Does Work Pay Psychologically as Well as Economically? The Role of Employment in Predicting Depressive Symptoms and Parenting Among Low-Income Families

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This longitudinal study examined quantity and quality of maternal employment as predictors of depressive symptoms and parenting style in a sample of 94 low-income mothers whose 4-year-old children were enrolled in Head Start at baseline. Results suggest that answers to the question of whether work "pays" are complex: Findings suggest some benefits of greater employment participation while also indicating that women holding lower prestige jobs experienced increases in their use of negative parenting style, net of baseline demographic and psychological characteristics. Sparse evidence for selection processes was found, with cohabitation and maternal depressive symptoms modestly predictive of subsequent maternal employment. Implications of these findings for welfare reform and educationally related policies for low-income families are discussed.

Since the passage of the Personal Responsibility and Work Opportunity Reconciliation Act in 1996, low-income women have faced increasing policy pressure to work outside the home. An initial wave of research on the effects of welfare reform focused primarily on whether programs were successful in reducing welfare caseloads and in moving low-income women from reliance on public assistance into work. A growing second wave of research has addressed questions of the impact of these employment programs on families' psychosocial well-being and children's social, behavioral, and academic outcomes (Chase-Lansdale & Brooks-Gunn, 1995; Huston et al., 2001; Morris, 2002). For example, recent findings regarding the positive effects of a wide range of welfare reform demonstration projects suggests that benefits accrued to children through families' use of program-supported child care (Huston et al., 2001; Morris, 2002). But families' participation in a host of additional work, parenting, and social service supports was not found to significantly affect their levels of depressive symptoms, or their use of more effective parenting styles (Huston et al., 2001; Morris, 2002).

Interestingly, these findings open debate to broader questions regarding whether low-wage work can reasonably be expected to have a positive or negative effect on parenting among poor families (Brady-Smith, Brooks-Gunn, Waldfogel, & Fauth, 2001). Increasingly, a number of investigators have argued for the utility of asking whether low-income families benefit materially and psychologically from increased maternal employment in contexts outside of experimental welfare-reform-related research projects (Jackson, Brooks-Gunn, Huang, & Glassman, 2000). Although questions regarding the impact of maternal employment on child outcomes have largely been addressed among middle-income and affluent families (Desai, Chase-Lansdale, & Michael, 1989; Harvey, 1999), less is known regarding the impact of maternal employment on the psychological and emotional well-being of low-income families.

In addition, many low-income families are served through a second avenue of intervention, namely, early educational programs that may facilitate maternal employment as well as provide young children with preschool experience (Brooks-Gunn, Berlin, & Fuligni, 2000; Tout, Zaslow, Papillo, & Vandivere, 2001). Yet, most developmental research on early educational interventions such as Head Start have not generally reported on mothers'...
Hypothesized benefits using maternal employment among low-income families with young children. It then goes on to report tests of hypotheses regarding whether work is predictive of improvements or decrements in low-income, Head Start-enrolled mothers' depressive symptoms and parenting style over a 2-year period.

**Hypothesized Effects of Maternal Employment: Good, Bad, or Indifferent?**

Working in a financially and psychologically rewarding job may have clear benefits for low-income mothers and their families. Prior research using large nationally representative data sets suggests that increases in employment and exits from welfare are associated with improvements in poor families' income, home environments, and long-term benefits for children (Garrett, Ng'andu, & Ferron, 1994; Meyer & Cancian, 1998; Zill et al., 1995). Young mothers participating in self-sufficiency activities such as work, education, or training have been found to be less emotionally negative and less controlling than mothers who did not participate in such activities (Aber, Brooks-Gunn, & Maynard, 1995; Zaslow, Tout, Smith, & Moore, 1998). At first glance, this suggests that higher levels of low-income mothers' participation in the workforce should be associated with improvements in parenting.

To explain these potential improvements, several mechanisms of work's influence on family functioning have often been suggested. First, employment may have salutary effects on mothers' emotional and psychological well-being, providing families with a sense of daily routine and women with a positive set of socially organizing and supportive experiences outside the home (Wilson, 1987). Second, mothers' employment might be expected to indirectly affect family well-being by increasing family income, which might in turn alleviate the psychological stress of trying to provide for one's family with limited resources. Lower psychological distress, in turn, may improve adults' ability to interact in warm, supportive, and emotionally positive ways with their children (Conger et al., 1992; Desai et al., 1989; McLoyd, 1990). It is important to qualify such a positive view of maternal employment's hypothesized benefits: Increasing family income and decreasing poverty-related stressors may be a difficult task for low-income working women to accomplish when their wage rates are low (Ellwood, 1988; Jackson et al., 2000). With this qualification in mind, much research and antipoverty policy is premised on the hypothesis that increased maternal employment will at least modestly benefit poor families.

On the other side of the debate, some recent research suggests that the effects of low-income workforce entry on family functioning may be negative rather than positive. The psychological benefits of work may be outweighed by its psychological costs: Some low-income women may face overwhelming work demands at menial, unstable jobs with little control over their work environment and little flexibility or support in meeting those demands (Karasek & Theorell, 1990; Long, 1998; Rosenfield, 1989). As low-income women face greater work stresses, their ability to parent successfully may be increasingly compromised (Wilson, Ellwood, & Brooks-Gunn, 1995). Importantly, employment in jobs that are more menial and are lower in complexity appears to have negative effects on child outcomes among educationally disadvantaged, lower-income families (Menaghan & Parcel, 1995; Parcel & Menaghan, 1994). One possible mechanism for this finding may be that women who work longer hours in more menial jobs may become more depres-sed as they struggle to find adequate child care, deal with the demands of low-wage work, and have less time to complete routine household and caregiving tasks (Edin & Lein, 1997; Wilson et al., 1995; Zaslow et al., 1998). This may not bode well for parenting, given that prior research suggests that mothers facing higher levels stress and depression show less responsiveness and lower consistency in setting limits (Downey & Coyne, 1990; Wilson et al., 1995).

A third possibility is that work has no demonstrable effects on mothers' depressive symptoms and parenting. Recent reanalyses of the National Longitudinal Survey of Youth (NLSY) considered the effects of timing, extensiveness, and intensity of mothers' work involvement on children and found few significant effects (Harvey, 1999). Similarly, results from studies of mothers leaving welfare for work suggest that, although the benefits of mothers' participation in a host of employment-related services are open to question, it appears that participation is not, at least, causing serious harm (Duncan & Chase-Lansdale, 2001; Dunifon, Kalil, & Danziger, 2003; Morris, Huston, Duncan, Crosby, & Bos, 2001).

**Hypothesized Effects of Work, Reconsidered**

How is it that some studies conclude that work has a positive effect, other studies conclude that
work has a negative effect, and a third set of studies find no effect? Differences in findings may be due to the ways in which women's personal and household characteristics may serve as unmeasured or omitted variables that are predictive of both their workforce participation outside the home and their use of differing styles of parenting within the home (Waldfogel, Han, & Brooks-Gunn, 2002). Mothers' educational level, age, and ethnic minority status have been consistently identified as unmeasured family background characteristics that are likely to be associated with women's parenting styles and their access to and participation in more psychologically and financially rewarding jobs (Brady-Smith et al., 2001). The effects of juggling work and family responsibilities are likely to be different for mothers residing in one- versus two-parent households as well, with single mothers experiencing significantly higher financial, psychological, and caregiving strain than mothers in two-parent households (Ali & Avison, 1997; Jackson et al., 2000). Single mothers may have less opportunity to leave a "bad" job in the absence of financial support from a spouse or partner (Menaghan & Parcel, 1995). When researchers control for these potential confounds in their analyses, associations between employment and parenting outcomes drop and are often no longer significant (Brady-Smith et al., 2001).

Second, some investigators have suggested that women's psychological characteristics (such as their levels of depressive symptoms and their cognitive and emotional responses to stressful situations) may also serve as unmeasured or omitted variables that could explain observed associations between mothers' employment and their parenting styles (Kalil, Dunifon, & Danziger, 2001; Mayer, 1997; Yoshikawa, Rosman, & Hsueh, 2001; Zaslow et al., 1998). Mothers who struggle with high levels of depressive symptoms have been found to face more difficulty in finding and keeping jobs as well as having more difficulty in using optimal parenting styles (Danziger & Kalil, 2002; Ginexi, Howe, & Caplan, 2000; Yoshikawa, 1999). Research on occupational health suggests that although lower prestige work is associated with employees' more negative mood, the direction of influence between job quality and employees' experience of negative emotion remains unclear (De Jonge et al., 2001; Long, 1998). In short, by virtue of these individual differences in age, skills, mental health, and disposition, several investigators have argued that some mothers may elect (or be constrained by greater personal or structural obstacles) into more materially disadvantaged circumstances; less employment at more menial, unstable jobs; and patterns of more harsh and negative parenting (e.g., Mayer, 1997).

This study responded to these concerns by using a longitudinal design and a set of time-lagged models, offering a conservative test of the impact of maternal employment on family outcomes by controlling for earlier levels of those outcomes (Duncan, Yeung, Brooks-Gunn, & Smith, 1998; Menaghan, Jekielek, Mott, & Cooksey, 1998). To address concerns for selection bias, this study considered maternal employment as an endogenous, mediating variable. Correspondingly, earlier assessments of (a) family background characteristics and (b) psychological characteristics such as mothers' depressive symptoms and emotionally negative parenting style at Time 1 are modeled as exogenous variables that could potentially predict both quantity and quality of mothers' employment and mothers' psychological and parenting outcomes at Time 2. As illustrated in Figure 1, this model extends prior models of income loss, psychological distress, and negative parenting (Conger et al., 1992; Jackson et al., 2000; McLoyd, 1990) to test hypotheses regarding the impact of the quantity and quality of mothers' employment on their depressive symptoms and parenting style, among families with preschool-aged children.

An alternate approach would be to carry out fixed-effects models whereby possible omitted variables that threaten claims of causality are essentially removed from analyses by regressing changes in an outcome variable (such as depressive symptoms or parenting) on changes in the predictor variable (such as employment; see Dearing, McCartney, & Taylor, 2001; Duncan et al., 1998). Fixed-effects models offer the opportunity to make stronger claims regarding causality between dependent and independent variables. Fixed-effects models have several drawbacks as well as strengths, however: They require a large sample size, do not allow the investigator to address endogeneity or selection, and may be less useful when capturing lagged developmental effects over time (Chase-Lansdale et al., 2003). Given this study's focus on selection processes into employment and its inclusion of a relatively small group (N < 100) of lower-income mothers, tests of mediation were selected over a fixed-effects modeling approach (for additional discussion of selection and the omitted variables problem, see Burchinal & Nelson, 2000; Foster, 2002).

Differences in the conclusions drawn in the extant literature on the impact of mothers' work on child and family functioning may also have been due to differences in definitions of maternal employment and to different approaches taken toward the
measurement of parenting style. The availability of good-quality child care for working mothers has represented an additional confound in prior research. It is to these additional potential confounds that this paper now turns.

**Expanding Definitions of Employment and Parenting**

Early research on the impact of maternal employment on child outcomes considered work in categorical terms, comparing outcomes for unemployed versus employed mothers (Harvey, 1999). Later definitions of work were expanded to consider timing of work (such as within the first year of the child’s birth; e.g., Belsky, 1988), duration of work (e.g., number of years of early childhood that a mother works; see Harvey, 1999, for review), and quantity or intensity of work involvement (e.g., considering earnings as an index of low-income women’s quantity of employment; Morris, Bloom, Kemple, & Hendra, 2003).

Broadening the focus from quantity to quality of work, Menaghan, Parcel, and colleagues have focused extensively on the type of jobs held by employed mothers. Specifically, mothers’ job entry into low-wage, menial jobs has been found to exert a negative effect on the family’s home environment, as measured using Caldwell and Bradley’s (1984) Home Observation of Measurement of the Environment (HOME) assessment (Menaghan & Parcel, 1995). There was less of a drop in caregiving quality for women entering better paying, higher quality jobs. Occupations that require low skill, low levels of autonomy, and high levels of repetition have been argued to have a negative rather than positive impact on mental health (Gecas, 1989; Zill et al., 1995). Alternately, participation in a rewarding and relatively supportive workplace may have clear, salutary effects on low-income mothers’ mental health (Klebanov, Brooks-Gunn, Chase-Lansdale, & Gordon, 1997). In this study, ratings of occupational prestige were used as a rough index of the extent to which occupations are more or less menial (Mortimer & Lorenz, 1979) to test whether a “good” job is better than a “bad” job in psychological and family functioning terms (see also Jackson et al., 2000).

In addition, this study took a comprehensive look at the style of parenting used by working and nonworking mothers in low-income families. Following developmental research that suggests that parents resort to more power-assertive and coercive strategies of discipline when under greater financial strain (Dodge, Pettit, & Bates, 1994; Elder, Eccles, Ardelt, & Lord, 1995; Mcloyd & Wilson, 1991), this study focused on mothers’ use of firm limit-setting versus coercive practices as an important index of optimal parenting. Recently, several investigators have argued that firm limit setting and high monitoring represent a normative form of “no-nonsense” parenting that is associated with optimal child outcomes, particularly for African American children (Brody & Flor, 1998; Deater-Deckard & Dodge, 1997).

Recent theoretical models suggest that parents resort to more harsh and coercive parenting styles as a result of their own rising feelings of anger, irritation, and distress, particularly as economic and psychological pressures mount (Brody et al., 1994; Conger et al., 1992; Mistry, Vandewater, Huston, & Mcloyd, 2002; Raver, 2002). Parents’ emotional expressiveness appears to influence not only their parenting styles but also children’s
development of later emotional and social competence, among both middle- and low-income samples (Cassidy, Parke, Butkovsky, & Braungart, 1992; Denham & Grout, 1993; Garner, Jones, & Miner, 1994; Isley, O'Neil, Clatfelter, & Parke, 1999; Raver & Spagnola, 2002). In light of these findings, this study included measures of mothers' expressiveness of feelings of anger, frustration, and irritation, both in the context of caring for their children and in creating a general family emotional climate. In so doing, this study aimed to fill an empirical gap between the developmental literature on family emotional processes, which often leaves questions of maternal employment unaddressed, and the literature on maternal employment, which must often rely on relatively few survey items (e.g., from Caldwell and Bradley's 1984, HOME assessment) as rough proxies of parenting style.

The cost, quality, and availability of child care have been identified as a third set of confounds in previous research on maternal employment, parenting, and child outcomes. To control for this type of confound, this study was carried out among women who enrolled their children in Head Start programs, which provides fully subsidized, high-quality child care as well as transportation for participating children to eligible families. Previous research indicates that Head Start families are no more advantaged, and may be more disadvantaged, than nonenrolled families (General Accounting Office, 1994; Hofferth, 1994; Schnur, Brooks-Gunn, & Shipman, 1992). However, given that Head Start serves only 60% of the eligible poor children and their families, the trade-off in using a Head Start-enrolled sample is that family characteristics that lead families to use Head Start may make them seriously nonrepresentative of low-income families as a group. Therefore, substantial caution is taken when making any broad claims regarding work, parenting, and the study's findings.

**Study Hypotheses**

First, in keeping with models of poverty, psychological distress, and parenting (Jackson et al., 2000; McLoyd, 1990), mothers' increased participation in the workforce was expected to be associated with improvements in parenting and maternal mental health over time. That is, increases in mothers' work hours and higher levels of maternal earnings were expected to be associated with lower depressive symptoms and lower use of emotionally negative parenting style at Time 2, even after taking into account mothers' demographic and psychological characteristics (such as age, ethnic minority status, residence in a one- versus two-parent household, prior levels of depressive symptoms, and prior parenting style).

Second, considering quality, as well as quantity of mothers' employment may strengthen our understanding of the impact of maternal employment on mental health and parenting. Although mothers' increased quantity of employment might be expected to have salutary effects on parenting and mental health, lower quality of employment was expected to be predictive of decrements in mothers' mental health and parenting over time. This study examined whether mothers' participation in "good" versus "bad" jobs is associated with these family outcomes, net of their demographic characteristics, earlier levels of depressive symptoms, and parenting styles at Time 1.

Third, this study tested the hypothesis that some mothers face more barriers than others in the amount they can work and in the types of jobs they can hold, and that these barriers also pose problems for mothers' mental health and parenting. In short, models of the role of work in predicting mothers' depressive symptoms and parenting were tested using conservative forms of estimation, where possible selection processes into more work, greater mental health, and optimal parenting were included (e.g., Mayer, 1997). To test this hypothesis, mothers' quantity and quality of employment were modeled as endogenous to, rather than exogenous to, demographic characteristics, maternal depressive symptoms, and parenting over time.

It is important to qualify these hypotheses in light of the study's small sample and the risk of Type II error. Any null findings could be due to lack of statistical power, and therefore the following analyses are considered exploratory rather than definitive. With that caveat, this study aimed to contribute to the research literatures outlined earlier by providing a more complex characterization of the psychological benefits and costs of work for a small group of low-income, Head Start-enrolled mothers.

**Method**

**Sample**

At Time 1 (1997–1998), 146 mothers with low incomes (as defined by Head Start eligibility guidelines) and a target child, ages 3.8 to 4.6, were enrolled in a related study on parenting and children's social and emotional development from Head Start sites in urban and rural settings in
upstate New York. These settings included (a) set of working-class and poor neighborhoods, primarily composed of African American families in a large, industrial Northeastern city (Rochester, New York) and (b) a set of low- to middle-income, isolated farming communities, primarily composed of White families, in a sparsely populated, rural county (Tompkins County, New York) 100 miles south of the urban community described previously. Two years later at Time 2, 100 of the 146 families were reinterviewed (yielding a follow-up response rate of 68%), and extensive questionnaire and observational data were collected during a second home visit (see the following for more extensive analyses of attrition).

For each family visit, families were debriefed, thanked, and reimbursed $20. Complete longitudinal data were available for 94 families, where the same female caregiver completed all assessments at both time points. Family incomes at Times 1 and 2 were deflated to 1997 values. Average income at both time points was less than or equal to $20,000 ($M_{T1} = $17,568 and $M_{T2} = $20,604) for families that averaged two adults and three children. Families' reported incomes as well as use of Head Start and public assistance (with slightly more than one third of mothers reporting that their households had gone "on" or "off of welfare" in the past year) suggests that the families included in this study can be fairly characterized as low-income at the time of assessment.

Between-site comparisons suggest that samples in rural versus urban sites were strongly racially segregated, with few African American families enrolled in the rural Head Start centers and few White families enrolled in the urban Head Start centers. Mothers were, on average, 29.93 years of age, with no significant difference in age found between sites. A majority of mothers in both settings had worked during some portion of the 2 years before their participation in this study. Analyses of between-group differences on all exogenous and endogenous variables suggest that rural and urban mothers did not differ on most demographic characteristics, except that rural mothers were significantly more likely to be married than urban mothers (Pearson chi-square = 15.87, p < .001). Because few differences were found, based on mothers' residence, rural and urban subsamples were combined for all analyses.

Attrition

Two years after the Time 1 interviews, follow-up interviews were conducted with 94 of the 146 female caregivers at Time 2. Analyses of participant attrition suggest that there were no significant differences between followed and nonfollowed women on Time 1 measures of income, ethnic minority status, age, employment status, likelihood of urban versus rural residence, or family size. To detect whether relations among demographic, psychological characteristics, and work involvement differed with the full versus smaller, followed-up subsample, employment (current hours worked per week) at Time 1 was regressed on all demographic characteristics, depressive symptoms, negative parenting, and followed-up versus attrited status as a moderator (including followed-up status and age, ethnicity, cohabitation, education, income, depressive symptoms, and negative parenting as two-way interaction terms). Overall regression equations were not statistically significant, and of all seven interaction terms entered, only one interaction term (Followed-Up Status × Negative Parenting) approached significance at the .08 level. Post hoc examination of correlations for larger and followed-up subsamples revealed weak correlations of similar magnitude and direction, suggesting that this marginal finding was spurious. In all other cases, correlations among demographic characteristics, psychological characteristics, and employment did not differ for the followed-up sample versus the larger sample.

Procedures

Families from eight Head Start sites were initially asked for their permission to be contacted by the research staff through a multistep process (e.g., mailings, discussions with Head Start outreach staff, and research staff's presentations at Head Start parent orientation meetings and potlucks). Of those families initially agreeing to be contacted, 80% enrolled in the study by scheduling and completing a 2-hr home visit at Time 1. Reasons for nonenrollment following families' initial contact with research study staff included parents' lack of interest or time, family relocation, and child's withdrawal from the Head Start program. All data reported were collected during parent interviews conducted at Time 1 in the fall of the families' enrollment into Head Start (in 1997–1998) and again at Time 2 (when most children were entering first grade, in 1999–2000). Interviews included a demographic questionnaire (assessing demographic characteristics, family income, and parents' history of employment over the past 2 years), parents' depressive symptoms (Center for Epidemiological Studies Depression Scale [CES–D], Radloff, 1977), expres-
siveness of negative emotions such as anger and irritation (Halberstadt, Cassidy, Stifter, Parke, & Fox, 1995; Raver, 2002), and parenting (Gerard, 1994). After the parental interview was completed, the parent was debriefed, thanked, and reimbursed $20 as a token of the interviewer’s appreciation.

Measures

Following Garcia Coll et al. (1996) and others, all measures were screened for their appropriateness for use with both White and ethnic minority families. Most of those listed in the following discussion have a solid track record in their use with low-income communities and were expected to be culturally sensitive and appropriate for use in this study. As an index of each measure’s internal consistency, Cronbach’s alphas are provided for all psychological and parenting scales in Table 1.

At Time 1, mothers’ current employment status (e.g., whether mothers were currently working, and hours per week currently working) was collected during interviews. At Time 2, more extensive indexes of mothers’ employment entry, exits, and length of work participation were collected during parent interviews, including start and end dates for each job, job title, description of each job, and number of hours worked per week for the last job held, for the 2 years before the family visit.

Quantity of mothers’ employment was coded two ways. Following Menaghan and Parcel (1995), “changes in hours currently employed” across the two time periods were calculated from hours worked per week (including 0) at mothers’ currently held job at Time 2 minus hours worked per week (including 0) at mother’s currently held job at Time 1. One concern might be that such an index may not fully capture the work involvement of women who may have worked substantially during the interim but may be currently unemployed. A second, less stringent assessment of quantity of mothers’ employment, in terms of their yearly earnings from Time 1 to Time 2 was calculated to credit women with any recent work held in the last 2 years (Morris et al., 2003; Morris et al., 2001). “Yearly earnings from Time 1 to Time 2” was calculated by multiplying the number of months worked in that interval (from 0 to 24) by the number of hours worked per week in the last job held and the dollar amount of hourly pay received by mothers at their last job. This value was multiplied by 4 (weeks per month) and divided by 2 (years elapsed between Time 1 and Time 2) to yield a rough estimate of mothers’ yearly earnings. Quality of employment was also assessed. Specifically, General Social Survey scores of job prestige were coded for mothers’ most recently held jobs at Time 2 and were used as a rough proxy for the extent to which a given job was considered menial.

Mothers’ depressive symptoms were assessed using the CES-D scale for depressive symptomatology (Radloff, 1977). This scale has demonstrated reliability and validity with middle- and low-income populations (Radloff, 1977) and has been used extensively in studies of associations among financial strain, employment, and low-income women’s depressive symptoms (Lennon, Bloom, & English, 2001). Mothers’ mean scores at Time 1 and 2 were in the elevated but not clinical range ($M_{T1} = 11.65$, $SD = 7.69$, range = 0–37; $M_{T2} = 12.07$, $SD = 9.35$, range = 0–48), with 26% of mothers scoring in the clinical range (scores of 16 or above) at Time 1 and 20% of mothers scoring in the clinical range of symptomatology at Time 2. The scale yielded high internal consistency at both time points (see Table 1).

Parents’ expressiveness of negative emotions such as anger and irritation was assessed using two measures. The negative dominant subscale of the Self-Expressiveness in the Family Questionnaire (SEFQ; Halberstadt et al., 1995) taps parents’ proneness to expressions of anger and hostility and was used to assess the extent to which parents maintained an angry emotional climate in the home. The SEFQ is a parental report measure of the predominant style of emotional expressiveness used by the respondent in the context of everyday family events, correlates moderately with observed measures of parents’ expressed affect during laboratory tasks (Cassidy et al., 1992; Halberstadt et al., 1995), and has been found to be reliable and valid with low-income samples (Garner et al., 1994; Greenberg, Lengua, Coie, & Pinderhughes, 1999). An additional 11-item questionnaire was added to assess parents’ ability to maintain emotional equilibrium when faced with childrearing challenges, with items such as: “Bedtimes are a quiet, peaceful time for us,” “I get angry when I have to tell my child the same thing, over and over again,” and “I feel ‘rattled’ when the family gets loud or noisy.” High scores on the scale represent mothers’ reports of more emotional equilibrium or low levels of anger and irritation during routine caregiving situations. Scale scores were reversed for this study to correspond with the negative dominant subscale of the SEFQ (Halberstadt et al., 1995, see the following). Both scales yielded good internal consistency across both time points (see Table 1).

Parents’ use of coercive versus firm limits was assessed using the 12-item limit-setting subscale of
the Parent–Child Relationship Inventory (PCRI; Gerard, 1994). The subscale includes such items as: “I have trouble disciplining my child” and “I often threaten to punish my child but never do.” Previous research with this measure suggests that it is a valid index of parenting with high-risk, ethnic minority populations, and it correlates well with other measures of childrearing (MacPhee, Fritz, & Miller-Heyl, 1996). Alpha and test–retest reliabilities have been high with White and ethnic minority families (MacPhee et al., 1996), and the inventory yielded adequate internal consistency across both time points (see Table 1).

The three measures of family emotional climate and disciplinary style (high expressiveness of anger and irritation, low ability to maintain emotional equilibrium during routine caregiving, and high use of coercive versus firm limit setting) were positively associated (ranging from \( r = .22 \) to \( r = .47 \), \( p < .05 \)), suggesting that they represent three important components of emotionally negative parenting style. Following Rushton, Brainerd, and Pressley (1983), the three measures were therefore standardized within Time 1 and Time 2 assessments and were aggregated so that the number of parameters to be estimated could be reduced when using structural equation modeling (SEM) techniques (see also Kline, 1998).

**Results**

**Overview of Planned Analyses**

First, descriptive statistics are provided on the quantity of employment (in terms of hours worked at current jobs at Times 1 and 2, changes in hours worked at current employment from Time 1 to Time 2, and yearly earnings from Time 1 to Time 2) and work quality (in terms of occupational prestige) in Table 1. Additional descriptive statistics regarding mothers’ depressive symptoms and their parenting styles are also provided for both time points.

Then, simultaneous SEM-fitting techniques were used to test hypotheses regarding work’s impact on mothers’ depressive symptoms and parenting style at Time 2, net of prior parenting and mental health and a set of demographic characteristics. Structural

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**Table 1**

*Descriptive Data for Mothers’ Demographic, Psychological, and Employment Characteristics*

<table>
<thead>
<tr>
<th>Variable</th>
<th>( M (SD) )</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Demographic characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mothers’ age</td>
<td>29.93 (7.90)</td>
<td>18.00–55.00</td>
</tr>
<tr>
<td>% African American</td>
<td>46%</td>
<td></td>
</tr>
<tr>
<td>% cohabiting or married</td>
<td>62%</td>
<td></td>
</tr>
<tr>
<td><strong>Psychological characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depressive symptoms at Time 1 (( \alpha = .85 ))</td>
<td>11.65 (7.69)</td>
<td>1.00–37.00</td>
</tr>
<tr>
<td>Depressive symptoms at Time 2 (( \alpha = .88 ))</td>
<td>12.07 (9.35)</td>
<td>0.00–48.00</td>
</tr>
<tr>
<td>Negative parenting at Time 1</td>
<td>0.00 (2.35)</td>
<td>–4.81–6.84</td>
</tr>
<tr>
<td>Mean SEFQ ND subscale score T1 (( \alpha = .72 ))</td>
<td>3.83 (1.06)</td>
<td>2.00–6.80</td>
</tr>
<tr>
<td>Emotional equilibrium T1 (( \alpha = .68 ))</td>
<td>40.83 (5.72)</td>
<td>19.00–59.00</td>
</tr>
<tr>
<td>T score, PCRI limit-setting subscale T1 (( \alpha = .80 ))</td>
<td>50.11 (9.49)</td>
<td>29.00–76.00</td>
</tr>
<tr>
<td>Negative parenting at Time 2</td>
<td>0.00 (2.30)</td>
<td>–4.96–6.88</td>
</tr>
<tr>
<td>Mean SEFQ ND subscale score T2 (( \alpha = .83 ))</td>
<td>3.89 (1.23)</td>
<td>1.80–8.00</td>
</tr>
<tr>
<td>Emotional equilibrium T2 (( \alpha = .70 ))</td>
<td>41.38 (6.09)</td>
<td>28.00–57.00</td>
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<tr>
<td>T score, PCRI limit-setting subscale T2 (( \alpha = .77 ))</td>
<td>50.53 (8.16)</td>
<td>33.00–76.00</td>
</tr>
<tr>
<td><strong>Employment characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% mothers currently working, T1</td>
<td>52%</td>
<td></td>
</tr>
<tr>
<td>Hours per week worked at job, T1</td>
<td>18.58 (19.86)</td>
<td>0.00–80.00</td>
</tr>
<tr>
<td>% mothers currently working, T2</td>
<td>65%</td>
<td></td>
</tr>
<tr>
<td>Hours per week worked at job, T2</td>
<td>32.12 (16.39)</td>
<td>0.00–60.00</td>
</tr>
<tr>
<td>Change in hours worked at current job, T2–T1</td>
<td>5.43 (21.53)</td>
<td>–48.00–52.00</td>
</tr>
<tr>
<td>Months worked, T1 to T2</td>
<td>15.97 (9.18)</td>
<td>0.00–24.00</td>
</tr>
<tr>
<td>Average pay per hour at last job, T2</td>
<td>7.65 (4.40)</td>
<td>0.00–19.30</td>
</tr>
<tr>
<td>Mothers’ yearly earnings, T1 to T2</td>
<td>10,872 (8,891)</td>
<td>0–37,060</td>
</tr>
<tr>
<td>Average occupational prestige score at last job, T2</td>
<td>36.83 (6.92)</td>
<td>22.00–57.00</td>
</tr>
</tbody>
</table>

*Note. SEFQ ND = Self-Expressiveness in the Family Questionnaire negative dominant quadrant; PCRI = Parent–Child Relationship Inventory.*
equation models were estimated using Amos software (Arbuckle & Wothke, 1999, version 4.01) to examine the goodness of fit for a model that included the two exogenous variables of mothers' negative parenting style and depressive symptomatology at Time 1 as well as the three exogenous demographic characteristics of mothers' age, ethnic minority status, and cohabiting status. These five variables were modeled as predictors of the endogenous variables of negative parenting style and depressive symptomatology at Time 2. In each of the three sets of analyses reported next, work quantity or quality was hypothesized to function as a third, mediating endogenous variable.

Best-fitting models are represented in Figure 2 with disturbance terms and nonsignificant path coefficients left off of figures for ease of interpretation. Associations between Time 1 variables and demographic characteristics are also left off of figures for ease of interpretation (and are available in Table 2). Because small sample size limits statistical power to detect effects of substantive interest (e.g., associations between demographic characteristics, work, and mothers' outcomes), alpha levels were set at .05 to detect statistically significant effects and were relaxed to .10 to detect and interpret statistically marginal effects.

For each SEM analysis of the role of a given employment variable (e.g., mothers' yearly earned income), a set of nested models was tested for relative improvements in fit. A baseline model included paths from all exogenous variables (e.g., Time 1 depression, Time 1 parenting, plus the three demographic control variables) to both outcome variables (depression at Time 2 and parenting at Time 2), with paths from exogenous variables to the given employment variable constrained to equal 0. Additional models estimated relative improvement in model fit by freeing paths from demographic control variables to the employment variable and by freeing paths from Time 1 depressive symptoms and Time 1 parenting style to the employment variable.

What can these additional models tell us? If selection processes play a role in leading some mothers both to be working less and to increase their use of more negative parenting, for example, these more complex models should yield significantly lower chi-square values. They should also yield statistically significant parameter estimates for paths from mothers' psychological and demographic characteristics at Time 1 to both the mediating employment variable and the Time 2 outcomes. If, on the other hand, freeing additional parameters in these more complex models does not yield significant changes in the model's chi-square value, the baseline model would be considered to offer the best fit. Best-fitting models are presented later in the text, after the studies descriptive employment statistics are reported.

Demographic Characteristics and Maternal Employment Between Time 1 and Time 2

Descriptive data for mothers' demographic, psychological, and employment characteristics are provided in Table 1. On average, mothers were significantly more likely to be currently working at Time 2 than at Time 1, \( \chi^2(1, 93) = 8.47, p < .01 \), with one half of the mothers employed at the time of the initial interview, and two thirds of the mothers employed at Time 2. When asked if they had ever worked in the 2 years between assessments, 82 of the 94 mothers had held a job for 5 hr a week or more sometime in the past 2 years.

### Table 2
**Intercorrelations Between Key Variables**

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Age</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2. Cohabiting with partner</td>
<td>.11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Ethnic minority status</td>
<td>-.20</td>
<td>-.37**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Change in hours worked per week, T1 to T2</td>
<td>-.03</td>
<td>.25*</td>
<td>-.11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Yearly earnings, T1 to T2</td>
<td>.04</td>
<td>.10</td>
<td>.07</td>
<td>-.06</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Prestige, last job, T2</td>
<td>-.11</td>
<td>.09</td>
<td>.01</td>
<td>.04</td>
<td>.27**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Depressive symptoms, T1</td>
<td>-.26**</td>
<td>-.05</td>
<td>.12</td>
<td>-.02</td>
<td>-.17*</td>
<td>.05</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Negative parenting, T1</td>
<td>-.25*</td>
<td>-.19*</td>
<td>.20*</td>
<td>-.16*</td>
<td>-.03</td>
<td>-.04</td>
<td>.45**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Depressive symptoms, T2</td>
<td>-.03</td>
<td>.03</td>
<td>.12</td>
<td>-.15*</td>
<td>-.08</td>
<td>.06</td>
<td>.47**</td>
<td>.21*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Negative parenting, T2</td>
<td>-.15†</td>
<td>-.15†</td>
<td>.12</td>
<td>-.11</td>
<td>-.14†</td>
<td>-.24*</td>
<td>.33**</td>
<td>.64**</td>
<td>.39**</td>
<td></td>
</tr>
</tbody>
</table>

*Note: N = 94 (except for correlational values for prestige, N = 82).*

*†p < .10 (one-tailed). *p < .05 (one-tailed). **p < .01 (one-tailed).*
Analyses of mothers' employment histories yielded a complex portrait of the quantity and quality of work that low-income mothers engaged in over the 2 years. Mothers worked on average 32 hr a week, a little less than 16 months out of the 24 months between visits, and were paid $7.65 an hour on average. Regarding occupational prestige, the bulk of mothers held blue-collar jobs in service, manufacturing, and clerical sectors. Typical jobs held by mothers in this sample included cashier, certified nurse's assistant, child care provider, and assembler. Mothers reported considerable instability or cycling in and out...
of unemployment, with 39% of mothers in the sample experiencing at least one episode where they had lost or left a job. In addition, 44% of mothers had worked continuously and the remaining 17% moved from unemployed to employed status.

Generally, mothers reported elevated, but not clinical, levels of depressive symptomatology at both Time 1 and Time 2. Twenty-six percent of mothers scored in the clinical range of depressive symptoms at Time 1, and 20% of mothers scored in that same range at Time 2. These findings suggest that this group of mothers may be relatively more advantaged than women who have recently left welfare, where percentages of women who fall above clinical cutoff scores for depressive symptomatology range from 40% to 60% of women surveyed. Zero-order correlations of all key study variables included in subsequent SEM analyses are provided in Table 2.

Analyses of Quantity of Maternal Employment, Mothers' Depressive Symptoms, and Parenting Style

For the first set of structural equation models, changes in hours employed per week (hours employed per week at Time 2 minus hours employed per week at Time 1) was included as the employment variable to be tested. Results suggest that a trimmed model with Time 2 outcomes predicted by (a) all demographic variables, (b) depressive symptoms and parenting at Time 1, (c) the employment variable, and (d) work predicted by mothers' cohabiting status, fit the data best, $\chi^2 = 3.14, df = 6, p = .79$ ($\Delta \chi^2 = 6.01, \Delta df = 1, p < .01$ over the baseline model). Final model fitting indexes suggest a reasonable fit to the model (illustrated in Figure 2a), with Bentler-Bonnet normed fit index (NFI) = .98 and root mean square error of approximation (RMSEA) = .00. Figure 2a shows that parameter estimates for change in hours employed as a predictor of mothers' depressive symptoms at Time 2 were marginally significant, with increased hours worked associated with slight decrease in mothers' depressive symptoms from Time 1 to Time 2 ($\beta = -.16, p < .10$). It is important to note that mothers' depressive symptoms and mothers' parenting style demonstrated considerable stability over time (bets = .48 and .58, $p < .001$, respectively) and that mothers' increase in work hours predicted variance in their Time 2 depressive symptoms net of mothers' prior history of depressive symptoms, parenting style, and demographic characteristics at Time 1. Figure 2a also illustrates that cohabitation played a significant role in predicting changes in mothers' work hours over time, with cohabitation associated with working more hours per week from Time 1 to Time 2 ($\beta = .25, p < .01$). When additional models were estimated to test whether changes in work hours were endogenous to mothers' depressive symptoms and parenting style at Time 1, these models did not yield a significant improvement in fit and were rejected.

A second set of analyses was then conducted with mothers' yearly earnings included in the model as the endogenous measure of work quantity (see Figure 2b). A more complex model with a single freed path from mothers' depressive symptoms at Time 1 as a predictor of mothers' yearly earnings between Time 1 and Time 2 yielded the best fit to the data, $\chi^2 = 5.26, df = 6, p = .51$ ($\Delta \chi^2 = 2.75, \Delta df = 1, p < .10$ over the baseline model). Fit indexes for this final model were good, Bentler-Bonnet NFI = .96 and RMSEA = .00. As illustrated in Figure 2b, mothers' higher yearly earnings were modestly predictive of decreases in their use of a negative parenting style ($\beta = -.13, p < .10$). In addition, mothers experiencing higher levels of depression at Time 1 earned less from Time 1 to Time 2 ($\beta = -.17, p < .10$). A third model with additional paths from demographic characteristics at Time 1 as predictors of mothers' yearly earnings from Time 1 to Time 2 did not yield significant improvement in fit.

In sum, parameter estimates yielded from these two models of mothers' quantity of employment suggest benefits of maternal employment, with higher levels of work participation predicting (a) mothers' lower depressive symptoms at Time 2, net of their prior histories of symptomatology, and (b) mothers' lower use of negative parenting styles, net of their prior use of emotionally negative parenting. Inspection of parameter estimates also suggests that there was some sparse evidence for the endogeneity of quantity of employment, in that cohabiting women were more likely to have increased their work hours from Time 1 to Time 2 and more depressed mothers at Time 1 reported lower earnings in the 24 months from Time 1 to Time 2 than did mothers who were less depressed at Time 1. In contrast, negative parenting style at Time 1 was not significantly associated with changes in amount of employment nor with mothers' earnings over time.

Predicting Mothers' Depressive Symptoms and Negative Parenting Style at Time 2 From the Quality of Mothers' Employment

Next, a third set of analyses were undertaken to examine whether the quality of the last job that mothers held at Time 2 was a significant predictor of
mothers' depressive symptoms and parenting at Time 2, net of demographic characteristics and mothers' initial psychological and parenting status at Time 1. This model was estimated for all mothers who had held at least one job in the past 2 years (N = 82). Structural equation models were conducted with job prestige as the work variable of interest.

Tests of nested structural equation models suggest that the baseline model (with demographic characteristics, depressive symptomatology, and negative parenting style at Time 1 included as predictors of Time 2 outcomes only but not as predictors of job prestige) offered the best fit, $\chi^2 = 3.05$, $df = 5$, $p = .69$, Bentler-Bonnet NFI = .99, RMSEA = .00. Inspection of the parameter estimates yielded from this final model yields a conservative estimate of the associations among job quality, depressive symptoms, and parenting at Time 2, net of demographic and psychological factors. As illustrated in Figure 2c, mothers' employment in more menial, lower prestige jobs is associated with increases in mothers' use of more angry, coercive parenting styles from Time 1 to Time 2 (beta = -.23, $p < .001$). No evidence for selection processes was found in predicting the quality of mothers' employment from Time 1 to Time 2 in this sample, as indicated by the lack of fit offered by more complex models where job prestige was modeled as endogenous to mothers' demographic and psychological characteristics.

Discussion

Does work pay, in psychological as well as economic terms, for the mothers of preschool-aged children in this study? The first two sets of analyses suggest that there may be benefits of higher levels of workforce participation for mothers' mental health and parenting over time. Increases in mothers' work hours were predictive of decreases in mother's depressive symptoms over time. In addition, mothers' higher earned income from Time 1 to Time 2 was predictive of decreases in mothers' use of angry and coercive parenting style at Time 2, net of their demographic characteristics and their earlier mental health and parenting histories. These findings are in keeping with other recent reports on the positive impact of work and self-sufficiency activities on depressive symptoms and parenting in other, larger, randomized studies (Duncan & Chase-Lansdale, 2001).

It is important to note that effect sizes for the quantity of employment in predicting family well-being in this study are small, suggesting that the benefits of work are modest, at best. Conditions of financial hardship may be so substantial for working poor families that mothers are hard pressed to meet their families' needs even when working, given their wage rates (Danziger & Kalil, 2002; Edin & Lein, 1997; G Yamfi, Brooks-Gunn, & Jackson, 2001; Jackson et al., 2000). The findings of this study support others' recent welfare-related research suggesting that the effort to strengthen family functioning through mandated employment for low-income mothers may be relatively ineffective unless policy initiative is taken to make work pay in economic terms.

In light of this study's positive findings regarding mothers' workforce participation, is it fair to conclude that any job is a good job for low-income mothers and their families? This study's third set of analyses suggest that claims of the benefits of maternal employment should be strongly qualified by considering the quality of the jobs that low-income women must take. Results from this study suggest that mothers who worked in lower prestige jobs were likely to become significantly more angry and coercive in their parenting style over time. This association between occupational prestige and parenting held, net of contributions made by mothers' demographic and psychological background characteristics. Reviews of studies across a wide range of welfare reform demonstration programs are equivocal regarding whether a human capital investment approach, emphasizing mothers' further education and training, is better or worse than a work-first approach, encouraging women to take the first job available (Morris, 2002). These findings suggest that there are potential negative ramifications of unstable, low-paying, and stressful jobs on family functioning (see Jackson et al., 2000, for similar cross-sectional findings; Greenberger, O'Neil, & Nagel, 1994). Women who quickly cycle back out of work and onto public aid may be doing so because of the costs that low-wage, unstable, stressful work may have for both mothers and their families in psychosocial as well as economic terms (Edin & Lein, 1997). Questions of the value of human capital investments in mothers' education and training may become more salient in the next few years, given the possibility of higher rates of unemployment, more difficulty placing low-income women in jobs, and slowing U.S. economic growth.

How can these two sets of findings (of benefits associated with work participation on the one hand and worrisome risks associated with lower job quality on the other) be reconciled? Work may have positive effects on mental health by reducing financial strain for women who are able to find and keep higher paying, less stressful, higher
prestige jobs. For mothers entering low-quality jobs, however, the psychological costs may outweigh the financial benefits. Specifically, quantity of work may have been moderated by the type of job that mothers held: Long hours at a stressful, menial, or physically taxing job may contribute to mothers' feelings of depression, frustration, and fatigue, whereas long hours at a psychologically and financially rewarding job may have more positive effects. These questions of moderation must be saved for future analyses with larger and more nationally representative data sets.

Because it was nonexperimental in design, this study cannot provide definitive evidence that work causally affects mothers' mental health and parenting over time. What this study can do is provide relatively conservative estimates of work as a predictor of family processes by controlling for a set of demographic and psychological factors that might seriously bias our estimates. In addition, work as a predictor of family functioning was tested against a selection hypothesis that demographic and psychological characteristics such as age, ethnicity, single-parent status, depressive symptoms, and proneness to angry interpersonal style pose significant obstacles to some mothers' ability to find and keep good jobs.

In keeping with prior research, sparse evidence for selection processes was found, with mothers' depressive symptoms appearing to serve as a significant barrier to the amount that mothers earned over time (Danziger, Corcoran, Danziger, & Hefflin, 2000; Jackson et al., 2000; Yoshikawa, 1999). Mothers' prior history of depressive symptoms was not found to be predictive of the quality (e.g., prestige) of their work, however, congruent with findings by other investigators in the area of occupational strain (De Jonge et al., 2001). Among the demographic characteristics considered as predictors of mothers' workforce participation, cohabitation with a spouse or partner predicted modest increases in mothers' weekly work hours. These findings suggest that further research is needed on the structural factors inside and outside the family that may influence mothers' workforce participation.

This study provides an important portrait of the employment experiences of low-income mothers who participate in Head Start. Findings suggest that most low-income mothers of Head Start-enrolled children in this study were working outside the home in a range of service, clerical, manufacturing, and entry-level health care jobs. One half of the mothers in rural and urban sites were working when children were enrolled and two thirds were working 2 years later, with almost all mothers having held at least one job in the intervening 2 years. Regarding their mental health and parenting, fully 26% of mothers scored in the clinical range of depressive symptoms at Time 1 and 20% of mothers scored in that same range at Time 2. These rates of depressive symptomatology are lower than has been found in other studies of low-income mothers (Danziger & Kalil, 2002; Derr, Douglas, & Pavetti, 2001; Lennon et al., 2001) but are nonetheless likely to have significant negative ramifications for family and child well-being over time (Alpern & Lyons-Ruth, 1993; Belle, 1990; Leadbeater, Bishop, & Raver, 1996; Petterson & Albers, 2001). In light of other recent post-welfare-reform studies, it is clear that this group of mothers may be relatively more advantaged and less depressed than similarly aged women who have recently left welfare (Coiro, 2001; Danziger & Kalil, 2002; Gyamfi et al., 2001). With that qualification in mind, these mothers clearly face many of the same economic and psychological pressures to make ends meet by working in low-wage jobs, as has been reported elsewhere (e.g., Edin & Lein, 1997).

In summarizing the implications of this study's findings, several additional caveats are in order. This study's use of a small and nonrepresentative sample suggests that the generalizability of these findings are limited and that null findings regarding relations between mothers' demographic characteristics and employment may have been due to inadequate statistical power. In addition, this study emphasized possible parenting mechanisms that may link maternal employment and child outcomes, based on McLoyd's economic stress model of financial hardship and family process (see McLoyd, 1990; Mistry et al., 2002). This study did not examine other equally important investments models of influence, whereby parents balance trade-offs between being able to spend time and earned income on their children with parenting assessed in terms of monitoring, supervision, and the provision of cognitively stimulating materials and activities (Bradley, Corwyn, McAdoo, & Garcia Coll, 2001; Duncan et al., 1998; Gennetian & Miller, 2002; Gershoff, Aber, & Raver, 2002; Han, Waldfoleg, & Brooks-Gunn, 2001).

Finally, small sample size precluded this study from a closer examination of several additional moderating factors that may play a key role in relations between work and parenting. This study's small sample size precluded tests of important additional moderating influences of mothers' residence in one- versus two-parent households, ethnic minority membership, or residence in an urban versus rural setting. For example, given that African
American and White families reside in spatially segregated neighborhoods with widely differing rates of joblessness (Brooks-Gunn, Duncan, & Aber, 1997), that African American women face significantly greater barriers to higher paying employment and have a much longer history of greater labor force participation than do White women (Dill, 1987), models would be expected to fit differently for these two groups. Multiple-group path analyses with a much larger sample would yield clearer answer to these questions.

Thus, findings of this study raise a set of additional questions that can be best pursued in additional research with larger, more nationally representative data sets. These findings highlight important questions regarding the quality as well as quantity of work that low-income mothers of young children are engaged in, and the importance of considering families’ emotional climates and mothers’ mental health when assessing the impact of work on parenting. Answers to these questions will provide a more complete empirical portrait of mothers’ struggles and successes in balancing the complex demands of work and family while also under the pressure of economic disadvantage.

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