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Mothers' Work, Reconciliation Issues, and Fertility Desires
Evidence from the Evaluation of a Program to Support Mothers¹
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Abstract

This paper examines the effects of "Equilibri" a program designed to support mothers of children under 18 in Italy's Piedmont region. The program is specifically aimed to help women who have reduced or stopped working due to motherhood to achieve better work-life balance by improving both employment and work-family outcomes. The evaluation, conducted via randomized control trial, shows positive impacts on employment and work-family balance. Women in the treatment group participated in professional courses, informal meetings, reconciliation support and extracurricular activities for their children. According to the results of our evaluation the program had a positive impact on mothers' employment, work-life balance as well as children well-being. Furthermore, a greater proportion of women in the treatment group expressed a desire to have another child.

Keyword: work, motherhood, family-friendly policies, fertility desires

1. Introduction and literature

The prolonged career break around childbirth is one of the reasons behind large motherhood penalties in terms of pay and employment opportunities. One in five

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women leaves their job after becoming a mother in Italy as reported in Save the Children (2024). Returning to work after having reduced or stopped working activity is one of the most challenging transitions in the labor market experience for mothers with children. This is still an understudied aspect in exploring women's experience of returning to work after maternity leave. While the determinants of wage gaps have received large attention in the literature the research on the transition between motherhood and work is still poorly understood. This represents an important gap in the literature, since returning to work represents a particularly critical time in women's personal and occupational life, in which challenges and barriers potentially affect their experience in the immediate future and years to come. Franzoi et al (2024) using meta-analysis show several aspects which are still understudied, specifically the lack of longitudinal studies that would allow for in depth study of the relationship between work, motherhood and work related satisfaction.

Casarico and Lattanzio (2023) studied the short and long run effects of having a child on labor market outcomes of mothers compared to non mothers using matched employer-employee data for Italy and found that child penalty is higher for young, low wage mothers in small firms and those taking longer leaves

The most important tools used by governments to reduce the penalties are family friendly policies such as part time jobs, availability of childcare, and counseling services to help parents improve their labor market skills. Recent evaluation of family friendly policies have shown positive impacts on mothers' work and fertility (for an extensive review of the economic consequences of family policies on work and fertility (see Del Boca 2002, Olivetti and Petrongolo 2017 and Boeri et al 2005).

Italy, like other Southern European countries, continues to be marked by low female participation in the labor market and low fertility rates. Only 56% of working-age women are employed, a figure that rises to 64% for women of childbearing age (25-45 years), but drops to 60% for mothers with young children. In comparison, the corresponding figures for European are 65% -72% The fertility rate is 1.18 children

per woman, a record low, significantly below the replacement level of 2.1 needed for a stable population and one of the lowest rates in Europe. This rate is comparable to other Mediterranean countries with low fertility, such as Spain (1.16) and Malta (1.08) in 2024, while the EU average was 1.46 in the same year.

The most widely accepted explanation, supported by extensive literature, points to the lack of work-life balance policies (Del Boca, Pasqua and Pronzato 2009, Pacelli, Pasqua and Villosio 2013) which makes difficult for mothers to continue to work after childbirth.

The research on the impact of family friendly policies on mothers' employment is predominantly non-experimental or quasi-experimental in nature (while the experimental evaluation of programs to support women returning to work after children mainly concerned with developing countries and/or mothers in stressful situation (teen or single mothers for example) (Notten et al, 2017, Cameron et al 2024).

In Italy a few programs have some similarities to the one analyzed here which provide information on courses and activities supporting mothers and fathers in job-seeking, reconciliation between work and family tasks and parenting. Del Boca, Pronzato and Sorrenti (2021). through a randomized controlled trial, have evaluated the impact of a conditional cash transfer (CCT) program offered to low-income families with dependent children on household members' labor supply. Recipients were required to attend labor-market-oriented mentoring courses as a condition for receiving a cash transfer.

Our present contribution is based on an experimental study in which no cash transfers were involved. We analyze the effects of a program called "Equilibri" which targets mothers with minor children who have either stopped or reduced their work activity following childbirth. The program is designed for a group of women in the middle range of human capital distribution: those who have previously been employed and wish to improve their career prospects. These women differ from those at the lower end (most of them have never worked) and from women at the upper end (whose income allows them to purchase services from the market). To the best of our

knowledge this is the first experiment taking place in Italy offering counselling and work support activities to re-integrate mothers in the labor market.

The primary objective of the program is to improve women's employment outcomes and work-family balance while increasing children's enriching activities. Additionally, during the program's planning and evaluation stages, we decided to explore whether better employment opportunities and work-life balance could also influence fertility desires. The program was implemented in Piedmont, a region in northwestern Italy, and was funded by a local foundation. The evaluation, conducted using a randomized control trial, demonstrated that "Equilibri" had a positive impact on employment, work life balance, and children's behavior. Furthermore, a greater proportion of women in the treatment group expressed a desire to have another child.

2. The program

Equilibri is a program designed for mothers of children under 18 who have reduced or stopped working due to maternity. The primary need of the beneficiaries is to find employment or improve their job situation, achieving a new "equilibrium" where work and family life are more compatible. Additionally, the program aims to replace, at least in part, the time mothers spend with their children with quality activities that benefit the children's development.

The program operates in three different areas of the Piedmont region in Italy, with consistent goals and similar methods across all locations: in a mountainous region (Val di Susa), a suburban area (Settimo), and the small city of Biella. Despite each of these areas facing its own unique set of challenges and weaknesses, they all share a similar labor market characterized by low level of female participation². Women were informed about the opportunities offered by the programs and its conditions through local agencies collaborating with institutions operating in each areas.

² According to data from ISTAT (the Italian National Institute of Statistics), the 2024 inactivity rate among females was 31.5% in the province of Biella and 32.7% in the province of Turin where Val di Susa and Settimo are located. The same figure for males was 22.9% in Biella and 20% in Turin.

The primary service offered to all women in the program is the support of an advisor (case manager). The first step involves an introductory meeting where the woman discusses her specific personal circumstances. The case manager's role is to work with the participant to identify activities that will help her improve her situation and move toward her goals.

A first type of activity involves identifying opportunities already available in the area: registering with the employment office, enrolling in professional courses offered by the Region, seeking support from dedicated offices for tax returns, and accessing psychological support centers in case of mental health issues affecting the couple or their children.

Other activities have been specifically designed and organized within the program and are, therefore, accessible only to women enrolled in it (unlike the previously mentioned activities). These include regular meetings, some with more structured content (such as CV writing workshops), while others focus on social interaction with other adults. The aim is to provide an opportunity for women to share their experiences regarding work, family situations, challenges, and possible solutions. One need expressed by these women (which was not an original objective of the program) was the desire to spend time with other adults—something they had previously found difficult to achieve.

Similarly, local activities are made available for the children of these women (for example, summer camps), with support provided to inform and facilitate their registration. Additionally, specific activities are organized for the children, consisting of recreational and artistic sessions running parallel to the activities planned for their mothers.

After the initial meeting, the case manager and the beneficiary remain in contact through follow-up meetings, calls, or even brief phone check-ins, as needed. Even after the beneficiary leaves the program—whether due to finding a new job, changing jobs,

or being satisfied with her work-life balance—the case manager continues to reach out for a few months afterward.

3. Data and methods

Women were interviewed at two points of time: upon enrollment in the program and 9-10 months later. Mothers interested in the program had to fill out an online Google form to access it. The form could be completed by the women themselves or, if they needed support, at the institution where the program would be conducted. This short questionnaire collected basic information: work situation, number and age of children, presence of a partner, economic situation, personal contacts, and consent to participate in the evaluation study. Some of this information was part of the eligibility requirements for participation in the program: the woman had to have at least one minor child and a family economic situation indicator (ISEE) of less than 30,000 euros. For the latter requirement, they were asked to attach the relevant certification. A final question concerned the perceived level of stress due to balancing family commitments and potential work commitments.

482 women signed up for the program between March 2023 and October 2023. The second interviews, conducted by telephone by a survey agency, took place between December 2023 and early September 2024. 321 women have responded to the second questionnaire: 159 treated women and 162 control women. In general, older women, with secondary schooling, living with a partner, having higher economic status, and experiencing slightly more stress at the time of the interview were more likely to respond. Given these characteristics, women in the treatment group showed a lower propensity to complete the questionnaire.

The second questionnaire included questions about the potential outcomes of the program and the mechanisms through which it may have worked. The first group of questions concerned the work situation: whether the woman works, how many hours a week, if she has taken part in professional courses in the last nine months, whether she

likes her job, whether she thinks it is compatible with her family commitments, whether she thinks it is an occupation that helps her grow professionally, and some personal beliefs regarding gender equality. The second group of questions concerned the children, particularly their time out of school and their well-being: five questions, taken from the Strengths and Difficulties Questionnaire, investigated their well-being in terms of peer relationships. A final group of questions generally concerned overall life satisfaction, the level of perceived stress, the time dedicated to oneself, and the possible desire for more children.

4. Descriptive Statistics

The first column of Table 1 shows the average characteristics of the sample at the time of enrollment. The women in our sample have an average age of 40 years old. Approximately half have an educational qualification equivalent to a secondary school diploma, approximately 20% have a university degree, and the remainder have less than a diploma. Half of them were working when they enrolled in the program. On average, they have 1.68 children, with the youngest child being 6 years old. Two-thirds live with a partner. On a scale from 1 to 10, the perceived level of stress for these women is 7.39. The ISEE level is divided into two classes (up to 15,000; between 15,000 and 30,000 euros): 35% of the women have an income indicator in the higher class.

Program enrollment remained open between March and October 2023. Every Friday, newly enrolled women were randomized between the treatment and control groups within each of the three territories. On Monday, the women selected for the treatment group were invited to start the program; the women in the control group were told that they would be contacted later. Nine months after this phone call, the women were contacted by the survey agency for the interview and, regardless of the interview outcome, control women were subsequently invited by the organization to join the

program. We replicate our descriptive statistics for the subsample that replies to the interview 9 months after enrolment in Table 2.

To evaluate the impact of the program, we estimate the following equation:

$$y_{k,i} = \alpha_k + \beta_k * Equilibri_i + X_i' \gamma_k + u_{k,i}$$

Where y represents the outcome variables k , $Equilibri$ is a dummy variable equal to 1 if the woman is assigned to the treatment right after her enrollment, and X represents the vector of control variables at the time of enrollment (age, level of education, number and age of children, presence of a partner, employment status, level of stress, level of income indicator, and territory). The term u denotes the usual error. We estimate a linear probability model, compute p-values from randomization inference.

5. Empirical results

Tables 3–5 present the main results related to employment, daily life, well-being values and fertility. We also investigate heterogeneity in the effects by employment status at the time of enrollment, education level (secondary school or higher vs. less than secondary), partnership status, number and age of children, and type of activities undertaken within the program (results omitted from the tables for brevity).

Table 3 shows a positive impact on nearly all work-related dimensions, although not all coefficients are estimated with precision. Notably, women in the treatment group work 2.37 hours more per week; 72% report enjoying their work (compared to 58% in the control group); and 27% consider the work–family balance sustainable (compared to 14%). In contrast, there is a negative effect on the desire to work more hours: only 28% of treated women express this desire, compared to 15% in the control group. This may reflect the fact that many treated women have already succeeded in increasing their working hours.

The subgroup analysis reveals interesting heterogeneities: the impact on the probability of being employed, which was not significant overall, becomes significant for subgroups of women without a partner (+24.4 p.p.) and for those with low income at the time of enrollment (+13.6 p.p.). Similarly, the increase in working hours is driven by women with lower income levels (+4.17). The positive effect on the likelihood of enjoying one's job is stronger among less-educated women (+28.5 p.p.), while the effect on satisfaction with career prospects becomes significant among relatively more affluent women (+13.8 p.p.). The positive impact on work–family reconciliation is more pronounced for women with more children (+24.0 p.p.).

Beyond employment, what changes are observed in other dimensions of daily life? Results are presented in Table 4. We find a higher proportion of women in the treatment group who attended a professional training course in the past nine months (18% compared to 9%), as well as a higher proportion of children participating in at least one extracurricular activity (73% compared to 66%). The increase in children's participation in extracurricular activities is more pronounced among children of previously unemployed women (+12.3 p.p.). Finally, we observe a significant reduction in peer problems among children aged six and under (-0.528).

Table 5 presents changes related to wellbeing, values, and fertility. In the full sample, the only statistically significant effect is observed for fertility: women in the treatment group show a greater willingness to have another child (16% compared to 10%). This effect is particularly strong among women with relatively high income (+13.7 p.p.) and those in a partnership (+9.6 p.p.). The heterogeneity analysis reveals several additional significant effects of the program. The increase in life satisfaction is more pronounced among women without a partner (+15.7 p.p.) and those who were not employed at the time of the interview (+14.1 p.p.). For these same subgroups, we also observe a positive effect on stress levels (+16.2 p.p.). We find a negative effect on agreement with the statement “working mother” among low-educated women (-0.431): they are less likely to agree that women should work. Regarding the “traditional roles” variable, we

observe diverging effects depending on the age of the children: mothers of younger children are more likely to agree with traditional gender roles (+0.360), whereas mothers of older children are less likely to do so (-0.293).

6. The role of the activities

Finally, we explore the role of the various activities chosen by women during the program. Were some activities more effective than others? This is not an easy question to answer. Even if we observed a positive effect associated with a specific type of activity, we would not be able to determine whether this effect is due to the course content itself, to the network created among participants, to the discussions that took place, or to self-selection into that course. Women make choices, and these choices may be driven by unobservable characteristics (such as pro-activeness) that also directly affect our outcomes of interest.

A key advantage of the program's monitoring system is that it records activities for both the immediately treated women and the control group women who will participate in the program at a later stage. This allows us to compare treated women who selected specific activities with control women who will choose the same activities in the future upon entering the program. This comparison allows us to circumvent endogeneity concerns over the choice of activity.

We classify the activities into four categories: (1) work–life balance (e.g., parenting support, access to local services), (2) employment (e.g., job training, supply–demand matching, obtaining a driver's license), (3) empowerment (e.g., financial education, microcredit, motivational support), and (4) other activities (e.g., sports, mutual aid initiatives). Due to the small sample size and low participation rates in the last two categories, we focus only on women who took part in work–life balance activities, employment activities, or both.

Table 6 reports the results. For women who participated in both types of activities, we observe a strong impact on the probability of being employed (+19.2 percentage points), as well as a substantial increase in the likelihood that each child takes part in at least one extracurricular activity (+17.6 percentage points). Among women who took part in employment-related activities, we also find a strong positive effect on the probability of liking their job (+52.0 percentage points). For those who chose work-life balance activities, we observe a more significant effect on the willingness to have another child (+11.2 percentage points). It is worth noting that women who selected these courses started from lower baseline levels in these dimensions.

7. Conclusions

In this paper we have examined the effects of a program designed to support working life balance of mothers of children under 18 in Italy's Piedmont region. The program "Equilibri" is specifically aimed to help women who have reduced or stopped working due to motherhood to achieve better work-life balance by improving employment opportunities and work-family balance. The evaluation, conducted via randomized control trial, shows positive impacts on employment and work-family balance. According to the results of our evaluation the program had a positive impact on mothers' employment, work-life balance as well as children well-being. Furthermore, a greater proportion of women in the treatment group expressed a desire to have another child. The main results related to employment, daily life, wellbeing values and fertility. We also investigate heterogeneity in the effects by employment status at the time of enrollment, education level (secondary school or higher vs. less than secondary), partnership status, number and age of children, and type of activities undertaken within the program. The evaluation, conducted using a randomized control trial, demonstrated that "Equilibri" had a positive impact on employment, work life balance, and children's behavior. Furthermore, a greater proportion of women in the treatment group expressed a desire to have another child.

TABLES

Table 1 – Descriptive statistics (at randomization)

Variable	All	Treated	Control
Age	39.34	39.54	39.11
Working before	0.50	0.48	0.53
Educ: Less than diploma	0.35	0.37	0.234
Educ: Diploma	0.47	0.46	0.48
Educ: Degree	0.18	0.17	0.18
Income H:High	0.30	0.30	0.29
With a co-residing partner	0.62	0.60	0.65
Stress level (from 1 to 10)	7.17	7.21	7.12
Number of children	1.68	1.66	1.70
Age youngest child	6.25	6.14	6.38
N	482	258	224

Notes: This table reports descriptive statistics for all women who participated in the interview conducted at randomization. It also presents descriptive statistics broken down by treatment arm.

Table 2 – Descriptive statistics (after the survey)

Variable	All	Treated	Control
Age	39.80	39.83	39.78
Working before	0.51	0.50	0.53
Educ: Less than diploma	0.29	0.32	0.27
Educ: Diploma	0.51	0.50	0.52
Educ: Degree	0.19	0.18	0.21
ISEE 15-30,000€(vs < 15,000€)	0.35	0.36	0.33
With a co-residing partner	0.68	0.67	0.69
Stress level (from 1 to 10)	7.39	7.40	7.38
Number of children	1.68	1.63	1.73
Age youngest child	6.18	6.09	6.27
N	321	159	162

Notes: This table reports descriptive statistics for all women who participated in the interview conducted 9 months after randomization. It also presents descriptive statistics broken down by treatment arm.

Table 3 – Work outcomes

Variable	Work	Hours of work	Would like to work more	Likes the job	Satisfied with job prospects	Satisfied with reconciliation
Coefficient	0.054	2.37*	0.130**	0.137*	0.062	0.131**
P-value	0.248	0.098	0.044	0.088	0.120	0.024
Control mean	0.630	30.40	0.282	0.576	0.047	0.141
N	321	172	175	175	175	175

Notes: This table reports coefficients for the treatment effect on labour market outcomes. All estimates include controls for age, employment outcome at baseline, educational attainment, income, having a partner, level of stress at baseline, number of children and age of youngest child. P-values computed by randomisation inference with 500 permutations.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$.

Table 4 – Daily life outcomes

Variable	Professional course	Time for oneself	Talk with adults	Child extra activity	Child peer problems
Coefficient	0.094**	0.013	0.014	0.071**	-0.190
P-value	0.016	0.772	0.702	0.032	0.220
Control mean	0.086	0.574	0.821	0.658	1.974
N	321	321	321	530	508

Notes: This table reports coefficients for the treatment effect on daily life outcomes. All estimates include controls for age, employment outcome at baseline, educational attainment, income, having a partner, level of stress at baseline, number of children and age of youngest child. Estimates for “Child extra activity” and “Child peer problems” refer to a child level dataset. P-values computed by randomisation inference with 500 permutations. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$.

Table 5 - Wellbeing values and fertility outcomes

Variable	Life satisfaction	Stress	Working mother	Traditional roles	Desire a child
Coefficient	0.033	0.074	-0.166	0.091	0.059*
P-value	0.384	0.124	0.114	0.404	0.090
Control mean	0.854	0.414	0.091	-0.039	0.099
N	311	321	321	321	321

Notes: This table reports coefficients for the treatment effect on wellbeing values and fertility outcomes. All estimates include controls for age, employment outcome at baseline, educational attainment, income, having a partner, level of stress at baseline, number of children and age of youngest child. P-values computed by randomisation inference with 500 permutations. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$.

Table 6 – The role of activities

Outcome	Chosen activity	Whole Sample: Control Mean	Whole Sample: Coeff.	Activity sample: Control Mean	Activity sample: Coeff.
Work	Employment and work-life balance	0.630	0.054	0.489	0.192**
Extra-curricular	Employment and work-life balance	0.658	0.071**	0.613	0.176***
Likes the job	Employment	0.576	0.137*	0.333	0.520***
Desire a child	Work-life balance	0.099	0.059*	0.085	0.112**

Notes: This table reports coefficients for the treatment effect on selected outcomes comparing estimates for the whole sample and the sample of women who have chosen several activities. All estimates include controls for age, employment outcome at baseline, educational attainment, income, having a partner, level of stress at baseline, number of children and age of youngest child. P-values computed by randomisation inference with 500 permutations.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$.

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