

AN ABSTRACT OF THE THESIS OF

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Since the industrial revolution, work and family have been viewed as separate spheres, with women relegated to the family sphere. With the advent of women into the paid labor force, few studies have considered the potentially complex context of women's work and family experiences. The purpose of this study was to examine the impact of family structure, occupational status, and workplace relationships on women workers' perceptions of stress.

The sample for this study included 379 women dental assistants and hygienists who responded to mailed questionnaires sent to the dental offices where they worked. The dependent variables used in this analysis

were mental stress, physical stress, and four social stress items.

Analysis of variance was performed for the family structure groups on physical, mental, and social stress items. Single parents and parents in general were especially stressed in terms of financial stress and marital stress. The second series of analyses included t-tests on stress by occupation. Dental assistants had more financial stress than hygienists. Hygienists had more mental stress than assistants. Workplace relationships were assessed in the full regression models. Frequency of talking with fellow workers was strongly and positively associated with financial problems. The full regression models supported the findings in earlier analyses that tensions from children and financial problems were associated with the presence of children in the home.

The findings in this study suggest that for women workers, work and family do not occupy separate spheres. Women workers think about family matters at the workplace and discuss them with their other women workers. Further research needs to focus on women workers, especially those in traditionally female occupations, and the work and family connections for these workers.

Stress Among Working Women:
An Examination of Family Structure, Occupational Status,
and Workplace Relationships

by

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**STRESS AMONG WORKING WOMEN:
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AND WORKPLACE RELATIONSHIPS**

**CHAPTER 1
INTRODUCTION**

Most analyses of work and family in the modern American context have settled into a comfortable economic determinism- the centrality of work in setting conditions for family life. No equally compelling and tested framework exists for reversing the relationship and looking at the effects of family patterns on work systems in American society (Kanter, 1977, p. 53).

The myth of separate spheres, where work takes place in the public domain and family exists in the private domain, developed in the United States with the industrial revolution (Kanter, 1977; Mintz & Kellogg, 1988). With industrialization, families moved from rural to urban areas, and ceased producing all of the goods the family needed for survival. Industrialization and urbanization were viewed as threats to family life (Haraven, 1989). In response to this perceived threat, and as families moved from being production units to consumption units, the family took on the role of meeting the affective needs of family members. Work was assumed to meet the instrumental, economic needs of families (Kanter, 1977; Mintz & Kellogg, 1988). The mythology developed that the worlds of work and family existed

independently of each other and should be viewed independently. The family was seen as a warm, caring place, with close personal relationships, whereas work was viewed as cold, impersonal, and task-oriented (Kanter, 1977; Zvonkovic & Marks, 1990). Glorification of domesticity and motherhood occurred in response to these changes, and motherhood was, for the first time, seen as a full-time occupation (Gerson, 1985; Hesse, 1979).

It is important to understand the historical context of the work and family connection since this mythology has remained embedded in the fabric of American society, although researchers have recently recognized the potential influences of family life on work as an area for research. Instead of being envisioned as separate spheres, work and family are seen to have dynamic, bi-directional, reciprocal influences on one another (Crouter, 1984; Kanter, 1977).

These reciprocal influences have assumed increased importance as women have entered the work force. In the past, women were relegated to the domestic sphere, while men were the breadwinners. The majority of American women are now members of the paid labor force (Taeuber & Valdisera, 1986), and this dramatic increase in women workers has come about in conjunction with an increase in divorced, single-parent families as well as ideological

changes brought about through the women's movement (Glick, 1990; Wallis, 1989). The labor force participation of women with young children has increased especially rapidly (Bureau of Labor Statistics, 1988; Wallis, 1989). Although the majority of the members of both genders are breadwinners for their families, women continue to assume responsibility for the domestic sphere (Hochschild & Machung, 1989). The reciprocal influences of family and work are especially important for both the families of these women and their employers. An understanding of the influences that family roles and worker roles have on each other may promote better conditions for the lives of American families. This study seeks to illuminate work and family connections for women workers by examining family structure, occupational status, workplace relationships, and stress.

Women As Workers

As women have moved into the paid workforce in increasing numbers, research has focused on how employment of wives and mothers influences family life. Studies have examined the effects of women's employment on marital relationships (Scarr, Phillips, & McCartney, 1989), household work (Pleck, 1985), and child outcomes (Hoffman, 1974; Scarr, Phillips, & McCartney, 1989). Several assumptions underlie these studies, and these

assumptions may cloud the true nature of influences between work and family.

Research on work and family has focused on the dual-career family (Hertz, 1986; Hunt & Hunt, 1977; Rapoport & Rapoport, 1971, 1976), which assumes that only career women are working. Career implies commitment to work and potential for advancement at the workplace. Although women workers have made profound advances in management and professional-technical fields (Goetz & Schmiede, 1990), most women workers are still found in low-status, low-paid occupations (Voydanoff, 1987). So rather than dual-career the more accurate term for most two-earner American families is the dual-earner family.

Another assumption underlying much of the research is that work influences family life, but family life does not influence work. Kanter (1977) describes this framework for studying work and family as one of "economic determinism"- that work is central to the individual's existence. This assumption of economic determinism seems especially unlikely for American women workers. Although some career women might place work as central to their existence, it seems highly problematic that the vast majority of women would do so. Women have been socialized to assume the responsibility for family life, and research indicates they perform the majority of

housework and child care in the family, even when they are full-time employees (Hochschild & Machung, 1989).

Both the bi-directional nature of work and family influences, and the distinctions between women as workers and women as career professionals, need to be examined. Adequate exploration of these points suggests that women workers be asked about their family life, and how that family life influences them in the workplace. Women workers should be distinguished from women professionals, as the experiences involved in balancing work and family life may be very different for these groups.

A further criticism leveled at many assumptions undergirding analyses of women as workers and family members is that women and men can be viewed in the same way (Baruch, Biener, & Barnett, 1987). Balancing work and family commitments is not an identical task for members of opposite genders. Expectations for parents and spouses differ according to gender and family structure. The experiences of women as workers and family members need to be viewed as unique to their gender. Sociologist Jessie Bernard (1981) sees these unique features of women's systems as "The Female World". An analysis of women workers and their families must examine workplace relationships, family structure variables, and societal expectations of women as family members.

Theoretical Basis

Role theory seems an especially appropriate theoretical base for the study of women in the different social contexts of work and family. A role is "a set of socially defined expectations about the beliefs, values, attitudes, and behavioral norms associated with a distinctive status" (Rogers, Burdge, Korsching, & Donnermeyer, 1988, p. 71). Individuals occupy different roles in society, for example the roles of mother and worker. Society has expectations of individuals for particular behaviors appropriate to the roles they occupy.

Difficulties occur for individuals in the performance of their roles in society. The concepts of role strain and role conflict are important to understanding the potential problems an individual may encounter in the performance of roles. Role strain occurs when the individual has difficulty meeting the expectations and obligations associated with a particular role. Role strain may be stimulated by a variety of conditions including: technological change, social change, role conflict, and inadequate role preparation (Rogers et al., 1988). Role conflict occurs when an individual occupies two incompatible roles. The expectations for performance in one role contradict the expectations in the second role (Rogers et al., 1988).

Both role strain and role conflict cause stress for individuals, and may inhibit the successful performance of particular roles.

Although roles in our culture tend to carry some universal expectations, role expectations are complex and vary for individuals based on their particular marital and parental statuses. For example, the role expectations for the role of "mother" may be very different for a stepmother than a biological mother. Roles can include instrumental tasks, as well as intimate ties. Family roles are complex, and acceptable fulfillment of particular roles depends on both family and societal expectations for the roles.

In applying role theory to women occupying multiple roles of spouse, mother, and worker, two opposing hypotheses concerning roles are possible. The "scarcity hypothesis" assumes that time and energy are limited resources (Goode, 1960). According to this hypothesis, it is impossible for individuals to meet the demands of all of their separate roles. Role strain is expected and normal. As Goode (1960, p. 486) stated, "In general, the individual's total role obligations are overdemanding". The individual spends energy in attempting to meet the demands of multiple roles, and since energy levels are scarce and finite, roles are not all met to the satisfaction of society.

A contrasting hypothesis, the "expansionist hypothesis" suggests that energy is not available in fixed quantities, but rather abundant and expandable (Marks, 1977). Because of the nature of some roles, they may actually result in additional energy being developed for the individual within the performance of that role, or other roles (Marks, 1977). Thus role performance in some roles can enhance performance in other roles, rather than detract from additional role performance.

As Barnett and Baruch (1985) stated, neither the scarcity nor expansionist hypotheses differentiate between the particular roles an individual fulfills. Some roles may be particularly draining for the individual, supporting the scarcity hypothesis. Perhaps other roles may be particularly enhancing to individuals, supporting the expansionist hypothesis. Barnett and Baruch (1985) noted that the role of worker for women has often been assumed to be a source of role conflict and role overload, while women's domestic roles have not been viewed in this light. In accordance with the myth of separate spheres, home has been viewed as a place to recuperate from the stresses of work. However, research indicates the role of parent, rather than worker, is especially demanding for women (Barnett & Baruch, 1985). It is difficult to distinguish whether or not the scarcity or expansionist hypothesis is most applicable

for women without an analysis of the particular roles involved.

In examining women's work and family roles in terms of scarcity or expansionist hypotheses, the nature of the particular roles should also be examined. Occupational prestige, and the rewards associated with the particular role could be important factors in determining whether the role is draining, or enhancing of individual energy. Presumably a role providing prestige, monetary and status rewards, and emotional support for the individual would tend to expand individual energy, whereas a low prestige role with few monetary and status rewards and little emotional support would be draining of individual energy.

Workplace relationships may provide a key to understanding the reciprocal influences of work and family roles for women workers, and whether the scarcity or expansionist hypothesis is characteristic of women workers. If, as Jessie Bernard stated (1981), women workers are especially productive in cooperatively based, teamwork situations, workplace relationships may enhance women's performance of both worker and family roles. Women workers in especially problematic family situations may find their fellow workers an important source of information and support. Workplace relationships may assist in determining whether the expansionist or

scarcity hypotheses hold true for American women and their work and family roles.

Purpose of the Study

This study examines family structures, workplace relationships, occupational statuses, and stress in the context of a small, team-oriented workplace. The dental office was chosen as representative of such a workplace, where women dental workers have the opportunity to develop close workplace relationships. Dental office workers occupy two statuses, with differing amounts of prestige, status, and monetary rewards. The Bureau of Census (1989) considers dental hygienists to be technicians, and dental assistants are grouped with service workers. Dental office work is also a predominantly female occupation, and allows for the exploration of the scarcity and expansionist role models for women workers.

CHAPTER 2

REVIEW OF THE LITERATURE

Current literature on work and family interactions for women workers focuses on professional women workers who are involved in careers. Because the work and family connections for non-professional women comprise the experiences of the majority of women workers, work and family interaction needs to be studied in this context. This thesis focuses on women technical workers, family structures, and the affective dimensions of their experiences at work. Through an analysis of women workers rather than women professionals, work and family connections not heretofore illuminated may be discovered. Literature on family structure, the dimensions of the dental workplace, workplace relationships, and stress is presented in this section.

Family Structure

Family structure is comprised of the different varieties of arrangements of adults and children in a family setting. Adults in a family setting may be single (never married), separated, divorced, remarried, or widowed. The presence or absence of children or stepchildren may also alter the family structure. The

literature on family structure indicates that some family types have, by the nature of their structure, a greater potential for family stress than others (Burden, 1986; Cherlin, 1981). For example, a single-parent family seems to be more stressful for both adults and children (Burden, 1986; Garfinkel & McLanahan, 1986). An analysis of family stress being brought into the workplace setting must consider the type of family structure. The American family structure has changed over time to include many new family configurations. Demographic trends will be presented on each type of family structure presented.

Single Adult Families

When considering single adult families most conceptions are of never-married, childless adults. Although this type of family structure has increased in the United States, much of the increase is a result of the increasing numbers of older, widowed adults (Glick, 1990). The vast majority of adults marry, and some marry, divorce, and remarry several times during the course of their adult lives (Cherlin, 1981; Glick, 1990).

Studies show that single women and married men have the lowest rates of depression (Voydanoff, 1988). Single men are especially at risk for depression and suicide (Belle, 1982). Married women fit in the middle of this continuum. Thus marriage can be considered to be more

beneficial to men than women (Bernard, 1981). Single, childless women should be at low risk for psychosomatic and family stress as much of that stress comes from spousal and parental roles.

Single women with children reach that lifestyle through several paths. They may be never-married, or single-parents through divorce, separation, or widowhood. Although studies of working women have focused on dual-career families (Hertz, 1986; Rapoport & Rapoport, 1971, 1976), many American women are the primary wage earner in the family. The single-parent family constitutes an increasing proportion of American families. This increase in single-parent families has occurred at a time when the numbers of two-parent families have declined (Norton & Glick, 1986). In the past, women were more likely to become single parents through widowhood; now these single parent families are more likely to be formed through separation, divorce, or being never married (Norton & Glick, 1986).

The incidence of single-parenthood has increased dramatically in the United States. In 1984, one in five families with children under 18 was a single-parent family, in comparison to one in ten families in 1970 (Norton & Glick, 1986). This increase in single-parent families has occurred due to the increase in divorced (up by 300%) and never-married mothers (up by 500%) in the

years from 1970 to 1984 (Norton & Glick, 1986). Eighty-eight percent of single-parent families are mother-child families (Norton & Glick, 1986). These single-parent families are especially vulnerable to family stresses (Burden, 1986).

The majority of single mothers are members of the labor force. In 1984, two out of every three single mothers (66%) with children under eighteen were employed (Norton & Glick, 1986). Divorced mothers are more likely to be employed than never married mothers because they tend to be older and possess more education and employment experience (Norton & Glick, 1986). Even though the majority of single mothers are members of the labor force, their economic status is lower than both two-parent families and single men (Garfinkel & McLanahan, 1986).

In 1989, women in the American labor force received sixty-six cents for every dollar a man made (Wallis, 1989). This is due both to discrimination against women, and the concentration of women workers in low-paid, low-status, female-dominated occupations (Bernard, 1981; Voydanoff, 1987). For example, clerical fields (typist, secretary) are overwhelmingly dominated by women. According to the Bureau of Census, in 1989, 99.1% of secretaries and 94.6% of typists were women (U.S. Bureau of Census, 1989). In her qualitative study, Pink Collar

Workers, Howe (1978) examined occupational categories dominated by women workers. Workers viewed themselves as having lower status, even though this was not explicitly stated. A beauty shop worker described the status differential as "people won't tell you this, they think we don't know what they're feeling, but a lot of them think . . . we're lower class" (1978, p. 49). As Jessie Bernard stated,

The occupational distribution of the half of all adult women in the labor force is quite different from that of men. A far larger proportion are in service and so called helping kinds of work, reflecting the traditional love- and /or duty ethos of female culture. As the focus for female aspirations the three k's of an earlier generation- kinder, kuche, kirche (children, kitchen, church)- have been replaced by the three h's-healing, helping, and home management. The professions now open to women are in the main in the service sector, calling for warm hearts and beautiful bodies (Bernard, 1981, p. 215).

Women have made progress in moving into professional, technical, and management fields, however the vast majority of women remain in clerical and service occupations, including occupations in the health fields. Because wages in female dominated occupations are less than in male dominated occupations, families that rely solely on the wages of a female breadwinner are more affected by wage differentials. Thus, families headed by single employed mothers are especially at risk for stress.

Married Adult Families

These family types consist of four forms: married adults with no children, married adults with children, remarried adults without children, and remarried adults with blended families. The potential for family stress in these family types varies greatly, with married adults with no children being less likely to experience family stress than the other family types. Researchers have found that marital satisfaction decreases with the advent of parenthood (Ade-Ridder & Brubaker, 1983), indicating that the parental role has a profound affect on other family roles. Relationship satisfaction often increases after the children grow up and leave home (Ade-Ridder & Brubaker, 1983).

The parental role may be especially problematic for employed wives and mothers. American society continues to place the primary responsibility for parenting on mothers. Mothers meet these expectations by working what Hochschild and Machung (1989) have termed "the second shift", the extra month a year on child care and housework that working mothers perform. Although there is some indication that husbands of employed mothers are increasing the amount of time they spend in housework and child care, Hochschild and Machung (1989) found that women did 75% of the housework tasks (putting out the garbage, making beds, grocery shopping, car repairs,

laundry, banking, meal preparation, cleaning bathrooms, lawn, and household repairs), and 80% of the domestic management (remembering, planning, and scheduling domestic chores and events; arranging babysitting; and paying bills). In Hochschild and Machung's sample, only 18% of the men shared the second shift by doing half of the tasks in domestic management, housework, and child care. The burden of the second shift falls directly on the working mother, although Hochschild and Machung (1989) suggest that this burden also affects the family through the fatigue and stress exhibited by the working mother.

In addition to the growth of the single-parent family, there has been a concomitant growth in blended families formed through remarriage. As Cherlin (1981) notes, approximately 75% of divorced adults remarry, usually within three years of the divorce. These blended families are at an increased risk of divorce, especially if stepchildren are present (White and Booth, 1985).

Remarried adults bring to their new marriages a different set of expectations from individuals in a first marriage. For many remarried individuals, there is a feeling of failure, fostered in part by societal attitudes toward the divorced (Furstenberg & Spanier, 1984). Although the remarried individual is not anxious to repeat the pain and trauma of divorce, the individual

who has experienced divorce may also be less likely to stay in an unrewarding marriage.

Blended families consist of remarried adults with children. These family constellations include children from previous marriages and may also include children of the new couple. Researchers have found that remarried families experience difficulties as they attempt to form rules and set standards for the children. Non-custodial parents further complicate matters (Cherlin, 1981). Cherlin (1981) has suggested that the role of step-parent is especially problematic as this role is not well defined by our culture. Indeed, many negative connotations for step-parent (for example Cinderella's wicked stepmother) exist within the culture.

Thus women's experience of living in a family varies according to family structure. Married women with children are more likely to experience stress than childless women, as they balance the demands of home and work. Remarried women struggle with home and work roles, and clarifying rules for the blended family, as well as the demands of the ex-spouse (Cherlin, 1981). Single mothers face the stresses of balancing roles with the added burden of economic stress (Garfinkel & McLanahan, 1986). Women workers may come to the workplace from different types of families involving different roles and role expectations. These varied family demands may in

fact constitute the difficult role demands, but work experiences and relationships may assist women in dealing with family demands. Thus, a consideration of the reciprocal influences of work and family life should consider these influences in light of the type of family structure.

Workplace Relationships

According to the myth of separate spheres, workplace relationships will be cold and instrumental, rather than warm and affective (Kanter, 1977; Zvonkovic & Marks, 1990). Research has not tended to focus on work relationships, and how these personal relationships may affect the worker's well-being, and hence family well-being. As George Levinger stated,

Little recognition has been given to the impact of personal relationships at work, or to the effects of work collaboration on the development and maintenance of close relationships (Levinger, 1988, p. 1).

Friendships in the workplace can be affective as well as instrumental. Indeed, workplace relationships may be especially important to women workers, although they are rarely studied. As O'Leary (1987, p. 1) stated, "Relatively little attention has been focused on women's relations with women in work settings". This may be due to an emphasis on competition rather than cooperation in American society. As women workers have struggled to

establish themselves in the workplace, it has been suggested that women have to assume a more competitive framework in order to succeed. The focus on studying women in the workplace has been on the successful woman climbing the management ladder rather than the larger contingent of women workers in female-dominated jobs without upward mobility. This emphasis reflects the larger cultural value placed on upward mobility.

Women's relationships with other women have been studied outside the workplace context. Rubin (1985) found that women's friendships significantly differ from men's. Women have more same sex friends than men, and these friendships are maintained at a more intimate level. Women tend to confide in other women, and rely on their friends for support and advice. Talking with friends provides emotional catharsis as well as instrumental advice. Even women with many roles to fulfill maintain their role as friend. As Rubin stated,

Yet even working women who are also raising young children and tending a household usually manage at least one or two important friendships (Rubin, 1985, p. 65).

Friendships can be a source of support for women; both emotional support, the "I care about you" experience, and practical, "here's how to deal with this problem", type of support.

Jessie Bernard (1981) found that women are more productive in cooperatively based, team-work type work situations than men. These workplace relationships may be especially important to women and their families as they struggle to balance roles of worker, spouse, and mother. Through a cooperatively based work setting, and close relationships at work, women may receive support, assistance, and new ideas for balancing multiple roles.

In a rare study involving women's work and family connections, Louise Lamphere (1985) developed a qualitative analysis of women workers in a factory in New Jersey. Lamphere found in her study of women at work that women employees "brought the family to work" to assist them in developing friendships with fellow workers. Women factory employees used weddings, births, retirements, and deaths to bring the employees together in emotional support for other workers in times of joy and sorrow. Management supported the celebration of family matters in the workplace because they recognized that this interaction forged a more cohesive work force. Lamphere described the process:

In bringing family life into the workplace, at both a conceptual and behavioral level, women workers make connections with others. They make strangers into acquaintances and within the circle on one's break group, they make acquaintances into friends (pp. 528-529).

If, as Jessie Bernard (1981) suggested, women work best in team-oriented workplace, then a small workplace should aid in establishing friendships for women. Women, who must by the nature of their work cooperate rather than compete, should have an even greater investment in workplace friendship networks in a small office. Much of the research done on workplaces has focused on large corporations; thus, the relationships in small offices tend to be an unexplored area for analysis.

The Dental Office as Workplace

Dentists' offices tend to be small, team-oriented workplaces. Possibilities exist for workplace friendships to develop. Indeed, dental workers and the dentist tend to view themselves as a "team" providing an array of services to guarantee dental health of patients (Wagner, 1987). Although a recent trend has supported the larger more impersonal Health Maintenance Organization (HMO) dental offices, most offices are smaller and consist of a dentist, hygienist, and assistant. Different configurations exist within specific offices, but most dentists attempt to establish a comforting, personal atmosphere for their patients.

Within the dental workplace, assistants work with the dentist on restoration tasks, while the hygienist cleans and checks the patients's teeth (Kendall, 1983).

However, workplace functions overlap, with assistants and hygienists tending to share instrument clean-up and sterilization areas, x-ray equipment, and other employee areas. Tasks dovetail as the dental team works to care for the patient's oral health, and to keep instruments and equipment clean and orderly.

Within this cooperative workplace, a status hierarchy exists between assistants and hygienists. Hygienists have more education, and usually more autonomy than assistants. A registered dental hygienist receives two to four years of college in order to obtain a license (Kendall, 1983). Assistants may have a vocational technical degree in dental assisting, or they may receive their training on the job (Kendall, 1983). Hygienists receive better pay than assistants, because of their specialized training, and because they are expected to function autonomously.

These dental team members are predominantly female. Dentistry has been dominated by male dentists with female employees, although since the 1960's women have entered dentistry in increasing numbers (Dolan, 1987). According to the U.S. Census Bureau (1989), 98% of dental assistants and 95% of dental hygienists are women, whereas only 8.9% of dentists are women. The composition of the dental workplace fosters team-oriented relationships among women employees as they attempt to

get the business of the office completed to the satisfaction of their usually male employer.

The dental workplace offers a unique opportunity to study women workers and the stresses they bring to the workplace, as well as their relationships at the workplace. Family structure, occupational status, and workplace relationships are significant independent variables to assess. For this study, stress will serve as the outcome variable.

Stress

Definition

Embedded within the mythology of the separate spheres of work and family is the belief that work produces tension, conflict, and strain, and the family helps the individual cope with that work-induced tension. Aneshensel and Pearlin (1987) distinguish between stress, stressors, and the stress process as:

Stressors . . . are any set of conditions that threaten the well-being of people . . . Stress is a generic term that pertains to the psychological, physiological, or biochemical impact of the stressor on the organism . . . The stress process refers to the evolving connections between stressors, and their stress manifestations and to the mediating effects of coping, social supports, and personal resources (p. 77).

Stress has both objective and subjective components, and the identification of stress may be difficult. Physical reactions happen within the body in response to the cognitive appraisal of events as tension producing.

Stress adversely affects both physical health and psychological outcomes. Stress may manifest itself through physical health problems such as headaches, backaches, and upset stomachs, or psychological health outcomes such as feeling irritable or pressured to get things done.

Women and Stress

The presumption in much of the literature on women and work is that work roles are added to other social roles and the combination produces conflict, anxiety, and tensions for women (Baruch, Biener, & Barnett, 1987). However, family roles can also be associated with stress for women. Many women are faced with family situations which involve actions which need to be taken, but for which a successful resolution may be uncertain. For example, a woman may not be able to find day care for her child that she considers appropriate and affordable. Lack of such day care could certainly be threatening to her psychological well-being. She might be faced with the belief that action should be taken to deal with the

threat, but also feel that she may not be able to find any appropriate action to take.

The majority of studies of stress have focused on predominantly male populations and events that are more likely to happen to males, while ignoring events in the lives of women, including stress within the family context (Belle, 1982). Also, much of the stress research has examined life events, such as being fired at work, rather than day-to-day life conditions. As Vivian Parker Makosky (1982) stated in Lives in Stress, an analysis of women and depression,

Much of the stress in life comes not from the necessity of adjusting to sporadic change, but from steady, unchanging (or slowly changing) oppressive conditions which must be endured daily (p. 36).

A difficult child, an uncooperative spouse, or financial challenges may lead to a build-up of stress for women.

Because women are socialized to believe they are responsible for meeting the needs of the family, and because men also are socialized to believe women should assume these roles, women have the burden of responsibility for the family (Hochschild & Machung, 1989). Women are much more likely to believe they are the caretakers and must deal with the problems within the family. Although the national trend has favored men becoming more involved in family, social roles are slow

to change. As Voydanoff (1988) stated in her review of Jessie Bernard's writings,

Her (Bernard's) optimism about the feasibility of role sharing has been tempered in the last decade. Men have been extremely resistant to change, and in many cases those who do are denigrated by their peers. Men who see the provider role as their major responsibility resent their wives' demands for more emotional investment in the family and greater sharing of the household responsibilities (p. 277).

The domain of the family remains female.

Family Stress

Because women carry a disproportionate burden of family expectations they are more likely to experience family stress. These pressures are often subtle, and so normative it is difficult for individuals to perceive them. For example, day care of young children is presumed to be the "woman's problem" rather than the "husband's problem" or even the "couple's problem". Other pressures within the family are closely associated with these family stresses for women. Belle (1982) found that financial stresses were significantly correlated with other stresses, including family, parenting, and stresses in intimate relationships.

Children are viewed as a source of stress in the family. As Cooke and Rousseau stated,

there is substantial evidence that the presence of children, particularly those under six years

of age is associated with symptoms of psychological strain (1984, pp. 253-254).

Baruch, Biener, and Barnett (1987) suggested that children may be especially stressful because women carry the burden of responsibility for seeing that children are well cared for and happy. Because ensuring the happiness of another individual is an unrealistic demand, these unrealistic expectations leave women vulnerable to the stresses associated with such unrealistic expectations.

Family stress can thus be conceptualized as factors within the family that induce bodily or mental tension, and the cognitive appraisal that these events are tension producing. These factors are generated by the expectations associated with an individual's family commitments and obligations. Often researchers studying the family suggest that family roles rescue strain through social support. Although spousal roles may cause strain they also provide another supportive individual (Cooke & Rousseau, 1984). This ideology, of course, presumes that the marital partner is supportive rather than non-supportive. Although support can be expected in a relationship with high marital satisfaction, that expectation may not necessarily hold true in relationships with low marital satisfaction, and marital satisfaction may not be constant over time.

The interrelationships of family stress and work are complex. For women, work may serve as a buffer for marital stress, whereas parenthood may exacerbate work-related stress (Kandel, Davies & Reveis, 1985). Family stress incidence may also be low, but it may have more profound effects for the lives of women than other types of stress (Kandel, Davies, & Reveis, 1985). Stress has the potential for profoundly affecting the lives of families, and the women workers in these families.

Summary

This thesis examines the interactions of the independent variables of occupational status, family structure, and workplace relationships with the dependent variable of stress. By choosing to investigate the interactions of work and family for women workers rather than women professionals the theories of role overload versus role enhancement may be further illuminated. Women's workplace relationships may have a profound effect on family life. This investigation will look at the neglected side of the work-family interface.

Research Questions and Hypotheses

1. Is family structure associated with stress?
According to the literature, single-parent families, families with young children, and blended families should be more stressed.
Hypothesis: Single parent families, families with young children and blended families will have more stress.

2. Is occupational status associated with stress?
Occupational status may be a contributing factor to perceptions of role enhancement versus role overload. Workers with higher occupational status may view their work roles as enhancing rather than overloading.
Hypothesis: Hygienists will be less stressed than assistants.

3. Do women workers discuss intimate family matters with their fellow workers? If workplace relationships in small workplaces promote the development of intimate ties, then women workers in these offices should bring in their questions and concerns to talk with their fellow employees.

Hypothesis: Workers will discuss intimate family matters at the workplace.

4. Do talking and workplace relationships mediate stress? For women who work in a small workplace, the other women they work with may provide assistance, support, and ideas to deal with stress through talking over potential stressors.

Hypothesis: Women workers who discuss family matters at the workplace will be less stressed.

CHAPTER 3

METHODS

Sample

The sample for this study consisted of 161 hygienists and 218 assistants, who worked together in dental offices. This sample was part of a larger sample of dentists and dental auxiliaries, consisting of 650 individuals.

The offices were chosen from the 1989 Oregon dental licensure list. Two samples were drawn from this licensure list. The first sample consisted of a random sample of all dentists. The second sample was a sample of all potential female dentists who were not members of the random sample. This second sample was drawn by identifying all obviously female names on the list, and then also including names that might be female (for example, Sidney) and all names that included a first initial only.

Although the licensure lists were for all dentists licensed in the state of Oregon, not all of these offices were located within Oregon. For example, some dentists were currently working for the military and were stationed outside of Oregon, and in some cases, outside of the United States.

Descriptive statistics for this sample of 379 hygienists and assistants by occupational group are found in Table 1. These statistics describe demographic characteristics of the respondents, including benefit levels for the two job categories.

Procedure

In September of 1989 questionnaire packets were mailed to 486 dental offices. These packets consisted of three questionnaires: one for the dentist, one for the hygienist, and one for the assistant. The three questionnaires were sent in separate, sealed envelopes, and the dentists were asked to distribute them in the sealed envelopes to staff members. Participants were asked to complete the questionnaires separately and return them in their postage paid envelopes. In cases where more than one dental auxiliary worked in the office, the instructions to the dentist were to give the questionnaire to the auxiliary who "worked there the longest". Approximately two weeks after the first mailing was completed, a second mailing to non-respondents was sent. A copy of the letter to the auxiliaries is included in Appendix A.

Table 1

Description of Sample: Means and Percentages on
Income, Family Structure, and Work and Benefit Data

	Hygienist	n	Assistant	n
Family Structure				
Single adult	17.6%	28	19.4%	42
Single parent	5.0%	8	10.1%	22
Married, no children	22.7%	35	28.1%	61
Blended family	10.7%	17	10.1%	22
Married with children	44.7%	71	32.3%	70
Income				
Individual	\$20,000 to \$25,000	161	\$10,000 to \$15,000	218
Family	\$20,000 to \$30,000	161	\$20,000 to \$30,000	218
Work Hours per Week	23	161	33	218
Percent without benefit				
Sick Leave	59.0%	95	42.7%	93
Retirement/Pension	68.3%	110	59.2%	129
Health Insurance	53.4%	86	45.0%	98
Paid Vacation	26.1%	42	10.1%	22

Measures

Family Structure

Respondents were asked about family structure variables in the sections of the questionnaire on marital status and children. A copy of the questionnaire is included in Appendix B. Marital status, question 25, gives the respondent the following choices: (1) never married, (2) single after divorce, (3) single after death of spouse, (4) separated, (5) remarried after divorce, (6) remarried after death of spouse, (7) married (first marriage). In question 29 respondents were asked about children. The question was stated "How many children do you have in each age group listed below?". The respondents were provided with blanks to fill in and the following categories: (1) under five years of age, (2) five to thirteen, (3) fourteen to eighteen, (4) nineteen to twenty-four, and (5) twenty-five and older.

Family structure was constructed by combining these two questions to yield the following categories: (a) not married, no children; (b) married or remarried, no children or no children under 19 years of age; (c) married (first marriage) with children; (d) remarried, blended family with children; and (f) single parent.

Workplace Relationships

Workplace relationships were tapped using two questions on dyadic interaction between hygienists and assistants. On the assistant and hygienist forms, the participants were asked in question 17 "Continue to think about the assistant/hygienist who has worked here the longest. How frequently, if at all do you have very personal talks with this person during which you tell them some details of your life that you wouldn't normally share with very many people". The choices were: (1) we never have such talks, (2) a few times a year, (3) once a month, (4) a couple of times a month, (5) once or twice a week, and (6) every day or almost every day. If the participant chose number 1, "we never have such talks, they were asked to go on to question nineteen. This measure is "frequency of self-disclosure".

If respondents chose answers 2-5, question 18 stated "the next series of questions asked about the kinds of things you might talk about during these very personal talks. Circle YES if you ever talk about the item listed, NO if you never talked about the item listed". The items in question 18 are: (a) work, (b) money, (c) co-workers, (d) activities (example, what you're doing after work or on the weekend), (e) family members, (f) friends, (g) your relationship with a spouse or partner, (h) personal things that you wouldn't share with your

spouse or intimate partner, and (i) other personal problems (example). Examples were coded separately.

A simple additive scale of increasing intimacy was developed for this measure, including items : activities, friends, money, your relationship with a spouse or partner and personal things that you wouldn't share with your spouse or intimate partner. This scale is termed "depth of self-disclosure". The alpha reliability for this scale was .82.

Occupational Status

Occupational status was determined by whether the participant was an assistant or a hygienist. The individuals who serve in these capacities may have other training, but for the purpose of this analysis status was defined by the role of the worker in the workplace.

Stress

Stress was assessed using an scale of psychosomatic stress, question 2. The scale tapped stress from three dimensions: physical stress, psychological stress, and family stress. The stress scale consisted of sixteen items. Participants were asked to rank on a five item Likert type scale how frequently they were bothered at work by symptoms of physical, psychological and family stress. The choices on the Likert type scale were: (1)

never, (2) rarely, (3) occasionally, (4) frequently, and (5) always. A factor analysis was performed on this scale and an orthogonal varimax rotation yielded the three factors of physical stress, mental (psychological) stress, and social (family) stress. The alpha reliabilities for the three factors were: physical=.79, mental=.71 and social=.55. An example of physical stress item is "how frequently are you bothered by headaches?". An example of psychological stress item is " How frequently are you bothered by feeling easily annoyed or irritated?". An example of family stress item is " How frequently are you bothered by tensions from your parents or in-laws?". Table 2 contains a description of the three factors and the questions included in each factor.

Table 2

Factor Loadings for Stress Factors

	Stress		
	Physical	Mental	Social
	Factor 1	Factor 2	Factor 3
A. trouble sleeping	.27458	.50054	.13897
B. soreness of muscles	.68817	.24910	-.04486
C. eye strain	.43455	.38571	.07223
D. feeling critical of others	.03199	.82383	-.02845
E. feeling easily annoyed or irritated	.18523	.80149	.05558
F. headaches	.67656	.17975	.11198
G. feeling low in energy or slowed down	.50076	.36418	.18420
H. nervousness or shakiness	.46819	.34395	.18557
I. backaches	.73845	.17494	-.11032
J. nausea	.63335	.08419	.14008
K. feeling pushed to get things done	.21472	.58308	.22322
L. colds or flu	.53497	-.04576	.22002
M. financial problems	.17498	.12248	.55528
N. tensions from your parents or in-laws	.13491	.03711	.57776
O. tensions from your children	.01160	-.02774	.67159
P. tensions from your spouse or intimate partner	-.01426	.24255	.70441

Note. Alpha reliabilities for these factors are: Physical stress .79, mental stress .71, and social stress .55.

Data Analytical Methods

In order to study relationships between family structure, workplace relationships, occupational status and stress, a framework was established to delineate these relationships. This analysis consisted of several statistical analyses to establish these relationships. Research Question 1. Is family structure associated with stress?

Analysis of variance was used to analyze the relationships between family structure and stress. A variable for family structure with five levels was formed. Levels consisted of the following configurations: (a) not married, no children; (b) married or remarried, no children, or no children under 19 years of age; (c) married (first marriage) with children; (d) remarried, blended family; and (f) single parent with children.

Stress served as the dependent variable. Analyses were performed for the physical and mental stress factors, and then the four family stress items were analyzed separately, since not all questions were appropriate to each respondent. Since analysis of variance reveals whether or not there is a statistically significant difference in the sample means, additional t-tests were performed using the individual levels to determine possible differences.

Research Question 2. Is occupational status associated with stress?

A second analysis of variance framework involved occupational status as the independent variable and stress as the dependent variable. Occupational status of the respondent was either hygienist or assistant. Physical and mental stress scales were examined, and then the family stress items were examined separately.

Research Question 3. Do women workers discuss intimate family matters with their fellow workers?

This question focused on the prevalence of personal discussions in the workplace, what was discussed, and how intimate these discussions were in the workplace. Analysis of variance was used to analyze the relationship between family structure and workplace intimacy (talks). In this analysis, family structure served as an independent variable.

Another analysis of variance examined family structure and the frequency of talks. Frequency of talks explores another dimension of intimacy in that it measures the number of events. In this analysis, family structure served as the independent variable, and frequency of talks was the dependent variable.

A second set of analysis of variance tables examined occupational status and the frequency and depth of self disclosure of talks. In this set of analyses,

occupational status was the independent variable, and depth of self disclosure, the dependent variable. An additional analysis of variance explored occupational status as the independent variable and frequency of talks as the dependent variable.

Research Question 4. Do talking and workplace relationships mediate stress?

Path analysis was originally proposed in this part of the analysis to examine how the variables in the model were interrelated. Path analysis allows testing of the extent to which relationships between variables are direct or indirect (Asher, 1976; Kerlinger, 1986). Only if the data fit the proposed path model, (i.e., only if the proposed intervening variable, workplace relationships, was significant) would path analysis be appropriate. Otherwise, regression analysis should be used, with the different types of stress as dependent variables, and family structure, occupational status, and workplace relationships as independent variables. Because the family structure variables and the occupational status variables were not continuous, dummy variables were constructed.

CHAPTER FOUR

RESULTS

The purpose of this study was to examine the influences of family structure, workplace relationships, and occupational status on perceived stress of women who work in the paid labor force. Several research questions were posed to examine these relationships. These questions were: 1. Is family structure associated with stress? 2. Is occupational status associated with stress? 3. Do women workers discuss intimate family matters with their fellow workers? and 4. Do talking and workplace relationships mediate stress?

Family Structure and Stress

Family structure was composed by combining questions of marital status with presence of children eighteen and under in the home. Five groups were formed. Group one was composed of single individuals with no children ($n=70$). Group two consisted of single parents, where the single parent status was reached through being never married, divorced, widowed, or separated ($n=30$). In Group three were married and remarried individuals with no children under 19 years of age ($n=96$). Group four was comprised of blended families; those families where the woman was remarried following divorce or widowhood, with

children present ($\underline{n}=39$). In group five were women in first marriages with children ($\underline{n}=141$). These family structure groups were based on information the women respondents gave us, however, we did not inquire about their husband's previous marital experience. Therefore, it is possible that in group three women were in their first marriage, but the men might have had previous marriages. Also, in group three, there were individuals who had children over the age of 19 years.¹

Social Stress

Analysis of variance was performed for the five groups, using family structure as the independent variable, and four social stress questions associated with families as the dependent variables. Since not all questions were appropriate for all groups (for example,

¹ For this analysis of work and family the emphasis was placed on the presence of children in the home and stress. Although tensions may be present from older children, who no longer live at home, this analysis was primarily focused on the presence of younger children in the home. For this reason, married women with children nineteen years of age and older were grouped with the "Married, no children" group. For this group, with a \underline{N} of 90 women, 40 women had children 19 and over, while 48 women had no children. T-tests were performed on these two groups to determine any significant differences between the two groups. There were no significant differences between the women with children 19 and over and the women with no children on tensions with spouse or intimate partner, financial problems, or tensions with parents or in-laws. The women with children 10 and over were significantly different from the women with no children in terms of tensions from children ($\underline{t}=8.68$, $p<.001$). However, the mean for tensions from children for the women with children 19 and over was 2.37, $\underline{SD}=.84$. The mean was thus smaller for any of the groups with children under 19, validating our conceptualization that it is the presence of children in the home that is more stress producing.

tensions from children would not be appropriate for childless families) the social stress items were analyzed separately, only on the groups for whom each question was appropriate, rather than using the social stress scale, composed of all four of the questions (see Table 2 for social stress items). Means tables for all of the social stress items are found in Table 3.

Significant differences between family structures were found by an analysis of variance on question 2m "financial problems" ($F=5.87$, $df=4$, $p<.0001$). To further determine which groups were significantly different, range tests were run for differences at the .05 level. A Tukey range test found that single parents were significantly different from all the other groups. The Least Significant Difference (LSD) test, a less conservative measure, showed that single parents had significantly more financial stress than all other groups, and also that single adults and married families with children had more financial problems than married and remarried individuals with no children.

Question 2n focused on "tensions from your parents or in-laws". No significant differences were found between groups ($F=.19$, $df=4$, $p=.117$) in the analysis of variance. Since no differences were found range tests were not performed. The means listed in Table 3 show

this source of stress to be the lowest of the social stress items.

Analysis of variance on "tensions from your children" (question 2o) revealed significant differences between groups ($F=3.50$, $df=2$, $p<.04$). In this analysis only those women with children in their home were used. Further tests were run to determine which groups were significantly different. Using the Least Significant Difference (LSD) procedure, single parent families were significantly higher in stress than couples in first marriages with children and blended families.

Significant differences were also found in the analysis of variance between family structure groups on question 2p "tensions with spouse or intimate partner" ($F=3.28$, $df=4$, $p<.006$). Those groups with children had more tensions with spouse or intimate partner than those groups without children. Blended families had the highest levels of tension, followed by single parents, and couples in first marriages with children. This question was asked in such a way that the individuals could have spouses or other intimate partners. Many single parents evidently have intimate partners.

Mental and Physical Stress

The stress scales focusing on mental stress and physical stress were also analyzed using family structure

groups as the independent variable and the physical and mental stress scales as dependent variables. Means tables for these two scales are found in Table 4. No significant differences were found between groups using the mental stress scale ($F=1.46$, $df=4$, $p=.21$) or the physical stress scale ($F=1.12$, $df=4$, $p=.35$).

Summary: Family Structure and Stress

Based on these analyses, it appears that the presence of children is associated with tensions within the couple relationship. Parents were significantly more stressed within their marriages or intimate relationships than women with no children. For the women without a co-parent, life was especially stressful. Single-parent families reported more stress from their children than first-marriage families or blended families, and single-parent families were especially financially stressed.

Table 3

Means Tables for Social Stress Items by Family Structure

	<u>n</u>	<u>M</u>	<u>SD</u>
Tensions with Spouse or Partner			
Single Adult	68	2.44	1.11
Single Parent Family	30	2.70	1.26
Married, No Children < 19	96	2.28	.90
Blended Family	39	2.87	.80
Married With Children	140	2.66	.86
Financial Problems			
Single Adult	30	2.76	1.13
Single Parent Family	70	3.53	1.04
Married, No Children < 19	96	2.42	.97
Blended Family	38	2.79	.96
Married With Children	139	2.71	.99
Tensions from Parent or In-Laws			
Single Adult	70	1.80	.93
Single Parent Family	30	1.93	1.11
Married, No Children < 19	95	1.78	1.00
Blended Family	39	1.62	.81
Married With Children	140	2.03	1.03
Tensions from Your Children			
Single Adult	60	1.15	.52
Single Parent Family	30	3.13	1.20
Married, No Children < 19	88	1.69	.89
Blended Family	39	3.00	.79
Married With Children	140	2.67	1.02

Table 4

Means for Physical and Mental Stress by Family Structure

	<u>n</u>	<u>M</u>	<u>SD</u>
Physical Stress			
Single Adults	70	20.24	4.71
Single Parents	29	20.52	5.07
Married, No Children < 19	95	20.26	4.40
Blended family	38	18.71	3.86
Married With Children	137	19.64	4.77
Mental Stress			
Single Adults	70	11.67	2.84
Single Parents	30	10.80	2.66
Married No Children < 19	94	11.17	2.58
Blended family	39	10.79	2.49
Married With Children	138	10.80	2.58

Note: These items represent a scaled measure, see appendix for individual items.

Occupational Status and Stress

Women workers in this study were either dental assistants or dental hygienists. For research question 2, status (assistant or hygienist) was used as an independent variable and the stress questions as dependent variables. T-tests were used to analyze whether there were significant differences between the two statuses in terms of stress.

Social Stress

For question 2m "financial problems" there were significant differences between statuses. Dental assistants had more financial problems than dental hygienists ($t=2.65$, $p<.01$). This could be explained in part by income differences between the two statuses. The modal yearly personal income for dental assistants was \$10,000 to \$15,000, while dental hygienists had a modal yearly personal income of \$20,000 to \$25,000. However, both dental assistants and dental hygienists had modal yearly family incomes of \$20,000 to \$30,000.

Dental assistants and hygienists did not differ significantly on question 2n "tensions from your parents or in-laws" ($t=-.82$, $p=.414$).

Question 2o assessed "tensions from your children". For this question there were status differences approaching significance ($t=-1.70$, $p=.091$). Hygienists

tended to report more tensions from their children than assistants. However, there were no significant different differences in numbers of children between the two statuses (Hygienists $\underline{M}=.60$, $\underline{SD}=.49$, Assistants $\underline{M}=.52$, $\underline{SD}=.50$).

T-tests were also run using question 2p "tensions with your spouse or intimate partner" as the dependent variables and status as the independent variable. There were no significant differences between the statuses ($\underline{t}=-1.53$, $\underline{p}=.128$).

Mental and Physical Stress

The stress scales of physical and mental stress were also assessed, using status as the independent variable and the scales as dependent variables. There were significant differences between the two statuses on mental stress ($\underline{t}=-2.59$, $\underline{p}<.01$). Dental hygienists ($\underline{M}=11.46$) felt more mental stress than dental assistants ($\underline{M}=10.75$).

Dental hygienists also tended to feel more physical stress than dental assistants ($\underline{t}=-1.78$, $\underline{p}=.08$), although this was not quite significant at the .05 level. Hygienists ($\underline{M}=20.39$) reported more difficulties with such items as backaches and eye strain than the assistants ($\underline{M}=19.53$). Some of this difference may be due to the nature of the work. Dental assistants work on a variety

of procedures throughout the day, while hygienists perform the same task throughout the day. Also, hygienists spend most of their time working independently and assume responsibility for any difficulties or mistakes they might make, while assistants work with the dentist who assumes these risks.

Workplace Relationships

To answer the research question "do women discuss intimate family matters with their fellow workers" both frequency of talks and intimacy of talks were considered to be important dimensions of workplace relationships. The relationship between the two co-workers, assistant and hygienist, was assessed answer this research question. Potential differences by status in frequency and intimacy of talks were considered in answering this research question.

Family Structure and Self-Disclosure at Work

Analysis of variance was used to determine if there was a difference by the family structure on frequency of talking. Although analysis of variance revealed no significant differences between groups on frequency of talking ($F=1.60$, $df=4$, $p=.17$), talking did occur at the workplace. Members of each group engaged in talking about family matters at the workplace. All of the groups

had at least one such talk a month, as shown in Means Table 5.

For analyzing intimacy of disclosures during this talking, the depth of self-disclosure scale, composed of items indicative of key disclosive elements, was used. The scale is described in the methods section. There were no significant differences between groups on this scale ($F=1.88$, $df=4$, $p=.11$). However, it should be noted that the two groups with the highest means for depth of self disclosure were women from single-parent families ($M=3.83$) and blended families ($M=3.84$). Means for the other groups were, single adult ($M=3.45$), married and remarried ($M=3.20$), and married with kids ($M=3.44$).

Table 5

Means by Family Structure Groups for Frequency of Talks and Depth of Self-Disclosure

	<u>n</u>	<u>M</u>	<u>SD</u>
Frequency of Talks			
Single Adults	51	3.35	1.67
Single Parent Family	14	3.64	1.69
Married, No Children < 19	66	3.10	1.66
Blended Family	23	3.82	1.54
Married With Children	101	3.02	1.54
Depth of Self Disclosure			
Single Adults	49	3.47	1.21
Single Parent Family	18	3.83	1.10
Married, No Children < 19	66	3.20	1.67
Blended Family	19	3.84	.69
Married With Children	97	3.44	1.16

Occupational Status and Self-Disclosure at Work

T-tests were used to examine potential differences between hygienists and assistants on frequency of talking and depth of self-disclosure. No significant differences were found on frequency of talks ($t=.16$, $p=.87$). There were also no differences on depth of self-disclosure between the two statuses ($t=-.96$, $p=.34$). It should be noted that these analyses probed the relationship between the assistant and hygienist, and did not include other potential opportunities for self-disclosure with other employees. These findings may indicate that talking and self-disclosure are reciprocal within the dyad, and both members of the dyad try to adjust their self-disclosure about family matters so that the amount and depth remain about even.

Family Structure, Status, Workplace Relationships and Stress:

Constructing a Model

This analysis examined the relative effects of workplace relationships, status, and family structure on the dependent variables of mental stress, physical stress, and family stress. Regression analysis was used to determine the relative effects of family structure and status on stress. Although workplace relationships had not been significant in question three, they were

included in the model since talking did occur at the workplace, and a correlation matrix revealed a significant relationship between both the incidence of talking and financial stress ($\underline{r}=.21$, $\underline{p}<.001$) and the depth of self disclosure and financial stress ($\underline{r}=.10$, $\underline{p}<.05$).

Dummy variables were constructed for family structure, with group one (single adults with no children) as the reference group. Status also was set as a dummy variable, with assistants as the reference group. Frequency of talking, and depth of self disclosure were handled in separate regressions since they were highly intercorrelated. The regressions on frequency of talking are first, followed by the regressions on depth of self disclosure. Regressions were performed separately for each of the four family stress variables (financial stress, tensions from your spouse or intimate partner, tensions from your parents or in-laws, and tensions from your children) and for the physical and mental stress items.

Frequency of Talks, Family Structure, and Stress

A regression using frequency of talks, family structure, and status as independent variables and "tensions from your spouse or intimate partner" as the dependent variable did not reveal significant differences

($F=1.27$, $df=6$, $p=.27$). Similarly, a regression using frequency of talks, family structure, and occupational status as independent variables and "tensions from your parents or in-laws" did not reveal significant differences ($F=1.54$, $df=6$, $p=.17$). However, regressions using the other family stress items "tensions from your children" ($R^2=.39$, $df=6$, $F=25.52$, $p<.001$), and "financial problems" ($R^2=.11$, $F=4.92$, $df=6$, $p<.001$) were both highly significant.

For the regression equation using "tensions from your children" as the dependent variable, and status, frequency of talking, and family structure as the independent variables, only the family structure variables, displayed in Table 6 were significant in the regression equation. Family structure dummy variables for the groups married with children, blended family, and single parents had strong positive beta weights, as shown in Table 6. Frequency of talks had a negative, non-significant beta weight, and status also was not significant.

However, even from group two, women in first marriages with no children, family structure was a significant ($\beta=.19$, $p=.005$), and positive variable in the regression equation. Two conceivable explanations seem possible. Almost half of these families had children 19 years of age and older. Although these children may not

be stressful in terms of living in the family home and requiring care, they may still have caused stress for their mothers. Adult child may still be a source of concern to their parents. Another possibility is that the husbands of these women may have had children from previous marriages who did not live with the couple, but may interact with the couple.

Table 6

Tensions From Your Children: Regression of Frequency of Talks, Family Structure and Occupational Status

	<u>r</u>	<u>β</u>
Single Parent Family	.21***	.41***
Married, No Children	-.21***	.19**
Blended Family	.21***	.51***
Married, With Children < 19	.18*	.66***
Frequency of Talks	-.02	-.03
Occupational Status	.09	.01

$R^2 = .38$, $F=25.52$, $df=6$, $p<.001$
 $p<.05$, $** p<.01$, $*** p<.001$

The regression equation with "financial problems" as the dependent variable and family structure, status, and frequency of talking as the independent variables showed status, frequency of talking, and the family structure group three (married or remarried, no children) as significant variables in the regression equation (see

Table 7). Frequency of talking was the best predictor in the regression equation ($\beta=.19$, $p<.002$). Status was negatively and significantly associated with financial problems ($\beta=-.18$, $p<.004$), indicating that hygienists were in better financial shape than assistants. Being married or remarried with no young children was negatively related to financial problems, although it was only marginally significant ($\beta=-.15$, $p=.06$). However this finding is especially interesting in light of the lack of significance of the other family types.

No significant relationship between family structure, status, frequency of talking, and physical stress was found ($F=1.78$, $p=.10$). Similarly, there was no significant relationship between family structure, frequency of talking, and mental stress ($F=1.30$, $p=.26$).

Table 7

Financial Problems: Regression of Frequency of Talks, Family Structure, and Occupational Status

	r	β
Single Parent Family	.21***	.09
Married, No Children < 19	-.13*	-.14
Blended Family	.03	.01
Married, With Children	-.01	.00
Frequency of Talks	.21**	.19**
Occupational Status	-.13**	-.18**

$R^2=.11$, $F=4.91$, $df=6$, $p<.001$
 * $p<.05$, ** $p<.01$, *** $p<.001$

Depth of Self-Disclosure, Family Structure, and Stress

The second set of regression equations used depth of self-disclosure, family structure, and status as independent variables, and the stress measures as dependent variables. The four family stress variables were each entered into regression equations. Table 8 shows a significant relationship when "tensions from your children" was the dependent variable in the regression equation and depth of self-disclosure, status, and family structure variables were independent variables ($R^2=.42$, $F=27.58$, $df=6$, $p<.001$). However, Table 8 shows that the family structure variables were the only significant variables in the regression equation. Married families with children ($\beta=.65$, $p<.0001$), blended families ($\beta=.45$, $p<.0001$), and single parents ($\beta=.49$, $p<.0001$) were all significant variables in the equation. Again, those women who had children 19 and over, indicated they had tensions from children ($\beta=.15$, $p<.04$).

Table 8

Tensions From Your Children: Regression of Family Structure, Self-Disclosure, and Occupational Status

	<u>r</u>	<u>β</u>
Single Parent Family	.21***	.49***
Married, No Children < 19	-.21***	.15**
Blended Family	.21***	.45***
Married, With Children	.18*	.65***
Self-Disclosure	.10	-.05
Occupational Status	.09	.04

$R^2=.42$, $F=27.58$, $df=6$, $p<.001$

* $p<.05$, ** $p<.01$, *** $p<.001$

The regression equation with "financial problems" as the dependent variable and status, family structure, and depth of self-disclosure as the independent variables was also significant ($R^2=.13$, $F=6.16$, $df=6$, $p<.001$). Table 9 displays the output for this regression. Two family structure variables were significant variables in the equation, with single-parent families being significantly more likely ($\beta=.15$, $p<.04$) to have financial troubles and married families with no children being significantly less likely to have financial problems ($\beta=-.21$, $p<.009$) (see table 9). Status was also significant in this equation ($\beta=-.22$, $p<.005$), indicating the relative differences in wages between hygienists and assistants.

Table 9

Financial Problems: Regression of Family Structure, Depth of Self-Disclosure and Occupational Status

	<u>r</u>	<u>β</u>
Single Parent Family	.21***	.15*
Married, No Children < 19	-.13*	-.21**
Blended Family	.03	.04
Married, With Children	-.01	-.05
Self Disclosure	.10	.07
Occupational Status	-.13	-.22***

$R^2=.13$, $F=6.16$, $df=6$, $p<.001$

* $p<.05$, ** $p<.01$, *** $p<.001$

The regression equation with "tensions from your spouse or intimate partner" as the dependent variable and depth of self-disclosure, family structure, and status as the independent variables was not significant ($R^2=.03$, $F=1.32$, $p=.25$). When "tensions from your parents or in-laws" was entered as the dependent variable and family structure, status, and depth of self-disclosure were the independent variables, a significant relationship was not found ($R^2=.04$, $F=1.54$, $p=.16$).

Regression equations with physical stress as the dependent variable, and family structure, status, and depth of self-disclosure as the independent variables did not reveal any significant differences ($R^2=.03$, $F=1.10$,

$p=.36$). Also, a regression with mental stress as the dependent variable, and family structure, status and depth of self-disclosure as the independent variables was not significant ($R^2=.02$, $F=.69$, $p=.66$).

Summary

The full regression models included occupational status, family structure, and the workplace relationships variables as independent variables, and the family stress items as dependent variables. Neither model was significant for tensions from partner, tensions from parents or in-laws, or physical or mental stress. Concerning the models for financial problems, having a higher-status job with higher wages was negatively related to financial problems in both models. Also in both models, family structure variables were significant in that the absence of children in the home was negatively related to financial problems.

When considering tensions from children, for both types of models, only the family structure variables were significant variables in the regression equations. Frequency of talking, depth of self-disclosure, and occupational status were not significant variables in these equations. It is important to note the relationships between family structure and stress from children, and family structure, status, and financial

stress. It appears that all parents, regardless of type of family structure, experienced some stress from their children. The presence of children and low status in the workplace reflected in low wages, also contributed to financial stress for families.

CHAPTER 5

DISCUSSION

Introduction

Analyses of work and family have focused on the influences work has for the family, rather than the potentially bi-directional influences of work and family. Within this framework of "economic determinism" (Kanter, 1977), work has been viewed as cold, demanding, and impersonal while family has been the warm, caring "haven in a heartless world" (Lasch, 1977). Although the myth of separate spheres no longer seems appropriate for analyses of work and family, some of the underlying assumptions persist, accompanied by lack of research on a variety of types of women workers.

Research on women workers has either looked at them in terms of a male worker model, assuming they are no different from men workers (Baruch, Biener, & Barnett, 1987), or in terms of a gender model (Feldberg & Glenn, 1979) where the primacy of family is regarded as so vital that worker roles are virtually ignored. Neither of these models takes into account the unique complex of roles, expectations, and responsibilities of women both as workers and as family members.

The reality of women's experience in the workplace has been ignored, with much of the interest and research

examining the lives of dual-career women workers. Most American women workers have entered the work force as workers rather than career professionals. Women come from different family structures, and are in the labor force for a variety of reasons. Women workers often contribute a vital second income to the family. Other women workers, as single parents, are the sole breadwinner for their families. Because women workers are concentrated in predominantly female occupations, and tend to be workers rather than career professionals, the findings in studies of dual-career families are not necessarily reflective of women workers. This study sought to examine women workers in light of their complex of family structures and roles, worker roles, and workplace relationships.

The Significance of Family Structure

The pervasive effects of family structure were noted throughout this thesis. An underlying assumption guiding this inquiry was that family structure influences the amount and type of stress for dental assistants and hygienists. Prior research suggested that women in the potentially problematic family structures of single parent families and blended families would have more stress. Partial support for this hypothesis was found in the data.

Women in single-parent families were significantly more stressed than women in other family types, having higher levels of tensions from children and more financial problems than any of the other family types. This finding is certainly in accordance with the literature documenting the struggles of single parenthood (Burden, 1986; Garfinkel & McLanahan, 1986). Twenty-two of the thirty single parents were assistants, an occupation characterized by low pay and lack of benefits. It is not surprising that these women found it especially stressful to be a single-parent dental worker.

Although there was some support for the hypothesis that blended families would have higher levels of stress than intact families, they were not significantly different from families of first marriages in terms of stress from children. Perhaps the presence of another parent in the family, whether or not a biological one, helps relieve some of the stress of parenting. Some researchers suggest that much of the literature on blended families comes from clinical samples, or newly formed families, and does not reflect the experience of the norm of blended families (Ihinger-Tallman & Pasley, 1987). The findings from this sample suggest that blended families do not appear to differ from intact families with regard to tensions from children. The presence of another breadwinner also appears important;

blended families had very similar levels of financial stress to families in first marriages with children. The presence of children in the family, no matter what the family type, appears to contribute to both financial problems and tensions between marital and intimate partners. Families with children had more financial problems than families without children. The costs associated with raising children in America are escalating (Espenshade, 1984) and these costs are felt by the families in this sample. The incomes in these families are not large; perhaps they are particularly representative of the American family feeling the financial pressures of raising a family in today's economy.

Research on the presence of children and marital satisfaction has suggested that, for many couples, children can contribute to stress between spouses (Belsky & Rovine, 1990). For this sample, the families with children were significantly more stressed in their relationship with their intimate partners than families without children in the home. Spouses in blended families had the highest levels of tensions, followed by single parents, and couples in first marriages.

In families of remarriage, perhaps difficulties are found within the partner relationship rather than between parent and child because the biological parent may serve

as a buffer between step-parent and step-child. Cherlin (1983) has suggested that remarriage is an "incomplete institution", without established roles and norms. Each family must work out the family rules for themselves, and lack of agreement between spouses may lead to tensions.

Although biological parents may also disagree about parenting rules and norms, the lack of institutionalization of parenting norms for step-parents may lead to difficulties within the marital dyad. White and Booth (1985), in their study of remarriage, concluded that the presence of step-children was a "destabilizing influence" in remarriages and contributed to the higher rate of divorce in remarriages. Therefore, it is not surprising to find that, in families of remarriage, with more complex relationships, the presence of children may be a contributing factor to tensions between the spouses.

Because the women in the sample were specifically asked about "tensions with a spouse or intimate partner", the finding that single parents had tensions with an intimate partner is understandable. Many couples in America are choosing cohabitation rather than marriage, or cohabitation as a preface to marriage (Glick, 1990). Some of the single parents in this sample may be in such relationships, others may simply be involved with a partner, but not cohabiting. Research on single parents has focused on the difficulties these parents face in

having the opportunity and time to develop intimate relationships (Burden, 1986). The women in this sample who are single parents seem to have experienced difficulties in this area.

For women workers, the presence of children, regardless of family type, significantly increases levels of between-partner tensions. This lends credence to the belief that children are especially demanding of time and attention, and time is a finite resource.

The Influence of Occupational Status

Although dental assistants and hygienists have different tasks within the workplace and differing levels of status, the findings for this sample did not show significant differences between assistants and hygienists on tensions from children, tensions from spouse or intimate partner, or tensions from parents or in-laws. The differences between the two occupations were discernable in terms of their relative rewards and conditions of work.

Dental assistants received less pay than hygienists and had significantly more financial problems. However, the hygienist's job appears to be more costly in terms of physical and mental demands. Hygienists had significantly more mental and physical stress than assistants. In effect, hygienists were "paying the

price" for their better pay and presumably higher status in terms of more physical and mental stress.

Perhaps the most important note to make about these almost exclusively female occupations is that neither occupation has very good pay or benefits. Although hygienists and assistants have specialized training, this training is not particularly well-rewarded. These findings support the view that work traditionally performed by women is undervalued within American society (Needleman & Nelson, 1988). Analyses of women workers in terms of role overload and role enhancement have primarily examined these alternative theories in terms of women career professionals. This analysis focuses on women workers, rather than women career professionals, in an attempt to expand the literature on women's work roles and role theory. Worker roles may not be especially enhancing if they are both physically demanding and undervalued by both employers and society in general.

The Significance of Self-Disclosure at the Workplace

In this research, we were interested in whether or not women workers discussed intimate family matters with the hygienist or assistant at their workplace. Although talking occurred at the workplace, and included discussions of intimate family matters, there were no significant differences in number of talks or the depth

of self-disclosure among the family structure groups or occupational statuses. These findings suggest that self-disclosure is reciprocal within the dyad. In order to promote balance in the relationship and a comfortable working atmosphere, workers disclose on equal levels. This equality of self-disclosure promotes balance in the relationship (Altman & Taylor, 1973). Status and family structure are not as important as an equality of exchange.

The findings suggest women workers under financial stress report that they talk more to co-workers than those workers without financial stress. Since status and being married or remarried without children in the home were negatively and significantly related to talking, those groups with higher status (hygienists) and with two incomes but no children were less likely to need to consider financial problems because they were concomitantly less likely to encounter them.

Discussions about family matters may be limited for two reasons. First, it may be considered disloyal to discuss very much about immediate family members to co-workers. Although friends in the workplace may be important sources of information and social support it may be that, for tensions with other adult family members, the workplace may not be considered an appropriate place to discuss these difficulties. Indeed,

the shared activities, companionship, and ties in the workplace may help in lowering stress through the perception that others are there for the woman, without explicit discussion of the stressors they experience (Rook, 1987; Lamphere, 1985).

Women workers may carefully select topics for discussion at the workplace. For example, financial matters may be discussed at the workplace in hopes that these discussions will be "overheard" by the employer, resulting in a raise. Women workers may be reluctant to ask outright for an increase in wages. Audible discussion in a small workplace may be a covert method of introducing the need for an increased wage without actually having to approach the employer. Women workers, who have been socialized that more indirect forms of power plays are more acceptable overtures for women (Huston, 1983; Szinovacz, 1990), may find it more comfortable to use an indirect method in asking for more money. Asking for a raise is a difficult task, especially for workers whose work tends to be de-valued. Discussing financial matters within the workplace where these discussions can be overheard may be much less threatening.

For women workers, work and family do not occupy separate spheres. This study was developed to propose a conceptual model for occupational status, family

structure, workplace relationships, and types of family stress, with the belief that these variables operate together, rather than in isolation, for women workers. The analyses suggest that the inter-relationships of these variables is indeed complex and multi-dimensional. For example, occupational status and the presence of children are related to financial problems, and financial problems are frequently discussed in the workplace. The presence of children is also related to stress between partners, not an intuitively obvious link. These examples show that home, workplace, and interpersonal relationships are not separate spheres, but do affect each other in a complex, multi-dimensional process.

Limitations

This study employed cross-sectional rather than longitudinal data. Because workplace relationships probably operate as do other friendships, taking time to develop, longitudinal data might find that women who worked together would talk both more often and intimately about family matters. Many of the hygienists were part-time employees, and because they worked fewer hours at the workplace there may have been need for an expanded time dimension to develop workplace friendships.

A number of the respondents did not have talks with the hygienist or assistant they had worked with the

longest. This does not mean that talks between the respondents and other women workers did not take place. Assistants and hygienists occupy two statuses in the workplace. This research project was designed to elicit information from three different sources in the dental workplace, the assistant, the hygienist, and the dentist. Many offices have more than one assistant. Two workers of the same status may have been more comfortable disclosing to one another than to a co-worker of a different status. The effects of talking at the workplace may have been obscured by the effects of the status differential.

A related limitation of the study mentioned by the respondents was that we did not send questionnaires to office managers. Several respondents noted on their questionnaires that they felt we should have included office managers in our study. A more complete analysis of the workplace would have included surveying other women employees in the office. In an office with two assistants, a hygienist, and an office manager, the important workplace relationships may not have been the ones captured by our survey techniques.

Women workers in dental offices in Oregon may not be representative of women workers in general. Dental assistants and hygienists may be quite different from other workers in small offices. The specialized nature of their workplace may not make it possible to generalize

to other women workers, although dental workers are an interesting population because these occupations are almost exclusively female, and, as such, have the attributes of female-dominated occupations.

By requesting that the surveys be given to the assistant and hygienist who had worked in the office for the longest length of time, we may have assessed the more highly paid and occupationally stable work population in each office. However, the availability of a stable, trained workforce has been identified as a problem in the dental community (Anderson, 1991). Although we assessed the women who worked in the office the longest, their pay and benefits were generally minimal. Perhaps the high turnover in the dental community (Anderson, 1991) reflects these conditions of employment.

Although we asked detailed information about marital status and ages of children from the respondents, we did not ask about previous marital history of the respondent's spouses, non-residential step-children, or other possible family configurations. We were not able to determine in blended families the exact configuration of family members.

We also did not specifically inquire about whether or not older children may have remained in the home or returned to live in their parent's home. Women without children under nineteen had significant tensions from

children. In light of this finding, it appears that we may not have totally captured the family experiences of the respondents and their spouses, and further information would clarify their family structures.

For a number of reasons we could not make direct causal links. Exogenous variables could have influenced the results in these analyses. The influences of family, structure, workplace relationships, occupational status and stress may be bi-directional. Family structure challenges may lead to stress, but it could also be argued that stress may lead to changes in family structure. Stress from a difficult child may lead to breakdowns in the marital relationship, and a single family structure may be the product of this stress, rather than the causative factor.

Although caution must be used in generalizing the results of this study to other women workers, it contributes to the literature on families and work by looking at women workers rather than women professionals. Despite the limitations of the study, it provides an important snapshot of life inside what Bernard has labeled "the female world".

Suggestions for Future Research

Future exploration of predominantly-female occupations is needed. Although research on women

professionals is both illuminating and insightful, women professionals do not represent the vast majority of women workers. With the emphasis in research being concentrated on women professionals, the experiences and needs of women workers may be unexplored. Future research needs to consider the exploration of female occupations, especially those in the service sector. The greatest growth in jobs in the last ten years has been in the service sector (Bureau of Labor Statistics, 1988), and careful examination of the parameters of those jobs is needed. Such analysis would also provide clues as to the future of the nation's economic health and the economic health of families.

Consistent with other research, single parents were found to be especially stressed. Future research needs to consider the special needs and adjustments of this family structure. Although most single mothers are in the paid labor force, further research is needed on the work and family inter-relationships of these women. Single mothers in predominantly female occupations are likely to be poorly paid, as were the dental assistants in this sample. Research on single parents in similar occupations might reveal how these workers balance work and family commitments.

Much of the literature on family structure changes in the United States has focused on the consequences of

these changes for children (Demo, 1992). This study examined the consequences for women, rather than children. Children are certainly important, however, future research also needs to consider changes in family structure for the parents, especially women, who do the majority of the family work (Hochschild & Machung, 1989).

Kanter (1977) suggests that family and work have bi-directional influences. Her theory could also be tested by using information on women workers that could be analyzed using bi-directional methods of data analysis, such as a LISREL model. Future research could consider these bi-directional influences by gathering information on a large sample of women workers, including those in predominantly female occupations. Such an analysis would also capture the experiences of a large sample of women workers from all classes and occupations.

Such a bi-directional focus also might capture other dimensions of work and family. Children presumably provide some rewards, as well as costs. Inquiring about how satisfying the different social areas are as well as how stressful they are might provide useful supplementary information on life in different family structures.

From a policy perspective, research on women workers in traditionally female occupations is vital to changes to improve the health and well being of women and children in the United States. Currently, many of

America's children are being raised in families existing below the poverty line (Norton & Glick, 1986). Although there is a common misconception that there are no workers in these families, many of these families are single parent families, or families with two workers but low-paid, service sector employment. Research on the benefits, wages, employment opportunity experiences, and family lives of women workers would contribute needed information to policy makers.

Summary and Conclusion

The results of this study confirm family considerations impact women worker's lives. Women do not compartmentalize family and work; there is overlap between these areas in a woman's life. The participants in this study experienced stresses from spouses and intimate partners, children, parents, and financial matters. They also discussed family matters with their co-workers, especially if they were feeling financially stressed.

In terms of role theory, for women workers, previous literature assumed work roles were the stressful roles (Baruch, Biener, & Barnett, 1987; Feldberg & Glenn, 1979). However, this study suggests that family roles may also be perceived as stressful. Parenting appears to be an especially stressful role for women, particularly

when the woman is a single parent. Perhaps, as Baruch, Biener, and Barnett (1987) suggest, parenting roles may overload and work roles may be enhancing.

Work roles may also not be universally enhancing. Poorly paid work roles with low status and lack of benefits may not be viewed as enhancing by a woman worker. A small workplace with team-oriented working conditions may foster intimate ties, or create issues of power. More research needs to be done on women in traditionally female occupations.

This study contributes to the literature on families and work with the following findings:

(1) The presence of children is related to financial stress. Families with children have significantly more financial stress than families without children.

(2) The wage differential between different groups of women workers in the same workplace is reflected in their differing amounts of financial stress.

(3) Children contribute to stresses between intimate partners. Women who had children had more stress with their spouse or intimate partner than women without children.

(4) Family structure differences affect women workers. Women in single-parent families have significantly more stresses from children and finances than other family types.

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Appendices

Appendix A: Letter to Auxiliaries

College of Business



Corvallis, Oregon 97331

September 1989

Dear Dental Assistant:

As a dental assistant you are an important member of the dental office team. Your work and your attitudes contribute to the effectiveness of this dental office and influence your personal life. We ask for your help in our efforts to better understand the nature of the dental workplace and what contributes to work satisfaction for professionals who work there.

We have sent a packet of materials to a random sample of dental offices. The packet contained three questionnaires, one for the dentist, one for the assistant who has worked in this office the longest, and one for the hygienist who has worked in this office the longest. With the information you provide, we will be able to inform dentists about what types of office practices and benefits dental assistants most prefer.

We request that you complete the survey on your own time. Please refrain from discussing the questionnaire with others until you have completed and placed it in the mail.

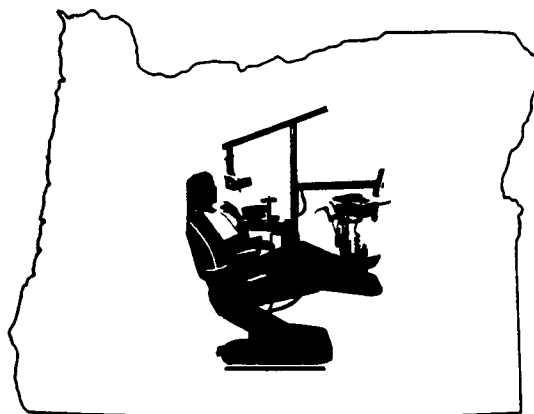
As the offices were selected from lists of licensed dentists, we have no way of knowing your identity. You will remain completely anonymous, the dentist that you work with will never know your specific responses unless you want to discuss them with him or her. The number on the questionnaire will help us match the people who work together so we can learn what types of work settings are most conducive to your job satisfaction. If you wish to have a copy of the results of the survey, please complete the attached postcard. Thank you for your help.

Sincerely,

Dennis O. Kaldenberg, Ph.D.
Research Associate
Professional Services Program
(503) 737-3016

Anisa Zvonkovic, Ph.D.
Assistant Professor
Human Development and Family Sciences
(503) 737-4765

Appendix B: Questionnaire Form

A Study of Dental Offices**assistant form**

We need your input to understand better the nature of work in the dental office. With the information collected, we will be able to identify factors that contribute to job satisfaction for dentists, dental assistants, and dental hygienists.

You may obtain a summary of the findings of this study by writing your name and address on the enclosed postcard and mailing it back separate from the questionnaire. Or, to save postage charges, you may enclose a card with your name and address in the envelope with the returned questionnaire.

Please complete this survey and return it in the enclosed envelope to:

D. O. Kaldenberg
Professional Services Program
College of Business
Oregon State University
Corvallis, Oregon 97330
(503) 737-3016

We appreciate your contribution to this project.

1. These questions assess your satisfaction with your job

Here are some words and phrases which we would like you to use to describe how you feel about your job. For example, if you think your job is very "enjoyable," put an X in the box right next to the word "enjoyable". If you think it is very "miserable," put an X in the box right next to "miserable". If you think it is somewhere in between, put an X where you think it belongs.
PUT AN X IN ONE BOX ON EVERY LINE.

enjoyable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	miserable
discouraging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	hopeful
full	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	empty
friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	lonely
boring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	interesting
useless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	worthwhile
disappointing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	rewarding
brings out the best in me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	doesn't give me a chance
hard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	easy
free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	tied down

All things considered, how satisfied or dissatisfied are you with your job as a whole these days? Place an X in the box that best describes how satisfied you are:

completely satisfied		neutral		completely dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please go to the next page

2. The following questions assess how you have been feeling lately

Below are a number of conditions that may be related to work stress. For each of the following, please indicate the extent to which you are bothered by condition listed. For each condition, circle the appropriate number from the scale below to indicate how bothered you are by it.

- 1 = NEVER
 2 = RARELY
 3 = OCCASIONALLY
 4 = FREQUENTLY
 5 = ALWAYS

	Never	Rarely	Occasionally	Frequently	Always
How frequently are you bothered by					
a. trouble sleeping	1	2	3	4	5
b. soreness of muscles	1	2	3	4	5
c. eye strain.....	1	2	3	4	5
d. feeling critical of others.....	1	2	3	4	5
e. feeling easily annoyed or irritated	1	2	3	4	5
f. headaches	1	2	3	4	5
g. feeling low in energy or slowed down.....	1	2	3	4	5
h. nervousness/shakiness.....	1	2	3	4	5
i. backaches.....	1	2	3	4	5
j. nausea.....	1	2	3	4	5
k. feeling pushed to get things done.....	1	2	3	4	5
l. colds or flu.....	1	2	3	4	5
m. financial problems	1	2	3	4	5
n. tensions from your parents or in-laws	1	2	3	4	5
o. tensions from your children	1	2	3	4	5
p. tensions with your spouse or intimate partner.....	1	2	3	4	5

Please turn the page

3. These questions assess how well you like doing certain tasks

In providing dental service to your patients, you may find that the dentist delegates certain tasks to you. For each dental procedure listed below, circle the number that corresponds most closely to your how comfortable you would be if the dentist asked you to perform this task. Use the following scale:
(choose response from choices listed below and circle appropriate number beside each task)

- 1 = I would be VERY COMFORTABLE completing this procedure
 2 = I would be SOMEWHAT COMFORTABLE completing this procedure
 3 = I would be SOMEWHAT UNCOMFORTABLE completing this procedure
 4 = I would be VERY UNCOMFORTABLE completing this procedure

	VERY COMFORTABLE		VERY UNCOMFORTABLE	
Oral inspection.....	1	2	3	4
Administer nitrous-oxide analgesia.....	1	2	3	4
Place composite resin into cavity prepared by dentist.....	1	2	3	4
Give infiltration injections.....	1	2	3	4
Give block injections.....	1	2	3	4
Place or remove rubber dam.....	1	2	3	4
Place matrices or wedges.....	1	2	3	4
Condense amalgam into cavity prepared by dentist	1	2	3	4
Carve an amalgam restoration.....	1	2	3	4
Hold in place and remove impression.....	1	2	3	4
Adjust contacts and occlusion of the restoration in mouth.....	1	2	3	4
Insert a temporary filling or crown.....	1	2	3	4
Remove excess cement.....	1	2	3	4
Oral hygiene instruction.....	1	2	3	4

Please go to the next page

4. These questions assess your satisfaction with job benefits

The types of benefits available with a job vary considerably. To help us determine the nature of job benefits found in dental practices, please examine the list below. Circle the number that comes closest to describing how satisfied you are with your office's decisions regarding that benefit. *Using the following scale circle the number beside the benefit that best corresponds to your opinion.*

- 1 = VERY SATISFIED
- 2 = SOMEWHAT SATISFIED
- 3 = SOMEWHAT DISSATISFIED
- 4 = VERY DISSATISFIED
- 5 = DON'T RECEIVE BENEFIT

	VERY SATISFIED		VERY DISSATISFIED		DON'T RECEIVE BENEFIT
pay	1	2	3	4	5
health insurance	1	2	3	4	5
paid vacation	1	2	3	4	5
retirement/pension.....	1	2	3	4	5
profit sharing	1	2	3	4	5
continuing education	1	2	3	4	5
regular performance review	1	2	3	4	5
paid sick days	1	2	3	4	5
number of hours worked	1	2	3	4	5

5. These questions assess your satisfaction with office safety

As with any occupation, exposure to risks may occur as a part of normal practice activity. There are many ways of dealing with risk-filled situations, and we need to understand the different ways that dental practices respond to such situations. Would you please indicate how adequate you feel your office's policies are for dealing with the following potential risks. *Please select a response from those listed below and circle the appropriate number beside each issue.*

- 1 = VERY ADEQUATE
- 2 = SOMEWHAT ADEQUATE
- 3 = SOMEWHAT INADEQUATE
- 4 = VERY INADEQUATE
- 5 = OFFICE HAS NO POLICY

	VERY ADEQUATE		VERY INADEQUATE		NO POLICY
treatment of AIDS/HIV positive patients.....	1	2	3	4	5
handling of hazardous waste	1	2	3	4	5
exposure to hepatitis B	1	2	3	4	5
infection control	1	2	3	4	5
meeting OSHA requirements	1	2	3	4	5
staff exposure to X-rays	1	2	3	4	5
staff exposure to hazardous substances	1	2	3	4	5
drug use / substance abuse	1	2	3	4	5

Please turn the page

The following questions assess various qualities of your dental office. *Please circle the number that most closely corresponds with your agreement with each of the following statements.*

- 1 = STRONGLY AGREE
 2 = SOMEWHAT AGREE
 3 = NEITHER AGREE OR DISAGREE
 4 = SOMEWHAT DISAGREE
 5 = STRONGLY DISAGREE

	STRONGLY AGREE				STRONGLY DISAGREE
6. These questions assess office formality					
a. Work relationships in this office are really informal	1	2	3	4	5
b. Everyone who works here always knows exactly what is expected of them	1	2	3	4	5
c. Everything is always "by the book" in this office.....	1	2	3	4	5
d. In this office, the staff calls the dentist "Doctor".....	1	2	3	4	5
e. Each person working in this office has very clear duties.....	1	2	3	4	5
f. Working in this office is like working for a bureaucracy.....	1	2	3	4	5
7. These questions assess work atmosphere in your office					
a. Working in this office is like working with friends.....	1	2	3	4	5
b. A new staff member would immediately feel comfortable here.....	1	2	3	4	5
c. There is a good working atmosphere in this office	1	2	3	4	5
d. I feel tense in this office.....	1	2	3	4	5
e. I dread coming to work	1	2	3	4	5
f. Thinking about work makes me anxious.....	1	2	3	4	5
g. I feel very loyal to this office	1	2	3	4	5
h. There is not much to gain by sticking with this office indefinitely	1	2	3	4	5
i. Deciding to work for this office was a mistake	1	2	3	4	5
j. I like my job because I like the people who work in this office.....	1	2	3	4	5
k. I support independent practice for dental hygienists.....	1	2	3	4	5
l. I believe hygienists will be permitted to practice independently.....	1	2	3	4	5
m. My input contributes to office policy decisions.....	1	2	3	4	5
n. I find I have to use all my niceness and charm to have my say in decisions around this office.....	1	2	3	4	5
o. The dentist invites my involvement in office policy decisions without my having to work at making myself heard.....	1	2	3	4	5

Please go to the next page

	STRONGLY AGREE				STRONGLY DISAGREE
8. These questions assess the practice management attitudes of the dentist who gave you this questionnaire					
a. Being a professional success means a lot to this dentist	1	2	3	4	5
b. This dentist thinks he/she knows some tricks in the practice of dentistry that other dentists don't know.....	1	2	3	4	5
c. This dentist's philosophy is to search for good staff and then stay out of their way while they do their jobs.....	1	2	3	4	5
d. This dentist is alert to tiny details of the business aspects of the practice.	1	2	3	4	5
e. Concerning office management, one of this dentist's mottos could be: "Don't put off until tomorrow what can be done today".....	1	2	3	4	5
f. In this office, <u>planning</u> is the watchword, both short-term and long-term.	1	2	3	4	5
g. Staff members' input about the practice can really change what we do in this office.....	1	2	3	4	5
h. This dentist doesn't tend to know a lot about the personal problems of the staff members.....	1	2	3	4	5
i. This dentist talks to each of the staff members about their personal career development.....	1	2	3	4	5
j. This dentist believes staff should not use the office telephone for personal calls.....	1	2	3	4	5
k. This dentist makes all of the decisions in this office	1	2	3	4	5
l. This dentist's practice management skills are excellent.....	1	2	3	4	5
m. When this dentist sees work from other dentists, she/he thinks that her/his is better.....	1	2	3	4	5
n. If I ran into this dentist outside of the office I would call him/her doctor.....	1	2	3	4	5
o. This dentist frequently checks in on the staff while they're working to see how they are doing.....	1	2	3	4	5
p. This dentist believes he/she gets more work done when the staff are independent of him/her	1	2	3	4	5
q. Maintaining a good image in the community is very important to this dentist.....	1	2	3	4	5
9. These questions assess attitudes about your life and job					
a. Most important things that happen involve my work	1	2	3	4	5
b. I live, eat, and breathe my job	1	2	3	4	5
c. I consider a job to be central to one's existence	1	2	3	4	5
d. Most of my interests are centered around my job	1	2	3	4	5
e. I have strong ties to my job which are difficult to break	1	2	3	4	5
f. Most of my personal life goals are job-oriented	1	2	3	4	5
g. Nowadays, I seem to enjoy every part of my life equally well.....	1	2	3	4	5
h. Many other things in my life are more important to me than my job..	1	2	3	4	5

Please turn the page

10. Approximately how long have you been working for the dentist who gave you this questionnaire?
 (please fill in the blanks)

_____ YEARS _____ MONTHS

11. These questions assess the nature of your interaction with the dentist who gave you this questionnaire.

Please think of this person when you respond to the statements below. For each statement select a response from the following rating scale and circle appropriate number beside the statement.

- 1 = NEVER
- 2 = RARELY
- 3 = OCCASIONALLY
- 4 = FREQUENTLY
- 5 = ALWAYS

Never Rarely Occasionally Frequently Always

We talk about each other's satisfactions and triumphs.....	1	2	3	4	5
I respect this person as a professional.....	1	2	3	4	5
In general, our conversations focus on the positive.....	1	2	3	4	5
I have confidence that this person's work is skillfully done.....	1	2	3	4	5
Our conversations typically focus on our jobs.....	1	2	3	4	5
Our conversations turn into gripe sessions about work.....	1	2	3	4	5
We empathize with each other about things that get us down at the office.....	1	2	3	4	5
If it wasn't for this person I would want to work somewhere else.....	1	2	3	4	5
Our conversations deal with many different topics	1	2	3	4	5
Working with this person is like working with a friend.....	1	2	3	4	5
I admire this person's positive attitude about life.....	1	2	3	4	5
We do things together outside of the office.....	1	2	3	4	5
I feel I know this person well	1	2	3	4	5
Our lives are better because of each other	1	2	3	4	5
Our relationship is somewhat strained	1	2	3	4	5
I go away from our conversations tense and upset.....	1	2	3	4	5
We like each other.....	1	2	3	4	5
We spend lunch or break time together	1	2	3	4	5

Please go to the next page

12. These questions assess the nature of verbal communication between you and the dentist

Please continue to think about the dentist who gave you this questionnaire. How frequently, if at all, do you have very personal talks with this dentist during which you tell them some details of your life that you wouldn't share with very many people? (circle number)

- 1 WE NEVER HAVE SUCH TALKS -----> If NEVER, skip to Question 14
- 2 A FEW TIMES A YEAR
- 3 ONCE A MONTH
- 4 A COUPLE OF TIMES A MONTH
- 5 ONCE OR TWICE A WEEK
- 6 EVERY DAY OR ALMOST EVERY DAY

13. The next series of questions asks about the kinds of things you might talk about during these very personal talks. Circle YES if you ever talk about the item listed, NO if you have never talked about the item listed.

DO YOU TALK ABOUT:

- a. Work? YES NO
- b. Money? YES NO
- c. Co-Workers? YES NO
- d. Activities (example, what you're doing after work or on the weekend)? YES NO
- e. Family members (for example; children or parents)? YES NO
- f. Friends? YES NO
- g. Your relationship with a spouse or partner? YES NO
- h. Personal things that you wouldn't share with your spouse or intimate partner? YES NO
- i. Other personal problems (example? _____) YES NO

14. Does a dental hygienist work in this office?

- 1 NO ---> If no, please skip to question 19
- 2 YES ---> If yes, please continue to next question

Please turn the page

15. Consider for a moment the dental hygienist who has worked in this office the longest. Approximately how long has this person worked in this office? (fill in the blanks)

_____ YEARS _____ MONTHS

16. These questions assess the nature of your interaction with the dental hygienist who has worked in this office the longest. Please think of this person when you respond to the statements below. For each statement, select response from the following rating scale and circle appropriate number beside the statement.

- 1 = NEVER
- 2 = RARELY
- 3 = OCCASIONALLY
- 4 = FREQUENTLY
- 5 = ALWAYS

Never Rarely Occasionally Frequently Always

We talk about each other's satisfactions and triumphs.....	1	2	3	4	5
I respect this person as a professional.....	1	2	3	4	5
In general, our conversations focus on the positive.....	1	2	3	4	5
I have confidence that this person's work is skillfully done.....	1	2	3	4	5
Our conversations typically focus on our jobs.....	1	2	3	4	5
Our conversations turn into gripe sessions about work.....	1	2	3	4	5
We empathize with each other about things that get us down at the office.....	1	2	3	4	5
If it wasn't for this person I would want to work somewhere else.....	1	2	3	4	5
Our conversations deal with many different topics	1	2	3	4	5
Working with this person is like working with a friend.....	1	2	3	4	5
I admire this person's positive attitude about life.....	1	2	3	4	5
We do things together outside of the office.....	1	2	3	4	5
I feel I know this person well	1	2	3	4	5
Our lives are better because of each other	1	2	3	4	5
Our relationship is somewhat strained	1	2	3	4	5
I go away from our conversations tense and upset.....	1	2	3	4	5
We like each other.....	1	2	3	4	5
We spend lunch or break time together	1	2	3	4	5

Please go to the next page

17. These questions assess the nature of verbal communication between you and the hygienist

Continue to think about the hygienist who has worked here the longest. How frequently, if at all, do you have very personal talks with this person during which you tell them some details of your life that you wouldn't share with very many people? (circle number)

- 1 WE NEVER HAVE SUCH TALKS -----> If NEVER, skip to Question 19
 2 A FEW TIMES A YEAR
 3 ONCE A MONTH
 4 A COUPLE OF TIMES A MONTH
 5 ONCE OR TWICE A WEEK
 6 EVERY DAY OR ALMOST EVERY DAY

18. The next series of questions asks about the kinds of things you might talk about during these very personal talks. Circle YES if you ever talk about the item listed, NO if you have never talked about the item listed.

DO YOU TALK ABOUT:

- | | | |
|--|-----|----|
| a. Work? | YES | NO |
| b. Money? | YES | NO |
| c. Co-Workers? | YES | NO |
| d. Activities (example, what you're doing after work or on the weekend)? | YES | NO |
| e. Family members (for example; children or parents)? | YES | NO |
| f. Friends? | YES | NO |
| g. Your relationship with a spouse or partner? | YES | NO |
| h. Personal things that you wouldn't share with your spouse or intimate partner? | YES | NO |
| i. Other personal problems (example? _____) | YES | NO |

Please turn the page

19. These questions assess the nature of the practice in which you work

Please provide the number of the following types of staff employed by this office who are full-time, and the number who are part-time. *(Please fill in the blank)*

	Number Full-Time	Number Part-Time
dentists	_____	_____
hygienists	_____	_____
assistants	_____	_____
bookkeepers	_____	_____
receptionists	_____	_____
other staff	_____	_____

20. These questions assess office congeniality

NUMBER OF PEOPLE

- a. How many of the people who work in this office would you say you know very well? *(circle number of people)* 0 1 2 3 4 5+
- b. How many of the people who work in this office do you consider close personal friends? *(circle number of people)* 0 1 2 3 4 5+
- c. With how many of the people who work in this office do you have very personal talks? *(circle number of people)* 0 1 2 3 4 5+

- 20d. If you have talks, how frequently do they occur? ← _____
- 1 EVERY DAY OR ALMOST EVERY DAY
 - 2 ONCE OR TWICE A WEEK
 - 3 A COUPLE OF TIMES A MONTH
 - 4 ONCE A MONTH
 - 5 A FEW TIMES A YEAR

21. The following questions assess the nature of work in this office

- a. Approximately how many hours per week did you typically work in this office during 1988 *(fill in the blank)*

_____ HOURS PER WEEK

Please go to the next page

- b. In your office, how many hours a week do you spend working with a dentist or other staff by your side? *(fill in the blank)*

_____ HOURS PER WEEK

- c. Which category best describes the practice of the dentist who gave you this survey? *(circle number)*

- 1 SOLO PRACTITIONER
- 2 SOLO PRACTITIONER BUT SHARE SPACE
- 3 ASSOCIATESHIP
- 4 EMPLOYED BY ANOTHER DENTIST
- 5 EMPLOYED IN AN HMO
- 6 MILITARY
- 7 EDUCATOR
- 8 OTHER (Please specify _____)
- 9 GROUP PRACTICE

- How many dentists, everyone included, are in the group? *(Please fill in number below)*

_____ DENTISTS

- d. Which of the following best describes the dentist who gave you this survey? *(circle number)*

- 1 GENERAL PRACTITIONER
- 2 ORTHODONTIST
- 3 PERIODONTIST
- 4 ENDODONTIST
- 5 PROSTHODONTIST
- 6 ORAL SURGEON
- 7 PEDIATRIC DENTIST
- 8 OTHER (specify _____)

- e. Does this office have a manual for employees? *(circle number)*

- 1 NO
- 2 YES

- f. Does this office have an OSHA manual? *(circle number)*

- 1 NO
- 2 YES

- g. How frequently does this office have staff meetings? *(circle number)*

- 1 NEVER
- 2 DAILY
- 3 WEEKLY
- 4 TWICE A MONTH
- 5 MONTHLY
- 6 SEVERAL TIMES A YEAR
- 7 YEARLY

Please turn the page

- h. How many years have you worked for this practice? *(please fill in the blank)*
 _____ YEARS IN THIS PRACTICE
- i. How many week days did you call in sick in 1988? *(please fill in the blank)*
 _____ DAYS SICK
- j. How many week days did you take as vacation in 1988? *(please fill in the blank)*
 _____ DAYS
- k. Do you work as an auxiliary in a dental office other than this one? *(circle number)*
- 1 NO
 - 2 YES
- IF YES, How many hours do you work in other dental offices *(circle number)*
- 1 15 HOURS OR LESS
 - 2 16 to 20 HOURS
 - 3 21 TO 25 HOURS
 - 4 26 TO 30 HOURS
 - 5 31 TO 35 HOURS
 - 6 36 TO 40 HOURS
 - 7 MORE THAN 40 HOURS

The following questions on personal characteristics are used to make statistical comparisons. Please remember that you are responding anonymously and that all data will remain strictly confidential.

22. Marital Status *(circle number)*

- 1 NEVER MARRIED
 - 2 SINGLE AFTER DIVORCE
 - 3 SINGLE AFTER DEATH OF SPOUSE
 - 4 SEPARATED
 - ← 5 REMARRIED AFTER DIVORCE
 - ← 6 REMARRIED AFTER DEATH OF SPOUSE
 - ← 7 MARRIED (FIRST MARRIAGE)
- If married, does your spouse work in the practice?
- 1 YES -----> In what capacity? _____
 - 2 NO -----> What is spouse's occupation? _____
- If married, how long have you been in this marriage?
 _____ YEARS

Please go to the next page

23. Gender (circle number)

- 1 FEMALE
- 2 MALE

24. Please give the month, day, and year of your birth (please fill in the blank)

___/___/___ MONTH/DAY/YEAR

25. Please give highest educational degree you have earned. (circle number)

- 1 GRADE SCHOOL
- 2 HIGH SCHOOL
- 3 VOCATIONAL DENTAL ASSISTANT CERTIFICATE
- 4 ASSOCIATE'S DEGREE
- 5 BACHELOR'S DEGREE } → _____ (please specify major)
- 6 GRADUATE DEGREE

↳ 25a. In what year did you receive this degree? (please fill in the blank)

19 __ __

26. How many children do you have in each age group listed below? (Enter number on the lines)

_____ UNDER 5 YEARS OF AGE

_____ 5 TO 13

_____ 14 TO 18

_____ 19 TO 24

_____ 25 AND OLDER

27. What was your Net Personal Income from working as a dental auxiliary, before taxes, in 1988? (circle number)

- | | |
|------------------------|-------------------------|
| 1 \$10,000 OR LESS | 7 \$35,001 TO \$40,000 |
| 2 \$10,001 TO \$15,000 | 8 \$40,001 TO \$45,000 |
| 3 \$15,001 TO \$20,000 | 9 \$45,001 TO \$50,000 |
| 4 \$20,001 TO \$25,000 | 10 \$50,001 TO \$55,000 |
| 5 \$25,001 TO \$30,000 | 11 \$55,001 TO \$60,000 |
| 6 \$30,001 TO \$35,000 | 12 MORE THAN \$60,000 |

28. What was your Net Family Income from all sources, before taxes, in 1988? (circle number)

- | | |
|------------------------|---------------------------|
| 1 \$10,000 OR LESS | 7 \$60,001 TO \$70,000 |
| 2 \$10,001 TO \$20,000 | 8 \$70,001 TO \$80,000 |
| 3 \$20,001 TO \$30,000 | 9 \$80,001 TO \$90,000 |
| 4 \$30,001 TO \$40,000 | 10 \$90,001 TO \$100,000 |
| 5 \$40,001 TO \$50,000 | 11 \$100,001 TO \$150,000 |
| 6 \$50,001 TO \$60,000 | 12 MORE THAN \$150,000 |

Please turn the page

Please use the space below to tell us anything else you would like us to know about your job or the office in which you work.

**Thanks so much
We sincerely appreciate your contribution to our effort**