

# Adulthood and social participation/Introduction

Our adult years are defined by social participation. Besides starting a family (in all possible variations), most people are involved in paid and/or voluntary work. There is a connection between social integration and health. Work (including voluntary work) generally has a positive effect on health. Nevertheless, work-related illnesses can arise or existing illnesses can become worse due to poor working conditions. Conversely, individual health has an influence on participation in the workforce (and on other forms of social interaction). **Cite error: The opening <ref> tag is malformed or has a bad name**The Netherlands Organisation for Health Research and Development. Gender and Health: Knowledge Agenda. Den Haag; 2015.</ref>

## Profession and sex

Certain professions are significantly more often occupied by men, while others are typically occupied by women. Men are more likely to work in sectors that involve heavy physical labor (e.g. construction). But women also work in occupations that involve heavy physical labor (e.g. health care or cleaning). <sup>[1]</sup>Fauser, Bartholomeus Clement Johannes Maria, Lagro-Janssen, Antoinette Leonarda Maria, Bos, Anna Margaretha Elisabeth, Hessels F. Handboek vrouwspecifieke geneeskunde: Prelum uitgevers; 2013.</ref>

Overall, it can be observed that men tend to work in physically demanding jobs and women in emotionally demanding jobs. In addition, women are more likely to work in occupations in which they have little say (in terms of both content and time). <sup>[2]</sup> More women than men work in low-paid areas and are also often paid less than men for the same work. Significantly more women become victims of sexual harassment or sexual abuse during working hours. Women are more often involved in voluntary work and providing care informally. They care more than men for their children, relatives, friends or neighbors. **Cite error: The opening <ref> tag is malformed or has a bad name**</ref>

## Job and health

The fact that women are more likely to suffer from health restrictions and have lower subjective health values negatively influences their participation in the workforce and other social areas. Research on health and employment has found that the negative influence of poor health is particularly high among women of Turkish and Moroccan origin. Poor health can have a negative influence on employment in different ways: A person may be completely excluded from employment (incapacity to work), often be on sick leave or receive early retirement. Many women work part-time, with poor health being the main cause, especially among older women. Research has shown that older, well-educated women (in all areas of work) are particularly likely to report fatigue and exhaustion with regard to their work. Women who work less than 25 hours a week report these

problems less frequently than women who work more than 25 hours or full-time. It can be concluded that women work part-time in order to limit the overall burden (in terms of work, childcare, household and caring for others) to protect their health. Ongoing changes in the care system may lead to an increased need for informal caregivers and thus increase the pressure on women in particular, who are much more likely to take on this role. Although part-time work is often explained by maternity leave, this work profile currently appears to be the norm among all women. <sup>[3]</sup>Merens A, van den Brakel, M. Emancipatiemonitor 2014. Den Haag: SCP/CBS; 2014 Dec 16.</ref>

In general, women should be better represented in the workplace (especially in management positions). Presently women are still more affected than men by the double burden of family and work. In addition, they are absent from the workforce more often and for longer periods of time due to childcare than fathers. Women are more often on sick leave than men, with the difference being greatest between the ages of 25 and 35. This is mainly due to absence related to pregnancy or complications during childbirth. The higher rate of sick days among women (regardless of age) is also explained by the fact that a relatively high proportion of women work in the educational and health sector. The average number of sick days is relatively high here due to occupational factors. <sup>[3]</sup></ref> The prevalence of mental illnesses such as anxiety disorders and depression is higher among women than among men and is often a reason for sick leave. <sup>[4]</sup>Verdonk P, Hooftman WE, van Veldhoven, Marc J. P. M., Boelens LRM, Koppes LLJ. Work-related fatigue: The specific case of highly educated women in the Netherlands. Int Arch Occup Environ Health 2010; 83(3):309-21.</ref> Since women were able to integrate into the workforce relatively late (in the 1980s), the current average age of working women is lower than that of men. <sup>[1]</sup>. It can be assumed that the number of sick days among women will continue to rise in the coming years as the average age increases. <sup>[4]</sup></ref>

## Literature

[Click here to expand literature references.](#)

1. **Cite error: Invalid <ref> tag; no text was provided for refs named "Fauser"**
2. WILLNESS CR, STEEL P, LEE K. A META-ANALYSIS OF THE ANTECEDENTS AND CONSEQUENCES OF WORKPLACE SEXUAL HARASSMENT. Personnel Psychology 2007; 60(1):127-62.
3. **Cite error: Invalid <ref> tag; no text was provided for refs named "Merens"**
4. **Cite error: Invalid <ref> tag; no text was provided for refs named "Verdonk"**

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