Plans and Realization of (Re-)Employment among First Time Mothers Three Years after Childbirth

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Extended abstract

Introduction

The aim of our research is to investigate how preconceptions about the timing of future labour market reintegration during pregnancy were realised in the three years following childbirth. In addition, we also examine the socio-demographic characteristics of mothers categorised according to their labour market plans and their realisation, with a particular focus on social role perceptions. How do social norms regarding gender roles influence plans for future employment and actual employment after childbirth?

The increased participation of women in the labour market can be linked to the industrialisation of societies in the 20th century, during which the two-earner family model, so the involvement of women in gainful employment, became more and more common in households (Spéder, 2006; Bácsné Bába, 2014). However next to economic interests women's labour market participation was motivated by their desire for independence and their own careers. Nowadays in Hungary, women's participation in the labour market is as self-evident as that of men, until women become mothers. The arrival of a child changes the labour market behaviour of mothers, as they tend to stay at home for a long time after childbirth, while fathers take on the main breadwinning role (Bernhard, 1993; Cramer, 1980; Andorka, 2006; Hakim, 2002, 2006; Makay, 2018). The phenomenon of staying at home for a long time after childbirth is facilitated by the structure of the Hungarian maternity support system but is also supported by the prevalence of traditional role perceptions in mainstream society. In Hungary, mothers can stay at home for up to 3 years after childbirth, next to variable allowances, depending on their labour market situation before childbirth. However, time spent away from the labour market has a high cost, which not only affects mothers' current financial situation but also has a major impact on future labour market prospects.

Using the results of the Hungarian longitudinal birth cohort study, named "Cohort '18 – Growing Up in Hungary" (Veroszta, 2018), we aim to analyse employment plans for the period after childbirth of mothers expressed during pregnancy, as well as their actual labour market entry.

Family support system, social context and mothers' labour market participation

In order to better understand preconceptions about the timing of employment after childbirth, it is important to describe the social context and the family support system under which they were formed. In Hungary, the family support system is considered one of the most extensive in Europe. Although there has been a recent modernisation of views on social roles in Hungary, the traditional view that for women motherhood is the most important role after childbirth is still strongly entrenched. The introduction of childcare benefit (gyermek gondozási segély – GYES) in 1967 and the childcare allowance (gyermek gondozási díj - GYED) shortly afterwards in 1985, which aimed to alleviate the oversupply in the labour market at the time and to stem the decline in the childbirth rate by keeping women at home after childbirth with some financial

support, contributed significantly to this perception. As a result of the maternity benefits, the image of the mother running the household and being with her child at home was transformed into a socially accepted role (Blaskó 2005, 2011, Pongrácz - S. Molnár 2011).

Although the family policies supporting mothers' employment are expanding, and nowadays most benefits are available even if the mothers start working after childbirth, in 2018 the majority of pregnant mothers (58.9%) thought it would be the best for their child to stay at home with them and not work until the age of three. Just over a quarter (26%) planned to take up work before their child turned two and 3.6% before the age of one.

In Hungary, according to recent regulations, the maternity leave is 24 weeks, during which the mother is entitled to 100% of her salary under the CSED - infant care allowance, if she has been insured for 365 days in the two years preceding the childbirth and her child was born within 40 days of the insurance period or its termination. This benefit is also available to students under certain conditions. After maternity leave, mothers (or fathers) can take unpaid leave until the child is two years old without losing their job. During this period, the GYED (childcare allowance) is 70% of the previous salary. After the child reaches the age of two, the mother (or father) can receive another year of childcare allowance (GYES). Although the GYES is a lower, fixed amount paid by the state, it allows the child to stay at home until the age of three, when he or she reaches the entry age for compulsory kindergarten (Makay, 2017).

Method and data

The results of our analysis are based on the first, fourth and fifth waves of the Cohort '18 Hungarian Birth Cohort Study, a longitudinal panel study launched in 2018 and conducted by the Hungarian Demographic Research Institute (HDRI). The aim of this longitudinal study is to examine the growing up of children born in 2018-2019, and to map their characteristics and features. Due to its interdisciplinary nature, Cohort '18 can also investigate various sociological, demographic, psychological, health and economic issues. The data collection is currently in its sixth wave with families of five-year-old children, preceded by a survey of pregnant women (CAPI), a survey when the child is six months old (CAPI), a survey when the child is one and a half years old (CAPI), a survey when the child is two and a half years old (CATI), and a survey when the child is three years old (CAPI) (Veroszta, 2018; Ökrös et al., 2023).

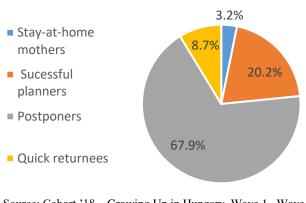
In our analyses, we only included mothers who were expecting their first child in the first wave (n=1378). If the mother participated in the fourth wave and answered in the fifth wave that her job had not changed since the previous survey, then we know her employment data from the fourth wave. If the mother did not participate in the fourth wave, or if she participated in the fourth wave but reported that her job had changed in the fifth wave, then we know her data from the fifth wave. The age of the children in the fifth wave ranged from 32 to 40 months, with an average age of 36.2 months.

Results

87.9% of first-time mothers had an employment or a job in the seventh month of pregnancy, and 29,4% of them were actively working. Looking at pregnant women's future work plans, it appears that the largest proportion (35.8%) planned to enter the labour force when their child would be between 2 and 3 years old, while 32.2% planned to take up work when the child would be between 1 and 2 years old. Overall, 75.6% of mothers planned to work by the time their child would be 3 years old.

Looking at employment after the childbirth of the first child it turns out that 42.4% of the mothers were actively working at the time of the fifth survey. The largest proportion (23.7%) had started to work between the second and third year after the childbirth.

Fig 1. Categorisation of mothers according to the implementation of (re-)employment plans



Source: Cohort '18 – Growing Up in Hungary, Wave 1., Wave 4 and Wave 5., HCSO-HDRI, 2023

In order to examine the timing of labour market participation around childbirth, mothers were classified into four categories according to their plans to return to work during pregnancy and their actual labour market situation when their child was three years old: 1. those who had not planned to work after the childbirth and remained inactive (*stay-at-home mothers* – 3.2%) 2. those who started work when they had planned to (*successful planners* - 20.2%), 3. those who started work later or had not yet started work (*postponers* – 67.9%), 4. those who started work earlier than

planned after the childbirth (*quick returnees* - 8.7%). By category, it can be seen that only one fifth of mothers managed to take up a job when they had planned to do so, while the majority is characterised by a prolongation of the time out of employment.

Observing the plans for future employment, about 20% of mothers started working at the time they had planned during pregnancy. 19.6% of those who had planned to work when the child was 0-6 months old, 13.2% of those who had planned to work between 6 months and 1 year and 23.2% of those who had planned to work between 1 and 2 years had fulfilled their plans. Of the mothers who planned to work after the child's third birthday, 30% had already started working, while the remaining 70% were still inactive at that time.

Following the categorisation, we examined some socio-demographic background of the four timing categories in order to characterise the reemployment strategies of Hungarian women raising a three-year-old child.

In terms of subjective financial situation, the highest proportion (23.5%) of quick returnees reported having some to great difficulty in meeting household expenses, while the highest proportion (40.9%) of postponers reported finding it easy or very easy to meet expenses. In terms of mothers' educational attainment, the highest proportion of stay-at-home mothers (33.3%) had up to 8 years of primary education and the lowest proportion (27.8%) had tertiary education. In the other categories, all those with tertiary education have the highest proportions. Looking at the number of children, the overwhelming majority of women, over 90%, in both the successful planners and the quick returnees groups have one child. The proportion is 52.8 per cent for the postponers and 27 per cent for the stay-at-home mothers. There is not much difference in marital status between the categories, with marriage being the most common among mothers in all cases. Mothers in cohabiting relationships are most common in the group of quick returnees (31.7%) and single mothers in the group in the group of successful planners, postponers and quick returnees. More than half of the mothers are in the 25-34 age, and although

this is also the case for stay-at-home mothers, the proportion of them in the 25 and under age group is also high at 25%.

We also grouped the respondents according to their opinion about gender roles. Agreement with the statement: 'It is right for the husband to put work first, for the wife to put home and children first, even if both are working', was coded on a scale of 1 to 5 (where 1=strongly disagree, 5=strongly agree) into two categories (modern=1-2; traditional=3-5). Looking at the views on social role perceptions reported during the pregnancy period, the following picture emerges. Although the highest proportion of stay-at-home mothers prefer traditional views of society, 50% of them also tend to lean towards modern views. For the remaining three categories, however, there is a majority of those who prefer modern views.

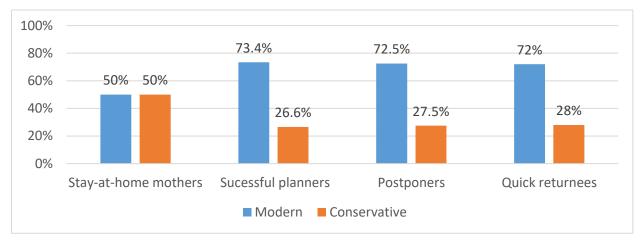


Fig 2. Social role perceptions by (re-)employment categories

Source: Cohort '18 – Growing Up in Hungary, Wave 1., Wave 4 and Wave 5., n= 1151, χ^2 =0.030, Cramer's V=0.088, HCSO-HDRI, 2023

Further investigations

Running multinomial logistic regression models, our aim is to investigate the role of demographic background variables and of gender roles in the formation of employment plans and their realisation after childbirth. Do individual characteristics, such as age, marital status or subjective well-being matter more when it comes to decide about employment after childbirth, or social norms concerning gender roles and motherhood? The questionnaire contains several statements about gender roles and social norms regarding childrearing. These will be included into the analyses to construct a more complex index regarding individuals' modern or conservative roles.

According to our hypothesis and first results, the role of social norms is more important in Hungary than that of other background variables and influences significantly labour market entry plans. Social norms and gender roles are predominantly important among stay-at-home mothers whose 'conservative' attitudes influence their plans to stay at home after childbirth as well as their success in realising this plan.

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