

UNIVERSITY OF WISCONSIN-LA CROSSE

Graduate Studies

SUPPORTING SUPERMOM: A NEEDS AND CAPACITY ASSESSMENT OF
MOTHERS EMPLOYED BY A MID-SIZED MIDWESTERN CORPORATION

A Manuscript Style Thesis Submitted in Partial Fulfillment of the Requirements for the
Degree of Master of Public Health in Community Health Education

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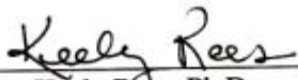
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By Brittany A. McIlquham

We recommend acceptance of this thesis in partial fulfillment of the candidate's requirements for the degree of Master of Public Health in Community Health Education.

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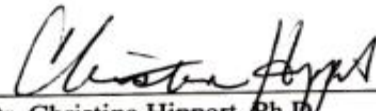
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ABSTRACT

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At times parenting can be a struggle, and its effects may bleed into other areas of a person's life, such as their work. Boundaries between a person's work life and family life have continued to fade in recent years. This makes finding a balance between the two, more difficult. According to the U.S. Census Bureau, in 2010, 21 percent of the U.S. workforce, or 33 million employees, were parents with children under the age of 18 years old (U.S. Census Bureau, 2010a; U.S. Department of Labor, 2011). Support for employed parents is needed from their family, friends, and maybe, most importantly, their employer (U.S. Office of Personnel Management, n.d.). The purpose of this research was to conduct a needs and capacity assessment of mothers employed by a mid-sized Midwestern corporation. Needs of the women and their capacity to meet them were evaluated with the use of key informant interviews and focus groups. The two biggest needs identified were flexibility in the workplace and consistency between departments and management. Capacity came in the form of proposed improvements in health promotion programming. Overall these working mothers felt they were not alone in trying to balance motherhood and the corporate work environment.

Keywords: health promotion, wellness, employee wellness, worksite wellness, mothers, employees, needs assessment, capacity assessment

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BACKGROUND

C. Everett Koop put it well, “Life affords no greater responsibility, no greater privilege, than the raising of the next generation”. Indeed, parenthood is both a great responsibility and great privilege. It can be a struggle while also affecting other areas of a person’s life, such as their work.

“Never until this very historical moment, have women rebelled as many are now doing against the very way we institutionalize motherhood,” (Bernard, 1974). Bernard, a sociologist, who conducted research on mothering in the 1970s, believed there was a cultural shift to promote mothers in the workplace.

In the 1990s, work-life balance became a global issue as the perception of increased competition in international business left families little time together as a result of increased workload (Gallie & Russell, 2009). This lack of time together as a family actually reflected the rise in female labor leaving a dilemma for mothers between the home and work. This construct leads into the point that the workforce is often a male-dominated atmosphere where men are portrayed as the ideal worker (Williams, 2000). Therefore, many of the policies at the workplace have failed women, and why many women are rejecting the workplace (Belkin, 2003).

According to the U.S. Census Bureau, in 2010, approximately 21 percent of the U.S. workforce, 33 million employees, were parents with children under the age of 18 years old (U.S. Census Bureau, 2010a; U.S. Department of Labor, 2011). Jacobs & Gerson (2001) observe a very important cultural shift in the 21st century, single-parent

households and dual-earner households, where both parents work, are on the rise (as cited in Bianchi & Milkie, 2010). As single mothers, many women do not have the choice whether or not to work outside of the home; it is a matter of survival. For those mothers that do have the choice to work outside of the home, many are opting-out of it (Belkin, 2003).

The “opt-out revolution”, coined by Belkin, is a term that describes the movement that women make to leave their careers and focus on motherhood. During the late 90’s it seemed to be a trend as employed mothers went from 59 percent of all mothers to 55 percent in 2000 (Belkin, 2003). However, in 2008 that number began to rise and 67.5 percent of mothers were working (U.S. Department of Labor, 2010). Perhaps mothers are no longer “opting-out” of employment to mother, or no longer have the choice to do so (Belkin, 2003).

There are many terms to describe a mother who works outside of the home. “Working mother”, may skew a persons’ perception of mothers who choose to stay at home and raise their children; this implies a stay-at-home mom is not working. However, this terminology continues to be used (Chen, Wu, & Chie, 2006; Hill, Jackson, & Martinengo, 2006; Losoncz & Bortolotto, 2009). Poduval & Poduval (2009), define a “working mother” as “a woman who combines a successful career, giving her financial independence, with an effective motherhood, raising a child” (pg. 9). Other phrases include: “maternal employment”, “mothers in the workplace”, “mothers in the labor force”, and “employed mothers” (Bianchi & Milkie, 2010; Estes, 2004; Greenberger & O’Neil, 1990; Milkie, Raley, & Bianchi, 2009; Secret & Sprang, 2001; Stewart & Barling, 1996; and U.S. Department of Labor, 2010).

Regardless the terminology, it is important to acknowledge the expression “working mother” and the heavy emotion this may bring to many. Hochschild (1989) does an excellent job of addressing this concept by not only acknowledging stay-at-home mothers, but also discussing the “second” and sometimes “third” shifts employed mothers take on at home, following their careers. Therefore, it comes as no surprise that support is needed from their spouse, family, friends, and maybe, most importantly, their employer (U.S. Office of Personnel Management, n.d.). An extension of this literature review can be found in Appendix A.

The purpose of this research was to conduct a needs and capacity assessment of mothers employed by a mid-sized Midwestern corporation. The assessment identified areas of participants’ lives that needed improvements and participants’ capacities. The assessment also exposed predisposing, reinforcing, and enabling factors influencing mothers’ decision to work outside the home (Green & Kreuter, 2005). Throughout the course of this research, the researcher sought to answer the following questions:

1. What are the needs of employed mothers related to balancing their role as an employee and a mother?
2. What is the capacity (programs, services, and resources) of employed mothers and their employer to support these needs?
3. What are the promoting factors and barriers that influence employed mothers in their decision to mother and work outside the home?

METHODS

Participants

The participants (n=24) were mothers employed by a mid-sized Midwestern corporation. This corporation is a leading provider of innovative healthcare solutions to governmental and private industries. The organization has a strong reputation for having a well established employee wellness program. In 2010, this company employed 815 people, 75% female, and 80% between the ages of 25 and 45.

Convenience and volunteer sampling were used. There were no restrictions on participation in the research based on race, ethnicity, age, or other limiting factors. Incentives for participation were provided. The research was partially funded by the Graduate Student Research, Service and Education Leadership Grant Program at the University of Wisconsin-La Crosse (see Appendix A).

Design

The research design was qualitative and descriptive. Key informant interviews were conducted with the founder and CEO of the mid-sized Midwestern corporation, the Health and Wellness Coordinator, and a Health Educator on staff. Focus groups were referred to as “group discussions” as to not confuse participants. Group discussions were used to collect data from employees. Initial review of the interview questions, format, and scripts was conducted with local professionals in health education and health promotion (see Appendix B). Additionally, feedback was also derived from the key informants in

relation to appropriateness of the questions. Assumptions, limitations, and delimitations are described in depth in Appendix C, along with definitions of key terms.

This protocol was accepted by the University of Wisconsin-La Crosse Institutional Review Board for the Protection of Human Subjects under expedited review procedures. It was declared exempt from further review in accordance with 45CFR46, 46.110(a)(b). Upon this acceptance, the participating corporation also reviewed the protocol and gave consent before data collection began.

Data Collection

Key informant interviews were conducted. Prior to the interview, key informants were asked to sign an informed consent (see Appendix D). These interviews were audio-recorded. A moderately-scheduled interview script was used (see Appendix E).

Research assistants were used in recording data for the group discussions, and signed informed consents (see Appendix F). Participants signed informed consents and filled out participant demographic information (see Appendix G & H). Group discussions were audio-recorded and participants were asked to state their participant number prior to speaking. Group discussions had moderately-scheduled questions (see Appendix I).

Data Analysis

All group discussions were manually transcribed from audio-recordings into text format. These transcriptions were reviewed in depth prior to assigning any themes. After reviewing the data several times, it was coded. Coding, as described by Miles & Huberman (1994) “involves differentiation and combination of the data, and reflections made about this information”. After coding, data was “clustered”, or arranged into

further themes and conclusions. “Content analysis” was performed which looked at frequency of data, sequencing, and location of particular comments (Miles & Huberman, 1994). After main themes were identified, verbal comments were matched with participant demographics to view any trends in themes and demographic traits.

RESULTS

Demographics

There were a total (n=24) of twenty-four participants. Ages ranged from 20-54 years, with the mode (n=7) 30-34 years. Twenty-three participants identified themselves as Caucasian, and one participant Asian/Pacific Islander. There were 16 married women, seven divorced, and one single woman. Education ranged from high school graduate to a doctoral degree. Annual household income was spread from \$20,000-\$29,000 to over \$100,000. The majority, 14, participants were employed at this company for one to five years. The mean number of children each participant had was two and a half children. The majority of children were three to four years old or older than 18 years old.

Needs Expressed by Employed Mothers

A need as described by Gilmore & Campbell (2005) is “the difference between the present situation and a more desirable one” (p. 6). Two major needs women identified were: increased flexibility at the workplace and consistency from all departments and management.

Flexibility, usually the lack of it, was an answer to questions such as: “As a working mother, how are you directly affected by your company?” and “Describe adjustments you’ve made or challenges you’ve run into, being a working mom.” There were a total of 51 comments made related to flexibility; and 22 of 24 (91.7%) participants commented on this need. One woman’s family, a married Caucasian mother of seven children, was directly affected by her lack of flexibility during the day.

...One thing that's affected me much more so than other places I've worked is how limited my access is to people outside of [this company] during the day...it's really hard for me to tell my kids you cannot call me at work, unless it's an emergency. That doesn't feel good... – Participant 3A

A cross-tabulation was completed on the average number of comments related to flexibility and the participant demographics. The older a mother was, the more she talked about the need for flexibility to age 44, where it decreased. This may be due to the fact that these participants' children are older and these mothers no longer need as much flexibility. Figure 1 illustrates the number of comments on flexibility and the mothers' age (see Appendix J). The number of comments related to flexibility also depended on the number of children the participant had; the more children, the more comments on the need for flexibility.

Increased consistency between departments and management was another need expressed. Sixteen of 24 (66.7%) of mothers stated this and there were a total of 33 comments. Examples of such inconsistency included: paid time off and flex time guidelines, strict scheduling, the ability to use wellness time during work, and the perception and attitudes in general towards working mothers. The women that talked the most about a need for increased consistency between departments and management worked in the departments that typically are more regulated and have stricter policies, in customer service and data control. Most mothers agree, that their employer “appreciates the [employees who are] mothers and the time they spend away from their families”, however that united front was not there interdepartmentally.

There was a striking irony between the two major needs identified, increased flexibility and increased consistency between departments and management. The more women talked about the need for flexibility, the less they commented on the issue of

inconsistency between departments. And vice versa, the more women talked about the need for consistency, the less they talked about being flexible in the worksite. Perhaps, women want the flexibility and don't care if it is consistent with other departments, or they want consistency and fairness between departments, regardless the lack of flexibility with each position.

Available Capacity of Employed Mothers

Capacity, as defined by Gilmore & Campbell (2005) refers to “both individual and collective resources that can be brought together for health enhancement” (p. 7). The two categories of capacities most often mentioned by mothers' included proposed improvements for health promotion programming and the mothers' personal support system. Table 1 outlines proposed improvements for health promotion programming (see Appendix K).

Capacity was triggered by questions such as: “What types of family-friendly activities would you like to see?” and “If you were on the wellness team, in charge of updating current programming, what would you do differently?” Over 40 percent of participants' felt variations in current fitness options offered by their employer may improve their capacity.

Another form of capacity for working mothers came in the shape of their support system and resources they relied upon. The majority of participants rely on their family and friends, 83.3%. Other members of their support system consist of: spouses (20.8%), neighbors (16.7%), their older children (12.5%), and other (8.3%). Besides people, working mothers have access to a wide variety of resources. These mothers turn to

exercise (16.7%), their employer/coworkers (16.7%), church (12.5%), the children's pediatrician (8.3%), and other (16.7%).

Factors Affecting Participants' Decision to Work

Factors included participants' knowledge, attitudes, beliefs, and personal preference to mothering and working outside of the home. Results were both positive and negative. One barrier to feeling confident in being a working mother deals with whether you come from a single-parent household or dual-parent household. The majority of the women that commented on this topic were divorced themselves, but not all. Some married women sympathized with single-mothers. A married mother of five kids, who had been divorced, remarked,

...when I was divorced, the guilt was even worse because you are only one person trying to get all of that done. You don't get help from another person, so it really makes it easier having a partnership with someone. –Participant 5C

This comment identifies another main barrier; dealing with the guilt. Guilt was mentioned more frequently than any other topic during the group discussions.

Interestingly, the participants that talked the most about guilt, three or more responses, were those with four or more children. The majority of participants, 17 of 24 (70.8%), did comment on their guilt. One woman, single mother of one, felt the guilt from her employer and her family, "The guilt of going home and not feeling like I can give them 100% because I have to get this done and that done." Another divorced mother, with older kids expressed her feelings about guilt and where it came from.

...my kids were basically raised in daycare. I made sure I had good daycare, but I did feel guilty. It was really bad when I got home before 6:30 at night, my kids would ask why I was home early. If that doesn't make you feel guilty, nothing will. –Participant 2B

The cross-tabulation for the number of comments on guilt and the participant demographics was distinct with regards to the mothers' age, marital status, and highest level of education attained. The older a mother was, the more they talked about the guilt they felt, up until age 49, where it declined, possibly due to the fact that their children are older and they don't feel as guilty about working. The higher education a mother had, the more they talked about the guilt they felt, possibly due to the higher stress and demand in their jobs. Finally, marital status had a clear linear increase with the number of comments on guilt, seen in Figure 2 (see Appendix L).

There were barriers mothers' shared in feeling confident about working outside the home and mothering, however there were promoting factors as well. A unique promoting factor was child care. One-third of mothers felt having their children in daycare was a positive and healthy thing for their children. The majority of mothers that felt this way were 20-29 years old and had children less than five years old. One divorced mother of one felt strongly about this topic.

...I want him to have that social interaction. I don't want him to be that quiet shy kid in the corner because he doesn't know how to socialize with everyone else. I want him to get in trouble, and get yelled at by someone else... –Participant 4D

Women are no longer expected to be stay-at-home mothers, and fewer, at least in this sample population, are choosing to do so. In an ideal world, only one of the 24 participants would choose to be a stay-at-home mother. This isn't to say the rest do not support stay-at-home mothers or respect them. The opposite is true. This group of working mothers has all the respect in the world for stay-at-home mothers, but most said they "just couldn't do it".

This may be attributable to the fact that the largest promoting factor for these women is the fact that they (62.5%) feel they are “doing the right thing for themselves and their family”. Women who had young children commented, but most comments came from mothers that were older, and had older children. Participants felt they were setting a good example for their children, especially their daughters that women can work and mother. They also felt the time spent with their children was more meaningful and cherished that time more. Most of these women enjoyed the professional aspect of working, and the stimulation they get from being outside of the home.

Work is a known entity, what happens with kids is unknown. I can come to work and as crazy as my days are, and I pretty much know what they are. I go home; especially when my kids were younger, and you never know...work does rejuvenate you. –Participant 2B

I have a baby and a 3 year old, and it’s really hard for me to be a working mom right now...but work gives me the breath I need to go home and be a better mom for my kids. –Participant 5B

Ultimately, participants felt they are better mothers, and have better kids because they are working. Results from the key informant interviews can be found in Appendix M.

DISCUSSION

Flexibility as an employed mother is crucial and means different things to different people. Mothers feel this is the most important improvement they require. The second need, consistency in different departments and management in how they handle situations that deal with employees who are mothers, was an emotional one. A need such as this goes to show that even with excellent “top-down” executive support, this message can get lost in translation.

Proposed improvements to health promotion programming and a strong support system were ways to build mothers’ capacity. Participants did not mention a lot of other ways to strengthen their confidence and ability as working mothers, so perhaps this employer is doing a good job of this already, or the participants haven’t really considered that they need help in being a successful working mother.

Balancing motherhood and employment is not easy, and most women feel guilty. Guilt can be directed in a variety of ways; guilt you feel yourself, you feel from your employer or coworkers, guilt you feel from your kids, your spouse, other family members, and other mothers! Internal perception of guilt can be a huge deterrent and barrier for women to feel good about their careers.

A unique promoting factor for working mothers was that some women wanted to have their children in some sort of daycare. Women aren’t expected to be stay-at-home mothers anymore. Daycare allows for children to have socialization with other children

their age, independence, a new learning environment, and a schedule, which is so important for developing youth.

Finally, the majority of participants felt, by working, they are doing the right thing for themselves and their families. This was such an encouraging theme running throughout the group discussions.

Recommendations

As the results already establish, this mid-sized Midwestern corporation is ahead of the game in many areas, here are areas of continued growth in family-friendly programming.

- Consider having various shifts available; perhaps 9 hours/day and a half day off every 2 weeks, or (4) 10 hour/days, to allow for 2 days per month of flexibility
- Reinstate the current culture of fitness, remind management of the policies on wellness time
- Implement a “Health Promotion Programming Suggestion Box”, physical or electronic
- Recruit for new members for the wellness team, especially mothers
- New ideas for family-friendly programming
 - Activities that can include older kids; sporting events such as a golf outings or family ski passes
 - Advertise weekly “parenting topics” that coincide with the walking program; 2 year old potty training tips, teenagers who don’t stop texting
 - Offer additional education on parenting topics

- Implement an online community where parents can go to access local parenting resources, educational information, message boards, blogging, or highlighting a “family of the week”
- Revisit the daycare reimbursement policy and consider extension for primary caregivers
- Look into onsite daycare options; a “tot spot”, a location near the fitness facility where parents can bring their children for 1-2 hours while they exercise

CONCLUSION

Results from group discussions with twenty-four employed mothers at a mid-sized Midwestern corporation suggest that these women are not alone. Working outside of the home and mothering comes with positive and negative consequences. Participants' mentioned factors they wished could improve, and the capacity they have to deal with their struggles. Overall, mothers' felt taking care of their families was their first priority, yet their work outside the home improved their mothering ability. In the words of their CEO, "Take care of yourself, so you can take care of your family," participants' are doing their best. However, most feel by first taking care of their family, they are better prepared to take care of themselves.

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APPENDIX A

EXTENDED LITERATURE REVIEW

Health Promotion Programs at the Worksite

Health promotion programs are not new to U.S. employers. Early days of modern employee wellness date back to the 1970s. Chapman (2003) concludes the worksite may be the most influential environment for adults. As a result, 80% of employers are offering some type of health promotion programming and support for their employees (Ardell, 2008).

There are more than 140 million Americans in the workforce, so the worksite is a convenient and efficient location to reach a large amount of people (Ardell, 2008; U.S. Department of Labor, 2011). Secondly, a preemptive look suggests that worksites may be *contributing* to the problem of unhealthy employees. Many health concerns employees face such as sleep deprivation, poor mental health, and increased stress, may be created by their work demands in the first place (Ardell, 2008). This harkens back to the premise that the ideal worker is typically seen as a male and able to work a demanding job with long hours, with a spouse at home taking care of their children (Belkin, 2003). These demands are not healthy for anyone, whether they are a mother or not. Thirdly, U.S. employers spend more money on healthcare than any other industrialized nation; however, our employees are by no means the healthiest in the world. Consequently, implementing a health promotion program may help to decrease these costs for employers and employees.

Family-friendly Health Promotion Programs at the Worksite

Many employers have implemented family-friendly practices, in particular several European countries (Jacobs & Gerson, 2004). The U.S. continues to lag behind, Denmark, Sweden, and Norway, in this trend (Gallie & Russell, 2009). Family-friendly

worksites are those concerned about the interface of work and home in worker productivity, and choose to implement policies and practices to change this (Secret & Sprang, 2001). This increases a competitive advantage over other international employers, and preserves “good quality employment conditions and a high level of workplace control”, for parents in particular (Gallie & Russell, 2009).

A classic example of family-friendly initiatives, The Family and Medical Leave Act of 1993, recognizes the need employees have to be provided protected unpaid leave time to care for a new child, among other family-related circumstances (Poduval & Poduval, 2009). Additional family-friendly programming comes in the form of job-sharing, part-time schedules, and the ability to work from home (Emlen, 2008).

Employees are not the only ones to benefit from family-friendly health promotion programs. Employers repeatedly see increased employee morale, improved productivity, and less absenteeism (Felner et al., 1994). Return on investment for these programs show that for every \$1 in investment, a cost-savings of \$2 resulted for the employer (Secret & Sprang, 2001). Companies view family-friendly programs as a way to accommodate working parents, but also as a “key business imperative to attract, motivate, and retain talent needed to drive success” (Hill, Jackson, & Martinengo, 2006).

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APPENDIX B
RESEARCH BUDGET

Funding Sources

- Graduate Student Research, Service and Education Leadership (RSEL) Grant Program at the University of Wisconsin-La Crosse
 - Contributed \$720.00 of the \$1230.00 researcher applied for
 - \$712.00 used of \$720.00 granted
- In-kind donations from Matt Vogel, University of Wisconsin-La Crosse & Christina Knudson of the Children’s Museum of La Crosse
 - Provided 10 aluminum water bottles & 48 passes to the Children’s Museum
 - For a total of \$323.00 of in-kind donations
- Principal Investigator (Brittany McIlquham)
 - Contributed \$90.00

Incentives

- Aluminum Water Bottles (incentive for the first 20 participants to sign up)

QUANTITY	COST	FUNDING SOURCE	TOTAL
10	\$3.50/bottle	In-kind donation	\$0.00
10	\$3.00/bottle	Principal Investigator	\$30.00
TOTAL:			\$30.00

- La Crosse, WI Children’s Museum Passes

QUANTITY	COST	FUNDING SOURCE	TOTAL
48	\$6.00/person	In-kind donation	\$0.00
TOTAL:			\$0.00

- Gift Basket & Gift Cards (1 gift basket drawing, 4 gift card drawings; 1 for each group)

ITEM	COST	FUNDING SOURCE	TOTAL
Gift Basket	\$20.00	Principal Investigator	\$20.00
Gift Cards	\$25.00/each (x 4)	RSEL Grant	\$100.00
TOTAL:			\$125.00

➤ Complimentary Meal Each Week (for participants and research assistants)

GROUP	PARTICIPANTS	COST	FUNDING SOURCE	TOTAL
Group A	7 people (x 2 weeks)	\$7.00/meal	RSEL Grant	\$98.00
Group B	8 people (x 2 weeks)	\$7.00/meal	RSEL Grant	\$112.00
Group C	11 people (x 2 weeks)	\$7.00/meal	RSEL Grant	\$154.00
Group D	12 people (x 2weeks)	\$7.00/meal	RSEL Grant	\$168.00
TOTAL:				\$532.00

Marketing

ITEM	QUANTITY	COST	FUNDING SOURCE	TOTAL
Flyers	200 (color)	\$80.00	RSEL Grant	\$80.00
Posters	3	\$40.00	Principal Investigator	\$40.00
TOTAL:				\$120.00

APPENDIX C
GROUP DISCUSSION SCHEDULE

Group Discussion Schedule

Instead of conducting the standard, (1) two-hour long discussion as suggested by Morgan & Krueger (1998), these group discussions were split into (2) one-hour long sessions, to accommodate for wellness time. The participating company provides wellness time to all employees as a benefit of employment. Wellness time can be used for various wellness activities during the week as employer-compensated time, for a total of three hours per week. Wellness time for the group discussions however was only approved for one hour per week. Therefore, group discussions were completed in two successive weeks.

Group discussion sessions were completed in two successive weeks. Session one the week of August 18, 2010 and session two the week of August 25, 2010, this way participants received wellness time for both group discussions. The same participants attended both sessions, with the exception of a few that weren't able to participate in the second session; however no new participants were able to join the second week.

Session 1	Wednesday, August 18, 2010	Group A: 9:30-10:30 am 4 participants	Group B: 11:00-12:00 pm 5 participants
	Thursday, August 19, 2010	Group C: 10:30-11:30 am 7 participants	Group D: 12:00 pm-1:00 pm 8 participants
Session 2	Wednesday, August 25, 2010	Group A: 9:30-10:30 am 4 participants	Group B: 11:00-12:00 pm 4 participants
	Thursday, August 26, 2010	Group C: 10:30-11:30 am 6 participants	Group D: 12:00 pm-1:00 pm 7 participants

APPENDIX D

ASSUMPTIONS, LIMITATIONS, DELIMITATIONS, & DEFINITIONS OF KEY TERMS

Assumptions

1. LHI values health promotion programming at the worksite; and is willing to explore the balance of employment and motherhood more closely.
2. Participants are willing to answer key questions posed both openly and honestly.
3. Group discussion topics, personal stories, and information discussed will be held confidential among those that participated.

Limitations

1. Instead of the entire company being aware of the option to participate in the research by means of a company-wide email sent explaining the research, marketing was limited to those that attended a Brown Bag Lunch Session on “Work-Life Balance”, presented by the principal investigator. This decreased the population from which to obtain a sample from over 800 employees to less than 75.
2. Instead of conducting the standard, (1) two-hour long discussion as suggested by Morgan & Krueger (1998), these group discussions were split into (2) one-hour long sessions, to accommodate for wellness time. Logistics Health Incorporated provides wellness time to all employees as a benefit of employment. Wellness time can be used for various wellness activities during the week as employer-compensated time, for a total of three hours per week. Wellness time for the group discussions however was only approved for one hour per week.

Delimitations

1. The current research focused solely on employees at Logistics Health Incorporated in La Crosse, WI. It was further delimited to employees who are mothers, excluding employees who are fathers, as well as employees who are not parents.
2. Convenience and volunteer sampling was another delimitation imposed on this research.

Definition of Terms

Family-friendly Worksites: Those worksites concerned about the interference of work and home in worker productivity, and choose to implement policies and practices to change this (Secret & Sprang, 2001).

Group Discussions: Also commonly referred to as focus groups. The terminology was adjusted as to not confuse the participants of the research. Groups of 4-8 participants that gathered to discuss key questions related to mothering and working.

Health Promotion Programs: Organized programs implemented for a group of individuals, often at the worksite, meant to improve health of employees; also known as worksite wellness programs or employee wellness programs.

Logistics Health Incorporated (LHI): A business in La Crosse, WI, in which participants were selected from and research was conducted. LHI is a leading provider of innovative healthcare solutions to government and private industry; and has a strong reputation in the La Crosse, WI area as having a well established employee wellness program.

Working Mother: A woman who combines a successful career, giving her financial independence, with an effective motherhood, raising a child (Poduval & Poduval, 2009).

APPENDIX E

INFORMED CONSENT: KEY INFORMANT INTERVIEW PARTICIPANTS

Informed Consent: Key Informant Interview Participants

You are invited to participate in a study conducted by Brittany McIlquham, graduate student at the University of Wisconsin-La Crosse. This study is being conducted in partial fulfillment of the degree requirements for the Master of Public Health graduate degree at the University of Wisconsin-La Crosse.

Title of Investigation: Supporting Supermom: A Needs and Capacity Assessment of Working Mothers Employed by Logistics Health Incorporated of La Crosse, WI

Principal Investigator: Brittany McIlquham, B.S.
MPH Candidate (May 2011)
University of Wisconsin-La Crosse
mcilquha.brit@uwlax.edu, (920) 463-0140

Purpose and Procedure

- The purpose of this study is to discover the needs of working mothers employed by Logistics Health Incorporated (LHI), of La Crosse, WI. Needs may be related to specific worksite health promotion programming, help with overcoming barriers to balancing their role as an employee and a parent, among others. These needs will be evaluated by their knowledge, attitudes, opinions, and beliefs of serving a dual role as employee and mother. Along with needs, capacity will also be evaluated. The capacity and ability of LHI's worksite health promotion program, the mother's support system (spouse, partner, extended family), and the mothers, themselves, to address these needs will be evaluated as well.
- The needs assessment will be conducted by group discussions of (6-10) LHI employees, who are mothers, per discussion.
- Brittany McIlquham, principal investigator, will facilitate all group discussions and participants will be asked questions related to their needs as a parent and employee of LHI. Questions will initiate group discussion on the positive and negative contributions of LHI in finding a balance between serving as an employee and parent. Knowledge, attitudes, opinions, and beliefs of participants will help to drive ideas and information related to improvement of current circumstances.
- In order to determine the capacity of LHI's employee wellness program to support these needs of employees who are mothers, key informant interviews will be conducted. These interviews will be with select individuals who have influence over employee wellness programming for employees of LHI. To determine additional resources employed mothers may be turning to besides LHI, group discussions will be used.

- Results of the group discussion will be accumulated and analyzed to be presented aggregately to LHI, in the attempt to highlight needs of parents employed at LHI, all comments will remain anonymous.

If you decide to participate in the study, you will be asked to:

- Participate in a one on one interview with principal investigator, Brittany McIlquham, to discover the capacity of LHI’s worksite health promotion program to support the needs of their employees who are mothers. Knowledge, attitudes, opinions, and beliefs of mothers employed by LHI will also be explored. This interview will last approximately 30 minutes to 1 hour.

Possible Risks

- There are no foreseen risks beyond the inconvenience of time

Benefits and Incentives for Participation

- An opportunity to express personal attitudes, opinions, and ideas for more parent-friendly wellness programming or other employment enhancements
- Giving valuable insight to the functioning of employee wellness programs at Logistics Health Incorporated

Rights & Confidentiality

This document is to certify that I, _____, hereby freely agree to participate as a volunteer in an investigation as an authorized part of fulfillment of degree requirements of the University of Wisconsin-La Crosse under the supervision of Dr. Keely Rees.

- The research project and my role in the research project have been fully explained to me by Brittany McIlquham, and I understand her explanation as well as what will be expected of me by virtue of my participation in this research project.
- I have been given an opportunity to ask questions, and all such questions and inquires have been answered to my satisfaction.
- I understand that I am free to decline to answer any specific items or questions in interviews or questionnaires.
- I understand that because this is a key informant interview, I may be identified, as my position within LHI provides key information that will be very helpful in analyzing the results of this study. Please initial one choice (see below):
 - _____ I prefer to be identified by my job title only.
 - _____ I consent to be identified by my name & job title
- I understand that the results of this study may be published in scientific literature or presented at professional meetings using aggregate data only.

- I understand that in the unlikely event that any injury or illness occurs as a result of this research, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-La Crosse, their officers, agents, and employees, do not automatically provide reimbursement for medical care or other compensation. Payment for treatment of any injury or illness must be provided by you or your third-party payer, such as your health insurer or Medicare. If any injury or illness occurs in the course of research, or for more information, please notify the investigator in charge.
- I understand that if I have any questions or concerns about the treatment of participants in this study I may call or write:

Dr. Kim Vogt, Chair
 Institutional Review Board for the Protection of Human Subjects
 220 Morris Hall, 1725 State St., University of Wisconsin-La Crosse
 Telephone: (608) 785-8007

Although this person will ask my name, I understand that all inquiries will be kept in the strictest confidence.

- Furthermore, I understand that if I have questions concerning the purposes or procedures associated with this research project, I may call or write:

Faculty Advisor: Keely Rees, Ph.D., CHES
 Department of Health Education & Health Promotion
 217 Mitchell Hall
 University of Wisconsin-La Crosse
rees.keel@uwlax.edu, (608) 785-8168

- I FURTHER UNDERSTAND THAT I AM FREE TO WITHDRAW MY CONSENT AND DISCONTINUE MY PARTICIPATION AT ANY TIME. WITHDRAWING FROM PARTICIPATION WILL NOT AFFECT PARTICIPATION IN FUTURE RESEARCH OR OTHER EMPLOYMENT-RELATED MATTERS AT LOGISTICS HEALTH INCORPORATED OR UW-LA CROSSE.

 Signature of Participant _____
Date

I, the undersigned, have defined and fully explained the investigation to the above subject.

 Signature of Investigator _____
Date

***NOTE: A copy of this informed consent will be provided to the participant and kept on file with the principal investigator.**

APPENDIX F

KEY INFORMANT INTERVIEW SCRIPT

Opening

1. Introductions of Principal Investigator

- a. Moderator- Brittany McIlquham (principal investigator)
- b. Explain the study
 - i. Needs and capacity of working mothers here at LHI

2. Logistics of the Key Informant Interview will be explained

- a. After reviewing the informed consent, you have the choice to either use both your name and job title, or just be identified by your job title. Since it is a key informant interview, you serve a key role in this research, and therefore at the very least, your job title will be used.
- b. If you don't understand a question or topic area, please ask for clarification.
- c. This interview will be audio-recorded; I will also be taking brief notes during our conversation.

3. Clarify any questions

4. Demographic Profile

- a. Please state your age and ethnicity.
- b. Please state your marital status, number of children (if any), and gender and ages of your children.
- c. Finally, please state your job title, and give a brief description of what you do here at Logistics Health Incorporated.
 - i. (Full time/part time?)
 - ii. (Length of service?)

Key Questions

1. Describe to me what you enjoy most about your job.
2. Tell me about the difficult aspects of your job.
3. If you had an entire weekday to spend not working, what would you do?
4. Describe family-friendly activities that Logistics Health provides for its employees.
5. In particular, what are some ways that Logistics Health affects its employees who are mothers? (In other words, being a mother employed by LHI, how am I directly affected by this company?)
6. And vice versa, how do your employees who are mothers, affect Logistics Health?
7. Describe to me how you think working mothers are perceived here at LHI.

8. Tell me about the issues your department hears regarding work-life balance among employees.
9. Along the same lines are there any particular issues you hear coming from employees who are mothers?
10. Are there any policies, projects, or programs currently in the works, to support working mothers here at Logistics Health? (Breast feeding rooms; job sharing; part time work; etc.)
11. With reference to your employees who are mothers, what would you like to see LHI improve upon?
12. If money were no object, what programs would you love to see implemented within LHI's health promotion program regarding working mothers and work-life balance?

Closing

1. If you were to summarize this interview, what do you feel would be the "take home message"?
2. You have any additional comments to add before we end? Or any areas we didn't cover that you'd like to talk about?
3. Any final questions for me?

APPENDIX G

INFORMED CONSENT: RESEARCH ASSISTANTS

Informed Consent: Research Assistants

You are invited to assist in a study conducted by Brittany McIlquham, graduate student at the University of Wisconsin-La Crosse. This study is being conducted in partial fulfillment of the degree requirements for the Master of Public Health graduate degree at the University of Wisconsin-La Crosse.

Title of Investigation: Supporting Supermom: A Needs and Capacity Assessment of Working Mothers Employed by Logistics Health Incorporated of La Crosse, WI

Principal Investigator: Brittany McIlquham, B.S.
MPH Candidate (May 2011)
University of Wisconsin-La Crosse
2358 Hwy. 16, La Crosse, WI 54601
mcilquha.brit@uwlax.edu, (920) 463-0140

Purpose and Procedure

- The purpose of this study is to discover the needs of working mothers employed by Logistics Health Incorporated (LHI), of La Crosse, WI. Needs may be related to specific worksite health promotion programming, help with overcoming barriers to balancing their role as an employee and a parent, among others. These needs will be evaluated by their knowledge, attitudes, opinions, and beliefs of serving a dual role as employee and mother. Along with needs, capacity will also be evaluated. The capacity and ability of LHI's worksite health promotion program, the mother's support system (spouse, partner, extended family), and the mothers, themselves, to address these needs will be evaluated as well.
- The needs assessment will be conducted by group discussions of (6-10) LHI employees, who are mothers, per discussion.
- Brittany McIlquham, principal investigator, will facilitate all group discussions and participants will be asked questions related to their needs as a parent and employee of LHI. Questions will initiate group discussion on the positive and negative contributions of LHI in finding a balance between serving as an employee and parent. Knowledge, attitudes, opinions, and beliefs of participants will help to drive ideas and information related to improvement of current circumstances.
- In order to determine the capacity of LHI's employee wellness program to support these needs of employees who are mothers, key informant interviews will be conducted. These interviews will be with select individuals who have influence over employee wellness programming for employees of LHI. To determine additional resources employed mothers may be turning to besides LHI, group discussions will be used.

- Results of the group discussion will be accumulated and analyzed to be presented aggregately to LHI, in the attempt to highlight needs of parents employed at LHI, all comments will remain anonymous.
- Following the group discussions, local parenting resources will be made available to participants.

If you decide to participate in the study, you will be asked to

- Assist the principal investigator, Brittany McIlquham, with various tasks related to and concerning the Group Discussions. Tasks may include: verbatim note-taking, thematic note-taking, pre-discussion set up and post-discussion take down, among others.
- There are a total of 2 weeks of group discussions with 4 each week, you may be asked to assist in any number of them, so availability is important.

Benefits and Incentives for Participation

- An opportunity to assist in a dynamic group discussion concerning personal attitudes, opinions, and ideas for more parent-friendly wellness programming or other employment enhancements, based on employee comments.
- Complimentary on-site lunch will be served
- Each assistant will receive a complimentary pass to the Children’s Museum of La Crosse (those with children)

Logistic Information

- The approximate length of time required for participation in this research project is 4-8 hours per person.
- The group discussion will be conducted on-site at Logistics Health, Inc., on the second floor in the Riverside Center II meeting room. The exact date and time is dependent on which group discussion you commit to.

Rights & Confidentiality

This document is to certify that I, _____, hereby freely agree to assist in an investigation as an authorized part of fulfillment of degree requirements of the University of Wisconsin-La Crosse under the supervision of Dr. Keely Rees.

- The research project and my role in the research project have been fully explained to me by Brittany McIlquham, and I understand her explanation as well as what will be expected of me by virtue of my assistance in this research project.
- I have been given an opportunity to ask questions, and all such questions and inquires have been answered to my satisfaction.

- **I understand that all data will remain confidential with regard to the participants' identities and that by being a research assistant, I am required to keep all information I record, hear, or see confidential.**
- I understand that the results of this study may be published in scientific literature or presented at professional meetings using aggregate data only.
- I understand that in the unlikely event that any injury or illness occurs as a result of this research, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-La Crosse, their officers, agents, and employees, do not automatically provide reimbursement for medical care or other compensation. Payment for treatment of any injury or illness must be provided by you or your third-party payer, such as your health insurer or Medicare. If any injury or illness occurs in the course of research, or for more information, please notify the investigator in charge.
- I understand that if I have any questions or concerns about the treatment of participants in this study I may call or write:

Dr. Kim Vogt, Chair
 Institutional Review Board for the Protection of Human Subjects
 220 Morris Hall, 1725 State St., University of Wisconsin-La Crosse
 Telephone: (608) 785-8007

Although this person will ask my name, I understand that all inquiries will be kept in the strictest confidence.

- Furthermore, I understand that if I have questions concerning the purposes or procedures associated with this research project, I may call or write:

Faculty Advisor: Keely Rees, Ph.D., CHES
 Department of Health Education & Health Promotion
 217 Mitchell Hall
 University of Wisconsin-La Crosse
 La Crosse, WI 54601
rees.keel@uwlax.edu, (608) 785-8168

I FURTHER UNDERSTAND THAT I AM FREE TO WITHDRAW MY CONSENT AND DISCONTINUE MY ASSISTANCE AT ANY TIME.

 Signature of Assistant _____
 Date
 I, the undersigned, have defined and fully explained the investigation to the above subject.

 Signature of Investigator _____
 Date

***NOTE: A copy of this informed consent will be provided to the assistant and kept on file with the principal investigator.**

APPENDIX H

INFORMED CONSENT: GROUP DISCUSSION PARTICIPANTS

Informed Consent: Group Discussion Participants

You are invited to participate in a study conducted by Brittany McIlquham, graduate student at the University of Wisconsin-La Crosse. This study is being conducted in partial fulfillment of the degree requirements for the Master of Public Health graduate degree at the University of Wisconsin-La Crosse.

Title of Investigation: Supporting Supermom: A Needs and Capacity Assessment of Working Mothers Employed by Logistics Health Incorporated of La Crosse, WI

Principal Investigator: Brittany McIlquham, B.S.
MPH Candidate (May 2011)
University of Wisconsin-La Crosse
mcilquha.brit@uwlax.edu, (920) 463-0140

Purpose and Procedure

- The purpose of this study is to discover the needs of working mothers employed by Logistics Health Incorporated (LHI), of La Crosse, WI. Needs may be related to specific worksite health promotion programming, help with overcoming barriers to balancing their role as an employee and a parent, among others. These needs will be evaluated by their knowledge, attitudes, opinions, and beliefs of serving a dual role as employee and mother. Along with needs, capacity will also be evaluated. The capacity and ability of LHI's worksite health promotion program, the mother's support system (spouse, partner, extended family), and the mothers, themselves, to address these needs will be evaluated as well.
- The needs assessment will be conducted by group discussions of (6-10) LHI employees, who are mothers, per discussion.
- Brittany McIlquham, principal investigator, will facilitate all group discussions and participants will be asked questions related to their needs as a parent and employee of LHI. Questions will initiate group discussion on the positive and negative contributions of LHI in finding a balance between serving as an employee and parent. Knowledge, attitudes, opinions, and beliefs of participants will help to drive ideas and information related to improvement of current circumstances.
- In order to determine the capacity of LHI's employee wellness program to support these needs of employees who are mothers, key informant interviews will be conducted. These interviews will be with select individuals who have influence over employee wellness programming for employees of LHI. To determine additional resources employed mothers may be turning to besides LHI, group discussions will be used.

- Results of the group discussion will be accumulated and analyzed to be presented aggregately to LHI, in the attempt to highlight needs of parents employed at LHI, all comments will remain anonymous.
- Following the group discussions, local parenting resources will be made available to participants.

If you decide to participate in the study, you will be asked to

- Participate in (2) group discussions based on your knowledge, attitudes, opinions, and beliefs on you as a parent and you as an employee of Logistics Health, Inc of La Crosse, WI. These discussions will last approximately 1 hour once a week for 2 consecutive weeks and you will be provided on-site lunches.

Possible Risks

- There are minimal risks beyond the inconvenience of time.
 - One potential risk, from the vantage point of an employee, may be how their comments and discussion during the group discussion may affect their employment with LHI.
- Minimizing Risks:
 - To dissolve this risk, ground rules will be discussed prior to all group discussions, stating that all information and comments will be kept confidential both by the researchers and the participants.
 - Also, participants are grouped by their current job title, to decrease the chance of having employees and their managers potentially in the same group discussion as that level of power differential may affect discussion and level of comfort of some participants.

Benefits and Incentives for Participation

- An opportunity to express personal attitudes, opinions, and ideas for more parent-friendly wellness programming or other employment enhancements
- Support from other mothers employed by Logistic Health Incorporated
- Access to resources available in La Crosse County for parents and families, as well as literature and electronic resources related to parenting and balancing your dual roles as an employee and a mother
- Complimentary on-site lunch will be served
- Each participant will receive a complimentary pass to the Children’s Museum of La Crosse
- Chance to be selected for additional incentives during the group discussion

Logistic Information

- The approximate length of time required for participation in this research project is 2 hours per person.
- The group discussion will be conducted on-site at Logistics Health, Inc., on the second floor in the Riverside Center II meeting room. The exact date and time is dependent on which group discussion you commit to.

Rights & Confidentiality

This document is to certify that I, _____, hereby freely agree to participate as a volunteer in an investigation as an authorized part of fulfillment of degree requirements of the University of Wisconsin-La Crosse under the supervision of Dr. Keely Rees.

- The research project and my role in the research project have been fully explained to me by Brittany McIlquham, and I understand her explanation as well as what will be expected of me by virtue of my participation in this research project.
- I have been given an opportunity to ask questions, and all such questions and inquires have been answered to my satisfaction.
- I understand that I am free to decline to answer any specific items or questions in interviews or questionnaires.
- I understand that all data will remain confidential with regard to my identity.
- I understand that the results of this study may be published in scientific literature or presented at professional meetings using aggregate data only.
- I understand that in the unlikely event that any injury or illness occurs as a result of this research, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-La Crosse, their officers, agents, and employees, do not automatically provide reimbursement for medical care or other compensation. Payment for treatment of any injury or illness must be provided by you or your third-party payer, such as your health insurer or Medicare. If any injury or illness occurs in the course of research, or for more information, please notify the investigator in charge.
- I understand that if I have any questions or concerns about the treatment of participants in this study I may call or write:
Dr. Kim Vogt, Chair
Institutional Review Board for the Protection of Human Subjects
220 Morris Hall, 1725 State St., University of Wisconsin-La Crosse

Although this person will ask my name, I understand that all inquiries will be kept in the strictest confidence.

- Furthermore, I understand that if I have questions concerning the purposes or procedures associated with this research project, I may call or write:

Faculty Advisor:

Keely Rees, Ph.D., CHES
Department of Health Education & Health Promotion
217 Mitchell Hall
University of Wisconsin-La Crosse
La Crosse, WI 54601
rees.keel@uwlax.edu, (608) 785-8168

- I FURTHER UNDERSTAND THAT I AM FREE TO WITHDRAW MY CONSENT AND DISCONTINUE MY PARTICIPATION AT ANY TIME. WITHDRAWING FROM PARTICIPATION WILL NOT AFFECT PARTICIPATION IN FUTURE RESEARCH OR OTHER EMPLOYMENT-RELATED MATTERS AT LOGISTICS HEALTH INCORPORATED OR UW-LA CROSSE.

Signature of Participant

Date

I, the undersigned, have defined and fully explained the investigation to the above subject.

Signature of Investigator

Date

***NOTE: A copy of this informed consent will be provided to the participant and kept on file with the principal investigator.**

APPENDIX I

GROUP DISCUSSION PARTICIPANT DEMOGRAPHICS SHEET

Participant #

Information will be used to create a demographic profile of participants. No names will be used, only participant number; participant numbers and names will never be matched.

Place an "X" in the category that best describes you.

1. Age: () Under 20 () 35-39 () 55-60
 () 20-24 () 40-44 () Over 60
 () 25-29 () 45-49
 () 30-34 () 50-54

2. Race: () African American () American Indian () Asian/Pacific Islander
 () Hispanic/Latino () Caucasian/White () Other

3. Marital Status: () Single () Married () Divorced () Widowed

4. Education: (highest completed level)
 () Grade school () Some college
 () Some high school () College graduate
 () High school graduate () Some graduate school
 () Some technical school () Graduate degree
 () Technical school graduate () Doctorate degree

5. Yearly Household Income:
 () Less than \$20,000 () \$60,000-\$69,999
 () \$20,000-\$29,999 () \$70,000-\$79,999
 () \$30,000-\$39,999 () \$80,000-\$89,999
 () \$40,000-\$49,999 () \$90,000-\$99,999
 () \$50,000-\$59,999 () More than \$100,000

6. Length of employment with Logistics Health Incorporated:
 () Less than 1 year
 () 1-5 years
 () 6-10 years
 () More than 10 years

7. Number of children:

8. Age(s) and gender(s) of children:

APPENDIX J
GROUP DISCUSSIONS SCRIPT

- I. Welcome and Thank You**
- II. Lunch/Breakfast**
- III. Introductions**
 - a. Myself
 - b. Assistants
- IV. Informed Consents/Participant Demographic Sheets**
 - a. Describe research and go through informed consent; have participants fill out BOTH consent sheets and sign both.
 - i. *While they are filling out the Participant Demographics sheet, Brittany will go around and sign their informed consents.
 - b. Participant Demographics Sheet
 - i. Aggregate group demographic profile
 - ii. NO names
- V. Outline**
 - a. Ground Rules
 - b. Demographics
 - c. Key Questions
 - d. Closing Remarks
 - e. Moderator's Role
- VI. Ground Rules**
 - a. Confidentiality and respect of coworkers
 - b. Audio-recorded, NO names, "Participant 1:....."
 - c. Logistics Health will not have access to the audio-recording, rather aggregate data in the form of a report or presentation.
 - d. You have the right to pass or not answer any question
 - e. If you don't understand a question, ask for clarification
 - f. Speak openly and honestly, speak one at a time, and speak loud enough for all participants to hear
- VII. Clarify any questions**
- VIII. Demographics (see board)**
 - a. Marital status, number of children, ages of children
 - b. Job title and description, full time or part time, length of service here at LHI
- IX. Key Questions**
 - 1. If you had an entire weekday to spend not working, how would you spend it?
 - 2. Describe what it's like to be a mom.
 - a. *What are the highlights?*
 - b. *What are some of the difficult aspects?*

3. Describe how it feels being a working mother.
 - a. *How does your life differ now that you are a mother and you are working?*
 - b. *Do you feel working is more beneficial to your role as a mother, or less beneficial and why?*

4. Describe your relationship with mothering and working at Logistics Health Incorporated.
 - a. *As a mom and an employee, how are you directly affected by the company you work for?*

5. Describe to me how you feel working mothers are perceived here at LHI.

6. Describe family-friendly activities that Logistics Health provides for its employees.
 - a. *Which of these have you participated in? Why or why not?*
 - b. *What type of family-friendly activities would you like to see?*

7. If you were on the wellness team, and in charge of bringing new programs, or creating new programs for employees of LHI, what would you add?
 - a. *Specifically as mothers, what would you be interested in seeing?*
 - b. *What are some of the current programs being offered? Have you attended them? Why or why not?*

8. Describe changes you've had to make or challenges you've run into, being a working mother.
 - a. *Have you made any adjustments since becoming a working mom?*

9. Tell me about who assists you, when you need assistance.
 - a. *Describe your support system.*
 - b. *What resources do you use when you need help?*

X. Closing and Evaluation (15 minutes prior to end)

- a. Do you have any additional comments to add before we end?
- b. If you were summarizing this group discussion, what do you feel would be the "take home message"?
- c. What was your favorite part of this group discussion?
- d. What was your least favorite part of this group discussion?
- e. What would have made this group discussion better?

APPENDIX K

FIGURE 1. FLEXIBILITY AND MOTHER'S AGE

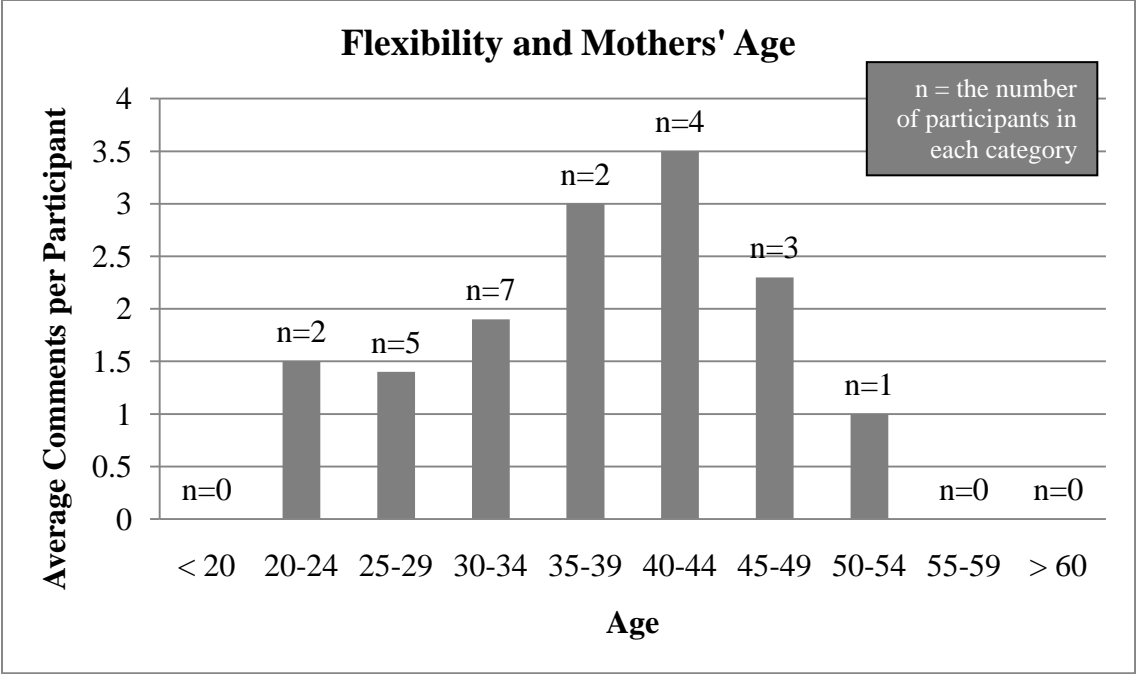


Figure 1. Flexibility and Mothers' Age

APPENDIX L

TABLE 1. PROPOSED IMPROVEMENTS TO HEALTH PROMOTION PROGRAMS

Table 1. Proposed Improvements to Health Promotion Programs

Current Health Promotion Programming	Percentage of Comments
Variety in fitness options (hours, classes, reimbursement)	40.9% (38)
Variety in current walking program	12.9% (12)
New brown bag lunch topics (input from working mothers)	6.5% (6)
New Family-friendly Activities	
Opportunities for older children (golf outing, ski passes)	7.5% (7)
Additional discounted tickets/family rates (amusement parks, theme parks, movie tickets)	5.4% (5)
New Incentives for Working Mothers	
Onsite daycare	9.7% (9)
Organized 'Working Mother' community (online, onsite discussion groups)	8.6% (8)

APPENDIX M

FIGURE 2. GUILT AND MOTHERS' MARITAL STATUS

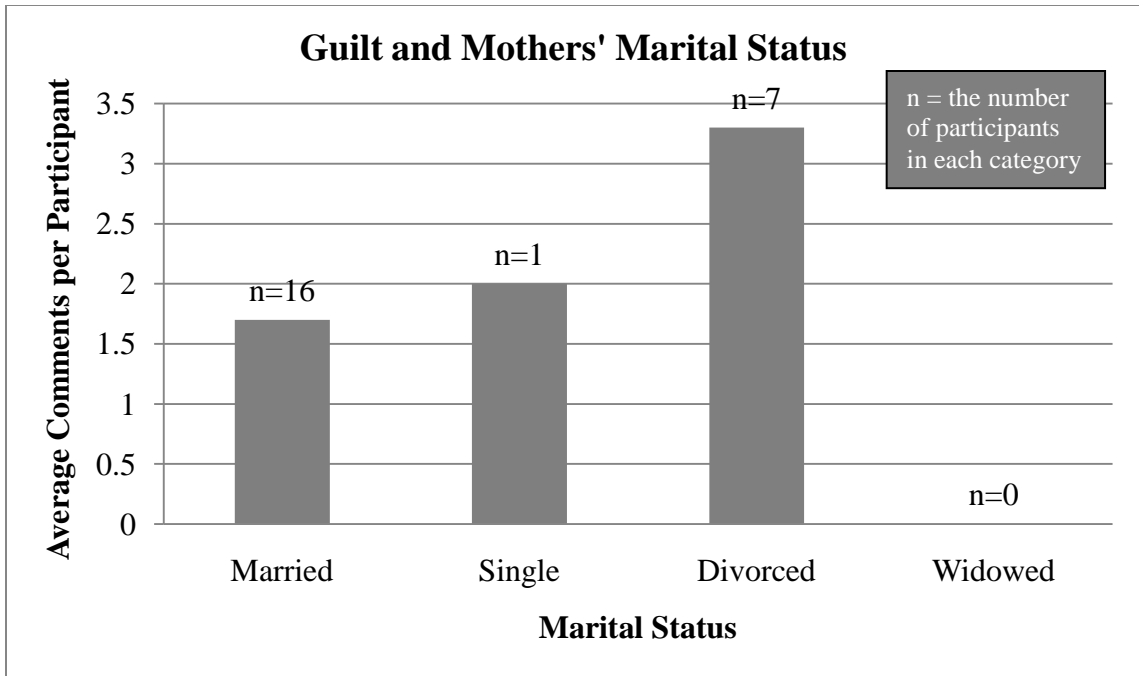


Figure 2. Guilt and Mothers' Marital Status

APPENDIX N

KEY INFORMANT INTERVIEW DATA

Key Informant Interview Data

Key informant interviews were conducted with the founder and CEO of this mid-sized Midwestern corporation, the Health and Wellness Coordinator, and a Health Educator on staff. Their responses constitute additional capacity to support their employees who are mothers. All key informants felt this population was a vital component to the success of their business, with 75% of the employees being female and 80%, of child-bearing age, between the ages of 25 and 45, "...they comprise a huge percentage and we can't ignore the fact that they exist".

Perception of mothers in their eyes was positive. They didn't see any negative perception and, in fact, felt their company supported working mothers and they weren't penalized in any way. This was somewhat consistent with the way the actual participants felt, with the exception of the inconsistency between departments and management.

One of the biggest incentives, in the key informants' eyes, for employees who are mothers is compensated time for wellness activities. "Three paid hours every week to dedicate to personal wellness is a huge benefit to busy employees such as working moms". There is a written policy for wellness time as well as other family-friendly services provided, such as a lactation room. However, due to corporate policy, exact guidelines were unable to be retrieved.

The health and wellness staff considers many things before implementing any health promotion programs. Some of these include: time, cost, feasibility, needs of the population, evaluation tools, and most importantly executive support. Without executive support, "...you have nothing," spoken by the Health and Wellness Coordinator, "...and [this company] sure has something".

Much of the success of this mid-sized Midwestern corporation can be attributed to their founder and CEO, a “big picture” kind of guy. “I like to think about what we need to do now to position ourselves to get to the next level”. This may be a vital role of CEO; however he also looks at his business as a family and is constantly thinking about how to nurture his family. One of his favorite roles is new employee orientation, “...I love to meet new employees that join the company, for me that’s very rewarding. It’s my passion, looking at these people as part of the family and the diversity they bring to the company”. With a turnover rate of less than 2%, they are definitely doing a lot of things right.