better Able to Cope with Work–Life Conflict?

Analyses done to determine how management support impacts work–life conflict are provided in Appendix D. A summary of the key findings discussed in this section can be found in Tables 7 (gender by job type) and 8 (gender by dependent care). The link between management support (total measure) and work–life conflict are discussed first. This is followed by an overview of the impact the various behaviours that make up the supportive manager measure have on each dimension of work–life conflict. It should be acknowledged that the associations reported in this section can be explained in two ways. First, it is possible that employees with supportive managers work fewer hours and as such report lower levels of work–life conflict. Second, the findings could support the idea that supportive management makes it easier for employees to cope with the demands they do have. The fact that time in work is not associated with management support (data not shown) lends credence to the second interpretation of the data and reinforces our contention that employees who work for a supportive manager are more able to cope with work–life conflict than employees who do not.

Table 6: Breakdown of Sample Using Both Supportive and Non-Supportive Manager Measures

Supportive Manager Measure	Non-Supportive Manager Measure				
	Not Non-Supportive	Mixed	Non-Supportive		
Not Supportive	3%	10%	3%		
Mixed	22%	14%	2%		
Supportive	42%	4%	0%		

Table 7: Impact of Supportive Management Behaviours on Work-Life Conflict: Gender by Job Type

a. Main Effects

Management Behaviours	Overload	Work to Family	Family to Work	Caregiver Strain
Gives recognition when I do my job well	F = 280.1, α = .000 R ² = .045, Δ = - 0.3	Interaction	$R^2 = .004$	$R^2 = .031$
Provides constructive feedback	Interaction	Interaction	$R^2 = .003$	$R^2 = .029$
Makes expectations clear	Interaction	Interaction	$R^2 = .009$	$R^2 = .031$
Listens to my concerns	Interaction	Interaction	$R^2 = .006$	$R^2 = .033$
Shares information with me	$F = 228.3$, $\alpha = .000$ $R^2 = .042$, $\Delta = -0.4$	Interaction	$R^2 = .007$	$R^2 = .031$
Is available to answer questions	Interaction	Interaction	$R^2 = .007$	$R^2 = .032$
Is effective at planning work	Interaction	Interaction	$R^2 = .009$	$R^2 = .032$
Asks for input before making decisions that affect my work	Interaction	Interaction	$R^2 = .006$	$R^2 = .035$
Provides me with challenging opportunities	$R^2 = .028$	$R^2 = .039$	$R^2 = .003$	$R^2 = .031$
Supports my decisions	Interaction	Interaction	$R^2 = .007$	$R^2 = .035$

Table 7: Impact of Supportive Management Behaviours on Work–Life Conflict: Gender by Job Type

b. Significant Interactions

Management Behaviours	Overload	Work to Family	Family to Work	Caregiver Strain
Gives recognition when I do my job well	ns	$F = 2.92$, $\alpha = .008$ $R^2 = .061$	ns	ns
Provides constructive feedback	$F = 3.58$, $\alpha = .002$ $R^2 = .043$	$F = 6.61, \ \alpha = .000$ $R^2 = .058$	ns	ns
Makes expectations clear	$F = 2.76$, $\alpha = .01$ $R^2 = .049$	$F = 4.48, \ \alpha = .000$ $R^2 = .065$	ns	ns
Listens to my concerns	$F = 5.23, \ \alpha = .000$ $R^2 = .051$	$F = 6.11$, $\alpha = .000$ $R^2 = .075$	ns	ns
Shares information with me	ns	$F = 2.52, \ \alpha = .000$ $R^2 = .057$	ns	ns
Is available to answer questions	$F = 4.49$, $\alpha = .000$ $R^2 = .051$	$F = 6.27$, $\alpha = .000$ $R^2 = .071$	ns	ns
Is effective at planning work	$F = 2.12, \ \alpha = .03$ $R^2 = .056$	$F = 6.01, \ \alpha = .000$ $R^2 = .072$	ns	ns
Supports my decisions	$F = 2.55$, $\alpha = .01$ $R^2 = .041$	$F = 2.76, \ \alpha = .01$ $R^2 = .061$	ns	ns
Asks for input before making decisions that affect my work	$F = 3.45$, $\alpha = .002$ $R^2 = .044$	$F = 6.16$, $\alpha = .000$ $R^2 = .071$	ns	ns

Table 8: Impact of Supportive Management Behaviours on Work–Life Conflict: Gender by Dependent Care

a. Main Effects

Management Behaviours	Overload	Work to Family	Family to Work	Caregiver Strain
Gives recognition when I do my job well	F = 252.91, α = .000 R ² = .056, Δ = - 0.3	F = 312.94, α = .000 R ² = .041, Δ = -0.4	R ² = .045 **	F = 21.48, α = .000 R ² = .045, Δ = - 0.3
Provides constructive feedback	F = 233.59, α = .000 R ² = .053, Δ = -0.4	$R^2 = .039$	$R^2 = .044 **$	$R^2 = .043 **$
Makes expectations clear	F = 277.51, α = .000 R ² = .057, Δ = -0.3	F = 378.94, α = .000 R ² = .053, Δ = -0.4	$R^2 = .048 **$	$R^2 = .043 **$
Listens to my concerns	Interaction	F = 480.53, α = .000 R ² = .053, Δ = -0.5	$R^2 = .045 **$	$R^2 = .047 **$
Shares information with me	F = 207.54, α = .000 R ² = .052, Δ = -0.3	$R^2 = .036$	$R^2 = .046 **$	$R^2 = .043 **$
Is available to answer questions	F = 271.53, α = .000 R ² = .058, Δ = -0.4	F = 418.64, α = .000 R ² = .051, Δ = -0.5	$R^2 = .046 **$	$R^2 = .044 **$
Is effective at planning work	F = 155.9, α = .000 R ² = .065, Δ = -0.5	F = 488.71, α = .000 R ² = .063, , Δ = -0.5	$R^2 = .048 **$	$R^2 = .044 **$
Provides me with challenging opportunities	$R^2 = .036$	$R^2 = .010$	$R^2 = .042 **$	$R^2 = .045 **$
Supports my decisions	F = 127.6, α = .000 R ² = .051, Δ = -0.3	$R^2 = .039$	$R^2 = .047 **$	$R^2 = .048 **$
Asks for input before making decisions that affect my work	F = 212.51, α = .000 R ² = .051, Δ = -0.4	F = 406.46, α = .000 R ² = .048, Δ = -0.5	R ² = .046 **	R ² = .046 **

Table 8: Impact of Supportive Management Behaviours on Work-Life Conflict: Gender by Dependent Care

b. Significant Interactions

Management Behaviours	Overload	Work to Family	Family to Work	Caregiver Strain
Listens to my concerns	$F = 3.21, \ \alpha = .000$ $R^2 = .059$	ns	ns	ns

Box Eight Key to Reading Tables Summarizing Impact of Management Behaviour (7, 8, 9, 10)

These tables summarize key findings with respect to the association between management behaviour and work–life conflict. They tell the interested reader which behaviours:

- explain a substantive proportion of the variation in work–life conflict (i.e. an R² of 0.04 or more).
- are significantly associated with work–life conflict. Two types of statistical significance (defined as p < .01) associations were examined in this analysis. First, we looked to see if the management behaviour interaction term (i.e. behaviour by gender/job type or behaviour by gender/dependent care) was significant. If it was, and the relationship was substantive, statistics are given in the "interaction" table. When the interaction term was not significant, we looked to see if the management behaviour main effect was significantly associated with work–life conflict. If it was, and the relationship was substantive, the data are shown in the "main effects" table. In those cases where neither the interaction term nor the main effect was statistically significant, only the R² data are shown.
- make a substantive difference in the level of work–life conflict experienced by employees. In this case, substantive difference is denoted as Δ which is calculated as the mean difference in the level of work–life conflict experienced by a respondent who has a manager who is at one end of the supportive/non-supportive continuum with respect to the behaviour and a respondent who has a manager who is at the oppositive end of the support/non-support continuum. Substantive difference is operationally defined as those behaviours that have a Δ≥ 0.3. Finally, it should be noted that Δ is only shown when the interaction term is not significant and the relationship is linear. The relationship between management behaviours whose interaction with work–life conflict depends on either gender/dependent care status and/or gender/job type (i.e. with significant interaction terms) is shown in the figures that accompany this discussion.

The following key can be used to interpret these tables:

- * indicates that although the R² meets the cut-off criteria, the main effect is not significant
- ** indicates that although the R^2 meets the cut-off criteria, the Δ is smaller than 0.2
- *** indicates that the association between use of the strategy and work–life conflict is not linear

Interaction indicates that the interaction term is significant

ns indicates the interaction term is not significant

3.4.2.1 Impact of Supportive Manager (Total Measure) on Work–Life Conflict

3.4.2.1 Impact of Supportive Manager (Total Measure) on Work–Life Conflict

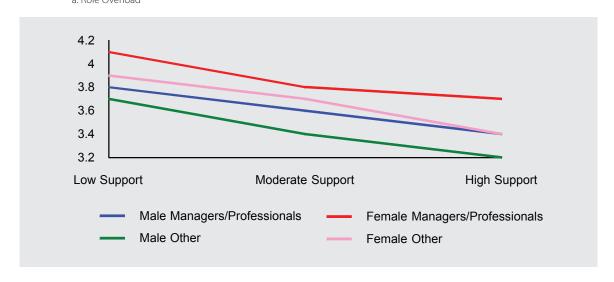
Management support is linked to lower levels of role overload

This analysis links supportive management with an increased ability to cope with role overload. The fact that management support is significantly and substantively associated with role overload in both the gender and job type and the gender and dependent care analyses emphasizes the importance of the link between management support and role overload for today's employees.

Examination of the data in Figure 25a shows that the relationship between management support and role overload varies by gender when job type is taken into consideration. The following conclusions can be drawn by examining this figure:

- Supportive management is associated with a greater reduction in role overload for employees working in other positions within the organization ($\Delta = -.5$) than for those in managerial and professional positions ($\Delta = -.4$).
- Having a manager who displays mixed levels of management support is associated with a significant reduction in role overload for women in management and professional positions (Δ = -.3). These women receive little additional benefit (Δ = -.1 in role overload) from having a supportive manager. Females in other positions, on the other hand, experience only a small reduction in role overload when working for a mixed manager compared to a not supportive manager (Δ = -.2). These women experience a further decline in role overload of .3 when they move from a mixed to a supportive manager.

Figure 25: Link Between Work–Life Conflict and Supportive Management: Gender by Job Type Analysis



3.4.2.1 Impact of Supportive Manager (Total Measure) on Work–Life Conflict

Figure 25: Link Between Work–Life Conflict and Supportive Management: Gender by Job Type Analysis

b. Work-to-Family Interference

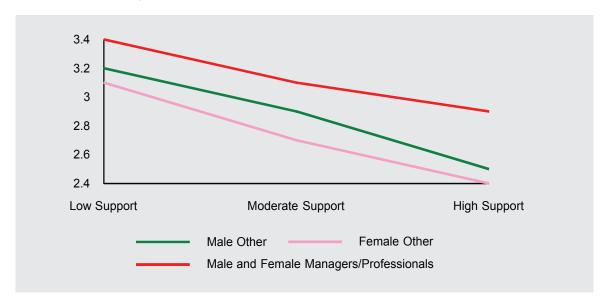
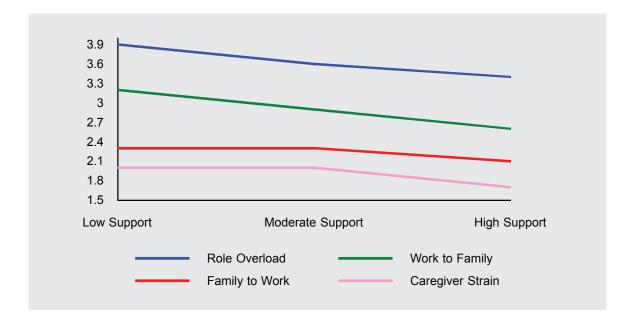


Figure 26: Relationship Between Work–Life Conflict and Management Support When Dependent Care Status Taken into Account



The relationship between supportive management and role overload when dependent care status is taken into account is straightforward (Figure 26) and identical for men and women: the greater the levels of support, the lower the levels of role overload (D = -.5), regardless of dependent care status.

Management support is linked to lower levels of work-to-family interference

This analysis links supportive management with an increased ability to cope with work-to-family interference. The strength of this relationship and the fact that it can be observed in both the gender and job type and the gender and dependent care analyses suggest that employers that wish to help employees cope with this form of work-life conflict implement strategies to increase management support.

Examination of the data in Figure 25b indicates that the relationship between management support and work-to-family interference depends on both gender and job type. The following conclusions can be drawn by examining this figure:

- Supportive management is associated with a greater reduction in work-to-family interference for those in other positions ($\Delta = -.7$) than for managers and professionals ($\Delta = -.5$).
- There are no gender differences in the relationship between management support and work-to-family interference for men and women in managerial and professional positions.
- The relationship between work-to-family interference and management support is associated with gender for those in other positions within the organization, as shown in Figure 25b.

The relationship between supportive management and work-to-family interference when dependent care status is taken into account is straightforward (Figure 26) and identical for men and women: the greater the levels of support the lower the levels of this type of interference ($\Delta = -.6$), regardless of dependent care status.

Management support is linked to lower levels of family-to-work interference and caregiver strain

The relationship between these two forms of work–life conflict and management support (Figure 26) is fairly straightforward, albeit very different from that observed for role overload and work-to-family interference. High levels of management support are associated with lower levels of family-to-work interference (Δ = .3) and caregiver strain (Δ = .4) for both men and women when dependent care status is taken into account.³⁰ It is also interesting to note that having a mixed manager does not provide any assistance to employees who need to cope with these forms of conflict.

3.4.2.2 Impact of the Different Supportive Behaviours

The measure of supportive management included in this analysis includes 10 behaviours. To help employers evaluate which of these behaviours are the most important in terms of the reduction of work–life conflict, we examined the extent to which each of these 10 supportive behaviours helped employees cope with each of the four types of work–life conflict considered in

³⁰ The R² was .048 for both the family-to-work interference and caregiver strain analysis, which controlled for both gender and dependent care status. The R² was not, however, substantive in the gender by job type analysis.

this study. Furthermore, to help employers target their interventions appropriately we looked at whether or not the employee's gender, their job type and their dependent care status have an impact on the extent to which these different behaviours helped employees cope with work-life conflict.

The discussion in the section below focuses only on those behaviours that substantively impact an employee's ability to cope with work–life conflict. Substantiveness was determined by first looking at the R² of the ANOVA and identifying behaviours that explained approximately 5% of the variance in work–life conflict. We then calculated the difference (Δ) between the level of work–life conflict experienced by someone who has a manager who is supportive with respect to this behaviour compared to an individual who rates their manager's behaviour as mixed or low. Behaviours with little to no association with work–life conflict (defined as a non-significant finding and/or a Δ of less than 0.3) are not discussed. The interested reader can, however, find the complete set of data upon which this section is based in Appendix D or consult Table 7 (summarizes key findings from gender by job type analysis) and Table 8 (summarizes key findings from gender by dependent care analysis). Information on the labelling conventions used in Tables 8 through 10 is given in Box Eight.

Employees who have a manager who is consultative and good at planning report lower levels of role overload

Eight of the ten supportive behaviours can be seen to help men and women cope with role overload, regardless of their dependent care status. What helps employees cope with role overload, regardless of gender or dependent care status³¹ is a manager who:

- is effective at planning the work to be done ($\Delta = -0.5$)
- is available to answer questions ($\Delta = -0.4$)
- provides constructive feedback ($\Delta = -0.4$)
- asks for input before making decisions that affect their work ($\Delta = -0.4$)
- supports their decisions ($\Delta = -0.3$)
- gives recognition for a job well done ($\Delta = -0.3$)
- makes expectations clear ($\Delta = -0.3$)
- shares information with them ($\Delta = -0.3$)

These data suggest that employees are more able to deal with role overload when they have a manager who is good at planning and managing the work to be done as well as communicating work expectations. Managers do this by being consultative (i.e. involving employees at the front end of the planning process), by providing clarity on what is to be done and how it is to be done (i.e. share information with employees, make themselves available, provide constructive feedback, make expectations clear). In all cases, these types of behaviours can be expected to increase an employee's efficiency and ability to plan their own work day—strategies that in turn help employees cope with work demands. The data suggest that these behaviours are moderately effective at reducing role overload (i.e. R^2 range from 5% to 7% while Δ 's range from - .3 to - .5).

³¹ In other words, the behaviour main effect is significant in the gender by dependent care analysis but the interaction term is not.

It should also be noted that two of the supportive behaviours, shares information with employees (Δ = -0.4) and gives recognition for a job well done (Δ = -0.3), were also significant predictors of role overload in the gender by job type analysis. While the amount of role overload explained by these behaviours falls slightly below our cut-off criteria, these findings are important as they indicate that employees at all job levels would benefit from having a manager who provides positive feedback and shares information with them.

Managers who seek to reduce role overload in other positions need to plan the work to be done and make expectations clear

The extent to which the following three supportive behaviours are associated with lower levels of role overload depends on both gender and job type:

- is effective at planning the work to be done
- is available to answer questions
- makes expectations clear

These relationships are shown in Figure 27a (expectations), Figure 27b (availability) and Figure 27c (planning). The following observations can be drawn from these figures:

- Men and women in other positions realize the most benefit (i.e. greatest drop in role overload) from having a manager who is effective at planning the work to be done, makes expectations clear and is available to answer questions.
- Managers who wish to help their females in other positions cope with role overload should focus on planning the work to be done ($\Delta = -0.7$).

These findings emphasize the link between understanding what one is to do at work (i.e. plans and expectations are clear) and role overload for employees in general and front-line employees in particular. While the exact causal mechanism is unclear, it is likely that employees who have a manager who focuses on these activities are more able to work efficiently (i.e. fewer mistakes, less duplication of work, better scheduling of tasks) and hence feel less overloaded.

Figure 27: Relationship Between Management Behaviour and Role Overload Depends on Both Gender and Job Type

a. Makes Expectations Clear

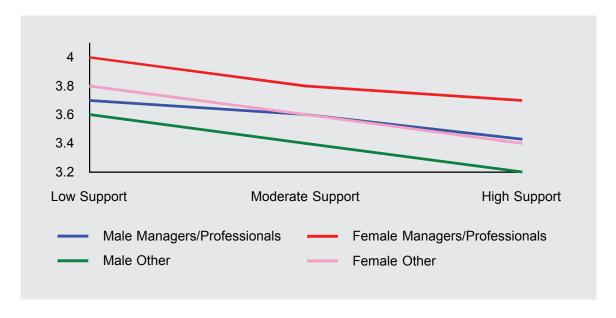


Figure 27: Relationship Between Management Behaviour and Role Overload Depends on Both Gender and Job Type
b. Is Available to Answer Questions

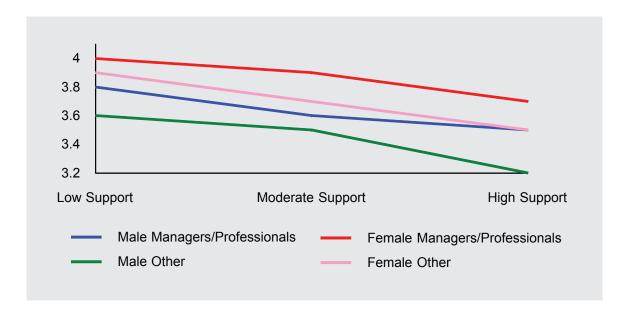


Figure 27: Relationship Between Management Behaviour and Role Overload Depends on Both Gender and Job Type

c. Is Effective at Planning the Work to Be Done

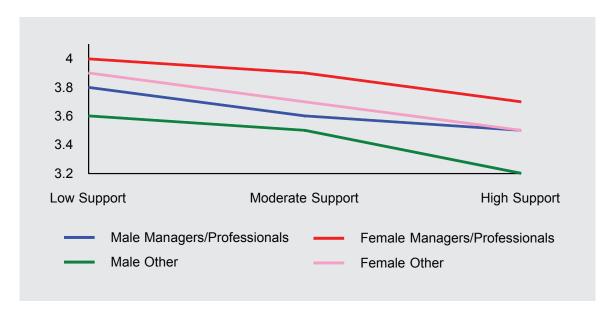
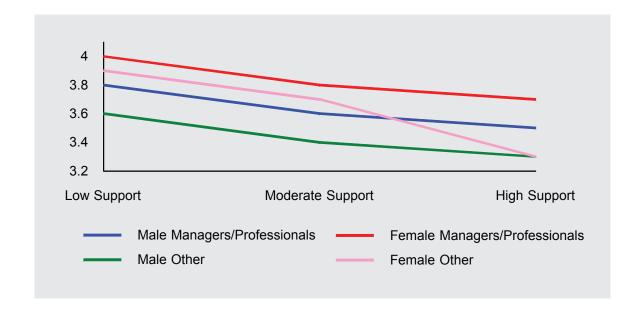


Figure 27: Relationship Between Management Behaviour and Role Overload Depends on Both Gender and Job Type d. Listens to My Concerns



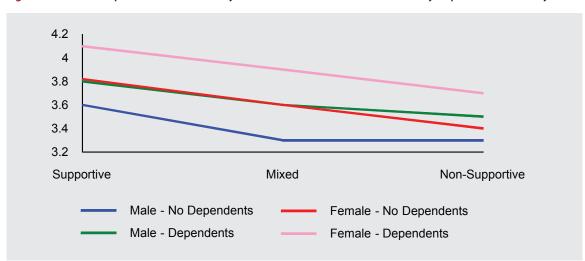


Figure 28: Relationship Between Listens to My Concerns and Role Overload: Gender by Dependent Care Analysis

Women who report to a manager who listens to their concerns report lower levels of role overload

Finally, it is important to note that our data (Figures 27d and 28) show that basic management skills such as listening make a significant difference in the levels of role overload reported by employees. While all employees with a manager who has good listening skills appear to benefit from this behaviour, the data indicate that women, regardless of job type or dependent care status, benefit more from this behaviour than men (i.e. drop in role overload is greater). Women in other positions within the organization, in particular, seem to benefit from having a manager who listens ($\Delta = -0.7$). These findings are consistent with those reported with respect to planning and suggest that women at the bottom levels of the organizational hierarchy find it easier to balance work and life when they have a manager who helps them understand what is to be done and is aware of their circumstances at work and at home (i.e. listens).

Employees with managers who are good at planning and directing the work to be done report lower levels of work-to-family interference

Half of the supportive behaviours are associated with lower levels of work-to-family interference, regardless of their gender or dependent care status.³² What helps employees, regardless of gender or dependent care status, cope with work-to-family interference? The list is very similar to that observed for role overload and includes having a manager who:

- is effective at planning the work to be done ($\Delta = -0.6$)
- asks for input before making decisions that affect their work ($\Delta = -0.5$)
- listens to their concerns ($\Delta = -0.5$)
- is available to answer questions ($\Delta = -0.5$)
- makes expectations clear ($\Delta = -0.4$)

³² In other words, the behaviour main effect is significant in the gender by dependent care analysis but the interaction term is not.

These data support our previous observations that employees find it easier to balance work and non-work roles if they know exactly what it is that they have to do at work (i.e. manager effective at planning, makes expectations clear, and is available to answer questions) and have input into how their work is to be done (i.e. manager listens to subordinates and consults them before making decisions that affect their work). In other words, they have a manager who is good at people management and planning. While it is hard to determine exactly why such behaviour reduces work-to-family interference, we can speculate that these forms of management support increase employees' ability to schedule and plan their own work around their non-work responsibilities. In other words, managers help employees deal with this form of interference by giving them more control over the work-life interface.

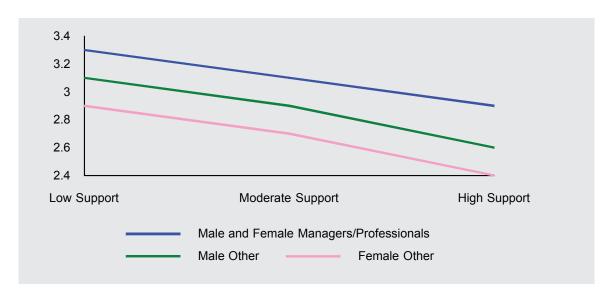
Relationship between management behaviour and work-to-family interference depends on both gender and job type

The data show that management behaviour has a substantive impact on work-to-family interference when job type is taken into consideration. The strength of this association can be illustrated by several findings. First, nine of the ten supportive management behaviours demonstrated significant negative associations with this form of work-life conflict (i.e. higher levels of support were associated with lower levels of interference), regardless of the gender of the employee or the type of position held. Second, the amount of variation in work-to-family interference explained by each behaviour was substantive (i.e. ranged from 5.5% to 7.5%).

To fully understand this relationship, one needs to look at both gender and job type. This examination identifies three patterns of relationships (Figure 29) in the data. Details on each are given below.

Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

a. Gives Recognition



³³The gender by job type interaction term is significant in all cases.

Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

b. Gives Constructive Feedback

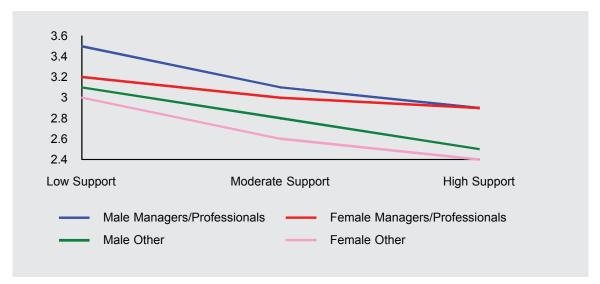


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

c. Makes Expectations Clear

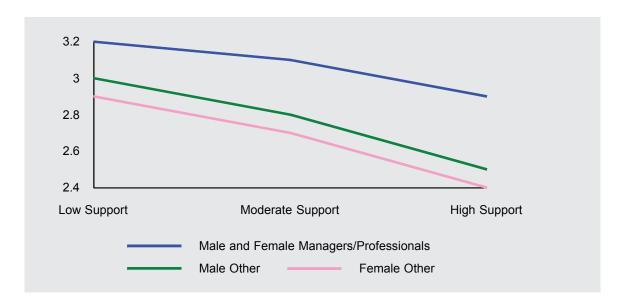


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

d. Listens to My Concerns

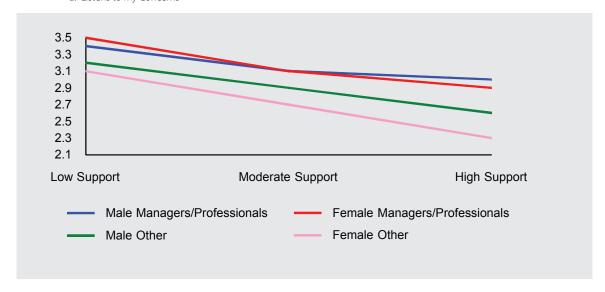


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

e. Shares Information with Me

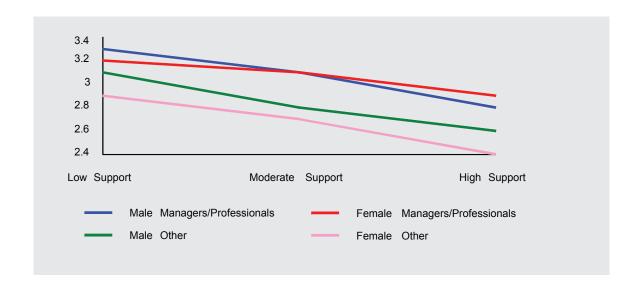


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

f. Is Effective at Planning Work to Be Done

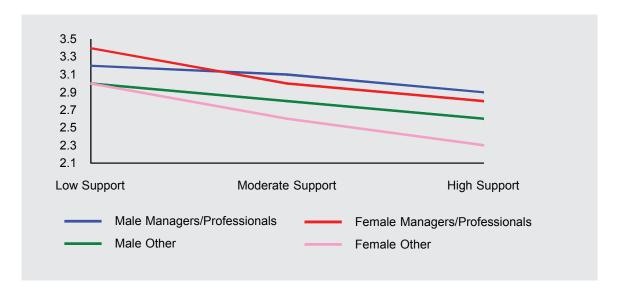


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

g. Asks for Input Before Making Decisions That Affect Employee's Work

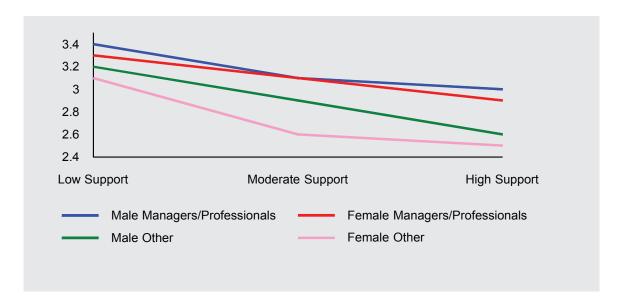


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

h. Supports Employee's Decisions

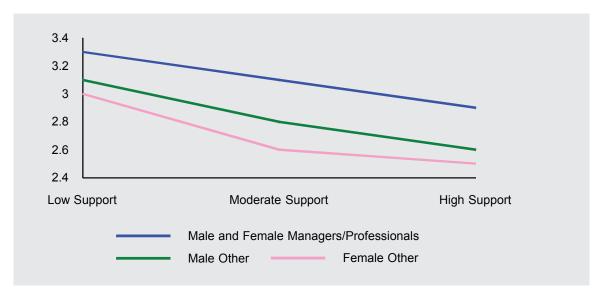
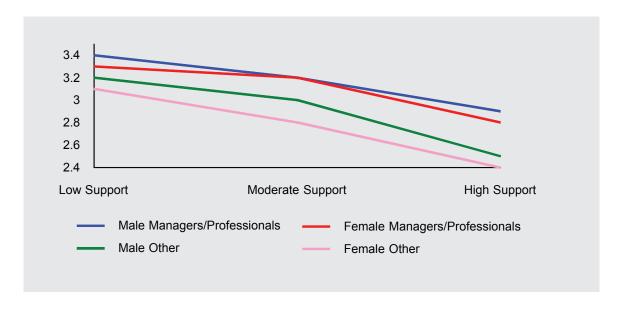


Figure 29: Relationship Between Management Behaviour and Work-to-Family Interference Depends on Both Gender and Job Type

i. Is Available to Answer Questions



Behaviours that benefit employees in other positions more than their managerial and professional counterparts

When gender is taken into account, those in other positions in the organization benefit more than their counterparts in managerial and professional positions from having a manager who makes expectations clear and involves them in the decision-making process. Specifically, the following management behaviours are associated with an increased ability to cope with work-to-family interference for those in other positions than for those in managerial and professional positions:

- asks for input into decisions that affect their work
- makes expectations clear
- gives recognition for a job well done
- supports their decisions
- is available to answer questions

This last behaviour, in particular, is associated with a large drop in work-to-family interference for those in other positions ($\Delta = -0.7$).

Behaviours that with one exception (female managers and professionals) benefit all employees

Higher incidence of two of the supportive behaviours, gives constructive feedback and shares information with employees, is associated with substantive declines in work-to-family interference for all but one group of employees—women in managerial and professional positions.

Behaviours that benefit women more than men

Two of the management behaviours, listens to my concerns and is effective at planning the work to be done, are strongly associated with the ability to cope with work-to-family interference. In both cases, however, the linkage between this behaviour and lower levels of work-to-family interference varies significantly with both gender and job type. Who benefits the most from having a manager who listens to concerns and is effective at planning the work? The answer varies depending on how the comparison is done. When the comparison is done within gender, these management behaviours are associated with a larger drop in work-to-family interference for those in other positions than for managers and professionals. When the comparison is done within job type, these two behaviours are linked to a greater decline in this form of work-life conflict for women rather than men. Overall, women in other positions and female managers and professionals appear to benefit the most from having a manager who is supportive with respect to these behaviours. Men in managerial and professional positions, on the other hand, realize much smaller gains with respect to reductions in work-to-family interference from having a manager who listens to them and is effective at planning the work to be done.

3.4.3 And So What? How Important Is the Link Between Working for a Non-Supportive Manager and Work–Life Conflict?

None of the supportive behaviours substantively helps employees deal with family-to-work interference and caregiver strain

None of the 10 supportive management behaviours considered in this analysis were effective at helping employees cope with either family-to-work interference or caregiver strain. These findings are consistent with those observed with perceived flexibility and support our contention that the two forms of work-life conflict that arise from pressures within the home environment (need to care for children and/or elderly dependents) cannot be appreciably reduced by any one of the behaviours associated with management support. Rather, these data and the findings obtained with the total management support measure suggest that coping with these two forms of work-life conflict only occurs when an employee works for a manager who consistently displays a number of the supportive behaviours. These findings also imply that employers, wishing to support their employees' need to care for children and elderly dependents, need to look beyond what the immediate manager can do informally to help their employees.

3.4.3 And So What? How Important Is the Link Between Working for a Non-Supportive Manager and Work–Life Conflict?

Analyses done to determine how working for a non-supportive manager impacts work–life conflict is provided in Appendix D. A summary of the key findings discussed in this section can be found in Tables 9 (gender by job type) and 10 (gender by dependent care). The link between non-supportive management behaviours (total measure) and work–life conflict is discussed first. This is followed by an overview of the impact that the various behaviours in the non-supportive manager measure have on each dimension of work–life conflict.

Table 9: Impact of Non-Supportive Management Behaviours on Work-Life Conflict: Gender by Job Type

a. Main Effects

Management Behaviours	Overload	Work to Family	Family to Work	Caregiver Strain
Put me down in front of colleagues	Interaction	Interaction	$R^2 = .011$	$R^2 = .032$
Only talks to me when I make a mistake	Interaction	Interaction	$R^2 = .011$	$R^2 = .034$
Makes me feel guilty about time off for personal or family reasons	Interaction	Interaction	$R^2 = .019$	$R^2 = .037$
Focuses on hours of work not output	Interaction	Interaction	$R^2 = .015$	$R^2 = .038$
Has unrealistic work expectations	Interaction	Interaction	$R^2 = .013$	$R^2 = .037$
Puts in long hours and expects me to do the same	Interaction	Interaction	$R^2 = .013$	$R^2 = .031$

3.4.3 And So What? How Important Is the Link Between Working for a Non-Supportive Manager and Work–Life Conflict?

 Table 9: Impact of Non-Supportive Management Behaviours on Work–Life Conflict: Gender by Job Type

b. Significant Interactions

Management Behaviour	Overload	Work to Family	Family to Work	Caregiver Strain
Put me down in front of colleagues	$F = 4.49, \ \alpha = .000$ $R^2 = .044$	$F = 4.29$, $\alpha = .000$ $R^2 = .067$	ns	ns
Only talks to me when I make a mistake	$F = 3.19$, $\alpha = .001$ $R^2 = .040$	$F = 2.82, \ \alpha = .01$ $R^2 = .062$	ns	ns
Makes me feel guilty about time off for personal or family reasons	$F = 3.45$, $\alpha = .000$ $R^2 = .067$	$F = 5.41, \ \alpha = .000$ $R^2 = .092$	ns	ns
Focuses on hours of work not output	$F = 5.07$, $\alpha = .000$ $R^2 = .055$	$F = 5.67$, $\alpha = .000$ $R^2 = .076$	ns	ns
Has unrealistic expectations about work to be done	$F = 3.78$, $\alpha = .001$ $R^2 = .110$	$F = 5.41, \ \alpha = .000$ $R^2 = .123$	ns	ns
Puts in long hours and expects me to do the same	$F = 5.47$, $\alpha = .000$ $R^2 = .071$	$F = 6.76$, $\alpha = .000$ $R^2 = .112$	ns	ns

Table10: Impact of Non-Supportive Management Behaviours on Work-Life Conflict: Gender by Dependent Care

a. Main Effects

Management Behaviour	Overload	Work to Family	Family to Work	Caregiver Strain
Put me down in front of colleagues	R ² = .053 **	Interaction	$R^2 = .048 **$	$R^2 = .045 **$
Only talks to me when I make a mistake	$R^2 = .049 **$	F = 310.21, α = .000 R ² = .041, Δ = 0.4	R ² = .049 **	$R^2 = .048 **$
Makes me feel guilty about time off for personal or family reasons	$F = 368.66, \ \alpha = .000$ $R^2 = .071, \Delta = 0.4$	Interaction	F = 173.72, α = .000 R ² = .059, Δ = 0.3	$F = 26.09, \ \alpha = .000$ $R^2 = .048, \ \Delta = 0.3$
Focuses on hours of work not output	F = 145.5, α = .000 R ² = .058, Δ = 0.4	$F = 130.2, \alpha = .000$ $R^2 = .052, \Delta = 0.5$	Interaction	$F = 39.33, \ \alpha = .000$ $R^2 = .052, \Delta = 0.3$
Has unrealistic work expectations	Interaction	Interaction	$R^2 = .051 **$	$F = 30.13, \ \alpha = .000$ $R^2 = .051, \Delta = 0.3$
Puts in long hours and expects me to do the same	Interaction	Interaction	R ² = .051 **	R ² = .041 **

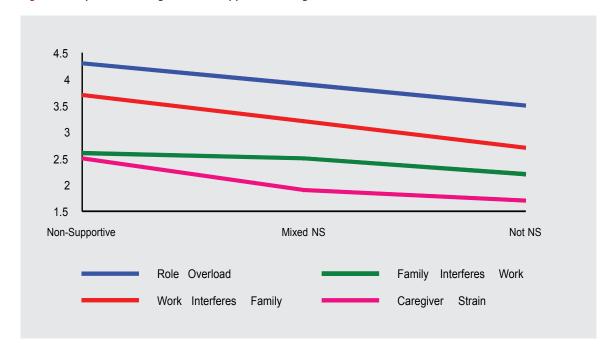
3.4.3 And So What? How Important Is the Link Between Working for a Non-Supportive Manager and Work–Life Conflict?

Table10: Impact of Non-Supportive Management Behaviours on Work-Life Conflict: Gender by Dependent Care

b. Significant Interactions

Management Behaviour	Overload	Work to Family	Family to Work	Caregiver Strain
Puts me down in front of colleagues	ns	$F = 2.62, \ \alpha = .01$ $R^2 = .047$	ns	ns
Makes me feel guilty about time off for personal or family reasons	ns	$F = 1.76, \ \alpha = .001$ $R^2 = .069$	ns	ns
Focuses on hours of work not output	ns	ns	$F = 2.71, \ \alpha = .01$ $R^2 = .059$	ns
Has unrealistic expectations about work to be done	$F = 4.39$, $\alpha = .000$ $R^2 = .111$	$F = 4.69, \ \alpha = .000$ $R^2 = .097$	ns	ns
Puts in long hours and expects me to do the same	$F = 3.32$, $\alpha = .000$ $R^2 = .087$	$F = 3.46$, $\alpha = .000$ $R^2 = .111$	ns	ns

Figure 30: Impact of Working for a Non-Supportive Manager (Total Measure)



3.4.3.1 Impact of Non-Supportive Management (Total Measure) on Work–Life Conflict

Employees who report to a non-supportive manager report higher levels of role overload and work-to-family interference

Employees who report to a non-supportive manager report significantly higher levels of role overload and work-to-family interference than counterparts who work for a manager who rarely displays the six non-supportive behaviours included in this measure. These relationships are particularly noteworthy for several reasons. First, the data show that the number of hours worked per week is approximately the same for the two groups, suggesting that the increase in overload and interference is not due to more time in work. Second, non-supportive management is significantly and substantively associated with role overload and work-to-family interference, suggesting that all types of employees find balance problematic with this type of manager. Third, the difference in role overload ($\Delta = +.8$) and work-to-family interference ($\Delta = +1.0$) between those employees who work for a manager who is non-supportive and those who work for a manager who does not behave in a non-supportive manner is substantive (Figure 30). In fact, the employees who work for non-supportive managers report the highest levels of role overload and work-to-family interference in the entire sample.

Management support is linked to lower levels of family-to-work interference and caregiver strain

Both men and women who work for a non-supportive manager report higher levels of family-to-work interference (Δ = +.4) and caregiver strain (Δ = +.8) when dependent care status is taken into account.³⁴ The strong relationship between caregiver strain and non-supportive management in particular should be noted. It would appear that managers who focus on things such as hours at work and "being present" exacerbate this form of conflict.

3.4.3.2 Impact of the Different Non-Supportive Behaviours

The measure of non-supportive management included in this analysis includes six behaviours. To help employers evaluate which of these behaviours are the most problematic from a work–life perspective, we examined the extent to which each of the six was associated with increased levels of the four types of work–life conflict when the employee's gender, job type and dependent care status were taken into account. The analysis protocol followed in this section is identical to that described earlier. The data are found in Appendix D and summarized in Table 9 (gender by job type) and Table 10 (summarizes key findings from gender by dependent care analysis).

Disrespectful behaviour, while unpleasant, is not strongly associated with work-life balance

Two of the six behaviours included in our measure of non-supportive management are, with one exception (work-to-family interference), not substantively associated with work-life for any of the groups of employees considered in this study. While having a manager who frequently engages in disrespectful behaviours, such as putting you down in front of colleagues and talking to you only when you make a mistake, may be stressful and unpleasant, it is not linked to role overload, family-to-work interference or caregiver strain.

³⁴ The R² was .052 for family-to-work interference and .054 for the caregiver strain in the gender by dependent care analysis. The R² was not substantive in the gender by job type analysis.

Employees who have a manager who focuses on hours at work rather than output report higher levels of role overload

The results are clear—employees who report to a non-supportive manager report higher levels of role overload than their counterparts who report to a manager who rarely displays non-supportive behaviours. The most problematic behaviours are having a manager who:

- has unreasonable expectations of the amount of work that can be done in a given amount of time
- works long hours and expects employees to do the same
- makes employees feel guilty about taking time off to deal with personal/family issues
- focuses on hours rather than output

The relationship between each of these behaviours and role overload depends on gender, job type and dependent care status, as shown in Figures 31 through 34.

Figure 31: Relationship Between Unreasonable Expectations Around Work and Role Overload

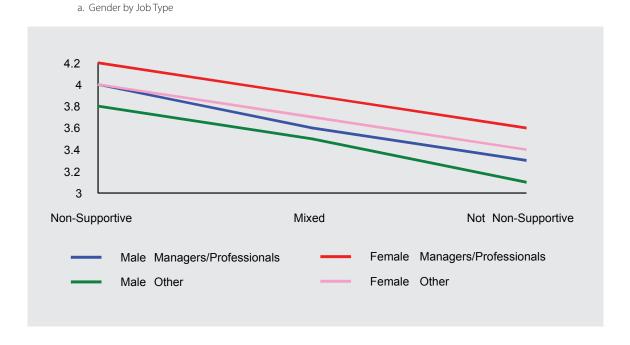


Figure 31: Relationship Between Unreasonable Expectations Around Work and Role Overload

b. Gender by Dependent Care

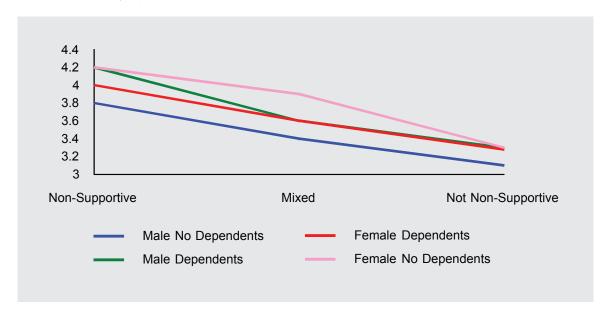


Figure 32: Relationship Between Working Long Hours and Expecting Employees to Do the Same and Role Overload

a. Gender by Job Type

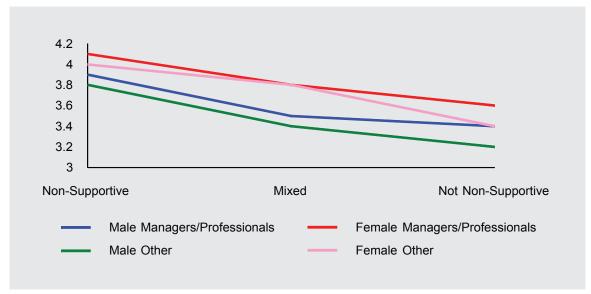


Figure 32: Relationship Between Working Long Hours and Expecting Employees to Do the Same and Role Overload

b. Gender and Dependent Care Status

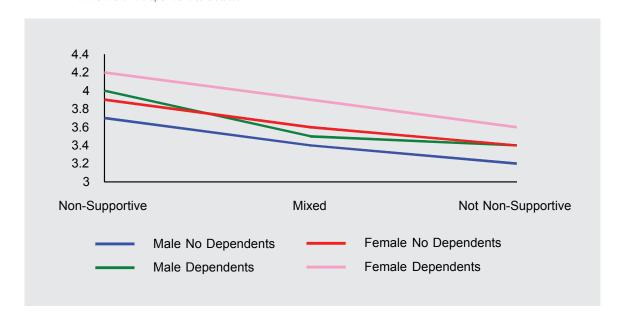


Figure 33: Relationship Between Making Employees Feel Guilty About Taking Time Off and Role Overload

Gender by Job Type Analysis

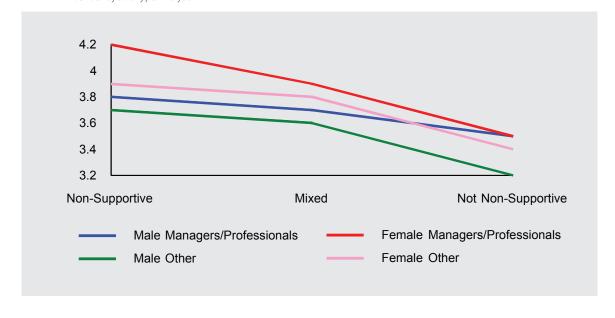
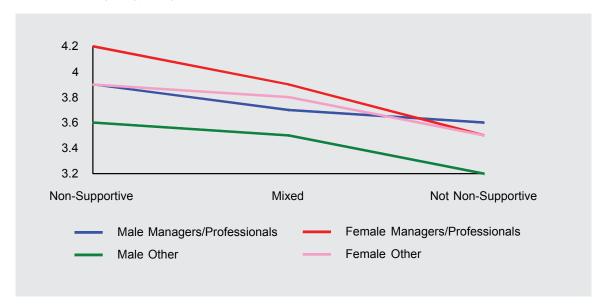


Figure 34: Relationship Between Focuses on Hours Rather than Output and Role Overload

Gender by Job Type Analysis



Men who report to managers with unreasonable work expectations report higher role overload

One of the six non-supportive behaviours, having unreasonable expectations with respect to work, is associated with a greater increase in role overload for men than women regardless of job type (Figure 31a). This behaviour is associated with an increase in role overload of \pm .7 for the men in the sample compared to an increase of \pm .6 for the women. While it is impossible to know why this gender difference occurs, we speculate that it may be attributed to differences in gender-role expectations. Traditionally, men in Canada have had primary responsibility for the work role while women have had responsibility for the family. Such expectations might make it harder for men than women to say no to more work and refuse overtime work, extra assignments, etc.

Employees with dependent care experience higher levels of role overload when they report to a manager who works long hours themselves and has unreasonable work expectations

Two non-supportive behaviours are associated with higher levels of role overload for men and women with dependent care responsibilities than their counterparts without dependent care (Figures 31b and 32b): unreasonable expectations with respect to work results (increase in role overload of +.9 for those with dependent care responsibilities versus +.7 for those without such responsibilities) and working long hours and expecting employees to do the same (increase in role overload of +.6 for those with dependent care responsibilities versus +.5 for those without such responsibilities). In other words, having a manager who expects subordinates to work long hours to meet unreasonable work deliverables regardless of expectations outside of work is associated with increased role overload for employees who try to do it all

(i.e. stay late to get the work done and then go home and perform their second shift). It is also interesting to note that these types of behaviours are equally problematic for men and women with dependent care, suggesting that it is the demands outside of work that make the difference here, not gender-role expectations. Finally, it should be noted that all employees find these behaviours problematic.

Those in other positions who report to a manager who works long hours and expects them to do the same report higher role overload

Having a manager who works long hours and expects employees to do the same is more problematic for men and women who work in other positions in the organization (Figure 32a) regardless of their gender (increase in role overload of .6 for those in other positions versus .5 for those in management and professional jobs). These findings suggest that role overload increases for those in other positions when they report to a manager whose own behaviour makes it more difficult for employees to keep regular hours. We can speculate that employees in these types of positions within the organization have less ability to "push back" and say no to this type of manager.

Female managers and professionals who report to a manager who focuses on hours, not output, and makes them feel guilty about non-work responsibilities report very high role overload

Women who report to managers who make employees feel guilty for taking time off to deal with personal or family issues (Figure 33) and who focus on hours at work rather than output (Figure 34) report very high levels of role overload. The fact that the difference in role overload between female managers and professionals who have a manager who rarely displays these behaviours compared to women who report to a manager who is highly non-supportive in these two areas is + 0.7 illustrates the link between role overload and these dimensions of non-supportive management for this group. Also worthy of note is that men in managerial and professional positions seem to react very differently to these behaviours than either their female counterparts or men and women in other positions within the organization, in that the differential in role overload between male managers and professionals who have a manager who exhibits these behaviours and one who does not is relatively small (increase of .3). Why does gender play such a role within the managerial and professional group but not for those in other positions within the organization? While it is difficult to say exactly, these findings may indicate that gender-role expectations (i.e. women should put family first) conflict with the expectations organizations place on those in managerial and professional positions (e.g. work comes first, hours at work is a good indicator of employee commitment, productivity and loyalty).

Employees who report to a non-supportive manager report higher work-to-family interference

Employees who report to a non-supportive manager report higher levels of work-to-family interference than their counterparts who report to a manager who rarely displays non supportive behaviours. Which behaviours are the most problematic? In general, the same ones we observed for role overload. In this case, however, all six of the behaviours that typify non-support are substantively linked to this form of work-life conflict. Not all behaviours are equally problematic, however, as can be observed by considering the list which ranks orders items from most to least problematic based on

the amount of variation in work-to-family interference explained by the particular behaviour. Problematic behaviours include:

- has unreasonable expectations of the amount of work that can be done in a given amount of time
- works long hours and expects employees to do the same
- makes employees feel guilty about taking time off to deal with personal/family issues
- focuses on hours rather than output
- puts me down in front of others
- only talks to me when I make a mistake

The impact of these behaviours depends on gender, job type and dependent care status, as shown in Figures 35 through 40 and discussed in the sections below.

Figure 35: Relationship Between Unreasonable Expectations Around Work and Work Interferes with Family

a. Gender by Job Type

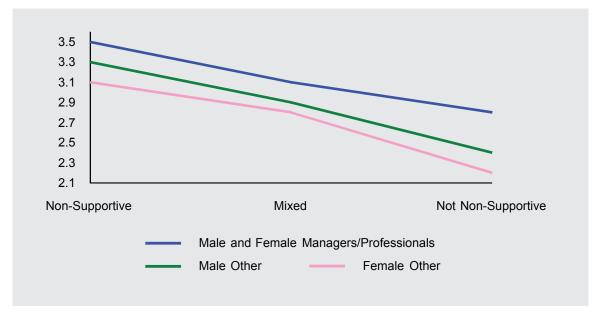


Figure 35: Relationship Between Unreasonable Expectations Around Work and Work Interferes with Family

b. Gender by Dependent Care

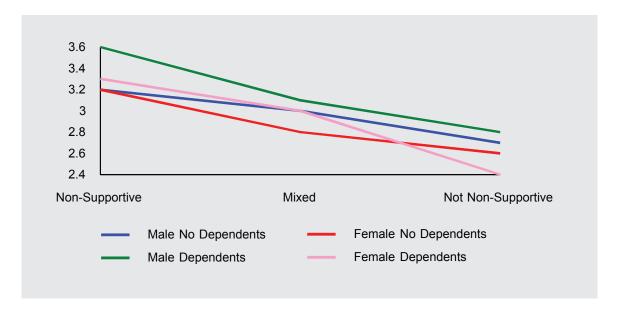


Figure 36: Relationship Between Working Long Hours and Expecting Employees to Do the Same and Work Interferes with Family

a. Gender by Job Type

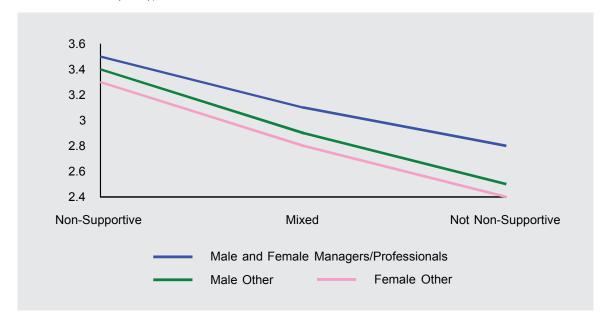


Figure 36: Relationship Between Working Long Hours and Expecting Employees to Do the Same and Work Interferes with Family

b. Gender and Dependent Care Status

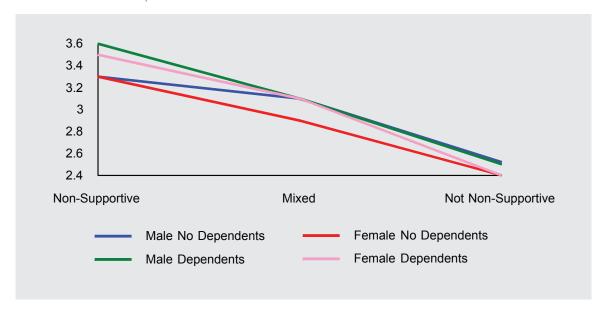


Figure 37: Relationship Between Making Employees Feel Guilty About Taking Time Off and Work Interferes with Family

a. Gender by Job Type Analysis

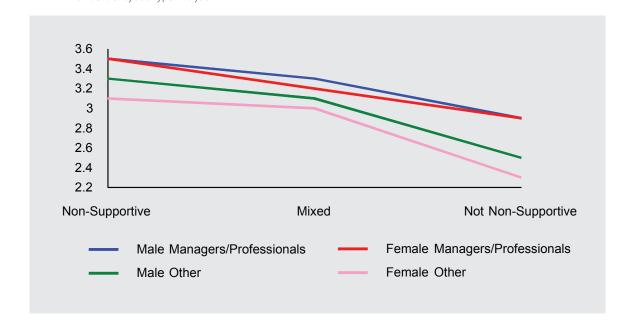


Figure 37: Relationship Between Making Employees Feel Guilty About Taking Time Off and Work Interferes with Family

b. Gender by Dependent Care Analysis

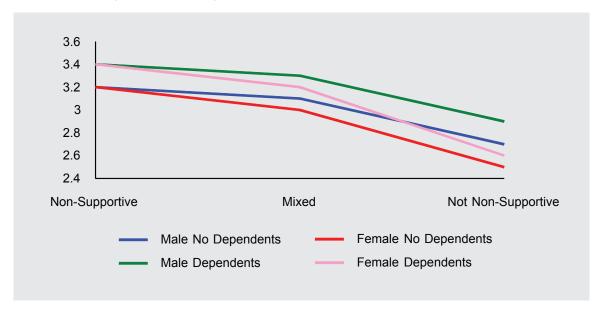


Figure 38: Relationship Between Focuses on Hours Rather than Output and Work Interferes with Family

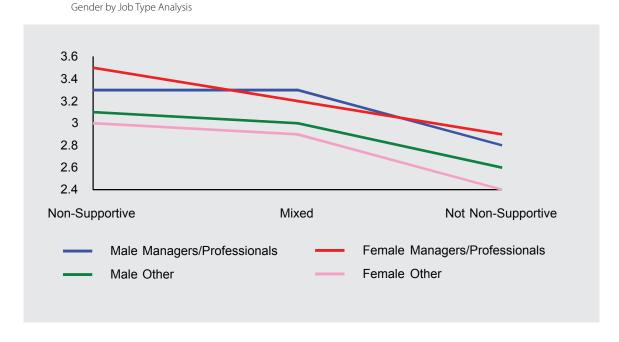


Figure 39: Relationship Between Puts Me Down in Front of Others and Work Interferes with Family

a. Gender by Job Type Analysis

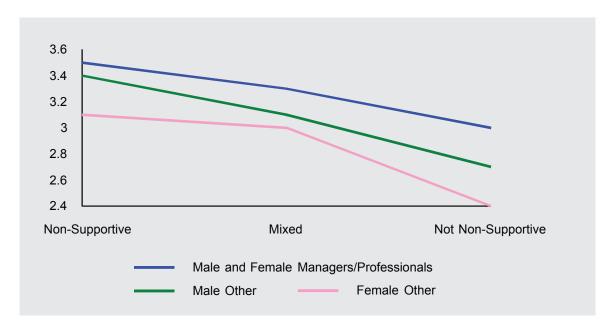


Figure 39: Relationship Between Puts Me Down in Front of Others and Work Interferes Family

b. Gender by Dependent Care Status

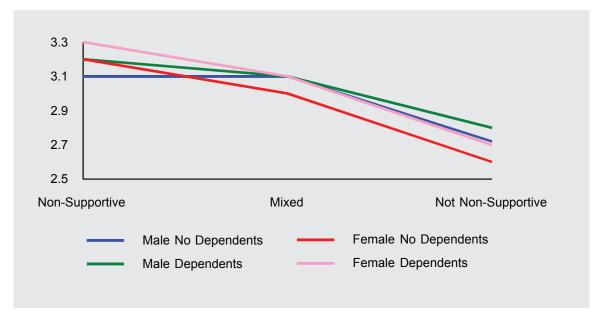


Figure 40: Relationship Between Only Talks to Employee When They Make Mistakes and Work Interferes with Family

Gender by Job Type Analysis

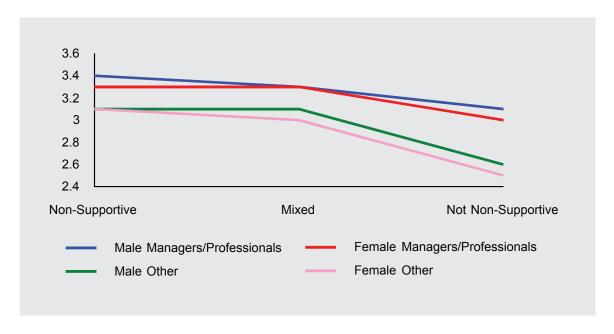
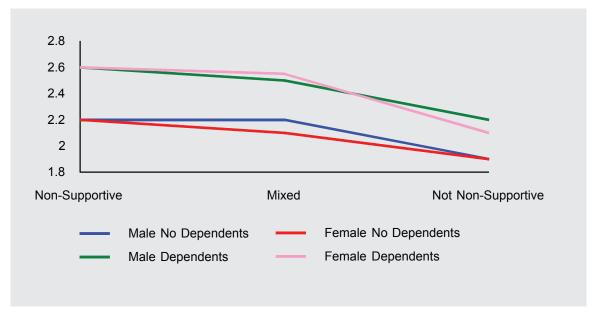


Figure 41: Relationship Between Focuses on Hour Not Output and Family Interferes with Work

Gender by Dependent Care Analysis



Having a non-supportive manager is more problematic for those in other positions in the organization

The data are unequivocal—high levels of non-support are more strongly associated with an increased level of work-to-family interference for men and women working in other positions within the organization than for counterparts who are managers and professionals. The strength of this finding can be established by noting that this difference could be observed for all but one of the behaviours included in the non-supportive manager measure. The one exception to this trend was having a manager who focused on hours at work, not output, which was more problematic for women than men, regardless of job type.

Why do those in other positions experience more work-to-family interference when their manager is non-supportive? Possible explanations for these findings include the fact that employees in other positions within the organizations earn less money (Higgins & Duxbury, 2002) and have less job mobility than professional colleagues. This means that they may find it harder to pay for goods and services such as meals out, cleaning services, etc., which make working longer hours less problematic with respect to the fulfillment of family-role responsibilities. It may also mean that these employees have less of an ability to say no to extra work or to distance themselves from a manager who does not respect them or their hours of work.

Having a non-supportive manager is more problematic for those with dependent care responsibilities

The relationship between work-to-family interference and non-supportive management also varies according to the types of responsibilities an employee has at home and their gender. Three of the management behaviours are particularly problematic (i.e. associated with greater increases in work-to-family interference) for men and women with dependent care responsibilities:

- has unreasonable expectations with respect to work
- works long hours and expects employees to do the same
- makes employees feel guilty about taking time off to deal with personal/family issues

In all three of these cases, females with dependent care responsibilities experience the greatest benefit from having a manager who does not engage in these non-supportive activities.

Women who report to a manager who puts them down in public report higher levels of work-to-family interference than their male colleagues

Finally, it is interesting to note that work-to-family interference is more strongly associated with having a manager who puts one down in public for women than for men. This is an interesting finding and suggests that either the manager is making comments about the woman's family responsibilities and how they affect their work, or that women are less likely to approach a disrespectful manager for help with respect to family issues.

Employees with a manager who makes them feel guilty about taking time off for family or personal reasons report higher family-to-work interference

One behaviour in the non-supportive management measure is associated with the reduction of family-to-work interference regardless of gender or dependent care status. Employees with a manager who refrains from making them feel guilty about time off for family or personal reasons report less family-to-work interference than employees with a manager who is non-supportive with respect to this behaviour ($\Delta = +0.5$).

Employees with dependent care who have a manager who focuses on hours at work report higher family-to-work interference

The data also show (Figure 41) that having a manager who focuses on hours at work is problematic for men and women with dependent care responsibilities. Women with dependent care responsibilities, in particular, find such management behaviour problematic ($\Delta = +0.5$ in family-to-work interference). These findings could reflect the fact that managers who focus on hours at work may be less likely to let employees change their work hours or work from home to accommodate family concerns or responsibilities. As such, employees with this type of manager feel that their family issues and concerns get in the way of accomplishments at work.

Employees who have a manager who focuses on work rather than hours are better able to cope with caregiver strain

The behaviours that help employees, regardless of gender or dependent care status, cope with caregiver strain include:

- focuses on output not hours at work ($\Delta = +0.4$)
- refrains from making them feel guilty about time off ($\Delta = +0.3$)
- has realistic expectations with respect to work ($\Delta = +0.3$)

This suggests that having a manager who has realistic work expectations, and who is understanding with respect to family issues, helps employees to cope with the demands associated with caring for an elderly dependent. It should be noted, however, that none of these relationships are as strong as those seen for role overload and work-to-family interference.

3.5 Family-Friendly Benefits and Supports

Companies have traditionally sought to compare themselves with other organizations, particularly in their own industry, in terms of products, earnings, productivity and innovation. In a "sellers" market for labour, organizations will need to compete in a new arena—"family-friendliness," which Galinsky, Friedman and Hernandez (1991, p. 21) defined as "the overall responsiveness to employees' family and personal needs in light of business objectives." Family-friendly benefits and programs provide assistance to employees with responsibilities outside of work either directly (e.g. day care) or indirectly (e.g. child care referral service).

In 1991, the Families and Work Institute developed a Family Friendly Index to serve as a tool for companies to use in evaluating and comparing their various responses to employees' work and family concerns. It also developed a checklist for the full range of family-friendly policies and programs a company can pursue.

The index covers seven primary categories of benefits and policies (Galinksy et al., 1991):

- flexible work arrangements
- leaves
- financial assistance
- corporate giving/community service
- dependent care services
- management change
- work–family stress management

A discussion of all benefits and policies outlined in this book is beyond the scope of this report. The interested reader is referred to *The Corporate Reference Guide to Work–Family Programs* by Galinsky, Friedman and Hernandez (1991) for details on how this list was developed and how it can be used.

This study goes beyond simply providing benchmark data on the availability of various benefits and practices to an investigation of whether or not these different supports moderate the different forms of work–life conflict. A similar study was done in 1995 by Thomas and Ganster, who examined the impact of family-supportive policies on work–family conflict and on strain outcomes (depression, job dissatisfaction, somatic complaints, blood pressure, cholesterol and absenteeism). The family-supportive policies they incorporated included dependent care services (i.e. on-site day care, on-site care for sick children, off-site care for sick children, in-home nurse for sick children, before- and after-school care, other special care services for elderly or disabled dependents), information and referral services (for child care, sick child care, on-site parenting seminars, printed material about parenting and special care services), and flexible scheduling. They found that neither information and referral services nor dependent care services had any significant impact on work–family conflict or on the strain outcomes. They found that flexible scheduling was positively related with employee perceptions of having control over their work and family, which was negatively related to work–family conflict.

This study will provide a more detailed and updated look on this same issue. The data on availability and impact of benefits and policies outlined in this report should give managers a tool that they can use to compare their programs to those used by "best practice" employers, evaluate where they stand compared to their competitors, and set strategic goals for new programs and practices.

3.5.1 Are Canadian Firms "Family Friendly?"

Data on the availability and use of family-friendly policies for the total sample are summarized in Table 11. These data paint a mixed picture with respect to kinds of benefits available to Canadian employees.

Table 11: Family-Friendly Benefits

Supportive Benefit	% of Sample Who		
	Have Benefit	Use Benefit	
Unpaid LOA	83.7%	64.5%	
Psychological/health counselling (EAP)	83.1%	59.5%	
Family/Emergency days off	75.9%	58.1%	
Time off instead of pay	74.9%	58.3%	
Short-term personal/family leave	66.2%	50.0%	
Flexible work arrangements	49.4%	40.6%	
Part-time work/reduced hours/job sharing with benefits	45.3%	39.9%	
Personal days off with pay	42.2%	33.7%	
Supportive relocation policies	43.8%	28.8%	
Tele-work arrangements	21.1%	16.5%	
On-site day care	8.1%	5.8%	
Child care referral service	7.2%	5.7%	
Elder care referral service	6.1%	5.0%	

n=31.571

Canadian firms take a reactive approach to employee well-being

Five of the benefits can be considered to be widely available in Canada's larger firms: unpaid leave of absence (LOA, 84%), psychological/health counselling (EAP, 83%), the ability to take an unpaid emergency day off work (76%), the ability to take time off work instead of overtime pay (75%) and the ability to take short-term personal/family leave without pay (66%). Several observations can be made about Canadian employers' approach to work and family and employee well-being from these data. First, virtually all of the commonly available family benefits appear to be based on the premise that the employer should not economically support employees who have to miss work due to family or personal concerns (i.e. unpaid LOA, unpaid short-term leave, unpaid emergency day off work, time off in lieu of overtime pay). The ramification of such an approach is that employees who are experiencing problems in their personal or family lives are also penalized economically if they need to take time off work to deal with the issue. This may, in turn, exacerbate their stress. Second, all of the benefits common in Canadian organizations can be considered reactive (i.e. deal with the work-life issue once it arises) rather than proactive (focus on reducing the probability that the conflict will occur

in the first place). Research in the area of change management has shown that reactive approaches to change are often more expensive than proactive strategies. Finally, all of the commonly available benefits help employees deal with problems once they have occurred but do little (with the exception perhaps of EAP) to stop the problem from reoccurring in the future (i.e. treat the symptom, not the cause).

Fewer than half of the Canadians who work for Canada's larger employers have access to progressive family-friendly benefits

Four of the benefits examined in this study are available to just under half of the survey respondents: flexible work arrangements (49%), part-time work with pro-rated benefits (45%), supportive relocation policies (44%) and personal days off with pay (42%). All of these benefits can be considered to be progressive in that they concretely recognize that employees have responsibilities outside of work that need to be supported by the employer. Two of the benefits speak to the issue of workplace flexibility. One is designed to help employees deal with the stresses associated with relocation. One (personal day off with pay) makes it easier for employees to deal with unexpected personal issues without fear of financial repercussions. This last benefit, in particular, is important in that it implicitly gives employees permission to miss work when a crisis occurs and communicates to employees that the employer cares. It is unfortunate that only half as many employees can take a paid day off to deal with an emergency as perceive that they can take unpaid LOA.

Very few Canadian employees have access to formal tele-work programs

Only one in five (21%) employees in this study indicated that tele-work arrangements were available in their organization. The lack of formal tele-work programs is unfortunate given the high number of employees who perform either guerrilla tele-work (16% of the sample) or unpaid overtime at home outside of regular hours (50%). It would appear that employers accept (if not expect) that their employees will have to take work home to complete in the evening or on weekends, but are not willing to let them officially work at home on "their time."

Very few of Canada's larger employers help employees deal with dependent care obligations

Even more troublesome is the fact that less than 10% of the respondents indicated that their employer offered on-site day care (8%), child care (7%) or elder care (6%) referral services. The fact that the majority of the 100 organizations in our sample do not help their employees deal with dependent care obligations attests to the fact that many employers are managing according to the "myth of separate worlds." While such separation was possible pre-1970 when many Canadian families had a gendered division of labour (i.e. men worked for pay outside the home, women worked without pay inside the home), it is not realistic today when most men and women in work outside the home for pay.

³⁵ Child care and elder care referral services include such things as information and referral services for child care, sick child care, elder care, respite care, on-site parenting seminars, printed material about parenting, caring for elderly dependents, financial planning, and special care services for elderly or disabled dependents.

Use of benefits reflects availability

What benefits do Canadian employees actually use? Not surprisingly, they use what is available (see Table 11). The corollary of this finding is that if employers provided more progressive benefits, then employees would likely use them. The question then becomes, which of these policies help employees cope with work–life conflict. To answer that question, we looked at the relationship between benefit use and each of the four forms of work–life conflict included in this study. To determine which group benefited from what policy we did the analysis twice. Analysis one looked at the impact of gender and job type on the relationship between benefit use and conflict while analysis two focused on gender and dependent care status. The findings are provided in Appendix E. Key findings (R^2 of .04 or higher; α < than .01; Δ = in work–life conflict of 0.3 or greater) are presented in the section below.

Benefits have little impact on work-life conflict

Surprisingly, many of the benefits provided to Canadian employees have little impact on their levels of work-life conflict. This conclusion is supported by a number of findings. First, four of the benefits examined in this analysis, unpaid LOA, time off work in lieu of overtime pay, flexible work arrangements and tele-work, are not associated at all with work-life conflict. This is unfortunate as two of these benefits (LOA and time off in lieu) are commonly available and frequently used. Second, only one quarter of all possible use of benefits by work-life combinations were statistically significant as well as substantive. Finally, the fact that two thirds of the notable findings were observed in the gender by dependent care analysis indicate that job type has little effect on whether or not a particular benefit will help employees cope with work-life conflict. Rather, it is the employee's situation outside of work that influences the effectiveness of the different policies at helping employees cope with work-life conflict. While not surprising, this finding stresses the importance of using demographic information when developing and implementing family-friendly policies.

Employees with high levels of work-life conflict are more likely to use Employee Assistance Programs

The majority of Canadians have access to employee assistance. Almost two thirds (65%) who responded to our survey used EAP services. The data indicate that employees with higher levels of work–life conflict are more likely to use EAP than their counterparts with greater balance. The following picture of who is more likely to seek counselling from EAP emerges from the data:

- those in other positions within the organization with high levels of role overload ($\Delta = +.3$)
- men and women with dependent care responsibilities with higher levels of role overload ($\Delta = +.3$)
- men and women with higher levels of family-to-work interference ($\Delta = +.3$)
- men and women with higher levels of caregiver strain ($\Delta = +.4$)

These findings suggest two things. First, employees with dependent care responsibilities value this benefit. Second, organizations that wish to reduce the costs associated with EAP need to identify other mechanisms to help employees balance work and family.

Employees who use part-time work arrangements are more able to cope with work-family conflict

Fewer than half the employees indicated that part-time work arrangements with pro-rated benefits were available in their organization. This is unfortunate as this work arrangement is very effective at alleviating role overload and role interference. Specifically, part-time work/reduced hours/job sharing with benefits were associated with:

- reduced levels of role overload (-.3 for men in other positions/men with dependent care and -.4 for women in other positions/women with dependent care)
- decreased family-to-work interference for men and women with dependent care (-.3)
- higher levels of family-to-work interference for men and women without dependent care (+.3)
- lower work-to-family interference for men and women when job type is taken into account (-.5)

These findings indicate that part-time work is particularly beneficial for women and employees with dependent care responsibilities. These findings are consistent with those noted earlier in the chapter.

Emergency days off are a lifeline for men and women with dependent care

Canadian employees with child and/or elder care use emergency days off work to try to cope with high levels of family-to-work interference ($\Delta = +.2$ for men and $\Delta = +.3$ for women) and caregiver strain ($\Delta = +.4$). In other words, this benefit is used by employees with dependent care to cope with unexpected problems at home.

Other interesting observations can be made with respect to the use of emergency days off work for family or personal problems. First, women are more likely than men to use this benefit to cope with high levels of role overload (Δ = +.2 for females in managerial and professional positions and +.4 for women in other positions). Role overload is not associated with the use of this benefit for men when job type is taken into account. Second, men and women without dependent care responsibilities are more likely than their counterparts with dependent care to use this benefit when they are overloaded (Δ = +.2 for men and Δ = +.4 for women). Role overload is not associated with the use of this benefit for men and women with dependent care. Third, the use of this benefit is associated with lower levels of work-to-family interference (Δ = -.2) for men and women in managerial and professional positions. Unfortunately, it does not appear to help employees in other positions cope with work-to-family interference.

Several benefits help employees cope with one dimension of work-life conflict

Some benefits help employees cope with one dimension of work-life conflict, such as noted below:

- Short-term personal/family leave appears to help employees with dependent care cope with high caregiver strain (Δ = -.3).
- Supportive relocation policies appear to help employees, regardless of job type, cope with work-to-family interference (Δ = -.3).

• Child care referral helps men (Δ = -.3) and women (Δ = -.5) with dependent care cope with family-to-work interference. Women in other positions in particular seem to profit from this benefit (Δ = -.7).

Similarly, we can see that Canadians are selective in terms of the benefits they use to cope with the different forms of work–life conflict:

- Paid personal days off work are used by men and women without dependent care responsibilities to cope with higher levels of family-to-work interference ($\Delta = +.4$).
- Elder care referral services are used by men ($\Delta = +.3$) and women with high caregiver strain ($\Delta = +.7$) and high work-to-family interference ($\Delta = +.7$).
- Child care referral is used by men and women with high levels of role overload ($\Delta = +.3$).
- On-site day care is used by men and women with high family-to-work interference ($\Delta = +.3$).

These data support our contention that there is no one-size-fits-all approach to work—life conflict. It appears that employers need to offer a wide variety of family-friendly benefits to employees if they want to help them cope with the different manifestations of work—life conflict. So the question then becomes, which benefits are used in conjunction with each of the four forms of work—life conflict considered in this study. The answer to this question can be found below.

Men and women who work part time report lower levels of role overload

Part-time work helps men and women cope with role overload (i.e. part-time employees report lower overload than those working full time). While this finding is not surprising (employees who work part time, by definition, spend fewer hours in work per week), what is interesting is the data show that this relationship depends on both dependent care status and job type. Employees with dependent care responsibilities and those in other positions within the organization who work part time report lower levels of role overload. This work arrangement has no impact on role overload for those without dependent care or those who work in managerial and professional positions. This suggests that these employees are either not reducing their work hours by a significant extent, or that they are devoting the time that they are not spending at work to other activities.

Employees with higher role overload are more likely to use EAP and child care referral

Men and women with high levels of role overload (especially those working in other positions) are more likely to use EAP services and child care referral services (when these are available). Since both of these services are in place to help employees in need, this relationship is not surprising. It does, however, reinforce the relationship between role overload and employee stress. It also suggests that employers that wish to reduce the amount they spend on EAP services need to address the issue of workloads.

Employees with higher role overload are more likely to take emergency/family leave

Men and women in other positions with high role overload are more likely to take emergency days off work. For those in management and professional positions, on the other hand, role overload is not associated with the tendency to take an emergency day off work. It is also interesting to note that men and women without dependent care who are experiencing high levels of role overload are more likely to take emergency days off work. For those with dependent care, on the other hand, role overload is not associated with the tendency to take an emergency day off work. Taken together, it appears that these employees are overloaded because of circumstances at work. Identification and reduction of the sources of this role overload should reduce this form of absenteeism (what we referred to as a mental health day in our 2003 Duxbury and Higgins report).

Employees with high work-to-family interference are more likely to use elder care referral and EAP

The findings with respect to work-to-family interference are very similar to those noted for role overload, in that men and women with high levels of work-to-family interference are more likely to use elder care referral and EAP services. Also similar is the fact that employees can reduce work-to-family interference by reducing their work status to part time.

There were, however, several interesting relationships between benefit use and work-to-family interference that are unique to this form of work-life conflict. These include the fact that men and women who make use of supportive relocation policies report lower levels of work-to-family interference (-.3), and the data show that taking an emergency day off work helps men $(\Delta = -.2)$ and women $(\Delta = -.3)$ in managerial and professional positions cope with this form of interference. It has no such salutatory effect on those in other positions within the organization.

Employees try to cope with family-to-work interference by taking time off work

Men and women with higher family-to-work interference are more likely to take time off work to try to cope with this form of interference. They are more likely to take personal paid days off work ($\Delta=+0.3$) and emergency days off work ($\Delta=+.4$). Employees without dependent care responsibilities but high family-to-work interference, in particular, are likely to try to cope with family-to-work interference by taking short-term personal leave ($\Delta=+.4$). These findings provide a strong impetus for employers to deal with this form of work-life conflict.

The findings suggest several things that organizations can do to help employees with dependent care responsibilities cope with family-to-work interference, including providing child care referral and pro-rated benefits for part-time work. While child care referral reduces family-to-work interference for those with dependent care responsibilities, the impact is most significant for women in other positions within the organization ($\Delta = -.5$).

It should also be noted that, similar to what was observed for short-term personal leave, employees without dependent care responsibilities who work part time report higher family-to-work interference than their counterparts who do not work part time. This reinforces our contention that employees in this group reduce their work time to part-time status (or take short-term personal leave) when their family-to-work interference is too high.

Finally, it is interesting to note that men and women who use on-site day care report higher family-to-work interference ($\Delta = +.3$). It appears that it is more difficult to separate family from work when the child is near by.

3.6 How Can Employers Help Employees Balance Work and Family?

Short-term personal leave helps employees cope with caregiver strain

Men and women with higher levels of caregiver strain are more likely to use elder care referral services and family leave days, regardless of job type or dependent care status. The data also show that the ability to take short-term personal/family leave from work helps employees cope with caregiver strain. This finding offers sound advice to employers seeking ways to support those employees needing to deal with aging parents.

The use of benefits by men and women without dependent care

The data reveal a very unique but consistent picture of benefit use by male and female employees without dependent care. They are more likely to take an emergency day off work when their levels of overload are high, and work part time and take short-term personal level as a response to high levels of family-to-work interference.

These data suggest that this group of employees try to deal with work–life conflict by using strategies that allow them to "escape from work."

3.6 How Can Employers Help Employees Balance Work and Family?

The results from this analysis are unequivocal—family-friendly policies/benefits and flexible work arrangements, on their own, have little impact on an employee's ability to balance work and life. The results also clearly indicate that employers that wish to tackle the issue of work—life conflict in their workforce (especially high levels of role overload) need to focus on the culture of the organization (especially as it pertains to work—time and work—location flexibility) and the behaviour of their managers. Finally, the data support the idea that there is no one-size-fits-all solution to the issue of work—life conflict. Employees need to consider the type of work—life conflict when developing their policies and practices.

Dealing with role overload

Above all else, employers wishing to help employees cope with role overload need to increase the amount of flexibility employees feel they have over when and where they work. In particular, they need to give employees more ability to arrange their work schedule to take family concerns into account, and make it possible for employees to interrupt their work day to deal with personal or family matters and then return to work when the issue has been addressed. Other forms of flexibility also associated with an increased ability to cope with role overload include the ability to take one's holidays when one wants, take a paid day off work to care for an elderly dependent, take a paid day off to care for a sick child, be home in time to have meals with the family, and vary one's work hours.

Employees wishing to deal with the issue of role overload within their workforce also need to focus on the behaviour of their managers. Employees who report to a non-supportive manager who has unreasonable expectations with respect to the work to be done, puts in long hours and expects their employees to do the same, makes employees feel guilty about personal time

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off work, and focuses on hours at work, not output, are substantially more likely to report high levels of role overload than employees who have managers who do not engage in such behaviours. Employees who report to a supportive manager, on the other hand, are less likely to experience high levels of overload, even though hours at work are not related to management support. In particular, employees who have a manager who makes expectations clear, listens to their employees' concerns, are available to answer questions, are effective at planning the work to be done, and who give employees recognition for a job well done are substantially more able to cope with role overload.

What does not work? Offering employees the ability to use alternative work arrangements (role overload was not associated with the use of shift work, flextime, CWW, regular 9-to-5 work day) or implementing a number of benefits that are perceived to be "family friendly." The following benefits, in particular, had no association with role overload: on-site day care, use of elder care referral services, use of flexible work arrangements, tele-work, supportive relocation policies, emergency days off, unpaid LOA, use of paid personal days off work, use of time off in lieu of overtime, and use of short-term personal leave. In addition to the above, child care referral was not substantively linked to role overload when job type was taken into account, and EAP and part-time/reduced work week were not substantively linked to role overload when dependent care status was taken into account.

Dealing with work-to-family interference

How can employers help employees cope with work-to-family interference? Clearly, they need to increase perceived flexibility and the number of supportive managers within their organization. In terms of perceived flexibility, they need to give employees more ability to arrange their work schedule to take personal/family commitments into account, to be home to have meals with their family, to interrupt their work day to deal with personal matters and then return to work, to take time off to attend a course or conference, to be home when their children get home from school, and to take holidays when they want. They also need to introduce paid time off to care for a sick child and/or an elderly dependent.

There is also a strong association between the behaviour of the employee's immediate manager and work-to-family interference. Employees who have a non-supportive manager who has unrealistic expectations with respect to the work to be done, puts in long hours and expects them to do the same, makes them feel guilty for time off for personal/family reasons, focuses on hours of work, not output, only talks to them when they make a mistake, and who puts them down in front of others report substantially higher levels of interference than their counterparts who report to a manager who engages in such behaviours infrequently. Employees who report to a supportive manager, on the other hand, who makes expectations clear, listens to their employees' concerns, are available to answer questions, are effective at planning the work to be done, who ask for input before making decisions that affect the employees' work, and who give employees recognition for a job well done are more able to cope with work-to-family interference than peers who have managers who do not display these behaviours. The fact that hours at work is not associated with management support/non-support indicates that these benefits do not accrue simply because employees with supportive managers work less.

It is interesting to note the association between several of the work arrangements examined in this analysis and work-to-family interference. The data indicate that employers concerned with work-to-family interference will realize few gains by implementing the following work arrangements: flextime, compressed work week, a regular 9-to-5 work day and tele-work. Those employers with

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a high reliance on shift work can expect to experience more problems with respect to work-to-family interference. Employers that provide the opportunity for employees to work a part-time/reduced work week/job share schedule with pro-rated benefits, on the other hand, will realize a reduction in this form of conflict.

Again, the data indicate that implementation of a number of family-friendly benefits does not help employees cope with work-to-family interference. Specifically, the use of the following benefits were not associated with this form of interference for any of the employees considered in this analysis: on-site day care, child care referral, elder care referral services, flexible work arrangements, EAP, emergency days off, unpaid LOA, paid personal days off work, time off in lieu of overtime, and short-term personal leave.

The suggestions on how employers can help employees cope with work-to-family interference are virtually identical to those provided for role overload. As noted earlier, these two forms of work-life conflict are the most common in Canada at this time and have the largest negative impact on the organization's bottom line. This means that employers can realize very significant gains by focusing their attention on increasing perceptions of flexibility and the behaviour of the managers in the organization.

Dealing with family-to-work interference

There are very few things that the employer can do to help employees cope with family-to-work interference. That being said, we can give some advice to employers concerned with this form of work-life conflict. Specifically, the data suggest that the following strategies may provide employees some increased ability to cope: increase flexibility with respect to work hours and work location (the ability to arrange one's work schedule and to vary one's hours appears to be particularly effective) and the provision of a number of family-friendly benefits, including on-site day care, child care referral, elder care referral, emergency or family days off work, personal days off with pay, short-term personal leave, part-time work with pro-rated benefits and EAP services. In other words, family-friendly benefits that help employees deal with crisis on the home front (e.g. sick child, sick dependent) do provide employees with an increased ability to cope with family-to-work interference. The lack of overlap between things that employers can do to help employees with this form of work-life conflict as opposed to those that are linked to reductions in role overload and work-to-family interference is worthy of note and consistent with our belief that the aetiology of this form of work-life conflict is very different.

Dealing with caregiver strain

There appears to be only one real strategy for employers that wish to help employees cope with the strains associated with the care of an elderly dependent: the implementation of elder care referral benefit packages. While perceived flexibility and management behaviour also have a role to play here, the impact of these factors is not as strong as observed for role overload and work-to-family interference.

Chapter Four Reducing Work–Life Conflict: What Can Employees Do?

Chapter Four Reducing Work–Life Conflict: What Can Employees Do?

The vast majority of the research on how individuals cope with stressful events or circumstances has been done by psychologists who have devoted a great deal of effort to understanding this issue. The size of the extant body of research in this area makes a complete review of the topic outside the scope of this report. Instead, this chapter will provide an overview of key research findings and frameworks relevant to this research initiative.

In their seminal article on coping, Pearlin and Schooler (1978) outlined three broad coping responses, which have served as the basis for much of the subsequent theory and research on individual coping. The most direct method of dealing with stress is to identify the source of the stress and to take action to eliminate or mitigate its effects. However, it is often difficult to identify the precise source of stress and/or the actions that can be taken to deal with it. Furthermore, some stressors are beyond the individual's control and are therefore impervious to coping interventions. A second means of dealing with stress is to alter one's perceptions of the stressor so as to paint it in a more positive light or minimize its impacts by focusing on the positive aspects of the situation. A final type of coping involves efforts to deal with stress once it occurs rather than altering its preconditions or one's perceptions. In other words, this type of reactive coping functions to help the individual manage stress, rather than to avoid or mitigate it. Such behaviours include denial, avoidance, blind faith, and harmful activities such as alcohol and drug use.

Subsequent theory and research has refined Pearlin and Schooler's typology. Specifically, researchers have attempted to elucidate the various dimensions of the coping responses available to individuals. Folkman and Lazarus (1980) provided what is arguably the most widely accepted typology of coping strategies. They considered the various functions that coping behaviour might serve and defined two functionally based forms of coping. Problem based coping is proactive and involves an attempt by the individual to influence the stressors in the external environment as a means of obviating and/or mitigating stress. Emotion focused coping, on the other hand, is a reactive form of coping that involves the regulation of stressful emotions once they have occurred. This typology of coping behaviours has been adopted by a number of subsequent researchers (e.g. Daniels & Harris, 2005; Havlovic & Keenan, 1995; Latack & Havlovic, 1992; Rotondo, Carlson & Kincaid, 2003). Other researchers have suggested a third type of coping, appraisal focused coping, which involves an attempt to change one's perceptions of a stressful situation to paint them in a more positive light (Daniels & Harris, 2005; Latack & Havlovic, 1992).

Latack and Havlovic (1992) argued that coping could be further categorized on the basis of the method of coping employed to deal with stressors and feelings of stress. They suggested two methods of coping that could be used to manage both stressors (i.e. problem focused coping) and stressful emotions (i.e. emotion focused coping). The first method of coping, cognitive coping, involves the use of mental strategies to reframe the situation in a more favourable light. For instance, an attempt to convince oneself that one's situation is "is not that bad" or that "everybody faces difficulties at some time" might be viewed as cognitive coping. Behavioural coping, on the other hand, involves direct action to address a stressor or stressful emotion. Examples of behavioural coping might include negotiating a new work schedule to accommodate work and family demands or participating in an exercise class in order to relieve stress.

Chapter Four Reducing Work–Life Conflict: What Can Employees Do?

In recent years, a large number of researchers have attempted to identify the range of coping strategies available to individuals and the circumstances in which they work best. Skinner and colleagues (2003) reviewed approximately 100 measures of coping, selected broadly from literature concerning general and domain specific (e.g. coping with rape, cancer, depression) coping strategies for children, adolescents and adults. Their review identified over 400 ways of coping, which they categorized into 100 groups of similarly worded items. They found items related to five ways of coping appeared on 20 or more of the 100 scales. These five were problem solving; support seeking; avoidance; direct action; and distraction. They found the following 13 items to be present in 10 to 19 of the 100 scales: aggression; self blame; escape; social withdrawal; religion; positive cognitive restructuring; emotional expression; information seeking; acceptance; wishful thinking; emotional social support; worry. Their review also identified 13 higher order categories or "families" of coping strategies:

- 1. Problem solving (instrumental action, direct action, decision making, planning)
- 2. Support seeking (comfort seeking, help seeking, spiritual support)
- 3. Escape (avoidance, disengagement, denial)
- 4. Distraction (acceptance)
- 5. Cognitive restructuring (positive thinking, self encouragement)
- 6. Rumination (intrusive thoughts, negative thinking, self blame, worry)
- 7. Helplessness (inaction, passivity, giving up)
- 8. Social withdrawal (self isolation)
- 9. Emotional regulation (emotional expression, self calming)
- 10. Information seeking (observation, monitoring)
- 11. Negotiation (offer exchange, compromise, prioritizing)
- 12. Opposition (aggression, blame others)
- 13. Delegation (maladaptive help seeking, self pity)

While this literature provides a useful overview of the behavioural and cognitive strategies people use to cope with stressful situations, it is very broad and applies generally to a wide range of stressors, such as chronic illness, separation of family members and crime victimization. Relatively few authors have specifically examined the coping strategies that individuals employ in dealing with ongoing stressors, such as work–family conflict. Hall (1972) specifically examined the ways in which individuals cope with role conflict in their lives. His research suggested three broad types of coping with role conflict: (1) structural role redefinition, which entails a deliberate action on the individual's part to restructure his or her role set by communicating with others (e.g. spouse, employer, children) regarding their expectations and demands; (2) personal role redefinition, which involves changing one's personal perceptions of role demands rather than attempting to change the demands of others; and (3) reactive role behaviour, which involves an acceptance of the role conflict as unchangeable and an attempt to alleviate conflict by working harder or being more organized.

Chapter Four Reducing Work–Life Conflict: What Can Employees Do?

Hall (1972) identified 16 specific coping behaviours falling into these three types of coping strategies:

Type I Coping: structural role redefinition

- Eliminating or adding role activities, but not entire roles negotiating fewer role activities with role senders.
- Role support from outside the role set formal agreement with a non-role sender to help the person meet role expectations (usually within the work role).
- Role support from inside the role set formal agreement with a member of the person's role set (usually within the family) to help the person meet role expectations.
- Problem solving with role senders assistance of role senders in deciding how to redefine one's roles. Includes collaborative redefinition of roles or moral support from role sender(s).
- Role integration redesigning roles so that they can be overlapped and performed simultaneously in a mutually reinforcing manner.
- Changing the societal definition of one's roles role definition at the level of societal expectations.

Type II Coping: cognitive/personal role redefinition

- Establishing priorities involves the rank ordering of role activities to focus on the most important ones, without eliminating any roles or role activities.
- Partitioning and separating roles mental compartmentalization of roles so that only one is performed at a time without making formal role restructuring arrangements (i.e. minimizing role overlap).
- Overlooking role demands mental process of ignoring or avoiding certain role activities, without formally restructuring the role with role senders.
- Changing attitudes toward roles changing one's outlook toward the role in order to rationalize and reduce dissonance.
- Elimination of roles the sacrifice of personal interests in order to meet the expectations of role senders.³⁶
- Rotating attention among roles selective attention and inattention to roles without a formal redefinition (i.e. handling each role as it comes up).
- Developing self and own interests mentally attaching greater weight to one's own self sent expectations rather than those of role senders.

Type III Coping: reactive role behaviour

- Planning, scheduling and organizing better attempt to juggle demands more efficiently rather than changing formal or mental role structures.
- No conscious strategy (i.e. passive orientation) assume that time will take care of things.
- Working harder increasing time and energy output to meet all role expectations.

³⁶ Hall (1972) specified that while this might look like a Type I (role redefinition) behaviour, the fact that it normally involves eliminating roles that one would like to take on, but cannot manage (e.g. volunteering, hobbies), justifies including it within the Type II (cognitive role redefinition) group.

Research on the effects of individual coping strategies on perceptions of work–family conflict is relatively scarce (Rotondo et al., 2003). They hypothesized that direct action, help seeking and positive thinking coping styles would be associated with both lower perceived work interference with family (what the authors referred to as WIF) conflict (when applied to work stressors) and family interference with work (what the authors labeled FIW) conflict (when applied to family stressors). They hypothesized that avoidance coping would not be an effective means of coping with time demands and may lead the individual to perceive greater levels of conflict because he or she may feel that nothing ever seems to change. They, therefore, hypothesized that avoidance coping would lead to higher levels of perceived WIF conflict when used with work stressors and higher levels of FIW when applied to family stressors. They found that avoidance coping was positively associated with WIF, but no other form of coping was associated with this type of conflict. They also found that avoidance coping was positively associated with FIW, and direct action and help seeking were both negatively associated with FIW. The authors concluded that avoidance as a coping technique leads to greater conflict and that problem focused coping (i.e. direct action and help seeking) is effective in coping only with family-towork interference. This suggests that if there are effective means of coping with the interference of work into one's family life, they are beyond the realm of individual coping strategies that are typically studied. It is therefore important to consider the broader set of coping responses that are evident within the family unit as a whole. Such a discussion can be found in Chapter Five.

This chapter is divided into five broad sections. Data on how individual employees cope with the stresses associated with work-life conflict are presented first. This is followed in section 2 by a discussion of how effective each of these coping techniques is at alleviating work-life conflict. The third section focuses on the link between work-life conflict and the decision to have children. Data on the use of this form of coping is presented first, followed by an examination of its effectiveness at reducing the various forms of work-life conflict. Section 4 explores the extent to which off-shifting child care demands and responsibilities with a partner helps employees balance work and family. Again, data on the use of this strategy are given first, followed by an evaluation of how effective this strategy is at reducing work-life conflict. The chapter concludes with a brief summary of the key things employees can do to cope with work-life conflict.

4.1 How Do Canadian Employees Cope with Stress?³⁷

To make it easier for the reader to follow the discussion, we categorized the individual coping techniques using principal components analysis. This categorization (Table 12) indicates that Canadian employees use four types of personal strategies to cope with work–life conflict: (1) social support, (2) active coping techniques aimed at the reduction or elimination of the sources of conflict, (3) avoidance and (4) reactive coping techniques, which focus on alleviating the symptoms of stress rather than the source of stress itself.

Data on the availability and use of the different individual coping strategies considered in this research are summarized in Tables 13 (Total Sample) and 14 (Gender by Dependent Care and Gender by Job Type) analyses. These data indicate that Canadians use a myriad of strategies to cope with stress.

³⁷The question asked respondents how often they used a number of different coping strategies to cope with stress, anxiety and depression.

Table 12: Factor Analysis of Individual Coping Strategies

	Social Support	Active Coping	Avoidance	Reactive Coping	% Use Daily
Sought help from colleagues at work	.80				16
Talked with colleagues at work	.79				32
Sought help from family or friends	.74				23
Talked with family or friends	.73				45
Prioritize		.82			69
Schedule, organize, plan time		.89			49
more carefully					
Delegate work to others		.75			27
Just try and forget about it			.76		19
Find other activity to take my mind off it			.63		32
Use drugs (i.e. prescription, other)				.72	11
Just work harder (I try to do it all)				.61	43
Reduce the quality of the things I do				.55	10
Have an alcoholic drink				.53	12

Table 13: Use of Individual Coping Strategies (Total Sample)

Coping Strategies	% of Sample Who Use		
	Rarely	Weekly	Daily
Prioritize	9%	21%	69%
Schedule, organize and plan my time more carefully	22%	32%	47%
Talked with family or friends	26%	29%	45%
Just work harder (I try to do it all)	31%	26%	43%
Find some other activity to take my mind off it	36%	32%	32%
Talked with colleagues at work	40%	27%	32%
Delegate work to others	49%	24%	27%
Sought help from family or friends	51%	25%	23%
Just try and forget about it	60%	20%	19%
Sought help from colleagues at work	65%	19%	16%
Have an alcoholic drink	65%	23%	12%
Use prescription, over-the-counter or other drugs	86%	4%	11%
Reduce the quality of the things I do	72%	18%	10%

Rarely is a combination of never and monthly
Daily is a combination of several times per week and daily

Table 14: Use of Individual Coping Strategies

a. Gender by Dependent Care

Coping Strategies	% Who Use Frequently			
	Ma	ales	Females	
	No D	D	No D	D
Talked with family or friends	37	37	52	49
Talked with colleagues at work	28	26	36	36
Sought help from family or friends	13	11	20	29
Sought help from colleagues at work	19	19	20	21
Just work harder (I try to do it all)	36	37	45	55
Prioritize	64	66	72	72
Delegate work to others	29	36	22	26
Just try to forget about it	18	18	20	20
Find some other activity to take my mind off it	38	37	35	25
Reduce the quality of the things I do	9	10	9	12
Schedule, organize, plan my time more carefully	45	44	49	49
Have an alcoholic drink	15	17	7	7
Use prescription, over-the-counter or other drugs	8	8	13	13

No D = No dependent care

D = Dependent care

Table 14: Use of Individual Coping Strategies

b. Gender by Job Type

Coping Strategies	% Who Use Frequently			
	Males		Fem	ales
	Mgr/Prof	Other	Mgr/Prof	Other
Talked with family or friends	39	35	55	47
Talked with colleagues at work	28	25	38	35
Sought help from family or friends	20	18	28	25
Sought help from colleagues at work	12	22	24	18
Just work harder (I try to do it all)	38	36	48	48
Prioritize	74	58	75	69
Delegate work to others	45	24	32	17
Just try to forget about it	17	20	18	21
Find some other activity to take my mind off it	35	32	33	29
Reduce the quality of the things I do	10	9	11	9
Schedule, organize, plan my time more carefully	49	38	53	46
Have an alcoholic drink	19	15	9	8
Use prescription, over-the-counter or other drugs	8	9	11	15

The majority of Canadians try to cope by prioritizing

Almost 70% of the 31,571 working Canadians who completed our survey attempt to cope with stress by prioritizing their commitments. In other words, the first line of defence against the stresses associated with balancing work and life commitments is to use a cognitive approach to the situation (what Hall refers to as personal role redefinition), which involves the rank ordering of their different role activities to focus on the most important ones, without eliminating any roles or role activities. Unfortunately, the data (Duxbury & Higgins, 2003) indicate that most Canadians cope by giving a higher priority to work than to family—a strategy that is not sustainable in the long term.

Men and women in managerial and professional positions are most likely to use this coping strategy while men in other positions are least likely to use it.

Many Canadians attempt to cope by scheduling, organizing, planning and trying to do it all

Approximately half of the respondents to this survey attempt to cope with stress by scheduling, organizing and planning their time more carefully (47%), talking with family and friends (45%), and just trying to do it all/working harder (43%). It should be noted that all of these strategies are reactive in nature and involve dealing with the stressor once it has occurred, rather than the elimination of the stressful situation. Women are more likely than men to cope by talking to family members and just working harder. Managers and professionals are more likely to cope by scheduling, planning and organizing.

One in three employees copes by finding other things to focus on and seeking support at work

Two other strategies, find some other activity to take my mind of the stressor (escapism) and talk to colleagues at work (social support), are used by 32% of the respondents. A similar proportion of the sample indicated that they used such strategies weekly and rarely. Women were more likely to cope by talking to colleagues at work. Men, on the other hand, were more likely to cope by engaging in other activities such as sports.

Half the sample indicate that they rarely delegate work to others or seek help from family or friends

Research has shown that people who either use active problem-based coping strategies such as delegating the work to others and/or who have family and friends who they can rely on to provide support are more able to cope with stress. Unfortunately, these strategies are not widely used. Only 27% of the sample (albeit 45% of the male managers and professionals) indicated that they delegate work to others on a daily basis as way to cope with stress. Half the sample, on the other hand, indicated that they rarely delegated work to others as a way of coping (perhaps because they had no one to delegate to in the time-crunched Canadian workplace). Similarly, just over half of the respondents (51%) said that they never coped with stress by seeking help from family and friends (perhaps because all their friends and family are in the same situation they are).

On a positive note, 60% of respondents do not use one of the key emotion-focused avoidance strategies included in this study—just try to forget about it. Such a strategy is typically less effective as the source of the stress normally remains unchanged and hence problematic. More worrisome is the fact that one in five uses this strategy daily.

Few Canadians cope with stress by seeking help from colleagues at work

Two thirds of the sample indicated that they rarely turned to colleagues at work for help as a way to cope with stress, anxiety and depression. While 32% of the sample said that they talked to colleagues at work as a way to alleviate their stress, only 16% asked colleagues to help them. This is unfortunate as many Canadian employees find the same types of things (i.e. heavy workloads, non-supportive managers, non-supportive work cultures) stressful. It is also unfortunate as this limits the sharing of effective coping strategies between employees. Again, we can only surmise why such sharing does not exist. These findings may reflect the fact that people are just too busy at work to talk to colleagues and ask for help. Second, the "macho" culture within many Canadian organizations, which rewards long hours and saying yes to more work, may mean that employees do not ask for help because they fear that it will affect their image and their chance for advancement.

A substantive number of Canadian employees cope by using alcohol or drugs

Twelve percent of respondents cope with stress by using alcohol. One in four respondents has a drink on a weekly basis as a way to cope with stress, anxiety and depression. Similarly, 11% use prescription, over-the-counter or illegal drugs as a way to cope with stress while 4% more use this coping mechanism weekly. These strategies are both reactive ways of dealing with emotional responses to stress, which are problematic on both social (linked to greater physical illness and costs to the health care system as well as family dysfunction) and economic (related to reduced productivity and increased absenteeism) fronts. It is interesting to note that while both men and women cope by using avoidance, men are more likely to cope by having a drink while women are more likely to cope by using medication or taking drugs.

Canadians do not cope by reducing the quality of the things they do

Only one in ten of the respondents copes by frequently reducing the quality of the things they do. Another one in five uses this strategy approximately weekly. The majority (72%) use this strategy rarely, if at all. This is unfortunate as this form of cognitive reappraisal has the potential to reduce stress and anxiety caused by high workloads and competing priorities.

Women more likely than men to cope by seeking social support

The data indicate that how an employee chooses to cope with stress, anxiety and depression depends very much on the gender of the worker. Women, regardless of job type or dependent care status, were more likely than men to use the following coping strategies:

- seek social support (i.e. talk with family and friends and talk with colleagues at work)
- seek help from family or friends
- work harder
- use prescription, over-the-counter or illegal drugs

Three other interesting differences with respect to these strategies can be observed if one looks more closely at the data. First, it is important to note that females with dependent care responsibilities are significantly more likely than female counterparts without dependent care to cope by seeking help from family or friends and working harder. No such difference was observed for the men in the sample. Second, the gender difference in the use of prescription medicine as a means of coping with stress can be largely explained by the fact that women in other positions in the organization are more likely than any other group to use this coping strategy (15% of the women in this group use prescription drugs on a daily basis as a way of coping with stress).

Men more likely than women to cope by delegating work to others and having a drink

Men were more likely than women to use the following coping strategies:

- delegate work to others
- have an alcoholic drink

Again, a better understanding can be obtained by looking at the within gender differences. This analysis indicated that males with dependent care responsibilities (36%) and men in management positions (45%) are significantly more likely than counterparts without dependent care/in other types of jobs to cope by delegating the work to others. One in five men in managerial and professional positions and 15% of men in other jobs use alcohol to cope with stress. This is approximately double the number of women who use this strategy.

Managers and professionals cope by planning, delegating and being organized

When gender is taken into consideration, the managers and professionals in the sample were more likely than those in other jobs to:

- delegate work to others
- schedule, organize and plan their time

It is likely that employees in this group use these strategies because they can (i.e. more likely to be in positions of authority within the organization) and because they have learned these skills at work and are transferring them to other domains.

Tendency to seek help, try to forget and reduce quality are not associated with demographic status

Finally, the use of three of the strategies examined in this analysis was not associated with gender, job type or dependent care status: seek help from colleagues at work, just try to forget about it, and reduce the quality of things done. In all three cases very few employees use these strategies.

Individual coping techniques are not associated with dependent care status

The use of the various coping strategies considered in this study was not associated with dependent care status. Those with child and/or elder care responsibilities were not more or less likely to seek help from others, rely on their families and friends, reduce the quality of their work, have a drink or take drugs. Nor were they more or less likely to prioritize, schedule and plan, or just work harder. These findings are interesting as they do not support either the positive or negative preconceptions many people hold of working parents or caregivers.

4.2 Coping with Work–Life Conflict: What Should Employees Do?

As noted above, Canadian employees use a number of strategies to cope with the different forms of work-life conflict. Which ones are effective at helping employees cope with work-life conflict and which are not? This question drives the analysis undertaken below. To answer this question, we looked at the relationship between each of the 13 individual coping strategies and the four

forms of work–life conflict included in this study. To determine if different strategies are effective for different groups, the analysis was done twice. Analysis one looked at the impact of gender and job type on the relationship between coping and work–life conflict while analysis two focused on gender and dependent care status. The complete set of findings is provided in Appendix F. Key findings (R^2 of .04 or higher, α < than .01, Δ in work–life conflict of 0.3 or greater³⁸) are summarized in Tables 15 and 16 and discussed in the section below. Information on how to read Tables 15 and 16 is given in Box Nine.

Box Nine Key to Reading Tables Summarizing Coping Data (15, 16, 18, 19, 21, 23)

These tables summarize key findings with respect to the association between the use of the different coping strategies and work–life conflict. They tell the interested reader which coping strategies:

- explain a substantive proportion of the variation in work-life conflict (i.e. an R² of 0.04 or more).
- are significantly associated with work–life conflict. Two types of statistical significance (defined as p < .01) associations were examined in this analysis. First, we looked to see if the coping strategy interaction term (i.e. use of strategy by gender/job type or use of strategy by gender/dependent care) was significant. If it was and the relationship was substantive, statistics are given in the "interaction" table. When the interaction term was not significant we looked to see if the coping strategy main effect was significantly associated with work life conflict. If it was and the relationship was substantive, the data are shown in the "main effects" table. In those cases where neither the interaction term nor the main effect was statistically significant only, the R² data are shown.
- make a substantive difference in the level of work–life conflict experienced by employees. In this case, substantive difference is denoted as Δ which is calculated as the mean difference in the level of work–life conflict experienced by a respondent who uses the coping strategy very infrequently (less than once a month) and a respondent who uses the strategy frequently (i.e. several times a week or daily). Substantive difference is operationally defined as those strategies that have a $\Delta \ge 0.3$. Finally, it should be noted that Δ is only shown when the interaction terms is not significant and the relationship is linear. The relationship between those coping strategies whose relationship with work–life conflict depends on either gender/dependent care status and/or gender/job type (i.e. with significant interaction terms) is shown in the figures that accompany this discussion.

The following key can be used to interpret these tables:

- * indicates that although the R^2 meets the cut-off criteria, the main effect is not significant
- ** indicates that although the \mbox{R}^{2} meets the cut off criteria, the Δ is smaller than 0.2
- *** indicates that the association between use of the strategy and work-life conflict is not linear

Interaction indicates that the interaction term is significant

ns indicates the interaction term is not significant

- indicates that increased use of this strategy is associated with lower work-life conflict.

³⁸ Is the difference between the level of work–life conflict experienced by someone who makes high use of this strategy and someone who makes low use of this strategy. If the number is positive, increased use of the coping strategy is associated with higher levels of conflict. If the number is negative, the use of the coping strategy is associated with lower levels of the conflict.

Table 15: Impact of Individual Coping Strategies on Work-Life Conflict: Gender by Dependent Care Analysis

a. Main Effects

Overload	Work to Family	Family to Work	Caregiver Strain
$R^2 = .038$	$R^2 = .017$	$R^2 = .039$	$R^2 = .041 *$
$R^2 = .038$	$R^2 = .017$	$R^2 = .038$	R ² = .042 **
$R^2 = .038$	$R^2 = .017$	$R^2 = .038$	$F = 8.77$, $\alpha = .000$
			$R^2 = .044$, $\Delta = 0.3$
$R^2 = .038$	$R^2 = .017$	$R^2 = .038$	$R^2 = .044 **$
$F = 1163.8$, $\alpha = .000$	Interaction	Interaction	$F = 36.16$, $\alpha = .000$
$R^2 = .141, \ \Delta = 0.8$			$R^2 = .057, \Delta = 0.4$
Interaction	$R^2 = .024$	$R^2 = .038$	$R^2 = .038$
Interaction	$R^2 = .026$	Interaction	$R^2 = .042 *$
$F = 226.5$, $\alpha = .000$	$R^2 = .028$	Interaction	$R^2 = .052 **$
$R^2 = .064$, $\Delta = 0.4$			
Interaction	$R^2 = .017$	Interaction	Interaction
Interaction	Interaction	Interaction	$F = 30.94, \alpha = .000$
			$R^2 = .058$, $\Delta = 0.4$
Interaction	$R^2 = .017$	$R^2 = .038$	$R^2 = .041 **$
$R^2 = .042 **$	$R^2 = .023$	R ² = .041 **	$R^2 = .042 **$
$F = 119.81, \ \alpha = .000$	$R^2 = .023$	$F = 18.29$, $\alpha = .000$	$F = 35.04$, $\alpha = .000$
$R^2 = .048, ***$		$R^2 = .041, ***$	R ² = .057, ***
	$R^2 = .038$ $R^2 = .038$ $R^2 = .038$ $R^2 = .038$ $R = 1163.8, \ \alpha = .000$ $R^2 = .141, \ \Delta = 0.8$ Interaction Interaction $R^2 = .064, \ \Delta = 0.4$ Interaction Interaction Interaction $R^2 = .042 ***$ $F = 119.81, \ \alpha = .000$	$\begin{array}{llllllllllllllllllllllllllllllllllll$	$\begin{array}{llllllllllllllllllllllllllllllllllll$

b. Significant Interactions

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Just work harder	ns	$F = 3.44$, $\alpha = .002$	$F = 3.79$, $\alpha = .001$	ns
		$R^2 = .091$	$R^2 = .051$	
Prioritize	$F = 2.97$, $\alpha = .008$	ns	ns	ns
	$R^2 = .047$			
Delegate	$F = 5.01$, $\alpha = .000$	ns	$F = 7.22$, $\alpha = .000$	ns
	$R^2 = .049$		$R^2 = .046$	
Just try to forget about it	ns	ns	$F = 2.78$, $\alpha = .01$	ns
			$R^2 = .049$	
Find another activity	$F = 6.35$, $\alpha = .000$ $R^2 = .041$	ns	$F = 5.87$, $\alpha = .000$ R2 = .041 **	$R^2 = .041**$
Reduce the quality of things I do	$F = 5.99$, $\alpha = .000$	$F = 3.61, \ \alpha = .001$	$F = 2.45$, $\alpha = .01$	ns
	$R^2 = .111$	$R^2 = .067$	$R^2 = .071$	
Schedule, organize, plan	$F = 28.5$, $\alpha = .000$	ns	ns	ns
	$R^2 = .041$			

Table 16: Impact of Individual Coping Strategies on Work–Life Conflict: Gender by Job Type

a. Main Effects

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Talked with family or friends	$R^2 = .025$	$R^2 = .035$	$R^2 = .002$	$R^2 = .028$
Talked with colleagues at work	$R^2 = .026$	$R^2 = .035$	$R^2 = .002$	$R^2 = .030$
Sought help from family or friends	$R^2 = .025$	$R^2 = .025$	$R^2 = .002$	$R^2 = .030$
Sought help from colleagues at work	$R^2 = .025$	$R^2 = .034$	$R^2 = .003$	$R^2 = .028$
Just work harder	$F = 1194.6, \ \alpha = .000$	Interaction	$R^2 = .017$	$R^2 = .045 **$
	$R^2 = .124, \ \Delta = 0.8$			
Prioritize	$F = 124.8, \ \alpha = .000$	Interaction	$R^2 = .002$	$R^2 = .026$
	$R^2 = .041, \ \Delta = 0.3$			
Delegate	$R^2 = .031$	$R^2 = .034$	$R^2 = .002$	$R^2 = .029$
Just try to forget about it	$F = 243.2$, $\alpha = .000$	$F = 184.9, \alpha = .000$	$R^2 = .009$	$R^2 = .035$
	$R^2 = .044, \ \Delta = 0.4$	$R^2 = .048, \ \Delta = 0.3$		
Find another activity to	$R^2 = .030$	$R^2 = .037$	$R^2 = .005$	$R^2 = .028$
take mind off things				
Reduce the quality of things I do	$F = 750.9$, $\alpha = .000$	$F = 663.5$, $\alpha = .000$	$R^2 = .028$	$F = 52.8$, $\alpha = .000$
	$R^2 = .081, \ \Delta = 0.7$	$R^2 = .082, \ \Delta = 0.7$		$R^2 = .041, \ \Delta = 0.4$
Schedule, organize and plan	$R^2 = .026$	$R^2 = .035$	$R^2 = .003$	$R^2 = .030$
Have an alcoholic drink	$R^2 = .031$	$F = 103.1$, $\alpha = .000$	$R^2 = .002$	$R^2 = .029$
		$R^2 = .041, \ \Delta = 0.3$		
Use prescription or other drugs	$F = 750.9$, $\alpha = .000$	$F = 112.5$, $\alpha = .000$	$R^2 = .002$	$R^2 = .037$
	R ² = .041 ***	R ² = .045, ***		

b. Main Effects

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Just work harder	ns	$F = 7.2$, $\alpha = .000$	ns	ns
		$R^2 = .111$		
Prioritize	ns	$F = 6.1$, $\alpha = .000$	ns	ns
		$R^2 = .041$		

Individuals with high role overload use a wide variety of personal coping strategies

Use of eight of the thirteen personal coping strategies examined in this study can be meaningfully linked to the incidence of role overload.³⁹ In all but one of these cases (i.e. prescription drug use), the higher the level of role overload, the greater the use of the coping strategy (i.e. positive association between use of coping strategies and overload). The following observations can be drawn with respect to the relationship between role overload and the use of the various coping strategies.

³⁹ While a significant association with role overload was observed with respect to 13 of the 15 personal coping strategies, only 8 met our criteria of being substantive.

- There is a strong positive relationship between role overload and the use of three coping strategies for all employees, regardless of gender, job type or dependent care status:
 - just working harder ($\Delta = +0.7$)
 - just trying to forget about it ($\Delta = +0.4$)
 - taking prescription drugs or other medications⁴⁰
- Men and women with higher levels of role overload are, regardless of job type, more likely to try to cope with high overload by:
 - reducing the quality of things they do ($\Delta = +0.7$)
 - prioritizing ($\Delta = +0.3$)

The relationship between the use of the other three coping strategies, find another activity to take one's mind off things, delegate, and schedule and plan, and role overload is more complex and depends on both the gender of the individual and their dependent care status. A more detailed discussion of these strategies (along with the use of priority setting, which is also related to both gender and dependent care status) will be given later in this report.

The following conclusions can be drawn about the link between role overload and personal coping:

- Canadian employees do not use their social support networks to cope with role overload.
- Active coping strategies such as scheduling, prioritizing and delegating appear to help those with dependent care responsibilities cope with role overload.
- Reactive coping techniques, such as working harder, while widely used by Canadian employees in an
 attempt to cope with all that they have to do, are associated with higher, not reduced, levels of role
 overload.
- Higher levels of role overload are associated with a reduction in the quality of work. This means that employers that associate long hours with increased productivity are misinformed.
- Escapist strategies are not an effective way to cope with role overload as people who use these strategies report higher levels of role overload.

To understand how employees cope with work-to-family interference you need to understand their work situation

While work-to-family interference is significantly associated with the use of 11 of the 15 coping strategies, only 6 can be considered substantive using the criteria outlined above. The fact that 4 of these associations were observed only in the gender by job type analysis suggests that an employee's ability to cope with this form of work-life conflict depends more on their work situation than their circumstances at home.

⁴⁰The relationship between use of prescription medicine and role overload is not linear.

All Canadian employees with higher levels of work-to-family interference, regardless of gender, job type or dependent care status, are more likely to try to cope with this form of work-life conflict by:

- just working harder ($\Delta = +1.1$)
- reducing the quality of things they do ($\Delta = +0.8$)

In addition to the above, when job type is taken into account, men and women, with high levels of work-to-family interference, were more likely to:

- just try to forget about it ($\Delta = +0.4$)
- have an alcoholic drink ($\Delta = +0.3$)

The relationship between the final two coping strategies, take prescription medication and prioritize, depends on both gender and job type. More details on these findings will be given below.

This study indicates that employees tend to use reactive coping and avoidance strategies to cope with work-to-family interference. The fact that such strategies are focused on reducing the unpleasant physical and mental symptoms associated with work-life conflict, not with the identification and elimination of the cause of the interference, is consistent with the fact that these strategies are associated with higher rather than lower levels of interference.

To understand how employees are coping with family-to-work interference, you need to understand their family circumstances

The relationship between personal coping and family-to-work interference is very different from those reported with respect to role overload and work-to-family interference in a number of key ways. First, the relationship between this form of work-life conflict and the individual coping strategies was very weak when gender and job type were taken into account. None of the relationships was significant and in 8 of the 13 cases, the R² (i.e. the amount of variation in family-to-work interference explained by the coping strategy when gender and job type are considered) was less than 1%. This suggests that this form of interference is not influenced by the extent to which an employee engages or does not engage in a particular coping strategy. It would also suggest that coping with this form of work-life conflict is not associated with job type. Second, while six of the strategies (work harder, delegate, try to forget, reduce the quality of things you do, find another activity to take mind off things, take prescription drugs) were substantively associated with family-to-work interference, in all cases the impact of the strategy depended on the employee's gender and dependent care status. Details on each of these relationships will be outlined later in this section.

None of the personal coping strategies examined in this study help to reduce caregiver strain

This research initiative was not able to identify any personal coping strategies that were associated with reduced levels of caregiver strain. The data did, however, identify several links between coping and the incidence of caregiver strain that are worthy of note. These include the following:

• Employees with higher levels of caregiver strain are, regardless of their gender, their job type or their dependent care status, more likely to try to cope by reducing the quality of the things they do ($\Delta = +0.3$).

- Employees with higher levels of caregiver strain are, regardless of their gender or their dependent care status, more likely to try to cope by:
 - just working harder ($\Delta = +0.4$)
 - seeking help from family or friends ($\Delta = +0.3$)

The relationship between use of prescription drugs and caregiver strain, while also substantive, does not appear to be linear. Details on this relationship are presented below.

Social support is not linked to the incidence of work-life conflict

The data indicate that the use of social support coping strategies (i.e. getting help from colleagues at work and from friends and family, talking to colleagues at work and friends and family) is not linked to work–life conflict. With one exception, ⁴¹ none of these strategies was significantly associated with any of the forms of work–life conflict examined in this research. These findings suggest two things. First, an individual's level of work–life conflict is not a good predictor of whether or not they will seek help from others—some people (regardless of their gender, job type and dependent care responsibilities) will seek help, while others will not. Second, none of these strategies is associated with a decline in work–life conflict. This is unfortunate as many Canadians try to cope with work–life conflict by looking for social support (i.e. 45% of employees talk with family and friends daily and one in three talks to their colleagues at work daily as a way of coping with stress).

Active coping strategies help employees with dependent care responsibilities cope with high levels of role overload

Employees who use active coping strategies to cope with work-life conflict try to attack the source of the stress by prioritizing, delegating work to others and scheduling, planning and organizing their time more effectively.

The analysis indicates that the use of all three of these strategies is significantly and substantively associated with higher levels of role overload (i.e. the more overloaded the individual, the more likely they are to try to cope by prioritizing, delegating and scheduling/planning). As noted earlier, the impact that the use of these coping techniques has on role overload depends on the dependent care status of the employee. The relationship in all three cases is similar (Figure 42):

- For men and women without dependent care, greater use of all these coping strategies is associated with higher levels of role overload (i.e. a positive association between the use of these strategies and role overload).
- For men and women with dependent care, on the other hand, the use of these strategies is not associated with a substantive increase in role overload (i.e. role overload does not change substantively with increased use of these strategies).

These findings suggest that the use of active coping strategies is an effective way for those with dependent care to cope with role overload (i.e. these strategies stave off an increase in overload). This conclusion is supported by the fact that in the gender by job type analysis, when dependent care status is not taken into account:

- The use of two of the active coping strategies (scheduling and delegating) is not significantly associated with role overload.
- Prioritizing is positively associated with increased levels of role overload, regardless of gender or job type.

⁴¹ Employees with high levels of caregiver strain are more likely to seek help from friends and family.

Active coping strategies are not linked to the incidence of role interference or caregiver strain

The results indicate that the use of active coping strategies is not linked to the incidence of work-to-family interference, family-to-work interference or caregiver stain. With two exceptions, ⁴² none of these strategies was significantly associated with these three forms of work-life conflict. These findings are unfortunate as many Canadians seek to cope with work-life conflict by prioritizing (69% use this strategy daily), scheduling (29% use this strategy daily) and delegating (27% use this strategy daily).

The use of prioritizing was positively associated with work-to-family interference in the gender by job type analysis. Unfortunately, these findings reflect the increased tendency on the part of those in managerial and professional positions to cope with such conflict by putting the completion of work responsibilities ahead of their duties at home.

The use of delegation was positively associated with family-to-work interference in the gender by dependent care analysis. This suggests that men and women with dependent care cope with this form of conflict by delegating, to others, family responsibilities that get in the way of work.

Escapist tactics help employees without dependent care cope with work-life conflict

Employees who use escapist strategies to cope with work–life conflict try to forget about the source of their conflict and find another activity to take their mind off things. Both these strategies leave the original source of the stress unscathed and focus on healthful strategies to improve how people feel. While escapist strategies may partially help those without dependent care responsibilities to cope with role overload (Figure 43) and family-to-work interference (Figure 44), they are not effective for those with dependent care responsibilities. Consider the following:

- For men and women without dependent care responsibilities, finding another activity to take their mind off things is negatively associated with role overload ($\Delta = -0.3$). No such relationship was observed for those with dependent care responsibilities.
- For men and women without dependent care responsibilities, just trying to forget about it and finding another activity to take their mind off things was associated with either a plateau effect (of trying to forget) or a decline in (finding another activity) family-to-work interference. No such impact was noted for those with dependent care responsibilities. In fact, employees with child care and/or elder care who try to cope with family-to-work interference by just trying to forget about their problems experience increased levels of such conflict with greater use (Δ = +0.3).

Our conclusion that escapist strategies are not an effective way to cope with work–life conflict is further supported by the following findings:

- Employees who just try to forget about things are, regardless of gender, job type or dependent care status, more likely to report higher levels of role overload ($\Delta = +0.4$) than their counterparts who do not use such strategies.
- Employees who just try to forget about things are, regardless of gender or job type, more likely to report higher levels of work-to-family interference ($\Delta = +0.3$) than their counterparts who do not use such strategies.

⁴² Employees with high levels of work-to-family interference are more likely to prioritize while those with higher levels of family-to-work interference are more likely to delegate.

Employees who use reactive coping techniques are significantly more likely to experience increased work-life conflict

Employees who use reactive coping techniques try to deal with the stress associated with higher levels of work–life conflict in an unhealthy fashion. They drink alcohol, take prescription drugs or other medication, just try to work harder, and reduce the quality of their work. All of these strategies, while perhaps able to make employees feel temporarily better, are not sustainable in the long term. The link between the use of reactive coping strategies and work–life conflict is described in detail below.

Working harder does not help employees cope with work-life conflict

About 43% of the respondents attempted to cope with work-life conflict by just working harder. This suggests that this strategy certainly does not help employees cope and may exacerbate work-life conflict. This conclusion is supported by the fact that greater use of this coping strategy is associated with substantially higher levels of role overload, work-to-family interference, family-to-work interference and caregiver strain for both men and women (i.e. a positive association between the use of this strategy and all four forms of work-life conflict).

Employees who cope by working harder report higher role overload

The relationship between this coping strategy and role overload is very important for several reasons. First, working harder is the single strongest predictor of role overload. Second, working harder has a very strong direct impact on levels of role overload as it is positively associated with the use of this strategy, regardless of gender, job type and dependent care status. Third, the difference in role overload between those who rarely use this strategy and those who use it on a daily basis is quite substantive ($\Delta = +0.8$). While the causality of this finding is difficult to ascertain (i.e. people who are overloaded may work harder in an attempt to cope and/or people who cope by working harder experience an increase in role overload), the conclusion one arrives at in either case is the same: this strategy does not help employees deal with role overload.

Busy people who try to cope by working harder report greater role interference

Similar to what was observed in the role overload analysis, working harder is a very strong predictor of work-to-family interference. In this case, however, the relationship between working harder and work-to-family interference depends on the situation at home and work. The following observations can be drawn from this phase of the analysis.

- Working harder has a stronger association with work-to-family interference for men and women in management and professional positions ($\Delta = +0.7$) than for their counterparts in other positions ($\Delta = +0.5$). This relationship, shown in Figure 45a, suggests that employees with heavier demands and expectations at work (i.e. managers and professionals) who think that they can cope by working harder will experience higher levels of work-to-family interference.
- Working harder has a stronger association with work-to-family interference for men and women with dependent care responsibilities (Δ = +0.8) than for men and women without dependent care (Δ = +0.6). This relationship, shown in Figure 45b, suggests employees with heavier demands and expectations at home (i.e. employees with child and/or elder care) who think that they can cope by working harder will experience higher levels of work-to-family interference.

Figure 42: Impact of Active Coping on Role Overload

a. Prioritize

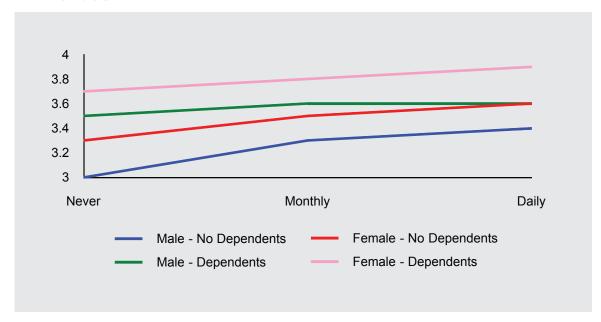


Figure 42: Impact of Active Coping on Role Overload

b. Schedule, Organize and Plan Time More Effectively

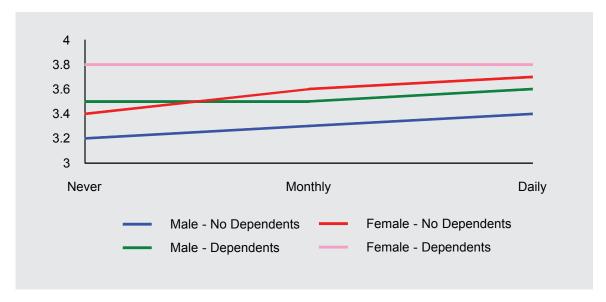


Figure 42: Impact of Active Coping on Role Overload

c. Prioritize

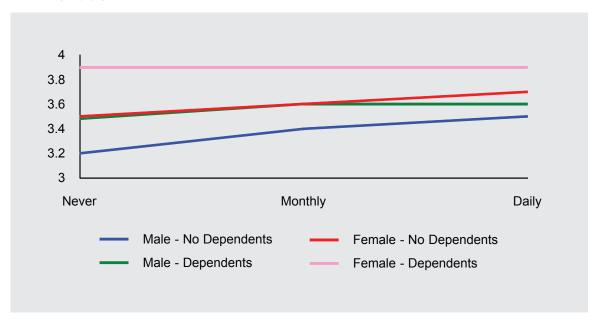


Figure 43: Impact of Escapism on Role Overload

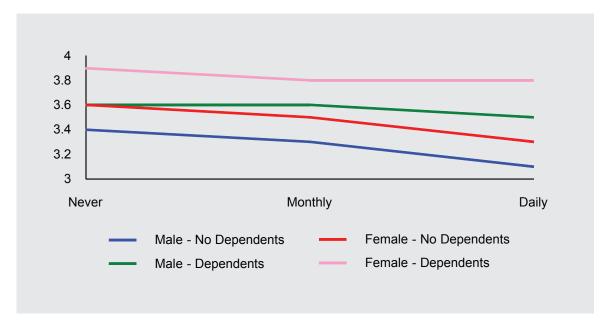


Figure 44: Impact of Escapism on Family-to-Work Interference

a. Just Try to Forget About It

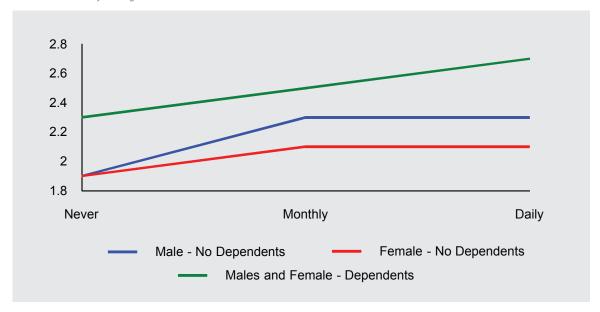


Figure 44: Impact of Escapism on Family-to-Work Interference

b. Find Another Activity to Take Mind Off Things

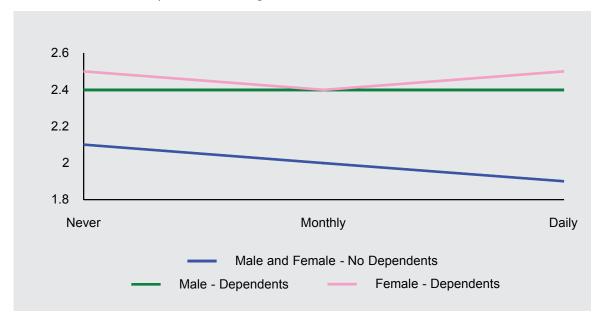


Figure 45: Relationship Between Just Work Harder and Work-to-Family Interference

a. Gender by Job Type

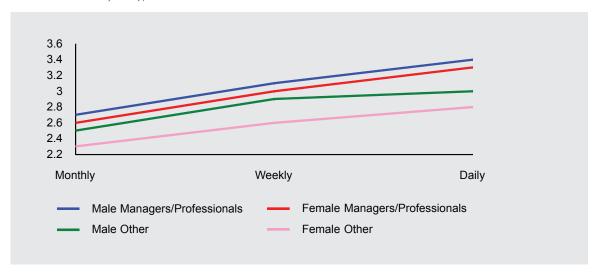
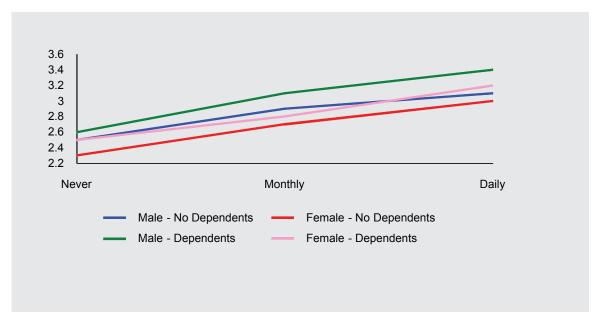


Figure 45: Relationship Between Just Work Harder and Work-to-Family Interference

b. Gender by Dependent Care



A comparable set of findings can be observed with respect to family-to-work interference (Figure 46). The association between family-to-work interference and working harder is stronger for men and women with dependent care responsibilities ($\Delta = +0.4$) than for men and women who do not have such responsibilities at home ($\Delta = +0.2$). These findings suggest, regardless of the source of the demands (home or work), employees who try to cope by working harder will experience greater role interference.

Reducing the quality of work does not help employees cope with work-life conflict

One in ten of the Canadian employees in our sample indicated that they lowered the quality of the things they did on a daily basis in an attempt to cope with work-life conflict. The findings with respect to the use of this strategy and work-life conflict are very similar to those observed with working harder and support our contention that reactive coping is associated with increased levels of work-life conflict.

There is a strong association between higher levels of role overload and lower quality work

There is a strong association between reducing the quality of one's work and role overload. While the relationship between the use of this strategy and role overload is fairly straightforward when gender and job type are taken into account (strong positive association between reducing the quality of things done and role overload regardless of gender or job type), the same cannot be said when dependent care status is taken into account (Figure 47). It would appear that while the positive association between the use of this strategy and role overload still holds, regardless of gender, the effect varies depending on responsibilities outside of work. The nature of this relationship suggests that lowering the quality of things one does is a more effective coping strategy for those with dependent care (Δ in role overload from use rarely to use daily of +0.5 for men and women with dependent care) than those without (Δ in role overload from use rarely to use daily of +0.8 for men and +0.7 for women without dependent care).

While the causality of this finding is difficult to ascertain (e.g. people who are overloaded may reduce quality in an attempt to cope and/or people who cope by reducing quality experience an increase in role overload as they have to re-do some tasks), the conclusion one arrives at in either case is the same: this strategy does not help employees deal with role overload. Also worthy of note is that this relationship was not observed in the job type analysis, suggesting that those with dependent care are coping by lowering the quality of things they do at home, rather than at work.

Lowering standards seems to help females cope with work-to-family interference

The findings with respect to the link between lowering quality of work and work-to-family interference are very similar to those reported for role overload. Again, we can see that the relationship is strong. We also note the strong positive association between reducing the quality of things done and work-to-family interference when gender and job type are taken into account. Finally, we can see that the impact of this strategy varies depending on both gender and dependent care status (Figure 48). In this case, it would appear that men, regardless of their dependent care status, do not appear to benefit from this strategy ($\Delta = +0.7$ in work-to-family interference from use rarely to use daily). For women, on the other hand, especially those without dependent care, this strategy may offer some form of assistance in terms of coping with work-to-family interference (Δ in interference from use rarely to use daily of +0.5 for women without dependent care and +0.6 for women with dependent care).

Figure 46: Relationship Between Just Work Harder and Family-to-Family Interference

a. Gender by Dependent Care

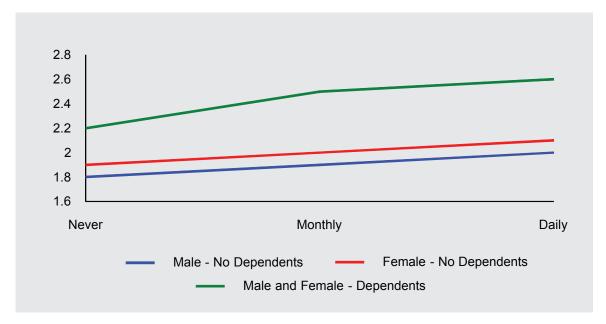


Figure 47: Relationship Between Lower Quality of Things Done and Role Overload

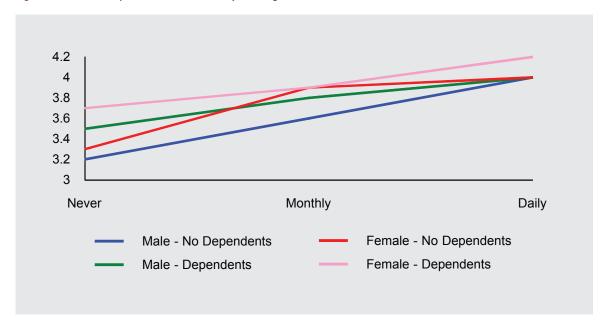


Figure 48: Relationship Between Lower Quality of Things Done and Work-to-Family Interference

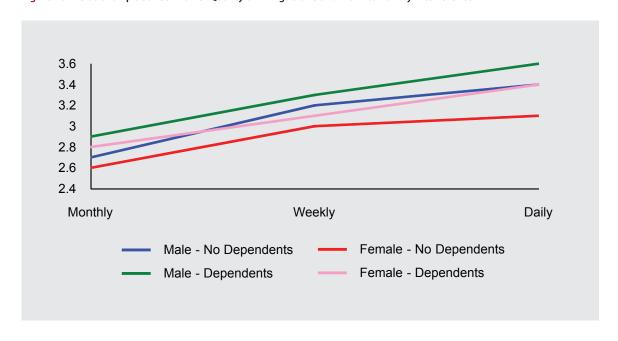


Figure 49: Relationship Between Lower Quality of Things Done and Family-to-Work Interference

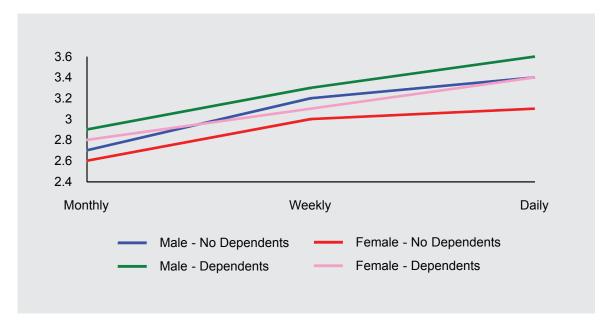


Figure 50: Relationship Between Have Alcoholic Drink and Family-to-Work Interference

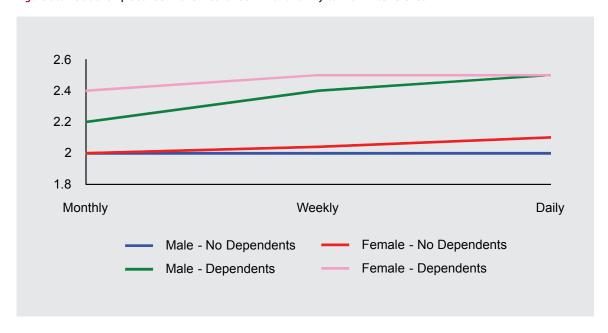


Figure 51: Relationship Between Take Prescription Medicine and Work–Life Conflict

a. Gender by Dependent Care

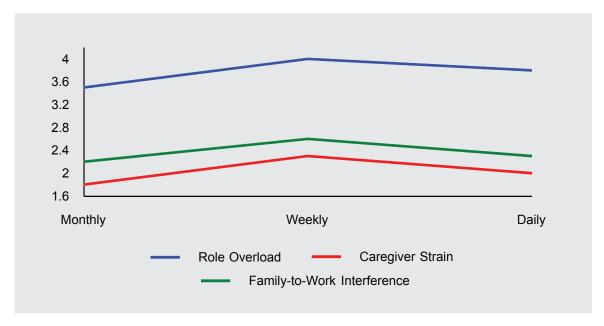
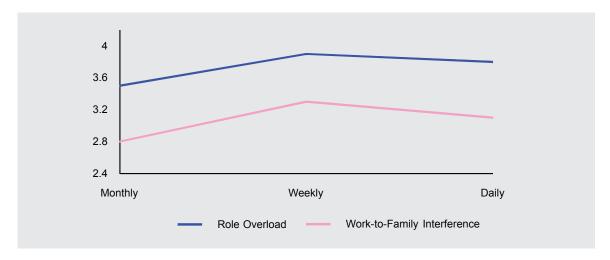


Figure 51: Relationship Between Take Prescription Medicine and Work–Life Conflict

b. Gender by Job Type



The findings with respect to role overload and work-to-family interference led us to ask the following question: Where are employees reducing the quality of things they do—at work or at home? Examination of the findings with respect to lowering the quality of things one does and family-to-work interference provides us with some insights into this question. As can be seen in Figure 49, the use of this strategy is not associated with family-to-work interference for men and women without dependent care. It is, however, positively associated with the incidence of family-to-work interference for men and women with dependent care ($\Delta = +0.5$). This implies that men and women with dependent care are able to cope with work-to-family interference by lowering standards at work. The cost of this strategy is higher family-to-work interference. The implication of these findings is that employers interested in quality of work need to implement strategies to reduce role overload and enhance work-life balance.

Employees with higher levels of role interference are more likely to cope by using alcohol

With two exceptions, the relationship between work-life conflict and using alcohol to cope with stress is not significant. The first exception is worthy of note in that it shows a substantive relationship between family-to-work interference and alcohol consumption for men with dependent care responsibilities (Figure 50). No such relationship was observed for men and women without dependent care or for women with dependent care. The second relationship is between alcohol consumption and work-to-family interference. In this case, higher forms of interference are associated with an increased use of alcohol ($\Delta = +0.3$), regardless of gender or job type.

Moderate use of prescription medicine is associated with highest levels of conflict

As can be seen by looking at the relationships outlined in Figure 51, the data paint a consistent picture with respect to the use of prescription medicine and work–life conflict. While employees with low levels of work–life conflict are significantly less likely to use prescription medicine, moderate users of prescription medicine (i.e. weekly) report significantly greater work–life conflict than employees who take medication daily to cope with stress. Our confidence in these findings is strengthened by the fact

that the curvilinear form of these relationships is virtually identical, regardless of the type of work–life conflict being considered. It appears that prescription medicine can partially alleviate all four forms of work–life conflict, but only if taken on a daily basis.

Reactive coping does not reduce caregiver strain

Finally, it is important to note that the association between the use of a number of reactive coping strategies and caregiver strain was substantive. Respondents with higher levels of caregiver strain, regardless of gender, are more likely to try to cope with this form of work–life conflict by:

- just working harder ($\Delta = +.04$)
- reducing the quality of things they do ($\Delta = +0.4$)

As noted earlier, employees with higher levels of caregiver strain also make more use of prescription drugs.

Four coping strategies are linked to all forms of work-life conflict

Only four of the individual coping strategies were significantly associated with all four forms of work–life conflict: schedule and plan, reduce the quality of things done, use prescription drugs and work harder. Furthermore, three of these coping strategies fall into the category of reactive coping, a form of coping that focuses on reducing the symptoms of stress but is not sustainable over time. These findings are important as they indicate that:

- Canadians are not coping effectively with work–life conflict.
- There is no one personal coping strategy that will effectively reduce all forms of work–life conflict.

Table 17: Link Between Work–Life Conflict and Decision to Have Children

Coping Strategies	% Who Use Frequently				
	Males		Females		Total
	Mgr/Prof	Other	Mgr/Prof	Other	
Had fewer children because of their job	15	15	35	25	24
Not started/delaying starting family because of work demands	19	17	42	28	28

Table 18: Impact of Childbearing Decisions on Work-Life Conflict: Gender by Dependent Care Analysis

a. Main Effects				
Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Had fewer children because of work	$F = 558.3$, $\alpha = .000$ $R^2 = .094$, $\Delta = 0.5$	$F = 1061.2, \alpha = .000$ $R^2 = .111, \Delta = 0.8$	$F = 446.1$, $\alpha = .000$ $R^2 = .059$, $\Delta = 0.5$	$F = 23.56$, $\alpha = .000$ $R^2 = .046$, $\Delta = 0.3$
Not started family because of career	F = 107.6, α = .000 R ² = .051, Δ = 0.6	$F = 384$, $\alpha = .000$ $R^2 = .073$, $\Delta = 0.7$	Interaction	Interaction

Table 18: Impact of Childbearing Decisions on Work-Life Conflict: Gender by Dependent Care Analysis

b. Main Effects

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Not started family because of career	ns	ns	$F = 7.72$, $\alpha = .000$ $R^2 = .047$	$F = 4.59$, $\alpha = .000$ $R^2 = .051$

Table 19: Impact of Childbearing Decisions on Work-Life Conflict: Gender by Dependent Care Analysis

a. Main Effects

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Had fewer children because of work	Interaction	Interaction	Interaction	$R^2 = .038$
Not started family because of career	$R^2 = .034$	F = 335.5, α = .000 R ² = .082, Δ = 0.7	$R^2 = .012$	$R^2 = .035$

b. Significant Interactions

Individual Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Had fewer children because	$F = 7.13, \ \alpha = .000$	$F = 10.48, \ \alpha = .000$	$F = 7.0, \ \alpha = .000$	ns
of work demands	$R^2 = .094$	$R^2 = .131$	$R^2 = .054$	

4.3 Work–Life Conflict and the Decision to Have Children

Statistics Canada (2004) reported that in 2002 Canada's crude birth rate (the number of live births for every 1,000 people in the population) fell to an all-time low of 10.5 live births for every 1,000 people. Several things are notable about this number. First, it is the lowest crude birth rate since vital statistics began to be produced nationally in 1921. Second, it means that the Canadian crude birth rate has dropped 25.4% in the last 10 years alone. Third, it represents the 11th decline in the past 12 years.

Examination of Canada's fertility rate, an entirely different measure, provides a similar picture. Fertility rate estimates the average number of children women aged 15 to 49 will have in their lifetime. Canada's fertility rate in 2002 was 1.50 per woman, which is only marginally above the record low of 1.49 set in 2000 but far below the replacement fertility rate of 2.1 (Statistics Canada, 2004). While women aged 25 to 29 had the highest fertility rate, their fertility rate has decreased 24% since 1990 as more women are delaying their first pregnancies into their 30s. In 1983, women in their 30s and older accounted for only 14% of live births to first-time mothers. By 1999, this proportion had more than doubled to 32%. This section of the report looks at the link between declining birth rates and work–life conflict. It does so by looking at the responses given to two questions in the survey:

- I have had fewer children because of the demands at work.
- I have not yet started a family/decided not to have a family because of my career.

Demands at work influence women's decisions with respect to having children

One in four Canadians who responded to this study indicated that they had fewer children because of demands at work. A further 28% indicated that they had delayed starting a family/decided not to have a family due to the demands at work.

As can be seen by looking at Figure 52, decision making around having children is associated with gender and job type. The following observations can be made with respect to this issue:

- Women, regardless of job type, are significantly more likely than men to say that they have followed a strategy of having fewer children because of the demands of their work and that they have delayed having children/decided not to have a family because of their career.
- Women in managerial and professional positions are more likely than women in other positions to say that they have had fewer children because of the demands of their work (29% versus 23%) and that they have delayed having children/decided not to have a family because of their career (37% of the female managers and professionals in the sample gave this response versus 24% of the females in other positions).

It would appear that many women managers and professionals perceive that motherhood and career advancement are not compatible goals. The section below, which links these two strategies with the various forms of work-life conflict, supports these perceptions.

Employees who cannot balance work and family are more likely to choose not to start a family

Not surprisingly, employees without children who cannot balance work and family are more likely to agree that they have decided to delay or not have a family because of their career. The relationship between two forms of work–life conflict, role overload and work-to-family interference, and the decision to start a family is identical and very straightforward. Men and women with high levels of role overload and work-to-family interference, regardless of the type of job they work in and their dependent care status (they may have elder care), are more likely to say that they have decided to delay starting a family than their counterparts with lower levels of conflict. The difference in role overload between someone who uses this coping strategy and someone who does not is $\Delta = +0.6$. Similarly, the difference in work-to-family interference between someone who uses this strategy and someone who does not is $\Delta = +0.7$.

Employees who have decided not to start a family report lower levels of family-to-work interference

The decision to not have children pays off for women. For example, women without dependents who have decided not to have children report significantly lower levels of family-to-work interference ($\Delta = -0.3$) as do female managers and professionals ($\Delta = -0.4$) and females in other positions ($\Delta = -0.3$) who use this strategy. No such impact was noted for the men in the sample.

Employees with high levels of caregiver strain are more likely to decide not to start a family

There is a significant positive association between the decision to have children and caregiver strain. In both cases, men and women with high levels of caregiver strain were more likely to say that they had decided not to start a family. In the gender by dependent care analysis, the difference in caregiver strain between the men ($\Delta = +0.5$) and the women ($\Delta = +0.4$) who used this strategy is worthy of note. When job type is taken into account, the difference in caregiver strain between men and women who used this strategy and those who did not was identical and substantive ($\Delta = +0.7$).

This suggests that governments that wish to increase birth rates need to help employees cope with role overload, work-to-family interference and caregiver strain.

Figure 52: Relationship Between Work–Life Conflict and Decision to Have Children

a. Had Fewer Children Because of Job Demands

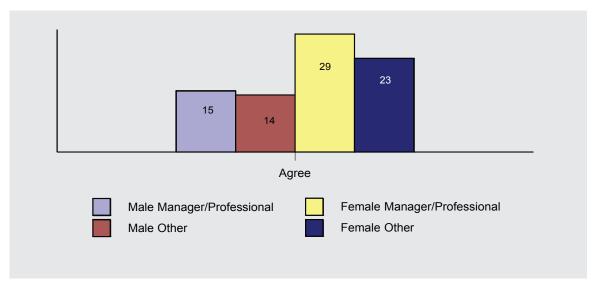


Figure 52: Relationship Between Work–Life Conflict and Decision to Have Children

b. Have Not Started a Family/Decided Not to Have a Family Because of Career

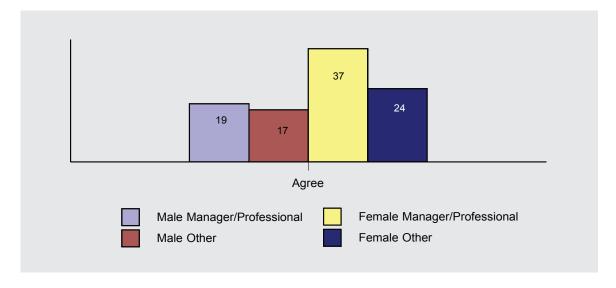


Figure 53: The Relationship Between Work–Life Conflict and Limiting Family Size

a. Role Overload

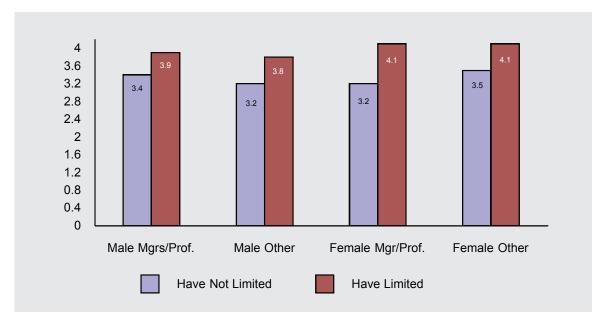


Figure 53: The Relationship Between Work–Life Conflict and Limiting Family Size

b. Work-to-Family Interference

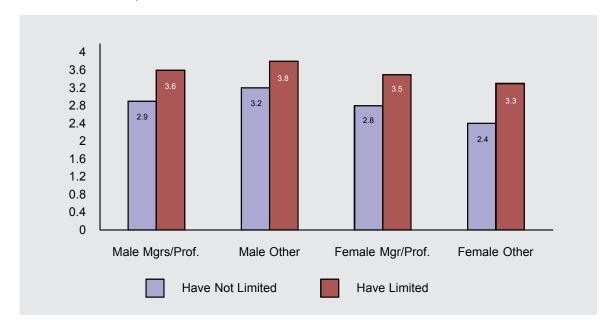


Figure 53: Relationship Between Work–Life Conflict and Decision to Have Children

c. Family-to-work Interference

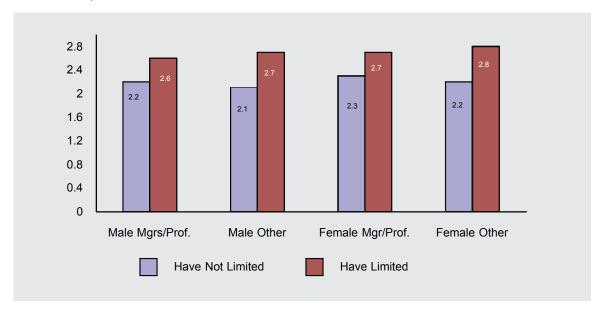
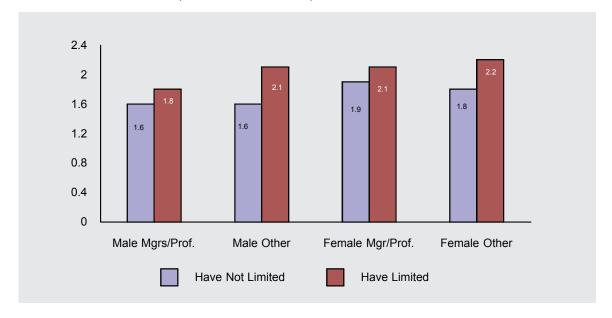


Figure 53: Relationship Between Work-Life Conflict and Decision to Have Children

d. Have Not Started a Family/Decided Not to Have a Family Because of Career



4.4 Off-Shifting Child Care

Employees with high levels of work-life conflict cope by having fewer children

Men and women who are overloaded and experience higher levels of work-to-family interference cope with these stressors by deciding to limit their family size. Employees with high family-to-work interference and caregiver strain are also more likely to adopt this coping strategy. The relationship between all four of these forms of work-life conflict and the use of this coping strategy is fairly straightforward when gender and dependent care status are taken into account. Men and women who are overloaded ($\Delta = +0.7$), who perceive that their work interferes with their family ($\Delta = +0.8$), who find that their family interferes with work ($\Delta = +0.5$) and who experience high caregiver strain ($\Delta = +0.3$) are more likely to limit their family size. The relationship is not, however, as straightforward when job type is taken into consideration (Figure 53). The key observations that can be made with respect to the relationship between family size and work-life conflict are:

- This coping strategy is associated with increased levels of role overload in both men and women. The increase is larger for men and women in other positions ($\Delta = +0.6$) than for male and female managers and professionals ($\Delta = +0.5$). This suggests that the higher the level of overload experienced by employees, the more likely they are to reduce their family size as a way to cope.
- This coping strategy is associated with increased levels of work-to-family interference for both men and women. Again, we can see that the difference in interference between those who use and those who do not use this strategy is higher for those in other jobs ($\Delta = +0.8$) than for managers and professionals ($\Delta = +0.7$). It should be noted, however, that the relationship is very strong for all the groups included in the study.
- This coping strategy is associated with increased levels of family-to-work interference for both men and women. Again, we can see that the difference in interference between those who use and those who do not use this strategy is higher for those in other jobs ($\Delta = +0.6$) than for managers and professionals ($\Delta = +0.4$).
- This strategy is associated with increased caregiver strain for both men and women. Again, we see that the increase in caregiver strain between those who use the strategy and those who do not is higher for those in other jobs ($\Delta = +0.5$ for men in other positions and $\Delta = +0.4$ for women in other positions) than for those in management and professional positions ($\Delta = +0.2$).

Taken as a whole, it appears that limiting family size makes more of a difference with respect to the work–life balance of those in managerial and professional positions than their counterparts in other positions.

4.4 Off-Shifting Child Care

Researchers have observed that one out of ten full-time dual-income couples with children in the U.S. had no overlap whatsoever in their hours of employment. They have inferred from these data that shift work may be advantageous to couples with children in that it enables them to reduce dependence on non-parental care arrangements by off-shifting child care. The Canadian National Child Care Study reported similar findings. It noted that 17% of dual-income families in Canada deliberately worked off-shifts (i.e. spouses worked different shifts from each other) for child care purposes.⁴³

⁴³ See Johnson, 1997 for a review of this literature.

4.5 What Can Employees Do to Increase Work–Life Balance?

To determine the extent to which employees who work for large Canadian organizations use off-shifting, we asked respondents if they choose to work different hours than their partner to better manage child care or elder care responsibilities.

One in three respondents off-shifts

Almost one third of the respondents (31%) indicated that they did in fact off-shift with their partner to better manage work and family responsibilities. The off-shifting is a strategy that is used by men and those in managerial and professional positions to help them balance competing work and family demands. The men were more likely than women to off-shift (45% of men versus 25% of females off-shift) regardless of job type or dependent care status. Male and female managers were more likely to use off-shifting than their counterparts in other jobs (45% of the male managers in our sample and 37% of the female managers and professionals used off-shifting versus 29% of male and 16% of females in other jobs). Men with dependent care were more likely to off-shift than men without such responsibilities (42% versus 25%). The likelihood of off-shifting was not associated with dependent care status for the females.

Off-shifting is not associated with work-life conflict

Unfortunately, employees who are attempting to cope with work–life conflict by off-shifting work hours with their spouse realize little gain from such a strategy. None of the forms of work–life conflict considered in this study was significantly associated with this strategy.

4.5 What Can Employees Do to Increase Work–Life Balance?

What can employees personally do to reduce the amount of work–life conflict that they experience? Unfortunately, the findings from this study would suggest that there is not much they can do. None of the following personal coping strategies was associated with any of the forms of work–life conflict examined in this study: talked with family or friends, talked with colleagues at work, sought help from family or friends, sought help from colleagues at work, found another activity to take their mind off things, tried to forget about it, schedule, plan and organize, and have an alcoholic drink. Furthermore, while several strategies were found to have an impact on work–life conflict, their effect was either associated with only one form of work–life conflict under a specific set of conditions or was complex in nature. For example, the delegation of tasks and prioritizing seem to help women with dependent care cope with role overload, but only when job type is taken into account. The relationship between the use of prescription medicine and three forms of work–life conflict (role overload, work-to-family interference and caregiver strain), on the other hand, is complex and can be best described as a "u"-shaped function. Moderate use of this coping mechanism is associated with increased levels of role overload (when job type is taken into account), work-to-family interference and caregiver strain (when dependent care status is taken into account). Daily use of prescription drugs, however, is associated with an increased ability to cope with these three forms of work–life conflict. It should be noted, however, that this strategy comes at a cost and is not sustainable over time. These data support the need for the employer to introduce policies and practices that address work–life conflict.

4.5 What Can Employees Do to Increase Work–Life Balance?

More worrisome are the findings that show that some of the strategies individuals use to cope with work-life conflict exacerbate the stresses they are under rather than alleviate the conflict. Specifically, just under half of the sample indicated that they try to cope "by just working harder—and trying to do it all"—a strategy that is associated with a substantial increase in role overload and work-to-family interference. This strategy is also associated with elevated levels of family-to-work interference and caregiver strain for employees with dependent care responsibilities. Similarly, one in ten of the employees in the same group copes by reducing the quality of the things they do at work and at home. An additional one in five uses this strategy weekly. This is unfortunate as levels of role overload, work-to-family interference and family-to-work interference increase significantly concomitant with the use of this strategy.

Also cause for concern is the link between work-life conflict and decision making with respect to family size. Employees in general and women in managerial and professional positions, in particular, who are overloaded and experience higher levels of work-to-family interference are substantively more likely to decide to limit their family size, delay starting a family and decide not to have children than their counterparts with better balance. While the relationship is not as strong as that observed for overload and work-to-family interference, the data also show a significant positive association between these decisions and higher levels of family-to-work interference and caregiver strain. These findings provide a further incentive for Canadian organizations and governments to address the issue of work-life conflict.

Finally, it should be noted that 38% of the respondents who try to cope by off-shifting their work schedules with their partner are not more able to cope with work-life conflict than their peers who do not use this strategy. Awareness of this finding may cause some employees to re-consider their use of this strategy.

Chapter Five Reducing Work–Life Conflict: What Can Families Do?

Chapter Five Reducing Work–Life Conflict: What Can Families Do?

Although much of the literature concerning coping has focused on individuals' attempts to cope with stressors, research attention has also been devoted to the ways in which people cope as a family unit. Since families comprise individuals with their own unique stressors, who also share common stressors, the coping responses used by individuals within a family unit are inextricably linked (Guinta & Compas, 1993). It is therefore essential to simultaneously consider coping behaviours at the individual and the family level.

The notion of family coping stems from the field of family stress research, which examines the ways in which families adjust to stressors and strains in their environment by employing the shared resources of family members and the broader community (McCubbin & McCubbin, 1987). Family coping differs from individual coping, as it goes beyond the individual psychological response to stress to examine the roles of three units of analysis: (1) the individual family member, (2) the family unit, and (3) the community of which family members and the family unit are a part (McCubbin & Patterson, 1983). Each of these units places demands on family members, but also provides various supports and resources that can be employed as the family members generate an integrated response to stressful situations. In other words, family members can pool their resources and provide mutual support in coping with stress, rather than leaving the individual to cope alone.

McCubbin (1979) was the first to specifically discuss family coping as the active process of making use of the resources available within and outside of the family to prevent stress and minimize the impacts of stress on the family. McCubbin (1979) argued that successful family adaptation to stressful circumstances requires internal family resources such as integration (i.e. family cohesiveness) and adaptability (i.e. the ability to change family roles as the situation requires) as well as the development of a range of coping strategies or behaviours. In general, such behaviours are aimed at strengthening the internal organization and functioning of the family, at obtaining support from the community and society, and at diverting, reducing or eliminating sources of stress.

A number of researchers have sought to enumerate the various strategies that families employ in coping with stress. Perhaps the most comprehensive review of family coping strategies is that of Burr and Klein (1994), who compiled a list of coping behaviours and grouped them into seven categories. These categories, along with the coping behaviours followed by families that use the strategy are presented below:

- Cognitive: accept the situation and others, gain useful knowledge, change how the situation is viewed or defined (reframe the situation).
- Emotional: express feelings and affection, avoid or resolve negative feelings and disabling expressions
 of emotion, be sensitive to others' emotional needs.
- Relationships: increase cohesion (togetherness), increase adaptability, develop increased trust, increase cooperation, increase tolerance of each other.
- Communication: be open and honest, listen to each other, be sensitive to non-verbal communication.

⁴⁴Family integration and family adaptability and their relationship to work-life conflict are discussed in Duxbury and Higgins (2003).

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- Community: seek help and support from others, fulfill expectations in organizations.
- Spiritual: be more involved in religious activities, increase faith or seek help from God.
- Individual development: develop autonomy, independence and self sufficiency, keep active in hobbies.

Building on Hall's (1972) work on individual coping with work–family conflict, Wiersma (1994) examined coping behaviours specifically related to work–home role conflicts in dual career families and classified the coping strategies according to the specific problem they were used to address. Based on the literature concerning dual career couples, Wiersma (1994) identified seven dilemmas that affect dual career couples; three related to role overload (i.e. division of domestic chores, maintaining relationships with friends and role cycling), three related to psychological role quality (i.e. sex role socialization, competition between spouses and social pressure from others), and one related to employment mobility. Wiersma (1994) then conducted an interview study to determine what types of coping strategies are used to address each of these seven dilemmas. Wiersma's (1994) coping study was unique in that it focused specifically on the stressors affecting dual career couples and sought to identify the coping behaviours they employed to deal with these stressors.

While there have been numerous attempts to identify the coping strategies employed by dual income families (e.g. Bird & Bird, 1986; Bird, Bird & Scruggs, 1983; Schnittger & Bird, 1990), there has been much less research concerning the effectiveness of various coping strategies in dealing with work–family conflict. The research that has been undertaken has shown that the most effective types of coping strategies for dual career families involve active coping (i.e. problem focused coping) that involves the support of others, and cognitive restructuring, a form of emotion based coping that involves reframing stressful situations to view them in a more positive light (Amatea & Fong Beyette, 1987; Elman & Gilbert, 1984; Guelzow, Bird & Koball, 1991). Padon and Buehler (1995) found that planning and cognitive restructuring buffered the impacts of role overload on emotional well being for women, and withdrawal coping buffered the impact of role overload on physical symptoms for men. Furthermore, they found that cognitive restructuring buffered the impact of role conflict on physical symptoms for men and emotional well being for women.

However, some coping strategies appear to have a detrimental effect on emotional and physical well being. Guinta and Compas (1993) found that in families where husbands and wives coped with stress through avoidance (i.e. ignoring or postponing problems in the hopes that they will work themselves out), both husband and wife showed increased symptoms of emotional and physical distress. Furthermore, Paden and Buehler (1995) found that for men, coping by talking to others about problems augmented the deleterious impacts of role overload on emotional well being.

This study seeks to expand our knowledge in this area by examining the ability of a number of coping strategies, which operate at the level of the family, to moderate role overload, work-to-family interference, family-to-work interference and caregiver strain. We also look at the impact of gender, job type and dependent care status on these relationships.

This chapter is divided into three broad sections. Data on how families cope with the stresses associated with work–life conflict are presented first. This is followed by a discussion of how effective each of these family-based coping techniques is at alleviating work–life conflict. The section concludes with an overview of the key findings with respect to family coping strategies and work–life conflict.

5.1 How Do Canadian Employees Cope with Stress?

To make it easier for the reader to follow the discussion of our findings, we categorized the familial coping techniques used in this study using principal components analysis. This categorization (Table 20) shows that Canadian families use five different sets of coping strategies in their attempt to deal with work–life conflict: (1) restructure and redefine family roles, (2) put family first, (3) sacrifice personal needs and standards, (4) seek social support, and (5) procure outside help.⁴⁵

Data on the availability and use of the different family coping strategies are summarized in Table 21 (Total Sample) and 22 (Gender by Dependent Care and Gender by Job Type). These data indicate that Canadian families use a wide variety of strategies to cope with stress.

Table 20: Factor Analysis of Family Coping Strategies

	Strengthen/ Restructure Family Roles	Putting Family First	Sacrifice Personal Needs	Social Support	Procuring Help from Outside	% Use Often
Encourage children to help each other	.75					71
Get children to help with household tasks	.68					53
Cover household responsibilities for each other	.63					72
Try to be flexible	.61					76
Plan family time together	.58					48
Limit job involvement to allow time for family		.70				37
Modify work schedule		.68				24
Plan work changes around family needs		.62				36
Identify one partner as responsible for family		.51				31
Leave work problems at work		.45				50
Leave things undone around house			.72			77
Get by on less sleep			.70			54
Cut down on outside activities			.60			56
Buy more goods and services			.45			45
Rely on extended family for help				.79		30
Rely on friends for help				.77		17
Hire help to care for children					.80	42
Hire help to care for elderly dependents					.80	26

⁴⁵ It should be noted that this is the same factor structure reported by Skinner and McCubbin (1987). As such, we felt it was appropriate to use the same names for these factors as those reported by these authors.

Table 21: Use of Family Coping Strategies (Total Sample)

Family Coping Strategies		f Sample Who	Use
	Rarely	Sometimes	Often
Leave some things undone around the house	12	11	77
Trying to be flexible	3	21	76
Covering household responsibilities for each other	10	18	72
Encouraging children to help each other	7	23	71
Cutting down on outside activities	18	26	56
Get by on less sleep that I would like	27	19	54
Get the children to help with household chores	17	30	53
Leaving work-related problems at work	29	21	50
Plan family time together	18	34	48
Buying more goods and services	32	24	45
Hire help to care for the children	40	18	42
Limiting job involvement to allow time for family	31	32	37
Planning work changes around family needs	35	28	36
Identifying one partner as primarily responsible for household tasks	41	28	31
Relying on extended family for help	50	20	30
Hire help to care for elderly relatives	48	25	26
Modifying the work schedule	46	29	24
Relying on friends for help	56	27	17

n varies with question

Rarely is a combination of disagree and disagree strongly that they use this strategy.

Sometimes is a neutral response to this question.

Often is a combination of agree and agree strongly that they use this strategy.

The majority of Canadian families cope by strengthening and restructuring family roles and sacrificing personal needs

Approximately three quarters of the survey respondents cope with work-life issues by sacrificing personal needs (77% leave things undone around the house) and restructuring their family-role expectations (76% try to be flexible, 72% cover household responsibilities for each other, 71% encourage their children to help each other). Furthermore, just over half of the respondents cope by cutting down on outside activities (56%), getting by on less sleep (54%) and getting their children to help with household tasks (53%).

These strategies all have one thing in common—they deal with work-life issues by making accommodations within one's personal and/or family life. They also converge on two factors: strengthen and restructure one's family role, and sacrifice one's own personal needs.⁴⁶ This suggests that families cope by putting work first—ahead of family and personal life.

⁴⁶ It should be noted that the other two strategies associated with these two factors, plan family time together (used often by 48% of the sample) and buy more goods and services (used by 45% of respondents) are also used by a plurality of the sample.

Many Canadians deal with work-life issues by purchasing supports from outside the family

Many Canadians attempt to deal with work–life conflict issues by purchasing help from outside the family unit. Just under half (45%) buy goods and services and 42% hire help from outside to care for their children. Just over one in four (26%) hire help to care for elderly dependents. It is interesting to note that Canadians are more likely to try to "buy" balance than they are to ask extended family (30%) or friends (17%) for help.

One in three Canadians copes by putting family first

A substantive minority of Canadian employees seem to buck the trend of expecting family members to adapt to the employee's work situation and instead of using employee coping strategies that put family first. They do this by trying to leave work problems at work (i.e. 50% try to psychologically separate their work and non-work domains), limiting their job involvement to give time to the family (37%), planning work changes around family needs (36%), identifying one partner as being responsible for household tasks (31%) and by modifying their work schedule to accommodate their family schedule (24%). Examination of Table 22 indicates that the use of all but two of the family coping strategies examined in this study (rely on friends and get children to help each other) are associated with gender, dependent care status and/or job type. Key between-group differences are highlighted in the section below.

Table 22: Use of Family Coping Strategies

a. Gender by Dependent Care

Family Coping Strategies		% Who Use	Frequently	
	Mal	es	Females	
	No D	D	No D	D
Get by on less sleep that I would like	45	54	53	59
Leave some things undone around the house	65	75	78	85
Get the children to help with household chores	-	50	-	60
Plan family time together	38	41	52	52
Hire help to care for elderly relatives	-	22	-	30
Hire help to care for the children	-	32	-	45
Covering household responsibilities for each other	75	76	72	78
Leaving work-related problems at work	51	48	51	52
Modifying the work schedule	22	25	22	26
Relying on extended family for help	23	26	33	34
Relying on friends for help	16	14	18	18
Planning work changes around family needs	30	35	31	40
Identifying one partner as primarily responsible for household tasks	29	36	29	30
Buying more goods and services	39	40	47	48
Encouraging children to help each other	-	70	-	73
Trying to be flexible	71	78	73	79
Cutting down on outside activities	47	55	55	65
Limiting job involvement to allow time for family	28	35	38	45

Table 22: Use of Family Coping Strategies

b. Gender by Job Type

Family Coping Strategies		% Who Use F	requently	
	Ma	les	Females	
	Mgr/Prof	Other	Mgr/Prof	Other
Get by on less sleep that I would like	55	48	61	53
Leave some things undone around the house	74	67	86	78
Get the children to help with household chores	49	48	58	56
Plan family time together	43	41	55	49
Hire help to care for elderly relatives	22	20	28	27
Hire help to care for the children	35	32	56	45
Covering household responsibilities for each other	78	75	75	66
Leaving work-related problems at work	45	55	45	56
Modifying the work schedule	26	20	26	22
Relying on extended family for help	25	24	36	32
Relying on friends for help	14	16	19	17
Planning work changes around family needs	45	32	43	35
Identifying one partner as primarily responsible for household tasks	34	31	31	28
Buying more goods and services	42	35	55	42
Encouraging children to help each other	68	70	72	71
Trying to be flexible	77	72	79	74
Cutting down on outside activities	56	47	66	52
Limiting job involvement to allow time for family	32	32	42	39

Women more likely than men to attempt to cope by sacrificing personal needs

Regardless of the type of job they hold, or the dependent care responsibilities they have, women were more likely than men to try to cope with work–life issues by putting their own needs second and purchasing supports from outside the family. They were more likely than men to engage in all the strategies in the "sacrifice personal needs" (get by on less sleep, leave some things undone around the house, cut down on outside activities, buy more goods and services) and purchase supports from outside the family (hire help to care for elderly relatives and for children). Women were also significantly more likely than men to:

- get the children to help with household chores
- plan family time together
- rely on extended family for help
- limit job involvement to allow time for family

It is interesting to note that there are no strategies that are more likely to be used by men than women across both job type and dependent care status.

Managers and professionals more likely to cope by putting family first and sacrificing their own personal life

Managers and professionals, regardless of their gender and their dependent care status, are more likely to try to cope by modifying their work schedule (it will be recalled that this group is more likely to use flexible work arrangements) and plan work changes around family needs. These findings may reflect the fact that highly educated managers and professionals have more ability to negotiate such things with their employer than those in other positions in the organization.

Managers and professionals more likely to cope by sacrificing their own personal life

Managers and professionals are more likely than those in other positions to cope by sacrificing personal needs. They get by on less sleep, leave things undone around the house, buy more goods and services (female managers and professionals in particular are likely to use this strategy) and cut down on outside activities. These findings are consistent with the fact that employees in this group have heavier work demands. Given the fact that the hours in a day remain constant, these findings suggest that employees in this group have to sacrifice time that they would typically spend on socializing and sleeping to meet work and family demands. Consistent with these findings is the fact that managers and professionals are more likely to say that they cope by "trying to be flexible."

Employees in other positions are more likely to cope by making a conscious effort to separate work and family

Those in other positions in the organization are more likely than managers and professionals to indicate that they cope with work and family issues by leaving work-related problems at work and covering household responsibilities for each other. That being said, it should be noted that women in other positions within the organization were significantly less likely to use this strategy than their male counterparts.

Employees with dependent care cope by putting family first and sacrificing personal needs

Men and women with dependent care are more likely than those without dependent care to cope by engaging in strategies that put family first and sacrificing personal needs. Specifically, with respect to sacrificing personal needs, they:

- leave some things undone around the house
- get by on less sleep
- cut down on outside activities

In all three cases, it is important to note that these differences can be attributed to the fact that women with dependent care responsibilities are more likely to use this strategy than their male counterparts. There were no gender differences in the use of these strategies for those without dependents.

Employees with dependent care were also more likely to:

- plan work changes around family needs
- limit job involvement to allow time for family
- try to be flexible
- identify one partner as primarily responsible for household tasks

Again, there are a number of significant gender differences within these findings that are important to note. Women with dependents are more likely to plan work changes around their family and limit their job involvement to allow time for their family than their male counterparts. Men with dependents, on the other hand, are more likely to identify one partner (their spouse) as having primary responsibility for the family. No such gender differences in use were apparent for employees without dependents.

These findings are interesting as they suggest that women are still the ones who are expected to (and perhaps want to) sacrifice personal career goals for their family. These findings are also consistent with the fact that women still earn less than men, even when job type is controlled for, and suggest that this situation will not change until the family role is more equitably shared.

5.2 Coping with Work–Life Conflict: What Should Families Do?

As noted above, Canadian employees use a number of family-based strategies to cope with the different forms of work-life conflict. We now turn to the question of which strategies are effective at helping employees cope with work-life conflict and which are not. To answer this question, we looked at the relationship between each of the 18 family coping strategies and the four forms of work-life conflict included in this study. To determine if different strategies are effective for different groups, the analysis was done twice. The first focused on gender and dependent care status while the second looked at the impact of gender and job type on the relationship between coping and work-life conflict. The complete set of findings is provided in Appendix G. Key findings (R2 of .04 or higher, α < than .01, Δ in work-life conflict of 0.3 or greater) are summarized in Tables 23 and 24 and discussed in the section below. Information on how to read Tables 23 and 24 was shown earlier in Box Nine.

Table 23: Impact of Family Coping Strategies on Work-Life Conflict: Gender by Dependent Care

a. Main Effects

	Overload	Work to Family	Family to Work	Caregiver Strain
Get by on less sleep	$F = 366.2$, $\alpha = .000$	$F = 88.1$, $\alpha = .000$	$F = 79.1$, $\alpha = .000$	$F = 18.1$, $\alpha = .000$
than I would like	$R^2 = .161, \ \Delta = .8$	$R^2 = .121, \ \Delta = 1.0$	$R^2 = .047, \Delta = .5$	$R^2 = .049, \ \Delta = .3$
Leave things undone a	Interaction	$F = 188.1$, $\alpha = .000$	$R^2 = .028$	$R^2 = .032$
round house		$R^2 = .072, ***$		
Get children to help	$R^2 = .043 *$	$R^2 = .028$	$R^2 = .013$	$R^2 = .030$
Plan family time together	$R^2 = .034$	$R^2 = .006$	$R^2 = .012$	$R^2 = .038$
Hire help to care for	$R^2 = .042 *$	$R^2 = .013$	$R^2 = .024$	$F = 20.9$, $\alpha = .000$
elderly relatives				$R^2 = .072, \ \Delta = .5$
Hire help to care for children	$F = 4.2$, $\alpha = .01$	$R^2 = .015$	$F = 19.9, \ \alpha = .000$	$R^2 = .041 *$
	$R^2 = .055 ***$		$R^2 = .065$, $\Delta = .5$	
Cover household tasks	$F = 12.5$, $\alpha = .001$	$R^2 = .009$	$R^2 = .015$	$F = 5.2$, $\alpha = .005$
for each other	$R^2 = .048, \Delta =4$			$R^2 = .041, \ \Delta =3$
Leave work problems at work	Interaction	Interaction	$R^2 = .018$	$R^2 = .045 *$
Modify work schedule	$F = 49.9$, $\alpha = .000$	$F = 53.3$, $\alpha = .000$	$R^2 = .026$	$R^2 = .043 *$
	$R^2 = .061, \ \Delta =3$	$R^2 = .040, \ \Delta =3$		
Rely on extended family for help	$R^2 = .038$	$R^2 = .012$	$R^2 = .023$	Interaction
Rely on friends for help	$R^2 = .034$	$R^2 = .009$	$R^2 = .022$	Interaction
Plan work changes around family	$R^2 = .046 **$	$R^2 = .008$	$R^2 = .017$	$R^2 = .028$
Identify one partner as having primary responsibility for household tasks	$R^2 = .036$	$R^2 = .014$	$R^2 = .020$	$R^2 = .038$
Buy goods and services	Interaction	$R^2 = .037$	$R^2 = .022$	$R^2 = .044 *$
Encourage children to help each other	$R^2 = .036$	$R^2 = .005$	$R^2 = .013$	$R^2 = .030$

Family Coping Strategies	Overload	Work to Family	Family to Work	Caregiver Strain
Try to be flexible	$R^2 = .034$	$R^2 = .010$	$R^2 = .014$	$R^2 = .041 *$
Cut down on outside activities	F = 141.2, α = .000 R ² = .092, Δ = .5	F = 146.7, α = .000 R ² = .069, Δ = .6	F = 45.1, α = .000 R ² = .040, Δ = .4	$F = 7.7$, $\alpha = .003$ $R^2 = .044$, $\Delta = .3$
Limit job involvement to allow time for family	$R^2 = .039$	$R^2 = .017$	$R^2 = .036$	$R^2 = .040 *$

b. Significant Interactions

	Overload	Work to Family	Family to Work	Caregiver Strain
Leave things undone around house	$F = 3.2$, $\alpha = .004$ $R^2 = .111$	ns	ns	ns
Leaving work problems at work	$F = 5.4$, $\alpha = .000$ $R^2 = .110$	$F = 2.6$, $\alpha = .01$ $R^2 = .163$	ns	ns
Relying on extended family for help	ns	ns	ns	$F = 5.1$, $\alpha = .000$ $R^2 = .044$
Relying on friends for help	ns	ns	ns	$F = 2.7$, $\alpha = .01$ $R^2 = .045$
Buying more goods and services	$F = 3.0, \ \alpha = .007$ $R^2 = .066$	ns	ns	ns

Table 24: Impact of Family Coping Strategies on Work–Life Conflict: Gender by Job Type

a. Main Effects

	Overload	Work to Family	Family to Work	Caregiver Strain
Get by on less sleep than I would like	$F = 495.6$, $\alpha = .000$	$F = 451.1$, $\alpha = .000$	$R^2 = .036$	$R^2 = .037$
	$R^2 = .147, \Delta = .8$	$R^2 = .134$, $\Delta = .9$		
Leave things undone around house	$F = 293.5$, $\alpha = .000$	Interaction	$R^2 = .018$	$R^2 = .032$
	$R^2 = .110, \Delta = 0.7$			
Get children to help	$R^2 = .043 *$	$R^2 = .028$	$R^2 = .012$	$R^2 = .024$
Plan family time together	$R^2 = .034$	$R^2 = .025$	$R^2 = .007$	$R^2 = .030$
Hire help to care for elderly relatives	Interaction	$R^2 = .021$	$R^2 = .031$	Interaction
Hire help to care for children	$F = 14.3, \ \alpha = .01$	$R^2 = .027$	$F = 47.7$, $\alpha = .000$	$R^2 = .033$
	$R^2 = .058 ***$		$R^2 = .056$, $\Delta = .7$	
Cover household tasks for each other	$F = 18.8$, $\alpha = .000$	$R^2 = .033$	$R^2 = .006$	$R^2 = .029$
	$R^2 = .042, \Delta =3$			
Leave work problems at work	Interaction	$F = 550.7$, $\alpha = .000$	$R^2 = .007$	$R^2 = .033$
		$R^2 = .171, \Delta = -1.0$		
Modify work schedule	Interaction	Interaction	$R^2 = .015$	$R^2 = .030$
Rely on extended family for help	Interaction	$R^2 = .033$	$R^2 = .014$	$R^2 = .031$
Rely on friends for help	$R^2 = .032$	$R^2 = .030$	$R^2 = .012$	$R^2 = .030$
Plan work changes around family	$R^2 = .039$	$R^2 = .031$	$R^2 = .017$	$R^2 = .028$
Identify one partner as having primary responsibility for household tasks	R ² = .040 **	R ² = .041 **	$R^2 = .010$	$R^2 = .031$
Buy goods and services	$F = 83.2$, $\alpha = .000$	$R^2 = .056, \Delta = .3$	$F = 83.2$, $\alpha = .000$	
	R2 = .050, Δ = .5	R2 = .011	R2 = .031	

Family Coping Strategies	Overload	Work to Family	Family to Work	Caregiver Strain
Encourage children to help each other	$R^2 = .042 *$	$R^2 = .026$	$R^2 = .011$	$R^2 = .022$
Try to be flexible	$R^2 = .032$	$R^2 = .031$	$R^2 = .003$	$R^2 = .027$
Cut down on outside activities	$F = 186.3$, $\alpha = .000$ $R^2 = .081$, $\dot{E} = 0.5$	Interaction	$R^2 = .019$	$R^2 = .031$
Limit job involvement to allow time for family	$R^2 = .041$	Interaction	$R^2 = .029$	$R^2 = .029$

b. Significant Interactions

Family Coping Strategy	Overload	Work to Family	Family to Work	Caregiver Strain
Leave things undone around house	ns	$F = 3.4$, $\alpha = .0030$ $R^2 = .189$	ns	ns
Hire help to care for elderly relatives	ns	ns	ns	$F = 3.1$, $\alpha = .007$ $R^2 = .074$
Leave work problems at work	$F = 1.7$, $\alpha = .01$ $R^2 = .043$	ns	ns	ns
Modify work schedule	$F = 2.7$, $\alpha = .01$ $R^2 = .053$	$F = 4.4, \ \alpha = .01$ $R^2 = .055$	ns	ns
Rely on extended family for help	$F = 2.8, \ \alpha = .01$ $R^2 = .041$	ns	ns	ns
Cut down on outside activities	ns	$F = 3.2$, $\alpha = .002$ $R^2 = .075$	ns	ns
Limit job involvement to allow time for family	$F = 2.8, \ \alpha = .009$ $R^2 = .041$	ns	ns	ns

Employees engage their family in a wide variety of strategies to cope with high role overload

Use of just over half (55%) of the family coping strategies examined in this study can be meaningfully linked to the incidence of role overload. In all but three of these cases (modify work schedule, hire help to care for the children, and cover household tasks for each other), the higher the level of role overload, the greater the use of the coping strategy (i.e. positive association between use of coping and overload). The following coping strategies are associated with increased rather than decreased levels of role overload (i.e. greater use associated with higher levels of role overload) regardless of gender, job type or dependent care status:

- cut back on sleep ($\Delta = +0.8$)
- cut back on outside activities ($\Delta = +0.5$)

The following coping strategies appear to help employees cope with role overload (i.e. there is a negative association between the use of the strategy and role overload) regardless of gender, job type or dependent care status:

- cover household and family tasks for each other ($\Delta = -0.4$)
- modify the work schedule ($\Delta = -0.3$)

The relationship between role overload and hiring help to care for children is curvilinear. Employees who use this strategy moderately often report lower levels of role overload than their counterparts who use it rarely or often. This finding may be because many of the employees who require only part-time care for their children work part time.

Leaving things undone around the house is positively associated with higher levels of role overload ($\Delta = +0.7$) for both men and women when job type is taken into account.

The relationship between role overload and the use of five of the family coping strategies, while significant, is also quite complex. In two of the cases, hire help to care for elderly dependents and rely on extended family for help, the relationship depends on both the gender and the job type of the employee. In the other three cases, leave things undone around the house, leave work-related problems at work and buy goods and services, the relationship varies depending on the gender of the employee, their job type and their dependent care situation. Details on these relationships are given below.

Closer examination of these data indicate that employees attempt to cope with role overload by sacrificing personal needs (getting less sleep, leaving things undone around house, cutting down on leisure) and making a conscious decision to put their family first (which may hurt their career progression if they work for a firm with a culture of hours). In others words, as role overload increases, employees attempt to cope (and do it all) by distributing their time differently. As such, high levels of role overload can negatively impact either personal time and/or time devoted to work.

Strategies that facilitate separation between work and family domains help employees cope with work-to-family interference

Use of just under half (44%) of the family coping strategies examined in this study can be meaningfully linked to the occurrence of work-to-family interference. One coping strategy in particular stands out as having a strong positive association with this form of interference: getting by on less sleep. Greater use of this coping strategy is strongly associated with the increased incidence of work-to-family interference ($\Delta = +1.0$) for employees regardless of their gender, their job type or their dependent care status.

The other significant relationships between family coping strategies and work-to-family interference are more complex, as the impact of the strategy on this form of interference often varies depending on gender, job type and/or the dependent care status of the individual. While many of these relationships are discussed in more detail below, they are summarized here for ease of reference.

When gender and dependent care status are taken into account, the following relationships can be observed:

- Cutting down on outside activities is positively associated with work-to-family interference ($\Delta = +.6$).
- Modifying work schedules is negatively associated with work-to-family interference ($\Delta = -.3$).
- There is a curvilinear relationship between work-to-family interference and two family coping strategies, leave things undone around the house and relying on extended family for help (i.e. moderate use of these strategies is associated with lower work-to-family interference), while low and high use is associated with greater interference.

In all four cases, these relationships can be observed regardless of gender and dependent care. The same cannot be said with respect to the relationship between a fifth coping strategy, leave work problems at work, and this form of work–life conflict. In this case, to understand the impact of the strategy on work-to-family interference, we need to look at both gender and dependent care status.

When gender and job type are taken into account, the following relationships can be observed:

- Buying more goods and services is positively associated with work-to-family interference ($\Delta = +.5$).
- Leaving work-related problems at work is negatively associated with work-to-family interference (Δ = -1.0).
- Covering family responsibilities for each other is negatively associated with work-to-family interference ($\Delta = -.3$).

In all three of these cases, these relationships can be observed regardless of gender and job type. The data also reveal three other coping techniques whose relationship with work-to-family interference depends on both gender and job type. These involve cutting down on outside activities, leaving things undone around the house and modifying the work schedule.

These findings are similar to those observed for role overload in that employees use a comparable set of strategies to deal with both forms of work–life conflict: sacrifice personal needs and make a conscious decision to put family first.

Employees purchase help from outside the family in an attempt to cope with family-to-work interference

Employees use a much more selective group of family-related coping strategies to cope with family-to-work interference than was observed in the analysis dealing with role overload and work-to-family interference (significant relationships between only 3 of the 18 strategies and family-to-work interference). Employees try to cope with family-to-work interference by:

- Getting less sleep ($\Delta = +.5$)
- Hiring help to care for the children ($\Delta = +.5$)
- Cutting down on outside activities ($\Delta = +.4$)

Use of only one of these strategies (getting by on less sleep) was significant in both the gender by job type and gender by dependent care analyses. The other two were significant only when dependent care status was taken into account.

The data suggest that these Canadians purchase help from outside the family and sacrifice personal needs to ease family-to-work interference.

The way that employees try to cope with caregiver strain depends on their work and non-work circumstances

The use of just over one in three (38%) of the family coping strategies was significantly associated with caregiver strain. In all but one case (getting by on less sleep), the link between use of the coping strategy and caregiver strain varied depending on the gender, dependent care status and job type of the individual. Again, while details on each of these relationships are discussed in more detail later in this report, they are summarized here for ease of reference.

Caregiver strain is positively associated with the use of the following coping strategies:

- Getting by on less sleep and leaving things undone around the house were significant in both the gender by job type and gender by dependent care analysis.
- Hiring help to care for elderly dependents, cutting down on outside activities, and covering household activities for each other were significant in the gender by job type analysis.
- Relying on extended family for help and relying on friends for help were significant in the gender by dependent care analysis.

Restructuring family roles is not an effective way to cope with work-life conflict

Employees who try to cope with work–life conflict by restructuring their family roles engage in five activities. They encourage their children to help each other, get their children to help with household tasks, cover household responsibilities for each other, try to be flexible and plan family time together. Unfortunately, with one exception (covering household tasks for each other), none of these strategies are significantly associated with any of the forms of work–life conflict. In other words, restructuring family roles is not generally an effective way to cope with work and family. These findings are unfortunate as the coping strategies included in this grouping are used by the majority of Canadian families.

That being said, one of the strategies within this group, cover household responsibilities for each other, is negatively associated with three of the four types of work–life conflict under the following circumstances:

- Men and women in families where partners cover household responsibilities for each other report lower levels of role overload ($\Delta = -.4$) and caregiver strain ($\Delta = -.3$) when dependent care is taken into account.
- Men and women in families where partners cover household responsibilities for each other report lower work-to-family interference when job type is taken into account ($\Delta = -.3$).

Employees who cope by putting their family first are more able to balance work-life conflict

Approximately one in three of the respondents copes by making a conscious effort to separate their work and family roles and giving time to their family. They do this by limiting their job involvement to give time to family, modifying their work schedule (i.e. using alternative work arrangements), planning work changes around their family needs, and leaving work problems at work. The data are clear—such strategies help employees cope with role overload and work-to-family interference.

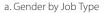
$Leaving\ work-related\ problems\ at\ work\ helps\ employees\ cope\ with\ role\ overload\ and\ work-to-family\ interference$

The relationships between leaving work-related problems at work and role overload and work-to-family interference are two of the strongest observed in this phase of the analysis. The relationship between work-to-family interference and this coping strategy is straightforward in the gender by job type analysis (interference decreases by -1.0 as the use of this strategy increases from rarely to often). The same cannot be said, however, of the relationship between leaving work problems at work and role overload, which depends on both job type (Figure 54a) and dependent care status (Figure 54b). Similarly, the relationship between this strategy and work-to-family interference varies when dependent care is taken into account (Figure 55). The following conclusions can be drawn from the examination of these figures:

- The use of this coping strategy is negatively associated with role overload and work-to-family interference for both men and women, regardless of job type or dependent care status (i.e. the more the employee uses this strategy, the less the overload).
- This is an effective coping strategy for all employees.
- While this is an effective strategy for both men and women, it seems to be more effective for men than for women. For example, when dependent care status is taken into account, this strategy is associated with a greater reduction in both role overload (decrease of -.8 for men compared to -.5 for women) and work-to-family interference (decrease of -1.2 for men compared to -.8 for women) for men than for women. Similar results are obtained when job type is taken into account (decrease in role overload of -0.7) for men compared to -.4 for women).

These findings are very reassuring since half the respondents use this strategy to cope with work and family. The lower levels of role overload and work-to-family interference associated with this strategy are likely because employees who practise this coping strategy are less likely to bring work home to complete after hours and more likely to be available, both physically and mentally, to their family when they are at home.

Figure 54: Relationship Between Leave Work Problems at Work and Role Overload



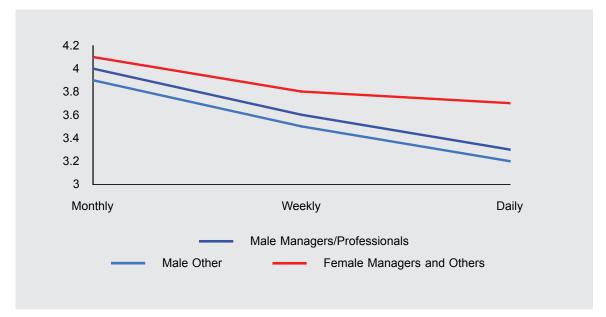


Figure 54: Relationship Between Leave Work Problems at Work and Role Overload

b. Gender by Job Type

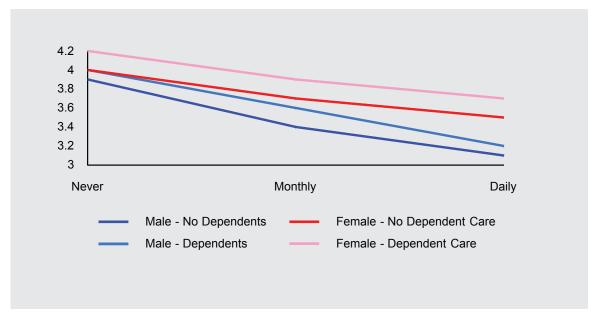
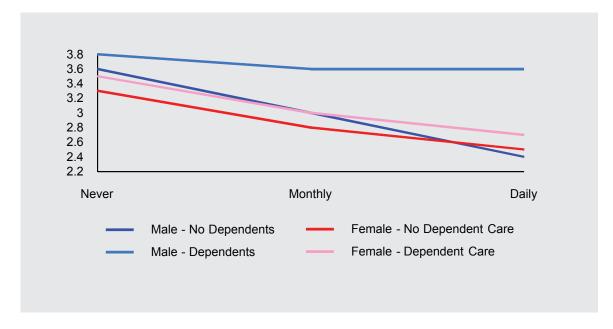


Figure 55: Relationship Between Leave Work Problems at Work and Work-to-Family Interference: Gender by Dependent Care Analysis



Employees who modify their work schedules to accommodate their personal life are more able to cope with role overload and work-to-family interference

When dependent care status is taken into account, the relationship between this coping strategy and work-life conflict is fairly straightforward. Both men and women who use this strategy moderately often report lower levels of role overload and work-to-family interference ($\Delta = -0.3$) than their counterparts who rarely modify their work schedule. Greater use does not give any benefit with respect to greater balance above what is realized with moderate use.

As can be seen in Figure 56, however, the relationship between the use of this coping strategy and both role overload and work-to-family interference depends on both job type and gender.

This strategy is associated with a decline in role overload for men in management and professional positions ($\Delta=-0.4$) but not for men in other positions. For women, the relationship between the use of this strategy and role overload is "u" shaped, as moderate use of this strategy is associated with a decline in role overload for both groups of women ($\Delta=-0.4$ for female managers and professionals, $\Delta=-0.3$ for women in other positions) while frequent use results in an increase of role overload ($\Delta=+0.2$ for female managers and professionals and $\Delta=+0.1$ for females in other positions), from the level of overload reported with moderate use of this strategy. These findings may be because women who can easily modify their work schedule are expected to pick up extra burdens at home.

As can be seen by examining Figure 56b, modification of a work schedule is associated with lower levels of work-to-family interference for three of the four groups in the study: male managers and professionals and female managers and professionals (Δ = -0.4) and males in other positions (Δ = -0.2). It is interesting to note that this decline in interference is realized with moderate use of this strategy. No additional gains are gained through daily use. The relationship between this strategy and interference for women in other positions, however, follows the same "u"-shaped function as observed in the dependent care status analysis. In this case, substantive decreases in work-to-family interference can be observed with moderate use of this strategy (Δ = -.4). Frequent use of this strategy is, however, associated with increased levels of interference (Δ = +.3 from the level of interference reported with moderate use of this strategy). This suggests that women in other positions with children who frequently modify their work arrangements to accommodate family demands end up with more, rather than less, work-to-family interference—perhaps because they are worried about the results such behaviour will have on their performance at work or their job security.

Employees who wish to reduce role overload and work-to-family interference should consider limiting their job involvement to allow more time for the family

Just over one in three (37%) of the respondents to this survey consciously place limits on how involved they become with their job in order to be able to spend more time with their family. Women, regardless of job type, are more likely than men to use this coping strategy. While this strategy may have negative repercussions (i.e. employee labelled as less committed and loyal to job) when used on a daily basis, it is an effective way to cope with two of the four forms of work–life conflict, role overload and work-to-family interference, when used moderately. This conclusion is supported by the following relationships.

- The relationship between role overload and the use of this coping strategy can best be described as "u" shaped. Moderate use of this strategy (i.e. limit job involvement to spend time with family on a weekly basis) is associated with lower role overload ($\Delta = -0.3$) while daily use is associated with increased role overload ($\Delta = +0.3$), from role overload reported at moderate use.
- The relationship between limit one's job involvement to spend time with family and work-to-family interference is also "u" shaped for three out of the four groups in the study (Figure 57). The exception is female managers and professionals, who do not experience a rise in interference, when use of this strategy increases. These findings indicate that this coping mechanism is one that female managers and professionals, in particular, use to cope with work-to-family interference.

Figure 56: Relationship Between Modify Work Schedule and Work–Life Conflict

a. Role Overload

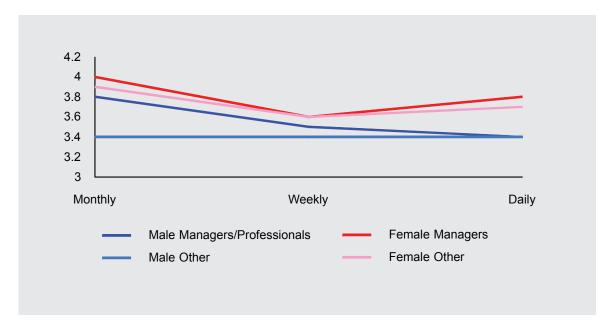


Figure 56: Relationship Between Modify Work Schedule and Work–Life Conflict

b. Work-to-Family Interference

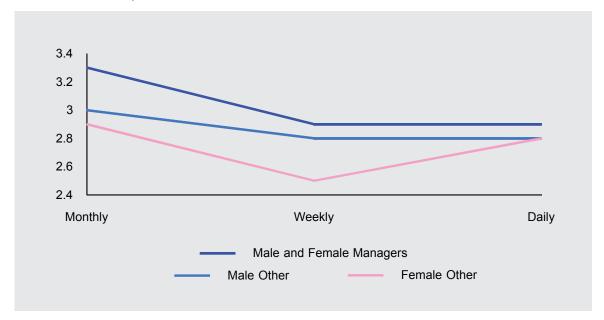
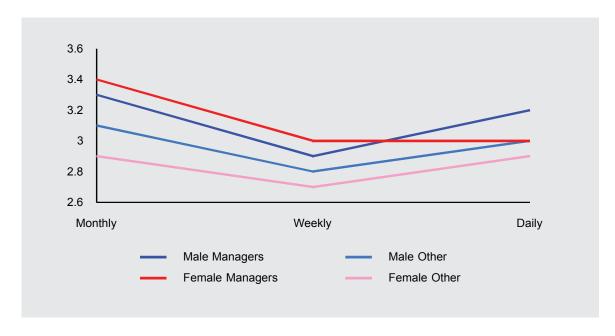


Figure 57: Relationship Between Limit Job Involvement and Work-to-Family Interference: Gender by Job Type Analysis



Finally, it is interesting to note that both of these relationships were significant only when job type is taken into account. This is consistent with the fact that this strategy appears to be much more effective for women in managerial and professional positions than for other types of employees.

Employees who try to cope by sacrificing personal needs experience higher work-life conflict

Employees who attempt to cope with work-life conflict by leaving things undone around the house, getting less sleep, cutting down on outside activities and buying goods and services report significant higher levels of all four forms of work-life conflict than their counterparts who do not sacrifice personal needs in an attempt to "do it all." An examination of the data in Tables 23 and 24 indicate the following:

- All of the coping strategies included in this group have a strong positive association with role overload
 and work-to-family interference.
- These strategies have no association with family-to-work interference and caregiver strain when gender and job type are taken into account.
- There is a significant positive relationship between the use of these strategies and caregiver strain and work-to-family interference when dependent care is taken into account.
- Buying goods and services is not associated with role interference and caregiver strain (only role overload).

Details on the relationship between each of these strategies and work-life conflict are provided below.

Cutting back on sleep makes things worse

Employees who try to cope with work–life conflict by cutting back on their sleep report substantially higher levels of all forms of work–life conflict, regardless of gender, job type and dependent care status. In fact, this coping mechanism, on its own, explains up to 16% of the variation in role overload and 13% of the variation in work-to-family interference. In addition, the difference in work–life conflict between those employees who rarely use this strategy compared to those who use it frequently is among the highest observed in this study. Employees who use this strategy experience higher:

- Role overload ($\Delta = +0.8$)
- Work-to-family interference ($\Delta = +1.0$)
- Family-to-work interference ($\Delta = +0.5$)
- Caregiver strain ($\Delta = +0.3$)

It is hard to determine the causality of these findings. It may be that the act of cutting back on sleep leads to increased work–life conflict. Alternatively, it may be that as levels of work–life conflict increase, employees give up sleep in an attempt to do it all. It is also possible that employees are caught in a cycle where they give up on sleep to cope with work and family demands, which in turn exacerbates their conflict by decreasing their ability to perform work and family roles effectively. While further longitudinal research needs to be done in this area to help clarify this relationship, it is safe to conclude that the use of this strategy does not offer employees any relief from work–life conflict.

Cutting down on outside activities is not associated with lower work-life conflict

There is a strong positive relationship between cutting back on outside activities and increased incidence of all four forms of work–life conflict. The relationship between the use of this coping strategy and work–life conflict is fairly straightforward when both gender and dependent care status are taken into account. In all cases, there is little difference in the work–life conflict experienced by someone who engages in this coping strategy infrequently and someone who engages in it moderately often. The situation changes dramatically, however, when one compares the work–life conflict reported by someone who uses the strategy moderately and someone who uses it often. In such circumstances, role overload increases by +0.5, ⁴⁷ work-to-family interference increases by +0.6, family-to-work interference increases by +0.4 and caregiver strain increases by +0.3.

The relationship between work-to-family interference and cut back on outside activities, by gender and job type, is shown in Figure 58. From this figure, it can be seen that this coping strategy is positively associated with increased interference between work and family for three of the four groups under consideration: male managers and professionals ($\Delta = +0.6$), males in other positions ($\Delta = +0.5$). The impact is, however, different for female managers and professionals. In this case, moderate use of this strategy is associated with lower levels of work-to-family interference ($\Delta = -0.2$), while higher use is linked to increased levels of interference ($\Delta = +0.5$ from moderate to high use). Again, while we cannot determine the direction of causality (i.e. are people with high conflict less likely to have time to engage in activities or do they deliberately cut back in an attempt to cope), we can say that this coping strategy does not appear to be effective except when used moderately by female managers and professionals.

Leaving things undone around the house does provide relief from work-to-family interference when used in moderation

With one exception (work-to-family interference), the relationship between leaving things undone around the house and work–life conflict is fairly straightforward. In all cases, there is a strong positive association between the use of this strategy and increased conflict regardless of gender or job type. Employees who leave things undone around the house experience increased role overload ($\Delta = +0.7$), family-to-work interference ($\Delta = +0.5$) and caregiver strain ($\Delta = +0.3$).

As can be seen in Figure 59b, the relationship between the use of this coping strategy and work-to-family interference depends on both gender and job type. For men, the use of this strategy is positively associated with work-to-family interference (Δ = +0.4). In other words, at higher levels of work-to-family interference, men, regardless of job type, are more likely to cope by leaving things around the house undone. The relationship for women is very different. The relationship can best be described as "u" shaped. Moderate use of this strategy is associated with lower interference, but daily use is associated with increased interference. While this relationship holds for all women in the sample, the extent to which it applies varies strongly with job type. For women in management and professional positions, moderate use of this strategy is associated with a substantive drop in interference (Δ = -0.3) while daily use is associated with a very large increase in interference (Δ = +0.8 from the level of interference reported at moderate use). The impact of this strategy is not as dramatic for women in other positions, whose interference levels demonstrate only a minor drop (Δ = -0.1) with moderate use of this strategy. Similarly, the increase in interference between moderate and high use is only half as high as could be observed for counterparts in managerial and professional jobs (Δ = 0.4).

⁴⁷This result can also be observed in the gender by job type analysis.

The relationship between leaving things undone around the house and work–life conflict for men and women with dependent care is not as straightforward. As can be seen by examining Figure 59a, there is a positive relationship between the use of this coping strategy and role overload for three out of four groups in this analysis ($\Delta = +0.8$ for all three). For women with dependents there is a different pattern. When this strategy is used in moderation (i.e. weekly), it seems to help with role overload (i.e. no increase in role overload noted between low and moderate use of the strategy). However, when done on a daily basis, it is associated with higher role overload ($\Delta = +0.5$). This suggests that this strategy provides more relief from role overload for women with dependent care than for other types of employees, but only if used in moderation.

The relationships between two forms of work–life conflict (work-to-family interference and caregiver strain) and leaving things undone around the house are "u" shaped. Moderate use of this strategy is associated with lower work-to-family interference (Δ = -0.1), but daily use is associated with increased interference (Δ = +0.7 from work-to-family interference reported at moderate use). Similarly, moderate use of this strategy is associated with lower caregiver strain (Δ = -0.1), but daily use is associated with increased caregiver strain (Δ = +0.3), from caregiver strain reported at moderate use.

Purchasing goods and services does not reduce work-life conflict

It appears that employees cannot buy balance. The use of this coping strategy was not associated with either caregiver strain or family-to-work interference. While it was linked to increased role overload and work-to-family interference, the relationship is positive (i.e. the greater the overload and interference, the more one purchases goods and services in an effort to cope). In the gender and job type analysis, the relationship is fairly straightforward—increased use is associated with greater role overload ($\Delta = +0.3$) and interference ($\Delta = +0.3$). The relationship between role overload and purchasing goods and services is slightly more complex in the dependent care analysis. In this case, while the use of this strategy is still positively associated with increased levels of role overload, regardless of dependent care status, the impact on men is greater ($\Delta = +0.4$) than it is on women ($\Delta = +0.3$).

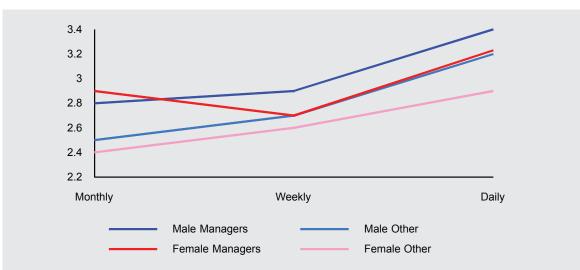


Figure 58: Relationship Between Cut Back on Outside Activities and Work-to-Family Interference: Gender by Job Type Analysis

Figure 59: Relationship Between Leave Things Undone Around the House and Work–Life Conflict

a. Role Overload (Gender by Dependent Care Analysis)

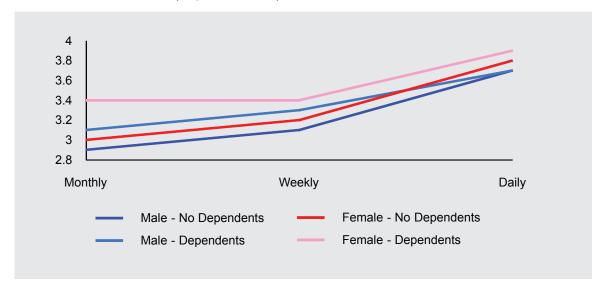
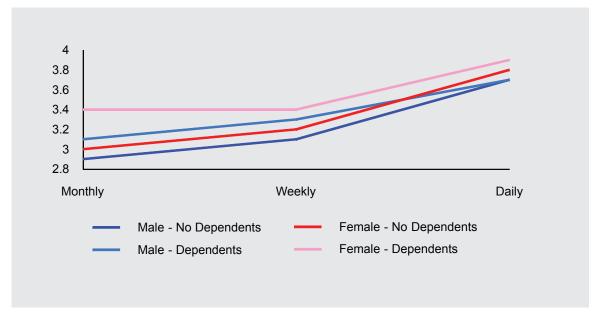


Figure 59: Relationship Between Leave Things Undone Around the House and Work–Life Conflict

b. Work-to-Family Interference (Gender by Job Type Analysis)



Moderate reliance on support from extended family helps women cope with role overload

Two coping strategies were included in the social support grouping: rely on extended family for help, and rely on friend for help. These coping strategies do not help employees cope with two of the four forms of work–life conflict (interference from work to family and from family to work). They do, however, when used moderately, seem to help women cope with role overload (when job type is taken into account) and caregiver strain.

The relationship between role overload and reliance on one's extended family for help is shown in Figure 60. The relationship between this strategy and role overload depends very much on gender. For men, regardless of job type, role overload increases substantially ($\Delta = +0.2$) as one moves from moderate use of this strategy to high use. This suggests that either this strategy does not help men cope with role overload and/or that they do not seek help from their family until their levels of role overload are very high. The situation with women is very similar to what was observed with respect to modify work schedule, limit job involvement and leave things undone around the house (i.e. the relationship is "u" shaped). Female managers who use this strategy moderately often experience a decline in role overload of -0.4, which is slightly greater than the decline enjoyed by females in other positions ($\Delta = -0.3$). For both groups of women, role overload increases of 0.3 can be observed between moderate use and high use.

Social support helps women with dependent care cope with caregiver strain

The results indicate that both forms of social support examined in this phase of the analysis help women with dependent care cope with caregiver strain. Unfortunately, the same cannot be said for men with dependent care responsibilities (Figure 61). For women, caregiver strain is negatively associated with their ability to rely on extended family ($\Delta = -0.3$) and friends ($\Delta = -0.2$) for help. For men with dependent care responsibilities, the use of these strategies is positively associated with caregiver strain ($\Delta = +0.2$).

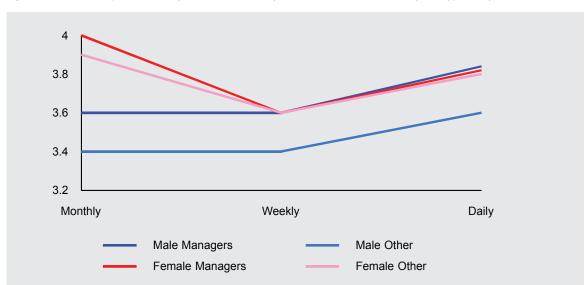


Figure 60: Relationship Between Rely on Extended Family and Role Overload: Gender by Job Type Analysis

Figure 61: Relationship Between Use of Social Support and Caregiver Strain: Gender by Dependent Care Analysis

a. Rely on extended family for Help

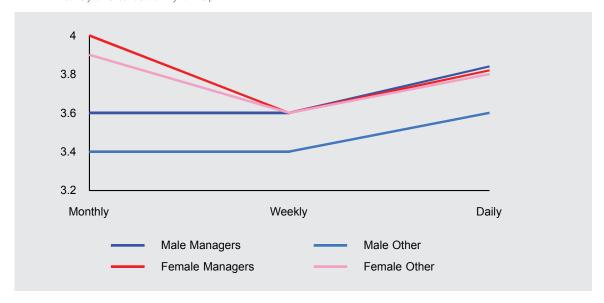
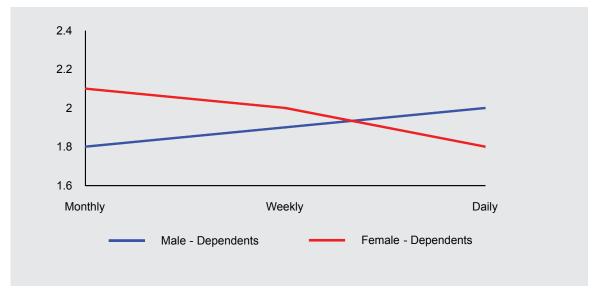


Figure 61: Relationship Between Us eof Social Support and Caregiver Strain: Gender by Dependent Care Analysis

b. Rely on Friends for Help



Employees with high levels of overload and family-to-work interference are more likely to cope by hiring help from outside the family

Forty percent of the respondents cope with work-life conflict by hiring help to care for their children and one in four hires help to care for elderly dependents. There is a substantive relationship between the use of both of these strategies and three forms of work-life conflict: role overload, family-to-work interference and caregiver strain. The relationship between family-to-work interference and these strategies is straightforward (positive association between use of these strategies and family-to-work interference for both men and women, regardless of job type). The relationship between the use of these strategies and role overload/caregiver strain is not as clear.

Hiring help to care for one's children is associated with a drop in role overload when used moderately

The relationship between role overload and hiring help to care for children is "u" shaped. Moderate use of this strategy (i.e. once or twice a week) is associated with lower levels of role overload than seen when an employee uses no outside help (Δ = -0.2), while daily use is associated with increased role overload (Δ = +0.3) from role overload reported at moderate use. This relationship was observed for both men and women, regardless of job type.

Hiring help to care for elderly dependents appears to help men and women in managerial and professional positions cope with role overload

The relationship between role overload and hiring help to care for elderly dependents is shown in Figure 62. This strategy appears to help men and women in managerial and professional positions cope with role overload (i.e. overload levels remain stable at higher levels of use). Unfortunately, this strategy does not appear to be as effective for men and women in other positions in the organization, who report a positive relationship between role overload and the use of this strategy ($\Delta = +0.3$). These findings may reflect the fact that managers and professionals are able to afford more flexible, better quality care.

Hiring help to care for elderly dependents, when used moderately, helps women cope with caregiver strain

The relationship between hiring help to care for elderly dependents and caregiver strain depends on both gender and job type (Figure 63). For men, the use of this strategy is positively associated with caregiver strain ($\Delta = +0.4$ for men in managerial and professional positions, $\Delta = +0.5$ for men in other positions). In other words, at higher levels of caregiver strain, men are more likely to cope by hiring help to care for their elderly dependents. Men in other positions are slightly more likely to use this strategy than men in managerial and professional positions.

The relationship for women between caregiver strain and hiring help for elderly relatives is very different from those observed for men and can again be described as "u" shaped. Moderate use of this strategy is associated with a drop in caregiver strain while daily use is associated with increased strain. This suggests that when the strain is at a certain level, hiring some assistance helps alleviate the problem. Unfortunately, strain increases when hired help is required on a daily basis, suggesting that getting help does not relieve caregiver strain when the situation is acute. While this relationship holds for women regardless of job type, the shape of the function varies with job type. For women in management and professional positions, moderate use of this strategy is associated with a substantive drop in strain ($\Delta = -0.3$) while daily use is associated with a noticeable increase in strain ($\Delta = +0.4$) from the level of strain reported at moderate use. The impact of this strategy is not as dramatic for women in other positions whose interference levels demonstrate only a minor drop ($\Delta = -0.1$) with moderate use of this strategy. The increase in strain between moderate and high use is, however, the same as observed for female managers and professionals jobs ($\Delta = +0.4$).

Figure 62: Relationship Between Hire Help for Elderly Dependents and Role Overload: Gender by Job Type Analysis

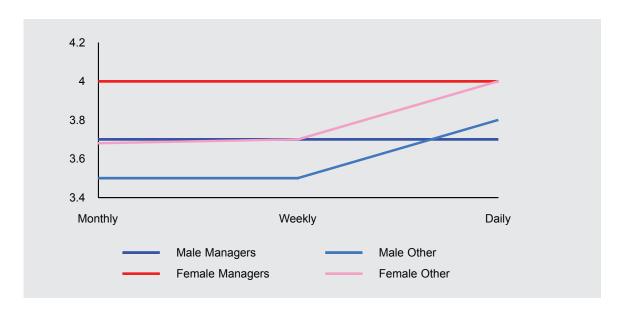
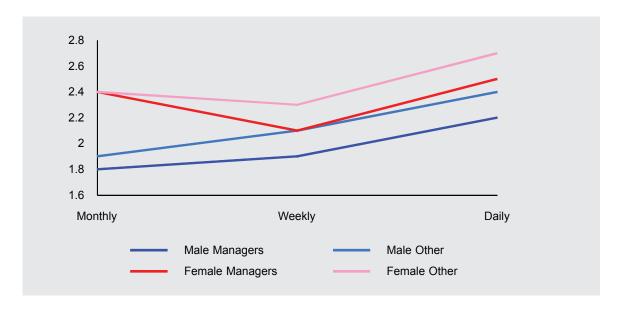


Figure 63: Relationship Between Hire Help for Elderly Dependents and Caregiver Strain: Gender by Job Type Analysis



5.3 What Strategies Can Canadian Families Use to Increase Work–Life Balance?

5.3 What Strategies Can Canadian Families Use to Increase Work–Life Balance?

This chapter explored the relationship between the use of 18 family coping strategies and work–life conflict. The data showed that Canadian families attempt to cope with work–life conflict by:

- strengthening and restructuring their family roles (i.e. encourage children to help each other, get children to help with household talks, cover household responsibilities for each other, try to be flexible, and plan family time together)
- putting their family first (i.e. limiting their job involvement to allow time for the family, modifying their
 work schedule, planning work changes around family needs, identifying one partner as responsible for
 the family, leaving work-related problems at work)
- sacrificing personal needs (i.e. leaving things undone around the house, getting by on less sleep, cutting
 down on outside activities, buying more goods and services)
- seeking social support (relying on extended family for help, relying on friends for help)
- procuring help from outside the family (i.e. hiring help to care for children, hiring help to care for elderly dependents)

Analyses indicated that many of the relationships between family coping strategies and work–life conflict are complex and depend on the employee's gender, job type and dependent care responsibilities. Furthermore, we can see that while some of the coping strategies do, in fact, help employees cope with work–life conflict, others either exacerbate or have no association at all with conflict. The following general conclusions can be drawn with respect to the use of the different family coping strategies and work–life conflict.

- With one exception (covering household tasks for each other), restructuring family roles is not associated
 with work–life conflict. This is unfortunate as the coping strategies included in this grouping are used by
 the majority of Canadian families.
- Employees who cope by putting their family first are more able to deal with role overload and work-to-family interference than counterparts who rarely use these techniques.
- Employees who attempt to cope with work–life conflict by sacrificing personal needs report significantly
 higher levels of all four forms of work–life conflict than counterparts who rarely attempt to "do it all."
 Employees with dependent care, in particular, who use these strategies are more likely to report high
 levels of work-to-family interference and caregiver strain.

5.3 What Strategies Can Canadian Families Use to Increase Work–Life Balance?

- The data indicate that the coping strategies included within the social support grouping do not help employees cope with two of the four forms of work–life conflict (work-to-family interference and family-to-work interference). They do, however, when used moderately, seem to help women cope with role overload (when job type is taken into account) and caregiver strain.
- The ability to procure help from outside the family is not associated with two of the four forms of work—life conflict examined: family-to-work interference and caregiver strain. Employees with higher levels of role overload and work-to-family interference are more likely to use both of these coping strategies. The fact that the relationship is positive suggests that one cannot buy these two forms of balance.

How can families effectively cope with role overload?

Several pieces of advice can be offered to employees with respect to how and how not to cope with role overload. What does not work is trying to get by on less sleep (associated with substantially higher levels of role overload). What does work includes:

- leaving work problems at work (a strategy that is particularly effective for women)
- modifying one's work schedule
- hiring help to care for children (effective strategy when used moderately)
- covering family responsibilities for each other

Finally, the strong positive association between three coping strategies (leaving things undone around the house, cutting down on outside activities, buying goods and services) indicates that neither personal sacrifice nor buying goods and services helps employees cope with role overload.

How can families effectively cope with work-to-family interference?

What can we tell families with respect to coping with work-to-family interference? First, we would advise them to use the following coping strategies to deal with this form of interference:

- leave things undone around the house (effective when used moderately but associated with increased interference when used often)
- cut down on outside activities (effective for women when used moderately but associated with increased interference when used often)
- leave work problems at work (a strategy that is particularly effective for men)
- modify your work schedule

Second, we would suggest that employees avoid trying to cope with work-to-family interference by cutting back on their sleep as this strategy is positively associated with interference (i.e. the greater the use, the higher the conflict).

5.3 What Strategies Can Canadian Families Use to Increase Work–Life Balance?

How can families effectively cope with family-to-work interference?

This study does little to inform families about how to cope with family-to-work interference. There are only two family coping strategies that are substantively related to family-to-work interference in both the job type and dependent care analyses: hire help to care for children and get by on less sleep. Again, we note that employees who are able to purchase help to care for their children moderately often (i.e. a couple of times a week) are more able to cope with family-to-work interference than their counterparts who make low or high use of this strategy. The fact that employees with higher levels of interference are more likely to forgo sleep indicates that this is not an effective way to cope with this form of interference.

How can families effectively cope with caregiver strain?

The findings with respect to coping with caregiver strain are very similar to those observed with family-to-work interference. In this case, however, the two coping strategies associated with caregiver strain are hire help to care for elderly dependents and get by on less sleep. In both cases, employees with higher levels of strain make greater use of these approaches.

Chapter Six Conclusions and Recommendations

Chapter Six Conclusions and Recommendations

At the beginning of this report, we posed the following five questions:

- 1. How do Canadian employees cope with competing work and family demands? Specifically:
 - What resources do Canadian organizations provide to help employees cope with work and family conflict?
 - What personal coping strategies are used by Canadian employees?
 - What strategies are used within families?
- 2. What advice can we offer organizations interested in reducing the levels of role overload, work-to-family interference, family-to-work interference and caregiver strain in their workforce?
- 3. What advice can we provide to individual employees about how best to cope with role overload, work-to-family interference, family-to-work interference and caregiver strain?
- 4. What advice can we offer to Canadian families about how best to cope with role overload, work-to-family interference, family-to-work interference and caregiver strain?
- 5. How do gender, job type and dependent care status affect:
 - the use of these different coping strategies
 - the type of advice we would offer (i.e. what coping strategies are more effective for women? for men? for employees with dependent care? for employees without dependent care? for managers and professionals? for those in other positions?)

The following steps were followed to address these questions. A literature review was conducted first to identify potential moderators of work–life conflict. These moderators were then categorized into three main groups: those that operate at the organizational level, those that work at the individual level, and those that are used within the family. Analysis of means using ANOVAs was then used to determine how effective the different moderators were at helping employees cope with the four different forms of work–life conflict examined in this study.

This chapter summarizes the key findings with respect to each of the five research questions posed above and offers some recommendations about how each form of work–life conflict can be addressed, given what we know from this research. The chapter is organized into four sections. Section 1 outlines key findings with respect to the availability of various supportive organizational policies and practices and the relationship between the use of these supports and employee work–life conflict. Section 2 summarizes the main findings concerning the relationship between the use of personal coping strategies and work–life conflict. Section 3 delineates the connection between the use of various coping strategies that can be used within the family unit and work–life conflict. The chapter concludes in section 4 with a list of key recommendations to organizations, individual employees and families on how to cope with the various forms of work–life conflict.

6.1.1 Benchmark Data on the Availability of Family-Friendly Policies and Practices in Canada

6.1 Coping with Work–Life Conflict: What Can Canadian Organizations Do?

This section is divided into three main parts. The first part provides critical 2001 benchmark data on the use/perceptions of the following employee-friendly policies and practices in Canadian organizations of 500 employees or more: alternative work arrangements, work-time and work-location flexibility (i.e. perceived flexibility), supportive management, and formal benefits and policies. The second part looks at the impact of gender, job type and dependent care status on the use of alternative work arrangements and perceptions with respect to flexibility. Gender differences (difference between men and women observed in both the job type and dependent care analyses) are presented first. This is followed by the identification of differences associated with dependent care status (differences between those with dependent care responsibilities and those without such responsibilities regardless of gender) and job type (differences between those in managerial and professional positions and those in other positions regardless of gender). Also included in this section is a discussion of the differences in use/perceptions that depend on both gender and job type and gender and dependent care. The third part of this chapter answers research question 2 by examining to what extent the different organizational supports examined in this study actually help employees balance competing work and family demands. Such information is critical to policy makers and companies seeking advice about what types of work–life policies and practices to implement and how to maximize the benefits they receive given their spending in the area (i.e. maximize their return on investment).

6.1.1 Benchmark Data on the Availability of Family-Friendly Policies and Practices in Canada

The use of alternative work arrangements in Canada is relatively low at this time

Canadian firms look much like they did a decade ago with respect to the use of alternative work arrangements (Higgins and Duxbury, 2002). Just over half (59%) of the respondents work a "regular" work day (i.e. little to no formal flexibility with respect to arrival and departure times; no work-location flexibility). Just under one in four (23%) works flextime, 14% work a compressed work week and 4% work part-time arrangements. Formal job sharing and tele-work programs are rare as only 1.3% of the sample job share while 1% formally work from home.

While some Canadians enjoy high levels of work-time and -location flexibility, many do not

The data paint a mixed picture with respect to the amount of flexibility Canadian employees perceive they have over their work schedule and work location. While a plurality of the respondents (39%) have moderate levels of informal flexibility and one in three respondents has high flexibility (33%), a substantial percent of the sample (29%) feel they have little control over their work time.

⁴⁸ The main predictors of management behaviour and the availability of the various family-friendly benefits considered in this analysis were sector and organization—not gender, dependent care or job type. It is therefore not appropriate to look at the link between these organizational supports in the context of gender, job type or dependent care status.

6.1.1 Benchmark Data on the Availability of Family-Friendly Policies and Practices in Canada

Examination of the items that make up the perceived flexibility measure give us additional information on areas where improvement is likely needed. These data support the following conclusions. First, the fact that approximately half of the respondents indicated that it was easy for them to take holidays when they wanted, interrupt work for personal/family reasons and then return, take a paid day off when their child is sick, be home from work in time to have meals with their family, and vary their work hours suggests that many of the companies in our sample have introduced progressive programs to help employees with their parenting responsibilities.

Second, the data testify to the fact that many organizations still see work-life balance issues through a child care lens and have not made substantive progress with respect to the issue of elder care. Just under half of the employees indicated it was difficult for them to get paid time off to deal with elder care concerns—twice the number who found it hard to get paid time off to deal with a sick child. This finding is unfortunate given the aging of the Canadian population.

Third, the fact that only one in three of the employees in this sample finds it easy to take paid time off work to attend a course or a conference (one in three finds it difficult) is also disturbing as it suggests that career development is not seen as a shared responsibility in many Canadian organizations. Unfortunately, by not looking at career development through a work–life lens, many organizations jeopardize the career advancement opportunities of employees with child care and elder care responsibilities, as their ability to attend training activities in the evening or on weekends is more constrained. The lack of flexibility in this area is likely to be increasingly problematic in a seller's market for labour.

Fourth, the fact that almost 40% of the respondents find it difficult to arrange their work schedule to meet personal or family commitments suggests that many Canadian organizations persist in operating under the "myth of separate worlds." While such a view might have been defensible when the typical Canadian family consisted of a male breadwinner with a wife and children at home, it is untenable in Canada today where the dual-income family is the norm.

Fifth, the fact that 70% of the sample say it is difficult for them to perform tele-work implies that organizations are still reluctant to increase employee's work-location flexibility. The lack of movement in this area is hard to reconcile with the fact that many factors (i.e. advances in technology, the increase in the number of Canadian knowledge workers, the number of Canadian employees who perform unpaid overtime work at home outside of regular office hours) suggest that such work-location flexibility is not only possible but could also offer a competitive advantage in a tighter labour market.

Finally, the fact that three quarters of the sample find it difficult to be home from work when their child gets home from school provides a concrete example of how work interferes with family. These findings also indicate that employers and government policy makers need to expand their discussion of child care beyond the relatively narrow domain of day care to include beforeand after-school care. As this study shows, the need for child care does not end when the children start school.

Approximately half of the employees in this study report to a supportive manager

Our previous work in this area has shown that the behaviour of an employee's immediate manager is an important predictor of their ability to balance work and life (Duxbury and Higgins, 1995). The data from this study help us quantify the prevalence

6.1.1 Benchmark Data on the Availability of Family-Friendly Policies and Practices in Canada

of supportive management in Canada's larger organizations. On a positive note, almost half of the employees in this sample (47%) consider that their managers are supportive (i.e. frequently engage in the nine management behaviours that employees find to be supportive). On a more challenging note, just over one in three respondents (37%) work for "mixed managers" who are not consistent in the extent to which they engage in supportive behaviours (i.e. exhibit some behaviours but not others) while approximately one in five (16%) works for managers who rarely undertake any of the supportive actions included in the supportive manager measure.

One in ten of the employees in this sample reports to a non-supportive manager

The results from this study allow us to estimate the number of employees who work for a non-supportive manager (i.e. managers who frequently use the six behaviours that employees have identified as typifying a non-supportive manager). While it is reassuring to note that just over half (57%) of the employees work for managers who rarely display what employees consider non-supportive behaviours, a substantive number of Canadians are not this lucky. Just over one in ten (13%) work for non-supportive managers who frequently engage in non-supportive actions such as focusing on hours, not output, and working long hours and expecting their employees to do the same. Just under one in three of the employees in this study (29% of respondents) works for managers who are not consistent in their behaviour: sometimes they display non-supportive behaviours while other times they do not.

The data paint a mixed picture with respect to the availability of family-friendly benefits

The five benefits widely available in Canada's larger firms (unpaid leave of absence (LOA, 84%), psychological/health counselling (EAP, 83%), the ability to take an unpaid emergency day off work (76%), the ability to take time off work instead of overtime pay (75%) and the ability to take short-term personal/family leave without pay (66%)) share two characteristics. First they are reactive in nature. Second, they are cost-effective for the employer as the employee is not paid when taking time off work to deal with personal/family issues.

Progressive benefits such as flexible work arrangements (49%), part-time work with pro-rated benefits (45%), supportive relocation policies (44%), personal days off with pay (42%) and tele-work (20%), on the other hand, are available to less than half of the employees. Virtually none of Canada's larger employers helps employees deal with dependent care obligations (i.e. only 8% of the sample had access to employer-provided on-site day care while 7% were offered child care referral services and 6% were given elder-care referral).

The following conclusions can be drawn regarding the dominant organizational view of work–life issues in Canada at this time: organizations are reactive rather than proactive, employer versus employee centric, built on the "myth of separate worlds" and focus on reducing the symptoms associated with high work–life conflict and dealing with the immediate problem rather than the identification and elimination of the underlying causes of the stress. It is also important to note that many work–life policies seem to be designed to manage the "abuser"—the employee who takes advantage of supportive policies and programs—rather than the vast majority of employees who are solid citizens and can be trusted to use the policies when appropriate.⁴⁹

This view of work-life balance economically penalizes both the employee, who cannot balance competing work and family demands, and the company, which is faced with having to deal with the same sorts of work-life issues over and over again.

⁴⁹ Many organizations do not provide benefits such as paid time off for personal reasons and tele-work, for example, because they fear that such policies will be abused by some of their employees.

6.1.2 How Do Gender, Job Type and Dependent Care Status Affect the Use, Perceived Availability of Organizational Supports?

It is important, however, to note that some progress can be observed in the type of benefits available within Canadian organizations. Some firms have concretely recognized that employees have responsibilities outside of work and support their need for balance by offering flexible work arrangements, pro-rated benefits for part-time work, supportive relocation policies and personal days off with pay. This last benefit, in particular, is worthy of note as it is based on mutual trust and the premise that the employee and the employer are partners with respect to dealing with work-life conflict. The fact that only half as many employees can take a paid day off to deal with a personal emergency as are able to take unpaid LOA again speaks to the dominant view of work life held by employers today.

6.1.2 How Do Gender, Job Type and Dependent Care Status Affect the Use, Perceived Availability of Organizational Supports?

The use of alternative work arrangements has very little association with gender

With one exception (part-time work), the use of alternative work arrangements is not associated with gender. That being said, it is important to note that women were significantly more likely to use part-time work arrangements than men regardless of their family situation or job type. This gender difference in who works part time has been observed in most industrialized nations and has been attributed to the fact that women are perceived by both men and women to have primary responsibility for family and household roles, especially when their children are young. Unfortunately, the research has also shown that women who work part time often pay an economic penalty for this choice (i.e. lower wages, no benefits, fewer opportunities for advancement, reduced pensions).

Women are less likely than men to perceive that they can take paid time off work for family reasons

Women, regardless of their job type or dependent care status, were significantly more likely than men to say that was difficult for them to:

- work at home during the day
- interrupt their work day for personal reasons and then return
- take a paid day off work to care for a sick child or an elderly dependent

Men, on the other hand, were more likely than women to say it was easy for them to accomplish these tasks. These findings are of concern since women in the sample were more likely than the men to have primary responsibility for child care and elder care in their families (Higgins & Duxbury, 2002).

6.1.2 How Do Gender, Job Type and Dependent Care Status Affect the Use, Perceived Availability of Organizational Supports?

Men and women with dependent care responsibilities are more likely to perform querilla tele-work

Employees with dependent care responsibilities, regardless of their gender, were more likely to perform guerrilla tele-work (i.e. work from home during regular hours on an as-needed basis) than their counterparts without dependent care. It may be that this group uses this work arrangement in an attempt to combine work with caring for sick dependents or other family responsibilities that keep them at home during the regular work day.

Men and women without dependent care responsibilities are more likely to work shifts

Employees without dependent care responsibilities are, regardless of their gender, more likely to perform shift work than counterparts with dependent care. Why this is the case is impossible to ascertain. It may be that employees with dependent care responsibilities try to avoid this work schedule as they perceive (or from experience know) that such work arrangements make it more difficult for them to fulfill their caregiving commitments. Alternatively, it may be that employees with dependents cannot work this arrangement due to an inability to make arrangements for their children and/or elderly dependents when they are working atypical hours. Finally, it may be that employers have made a deliberate decision to assign their shift work to employees who have fewer obligations outside of work. While their motives in this regard could be altruistic, they might also perceive that such a strategy will reduce absenteeism and turnover.

Men and women with dependent care responsibilities are more likely to find it difficult to arrange their schedule to meet personal/family commitments

There was only one difference in perceived flexibility associated with dependent care status: employees with dependent care responsibilities, regardless of gender, were more likely to say that it was difficult for them to arrange their schedule to meet personal/family commitments. Who has the least amount of flexibility with respect to scheduling work? The data from this study say mothers and females with elder care responsibilities (43% of this group find such tasks difficult). These findings are unfortunate as employees with dependent care obligations are likely to have a greater need for flexibility in scheduling their work. These data also refute the idea that mothers or women with elder care commitments are given preferential treatment in the workplace. In fact, these findings indicate that the reverse may be true. Finally, the findings imply that organizations do not take an employee's family circumstances into account when setting work schedules. In other words, the "myth of separate worlds" still appears to be the operating principle for many of Canada's largest employers.

Managers and professionals are more likely to use flexible work arrangements

Employees in management and professional positions, regardless of their gender, are more than twice as likely as those in other positions to use work arrangements that offer greater work-time (i.e. flextime) and work-location (i.e. guerilla tele-work) flexibility. Those in other positions, on the other hand, are more likely to work a fixed work schedule (i.e. no flexibility with respect to start and stop times) and perform shift-work arrangements that do not mesh well with family rhythms.

6.1.2 How Do Gender, Job Type and Dependent Care Status Affect the Use, Perceived Availability of Organizational Supports?

Managers and professionals perceive higher levels of work-location flexibility

Two job type differences in the perceived flexibility data are worthy of note. Regardless of their gender, the managers and professionals in the sample were significantly more likely than their counterparts in other jobs to perceive that it was easy for them to work at home during regular hours, but it was difficult for them to vary their work hours. In other words, managers and professionals perceive themselves to have higher work-location flexibility but lower work-time flexibility. While the first finding is consistent with the fact that those in the managerial and professional sample were also more likely to perform guerilla tele-work, the second is not consistent with the data showing that this group is also more likely to use flextime arrangements. This discrepancy is interesting as it suggests that the demands of managerial and professional jobs, which have increased substantially over time, are such that it is difficult for managers to change when they come in or leave, despite the fact that they nominally work flextime arrangements. These results also suggest that work-time flexibility goes down as work loads go up. Interestingly enough, however, the same cannot be said for work-location flexibility. As noted in Duxbury and Higgins (2003), managers spend a significant amount of time per month performing unpaid overtime at home in the evening and on the weekend. It would appear that one benefit of this work style is that tele-work is more accepted at this level of the organization than it is for those in other jobs. The organization may also be more supportive of allowing employees who have demonstrated that they can work productively at home and who have the technology to do so.

Female managers and professionals have lower levels of perceived flexibility

Most of the gender differences in perceived flexibility go away when job type is controlled for. Those gender differences that do exist are between male and female managers and professionals. Female managers and professionals were more likely than their male counterparts to find it difficult to vary their work hours, take their holidays when they want, take time off for a course, and arrange their schedule to meet personal or family commitments. No such gender differences were noted for those in other jobs.

Not only do the female managers and professionals have less flexibility than their male counterparts, their flexibility does not compare favourably to females in other positions within the organization. The female managers were, for example, significantly more likely than females in other jobs to find it difficult to take their holidays when they want, to take time off for a course, to interrupt their work day for personal reasons and then return, to take a paid day off to care for a sick child or an elderly dependent and to be home when their children get home from school.

These findings are very interesting because of what they suggest about females in managerial and professional positions. It is unlikely that women managers and professionals have less opportunity to vary their hours than other employees. Rather, these data suggest that women in these groups are less likely than others to either take advantage of the opportunities for flexibility that are available, or to ask for special favours with respect to leave of absence, work hours, etc. We can only speculate as to why this might be the case. Plausible explanations include the idea that female managers and professionals are more concerned than either their male counterparts or employees in other positions with how their employer will view them if they vary their hours and arrange their day around family commitments, etc. (i.e. concerned that others will label them as being on a "mommy track," perceive that they do not take their career seriously). Alternatively, it may be that women in these groups feel more pressure to set a good example for those who report to them or feel that putting family ahead of work would limit their career advancement. Other studies should try to determine the extent to which these work pressures are self-imposed (i.e. women who get ahead in Canadian organizations are less likely to let family intrude with work) or imposed by the organizational culture (i.e. due to working in an organization that rewards employees who put work ahead of family).

6.1.3 What Can Organizations Do to Help Employees Cope with Work–Life Conflict?

This section has been organized to allow organizations and governments to target their interventions to a particular type of work–life conflict as well as specific groups of employees (i.e. female managers and professionals, women with children). Each of the four forms of work–life conflict explored is examined individually in the sections below. To assist the reader in making sense of the data, the findings have been sorted into the following groups using the strength of the association between the organizational support and work–life conflict as the sorting criteria:

- organizational supports that have a strong association with the form of work–life conflict under consideration (i.e. operationally defined as an R² ≥ 0.1)⁵⁰
- organizational supports that have a moderate association with the form of work-life conflict under consideration (i.e. operationally defined as an R² between 0.05 and 0.1)

As a general rule, the higher the R^2 , the stronger the link between the organizational intervention and decreased (or increased) levels of work–life conflict.

Other key pieces of data are then used to paint a more complete picture of the impact of each organizational intervention. To determine how best to target the intervention, we look at gender by dependent care and gender by job type differences in the relationship between the organizational action and work–life conflict. If the interaction term is significant, we know that not all groups will benefit equally from the implementation of a particular support. If the interaction term is not significant, however, we know that all employees will realize the same impact from the support. Finally, we present an estimate of how much the organization can expect work–life conflict to increase or decrease if it focuses on one strategy versus another. In this case, the estimate is provided by looking at Δ (the difference in work–life conflict experienced by someone with high levels of the particular support versus someone with low levels of this support).

6.1.3.1 Coping with Role Overload

Perceived flexibility is the key to reducing role overload

This study has identified a very strong association between higher levels of perceived flexibility and lower levels of role overload.

Two forms of flexibility, in particular, seem to be fundamental to the ability to cope with role overload:

- the ability to arrange one's work schedule to meet personal or family commitments
- the ability to interrupt one's work day to deal with a personal or family matter and then return to work

⁵⁰In other words, this organizational support explains at least 10% of the variation in work–life conflict.

Both of these forms of flexibility increase an employee's ability to deal with family or personal issues (both scheduled and unanticipated) during work hours. In other words, they give employees more control over the work–life interface. Researchers such as Karasek (1979) have shown that increased levels of control are important to helping employees deal with high demands.

The importance of increasing perceived flexibility within the organization as a strategy to reduce role overload is further illustrated by the fact that all other items in the perceived flexibility measure were moderately associated with role overload. By looking at the strength of the association, we can rank order each of these forms of flexibility for their expected ability to reduce role overload. To reduce role overload, therefore, organizations need to:

- increase employees' ability to take their holidays when they want
- increase employee's ability to get home from work in time to have meals with their family
- provide paid days off for employees who need to care for elderly dependents
- provide paid days off for employees who need to care for a sick child
- make it possible for parents to be home when their children get home from school
- give more flexibility with respect to work hours

Furthermore, although the interaction terms are significant in most of these analyses, the picture is still quite clear—all employees, regardless of their gender, their job type or their dependent care status experience a reduction in role overload at higher levels of perceived flexibility (reductions range from -0.5 to -0.8 in analysis with strong associations and -0.2 to -0.7 in analysis with moderate associations).

There is a strong association between role overload and opportunities for career development

Higher levels of one other form of perceived flexibility, take time off to attend a course or a conference, are is also strongly associated with lower levels of role overload. This result is a little more difficult to interpret. It could be that people with lower levels of role overload are more able to find the time for career development activities. Alternatively, it may be that employees who attend such courses learn ways to work more effectively or efficiently, which, in turn, reduces role overload. In either case, the strong association between the ability to participate in career development opportunities and overload is worthy of note, given the importance of such activities to professional workers and younger employees. These findings give organizations another incentive to deal with the issue of role overload: an increased ability to recruit and retain talent.

Employees who report to a non-supportive manager report higher levels of role overload

How can organizations reduce role overload? A focus on management behaviour in general, and on reducing non-supportive management in particular, should yield substantial reductions in employee role overload. The data point to one management behaviour in particular that is strongly associated with increased role overload: having a manager who has unrealistic expectations with respect to work. Decreasing the extent to which such behaviour occurs within the organization should, therefore, be a high priority in organizations that wish to address role overload.

The importance of developing strategies to reduce non-supportive management behaviours within the organization can be further illustrated by noting the moderate association between increased role overload and:

- working for a non-supportive manager (total measure)
- working for a manager who puts in long hours and expects their employees to do the same
- working for a manager who makes the employee feel guilty about time off work for personal or family reasons
- working for a manager who focuses on hours of work not output

Further examination indicates that all employees, regardless of their gender, their job type or their dependent care status, experience a moderate increase in role overload ($\Delta = +0.8$) at higher levels of non-supportive management.

Employees who report to a supportive manager report lower levels of role overload

Organizations that wish to reduce role overload could also achieve their goals by increasing the number of supportive managers within their organization. Specifically, they need to increase the extent to which managers in their organization engage in the following behaviours:

- effectively plan the work to be done
- make themselves available to answer their employees' questions
- make expectations clear
- listen to their employees' concerns
- give recognition for a job well done

Although working for a supportive manager results in reduced levels of role overload for all employees (reductions range from Δ = -0.3 to -0.6), the impact often depends on the gender and the job type of the employee rather than their dependent care status.

Finally, it should be noted that the other four behaviours that typify supportive management (i.e. provide constructive feedback, share information with employees, support their decisions, and ask for input before making decisions that affect their work) were also significantly associated with role overload. In all cases, however, the relationship was relatively weak and only significant in the gender by dependent care analysis. This suggests that organizations should focus their initial efforts on the five supportive behaviours outlined above.

Flexible work arrangements do little to help employees cope with role overload

Flexible work arrangements, by themselves, have little impact on employee role overload. The following supports this conclusion. First, the association between working shifts, flextime, compressed work weeks and a regular 9-to-5 work day, and role overload

was not significant. Second, the associations that do exist are only moderate in degree and do not yield large changes in levels of role overload. That being said, employers wishing to tackle the issue of employee role overload may find the following data useful:

- Part-time work helps employees with dependent care responsibilities cope with role overload. It seems to
 be particularly effective for men (decline of -0.5 in role overload) rather than women (decline of -0.2 in role
 overload), which is interesting since women are more likely than men to work part time.
- Employees with dependent care who tele-work are more able to cope with role overload (decline
 of -0.3 in role overload).

Family-friendly benefits do little to help employees cope with role overload

Supportive benefits, by themselves, have little impact on employee role overload. This conclusion is supported by the fact that the association between the use of the following benefits and levels of role overload was not significant: on-site day care, use of elder care referral services, flexible work arrangements, tele-work, supportive relocation policies, emergency days off, unpaid LOA, use of paid personal days off work, use of time off in lieu of overtime, and use of short-term personal leave.

Several of the benefits were, however, moderately associated with role overload:

- Use of child care referral services is associated with lower levels of role overload (decline of -0.3) for those with dependent care.
- Employees with higher levels of role overload (especially those in other positions within the organization) are more likely to use EAP services.
- Use of part-time or reduced hours is associated with lower levels of role overload for men and women in other jobs within the organization.

Targeted solutions are, in some cases, required

The ability of many of these different organizational interventions to alleviate role overload depends on the gender, job type and dependent care status of the individual. Which groups benefit the most (i.e. experience the greatest decline in role overload) from the various organizational interventions considered in this study? Which groups benefit the least (i.e. experience the smallest decline in role overload)? The following answers these questions:

Although high levels of perceived flexibility help female managers and professionals and females
with dependent care responsibilities cope with role overload, the decline in role overload at high
levels of perceived flexibility is significantly less for employees in these groups than for other groups
of employees. This may be because women in these groups, who have more flexibility at work, are
expected to do double duty at home.

- Although an increased ability to interrupt one's work day and return, to arrange one's work schedule to meet personal and family commitments and to take time off to attend a course or conference are all associated with a decline in role overload for every group, they provide less of a benefit to female managers and professionals. It is difficult to tell from this study why this group does not receive reduction in role overload at high levels of these forms of flexibility as other employees.
- The ability to interrupt one's work day to deal with a personal or family issue and then return to work helps women in other positions within the organization cope with role overload.
- Working for a supportive manager helps men and women in other positions, in particular, cope with role overload.
- Having a manager who listens and is effective at planning the work to be done helps women in other positions cope with role overload.
- While working for a non-supportive manager is problematic, regardless of gender, job type
 or dependent care status, there are some very interesting between-group differences about
 which behaviours are especially problematic in association with higher levels of role overload.
 For example:
 - Working for a manager with unrealistic expectations with respect to workloads is particularly problematic for employees with dependent care responsibilities and men, regardless of their job type.
 - Working for a manager who puts in long hours and expects employees to do the same is more problematic for employees in other positions within the organization and employees with dependent care responsibilities, regardless of gender.
 - Working for a manager who makes employees feel guilty about time off for personal/family
 reasons and who focuses on hours of work rather than output is more problematic for female
 managers and professionals. Interestingly, male managers and professionals with such managers
 display the smallest increases in role overload.

These findings reinforce our contention that there is no one-size-fits-all solution that organizations can implement to reduce role overload in their workforce. Rather, social role expectations and the organizational context and culture will all influence the effectiveness of the various organizational interventions.

6.1.3.2 Coping with Work-to-Family Interference

To help reduce work-to-family interference, organizations can increase perceived flexibility, decrease the number of non-supportive managers and increase the amount of management support. In other words, the same sorts of things they need to do to help employees cope with role overload. Details on each of these are given below.

Perceived flexibility is the key to reducing work-to-family interference

This research has identified a very strong association between higher levels of perceived flexibility and lower levels of work-to-family interference. The strength of this relationship can be illustrated by noting that the relationship between six of the ten forms of flexibility considered in this analysis and this form of work-life conflict was very strong in both the gender by job type and gender by dependent care analyses. These were:

- arrange one's work schedule to meet personal or family commitments
- get home from work in time to have meals with their family
- interrupt one's work day to deal with personal or family matters and then return to work
- take paid time off work to attend a course or conference
- take a paid day off to care for a sick child
- take a paid day off to care for an elderly dependent

All of these forms of flexibility give employees greater control over the work–family interface by helping them deal with family or personal issues (both scheduled and unexpected) during work hours. In other words, they help employees meet personal commitments during what are traditionally considered to be "work hours." Given the high costs of this form of work–life conflict, it would appear that allowing employees greater freedom to deal with personal issues during work hours makes good business sense.

The importance of increasing perceived flexibility within the organization as a strategy to reduce work-to-family interference is further illustrated by the fact that three of the remaining four items in the perceived flexibility measure were all moderately associated with work-to-family interference. These data indicate that organizations that wish to reduce work-to-family interference should consider making it easier for employees to vary their hours of work, take holidays when they want, and be home when children get home from school.

It is also interesting to note that while the interaction term was (with one exception) significant in the gender by job type analysis, it was rarely significant when dependent care status was taken into account. This suggests that the effectiveness of many of these forms of flexibility depends on the gender of the individual as well as their position within the organization. Nevertheless, all employees, regardless of gender, job type or dependent care status, experience a reduction in work-to-family interference at higher levels of perceived flexibility.

Who you work for and how they behave is key to coping with work-to-family interference

The findings on work-to-family interference support our contention that work–life conflict depends more on who you report to within the organization than the organization you work for. The following supports this conclusion. First, there is a strong positive association between working for a non-supportive manager ($\Delta = +1.0$) and work-to-family interference. Second, there is a strong negative association between reporting to a supportive manager and work-to-family interference ($\Delta = -0.6$). Third, all of the behaviours typifying non-supportive and supportive management are either strongly or moderately associated with this form of work–life conflict. This indicates that a focus on management behaviour in general, and on reducing non-supportive management in particular, should bring about substantial reductions in work-to-family interference. Details are given below.

Employees who report to a non-supportive manager report higher work-to-family interference

The importance of developing strategies to reduce non-supportive management behaviours within the organization can be illustrated by noting the very strong association between increased work-to-family interference and working for a manager who has unrealistic expectations with respect to the work to be done, and works long hours and expects employees to do the same.

The other four behaviours typifying non-supportive management are also moderately associated with work-to-family interference. Specifically, interference increases concomitant with reporting to a manager who makes the employee feel guilty about time off work for personal or family reasons, focuses on hours of work not output, puts the employee down in front of others, and only talks to the employee when a mistake is made. Decreasing the extent to which these behaviours occur should be a high priority in organizations that wish to address this form of work-life conflict.

While all employees, regardless of gender, job type or dependent care status, experience an increase in work-to-family interference ($\Delta = +1.0$ when using the total measure) at higher levels of non-supportive management, the relationship between many of the behaviours in this measure and work-to-family interference depends on the gender and job type of the employee.

Having a supportive manager helps employees cope with work-to-family interference

A focus on increasing the number of supportive managers within the organization should also help employees cope with work-to-family interference. Specifically, organizations need to increase the extent to which their managers display the following behaviours:

- listen to employees' concerns
- effectively plan the work to be done
- make themselves available to answer their employees' questions
- ask for input before making decisions that affect employees' work
- make expectations clear

- give recognition for a job well done
- support their employees' decisions
- provide constructive feedback
- share information with employees

While working for a supportive manager results in reduced levels of work interference for all employees (reductions range from -0.3 to -0.6), the impact of management support on work-to-family interference varies depending on the gender and the job type of the employee but not on their dependent care status.

Shift work is associated with higher work-to-family interference

Flexible work arrangements, on their own, have little impact on work-to-family interference. The following lends credence to this conclusion. First, the association between working flextime, a compressed work week and a regular 9-to-5 work day, and work-to-family interference was not significant. Second, the associations that do exist are only weak and do not yield large changes in role interference. That being said, employers that wish to reduce work-to-family interference should be aware of the following:

- Part-time work helps employees with dependent care responsibilities cope with work-to-family
 interference. It seems to be particularly effective for men rather than women (decline of -0.5 in
 interference for men compared to -0.2 for women). These findings are consistent with those observed
 with respect to role overload.
- Shift work has a substantive positive association with work-to-family interference. This work arrangement appears to be more problematic for women in other positions within the organization (increase of +0.5 in interference for the women in this group versus +0.3 for their male counterparts and +0.2 for men and women in managerial and professional positions).
- Both guerilla tele-work and tele-work arrangements are moderately associated with increased work-to-family interference (increase of +0.3 in interference for guerilla tele-work and +0.2 for tele-work) when gender and job type are taken into account.

Family-friendly benefits do little to help employees cope with work-to-family interference

Supportive benefits, on their own, have little impact on work-to-family interference. This conclusion is supported by the fact that the association between the use of the following benefits and work interferences was not significant: on-site day care, use of child care referral, use of elder care referral, use of flexible work arrangements, use of EAP, emergency days off, unpaid LOA, use of paid personal days off work, use of time off in lieu of overtime and use of short-term personal leave. In addition to the above, the following benefits were not linked to work-to-family interference when dependent care status was taken into account: tele-work, supportive relocation policies and part-time work/job sharing. Several of the benefits were, however, weakly associated with work interference when job type was taken into account. Men and women who use supportive relocation policies (Δ = -.3) and part-time/reduced work hours (Δ = -.5) report a decline in work-to-family interference when job type is taken into account.

Targeted solutions are, in some cases, required

The ability of the different organizational interventions to reduce work-to-family interference depends on gender, job type and dependent care status of the employee. Organizations that wish to help women in other positions deal with work-to-family interference should make it easier for them to arrange their work schedule to meet personal and family commitments, interrupt their work day to deal with personal/family reasons and then return to work, and vary their hours of work. They should also try to minimize the number of employees in this group who perform shift work.

Organizations that wish to help employees in other positions, regardless of their gender, cope with work-to-family interference should consider the following:

- Give these employees the ability to take a paid day off to care for an elderly dependent.
- Increase the number of supportive managers in their organization. Specifically, they should increase
 the extent to which managers are available to answer their employees' questions, ask for input
 before making decisions that affect their employees' work, make expectations clear, give positive
 recognition when employees do their job well, support their employees' decisions, provide their
 employees with constructive feedback and share information with them.
- Reduce the number of non-supportive managers within the organization. Specifically, they
 should decrease the extent to which managers who have a high number of people in other
 positions reporting to them directly put their employees down in front of others, have unrealistic
 expectations with respect to workloads, put in long hours and expect their employees to do the
 same, and make employees feel guilty about time off for personal/family reasons.

Organizations that wish to help their female employees cope with work-to-family interference should consider the following:

- Increase the extent to which managers in the organization listen to their employees' concerns and are effective at planning work to be done.
- Decrease the extent to which managers in the organization make employees feel guilty about time off for personal/family reasons and put employees down in front of others.

Organizations that wish to help men in managerial and professional positions deal with work-to-family interference should increase their ability to interrupt their work day to deal with personal/family reasons and then return to work, and increase the extent to which their immediate manager provides constructive feedback and shares information with them. It is interesting to note, however, that men in this group receive less benefit than those in other groups from having a manager who listens to their concerns and is effective at planning the work to be done. The ability to vary their work hours also provides less of a benefit to the men in this group.

6.1.3.3 Coping with Family-to-Work Interference

While high levels of perceived flexibility and management support help female managers and professionals cope with work-to-family interference, the decline in interference at high levels of perceived flexibility and management support is significantly less for these employees than for those in other groups. Specifically, the women in these jobs experience less of a benefit from the ability to interrupt their work day and return, take time off to attend a course or conference, take time off to care for a sick child, take a paid day off to care for elderly dependents, take holidays when they want, to re-arrange their work schedule, and report to a supportive manager who provides them with constructive feedback and shares information with them. These findings are similar to those observed for role overload and have the same underlying etiology.

Organizations that wish to help employees with dependent care responsibilities cope with work-to-family interference should give these employees (especially the men in this group) the ability to take a paid day off to care for a sick child and take time off to care for elderly dependents. They should also focus on reducing the extent to which managers within the organization make their employees feel guilty about time off for personal/family reasons. These findings reinforce our contention that there is no one-size-fits-all solution that organizations can implement to reduce work-life conflict.

6.1.3.3 Coping with Family-to-Work Interference

While organizations can do a lot to help their employees cope with role overload and work-to-family interference, their options are much more limited when it comes to helping reduce family-to-work interference. None of the organizational strategies examined in this study was strongly associated with this form of work-life conflict and interventions such as perceived flexibility and management support, which were effective at alleviating role overload and work-to-family interference, had little (i.e. perceived flexibility) to no (i.e. supportive manager) impact on family-to-work interference. However, we can provide some advice to organizations that wish to help employees cope with family-to-work interference. These suggestions are summarized below.

The ability to arrange one's work schedule to meet personal/family commitments can help employees cope with family-to-work interference

Perceived flexibility does little to help employees cope with family-to-work interference. This conclusion can be supported by the fact that there was no association between seven of the forms of perceived flexibility examined (i.e. tele-work, interrupt work day, take paid day off when child is sick, take paid day off when elderly dependent needs care, be home to have meals with family, be home when children get home from school, take time off for a course) and family-to-work interference, in either the gender by job type or the gender by dependent care analysis. Furthermore, the fact that the rest of the items in this measure (vary work hours, take holidays when you want, arrange work schedule) were also not associated with this form of interference when job type was taken into account point to the fact that the impact of perceived flexibility on family-to-work interference is minimal and limited to employees with dependent care.

6.1.3.3 Coping with Family-to-Work Interference

What forms of perceived flexibility help those with dependent care deal with family-to-work interference? How effective are each of these forms of flexibility at reducing this form of conflict? The data provide the following answers to these questions. Organizations that wish to help employees with dependent care cope with family-to-work interference should make it easier for them to arrange their work schedule to meet personal and family commitments, vary their work hours and take holidays when they want. It is, however, important for organizations to recognize that in all cases, those with dependent care responsibilities have to feel that it is always easy for them to arrange their work schedule, vary their work hours and take their holidays when they want, as those with only moderate flexibility in these areas realize no increased ability to cope with family-to-work interference.

Non-supportive management increases family-to-work interference

While working for a supportive manager does not help employees cope with family-to-work interference, reporting to a non-supportive manager certainly exacerbates this form of conflict. The following behaviours, in particular, are associated with increased family-to-work interference: makes me feel guilty about time off work for personal or family reasons and focuses on hours of work not output.

Working a regular work day reduces family-to-work interference

Employees who work a fixed work day (i.e. start and stop times the same every day) report substantially lower levels of family-to-work interference while employees who work flextime report the highest levels of this form of conflict. It would appear that knowing one's exact hours of work helps an employee plan family activities so that they do not interfere with their work duties.

A number of benefits appear to help employees cope with family-to-work interference

While only one of the ten benefits examined in this analysis, use of child care referral, was significantly associated with family-to-work interference in both the gender by job type and gender by dependent care analyses, seven other benefits were linked to this form of work-life conflict in the analysis where dependent care status was considered. This result, which is similar to that observed with respect to perceived flexibility, reinforces our contention that strategies to deal with family-to-work interference will primarily affect only those employees with dependent care responsibilities.

The use of the following benefits is significantly associated with family-to-work interference:

- child care referral
- on-site day care
- part-time/reduced work week
- personal day off with pay
- EAP
- taking a family/emergency day off work
- short-term personal leave

6.1.3.4 Coping with Caregiver Strain

The relationship between two of these strategies, use of child care referral and part-time work, and family-to-work interference is negative for employees with dependent care responsibilities, indicating that these two benefits do, in fact, help employees with child and/or elder care cope with family demands that interfere with work.

In all other cases, however, the relationship between family-to-work interference and benefit use was positive, which indicates that employees with higher levels of this form of interference were more likely to use these benefits. Since it is unlikely that the benefit itself would cause an increase in work-life conflict, these findings suggest that employees use these organizational benefits when they are experiencing greater interference. Unfortunately, cross-sectional data (i.e. collected at one point in time) do not allow us to determine the extent to which each of these benefits helps employees cope with family-to-work interference. We can, however, say that virtually everyone in this sample who used these benefits indicated that the benefits had helped them cope to a moderate/great extent.

Women and men with dependent care use different strategies to cope with family-to-work interference

There are several gender differences in the relations discussed above that give further guidance to organizations that wish to help their employees with dependent care cope with family-to-work interference. Organizations can help women by giving them more flexibility to arrange their work schedule to meet personal and family commitments ($\Delta = -.5$) and by reducing the extent to which managers assess performance by looking at hours rather than output. They can help men, on the other hand, by giving them child care referral benefits ($\Delta = -.5$ for men versus $\Delta = -.3$ for women).

6.1.3.4 Coping with Caregiver Strain

It appears that there is very little that the employer can do to help employees deal with caregiver strain. This conclusion is supported by the following facts:

- The following forms of perceived flexibility were not associated with caregiver strain when dependent
 care status was taken into account: tele-work, take holidays when want, take time to attend a conference,
 take paid day off when child is sick, take paid day off to care for elderly dependent, be home when
 children get home from school.
- None of the items in the perceived flexibility measure was associated with caregiver strain when job type was taken into account.
- None of the supportive management behaviours was associated with caregiver strain.
- None of the non-supportive management behaviours was associated with caregiver strain when job type was taken into account.

6.1.3.4 Coping with Caregiver Strain

- The use of only one of ten benefits was substantially associated with caregiver strain in both the gender by job type and gender by dependent care analysis: elder care referral. Two additional benefits, use of paid personal days off work and use of short-term personal leave, were moderately associated with caregiver strain when dependent care status was taken into account.
- With one exception (elder care referral), the relationships observed between caregiver strain and organization interventions were moderate in degree.

Interestingly, this form of work-life conflict does not depend on either the gender or the job type of the individual. In fact, the only thing that employees need to consider when dealing with the issue of caregiver strain is whether or not an employee has responsibility for an elderly dependent.

Elder care referral is key to coping with caregiver strain

There appears to be only one high-impact strategy available to organizations that wish to reduce the levels of caregiver strain in their workforce: provide elder care referral services. The relationship between the use of this benefit and caregiver strain is very strong. The fact that the association is positive in direction indicates that employees with higher strain are more likely to seek such assistance than those who have less caregiver strain. Again, while we cannot tell from this study the extent to which such a benefit helps employees cope with the demands associated with elder care, we can say that employees have a positive impression of such benefits (i.e. perceive that they help them cope).

Short-term personal leave helps employees cope with caregiver strain

The use of two other benefits, short-term personal leave and family/personal days off work, are moderately associated with caregiver strain. The negative relationship between caregiver strain and short-term personal leave (Δ = -.4) indicates that this benefit does help employees cope with the strains associated with the care of an elderly dependent. The positive relationship between personal days off work and caregiver strain, on the other hand, indicates that employees need to take time off work when caregiver strain gets high. This benefit makes it easier for employees to use this strategy.

Flextime arrangements are associated with lower levels of caregiver strain

Employees who use flextime arrangements report substantially lower levels of caregiver strain. Employees who work a fixed schedule, on the other hand, report the highest levels of this form of work–life conflict. Unfortunately, when considered in the light of the findings obtained earlier with role interference, it appears that organizational actions that minimize caregiver strain will maximize family-to-work interference.

6.2.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

Increasing perceived flexibility does provide some ability to cope with caregiver strain

By increasing perceived flexibility, organizations can give employees with dependent care responsibilities some protection against caregiver strain (decline of -.3). Specifically, the ability to be home in time for dinner with the family, vary work hours, interrupt one's work day and return, and arrange one's work day to meet family or personal needs all seem to help employees cope with caregiver strain.

Employees who report to a non-supportive manager find it more difficult to cope with caregiver strain

One way organizations can help their employees with dependent care responsibilities cope with caregiver strain is to reduce the number of non-supportive managers in their organizations. The following management behaviours are associated with higher levels of this form of work–life conflict: making employees feel guilty about time off for personal/family reasons, focusing on hours of work, not output, and having unrealistic expectations around workloads. Again, however, it should be emphasized that the association between this form of work–life conflict and non-supportive management is only moderate in magnitude.

6.2 Coping with Work–Life Conflict: What Can Canadian Employees Do?

This section is divided into three main parts. The first part examines the strategies individual employees use to cope with work–life conflict. The second part looks at the impact of gender, job type and dependent care status on the use of the various individual coping strategies. The third part of this chapter answers research question 3 by examining to what extent the different individual coping strategies examined in this study actually help employees balance competing work and family demands. Such information is critical to employees who are wondering how to cope with work–life conflict.

6.2.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

Canadian employees use a myriad of strategies to cope with stress

Canadian employees use four kinds of personal strategies to cope with stress, anxiety and depression: social support (i.e. talk to colleagues and/or family, seek help from colleagues and family), active coping techniques aimed at the reduction or elimination of the sources of conflict (i.e. prioritize, schedule, organize and plan, delegate), avoidance (try to forget about it, find another activity to take one's mind off things), and reactive coping techniques, which focus on alleviating the symptoms of stress (i.e. have an alcoholic drink, take prescription drugs, work harder, reduce the quality of things one does).

6.2.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

The majority of Canadians use active coping strategies to cope with stress

Only one coping strategy, prioritize, was frequently used by a majority (69%) of the respondents. The second most common coping technique, used frequently by 47% of the sample, was to schedule, organize and plan their time more carefully. These data indicate that many employed Canadians use active coping strategies to cope with work–life conflict. Unfortunately, these findings are not as positive as they appear on the surface, for the following reasons. First, employees who try to cope by prioritizing and scheduling, organizing and planning, typically rank order their different role activities to focus on the most important ones. Unfortunately, most of those who implement these strategies give a higher priority to work than to family, a strategy that is not sustainable in the long term. Second, the third coping strategy within this grouping, delegation, is not widely used (i.e. only 27% of the sample frequently delegate work to others, which is half the number of employees who rarely use this strategy). While it is hard to determine why the use of delegation is low, it may be that they have no one to delegate to in the time-crunched workplace.

The majority of employed Canadians do not rely on social support networks for help

Our results indicate that the majority of employed Canadians try to deal with stress on their own—they do not rely on social support networks for help. The following can be used to illustrate this observation. First, two thirds of the respondents indicated that they rarely turned to colleagues at work for help as a way to cope with stress, anxiety and depression. While a third of the sample said that they talked to colleagues at work as a way to alleviate their stress, only half this number (16%) asked their colleagues for help. Similarly, while 45% of respondents indicated that they attempted to cope with stress by talking with family and friends (half did not), only one in four actually sought help from friends. Compare this with the fact that just over half of the sample said that they never coped with stress by seeking help from family and friends.

These findings are unfortunate, as the use of social support has been found to be an effective way of coping with stress and work–life conflict. Why are Canadian employees reluctant to seek support from others? Again, we can only surmise why the use of these coping techniques is not widespread. On the work front, these findings may reflect the fact that people are just too busy at work to build the relationships necessary for social support. Alternatively, the culture of hours that dominates many organizations may mean that employees do not ask for help because they fear that it will affect their image and their career advancement. On the family side of the equation, these results may be because all of the employee's friends and family are in the same situation as they are and have little time or energy to support others. Regardless of the root cause, these findings are unfortunate as many employees find the same types of things (i.e. heavy workloads, non-supportive managers, non-supportive work cultures) stressful. It is also unfortunate as this limits the sharing of effective coping strategies between employees and friends.

A substantive number of Canadian employees rely on escapist coping strategies

On a positive note, the majority of the respondents rarely use emotion-focused avoidance strategies to cope with stress, such as trying to forget about things and finding another activity to take one's mind off things. The numbers who frequently use these

6.2.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

escapist strategies to cope with stress is, however, still substantial. For example, one in three frequently seeks out other activities to try to take their mind off the stressor while one in five frequently "just tries to forget about it." Such strategies are typically less effective at reducing stress as the stressor typically remains unchanged and hence problematic.

One in ten Canadian employees uses reactive coping strategies

Just over one in ten of the respondents cope with stress by using reactive coping strategies such as having an alcoholic drink (12%), using prescription, over-the-counter or illegal drugs (11%), and reducing the quality of the things they do (10%) several times a week or daily. An additional one in four respondents has a drink on a weekly basis while one in five reduces the quality of the things they do weekly and 4% use drugs as a way to cope with stress, anxiety and depression. These strategies are reactive ways of dealing with the emotions aroused by stress and problematic both socially (linked to greater physical illness and costs to the health care system as well as family dysfunction) and economically (related to reduced productivity and increased absenteeism). While the fact that most employed Canadians rarely use such strategies is good news, the number who regularly rely on reactive coping techniques is still cause for concern. Of particular concern is that approximately half of the respondents to this survey (43%) frequently used the fourth reactive strategy included in this study and tried to cope by "just trying to do it all/working harder." This finding is consistent with the fact that few Canadians ask for help and reinforces our contention that the active coping strategies discussed earlier are directed toward getting more things done rather than eliminating an activity or role.

Employed Canadians cope by limiting their family size

The study data imply that the decline in Canada's birth rate over the past several decades can be linked to higher levels of work–life conflict. This claim can be substantiated by the fact that one in four of the respondents indicated that they had had fewer children because of demands at work. A further 28% indicated that they had delayed starting a family/decided not to have a family because they could not balance the demands of their career with a family.⁵¹ In others words, just over half of the employed Canadians who participated in this research initiative had used family-planning strategies to cope with work–life conflict. These findings need to be put into the appropriate context. All of the respondents to this study were employed and the majority (70%) lived in families with incomes of \$40,000 per year or more. In other words, most of the individuals who used these coping strategies were economically well positioned with respect to having children but had chosen to limit their family size in an attempt to cope with work–life conflict. These findings imply that governments that wish to increase birth rates need to deal with the issue of work–life conflict.

One in three employed Canadians copes by working different hours than their spouse

Almost one third of the survey respondents (31%) indicated that they off-shifted with their partner to better manage work and family responsibilities. In other words, they worked different hours than their partner to reduce their reliance on (or need for) formal child care.

⁵¹ It should be noted that none of these individuals had children at the time they completed the survey. Also, the average age of the respondents in this group was 36.

6.2.2 How Do Gender, Job Type and Dependent Care Status Affect the Use of Personal Coping Strategies?

6.2.2 How Do Gender, Job Type and Dependent Care Status Affect the Use of Personal Coping Strategies?

The use of three of the individual coping strategies examined in this analysis, seek help from colleagues at work, just try to forget about it and reduce the quality of things done, is not associated with gender, job type or dependent care status. In all three cases, relatively few employees use these strategies. The use of the other ten coping strategies, however, does vary depending on gender, job type and/or dependent care status. Key differences are summarized below.

Women are more likely to cope by seeking social support and using reactive coping strategies

It appears that how an employee chooses to cope with stress, anxiety and depression depends very much on the gender of the worker. Women, regardless of job type or dependent care status, were more likely than men to use the following coping strategies:

- seek social support
- work harder
- use prescription, over-the-counter or illegal drugs

Men are more likely to cope by delegating work to others and having an alcoholic drink

Men, on the other hand, were more likely than women to use the following coping strategies regardless of dependent care or job type:

- delegate work to others
- engage in other activities such as sports as a way to take their mind off things
- off-shift their work hours with their partner
- have an alcoholic drink

While both men and women use reactive strategies, men were more likely to cope by having a drink while women were more likely to cope by using medication. The gender difference in the use of prescription medicine as a means of coping with stress is largely because women in other positions in the organization are more likely than any other group to use this coping strategy (15% of the women in this group use prescription drugs several times a week or daily to cope with stress). The gender difference in the use of alcohol to cope with stress, on the other hand, can be attributed to the fact that male managers and professionals are more likely than any other group in the sample to use alcohol to cope with stress (20% of the men in this group have a drink several times a week or daily to cope with stress).

6.2.2 How Do Gender, Job Type and Dependent Care Status Affect the Use of Personal Coping Strategies?

Women, especially those in managerial and professional positions, cope by limiting family size

Women, regardless of job type, were significantly more likely than men to say that they had fewer children because of the demands of work and that they had delayed having children/decided not to have a family because they could not balance family and career.

Women in managerial and professional positions were more likely than women in other positions in the organization to say that they have had fewer children because of the demands of work (29% versus 23%) and that they had delayed having children/decided not to have a family because of their career (37% of the female managers and professionals in the sample gave this response versus 24% of the females in other positions). No such job type difference was observed for the men in the sample. This finding is consistent with other research showing that birth rate is negatively associated with socio-economic status.

Managers and professionals are more likely to use active coping strategies

When gender is taken into consideration, managers and professionals were more likely than those in other jobs to:

- delegate work to others
- schedule, organize and plan their time

It is likely that employees in this group use these strategies because they can (i.e. more likely to be in positions of authority within the organization) and because they have learned these skills at work and are transferring them to other domains.

Men in managerial and professional positions in particular use active coping strategies such as delegating and prioritizing (45% delegate and 75% prioritize several times a week or daily) to cope.

Managers and professionals are more likely to cope by working different hours than their spouse

Male and female managers and professionals are also more likely than their counterparts in other jobs to cope with child care or elder care responsibilities by off-shifting their work hours with their partner. Male managers and professionals, in particular, make heavy use of this strategy (i.e. 45% of the male managers and professionals in our sample and 37% of the female managers and professionals used off-shifting versus 29% of male and 16% of females in other jobs).

Use of the different coping strategies is not associated with dependent care status

The use of the various coping strategies considered in this study was not associated with dependent care status. Compared with their counterparts without caring responsibilities, those with child and/or elder care commitments were not more or less likely to seek help from others, rely on their families and friends, reduce the quality of their work, have a drink or take prescription drugs. Nor were they more or less likely to prioritize, schedule and plan or just work harder. These findings are interesting as they do not support either the positive or negative preconceptions many hold of working parents or caregivers. That being said, there are a number of interesting differences in the use of coping strategies that can be observed by comparing men with dependent care responsibilities to their female counterparts. Female caregivers use different coping strategies than men. For example, females with dependent care responsibilities were significantly more likely than their female counterparts without dependent care to cope by seeking help from family or friends and working harder. No such difference was observed for the men in the sample.

Males with dependent care responsibilities, on the other hand, were significantly more likely than their counterparts without dependent care to cope with stress by delegating work to others, by having an alcoholic drink, and by working different hours than their partner. The likelihood of using any of these strategies was not associated with dependent care status for females.

6.2.3 Evaluation of the Effectiveness of Various Individual Coping Strategies

Data quantifying the effectiveness of the various individual coping strategies at reducing the four forms of work–life conflict are summarized below.

6.2.3.1 Coping with Role Overload

Most individual coping strategies examined in this study do little to help employees cope with role overload. There was no association in either the gender by job type or gender by dependent care analysis between role overload and the use of just over half of the coping strategies. These findings suggest the following conclusions. First, social support does not help individuals deal with role overload, nor does trying to find another activity to take one's mind off things, scheduling, planning, and organizing, having an alcoholic drink or off-shifting work with a partner. Finally, there is no relationship between role overload and attempts to cope by prioritizing, delegating, just trying to forget about things and using prescription medicine, when job type is taken into account in the analysis.

So what does appear to make a difference? Working harder, reducing the quality of things one does, having fewer children and delaying starting a family/deciding not to have a family are all significantly associated with levels of role overload for all employees. The fact that the association is positive indicates that employees use these strategies in response to higher role overload. Unfortunately, it would appear that these strategies do not help employees cope with overload—they may in fact exacerbate the situation.

Trying to forget about things, prioritizing, delegating and taking prescription medicine makes a difference to those with dependent care. Details on these relationships are given below.

Employees with higher levels of role overload cope by working harder

About 43% of the sample copes with stress by just working harder. Unfortunately, the results from this study attest to the futility of such an approach as levels of role overload increase concomitant with the use of this strategy. The relationship between working harder and role overload is very strong and does not depend on the gender, job type or dependent care status of the

6.2.3.1 Coping with Role Overload

individual. Furthermore, the difference in role overload between someone who rarely uses this strategy and someone who uses it frequently is worthy of note ($\Delta = +.7$). The cross-sectional nature of the data makes it difficult to determine the direction of causality of these findings. The results may reflect the fact that people who are overloaded cope by working harder to get things done. Alternatively, they may mean that people who attempt to cope by working harder experience diminishing returns in productivity at higher hours of work (i.e. make more mistakes, work less effectively and efficiently)—which increases rather than decreases their levels of overload—resulting in the need to continue to work harder. In either case, working harder is associated with higher, rather than lower, levels of role overload—suggesting that this strategy does not alleviate overload.

Employees with higher levels of role overload cope by reducing the quality of their work

Just over one in four (28%) of the respondents say that they cope with stress by reducing the quality of the things they do. The importance of the relationship between reducing the quality of work and role overload can be ascertained by looking at the amount of variation in role overload explained by the use of this strategy and the difference in overload at high and low use of this strategy (increase of +.7 when job type is taken into account). While the causality of this finding is difficult to ascertain (i.e. people who are overloaded may reduce quality in an attempt to cope and/or people who cope by reducing quality experience an increase in role overload as they have to re-do some tasks), the conclusion one arrives at in either case is the same: this strategy does not help employees deal with role overload. It also implies that organizations that overload their employees in an attempt to "do more with less" will not realize significant productivity gains.

Finally, we should point out that it is important that the relationship between the use of this strategy and role overload varies with dependent care status. Reducing the quality of things that employees do does help employees with dependent care cope to some extent with role overload. No such impact is, however, noticed for employees without dependent care responsibilities. These findings suggest, unfortunately, that individuals with child and/or elder care cope with role overload by lowering their standards at home. This interpretation is consistent with the fact that employed Canadians are more likely to let work interfere with family than vice versa (Duxbury & Higgins, 2003).

Employees with higher levels of overload cope by deciding not to have children

This study implies that some of the decline in Canada's birth rate may be attributed to the increases in role overload and workloads we have seen over the past several decades. Consider the following.

- There is a strong, positive association between role overload and the decision to have fewer children because of work demands.
- There is a strong, positive association between the decision to delay having children/decide not to have children because of career demands and role overload.

In other words, it would appear that overloaded individuals are less likely to add another set of demands to their already full plate. Children, as we all know, and as the data confirm, increase the number of role demands on their parents.

6.2.3.1 Coping with Role Overload

As noted previously, female managers and professionals are more likely than other employees to try to cope by having fewer children, delaying the start of their family, and deciding to forgo motherhood. This is not surprising given our data that suggest having fewer children helps those in managerial and professional positions in general, and female managers and professionals in particular, cope with role overload. These findings, which seem to validate the decisions of these women, are likely due to the fact that female managers and professionals with children have higher demands at work than their female counterparts in other positions and at home compared to their male counterparts.

One way, perhaps, to address declining fertility is to reduce role overload. This can be done by decreasing expectations at the work end and/or by providing supports within the community that reduce demands at the parenting end. It is important to note that employees who are overloaded by elder care demands are also more likely to elect not to have children. This indicates that it is not just support for parenting that is required to alleviate role overload and increase Canada's birth rate. Employees also need support in the community to help them with elder care demands.

Prioritizing helps women with dependent care responsibilities cope with role overload

The use of three other coping strategies, forgetting about it, prioritizing and using prescription medicine, is associated with role overload when dependent care is taken into account. The following conclusions can be drawn about the effectiveness of these different strategies at reducing role overload:

- There is a substantive positive relationship between the use of escapist coping strategies such as just
 trying to forget about one's problems and role overload. Employees with higher role overload are more
 likely to use this strategy than those with lower levels (Δ = +.4). It looks like this strategy is not particularly
 effective at alleviating overload.
- There is a moderate relationship between the use of prioritizing as a coping strategy and role overload. The effectiveness of this strategy at easing overload depends on both gender and dependent care status. This strategy appears to be very effective for women with child and/or elder care responsibilities. It also seems to help men with dependent care responsibilities cope with role overload, although the impact is not as great as noted for women. Those with dependent care responsibilities appear to be coping with role overload by delegating family rather than work tasks.
- There is a moderate relationship between the use of prescription medicine to cope with stress and role overload. In this case, the data show that prescription medicine is an effective strategy if used on a daily basis ($\Delta = -4$). Those who use medication moderately often, on the other hand, experience the highest levels of role overload.

6.2.3.2 Coping with Work-to-Family Interference

6.2.3.2 Coping with Work-to-Family Interference

The findings with respect to the effectiveness of various individual coping strategies at easing work-to-family interference are virtually the same as noted for role overload. Again, we conclude that most individual coping strategies examined in this study do little to help employees cope with work-to-family interference. There was no association in either the gender by job type or gender by dependent care analysis between work-to-family interference and the use of 60% of the coping strategies. Neither social support (talked with family or friends, talked with colleagues at work, sought help from family or friends, sought help from colleagues at work) nor active coping (i.e. prioritize, delegate, schedule, plan and organize) strategies help individuals deal with work-to-family interference. Nor does trying to find another activity to take one's mind off things, having an alcoholic drink or off-shifting work with a partner seem to help. Furthermore, there is no relationship between work-to-family interference and attempts to cope by just trying to forget about things and using prescription medicine, when job type is taken into account.

So what does appear to make a difference? Working harder, reducing the quality of things one does, having fewer children and delaying starting a family/deciding not to have a family—the same strategies that were significantly linked to role overload. Again, we note that the relationship between the use of each of these strategies and work-to-family interference is strong and positive, which reinforces our idea that these strategies (especially working harder and reducing the quality of things one does) do not help employees cope with work-life conflict, but instead may exacerbate the situation.

Employees with higher levels of work-to-family interference cope by limiting family size

The relationship between work-to-family interference and decision making around having children reinforces our contention that some of the decline in Canada's birth rate may be attributed to increases in work-life conflict. Consider the following:

- There is a strong, positive association between work-to-family interference and the decision to have fewer children because of work demands.
- There is a strong, positive association between the decision to delay having children/decide not to have children because of career demands and work-to-family interference.

Similar to the findings with respect to role overload, having fewer children seems to reduce work-to-family interference somewhat for male and female managers and professionals, probably by reducing their role obligations outside of work. The strategy is less effective for those in other positions.

These findings point to the fact that employees who are having problems reconciling work and family demands are more likely than those who are more able to balance competing expectations to decide that they cannot cope with the additional responsibilities outside of work that come with additional children. As such, they reinforce our contention that one way for Canadian policy makers to address declining fertility is by looking at how they can reduce work-to-family interference.

6.2.3.2 Coping with Work-to-Family Interference

Employees with higher work-to-family interference cope by working harder

The relationship between working harder and work-to-family interference is very strong. Unlike the situation for role overload, however, the effectiveness of this strategy depends on the gender, job type and dependent care status of the individual. We can make the following conclusions:

- The use of this coping strategy is associated with increased work-to-family interference for men and women in managerial and professional positions and men with dependent care responsibilities. These findings suggest that these employees cope by devoting more effort to their work role, thereby increasing their feelings of interference on the family front.
- The use of this coping strategy does provide for some degree of relief from work-to-family interference
 for those in other positions within the organization—especially men. It may be that by working harder
 these individuals are more able to focus their efforts on meeting demands outside of work—thereby
 reducing the extent to which work interferes with family.

Employees with higher work-to-family interference cope by reducing the quality of their work

The relationship between the use of this coping strategy and work-to-family interference is similar in many ways to what was reported in conjunction with role overload. First, the relationship between reducing the quality of work and work-to-family interference is substantive. Second, the difference in interference at high and low use of this strategy, when job type is taken into account, is the same magnitude as determined in the role overload analysis (increase of +.7). Third, the relationship between the use of this strategy and work-to-family interference varies with dependent care status, with employees with dependent care responsibilities benefiting slightly more than their counterparts without such responsibilities. These findings are, therefore, consistent with our contention that individuals with child and/or elder care cope with work-to-family interference by lowering their standards at home. These results also support our view that organizations that make it difficult for employees to reconcile work and non-work demands by expecting employees to give priority to work at the expense of their life will not realize significant productivity gains.

Daily use of prescription drugs helps employees cope with work-to-family interference

Similar to what was observed for role overload, there is a moderate relationship between the use of prescription medicine to cope with stress and work-to-family interference. In this case, however, the relationship is only significant when job type, rather than dependent care status, is taken into account. Furthermore, the data verify the relationship between prescription drug use and work-life conflict observed with role overload: prescription medicine helps employees cope with conflict if used on a daily basis ($\Delta = -2$). Moderate use, however, is associated with higher levels of work-to-family interference.

6.2.3.3 Coping with Work-to-Family Interference

6.2.3.3 Coping with Work-to-Family Interference

Individual coping strategies are not effective at helping employed Canadians deal with family-to-work interference for several reasons. First, none of the individual coping strategies examined in this study (including decision making around deciding to have children) is substantively associated with family-to-work interference in the gender by job type analysis. Second, 60% of the individual coping strategies were not associated with family-to-work interference when dependent care status was taken into account. This means that employees cannot reduce this form of work-life conflict through the use of social support, off-shifting work with their spouse or active coping (prioritize, and schedule, plan and organize). Nor can they reduce family-to-work interference by the use of alcohol, prescription drugs or finding another activity to take their mind off things. Third, with one exception (reduce quality of things one does) the relationship between family-to-work interference and individual coping is moderate at best. In other words, only about 5% of the variation in family-to-work interference can be explained by the coping strategy.

Six individual coping strategies are associated with family-to-work interference when gender and dependent care status are taken into account:

- reducing the quality of things one does
- have fewer children
- just working harder
- just trying to forget about things
- delaying starting a family/deciding not to have a family
- delegating work to others

In all cases, the relationship between the use of the strategy and family-to-work interference depends on both gender and dependent care status. The following observations on coping with family-to-work interference can be made by looking at these relationships.

Reducing the quality of work does not help men and women with dependent care cope with family-to-work interference

There is no relationship between the tendency to reduce the quality of things one does and family-to-work interference for those without dependent care. There is, on the other hand, a positive relationship between reducing the quality of things one does and family-to-work interference for the parents/elder-caregivers ($\Delta = +.4$). These findings suggest that men and women with dependent care cope with stress at home by lowering their standards at work (i.e. let family interfere with work). The implication of this is that employers interested in quality of work need to implement strategies to reduce family-to-work interference and enhance work–life balance.

6.2.3.3 Coping with Work-to-Family Interference

Working harder seems to help those without dependents cope with family-to-work interference

Working harder seems to help men and women without dependent care responsibilities cope with family-to-work interference. The same cannot be said for men and women with dependent care responsibilities, who report a strong positive relationship between use of this strategy and family-to-work interference. It may be that those without child care and/or elder care are able to reduce this form of interference by increasing their efforts at home—a strategy that becomes less effective as demands outside of work increase.

Delegating work to others does not help women cope with family-to-work interference

Delegating appears to be a more effective coping strategy for men than for women. There is no association between the frequency with which one delegates work to others and family-to-work interference for women, regardless of their dependent care status. For men, on the other hand, family-to-work interference decreases as delegation increases. Men with dependent care (Δ = -.3) experience slightly more benefits from the use of delegation than their counterparts without dependent care (Δ = -.2). Gender-role theory suggests that these findings may be because women have difficulty giving up responsibility for the family role (i.e. child care, elder care, home chores). While the tasks themselves might be delegated to others, the responsibility for the task remains with the women. Men have no such problems.

Just trying to forget about it can help those without dependents cope with family-to-work interference

The results with respect to trying to forget about problems and family-to-work interference is interesting. For those with dependent care responsibilities, the findings are quite clear—interference increases concomitantly with the use of this strategy. For men and women without such caregiving responsibilities, higher use of this strategy is associated with a plateau effect of family-to-work interference. The strategy appears to be particularly effective for women without dependents. It is easier for those without caregiving responsibilities to successfully separate family from work and "forget about" challenges outside of work.

The decision to delay or not have children reduces family-to-work interference for women

The findings with respect to the relationship between deciding to delay or not have children and family-to-work interference reinforces our contention that women who do not have caregiving responsibilities are more able to separate family from work. The women who have made the decision not to have children because of their work report significantly lower levels of family-to-work interference (Δ = -.3) than counterparts who have not made such a decision. This finding is not surprising since this group of women have fewer constraints to deal with at home. While the findings from this study validate the decision (it is easier to focus on your career if you do not have children), the use of this coping strategy is not good for Canada. Again, these data point to the need for Canadian policy makers and organizations to address the issue of work–life balance.

6.2.3.4 Coping with Caregiver Strain

6.2.3.4 Coping with Caregiver Strain

The relationships between the use of the various personal coping strategies and caregiver strain are very similar to those observed for family-to-work interference. In both cases, individual coping strategies do little to help employed Canadians deal with the form of work–life conflict under consideration. None of the individual coping strategies (including the decision to have children) was associated with either family-to-work interference or caregiver strain in the gender by job type analysis. We also note that individual strategies such as the use of social support, off-shifting work with one's spouse and active coping strategies (prioritize, schedule, plan and organize, delegate) do not help employees cope with either caregiver strain or family-to-work interference. Nor can employees reduce caregiver strain by drinking alcohol or finding another activity to take their mind off things. Finally, the relationship between caregiver strain and individual coping is also moderate at best.

Six individual coping strategies are associated with caregiver strain when gender and dependent care status are taken into account:

- delay starting a family/decide not to have a family
- have fewer children
- just work harder
- reduce the quality of things one does
- just try to forget about things
- use prescription medicine

With two exceptions (decision to not have children, use of prescription medicine), the relationship between the use of the strategy and caregiver strain is straightforward—higher use of the strategy is associated with higher levels of strain (increases in strain ranging from +.3 to +.5), regardless of the employee's gender or dependent care status. The data with respect to the decision to have children are similar to those observed with the other forms of work–life conflict: women with high levels of caregiver strain are more likely to decide not to have children than counterparts with lower levels of strain. This suggests that the solution to increasing Canada's birth rate is to help employees deal with caregiver strain, perhaps by providing elder care support mechanisms within the community.

Daily use of prescription drugs helps employees cope with caregiver strain

There is a moderate relationship between the use of prescription medicine to cope with stress and caregiver strain. The relationship between prescription drug use and caregiver strain is similar to that observed with both role overload and work-to-family interference: prescription medicine helps employees cope with strain if used on a daily basis ($\Delta = -.2$). Moderate use, however, is associated with higher levels of caregiver strain ($\Delta = +.5$). These findings suggest that employees resort to prescription drugs as a last resort (i.e. when their stress levels are higher).

6.3.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

6.3 Coping with Work–Life Conflict: What Can Canadian Families Do?

6.3.1 Benchmark Data on the Use of Personal Coping Strategies in Canada

This section is divided into three main parts. The first part examines the family strategies employees use to cope with work-life conflict. The second part looks at the impact of gender, job type and dependent care status on the use of the various family coping strategies. The third part provides an answer to research question 4 by evaluating how effective the various family coping strategies examined in this study are at reducing the four forms of work-life conflict. Such information is critical to employees and their families as well as groups that counsel families on how best to cope with work-life conflict.

Many Canadian employees involve their families in their attempt to cope with stress

Canadian families use five different sets of coping strategies in their attempt to deal with work–life conflict: restructure and redefine family roles (i.e. encourage children to help each other, get children to help with household tasks, cover household responsibilities for each other, try to be flexible, plan family time together), put family first (limit job involvement to allow time for family, modify work schedule, plan work changes around family needs, identify one partner as responsible for family, leave work problems at work), sacrifice personal needs and standards (leave things undone around the house, get by on less sleep, cut down on outside activities, buy more goods and services), seek social support (rely on extended family for help, rely on friends for help), and procure outside help (i.e. hire help to care for the children, hire help to care for elderly dependents).

Eight of the eighteen family coping strategies were used by the majority of the sample. Tellingly enough, 88% of these high-use family coping strategies fall into two main groupings: restructure family roles and sacrifice personal needs.

The majority of Canadians cope by restructuring family roles and sacrificing personal needs

Approximately three quarters of the survey respondents cope with work–life issues by engaging in three activities that typify restructuring family-role expectations: 76% try to be flexible, 72% cover household responsibilities for each other and 71% encourage their children to help each other. Half cope by participating in the other two behaviours in this grouping: getting children to help with household tasks (53%) and planning family time together (48%).

Likewise, just over three quarters of the survey respondents cope with work–life issues by sacrificing personal needs (77% leave things undone around the house) while half cope by cutting down on outside activities (56%), getting by on less sleep (54%) and buying more goods and services (45%)—all strategies that involve the employee dealing with work–life conflict by sacrificing personal needs.

6.3.2 How Do Gender, Job Type and Dependent Care Status Affect the Use/Perceived Availability of Organizational Supports?

These coping strategies all have one thing in common—employees who use them try to cope with work-life issues by making accommodations within their personal and/or family life. The fact that these two sets of strategies are commonly used substantiates our contention that the first line of defence against high levels of work-life conflict is to put work first—to meet work demands at the expense of family and/or personal life.

Many Canadian families try to buy work-life balance

Many Canadians attempt to deal with work–life conflict issues by purchasing help from outside the family unit. Just under half (42%) hire help from outside to care for their children and, as noted previously, buy more goods and services (45%). Just over one in four (26%) hire help to care for elderly dependents. It is interesting to note that Canadians are more likely to try to buy balance than they are to ask extended family (30%) or friends (17%) for help. These data are consistent with those noted earlier in conjunction with social support and reinforce the need for governments to provide the services to cope with competing work and family demands.

One in three Canadian employees copes by putting family first

A substantive minority of respondents seem to buck the trend of expecting family members to adapt to their work situation and instead use coping strategies that put family first. They do this by trying to leave work problems at work (i.e. 50% try to psychologically separate their work and non-work domains), limiting their job involvement to give time to the family (37%), planning work changes around family needs (36%), identifying one partner as being responsible for household tasks (31%) and by modifying their work schedule to accommodate their family schedule (24%). While laudable, these strategies may limit the employee's promotion opportunities as they run counter to the dominant cultural norms in Canadian organizations (see Duxbury & Higgins, 2005 and Duxbury et al., 2003).

6.3.2 How Do Gender, Job Type and Dependent Care Status Affect the Use/Perceived Availability of Organizational Supports?

Gender is the major determinant of the use of the various family coping strategies examined in this study. Women were more likely than men to use virtually all of the family coping strategies analyzed. It is interesting to note that there are no strategies that are more likely to be used by men than women across both job type and dependent care status.

6.3.2 How Do Gender, Job Type and Dependent Care Status Affect the Use/Perceived Availability of Organizational Supports?

Women are more likely to cope by sacrificing their needs

Regardless of the type of job they hold or the dependent care responsibilities they have, women were more likely than men to try to cope with work-life issues by sacrificing personal needs and by purchasing supports from outside the family. They were also more likely than men to try to cope by strengthening and restructuring their family roles (i.e. get children to help with household chores, plan family time together), relying on extended family for help, and limiting job involvement to allow time for family. These findings are likely due to how women have traditionally been socialized (i.e. to be altruistic and put the needs of others, particularly family members, first).

Parents and those with elder care responsibilities are more likely to cope by putting family first

Men and women with dependent care responsibilities are more likely than those without to cope by engaging in strategies that put family first and sacrificing personal needs. Specifically, with respect to sacrificing personal needs they:

- leave some things undone around the house
- get by on less sleep
- cut down on outside activities

In all three cases, these differences can be attributed to the fact that women with dependent care responsibilities are more likely to use these strategies than their male counterparts. There were no gender differences in the use of these strategies for those without dependents.

Employees with child and/or elder care are more likely to cope by sacrificing personal needs

Employees with dependent care responsibilities were also more likely than their counterparts without such responsibilities to plan work changes around family needs, limit job involvement to allow time for family, try to be flexible, and identify one partner as primarily responsible for household tasks.

Again, there are a number of significant gender differences within these findings that are important to note. Women with dependents were more likely to plan work changes around their family and limit their job involvement to allow time for their family than their male counterparts. Men with dependents, on the other hand, were more likely than their female counterparts to identify one partner (their spouse) as having primary responsibility for the family. No such gender differences in use were apparent for employees without dependents. These findings are interesting as they suggest that women are still the ones who are expected to (and perhaps want to) sacrifice personal career goals for their family.

Managers and professionals cope by modifying their work schedule and planning work around family

Managers and professionals, regardless of their gender and their dependent care status, were more likely to try to cope by modifying their work schedule (it will be recalled that this group is more likely to use flexible work arrangements) and plan work changes around family needs. These findings may reflect the fact that highly educated managers and professionals have more ability to negotiate such things with their employer than those in other positions in the organization.

6.3.3.1 Coping with Role Overload

Managers and professionals cope by sacrificing personal needs

Managers and professionals were more likely than those in other positions to cope by sacrificing personal needs. They get by on less sleep, leave things undone around the house, buy more goods and services (female managers and professionals in particular are likely to use this strategy) and cut down on outside activities. These findings are consistent with the fact that employees in this group have heavier work demands. Given the fact that hours in a day remain constant, these findings suggest that employees in this group have to sacrifice time that they would typically spend on socializing and sleeping to meet work and family demands. Consistent with these findings is the fact that managers and professionals are more likely to say that they cope by trying to be flexible.

Employees in other positions cope by putting their family first and sharing housework

Those in other positions in the organization are more likely than managers and professionals to indicate that they cope with work and family issues by leaving work-related problems at work and covering household responsibilities for each other. However, it should be noted that women in other positions within the organization were significantly less likely to use this strategy than their male counterparts.

6.3.3 Evaluating the Effectiveness of the Various Family-Based Coping Strategies

Data evaluating the ability of the 18 family coping strategies to reduce role overload, work-to-family interference, family-to-work interference and caregiver strain are summarized below.

6.3.3.1 Coping with Role Overload

Generally, there is no relationship between role overload and attempting to cope by strengthening/restructuring family roles or seeking social support. Other family coping strategies not associated with role overload in either the job type or dependent care analysis include hiring help to care for elderly dependents, identifying one partner as responsible for household chores, and limiting one's job involvement. Two additional family coping strategies have no relationship with role overload when job type is taken into account: cover household responsibilities for each other and plan work-related changes around the family.

How do Canadian families cope with role overload? Generally, they use three sets of strategies: sacrifice personal needs (i.e. get by on less sleep, leave things undone around the house, cut down on outside activities, buy more goods and services), put their family first (i.e. leave work problems at work, modify their work schedules) and procure help from outside the family (i.e. hire help

6.3.3.1 Coping with Role Overload

to care for children). They also cover family responsibilities for each other. The good news is that two of these strategies (put family first, and cover family responsibilities for each other) appear to help employees cope with role overload. A third, hire help to care for children also helps employees cope when used in moderation. Unfortunately, the challenge is that employees who attempt to cope with role overload by sacrificing personal needs, experience higher, rather than lower, levels of role overload. Also cause for concern is the fact that twice as many Canadians cope by sacrificing personal needs than cope by putting family first.

Employees who cope by sacrificing personal needs report higher levels of role overload

The relationship between sacrificing personal needs and role overload is significant and substantive in both the gender by job type and gender by dependent care analyses. The relationship between two of these strategies, getting by on less sleep and cutting down on outside activities, is very strong. The relationship between buying more goods and services and role overload is substantive. In two of the cases, get by on less sleep ($\Delta = +.8$) and cut down on outside activities ($\Delta = +.5$), the relationship is very straightforward—the greater the use, the higher the overload, regardless of the employee's gender, job type or dependent care responsibilities. In the third case, leaving things undone around the house, the relationship between the use of this strategy and role overload depends on both the gender and the dependent care status of the individual. For men and women without dependent care responsibilities, higher use of the strategy is associated with increased role overload ($\Delta = +.8$). The results suggest that this strategy does, to some extent, help men and women with dependent care cope with role overload. While the strategy appears to be more effective for women with dependent care ($\Delta = +.5$) than for their male counterparts ($\Delta = +.6$), in neither case do role overload levels drop with increased use.

Employees who put family first are better able to cope with role overload

The relationship between putting family first and role overload is also significant and substantive in both the gender and job type and gender and dependent care analyses. The relationship between role overload and one of the strategies in this grouping, leave work-related problems at work, is very strong. The relationship between modifying work schedule (another strategy in this grouping) and role overload is moderate. In both cases, the greater the use of the strategy, the lower the role overload. Who benefits the most from using these strategies? From the data, we can conclude the following:

- Leaving work problems at work is a more effective coping strategy for men than for women regardless of dependent care status or job type.
- Modifying one's work schedule is a more effective coping strategy for male managers and professionals than for men in other positions, who do not experience any decline in role overload when using this strategy. Modifying one's work schedule also helps female employees, regardless of their job type, cope with role overload. The benefit is not, however, as great as that observed for male managers and professionals (decline in overload of -.4 for male managers and professionals versus -.2 for women).

6.3.3.2 Coping with Work-to-Family Interference

Moderate use of hired help to care for children helps employees cope with role overload

The findings with respect to the relationship between the use of hired help to care for one's children and role overload are interesting, as they suggest that this strategy helps employees regardless of gender or job type cope with role overload, but only when used in moderation. Employees who do not use hired help to care for their children as well as employees who use help on a daily basis both report higher levels of overload while those who employ help once or twice a week report significantly lower levels of overload. These findings raise the question: Why is daily use of child care associated with higher levels of role overload? While our data cannot answer this question specifically, we can suggest a number of reasons for these findings, including that employees with a high reliance on day care are overloaded by the tasks associated with delivering and picking up children, and that employees with a moderate reliance on day care tend to either work part time or off-shift care with their spouse.

Employees with a partner who will cover family chores for them are more able to cope with role overload

Men and women with dependent care responsibilities who live in families where partners or spouses are willing to cover family responsibilities for each other (i.e. egalitarian families) are more able to cope with role overload than their counterparts who are not able to count on such assistance. These findings make sense and suggest that one can meet heavy expectations at work when someone is available to help out at home. Unfortunately, many families are time crunched today—and such assistance may come at a cost to the obliging partner.

6.3.3.2 Coping with Work-to-Family Interference

Eight of the 18 family coping strategies were associated with work-to-family interference. Four of these strategies involved sacrificing one's personal needs, three involved putting family first, and one involved procuring support from outside the family (i.e. hiring help to care for children). What is interesting, however, is the strength of the association between the use of four of these strategies (three out of four of those involving self-sacrifice and one of the two that represents putting family first) and work-to-family interference. In all four cases, the R² was relatively high and the difference in mean levels of interference between someone who rarely uses the strategy and someone who uses the strategy frequently was approximately 1.0. In other words, the use of these strategies makes a concrete difference in terms of the amount of work-to-family interference the employee experiences—for the better (putting family first) or the worse (sacrificing one's personal needs).

Employees who cope by sacrificing personal needs report higher levels of work-to-family interference

Individuals who cope with work-to-family interference by sacrificing personal needs are apt to make their situation worse, not better. The use of two of the behaviours in particular is problematic. The relationship between work-to-family interference and leaving things undone around the house and getting by on less sleep are both very strong. The relationship between

6.3.3.2 Coping with Work-to-Family Interference

cutting down on outside activities and work-to-family interference, and between buying goods and services and work-to-family interference are substantive. In two of the cases, get by on less sleep ($\Delta = +1.0$) and buy more goods and services ($\Delta = +.5$), the relationship is very straightforward—the greater the use, the higher the interference. The other two relationships are more complex and vary depending on the gender and the job type of the employee.

Occasionally leaving things undone around the house helps women cope with work-to-family interference

Leaving things undone around the house has a strong, positive association with work-to-family interference for men, regardless of their job type. For women, on the other hand, moderate use (i.e. once a week) of this strategy is associated with an increased ability to cope with work-to-family interference. Women who leave things undone around the house on a daily basis, however, report significantly higher levels of interference. Women in managerial and professional positions, in particular, benefit from using this strategy moderately often (drop in interference of -.3 between do not use and use weekly, but an increase in interference of +.8 when move from moderate use to daily use). While the pattern is the same for women in other positions, the dissimilarities in interference between the different levels of use are not as extreme (drop in interference of -.1 between do not use and use weekly, but an increase in interference of +.4 when move from moderate use to daily use).

Employees who occasionally cut down on outside activities are more able to cope with work-to-family interference

A similar relationship can be observed with respect to the use of cutting down on outside activities as a coping strategy and work-to-family interference. Moderate use of this strategy is associated with lower levels of interference while daily use is associated with greater interference, regardless of gender, job type or dependent care status. Men and women in managerial and professional positions benefit the most in terms of a decline in work-to-family interference from moderate use of this strategy (decline of -.4 from no use to moderate use for male and female managers compared with -.3 for men in other positions and -.2 for women in other positions). Male managers and professionals, however, also experience the greatest increase in interference when this strategy is used daily (increase in interference of +.3 from moderate to high use of the strategy, versus +.2 for men and women in other positions). The fact that no such increase in interference can be observed for female managers and professionals suggests that this strategy is effective at all levels of use for the women in this group.

Employees who put family first are more able to cope with work-to-family interference

Employees who wish to reduce the amount of interference they experience between work and family need to make a conscious effort to leave work problems at work and modify their work schedules. The results imply that employees who make an effort to separate work time from non-work time by leaving work problems at work will realize significant declines in work-to-family interference. Males, in particular, experience significant reductions in work-to-family interference (Δ = -1.2) regardless of their dependent care responsibilities. While women also benefit from the use of this strategy (Δ = -.8), it is not as effective at reducing interference for this group. Again, we note that dependent care status does not have an impact on this relationship.

6.3.3.3 Coping with Family-to-Work Interference

Similarly, modifying work schedule was only significantly associated with work-to-family interference in the analysis that took job type into consideration. Male and female managers and professionals benefit the most when they modify their work schedule. Interestingly, the results suggest that modifying one's work schedule once or twice a week is enough to help employees in this group cope with work-to-family interference. Additional modification (i.e. on a daily basis) provides no additional reduction in interference. A similar pattern was observed with men in other positions in the organization, albeit the decline in interference was not as striking ($\Delta = -4$).

The relationship between work-to-family interference and modification of work schedule is quite different for women in other positions within the organization. Similar to what was observed in the other groups, women in other positions within the organization experience a decline in interference of -.4 when they move from never modifying their schedule to weekly modification. Unfortunately, this group experiences an increase of +.4 in interference when they use this strategy on a daily basis. While we cannot say why modification of one's work schedule increases interference for this group of women when used frequently, the findings regarding work schedules does shed some light on the findings. It will be recalled that women in other positions are more likely to work a 9-to-5 schedule where the hours of work are fixed and therefore predictable. It may be that women in this group, who cannot afford more flexible child and elder care support services, may find working flexible hours more problematic for getting things done at home.

Employees with higher levels of interference are more likely to try to cope by purchasing supports from outside the family

The relationship between work-to-family interference and purchasing goods and services from outside the family is positive. The difference in interference between someone who never purchases outside support and one who does so daily is notable ($\Delta = +.5$), suggesting that money may not be able to buy balance.

6.3.3.3 Coping with Family-to-Work Interference

Family coping strategies are ineffective at reducing family-to-work interference

Virtually none of the family coping strategies examined in this study was associated with family-to-work interference. There is only one strategy that was substantively associated with family-to-work interference in both the job type and dependent care analyses: hire help to care for children. In both cases, family-to-work interference increased concomitant to the use of hired help to care for children ($\Delta = +.5$), suggesting that family is more likely to interfere with work when one purchases paid child care. One additional strategy was significant in the analysis that took dependent care status into account: get by on less sleep. Again, increased use of this strategy is associated with greater family-to-work interference ($\Delta = +.5$).

6.3.3.4 Coping with Caregiver Strain

Family coping strategies are ineffective at reducing caregiver strain

The findings with respect to the ability of the various family coping strategies explored in this study to help employees cope with caregiver strain are, with one exception (employees hire help to care for elderly dependents rather than their children), virtually identical to those observed for family-to-work interference. There is only one strategy that was substantively associated with caregiver strain in both the job type and dependent care analyses: hire help to care for elderly dependents. One additional strategy was significant in the analysis that took dependent care status into account: get by on less sleep.

While the relationship between caregiver strain and get by on less sleep is relatively straightforward (use of the strategy increases at same time as strain increases), the relationship between hiring help to care for elderly dependents and caregiver strain is more complex and varies depending on both the gender and the job type. For the men in the sample, the greater the strain the greater the tendency to procure assistance from outside the family ($\Delta = +.5$ for men in other positions and $\Delta = +.4$ for men in managerial and professional positions). For women, on the other hand, moderate use of this coping strategy is associated with an increased ability to cope with caregiver strain. This is particularly true for women in managerial and professional positions ($\Delta = -.3$ versus $\Delta = -.1$ for women in other positions). Daily use of hired help to care for elderly dependents, on the other hand, is associated with higher levels of caregiver strain ($\Delta = +.4$ regardless of job type). This suggests that when caregiver strain is acute, outside support does little to alleviate the strain.

6.4 Recommendations

The following key themes sum up the data considered in this phase of the research:

- 1. There is no one-size-fits-all solution to the issue of work-life conflict. The study shows quite clearly that different policies, practices and strategies will be needed to reduce each of the four components of work-life conflict examined in this study. The workforce is not homogeneous, and gender, dependent care status and job type are significant moderators of the relationship between many of the coping strategies examined and work-life conflict. Policy planning should take these differences into account.
- 2. The study identified several strategies at the organizational level (supportive management and perceived flexibility) and individual level (have fewer children, do not have children, get enough sleep) that are associated with an increased ability to cope with all four forms of work–life conflict.

- 3. Employees who experience high levels of work-life conflict are, regardless of the form of conflict, less likely to have children. This finding has very important social implications as it links issues such as labour force shortages and pension plan collapse to work-life conflict. Our research suggests that one way to increase Canada's birth rate would be to implement policies and programs to help Canadians cope with work-life conflict in general and role overload and work-to-family interference in particular. Suggestions on how this can be done are given below.
- 4. Organizations can do a lot to help employees cope with work-life conflict in general and role overload and work-to-family interference in particular. Virtually all of the strong and substantive associations identified in this study originate from the organizational domain. With a few exceptions (such as reducing family size and not having children), the ability of personal and family coping strategies to reduce work-life conflict pales in comparison to the effectiveness of actions that can be taken by the organization.
- 5. The same organizational interventions and personal coping strategies that reduce role overload also reduce work-to-family interference—but more effectively.
- 6. Perceived flexibility helps employees cope with work-life conflict: flexible work arrangements per se do not.
- 7. Work–life conflict depends more on who you report to within the organization than the organization you work for. Family-friendly benefits and alternative work arrangements on their own have little to no impact on an employee's work–life conflict. The behaviour of the employee's immediate manager (i.e. extent to which they engage in supportive and non-supportive behaviours), on the other hand, is a key predictor of work–life conflict in general, and role overload and work-to-family interference in particular. Who you work for is also a key predictor of how much flexibility an employee perceives they have with respect to hours of work and work schedules.⁵²
- 8. Work–life policies and programs are necessary but not sufficient, in that they will not be implemented or used if an employee's manager is non-supportive of work–life issues.
- 9. While employers often point with pride to the many programs available in their organization to help employees meet family obligations, they do not diminish the fact that most people simply have more work to do than can be accomplished by one person in a standard work week. This study indicates that many of the ways employees attempt to cope with workload issues (i.e. decide to reduce their family size or not have children, work harder, cut back on sleep, take prescription medicine or have a drink, reduce the quality of the work, cut back on outside activities) benefit no one: employees, their families, employers or Canadian society in general. These findings are consistent with those noted in previous reports and reinforce our contention that employers and governments need to recognize that the issue of work–life conflict cannot be addressed without addressing the issue of workloads.

⁵² The correlation between perceived flexibility and the total non-supportive management measure is -.362 while the correlation between perceived flexibility and the total supportive manager measure is +.281.

- 10. The majority of Canadians do not cope effectively with work–life conflict. Most Canadians attempt to cope by sacrificing personal life, cutting back on social life, not having children, working harder and getting less sleep—strategies that this research shows are associated with increased rather than decreased conflict between work and home. Relatively few Canadians
- 11. Many of the individual and family coping strategies that the research literature links with an increased ability to deal with stress do not appear to be effective means of coping with work–life conflict. This would point to a need to consider a much broader set of coping responses than are typically studied.
- 12. Caregiver strain has a different form than the other three types of work–life conflict. Coping strategies and organizational interventions that help employees cope with role overload and work-to-family interference, in particular, have little to no impact on caregiver strain. In this case, it would appear that policies and community supports (i.e. elder care referral, purchasing help from outside the family) are fundamental to an employee's ability to deal with caregiver strain. This indicates that governments have a great role to play with respect to helping Canadians deal with caregiver strain.

This study has identified a number of strategies that employers, employees and families can use to reduce role overload (see Appendix H), work-to-family interference (see Appendix I), family-to-work interference (see Appendix J) and caregiver strain (see Appendix K). Recommendations targeted at each of these groups are given below. The chapter ends with an additional set of recommendations aimed at unions and governments.

What Can Employers Do to Reduce Work-Life Conflict?

This study identified two concrete things that employers can do to reduce work—life conflict: increase perceived flexibility and increase the number of supportive managers/decrease the number of non-supportive managers within their organization. These two strategies must be implemented hand in hand, as our data show that managers are, through their behaviours, the ones who make employees believe that they are able to exert some degree of control over their work schedule. Employers that focus on these two areas should realize significant reductions in employee role overload and work-to-family interference, moderate reductions in family-to-work interference and some increased ability for employees to cope with caregiver strain. Furthermore, increased levels of flexibility and supportive management help all employees cope with these forms of work—life conflict, so progress in these areas should produce the maximum return on investment. Details on ways forward are given below.

Increase perceived flexibility

1. Employers need to provide employees with a greater sense of control over their hours of work and their work schedule.

Specifically, to help employees cope with work-life conflict, organizations need to make it possible for jobholders to arrange their work schedule to meet personal/family commitments, interrupt their work day for personal/family reasons and return to work, take holidays when they want to, be home in time to have meals with their family, and vary their hours of work.

The criteria under which flexibility in each of these areas can be used should be mutually agreed upon and transparent. There should also be mutual accountability around their use (i.e. employees need to meet job demands but organizations should be flexible with respect to how work is arranged). The process for changing hours of work, location of work, vacation time should, wherever possible, be flexible.

2. Employers should give employees paid time off work to attend relevant training sessions, courses and conferences.

The strong association between an inability to participate in career development opportunities outside of work hours and both role overload and work-to-family interference indicates that employees with dependent care responsibility who try to maintain their professional credentials or increase their learning on their own time pay a price—increased work–life conflict. Of course, those who do not engage in learning activities pay a different price—a lack of career mobility and reduced economic benefits and job insecurity. These findings give organizations another incentive to deal with the issue of role overload: an increased ability to recruit and retain talent.

3. Employers need to give employees the opportunity to take a fixed number of paid days off work per year (we suggest five) to care for sick children or elderly dependents.

This study determined that greater flexibility in both these areas was associated with an increased ability to cope with role overload and work-to-family interference. Implementation of these benefits should also produce additional advantages for employers outside the work-life arena, as they concretely demonstrate to employees that their employer trusts them, is listening to them and recognizes their demands outside of work. Our data also indicate that such policies are positively associated with increased levels of commitment and engagement.

4. Organizations need to introduce new performance measures that focus on objectives, results and output (i.e. move away from a focus on hours to a focus on output).

It is very difficult (if not impossible) to increase perceived flexibility in organizations where the focus is on hours rather than output and presence rather than performance. To do this, employees need to reward output not hours and reward what is done, not where it is done. They also need to reward people who have successfully combined work and non-work domains and not promote those who work long hours and expect others to do the same.

Increase the number of supportive managers within the organization

- 5. Employers need to increase the number of supportive managers within their organizations while simultaneously reducing the number of managers who are seen to be non-supportive. Specifically they need to increase the number of managers within their organization who consistently display the following behaviours:
 - make work expectations clear
 - listen to their employees
 - are effective at planning the work to be done
 - give employees recognition when they do their job well
 - make themselves available to answer their employee's questions
 - ask for employee's input before making decisions that affect their work
 - have realistic expectations with respect to the amount of work that can be done in a given amount of time
 - do not expect their employees to put in long hours, just because they themselves do
 - do not make employees feel guilty if they need to take time off work because of personal or family issues

While all employees who work for a supportive manager are substantially more able to cope with role overload, work-to-family interference and family-to-work interference, men and women in other positions in the organization benefit the most from such managers. Similarly, while all employees who work for a non-supportive manager are significantly less able to cope with role overload, work-to-family interference, family-to-work interference and caregiver strain, this type of manager is particularly problematic for employees with dependent care responsibilities, female managers and professionals, and men and women who work in other positions within the organization.

How should organizations proceed with respect to this issue? Specifically, we would recommend that:

- 6. Organizations commit resources to improving "people management" practices within their organization. They can increase the number of supportive managers within the organization by giving managers at all levels:
 - a. the skills they need to manage the "people" part of their job (i.e. communication skills, conflict resolution, time management, project planning, how to give and receive feedback)

- b. the tools they need to manage people (i.e. appropriate policies, the business case for support, training on how to implement alternative work arrangements, websites and other resources on how to handle different human resource problems, referral services to help employees deal with specific problems such as child care and elder care)
- c. the time they need to manage this part of their job (people management has to be seen as a fundamental part of a manager's role, not just an "add on" that can be done in one's spare time—an overworked manager finds it difficult, if not impossible, to be a supportive manager)
- d. *incentives* to focus on the "people part" of their jobs (i.e. measurement and accountability around the people piece of the job, 360 feedback, rewards focused on recognition of good people skills, that performance of the "people" part of the job be part of promotion decisions, hiring decisions, etc., that public recognition of supportive supervisors, measurement of management support and non-support be tied into the manager's performance appraisal system)

Introduce cafeteria-style benefits packages

As noted earlier, it is clear from this study, that there is no one-size-fits-all solution to the issue of work-life conflict. To accommodate the diversity in their workforce (in terms of gender, job type, lifecycle stage and ethnicity):

7. Employers should implement cafeteria benefits packages that allow employees to select those benefits most appropriate to their personal situation, on a yearly basis.

The data collected in this study allow us to give additional advice on what types of benefits organizations concerned with the various types of work–life conflict should implement.

- 8. Organizations that wish to help employees cope with:
 - a. role overload and work-to-family interference and family-to-work interference should provide employees with child care referral services
 - b. work-to-family interference should provide all employees who are being moved to a new location by their organization with services to support their relocation
 - c. role overload and family-to-work interference should provide employees with EAP services
 - d. family-to-work interference and caregiver strain should provide employees with elder care referral and short-term personal/family leave that entitles employees to up to five days of paid personal leave per year. This leave should be available on short notice and the employee should not be required to provide a reason for his or her absence. Such stipulations would give employees the flexibility to deal with personal/family matters with a large degree of confidentiality.
 - e. family-to-work interference should provide employees with personal paid days off work and family/emergency days off work

Facilitate the use of part-time work, job sharing and reduced work week arrangements

9. Employers that wish to help employees cope with role overload, work-to-family interference and family-to-work interference should implement part-time/reduced week work arrangements with pro-rated benefits.

The rise in number of dual-income families, coupled with high levels of role overload and work-to-family interference, lower fertility and the appeal of part-time work, job sharing and reduced work weeks arrangements suggest that organizations should redesign the part-time job to ensure that people who engage in part-time work for a limited period of time do not suffer economic or career penalties. Introduction of part-time work, if made legitimate and detached from the traditional definition of part-time jobs as jobs requiring low skills and having low potential for upward mobility, could make it easier for men and women with dependent care responsibilities (especially those in other positions within the organization) to handle work and family requirements more effectively.

What else can employers do to reduce role overload?

10. Employees that wish to help employees (especially those with dependent care responsibilities) cope with role overload should implement a tele-work program within their organization.

Organizations and employees should, however, recognize that this reduction in role overload comes at a cost—increased work-to-family interference.

What else can employers do to reduce work-to-family interference?

11. Employers concerned with work-to-family interference should provide appropriate support for their employees who work rotating shifts. What is an appropriate support should be determined by consulting with employees who work rotating shifts. Policies that have been found to be effective in this regard include limits to split shifts, advanced notice of shift changes and permitting shift trades (i.e. allowing employees to change shift times with one another).

What else can employers do to reduce caregiver strain?

12. Employers that wish to help employees cope with caregiver strain should implement flextime work arrangements in their organization.

Organizations and employees should, however, recognize that this reduction in caregiver strain comes at a cost—increased family-to-work interference. Employees who are worried about family interfering with their work are better off working a fixed 9-to-5 work schedule.

What Can Employees Do to Reduce Work-Life Conflict?

While the options in this regard are more limited than what employers can do (the data would suggest that many employees are using all available options to cope), we offer the following recommendations to employees:

1. Employees should *not* attempt to cope with work–life conflict by "just working harder and trying to do it all" or by reducing the quality of things that they do, especially at home.

These two coping strategies, which are used by the majority of employed Canadians in this sample, are positively associated with all four forms of work–life conflict examined. These strategies are particularly problematic for men and women in managerial and professional positions where the reward for doing a good job and exceeding work expectations is often more work!

Seek help from your family physician

2. Daily use of prescription medicine is associated with an increased ability to cope with role overload, work-to-family interference and caregiver strain.

These findings suggest that rather than just "tough it out" and try to do it all, employees who have experienced high levels of work–life conflict for a sustained period of time would benefit from a visit to their doctor and prescription of appropriate medication. Such a strategy, as we have noted in previous reports, does however come at a cost: increased demand on Canada's health care system, increased spending on prescription medication, and the potential of negative side effects from continual use of such medication. In other words, we make this recommendation knowing that this is a "band-aid solution," which will do little to alleviate work–life conflict over the long run. As such, we recommend that it be used in conjunction with a number of the other strategies included in this report.

Just "trying to forget" about it does not solve anything

3. Employees need to educate themselves on how to deal effectively with work–life conflict.

A number of respondents indicated that they coped with work–life conflict by "just trying to forget about it." Unfortunately, the use of this strategy is associated with increases in role overload, family-to-work interference and caregiver strain for employees in general and men and women with dependent care responsibilities in particular. Family problems and challenges at home do not go away just because we ignore them—employees have to personally take the appropriate actions needed to reduce work–life conflict. A number of these actions are summarized in the recommendations below.

Active coping (i.e. delegation and prioritization) does help some employees cope with role overload and family-to-work interference

4. Employees with dependent care responsibilities, especially women, can reduce their levels of role overload by prioritizing and delegating work to others.

5. Employees with dependent care responsibilities, especially men, can reduce their levels of family-to-work interference by delegating work to others.

Other recommendations to employees, also offered in previous reports, deserve to be mentioned again, and include:

- 6. Take advantage of the supportive policies and flexible work arrangements available within your organization.
- 7. Raise work-life balance issues in your discussions within the workplace and within the community.
- 8. Say "no" to overtime hours if work expectations are unreasonable.
- 9. Try to limit the amount of work you take home to complete in the evenings. Employees who do take work home should make every effort to separate time in work from family time (i.e. do work after the children go to bed, have a home office).
- 10. Educate yourself on how to deal effectively with the issue of elder care. Things such as financial planning courses and nurturing an awareness of what types of community resources are available for those with elder care issues are likely to help employees increase the amount of control they have over these issues.

What Can Families Do to Reduce Work-Life Conflict?

Family members need to work together to deal with the issue of work–life conflict. This research initiative has identified a number of strategies that employees and families can use to cope with work life conflict.

Family members need to make sure that they get enough sleep

1. Employees need to get enough sleep each night.

As work and non-work demands increase, employees often attempt to cope by working harder, trying to do it all, and getting by on less sleep. This strategy is strongly and positively associated with increases in all four of the forms of work–life conflict.

Family members should not try to cope by sacrificing personal needs

- 2. Employees need to maintain a healthy social life.
- 3. Employees need to maintain personal standards at home.

A substantive number of the employees in this sample attempted to cope with work-life conflict by leaving things undone around the house and cutting down on outside activities. On a positive note, moderate (i.e. weekly) use of these strategies was

associated with a reduction in role overload and work-to-family interference for employees with dependent care responsibilities and women in managerial and professional positions. On a negative note, both of these strategies were associated with increased levels of role overload and work-to-family interference when used several times a week or more. Employees, therefore, need to use both these strategies in moderation.

Employees should make a concerted effort to leave work problems at work

This study did identify two strategies that were very effective at reducing role overload and work-to-family interference. These findings lead us to make the following recommendations:

- 4. Employees need to make a concerted effort to leave work problems at work—both physically and mentally.
- 5. Employees should modify their work schedule (i.e. reduce the number of hours they spend in work, work different hours than they do) as necessary to manage role demands at home.

The negative association between leave work problems at work and both role overload and work-to-family interference was very strong. While this strategy is effective for all employees, it was more effective for men than women.

Employees should modify their work schedule as necessary to manage demands at home

This study indicated that modification of one's work schedule to accommodate demands at home is a very effective coping strategy for men and women in managerial and professional positions. It also provides some relief from role overload and work-to-family interference for men in other positions within the organization. Furthermore, and perhaps more importantly, the data show that weekly modification of one's work schedule is all that is needed to experience the benefits of reduced work-to-family interference. Women in other positions within the organization, on the other hand, need to recognize that in their case daily use of this strategy is associated with a sharp increase in work-to-family interference so they should try to limit their use of this strategy to once or twice a week to gain the most benefits from its use.

You cannot buy balance

Many employees buy supports from outside the family in an attempt to increase their work–life balance. Unfortunately, our results indicate that employees who cope by buying goods and services report higher levels of role overload and work-to-family interference than those who are able to get such support within the family. The data are much more positive with respect to the relationship between hiring help to care for children and role overload. This strategy is very effective when used once or twice a week. Overload and family-to-work interference are, however, substantially higher when reliance on paid child care is high. Similarly, hiring help to care for elderly dependents is associated with lower levels of caregiver strain for women when used moderately often. Caregiver strain is, however, substantially higher when reliance on paid elder care is high. Women in other positions within the organization benefit the most from hiring support for elder care.

Specific recommendations with respect to support of child care and elder care are given below in the section on advice to governments.

Employees should cover family responsibilities for each other

6. Employees with dependent care should cover family responsibilities for each other at home.

Men and women both benefit if they have a spouse who will cover for them at home. Higher use of this strategy is associated with lower levels of role overload for both genders. This suggests that employees can cope with extra demands at work—if they have a partner to count on to pick up the slack and if they are willing to help out when the situation is reversed.

What Can Governments Do to Reduce Work-Life Conflict?

In our previous reports, we offered a number of suggestions to governments on how they could address the issue of work–life conflict. The findings from this study provide an additional reason why governments should put these recommendations and others into practice immediately. Our findings are clear: employees who are overloaded, experience interference between work and non-work roles and have high levels of caregiver strain cope by having fewer children, delaying the start of their family and deciding not to have any children. The fact that these strategies are associated with greater work–life balance for employees in general and female managers and professionals in particular, indicate that governments need to take action so that men and women in Canada can have a meaningful career as well as a fulfilling family life. Research from Europe (Sweden in particular)⁵³ has found that social policies designed to help working mothers (including universal child care) are associated with increased fertility rates. Accordingly, we recommend that governments consider the following actions:

- 1. Take the lead with respect to the issue of child care. In particular, governments need to determine how to best help employed Canadians deal with child care issues (i.e. develop appropriate policies for parents of children of various ages, identify and implement relevant supports in the community, provide more high quality day care). There is no one-size-fits-all solution to the issue of child care. Some women want to work, some women need to work, and some women want to stay home when their children are young. Government policy should be designed to offer choice to Canadian families—so that they can select the option that works best for their family.
- 2. Governments need to take the lead with respect to the issue of elder care. In particular, they need to determine how to best help employed Canadians deal with elder care issues (i.e. develop appropriate policies, identify and implement relevant supports in the community).
- 3. Governments need to "lead by example" with respect to the availability and accessibility of flexible work arrangements. It is not enough to just offer alternative work arrangements; employees must feel that they can use such arrangements without penalty.

⁵³ See Gardner, D. The mother of all issues. *The Ottawa Citizen*. June 14, 2006, p. A17.

- 4. Governments need to investigate ways to increase Canadians' awareness of how social roles and responsibilities have changed over the past several decades, what changes still need to happen, and why (i.e. social marketing campaign, education programs in schools, advertisements). Such changes are necessary to address the issues identified for female managers and professionals in this report.
- 5. Governments need to examine how they can reduce the "financial penalties" associated with parenthood and elder care (i.e. determine how to concretely recognize that these employees have higher costs). Suggestions here include identifying ways to make it financially feasible for one partner to stay home during the time period when family demands are particularly high (i.e. when children are young, when a parent is dying), implementing universal day care programs and increasing the number of homes for the aged.

What Can Unions Do to Reduce Work-Life Conflict?

Unions have an important role to play in the establishment of family-friendly practices in the workplace. We recommend that unions:

- Become advocates of employee work-life balance by undertaking public campaigns to raise awareness of work-life issues and suggest ways in which the situation can be improved. This advocacy should be done outside the collective bargaining process.
- 2. Include work–life provisions (e.g. flexible work arrangements, family-friendly benefits) in negotiations during the collective bargaining process.
- 3. Support the implementation of cafeteria benefits packages.

Closing comments

The growing stress on the working population caused by role overload and conflict between work and family responsibilities is both an economic and social problem. Productivity is impaired, costs or production are unnecessarily high, and personal health and family well-being are at risk. The dimensions of the problem have increased over the past decade. The stress affects both men and women in both professional and non-professional jobs. This is a societal issue. Individuals, families, employers and governments can all take actions to moderate the stress, and they can all share in the benefits if action is taken. Most of the actions are cost reducing in both the short and long term. All that is required is a shift in attitudes; a recognition that workers are family members and family members are workers. Canada relies on families to carry the responsibility for caregiving and nurturing their children, their elderly family members and other dependents. We also expect people of working age to work and earn their own living. Supporting them in meeting all those responsibilities is a positive sum game.

References

Appendix A

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Appendix A

Reports Coming from the 2001 National Work–Life Conflict Study

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Appendix B Work Arrangement and Work–Life Conflict

Appendix B

Work Arrangement and Work-Life Conflict

Abbreviations Used in the Tables in the Appendix

The following abbreviations are used in the tables in these appendices:

M/P = Manager/Professional
O = Other types of jobs
D = Dependent care

Y = Yes N = No

W to F/ Work to Family = Work-to-family interference
F to W/ Family to Work = Family-to-work interference

Supportive (S) = frequently uses supportive behaviours

Mixed S (MS) = inconsistent in use of supportive behaviours

Low support (Low S) = rarely uses supportive behaviours

Non-supportive (NS) = frequently uses non-supportive behaviours

Mixed NS (MNS) = inconsistent in use of non-supportive behaviours

Low non-support (Low NS) = rarely uses non-supportive behaviours

M = uses the coping strategy rarely (once a month or less)
W = uses the coping strategy moderately often/weekly

D = uses the coping strategy often/several times a week or daily

* = the difference in work–life conflict between those who use the strategy rarely

and daily is less than .2

Work Arrangement and Work–Life Conflict

Work Arrangement and Work–Life Conflict

a. Gender/Job Type Analysis

Sample: 25,153

3 (work arrangement) by 4 (gender and job type) ANOVA

Where work arrangement is defined as:

1 = Regular

2 = Flextime

3 = CWW

Gender and job type is defined as:

1 = Male Managers/Professional

2 = Male Other

3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R²	Main Effect: Work Arrangement	Main Effect: Gender and Job Type	Interaction
Overload	.027	$F = 2.2$, $\alpha = .11$	$F = 137.8$, $\alpha = .000$	$F = 1.2, \ \alpha = .33$
Work to Family	.044	$F = 10.3$, $\alpha = .000$	$F = 130.5$, $\alpha = .000$	$F = 3.4$, $\alpha = .001$
Family to Work	.002	$F = 7.3$, $\alpha = .000$	$F = 5.5$, $\alpha = .001$	$F = 1.4, \ \alpha = .21$
Caregiver Strain	.033	$F = 4.1, \ \alpha = .01$	$F = 39.9, \ \alpha = .000$	$F = 0.7$, $\alpha = .62$

Impact of Work Arrangement: Examination of Significant Interaction Term

	Male					Female						
	Reg	jular	Fle	Flextime		ww	Regular		Flextime		CWW	
	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0
W to F	3.0	2.6	3.0	2.6	2.8	2.6	3.0	2.6	3.0	2.4	2.8	2.6

Work Arrangement and Work–Life Conflict

b. Gender/Dependent Care Analysis

Sample: 25,153

3 (work arrangement) by 4 (gender and dependent care status) ANOVA

Where work arrangement is defined as:

1 = Regular

2 = Flextime

3 = CWW

Gender and dependent care status is defined as:

1 = Male - No Dependents

2 = Male - Dependents

3 = Female - No Dependents

4 = Female - Dependents

Results of the Omnibus Test

	R ²	Main Effect: Work Arrangement	Main Effect: Gender and Dependent Care	Interaction
Overload	.041	$F = 2.8, \alpha = .06$	$F = 230.2, \ \alpha = .000$	$F = 0.7$, $\alpha = .62$
Work to Family	.022	$F = 28.4$, $\alpha = .000$	$F = 87.1$, $\alpha = .000$	$F = 1.1, \ \alpha = .39$
Family to Work	.046	$F = 8.9$, $\alpha = .000$	$F = 246.4$, $\alpha = .000$	$F = .07$, $\alpha = .61$
Caregiver Strain	.046	$F = 3.1$, $\alpha = .03$	$F = 67.0, \ \alpha = .000$	$F = .06$, $\alpha = .71$

Impact of Work Arrangement: Main Effect

	x Work to Family	x Family to Work	x Caregiver Strain
Regular	2.8	2.1	1.9
Flextime	2.9	2.3	1.6
CWW	2.7	2.2	1.8

Impact of Part-Time Work Arrangements on Work–Life Conflict

Impact of Part-Time Work Arrangements on Work–Life Conflict

a. Gender/Job Type Analysis

Sample: 25,153

2 (part time) by 4 (gender and job type) ANOVA

Where part time

1 = yes (part time and/or job share)

2 = no

Gender and job type is defined as:

1 = Male Managers/Professional

2 = Male Other

3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Part Time	Main Effect: Gender and Job Type	Interaction
Overload	.040	$F = 49.2$, $\alpha = .000$	$F = 87.1$, $\alpha = .000$	$F = 3.8$, $\alpha = .01$
Work to Family	.027	$F = 33.5$, $\alpha = .000$	$F = 111.1$, $\alpha = .000$	$F = 1.1, \ \alpha = .34$
Family to Work	.002	$F = 3.9, \ \alpha = .05$	$F = 11.1, \ \alpha = .000$	$F = 3.0, \ \alpha = .03$
Caregiver Strain	.025	$F = 0.7$, $\alpha = .38$	$F = 8.3$, $\alpha = .000$	$F = 0.2, \ \alpha = .91$

Impact of Working Part Time: Examination of Significant Interaction Term

	Male				Female			
	Full Time		Part Time		Full Time		Part Time	
	M/P	0	M/P	0	M/P	0	M/P	0
Overload	3.5	3.4	3.2	3.1	3.8	3.6	3.7	3.4

Impact of Part-Time Work Arrangements on Work–Life Conflict

b. Gender/Dependent Care Analysis

Sample: 25,153

2 (part time) by 4 (gender and dependent care status) ANOVA

Where part time

1 = yes (part time and/or job share)

2 = no

Gender and dependent care status is defined as:

1 = Male - No Dependents

2 = Male - Dependents

3 = Female - No Dependents

4 = Female - Dependents

Results of the Omnibus Test

	R ²	Main Effect: Part Time	MainEffect: Gender and Dependent Care	Interaction
Overload	.048	$F = 54.6$, $\alpha = .000$	$F = 103.9$, $\alpha = .000$	$F = 4.2$, $\alpha = .006$
Work to Family	.048	$F = 35.2$, $\alpha = .000$	$F = 30.7$, $\alpha = .000$	$F = 3.2$, $\alpha = .01$
Family to Work	.042	$F = 6.4$, $\alpha = .01$	$F = 89.9, \ \alpha = .000$	$F = 10.4$, $\alpha = .000$
Caregiver Strain	.038	$F = 0.8$, $\alpha = .77$	$F = 27.1$, $\alpha = .000$	$F = 0.7$, $\alpha = .55$

Impact of Working Part Time: Examination of Significant Interaction Term

		Ma	Female					
	Full Time		Part Time		Full Time		Part Time	
	D	No D						
Overload	3.6	3.3	3.1	3.2	3.9	3.5	3.7	3.4
W to F	3.0	2.8	2.6	2.8	3.0	2.7	2.7	2.5
F to W	2.4	2.0	2.0	2.4	2.4	2.0	2.7	2.2

Impact of Shift Work Arrangements on Work–Life Conflict

Impact of Shift Work Arrangements on Work–Life Conflict

a. Gender/Job Type Analysis

Sample: 25,153

2 (shift work) by 4 (gender and job type) ANOVA

Where shift work is:

1 = yes (does not matter if rotating or fixed)

2 = no

Gender and job type is defined as:

1 = Male Managers/Professional

2 = Male Other

3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Shift Work	Main Effect: Gender and Job Type	Interaction
Overload	.024	$F = 7.7$, $\alpha = .005$	$F = 180.9$, $\alpha = .000$	$F = 2.7$, $\alpha = .004$
Work to Family	.058	$F = 373.5$, $\alpha = .000$	$F = 165.1$, $\alpha = .000$	$F = 13.1$, $\alpha = .000$
Family to Work	.001	$F = 2.2$, $\alpha = .13$	$F = 9.1$, $\alpha = .001$	$F = 1.2, \ \alpha = .31$
Caregiver Strain	.026	$F = 1.2, \ \alpha = .27$	$F = 52.3, \ \alpha = .000$	$F = 1.0, \ \alpha = .39$

Impact of Shift Work: Examination of Significant Interaction Term

	Male				Female				
	Sh	Shift		No Shift		Shift		No Shift	
	M/P	0	M/P	0	M/P	0	M/P	0	
W to F	3.2	3.0	3.0	2.7	3.2	3.0	3.0	2.5	

Impact of Shift Work Arrangements on Work–Life Conflict

b. Gender/Dependent Care Analysis

Sample: 25,153

2 (shift work) by 4 (gender and dependent care status) ANOVA

Where shift work

1 = yes

2 = no

Gender and dependent care status is defined as:

1 = Male - No Dependents

2 = Male - Dependents

3 = Female - No Dependents

4 = Female - Dependents

Results of the Omnibus Test

	R ²	Main Effect: Shift Work	Main Effect: Gender and Dependent Care	Interaction
Overload	.045	$F = 2.6$, $\alpha = .11$	$F = 268.3$, $\alpha = .000$	$F = 5.9$, $\alpha = .01$
Work to Family	.042	$F = 427.3$, $\alpha = .000$	$F = 102.4$, $\alpha = .000$	$F = 4.4$, $\alpha = .004$
Family to Work	.041	$F = 0.1$, $\alpha = .81$	$F = 224.1$, $\alpha = .000$	$F = 5.9$, $\alpha = .000$
Caregiver Strain	.040	$F = 2.9, \ \alpha = .09$	$F = 80.3$, $\alpha = .000$	$F = 0.6$, $\alpha = .64$

Impact of Shift Work: Examination of Significant Interaction Term

	Male					Female			
	Shift		No Shift		Shift		No Shift		
	D	No D	D	No D	D	No D	D	No D	
Overload	3.4	3.3	3.6	3.3	3.8	3.5	3.8	3.5	
W to F	3.2	3.0	3.0	2.7	3.3	3.0	3.2	3.0	
F to W	2.3	2.0	2.5	2.0	2.4	2.0	2.5	2.0	

Impact of Guerilla Tele-Work Arrangements on Work–Life Conflict

Impact of Guerilla Tele-Work Arrangements on Work–Life Conflict

a. Gender/Job Type Analysis

Could not look at formal tele-work as sample size too small. Sample: 25,153

2 (guerilla tele-work) by 4 (gender and job type) ANOVA

Where guerilla tele-work is:

1 = yes

2 = no

Gender and job type is defined as:

1 = Male Managers/Professional

2 = Male Other

3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Guerilla Tele-Work	Main Effect: Gender and Job Type	Interaction
Overload	.039	$F = 30.2$, $\alpha = .000$	$F = 87.6$, $\alpha = .000$	$F = 0.7$, $\alpha = .55$
Work to Family	.046	$F = 102.6$, $\alpha = .000$	$F = 75.7$, $\alpha = .000$	$F = 2.3$, $\alpha = .07$
Family to Work	.002	$F = 53.9$, $\alpha = .000$	$F = 9.2$, $\alpha = .001$	$F = 2.6$, $\alpha = .05$
Caregiver Strain	.027	$F = 10.9$, $\alpha = .001$	$F = 37.3$, $\alpha = .000$	$F = 0.6$, $\alpha = .59$

Impact of Guerilla Tele-Work: Main Effects

Guerilla Tele-Work	x̄ Role Overload	x Work to Family
Yes	3.7	3.1
No	3.5	2.8
Δ	0.3	0.3

Impact of Guerilla Tele-Work Arrangements on Work–Life Conflict

b. Gender/Dependent Care Analysis

Sample: 25,153

2 (guerilla telework) by 4 (gender and dependent care status) ANOVA

Where guerilla tele-work is:

1 = yes (question)

2 = no

Gender and dependent care status is defined as:

1 = Male - No Dependents

2 = Male - Dependents

3 = Female - No Dependents

4 = Female - Dependents

Results of the Omnibus Test

	R ²	Main Effect: Guerilla Tele-Work	Main Effect: Gender and Job Type	Interaction
Overload	.046	$F = 31.1$, $\alpha = .000$	$F = 115.2$, $\alpha = .000$	$F = 1.2, \ \alpha = .21$
Work to Family	.040	$F = 117.5$, $\alpha = .000$	$F = 32.9$, $\alpha = .000$	$F = 2.9, \ \alpha = .03$
Family to Work	.042	$F = 36.2$, $\alpha = .000$	$F = 124.1$, $\alpha = .001$	$F = 0.6$, $\alpha = .61$
Caregiver Strain	.042	$F = 4.2, \ \alpha = .04$	$F = 49.2, \ \alpha = .000$	$F = 0.3, \ \alpha = .99$

Impact of Guerilla Tele-Work: Main Effects

Guerilla Tele-Work	x̄ Overload	x Work to Family	x Family to Work
Yes	3.7	3.1	2.4
No	3.5	2.8	2.1
Δ	0.3	0.3	0.3

Appendix C Perceived Flexibility and Work-Life Conflict

Appendix C

Perceived Flexibility and Work-Life Conflict Perceived Flexibility

a: Differences by Gender and Job Type

	N	1ales	Fema	ales
	Managers/Prof	Other	Managers/Prof	Other
Vary work hours: Low flexibility Moderate flexibility High flexibility	27.6 17.3 55.1	33.8 20.6 45.6	41.3 16.1 42.6	35.0 20.6 44.0
Vary work location (tele-work) Low flexibility Moderate flexibility High flexibility	61.8 15.6 22.6	71.0 14.1 14.9	70.9 12.1 17.0	76.8 11.8 11.4
Take holidays when want Low flexibility Moderate flexibility High flexibility	24.7 20.9 54.4	22.5 23.4 54.0	33.4 19.9 46.6	26.0 23.0 51.1
Take time off to attend course or conference Low flexibility Moderate flexibility High flexibility	29.4 23.3 46.6	29.6 29.5 40.9	37.1 23.8 39.2	31.5 27.3 42.2
Interrupt work day and then return Low flexibility Moderate flexibility High flexibility	21.3 19.4 59.2	21.6 22.5 55.9	41.8 17.1 41.0	28.9 21.9 49.2
Take paid day off when child is sick Low flexibility Moderate flexibility High flexibility	20.7 20.6 58.7	20.2 23.4 56.3	34.6 17.7 47.6	27.8 19.8 52.4

C:1

Perceived Flexibility and Work-Life Conflict

	1	Males	Females			
	Managers/Prof	Other	Managers/Prof	Other		
Take paid day off to care for elderly relative Low flexibility Moderate flexibility	24.5 25.3	23.9 28.6	41.0 20.1	33.4 23.5		
High flexibility	50.2	47.5	38.9	43.1		
Have meals with family Low flexibility Moderate flexibility High flexibility	27.4 21.9 50.7	25.9 25.4 48.7	29.2 21.6 49.2	22.7 22.4 54.9		
Be home when children get home from school Low flexibility Moderate flexibility High flexibility	76.8 12.8 10.3	72.1 16.4 11.5	76.7 12.1 11.2	71.7 13.7 14.6		
Arrange work schedule to meet personal/family commitments Low flexibility Moderate flexibility High flexibility	35.3 22.5 42.2	37.4 25.8 36.8	43.9 20.2 35.9	36.0 23.8 40.2		

b: Differences by Gender and Dependent Care Status

	Males		Fema	iles
	No Dependents	Dependents	No Dependents	Dependents
Vary work hours:				
Low flexibility	30.5	30.2	36.0	39.3
Moderate flexibility	18.6	18.9	18.5	18.8
High flexibility	50.9	50.9	45.5	46.6
Vary work location (tele-work)				
Low flexibility	65.6	65.8	73.0	75.0
Moderate flexibility	15.6	14.5	12.0	11.9
High flexibility	18.8	19.6	15.1	13.1
Take holidays when want				
Low flexibility	22.8	24.3	28.7	29.7
Moderate flexibility	21.8	22.1	20.8	22.3
High flexibility	55.3	53.6	50.5	47.9
-				

Perceived Flexibility and Work-Life Conflict

	Males		Females	
	No Dependents	Dependents	No Dependents	Dependents
Take time off to attend course or conference Low flexibility Moderate flexibility High flexibility	27.9 26.2 45.8	30.5 26.9 42.6	31.8 25.5 42.6	35.9 25.8 38.3
Interrupt work day and then return Low flexibility Moderate flexibility High flexibility	20.0 21.5 58.5	22.4 20.3 57.3	31.9 20.4 47.6	36.8 19.2 44.0
Take paid day off when child is sick Low flexibility Moderate flexibility High flexibility	18.3 23.2 58.5	21.2 21.4 57.4	30.2 19.9 49.9	31.3 18.4 50.5
Take paid day off to care for elderly relative Low flexibility Moderate flexibility High flexibility	21.0 26.3 52.7	25.8 27.1 47.2	33.2 23.1 43.7	38.7 21.4 44.5
Have meals with family Low flexibility Moderate flexibility High flexibility	24.4 23.9 51.7	28.1 23.2 48.7	23.8 21.6 54.6	26.9 22.4 50.7
Be home when children get home from school Low flexibility Moderate flexibility High flexibility	63.5 22.5 14.1	77.6 12.4 10	70.4 16.2 13.4	75.2 11.8 13.0
Arrange work schedule to meet personal/family commitments Low flexibility Moderate flexibility High flexibility	32.1 23.4 44.5	38.8 24.3 36.9	35.0 21.9 43.1	43.3 22.4 34.3

Impact of Perceived Flexibility on Work–Life Conflict (Total Measure)

Impact of Perceived Flexibility on Work–Life Conflict (Total Measure)

a. Gender/Job Type Analysis

Sample: 25,153

3 (perceived flexibility) by 4 (gender and job type) ANOVA

Where perceived flexibility is defined as:

1 = Difficult

2 = Neutral

3 = Easy

Gender and job type is defined as:

1 = Male Managers/Professional

2 = Male Other

3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Perceived Flexibility	Main Effect: Gender and Job Type	Interaction
Overload	.117	$F = 1211.2, \ \alpha = .000$	$F = 161.3, \ \alpha = .000$	$F = 4.4$, $\alpha = .000$
Work to Family	.195	$F = 2392.9$, $\alpha = .000$	$F = 326.8$, $\alpha = .000$	$F = 7.3$, $\alpha = .000$
Family to Work	.024	$F = 247.6 \ \alpha = .000$	$F = 4.1$, $\alpha = .006$	$F = 8.0$, $\alpha = .000$
Caregiver Strain	.036	$F = 33.6$, $\alpha = .000$	$F = 79.1$, $\alpha = .000$	$F = 0.8 \ \alpha = .59$

Impact of Perceived Flexibility: Examination of Significant Interaction Term

	Male					Female						
	Difficult Neutral		Neutral Easy		Difficult Neu		tral Easy		sy			
	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0
Overload	4.0	3.8	3.6	3.4	3.2	3.0	4.0	4.0	3.8	3.7	3.5	3.2
W to F	3.7	3.4	3.2	2.8	2.6	2.3	3.5	3.2	3.0	2.7	2.5	2.1
F to W*	2.3	2.4	2.4	2.3	2.2	2.2	2.4	2.5	2.4	2.3	2.2	1.9

^{*} Not substantive but shown for data interpretation purposes

Impact of Perceived Flexibility on Work–Life Conflict (Total Measure)

b. Gender/Dependent Care Analysis

3 (perceived flexibility) by 4 (gender and dependent care type) ANOVA

Where perceived flexibility is defined as defined previously.

Gender and dependent care status is defined as:

- 1 = Male No Dependents
- 2 = Male Dependents
- 3 = Female No Dependents
- 4 = Female Dependents

Results of the Omnibus Test

	R ²	Main Effect: Perceived Flexibility	Main Effect: Gender and Dependent Care	Interaction
Overload	.123	$F = 1148.4, \ \alpha = .000$	$F = 224.9$, $\alpha = .000$	$F = 3.4$, $\alpha = .003$
Work to Family	.177	$F = 2280.5$, $\alpha = .000$	$F = 152.5$, $\alpha = .000$	$F = 1.6, \ \alpha = .14$
Family to Work	.057	$F = 207.4 \ \alpha = .000$	$F = 304.7$, $\alpha = .000$	$F = 2.0$, $\alpha = .07$
Caregiver Strain	.048	$F = 15.5$, $\alpha = .000$	$F = 105.4$, $\alpha = .000$	$F = 0.7 \ \alpha = .66$

Impact of Perceived Flexibility: Examination of Significant Interaction Term

	Male							Fem	ale			
	Diff	Difficult Neutral		Eas	у	Diffi	cult	Neutral Easy		sy		
	No D	D	No D	D	No D	D	No D	D	No D	D	No D	D
Overload	3.7	3.9	3.4	3.6	3.0	3.2	3.9	4.1	3.6	3.8	3.2	3.5

Impact of Perceived Flexibility: Main Effect

	x Work to Family	x Family to Work	x Caregiver Strain
Difficult	3.5	2.4	2.0
Neutral	2.9	2.3	1.8
Easy	2.4	2.0	1.7
Δ	-1.1	-0.4	-0.3

Impact of Different Types of Flexibility on Work–Life Conflict

a. Gender/Job Type Analysis

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Vary working hours				
(arrival or departure times)				
Overload	.055	$F = 348.8, \ \alpha = .000$	$F = 152.1$, $\alpha = .000$	$F = 2.5$, $\alpha = .02$
Work to Family	.090	$F = 715.3, \ \alpha = .000$	$F = 274.2, \ \alpha = .000$	$F = 4.0, \ \alpha = .001$
Family to Work	.008	$F = 61.9, \ \alpha = .000$	$F = 8.4$, $\alpha = .000$	$F = 5.4$, $\alpha = .000$
Caregiver Strain	.037	$F = 16.3, \ \alpha = .000$	$F = 60.0, \ \alpha = .000$	$F = 0.7 \ \alpha = .85$
Spent some of regular work				
day working from home				
Overload	.036	$F = 126.6$, $\alpha = .000$	$F = 100.6$, $\alpha = .000$	$F = 1.4$, $\alpha = .18$
Work to Family	.037	$F = 119.4$, $\alpha = .000$	$F = 112.7$, $\alpha = .000$	$F = 1.6$, $\alpha = .16$
Family to Work	.001	$F = 4.8$, $\alpha = .009$	$F = 6.1$, $\alpha = .000$	$F = 1.8$, $\alpha = .08$
Caregiver Strain	.028	$F = 3.8$, $\alpha = .02$	$F = 37.2, \ \alpha = .000$	$F = 1.2, \ \alpha = .28$
Take holidays when want				
Overload	.071	$F = 582.1, \ \alpha = .000$	$F = 145.6$, $\alpha = .000$	$F = 3.8, \ \alpha = .001$
Work to Family	.126	$F = 1264.9, \ \alpha = .000$	$F = 255.3$, $\alpha = .000$	$F = 3.2$, $\alpha = .004$
Family to Work	.007	$F = 71.0, \ \alpha = .000$	$F = 6.3$, $\alpha = .000$	$F = 2.5$, $\alpha = .01$
Caregiver Strain	.033	$F = 21.2, \ \alpha = .000$	$F = 67.3$, $\alpha = .000$	$F = 0.3$, $\alpha = .91$
Take time off to attend				
conference or course				
Overload	.088	$F = 802.8, \ \alpha = .000$	$F = 170.9, \ \alpha = .000$	$F = 4.8, \ \alpha = .000$
Work to Family	.126	$F = 1240.4, \ \alpha = .000$	$F = 262.8, \ \alpha = .000$	$F = 4.3, \ \alpha = .000$
Family to Work	.012	$F = 130.7$, $\alpha = .000$	$F = 3.9$, $\alpha = .008$	$F = 3.4$, $\alpha = .002$
Caregiver Strain	.037	$F = 42.5$, $\alpha = .000$	$F = 62.9, \ \alpha = .000$	$F = 0.6$, $\alpha = .84$

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Interrupt work day for personal/family reasons				
and then return				
Overload	.095	$F = 672.2, \ \alpha = .000$	$F = 109.4, \ \alpha = .000$	$F = 4.8, \ \alpha = .000$
Work to Family	.128	$F = 1248.4, \ \alpha = .000$	$F = 172.6, \ \alpha = .000$	$F = 7.4, \ \alpha = .000$
Family to Work	.012	$F = 107.9, \ \alpha = .000$	$F = 4.1$, $\alpha = .008$	$F = 5.5$, $\alpha = .000$
Caregiver Strain	.037	$F = 34.2, \ \alpha = .000$	$F = 48.8$, $\alpha = .000$	$F = 0.6$, $\alpha = .81$
Take paid day off when				
child is sick				
Overload	.075	$F = 197.7$, $\alpha = .06$	$F = 145.7$, $\alpha = .000$	$F = 6.1$, $\alpha = .000$
Work to Family	.113	$F = 652.6$, $\alpha = .000$	$F = 152.6$, $\alpha = .000$	$F = 9.1$, $\alpha = .000$
Family to Work	.015	$F = 59.2$, $\alpha = .06$	$F = 20.6$, $\alpha = .000$	$F = 3.2$, $\alpha = .004$
Caregiver Strain	.032	$F = 18.8, \ \alpha = .004$	$F = 35.6$, $\alpha = .000$	$F = 0.6, \ \alpha = .79$
Take paid day off when an				
elderly relative needs you				
Overload	.087	$F = 367.8, \ \alpha = .000$	$F = 126.4$, $\alpha = .000$	$F = 4.5$, $\alpha = .000$
Work to Family	.111	$F = 669.6$, $\alpha = .000$	$F = 174.2$, $\alpha = .000$	$F = 9.4$, $\alpha = .000$
Family to Work	.018	$F = 128.5$, $\alpha = .000$	$F = 2.5, \ \alpha = .05$	$F = 2.6$, $\alpha = .02$
Caregiver Strain	.035	$F = 22.57$, $\alpha = .000$	$F = 54.9, \ \alpha = .000$	$F = 1.2, \ \alpha = .28$
Have meals with family				
Overload	.078	$F = 618.2, \ \alpha = .000$	$F = 183.4$, $\alpha = .000$	$F = 2.1$, $\alpha = .05$
Work to Family	.155	$F = 1525.7$, $\alpha = .000$	$F = 199.7$, $\alpha = .000$	$F = 2.1$, $\alpha = .05$
Family to Work	.012	$F = 97.3, \alpha = .000$	$F = 3.1$, $\alpha = .03$	$F = 7.5$, $\alpha = .000$
Caregiver Strain	.048	$F = 35.7$, $\alpha = .000$	$F = 63.5$, $\alpha = .000$	$F = 0.9$, $\alpha = .45$
Be home when children				
get home from school				
Overload	.066	$F = 195.9, \ \alpha = .000$	$F = 89.1, \ \alpha = .000$	$F = 1.6, \ \alpha = .14$
Work to Family	.076	$F = 326.1$, $\alpha = .000$	$F = 46.7$, $\alpha = .000$	$F = 1.4, \ \alpha = .22$
Family to Work	.022	$F = 67.7$, $\alpha = .000$	$F = 9.9, \ \alpha = .000$	$F = 4.8, \ \alpha = .000$
Caregiver Strain	.024	$F = 2.5, \alpha = .08$	$F = 16.8, \ \alpha = .000$	$F = 0.9, \ \alpha = .23$
Arrange work schedule				
(shifts, overtime) to meet				
personal/family commitments		5 0404	E 4844	F 00
Overload	.112	$F = 940.6$, $\alpha = .000$	$F = 176.6$, $\alpha = .000$	$F = 3.9, \ \alpha = .000$
Work to Family	.175	$F = 1980.3, \alpha = .000$	$F = 242.7, \ \alpha = .000$	$F = 3.5, \ \alpha = .001$
Family to Work	.022	$F = 213.4, \alpha = .000$	$F = 3.6, \ \alpha = .01$	$F = 6.8, \ \alpha = .000$
Caregiver strain	.035	$F = 35.8$, $\alpha = .000$	$F = 62.3, \alpha = .000$	$F = 0.9$, $\alpha = .46$

Details: Significant Interaction Terms in Table 5a

			Ma	ale				Female				
Impact of Level of Flexibility on Work–Life Conflict	Mai	nager/l	Prof.		Oth	er	Ma	nager/	Prof.		Othe	r
	M	W	D	М	W	D	М	W	D	М	W	D
Vary work hours W to F F to W	3.4 2.3	3.1 2.3	2.9 2.2	3.1 2.3	2.9 2.3	2.5 2.0	3.3 2.3	3.1 2.3	2.8 2.2	3.0 2.3	2.7 2.2	2.3 2.0
Take holidays when want Overload W to F F to W	3.9 3.6 2.4	3.6 3.2 2.4	3.4 2.8 2.2	3.7 3.3 2.3	3.4 3.0 2.3	3.2 2.5 2.1	4.0 3.4 2.3	3.8 3.1 2.3	3.6 2.8 2.2	3.9 3.2 2.3	3.7 2.8 2.3	3.4 2.3 2.1
Take time off for course Overload W to F F to W	3.9 3.5 2.3	3.5 3.1 2.3	3.3 2.8 2.2	3.7 3.2 2.3	3.4 2.8 2.3	3.1 2.5 2.0	4.0 3.4 2.4	3.8 3.0 2.3	3.6 2.7 2.2	4.0 3.1 2.4	3.6 2.7 2.3	3.4 2.3 2.0
Interrupt work day Overload W to F F to W	3.9 3.6 2.3	3.6 3.2 2.3	3.4 2.8 2.2	3.7 3.4 2.4	3.4 2.9 2.3	3.2 2.7 2.1	4.0 3.3 2.4	3.8 3.0 2.3	3.6 2.7 2.2	4.0 3.1 2.4	3.7 2.7 2.3	3.4 2.3 2.0
Take paid day off child care Overload W to F F to W	3.9 3.6 2.5	3.7 3.3 2.3	3.4 2.9 2.3	3.7 3.4 2.5	3.5 3.1 2.4	3.3 2.6 2.2	4.0 3.3 2.6	3.9 3.3 2.5	3.8 2.9 2.5	4.0 3.1 2.6	3.8 2.9 2.5	3.6 2.4 2.3
Take paid day off elder care Overload W to F	3.9 3.5	3.6 3.2	3.4 2.8	3.7 3.3	3.4 2.9	3.2 2.5	4.0 3.3	3.9 3.2	3.8 2.8	4.0 3.1	3.6 2.7	3.4 2.3
Have meals with family F to W	2.4	2.4	2.3	2.4	2.3	2.0	2.4	2.4	2.3	2.5	2.3	2.1
Home when children get home from school F to W	2.5	2.4	2.4	2.5	2.4	2.2	2.7	2.4	2.4	2.6	2.3	2.3
Arrange work schedule Overload W to F F to W	3.8 3.5 2.4	3.6 3.1 2.4	3.3 2.7 2.1	3.7 3.3 2.4	3.4 2.8 2.3	3.1 2.4 2.0	4.0 3.4 2.4	3.8 3.0 2.3	3.5 2.6 2.2	4.0 3.2 2.5	3.8 2.6 2.3	3.3 2.2 2.0

Details: Significant Main Effects on Table 5b

Inchest of Dayseived Florikility		Level of Flexi	bility	
Impact of Perceived Flexibility on Work–Life Conflict	L	М	Н	Δ
Vary work hours Overload Caregiver strain	3.8 2.0	3.6 1.9	3.4 1.8	-0.4 -0.2
Vary work location (i.e. tele-work) Overload W to F	3.7 3.0	3.5 2.8	3.4 2.7	-0.3 -0.3
Take holidays when you want Caregiver strain	2.0	2.0	1.7	-0.3
Interrupt work day then return Caregiver strain	2.0	1.9	1.7	-0.3
Take paid day off to look after sick child $\mbox{\sc F}$ to $\mbox{\sc W}$	2.6	2.5	2.3	-0.3
Take paid day off to care for elderly relative $F\ to\ W$	2.4	2.3	2.1	-0.3
Be home to have meals with family Overload W to F	4.0 3.4	3.7 3.0	3.4 2.5	-0.6 -0.9
Be home when children get home from school Overload W to F	3.8 3.4	3.5 2.9	3.4 2.4	-0.4 -1.0

b. Gender/Dependent Care Analysis

	R²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent	Interaction
Vary Working Hours				
(arrival or departure times)				
Overload	0.066	$F = 335.6$, $\alpha = .000$ "	"F = 241.1, α = .000"	"F = 2.2, α = .04"
Work to Family	0.077	"F = 675.8, α = .000"	"F = 142.4, α = .000"	"F =0.7, α = .62"
Family to Work	0.051	"F = 60.2, α = .000"	"F = 308.3, α = .000"	"F = 3.2, α = .004"
Caregiver Strain	0.051	"F = 9.6, α = .000"	"F = 92.0, α = .000"	$F = 0.8 \ \alpha = .58$
Spent some of				
regular work day				
working from home				
Overload	0.049	"F =109.1, α = .000"	"F = 158.4, α = .000"	"F = 0.8, α = .61"
Work to Family	0.024	"F = 94.9, α = .000"	"F = 73.5, α = .000"	"F = 1.4, α = .22"
Family to Work	0.042	"F = 3.6, α = .03"	"F = 196.2, α = .000"	"F = 1.0, α = .42"
Caregiver Strain	0.042	"F = 2.0, α = .14"	"F = 57.4, α = .000"	"F = 0.8, α = .47"
Take holidays when want				
Overload	0.088	"F = 604.2, α = .000"	"F = 228.8, α = .000"	"F = 3.7, α = .001"
Work to Family	0.113	"F = 1273.5, α = .000"	"F =145.7, α = .000"	"F = 2.5, α = .02"
Family to Work	0.048	"F = 69.4, α = .000"	"F = 300.3, α = .000"	"F = 0.8, α = .47"
Caregiver Strain	0.045	"F = 15.6, $\alpha = .65$ "	"F = 92.8, α = .000"	"F = 0.5, α = .84"
Take time off to attend				
conference or course				
Overload	0.11	"F = 785.3, α = .000"	"F = 260.2, α = .000"	"F = 3.5, α = .002"
Work to Family	0.111	"F = 1203.5, α = .000 "	"F = 126.4, α = .000"	"F = 3.2, α = .003"
Family to Work	0.052	"F = 111.0, α = .000"	"F = 324.3, α = .000"	"F =1.3, α = .25"
Caregiver Strain	0.05	"F = 23.8, α = .000"	"F = 98.3, α = .000"	"F = 1.0, α = .46"

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent	Interaction
Interrupt work day for				
personal/family reasons				
and then return				
Overload	0.095	"F = 666.3, α = .002"	"F = 195.2, α = .000"	"F = 2.0, α = .06"
Work to Family	0.114	"F = 1233.2, α = .000"	"F = 177.8, α = .000"	"F = 1.9, α = .08"
Family to Work	0.005	"F = 100.6, α = .08"	"F = 294.6, α = .000"	"F = 1.8, α = .08"
Caregiver Strain	0.048	"F = 16.1, α = .000"	"F = 80.1, α = .000"	"F = 1.7, α = .12"
Take paid day off when				
child is sick				
Overload	0.073	"F = 233.8, α = .06"	"F = 140.2, α = .000"	"F = 4.8, α = .000"
Work to Family	0.088	"F = 529.5, α = .000 "	"F = 45.5, α = .000"	"F = 4.5, α = .000"
Family to Work	0.018	"F = 62.0, α = .06"	"F = 33.8, α = .000"	"F = 2.3, α = .03 "
Caregiver Strain	0.039	"F = 5.6, α = .004"	"F = 52.8, α = .000"	"F = 1.3, α = .39"
Take paid day off when				
elderly relative needs you				
Overload	0.082	"F = 326.3, α = .000 "	"F = 147.2, α = .000"	"F = 2.1, α = .05"
Work to Family	0.094	"F = 590.3, α = .000 "	"F = 70.4, α = .000"	"F = 2.3, α = .03"
Family to Work	0.043	"F = 118.2, α = .000 "	"F = 116.8, α = .000"	$F = 2.3 \ \alpha = .03$
Caregiver Strain	0.047	"F = 10.9, α = .000"	"F = 78.7, α = .000"	"F = 0.5, α = .80"
Have meals with family				
Overload	0.088	"F = 608.5, α = .000"	"F = 227.5, α = .000"	"F = 2.0, α = .06"
Work to Family	0.135	"F = 1479.4, α = .000 "	"F = 70.8, α = .000"	"F = 1.9, α = .06"
Family to Work	0.042	"F = 89.3, α = .000"	"F = 226.9, α = .000"	"F = 1.7, α = .42 "
Caregiver Strain	0.048	"F = 21.5, α = .000"	"F = 91.5, α = .000"	"F = 0.8, α = .53"
Be home when children				
get home from school				
Overload	0.067	"F = 155.4, α = .000"	"F = 88.4, α = .000"	"F = 2.8, α = .01"
Work to Family	0.054	"F = 257.9, α = .000 "	"F = 8.7, α = .000"	"F = 0.7, α = .62"
Family to Work	0.023	"F = 58.4, α = .000"	"F = 11.6, α = .000"	"F = 6.6, α = .000 "
Caregiver Strain	0.031	"F = 1.6, α = .21"	"F = 24.1, α = .000"	"F = 0.6, α = .71"

	R ²	Main Effect: Coping Strategy		
"Arrange work schedule (shifts, overtime) to meet personal/family				
commitments"				
Overload	0.116	"F = 862.2, α = .000 "	"F = 223.6, α = .000"	"F = 2.4, α = .03"
Work to Family	0.158	"F = 1863.9, α = .000 "	"F = 84.5, α = .000"	"F = 1.2, α = .29"
Family to Work	0.056	"F = 169.0, α = .000 "	"F = 265.3, α = .000"	"F = 3.6, α = .001 "
Caregiver strain	0.051	"F = 24.8, α = .000 "	"F = 89.9, α = .000"	"F = 0.9, α = .46"

Details: Significant Interaction Terms in Table 4a

		Male						Female				
Impact of Level of Flexibility on	Nol	Depen	dents	De	pende	ents	No	No Dependents Dependent			ents	
Work-Life Conflict	M	W	D	М	W	D	M	W	D	М	W	D
Vary work hours F to W	2.1	2	1.9	2.5	2.5	2.3	2.1	2.0	1.9	2.5	2.5	2.3
Take holidays when want Overload	3.7	3.4	3.1	3.9	3.6	3.4	3.8	3.6	3.2	4.0	3.9	3.7
Take time off for course	3.,	3	5	3.5	3.0	5	5.0	3.3	5.2	0	3.5	<i>3.,</i>
Overload W to F	3.7 3.3	3.3 2.8	3.1 2.4	3.9 3.4	3.6 3.0	3.4 2.7	3.9 3.2	3.5 2.7	3.3 2.3	4.1 3.2	3.8 2.7	3.6 2.5
Take paid day off child care												
Overload W to F			3.9 3.6	3.6 3.2	3.3 2.7				4.0 3.2	3.9 3.1	3.8 2.7	
Home when children get home from school			2.7	2.4	2.2				4.0	2.0	2.2	
Overload F to W			3.7 2.5	3.4 2.5	3.2 2.5				4.0 2.7	3.8 2.4	3.2 2.3	
Arrange work schedule F to W	2.1	2.1	1.9	2.5	2.5	2.2	2.2	2.1	1.8	2.6	2.4	2.1

Details: Significant Main Effects in Table 4b

Impact of Perceived		Level of	Flexibility	
Flexibility on Work–Life Conflict	L	М	Н	Δ
Vary work hours				
Overload	3.8	3.6	3.4	-0.4
W to F	3.2	2.9	2.6	-0.6
Caregiver strain	2.0	1.8	1.7	-0.3
Vary work location (i.e. tele-work)				
Overload	3.7	3.5	3.4	-0.3
W to F	3.0	2.8	2.7	-0.3
Take holidays when you want				
W to F	3.3	3.0	2.5	-0.8
F to W	2.3	2.3	2.0	-0.3
Interrupt work day then return				
Overload	3.9	3.6	3.3	-0.6
W to F	3.4	2.9	2.6	-0.8
F to W	2.3	2.2	2.1	-0.2
Caregiver strain	2.0	1.9	1.7	-0.3
Take paid day off to look after sick child				
F to W	2.6	2.5	2.3	-0.3
Take paid day off to care for elderly relative				
Overload	3.9	3.6	3.4	-0.6
W to F	3.3	2.9	2.3	-1.0
F to W	2.4	2.3	2.1	-0.3
Be home to have meals with family				
Overload	3.9	3.4	3.4	-0.6
W to F	3.4	3.0	2.5	-0.9
F to W	2.4	2.4	2.1	-0.3
Caregiver strain	1.9	1.9	1.6	-0.3
Be home when children get home from school				
W to F	3.1	2.8	2.4	-0.7
Arrange work to meet personal/family commitments				
Overload	3.9	3.6	3.2	-0.7
W to F	3.4	2.9	2.5	-0.9
Caregiver strain	1.9	1.8	1.6	-0.3

Appendix D

Impact of Management Behaviour on Work-Life Conflict

Appendix D

Impact of Management Behaviour on Work–Life Conflict

a. Supportive Manager (Total Measure): Gender/Job Type Analysis

Sample: 26,796

3 (management support) by 4 (gender and job type) ANOVA

Where management support is defined as:

- 1 = does not exhibit supportive behaviours
- 2 = inconsistent use of supportive behaviours
- 3 = frequently exhibits supportive behaviours

Gender and job type is defined as:

1 = Male Managers/Professional
 2 = Male Other
 3 = Female Managers/Professional
 4 = Female Other

Results of the Omnibus Test

	R²	Main Effect: Manager	Main Effect: Gender and Job Type	Interaction
Overload	.056	$F = 418.6$, $\alpha = .000$	$F = 191.7$, $\alpha = .000$	$F = 3.8$, $\alpha = .001$
Work to Family	.091	$F = 602.3$, $\alpha = .000$	$F = 247.7, \ \alpha = .000$	$F = 7.2$, $\alpha = .000$
Family to Work	.011	$F = 107.0, \ \alpha = .000$	$F = 7.6$, $\alpha = .000$	$F = 1.8, \ \alpha = .11$
Caregiver Strain	.035	$F = 29.9, \ \alpha = .000$	$F = 68.6$, $\alpha = .000$	$F = 0.6 \ \alpha = .76$

Impact of Supportive Manager: Examination of Significant Interaction Term

		Male							Female					
	Low Support Mixed S		Suppo	rtive	Low Support Mixed S		Suppo	Supportive						
	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0	M/P	0		
Overload	3.8	3.7	3.6	3.4	3.4	3.2	4.1	3.9	3.8	3.7	3.7	3.4		
W to F	3.4	3.2	3.1	2.9	2.9	2.5	3.4	3.1	3.1	2.7	2.9	2.4		

b. Supportive Manager (Total Measure): Gender/Dependent Care Analysis

sample = 26,796

3 (management support) by 4 (gender and dependent care) ANOVA

Where management support is defined as:

- 1 = does not exhibit supportive behaviours
- 2 = inconsistent use of supportive behaviours
- 3 = frequently exhibits supportive behaviours

Gender and dependent care status is defined as:

1 = Male - No Dependents
 2 = Male - Dependents
 3 = Female - No Dependents
 4 = Female - Dependents

Results of the Omnibus Test

	R ²	Main Effect: Perceived Flexibility	Main Effect: Gender and Dependent Care	Interaction
Overload	.064	$F = 383.4$, $\alpha = .000$	$F = 264.3, \ \alpha = .000$	$F = 0.9$, $\alpha = .42$
Work to Family	.067	$F = 534.7$, $\alpha = .000$	$F = 109.6, \ \alpha = .000$	$F = 1.5 \ \alpha = .19$
Family to Work	.048	$F = 93.8$, $\alpha = .000$	$F = 312.4$, $\alpha = .000$	$F = 0.3$, $\alpha = .94$
Caregiver Strain	.048	$F = 24.3$, $\alpha = .000$	$F = 104.2 \ \alpha = .000$	$F = 1.3 \ \alpha = .24$

Impact of Supportive Manager: Main Effects

	x̄ Overload	x Work to Family	x Family to Work	x Caregiver Strain
Low Support	3.9	3.2	2.3	2.0
Mixed Support	3.6	2.9	2.3	2.0
Supportive	3.4	2.6	2.1	1.7
Δ	-0.5	-0.6	-0.3	-0.4

a. Non-Supportive Manager (Total Measure): Gender/Job Type Analysis

sample = 26,796

3 (management non-support) by 4 (gender and dependent care) ANOVA

Where management support is defined as:

- 1 = frequently uses non-supportive behaviours
- 2 = inconsistent use of non-supportive behaviours
- 3 = rarely exhibits non-supportive behaviours

Gender and dependent care status is defined as:

1 = Male Manager/Professional
 2 = Male Other
 3 = Female Manager/Professional
 4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Manager	Main Effect: Job Type	Interaction
Overload	.086	$F = 236.8, \alpha = .000$	$F = 33.7$, $\alpha = .000$	$F = 0.9$, $\alpha = .53$
Work to Family	.124	$F = 410.7$, $\alpha = .000$	$F = 26.7$, $\alpha = .000$	$F = 1.8, \ \alpha = .09$
Family to Work	.027	$F = 102.4$, $\alpha = .000$	$F = 1.2, \ \alpha = .29$	$F = 0.7$, $\alpha = .71$
Caregiver Strain	.039	$F = 52.8$, $\alpha = .000$	$F = 32.4$, $\alpha = .000$	$F = 0.3$, $\alpha = .92$

Impact of Management Non-Support: Direct Effects

	x̄ Overload	x Work to Family
Non-Supportive	4.3	3.7
Mixed NS	3.9	3.2
Low Non-Support	3.5	2.7
Δ	0.8	1.0

b. Non-Supportive (Total Measure): Gender/Dependent Care Analysis

sample = 26,796

3 (management non-support) by 4 (gender and dependent care) ANOVA

Where management support is defined as:

- 1 = frequently uses non-supportive behaviours
- 2 = inconsistent use of non-supportive behaviours
- 3 = rarely exhibits non-supportive behaviours

Gender and dependent care status is defined as:

1 = Males - No Dependent Care
 2 = Males - Dependent Care
 3 = Females - No Dependent Care
 4 = Females - Dependent Care

Results of the Omnibus Test

	R ²	Main Effect: Manager	Main Effect: Gender and Dependent Care	Interaction
Overload	.085	$F = 172.4, \ \alpha = .000$	$F = 25.9$, $\alpha = .000$	$F = 1.4, \ \alpha = .21$
Work to Family	.101	$F = 281.1$, $\alpha = .000$	$F = 4.2$, $\alpha = .006$	$F = 2.1$, $\alpha = .05$
Family to Work	.052	$F = 73.1$, $\alpha = .000$	$F = 14.2, \ \alpha = .000$	$F = 0.4$, $\alpha = .88$
Caregiver Strain	.054	$F = 46.1$, $\alpha = .000$	$F = 38.7$, $\alpha = .000$	$F = 2.6 \ \alpha = .06$

Impact of Management Non-Support: Direct Effects

	x̄ Overload	x Work to Family	x Family to Work	x Caregiver Strain
Non-Supportive	4.2	3.7	2.6	2.5
Mixed NS	3.8	3.2	2.5	1.9
Low Non-Support	3.4	2.7	2.2	1.7
Δ	0.8	1.0	0.4	0.8

Details: Significant Main Effects in Table 7

Impact of Management Support	Type of Manager								
on Work-Life Conflict	Low S	MS	S	Δ					
Gives recognition for a job well done									
Role overload	3.5	3.6	3.8	- 0.3					
Shares information with me									
Role overload	3.4	3.6	3.8	- 0.4					

Details: Significant Interaction Terms in Table 7

	Male						Female						
	Mana	ger/P	rof.	C	Other		Man	ager/	Prof.	(Other		
	Low S	MS	S	Low S	MS	S	Low S	MS	S	Low S	MS	S	
Gives recognition													
W to F Constructive feedback	3.3	3.1	2.9	3.1	2.9	2.6	3.3	3.1	2.9	2.9	2.7	2.4	
Overload	3.7	3.5	3.4	3.6	3.4	3.2	4	3.8	3.7	3.9	3.6	3.5	
W to F	3.5	3.1	2.9	3.1	2.8	2.5	3.2	3	2.9	3	2.6	2.4	
Makes expectations clear													
Overload	3.7	3.6	3.4	3.6	3.4	3.2	4	3.8	3.7	3.8	3.6	3.4	
W to F	3.2	3.1	2.9	3	2.8	2.5	3.2	3.1	2.9	2.9	2.7	2.4	
Listens to my concerns													
Overload	3.8	3.6	3.5	3.6	3.4	3.3	4	3.8	3.7	3.9	3.7	3.3	
W to F	3.4	3.1	3	3.2	2.9	2.6	3.5	3.1	2.9	3.1	2.7	2.3	
Shares information													
W to F	3.3	3.1	2.8	3.1	2.8	2.6	3.2	3.1	2.9	2.9	2.7	2.4	
Effective at planning work													
Overload	3.8	3.5	3.4	3.6	3.4	3.1	4	3.8	3.6	4	3.6	3.3	
W to F	3.2	3.1	2.9	3	2.8	2.6	3.4	3	2.8	3	2.6	2.3	
Asks for input to decisions													
Overload	3.8	3.6	3.4	3.5	3.4	3.3	4	3.8	3.6	3.8	3.6	3.6	
W to F	3. 3	3.1	2.9	3.1	2.8	2.6	3.3	3.1	2.9	3	2.6	2.5	
Supports my decisions													
Overload	3.8	3.6	3.5	3.6	3.4	3.3	4	3.8	3.7	3.9	3.6	3.5	
W to F	3.4	3.1	3	3.2	2.9	2.6	3.3	3.1	2.9	3.1	2.6	2.5	
Available for questions													
Overload	3.8	3.6	3.5	3.6	3.5	3.2	4	3.9	3.7	3.9	3.7	3.5	
W to F	3.4	3.2	2.9	3.2	3	2.5	3.3	3.2	2.8	3.1	2.8	2.4	

Details: Significant Main Effects in Table 8

		Type of M	anager	
	Low S	MS	S	Δ
Gives recognition for a job well done				
Role overload	3.8	3.6	3.5	-0.3
Work-to-family interference	3.1	2.9	2.7	-0.4
Caregiver strain	2.0	1.8	1.7	-0.3
Provides constructive feedback				
Role overload	3.8	3.6	3.4	-0.4
Makes expectations clear				
Role overload	3.7	3.6	3.4	-0.3
Work-to-family interference	3.1	2.9	2.7	-0.4
Listens to my concerns				
Work-to-family interference	3.2	2.9	2.7	-0.5
Shares information with me				
Role overload	3.7	3.6	3.4	-0.3
Is available to answer questions				
Role overload	3.8	3.7	3.4	-0.4
Work-to-family interference	3.2	3.0	2.7	-0.5
Only talks to me when I make a mistake				
Work-to-family interference	3.1	3.0	2.7	-0.4
Is effective at planning work to be done				
Role overload	3.8	3.6	3.3	-0.5
Work-to-family interference	3.2	2.9	2.6	0.6
Asks for input before making decisions that affect work				
Role overload	3.8	3.5	3.4	-0.4
Work-to-family interference	3.1	2.8	2.6	-0.5
Supports my decisions				
Role overload	3.8	3.6	3.5	-0.3

Details: Significant Interaction Terms in Table 8

	Male					Female						
	No De	No Dependents		Dependents		No Dependents			Dependents			
	Low S	MS	S	Low S	MS	S	Low S	MS	S	Low S	MS	S
Listens to my concerns												
Overload	3.6	3.3	3.3	3.8	3.6	3.5	3.8	3.6	3.4	4.1	3.9	3.7

Details: Significant Interaction Terms in Table 8

	Male							Fer	nale			
Behaviour/ Impact of Behaviour on Work–Life	Ma	anagei	/Prof.		Othe	r	Ma	nager/	Prof.		Othe	er
Conflict	NS	MNS	Low NS	NS	MNS	Low NS	NS	MNS	Low NS	NS	MNS	Low NS
Puts me down in public												
Overload	3.8	3.7	3.5	3.6	3.5	3.3	4	4	3.5	4	4	3.5
W to F	3.5	3.3	3	3.4	3.1	2.7	3.5	3.3	3	3.1	3	2.4
Only talks to me when												
I make a mistake												
Overload	3.8	3.7	3.5	3.5	3.5	3.2	4	3.9	3.7	3.8	3.8	3.5
W to F	3.4	3.3	3.1	3.1	3.1	2.6	3.3	3.3	3	3.1	3	2.5
Makes me feel guilty												
Overload	3.8	3.7	3.5	3.7	3.6	3.2	4.2	3.9	3.5	3.9	3.8	3.4
W to F	3.5	3.3	2.9	3.3	3.1	2.5	3.5	3.2	2.9	3.1	3	2.3
Focuses on hours												
not output												
Overload	3.9	3.7	3.6	3.6	3.5	3.2	4.2	3.9	3.5	3.9	3.8	3.5
W to F	3.3	3.3	2.8	3.1	3	2.6	3.5	3.2	2.9	3	2.9	2.4
Unrealistic expectations												
Overload	4	3.6	3.3	3.8	3.5	3.1	4.2	3.9	3.6	4	3.7	3.4
W to F	3.5	3.1	2.8	3.3	2.9	2.4	3.5	3.1	2.8	3.1	2.8	2.2
Puts in long hours and												
expects same from me												
Overload	3.9	3.5	3.4	3.8	3.4	3.2	4.1	3.8	3.6	4	3.8	3.4
W to F	3.5	3.1	2.8	3.4	2.9	2.5	3.5	3.1	2.8	3.3	2.8	2.4

Details: Significant Main Effects in Table 10

	Type of Manager								
	NS	MNS	Low NS	Δ					
Makes me feel guilty about time									
off for personal reasons									
Role overload	3.8	3.7	3.4	0.4					
Family-to-work interference	2.4	2.4	2.1	0.3					
Caregiver strain	2	1.9	1.7	0.3					
Focuses on hours of work not output									
Role overload	3.8	3.7	3.4	0.4					
Work-to-family interference	3.2	3.1	2.7	0.5					
Caregiver strain	2.1	1.9	1.7	0.4					
Has unrealistic expectations about what can be done									
Caregiver strain	2	1.8	1.7	0.3					

Details: Significant Interaction Terms in Table 10

	Male						Fe	male				
	No	No Dependents		D	Pepen	dents	No Dependents			Dependents		
	NS	MNS	Low NS	NS	MNS	Low NS	NS	MNS	Low NS	NS	MNS	Low NS
Puts me down in public W to F	3.1	3.1	2.7	3.2	3.1	2.8	3.2	3	2.6	3.3	3.1	2.7
Makes me feel guilty W to F	3.2	3.1	2.7	3.4	3.3	2.9	3.2	3	2.5	3.4	3.2	2.6
Focuses on hours F to W	2.2	2.2	1.9	2.6	2.5	2.2	2.2	2.1	1.9	2.6	2.5	2.1
Has unrealistic work expectations												
Overload W to F	3.8	3.4	3.1 2.7	4.2 3.6	3.6 3.1	3.3 2.8	3.2	3.6 2.8	3.3 2.6	3.3	3.9	3.3 2.4
Puts in long hours and expects me to do same	2.7	2.4	2.2	4	2.5	2.4	2.0	2.6	2.4	4.2	2.0	2.6
Overload W to F	3.7	3.4	3.2 2.5	3.6	3.5 3.1	3.4 2.5	3.9	3.6 2.9	3.4 2.4	4.2 3.5	3.9 3.1	3.6 2.6

Appendix E Impact of Supportive Benefits on Work-Life Conflict

Appendix E

Impact of Supportive Benefits on Work-Life Conflict

a. Gender/Job type Analysis

2 (use of benefit) by 4 (gender and job type) ANOVA

Where use of benefit is defined as:

1 = No

2 = Yes

Gender and job type is defined as:

2 = Male Other

1 = Male Managers/Professional 3 = Female Managers/Professional

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Benefit	Main Effect: Gender and Job Type	Interaction
Use on-site day care				
Overload	.044	$F = 2.39$, $\alpha = .12$	$F = 3.13, \ \alpha = .03$	$F = 0.28$, $\alpha = .84$
Work to Family	.037	$F = 1.01$, $\alpha = .38$	$F = 1.72, \ \alpha = .16$	$F = 0.29$, $\alpha = .84$
Family to Work	.013	$F = 9.36$, $\alpha = .002$	$F = 21.03, \ \alpha = .11$	$F = 1.58, \ \alpha = .19$
Caregiver Strain	.051	$F = 0.11$, $\alpha = .74$	$F = .112$, $\alpha = .96$	$F = 0.55$, $\alpha = .66$
Use of elder care referral				
Overload	.036	$F = 2.39$, $\alpha = .12$	$F = 3.48, \ \alpha = .02$	$F = .53$, $\alpha = .67$
Work to Family	.024	$F = 4.46$, $\alpha = .035$	$F = 1.28, \ \alpha = .28$	$F = .54$, $\alpha = .67$
Family to Work	.025	$F = 9.43$, $\alpha = .002$	$F = 0.72, \ \alpha = .52$	$F = .25$, $\alpha = .86$
Caregiver Strain	.116	$F = 22.24$, $\alpha = .000$	$F = 3.18, \ \alpha = .02$	$F = .41, \ \alpha = .76$

	R ²	Main Effect: Benefit	Main Effect: Gender and Job Type	Interaction
Use of child care referral				
Overload	.041	$F = 5.79, \ \alpha = .02$	$F = 8.12$, $\alpha = .000$	$F = 1.39$, $\alpha = .24$
Work to Family	.022	$F = 3.43, \ \alpha = .06$	$F = 3.79$, $\alpha = .01$	$F = .91$, $\alpha = .44$
Family to Work	.051	$F = 21.86$, $\alpha = .000$	$F = 8.91$, $\alpha = .000$	$F = 5.92$, $\alpha = .001$
Caregiver Strain	.049	$F = .67$, $\alpha = .42$	$F = .54$, $\alpha = .66$	$F = 1.31, \ \alpha = .27$
Use of flexible work arrangements				
Overload	.022	$F = 4.42, \ \alpha = .04$	$F = 88.58$, $\alpha = .000$	$F = 2.68$, $\alpha = .24$
Work to Family	.041	$F = 1.32, \ \alpha = .25$	$F = 172.78, \ \alpha = .000$	$F = 6.08$, $\alpha = .44$
Family to Work	.004	$F = 21.86$, $\alpha = .000$	$F = 7.02$, $\alpha = .000$	$F = .35$, $\alpha = .001$
Caregiver Strain	.031	$F = .67$, $\alpha = .42$	$F = 38.49$, $\alpha = .000$	$F = .24$, $\alpha = .87$
Use of tele-work arrangements				
Overload	.035	$F = 7.94, \ \alpha = .005$	$F = 35.13, \ \alpha = .000$	$F = 1.10, \ \alpha = .36$
Work to Family	.048	$F = 33.59$, $\alpha = .000$	$F = 36.33, \ \alpha = .000$	$F = 2.59$, $\alpha = .05$
Family to Work	.007	$F = 19.06, \ \alpha = .000$	$F = 2.13, \ \alpha = .09$	$F = 1.71, \ \alpha = .15$
Caregiver Strain	.033	$F = .01$, $\alpha = .94$	$F = 14.99$, $\alpha = .000$	$F = .24$, $\alpha = .87$
Use of EAP				
Overload	.053	$F = 1.22, \ \alpha = .000$	$F = 73.13$, $\alpha = .000$	$F = 3.33$, $\alpha = .02$
Work to Family	.041	$F = 65.55$, $\alpha = .000$	$F = 128.71$, $\alpha = .000$	$F = 1.54$, $\alpha = .21$
Family to Work	.008	$F = 106.61, \ \alpha = .000$	$F = 2.96$, $\alpha = .000$	$F = .85$, $\alpha = .47$
Caregiver Strain	.031	$F = 9.78$, $\alpha = .002$	$F = 31.89, \ \alpha = .000$	$F = 1.55$, $\alpha = .20$
Use of supportive relocation policies				
Overload	.027	$F = .86$, $\alpha = .77$	$F = 34.68, \ \alpha = .000$	$F = 1.06$, $\alpha = .37$
Work to Family	.050	$F = 47.08$, $\alpha = .000$	$F = 47.82, \ \alpha = .000$	$F = .41$, $\alpha = .75$
Family to Work	.001	$F = 1.21, \ \alpha = .27$	$F = .48$, $\alpha = .000$	$F = .51$, $\alpha = .67$
Caregiver Strain	.042	$F = 5.91, \ \alpha = .02$	$F = 10.81, \ \alpha = .000$	$F = 1.29, \ \alpha = .28$
Use of family/ emergency days off				
Overload	.043	$F = 105.61, \ \alpha = .000$	$F = 147.12, \ \alpha = .000$	$F = 11.21, \ \alpha = .000$
Work to Family	.041	$F = 5.54$, $\alpha = .02$	$F = 243.91, \ \alpha = .000$	$F = 7.43, \ \alpha = .000$
Family to Work	.031	$F = 410.32, \ \alpha = .000$	$F = 9.39$, $\alpha = .000$	$F = 15.83 \ \alpha = .000$
Caregiver Strain	.031	$F = 8.72, \alpha = .003$	$F = 45.77$, $\alpha = .000$	$F = 1.38, \ \alpha = .25$

	R²	Main Effect: Benefit	Main Effect: Gender and Job Type	Interaction
Use of unpaid LOA				
Overload	.026	$F = 3.58$, $\alpha = .06$	$F = 67.89$, $\alpha = .000$	$F = 1.38$, $\alpha = .25$
Work to Family	.035	$F = .70, \alpha = .41$	$F = 94.61, \ \alpha = .000$	$F = .84$, $\alpha = .46$
Family to Work	.005	$F = 48.80, \ \alpha = .000$	$F = 1.94, \ \alpha = .12$	$F = .57$, $\alpha = .64$
Caregiver Strain	.029	$F = 4.99, \ \alpha = .01$	$F = 14.81$, $\alpha = .000$	$F = 1.06$, $\alpha = .37$
Use of personal days with pay				
Overload	.035	$F = 37.99$, $\alpha = .000$	$F = 94.56$, $\alpha = .000$	$F = 1.82, \ \alpha = .14$
Work to Family	.041	$F = .62, \alpha = .43$	$F = 137.92, \ \alpha = .000$	$F = 3.14$, $\alpha = .02$
Family to Work	.011	$F = 62.04$, $\alpha = .000$	$F = 8.47$, $\alpha = .000$	$F = 3.73$, $\alpha = .01$
Caregiver Strain	.037	$F = 3.15, \ \alpha = .08$	$F = 35.47$, $\alpha = .000$	$F = 1.32, \ \alpha = .27$
Use of time off instead of overtime				
Overload	.025	$F = 11.49, \ \alpha = .001$	$F = 104.88, \ \alpha = .000$	$F = 3.61, \ \alpha = .01$
Work to Family	.031	$F = 17.51, \alpha = .000$	$F = 201.41, \ \alpha = .000$	$F = 4.16$, $\alpha = .000$
Family to Work	.002	$F = 4.48, \ \alpha = .03$	$F = 2.35$, $\alpha = .000$	$F = .79$, $\alpha = .56$
Caregiver Strain	.027	$F = .35$, $\alpha = .58$	$F = 46.91, \ \alpha = .000$	$F = .52, \ \alpha = .93$
Use of short-term/ personal family leave				
Overload	.025	$F = 23.03$, $\alpha = .000$	$F = 116.83, \ \alpha = .000$	$F = 5.53$, $\alpha = .001$
Work to Family	.041	$F = 4.99$, $\alpha = .02$	$F = 174.01, \ \alpha = .000$	$F = 1.54$, $\alpha = .20$
Family to Work	.011	$F = 104.74, \ \alpha = .000$	$F = 8.04$, $\alpha = .000$	$F = 11.64$, $\alpha = .000$
Caregiver Strain	.032	$F = 36.52, \ \alpha = .000$	$F = 40.94$, $\alpha = .000$	$F = .62, \ \alpha = .60$
Use of part-time/ reduced work hours /Job share with pro-rated benefits				
Overload	.048	$F = 8.34$, $\alpha = .004$	$F = 62.54$, $\alpha = .000$	$F = 2.61, \ \alpha = .05$
Work to Family	.048	$F = 5.71$, $\alpha = .01$	$F = 69.26$, $\alpha = .000$	$F = .65, \ \alpha = .58$
Family to Work	.011	$F = 9.68$, $\alpha = .002$	$F = 7.72$, $\alpha = .000$	$F = 7.84$, $\alpha = .000$
Caregiver Strain	.024	$F = .13, \alpha = .91$	$F = 5.12$, $\alpha = .002$	$F = .79$, $\alpha = .51$

Impact of Supportive Benefits on Work-Life Conflict

	Use Be	Use Benefit		
	Yes	No		
Elder care referral on caregiver strain	2.6	1.8	.8	
EAP on W to F 3.0	2.7	.3		
Supportive relocation policies on W to F	2.7	3.0	3	
Part time with benefits on W to F	2.5	3.0	5	

Impact of Benefit: Examination of Significant Interaction Term

	Male				Female				
	Manage	er/Prof.	Other		Manager/Prof.		Other		
	N	Υ	N	Υ	N	Υ	N	Υ	
Child care referral									
F to W	2.3	2.1	2.3	2.1	2.2	2.1	2.9	2.2	
EAP									
Overload	3.6	3.7	3.3	3.6	3.8	3.9	3.6	3.9	
Family/Emergency days									
Overload	3.5	3.2	3.5	3.0	3.3	2.7	3.3	2.7	
W to F	3.6	3.1	3.8	2.9	3.4	2.5	3.8	2.5	
Part time with benefits									
Overload	3.5	3.5	3.3	3.0	3.8	3.8	3.8	3.4	

b. Gender/Dependent Care Analysis

2 (use of benefit) by 4 (gender and dependent care status) ANOVA

Where use of benefit is defined as:

1 = No

2 = Yes

Gender and dependent care status is defined as:

1 = Male - No Dependent Care

2 = Male - Dependent Care

3 = Female - No Dependent Care 4 = Female - Dependent Care

Results of the Omnibus Test

	R²	Main Effect: Manager	Main Effect: Gender and Dependent Care	Interaction
Use on-site day care				
Overload	.050	$F = 1.37$, $\alpha = .24$	$F = 2.90, \ \alpha = .03$	$F = 1.03, \ \alpha = .37$
Work to Family	.015	$F = 1.37$, $\alpha = .22$	$F = 2.99$, $\alpha = .03$	$F = 1.03, \ \alpha = .37$
Family to Work	.066	$F = 3.77$, $\alpha = .01$	$F = 6.53$, $\alpha = .000$	$F = 1.56, \ \alpha = .20$
Caregiver Strain	.051	$F = 0.01$, $\alpha = .94$	$F = .26$, $\alpha = .86$	$F = 1.45, \ \alpha = .35$
Use of elder care referral				
Overload	.055	$F = 2.88, \ \alpha = .09$	$F = 4.71$, $\alpha = .004$	$F = .97$, $\alpha = .40$
Work to Family	.018	$F = 5.73$, $\alpha = .01$	$F = 0.53$, $\alpha = .66$	$F = 1.22, \ \alpha = .30$
Family to Work	.047	$F = 8.15$, $\alpha = .004$	$F = 0.74$, $\alpha = .52$	$F = 3.26, \ \alpha = .02$
Caregiver Strain	.126	$F = 32.40, \ \alpha = .000$	$F = 5.43$, $\alpha = .001$	$F = 6.05$, $\alpha = .000$
Use of child care referral				
Overload	.061	$F = 8.59$, $\alpha = .000$	$F = 9.98, \ \alpha = .003$	$F = 2.30, \ \alpha = .08$
Work to Family	.021	$F = 4.70, \ \alpha = .03$	$F = 2.59$, $\alpha = .05$	$F = 1.58, \ \alpha = .12$
Family to Work	.088	$F = 32.38, \ \alpha = .000$	$F = 7.51$, $\alpha = .000$	$F = 12.61, \ \alpha = .001$
Caregiver Strain	.043	$F = .26$, $\alpha = .61$	$F = 2.22, \ \alpha = .08$	$F = 1.34, \ \alpha = .33$

	R ²	Main Effect: Manager	Main Effect: Gender and Dependent Care	Interaction
Use of flexible				
work arrangements				
Overload	.036	$F = 5.68$, $\alpha = .01$	$F = 144.81, \ \alpha = .000$	$F = 1.40, \ \alpha = .24$
Work to Family	.022	$F = .74$, $\alpha = .09$	$F = 89.34$, $\alpha = .000$	$F = 1.44$, $\alpha = .22$
Family to Work *	.047	$F = 23.58$, $\alpha = .000$	$F = 194.60, \ \alpha = .000$	$F = 1.05, \ \alpha = .37$
Caregiver Strain	.050	$F = 1.28, \ \alpha = .25$	$F = 66.28, \ \alpha = .000$	$F = .60, \ \alpha = .62$
Use of tele-work				
arrangements				
Overload	.036	$F = 9.72, \ \alpha = .002$	$F = 47.82, \ \alpha = .000$	$F = 2.43, \ \alpha = .05$
Work to Family	.030	$F = 45.52$, $\alpha = .000$	$F = 21.81, \ \alpha = .000$	$F = 2.44$, $\alpha = .05$
Family to Work *	.051	$F = 16.03$, $\alpha = .000$	$F = 62.46$, $\alpha = .000$	$F = 2.10, \ \alpha = .10$
Caregiver Strain	.045	$F = .58$, $\alpha = .45$	$F = 20.75$, $\alpha = .000$	$F = .68$, $\alpha = .56$
Use of EAP				
Overload	.043	$F = 100.44$, $\alpha = .000$	$F = 112.59$, $\alpha = .000$	$F = 3.63, \ \alpha = .01$
Work to Family	.026	$F = 52.55, \ \alpha = .000$	$F = 44.82, \ \alpha = .000$	$F = 3.60, \ \alpha = .01$
Family to Work	.046	$F = 77.80, \ \alpha = .000$	$F = 140.06$, $\alpha = .000$	$F = 2.31$, $\alpha = .07$
Caregiver Strain	.042	$F = 9.64$, $\alpha = .002$	$F = 42.51, \ \alpha = .000$	$F = 1.61, \ \alpha = .18$
Use of supportive				
relocation policies				
Overload	.035	$F = 3.36$, $\alpha = .06$	$F = 41.89, \ \alpha = .000$	$F = 1.08$, $\alpha = .35$
Work to Family	.025	$F = 73.54$, $\alpha = .000$	$F = 20.54$, $\alpha = .000$	$F = .28$, $\alpha = .25$
Family to Work	.041	$F = 2.90, \ \alpha = .09$	$F = 60.47$, $\alpha = .000$	$F = .81, \ \alpha = .49$
Caregiver Strain	.060	$F = 5.55$, $\alpha = .02$	$F = 10.02$, $\alpha = .000$	$F = .42, \ \alpha = .72$
Use of family/				
emergency days off				
Overload	.041	$F = 44.35$, $\alpha = .000$	$F = 195.14, \ \alpha = .000$	$F = 10.04, \ \alpha = .000$
Work to Family	.016	$F = .12, \ \alpha = .73$	$F = 88.67$, $\alpha = .000$	$F = 7.23$, $\alpha = .000$
Family to Work	.061	$F = 251.89 \alpha = .000$	$F = 216.37$, $\alpha = .000$	$F = 22.83, \ \alpha = .000$
Caregiver Strain	.045	$F = 4.42, \ \alpha = .01$	$F = 73.61, \ \alpha = .000$	$F = .71$, $\alpha = .54$

	R²	Main Effect: Manager	Main Effect: Gender and Dependent Care	Interaction
Use of unpaid LOA				
Overload	.037	$F = 3.54$, $\alpha = .06$	$F = 91.37$, $\alpha = .000$	$F = 2.60, \ \alpha = .05$
Work to Family	.014	$F = .63, \alpha = .42$	$F = 26.96, \ \alpha = .000$	$F = 1.33, \ \alpha = .26$
Family to Work	.042	$F = 50.72$, $\alpha = .000$	$F = 91.99, \ \alpha = .000$	$F = 1.71, \ \alpha = .16$
Caregiver Strain	.042	$F = 4.85, \ \alpha = .03$	$F = 28.38$, $\alpha = .000$	$F = 0.81$, $\alpha = .50$
Use of personal days				
with pay				
Overload *	.042	$F = 29.48$, $\alpha = .000$	$F = 127.08$, $\alpha = .000$	$F = 2.38$, $\alpha = .07$
Work to Family	.016	$F = .00, \alpha = .99$	$F = 54.06$, $\alpha = .000$	$F = 4.14$, $\alpha = .006$
Family to Work	.048	$F = 43.88$, $\alpha = .000$	$F = 147.69$, $\alpha = .000$	$F = 2.95, \ \alpha = .03$
Caregiver Strain	.040	$F = 2.04, \ \alpha = .15$	$F = 47.84$, $\alpha = .000$	$F = 0.19$, $\alpha = .90$
Use of time off instead				
of overtime				
Overload *	.040	$F = 14.56$, $\alpha = .000$	$F = 226.99$, $\alpha = .000$	$F = 2.20$, $\alpha = .08$
Work to Family	.014	$F = 22.87$, $\alpha = .000$	$F = 75.08$, $\alpha = .000$	$F = 1.31$, $\alpha = .27$
Family to Work	.022	$F = 4.84$, $\alpha = .02$	$F = 226.88$, $\alpha = .000$	$F = .48$, $\alpha = .70$
Caregiver Strain	.039	$F = .01$, $\alpha = .95$	$F = 70.50, \ \alpha = .000$	$F = .47$, $\alpha = .07$
Use of short-term/				
personal family leave				
Overload	.035	$F = 7.90, \ \alpha = .005$	$F = 151.74$, $\alpha = .000$	$F = 4.78$, $\alpha = .002$
Work to Family	.016	$F = .03$, $\alpha = .86$	$F = 66.12, \ \alpha = .000$	$F = 1.56$, $\alpha = .20$
Family to Work	.046	$F = 64.66$, $\alpha = .000$	$F = 146.64$, $\alpha = .000$	$F = 11.15, \ \alpha = .000$
Caregiver Strain	.046	$F = 16.49$, $\alpha = .000$	$F = 62.72, \ \alpha = .000$	$F = .41$, $\alpha = .75$
Use of part-time/reduced				
work hours/job share with				
pro-rated benefits				
Overload	.041	$F = 10.83, \ \alpha = .001$	$F = 65.63, \ \alpha = .000$	$F = 4.16$, $\alpha = .003$
Work to Family	.014	$F = 6.98$, $\alpha = .000$	$F = 18.21, \ \alpha = .008$	$F = .72$, $\alpha = .54$
Family to Work	.050	$F = 15.38$, $\alpha = .000$	$F = 45.98$, $\alpha = .000$	$F = 15.58$, $\alpha = .000$
Caregiver Strain	.039	$F = .18, \ \alpha = .67$	$F = 16.79, \ \alpha = .000$	$F = .73$, $\alpha = .39$

Impact of Benefit: Main Effect

Impact of Use of Benefit on Work–Life Conflict	Use Ber	Δ	
	Yes	No	
On-site day care on F to W	2.6	2.3	.3
Elder care referral on W to F	2.7	2.0	.7
Child care referral on overload	3.7	3.4	.3
EAP on F to W 2.4	2.0	.4	
EAP on caregiver strain	2.2	1.8	.4
Family/emergency days on caregiver strain	2.2	1.8	.4
Personal days with pay on F to W	2.3	2.0	.3
Short-term leave on caregiver strain	1.7	2.0	3

Impact of Benefit: Examination of Significant Interaction Term

	Male				Female			
	Manager/Prof.		Other		Manager/Prof.		Other	
	N	Υ	N	Υ	N	Υ	N	Υ
Elder care referral:								
Caregiver strain	1.8	2.1	2.0	2.7				
Child care referral								
F to W	2.5	2.2	2.9	2.4				
EAP:								
Overload	3.5	3.8	3.3	3.6	3.8	4.0	3.6	3.8
Family/emergency days:								
Overload	3.5	2.1	3.5	2.3	3.3	2.0	3.3	2.3
F to W	3.6	2.0	3.8	2.2	3.4	2.0	3.8	2.3
Short-term personal leave								
F to W	2.2	2.3	2.2	2.3	2.1	2.5	2.0	2.4
Part time with benefits								
Overload	3.6	2.3	3.3	2.0	3.4	2.5	3.0	2.2
F to W	3.8	2.2	3.8	2.5	3.5	2.1	3.5	2.4

Appendix F Impact of Coping Strategies on Work–Life Conflict

Appendix F

Impact of Supportive Benefits on Work–Life Conflict

a. Gender/Dependent Care Analysis

3 (frequency with which strategy used) by 4 (gender by dependent care status) ANOVA

Use of coping strategies is defined as:

1 = less than once a week (i.e. M)

2 = once a week (i.e. W)

3 = several times a week or daily (i.e. D)

Gender and dependent care status is defined as:

1 = Male - No Dependent Care

2 = Male - Dependent Care

3 = Female - No Dependent Care

4 = Female - Dependent Care

Results of the Omnibus Test

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction
Talked with family or friends				
Overload	.038	$F = 15.41, \ \alpha = .000$	$F = 307.43, \alpha = .000$	$F = 2.41, \ \alpha = .02$
Work to Family	.017	$F = 18.89$, $\alpha = .000$	$F = 140.13, \ \alpha = .000$	$F = 2.18$, $\alpha = .06$
Family to Work	.051	$F = 21.86$, $\alpha = .000$	$F = 321.87, \alpha = .000$	$F = 1.53, \ \alpha = .17$
Caregiver Strain	.041	$F = 0.43$, $\alpha = .65$	$F = 103.31$, $\alpha = .000$	$F = 1.91, \ \alpha = .08$

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction		
Talked with colleagues						
at work						
Overload	.038	$F = 20.19$, $\alpha = .000$	$F = 303.25, \alpha = .000$	$F = 0.43, \ \alpha = .09$		
Work to Family	.017	$F = 19.45, \ \alpha = .000$	$F = 128.91, \alpha = .000$	$F = 1.81, \ \alpha = .09$		
Family to Work	.038	$F = 8.58$, $\alpha = .000$	$F = 329.20, \alpha = .000$	$F = 0.40$, $\alpha = .88$		
Caregiver Strain	.042	$F = 4.59$, $\alpha = .01$	$F = 103.30, \alpha = .000$	$F = 1.29$, $\alpha = .26$		
Sought help from						
family or friends						
Overload	.038	$F = 6.31$, $\alpha = .002$	$F = 260.11$, $\alpha = .000$	$F = 0.94, \ \alpha = .46$		
Work to Family	.016	$F = 10.78, \ \alpha = .000$	$F = 112.99, \alpha = .000$	$F = 0.45, \ \alpha = .84$		
Family to Work	.039	$F = 2.59$, $\alpha = .08$	$F = 281.79$, $\alpha = .000$	$F = 2.18, \ \alpha = .06$		
Caregiver Strain	.045	$F = 8.77$, $\alpha = .000$	$F = 92.19, \ \alpha = .000$	$F = 1.59, \ \alpha = .14$		
Sought help from						
colleagues at work						
Overload	.036	$F = 2.80, \ \alpha = .06$	$F = 205.13, \ \alpha = .000$	$F = 1.86, \ \alpha = .13$		
Work to Family	.016	$F = 9.06$, $\alpha = .000$	$F = 77.23, \ \alpha = .000$	$F = 1.32, \ \alpha = .24$		
Family to Work	.038	$F = 2.76, \ \alpha = .06$	$F = 221.99, \ \alpha = .000$	$F = 3.45, \ \alpha = .002$		
Caregiver Strain	.044	$F = 0.62$, $\alpha = .54$	$F = 68,70, \ \alpha = .000$	$F = 1.39, \ \alpha = .21$		
Just work harder						
Overload	.141	$F = 1163.8, \ \alpha = .000$	$F = 219.32, \ \alpha = .000$	$F = 1.61, \ \alpha = .14$		
Work to Family	.091	$F = 965.07$, $\alpha = .000$	$F = 154.31, \ \alpha = .000$	$F = 3.44$, $\alpha = .002$		
Family to Work	.051	$F = 153.54$, $\alpha = .000$	$F = 306.57$, $\alpha = .000$	$F = 3.79, \ \alpha = .001$		
Caregiver Strain	.057	$F = 36.16$, $\alpha = .000$	$F = 81.21, \ \alpha = .000$	$F = 0.83, \ \alpha = .52$		
Prioritize						
Overload	.047	$F = 146.73, \ \alpha = .000$	$F = 198.80, \ \alpha = .000$	$F = 2.97$, $\alpha = .008$		
Work to Family	.024	$F = 99.87, \ \alpha = .000$	$F = 60.40, \ \alpha = .000$	$F = 4.79, \ \alpha = .000$		
Family to Work	.038	$F = 8.79$, $\alpha = .000$	$F = 192.22, \ \alpha = .000$	$F = 2.53$, $\alpha = .02$		
Caregiver Strain	.038	$F = 2.57$, $\alpha = .08$	$F = 55.86, \ \alpha = .000$	$F = 0.26$, $\alpha = .96$		

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction		
Delegate						
Overload	.049	$F = 78.01, \ \alpha = .000$	$F = 267.49, \ \alpha = .000$	$F = 5.01$, $\alpha = .000$		
Work to Family	.026	$F = 140.01, \ \alpha = .000$	$F = 84.81, \alpha = .000$	$F = 2.54$, $\alpha = .01$		
Family to Work	.046	$F = 12.25, \alpha = .000$	$F = 268.42, \ \alpha = .000$	$F = 7.22$, $\alpha = .000$		
Caregiver Strain	.042	$F = 1.55$, $\alpha = .21$	$F = 102.76, \ \alpha = .000$	$F = 1.35$, $\alpha = .23$		
Just try to forget about it						
Overload	.064	$F = 226.49$, $\alpha = .000$	$F = 229.55$, $\alpha = .000$	$F = 1.43, \ \alpha = .19$		
Work to Family	.028	$F = 161.60, \ \alpha = .000$	$F = 103.17$, $\alpha = .000$	$F = 0.96$, $\alpha = .46$		
Family to Work	.049	$F = 84.56$, $\alpha = .000$	$F = 203.03$, $\alpha = .000$	$F = 2.78$, $\alpha = .01$		
Caregiver strain	.052	$F = 20.73, \alpha = .000$	$F = 81.89, \ \alpha = .000$	$F = 0.17$, $\alpha = .99$		
Find another activity to take mind off things						
Overload	.041	$F = 25.02$, $\alpha = .000$	$F = 301.61, \ \alpha = .000$	$F = 6.35$, $\alpha = .000$		
Work to Family	.017	$F = 10.89$, $\alpha = .000$	$F = 130.52$, $\alpha = .000$	$F = 2.05$, $\alpha = .05$		
Family to Work	.041	$F = 16.78, \alpha = .000$	$F = 333.10, \ \alpha = .000$	$F = 5.87$, $\alpha = .000$		
Caregiver Strain	.041	$F = 6.21, \ \alpha = .002$	$F = 107.01, \ \alpha = .000$	$F = 2.32$, $\alpha = .03$		
Reduce the quality of the things I do						
Overload	.111	$F = 274.21$, $\alpha = .000$	$F = 114.67, \ \alpha = .000$	$F = 5.99$, $\alpha = .000$		
Work to Family	.067	$F = 616.43, \ \alpha = .000$	$F = 60.73, \ \alpha = .000$	$F = 3.61$, $\alpha = .001$		
Family to Work	.071	$F = 273.56$, $\alpha = .000$	$F = 152.13, \ \alpha = .000$	$F = 2.45, \ \alpha = .01$		
Caregiver Strain	.058	$F = 30.94, \ \alpha = .000$	$F = 58.81, \ \alpha = .000$	$F = 0.24$, $\alpha = .96$		
Schedule, organize and plan my time more carefully						
Overload	.041	$F = 28.48$, $\alpha = .000$	$F = 296.47$, $\alpha = .000$	$F = 4.07$, $\alpha = .000$		
Work to Family	.017	$F = 19.06, \ \alpha = .000$	$F = 122.76$, $\alpha = .000$	$F = 2.42, \ \alpha = .02$		
Family to Work	.038	$F = 5.11$, $\alpha = .006$	$F = 298.42, \ \alpha = .000$	$F = 1.41, \ \alpha = .21$		
Caregiver Strain	.041	$F = 3.55, \ \alpha = .02$	$F = 91.50, \ \alpha = .000$	$F = 0.92, \ \alpha = .48$		

	R²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction		
Have an alcoholic drink						
Overload	.042	$F = 76.32$, $\alpha = .000$	$F = 192.64, \ \alpha = .000$	$F = 1.53$, $\alpha = .17$		
Work to Family	.023	$F = 97.89$, $\alpha = .000$	$F = 83.17$, $\alpha = .000$	$F = 0.88$, $\alpha = .51$		
Family to Work	.041	$F = 7.14$, $\alpha = .001$	$F = 204.96$, $\alpha = .000$	$F = 2.77$, $\alpha = .01$		
Caregiver Strain	.042	$F = 5.08$, $\alpha = .000$	$F = 70.49$, $\alpha = .000$	$F = 1.08$, $\alpha = .37$		
Use prescription, over- the-counter or other drugs						
Overload	.048	$F = 119.81, \ \alpha = .000$	$F = 69.48$, $\alpha = .000$	$F = 0.39$, $\alpha = .088$		
Work to Family	.023	$F = 91.95, \ \alpha = .000$	$F = 32.31$, $\alpha = .000$	$F = .13$, $\alpha = .99$		
Family to Work	.041	$F = 18.29$, $\alpha = .000$	$F = 87.78$, $\alpha = .000$	$F = 1.02, \ \alpha = .41$		
Caregiver Strain	.057	$F = 35.04, \ \alpha = .000$	$F = 17.70, \ \alpha = .000$	$F = 1.43, \ \alpha = .19$		

Details: Significant Main Effects Shown in Table 15

How O	How Often Use Strategy					
М	W	D				
3.2	3.6	4.0	.8			
1.7	1.8	2.1	.4			
1.8	1.9	2.1	.3			
3.5	3.7	3.9	.4			
1.8	1.9	2.2	.4			
3.5	4.0	3.8	**			
2.2	2.6	2.3	**			
1.8	2.3	2.0	**			
	3.2 1.7 1.8 3.5 1.8	M W 3.2 3.6 1.7 1.8 1.8 1.9 3.5 3.7 1.8 1.9 3.5 4.0 2.2 2.6	M W D 3.2 3.6 4.0 1.7 1.8 2.1 1.8 1.9 2.1 3.5 3.7 3.9 1.8 1.9 2.2 3.5 4.0 3.8 2.2 2.6 2.3			

Details: Significant Interaction Terms in Table 15

No No No No No No No No		Male					Female						
Just work harder W to F 2.5 2.9 3.1 2.6 3.1 3.4 2.3 2.7 3.0 2.5 2.8 3.2 F to W 1.8 1.9 2.0 2.2 2.5 2.6 1.9 2.0 2.1 2.2 2.5 2.6 Prioritize Overload 3.0 3.3 3.4 3.5 3.6 3.3 3.5 3.6 3.7 3.8 3.9 Delegate Overload 3.2 3.4 3.5 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity		No I	Depen	dents	De	pende	ents	No	Depe	ndents	De	pende	ents
Wto F 2.5 2.9 3.1 2.6 3.1 3.4 2.3 2.7 3.0 2.5 2.8 3.2 Fto W 1.8 1.9 2.0 2.2 2.5 2.6 1.9 2.0 2.1 2.2 2.5 2.6 Prioritize Overload 3.0 3.3 3.4 3.5 3.6 3.3 3.5 3.6 3.7 3.8 3.9 Delegate Overload 3.2 3.4 3.5 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 Fto W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity 2.1 2.0 1.9 2.4		М	W	D	М	W	D	M	W	D	М	W	D
Prioritize Delegate 3.2 3.4 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 Delegate Overload 3.2 3.4 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.1 2.0 1.9 2.5 2.7 Reduce quality Overload 3.2 3.6 4.0 3.5	Just work harder												
Prioritize Overload 3.0 3.3 3.4 3.4 3.5 3.6 3.3 3.5 3.6 3.7 3.8 3.9 Delegate Overload 3.2 3.4 3.5 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 Reduce quality Overload	W to F	2.5	2.9	3.1	2.6	3.1	3.4	2.3	2.7	3.0	2.5	2.8	3.2
Overload 3.0 3.3 3.4 3.4 3.5 3.6 3.3 3.5 3.6 3.7 3.8 3.9 Delegate Overload 3.2 3.4 3.5 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.3 3.6 2.6 3.0 3.1 2.	F to W	1.8	1.9	2.0	2.2	2.5	2.6	1.9	2.0	2.1	2.2	2.5	2.6
Delegate Overload 3.2 3.4 3.5 3.5 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.	Prioritize												
Overload 3.2 3.4 3.5 3.5 3.6 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 <td>Overload</td> <td>3.0</td> <td>3.3</td> <td>3.4</td> <td>3.4</td> <td>3.5</td> <td>3.6</td> <td>3.3</td> <td>3.5</td> <td>3.6</td> <td>3.7</td> <td>3.8</td> <td>3.9</td>	Overload	3.0	3.3	3.4	3.4	3.5	3.6	3.3	3.5	3.6	3.7	3.8	3.9
Overload 3.2 3.4 3.5 3.5 3.6 3.6 3.5 3.6 3.7 3.9 3.9 3.9 F to W 2.3 2.2 2.0 2.6 2.5 2.3 2.1 2.2 2.1 2.4 2.4 2.4 Try to forget about it F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 <td>Delegate</td> <td></td>	Delegate												
Try to forget about it 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	Overload	3.2	3.4	3.5	3.5	3.6	3.6	3.5	3.6	3.7	3.9	3.9	3.9
F to W 1.9 2.3 2.3 2.3 2.5 2.7 1.9 2.1 2.1 2.3 2.5 2.7 Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	F to W	2.3	2.2	2.0	2.6	2.5	2.3	2.1	2.2	2.1	2.4	2.4	2.4
Find other activity Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	Try to forget about it												
Overload 3.4 3.3 3.1 3.6 3.5 3.6 3.5 3.3 3.9 3.8 3.8 F to W 2.1 2.0 1.9 2.4 2.4 2.4 2.1 2.0 1.9 2.5 2.4 2.5 Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	F to W	1.9	2.3	2.3	2.3	2.5	2.7	1.9	2.1	2.1	2.3	2.5	2.7
Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	Find other activity												
Reduce quality Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	Overload	3.4	3.3	3.1	3.6	3.6	3.5	3.6	3.5	3.3	3.9	3.8	3.8
Overload 3.2 3.6 4.0 3.5 3.8 4.0 3.3 3.9 4.0 3.7 4.0 4.2 W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	F to W	2.1	2.0	1.9	2.4	2.4	2.4	2.1	2.0	1.9	2.5	2.4	2.5
W to F 2.7 3.2 3.4 2.9 3.3 3.6 2.6 3.0 3.1 2.8 3.1 3.4	Reduce quality												
	Overload	3.2	3.6	4.0	3.5	3.8	4.0	3.3	3.9	4.0	3.7	4.0	4.2
F to W 2.2 2.3 2.2 2.3 2.6 2.7 1.9 2.0 2.0 2.3 2.6 2.7	W to F	2.7	3.2	3.4	2.9	3.3	3.6	2.6	3.0	3.1	2.8	3.1	3.4
	F to W	2.2	2.3	2.2	2.3	2.6	2.7	1.9	2.0	2.0	2.3	2.6	2.7
Schedule and plan	Schedule and plan												
Overload 3.2 3.3 3.4 3.5 3.5 3.6 3.4 3.6 3.7 3.8 3.8 3.8	Overload	3.2	3.3	3.4	3.5	3.5	3.6	3.4	3.6	3.7	3.8	3.8	3.8
Have alcoholic drink	Have alcoholic drink												
F to W 2.0 2.0 2.0 2.2 2.4 2.5 2.0 2.0 2.1 2.4 2.5 2.5	F to W	2.0	2.0	2.0	2.2	2.4	2.5	2.0	2.0	2.1	2.4	2.5	2.5

b. Gender by Job Type Analysis

3 (frequency with which strategy used) by 4 (gender by dependent care status) ANOVA

Use of coping strategies is defined as:

1 = less than once a week (i.e. M)

2 =once a week (i.e. W) 3 =several times a week or daily (i.e. D)

Gender and job type is defined as:

1 = Male Managers/Professionals
 2 = Male Other
 3 = Female Managers/Professionals
 4 = Female Other

Results of the Omnibus Test

	R²	Main Effect: Coping strategy	Main Effect: Gender and Job Type	Interaction
Talked with family				
or friends				
Overload	.025	$F = 8.9$, $\alpha = .000$	$F = 199.3, \ \alpha = .000$	$F = 2.1$, $\alpha = .06$
Work to Family	.035	$F = 8.3$, $\alpha = .000$	$F = 293.9, \ \alpha = .000$	$F = 2.2, \ \alpha = .04$
Family to Work	.003	$F = 17.3, \ \alpha = .000$	$F = 12.4$, $\alpha = .000$	$F = 1.6, \ \alpha = .15$
Caregiver Strain	.028	$F = 0.3, \ \alpha = .71$	$F = 79.9$, $\alpha = .000$	$F = 1.3, \ \alpha = .23$
Talked with				
colleagues at work				
Overload	.026	$F = 12.5$, $\alpha = .000$	$F = 203.4$, $\alpha = .000$	$F = 0.8$, $\alpha = .61$
Work to Family	.035	$F = 9.2, \ \alpha = .000$	$F = 305.6$, $\alpha = .000$	$F = 0.5$, $\alpha = .81$
Family to Work	.002	$F = 11.1, \ \alpha = .000$	$F = 10.7$, $\alpha = .000$	$F = 0.9$, $\alpha = .53$
Caregiver Strain	.030	$F = 3.6$, $\alpha = .03$	$F = 70.9$, $\alpha = .000$	$F = 2.5, \ \alpha = .02$
Carrella hala fuara				
Sought help from				
family or friends	026	F 45 - 01	F 176.0 ** 000	F 0.4 m 07
Overload Warleto Familie	.026	$F = 4.5, \ \alpha = .01$	$F = 176.8, \ \alpha = .000$	$F = 0.4, \ \alpha = .87$
Work to Family	.035	$F = 7.4, \ \alpha = .000$	$F = 263.3, \alpha = .000$	$F = 1.3, \ \alpha = .28$
Family to Work	.002	$F = 2.8, \ \alpha = .06$	$F = 7.2, \ \alpha = .000$	$F = 2.6, \ \alpha = .02$
Caregiver Strain	.030	$F = 8.3, \ \alpha = .000$	$F = 57.7$, $\alpha = .000$	$F = 0.8$, $\alpha = .56$

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Job Type	Interaction
Sought help from				
colleagues at work				
Overload	.025	$F = 0.5$, $\alpha = .60$	$F = 148.9$, $\alpha = .000$	$F = 0.2$, $\alpha = .96$
Work to Family	.034	$F = 5.5$, $\alpha = .000$	$F = 203.9$, $\alpha = .000$	$F = 0.3$, $\alpha = .95$
Family to Work	.003	$F = 5.4$, $\alpha = .005$	$F = 6.2$, $\alpha = .000$	$F = 3.9$, $\alpha = .001$
Caregiver Strain	.028	$F = 0.3, \ \alpha = .72$	$F = 45.9$, $\alpha = .000$	$F = 1.8, \ \alpha = .09$
Just work harder				
Overload	.124	$F = 1194.6, \ \alpha = .000$	$F = 142.0, \ \alpha = .000$	$F = 1.2, \ \alpha = .31$
Work to Family	.111	$F = 1023.1$, $\alpha = .000$	$F = 325.9, \ \alpha = .000$	$F = 7.2$, $\alpha = .000$
Family to Work	.017	$F = 178.3, \ \alpha = .000$	$F = 11.5, \ \alpha = .000$	$F = 3.5$, $\alpha = .002$
Caregiver Strain	.045	$F = 71.1$, $\alpha = .000$	$F = 51.8, \ \alpha = .000$	$F = 0.8$, $\alpha = .58$
Prioritize				
Overload	.034	$F = 124.8, \ \alpha = .000$	$F = 109.9, \ \alpha = .000$	$F = 2.1$, $\alpha = .06$
Work to Family	.041	$F = 74.4$, $\alpha = .000$	$F = 112.2, \ \alpha = .000$	$F = 6.1$, $\alpha = .000$
Family to Work	.002	$F = 8.45, \ \alpha = .000$	$F = 5.2$, $\alpha = .000$	$F = 2.5$, $\alpha = .02$
Caregiver Strain	.026	$F = 4.8, \ \alpha = .008$	$F = 35.1$, $\alpha = .000$	$F = 0.6$, $\alpha = .77$
Delegate				
Overload	.030	$F = 53.7$, $\alpha = .000$	$F = 183.4$, $\alpha = .000$	$F = 0.8, \ \alpha = .59$
Work to Family	.039	$F = 73.5$, $\alpha = .000$	$F = 212.1, \ \alpha = .000$	$F = 0.7$, $\alpha = .62$
Family to Work	.003	$F = 16.2, \alpha = .000$	$F = 4.2$, $\alpha = .000$	$F = 4.3, \ \alpha = .000$
Caregiver Strain	.029	$F = 1.2, \ \alpha = .32$	$F = 68.1$, $\alpha = .000$	$F = 2.6$, $\alpha = .02$
Just try to forget about it				
Overload	0.44	$F = 243.2, \ \alpha = .000$	$F = 160.7$, $\alpha = .000$	$F = 0.7$, $\alpha = .68$
Work to Family	.048	$F = 184.9, \ \alpha = .000$	$F = 229.2, \ \alpha = .000$	$F = 1.1, \ \alpha = .44$
Family to Work	.009	$F = 95.7$, $\alpha = .000$	$F = 9.6$, $\alpha = .000$	$F = 0.7$, $\alpha = .66$
Caregiver strain	0.35	$F = 29.8, \ \alpha = .000$	$F = 53.6$, $\alpha = .000$	$F = 0.8, \ \alpha = .59$

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Job Type	Interaction
Find another activity to				
take mind off things				
Overload	.030	$F = 38.2, \ \alpha = .000$	$F = 215.3, \ \alpha = .000$	$F = 8.1$, $\alpha = .000$
Work to Family	.037	$F = 20.8, \ \alpha = .000$	$F = 309.2, \ \alpha = .000$	$F = 3.3, \ \alpha = .05$
Family to Work	.005	$F = 22.6$, $\alpha = .000$	$F = 10.3$, $\alpha = .000$	$F = 6.9$, $\alpha = .000$
Caregiver Strain	.028	$F = 3.3, \ \alpha = .03$	$F = 69.5$, $\alpha = .000$	$F = 1.3, \ \alpha = .03$
Reduce the quality				
of things I do				
Overload	0.81	$F = 750.9, \ \alpha = .000$	$F = 95.5$, $\alpha = .000$	$F = 1.4$, $\alpha = .22$
Work to Family	0.82	$F = 633.5$, $\alpha = .000$	$F = 160.3$, $\alpha = .000$	$F = 0.9$, $\alpha = .48$
Family to Work	.028	$F = 327.7$, $\alpha = .000$	$F = 4.6$, $\alpha = .000$	$F = 1.6, \ \alpha = .14$
Caregiver Strain	.041	$F = 52.8, \ \alpha = .000$	$F = 44.4$, $\alpha = .000$	$F = 1.3$, $\alpha = .24$
Schedule, organize and				
plan my time more carefully				
Overload	.026	$F = 17.1, \ \alpha = .000$	$F = 184.8, \ \alpha = .000$	$F = 1.1, \ \alpha = .42$
Work to Family	.035	$F = 7.2$, $\alpha = .001$	$F = 246.4$, $\alpha = .000$	$F = 2.4$, $\alpha = .02$
Family to Work	.002	$F = 7.6$, $\alpha = .001$	$F = 5.4$, $\alpha = .001$	$F = 1.4$, $\alpha = .19$
Caregiver Strain	.029	$F = 8.3$, $\alpha = .000$	$F = 62.9, \ \alpha = .000$	$F = 1.5, \ \alpha = .19$
Have an alcoholic drink				
Overload	.030	$F = 79.6$, $\alpha = .000$	$F = 136.2, \ \alpha = .000$	$F = 2.3$, $\alpha = .24$
Work to Family	.041	$F = 103.1, \ \alpha = .000$	$F = 174.4, \ \alpha = .000$	$F = 1.9, \ \alpha = .07$
Family to Work	.002	$F = 11.4, \ \alpha = .001$	$F = 4.9$, $\alpha = .002$	$F = 0.2, \ \alpha = .96$
Caregiver Strain	.029	$F = 3.1$, $\alpha = .04$	$F = 50.3$, $\alpha = .000$	$F = 0.5$, $\alpha = .77$
Use prescription, over-the				
-counter or other drugs				
Overload	.041	$F = 132.2, \ \alpha = .000$	$F = 54.9$, $\alpha = .000$	$F = 1.3$, $\alpha = .24$
Work to Family	.045	$F = 112.5, \ \alpha = .000$	$F = 96.4$, $\alpha = .000$	$F = 0.9, \ \alpha = .50$
Family to Work	.003	$F = 20.9$, $\alpha = .000$	$F = 1.6$, $\alpha = .20$	$F = 0.5, \ \alpha = .79$
Caregiver Strain	.037	$F = 36.9, \ \alpha = .000$	$F = 14.1, \ \alpha = .000$	$F = 0.7$, $\alpha = .64$

Details: Significant Main Effects Shown in Table 16

Impact of Use of Coping Strategy on Work–Life Conflict	How O	Δ		
	М	W	D	
Just work harder				
Overload	3.1	3.6	3.8	.7
Prioritize				
Overload	3.3	3.5	3.6	.3
Just try to forget about it				
Overload	3.4	3.6	3.8	.4
W to F	2.8	3.0	3.1	.3
Reduce the quality of things I do				
Overload	3.4	3.8	4.1	.7
W to F	2.7	3.2	3.4	.7
Caregiver strain	1.8	2.0	2.2	.4
Have an alcoholic drink				
W to F	2.8	2.9	3.1	.3
Take prescription, over-the-counter or other drugs				
Overload	3.5	3.9	3.7	**
W to F	2.8	3.3	3.1	**

Details: Significant Interaction Terms in Table 16

	Male				Female							
	Mar	nagers	/Prof.		Other	•	Ma	nager	s/Prof.		Other	
	М	W	D	M	W	D	М	W	D	М	W	D
Just work harder												
W to F	2.7	3.1	3.4	2.5	2.9	3.0	2.6	3.0	3.3	2.3	2.6	2.8
Prioritize												
W to F	2.7	2.9	3.2	2.6	2.8	2.8	2.9	2.9	3.1	2.4	2.6	2.6
Find other activity												
W to F	3.1	3.1	3.0	2.8	2.8	3.1	3.1	3.0	2.9	2.7	2.6	2.5

Impact of Work–Life Conflict on Decision to Have Children

Impact of Work–Life Conflict on Decision to Have Children

b. Gender/Dependent Care Analysis

2 (use of strategy) by 4 (gender and dependent care status) ANOVA

Where use of strategy is defined as:

1 = No

2 = Yes

Gender and dependent care status is defined as:

1 = Male - No Dependent Care

2 = Male - Dependent Care

3 = Female - No Dependent Care 4 = Female - Dependent Care

Results of the Omnibus Test

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction
Had fewer children				
because of work				
Overload	.094	$F = 558.30, \ \alpha = .000$	$F = 66.01$, $\alpha = .000$	$F = 1.81, \ \alpha = .14$
Work to Family	.130	$F = 1061.21, \ \alpha = .000$	$F = 30.34, \ \alpha = .000$	F =0.89, α = .45
Family to Work	.059	$F = 384.04$, $\alpha = .000$	$F = 26.98, \ \alpha = .000$	$F = 0.61$, $\alpha = .62$
Caregiver Strain	.046	$F = 23.56$, $\alpha = .000$	$F = 26.20, \ \alpha = .000$	$F = 1.92, \ \alpha = .12$
Not started family				
because of work demands				
Overload	.051	$F = 110.57$, $\alpha = .000$	$F = 55.01, \ \alpha = .000$	$F = 1.81, \ \alpha = .14$
Work to Family	.073	$F = 384.04$, $\alpha = .000$	$F = 31.45$, $\alpha = .000$	$F = 0.63, \ \alpha = .61$
Family to Work	.047	$F = 0.44$, $\alpha = .56$	$F = 68.19$, $\alpha = .000$	$F = 7.72$, $\alpha = .000$
Caregiver Strain	.061	$F = 30.21, \ \alpha = .000$	$F = 24.01$, $\alpha = .000$	$F = 3.59$, $\alpha = .01$

Impact of Work–Life Conflict on Decision to Have Children

Details: Significant Main Effects

Impact of Use of Coping Strategy on Work–Life Conflict	Use Stra	Δ	
	Yes	No	
Had fewer children because of work			
Overload	3.9	3.4	.5
W to F	3.4	2.6	.8
F to W	2.7	2.2	.5
Caregiver strain	1.9	1.6	.3
Delayed starting a family/decided not to have children			
Overload	3.8	3.2	.6
W to F	3.3	2.6	.7

Details: Significant Interaction Terms

		ı	Male		Female				
	No Dependents		No Dependents Dependents		No Depe	ndents	Dependents		
	N	Υ	N	Υ	N	Υ	N	Υ	
Just work harder									
F to W	1.9	2.0	2.3	2.4	2.1	1.8	2.3	2.2	
Caregiver strain	-	-	1.7	2.2	-	-	1.9	2.3	

Impact of Work–Life Conflict on Decision to Have Children

b. Gender by Job Type Analysis

2 (use of strategy) by 4 (gender and dependent care status) ANOVA

Where use of strategy is defined as:

1 = No

2 = Yes

Gender and job type is defined as:

1 = Male Managers/Professionals 2 = Male Other

3 = Female Managers/Professionals

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Job Type	Interaction
Had fewer children				
because of work				
Overload	.094	$F = 94.9, \ \alpha = .000$	$F = 85.8$, $\alpha = .000$	$F = 7.1$, $\alpha = .000$
Work to Family	.131	$F = 1166.9, \ \alpha = .000$	$F = 95.7$, $\alpha = .000$	$F = 10.5, \ \alpha = .000$
Family to Work	.054	$F = 485.2$, $\alpha = .000$	$F = 12.9$, $\alpha = .000$	$F = 7.0$, $\alpha = .000$
Caregiver Strain	.038	$F = 62.9$, $\alpha = .000$	$F = 18.8, \ \alpha = .000$	$F = 4.4$, $\alpha = .004$
Not started family				
because of work demands				
Overload	.044	$F = 88.5$, $\alpha = .000$	$F = 30.0, \ \alpha = .000$	$F = 1.3$, $\alpha = .26$
Work to Family	.082	$F = 35.5$, $\alpha = .000$	$F = 50.3$, $\alpha = .000$	$F = 2.9$, $\alpha = .03$
Family to Work	.012	$F = 3.18$, $\alpha = .000$	$F = 4.6$, $\alpha = .03$	$F = 7.1$, $\alpha = .000$
Caregiver Strain	.045	$F = 35.3$, $\alpha = .000$	$F = 4.3, \ \alpha = .005$	$F = 1.6, \ \alpha = .18$

Impact of Work–Life Conflict on Decision to Have Children

Details: Significant Main Effects

Impact of Use of Coping Strategy on Work–Life Conflict	Use Stra	Δ	
	Yes	No	
Delayed starting a family/decided not to have children			
Overload	3.8	3.2	.6
W to F	3.3	2.6	.7
Caregiver strain	2.8	2.1	.7

Details: Significant Interaction Terms

		N	Иale			Fen	nale	
	Manager/Prof.		ager/Prof. Other		Manage	r/Prof.	Other	
	N	Υ	N	Υ	N	Υ	N	Υ
Had fewer children								
Overload	3.4	3.9	3.2	3.8	3.7	4.1	3.5	4.1
W to F	2.9	3.6	2.6	3.4	2.8	3.5	2.4	3.3
F to W	2.2	26	2.1	2.7	2.3	2.7	2.2	2.8
Caregiver strain	1.6	1.8	1.6	2.1	1.9	2.1	1.8	2.2

Impact of Off-Shifting Work Hours with Partner on Work–Life Conflict

Impact of Off-Shifting Work Hours with Partner on Work–Life Conflict

a. Gender/Dependent Care Analysis

3 (frequency with which strategy used) by 4 (gender by job type) ANOVA

Use of strategy is defined as:

1 = do not use the strategy

2 = use the strategy

Gender and dependent care status is defined as:

1 = Male - No Dependent Care

2 = Male - Dependent Care

3 = Female - No Dependent Care

4 = Female - Dependent Care

Results of the Omnibus Test

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction
Work Different Hours from Spouse for Child Care or Elder Care				
Overload	.031	$F = 12.6$, $\alpha = .000$	$F = 39.1$, $\alpha = .000$	$F = 0.8$, $\alpha = .48$
Work to Family	.019	$F = 44.8, \ \alpha = .000$	$F = 8.2$, $\alpha = .000$	$F = 0.5$, $\alpha = .64$
Family to Work	.017	$F = 2.5$, $\alpha = .09$	$F = 29.5$, $\alpha = .005$	$F = 2.9$, $\alpha = .008$
Caregiver Strain	.039	$F = 1.4$, $\alpha = .23$	$F = 71.1$, $\alpha = .000$	$F = 0.8$, $\alpha = .51$

Impact of Off-Shifting Work Hours with Partner on Work–Life Conflict

Impact of Off-Shifting Work Hours with Partner on Work–Life Conflict

Gender/Job Type Analysis

3 (frequency with which strategy used) by 4 (gender by job type) ANOVA

Use of strategy is defined as:

1 = do not use the strategy

2 = use the strategy

Gender and job type status is defined as:

- 1 = Male Managers/Professionals
- 2 = Male Other
- 3 = Female Managers/Professionals
- 4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Coping strategy	Main Effect: Gender and Dependent Care	Interaction
Work Different Hours from Spouse for Child Care or Elder Care				
Overload	.032	$F = 14.9$, $\alpha = .000$	$F = 58.2$, $\alpha = .000$	$F = 2.3$, $\alpha = .08$
Work to Family	.037	$F = 57.6$, $\alpha = .000$	$F = 26.9$, $\alpha = .000$	$F = 3.1$, $\alpha = .03$
Family to Work	.007	$F = 11.8, \ \alpha = .001$	$F = 8.5$, $\alpha = .005$	$F = 4.9$, $\alpha = .002$
Caregiver Strain	.028	$F = 0.8$, $\alpha = .93$	$F = 48.8, \ \alpha = .000$	$F = 0.3, \ \alpha = .82$

Appendix G

Impact of Family Coping Strategies on Work–Life Conflict

a. Gender/Dependent Care Analysis

3 (frequency with which strategy used) by 4 (gender by dependent care status) ANOVA

Use of strategy is defined as:

- 1 = disagree that they use the strategy (i.e. M)
- 2 =use the strategy sometimes (i.e. W)
- 3 =agree that they use the strategy (i.e. D)

Gender and dependent care status is defined as:

1 = Male - No Dependent Care 3 = Female - No Dependent Care 2 = Male - Dependent Care 4 = Female - Dependent Care

Results of the Omnibus Test

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent Care	Interaction
Get by on less sleep than I would like				
Overload	.161	$F = 366.2, \ \alpha = .000$	$F = 65.2$, $\alpha = .000$	$F = 1.9$, $\alpha = .07$
Work to Family	.121	$F = 18.1, \ \alpha = .000$	$F = 9.6$, $\alpha = .000$	$F = 1.6, \ \alpha = .16$
Family to Work	.047	$F = 79.1$, $\alpha = .000$	$F = 27.7$, $\alpha = .000$	$F = 1.1, \ \alpha = .35$
Caregiver Strain	.049	$F = 18.8$, $\alpha = .000$	$F = 85.3$, $\alpha = .000$	$F = .06$, $\alpha = .75$
Leave things undone around the house				
Overload	.111	$F = 266.4$, $\alpha = .000$	$F = 29.5$, $\alpha = .000$	$F = 3.2$, $\alpha = .004$
Work to Family	.072	$F = 188.1$, $\alpha = .000$	$F = 4.6$, $\alpha = .000$	$F = 2.5$, $\alpha = .02$
Family to Work	.028	$F = 40.7$, $\alpha = .000$	$F = 17.0, \ \alpha = .000$	$F = 1.0$, $\alpha = .43$
Caregiver Strain	.044	$F = 13.2, \ \alpha = .000$	$F = 46.2, \ \alpha = .000$	$F = 0.6$, $\alpha = .75$

	R²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent Care	Interaction
Get the children to help with household chores				
Overload	.042	$F = 9.5$, $\alpha = .000$	$F = 54.9$, $\alpha = .000$	$F = 4.7$, $\alpha = .000$
Work to Family	.007	$F = 7.1$, $\alpha = .001$	$F = 4.3$, $\alpha = .005$	$F = 1.8, \ \alpha = .06$
Family to Work	.013	$F = 2.1$, $\alpha = .007$	$F = 17.0, \ \alpha = .000$	$F = 0.9$, $\alpha = .50$
Caregiver Strain	.030	$F = 3.4$, $\alpha = .03$	$F = 45.1$, $\alpha = .000$	$F = 1.9$, $\alpha = .06$
Plan family time together				
Overload	.034	$F = 0.9, \alpha = .44$	$F = 62.1$, $\alpha = .000$	$F = 2.2, \ \alpha = .04$
Work to Family	.006	$F = 1.2, \ \alpha = .30$	$F = 6.3$, $\alpha = .000$	$F = 1.5, \ \alpha = .18$
Family to Work	.012	$F = 0.8$, $\alpha = .43$	$F = 21.6$, $\alpha = .000$	$F = 0.5$, $\alpha = .78$
Caregiver Strain	.038	$F = 0.6$, $\alpha = .56$	$F = 63.5$, $\alpha = .000$	$F = 0.6 \alpha = .75$
Hire help to care for elderly relatives				
Overload	.041	$F = 1.0, \alpha = .31$	$F = 37.3$, $\alpha = .000$	$F = 1.0, \ \alpha = .43$
Work to Family	.013	$F = 5.0$, $\alpha = .007$	$F = 4.2, \ \alpha = .005$	$F = 2.2, \ \alpha = .04$
Family to Work	.024	$F = 12.8$, $\alpha = .000$	$F = 8.4$, $\alpha = .000$	$F = 1.2, \ \alpha = .29$
Caregiver Strain	.072	$F = 20.9$, $\alpha = .000$	$F = 34.7$, $\alpha = .000$	$F = 2.5, \ \alpha = .02$
Hire help to care for the children				
Overload	.055	$F = 4.2, \ \alpha = .01$	$F = 40.3$, $\alpha = .000$	$F = 0.7$, $\alpha = .66$
Work to Family	.015	$F = 12.5$, $\alpha = .000$	$F = 1.4, \ \alpha = .25$	$F = 2.1$, $\alpha = .05$
Family to Work	.065	$F = 19.9, \ \alpha = .000$	$F = 16.1$, $\alpha = .000$	$F = 0.6$, $\alpha = .74$
Caregiver Strain	.041	$F = 1.9, \ \alpha = .15$	$F = 31.4$, $\alpha = .000$	$F = 1.5$, $\alpha = .16$
Cover household responsibilities for each other				
Overload	.048	$F = 12.5$, $\alpha = .000$	$F = 38.1$, $\alpha = .000$	$F = 1.2, \ \alpha = .30$
Work to Family	.009	$F = 2.0, \ \alpha = .14$	$F = 7.7$, $\alpha = .000$	$F = 1.5, \ \alpha = .18$
Family to Work	.015	$F = 0.9, \ \alpha = .43$	$F = 11.8, \ \alpha = .000$	$F = 0.9$, $\alpha = .49$
Caregiver Strain	.041	F = 5.3, _ = .005	F = 40.7, _ = .000	F = 0.9, _ = .47

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent Care	Interaction
Leave work problems at work				
Overload	.110	$F = 205.9$, $\alpha = .000$	$F = 70.7$, $\alpha = .000$	$F = 5.4$, $\alpha = .000$
Work to Family	.163	$F = 416.7$, $\alpha = .000$	$F = 10.3$, $\alpha = .000$	$F = 2.6$, $\alpha = .01$
Family to Work	.018	$F = 8.2$, $\alpha = .000$	$F = 28.1$, $\alpha = .000$	$F = 1.9, \ \alpha = .08$
Caregiver Strain	.045	$F = 12.6, \ \alpha = .000$	$F = 92.2, \ \alpha = .000$	$F = 0.8, \ \alpha = .59$
Modify work schedule				
Overload	.061	$F = 49.9, \ \alpha = .000$	$F = 73.9$, $\alpha = .000$	$F = 1.2, \ \alpha = .290$
Work to Family	.040	$F = 53.3$, $\alpha = .000$	$F = 15.7$, $\alpha = .000$	$F = 1.2, \ \alpha = .31$
Family to Work	.026	$F = 23.9$, $\alpha = .000$	$F = 30.2$, $\alpha = .000$	$F = 4.1$, $\alpha = .000$
Caregiver Strain	.043	$F = 2.1, \ \alpha = .13$	$F = 95.6$, $\alpha = .000$	$F = 2.0, \ \alpha = .06$
Rely on extended family for help				
Overload	.038	$F = 5.9$, $\alpha = .003$	$F = 47.1, \ \alpha = .000$	$F = 2.4$, $\alpha = .03$
Work to Family	.012	$F = 7.6$, $\alpha = .001$	$F = 6.4$, $\alpha = .000$	$F = 2.2, \ \alpha = .04$
Family to Work	.023	$F = 19.9, \ \alpha = .000$	$F = 13.5$, $\alpha = .000$	$F = 3.2$, $\alpha = .004$
Caregiver Strain	.044	$F = 0.2$, $\alpha = .79$	$F = 60.4$, $\alpha = .000$	$F = 5.1$, $\alpha = .000$
Rely on friends for help				
Overload	.034	$F = 1.9, \ \alpha = .15$	$F = 51.9, \ \alpha = .000$	$F = 2.7$, $\alpha = .01$
Work to Family	.009	$F = 4.0, \ \alpha = .01$	$F = 10.2, \ \alpha = .000$	$F = 1.7, \ \alpha = .11$
Family to Work	.022	$F = 25.5$, $\alpha = .000$	$F = 19.2, \ \alpha = .000$	$F = 1.5, \ \alpha = .17$
Caregiver Strain	.045	$F = 6.2$, $\alpha = .002$	$F = 66.7$, $\alpha = .000$	$F = 2.7$, $\alpha = .01$
Plan work changes around the family				
Overload	.046	$F = 10.6$, $\alpha = .000$	$F = 68.8, \alpha = .000$	$F = 0.4$, $\alpha = .88$
Work to Family	.008	$F = 3.7$, $\alpha = .02$	$F = 8.5$, $\alpha = .000$	$F = 1.2, \ \alpha = .31$
Family to Work	.026	$F = 27.3$, $\alpha = .000$	$F = 25.5$, $\alpha = .000$	$F = 2.2, \ \alpha = .04$
Caregiver Strain	.042	$F = 0.7$, $\alpha = .50$	$F = 80.4$, $\alpha = .000$	$F = 2.2$, $\alpha = .04$

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent Care	Interaction
Identify one partner as primarily responsible for household tasks				
Overload	.036	$F = 9.4, \ \alpha = .000$	$F = 65.7$, $\alpha = .000$	$F = 0.5$, $\alpha = .82$
Work to Family	.014	$F = 16.6$, $\alpha = .000$	$F = 9.7$, $\alpha = .000$	$F = 1.0, \ \alpha = .45$
Family to Work	.020	$F = 8.2$, $\alpha = .000$	$F = 24.6$, $\alpha = .000$	$F = 3.4$, $\alpha = .002$
Caregiver Strain	.038	$F = 10.2, \ \alpha = .000$	$F = 66.6$, $\alpha = .000$	$F = 2.9$, $\alpha = .008$
Buy more goods and services				
Overload	.066	$F = 54.4$, $\alpha = .000$	$F = 66.5$, $\alpha = .000$	$F = 3.0$, $\alpha = .007$
Work to Family	.033	$F = 64.4, \ \alpha = .000$	$F = 12.0, \ \alpha = .000$	$F = 1.0, \ \alpha = .41$
Family to Work	.022	$F = 22.0, \ \alpha = .000$	$F = 27.7$, $\alpha = .000$	$F = 0.6$, $\alpha = .76$
Caregiver Strain	.044	$F = 3.6$, $\alpha = .02$	$F = 94.6, \ \alpha = .000$	$F = 1.3, \ \alpha = .26$
Encourage children to help each other				
Overload	.036	$F = 0.9$, $\alpha = .41$	$F = 26.9, \ \alpha = .000$	$F = 1.3$, $\alpha = .26$
Work to Family	.005	$F = 1.2, \ \alpha = .31$	$F = 3.2, \ \alpha = .02$	$F = 1.5$, $\alpha = .17$
Family to Work	.013	$F = 0.1$, $\alpha = .95$	$F = 4.3$, $\alpha = .005$	$F = 1.5$, $\alpha = .16$
Caregiver Strain	.030	$F = 1.6, \ \alpha = .27$	$F = 16.8, \ \alpha = .000$	$F = 1.3, \ \alpha = .25$
Try to be flexible				
Overload	.003	$F = 0.0, \ \alpha = .99$	$F = 27.2, \ \alpha = .000$	$F = 2.2, \ \alpha = .04$
Work to Family	.010	$F = 2.9, \ \alpha = .05$	$F = 10.4$, $\alpha = .000$	$F = 1.6, \ \alpha = .15$
Family to Work	.014	$F = 0.3$, $\alpha = .49$	$F = 12.4$, $\alpha = .000$	$F = 0.9, \ \alpha = .49$
Caregiver Strain	.041	$F = 0.6$, $\alpha = .77$	$F = 25.8$, $\alpha = .000$	$F = 0.6$, $\alpha = .77$
Cut down on outside activities				
Overload	.092	$F = 141.2, \ \alpha = .000$	$F = 60.9, \ \alpha = .000$	$F = 2.3, \ \alpha = .03$
Work to Family	.069	$F = 146.7$, $\alpha = .000$	$F = 9.8$, $\alpha = .000$	$F = 2.4$, $\alpha = .02$
Family to Work	.040	$F = 45.1$, $\alpha = .000$	$F = 29.9$, $\alpha = .000$	$F = 2.0, \ \alpha = .06$
Caregiver Strain	.044	$F = 7.7$, $\alpha = .001$	$F = 82.1$, $\alpha = .000$	$F = 1.0, \ \alpha = .42$

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Dependent Care	Interaction
Limit job involvement to allow time for family				
Overload	.039	$F = 16.2, \ \alpha = .000$	$F = 66.8$, $\alpha = .000$	$F = 1.6, \ \alpha = .13,$
Work to Family	.017	$F = 23.0$, $\alpha = .000$	$F = 7.3$, $\alpha = .000$	$F = 0.8$, $\alpha = .61$
Family to Work	.036	$F = 50.7$, $\alpha = .000$	$F = 22.2$, $\alpha = .000$	$F = 1.1, \ \alpha = .34$
Caregiver Strain	.040	$F = 0.7$, $\alpha = .49$	$F = 89.4, \ \alpha = .000$	$F = 1.0, \ \alpha = .45$

Details: Significant Main Effects in Table 23

Impact of Use of Coping Strategy on Work–Life Conflict	How Often Use Strategy				
	М	W	D	Δ	
Get by on less sleep Overload Work to family Family to work Caregiver strain	3.3 2.4 2.1 1.8	3.5 2.8 2.3 1.9	4.1 3.3 2.5 2.1	.8 1.0 .5	
Leave things undone around the house Work to family Caregiver strain	2.5 1.8	2.4 1.7	3.1 2.0	** **	
Hire help to care for elderly dependents Caregiver strain	2.1	2.2	2.6	.5	
Hire help to care for children Overload Family to work	3.8 2.4	3.6 2.7	3.9 2.9	** .5	
Covering household responsibilities for each other Overload Caregiver strain	4.0 2.1	3.7 1.9	3.6 1.8	4 3	

Impact of Use of Coping Strategy on Work–Life Conflict	How Often Use Strategy					
	М	W	D	Δ		
Modify work schedule Overload Work to family	3.9 3.1	3.6 2.8	3.6 2.8	3 3		
Cut down on outside activities Overload Work to family Family to work Caregiver strain	3.4 2.6 2.2 1.8	3.5 2.7 2.3 1.9	3.9 3.2 2.6 2.1	.5 .6 .4 .3		

Details: Significant Interaction Terms in Table 23

	Male				Female							
	No I	Depend	ents	Dependents		No Dependents		ents	Dependents			
	М	W	D	М	W	D	М	W	D	М	W	D
Leave things undone Overload	2.9	3.1	3.7	3.1	3.3	3.7	3.0	3.2	3.8	3.4	3.4	3.9
Get children to help Overload	_	_	_	3.6	3.6	3.6	_	_	_	4.0	4.0	3.7
Leave work problems at work Overload Work to family	3.9 3.6	3.4 3.0	3.1 2.4	4.0 3.8	3.6 3.6	3.2 2.6	4.0 3.3	3.7 2.8	3.5 2.5	4.2 3.5	3.9 3.0	3.7 2.7
Rely on extended family Caregiver strain	_	_	_	1.7	1.8	1.9	_	_	_	2.3	2.0	1.9
Rely on friends for help Caregiver strain	-	-	-	1.8	1.9	2.0	-	-	-	2.1	2.0	1.8
Buy goods and services Overload	3.2	3.5	3.6	3.3	3.4	3.7	3.5	3.6	3.8	3.7	3.8	4.0

Impact of Family Coping Strategies on Work–Life Conflict

b. Gender/Job Type Analysis

3 (frequency with which strategy used) by 4 (gender by job type) ANOVA

Use of strategy is defined as:

- 1 =disagree that they use the strategy
- 2 = use strategy sometimes
- 3 =agree that they use the strategy

Gender and job type status is defined as:

1 = Male Managers/Professionals

3 = Female Managers/Professionals

2 = Male Other

4 = Female Other

Results of the Omnibus Test

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Get by on less sleep than I would like				
Overload	.147	$F = 495.6$, $\alpha = .000$	$F = 60.3$, $\alpha = .000$	$F = 1.5, \ \alpha = .18$
Work to Family	.134	$F = 451.1$, $\alpha = .000$	$F = 47.5$, $\alpha = .000$	$F = 2.2$, $\alpha = .04$
Family to Work	.036	$F = 123.4$, $\alpha = .000$	$F = 3.1$, $\alpha = .024$	$F = 2.7$, $\alpha = .01$
Caregiver Strain	.037	$F = 26.9$, $\alpha = .000$	$F = 56.3$, $\alpha = .000$	$F = 0.9, \ \alpha = .47$
Leave things undone around the house				
Overload	.110	$F = 293.5$, $\alpha = .000$	$F = 21.3$, $\alpha = .000$	$F = 2.5$, $\alpha = .02$
Work to Family	.189	$F = 230.5$, $\alpha = .000$	$F = 19.8$, $\alpha = .000$	$F = 3.4$, $\alpha = .003$
Family to Work	.018	$F = 53.9$, $\alpha = .000$	$F = 2.1$, $\alpha = .09$	$F = 1.0$, $\alpha = .44$
Caregiver Strain	.032	$F = 16.1, \ \alpha = .000$	$F = 27.8$, $\alpha = .000$	$F = 0.7$, $\alpha = .64$

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Get the children to help with household chores				
Overload	.043	$F = 1.8, \ \alpha = .17$	$F = 58.4$, $\alpha = .000$	$F = 1.7$, $\alpha = .11$
Work to Family	.028	$F = 5.3$, $\alpha = .005$	$F = 30.0, \ \alpha = .000$	$F = 0.8$, $\alpha = .57$
Family to Work	.012	$F = 3.1$, $\alpha = .05$	$F = 12.9$, $\alpha = .000$	$F = 1.7$, $\alpha = .12$
Caregiver Strain	.024	$F = 1.2, \ \alpha = .31$	$F = 34.1, \ \alpha = .000$	$F = 1.3, \ \alpha = .25$
Plan family time together				
Overload	.034	$F = 2.2$, $\alpha = .11$	$F = 59.9$, $\alpha = .000$	$F = 0.8$, $\alpha = .58$
Work to Family	.025	$F = 3.3$, $\alpha = .04$	$F = 34.3, \ \alpha = .000$	$F = 0.9, \ \alpha = .51$
Family to Work	.007	$F = 0.6$, $\alpha = .55$	$F = 8.9$, $\alpha = .000$	$F = 1.8, \ \alpha = .09$
Caregiver Strain	.030	$F = 0.8, \ \alpha = .45$	$F = 50.9$, $\alpha = .000$	$F = 0.9, \ \alpha = .53$
Hire help to care for elderly relatives				
Overload	.043	$F = 2.7$, $\alpha = .06$	$F = 38.8$, $\alpha = .000$	$F = 1.7$, $\alpha = .000$
Work to Family	.021	$F = 10.7$, $\alpha = .000$	$F = 25.2$, $\alpha = .000$	$F = 2.1$, $\alpha = .05$
Family to Work	.031	$F = 22.6$, $\alpha = .000$	$F = 4.2, \ \alpha = .005$	$F = 2.0, \ \alpha = .06$
Caregiver Strain	.074	$F = 39.4, \ \alpha = .000$	$F = 38.8, \alpha = .000$	$F = 3.1$, $\alpha = .007$
Hire help to care for children				
Overload	.058	$F = 14.4, \ \alpha = .01$	$F = 43.0, \ \alpha = .000$	$F = 0.8$, $\alpha = .60$
Work to Family	.027	$F = 19.5$, $\alpha = .000$	$F = 14.2, \ \alpha = .000$	$F = 0.8$, $\alpha = .80$
Family to Work	.056	$F = 47.4$, $\alpha = .000$	$F = 14.3$, $\alpha = .000$	$F = 0.6$, $\alpha = .56$
Caregiver Strain	.033	$F = 11.6, \ \alpha = .01$	$F = 22.3$, $\alpha = .000$	$F = 2.1$, $\alpha = .09$

	R²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Cover household responsibilities for each other				
Overload	.042	$F = 18.8, \ \alpha = .000$	$F = 44.6$, $\alpha = .000$	$F = 1.1, \ \alpha = .32$
Work to Family	.033	$F = 11.1, \ \alpha = .000$	$F = 43.3$, $\alpha = .000$	$F = 1.8, \ \alpha = .20$
Family to Work	.006	$F = 47.4$, $\alpha = .09$	$F = 3.3$, $\alpha = .02$	$F = 1.9, \ \alpha = .06$
Caregiver Strain	.029	$F = 4.3, \ \alpha = .02$	$F = 29.8, \ \alpha = .000$	$F = 1.7, \alpha = .17$
Leave work problems at work				
Overload	.110	$F = 18.8, \ \alpha = .000$	$F = 58.8$, $\alpha = .000$	$F = 2.8, \ \alpha = .01$
Work to Family	.171	$F = 550.7$, $\alpha = .000$	$F = 31.2, \ \alpha = .000$	$F = 2.8, \ \alpha = .05$
Family to Work	.007	$F = 2.3$, $\alpha = .000$	$F = 4.3$, $\alpha = .005$	$F = 2.6, \ \alpha = .06$
Caregiver Strain	.033	$F = 3.8, \ \alpha = .000$	$F = 62.1$, $\alpha = .000$	$F = 1.1, \ \alpha = .38$
Modify work schedule				
Overload	.053	$F = 282.5, \ \alpha = .000$	$F = 69.0, \ \alpha = .000$	$F = 2.7, \ \alpha = .01$
Work to Family	.055	$F = 550.7$, $\alpha = .000$	$F = 56.0$, $\alpha = .000$	$F = 4.4$, $\alpha = .000$
Family to Work	.015	$F = 15.2, \ \alpha = .000$	$F = 4.3, \ \alpha = .005$	$F = 2.1$, $\alpha = .000$
Caregiver Strain	.030	$F = 19.2, \ \alpha = .11$	$F = 65.8, \alpha = .000$	$F = 2.0, \ \alpha = .01$
Rely on extended family for help				
Overload	.041	$F = 12.8, \ \alpha = .000$	$F = 53.4$, $\alpha = .000$	$F = 2.5, \ \alpha = .01$
Work to Family	.033	$F = 13.7$, $\alpha = .000$	$F = 47.4, \ \alpha = .000$	$F = 1.4, \ \alpha = .27$
Family to Work	.014	$F = 32.8, \ \alpha = .000$	$F = 3.4$, $\alpha = .01$	$F = 2.4$, $\alpha = .02$
Caregiver Strain	.031	$F = 1.9, \ \alpha = .11$	$F = 39.3, \ \alpha = .000$	$F = 3.6$, $\alpha = .001$

	R ²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Rely on friends for help				
Overload	.032	$F = 3.9, \ \alpha = .002$	$F = 50.9, \ \alpha = .000$	$F = 1.0, \ \alpha = .45$
Work to Family	.030	$F = 5.2$, $\alpha = .006$	$F = 51.2, \ \alpha = .000$	$F = 0.7$, $\alpha = .68$
Family to Work	.012	$F = 30.5$, $\alpha = .000$	$F = 3.6$, $\alpha = .01$	$F = 1.6, \ \alpha = .15$
Caregiver Strain	.030	$F = 6.8$, $\alpha = .001$	$F = 41.1, \ \alpha = .000$	$F = 1.9, \ \alpha = .07$
Plan work changes around the family				
Overload	.039	$F = 11.4$, $\alpha = .000$	$F = 70.8$, $\alpha = .000$	$F = 0.4, \ \alpha = .90$
Work to Family	.031	$F = 8.4$, $\alpha = .000$	$F = 57.0, \ \alpha = .000$	$F = 1.1, \ \alpha = .36$
Family to Work	.017	$F = 34.9, \ \alpha = .000$	$F = 8.7$, $\alpha = .000$	$F = 0.6, \ \alpha = .72$
Caregiver Strain	.028	$F = 0.3$, $\alpha = .72$	$F = 53.7$, $\alpha = .000$	$F = 1.4, \ \alpha = .22$
Identify one partner as primarily responsible for household tasks				
Overload	.040	$F = 10.1$, $\alpha = .000$	$F = 68.2$, $\alpha = .000$	$F = 0.9, \ \alpha = .51$
Work to Family	.041	$F = 22.5$, $\alpha = .000$	$F = 52.0, \ \alpha = .000$	$F = 2.0, \ \alpha = .06$
Family to Work	.010	$F = 14.4$, $\alpha = .000$	$F = 5.1$, $\alpha = .001$	$F = 2.9, \ \alpha = .009$
Caregiver Strain	.031	$F = 4.3, \ \alpha = .01$	$F = 46.0, \ \alpha = .000$	$F = 1.3, \ \alpha = .25$
Buy more goods and services				
Overload	.056	$F = 83.2, \alpha = .000$	$F = 63.7$, $\alpha = .000$	$F = 1.9, \ \alpha = .78$
Work to Family	.050	$F = 83.2, \alpha = .000$	$F = 53.5$, $\alpha = .000$	$F = 0.9, \ \alpha = .51$
Family to Work	.011	$F = 34.1$, $\alpha = .000$	$F = 3.4$, $\alpha = .01$	$F = 0.6$, $\alpha = .77$
Caregiver Strain	.031	$F = 8.3$, $\alpha = .000$	$F = 64.3$, $\alpha = .000$	$F = 1.7$, $\alpha = .14$
Encourage children to help each other				
Overload	.042	$F = 0.2, \ \alpha = .97$	$F = 30.7$, $\alpha = .000$	$F = 0.5, \ \alpha = .82$
Work to Family	.026	$F = 0.3, \ \alpha = .72$	$F = 17.8, \ \alpha = .000$	$F = 0.3, \ \alpha = .93$
Family to Work	.011	$F = 0.6$, $\alpha = .55$	$F = 3.6, \ \alpha = .01$	$F = 1.1, \ \alpha = .38$
Caregiver Strain	.022	$F = 0.2$, $\alpha = .86$	$F = 13.1$, $\alpha = .000$	$F = 0.7$, $\alpha = .67$

	R²	Main Effect: Coping Strategy	Main Effect: Gender and Job Type	Interaction
Try to be flexible				
Overload	.032	$F = 1.2, \ \alpha = .29$	$F = 18.8, \ \alpha = .000$	$F = 0.7$, $\alpha = .68$
Work to Family	.031	$F = 1.9, \ \alpha = .000$	$F = 18.9$, $\alpha = .000$	$F = 0.8, \ \alpha = .56$
Family to Work	.003	$F = 0.1$, $\alpha = .88$	$F = 0.6$, $\alpha = .61$	$F = 0.6$, $\alpha = .71$
Caregiver Strain	.027	$F = 1.6$, $\alpha = .19$	$F = 13.4$, $\alpha = .000$	$F = 1.2, \ \alpha = .30$
Cut down on outside activities				
Overload	.081	$F = 186.3$, $\alpha = .000$	$F = 53.0$, $\alpha = .000$	$F = 1.0, \ \alpha = .47$
Work to Family	.075	$F = 179.8, \ \alpha = .000$	$F = 42.9$, $\alpha = .000$	$F = 3.2$, $\alpha = .002$
Family to Work	.019	$F = 58.1$, $\alpha = .000$	$F = 3.6$, $\alpha = .01$	$F = 0.7$, $\alpha = .51$
Caregiver Strain	.031	$F = 11.4$, $\alpha = .000$	$F = 50.2$, $\alpha = .000$	$F = 1.9$, $\alpha = .07$
Limit job involvement to allow time for family				
Overload	.041	$F = 22.6$, $\alpha = .000$	$F = 73.0$, $\alpha = .000$	$F = 2.1$, $\alpha = .05$
Work to Family	.041	$F = 35.3$, $\alpha = .000$	$F = 55.9$, $\alpha = .000$	$F = 2.8, \ \alpha = .009$
Family to Work	.029	$F = 82.1$, $\alpha = .000$	$F = 4.3$, $\alpha = .005$	$F = 0.9$, $\alpha = .47$
Caregiver Strain	.029	$F = 1.0, \ \alpha = .35$	$F = 66.9$, $\alpha = .000$	$F = 1.6, \ \alpha = .15$

Details: Significant Main Effects in Table 24

Impact of Coping Strategy on Work-Life Conflict	How Often Use Strategy				
	М	W	D	Δ	
Get by on less sleep than I would like Overload Work to Family	3.2 2.4	3.5 2.8	4.0 3.3	.8 .9	
Leave things undone around the house Overload	3.1	3.3	3.8	.7	
Hire help to care for children Overload Family to Work	3.8 2.5	3.6 2.7	3.9 2.9	*** .4	
Cover household responsibilities for each other Overload	4.0	3.7	3.7	3	
Leave work-related problems at work Work to Family	3.6	3.0	2.6	-1.0	

Impact of Coping Strategy on Work-Life Conflict	How Often Use Strategy				
	М	W	D	Δ	
Rely on extended family for help Work to Family Family to Work	3.0 2.3	2.9 2.5	3.1 2.6	*** .3	
Buy more goods and services Overload Work to Family	3.6 2.7	3.6 2.9	3.9 3.2	.3 .5	
Cut down on outside activities Overload	3.4	3.4	3.9	.5	
Limit job involvement to allow more time for family Overload	3.8	3.5	3.8	***	

Details: Significant Interaction Terms in Table 24

			М	ale					Fen	nale		
	Mar	agers/l	Prof.		Other		Mar	nagers/l	Prof.		Other	
	М	W	D	М	W	D	М	W	D	М	W	D
Leave things undone around house												
Work to Family	2.4	2.8	3.3	2.2	2.5	3.1	2.7	2.4	3.2	2.4	2.3	2.7
Hire help for elder care Overload Caregiver strain	3.7 1.8	3.7 1.9	3.7 2.2	3.5 1.9	3.5 2.1	3.8 2.4	4.0 2.4	4.0 2.1	4.0 2.5	3.7 2.4	3.7 2.3	4.0 2.7
Leave work problems at work Overload	4.0	3.6	3.3	3.9	3.5	3.2	4.1	3.8	3.7	4.1	3.8	3.7
Modify work schedule Overload Work to Family	3.8 3.3	3.5 2.9	3.4 2.9	3.4 3.0	3.4 2.8	3.4 2.8	4.0 3.3	3.6 2.9	3.8 2.9	3.9 2.9	3.6 2.5	3.7 2.8
Rely on extended family Overload	3.6	3.6	3.8	3.4	3.4	3.6	4.0	3.6	3.8	3.9	3.6	3.8
Cut down on outside activities Work to Family	2.8	2.9	3.4	2.5	2.7	3.2	2.9	2.7	3.2	2.4	2.6	2.9
Limit job involvement Work to Family	3.3	2.9	3.2	3.1	2.8	3.0	3.4	3.0	3.0	2.9	2.7	2.9

Appendix H:

Summary of Key Findings with Respect to Role Overload

Moderators of Role Overload	Impact on Employees	Between-Group Differences
Things Employer Can Do to Help Reduce Employee Role Overload		
Perceived Flexibility (Total Measure)	Strong: For all employees, the higher the perceived flexibility, the lower the role overload	Less effective coping strategy for females with dependent care and female managers than for other employees
Arrange work schedule to meet personal/family commitments	Strong: For all employees, the more opportunity the employee has to arrange their work schedule, the lower the role overload	Less effective coping strategy for males and females in management and professional positions than for other employees
Interrupt work day for personal/ family reasons and then return to work	Strong: For all employees, the more opportunity the employee has to interrupt their work day, the lower the role overload	Less effective coping strategy for female managers and professionals More effective coping strategy for females in other positions
Take time off to attend course or conference	Strong: For all employees, the more ability the employee has to attend learning events during work hours, the lower the role overload	Less effective coping strategy for female managers and professionals and women with dependent care
Manager who has unrealistic expectations about how much work can be done	Strong: For all employees, the more unrealistic the immediate manager's expectations around work, the higher the role overload	Men and women with dependent care who have a manager who frequently engages in this behaviour are less able to cope with role overload
Take holidays when want to	Moderate: For all employees, the easier it is for the employee to take holidays when they want, the lower the role overload	Less effective coping strategy for female managers and professionals and women with dependent care More effective coping strategy for males, regardless of their job type and females without dependents

Moderators of Role Overload	Impact on Employees	Between-Group Differences
Take paid day off to care for: • sick child • elderly dependent	Moderate: For all employees, the easier it is for the employee to take paid time off to care for sick children or elderly dependents, the lower the role overload	Less effective coping strategy for female managers and professionals More effective coping strategy for males, regardless of their job type and females in other positions
Be home to have meals with family	Moderate: For all employees, the easier it is for the employee to be home in time for dinner, the lower the role overload	Benefits all employees equally
Be able to vary hours of work	Moderate: For all employees, the easier it is for the employee to vary their work hours, the lower the role overload	Benefits all employees equally
Working for a supportive manager	Moderate: For all employees, the more supportive their immediate manager's behaviour, the lower the role overload	Associated with a greater reduction in the role overload for those in other positions than for managers and professionals
Working for a non-supportive manager	Moderate: For all employees, the more non- supportive their immediate manager's behaviour, the higher the role overload	Equally problematic for all employees
Manager: • makes expectations clear • listens to employees • is available for questions • is effective at planning work	Moderate: For all employees, the more frequently their immediate manager engages in these behaviours, the lower the role overload	Men and women in other positions of the organization who have managers who frequently engage in these behaviours are more able to cope with role overload than other employees
Manager gives recognition for a good job	Moderate: For all employees, the more frequently their immediate manager engages in this behaviour, the lower the role overload	Benefits all employees equally
Manager puts in long hours and expects employee to do same	Moderate: For all employees, the more frequently their immediate manager engages in this behaviour, the higher the role overload	Men and women in other positions of the organization and men and women who have dependent care responsibilities who have managers who engage in this behaviour report higher role overload

Moderators of Role Overload	Impact on Employees	Between-Group Differences
Manager: • makes employee feel guilty about personal time off • focuses on hours not output	Moderate: For all employees, the more the manager focuses on hours of work not output and makes employees feel guilty about time off, the higher the role overload	Female managers and professionals who have managers who frequently engage in these behaviours are less able to cope with role overload
Benefit: child care referral	Moderate: This benefit helps employees with dependent care cope with role overload	Benefits men and women equally
Things Employee Can Do to Cope with Role Overload		
Reactive coping: Work harder	Strong: There is a strong positive association between coping by working harder and role overload	All groups have problems with this strategy
Reactive coping: Reduce quality of things do	Strong: There is a strong positive association between coping by reducing quality and role overload	This is a more effective coping strategy for employees with dependent care responsibilities than for other employees (likely reduce quality at home)
Have fewer children	Strong: The higher the role overload, the more likely the employee is to say they coped with work demands by limiting their family size	This is a more effective coping strategy for female managers and professionals than for other employees
Avoidance: Try to forget about it	Moderate: There is a moderate positive association between coping by trying to forget and role overload when dependent care is taken into account	Equally problematic for employees with and without dependent care
Things Families Can Do to Help Reduce Employee Role Overload		
Sacrifice personal needs: Get by on less sleep	Strong: The higher the role overload the more likely the employee is to cope by cutting down on sleep	All groups have problems with this strategy

Moderators of Role Overload	Impact on Employees	Between-Group Differences
Sacrifice personal needs: Leave things undone around the house	Strong: The higher the role overload, the more likely the employee is to say they coped by leaving things undone around house	This is a more effective coping strategy for employees with dependent care responsibilities than for other employees
Put family first: Leave work problems at work	Strong: The more often the employee leaves work problems at work, the lower the role overload	This is a more effective coping strategy for men than women, regardless of job type or dependent care status
Sacrifice personal needs: Cut down on outside activities	Moderate: The higher the role overload, the more likely the employee is to cope by cutting down on personal activities	All groups have problems with this strategy
Procure support from outside: Buy more goods and services	Moderate: The higher the role overload, the more likely the employees is to cope by buying goods and services	This is a more effective coping strategy for women than men
Procure support from outside: hire help to care for children	Moderate: This strategy is associated with lower levels of role overload when used moderately but higher levels of role overload when used daily	This relationship is not dependent on gender or job type or dependent care status
Put family first: Modify work schedule	Moderate: The more often the employee modifies their work schedule, the lower the role overload	This strategy has no impact on men in other positions. This strategy is very effective for men in managerial and professional positions to cope with role overload. It is less effective for women, regardless of job type

Strong: Explains 10% or more of the variance in role overload

Moderate: Explains more than 5% of the variance in role overload but less than 10%

Other organizational actions/or strategies that were substantively associated with *increased* levels of role overload (R² of approximately 5%) included:

- Guerilla tele-work when dependent care status taken into account: use associated with higher levels of role regardless of dependent care status
- Use of EAP when job type taken into account: men and women in other positions are significantly more likely to use this benefit when their levels of role overload are high

Other organizational actions/or strategies that were substantively associated with *decreased* levels of role overload (R² of approximately 5%) included:

- Part-time work arrangements/reduced work week with prorated benefits:
- Benefited men with dependent care responsibilities more than women with dependent care: no impact on role overload for employees with no dependent care
- Associated with lower levels of role overload for men and women in others positions in the organization: no impact on role overload of managers and professionals
- Tele-work when dependent care status taken into account: use associated with lower levels of role overload regardless of dependent care status
- Having a manager who provides constructive feedback, shares information with employee, supports employee's
 decisions, asks for input before making decisions that affect employee's work when dependent care status taken into
 account: the more the employee's immediate manager engages in each of these management behaviours, the lower
 the role overload regardless of dependent care status

Other individual coping strategies that were substantively associated with increased levels of role overload (R² of approximately 5%) included:

- Active coping techniques such as prioritize and delegate (when dependent care status taken into account):
 - Prioritizing is a more effective coping strategy for men and women with dependent care than those without
 - Delegating is a more effective coping strategy for men and women with dependent care than those without. It is particularly effective for women with dependent care
- Employees who use prescription medicine about once a week experience higher levels of role overload.
 Daily use of prescription medicine, on the other hand, is associated with an increased ability to cope with role overload (perhaps because they actively reduce work when medication use reaches this level).
- Not starting or delaying starting a family (true for all employees)

Finally, it should be noted that increased use of one family coping strategy, cover family responsibilities for each other, is associated with lower levels of role overload when dependent care is taken into account.

Appendix I:

Summary of Key Findings with Respect to Work-to-Family Interference

Moderators of Interference	Impact on Employees	Between-Group Differences
Things Employer Can Do to Help Reduce Employee Work-to-Family Interference		
Perceived flexibility (Total measure)	Strong: For all employees, the higher the perceived flexibility, the lower the work-to-family interference	Very effective for all employes
Arrange work schedule to meet personal/family commitments	Strong: For all employees, the more opportunity the employee has to arrange their work schedule, the lower the work-to-family intereference	Less effective coping strategy for males and females in management and professional positions than employees in other positions
Be home to have meals with family	Strong: For all employees, the easier it is for the employee to be home in time for dinner, the lower the work-to-family interference	Benefits all employees equally
Interrupt work day for personal/ family reasons and then return to work	Strong: For all employees, the more opportunity the employee has to interrupt their work day, the lower the work-to-family interference	Less effective coping strategy for female managers and professionals More effective coping strategy for females in other positions and male managers and professionals
Take time off to attend course or conference	Strong: For all employees, the more ability the employee has to attend learning events during work hours, the lower the work-to-family interference	Less effective coping strategy for female managers and professionals and women with dependent care
Take paid day off to care for: • sick child • elderly dependent	Strong: For all employees, the easier it is for the employee to take paid time off to care for sick children or elderly dependents, the lower the work-to-family interference	Less effective coping strategy for female managers and professionals More effective coping strategy for employees in other positions

l : 1

Moderators of Interference	Impact on Employees	Between-Group Differences
Working for a non-supportive manager	Strong: For all employees, the more non- supportive their immediate manager's behaviour, the higher the work-to-family interference	Equally problematic for all employees
Manager who: has unrealistic expectations about work to be done puts in long hours and expects employees to do same	Strong: For all employees, the more unrealistic the immediate manager's expectations around work and the more they expect their employees to work long hours because they do, the higher the work-to-family interference	Employees with dependent care and in other positions in the organization who have a manager who frequently engages in these behaviours are less able to cope with work-to-family interference
Performing shift work	Moderate: Work shifts is associated with higher work-to-family interference for all employees	This work arrangement is more problematic for women in other positions
Take holidays when want to	Moderate: For all employees, the easier it is for the employee to take holidays when they want, the lower the work-to-family interference	Less effective coping strategy for female managers and professionals and women with dependent care More effective coping strategy for employees without dependents and employees in other positions in the organization
Be able to vary hours of work	Moderate: For all employees, the easier it is for the employee to vary their work hours, the lower the work-to-family interference	More effective coping strategy for men and women in other positions in the organization
Working for a supportive manager	Moderate: For all employees, the more supportive their immediate manager's behaviour, the lower the work-to-family interference	Associated with a greater reduction in work-to-family interference for those in other positions in the organization than for managers and professionals
Manager: • makes expectations clear • listens to employees • is available for questions • asks for input into decisions • gives recognition • supports employee's decisions	Moderate: For all employees, the more frequently their immediate manager engages in these behaviours, the lower the work-to-family interference	Men and women in other positions of the organization who have managers who frequently engage in these behaviours are more able to cope with work-to-family interference than counterparts in managerial and professional positions

: 2

Moderators of Interference	Impact on Employees	Between-Group Differences
Manager is effective at planning work to be done	Moderate: For all employees, the more frequently their immediate manager engages in this behaviour, the lower the work-to-family interference	Women who have managers who are effective at planning work to be done are more able to cope with work-to-family interference than male counterparts, regardless of job type
Manager: • gives constructive feedback • shares information	Moderate: For all employees, the more frequently their immediate manager engages in this behaviour, the lower the work-to-family interference	Having a manager who frequently engages in these behaviours provides less reduction in work-to-family interference for female managers and professionals than other employees
Manager: • makes employee feel guilty about personal time off • puts employee down in public • only talks to employees when they make a mistake	Moderate: For all employees, the more the manager engages in these behaviours, the higher the work-to-family interference	Employees in other positions (regardless of gender) and women who report to managers who frequently engage in these behaviours are less able to cope with work-to-family interference
Manager who focuses on hours not output	Moderate: For all employees, the more the manager focuses on hours of work not output, the higher the work-to-family interference	Women, regardless of job type or dependent care status who have a manager who focuses on hours not output are less able to cope with work-to-family interference than male counterparts
Benefit: child care referral	Moderate: This benefit helps employees with dependent care cope with work-to-family interference	Benefits men and women equally
Things Employee Can Do to Cope with Work-to-Family Interference		
Have fewer children	Strong: The higher the work-to- family interference, the more likely the employee is to say they coped with work demands by limiting family size	This is a more effective coping strategy for male and female managers and professionals than for employees in other positions
Reactive coping: Work harder	Strong: There is a strong positive association between coping by working harder and work-to-family interference	This is a less effective coping strategy for men and women in managerial and professional positions and men with dependent care

: 3

Moderators of Interference	Impact on Employees	Between-Group Differences
Reactive coping: Reduce quality of things they do	Moderate: There is a moderate positive association between coping by reducing quality and work-to-family interference	This is a more effective coping strategy for employees with dependent care responsibilities than for other employees (likely reduce quality at home)
Delayed or decided not to have a family	Moderate: Employees with high work-to-family interference are more likely to say that they have coped by deciding either to not have children or to delay having children	Use of this strategy does not depend on gender, job type or dependent care status
Things Families Can Do to Help Reduce Employee Work-to-Family Interference		
Sacrifice personal needs: Get by on less sleep	Strong: The higher the work-to- family interference, the more likely the employee is to cope by cutting down on sleep	All groups have problems with this strategy
Sacrifice personal needs: Leave things undone around the house	Strong: For men, there is a strong positive association between the use of this strategy and work-to-family interference For women, the relationship between the use of this strategy and work-to-family interference looks like an "inverted U"— moderate use of the strategy is associated with an increased ability to cope while high use is associated with higher interference	This is an effective coping strategy for women, especially those in managerial and professional positions, if used moderately often (i.e. about once a week) This is not an effective coping strategy for men
Put family first: Leave work problems at work	Strong: The more often the employee leaves work problems at work, the lower the work-to-family interference	This is a more effective coping strategy for men than women, regardless of dependent care status

: 4

Moderators of Interference	Impact on Employees	Between-Group Differences
Sacrifice personal needs: Cut down on outside activities	Moderate: The relationship between the use of this strategy and work-to-family interference looks like an "inverted U"— moderate use of the strategy is associated with an increased ability to cope while high use is associated with higher interference	Managers and professionals who use this strategy about once a week experience the greatest reductions in work-to-family interference

Strong: Explains 10% or more of the variance in work-to-family interference

Moderate: Explains more than 5% of the variance in work-to-family interference but less than 10%

Other organizational actions/or strategies that were substantively associated with *increased* levels of work-to-family interference (R² of approximately 5%) included:

Guerilla tele-work and formal tele-work arrangements in the job type analysis: use associated with higher levels of work-to-family interference regardless of job type

Other organizational actions/or strategies substantively associated with *decreased* levels of work-to-family interference (R² of approximately 5%) included:

- Part-time work arrangements/reduced work week with pro-rated benefits: results in greater reductions in work-tofamily interference for employees with dependent care responsibilities (especially men) than counterparts without
- Supportive relocation benefit: use associated with lower levels of work-to-family interference regardless of job type

One other individual coping strategy was substantively associated with work-to-family interference (R² of approximately 5%): using prescriptive medication. The data showed that employees who use prescription medicine about once a week experience higher levels of work-to-family interference. Daily use of prescription medicine, on the other hand, is associated with an increased ability to cope with work-to-family interference (perhaps because they actively reduce work when medication use reaches this level).

Finally, it should be noted that two other family coping strategies were substantially associated with work-to-family interference:

- Putting family first by modifying work schedule: Findings from the analysis that takes job type into account shows that
 this is a very effective coping strategy for men and women in managerial and professional positions. It also provides
 some relief from this form of work–life conflict for men in other positions within the organization. Furthermore, that
 data show that weekly modification of one's work schedule is all that is needed to experience the benefits of reduced
 interference. Women in other positions within the organization, on the other hand, need to recognize that while
 moderate use of this strategy is associated with a reduction in interference, daily use is associated with a sharp increase
 in interference.
- Procuring help from outside the family by buying more goods and services: Employees with higher levels of
 interference make higher use of this strategy when job type is taken into consideration.

l : 5

Appendix J

Summary of Key Findings with Respect to Family-to-Work Interference

Appendix J:

Summary of Key Findings with Respect to Family-to-Work Interference

Moderators of Interference	Impact on Employees	Between-Group Differences
Things Employer Can Do to Help Reduce Employee Family-to-Work Interference		
Perceived flexibility (total measure)	Moderate: The higher the perceived flexibility, the lower the family-to-work interference when job type taken into account	Very effective for all employees
Arrange work schedule to meet personal/family commitments	Moderate: The more opportunity the employee has to arrange their work schedule, the lower the family-to-work interference when job type taken into account	Men have to use this strategy on a daily basis to achieve any reduction in family-to-work interference. For women, on the other hand, the relationship is linear — the greater the flexibility, the lower the family-to-work interference
Working for a manager who makes employee feel guilty when they take time off for personal or family reasons	Moderate: For all employees, the more their immediate manager engages in this behaviour, the higher the family-to-work interference	Equally problematic for all employees
Working for a manager who focuses on hours of work not output	Moderate: For all employees, the more their immediate manager engages in this behaviour, the higher the family-to-work interference	More problematic for men and women with dependent care responsibilities. Women with dependent care have the most problems with this behaviour
Benefit: child care referral	Moderate: This benefit helps employees with dependent care cope with family-to-work interference	Benefits women with dependent care more than men

J : 1

Summary of Key Findings with Respect to Family-to-Work Interference

Moderators of Interference	Impact on Employees	Between-Group Differences
Benefit: on-site day care	Moderate: Employees with dependent care who use this benefit report higher family-to-work interference	Equally problematic for men and women
Benefit: family/emergency days off work	Moderate: Employees who use this benefit report higher family-to-work interference in the dependent care analysis	Women who use this benefit have higher family-to-work interference than their male counterparts
Things Employee Can Do to Cope with Family-to-Work Interference		
Reactive coping: reduce quality of things do	Moderate: There is a moderate positive association between coping by reducing quality and family-to-work interference for men and women with dependent care. There is no association between the use of this strategy and family-to-work interference for any other group in the study	Problematic for both men and women with dependent care
Things Families Can Do to Help Reduce Employee Family-to-Work Interference		
Procure help from outside the family: hire help to care for children	Moderate: For all employees, there is a positive association between the use of this strategy and family-to-work interference	This relationship not associated with gender, job type or dependent care status

Strong: Explains 10% or more of the variance in family-to-work interference

Moderate: Explains more than 5% of the variance in family-to-work interference but less than 10%

Other organizational actions/or strategies that were substantively associated with *increased* levels of family-to-work interference (R² of approximately 5%) in the gender by dependent care analysis included:

- working a flextime work arrangement
- working part time/a reduced work week with pro-rated benefits: associated with higher interference for men and women without dependent care responsibilities
- use of the following benefits: EAP, elder care referral, personal paid days off work, short-term leave
- working for a non-supportive manager (total measure)

Summary of Key Findings with Respect to Family-to-Work Interference

Other organizational actions/or strategies that were substantively associated with *decreased* levels of family-to-work interference (R² of approximately 5%) in the gender by dependent care analysis included:

- working a fixed 9-to-5 work schedule
- working for a supportive manager (total measure)
- working part time/a reduced work week with pro-rated benefits: associated with lower levels of family-to-work interference for men and women with dependent care responsibilities
- higher levels of the following forms of perceived flexibility: take holidays when you want, take time off work for a course or conference, and vary work hours. It should be noted that employees with dependent care responsibilities have to feel that they can vary their work hours daily, if necessary, to achieve a decline in family-to-work interference. This is not the case for those without dependents who see a steady decline in interference at increased levels of flexibility.

It should be noted that none of these organizational actions or strategies was significantly associated with family-to-work interference when job type was taken into account.

Other individual coping strategies that were associated with *increased* levels of family-to-work interference (R² of approximately 5%) included:

- Sacrifice personal life by working harder: this strategy is more problematic for men and women with dependent care
- Escape by just trying to forget about it: this strategy is more problematic for men and women with dependent care

Three individual coping strategies were substantively associated with *decreased* levels of family-to-work interference:

- Delegate: this active form of coping was more effective for men (especially those with dependent care) than women
- Having fewer children: seems to reduce family-to-work interference somewhat for those in managerial and professional jobs
- Delayed starting a family/decided not to have a family: associated with reduced family-to-work interference for women with no dependent care

Only one family coping strategy was substantively associated with *increased* levels of family-to-work interference: sacrifice personal needs by getting by on less sleep. This strategy was problematic for all employees.

J : 3

Appendix K Summary of Key Findings with Respect to Caregiver Strain (CS)

Appendix K:

Summary of Key Findings with Respect to Caregiver Strain (CS)

Moderators of CS	Impact on Employees	Between-Group Differences
Things Employer Can Do to Help Reduce Employee Caregiver Strain		
Benefit: elder care referral	Strong: Employees with higher caregiver strain are more likely to use this benefit	Female employees who use this benefit have higher levels of caregiver strain than their male counterparts
Things Employee Can Do to Cope with Caregiver Strain		
Reactive coping: work harder	Moderate: There is a moderate positive association between coping by working harder and caregiver strain when dependent care taken into account	Equally problematic for all employees
Reactive coping: reduce quality of things do	Moderate: There is a moderate positive association between coping by reducing quality and caregiver strain when dependent care taken into account	Equally problematic for all employees
Escapism: just try to forget about it	Moderate: There is a moderate positive association between coping by just trying to forget about it and caregiver strain when dependent care taken into account	Equally problematic for all employees
Have fewer children	Moderate: The higher the caregiver strain the more likely the employee is to say they coped with work demands by limiting their family size when dependent care taken into account	Use of this strategy does not depend on gender or dependent care status

K: 1

Summary of Key Findings with Respect to Caregiver Strain (CS)

Moderators of CS	Impact on Employees	Between-Group Differences
Delayed or decided not to have a family	Moderate: Employees with high caregiver strain are more likely to say that they have coped by deciding either to not have children or to delay having children when dependent care taken into account	Use of this strategy does not depend on gender or dependent care status
Things Families Can Do to Help Reduce Caregiver Strain		
Procure help from outside the family: hire help to care for elderly dependents	Moderate: For all employees in the dependent care analysis and for the men in the job type analysis, there is a positive association between the use of this strategy and caregiver strain. For women, regardless of job type, the relationship between use of this strategy looks like an "inverted U". Moderate use of this strategy is associated with a decline in caregiver strain but daily use is associated with an increase in caregiver strain.	Women in other positions benefit the most from moderate use of this strategy

Strong: Explains 10% or more of the variance in caregiver strain

Moderate: Explains more than 5% of the variance in caregiver strain but less than 10%

Other organizational actions/or strategies that were substantively associated with increased levels of caregiver strain (R² of approximately 5%) in the gender by dependent care analysis included:

- working a fixed 9-to-5 work schedule
- working for a non-supportive manager (total measure), specifically one who engages in the following behaviours:
 makes me feel guilty about time off for personal reasons, focuses on hours not output, and has unrealistic expectations
 about the amount of work that can be done

Other organizational actions/or strategies that were substantively associated with *decreased* levels of caregiver strain (R² of approximately 5%) in the gender by dependent care analysis included:

- working flextime
- the ability to take paid short-term personal leave
- working for a supportive manager (total measure)
- higher levels of the following forms of perceived flexibility: ability to vary work hours, ability to interrupt work day
 to deal with a personal issue and then return to work, ability to arrange work schedule to take personal/family issues
 into consideration

Only one individual coping strategy was substantively associated with caregiver strain: use prescription medicine. Employees who use prescription medicine about once a week experience higher levels of caregiver stain. Daily use of prescription medicine, on the other hand, is associated with an *increased* ability to cope with caregiver strain.

Only one family coping strategy was substantively associated with caregiver strain, get by on less sleep. The use of this strategy increases concomitant with employee's level of strain.

It should be noted that none of the organizational, individual or family actions or strategies was significantly associated with caregiver strain when job type was taken into account.