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Semi-plenary #5**WOMEN, WORK AND HEALTH**Rosane Härter Griep¹¹Laboratory of Environmental and Health Education, Oswaldo Cruz Institute, Oswaldo Cruz Foundation. Rio de Janeiro, Brazil.

The increasing participation of women in the labor force demands better balance in household and work duties between men and women. However, the contribution of men to family demands has not grown in the same measure, overloading the women, who still are the main responsible for household chores and family care. In addition, the intensification of work and permeable boundaries between the professional and personal lives, favored by information technology, are phenomena which currently contribute to make the work-life balance increasingly challenging.

This is the context for the emergence of work-family conflict (WFC) defined as “forms of friction in which role pressures from work and family domains are mutually incompatible in some respects.” This is a two-way conflict which causes stress when the effort to meet work demands interferes with the ability to meet family demands and vice versa. Work-to-family conflict occurs when excessive work demands (e.g., long or irregular working hours, work overload, interpersonal conflict, travels and lack of support from coworkers or supervisors) interfere with family life. Reciprocally, family-to-work conflict emerges when the family demands (e.g. child or older adult care, interpersonal conflict, lack of family support) interfere with professional life. These two domains are linked through several mechanisms, which might lead to positive effects, when feelings of accomplishment, satisfaction and recognition in one domain (family or work) are transferred to the other; balance or segmentation, when outcomes in one domain do not influence the other; or negative effects — associated with conflict — when success in one domain implies some sacrifice of the other.

The negative effects and their possible influence on health, especially considering the effects of gender and socioeconomic conditions, are increasingly discussed in the international literature. Several studies found association between negative effects and several physical and mental health outcomes, such as common symptoms, mental problems, depression or emotional exhaustion, poorer self-perceived health, cardiovascular health and health behaviors. Other studies indicate that conflict might reduce the benefits of job well-being. Most such studies found gender-based differences in the work-family relationship, the results showing higher prevalence of conflict and its effects on physical and mental health, especially among women.

WFC and its effects on health have been thoroughly analyzed, particularly in Western Europe and North America. However, studies on the influence of WFC on health are still scarce in Brazil, namely, the South American country with the largest population and where income and gender inequality are still considerable.

Several instruments were developed to measure WFC. The adaptation of one of these instruments to the Brazilian Portuguese language and its inclusion as baseline variable in the Adult Health Longitudinal Study (Estudo Longitudinal de Saúde do Adulto–ELSA-Brasil) allowed analyzing the effects of conflict in the Brazilian context. ELSA-Brasil is a multicenter cohort study involving six state capitals and monitoring of the state of health of 15,105 active and retired civil servants to establish the incidence and determinants of noncommunicable diseases. This presentation summarizes the results of studies performed within ELSA-Brasil up to the present time, including outcomes such as cardiovascular risk, migraine, self-reported health and obesity.

The results are discussed in association with improvements in public policies and workplaces to foster the health of working adults by promoting WFC management. Opportunities for personal development for both sexes and a richer everyday family life will be ensured by gender equality in household chores and child care. Strategies to minimize WFC might reduce stress and have positive influence on the distribution of personal time for both sexes, thus fostering their health and well-being. This is particularly relevant in countries such as Brazil, where substantial gender inequality interacts with other social and economic inequalities. Achieving an appropriate balance between work and family life in modern times, especially in big cities, poses a considerable challenge. More than individual (or family) initiatives, macro and organizational policies are needed to promote changes in the traditional patterns of behavior, sex equality and social justice.

REFERENCES

1. Annor F. Work-Family Conflict: A Synthesis of the Research from Cross-National Perspective. *Journal of Social Sciences*. 2016;12(1):1-13.
2. Bianchi SM, Milkie MA. Work and family research in the first decade of the 21st century. *J Marriage Fam*. 2010;72(3):705-25.
3. Davis KD, Gere J, Sliwinski MJ. Investigating the work- family conflict and health link: Repetitive thought as a mechanism. *Stress Health*. 2017;33(4):330-338.
4. Greenhaus JH, Beutell NJ. Sources of conflict between work and family roles. *Acad Manag Rev*. 1985;10(1):76-88.
5. Griep RH et al. Work-family conflict, lack of time for personal care and leisure, and job strain in migraine: Results of the Brazilian Longitudinal Study of Adult Health (ELSA-Brasil). *Am J Ind Med*. 2016;59(11):987-1000.
6. Griep RH et al. Work-family conflict and self-rated health: the role of gender and educational level. Baseline Data from the Brazilian Longitudinal Study of Adult Health (ELSA-Brasil). *Int J Behav Med*. 2016;23(3):372-382.
7. Guille C et al. Work-family conflict and the sex difference in depression among training physicians. *JAMA Intern Med*. 2017;177(12):1766-1772.
8. Perrons D, Fagan C, Mc Dowell L, Ray K, Ward K (eds). *Gender Divisions and Working Time in the New Economy*. Edward Elgar Publishing, 2007.
9. Pinto KA et al. Conflito trabalho-família e uso do tempo: avaliação psicométrica de um instrumento no ELSA-Brasil. *Rev Saúde Pública*. 2016;50:39.
10. Pinto KA, Griep RH, Rotenberg L, Almeida MCC, Barreto RS, Aquino EML. Gender, time use and overweight and obesity in adults: Results of the Brazilian Longitudinal Study of Adult Health (ELSA-Brasil). *PLoS One*. 2018;13(3):e0194190.