ABSTRACT

TITLE OF DISSERTATION: PREGNANCY AND WORK: A MIXED-

METHODS STUDY OF JOB SATISFACTION AND TURNOVER INTENTIONS DURING A

FIRST PREGNANCY

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Despite the prevalence of working mothers and mothers-to-be, there is a paucity of research on the intersection of pregnancy and work. This study used a mixed methods approach to examine the workplace experiences of women who were working full-time during their first pregnancy. Participants (N = 166) represented a diverse sample in terms of geographic location (36 states), income level (\$25,000 to over \$200,000), education level (less than high school through doctorate) and age range (18-42). Quantitative results showed that pregnancy-related work stress, social support in the workplace, level of satisfaction with family leave policies, and the employee's level of negative affect are all factors related to job satisfaction and turnover intentions for pregnant employees working full-time in the United States. Qualitative data about women's supportive and unsupportive workplace experiences during pregnancy were also collected and coded using a modified version of Consensual Qualitative Research (CQR-M; Spangler, Liu, &

Hill, 2012). Supportive and unsupportive experiences were coded into the following themes: 1) Things people do and say in the workplace, 2) Demands of the job, 3) Pay, 4) Career trajectory, 5) Paid leave, 6) Support for maternity leave, 7) Help from colleagues, and 8) Other parents in the workplace. Coders also identified more specific categories of experiences within each theme. These and other results, as well as implications for employers, employees, and career counselors, are addressed in this manuscript.

PREGNANCY AND WORK: A MIXED-METHODS STUDY OF JOB SATISFACTION AND TURNOVER INTENTIONS DURING A FIRST PREGNANCY

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Chapter One: Introduction

While women have gained power and presence in the labor force over the last century, gender inequity persists in the workplace. Women currently make up 47 percent of the labor force, yet are consistently paid lower wages (Bureau of Labor Statistics, 2014), are concentrated in lower prestige jobs (Crosby, Williams, & Biernat, 2004), and are subjected to gender-based discrimination (Lyness & Heilman, 2006). This inequality is problematic for women, who may experience lower job satisfaction, and for employers, who lose female talent as a result. There has been considerable research on women and career, much of which centers around women's concerns about balancing work and family (e.g. Allen et al., 2000; Eby et al., 2005; Frone, 2003; Powell and Greenhaus, 2010). However, little research has focused on the unique female experience of being pregnant while working full-time. For many women, being pregnant represents the first time that they are making real-time decisions about how they will juggle their maternal responsibilities with their professional lives. Pregnancy comes with physical, emotional, and identity-related challenges that impact a woman's experience in the workplace. The current study examined factors that contribute to women's pregnancy-related experiences at work and that might inform interventions to aid in retaining female employees as they become mothers.

A woman's first pregnancy and the transition to motherhood represent the time when work and family roles are most in conflict (Desai & Waite, 1991). However, the majority of women work (Bureau of Labor Statistics, 2013) and about 75 percent of working women will become pregnant at some point (Cawthorne & Alpert, 2009). Many women work when they are pregnant, whether out of financial necessity, to maintain their

identity as a professional, or both. Working during and after pregnancy is financially necessary for many women and their families (National Partnership for Women & Families, 2014). Women are the primary or sole breadwinners in nearly 40 percent of families with children (Pew Research Center, 2013), and are bringing home more of the family income than ever before (White House, 2014). Women, like all employees, are motivated by financial gain as well as other factors that keep them at work, such as maintaining a positive professional identity, attaining personal or professional goals, allegiance to their employer, and feeling personally fulfilled by their work. In other words, women work before, during, and after pregnancy because they have to *and* because they want to.

Women's perspectives on how they will balance work and family may differ as a result of the importance they place on career, their goals, and their responsibilities.

During a first pregnancy, women are likely to need to integrate work and family roles and responsibilities for the first time (Greenberg, Ladge, & Clair, 2009), and must reevaluate how they divide their time and energy once they give birth. Pregnant women often struggle to integrate their identity as a professional with their impending identity as a mother. Work centrality, defined as the degree of importance that work, in general, plays in one's life (Paullay, Alliger & Stone-Romero, 1994), is an individual characteristic that may influence how women navigate this balancing act. Women with higher levels of work centrality may be more dedicated to prioritizing their career as they transition into motherhood, and may also experience greater levels of stress and conflict with their new role. Women with different levels of work centrality will likely make different decisions regarding work and family, such as the amount of time they stay home before returning to

work (Feldman, Sussman & Zigler, 2004). Additionally, women with higher work centrality will experience different forms of stress related to work and child-rearing compared to women with lower work centrality (Bagger & Li, 2012). Regardless of a woman's reason for working, she will be faced with public and private stressors related to balancing work and family as she progresses from pregnancy into motherhood.

Despite the gains women have experienced in the workforce, there are still multiple barriers to successfully navigating the transition to motherhood as an employee. It has been established that pregnant women experience negative treatment at work, such as being denied promotions, raises, and medically necessary accommodations (King & Botsford, 2009; National Partnership for Women and Families, 2014) and there is evidence that pregnancy constitutes a stigmatized identity in the workplace (Fox & Quinn, 2014; King & Botsford, 2009). One possible explanation for the way women are treated at work is that traditional gender role expectations for women do not match up with expectations of the ideal worker. The "traditional ideal worker model" sets the expectation that employees will devote the majority of their mental and physical time to their jobs (Greenberg, Ladge & Clair, 2009). As a result, employees who have demands outside of the workplace may be seen as having less potential for advancement and success. When a woman becomes pregnant, traditional gender role expectations become magnified, as the woman is now viewed for the first time as a mother. As a result, coworkers and supervisors' biases and expectations associated with being a mother are intensified. This association with traditional gender roles effectively strips the female employee of her individual perspective and goals related to career and family.

Simultaneously, women's views and expectations of themselves are changing, as they are forced to make decisions about how to prioritize career and family.

Women may be confronted with pregnancy-related biases in the workplace at a time when they are also facing new and unique forms of psychological and physical stress and changes in their relationships and personal lives. Pregnancy is unique in that it is a health condition, an identity, and a time of life and role transition all at once. Pregnancy-specific stress includes a wide span of concerns for women including physical symptoms, medical problems, changes in appearance, changes in interpersonal relationships, parenting, labor and delivery, and the health of the baby (Alderdice et al., 2013). Research on pregnancy-specific stress to date has mostly focused on how pregnancy-specific stress affects medical outcomes such as pre-term births and the health of the newborn (e.g. Cole-Lewis, Kershaw, Earnshaw, Yonkers, Lin, & Ickovics, 2014; Dunkel-Schetter & Lobel, 2012) and has largely ignored effects on mothers as individuals in terms of their other valued life roles. This study is the first identified in the literature that applies the construct of pregnancy-specific stress to women's career concerns.

When unequal treatment of pregnant women occurs, it affects not only women's professional lives, but also the health of these women and their babies. Pregnant women often need minor accommodations at work in order to protect their health, such as more frequent bathroom breaks, schedule modifications to attend doctor appointments, or more time sitting down (National Partnership for Women & Families, 2014). Despite the medical necessity of these accommodations, many women never ask for them, possibly

for fear of their employer's reaction and of negative consequences at work (National Partnership for Women & Families, 2014).

While legislation has been introduced to improve this situation, the norms of organizational culture have proven to be obstacles to change (Williams, 2001; Byron & Roscigno, 2014). Employers should be concerned with the type of work environment women experience during pregnancy in order to retain them. For example, access to maternity leave increases the likelihood that mothers return to work after giving birth and continue progressing in their careers (White House, 2014a). Additionally, providing flexible work hours can create a family-friendly environment that improves employee attitudes and may increase retention (Scandura & Lankau, 1997). Depending on the organizational and state laws related to accommodations such as family leave, policies could act as a barrier or a support in a woman's transition to motherhood.

Two pieces of legislation in the United States have made strides toward protecting the rights of pregnant employees. First, the Pregnancy Discrimination Act of 1978 explicitly ensured that "women affected by pregnancy, childbirth, or related medical conditions shall be treated the same for all employment-related purposes, including receipt of benefits under fringe benefit programs, as other persons not so affected but similar in their ability or inability to work." (U.S. EEOC, 2015) Further protections were added in 1993 with the Family and Medical Leave Act (U.S. Department of Labor, 2015), which provides 12 weeks unpaid leave for the birth of a child and to care for the newborn child within one year of birth. However, this protection is not available to all workers, depending on the characteristics of the organization and the length of time an individual has been employed at the organization (Byron & Roscigno, 2014, p. 439). To put these

legal protections into a global context, the United States offers its citizens the least amount of paid parental leave out of 38 developed nations (Pew Research Center, 2013a). In fact, no U.S. federal policy requires that employers provide paid parental leave. Rates of employment for women in the U.S. peaked in 1999, and have been declining since (from 74% to 69%); the U.S. has now fallen behind European countries in rates of female employment, likely due to its lack of family-friendly policies (Miller & Alderman, 2014).

Given the large number of women who will work while they are pregnant, workplace social support may also contribute to the employee experience of overall workplace support. Social support is associated with psychological well-being in pregnancy (Dunkel-Schetter, Gurung, Lobel and Wadhwa, 2001) and support at work has been shown to influence job satisfaction in general (Lent, 2008). Women are believed to benefit not only from the caring and understanding of their colleagues, but also from instrumental support such as help with burdensome tasks and receiving information about prenatal care (Dunkel-Schetter et al., 2001). Therefore, it is important to consider how social support in the workplace may affect a woman's experience of pregnancy in the workplace, and thus make a woman more or less likely to continue working after her child is born.

Pregnancy and the transition to parenthood can lead to lower job satisfaction, which is a common antecedent of employee turnover (Allen, Herst, Bruck, & Sutton, 2000; Brown, Ferrara & Schley, 2002). Employees who struggle to balance work and family are increasingly choosing to work for employers who offer flexibility, and in some cases are leaving jobs that do not provide the flexibility of time off that they need (White House, 2014). Women employees are gravitating more and more toward career paths that

offer flexible work days, work weeks, and annual schedules (White House, 2014).

Additionally, one third of workers and 49 percent of parents have passed up a job opportunity because it would conflict with family obligations (White House, 2014). A woman's lowered job satisfaction not only affects employers and co-workers if the employee chooses to leave the workplace, but also affects the woman and her family. Evidence suggests that pregnant women with poor job satisfaction may experience significant job-related stress that contributes to negative fetal outcomes (Salihu, Myers & August, 2012). The current body of research on pregnancy at work has yet to address the role of pregnancy-specific stress and workplace social support on women's career trajectories.

Increasing social support in the workplace has the potential to reduce work-family conflict (Kossek, Pichler, Bodner, & Hammer, 2011) and increase job satisfaction for employees (Salihu et al., 2012). In the absence of sufficient workplace support, women may opt out of the workforce or move to jobs that better meet their needs for balancing work and family. The employers themselves are impacted by negative treatment of women during pregnancy such as low levels of instrumental support, as they lose female talent and incur the costs associated with turnover (Salihu et al., 2012). The U.S. Census Bureau found that 25% of new mothers quit their jobs immediately before or after childbirth, and 36% of women had not returned to work within 12 months after giving birth (Johnson, 2007). Employers may also be losing work hours from the employees they retain, as 31% of women work part time when their children are less than 1 year old (Bureau of Labor Statistics, 2012). These data support anecdotal reports that the retention of new mothers may be a particular challenge for organizations. In a recent poll of

nonworking adults, 61% of women cited family responsibilities as a reason they were not working, compared to only 37% of men. Additionally, nearly 75% of women who stay at home and have not looked for a job in the past 12 months said that they would consider returning to work if they were offered flexible hours or permitted to work from home (Hamil, Firth & Brodie, 2014). One way to learn more about how the workplace environment affects women during pregnancy is to examine women's expectations to continue or discontinue based on their experiences while they are pregnant. If we improve our understanding of what factors go into women's decisions to turnover, we will be better able to retain female talent in the workplace. Equally important, we will be able to help women and employers navigate pregnancy in the workplace more smoothly, regardless of the outcome.

To summarize, despite the prevalence of pregnancy in the U.S. workforce, many pregnant women face bias and discrimination by their employers, receive minimal government protections, and are often forced to choose between their personal and professional well-being. In the United States, expectations of the workplace are often incompatible with the cultural expectations for motherhood. Pregnancy and work has received insufficient attention in the psychological literature. Most peer-reviewed research on pregnancy in the workplace has been exploratory in nature, using small samples (e.g. Greenberg, Ladge & Clair, 2009; Kirby, 2012; Little, Major, Hinojosa & Nelson, 2015) or theory-driven literature reviews (e.g. Salihu et al., 2012; King & Botsford, 2009). These studies have primarily focused on the unique biases and challenges pregnant women face at work and have illuminated the need to clearly identify barriers and supports to a successful transition to motherhood at work. Research is

needed that is informed by established career theory, so that the concerns of pregnant women can be understood in the context of career development. Social Cognitive Career Theory (SCCT; Lent, Brown & Hackett, 1994) is a model that fits with and enriches the understanding of how pregnancy might affect career development and employment experiences. SCCT has established that an individual's career development process is impacted by the complex intersection of her personal characteristics and the resources, barriers, and opportunities presented in her environment (Lent, Brown & Hackett, 2000). Therefore, this study considered the role of women's individual experiences and characteristics (e.g. pregnancy-related work stress and work centrality) interact with the characteristics of her workplace (e.g. supportiveness and family leave policies) to influence their careers.

The purpose of this study was to identify the relationships between a woman's individual experience of being pregnant while also being employed full-time (pregnancy-specific stress, work centrality), the work environment (social support, family leave), and career outcomes (job satisfaction, turnover intentions). We wanted to better understand the supports and barriers to work that women experience during pregnancy, as these will likely influence their commitment to their jobs and job satisfaction. This study is unique in that it will be among the first to apply career development theory to pregnant women's career concerns. Applying an established theoretical model of career development (SCCT) ensures that this study is rooted in the vocational psychology literature, and taking a quantitative approach allows for the examination of how these individual, workplace, and outcome variables are related. Open-ended questions were included to provide qualitative data about specific, real-life events that shape women's perceptions of

their workplace and intentions to turnover. The findings of this study have the potential not only to advance our understanding of pregnancy in the workplace, but also to inform and advance policy that could improve the retention and job satisfaction of pregnant employees.

Chapter 2: Statement of the Problem

Women make up over 50% of today's workforce, and 75% of these women are of reproductive age (Bureau of Labor Statistics, 2014). The transition to motherhood represents a time when a woman's identity and priorities are changing, with their non-work identity as soon-to-be mothers having implications for their professional identities. How organizations, managers, and co-workers respond to a woman's pregnancy has a profound impact on how the woman views the possibilities for her future career path (Ladge, Clair & Greenberg, 2012). Pregnant employees and employers might benefit if pregnant employees were able to maintain or achieve higher job satisfaction and lower rates of turnover in spite of their new, and potentially conflicting, priorities.

Working women who become pregnant face unique challenges that can result in increased stress (Alderdice, Lynn & Lobel, 2012), lower job satisfaction (Brown, Ferrara & Schley, 2002), and deciding to leave the workforce (Fox & Quinn, 2014). During pregnancy, women experience a unique set of emotional stress responses, which may stem from pregnancy-specific issues, such as physical symptoms, parenting concerns, relationship stress, bodily changes, and concerns about childbirth (Lobel, Cannella, Graham, DeVincent, Schneider & Meyer, 2008). At the same time, they are facing further challenges from employers and co-workers. For example, employers may be less likely to hire or promote pregnant women (Gueutal & Taylor, 1991) or may have expectations that employees commit an amount of time that is incompatible with demands outside of the workplace (Williams, 2001; Greenberg, Ladge & Clair, 2009). Additionally, pregnant women are often stereotyped as less competent and less committed than their nonpregnant counterparts (Halpert, Wilson & Hickman, 1993). The current state of

pregnancy in the workplace may represent a problem for mothers-to-be, who need and want to work (National Partnership for Women and Families, 2014), as well as for employers, who need and want to retain employees (Salihu et al., 2012). However, little is known about the individual and organizational factors that impact pregnant women's job satisfaction and turnover intentions.

This study examined whether constructs that have been shown to relate to job satisfaction and turnover intentions in other populations (work centrality, workplace social support, affect, family leave) might moderate the relationship between pregnancy-specific work stress and job satisfaction or turnover intentions. While research has shown that the potential incompatibility of employer expectations and becoming a mother may be problematic, researchers have yet to thoroughly identify and understand points of intervention. This study examined the relationship between pregnancy-specific work stress and women's career, and attempted to identify factors that could buffer against the negative outcomes associated with being a pregnant employee. Specifically, we examined how pregnancy-specific work stress, work centrality, workplace social support, satisfaction with family leave, and affect might relate to employees' job satisfaction and turnover intentions. In addition, we looked for possible moderating effects of workplace social support, work centrality, affect and satisfaction with family leave on job satisfaction and turnover intentions at different levels of pregnancy-specific work stress.

Job satisfaction and turnover intentions were viewed as two distinct outcome variables. It is noteworthy that the correlation between job satisfaction and turnover intentions has been widely studied, and it has been established that these constructs are negatively correlated, such that employees with lower job satisfaction are more likely to

want to leave their jobs (Brown & Lent, 2005). Given that financial need is a primary motivator for pregnant women to work (National Partnership for Women and Families, 2014), this study looks at turnover intentions and job satisfaction as separate and distinct outcomes. Employers have an interest not only in retaining employees, but also in keeping their employees satisfied, since job satisfaction has been linked to productivity (Brown & Lent, 2005). Similarly, female employees logically benefit from feeling more satisfied at work, and also benefit from avoiding gaps in employment that could negatively affect their career trajectories.

This study used moderation because we expected correlations between the key constructs, and were looking for points of intervention. From a methodological perspective, moderation incorporates a third variable in order to uncover, "differing effects on unique populations or conditions under which an effect may be pronounced or diminished" (MacKinnen & Luecken, 2008). Moderation was used in this study in order to examine questions about *when* (at what levels of pregnancy-specific work stress?) and *for whom* (based on demographic data) the moderating variables may buffer or strengthen the relationship between predictor and outcome (MacKinnen & Luecken, 2008). This was a necessary next step in the literature, which has established that pregnancy is often in conflict with career, but has not yet identified possible points of intervention. Looking at the identified variables moves the field forward in terms of understanding psychological and workplace supports that might be necessary or helpful to improve retention and job satisfaction of pregnant employees as they become mothers.

Hypotheses

Rationale for hypotheses and research questions related to job satisfaction.

Research has demonstrated a negative correlation between stress and job satisfaction (Brown & Lent, 2005). While there has been no research to date that directly links pregnancy-related stress to job satisfaction, there is significant research indicating that pregnancy can lead to negative workplace outcomes (Fox & Quinn, 2014; King & Botsford, 2009; Brown, Ferrara & Schley, 2002) and that conflict between work and family can make work feel more stressful (Allen, Herst, Bruck & Sutton, 2000). Workplace social support, positive affect, and satisfaction with organizational leave policies have been positively associated with job satisfaction (Rhoades & Eisenberger, 2002; Viswesvaran et al., 1999; Salihu et al., 2012; Brown, Ferrara & Schley, 2002). Therefore, this study hypothesized that these three variables might buffer the effect of pregnancy-specific work stress on job satisfaction. Research has found that positive and negative affect, taken together, account for 30% of the variance in job satisfaction (Illies & Judge, 2003 cited in Lent & Brown, 2006, p. 238). Positive affect has been shown to correlate positively with job satisfaction (r = .34 and r = .49 in two separate metaanalyses) and negative affect has been shown to correlate negatively with job satisfaction (r = -.33) (Lent & Brown, 2006). Thus, we hypothesized that negative affect might strengthen the relationship between pregnancy-specific work stress and job satisfaction. Work centrality has been positively associated with job satisfaction in general populations (Tziner, Ben-David, Oren & Sharoni, 2014) but findings are less clear in similar research on new parents (Bagger & Li, 2012). Therefore, more information is

needed in order to determine whether work centrality might act as a buffer to negative workplace outcomes.

Hypotheses of Direct Relationships

Hypothesis 1: Each of the five variables of interest (pregnancy-related work stress, workplace social support, positive affect, negative affect, satisfaction with family leave) will be correlated with job satisfaction.

Hypothesis 1a: Pregnancy-related work stress will be negatively correlated with job satisfaction, such that women with higher levels of pregnancy-related work stress will report lower job satisfaction during pregnancy.

Hypothesis 1b: Workplace social support will be positively correlated with job satisfaction, such that women who report higher levels of workplace social support will report higher job satisfaction during pregnancy.

Hypothesis 1c: Positive affect will be positively correlated with job satisfaction, such that women who report higher levels of positive affect will report higher job satisfaction during pregnancy.

Hypothesis 1d: Negative affect will be negatively correlated with job satisfaction, such that women with higher levels of negative affect will report lower job satisfaction during pregnancy.

Hypothesis 1e: Satisfaction with family leave will be positively correlated with job satisfaction, such that women who report higher levels of satisfaction with family leave will report higher job satisfaction during pregnancy.

Moderation Hypotheses

Hypothesis 2: Workplace social support, satisfaction with family leave, and positive and negative affect will each act as moderators in the relationship between pregnancy-related work stress and job satisfaction.

Hypothesis 2a: Workplace social support will moderate the relationship between pregnancy-related work stress and job satisfaction. At higher levels of social support, the magnitude of the relationship will be smaller. At lower levels of social support, the magnitude of the relationship will be greater.

Hypothesis 2b: Satisfaction with family leave will moderate the relationship between pregnancy-related work stress and job satisfaction. At higher levels of satisfaction with family leave, the magnitude of the relationship will be smaller. At lower levels of satisfaction with family leave, the magnitude of the relationship will be greater.

Hypothesis 2c: Positive affect will moderate the relationship between pregnancy-related work stress and job satisfaction. At higher levels of positive affect, the magnitude of the relationship will be smaller. At lower levels of positive affect, the magnitude of the relationship will be greater.

Hypothesis 2d: Negative affect will moderate the relationship between pregnancy-related work stress and job satisfaction. At higher levels of negative affect, the magnitude of the relationship will be greater. At lower levels of negative affect, the magnitude of the relationship will be smaller.

Research Question 1: Will work centrality moderate the relationship between pregnancy-related work stress and job satisfaction?

Rationale for hypotheses and research questions related to turnover intentions. Stress has been shown to have a positive correlation with turnover intentions, such that individuals with higher levels of stress are more likely to want to leave their jobs. Workplace social support has been shown to reduce turnover intentions (Pomaki, DeLongis, Frey, Short, & Woehrle, 2010). While satisfaction with family leave has not previously been researched, it is one way in which a workplace demonstrates support that is specifically targeted toward pregnant employees, and perceptions of support have been linked to decreased turnover intentions (Allen, 2001). A meta-analysis of the literature on affect and job outcomes showed that negative affect tends to be associated with increased turnover intentions, while positive affect tends to be associated with decreased turnover intentions (Thoresen et al., 2003). Given the conflicting research on work centrality for general populations versus parents, and the lack of research on the relationship between these variables for pregnant employees, this study is interested in work centrality as a

Hypotheses of Direct Relationships

direction of this relationship.

Hypothesis 3: Each of the five variables of interest (pregnancy-related work stress, workplace social support, positive affect, negative affect, satisfaction with family leave) will be correlated with turnover intentions.

potential moderator, but researchers did not make a prediction about the strength or

Hypothesis 3a: Pregnancy-related work stress will be positively correlated with turnover intentions, such that women with higher levels of pregnancy-related work stress will report higher levels of intention to turnover.

Hypothesis 3b: Workplace social support will be negatively correlated with turnover intentions, such that women who report higher levels of workplace social support will report lower levels of intention to turnover.

Hypothesis 3c: Positive affect will be negatively correlated with turnover intentions, such that women who report higher levels of positive affect will report lower levels of intention to turnover.

Hypothesis 3d: Negative affect will be positively correlated with turnover intentions, such that women with higher levels of negative affect will report higher levels of intention to turnover.

Hypothesis 3e: Satisfaction with family leave will be negatively correlated with turnover intentions, such that women who report higher levels of satisfaction with family leave will report lower levels of intention to turnover.

Moderation Hypotheses

Hypothesis 4: Workplace social support, satisfaction with family leave, and positive and negative affect will each act as moderators in the relationship between pregnancy-related work stress and job satisfaction.

Hypothesis 4a: Workplace social support will moderate the relationship between pregnancy-related work stress and turnover intentions. At higher levels of social support, the magnitude of the relationship will be smaller. At lower levels of social support, the magnitude of the relationship will be greater.

Hypothesis 4b: Satisfaction with family leave will moderate the relationship between pregnancy-related work stress and turnover intentions. At higher levels

of satisfaction with family leave, the magnitude of the relationship will be smaller. At lower levels of satisfaction with family leave, the magnitude of the relationship will be greater.

Hypothesis 4c: Positive affect will moderate the relationship between pregnancy-related work stress and turnover intentions. At higher levels of positive affect, the magnitude of the relationship will be smaller. At lower levels of positive affect, the magnitude of the relationship will be greater.

Hypothesis 4d: Negative affect will moderate the relationship between pregnancy-related work stress and turnover intentions. At higher levels of negative affect, the magnitude of the relationship will be greater. At lower levels of negative affect, the magnitude of the relationship will be smaller.

Research Question 2: Will work centrality moderate the relationship between pregnancy-related work stress and turnover intentions?

Rationale for qualitative research questions. The research questions below served to enrich the quantitative information obtained from the survey. Not only did they provide context for participants' responses, but these answers also illustrated critical events that may be key in determining women's decisions about their work.

Research Question 3: How will participants respond to the open-ended question, "Describe an experience you had at work (if any) that felt <u>supportive</u> of your pregnancy in a way that made you more inclined to <u>stay</u> at your job post-pregnancy."

Research Question 4: How will participants respond to the open-ended question, "Describe an experience you had at work (if any) that felt <u>unsupportive</u> of your

pregnancy in a way that made you more inclined to <u>leave</u> your job postpregnancy."

Chapter 3: Method

Design

This study used a descriptive, cross-sectional, correlational design to examine the relationships between person-level factors, factors related to the workplace environment, and job satisfaction and turnover intentions for women who are employed during their first pregnancy. The focus was on how these key variables (pregnancy-related work stress, workplace social support, affect, and satisfaction with family leave) might relate to employment outcomes (job satisfaction, turnover intentions). In addition to investigating the main effects of these variables, we also examined possible moderators of the relationship between pregnancy-related work stress and the same employment outcomes.

Participants

To be eligible for participation in this study, women were required to be (a) age 18 or older (b) pregnant with their first child (or have no previous biological children) and (c) working full-time. A power analysis using Cohen (1992) found that a minimum of 91 participants would be necessary to determine an effect considering medium alpha and power and effect sizes found in previous research. This power analysis accounts for the use of multiple regression, 5 independent variables (affect, pregnancy-related work stress, workplace social support, work centrality, and satisfaction with family leave policy), and a desired power of .80 for α = .05. Given that few studies have been conducted on pregnant women in the workplace and it is difficult to determine the expected effect sizes for some variables, this study aimed to include at least 150 participants and exceeded this goal with 166 participants.

In order to recruit a large and diverse sample, participants were recruited through a variety of channels including flyers, Internet forums, and social networks. Flyers were distributed across university campuses and coffee shops. Requests for participants were distributed to online forums and businesses catering to new mothers such as momease.com, pregnancy and birthing centers. Additionally, requests for participants were posted on the University of Maryland's FYI listserv and Craigslist.org. Snowball sampling was also used to find eligible participants via email, word of mouth, and social networks such as Facebook.com. All recruitment materials directed potential participants to a website where they were required to complete a short survey to determine their eligibility before participating in the study.

In total, 219 individual participants were screened and 180 were eligible to participate. Participants missing more than half of responses to the quantitative measures were deleted from analysis, resulting in 166 participants included in the analyses for this study. Of these 166 participants, 132 responded to at least one of the two qualitative questions at the end of the survey. Thus, readers may note that there is a discrepancy between the number of participants in the study and the number of qualitative responses.

In order to address missing data for those participants who were included in the study, the researcher used expectation maximization. Prior to performing expectation maximization, this researcher performed Little's (1988) MCAR test to determine that missing data were missing completely at random (MCAR). The MCAR test is designed to determine whether or not the data are missing completely at random. Based on this analysis, the researcher concluded that the missing data was missing completely at random because the significance = 1.00, meaning that we failed to reject the null hypothesis that the data is MCAR. Therefore, the use of expectation maximization was appropriate for this data set.

The 166 participants included in the analyses ranged in age from 18 to 42 (M =29.79, median = 30, mode = 31). They ranged from their 4th to 40th week in their pregnancy (M = 24.68 weeks) and the majority of participants indicated that this pregnancy was planned (n = 115, 69.3%). The demographic information collected shows a diverse range of identities and experiences. 66.3% identified as white (n = 110), 12% as Black or African-American (n = 20), 6.6% as Hispanic/Latino (n = 11), 3% as Asian or Pacific Islander (n = 5) and 2.4% as Multiracial (n = 4); this information was not collected from 16 participants. Participants were employed full-time at jobs in 36 different states. Their education levels ranged from less than high school (n = 3, 1.8%) to completing a doctorate degree (n = 18, 10.8%) and personal annual incomes ranged from less than \$25,000 (n = 26, 15.7%) to over \$200,000 (n = 7, 4.2%) with the modal income being in the \$50,000-74,000 range. The majority of participants indicated that their personal income makes up 50% or more of their household's annual income (n = 113, 68.2%). Most participants (n = 143, 86.2%) were living with a partner and a majority also planned to have some division of childcare responsibilities with their partner (n = 117, 70.4%). See Table 1 for a more comprehensive picture of participants' demographics.

Table 1

Demographics		
Race/Ethnicity	N	Percentage
Asian American/Pacific Islander	5	3%
Black/African American	20	12.0%
Hispanic/Latina	11	6.6%
Multiracial	4	2.4%
White	110	66.3%
Unknown	16	9.6%
Age	N	Percentage
18-21	17	10.2%
22-25	8	4.8%
25-28	27	16.3%
28-31	34	20.5%
32-35	45	27.1%
36-39	12	7.2%
40-42	3	1.8%
Relationship Status	N	Percentage
Single	15	9%
Unmarried, in a committed relationship	7	4.2%
Unmarried, living with partner	24	14.5%
Married, living with partner	119	71.7%
Widowed	1	0.6%
Employment Status	N	Percentage
Hourly	70	42.2%
Salaried	96	57.8%
% of Household Income	N	Percentage
100%	22	13.3%
75-99%	22	13.3%
50-74%	69	41.6%
25-49%	51	30.7%
0-24%	2	1.2%
Personal Income	N	Percentage
Less than \$25,000	26	15.7%
\$25,000 - \$49,999	34	20.5%
\$50,000 - \$74,999	46	27.7%
\$75,000 - \$99,999	25	15.1%
\$100,000 - \$149,999	23	13.9%
\$150,000 - \$199,999	4	2.4%
\$200,000 +	7	4.2%

Table 1. Demographics (continued)

Education Completed	N	Percentage
Less than High School	3	1.8%
High School	20	12.0%
Two-Year College	18	10.8%
Technical School	5	3.0%
Four Year College	54	32.5%
Masters Degree	48	28.9%
Doctorate	18	10.8%

Was this pregnancy planned?	N	Percentage
Yes	115	69.3%
No	50	30.1%
No response	1	.6%

Weeks Pregnant	N	Percentage
1-12 (1 st trimester)*	21	12.65%
13-27 (2 nd trimester)	70	42.17%
28-40 (3 rd trimester)	75	45.12%

Division of Childcare	N	Percentage
My partner will not spend time caring for my child	7	4.2%
My partner will provide some childcare, but I am primarily responsible	55	33.1%
My partner and I plan to split time caring for the child equally	53	31.9%
Someone else (i.e., nanny, relative) will be the primary childcare provider	9	5.4%
Other**	30	18.1%
No response	10	6.0%

^{*}No participants reported being within the first 3 weeks of pregnancy at the time of the survey.

Procedure

Data was collected through an online survey using Qualtrics. Participants were recruited through online forums and organizations related to parenting, pregnancy, and motherhood as well as Facebook groups and Yahoo! groups that are relevant to new mothers, such as *Arlington Moms and Dads* and *Hoboken Moms*. Additional participants

^{**}Most of these respondents explained that they plan to use daycare and/or a shared responsibility with their partner that will change over time

were recruited through the researcher's social media connections, Craigslist.org, and flyers distributed to public spaces in the Washington, DC area. (See Appendix B for recruitment materials.) As incentive for participation, people who completed the survey were anonymously entered into a drawing for one of four \$50 Amazon gift cards. Individuals were invited to participate if they were over 18, currently pregnant for the first time, and employed full-time in the U.S. at the time of taking the survey.

Once participants clicked on the link to access the survey, they immediately viewed an informed consent page (see Appendix B) and endorsed that they agree to the informed consent, are at least 18 years of age, currently pregnant for the first time, and employed full-time in the U.S. at the time of taking the survey. The survey began with demographic questions about the person's employment and employer policies, education, relationship status, pregnancy, and plans for childcare. Participants were given the opportunity to clarify their responses to many questions that might have more complicated responses, such as plans for division of childcare and employer's family leave policies (see Appendix C). Following these questions, participants completed measures of their physical and mental health (overall and specifically as related to pregnancy), social support in the workplace, job satisfaction, work centrality, and turnover intentions. (See Appendices D-J) After that, participants responded to two openended prompts inquiring about positive and negative experiences in the workplace during their pregnancy (See Appendix J). The total survey took most participants 10-20 minutes to complete.

Measures

Demographic Information

Demographic information was collected using a questionnaire designed specifically for this research project (see Appendix C). The first set of questions ensured the participant was eligible for this study; participants must be over 18, pregnant for the first time, and employed full-time in the United States.

Participants were asked to provide the following information about themselves:

(a) age; (b) number of weeks pregnant at time of survey; (c) how long they have been at their current job; (d) job title; (e) state where participant is employed; (f) participant's income; (g) percentage of household income that comes from participant's pay; (h) whether participant's income is hourly or salaried; (i) participant's education level; (j) current relationship status; (k) expected division of childcare responsibilities between participant and partner; (l) whether or not this pregnancy was planned.

Participants were also asked to provide the following information about their employer and their family leave: (a) number of employees at participant's company; (b) number of employees in participant's immediate work environment; (c) type and amount of family leave available; (d) amount of paid and/or unpaid participant plans to take post-pregnancy; (e) clarity of family leave policies; (f) satisfaction with family leave at her workplace sick leave/ paid time off available during pregnancy; (g) clarity of family leave policies.

Physical and Psychological Well-being

Three measures were used to assess a participant's physical and psychological well-being before and during pregnancy. The first two measures looked at the

participant's pregnancy-related stress. The second looked at participants' affect, using items that are not pregnancy-specific.

Pregnancy-Related Work Stress Scale (PWSS). This 15-item measure is designed to capture women's perceptions of the stressful experiences that are unique to pregnant women in the workplace (see Appendix D). This measure was created for the purposes of this study by the author in order to supplement the NuPDQ, which is not domain-specific to the workplace and therefore does not capture the specific type(s) of stressors pregnant women might face in this unique environment. The items are based on the extant research about pregnant women's experiences in the workplace (e.g., Greenberg, Ladge & Clair, 2009; Kirby, 2012) and the format and scoring are modeled after established measures of race-related stress such as the Hispanic Stress Inventory (HSI; Cervantes, Padilla & Salgado de Snyder, 1991) and The Schedule of Racist Events (Landrine & Klonoff, 1996) and others found in Baron, Gong and Pfirman's (2007) review of racism-related stress measures). This questionnaire first asks the participant to respond yes or no to the question, "Do most people at work know that you are pregnant?" in order to provide context for the subsequent 15 items. In this study, 91.2% of participants said "yes" and continued to complete the rest of the measure. The following 15 items ask, "Since you have been pregnant, have you experienced the situation described? If so, indicate how stressful that experience felt (or feels)." These items are rated on a 5-point Likert-type scale (1 = not at all stressful to 5 = extremely stressful). Participants also have the option to indicate that they have not experienced this situation (scored as 0). The participant's overall pregnancy-related work stress is calculated by summing the total score from these

15 Likert-type items; higher scores indicate higher levels of pregnancy-related work stress. In the current study, the PWSS demonstrated strong internal consistency ($\alpha = .89$).

Revised Prenatal Distress Questionnaire. In the present study, this measure was used to help examine the psychometric properties of the Pregnancy-related Work Stress Scale (a new measure created for this study, described above) and to contextualize participants' responses to other measures. The Revised Prenatal Distress Questionnaire (NuPDQ) is a 17-item measure that assesses a participant's worries related to her pregnancy, such as medical problems, parenting, relationships, and body changes (see Appendix E). Items include, "Are you feeling bothered, upset, or worried at this point in your pregnancy" "...about working at a job after the baby comes?" "...about pain during labor and delivery?", and "about paying for your medical care during pregnancy?". Items are rated using a 3-point Likert-type scale, where 0 = not at all, 1 = somewhat, and 2 = notvery much (Lobel, 2013). This measure is based on the original 12-item Prenatal Distress Questionnaire (PDQ; Yali & Lobel, 1999) that derived its items from descriptive studies suggesting which areas are most likely to cause distress in pregnant women (Lobel, 2013). The 17-item Revised Prenatal Distress Questionnaire accounts for concerns across pregnancy, with 9 items relevant to all stages of pregnancy, 3 items added in mid- and late-pregnancy, and 5 additional items for women in late-pregnancy. In a study by the scale's author, the 9-item measure was administered to participants who were under 20 weeks pregnant, the 12-item measure was administered to participants between 21 and 30 weeks, and the 17-item measure was administered to participants after 30 weeks (Lobel, Cannella, Graham, DeVincent, Schneider & Meyer, 2008). An average pregnancyspecific distress score is calculated by summing item responses and dividing this by the total number of items completed based on pregnancy time point (Lobel, 2013).

Researchers have successfully used this measure across various time points during a woman's pregnancy; due to its success, the NuPDQ has replaced all prior versions of the PDQ (Lobel, 2013). In a study by Auerbach, Lobel and Cannella (2007), the NuPDQ exhibited strong internal consistency ($\alpha = .88$) In the present study, the 17-item NuPDQ demonstrated adequate internal consistency ($\alpha = .79$). The NuPDQ exists in versions for concurrent or retrospective data collection, and in versions for interview studies or selfadministration (Lobel, 2013). This study used the version for concurrent, selfadministered data collection. A review of pregnancy-specific work stress measures published in the Journal of Psychosomatic Obstetrics and Gynecology specifically recommended this measure for projects that "aim to describe the stress experience of women in pregnancy and to identify women's perceptions of and reactions to possible sources of stress." (Alderdice et al., 2012, p. 74) In a systematic review of psychometric instruments to assess psychosocial stress during pregnancy, the PDQ was identified as the best currently available measure of stress related to pregnancy and parenting for its superior psychometric properties (Nast, Bolten, Meinlschmidt & Hellhammer, 2013).

Positive and Negative Affect Schedule. The Positive and Negative Affect Schedule (PANAS; Watson, Clark & Tellegen, 1988) is a widely used measure that assesses a person's current affect (see Appendix F). Participants rate the extent to which they have experienced a list of positive and negative feelings in the past week (e.g. attentive, interested, distressed, nervous) using a five-point scale ranging from 1 = "not at all" to 5 = "extremely". Participants will be asked to rate how they felt "in general, that

is, on average" in order to assess how participants typically feel, not just how they have felt during pregnancy. Items of the ten positive emotions are averaged to create the positive affect (PA) scale, where higher scores indicate higher positive affect. Items of the ten negative emotions are averaged to create the negative affect (NA) scale, where higher scores indicate higher negative affect. The 10-item positive affect subscale and the 10-item negative affect subscale demonstrate strong internal consistency ($\alpha = 0.88$; $\alpha = 0.85$, respectively, Watson et al., 1988). In the present study, internal consistency was also strong for both subscales ($\alpha = .89$ for PA scale, $\alpha = .86$ for NA scale). The NA and PA scales have been found to assess two distinct, but moderately correlated factors (Crawford & Henry, 2004), therefore PA and NA are analyzed as separate measures. The PA and NA scales correlate in the expected direction with measures of psychological well-being (Crawford & Henry, 2004; Watson et al., 1988). Scores on the PANAS have high reliability and validity and tend to be stable across time points (Watson et al., 1988).

Social Support in the Workplace

The Survey of Perceived Organization Support (Eisenberger, Huntington, Hutchinson, & Sawa, 1986; Hellman, Fuqua & Worley, 2006) was used to measure social support in the workplace.

Survey of Perceived Organizational Support. The Survey of Perceived Organizational Support (SPOS) measures an employee's general belief that the organization is committed to her, values her continued membership, and is generally concerned about her well-being (Hellman et al., 2006; see Appendix G). The SPOS was originally designed as a 36-item self-report measure (Eisenberger, Huntington, Hutchinson, & Sawa, 1986) though shorter 3, 8, or 16-item versions are also commonly

used (Hellman et al., 2006; Worley, 2006). A factor analysis confirmed both the original and 8-item versions are unidimensional measures of the same construct (Worley, 2006). Hellman et al. (2006) determined that the number of items used from the original 36-item measure has a strong positive correlation with reliability scores, such that studies using 3item versions of the measure had an average internal consistency reliability of .71, and studies using 8-item versions had an average internal consistency reliability of .90. Worley (2006) calculated the reliability of the 8-item version using Chronbach's alpha, and found that $\alpha = 0.93$, with total item correlations ranging from 0.70 - 0.84; the mean and median item-total correlations were 0.75 and 0.73, respectively. Therefore, the 8-item version of the measure (Eisenberger et al., 1997) was used in this study. Items on this measure include, "My organization strongly considers my goals and values", "If given the opportunity, my organization would take advantage of me. (reverse scored)" and "My organization is willing to help me if I need a special favor." Items are rated on a 7 point Likert-type scale ranging from 1 = strongly disagree to 7 = strongly agree. In an effort to control for response bias, two of the items are worded negatively (reverse-scored) and six are worded positively. Accounting for reverse scored items, total scores are calculated by summing the results of each question; higher scores indicate higher perceived organizational support. In the current study, internal consistency was excellent ($\alpha = .93$). This study measured perceived workplace support during pregnancy. Participants were asked to complete the scale with the prompt, "Answer the following questions based on how you have felt during this pregnancy."

Satisfaction with family leave. Participants were asked the question, "How satisfied are you with your organization's family leave policies?" A 7-point Likert-type

scale (1 = not at all satisfied to 7 = extremely satisfied) was used to capture participants' level of satisfaction with family leave. The wording and scoring of this question are slightly modified from Brown, Ferrara and Schley's (2002) study of female employees who had recently become mothers ("leave" was changed to "family leave").

Job Satisfaction

Michigan Organizational Assessment Questionnaire - Job Satisfaction Subscale. Job satisfaction was measured using the Michigan Organizational Assessment Questionnaire Job Satisfaction Subscale (MOAQ-JSS) (Seashore, Lawler, Mirvis, & Cammann, 1983) which is a 3-item measure of global job satisfaction. The three items are: 1) All in all I am satisfied with my job. 2) In general, I don't like my job. and 3) In general, I like working here (see Appendix H). All items are rated on a 7-point Likert-type scale (7 = strongly disagree, 1 = strongly agree). Scores are computed using the average score from all three items, noting that the second item is reverse-scored.

A meta-analysis of studies using the MOAQ-JSS showed acceptable levels of internal consistency reliability (.84 (k = 79, N = 30,623)) and test-retest reliability (.50 (k = 4, N = 746)) (Bowling and Hammond, 2008). The same meta-analyses found extensive evidence for the measure's construct validity. Relationships were in the expected direction and of the expected magnitude with hypothesized antecedents (e.g., work-family conflict, supervisor social support) correlates (e.g., career satisfaction, organizational commitment) and consequences (e.g., in-role job performance, turnover) of job satisfaction (Bowling and Hammond, 2008). In the present study, internal consistency was strong ($\alpha = .90$).

Work Centrality

Work centrality has been defined as the degree of importance that work, in general, plays in one's life (Paullay, Alliger & Stone-Romero, 1994). The construct of work centrality is designed to assess an individual's belief about the value of work as a general concept, which is distinct from an individual's belief about the value of their specific job (Paullay et al., 1994).

Work Centrality Scale. The Work Centrality Scale (Paullay et al., 1994) includes 12 items, all of which refer to general views or beliefs about work (see Appendix I). All items are scored using a 7-point Likert-type scale (1 = strongly disagree, 7 = strongly agree). Examples of items include, "The major satisfaction in my life comes from my work" and "Most things in life are more important than work" (reverse scored). Scores are calculated by summing participant's total scores, and higher scores on this scale indicate higher levels of work centrality. Paullay et al. (1994) demonstrated that the construct of work centrality was distinct from closely related constructs (i.e. job involvement) and that the scale demonstrated adequate internal consistency (α = .80). In the present study, this scale showed strong internal consistency (α = .85).

Turnover Intentions

Turnover intentions are defined as the expressed inclination and deliberate willingness to quit one's job or one's profession (Tett & Meyer, 1993).

Measure of intention to quit and turnover. Turnover intentions, or employee's intention to quit or leave their job, will be measured using Colarelli's (1984) 3-item measure of intention to quit and turnover (see Appendix J). Items from this measure include, "I frequently think of quitting my job" and "I am planning to search for a new

job during the next 12 months" (Colarelli, 1984). Participants are asked to rate the extent to which they agree with each statement on a scale ranging from strongly disagree to strongly agree. In the current study, a 7 point scale was used, ranging from 1 = strongly disagree to 7 = strongly agree. One item on the measure is reverse-scored. Scores from all items are summed to produce the participant's level of intention to stay, which ranges from 3 = minimal intentions to stay to 21 = strong intentions to stay. In the present study, the scale's internal consistency reliability was $\alpha = .89$. Saks and Ashforth (1997) achieved a similar internal consistency of $\alpha = .86$, and McNall, Masuda & Nicklin (2010) calculated Cronbach's $\alpha = .80$ using the same scale. Saks and Ashforth (1997) found support that this measure relates to other relevant work attitudes.

Qualitative Questions

In order to enrich the quantitative data elicited by the measures above, participants will also be asked qualitative questions about their experiences of being pregnant in the workplace. The following two open-ended questions are designed to create more thorough narratives of women's most influential experiences in the workplace:

- 1) Describe an experience you had at work that felt supportive of your pregnancy in a way that made you more inclined to want to continue at your job post-pregnancy.
- 2) Describe an experience you had at work that felt unsupportive of your pregnancy in a way that made you more inclined to want to leave your job post-pregnancy.

Chapter 4: Results

The results chapter includes preliminary analyses, analysis of the hypotheses and research questions, and post-hoc exploratory analyses.

Preliminary Analyses

Psychometric properties of the Pregnancy-Related Work Stress Scale. Since the Pregnancy-Related Work Stress Scale (PWSS) was created for this study, its psychometric properties had not previously been examined. Scores used in analyses were total scores for the scale. In order to provide a more complete view of the measure's properties, I will first discuss psychometric properties of the overall scale and then discuss how participants responded to specific items on the scale. The PWSS demonstrated good internal consistency with Cronbach's Alpha = .89. Additionally, no items would substantially impact reliability if deleted, as evidenced by Cronbach's Alphas ranging from .88 – .89 if an item was deleted. The PWSS was found to have a moderate correlation with the NuPDQ-17 (Pearson's r = .53, p < .01), which measures pregnancy-related stress. Whereas the PWSS is specific to the domain of work, the NuPDQ-17 is more general; a moderate correlation would be expected since they are both designed to measure stress experienced as a result of being pregnant. Thus, the PWSS shows evidence of concurrent validity.

In terms of responses to specific items on the PWSS, every item was endorsed as having occurred during their pregnancy by more than half of participants (ranging from 54.22% to 95.78% of participants). The most frequently endorsed item was, "I am concerned about my workplace/company's policies or views related to maternity leave", which also yielded one of the highest stress scores (M = 2.48). Other items that yielded

high mean stress scores were, "Physical changes of pregnancy (i.e. fatigue, nausea) make it more difficult (or impossible) for me to do work." (M=2.67), "I am reluctant to ask for accommodations (e.g. for physical needs) or time off (e.g. for doctor's appointments)." (M=2.24) and, "I am uncomfortable discussing my plans for maternity leave and/or returning to work with my boss/manager." (M=2.19). See Table 2 below for more detailed item-level statistics (see Table 1 in Appendix K for item-total statistics). The least commonly endorsed item, which also yielded the lowest total stress score (M=.87), was, "I have been given special privileges at work even though I did not ask for them."

Pregnancy-related Work Stress Scale - Item Level Data (N = 166)

Table 2

Item #	PWSS Item	Frequency /	Mean	SD
		Percentage*	Stressfulness**	
1	People at work have paid more attention	136 / 81.9%	1.74	1.30
	to my pregnant body (e.g. staring,			
	touching) than they did pre-pregnancy.			
2	People at work ask me more personal	148 / 89.2%	1.80	1.25
	questions (i.e. about my health, my			
	body) than they did pre-pregnancy.			
3	Physical changes of pregnancy (i.e.	155 / 93.4%	2.67	1.28
	fatigue, nausea) make it more difficult			
	(or impossible) for me to do work.			
4	I have changed some of the ways I do	143 / 86.1%	2.05	1.37
	my job due to physical limitations of			
	being pregnant.			
5	I am reluctant to ask for	149 / 89.8%	2.24	1.48
	accommodations (e.g. for physical			
	needs) or time off (e.g. for doctor's			
	appointments).			
6	People at work view me as less	118 / 71.1%	1.49	1.34
	committed to my job or organization.			
7	People at work do not expect me to be	114 / 68.7%	1.48	1.42
	stay committed to my job after I give			
	birth (i.e they expect I will work less or			
	even leave my job).			
8	I am uncomfortable discussing my plans	155 / 93.4%	2.19	1.37
	for maternity leave and/or returning to			
	work with my boss/manager.			

Table 2. Pregnancy-related Work Stress Scale - Item Level Data (continued)

Item #	PWSS Item	Frequency /	Mean	SD
		Percentage*	Stressfulness**	
9	I am concerned about my	159 / 95.8%	2.48	1.41
	workplace/company's policies or views related to maternity leave.			
10	When I'm with co-workers, I try to avoid talking about my pregnancy.	129 / 77.7%	1.46	1.28
11	I worry that my co-workers think less of me professionally now that I'm pregnant.	126 / 75.9%	1.48	1.31
12	I feel supported by my co-workers.	152 / 91.6%	1.39	1.04
13	I feel like people at work have lower expectations of me professionally.	118 / 71.1%	1.40	1.29
14	I have been given special privileges at work even though I did not ask for them.	90 / 54.8%	.87	1.12
15	People at work give me unsolicited advice or express concerns related to my pregnancy (i.e. eating, sleep).	143 / 86.1%	1.90	1.31

^{*} Number of participants who endorsed this item as something that they experienced / percentage of total participants who endorsed the item.

Demographic variables. A correlation matrix of Pearson's r correlation coefficients was created using SPSS to capture information about the relationships between demographic, criterion and outcome variables (see Table 3). This table demonstrates that personal income and age are positively correlated (medium to large effect size), such that women who reported higher annual incomes were also older on average. Women's levels of education were also positively correlated with personal income and age (large effect sizes), indicating that women who had completed more advanced degrees tended to be older and earn a higher annual income. Relatedly, women who had completed more advanced degrees also earned a higher percentage of their

^{**}Average of scores on a scale of 1-5, 1- Not at all Stressful, 2- Slightly Stressful, 3-Somewhat Stressful, 4- Very Stressful, 5- Extremely Stressful. A score of 0 was used when participants had not experienced a given situation.

annual household income (medium effect size). Relationship status was significantly correlated with age, personal income, education completed, and percentage of household income (small to medium effect sizes). Pregnancy-related work stress was negatively correlated with level of education completed and relationship status (small effect sizes), such that women with higher levels of education reported lower levels of pregnancy-related work stress and women in committed relationships also reported lower levels of pregnancy-related work stress (regardless of whether they were married or unmarried, cohabitating or living separately).

Additional correlations seen below served to inform post-hoc analyses. For example, workplace social support was significantly correlated with job satisfaction, turnover intentions (large effect sizes), pregnancy-related work stress (medium to large effect size), negative affect (medium effect size), satisfaction with family leave, pregnancy distress (small to medium effect sizes), and positive affect (small effect size).

Analysis of Hypotheses

Correlation hypotheses. Hypotheses 1a-e and 3a-e examined the relationship between individual factors, workplace factors, and job outcomes (job satisfaction, turnover intentions). T-tests were used to examine these hypotheses. As stated in Hypothesis 1a-e, we expected that workplace social support, positive affect, and satisfaction with family leave would correlate positively with job satisfaction. We expected that pregnancy-related work stress and negative affect would correlate negatively with job satisfaction. For hypotheses 3a-e we predicted that turnover intentions (for which high scores indicate increased intent to leave one's job) would correlate positively with pregnancy-related work stress and negative affect. We expected

that turnover intentions would correlate negatively with workplace social support, positive affect, and satisfaction with family leave. A correlation matrix of Pearson's r correlation coefficients was created to capture information about the relationships among the variables with hypothesized relationships (See Table 4).

Table 3

Correlations among demographic and criterion variables

	1	2	3	4	5	6	7	8	9	10	11	12	13	
1. Age	-													
2. Personal Income	.47**	-												
3. Education Completed	.60**	.57**	-											
4. Percentage of Household income	.11	.13	.29**	-										
5. Relationship Status	22**	22**	32**	43**	-									
6. NuPDQ-17	004	11	07	.017	001	-								
7. PWSS	09	14	15*	12	.16*	.51**	-							
8. PANAS-P	.05	09	06	08	01	26**	17*	-						
9. PANAS-N	18*	23*	12	04	.14*	.46**	.44**	25*	-					
10. JSS	.14	.25**	.18*	10	07	24**	43**	.12	37*	-				
11. TI	09	21**	16*	.04	.10	.17*	.29**	03	.15*	73**	-			
12. SPOS	03	.05	.02	.07	.12	26**	48**	.19*	37**	.65**	50**	-		
13. SFL	04	.16*	02	.09	10	15	20*	13	09	.18*	19*	.25**	-	
14. WCS	.06	.19*	.00	15	.21**	00	.03	.04	01	11	.13	.08	.10	-

N=166. NuPDQ=17-item Pregnancy Distress Questionnaire – Revised, PWSS = Pregnancy-Related Work Stress Scale, PANAS-P = Positive and Negative Affect Schedule – Positive; PANAS-N = Positive and Negative Affect Schedule – Negative, JSS = Job Satisfaction Survey, TI= measure of turnover intentions, SPOS= Survey of Perceived Organizational Support, SFL= Satisfaction with Family Leave, WCS= Work Centrality Scale; *=p<.05; **=p<.01

Table 4

Correlations among individual criterion and outcome variables

	1	2	3	4	5	6	7
1. JSS	1						
2. TI	73**	-					
3. SPOS	.65**	50**	-				
4. PWSS	.43**	.29**	48**	-			
5. PANAS-P	.12	03	.19*	17*	-		
6. PANAS-N	.37**	.15*	37**	44**	25**	-	
7. Satisfaction	.18*	194*	.25**	20*	13	09	-
with Family							
leave							

N=166. JSS=Job Satisfaction Survey; TI= measure of turnover intentions; SPOS= Survey of Perceived Organizational Support; PWSS= Pregnancy-Related Work Stress Scale; PANAS-P= Positive and Negative Affect Schedule- Positive; PANAS-N= Positive and Negative Affect Schedule- Negative **=p<.01; *=p<.05

Hypothesis 1: Following this hypothesis, pregnancy-related work stress, negative affect, workplace social support, and satisfaction with family leave all showed significant relationships with job satisfaction; effect sizes ranged from small to large. Contrary to this hypothesis, positive affect was not significantly correlated with job satisfaction.

Hypothesis 1a: Following hypothesis 1a, pregnancy-related work stress was negatively correlated with job satisfaction (r = -.43, p < .001, medium effect size), such that women with higher levels of pregnancy-related work stress reported lower job satisfaction during pregnancy.

Hypothesis 1b: Following hypothesis 1b, workplace social support was positively correlated with job satisfaction (r = .65, p < .001, large effect size), such that women who reported higher levels of workplace social support reported higher job satisfaction during pregnancy.

Hypothesis 1c: Contrary to hypothesis 1c, there was not a significant correlation between positive affect and job satisfaction, though the correlation was in the expected direction (r = .12, p = .13).

Hypothesis 1d: Following hypothesis 1d, negative affect was negatively correlated with job satisfaction (r = -.37, p < .001, medium effect size), such that women with higher levels of negative affect reported lower job satisfaction during pregnancy.

Hypothesis 1e: Following hypotheses 1e, satisfaction with family leave was positively correlated with job satisfaction (r = .18, p < .05, small effect size), such that women who report higher levels of satisfaction with family leave reported higher job satisfaction during pregnancy.

Hypothesis 3: Following this hypothesis, pregnancy-related work stress, workplace social support, negative affect, and satisfaction with family leave were significantly correlated with turnover intentions in the expected direction. Positive affect was not found to have a significant correlation with turnover intentions. Effect sizes ranged from small to large.

Hypothesis 3a: Following this hypothesis, pregnancy-related work stress was significantly correlated with turnover intentions (r = .29, p < .001, medium effect size), such that women who reported higher levels of pregnancy-related work stress also reported a higher level of turnover intentions.

Hypothesis 3b: Following this hypothesis, the relationship between workplace social support and turnover intentions was significant and in the expected direction (r = -.50, p < .001, large effect size), such that women who reported

higher levels of workplace social support reported lower levels of turnover intentions.

Hypothesis 3c: The relationship between positive affect and turnover intentions was not significant (r = -.03, p = .75). Therefore, there is insufficient support for this hypothesis.

Hypothesis 3d: The relationship between negative affect and turnover intentions was significant and in the expected direction (r = .15, p < .05, small effect size), such that women who reported higher levels of negative affect also reported higher levels of turnover intentions.

Hypothesis 3e: The relationship between satisfaction with family leave and turnover intentions was significant and in the expected direction (r = -.19, p < .05, small effect size), such that women who reported higher satisfaction with family leave reported lower levels of turnover intentions.

Moderation hypotheses. The moderation analyses were conducted in SPSS using the PROCESS macro developed by Hayes (2013). PROCESS uses a path-analysis approach to moderation that simultaneously models multiple conditional effects using ordinary least squares regression for continuous outcomes. Bootstrap bias-corrected confidence intervals (95%) are estimated to guide inference, where nonzero overlapping confidence intervals indicate a significant effect. This program also estimates conditional effects of the predictor on the outcome. In other words, it examines how the effect of the moderator may become more or less significant at low, medium, and high levels of the moderator variable. For the present model, we tested conditional effects of pregnancy-related work stress on job satisfaction moderated by four different variables: workplace

social support, satisfaction with family leave, positive affect, and negative affect.

Pregnancy-related work stress and job satisfaction were mean-centered and product terms were created using PROCESS (Hayes, 2013).

Hypothesis 2: Workplace social support, satisfaction with family leave, and positive and negative affect will each act as moderators in the relationship between pregnancy-related work stress and job satisfaction.

Hypothesis 2a: Workplace social support was tested as a moderator of the effects of pregnancy-related work stress on job satisfaction. In the first step of this model, pregnancy-related work stress was a significant predictor of job satisfaction. However, contrary to this hypothesis, level of workplace social support was not found to moderate the relationship between pregnancy-related work stress and job satisfaction (b = -.0005, t(162) = -.71, p > .05; see Table 5).

Test of SPOS as moderator of the effects of PWSS on job satisfaction

Table 5

JSS	b	SE	t	p
SPOS	.08	71	7.23	.00
PWSS	02	.01	-2.62	.01
SPOS*PWSS	0005	.0007	71	.48

N = 166. SPOS = Survey of Perceived Organizational Support; PWSS = Pregnancy Work Stress Scale; JSS = Job Satisfaction Scale

Hypothesis 2b: Satisfaction with family leave was tested as a moderator of the relationship between pregnancy-related work stress and job satisfaction. In the first step of this model, pregnancy-related work stress was a significant predictor of job satisfaction. Contrary to this hypothesis, level of satisfaction with family

leave was not found to be a significant moderator (b = -.0006, t(162) = -.13, p > .05; see Table 6).

Table 6

Table 7

Test of Satisfaction with Family Leave as moderator of the effects of PWSS on job satisfaction

JSS	b	SE	t	p
SFL	.07	.06	1.26	.21
PWSS	05	.01	-5.69	.00
SFL*PWSS	0006	.01	13	.90

N = 166. SFL = Satisfaction with Family Leave; PWSS = Pregnancy Work Stress Scale; JSS = Job Satisfaction Scale

Hypothesis 2c: Positive affect was examined as a moderator in the relationship between pregnancy-related work stress and job satisfaction. In the first step of this model, pregnancy-related work stress was a significant predictor of job satisfaction. Contrary to this hypothesis, level of positive affect was not found to be a significant moderator (b = -.01, t(162) = -.97, p > .05; see Table 7).

Test of Positive Affect as moderator of the effects of PWSS on job satisfaction

JSS	b	SE	t	p
PANAS_P	.11	.18	.61	.55
PWSS	05	.01	-5.79	.00
PANAS_P*PWSS	01	.01	97	.33

N = 166. PANAS_P = Positive Affect; PWSS = Pregnancy Work Stress Scale; JSS = Job Satisfaction Scale

Hypothesis 2d: Negative affect was tested as a moderator in the relationship between pregnancy-related work stress and job satisfaction. In the first step of this

model, pregnancy-related work stress was a significant predictor of job satisfaction. Contrary to this hypothesis, in the next step negative affect was not found to be a significant moderator (b = .01, t(162) = 1.04, p > .05; see Table 8). Table 8

Test of Negative Affect as moderator of the effects of PWSS on job satisfaction

JSS	b	SE	t	p
PANAS_N	54	.24	-2.25	.03
PWSS	04	.01	-4.71	.00
PANAS_N*PWSS	.01	.01	1.04	.30

N = 166. PANAS_N = Negative Affect; PWSS = Pregnancy Work Stress Scale; JSS = Job Satisfaction Scale

Hypothesis 4: Workplace social support, satisfaction with family leave, and positive and negative affect were tested as moderators in the relationship between pregnancy-related work stress and job satisfaction. In support of this hypothesis, workplace social support was found to moderate the relationship between pregnancy-related work stress and turnover intentions. However, there was not support for the moderation effects of the other four variables on this relationship.

Hypothesis 4a: Workplace social support was tested as a moderator in the relationship between pregnancy-related work stress and turnover intentions. In the first step of this model, pregnancy-related work stress was a significant predictor of turnover intentions. Following this hypothesis, workplace social support was found to moderate the relationship between pregnancy-related work stress and turnover intentions (B = .01, t = 2.03, p = .04). We then tested the significance of slopes for the pregnancy-related work stress and turnover intentions relationship

at different levels (-1 SD, Mean, and +1 SD) of workplace social support (see Table 10). Results at this step were contrary to our prediction that the magnitude of the relationship would be smaller at higher levels of social support and greater at lower levels of social support. Instead, we found that pregnancy-related work stress was not significantly related to turnover intentions at low levels of workplace social support (B = -0.002, SE = .038, p = .951). However, at mean (B = 0.055, SE = 0.036, p = .064) and high (B = 0.113, SE = .053, p = .017) levels of workplace social support, pregnancy-related work stress was significantly related to turnover intentions (See Table 10).

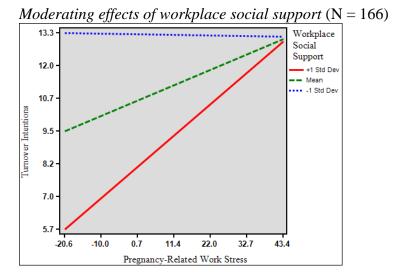
Table 9

Test of Workplace Social Support as moderator of the effects of PWSS on Turnover Intentions

TI	b	SE	t	p
SPOS	24	.04	-6.15	.00
PWSS	.06	.03	1.53	.13
SPOS*PWSS	.01	.00	2.03	.04

N = 166. SPOS = Survey of Perceived Organizational Support (measure of workplace social support); PWSS = Pregnancy Work Stress Scale; TI = measure of intentions to quit and turnover

Table 10



Hypothesis 4b: Satisfaction with family leave was tested as a moderator of the relationship between pregnancy-related work stress and turnover intentions. In the first step of this model, pregnancy-related work stress was a significant predictor of turnover intentions. But in the next step, level of satisfaction with family leave was not found to be a significant moderator (b = .00, t(162) = -.14, p > .05; see Table 11).

Hypothesis 4c: Positive affect was tested as a moderator in the relationship between pregnancy-related work stress and turnover intentions. In the first step of this model, pregnancy-related work stress was a significant predictor of turnover intentions. Contrary to this hypothesis, level of positive affect was not found to be a significant moderator (b = .03, t(162) = .82, p > .05; see Table 12).

Table 11

Test of Satisfaction with Family Leave as moderator of the effects of PWSS on Turnover Intentions

TI	b	SE	t	p
SFL	40	.22	-1.83	.07
PWSS	.12	.03	3.77	.00
SPOS*PWSS	.00	.01	14	.89

N=166. SFL = Satisfaction with Family Leave; PWSS = Pregnancy Work Stress Scale; TI = measure of intentions to quit and turnover

Table 12

Test of Positive Affect as moderator of the effects of PWSS on Turnover Intentions

j_j		3	J	
TI	b	SE	t	p
PANAS_P	.16	.53	.30	.77
PWSS	.13	.03	4.38	.00
PANAS_P*PWSS	.03	.04	.82	.41

N=166. PANAS_P = Positive Affect; PWSS = Pregnancy Work Stress Scale; TI = measure of intentions to quit and turnover

Hypothesis 4d: Negative affect was tested as a moderator in the relationship between pregnancy-related work stress and turnover intentions. In the first step of this model, pregnancy-related work stress was a significant predictor of turnover intentions. Contrary to this hypothesis, level of negative affect was not found to be a significant moderator (b = -.07, t(162) = -1.47, p > .05; see Table 13).

Table 13

Test of Negative Affect as moderator of the effects of PWSS on Turnover Intentions

TI	b	SE	t	p
PANAS_P	.44	.71	.62	.54
PWSS	.14	.03	4.01	.00
PANAS_N*PWSS	07	.04	-1.47	.14

N=166. PANAS_N = Negative Affect; PWSS = Pregnancy Work Stress Scale; TI = measure of intentions to quit and turnover

Analyses of Research Questions

Research Question 1. Work centrality was tested as a moderator in the relationship between pregnancy-related work stress and job satisfaction. The results of this analysis suggest that level of work centrality is not a significant moderator in this relationship

$$(b = .0007, t(162) = .90, p > .05;$$
 see Table 14).

Table 14

Test of Work Centrality as moderator of the effects of PWSS on job satisfaction

JSS	b	SE	t	p
WCS	.02	.01	2.05	.042
PWSS	05	.01	-6.46	.00
WCS*PWSS	.0007	.0008	.90	.37

N = 166. WCS = Work Centrality Scale; PWSS = Pregnancy Work Stress Scale; JSS = Job Satisfaction Scale

Research Question 2: Work centrality was tested as a moderator in the relationship between pregnancy-related work stress and turnover intentions. The

results of this analysis suggest that level of work centrality is not a significant moderator in this relationship (b = .00, t(162) = .90, p > .05; see Table 15).

Table 15

Test of Work Centrality as moderator of the effects of PWSS on Turnover Intentions

TI	b	SE	t	p
WCS	06	.04	-1.50	.14
PWSS	.13	.03	4.64	.00
WCS*PWSS	.00	.00	.45	.66

N = 166. WCS = Work Centrality Scale; PWSS = Pregnancy Work Stress Scale; TI = measure of intentions to quit and turnover

Research Question 3. How will participants respond to the open-ended prompt, "Describe an experience you had at work that felt <u>supportive</u> of your pregnancy in a way that made you more inclined to want to <u>continue at your job</u> post-pregnancy."?

Research Question 4. How will participants respond to the open-ended prompt, "Describe an experience you had at work that felt <u>unsupportive</u> of your pregnancy in a way that made you more inclined to want to <u>leave</u> your job post-pregnancy."?

To analyze participants' responses to Research Questions 3 and 4, we used a modified version of the consensual qualitative research method (CQR-M; Spangler, Liu, & Hill, 2012) of qualitative data analysis. A small team of researchers was composed, consisting of the principle investigator, a doctoral candidate in psychology, and another doctoral student in the same program who had studied and participated on research teams using CQR-M. As the first step, the research team discussed their biases and expectations

as they pertained to the material being coded. Responses were divided into two domains – supportive experiences and unsupportive experiences – based on the content of their answers. Next, the coders read a subset of participants' open-ended responses (N = 25), and independently developed categories within each domain to capture themes in the responses. The research team then compared and discussed their categories in order to create a preliminary set of agreed upon categories. Next, each member of the coding team independently coded participants' responses into one or more categories, and the team convened periodically to discuss coding, talk through disagreements, and reach consensus. Once about half of participants' responses were coded, the doctoral advisor reviewed the team's coding and offered feedback. Domains and categories for each research question are listed in Tables 16 and 17, along with the frequency and percentage of occurrence of responding for each category.

Looking at the qualitative results, the most frequently endorsed categories of experiences that women reported as supportive in a way that made them more inclined to stay at their jobs were: employer offering flexibility with work schedule or workload during and/or after pregnancy (n = 38), general sense that co-workers, superiors, and environment are supportive (n = 22), receiving a positive reaction from co-workers or superiors upon sharing the news of pregnancy (n = 20), expectation of future support after the child is born (n = 20), and having co-workers or superiors who are also parents or parents-to-be (n = 20).

The most frequently endorsed categories of unsupportive workplace experiences that made participants more inclined to leave their jobs were: insufficient paid leave (n = 21), lack of consideration for employee's physical needs related to pregnancy (including

breastfeeding) (n = 16), inflexible work schedule during or after pregnancy (n = 15), and negative reactions of co-workers/superiors (n = 15). However, approximately one third of participants (n = 42) who responded to this question stated that they had *no* unsupportive experiences at work that would make them more inclined to leave their job post-pregnancy.

Table 16
Supportive Experiences that made women more inclined to stay at their job postpregnancy (N = 133)

Supportive Experience	Frequency (n)	%*
Employer offered flexibility with work schedule or workload during and/or after pregnancy	38	28.6%
A general sense that co-workers, superiors, and environment are supportive	22	16.5%
Receiving a positive reaction from co-workers or superiors upon sharing the news of pregnancy (e.g. excited, happy, congratulations)	20	15%
Expectation of future support after child is born (e.g., good pay, good health insurance, job security, child care)	20	15%
Co-workers/superiors are also parents or parents-to-be	20	15%
Superiors and/or co-workers encourage, support, or facilitate maternity leave	15	11.3%
No supportive experience	14	10.5%
Co-workers or superiors demonstrating that they care about the employee's well-being throughout her pregnancy	12	9%
Paid maternity leave	10	7.5%
Co-workers available/willing to assist with workload	10	7.5%
Lack of negative response to maternity or family obligations from co-workers/superiors	9	6.7%
Co-workers celebrated the pregnancy through gifts, cards, or baby showers	7	5.3%
Employee received a promotion or pay raise	3	2.3%
No response**	1	0.7%

^{*}Percentages add up to more than 100% because responses could be coded in more than one category. Percentages are calculated out of the number of participants who responded to questions in the qualitative portion of this survey (N = 133).

^{**}Only includes participants who responded to the previous open-ended prompt and left this one blank.

Unsupportive Experiences that made women more inclined to leave their job postpregnancy (N = 133)

Table 17

Unsupportive Experience	Frequency (n)	Percentage*	
No unsupportive experience	42	31.6%	
Insufficient paid leave offered	21	15.8%	
Lack of consideration for employee's physical needs related to pregnancy (including breastfeeding)	16	12.0%	
Negative reactions of co-workers/superiors	15	11.3%	
Inflexible work schedule during or after pregnancy	15	11.3%	
Heavy workload and/or long hours do not allow for work-life balance during pregnancy or motherhood	10	7.5%	
Other	10	7.5%	
Diminished opportunities for advancement, work responsibilities, or work hours as a result of pregnancy	8	6.0%	
Superior implied/stated potential negative consequences at work due to pregnancy/motherhood	8	6.0%	
Reduced work responsibilities, hours, or opportunities for advancement	8	6.0%	
No response**	8	6.0%	
Lack of information regarding maternity leave	7	5.2%	
Superiors or co-workers made decisions about the employee without her input	5	3.75%	
Awareness that employee's absence will create a burden for co-workers	5	3.75%	
Observing negative experiences of co-workers who are parents	5	3.75%	
Salary inadequate to cover daycare costs	3	2.3%	

^{*}Percentages add up to more than 100% because responses could be coded in more than one category. Percentages are calculated out of the number of participants who responded to questions in the qualitative portion of this survey (N = 133).

^{**}Only includes participants who responded to the previous open-ended prompt and left this one blank.

Additional Analyses

Analysis of family leave. Since family leave is an important factor in this study, it is helpful to contextualize some of the above results with information about participants' family leave. Participants in this study were asked about the clarity of their workplace family leave policies using a 7-point Likert-type scale (1 = very clear, 7 = very unclear). In this study, 45.8% of participants reported clear or very clear leave policies, 42.1% reported that their workplace policies were somewhat clear to somewhat unclear, and 12% of participants reported that their workplace policies were unclear or very unclear (M = 2.93, SD = 1.75).

Due to the complexity of family leave policies, participants were also given the opportunity to provide open-ended responses to explain the length of their paid leave and overall family leave at their current job. Given the ambiguity and nuance provided in these responses, we only used data that was easily translated into a clear number of weeks. As a result, there is not data for all participants regarding their family leave policies. See Table 18 below for a summary of the number of participants whose data was included for each family leave variable.

Table 18

Participants included for each family leave variable

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Weeks of family	Weeks of paid	Satisfaction with	Clarity of family			
leave allowed	leave	family leave	leave			
N = 155	N = 93	N = 166	N = 166			

Satisfaction with family leave was correlated with clarity of family leave, such that greater clarity in family leave policies was related to greater satisfaction with family leave ($\alpha = -.25$, p < .001). Interestingly, satisfaction with family leave was significantly

correlated with weeks of family leave allowed (α = .38, p < .001), but was not significantly related to weeks of paid leave (α = .17, p = .11). However, clarity in family leave did not show a significant relationship to amount of paid leave (α = .02, p = .82) or amount of overall family leave (α = -.03, p = .76).

Regression models of job outcome variables (job satisfaction and turnover intentions). In order to build models of job outcomes (job satisfaction, turnover intentions) for pregnant women and to examine the differential impact of pregnancy-related work stress, workplace social support, satisfaction with family leave and demographic variables on job-related outcomes, linear regressions were performed on job satisfaction and turnover intentions. Analyses were conducted using SPSS 23. Income was highly correlated (p < .01) with both of these criterion variables (see Table 3), so it was controlled for in the first step of both regression analyses. Pregnancy-related work stress, workplace social support, job satisfaction, and satisfaction with family leave were also identified as significant correlates of the two criterion variables that were rated in terms of participants' workplace perceptions and are potentially modifiable aspects of women's experiences of being pregnant at work.

Results for the final models can be seen in Tables 19 and 20 below. Results in Table 19 indicate that after controlling for personal income, the variables satisfaction with family leave, pregnancy-related work stress, workplace social support, and turnover intentions predict 65% of variance in job satisfaction ($\Delta R^2 = .65$, F(5, 161) = 60.99, p < .001). Effect size was large ($f^2 = 1.86$). Turnover intentions (p < .01), pregnancy-related work stress (p = .05), and workplace social support (p < .01) predicted unique variance in

job satisfaction, whereas satisfaction with family leave did not. Taken together, personal income (β = .12, p = .02), satisfaction with family leave (β = -.04, p = .34), pregnancy-related work stress (β = -.01, p = .05), workplace social support (β = .05, p < .001), and turnover intentions (β = -.14, p < .001) predict 66% of variance in job satisfaction (R^2 = .66, F(5, 161) = 62.12, p < .001).

Table 19

Model of job satisfaction

JSS	В	SE	β*	z	р
Income	.24	.07	.25	3.30	.001
R^2	.06		F Statistic:	10.86	.001
JSS					
Income	.12	.05	.12	2.47	.02
SFL	04	.04	05	96	.34
PWSS	01	.01	11	-1.98	.05
SPOS	.05	.01	.35	5.88	.00
TI	14	.02	51	-9.25	.00
R^2	.66		F Statistic:	62.12	.00
ΔR^2	.65		F Statistic:	60.99	.00

N= 166. JSS = Job Satisfaction Survey; Income = Personal Income; SFL = Satisfaction with Family Leave; PWSS = Pregnancy-Related Work Stress Scale; SPOS = Survey of Perceived Organizational Support; TI = Turnover Intentions

Results in Table 20 demonstrate that after controlling for personal income, pregnancy-related work stress, workplace social support, satisfaction with family leave, and job satisfaction predict 52% of variance in turnover intentions ($\Delta R^2 = .52$, F(5, 161) = 24.67, p < .001). Effect size was large ($f^2 = 1.08$). Job satisfaction was the only variable in this model to predict unique variance (p < .01). Taken together, personal income ($\beta = -.11$, p = .61), pregnancy-related work stress ($\beta = -.02$, p = .44), workplace social support ($\beta = -.03$, p = .47), satisfaction with family leave ($\beta = -.18$, p = .26), and job satisfaction ($\beta = -.03$, p = .47), satisfaction with family leave ($\beta = -.18$, p = .26), and job satisfaction ($\beta = -.03$)

2.51, p < .001) predict 53% of variance in turnover intentions ($R^2 = .53$, F(5, 161 = 9.22, p < .001).

Table 20

Model of turnover intentions

TI	В	SE	β*	z	р
Income	73	.27	21	-2.72	.007
R^2	.043	.043 F Statistic: 7.40			.007
TI					
Income	11	.20	03	52	.61
PWSS	02	.03	05	78	.44
SPOS	03	.04	06	72	.47
SFL	18	.16	06	-1.13	.26
JSS	-2.51	.27	69	-9.25	.00
R^2	.53		F Statistic: 36.20		
ΔR^2	.52	•	F Statistic:	34.67	.00

N = 166. TI = Turnover Intentions; Income = Personal Income; PWSS = Pregnancy-Related Work Stress Scale; SPOS = Survey of Perceived Organizational Support; SFL = Satisfaction with Family Leave; JSS = Job Satisfaction Survey

Work Centrality. As illustrated in Table 3, work centrality was correlated with personal income (r=.191, p<.05) and relationship status (r=.212, p<.01). However, it was not correlated with other variables of interest, including outcome variables (job satisfaction, turnover intentions). Thus, work centrality was not examined further in this study.

Summary

In sum, these results show that pregnancy-related work stress, social support in the workplace, level of satisfaction with family leave policies, and the employee's level of negative affect are all factors related to job satisfaction and turnover intentions for pregnant employees working full-time in the United States. More specifically, lower pregnancy-related work stress, higher workplace social support, higher satisfaction with

family leave policies, and lower negative affect are all correlated with higher job satisfaction and lower turnover intentions.

Participants in this study shared common experiences of pregnancy-related stressors in the workplace. In turn, there appears to be a relationship between these stressors and job outcomes for these employees (namely, job satisfaction and turnover intentions). However, workplace social support appears to have the potential to buffer the effects of pregnancy-related stress on turnover intentions during pregnancy.

Exploratory post hoc analyses demonstrate the combined importance of pregnancy-related work stress, workplace social support, and satisfaction with family leave in predicting job satisfaction and turnover intentions. Interestingly, data related to pregnancy-related stress at work, social support at work, and family leave policies also emerged in the qualitative data. In terms of family leave, it is noteworthy that women's satisfaction with family leave was associated with the clarity of their workplace family leave policies and the amount of family leave allowed by their employer, but was not significantly related to the amount of paid leave offered by their employer.

The wide range of income levels, education levels and employment statuses of the women involved in the present study provide support for the potential generalizability of these results across work settings. Participants' personal annual income ranged from less than \$25,000 (15.7%) to over \$200,000 (4.2%) and education levels ranged from high school or less (13.8%) to doctoral degrees (10.8%). Additionally, participants ranged in age from 18-42 and represented employment in 36 of the 50 states.

Chapter 5: Discussion

This study contributes to the small body of research about women's perceptions of the workplace during a first pregnancy and how those perceptions impact job satisfaction and career trajectories. This chapter will summarize and interpret the findings of the current study within the context of relevant literature and will discuss limitations and implications of this study as well as recommendations for future research. More specifically, it will examine: (1) the role of job satisfaction and turnover intentions as unique job outcomes for pregnant employees; (2) the construct of pregnancy-related work stress and its relationship to these job outcomes; (3) other factors (e.g., workplace social support, satisfaction with family leave) related to pregnant employees' job satisfaction and turnover intentions, (4) exploratory regression models of job satisfaction and turnover intentions for this population; and (5) qualitative findings about women's workplace experiences that may relate to turnover intentions. Finally, it will address this study's implications, limitations, and directions for future research.

Job Satisfaction versus Turnover Intentions

Throughout the data analyses, job satisfaction and turnover intentions were examined as job outcomes and the two constructs will often be discussed together in this chapter. In line with previous research, job satisfaction and turnover intentions were highly negatively correlated for participants in this study, such that women with higher levels of job satisfaction tended to report lower turnover intentions post-pregnancy. Despite the relationship between these constructs, it is important to first consider the unique importance of each in terms of the constructs these measures purport to measure before discussing this study's findings regarding pregnancy and work. Job satisfaction is

important for pregnant employees and their employers because it can affect day-to-day performance, such as productivity in the workplace and even the health of the employee's baby (Salihu et al., 2012). At the same time, turnover of pregnant employees could impact the employee's career trajectory and could result in extra costs and loss of productivity for the employer (Tett & Meyer, 1993). In addition to the tangible outcomes of actual turnover, research on turnover intentions of pregnant women is important because many assume that first-time motherhood represents a decision point regarding work-life balance and that women will opt out of the workforce after becoming mothers (Day & Downs, 2009). This assumption has been shown to affect how pregnant women are treated as employees (Gueutal & Taylor, 1991).

While job satisfaction captures a woman's subjective experience in the workplace, turnover intentions captures a decision or a specific step that women may take in light of factors in their lives both inside and outside of work. For example, women are likely to consider finances, childcare, medical needs, logistical concerns, the economy, and the long-term impact on their career goals when deciding whether or not to leave their current position (Fox & Quinn, 2014; Tett & Meyer, 1993). More and more, families are financially dependent on women (National Partnership for Women & Families, 2014; Laughlin, 2011); thus, turnover may not be a viable option for many pregnant women regardless of how dissatisfied they feel with their job. In sum, it can be difficult to capture the richness of women's turnover intentions during pregnancy, and the decision to turnover is distinct from a woman's level of job satisfaction.

Pregnancy-Related Work Stress

Definition and measurement. Before the present study, there was no measure of pregnancy-related stress related to the workplace or career. The Pregnancy Work Stress Scale (PWSS) was developed by this researcher to provide a domain-specific construct that captures pregnant women's perceptions of stressful workplace experiences, in contrast to the construct pregnancy-specific stress, which addresses a broader range of stressors such as physical symptoms, parenting concerns, and relationship stress (Alderdice, Lynn & Lobel, 2012). Developing such a measure was important in examining how pregnancy-related stress might relate to career constructs such as workplace social support, turnover intentions and job satisfaction. In this study, the PWSS was found to be a psychometrically sound measure in terms of the limited psychometric data that were collected and one that may be used in future research related to the intersection of pregnancy and work. The PWSS is a promising measure, as it counted for variance over and above existing measures, indicating that it adds something to the outcomes (job satisfaction, turnover intentions) that are not captured by the other variables in this study.

Although the PWSS measures women's total reported stress in response to all items, the item level data of the measure is informative in understanding women's experiences of pregnancy-related work stress in more detail. In their responses to the PWSS, many participants endorsed the same experiences at work related to their pregnancy. However, the stress ratings for these same experiences were not uniform, as participants separately indicated whether or not they had each experience and then how stressful that experience was. This may be due to differences in participants' workplace,

personal perceptions, or in their experience of pregnancy. This makes sense given that women in our survey came from a wide variety of demographic backgrounds and employment settings. Put simply, while women may share common pregnancy-related work stressors, what is stressful for one pregnant employee may not be stressful for another. For example, 95.8% of participants endorsed the item, "I am concerned about my workplace/company's policies or views related to maternity leave" and scores ranged from 1 (not at all stressful) to 5 (extremely stressful). This finding adds depth and complexity the current literature on pregnancy and work, which has shown that the workplace environment can be stressful and potentially problematic for pregnant women (e.g., Byron & Roscigno, 2014, Greenberg et al., 2009, Gueutal & Taylor, 1991). The PWSS in this study demonstrates that it was possible to identify a set of workplace pregnancy stressors, all of which were experienced by over half of participants in this study, and that this measure can be useful in future research on the intersection of pregnancy and work.

Relationship of pregnancy-related work stress to workplace and individual factors. Although relationships between pregnancy-related work stress (PWS) and other independent variables in this study were not hypothesized because it was a new measure, interesting correlations emerged between PWS and several variables in this study. In terms of its relationship to individual person factors, PWS was positively correlated with negative affect (p < .01, medium effect size) and negatively correlated with positive affect (p < .05, small effect size). In other words, greater positive affect was associated with lower pregnancy-related work stress, whereas greater negative affect was associated with higher pregnancy-related work stress. Additionally, PWS was negatively correlated

with level of education completed and relationship status (small effect sizes), such that women with higher levels of education reported lower levels of pregnancy-related work stress and women in committed relationships also reported lower levels of pregnancy-related work stress. In terms of its relationship to workplace-related factors, PWS was negatively correlated with workplace social support (p < .01, large effect size) and satisfaction with family leave (p < .05, small effect size), which aligns with previous research findings that feeling supported at work decreases stress and reduces role conflict (Rhoades & Eisenberger, 2002; Viswesvaran et al., 1999). These relationships warrant further study to determine how and why these concepts relate to one another.

Relationship of pregnancy-related work stress to job satisfaction and turnover intentions. As hypothesized, pregnancy-related work stress was positively associated with turnover intentions and negatively associated with job satisfaction (medium effect sizes). In other words, the results of this study indicated that women with higher PWSS scores were less satisfied with their jobs and more likely to want to leave their jobs. Given that previous models of occupational stress and turnover suggest that psychosocial stressors can start a process that moves the employee from job dissatisfaction to turnover intention to actual turnover (Mobley, Griffeth, Hand & Meglino, 1979; Price & Mueller, 1981), results from this study suggest that pregnancy-specific stressors may play a role in this pattern.

Other Factors Related to Job Satisfaction and Turnover Intentions

Correlations. As hypothesized, workplace social support, satisfaction with family leave, and negative affect all correlated with both job satisfaction and turnover intentions (small to large effect sizes). In line with previous research, lower negative affect, higher

satisfaction with family leave, and higher workplace social support were associated with higher job satisfaction and lower turnover intentions (Brown, Ferrara & Schley, 2002; Lent & Brown, 2006; Rhoades & Eisenberger, 2002; Salihu et al., 2012; Thoresen et al., 2003; Viswesvaran et al., 1999). The results of this study indicate that these findings in the extant career literature may be generalizable to employees who are pregnant with their first child.

In terms of participants' demographic variables, both personal income and education completed correlated with both turnover intentions and job satisfaction (small effect sizes). Both participants with higher annual income as well as those who had completed higher levels of education reported higher job satisfaction and lower turnover intentions. These findings support previous research indicating that women are less likely to withdraw from the workforce when they have higher levels of education, more job-specific training, and higher wages (Desai & Waite, 1991). Thus, the present study provides further support for examining individual and workplace factors that could impact a woman's perceptions and decisions about her career as she transitions into motherhood.

It is interesting to note that work centrality was not found to correlate with women's job satisfaction or turnover intentions in this study. Previous studies have yielded conflicting findings about the relationship between work centrality and job satisfaction for new parents (Bagger and Li, 2012; Feldman, Sussman and Zigler, 2004), so the lack of significant findings in this study could be a result of work centrality impacting women's career perceptions and intentions in different, and potentially opposite, ways. Alternatively, women may perceive that they need to work for financial

reasons, making work centrality less influential for their job satisfaction and turnover intentions. Work centrality may also relate to other workplace factors, such as how these women negotiate with their employer, that were not measured in this study. Another possible explanation is that work centrality is not accurately captured by the current available measures. Future research should continue to examine the role that work centrality might play for women as they become mothers and collect qualitative data, which could more clearly explain the nature of the relationships between work centrality and job satisfaction and turnover intentions for pregnant women.

Workplace social support as a moderator. A major purpose of this study was to identify moderators that might be points of intervention to improve job outcomes for full-time employees who are pregnant with their first child. Of the variables examined, workplace social support emerged as the only variable that acted as a moderator in the relationship between pregnancy-related work stress and turnover intentions. The moderation effect was found to be most significant at high levels of workplace social support and was not significant at low levels of workplace social support. Overall, this suggests that feeling supported in the workplace strengthens the relationship between pregnancy-related work stress and turnover intentions for women during a first pregnancy. While this finding was unexpected, one possible explanation is that women who feel more supported at work are viewed more as a whole person, rather than just an employee, and thus feel more free to consider leaving their jobs and pursuing opportunities that would reduce stress as they become parents. An additional factor might be that women who have supportive workplaces believe that they would continue

to be supported by people in their lives if they transition to a new job or decide to stay at home with their child.

Family leave. Consistent with previous research, satisfaction with family leave correlated with both job satisfaction and turnover intentions in this study (Brown, Ferrara & Schley, 2002). That is, women who reported higher levels of satisfaction with the leave they were offered also reported higher levels of overall job satisfaction and a higher likelihood of staying in their job post-pregnancy. Interestingly, participants' level of satisfaction with family leave was related to the overall amount of family leave allowed by their employer and the clarity of family leave policies, but was not significantly related to the amount of paid leave offered. In other words, women's satisfaction with their leave package did not seem related to monetary compensation, but instead to the clarity of communication about leave policies and willingness to provide more time off, whether paid or unpaid. The qualitative data discussed later in this chapter will illustrate in women's own words the relationship between maternity leave and their turnover intentions.

Exploratory Regression Models of Job Satisfaction and Turnover Intentions

After establishing the significance of relationships between the work-place constructs of interest in this study, we next sought to develop a regression model of job satisfaction and one of turnover intentions to better examine the amount of variance accounted for and to identify which variable(s) contributed unique variance to the criterion or outcome variables. The predictor variables selected for these regressions were ones that were potentially modifiable in the workplace (e.g., workplace social support, family leave policies).

Model of job satisfaction. A post hoc simultaneous regression showed that turnover intentions, pregnancy-related work stress, workplace social support, and satisfaction with family leave predicted 65% of variance in job satisfaction after controlling for the employee's personal income (large effect size). Turnover intentions, pregnancy-related work stress, and workplace social support predicted unique variance in job satisfaction, whereas satisfaction with family leave did not do so.

These findings are consistent with some of the factors that Lent and Brown's (2006) model identified as contributors to an employee's job satisfaction. Lent and Brown's model includes, among other factors, (a) work conditions and outcomes, and (b) goal-relevant environmental supports, resources, and obstacles. Correspondingly, this study found that (a) workplace social support, and (b) pregnancy-related work stress and satisfaction with family leave all had significant relationships with job satisfaction. Given the relevance of pregnancy-specific factors in this study, future research should continue to examine how models of job satisfaction and turnover intentions may be constructed in light of pregnancy and motherhood.

Model of turnover intentions. In a similar simultaneous regression, job satisfaction, pregnancy-related work stress, workplace social support, and satisfaction with family leave predicted 52% of variance (large effect) in turnover intentions, controlling for personal income. All predictor variables in this model correlated with turnover intentions (small to large effect sizes) when considered alone. However, job satisfaction was the only one of these variables to predict unique variance, and this variable appeared to subsume the other variables in this model. Future research may look

more closely at what these measures have in common, and possibly refining some of these measures to capture the unique contribution of each construct more clearly.

Qualitative Findings

Qualitative data was collected to enrich the quantitative findings by compiling specific, real-life events that may be key in determining women's decisions about their work. A number of interesting themes as well as illustrative participant quotes arose from the qualitative data. Participants were asked to respond to these two prompts: (1)

Describe an experience you had at work that felt supportive of your pregnancy in a way that made you more inclined to want to continue at your job post-pregnancy." and (2)

Describe an experience you had at work that felt unsupportive of your pregnancy in a way that made you more inclined to want to leave your job post-pregnancy."

Responses to each qualitative question were coded independently, with separate domains created for supportive and unsupportive responses. However, we found that consistent themes emerged across domains, indicating that there may be certain aspects of the workplace that women report as relating to them being either more or less inclined to stay at their job. The consistent themes that emerged across domains (listed from most to least common) were: 1) Things people do and say in the workplace, 2) Demands of the job, 3) Pay, 4) Career trajectory, 5) Paid leave, 6) Support for maternity leave, 7) Help from colleagues, and 8) Other parents in the workplace. Each theme represents areas to consider for changes and improvements within the workplace to improve retention of female employees post-pregnancy. Describing themes across separate domains goes beyond what is typically reported in results sections describing CQR-M analyses and are therefore integrated into the discussion of findings. Table 21 illustrates how the coded

categories from each domain fit into these themes and the total number of times this theme was endorsed in the study. This differs from Tables 16 and 17 in the results chapter in that it combines categories into broader themes that apply across supportive and unsupportive domains.

Themes across supportive and unsupportive experiences that may influence women's turnover decisions post-pregnancy (N = 133)

Table 21

Things people do and say in the workplace	
Supportive Experiences	Unsupportive Experiences
Receiving a positive reaction from co-	Negative reactions of co-
workers or superiors upon sharing the	workers/superiors
news of pregnancy (e.g. excited, happy,	_
congratulations)	
A general sense that co-workers, superiors,	Superiors or co-workers made decisions
and environment are supportive	about the employee without her input
Co-workers or superiors demonstrating	
that they care about the employee's well-	
being throughout her pregnancy	
Lack of negative response to maternity or	
family obligations from co-	
workers/superiors	
Co-workers celebrated the pregnancy	
through gifts, cards, or baby showers	
N = 70, 52.6%	N = 20, 15%
Demands of the job	
Supportive Experiences	Unsupportive Experiences
Employer offered flexibility with work	Lack of consideration for employee's
schedule or workload during and/or after	physical needs related to pregnancy
pregnancy	(including breastfeeding)
a. Employer gave adequate time	Inflexible work schedule during or after
off for doctor's appointments	pregnancy
b. Employer allows teleworking	Heavy workload and/or long hours do not
c. Employer made workplace	allow for work-life balance during
accommodations in response to	pregnancy or motherhood
physical needs during pregnancy	
d. Employer offered flexible	
schedule/hours	
e. Employer reduced or eliminated	
travel requirement during	
pregnancy	N 41 20 90/
N = 38, 28.6%	N = 41, 30.8%

Career Trajectory	
Supportive Experiences	Unsupportive Experiences
Expectation of future support after child is	Superior implied/stated potential negative
born (e.g., good pay, good health	consequences at work due to
insurance, job security, child care)	pregnancy/motherhood
	Reduced work responsibilities, hours, or
	opportunities for advancement
N = 20, 15%	N = 16, 12%
Other parents in the workplace	
Supportive Experiences	Unsupportive Experiences
Co-workers/superiors are also parents or	Observing negative experiences of co-
parents-to-be	workers who are parents
N = 20, 15%	N = 5, 3.8%
Support for maternity leave	
Supportive Experiences	Unsupportive Experiences
Superiors and/or co-workers encourage,	Lack of information regarding maternity
support, or facilitate maternity leave	leave
N = 15, 11.3%	N = 7, 5.3%
Paid leave	
Supportive Experiences	Unsupportive Experiences
Paid maternity leave	Insufficient paid leave offered
N = 10, 7.5%	N = 7, 5.3%
Help from colleagues	
Supportive Experiences	Unsupportive Experiences
Co-workers available/willing to assist with	Awareness that employee's absence will
workload	create a burden for co-workers
N = 10, 7.5%	N = 5, 3.8%
Pay	
Supportive Experiences	Unsupportive Experiences
Employee received a promotion or pay	Salary inadequate to cover daycare costs
raise	
N = 3, 2.3%	N = 3, 2.3%

Things people do and say in the workplace. Given the extant research on pregnancy discrimination in the workplace (e.g., Greenberg et al., 2009), it was not surprising that the words, actions, and behaviors of people within the workplace might be perceived to influence participants' decisions about their job post-pregnancy. Over half of participants cited people saying or doing something *supportive* in the workplace as a

reason they might be more inclined to stay at their job, while 15% of participants cited people saying or doing something *unsupportive* in the workplace as a reason they might be more inclined to leave their job.

Supportive Experiences. Women in this study reported feeling supported when co-workers had a positive reaction to the news of their pregnancy, when they received gifts, cards, or baby showers at work, and when people at work expressed concern for their well-being. Additionally, women felt supported simply by a lack of negativity in the workplace, implying that perhaps women fear negative reactions at work and thus experience a sense of relief when this fear is not realized. For example, one woman wrote, "I did not feel any shock or resentment or negative concern regarding the news, which frankly surprised me."

In addition to reporting specific experiences or interactions, women in this study cited the overall supportiveness of their workplace in addition to family-specific support as factors that make them more inclined to stay at their jobs. For example, supportive responses in this category included, "General attitude in the office that family life is very important," "The SVP on my team who had his first child in December came to me to let me know he was here to support me as I needed it," and, "Everyone seemed very happy for me when I told them the news (my boss cried!)." This builds on previous research that increasing social support in the workplace – whether general or work-family-specific – has the potential to create more positive work-family climates and reduce work-family conflict for employees (Kossek et al., 2011).

Unsupportive experiences. In terms of unsupportive things that people say and do in the workplace, women in this study cited instances of co-workers or superiors having

negative reactions to their pregnancy and making decisions about the employee without her input. One woman's story encapsulates both aspects of this theme, "I feel unsupported every day I go to work. I had to go to the emergency room and my co worker called my phone over and over because she didn't want to stay at work ... my boss didn't even tell her to stop... then the 1st person I told I was pregnant with my bss [sic] and she let all my co-workers know without my consent."

Interestingly, previous studies such as Greenberg et al. (2009) have focused on women's private lives being made public at work without their consent, such as coworkers commenting on pregnant women's bodies or asking overly personal questions. While women reported that this happened on the PWSS, this type of stressor was not mentioned as a factor that would contribute to their decision to leave/stay.

Demands of the job. The demands of a woman's job during and after pregnancy are another factor that might contribute to women's turnover intentions post-pregnancy.

28.6% of women in this study cited their employer's flexibility with work as a supportive experience that might reduce their turnover intentions. More specifically, these women mentioned that their employers gave them adequate time off for doctor's appointments, allowed teleworking, made workplace accommodations in response to physical needs during pregnancy, offered flexible work schedules, and reduced or eliminated travel during pregnancy. For example, one woman stated, "When I had terrible morning sickness, they made accommodations for me without making me feel bad." Another woman shared, "My supervisor banned me from working in the garden center due to working around pesticides and heavy lifting."

In terms of unsupportive experiences, 30.8% of participants cited demands of their job as a factor that would make them more inclined to leave their job post-pregnancy. Specifically, these participants cited a lack of consideration for employee's physical needs related to pregnancy (including breastfeeding), inflexible work schedules during or after pregnancy, and a workload that does not allow for work-life balance during pregnancy or motherhood. For example, one woman shared, "My office is also about to undergo a big renovation, and even though the lactation room is depressingly inadequate for the many, many breastfeeding moms at any given time (it's tiny and in the basement, and there's only one of them for up to 20 women at a time to use), there are no plans to add a larger or nicer room. It's a small thing, but it sends a message." This builds upon previous research showing that pregnant women often need minor accommodations at work in order to protect their health, but many women never ask their employers for this type of accommodation, possibly for fear of negative consequences at work (National Partnership for Women & Families, 2014).

Career trajectory. Some women in this study cited perceptions of anticipated post-pregnancy experiences at their job as factors in deciding whether to stay or leave. In terms of supportive experiences, women talked about the perception that their workplace would provide instrumental supports after their child is born as a reason they might be more inclined to stay at their job. More specifically, these women talked about good pay, good health insurance, job security, and child care as incentives for staying at their job post-pregnancy. In terms of unsupportive experiences, women cited the perception that pregnancy would negatively impact their career trajectory with their current employer as a factor that would make them more inclined to leave their job post-pregnancy. Women

specifically mentioned superiors implying or directly stating that there could be negative consequences at work as well as reduced work responsibilities, hours, or opportunities for advancement due to their pregnancy and transition into motherhood. This finding builds upon the finding by the National Partnership for Women and Families (2014) that twenty-seven percent of women who have given birth and return to work at their pre-birth employer report experiencing bias based on perceptions of their commitment to their jobs, with reported consequences of lost promotions or pay increases, reduced work hours or responsibilities, and losing their jobs entirely. The information in this study indicates that women perceive these biases during pregnancy, not just after, and that the anticipation of this treatment may affect their turnover intentions.

Other parents in the workplace. Whether positive or negative, women in this study cited their observations of other parents in their workplace as a factor that might influence their turnover intentions. As one woman stated, "Although no one at work is aware of my pregnancy yet, I do feel supported knowing that many of my coworkers have recently had babies, and they have been very successful in juggling work and life responsibilities." Women in this study talked about the mere presence of other parents in their workplace as a sign of support for parenthood, as well as more explicit messages of support and understanding from these working parents. This builds upon previous research indicating that pregnancy can challenge a woman's professional identity as an "ideal worker", but that their personal identity can be affirmed as they become connected to a network of working parents (Greenberg et al., 2009).

In terms of unsupportive experiences within this theme, participants talked about their observations of parents in their workplace having undesirable experiences. For

example, one woman said, "Seen the challenges coworkers have in trying to get off early if a child is sick and it makes me nervous about working here and having a cild [sic]" and another said, "People get obsessed with their jobs... I can't see wanting to work as hard as thers, [sic] even other parents I see, do, in the long term."

Support for maternity leave. Separate from the amount or type of maternity leave they received, many participants mentioned the support they received around maternity leave from co-workers, superiors, and human resources as influential in their turnover intentions post-pregnancy. 11.3% of participants cited supportive experiences within this theme that made them more inclined to stay at their job post-pregnancy. For example, women talked about times when people at work provided clear information about maternity leave, assisted with the process, or expressed support for the woman taking leave. One woman stated, "my nurse manager ha taken extra time out of her busy day to research information for how I can get the most time out of my leave."

In terms of negative experiences, 5.7% of participants talked about a lack of clarity with family leave policies as something that makes them more inclined to leave their job post-pregnancy. One participant said, "Members of my HR team told me initially that I would only receive 6 weeks of maternity leave (which is my total accrued vacation time) nothing additional. I am now nearly 34 weeks pregnant and they have yet to approve my proposed maternity leave plan."

Paid leave. Women also cited the amount of paid leave offered by their employer as a factor that would influence their turnover decisions. 7.5% of women mentioned that the paid leave their employer offered made them more inclined to stay, while 5.3% of women stated that insufficient paid leave at their job made them more inclined to leave.

Participants' responses illustrate the complexity of considerations and concerns around family leave and how different employees perceive these. Here are some responses from women who described unsupportive experiences related to paid leave: "Our maternity leave policy, while more generous than most in the U.S., is still not great, and I am very stressed out about making ends meet, especially when we have the additional cost of day care. We have short term disability coverage, so I will get 6 weeks at 66% of my salary, but the following six weeks will be completely unpaid unless I want to use vacation and personal days, which I'm hesitant to do entirely in case I need to take more time off later in the year to care for my child if she gets sick." "That's all the paid leave i get and at that age im supposed to breastfeed for their optimum health, it seems very difficult to breastfeed to a 3 month old's requirements while working." [sic], "I have not been working at my position long enough to receive paid leave.", "The U.S. government provides no family leave, and yet, despite working 12-14 hour days, I also receive no comp time or overtime I could appy [sic] to future leave - which makes me absolutely bitter and resentful. There is no way I can continue to work these kinds of hours postbaby (it's hard enough to do while pregnant and exhausted)", "No maternity leave pay at all"

In terms of positive experiences with paid leave, women's responses included: "My organization has budgeted enough money to cover my leave", "I have paid maternity leave at my new job, which was not a benefit at my old job" and, "My boss agreed to let me unofficially roll over my unused vacation from 2015 so that more of my maternity leave will be paid."

Under the Family Medical Leave Act (FMLA), employees in the United States who have been employed for at least 12 months and worked 1,250 hours at an employer with 50 or more employees may receive a maximum of 12 weeks unpaid leave for the birth of a child and to care for the newborn child within one year of birth (National Partnership for Women and Families, 2013; U.S. Department of Labor, 2015). In addition to these two pieces of federal legislation, many states have laws that provide additional protections for pregnant workers (National Partnership for Women and Families, 2013). However, the responses above illustrate the range of leave options women actually face, as well as the role of the employer in creating a maternity leave plan that meets the needs of the employee and her family.

Help from colleagues. The availability and willingness of co-workers to help with an employee's workload during and after her pregnancy was also cited as a factor in women's turnover decisions. 7.5% of participants cited examples of co-workers being available and willing to assist with their workload as a reason they would be more inclined to stay at their jobs, whereas 3.8% of women in this study reported that they are more inclined to leave their jobs as a result of the awareness that their pregnancy may create a real or perceived burden on their co-workers. As an example of a negative experience, one woman stated, "A little bit of guilt has been laid upon me that I won't be there to support the day to day operations. No one will be hired while I am away, the work will be doled out to others, that stresses me out a little." As an example of a positive experience, one participant shared, "The support I've received at work has come directly from my coworkers, not the organization itself. They have made accommodations when it comes to heavy lifting and always remind me to take short breaks to eat and hydrate."

Pay. A few participants mentioned pay as an influential factor in their turnover decisions post-pregnancy with 2.3% of participants indicating that they received a promotion or pay raise that incentivized them to stay at their jobs and another 2.3% indicating that the pay at their jobs is insufficient to cover the cost of daycare. This finding highlights the fact that the cost of daycare can place a significant burden on families. It also highlights how the gender wage gap can create a downward spiral for women's career success. As women are systematically forced to leave the workforce due to insufficient pay to care for their children, they are set back in their overall career trajectories. Given that women provide financial support for their families more than ever before (National Partnership for Women & Families, 2014; White House, 2014), insufficient wages impact these women as well as their families.

Missing responses. Not included in these themes is the fact that many participants did not respond to one or more of these prompts. Given that these questions were the final step in taking the survey, most participants who skipped the section entirely likely did so due to response fatigue or their own time constraints. However, some participants skipped only one question (supportive: n = 1, unsupportive: n = 8) or wrote that they did not have a particular type of experience to write about (supportive: n = 14, unsupportive: n = 42). These women may have already formed a strong opinion in one direction about their job/employer, or may not have felt that their experiences in a certain category would be enough to influence their turnover decisions. It is notable that participants were less likely to write about a negative experience. While the reason for these missing responses is unknown, it could be a result of survey response fatigue as it was at the end of the survey, the requirement that they describe examples as opposed to

simply responding to questions on a survey, or it may be that participants did not have a specific example to share.

Limitations

Design. One limitation of the current study is that causality of relationships cannot be determined between variables due to the cross-sectional, correlational design of this study. For example, it is unclear whether pregnancy-specific work stress predicts low job satisfaction during pregnancy, or whether low job satisfaction predicts pregnancy-specific work stress, or whether there is a recursive relationship between these variables. However, the goal of this largely exploratory study was to identify how the variables of interest related to each other, to identify working models of variables that contribute significant as well as unique variance to predicting outcome variables, and to identify moderators that might serve as possible points of intervention that might serve to buffer against negative outcomes and promote positive outcomes for pregnant women.

Therefore, the goal of this study was not to establish causality. Future research might use structural equation modeling to test models of job satisfaction and turnover intentions preferably through longitudinal studies

While this study identified significant relationships between most of the key variables and job outcome variables, it did not explore how women weigh these variables when making decisions about turnover and assessing their job satisfaction. In other words, this data does not show us the how and the why of the relationship between the independent variables in this study and participants' turnover intentions (except for the finding of work place social support as a moderator). Future research might identify other

moderators to better describe the relationship between predictor and outcome variables as well as to identify measures that are not so highly correlated as some measures used in this study. Other research might identify mediators of the relationship between work-place/work-related pregnancy constructs and job satisfaction/turnover intentions would explore the mechanisms of change in these outcomes.

Data collection. This study was also limited by its method of data collection. By relying exclusively on self-report, these measures were vulnerable to biases such as underreporting or over-reporting. This limitation was addressed in part by efforts to recruit a sufficiently large and diverse sample and the participants in this study did reflect great variation in terms of geographical location, type of job, education level, income, and race/ethnicity (See Table 2 in Appendix K for a demographic comparison of participants in this study to national statistics). Additionally, participation relied largely upon Internet recruitment, which may not be representative of the broader pregnant population of working women in the United States, although statistics show that 93-96% of women ages 18-49 use the Internet (Perrin & Duggan, 2015). As with any study using human subjects, there may be self-selection bias. This sample may be biased toward women with office jobs or those with adequate computer time, since completing the survey required them to have 10-20 minutes to complete the survey. These limitations were addressed in part by advertising on sites that target different populations, such as Craigslist.org sites for states across the U.S., pro-life pregnancy centers, universities, and listservs for parents in various U.S. cities.

Quantitative instruments. Due to the paucity of research to date on the intersection of pregnancy and work, there is a dearth of domain-specific measures for

pregnant women in the workplace and especially first-time pregnant women. To address this limitation, the Pregnancy-related Work Stress Scale was created and employed in this study. However, as a result of being a newly developed, there is limited psychometric data for this measure; this will be discussed further in the next section of this chapter.

Implications & Directions for Future Research

This section discusses the implications of the current study for employers, employees, and career counselors. It also provides recommendations for future research in this area.

Directions for future research. Research on pregnancy and the workplace is in its infancy and is rife with opportunity. This study provides a foundation for future researchers to begin quantitative research on the relationship between pregnancy-related stressors and work and implications for individuals, organizations, families, and society at large.

Longitudinal research. One logical next step in this line of research would be to gather longitudinal data on women's decision-making processes as they move from early pregnancy into motherhood. While this study captured a moment in their decision-making process during a given point in their pregnancy, it would be helpful to see how women's perceptions and the importance of different factors may change over time and what decisions they actually make post-pregnancy.

Examining and improving the Pregnancy Work Stress Scale. Additionally, future researchers might continue to examine the psychometric qualities of the PWSS in general. Since this measure designed for this study to use this measure, it would be helpful to collect more reliability and validity data in future studies and to refine items

based on the findings of this and future studies. The items yielding the highest stress scores on the PWSS were, "Physical changes of pregnancy (i.e. fatigue, nausea) make it more difficult (or impossible) for me to do work" (M = 2.67), "I am concerned about my workplace/company's policies or views related to maternity leave" (M = 2.48), "I am reluctant to ask for accommodations (e.g. for physical needs) or time off (e.g. for doctor's appointments)" (M = 2.24) and, "I am uncomfortable discussing my plans for maternity leave and/or returning to work with my boss/manager" (M = 2.19). These stressors are consistent with themes that emerged from the qualitative portion of this study, signifying that women not only reported these as stressful experiences, but also may take such experiences into consideration when deciding whether or not to continue working at their jobs post-pregnancy. Qualitative data from the present study also suggest that it might be useful to add items to the PWSS related to future-oriented concerns such as breastfeeding at work, workplace flexibility, the communication of organizational policies, and the availability or willingness of colleagues to assist with their workload during maternity leave. Also, items related to colleagues asking about their personal life and giving advice should be re-examined, since many women in this study reported in their qualitative responses that they perceived similar experiences as supportive. New items could also be generated by soliciting feedback from pregnant women and mothers, asking them to comment on any aspects that were not mentioned in the current measure.

Understanding job satisfaction and turnover intentions within this population.

The extant literature shows that turnover intentions and job satisfaction are separate constructs. However, previous studies have not tended to focus on pregnant women or women pregnant for the first time. Given the unique employment concerns that arise for

first time mothers, future researchers may want to conduct a confirmatory factor analysis to ensure that these constructs are also distinct from one another for this population.

Research of other populations. This measure might be used in populations beyond women in their first pregnancy such as women who are pregnant with their 2nd or 3rd child, pregnant women in a particular demographic (e.g., race, age, sexual orientation), or women who are pregnant with multiples (e.g., twins, triplets). This would expand our understanding of how women's experiences and perceptions may change across identities, experiences, and stages of life. A woman's first pregnancy is unique in that the woman is adding "mother" to her identity, which may bring different emotions and perceptions than when a woman already possesses that identity.

Additionally, this study used a heterogeneous sample. Participants in this study were employed in a wide variety of settings and reported a wide range of job titles, income levels, and educational backgrounds. Future researchers who are interested in how the variables of interest are perceived in a specific work setting may want to recruit a more homogeneous sample.

Developing a model of turnover intentions. Researchers should also continue to explore models of turnover intentions for women in their first pregnancy. Such models could be used to develop and inform theory and interventions that might be relevant to researchers, employers, career counselors, and employees. In this study, job satisfaction appeared to subsume other variables in the model of turnover intentions (pregnancy-related work stress, workplace social support, and satisfaction with family leave), despite the fact that those variables showed small to moderate correlations with turnover intentions. The relationship between job satisfaction and the other variables in this model

warrants further exploration. Additionally, researchers might consider adding variables to the model that were not captured in this study that might account for more variance or predict unique variance in outcomes, such as flexibility in the workplace or perceived opportunities for advancement.

Finally, researchers should consider other variables that may be important to pregnant employees. Although a large body of research exists examining work-life balance for mothers who work, most of the literature does not focus on what happens during or immediately after pregnancy. Therefore, less is known about how becoming a mother might alter a woman's career trajectory and the role that supportive or unsupportive workplace structures might play in this process. It may also be beneficial to consider the perspectives of the pregnant woman's employer and family members during this process. Previous research has highlighted the fact that women's personal negotiations about family and career are often private and that women's career decisions depend upon myriad factors, many of which are outside of her workplace (Greenberg et al., 2009).

Implications for employers. This study suggests that employers have many opportunities to lessen pregnancy-related work stress in ways that may maintain or improve workplace satisfaction or that may lessen turnover. These opportunities include creating a supportive work culture, offering more pay or maternity benefits, providing job flexibility, and fostering a positive and clear vision of a long-term career trajectory. It is notable that many of these changes may be possible without placing an economic burden on the organization, and could even result in long-term economic gains due to employee retention and productivity (Salihu et al., 2012).

Respect for employee autonomy. While there are some workplace policies or interventions that most women may find helpful, employers may be able to intervene more effectively if and when they have a better understanding of an individual woman's concerns, needs, and wants. Thus, it is advisable to engage the employee in the needs assessment process. In addition to informing the employer's interventions, the act of asking a pregnant woman how she is doing and what she needs now or after having her baby might also make her feel more supported at work, which could improve her job satisfaction.

Other parents in the workplace. Employers should also consider that one person's negative experience as a parent may snowball and affect how others view the workplace. For example, women reported that receiving advice from other parents in their workplace, having open conversations about parenthood at work, and seeing other parents receive support when they take time for their families were experiences that made them more inclined to stay in their jobs post-pregnancy. As evidenced in this study, women are acutely aware of the experience of other parents at work as well as the perception of employees who are parents in their workplace. Thus, accommodating the needs of one employee may not only help retain that employee, but may also have an effect on other employees who are contemplating becoming parents in the future.

Organizational culture. In addition to top-down organizational support, women in this study also emphasized the role of co-workers and company culture in forming their impressions of workplace support. For example, women reported feeling supported when the news of their pregnancy was received positively or even celebrated by co-workers, when co-workers expressed concern for their well-being, and when co-workers expressed

willingness to support and assist them at work. Employers should work to foster a supportive work environment and encourage employees to support one another in their personal lives. For example, celebrating a woman's pregnancy through cards or a baby shower, expressing excitement or approval, and showing interest in a pregnant employee's well-being are practices that could be encouraged within an organization. Additionally, a culture of helpfulness combined with adequate staffing may help reduce conflict and tension between co-workers when one employee takes family leave and may help reduce a pregnant employee's stress around taking time off. In turn, this could improve job satisfaction, productivity, and retention across the organization.

Flexibility and accommodations. Workplace flexibility is an important consideration for mothers-to-be. For example, women in this study reported feeling supported when their employers gave them adequate time off for medical appointments (n = 7), allowed teleworking during and after pregnancy (n = 5), made physical accommodations in the workplace (n=8), offered a flexible schedule (n = 14), and reduced work travel (n = 4). Depending upon the demands of a woman's job, physical aspects of her pregnancy, and circumstances in her life outside of work, different accommodations may be desirable for different women. Additionally, women's physical needs change as they move through their pregnancy and become mothers who may require space and time for breastfeeding or time off to care for a sick child. Employers should understand the physical and logistical needs of pregnant employees as individuals in order to co-create the type of flexibility that might benefit a particular employee. When employers make assumptions about what a woman needs and wants during a pregnancy, they may risk limiting her productivity at work, increasing her desire to turnover, and

thus creating an economic burden on the organization. The results from this study and previous research show that women may be uncomfortable asking for such accommodations due to feared negative consequences for their career (National Partnership for Women & Families, 2014). Therefore, it would benefit employers to initiate these conversations and make a plan for accommodations during pregnancy and as they transition to becoming mothers.

Implications for employees. For employees who are considering becoming parents, or perhaps even for employees who are already parents, this study highlights aspects of the workplace that could be helpful in improving job satisfaction. On the one hand, employees may want to seek out jobs that offer schedule and location flexibility, that employ parents who are satisfied with their work-life balance, and that are generally perceived to be supportive of work-life balance. On the other hand, it may also be helpful for employees to acknowledge and address characteristics they have that may contribute to low job satisfaction, such as negative affect and strong and unproductive reactions to stress. For example, it could be beneficial for women to seek additional support, whether from a professional or from loved ones, when they are faced with pregnancy-related work stress.

Implications for career counselors. Career counselors should be aware of the unique stressors that women may face at work as they become pregnant for the first time and make the transition to motherhood. In navigating these stressors, it may be helpful to talk with clients about the social support offered in their workplace, negotiating for time off and flexibility in schedule or workload, their sense of autonomy in the workplace, and how their current job meshes with their overall career goals and trajectory. More broadly,

counselors may want to ask pregnant employees about their sense of job satisfaction, their need to maintain employment, and their turnover intentions during this time of transition.

Summary

This study surveys a diverse sample of women who are pregnant with their first child and working full-time. One theme that emerged in both the quantitative and qualitative findings was that women's turnover intentions post-pregnancy are related to individual factors (negative affect), perceptions of workplace factors (maternity leave, pay, flexibility, physical accommodations) and perceptions of interpersonal interactions at work (emotional and instrumental support from co-workers, support and advocacy from superiors). Also, findings suggested that job satisfaction during a woman's first pregnancy is related to her perceptions of pregnancy-related work stress, workplace social support, and satisfaction with family leave. The current study highlights the importance of pregnancy-related work stress, a new construct developed for this study. In light of these findings, the present study makes recommendations for employers, employees, and career counselors who may be confronted with the potential conflict of balancing full-time employment with the transition to motherhood. It will be important for future research to employ longitudinal methods to further assess relationships between pregnancy-related stress and job outcomes for women in their first pregnancy.

Appendix A: Literature Review

The focus of this literature review will be pregnancy in the workplace and how that interacts with women's career development. Given the dearth of literature on the intersection of these topics, closely related literature may be reviewed when literature specific to pregnancy and career is unavailable. This review begins with information about women's current and historical position in the workforce, as well as information about pregnant women in the workforce specifically. Next, existing research on women's career development (SCCT, work centrality) is introduced as it applies to the current study. We will then review research on the experience of being pregnant at work, and discuss the supports (workplace social support, workplace policy) and barriers (pregnancy-related stress, bias and discrimination, workplace norms) that may affect a woman's career trajectory. Finally, the independent variables in this study (pregnancy-related work stress, work centrality, workplace social support, workplace policy) and career outcomes (job satisfaction, turnover intentions) are discussed.

Women have gained power and presence in the U.S. labor force over the past 50 years, yet remain underrepresented in leadership positions. Women make up 47% of the labor force, and 57.7% of all women are employed (Bureau of Labor Statistics, 2014). In 2012, women accounted for more than half of all workers in some industry sectors, such as financial activities (53%), education and health services (75%), and leisure and hospitality (51%). These statistics represent a significant expansion of women in the workforce since World War II, when only one third of women worked. Women's earnings have also grown relative to men's earnings over the same time period. In 1979, full-time female employees earned 62 cents for every dollar their male counterparts

earned; as of 2012, women's earnings were 81 percent of men's (Bureau of Labor Statistics, 2014). Women's position in the workforce today is complex and puzzling, as this group of workers with equal or superior qualifications and nearly equal representation is, on average, earning and achieving less than their other-gendered counterparts.

Pregnancy and the transition to motherhood is a uniquely female experience that presents an additional challenge for women who work. The way families approach work and child-rearing has changed dramatically over the past 40 years, as more mothers opted to enter and stay in the workforce and women began having their first child later in life (Laughlin, 2011). This change coincided with legislative, judicial and regulatory changes in the 1970s and 1980s that affected employer practices related to an employee's pregnancy and motherhood. For example, a 1976 federal tax code allowed parents to take a tax credit for child care costs, and in 1978 the Pregnancy Discrimination Act prohibited employment discrimination on the basis of pregnancy or childbirth (Laughlin, 2011). According to the most recent data, between 80 and 90 percent of women with a bachelor's degree and 66 percent of women overall will be employed during their pregnancy (Laughlin, 2011) and 75% of women in the workforce are of reproductive age (Bureau of Labor Statistics, 2014). Despite the prevalence of pregnancy in the workplace, very little research attention has been given to this topic in the field of psychology.

For many women and their families, working during and after pregnancy is a financial necessity (National Partnership for Women & Families, 2014; Laughlin, 2011). Within the past century, both financial need and increased opportunities for women have resulted in women becoming more active in the labor force. Unmarried mothers have a

higher rate of participation in the labor force compared to married mothers, likely due to the financial necessity of employment for single mothers. In 2012, 74.8% of unmarried mothers with children under age 18 were employed, compared to 68.5% of married mothers with children in the same age range (U.S Bureau of Labor Statistics, 2014). It is also increasingly common for women to contribute to the household income of a married family. Among married couples with children in 2011, 53% had earnings from both husband and wife and employed wives contributed 37% of the family's total income (Bureau of Labor Statistics, 2014). Women today are the primary or sole breadwinners in nearly 40 percent of families with children (Pew Research Center, 2013).

Overall, first-time mothers today are working more before, during, and after pregnancy compared to fifty years ago. Data from the U.S. Census Bureau shows that first-time mothers today are working later into their pregnancy and sooner after the birth of their child compared to first-time mothers in the 1960s. Of women who returned to work within a year of giving birth to their first child, 80% returned to their same employer. Between 2006 and 2008, 21.9% of first-time mothers quit and 4.7% were "let go" from their jobs (U.S. Department of Labor, retrieved 2015). During the same time period, 42.4% of first-time mothers took unpaid leave and 50.8% took paid leave (U.S. Department of Labor, retrieved 2015). Women's increased use of paid leave is likely due to increased opportunities for paid leave following federal legislation designed to protect pregnant workers' rights (i.e. Pregnancy Discrimination Act of 1973, Family Medical Leave Act).

As mothers and fathers come closer to equal representation in the workforce, far more women than men (51% compared to 16%) say that being a working parent has

made it more difficult to advance their career (Taylor, 2013). Among parents, women are more likely to experience career interruptions and to say that taking time off for family hurt their career overall (Taylor, 2013). Pregnancy in the workplace has also received significant attention in the news, as public policy has struggled to address the growing number of female employees with pregnancy-related concerns.

Women's Career Development

Social Cognitive Career Theory. In order to understand how pregnancy might impact and fit into women's career trajectories, this study draws on some basic tenets of Social Cognitive Career Theory (SCCT). The following section will explain how SCCT (Lent, Brown, & Hackett, 2002) and specifically its models of satisfaction (Lent & Brown, 2006) and choice (Lent, 2014) have informed this author in creating the proposed study.

Rooted in Bandura's (1986) Social Cognitive Theory, SCCT provides a framework for understanding how individuals develop their career interests, engage in career decision-making, achieve varying levels of career success and stability, and experience satisfaction or well-being at work (Lent, 2014). SCCT highlights the idea that person-level variables (e.g. gender, self-efficacy) function in coordination with environmental factors (e.g. barriers, supports) through complex, reciprocal relationships to shape people's careers. More specifically, SCCT focuses on how cognitive-person variables (e.g. self-efficacy, outcome expectations, goals) interact with other aspects of the person and her environment (e.g., gender, social supports, barriers) to shape career development (Lent, Brown, & Hackett, 2002). Therefore, this theory provides support for the current study's examination of employee-level (work centrality, pregnancy-specific

stress) and organizational-level (workplace social support, family leave policy) supports and barriers to job satisfaction and continued employment for pregnant employees.

SCCT has been expanded to include the concept of contextual barriers and supports that might facilitate or impede career choice behaviors (Lent et al, 2002; Lent et al., 2003). Barriers fall into four categories: (1) financial, (2) instructional, (3) social and familial, or (4) gender or race discrimination. Similarly, there are four categories of supports: (1) social support and encouragement, (2) instrumental assistance, (3) access to role models and mentors, and (4) financial resources (Lent, Brown, & Hackett, 2002). Lent, Brown and Hackett (2002) recommended that future research on barriers should "assess barriers in relation to specific developmental tasks and choice options, rather than as global, trait-like beliefs" (p.48), which is consistent with this study's focus on pregnancy as a unique time in women's career development and one with unique barriers.

The Social Cognitive Model of Educational/Vocational Satisfaction considers a variety of personal, work, and contextual factors as contributors to an employee's work satisfaction, and is unique for its integration of worker-focused and employer-focused perspectives (Lent & Brown, 2006). This model is important in informing the current study since job satisfaction is an outcome variable. SCCT acknowledges that work dissatisfaction can arise from a poor fit between the person (employee) and the work environment, and that poor fit can occur along any dimension that might be salient to an employee (i.e. interest, personality, values). Moreover, the employee's subjective assessment of person-environment fit is often more influential in determining satisfaction with the work environment compared to objective measurement of person-environment fit. Lent (2014) acknowledges that different employees may consider different factors to

be most important depending on how that employee would conceptualize the source of their satisfaction or dissatisfaction. The view of career satisfaction has informed the approach of the proposed study in two ways. First, the participants (who are employees) will be asked about their perception of workplace factors in addition to asking for objective facts about their workplace. Second, the proposed study will consider both person variables and variables from the work environment.

Lent's (2014) SCCT choice model provides information about the factors that go into an employee's satisfaction and future career choices, and was helpful in selecting the outcome variables (job satisfaction, turnover intentions) in the proposed study. The choice model assumes that people are more likely to act on their goals if they perceive that these goals come with adequate supports and minimal barriers (Lent, 2014). This theory also acknowledges that person and contextual factors such as lack of support or employee policy may limit the level of satisfaction an employee can achieve in their current job. Overall, SCCT assumes that people have some degree of agency in their career choices, but also acknowledges the circumstances that may either limit or strengthen one's ability to influence his or her own career path (Lent, 2014).

The design of the proposed study also draws on SCCT in order to determine what variables might influence women's turnover intentions and job satisfaction. SCCT stresses the importance of employee perceptions of their workplace in employees' career decision-making. Additionally, the SCCT model shows person-level factors (i.e. stress, attitudes) interacting with environmental factors (i.e. workplace support) to impact employee's career choices and job satisfaction. Informed by this model, the current study

surveys employees about their perceptions of themselves, their workplace, their job satisfaction, and intentions for their career.

Work centrality. Before considering the specific supports and barriers stemming from the woman's work environment or pregnancy experiences, it is helpful to think about the centrality of work and career in a woman's life. One person-level factor that goes into women's decision-making about career is her level of work centrality. Work centrality (WC) is the degree of importance that work, in general, plays in one's life (Paullay, Alliger & Stone-Romero, 1994). Pregnancy represents a time when a woman may question how central career and motherhood can and should be to her identity and overall self-concept (Greenberg et al., 2009). However, WC is presumed to be relatively stable and robust in the face of immediate workplace conditions, since it is shaped by socialization experiences and what individuals learn to value from influences such as culture, family, and religion. Therefore, pregnant women may hold onto their level of work centrality as they re-evaluate their personal and professional identities as well as their competence as a mother and employee (Ladge, 2008 cited in Greenberg et al., 2009).

Work centrality does not measure one's interest in, involvement with, or dedication to a particular job, but measures an individual's attitudes and orientation toward work in general (Paullay et al., 1994). Women's privately held views on career and motherhood may affect the way they handle their pregnancy at work, including how they negotiate with their employer around maternity leave and role expectations (Greenberg et al., 2009). The proposed study will look at how a woman's attitudes and expectations about

her career in general might influence her turnover decisions and job satisfaction during pregnancy.

It has been established that work centrality affects how individuals manage and respond to their professional and personal lives. However, there has been no study specifically looking at work centrality in first-time mothers, and researchers have conflicting ideas about how work centrality affects women's satisfaction with family and work. Bagger and Li (2012) studied a sample of 149 working parents in Sweden (78% female, 97% white, ages 23-52), and found that high work centrality may make women feel that the onset of maternal responsibilities threatens their work role, leading to lower levels of family satisfaction, as the negative outcome is attributed to their role in the family. The authors theorize that experiencing a discrepancy between current state and their desired state of enjoying their job without family distractions, possibly resulting in reduced job satisfaction (Bagger & Li, 2012).

In another study, Feldman, Sussman and Zigler (2004) surveyed 98 married, dual-earner first-time parents of 3- to 5-month-old infants (99% Caucasian, mean maternal age = 31.7) following the mother's return to work. These authors also made the connection between high work centrality and negative outcomes for mothers at home, such that mothers' work centrality is positively associated with shorter maternity leaves, and in turn, shorter maternity leave is associated with less optimal parenting, higher rates of maternal depression, and higher maternal stress. However, the same study found that women with higher career salience show better functioning upon reemployment as they transition to parenthood compared to women with lower career salience (Feldman et al., 2004).

In a similar vein, researchers who have examined the direct correlation between work centrality and job satisfaction – without a specific focus on work-family conflict – have found that work centrality tends to be positively associated with job satisfaction (Tziner, Ben-David, Oren & Sharoni, 2014). For example, a study of 125 public sector professional employees (77.6% female, mean age 32.14 years) found a positive relationship between work centrality and job satisfaction, such that individuals with higher work centrality tended to experience higher levels of job satisfaction (Tziner et al., 2014).

In general, researchers who have examined the direct correlation between work centrality and job satisfaction find a positive association. However, researchers have also theorized that mothers with high work centrality may experience lower family satisfaction, which could lead to frustration with the inability to focus on work as much as they would like. Since women in their first pregnancy may experience work-family conflict differently from women with children, and no research has studied the connection between work centrality and job outcomes for first-time mothers-to-be, it is unknown exactly how work centrality will affect pregnancy employees' work outcomes.

Pregnancy and Career

This next section will focus on studies that look at pregnancy and career. This part of the review gives an overview of the themes that have been addressed in the pregnancy and career literature to date, including women's experiences of being pregnant at work and the impact that pregnancy has on a woman's career development. This section will also point out gaps in the pregnancy and career literature that have inspired the current study.

Pregnancy and career development. Pregnancy impacts a woman's career development from multiple angles. For the woman who is becoming a mother, a first pregnancy represents a change in identity (Ladge, Clair & Greenberg, 2012), a change in physical appearance and possibly physical ability (National Partnership for Women & Families, 2014), and an additional set of responsibilities. Considering motherhood as an identity, pregnancy is a time when a woman may reevaluate and recalibrate her personal and professional identities, which she must navigate both publicly and privately (Greenberg, Ladge & Clair, 2009). As a health condition, pregnancy may pose physical challenges to a woman's ability to do work (National Partnership for Women & Families, 2014). Additionally, the cultural expectations of employment and motherhood might raise concerns about one's ability to "do it all", posing a threat to the woman's self-efficacy (Greenberg et al., 2009).

Pregnancy presents a unique challenge for pregnant employees, their families, and their organizations. Several studies have looked at how women experience pregnancy in the workplace, highlighting both the public and private aspects of navigating pregnancy at work (e.g. Greenberg, Ladge & Clair, 2009). Themes across these studies include women's attempts to manage their professional image, concerns about living up to expectations of motherhood and of their employer, and women's changing needs as they transition to motherhood.

Public and private negotiation of role conflict. From the time that women learn they are pregnant for the first time, they begin to consider the goals and choices that lie ahead for their career. A qualitative study by Greenberg, Ladge and Clair (2009) interviewed 40 women about their experiences of being pregnant at work. All participants

were pregnant with their first child and employed in full-time professional positions at the time of the study. Consistent with the extant literature, women in this study reported that being pregnant challenged their professional identity as an ideal worker, but affirmed their personal identity as a pregnant woman as they became connected to a network of working parents. As a result of receiving both positive and negative messages related to their pregnant identities, women in this study reported engaging in private, intrapersonal negotiations as well as more public, interpersonal negotiations about their personal and professional goals and identities. Women in this study tended to question their own ability and desire to live up to the expectations of an "ideal worker" in the context of being a mother.

While participants in this study were in different stages in terms of identifying their intentions and expectations for work and motherhood, all felt the need to reevaluate their personal and professional identities as well as their sense of efficacy in light of becoming a mother. In addition to engaging in "private bargains" with themselves, women also reported having discussed their changing roles through formal and informal conversations at work. (Greenberg et al., 2009) The authors conclude that negotiations about tangible work processes are related to complex intrapersonal negotiations about a woman's future identities, and that pregnant women and their managers would benefit from understanding this connection (Greenberg et al., 2009). Thus, pregnancy is an important point in women's career decision-making processes, and capturing a woman's thoughts and feelings before childbirth may be important for developing appropriate supports for employees during the transition to motherhood.

In essence, Greenberg et al. (2009) highlight the merging of a woman's public and private identities, goals, and beliefs that happens during pregnancy. For example, women's pregnancies seemed to signal to others that it was more appropriate to talk about their personal life and physical body at work. Meanwhile, women often attempted to minimize the extent to which people at work focused on their pregnancy, given the negative associations that co-workers might have with pregnancy and the ability to be successful at work. Participants in this study noted that there was a gap between the public/private boundaries women wanted at work and the public/private boundaries they actually experienced. The authors recommend that managers should recognize that pregnant women are forced to navigate intangible aspects of pregnancy at work, such as the extent to which their private lives become public and increased attention paid to their bodies (Greenberg et al., 2009). The current study takes the next logical step in the literature, as it tries to identify possible points of intervention where employers and employees can change to make pregnancy and the workplace more compatible with one another.

Managing a pregnant identity. A pregnant employee's public negotiations with her employer begin with disclosing the fact that she is pregnant. Disclosure is a necessary prerequisite for receiving benefits such as legal protection and social support at work. At the same time, pregnant workers often fear that disclosing their pregnancy will trigger negative reactions at work and will force them to reconsider their career attitudes and priorities (King & Botsford, 2009). King and Botsford (2009) proposed a model to explain the determinants and outcomes of disclosing one's pregnancy in the workplace. They begin by defining pregnancy as a stigmatized identity within the workplace setting.

Stigma is context-dependent, so although pregnancy is viewed as an ideal marker of femininity in some spheres, it is viewed negatively in the workplace. Given that the role expectations of motherhood are inconsistent with expectations of the ideal worker, there is an assumption that commitment to motherhood detracts from commitment to work (King & Botsford, 2009).

The dilemma of revealing one's pregnancy is complicated by the fact that pregnancy is concealable to varying degrees and at various points in time, depending on the individual, and that the decision of whether or not to disclose involves balancing the opposing goals of authenticity and self-protection (King & Botsford, 2009). The workplace setting magnifies an individual's concerns about how they are perceived by others, since employees are concerned with maintaining a professional image and avoiding discrimination (King & Botsford, 2009). Often, making one's pregnancy public can blur the boundaries between personal and professional, as co-workers perceive that the woman's body is "available for public consumption (i.e. staring, touching)" and that topics related to the woman's personal and family health are now acceptable at work (Greenberg et al., 2009). The current study asks participants about their most positive and negative interactions in the workplace related to pregnancy in an attempt to more clearly identify the type of unsupportive interactions identified in Greenberg et al.'s study, and differentiate those from experiences that do feel supportive. This study also goes a step further, looking at how pregnant women's work experiences such as feeling supported at work or experiencing pregnancy-related stress at work relate to her career outcomes (i.e. job satisfaction, turnover intentions).

Recently, a model was created to identify and explain the range of social-identity based impression management (SIM) techniques used by pregnant employees (Little, Major, Hinojosa, & Nelson, 2014). The authors conducted a series of studies, beginning with qualitative interviews with 35 currently or recently pregnant women to gather preliminary information about the motives and strategies that pregnant women use to manage their professional images. Participants noted that their perceptions of themselves did not change substantially during pregnancy, but that their perceptions of how others viewed and reacted to them professionally did change. Women in this study often viewed their pregnancy as a threat to their professional image and even to their job. In response, they commonly engaged in a variety of behaviors aimed at maintaining their professional image, such as keeping their pre-pregnancy levels of work hours and work output and not asking for special accommodations at work. Fifteen percent of women surveyed took shorter maternity leave than they were entitled to take in an effort to demonstrate their reliability and dedication (Little et al., 2014).

Eighty percent of women in this study reported that they engaged in some form of social-identity based impression management (SIM) as pregnant employees, primarily motivated by concerns about pregnancy threatening their professional legitimacy and their perceived value to the organization. Many women tried to avoid negative outcomes by hiding their pregnancy or avoiding the issue, and 36% of participants attempted to conceal their pregnancy beyond the first trimester (when concerns about miscarriage typically end) for strategic professional reasons. Another 18% of participants made efforts to downplay their pregnancy with clothing or by avoiding the topic in conversation, rather than trying to pass as no pregnant (Little et al., 2014).

In conclusion, women in this series of studies perceived that pregnancy-related stereotypes would affect their image at work, and thus engaged in behaviors designed to maintain the legitimacy and value of their pre-pregnancy professional image. Across studies, it was clear that women did not fulfill the stereotype of being less committed to their jobs; in fact, some worked harder than they had pre-pregnancy in order to maintain their pre-pregnancy professional image. The results of these studies show some support for the notion that a supportive work environment may reduce a pregnant employee's fears that she will be stigmatized, and therefore reduce her use of avoidance behaviors. The authors found that engaging in image-maintenance behaviors reduced employees' levels of perceived discrimination and burnout, and increased the likelihood that women would return to their jobs. Additionally, the more that women engaged in image maintenance, the better they felt (Little et al., 2014). The current study builds on this literature by taking a quantitative approach to looking at the possible buffering effects of workplace social support on negative career outcomes such as decreased job satisfaction and increased turnover intentions.

Barriers to Working During Pregnancy

The next section of this literature review will discuss the barriers to career success that pregnant women face as a result of their pregnancy. This section begins with a discussion of the physical and physiological barriers that can change the way a woman interacts with her physical workplace. Next, the research on pregnancy-specific stress is reviewed. Finally, gender- and pregnancy-based bias and discrimination in the workplace is discussed.

Physical barriers to work. Pregnant women often need minor accommodations at work in order to protect their health, such as more frequent bathroom breaks, schedule modifications to attend doctors' appointments, or more sitting (National Partnership for Women & Families, 2014). However, many women never ask their employers for this type of accommodation, possibly for fear of their employer's reaction and possible negative consequences at work (National Partnership for Women & Families, 2014).

The National Partnership for Women and Families (2014) published research based on data from 2,400 online interviews with women in the U.S. who had given birth between July 2011 and June 2012. The majority of women in this study who requested health-related accommodations at work had their requests honored, but some were denied. For example, 9% of women were denied a change in duties, such as the ability to sit or lift less, 5% were denied more frequent breaks, and 9% were denied schedule changes or time off to attend prenatal care appointments (National Partnership for Women & Families, 2014). The results of this survey indicate that current laws such as the Pregnancy Discrimination Act and the Americans with Disabilities act provide insufficient protections to ensure the health and safety of pregnant women, new mothers, and their children (National Partnership for Women & Families, 2014).

Pregnancy-related work stress. The current study introduces a new construct, pregnancy-related work stress, in order to examine how stress related to pregnancy might specifically impact women in the workplace. Since this is a novel construct that is measured using a scale created for the purpose of the current study, there is no existing research on this construct or its measurement. Therefore, this section of the literature review will focus on pregnancy-specific stress, a closely related construct that laid the

conceptual groundwork for the construct used in this study. The following sections of this chapter will summarize the extant literature addressing pregnancy-specific stressors in the workplace.

Pregnancy-specific stress has been defined as the emotional responses a woman experiences to the pregnancy itself, representing a specific type of emotional stress response (Alderdice, Lynn & Lobel, 2012). Pregnant women may experience stress that has roots in a variety of pregnancy-specific issues, such as physical symptoms, parenting concerns, relationship stress, bodily changes, concerns about the child's health, and anxiety about labor and delivery (Lobel, Cannella, Graham, DeVincent, Schneider & Meyer, 2008). Despite the range of concerns represented in this construct, it has primarily been studied in relation to the child's health outcomes (e.g., Lobel et al., 2008; Alderdice et al., 2013).

Models of occupational stress and turnover (Mobley, Griffeth, Hand & Meglino, 1979; Price & Mueller, 1981) suggest that psychosocial stressors can start a process that moves from job dissatisfaction to turnover intention to turnover. Despite the abundance of literature on employee stress in the workplace and the likelihood that pregnancy is associated with workplace stressors, no study could be found that examined pregnancy-specific stress and its relationship to work outcomes. The closest effort has come from Woo (1997), who outlined a theoretical model linking workplace psychosocial demands to negative birth outcomes, with individual pregnancy factors, personality factors and social support as possible moderators. The proposed study will extend this research to look at the impact of pregnancy-specific stress on workplace outcomes, as well as possible moderators that might buffer the negative effects of this stress.

Workplace norms & "the traditional ideal worker model." Although pregnancy in some contexts represents the feminine ideal, it is often a stigmatized identity in the context of the workplace (King & Botsford, 2009) in that motherhood goes against the "traditional ideal worker model" (Greenberg, Ladge & Clair, 2009). The "traditional ideal worker model" sets the expectation that employees will devote the majority of their mental and physical time to their jobs (Greenberg, Ladge & Clair, 2009). As a result, employees who have demands outside of the workplace may be seen as having less potential for advancement and success, as biases toward pregnant women are sublimated into more apparently neutral arguments of concern for the organization's success (Byron & Roscigno, 2014).

Despite the increased presence of family leave policies, this "ideal worker model" still creates a barrier to taking leave when it is offered. Many employees opt out of taking leave in order to maintain their trajectory toward success in the workplace, to demonstrate their loyalty to their job, or because they are following an unspoken expectation of their workplace culture. Precedence is an important predictor of whether or not an employee will take leave; employees are more likely to take leave if they have seen another employee at that company do so, particularly someone in a managerial position (Sallee, 2013).

Over the past century, workplace norms have evolved to become more welcoming to women in general, but change has been the slowest for working mothers. While the overall wage gap between men and women is becoming smaller, working mothers' wages continue to lag behind those of women who are not mothers. This, in part, is due to the fact that mothers need alternative work schedules, and often end up working part-time or

in jobs that do not require being constantly on-call for the employer. In the American workplace, part-time work is often associated with being "part committed" and even "part competent" (Crosby, Williams, & Biernat, 2004, p.678). The systematic disadvantages faced by employed mothers have been dubbed "the maternal wall" (Crosby, Williams, & Biernat, 2004).

Pregnancy bias and discrimination at work. An example of the "maternal wall" is that women are likely to encounter negative workplace experiences and even workplace discrimination when they become pregnant (King & Botsford, 2009; Bragger, Kutcher, Morgan, & Firth, 2002; Halpert, Wilson, & Hickman, 1993). One explanation for the differential treatment of pregnant women in the workplace is that people hold stereotypes and biases against pregnant employees (Byron & Roscigno, 2014). Given that pregnancy is a uniquely female condition, pregnancy discrimination compounds the other gender-based inequalities in the workplace that have been discussed in this review (Byron & Roscigno, 2014).

Halpert and Burg (1997) interviewed 82 women who were pregnant or had been pregnant in the past two years about their experiences of being pregnant at work. This study found that inappropriate behavior from supervisors or co-workers tended to result from lack of communication, unexamined assumptions, or a lack of awareness of what constitutes appropriate behavior. For example, women in the study reported that many supervisors make "too many" assumptions about what pregnant employees want or need (e.g. excluding a pregnant employee from work travel due to the assumption that she cannot fly). The lack of awareness of what is appropriate may also be linked to the finding that negative experiences often resulted from the organization's neglect in

developing and/or implementing consistent policy. Some women reported that their workplace had unequal policies for different employees, and others reported that there was not a policy in place at all. Most women in the study stated that they did not want "special treatment" and wanted to continue challenging themselves to work up until their child was born (Halpert & Burg, 1997).

Pregnant women may face covert as well as overt biases in the workplace (Greenberg et al., 2009). The goal of Hebl, King, Glick, Singletary and Kazama's (2007) research was to understand the conditions under which pregnant women might receive benevolent (e.g. helping, paternalistic, protective) reactions, as well as those conditions that might lead to hostile (e.g. rude, unfriendly) reactions. A naturalistic field study revealed significant differences in how pregnant women are treated in the workplace compared to outside of work. For this study, female confederates posed as job applicants or as customers in a retail store. The customer role was intended to represent a traditionally feminine role because the customer would be asking the employee for help, fulfilling the stereotype that women need help. The job applicant role represented a nontraditional role because women in general, and especially pregnant women, have historically experienced workplace discrimination. The interactions were rated from three perspectives ratings from 3 perspectives (applicants, observers, and independent coders). According to the analysis of these ratings, pregnant women in this study received more patronizing, benevolent treatment as the store customer (traditional role) and more hostility as the job applicant (nontraditional role) compared to nonpregnant women. The authors did also note that there was not evidence of formal discrimination, which could be a result of the public nature of these interactions or expectations set by the employing

organization. On the other hand, the authors also note that the lack of overt discrimination does not mean that subtle forms of discrimination did not occur.

Women who reported having positive experiences of pregnancy at work stated that communication and participation in decision-making about their own position and responsibilities were essential. Many women with positive experiences reported that they worked together with their supervisors to develop a plan for covering their duties during maternity leave and for transitioning back into the workplace afterward. (Halpert & Burg, 1997) Pattison, Gross and Cast (1997) found that women have more positive views of pregnant workers compared to men. Additionally, employees whose ages are close to the typical age range of pregnant women (26-45 years) tend to hold more positive views compared to older or younger employees.

While this review is primarily focused on the experiences of women in the United States, it seems noteworthy that studies in other countries have yielded similar findings. A study in Australia found that pregnant candidates were viewed as warmer and more competent, but, paradoxically, were less likely to be recommended for hiring and were offered lower starting salaries (Masser, Grass & Nesic, 2007). Millward (2006) conducted a qualitative interview study in the United Kingdom, which found that women struggled to balance their needs, rights, and concerns as mothers while also maintaining their professional value and identity. Most participants reported insecurities about their abilities and identities as a professional, and all but one participant experienced return dilemmas as they wondered if they could successfully fill both roles (Millward, 2006). Similar to women in the United States, these women have formal legal protections against discrimination, yet reported feeling insecure in their professional roles due to a

culture of excluding pregnant women and mothers from professional growth opportunities.

Pregnancy bias and discrimination in hiring and promotion. In both society and the workplace, pregnant women face a system that rewards femininity and punishes divergence from traditional gender norms. One study asked 105 working adults (56 men, 49 women) to imagine that they were an employment placement agent and to read a brief description of a female applicant. Half of these descriptions included a sentence indicating that the applicant was pregnant, and half did not. Half of the participants in the study were asked to consider the applicant for six "feminine" jobs (e.g. maid, kindergarten teacher, pediatrician), and half were asked to consider the applicant for six "masculine" jobs (e.g. janitor, high school math teacher, general surgeon). This study found that pregnant women applying for traditionally masculine jobs encounter more hostile reactions compared to nonpregnant women. These effects did not differ between male and female participants, suggesting that both genders may hold biases toward pregnant job applicants. The authors posit that this may be because feminine jobs and being pregnant are both consistent with the feminine gender role, making pregnant applicants seem well suited to these roles. Consistent with the authors' hypotheses, pregnant women evoked hostile reactions in situations that had them diverge from the traditional feminine gender role. As a result of this type of reaction, pregnant women may be discouraged from pursuing work that violates gender norms. (Hebl et al., 2007)

Gueutal and Taylor (1991) surveyed 131 MBA students to reveal their attitudes toward pregnant employees. Both bias and discrimination against pregnant employee clearly emerged, as 46% of respondents reported that they would not hire a pregnant

employee and 62% reported that they would not promote a pregnant employee (Gueutal & Taylor, 1991). However, levels of supportiveness and discrimination in different areas varied between demographic groups, with women, younger employees, and U.S. citizens demonstrating more support for pregnant employees (Gueutal & Taylor, 1991).

In conclusion, women's fears about being discriminated against on the basis of becoming a mother are well founded. Twenty-seven percent of women who have given birth and return to work at their pre-birth employer report experiencing bias based on perceptions of their "desire, ability, or commitment" to doing their jobs; reported consequences of these biases included lost promotions or pay increases, reduced work hours or responsibilities, and even losing their jobs entirely (National Partnership for Women & Families, 2014). In light of these barriers, women must search for supports that help them to cope and navigate their career during this time of transition.

Supports for Pregnant Employees

The next section outlines sources of support for pregnant women at work. The section begins with a discussion of government protections for pregnant employees, followed by a discussion of research on family leave policy at the organizational level and its impact on women's careers. This section concludes with a discussion of workplace social support as a potential buffer against negative outcomes for women who become mothers.

Government policy. In the United States, expectations of the workplace are often incompatible with the expectations of motherhood. Negative stereotypes and biases against pregnant women in the workplace have translated into systematic discrimination by employers. Most legal studies of pregnancy in the workplace are focused on issues of

pregnancy discrimination (Salihu et al., 2012). While legislation has been introduced to improve this situation, the norms of organizational culture have proven to be stiff obstacles to change.

Between 1992 and 2007, there was a nearly 65% increase in pregnancy-related complaints to the US Equal Employment Opportunity Commission (National Partnership for Women and Families, 2008). Despite its prevalence, pregnancy discrimination is illegal. The Pregnancy Discrimination Act of 1978 explicitly ensured that "women affected by pregnancy, childbirth, or related medical conditions shall be treated the same for all employment-related purposes, including receipt of benefits under fringe benefit programs, as other persons not so affected but similar in their ability or inability to work" (U.S. EEOC, 2015). This legislation made it illegal for employers with 15 or more employees to discriminate against women because of pregnancy, childbirth or conditions related to pregnancy or childbirth (National Partnership for Women and Families, 2013). Pregnancy discrimination laws are designed to protect women employees as well as women looking for jobs. The following situations constitute pregnancy discrimination under the law: 1) an employee is fired because she is pregnant or may become pregnant 2) a job offer is withdrawn or denied because the applicant is or may become pregnant, 3) an employee is demoted or denied a promotion because she is pregnant or may become pregnant, and 4) an employee is forced to stop working or to take leave while pregnant or after birth, despite being willing and able to work (National Partnership for Women and Families, 2013).

The Family and Medical Leave Act of 1993 (FMLA) provides additional protections for employees who have been employed for at least 12 months and worked

1,250 hours at an employer with 50 or more employees (National Partnership for Women and Families, 2013). For employees who meet these criteria, the FMLA provides a maximum of 12 weeks unpaid leave for the birth of a child and to care for the newborn child within one year of birth (U.S. Department of Labor, 2015). The Family and Medical Leave Act (FMLA) mandates that employees give 30 days notice if they intend to take leave. Since the average pregnancy lasts 270 days, it is up to individual women to choose the timing of their disclosure, which could impact their experience as a pregnant employee and as an expectant mother (King & Botsford, 2009). In addition to these two pieces of federal legislation, many states have laws that provide additional protections for pregnant workers (National Partnership for Women and Families, 2013).

Despite the legal protections for pregnant women, employers remain able to discriminate on the basis of pregnancy and motherhood, as evidenced by Byron and Roscigno's (2014) investigation into closed case files from the Ohio Civil Rights Commission (OCRC). They accessed and analyzed the qualitative and quantitative data from sex-based employment discrimination charges between 1986 and 2003. The authors found that women were often fired and replaced with other (nonpregnant) women, pointing to the idea that pregnancy discrimination is distinct from gender discrimination alone, and that pregnancy puts women at a clear disadvantage when contrasted with workers who are viewed as "unencumbered" (p. 446). Byron and Roscigno (2014) also found that managers tended to justify termination of pregnant employees for three major reasons, which coincide with common stereotypes about working mothers' dependability as workers: 1) poor performance, 2) poor attendance, and 3) voluntary quitting. This article highlights managers' ability to vilify pregnant workers based on performance,

while simultaneously amplifying the importance of organizational policies and business interests. (Byron & Roscigno, 2014)

Organizational family leave policies. In the long term, providing paid family leave helps keep people employed who might otherwise be forced to quit their jobs due to illness, caretaking or other family responsibilities (Boushey & Glynn, 2012). Women are more likely to return to work after childbirth if they have access to any form of parental leave, whether paid or unpaid (Boushey & Glynn, 2012). Women with less education and lower household incomes have the least access to any form of family leave (paid or unpaid), creating the realistic threat that they might lose their jobs and/or become bankrupt if they need short-term time off (Boushey & Glynn, 2012). When workers are fired from or quit a job, it can take them significantly longer to find another job, compared to workers who do not have gaps in their employment (Boushey & Glynn, 2012).

Research has shown that the availability of work-family policies is significantly related to employees' perceptions that a workplace is family-supportive and that supervisors are supportive (Cook, 2009). In turn, perceptions of support have been linked to increased organizational commitment and decreased turnover intentions (Allen, 2001). While Cook's (2009) study included both men and women, the authors found that women with familial responsibilities interpreted the strongest relationship between the availability of work-family policies and the supportiveness of their organization (Cook, 2009). Therefore, pregnant women's perception of their family leave policy may be closely related to their perception of overall workplace social support.

Workplace social support. Feeling supported at work has obvious benefits for the pregnant employee, including decreased stress, increased job satisfaction, improved well-being, and reduced role conflict (Rhoades & Eisenberger, 2002; Viswesvaran et al., 1999). In addition, this support may also benefit the pregnant employee's co-workers and employing organization. As the role of women in the workplace continues to grow, a culture that embraces women and the unique demands of pregnancy provides additional social support and increased job satisfaction for its workers, which translates to increased employee retention and cost savings on hiring and training for the employer (Salihu et al., 2012).

The concept of workplace social support comes from the larger body of literature on social support. Social support has been popularly defined as, "an individuals' belief that she is loved, valued, and her well-being is cared about as part of a social network of mutual obligation" (Cobb, 1976). Workplace social support is defined as, "the degree to which individuals perceive that their well-being is valued by workplace sources, such as supervisors and the broader organization in which they are embedded and the perception that these sources provide help to support this well-being" (Eisenberger, Singlhamber, Vandenberghe, Sucharski, & Rhoades, 2002; Ford, Heinen & Langkamer, 2007 as cited in Kossek et al., 2011). Workplace social support comes from multiple sources (i.e. supervisors, co-workers, the organization) and may either be general or specific in nature. General work-support relates to employees' perception that their general well-being is cared for through social interactions and the provision of resources. Content-specific support relates to the employees' perception that they are receiving the necessary care and resources to support a particular goal. A 2011 study found that increasing social

support in the workplace – whether general or work-family-specific – has the potential to create more positive work-family climates and reduce work-family conflict for employees (Kossek, Pichler, Bodner, & Hammer, 2011).

In the current study, workplace social support is operationalized through the construct of perceived organizational support (POS). POS represents an employee's perception of an organization's concern with his/her general welfare (Eisenberger et al., 1986). Based on social exchange theory, the idea behind POS is that employees will pay attention to how much effort the organization puts into caring for and rewarding them; in turn, to the extent that the employee is treated favorably, he or she develops a sense of obligation to help the organization succeed (Eisenberger, Jones, Aselage, & Sucharski, 2004). An investigation of the relationship between perceived organizational support (POS), perceived supervisor support (PSS) and employee turnover found that supervisors, to the extent that they are associated with the organization, contribute to POS and ultimately to employee retention (Eisenberger, Stinglhamber, Vandenberghe, Sucharski, & Rhoades, 2002). That is, employees infer organizational support based on the level of support they feel from their supervisor. A separate meta-analysis of POS studies found that fair organizational procedures, supervisor support, and favorable rewards and job conditions are all antecedents to POS. The same meta-analysis also found that consequences associated with POS include increased affective commitment to the organization, increased performance, and reduced withdrawal behaviors. Therefore, POS seems to capture many sources and types of workplace social support (i.e. from a supervisor, co-worker, or the organization as a whole). In sum, POS is related to positive outcomes for both employers (e.g. improved performance and lessened withdrawal

behavior) and employees (e.g. job satisfaction and positive mood) (Rhoades & Eisenberger, 2002).

Work culture can have a profound impact on maternal psychosocial health and turnover intentions after childbirth. When women perceive that their supervisors and organization are supportive, they are more likely to return to work after childbirth. Social support for pregnant women has positive outcomes in the workplace in terms of reducing risk of turnover, increasing productivity, and improving job satisfaction and thus physical health of pregnant employees. (Salihu et al., 2012) Workplace support that is specifically targeted toward alleviating work-family conflict may have different effects than general workplace support when the employees of interest are parents or parents-to-be. A recent meta-analysis of the literature sought to clarify the influence of work-family-specific support versus general support at work in individuals' experiences of work-family conflict (Kossek, Pichler, Bodner, & Hammer, 2011). The study examined the impact that both general and work-family-specific support had on an employee's experience of work-family conflict when the support came from co-workers, supervisors, or the organization. The overall pattern of results indicates that the source of support (e.g. supervisor vs. co-worker) and the type of support (e.g. general vs. work-family-specific) matter. Results suggest that work–family-specific support is more strongly related to work to family conflict than general support. Additionally, both general and work-family specific support from a supervisor relates to work-family conflict via perceptions of organizational support. The authors conclude that increasing social support in the workplace – general or work-family-specific - has the potential to create more positive

work-family climates and reduce work-family conflict for employees (Kossek, Pichler, Bodner, & Hammer, 2011).

Career Outcomes

This final section of the literature review addresses the outcome variables for the current study - job satisfaction and turnover intentions. An overview of each construct is provided, followed by a review of the literature linking that construct to pregnancy and other variables of interest in this study.

Job satisfaction. Job satisfaction has been defined as, "the extent to which people enjoy their jobs (Fritzsche & Parrish, 2005)" (Lent & Brown, 2006). Job satisfaction has been linked to workplace social support (Rhoades & Eisenberger, 2002), stress (Pomaki, DeLongis, Frey, Short & Woehrle, 2010), work centrality (Tziner et al., 2014), and turnover intentions (Pomaki et al., 2010) all of which are variables of interest in the proposed study. Additionally, job satisfaction is an important outcome for first-time mothers because pregnant employees' job satisfaction may impact their employer in terms of their workplace productivity and commitment to their jobs (Salihu et al., 2012).

Lent and Brown (2006) created a model that outlines key contributors from the person and the context to better understand job satisfaction. This model provides theoretical and empirical support for the link between the variables chosen for the proposed study and job satisfaction. The authors note that factors that typically contribute to an employee's job satisfaction include (a) work satisfaction, (b) personality and affective traits, (c) goals and goal-directed activity, (d) self-efficacy, (e) work conditions and outcomes, and (f) goal-relevant environmental supports, resources, and obstacles. Lent and Brown (2006) present this model as a potential platform for interventions to

improve and promote job satisfaction, either by making changes to person elements or organizational elements.

Job satisfaction is particularly important for the health and well-being of pregnant employees and their families. Evidence suggests that pregnant women with poor job satisfaction may experience significant job-related stress that leads to poor health outcomes for the baby (Salihu et al., 2012). Additionally, Holtzman and Glass (1999) found that the availability of longer maternity leaves is related to higher rates of job satisfaction post-partum. Brown, Ferrara, and Schley (2002) surveyed 43 women who were employed prior to becoming pregnant and who had returned to the same employer after giving birth. The authors found that women reported significantly higher job satisfaction before pregnancy compared to during or after pregnancy. Additionally, women's job satisfaction during pregnancy was positively correlated with their satisfaction with organizational leave policies. Interestingly, there was not a significant relationship between these variables before or after pregnancy. It should be noted that many women in the study saw room for improvement in their organization's leave policies. For example, participants in this study often mentioned a need for more leave time and on-site child-care. One limitation of this study is that it asked participants for retrospective accounts of their experiences prior to and during their pregnancies. Additionally, the authors note that the majority of participants were employed in femaledominated occupations (e.g. teacher), which may mean that their work environments were more supportive than others with regard to the concerns of pregnancy and motherhood (Brown, Ferrara & Schley, 2002).

Turnover intentions. Job satisfaction is an important predictor of whether or not employees decide to stay at their jobs. However, job satisfaction and turnover intentions are distinct constructs. For example, employees with obligations outside of work may be financially motivated to stay in a job despite low job satisfaction, or may need a more flexible work setting even though they enjoy their work. Turnover intentions are defined as the expressed inclination and deliberate willingness to quit one's job or one's profession (Tett & Meyer, 1993). Turnover intentions have also been identified as the strongest predictor of actual turnover (Pomaki, DeLongis, Frey, Short & Woehrle, 2010). In light of this evidence, turnover intentions are commonly used as a proxy for actual turnover.

An estimated one quarter of first-time mothers who work during their pregnancies ultimately quit their jobs (Johnson, 2007). The U.S. Labor Department analyzed data from a nationally representative sample of 3 million households across three years (2005-2007) and found that 33.3% of women who gave birth for the first time in the past 12 months had left the workforce within those 12 months (Day & Downs, 2009). Despite the fact that 62% of women who have given birth within the past 12 months are in the labor force (U.S. Census Bureau, 2013), mothers with children ages 6-17 have a higher participation rate in the labor force (76%) compared to mothers with younger children (64.7%) (U.S. Bureau of Labor Statistics, 2014). The major predictors of workforce dropout can be divided into individual-level factors, such as income, education, and values and workplace factors, such as family-leave policies and workplace social support.

While a considerable minority of new mothers are choosing to leave the workforce altogether, there are additional reasons to study turnover intentions in this

population. Turnover matters for women because of the change in women's career trajectories that comes with the lapses in employment, and in instances where women's turnover decisions result from a lack of flexibility in their workplace or their field.

Turnover also matters for employers because of the associated costs and loss of productivity. Even if an employee does not decide to turnover, turnover intentions have shown to be positively correlated with negative attitudes toward one's job and negatively correlated with organizational commitment (Tett & Meyer, 1993). Additionally, research on turnover intentions of pregnant women is important because of the assumption that women will opt out of the workforce after becoming mothers (Day & Downs, 2009), which affects how they are treated as employees (Gueutal & Taylor, 1991).

Fox and Quinn (2014) examined the relationship between pregnancy-based discrimination experiences in the workplace and workforce attrition. The authors surveyed 142 women who were recruited primarily through pregnancy-related online communities during and after their first pregnancy, using a three-wave longitudinal design. The authors looked at individual factors such as participant's salary, partner salary, and gender-role attitudes and workplace factors such as workplace support and work-family balance culture as predictor variables. A limitation of this study is that ninety-two percent of participants were white, and most had earned a bachelors degree or higher, which may make it difficult to generalize these findings across groups of pregnant women.

Participants in this study commonly reported perceiving that others believed they would quit their jobs after giving birth. The study found that earning a higher salary, working in a supportive workplace, and working in an environment that supported work-

family culture all led to less experiences of pregnancy-related stigma. In turn, experiencing less stigma led to lower turnover intentions and higher levels of job satisfaction. Thus, this study provides an empirical basis for the relationship between pregnancy-related stress, workplace support, and job satisfaction.

It is interesting to note that only experienced stigma, and not anticipated stigma, served as the link between workplace factors and turnover intentions (Fox & Quinn, 2014). So, what *actually* happens in the workplace once a woman reveals her pregnancy was more important in predicting turnover intentions that what a woman worries *might* happen. Therefore, to assist with employee retention, employers might focus on reducing experiences of pregnancy stigma by bolstering a supportive work environment and promoting a positive culture of work-family balance.

The authors also found that some women plan early on to leave the workforce based on partner's salary and gender role, regardless of what experiences they have while pregnant in the workplace (Fox & Quinn, 2014). Since maternal employment or employment intent may depend on the partner's income and preferences in addition to the mother's own preferences and needs (Werbel, 1998) the current study collects this information about participants.

Desai and Waite (1991) looked at patterns of employment across 1,158 women included in a longitudinal interview study. All participants worked in the year before first birth and had a first birth between 1979 and 1985. Women in this study were more likely to return to work within three months of giving birth if they were in occupations that employ a relatively large number of mothers with young children or that have opportunities for part-year work (no such effect was found for occupations that offer part-

time work). Additionally, women were less likely to withdraw from the workforce if they had higher levels of education, more job-specific training, and higher wages. In general, the greater the rewards from a job, the longer women waited to go on maternity leave during pregnancy, and the sooner they returned to work after giving birth (Desai & Waite, 1991). Although this study provides potentially valuable information, there have been changes for women in the workforce (as mentioned earlier in this review) since this study was conducted. Therefore, updated information is needed about the decisions women make about their careers as they become mothers for the first time.

Day and Downs (2009) looked at the phenomena of women leaving the workforce following childbirth in a nationally representative data from the American Community Survey, which includes approximately 70 million women ages 16-50. Based on this data, they hypothesize that two groups of women opt out of the workforce: 1) those with low wages who do not have childcare resources and therefore cannot afford to work, and 2) those with enough family resources available to forego their personal earnings. Pregnant women who have a spouse or another adult caretaker in their household are less likely to leave the labor force before childbirth and tend to return to work more quickly compared to single mothers. Women who contribute more to the total family income are more likely to return to their jobs after giving birth, and also take shorter maternity leave from work. Interestingly, the dollar amount of the mother's income is not a significant predictor of employment after childbirth, only the relative contribution to the household income (Day & Downs, 2009). These results suggest that, as the pay gap continues to close between men and women over time, maternal employment is likely to increase (Wenk & Garrett, 1992).

Leaving the workforce appears to have long-term consequences for women's career paths. Hewlett, Luce, Shiller and Southwell (2005) found that women lost 18% of their earning power by leaving the workforce, and that loss increased the longer women were out. According to their data, a three-year or more absence from the workforce translated into a 37% decrease in women's earning power across sectors. Therefore, even when women only decide to leave the workforce for a short time, it has consequences for the rest of their career.

Conclusion

Although there is a significant body of research on working parents and workfamily conflict, little research attention has been given to the experience of pregnancy at
work for women becoming mothers for the first time. Researchers have provided
preliminary evidence that pregnant women have unique workplace concerns and often
experience negative outcomes at work (King & Botsford, 2009; National Partnership for
Women and Families, 2014). However, questions remain as to how pregnancy and its
associated stressors influence women's career choices, what supports and barriers exist as
they manage pregnancy and career, and how the experience of pregnancy affects their
feelings about their current job. Moreover, there is a dearth of vocational psychology
research on first time mothers.

Appendix B: Recruitment Documents and Informed Consent

Informed Consent

Purpose of the Study	This research is being conducted by Katherine Ross and Mary Ann
- and an analy	Hoffman at the University of Maryland, College Park. We are
	inviting you to participate in this research project because you are
	at least 18 years of age, you are pregnant for the first time, and
	you are employed full-time. The purpose of this research project is
	to learn more about the experience of being a pregnant employee
D 1	and the impact of pregnancy on women's careers.
Procedures	This is an online study that involves completing a survey about you,
	your workplace, your experiences of being pregnant, and your
	relationships. In total, this study is anticipated to require 20-25
	minutes of your time.
Potential Risks and	There may be some risks from participating in this research study.
Discomforts	You may have both positive and negative feelings about your
	pregnancy, your job, or your relationships may induce feelings of
	discomfort or sadness. If for any reason you feel you need to contact
	the researchers, you can do so at klross@umd.edu. There is also the
	risk of inadvertent disclosure if you do not complete the intervention
	in a private location and someone sees your responses.
Potential Benefits	There are no direct benefits to participation. However, possible
	benefits include feeling a better sense of understanding or improve
	well-being after reflecting on your experiences and future plans. We
	hope that, in the future, other people might benefit from this study
	through improved understanding of what can be helpful for pregnant
	employees.
	employees.
Confidentiality	Any potential loss of confidentiality will be minimized by storing
Confidentianty	data in a locked office and password protected computer. Moreover,
	your identifying information will not be linked to your survey or
	, , , , , , , , , , , , , , , , , , , ,
	written responses. Only members of the research team will have
	access to your responses.
	If we write a report or article about this research project, your
	identity will be protected to the maximum extent possible. Your
	information may be shared with representatives of the University of
	Maryland, College Park or governmental authorities if you or
	someone else is in danger or if we are required to do so by law.
Medical Treatment	The University of Maryland does not provide any medical,
	hospitalization or other insurance for participants in this research
	study, nor will the University of Maryland provide any medical
	treatment or compensation for any injury sustained as a result of
	participation in this research study, except as required by law.

Right to Withdraw and Questions	Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time.
	If you decide to stop taking part in the study, if you have questions, concerns, or complaints, please contact the primary investigator, Katherine Ross, at 3214 Benjamin Building, University of Maryland, College Park, MD 20742, klross@umd.edu
Participant Rights	If you have questions about your rights as a research participant or wish to report a research-related injury, please contact:
	University of Maryland College Park Institutional Review Board Office 1204 Marie Mount
	College Park, Maryland, 20742 E-mail: <u>irb@umd.edu</u> Telephone: 301-405-0678
	This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects.
Statement of Consent	By clicking on the "next" button, this indicates that you are at least 18 years of age; you are able to read and write in English; you are providing care for at least 3 hours per day to a person with cancer; you have read this consent form or have had it read to you; your questions have been answered to your satisfaction and you voluntarily agree to participate in this research study. You may print a copy of this consent form.
	If you agree to participate, please click "next".

Online Advertisement

Are you currently pregnant with your first child and employed full-time? If so, we are interested in learning about your experiences being pregnant while working. If you are at least 18 years old, you may be eligible to participate in a study conducted by researchers at the University of Maryland. The study explores the experiences of pregnant women in the workplace through a brief online survey. This is your chance to contribute to research aimed at improving the experience of pregnancy in the workplace.

The survey can be done online from anywhere that is convenient for you. It will take approximately 15-20 minutes of your time. This research is being conducted by Katherine Ross, M.A. and Mary Ann Hoffman, Ph.D. at the University of Maryland,

College Park. If you would like to participate in this research, please contact Katherine Ross at klross@umd.edu.

Email

Dear Participant,

Thank you for your interest in this study, which is being conducted by researchers at the University of Maryland, College Park. Your participation will contribute important knowledge regarding the experiences of pregnant women in the workplace. This questionnaire will take most people approximately 15-20 minutes to complete. It is important that you answer all questions in one sitting so, if you are completing this questionnaire on your own, **please seek out a quiet place that is free from distractions** while taking the study.

In order to better understand the experiences, perceptions, and attitudes of pregnant women at work, it will be necessary to ask questions related to your workplace and your pregnancy. Some of these questions may be personal in nature, including items inquiring about your income, relationship status, and pregnancy. Due to the personal nature of some of this material, it is important for you to know that the information you give will be kept confidential. You will not be asked for your name, and all information will be stored in a secure, locked location to which only the investigators have direct access.

Risks associated with this study may include feeling discomfort in response to some content or inadvertently disclosing your responses if the survey is not taken in private. However, you do not have to answer any questions that make you feel uncomfortable. Benefits include the opportunity to reflect on your experience as a pregnant employee. Your participation in this study is **voluntary** and you may choose not to participate and may stop at any time. If you experience any difficulty in submitting your responses please contact the first researcher at the email address below.

If you have any questions or comments about the study, please feel free to contact either of the researchers (contact information below). If you have questions about your rights as a research subject, please contact the Institutional Review Board (also below). This research has been reviewed according to the University of Maryland, College Park IRB procedures for research involving human subjects. Thank you again for your participation. By giving your consent to participate, you indicate that: 1. you are at least 18 years of age, 2. the research has been explained to you, 3. your questions have been fully answered and 4. you freely and voluntarily choose to participate in this research project. If you agree with these statements and consent to participate, please click on the 'Continue' button below.

Katherine Ross, M.A., M.S.Ed. Counseling Psychology Program CHSE Department

Mary Ann Hoffman, Ph.D. Professor, Counseling Psychology CHSE Department

Appendix C: Demographic and Workplace Survey

Eligibility Criteria

Eligibility Criteria (* = does not meet eligibility)

1. Are you at least 18 years old? Yes No*
2. Are you currently pregnant? Yes No*
3. Is this your first pregnancy? Yes No*
4. Do you work full-time in the United States? Yes No*
If participants are ineligible: Unfortunately you do not meet the eligibility criteria for this study. We sincerely appreciate your interest.
<u>Demographics</u>
How old are you? (in years)
How many weeks pregnant are you?
How long have you been at your current full-time job?
years months
What is your job title?
Where is your job located? (drop down menu of U.S. states)
Approximately how many people work at your employer?
1-4
5-9
10-19
20-99

100-499
500 or more
Approximately how many employees are in your immediate work environment (i.e.
they are in your office/department or you interact with them most days)?
What type of family leave policy does your employer offer?
Paid
Unpaid
Some paid, some unpaid
Not sure
How many weeks of family leave does your employer allow for the birth of a
child?
How many weeks of PAID leave do you plan to take after your baby is born? (If you
are not sure, take your best guess.)
weeks
How many weeks of UNPAID leave do you plan to take after your baby is born? (If
you are not sure, take your best guess.)
weeks
How clear are your workplace family leave policies? (Sliding scale from "not clear at
all" to "very clear")
How satisfied are you with the amount of family leave at your job? (Sliding scale

How many days of paid time off does your employer allow you to use during pregnancy (e.g. sick leave, personal time)?

from "extremely dissatisfied" to "extremely satisfied")

0-1
1-3
4-6
7-9
10 or more
Approximately what percentage of employees at your company are women?
0-10% / 11-30% 31-50% / 51-70% / 71-90% / 91-100%
What is your approximate personal annual income?
Under \$25,000 / \$25,000 - \$49,999 / \$50,000-\$74,999 / \$100,000-\$149,999 / \$150,000-
\$199,999 / \$200,000 or more
Are your wages in the form of a salary or hourly pay?
Hourly
Salary
Approximately how much of your household income comes from your earnings?
100%
75-99%
50-74%
25-49%
0-25%
What is the highest level of education you have successfully completed?
Less than high school / High School / 2-year college / Technical School / 4-year college
Masters degree / Doctorate
What is your current relationship status?

Single / Unmarried, in a committed relationship / Unmarried, living with partner /
Married, living with partner / Separated / Divorced / Widowed
If you are currently in a relationship, what is your partner's gender?
Male/Female/Transgender/Gender Queer / Other
If you are currently in a relationship, will your partner be taking on parental
responsibilities?
Yes / No / Not sure
How much time off (if any) does your partner plan to take after the baby is
born? weeks
How satisfied are you with your partner's workplace family leave policy?
(Sliding scale from "extremely dissatisfied" to "extremely satisfied")
Have you had any pregnancy complications since becoming pregnant? Yes/No
If yes, please explain (optional)
Was this pregnancy planned? Yes/No

Appendix D: Pregnancy-Related Work Stress Survey

Since you have been pregnant, have you experienced the situation described? If so, indicate how stressful that experience felt (or feels) on a 5-point Likert-type scale ("not at all stressful" to "extremely stressful").

Since I have been pregnant...

- 1) People at work have paid more attention to my pregnant body (e.g. staring, touching) than they did pre-pregnancy.
- 2) People at work ask me more personal questions (i.e. about my health, my body) than they did pre-pregnancy.
- 3) Physical changes of pregnancy (i.e. fatigue, nausea) make it more difficult (or impossible) for me to do work.
- 4) I have changed some of the ways I do my job due to physical limitations of being pregnant.
- 5) I am reluctant to ask for accommodations (e.g. for physical needs) or time off (e.g. for doctor's appointments).
- 6) People at work view me as less committed to my job or organization.
- 7) People at work do not expect me to be stay committed to my job after I give birth (i.e they expect I will work less or even leave my job).
- 8) I am uncomfortable discussing my plans for maternity leave and/or returning to work with my boss/manager.
- 9) I am concerned about my workplace/company's policies or views related to maternity leave.
- 10) When I'm with co-workers, I try to avoid talking about my pregnancy.
- 11) I worry that my co-workers think less of me professionally now that I'm pregnant.

- 12) I feel supported by my co-workers.
- 13) I feel like people at work have lower expectations of me professionally.
- 14) I have been given special privileges at work even though I did not ask for them.
- 15) People at work give me unsolicited advice or express concerns related to my pregnancy (i.e. eating, sleep).

Possible responses for each item in the survey: 0 - I have not experienced this situation, 1- Not at all Stressful, 2- Slightly Stressful, 3- Somewhat Stressful, 4- Very Stressful, 5- Extremely Stressful

Appendix E: Revised Prenatal Distress Questionnaire

NUPDQ: 17-Item Version For Self-Administration

(Lobel, 1996)

DIFFICULTIES IN PREGNANCY

To some women, certain things about being pregnant are uncomfortable or upsetting, but other women may not be bothered by the same things. We are interested in the things that you are worried or bothered by now. Are you feeling bothered, upset, or worried at this point in your pregnancy: (PLEASE CIRCLE ONE ANSWER FOR EACH QUESTION)

1)...about taking care of a newborn baby?

1)about taking care of a newborn baby?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
2)about the effect of ongoing health problems such as high blood pressure or diabetes			
on your pregnancy?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
3)about feeling tired and having low energy during your pregnancy?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
4)about pain during labor and delivery?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	

5)...about paying for your medical care during pregnancy?

0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
6)about changes in your weight and body shape during pregnancy?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
Are you feeling bother	red, upset, or worried at this po	oint in your pregnancy: (PLEA	.SE
CIRCLE ONE ANSW	ER FOR EACH QUESTION)		
7)about whether the	baby might come too early?		
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
8)about physical symptoms of pregnancy such as vomiting, swollen feet, or backaches			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
9)about the quality of	of your medical care during pre	egnancy?	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
10)about changes in	your relationships with other p	people due to having a baby? (IF
APPROPRIATE: Who	o in particular?)
	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
11)about whether yo	ou might have an unhealthy bab	py	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	

12)about what will h	appen during labor and delive	ry?	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
13)about working or	caring for your family during	your pregnancy?	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
14)about paying for t	the baby's clothes, food, or me	edical care?	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
15)about working at a job after the baby comes?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
16)about getting day	care, babysitters, or other help	p to watch the baby after it comes?	
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
17)about whether the	baby might be affected by ale	cohol, cigarettes, or drugs that you	
have taken?			
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	
18) Are there other thin	ngs that you are bothered, upso	et, or worried about that have to do	
with your pregnancy, t	he birth, or the baby?		
0	1	2	
NOT AT ALL	SOMEWHAT	VERY MUCH	

Appendix F: Positive and Negative Affect Schedule (PANAS)

(Watson, Clark & Tellegen, 1988)

This scale consists of a number of words that describe different feelings and emotions. Read each item and then mark the appropriate answer in the space next to that word. Indicate to what extent you feel this way in general, that is, on average.

Use the following scale to	record your answers.
1 = very slightly or not at	all
2 = a little	
3 = moderately	
4 = quite a bit	
5 = extremely	
interested	irritable
distressed	alert
_ excited	_ ashamed
_ upset	_ inspired
_ strong	_ nervous
_ guilty	_ determined
_ scared	_ attentive
_ hostile	_ jittery
_ enthusiastic	_ active
_ proud	_ afraid

APPENDIX G: Survey of Perceived Organizational Support

(8-item Form)

Eisenberger, Cummings, Armeli, & Lynch (1997)

Directions: Below are a number of statements related to perceived support. The responses ranging from (1) strongly disagree to (7) strongly agree. Please indicate your level of agreement or disagreement with each statement.

- 1. My organization cares about my opinions.
- 2. My organization really cares about my well-being.
- 3. My organization strongly considers my goals and values.
- 4. Help is available from my organization when I have a problem.
- 5. My organization would forgive an honest mistake on my part.
- 6. If given the opportunity, my organization would take advantage of me. (R).
- 7. My organization shows very little concern for me. (R).
- 8. My organization is willing to help me if I need a special favor.
- (1) strongly disagree (2) moderately disagree (3) slightly disagree (4) neither disagree nor agree: (5) slightly agree (6) moderately agree (7) strongly agree

Appendix H: Michigan Organizational Assessment Questionnaire – Job Satisfaction Subscale

(MOAQ-JSS; Seashore, Lawler, Mirvis, & Cammann, 1983)

All items are rated on a 7 point Likert scale (7 = strongly disagree, 1 = strongly agree).

- 1) All in all I am satisfied with my job.
- 2) In general, I don't like my job.

3) In general, I like working here.

APPENDIX I: Work Centrality Scale

(Paullay, Alliger & Stone-Romero, 1994)

Using a rating scale of 1-6, indicate how much you agree or disagree with each of the following statements.

- 1 = strongly disagree
- 2 = disagree
- 3 = slightly disagree
- 4 = neither agree nor disagree
- 5 =slightly agree
- 6 = agree
- 7 =strongly agree
- 1) Work should only be a small part of one's life.
- 2) In my view, an individual's personal life goals should be work oriented.
- 3) Life is worth living only when people get absorbed in work.
- 4) The major satisfaction in my life comes from my work.
- 5) The most important things that happen to me involve my work.
- 6) I have other activities more important than my work.
- 7) Work should be considered central to life.
- 8) I would probably keep working even if I didn't need the money.
- 9) To me, my work is only a small part of who I am.
- 10) Most things in life are more important than work.

- 11) If the unemployment benefit was really high, I would still prefer to work.
- 12) Overall, I consider work to be very central to my existence.

APPENDIX J: Measure of Intention to Quit and Turnover (Colarelli, 1984)

Using a rating scale of scale of (1) strongly disagree to (5) strongly agree, indicate how much you agree or disagree with each of the following statements.

- 1) If I have my own way, I will be working for my current employer one year from now.
 - 2) I frequently think of quitting my job.
 - 3) I am planning to search for a new job during the next 12 months.

Appendix K: Tables

Table 1

PWSS Item-Total Statistics

Item #			Corrected Item-	Cronbach's
	Scale Mean if	Scale Variance	Total	Alpha if Item
	Item Deleted	if Item Deleted	Correlation	Deleted
1	25.04	143.59	.64	.88
2	24.97	143.83	.66	.88
3	24.05	147.47	.51	.89
4	24.70	148.62	.43	.89
5	24.52	140.44	.63	.88
6	25.25	140.15	.71	.88
7	25.25	141.12	.64	.88
8	24.59	148.63	.44	.89
9	24.28	151.06	.34	.90

10	25.30	146.38	.56	.89
11	25.27	142.07	.67	.88
12	25.37	150.46	.52	.89
13	25.35	140.54	.72	.88
14	25.92	152.49	.42	.89
15	24.85	143.08	.63	.88

Table 2

Comparison of women in the present study to national statistics

	Participants in the Present	U.S.
	Study	
Race*		
White	66.3%	53%
Hispanic	6.6%	24%
Black	12%	15%
Asian	3%	6%
Multiracial	Not reported	2.4%
Unknown	Not reported	9.6%
Relationship Status*		
Married	71.7%	59%
Unmarried	28.3%	41%
Education Completed**		
Less than High School	1.8%	20%
High School	12%	26%
Some college or more	54%	83%
Technical School	3%	Not reported
Age***		-
Under 20	3.6%	13.4%
20-24	10.8%	26%
25-29	24.6%	27.7%
30-34	48.7%	21.1%
35 and over	12%	9.1%

^{*}U.S. data based on data of all mothers who gave birth in the U.S. in 2008

Sources: (Livingston & Cohn, 2010; Mathews & Hamilton, 2016)

^{**}U.S. data based on data of all mothers who gave birth in the U.S. in 2006

^{***} U.S. data based on data of all mothers who gave birth to their first child in the U.S. in 2016

References

- Alderdice, F., Lynn, F., & Lobel, M. (2012). A review and psychometric evaluation of pregnancy-specific stress measures. *Journal of Psychosomatic Obstetrics* & *Gynecology*, 33(2), 62-77.
- Alderdice, F., Savage-McGlynn, E., Martin, C., McAuliffe, F., Hunter, A., Unterscheider, J., & ... Malone, F. (2013). The Prenatal Distress Questionnaire: An investigation of factor structure in a high risk population. *Journal Of Reproductive And Infant Psychology*, 31(5), 456-464.
- Allen T.D., Herst, D.E.L., Bruck, C.S. and Sutton, M. (2000). Consequences associated with
 - work-to family conflict: A review and agenda for future research. *Journal of Occupational Health Psychology*, 5(2): 278–308.
- Amatea, E. S., Cross, E. G., Clark, J. E., & Bobby, C. L. (1986). Assessing the work and family role expectations of career-oriented men and women: The Life Role Salience Scales. *Journal of Marriage and Family*, 48, 831–838.
- Bagger, J., & Li, A. (2012). Being important matters: The impact of work and family centralities
 - on the family-to-work conflict–satisfaction relationship. *Human Relations*, 65(4), 473-500.

Baron, S., Gong, F., & Pfirman, D. (2007). Expanding our understanding of the psychosocial

work environment.

Bowling, N. A., & Hammond, G. D. (2008). A meta-analytic examination of the construct validity of the Michigan Organizational Assessment Questionnaire Job Satisfaction Subscale. *Journal Of Vocational Behavior*, 73(1), 63-77.

Brown, T. J., Ferrara, K., & Schley, N. (2002). The relationship of pregnancy status to job

satisfaction: An exploratory analysis. *Journal of Business and Psychology*, 17(1), 63-72.

Brown, S. D., & Lent, R. W. (2013). Career Development and Counseling: Putting Theory and

Research to Work. Hoboken, N.J.: John Wiley

Bureau of Labor Statistics, 2014; Women in the Labor Force: A Databook; Report 1052; December, 2014; www.bls.gov

Bureau of Labor Statistics, 2013. Current Population Survey.

http://www.dol.gov/wb/stats/recentfacts.htm

Bureau of Labor Statistics, 2012. http://www.catalyst.org/knowledge/women-leaving-and-re

entering-workforce

Byron, R. A., & Roscigno, V. J. (2014). Relational power, legitimation, and pregnancy discrimination. Gender & Society, 28(3), 435-462.

doi:10.1177/0891243214523123

Cawthorne, A. & Alpert, M. (2009). Labor Pains: Improving Employment and Income Security

for Pregnant Women and New Mothers. Retrieved 4/3/2015 from https://cdn.americanprogress.org/wp-

content/uploads/issues/2009/08/pdf/labor_pains.pdf

Cohen, J. (1992). A Power Primer. Psychological Bulletin, 112(1), 155-159.

Colarelli, S. M. (1984). Methods of communication and mediating processes in realistic job previews. *Journal of Applied Psychology*, 69, 633–642.

Cole-Lewis, H. J., Kershaw, T. S., Earnshaw, V. A., Yonkers, K. A., Lin, H., & Ickovics, J. R.

(2014). Pregnancy-specific stress, preterm birth, and gestational age among high-risk young women. *Health Psychology*, *33*(9), 1033-1045. doi:10.1037/a0034586

Crawford, J. R., & Henry, J. D. (2004). The Positive and Negative Affect Schedule (PANAS): Construct validity, measurement properties and normative data in a large non-clinical sample. *British Journal of Clinical Psychology*, 43, 245-265.

Crosby, F. J., Williams, J. C., & Biernat, M. (2004). The maternal wall. *Journal of Social Issues*, 60(4), 675-682.

Dunkel-Schetter, C., & Lobel, M. (2012). Pregnancy and birth outcomes: A multilevel analysis

of prenatal maternal stress and birth weight. In A. Baum, T. A. Revenson, J. Singer, A. Baum, T. A. Revenson, J. Singer (Eds.), *Handbook of health psychology (2nd ed.)* (pp. 431-463). New York, NY, US: Psychology Press.

Dunkel-Schetter, Gurung, Lobel and Wadhwa, (2001). Stress processes in pregnancy and birth:

Psychological, biological, and sociocultural influences. In: Baum, A., Revenson, T.A.,

and Singer, J.E. (Eds.) *Handbook of Health Psychology*, pp. 495-518. Erlbaum, Hillsdale,

NJ.

Eby, L.T., Casper, W.J., Lockwood A, Bordeaux C and Brinley A (2005) Work and family

research in IO/OB: Content analysis and review of the literature (1980–2002).

Journal of

Vocational Behavior 66(1): 124–197.

Eisenberger, R., Cummings, J., Armeli, S., & Lynch, P. (1997). Perceived Organizational Support, Discretionary Treatment, and Job Satisfaction. *Journal Of Applied Psychology*, 82(5), 812-820.

Eisenberger, R., Huntington, R., Hutchison, S., & Sowa, D. 1986. Perceived organizational

support. Journal of Applied Psychology, 71: 500-507.

Feldman, R., Sussman, A. L., & Zigler, E. (2004). Parental leave and work adaptation at the

transition to parenthood: Individual, marital, and social correlates. *Journal Of Applied Developmental Psychology*, 25(4), 459-479.

doi:10.1016/j.appdev.2004.06.004

Fox, A.B. & Quinn, D.M. (2014). Pregnant Women at Work: The Role of Stigma in Predicting

Women's Intended Exit From the Workforce. *Psychology of Women Quarterly*, published

online September 30, 2014, 1-17.

Frone, M.R. (2003). Work-family balance. In: Quick JC and Tetrick LE (eds) Handbook of

Occupational Health Psychology. Washington, DC: American Psychological Association, 143–162.

Greenberg, D., Ladge, J., & Clair, J. (2009). Negotiating pregnancy at work: Public and private conflicts. *Negotiation And Conflict Management Research*, 2(1), 42-56.

Gueutal, H. G., & Taylor, E. M. (1991). Employee pregnancy: The impact on organizations,

pregnant employees and co-workers. *Journal of Business and Psychology*, 5(4), 459-476.

Halpert, J. A., & Burg, J. H. (1997). Mixed messages: Co-worker responses to the pregnant

employee. Journal of Business and Psychology, 12(2), 241-253.

Halpert, J. A., Wilson, M. L., & Hickman, J. L. (1993). Pregnancy as a source of bias in performance appraisals. *Journal of Organizational Behavior*, *14*(7), 649-663.

Hamil, L. Firth, J. Brodie, M. (2014). Kaiser Family Foundation/New York Times/CBS News

Non-Employed Poll. Retrieved from: http://kff.org/other/poll-finding/kaiser-family

foundationnew-york-timescbs-news-non-employed-poll/

- Harris, J. I., Winskowski, A. M., & Engdahl, B. E. (2007). Types of Workplace Social Support in the Prediction of Job Satisfaction. *Career Development Quarterly*, 56(2), 150-156.
- Hayes, A. F. (2013). Introduction to mediation, moderation, and conditional process analysis: A

regression-based approach. Guilford Press.

- Hellman, C. M., Fuqua, D. R., & Worley, J. (2006). A Reliability Generalization Study on the Survey of Perceived Organizational Support: The Effects of Mean Age and Number of Items on Score Reliability. *Educational And Psychological Measurement*, 66(4), 631-642. doi:10.1177/0013164406288158
- Hutchison, S. (1997). Perceived organizational support: Further evidence of construct validity. *Educational and Psychological Measurement*, 57, 1025-1034.
- Johnson, T. D. (2007). Maternity leave and employment patterns: 2001–2003. Current Population Report, P70–113. Washington, DC: U.S. Census Bureau
- King, E. B., & Botsford, W. E. (2009). Managing pregnancy disclosures: Understanding and
 - overcoming the challenges of expectant motherhood at work. *Human Resource Management Review*, 19(4), 314-323.
- Kirby, S. B. (2012). Microaggression and pregnancy in the workplace: From benevolence to

punishment. Dissertation Abstracts International, 72, 6389.

Lent, R. W., Brown, S. D., & Hackett, G. (2000). Contextual supports and barriers to career

choice: A social cognitive analysis. *Journal of counseling psychology*, 47(1), 36. Lent, R. W., Brown, S. D., & Hackett, G. (1994). Toward a unifying social cognitive theory of

career and academic interest, choice, and performance. *Journal of vocational behavior*, 45(1), 79-122.

- Lent, R.W., & Brown, S.D. (2006). Integrating person and situation perspectives on work satisfaction: A social-cognitive view. *Journal of Vocational Behavior*, 69, 236-247.
- Lent, R. W. (2008). Understanding and promoting work satisfaction. An integrative view. *Handbook of counseling psychology*, 462-480.
- Roderick J. A. Little. (1988). A Test of Missing Completely at Random for Multivariate

 Data

with Missing Values. *Journal of the American Statistical Association*, 83(404), 1198

-1202.

- Little, L. M., Major, V. S., Hinojosa, A. S., & Nelson, D. L. (2015). Professional image maintenance: How women navigate pregnancy in the workplace. *Academy Of Management Journal*, 58(1), 8-37. doi:10.5465/amj.2013.0599
- Livingston, G. & Cohn, D. (2010). The New Demography of American Motherhood.

 Retrieved 1/17/17 from http://www.pewsocialtrends.org/2010/05/06/the-new

demography-of-american-motherhood/

Lobel, M. (2013). Revised Prenatal Distress Questionnaire (NuPDQ)

Development and Scoring. Stony Brook (NY): State University of New York at Stony Brook.

Lobel, M. (1996). The Revised Pregnancy Distress Questionnaire (NUPDQ). *Stony Brook* (NY):

State University of New York at Stony Brook.

Lobel, M., Cannella, D. L., Graham, J. E., DeVincent, C., Schneider, J., & Meyer, B. A. (2008).

Pregnancy-specific stress, prenatal health behaviors, and birth outcomes. *Health Psychology*, 27(5), 604.

Lyness, K. S., & Heilman, M. E. (2006). When fit is fundamental: performance evaluations and

promotions of upper-level female and male managers. *Journal of Applied Psychology*, 91(4), 777.

MacKinnon, D. P., & Luecken, L. J. (2008). How and for whom? Mediation and moderation in

health psychology. Health Psychology, 27(2), S99.

Mathews, T.J. & Hamilton, B.E. (2016) Mean Age of Mothers is on the Rise: United States,

2000–2014. Retrieved 1/17/2017 from

https://www.cdc.gov/nchs/data/databriefs/db232.pdf

McNall, L. A., Masuda, A. D., & Nicklin, J. M. (2009). Flexible work arrangements, job

satisfaction, and turnover intentions: The mediating role of work-to-family enrichment. *The Journal Of Psychology: Interdisciplinary And Applied*, *144*(1), 61-81.

Miller, C.C. & Alderman, L. (December 12, 2014). Why U.S. Women Are Leaving Jobs Behind.

Retrieved April 6, 2015 from http://www.nytimes.com/2014/12/14/upshot/us-employment-women-not-working.html?_r=0&abt=0002&abg=0

Nast, I. Bolten, M., Meinlschmidt, G. & Hellhammer, D. (2013) How to Measure Prenatal

Stress? A Systematic Review of Psychometric Instruments to Assess Psychosocial Stress

during Pregnancy. Paediatric and Perinatal Epidemiology, 27, 313–322

- National Partnership for Women & Families. (2014). Childbirth Connection Survey.

 Retrieved from http://www.nationalpartnership.org/research-library/workplace
 fairness/pregnancy-discrimination/listening-to-mothers-experiences-of-expectingand-new-mothers.pdf
- Paullay, I. M., Alliger, G. M., & Stone-Romero, E. F. (1994). Construct validation of two instruments designed to measure job involvement and work centrality. *Journal Of Applied Psychology*, 79(2), 224-228. doi:10.1037/0021-9010.79.2.224
- Pedersen, D. E., Minnotte, K. L., & Mannon, S. E. (2010). Getting by with a little help from workplace friends: Workplace culture, social support, and family cohesion. *Marriage & Family Review*, 46(6-7), 400-419.

Perrin, A. & Duggan, M. "Americans' Internet Access: 2000-2015." Pew Research Center, June

2015. Retrieved from http://www.pewinternet.org/2015/06/26/americans-internet-access-2000-2015/

Pew Research Center. (2013). Breadwinner Moms. Retrieved from http://www.pewsocialtrends.org/2013/05/29/breadwinner-moms/

Pew Research Center. (2013a). Among 38 nations, U.S. is the outlier when it comes to paid

parental leave. Retrieved from http://www.pewresearch.org/fact-tank/2013/12/12/among

38-nations-u-s-is-the-holdout-when-it-comes-to-offering-paid-parental-leave/ Pomaki, G., DeLongis, A., Frey, D., Short, K., & Woehrle, T. (2010). When the going gets

tough: Direct, buffering and indirect effects of social support on turnover intention. *Teaching And Teacher Education*, 26(6), 1340-1346.

Powell, G.N. & Greenhaus, J.H. (2010) Sex, gender, and decisions at the family → work interference. *Journal of Management*, 36(4): 1011–1039.

Saks, A. M., & Ashforth, B. E. (1997). A longitudinal investigation of the relationships between job information sources, applicant perceptions of fit, and work outcomes. *Personnel Psychology*, 50, 395-427.

Salihu, H. M., Myers, J., & August, E. M. (2012). Pregnancy in the workplace.

Occupational

medicine, 62(2), 88-97.

Scandura, T. A., & Lankau, M. J. (1997). Relationships of gender, family responsibility and

flexible work hours to organizational commitment and job satisfaction. *Journal of Organizational Behavior*, 18(4), 377-391.

- Seashore, S.E., Lawler, E.E., Mirvis, P.H., & Cammann, C. (1983). Assessing organizational change: A guide to methods, measures, and practices. New York: John Wiley & Sons.
- Shore, L. M., & Tetrick, L. E. (1991). A construct validity study of the Survey of Perceived Organizational Support. *Journal of Applied Psychology*, 76, 637-643
- Spielberger, C. D., Gorsuch, R. L., Lushene, R., Vagg, P. R., & Jacobs, G. A.

 (1983). *Manual for the State-Trait Anxiety Inventory*. Palo Alto, CA: Consulting Psychologists Press.

Thoresen, C. J., Kaplan, S. A., Barsky, A. P., Warren, C. R., & de Chermont, K. (2003).

The

Affective Underpinnings of Job Perceptions and Attitudes: A Meta-Analytic Review and

Integration. *Psychological Bulletin*, *129*(6), 914-945. doi:10.1037/0033-2909.129.6.914

Tziner, A., Ben-David, A., Oren, L., & Sharoni, G. Attachment to work, job satisfaction and

work centrality: Do turnover intentions relate to them, and how. *Leadership & Organization Development Journal*.

U.S. Department of Labor. 2015. Family and Medical Leave Act of 1993.

http://www.dol.gov/whd/fmla/

U.S. EEOC (U.S. Equal Opportunity Commission). 2015. The Pregnancy Discrimination Act of 1978. http://www.eeoc.gov/laws/statutes/pregnancy.cfm.

Viswesvaran, C., Sanchez, J. I., & Fisher, J. (1999). The role of social support in the process of

work stress: A meta-analysis. Journal of Vocational Behavior, 54(2), 314-334.

- Watson, D., Clark, L. A., & Tellegen, A. (1988). Development and validation of brief measures of positive and negative affect: The PANAS scales. *Journal of Personality and Social Psychology, 54*, 1063-1070. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/3397865.
- White House, 2014. Nine Facts About American Families and Work.

 https://www.whitehouse.gov/sites/default/files/docs/nine_facts_about_family_and
 _work_real_final.pdf
- White House, 2014a. The Economics of Paid and Unpaid Leave.

 https://www.whitehouse.gov/sites/default/files/docs/leave_report_final.pdf

 Williams, J. (2001). *Unbending gender: Why work and family conflict and what to do*

Oxford, UK. Oxford University Press.

about it.

Yali, A. M., & Lobel, M. (1999). Coping and distress in pregnancy: An investigation of medically high risk women. *Journal of Psychosomatic Obstetrics & Gynecology*, 20(1), 39-52.