THE UNIVERSITY OF MANITOBA

AN EVALUATION

OF THE

FOUR WORKER

JOB SHARING MODEL

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A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE

OF MASTER OF SOCIAL WORK

SCHOOL OF SOCIAL WORK

WINNIPEG, MANITOBA

MAY, 1981

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ABSTRACT

The four worker job sharing model which was developed by the
social workers at the Women's Centre of the Health Sciences Centre
is an alternative form of work design and scheduling. The model
adheres to the basic principles of job sharing whereby two workers
work part time and share one full time position although it contains
some minor variations.

This evaluation of the project, which applied a case study
approach bolstered by some comparative material, has concluded that
the four worker job sharing model has been a success. The flexibility
of the program has allowed for improved delivery of social work
service and has created a more satisfied staff of social workers.
Anticipated difficulties in areas such as communication and adminis-
tration do not appear to have materialized.

The results of this project and evaluation suggest that job
sharing can be a viable staffing arrangement which, under the
appropriate conditions, can improve service or production and raise
staff morale. As a result job sharing has important implications
for the workplace of today and tomorrow.

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ACKNOWLEDGEMENTS

There is no joy in life

without joy in work

         - St. Thomas Aquinas

CHAPTER I

INTRODUCTION

Most people today would testify that their work, the means by
which they earn their daily living, does not bring joy into their
lives. Indeed, although it is difficult to provide conclusive evidence,
they would probably agree with the authors of Where Have All the Robots
Gone?, a provocative survey of the modern workplace, who have suggested
that, "In today's highly automated and deeply impersonal industrial
society the human being who has found fulfilling work is indeed among
the blessed. But more and more workers, and every day this is more
apparent, are becoming disenchanted with the boring, repetitive tasks
set by a merciless assembly line or by bureaucracy."[1] Although these
observations were made in 1972 there is no indication that they need
to be revised today, eight years later. In fact the mood in the work-
place may have deteriorated further and the disenchantment of workers
increased. Yet workers undoubtedly want to be engaged in satisfying
work and want to work in a supportive, caring environment.

This essay is concerned generally about work and the search for
joy in the workplace. More specifically though, it is a description
and an evaluation of one attempt at changing work to meet professional

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[1] Harold L. Sheppard and Neal Q. Herrick, Where Have All the
Robots Gone? Worker Dissatisfaction in the '70s (New York: The Free
Press), p. xi.

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and personal needs. In 1979 the social workers at the Women's Centre of the Health Sciences Centre opted to change the way in which they worked. They decided to abandon their traditional, full time compartmentalized approach to work and construct a more radical, part time shared model. They called it, "The Four Worker Job Sharing Approach to Comprehensive Patient Care"[2] and they believed that it would result in better care for the patients at the Centre and satisfaction of some of their own personal requirements.

This is an evaluation of that four worker job sharing model. It is an attempt to understand the operation and the objectives of the model, to see whether its goals have been realized and to assess both the positive and negative effects which the model has produced. In effect its intent is to determine whether this working pattern is a workable and effective alternative to the traditional patterns of work.

Thesis Organization

Following these introductory remarks, chapter two will examine the concept of work in its historic context. In addition, it will consider the gathering forces which are changing the face of work as well as the new structures and schedules of work, including job sharing, which are emerging from this ferment.

Chapter three will begin the description and evaluation of the four worker job sharing model as developed by the social workers at the Women's Centre. It will offer an introduction to the Health

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[2]B. Lockhart, M. Ridley, E. Sholikowski, K. Yurkowski, "The Four Worker Job Sharing Approach to Comprehensive Patient Care" A proposal submitted to the Department of Social Work, Health Sciences Centre, Winnipeg, Manitoba, March 1979.

Sciences Centre, the Women's Centre and the Department of Social Work.
In addition, it will describe the evolution, present operation and
anticipated outcomes of the job sharing model.

Chapter four will outline in some detail the approach to the
evaluation which was selected, based upon situational limitations. In
chapter five each of the projected and actual advantages and dis-
advantages of job sharing in this situation will be identified and the
evidence presented. Chapter six will review the evidence from the
preceding chapter and attempt to come to some conclusions about the
strength of this particular job sharing model.

The final chapter will once again review present conditions in
the world of work and the progress of work innovations such as job
sharing. In addition it will speculate on the years ahead and what the
evidence from this review and experiment may suggest about the future
of work.

Frequently today the idea of work prompts a negative response.
Therefore, attempts must be made to understand present working conditions
and, more importantly, to consider and closely evaluate any attempts to
change the way in which people work. Hopefully this report will
contribute to that understanding by describing and evaluating one
alternative, the four worker job sharing model, that is currently used
by the social workers at the Women's Centre of the Health Sciences
Centre.

CHAPTER II

WORK AND WORK DESIGN

Work, in our North American context, is usually identified
with the manner in which one earns a living, although in its simplest
terms it is just "an exertion of strength" or "effort directed to an
end."[3] Yet this seemingly simple act appears to be at the core of
human life, sustaining it physically of course, but providing much
more. However, while the concept has always been a fundamental part
of human existence, the design and detail of work has changed. Before
proceeding any further it is important to consider the enduring concept
of work and the changing structures and schedules of work, devoting
particular attention to one of the most recent innovations, job
sharing. In addition some mention must be made of job satisfaction,
an important topic in any consideration of work.

Work Through History

Man, throughout history, has always regarded work as a subject
of great philosophic and psychic importance. The ancient Greeks viewed
work as a curse and something which needed to be avoided. Indeed the
modern word for work derives from the Greek for sorrow. The Greeks
believed that work had no inherent value for man, for it enslaved the
worker, chaining him to the will of others, corrupting his soul, and
robbing him of the independence that was highly valued in Greek

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[3]The Webster Universal Dictionary (Glasgow: Collins Clear Type
Press, 1963), p. 1192.

civilization.[4] However, under the influence of the Hebrews and early

Christians, work came to be viewed as necessary atonement for the

original sin of disobeying God. For these early believers, work came

to assume positive connotations, as every individual worked to

maintain good health of body and mind as well as to secure a path

to salvation. Later, Martin Luther furthered this idea, declaring

that work was the best way for man to serve God. Calvinism concluded

that every man should work without ceasing, for work was pleasing to

God and, through profit making, was a way in which one could share

with the poor. In addition to this religious foundation, the

emergence of democratic ideals during the Renaissance and Reformation

suggested that all men were entitled and obligated to work and

contribute to the general well being of society.

Even today work is regarded by most, despite the occasional

disclaimer to the contrary, as critical to man's physical and mental

well being. While work in many countries may no longer be a

requirement for life it is still, in the words of one modern

commentator, "the fundamental effort which defines life."[5] A recent

study suggests that most people today would still work even if it was

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[4]Daniel Yankelovich, "The Meaning of Work" pp. 19-47 in Jerome
M. Rosow ed. The Worker and the Job (Englewood Cliffs: Prentice-Hall,
Inc., 1974), p. 20.

[5]Sar A. Levitan and William B. Johnston, Work is Here To Stay,
Alas (Salt Lake City: Olympus Publishing Company, 1973), p. 15.

not necessary financially, to do so.[6] A fireman, quoted in Studs

Terkel's book, Working, probably speaks for many today when he describes

his attitude towards his work:

> ...the firemen, you actually see them produce. You see them put
> out a fire. You see them come out with babies in their hands.
> You see them give mouth-to-mouth when a guy's dying. You
> can't get around that shit. That's real. To me, that's what
> I want to be.
>   I worked in a bank. You know it's just paper. It's not
> real. Nine to five and its' shit. You're lookin' at numbers.
> But I can look back and say 'I helped put out a fire. I
> helped save somebody.' It shows something I did on this earth.[7]

Thus, the central concept seems well entrenched. Work provides

autonomy, pays off in success, and essentially establishes an

individual's self respect and self worth. It defines where and how

people live, whom they see socially and how they are judged by other

members of society. In essence work today as it has for many hundreds

of years, appears to respond to something basic and profound in human

nature.

Work in Modern Society

While the importance of work has remained constant, the

structure and detail of work has changed considerably. In the

beginning, and for many hundred, indeed thousands, of years rural,

agrarian man was engaged in several simple but complete tasks which

provided directly for himself and his family. This changed with the

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[6]Rosabeth Moss Kanter, "Work in a New America" Daedalus (Vol.
107 No. 1 Winter 1978) p. 54.

[7]Studs Terkel, Working (New York: Avon Books, 1972), p. 702.

dawning of the Industrial Revolution and the advent of concepts such

as scientific management. The Industrial Revolution established the

primacy of the machine and scientific management emphasized that

man was now a mere operator. Frederick Winslow Taylor, the originator

of the latter concept, insisted that "not only were the operations of

machines to be scientifically engineered but the operations of each

individual were to be planned with detailed precision and exactitude."[8]

Man worked when it was convenient for machines and, as a result, worked

according to the clock. Work became a "soulless business."[9] Today

the legacy of the Industrial Revolution and scientific management

persists, as men and women are still required to work in highly

fractionated, remote jobs and adhere to a rigid time schedule.

But there is strong evidence today that this structure is itself

changing and will continue to change. As man enters what some have

called the Post-Industrial era, powerful forces seem to be gathering

momentum and causing employers and employees to once again rethink and

adjust the basic structures of work. Perhaps the most powerful force

is the economic security resulting from the fruits of the Industrial

Revolution. While one must still work in order to secure a livelihood,

the economic bonds have been loosened to the extent that workers may

look beyond simple financial considerations to other components of the

job.

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[8] J. Carroll Swart, A Flexible Approach to Working Hours (New York: AMACOM, 1978), p. 9.

[9] C. Wright Mills, "The Meanings of Work Throughout History" pp. 6-13 in Fred Best ed. The Future of Work (Englewood Cliffs: Prentice-Hall, Inc., 1973), p. 17.

Paired with industrial advances and the rise in the standard
of living has come a concurrent rise in the level of education. Better
educated workers have broader horizons and higher expectations of their
work. They will no longer be satisfied with dull, routinized jobs and
stifling schedules.

Furthermore, after one hundred years of scientific management,
a reaction against the cult of efficiency appears to have set in. As
one observer noted, the average worker "is beginning to wonder whether
too great a concern with efficiency and rationalization is not robbing
his life, just as Weber suspected it would, of the excitement,
adventure, mystery, romance and pleasure for which he yearns ...."[10]

In effect, the definition of success for many people has changed.
According to a survey by Daniel Yankelovich, money as a determinant of
success remains important but now many people believe that there is
such a thing as enough money.[11] Occupational status and material
possessions are no longer as important as they once were. For parents,
their children's success is no longer of crucial importance. Parents
still want their children to be successful, but as Yankelovich notes,
"they no longer regard vicarious living through their children as a
proper substitute for success in their own lives. They feel they have
their own lives to live; and do not need to live through their
children."[12] In place of these outdated criteria for success, many

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[10] Yankelovich, "The Meaning of Work," p. 33.

[11] Ibid.

[12] Ibid., p. 25

now emphasize self-actualization and self-fulfillment as more important indicators of achievement. Money is a means to an end. However exploring one's self, achieving one's potential and getting closer to nature and people are seen by many as equally important objectives.

Changing cultural values have also contributed to a re-thinking of work life. There is a decreasing emphasis on unthinking allegiance to authority, a concept critical in traditional work structures. Further, there is an increase in what one observer calls the "psychology of entitlement."[13] Employees now do not hope for but expect that they will be given organizational and civil rights, including equity and increased participation in the activities of the company.

Finally, the composition of the work force has changed and the influx of new workers has resulted in further pressure to change the traditional structures of working life. The biggest change has been the increase in the number of women in the labour force. While they want meaningful work they also want jobs which allow them to maintain a dual responsibility to their home and their work. In addition, the work force as a whole is becoming younger and these younger workers who are less attached to work and less accustomed to the rigidity of the workplace are demanding changes.

Alternative Work Designs

All these challenges to the traditional structures of work are

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[13]Ibid.

creating a revolution in the world of work. This revolution is producing changes which come in two distinctive packages. The first group of alternatives propose through programs such as job enlargement, job enrichment and industrial democracy to alter the content and very nature of work. The second group suggest less radical but perhaps, at present, more realistic change by proposing alternatives to traditional patterns of work scheduling, including the compressed work week, flexitime and permanent part time work.

The earliest attempts to alter the content and the nature of work just touched on the very periphery of the problem, if indeed they presented any real challenge at all. In the 1950s innovators tried refurbishing and brightening lunchrooms, offering a "chatty" company newsletter to create the sense of family and expressing an interest in good employee relations. However, these early efforts were somewhat less than substantive and, while they marked a beginning, they did little to enhance production or satisfaction.

The first real attempt to change the structure of work came with the introduction of the job enlargement concept. Also known as job rotation or job extension, the concept extended the individual's job description to include a large number of differing tasks. The hope was that this broadening of assignment would produce workers with a greater sense of personal accomplishment. Yet, although this concept continues today, it has been pronounced a failure by most observers. Paul Dickson observed the blue collar worker in an industrial setting and concluded that the concept had failed. "The man with the wrench

was typically given no good reason for the change and so understandably

felt he was being manipulated, and, secondly, the scheme only widened

the scope of the job rather than deepening responsibility. Quite

simply, it was a cosmetic and timid approach to a deeper problem."[14]

A second attempt at changing the very nature of work has been

called job enrichment. This concept has proved to be popular and has

been furthered by the efforts of advocates such as Roy Walters, a

consultant specializing in the implementation of job enrichment

schemes.[15] Walters suggests that job enrichment means the inclusion

of a greater variety in tasks, full autonomy, the opportunity to truly

understand the connection of a particular task to the whole and an

opportunity for direct feedback. These guidelines point to a job

which offers greater scope for personal achievement and recognition,

more challenging and responsible work and more opportunity for

individual advancement and growth. At present, the scheme is growing

in popularity and may, in fact, foment a widespread revolution in job

design.

The third concept, industrial democracy, is perhaps the most

promising one in that it promotes a fundamental change in work. It

is little known in North America but is growing in popularity in

modern European countries, particularly Sweden. Industrial democracy

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[14]Paul Dickson, Work Revolution (London: George Allen & Unwin, 1977), p. 44.

[15]Roy W. Walters and Associates Inc., Job Enrichment For Results: Strategies for Successful Implementation (Reading: Addison-Wesley Publishing Company, 1975)

as the name implies hopes to discard the traditional, large,

hierarchical and authoritarian structures and replace them with

smaller, participatory, egalitarian models. The aim is, in the words

of one European observer, "to provide a job which is complete in the

sense that the group sees it through from beginning to end and also

has the responsibility for planning, coordinating and evaluating its

own work activities, within broad constraints reached through the

participation of the group members in joint decision-making with their

supervisors."[16] Although the concept is truly in the experimental

stage it does offer much hope for the future.

The second major group of proposals to change the structure

of work have been conveniently labelled work re-scheduling. Although

these concepts do not change the content of the job, they do present

a significant alternative. The proponents of work re-scheduling

proclaim that the work still must be done so perhaps it is better to

schedule it in a more appealing fashion. The advocates of change are

undoubtedly inspired by the words of Paul Dickson who wrote that,

"there are few facets to the western way of work which are more

depressing and unimaginative than the way in which worktime is

arranged for us .... five-day, forty-hour pieces stretch out like a

seemingly endless passing train, terminating abruptly at age sixty-

five at a chicken à la king banquet where a gold watch is presented and

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[16]Peter Warr and Toby Wall, Work and Well-being (Harmondsworth: Penguin Books Ltd., 1975) p. 128.

the boss picks up the tab for the drinks."[17]

Of course variations in work scheduling have been offered for some years now. Staggered hours, shift work and overtime are all variations from the standard forty hour work week. But the first real innovation came in the form of the compressed work week. A compressed work week contains the same forty hour commitment but these hours are fitted or compressed into less than five days. This means that the worker may work ten hours a day for four days or perhaps even twelve or thirteen hours for three days. The duties and the total hours worked remain the same but the scheduling pattern is changed.

The advance of the compressed work week has been documented and indeed heralded by Riva Poor.[18] She notes that as recently as 1971 there was little interest in the concept but by 1975 two per cent of the U.S. labour force worked forty hours in less than five days. At present though the use of the compressed work week seems to have peaked and levelled off. The pattern is favoured particularly by single and younger workers in good health. When implemented successfully it may mean improved production, particularly if start up costs are heavy, and longer blocks of leisure time for workers. Of course the major problem is fatigue among older employees. The compressed work week, though, is favoured by many and represents a

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[17]Dickson, Work Revolution, p. 209.

[18]Riva Poor ed., 4 Days, 40 Hours: Reporting a Revolution in Work and Leisure (Cambridge: Bursk and Poor Publishing, 1970).

significant alternative to traditional patterns of work scheduling.

A second variation which may produce positive results for the employer and also offers the employee more latitude is flexitime. Flexitime allows workers to start and finish work each day when it is most convenient, within certain parameters. Usually workers are required to be at work during a certain core period but are permitted to choose appropriate starting and finishing times within a broader range. The idea began in West Germany in 1968 as a response to morning traffic congestion. As well as easing problems for commuters, flexi-time has proven to reduce absenteeism, tardiness and turnover, improve morale and raise production. Of course, flexitime is not appropriate for all workers and may lead to problems in communication and super-vision. However, in 1977 thirteen to fifteen per cent of all U.S. work organizations and six per cent of all employees were engaged in flexible working hours.[19] So again this represents another variation in work scheduling that is being used by significant numbers and promises positive results.

A final variation in work scheduling is one that has been available for many years but is just now increasing in use, scope and respectability. Permanent part-time work means regular, but permanent rather than temporary, voluntary work performed over a work day distinctly shorter than normal. The most common form is the part-day, full week schedule, which accounts for three quarters of all part time

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[19]Stanley Nollen, New Patterns of Work (New York: Work in America Institute, 1979), p. 2.

workers. Other types include the full-day, part-week shift, the part-time mini-shift where workers come in on a regular basis after regular hours and work perhaps another four or five hours (in effect, extending the hours of operation of the plant) and the newest and most radical variation, job sharing. Permanent part time work is usually implemented in order to solve an operating problem, usually scheduling, as well as to provide employment for workers such as women, those near or in retirement and students who wish to work only a part time shift. Problems have been cited with supervision, administration and overhead costs, but despite these concerns the concept continues to grow in popularity.

These represent the major work rescheduling designs but there are many others which have been used. Sabbaticals, time off for good works and many other options have been tried and are promoted by various writers in the field.[20] In fact, the number of variations in work design seems to be limited only by the imagination of employers and employees.

All of the above challenges and variations to the traditional content and structure of work are important and may be viable under the appropriate conditions. However, in this study, one concept is of particular interest.

Job Sharing

Job sharing is defined as "an arrangement whereby two employees hold a position together, whether they are as a team jointly responsible

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[20]Dickson, Work Revolution, pp. 271-277.

for the whole or separately for each half."[21] Although the most usual

configuration is one full time job shared between two part time workers,

job sharing can include other combinations - two jobs between three

people, three jobs between four, etc. These details may vary but the

basic tenets of job sharing remain constant. As outlined by Gretl

Meier they include, first, that the arrangement be made on a voluntary

basis with the employees holding responsibility for making the

arrangements; second, that job sharing be the result of the deliberate

conversion of a full time job; third, that each job sharer depends upon

the existence of a partner or other half; and fourth, that provision

be made for fringe benefits usually on a pro-rated basis.[22] These

appear to be the basic considerations, although any job sharing

situation may include other elements.

Although job sharing is considered a type of permanent part-time

work it differs from that general form. The most significant differences

are that job sharing is designed to restructure career-oriented

professional positions and job sharing requires a significant degree

of cooperation and coordination between sharers. Job sharing has these

specific goals but permanent part time work usually does not.

Furthermore, job sharing is often confused with work sharing, although

again there are important differences. "Work sharing is a measure

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[21] Gretl S. Meier, Job Sharing: A New Pattern for Quality of Work and Life (The W.E. Upjohn Institute for Employment Research, February 1979), p. 2.

[22] Ibid.

designed to keep workers in existing jobs. Instead of reducing the

work force during a downturn, the idea is to reduce working hours for

the entire group of employees."[23] Work sharing is therefore a

management initiated or often imposed solution to a temporary or

perhaps permanent work shortage. The working hours of all are reduced

so that all may keep their jobs. It is a short term, temporary response

to an economic dilemma and has grown increasingly popular in recent

years in Europe to combat unemployment. However there is a significant

difference between a voluntarily chosen, shared work arrangement which

allows for the pursuit of other interests and an imposed reduction in

working hours to accommodate a slowdown.

It is not known who discovered or first implemented job sharing,

although it is clear that the concept emerged for many of the same

reasons that prompted other challenges to traditional work structures.

In particular, the growing number of women who wish to participate in

the labour force has been a major factor in the emergence of job

sharing. Over the past ten years part time employment of adult women

which allows for career and home interests, has grown twice as quickly

as full time employment, indicating the strength of the movement.

Other factors which have strengthened the job sharing movement include

the growing number of young and retirement age workers as well as the

changing expectations of work and the increasing desire among many to

strike a better balance between work, education and leisure.

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[23]Peter Sadler-Brown, "Work Sharing in Canada: Problems and
Possibilities" HRI Observations (No. 18 June 1978), p. 1.

Although the discovery of the concept cannot be assigned to any particular individual, the first writings and experiments in job sharing were completed by an American group, headquartered in New York and known as Catalyst, Inc.. Catalyst was founded in 1962 and has operated since that time as a non-profit, privately sponsored information clearing house, think tank and pressure group for the development of part time career opportunities for women. Naturally, job sharing has been a particular interest.

In 1968 Catalyst undertook a study of part-time teachers in five U.S. school systems. The study was exploratory in nature and concluded "that the country abounds with well-educated women willing to teach part-time, that part-time teachers are as professional and earn their pay every bit as much as full-time teachers ...."[24] Encouraged by this exploratory study, Catalyst sponsored a two year demonstration project in the Massachusetts Department of Public Welfare. Twenty-five case worker positions in the Department were filled by fifty part-time workers. The workers were all women, college educated and essentially inexperienced in social service. Although it was not described as such, this was actually the first well-documented experiment in job sharing. The results, published in 1971, were remarkable.[25] The attrition rate among the original fifty women was fourteen per cent, one-third that of the regular staff. These pioneer part-time job sharers carried, on

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[24] Catalyst, Part-Time Teachers and How They Work: A Study of Five School Systems (New York: Catalyst, December 1968), p. 1.

[25] Catalyst, Part-Time Social Workers in Public Welfare (New York: Catalyst, October 1971)

average, 42 cases compared to 78 cases for the full-time workers. But most significantly, the part-timers, working half of the normal time, made 89% as many personal contacts as the full-timers and 120% as many telephone contacts! Not only did these women perform better than the full-time workers, they also had the extra time to assume other responsibilities. In sum, the report concluded that these early job sharers "performed exceptionally well."[26]

Encouraged by these successful experiments, Catalyst published a guide for women on part-time work, including job sharing, entitled How To Go To Work When Your Husband is Against It, Your Children Aren't Old Enough and There's Nothing You Can Do Anyhow.[27] As well, they set up local offices in over one hundred U.S. cities which offered advice and support to women seeking part-time career work.

With Catalyst in the forefront, other groups such as New Ways to Work, a California based resource group, started to help individuals who were not satisfied with existing work patterns. New Ways to Work encouraged job sharers, linked up potential job sharers and helped them to apply to employers as a job sharing team. Many individual projects were planned and begun. The press picked up the job sharing idea and helped to spread it across North America. Reports on job sharing were

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[26] Ibid., p. 1

[27] Felice N. Schwartz, Margaret H. Schifter, Susan S. Gillotti, How To Go To Work When Your Husband Is Against It, Your Children Aren't Old Enough and There's Nothing You Can Do Anyhow (New York: Simon and Schuster, 1972)

published in academic journals (Library Journal,[28] Canadian Library,[29] and Physics Today[30]), national news magazines (Washington Post,[31] Christian Science Monitor,[32] Nation's Business,[33] and Time[34]), women's magazines (Good Housekeeping,[35] Working Woman,[36] and Ms[37]) and publications for seniors (Retirement Living[38]). These reports almost always included a summary of the principles of job sharing as well as glowing testimonials from job sharers. This description by a pair of job sharing librarians is typical. "We want to work; we also want to

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[28]Rhonda Sandler and Judith Platt, "Job Sharing at Montgomery County" Library Journal (Vol. 98 No. 19 November 1 1973), pp. 3234-3235.

[29]Jacqueline Hooper, "Half a Librarian Is Better Than None..." Canadian Library (Vol. 24 No. 4 January 1968), pp. 338-340.

[30]Jane Jackson, "Permanent Part-Time" Physics Today (Vol. 25 No. 6 June 1972), p. 15

[31]Kathy Sawyer, "Job Sharing: Growing Trend" The Washington Post (Monday, December 26 1977), p. 1

[32]Brad Knickerbocker, "Job Sharing Catches On" The Christian Science Monitor (Monday, December 13 1976), p. 2.

[33]Roberta Graham, "In Permanent Part-Time Work, You Can't Beat the Hours" Nation's Business (Vol. 67 January 1979), p. 65

[34]"Two For the Price of One" Time (May 3 1976) p. 68.

[35]Joan Libman, "Job Sharing" Good Housekeeping (Vol. 188 No. 6 June 1979), p. 62

[36]"Freeing Yourself: Practical 9 - to - 5 Alternatives" Working Woman (Vol. 4 No. 7 July 1979), p. 20.

[37]Carol Greenwald, "Part-Time Work: When Less is More" Ms. (Vol. 4 No. 11 May 1976), pp. 41-42.

[38]"Retiree Job Sharing" Retirement Living (Vol. 17 May 1977), pp. 22-25.

be unharried wives, mothers and friends. Neither of us is a Super-woman who can work full time, tend to the needs of our families and fulfill our own hunger for intellectual recreation. By sharing a job, we have the opportunity to do all these things."[39]

Despite this outpouring of activity and comment, it would be wrong to conclude that job sharing is a numerically strong movement or must be used by everyone. Unfortunately, accurate statistics are simply not available, but it is clear that only a very small percentage of the North American work force is involved in job sharing. Although job sharing is not restricted to certain areas of endeavour it has proven to be most popular and successful with women, the young, those near or at retirement age, the physically handicapped and others who, for whatever reason, wish to withdraw from full time work activity. A 1978 survey of 238 job sharers provides a brief sketch of job sharing employers and employees.[40] Teachers account for 26% of all job sharers, administrators 25%, secretaries 15%, counsellors 13%, researchers 9% and others 11%. Most of these jobs are in non-profit organizations, are shared by all female teams and involve a total salary package of less than $16,500. Most job sharers are under 40 years of age, are white and married and the job sharer's salary is not the sole source of income. Thus job sharing is found most commonly in the service sector and most commonly involves women.

Despite its still limited use, job sharing does offer advantages

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[39]Sandler and Platt, Library Journal, p. 3235.

[40]Meier, Job Sharing: A New Pattern for Quality of Work and Life.

for both the organization and the individual. The advantages for the
organization, based on the anecdotal evidence of the few studies that
have been undertaken, include evidence of more appropriate and con-
venient scheduling, higher productivity due to greater energy on the
job, improved morale, reduced absenteeism and turnover and a
broadening of the potential pool of job applicants to include women,
younger and older workers and others seeking part-time work. The
advantages for individuals include heightened job satisfaction and
the opportunity to pursue broader, less pressured lives. Projected
disadvantages or at least areas of concern include, for the
organization, supervision, communication and the loss of the one
person - one job concept. For the individual, of course, it reduces
salary and necessarily increases communication time with one's fellow
workers. However, to be fair, in the words of one observer, "At
this time job sharing ... has involved such small numbers that its
value can best be described within each work setting and with
particular individuals."[41]

Job Satisfaction

In any job sharing scheme heightened job satisfaction is often
cited as a major benefit. Yet the study of job satisfaction is a
complex matter and deserves special mention. Beyond the simple
definition that job satisfaction is "the pleasurable emotional state
resulting from the appraisal of one's job as achieving or facilitating

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[41]Ibid., p. 88.

the achievement of one's job values"[42]   there is considerable debate

over the reasons for the importance of job satisfaction as a subject

of study.

The job sharers in the situation under study clearly believed

that increased job satisfaction would lead to improved performance.

However, this connection has never been clearly established through

research and there are a number of perspectives on the relationship.

The earliest theorists in this area pointed to the results of the

famous Howthorne studies and quickly concluded that satisfied workers

were more productive workers. Later researchers questioned this

assumed relationship and attempted more rigorous studies. They found

that the relationship between morale and productivity was more complex

and was affected by too many intervening variables to suggest a simple

satisfaction - leads - to - increased - production relationship. A

prominent theorist argued in 1955 that, "it is time to question the

strategic and ethical merit of selling to industrial concerns an

assumed relationship between employee attitudes and employee per-

formance."[43]   However, these new opinions were challenged once again

and newer theories proposed. The modern position now turns the

familiar connection on its end and suggests that "good performance

may lead to rewards, which in turn lead to satisfaction; this

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[42]Edward A. Locke, "What is Job Satisfaction?" Organizational
Behavior and Human Performance (Vol. 4 No. 4 November 1969), p. 316.

[43]Arthur H. Brayfield and Walter H. Crockett, "Employee
Attitudes and Employee Performance" Psychological Bulletin (Vol. 52
No. 5 1955), p. 421.

formulation then would say that satisfaction rather than causing

performance, as was previously assumed, is caused by it."[44]   Today

the debate between these positions continues.   Perhaps it is best to

conclude, as one modern author has, that "interest in job satisfaction

stems from low but consistent association with job performance."[45]   In

other words, it is safe to say only that job satisfaction would seem to

be related in some way to work performance, as the job sharers suggest,

but that the nature and the intensity of the relationship are virtually

unknown.

The attempt to measure job satisfaction is also a difficult

proposition.   First, there are different dimensions which must be

considered.   For example, satisfaction with the work itself, with the

salary, with the company or organization, with supervisors and with

co-workers may all yield different results.   A second, equally serious

problem,has been explored by Stanley E. Seashore and Thomas D. Faber.

They suggest that an individual's job satisfaction may be affected by

a variety of uncontrollable and irrelevant factors including the

broader political and economic environment, the status and power of the

occupation, the organization, the job and the job environment.[46]   Other

factors which might interfere with a reliable score include demographic

[44]Edward E. Lawler and Lyman W. Porter, "The Effect of
Performance on Job Satisfaction," Industrial Relations (Vol. 7 No. 1
October 1967), p. 23.

[45]Ibid.

[46]Stanley E. Seashore and Thomas D. Faber, "Job Satisfaction
Indicators and Their Correlates" pp. 89-124 in Albert D. Biderman and
Thomas R. Drury eds. Measuring Work Quality for Social Reporting
(New York: Sage Publications, 1976)

variables, individual values and needs, individual abilities,

situational and transient personality traits and individual expectations.

Clearly the concept of job satisfaction and then the measure-

ment of that nebulous concept provide a real challenge to any

investigator.

Summary

It is apparent that work will remain a necessary human activity

and preoccupation. However it is also clear that the basic designs of

work are being challenged and are, in fact, changing. Structural and

scheduling changes range from modest job enlargement schemes to the

radical implications of industrial democracy and from staggered hours

to the much more innovative concept of job sharing. What is needed now

are further experiments with and assessments of alternative work

designs.

CHAPTER III

SITUATION AND HYPOTHESIS

The four worker job sharing model, which has been developed by the social workers at the Women's Centre of the Health Sciences Centre, is a reflection of the current interest in all varieties of job re-design. The experiment, which began modestly over a year ago, suggests that job sharing may be an important alternative work form. However, this suggestion can only be confirmed through a rigorous evaluation process. At this early juncture, though, the situation and the circumstances leading up to the emergence of the job sharing model need to be reviewed. Also, the hypotheses upon which the project rests and which the evaluation must consider later must be clearly identified.

Study Site

This unique job sharing model has been developed by the social work staff at the Women's Centre of the Health Sciences Centre. The Health Sciences Centre is one of the largest medical complexes in Canada, occupying thirty-two acres in the centre of the City of Winnipeg. It was formed on February 1 1973 when an act of amalgamation proclaimed by the Government of Manitoba brought together a number of independent institutions including the Winnipeg General Hospital, the Women's Pavilion, the Children's Hospital, the D.A. Stewart (Respiratory) Centre and the Rehabilitation Hospital. Today the complex employs a total staff of 4,700 and has a bed capacity of 1,350.

Included within this complex is the Women's Centre, formerly the Women's Pavilion. It was established in 1950 and now operates as a specialized institution within the complex. It provides complete obstetrical and gynecological service through a large and varied staff and a 150 bed, 90 incubator capacity.

The Department of Social Work is active throughout the Health Sciences Centre. However social work at the Women's Centre has had a difficult period of development, with many personnel changes and adjustments in the pattern of service delivery leading up to the establishment of the present four worker job sharing configuration.

In the early years the Women's Pavilion was served by one social worker who was isolated from her colleagues at the General Hospital and frustrated in her attempts to provide quality social work service. With amalgamation, the new Women's Centre was served by two social workers who worked in the inpatient and outpatient departments. Again this proved to be inadequate coverage and in the late 1970s a third worker was added to serve the new Pregnancy Counselling Clinic, with particular responsibility for patients requesting therapeutic abortions. Unfortunately, though, the combination of personalities was not satisfactory and the quality of social work service suffered. As a result, further adjustments in staffing and responsibilities were made. Finally, by 1978 the Department of Social Work at the Women's Centre had stabilized. There were three highly competent and well respected workers employed at the Centre, each assuming a central responsibility for either outpatient, inpatient or pregnancy counselling work.

Just as the organizational and personnel problems in social
work at the Women's Centre had been resolved, the fragile structure
collapsed again. First, in September of 1978 one of the social workers
at the Centre contracted mononucleosis and the illness persisted.
Each time she felt sufficiently recovered to return to work again she
suffered a relapse. Finally her doctor ordered her to stay home and
not to return to work until she was fully recovered. After attempting
to carry on for a short time with just two workers, the supervisor of
the unit located a replacement and this new worker moved in on a
temporary basis, restoring service to full strength.

Gradually, though, the worker who had been ill became better and
resumed work on a part-time, three day a week basis. Meanwhile, the
temporary worker also continued to work on a part-time basis, filling
in on the remaining two days of the week. The administrators at the
Centre were reaching a point where they would have to choose between
two equally qualified workers. One worker, while still recovering from
an illness and working only part-time, clearly wanted to return to full
time work. The second worker, while hired on a temporary basis and now
only working part-time, had demonstrated exceptional clinical ability
and had proven to be popular with her fellow workers.

In addition to these personnel problems, concerns about the
quantity and quality of service at the Women's Centre had arisen during
this period. While it seemed obvious that service had improved over the
early years, it was evident that there were still large gaps in service
delivery. Most significantly, it was felt that while the outpatient
department at the Centre was processing a large number of patients,

only a small percentage, perhaps as low as 25%, actually had any

contact whatsoever with a social worker. As a result, patients were

not met routinely and screened at the outpatient stage. Instead, they

were seen only on a crisis basis as outpatients or perhaps on a similar

basis as inpatients. In either case, it was often too late to effect

meaningful plans and changes. The supervisor of the social workers at

the Centre remembers that, during his supervisory sessions, "the thing

that constantly came to me from the three of them was the fact that

we are always dealing with crisis. That was a constant message."

Finally, the four women themselves realized that as full time

social workers they were particularly vulnerable to the phenomenon

commonly known as burnout. Burnout is defined as "the emotional

exhaustion resulting from the stress of interpersonal contact."[47]

Social workers, by definition, are intimately involved with their

clients, learning about their psychological, social and physical

problems. As a result they may, over time, reach a point where they are

"unable to cope with this continual emotional stress and burnout

occurs. They lose all concern, all emotional feeling, for the persons

they work with and come to treat them in detached or even dehumanized

ways."[48]   Needless to say, such an occurrence is destructive to the

worker-client relationship and to the worker as an individual.

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[47]Christina Maslach, "Job Burnout: How People Cope" Public
Welfare (Vol. 36 No. 2 Spring 1978), p. 56.

[48]Christina Maslach, "Burned-Out" Human Behavior (Vol. 5. No. 9
September 1976), p. 16.

The social workers at the Centre also became familiar with some
of the proposed solutions to the problem of burnout. Some writers
have suggested that burnout may be combated by changing work schedules
to shorten work shifts, increase the opportunity for time-outs, and
vary the individual's work responsibilities. One investigator
observed that alternatives such as part-time work, by reducing the
amount of worker-client interaction in a day, may have a singificant
impact on burnout. "It is commonly -- and I suspect wrongly --
assumed that full-time workers do better than regular part-time
workers; the phenomenon of burnout argues otherwise."[49] In addition,
others have suggested that encouraging and allowing workers to work
together closely and thus support each other helps to reduce burnout.
"Our findings show that burnout rates are lower for those professionals
who actively express, analyze and share their personal feelings with
their colleagues .... This process is greatly enhanced if the
institution sets up some social outlets such as support groups ...."[50]
Both the above approaches have been identified as potential ways to
combat burnout.

Development of the Job Sharing Model

In response to these concerns the two full time and two part
time social workers at the Women's Centre began to examine their
situation more closely and more creatively. They realized that within
their ranks they had one experienced worker who could not yet work

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[49] Robert Kahn, "Job Burnout: Prevention and Remedies"
Public Welfare (Vol. 36 No. 2 Spring 1978), pp. 62-63.

[50] Maslach, "Burned-Out", p. 22.

full time plus one new worker who had proven skills and was anxious
to join the staff but for whom a place could not be found. Secondly,
they were concerned about the glaring gaps in service. Finally, each
of them, separately, began to realize that the requirements of full
time employment were taxing and that perhaps some alternate work
pattern might alleviate these stresses.

They realized that due to budgetary limitations no additional
staff could be hired to provide the relief and additional service that
was required. So, after much discussion, one of them (although
typically they refuse to credit any one individual, calling it a
team decision) suggested that the four of them, the two full time
workers and the two part timers, all become part time workers and
share the three available full time positions. In this manner they
envisioned that both the organizational difficulties could be resolved
and their individual objectives achieved.

Possessed of this still rather vague idea, the four workers
mentioned it at a regular unit meeting with their supervisor. Rather
than deferring or quashing the idea, he responded positively and
suggested that they investigate the model's possibilities, commit their
ideas to paper and advance a firm proposal. Thus encouraged, the
workers researched their subject and after further thought and
discussion forwarded a written proposal.

The four workers proposed that the traditional full time
compartmentalized approach to work be abandoned and a more radical
four worker job sharing model be substituted. Under the old system
the unit at the Women's Centre had functioned in a fairly traditional

fashion. Three social workers were employed full time and each maintained a specific area of responsibility. One was employed five days a week, every week in the outpatient area, a second was employed on a similar schedule in the Pregnancy Counselling Clinic and the third served on a similar basis on the inpatient wards. Under the new structure all this would change. Each of the four workers would assume a part time schedule and together they would fill the three available positions. Each would assume a central or specific responsibility but would be flexible enough to cover in different areas. More specifically, one would continue in the outpatient department on Tuesday, Wednesday, Thursday; an additional worker would be employed in the same department on Tuesday, Wednesday, Thursday, Friday; one would continue with the Pregnancy Counselling Clinic on Monday, Tuesday, Thursday, Friday and the fourth would work on the inpatient wards on Monday, Tuesday, Wednesday, Thursday.

The supervisor was impressed with this proposal, endorsed it and passed it on to his superiors. At first the Director and the Assistant Director of Social Work were skeptical about the plan. As the Assistant Director later recalled, "I don't think we were that open to the whole job sharing concept. We were not probably as open as we should have been but obviously we were willing to listen." Eventually, they too were convinced that the administrative details of the plan were in order, that it did offer some advantages and that the potential problems could be avoided. They recommended that it be implemented.

Therefore, on May 1 1979 the job sharing proposal became a

reality. The four social workers at the Women's Centre all became

permanent part time employees of the Health Sciences Centre and began

to share their jobs.

Anticipated Benefits of Job Sharing

The complete job sharing scheme which the workers had developed

was outlined in a formal paper grandly titled, "The Four Worker Job

Sharing Approach to Comprehensive Patient Care."[51] The nine page

document outlined the problems, the proposed solution, including the

details of worker deployment and scheduling, and the anticipated out-

comes and potential problems.

From this proposal and from subsequent conversations with the

staff at the Women's Centre, the specific anticipated outcomes of the

model became clear. The major advantage was clearly cited in the

original job sharing proposal. "The four worker model allows for

greater flexibility which will more effectively provide the patient

care which is demanded ... in the Women's centre ...."[52] More

specifically, it would permit better service at the outpatient level.

"The inpatient workers have identified a problem on the wards whereby

patients are being dealt with on a crisis basis. This is due to the

lack of manpower in the outpatient areas. It would be much more

effective service if these patients were given service at an earlier

date -- giving a preventive type of care rather than 'bandage'

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[51] Lockhart, Ridley, Sholikowski, Yurkowski, "The Four Worker
Job Sharing Approach to Comprehensive Patient Care."

[52] Ibid., p. 1.

treatment at time of crisis."[53]

In the past all three workers worked full time, Monday to Friday. This meant that in the busiest area of the Centre, the outpatient department, only three workers were available on the hectic clinic days, Tuesday and Thursday. Under the job sharing proposal, with four part time workers, individual schedules could be adjusted to meet the service demand. Thus, all four workers could be available on Tuesday and Thursday with only two or three deployed on the other, less busy days of the week.

The advantage of having more social work staff available on Tuesday and Thursday at the outpatient clinics seems apparent. With more staff to meet the demand more outpatients could be seen and each outpatient could be interviewed at an earlier date, which would allow for better planning. Further, each patient could be seen more often before delivery and would, as a result, become better known to the workers. Finally, earlier referrals could be made to the appropriate external agencies. This objective of seeing more people at the outpatient level presumes quite reasonably and plausibly that earlier and increased contact will mean more extensive and better service.

It was hoped that eventually all outpatients would be seen routinely on at least one occasion during their pregnancy by a social worker. Such a step would ensure that all patients were engaged and assessed at the initial outpatient stage. This might eventually reduce

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[53]Ibid., p. 2.

the stigmatizing effects of involvement with a social worker. One

worker anticipated that it would be "much easier if people have met

us in a non-threatening kind of manner. If something does go wrong

it's much easier to approach them .... You've already gone over the

basics ...." And of course no one feels as though they have been

singled out if they do, at some point, require the services of a social

worker.

In addition to providing this improved service to the

Women's Centre, it was also suggested that job sharing would provide

an opportunity to extend service to the Children's Centre. At the time

the model was being developed, a gap in service on two wards at the

Children's Centre was identified. A supervisor in the Department of

Social Work requested that the Women's Centre workers make themselves

available for occasional duty on specific wards at the Children's

Centre. This was agreed and included in the original job sharing pro-

posal under the assumption that "the additional manpower available

under the four worker model would 'free' a worker two and one half

days per week to offer service at Children's."[54]

Another anticipated outcome apparently was expected by the

workers but curiously was not directly stated in their proposal.

Perhaps they felt that it would not be viewed as a legitimate goal

by the administration. Nevertheless the workers clearly anticipated

that the job sharing model and their part time status would result in

improved morale and job satisfaction for themselves. Instead of

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[54]Ibid., p. 3.

devoting all their attention to their jobs, and perhaps suffering from burnout, the workers would have increased opportunity for rest and the pursuit of other personal and professional concerns. Yet this is not stated in the proposal other than the suggestion that under job sharing the workers will accomplish as much as before and still have time for other activities.

A further benefit which would appear to relate to both productivity and satisfaction is emphasized in the proposal. Job sharing will result in the necessary application of a co-operative team approach. "We are of the opinion that this cooperative 'shared work' approach would create worker interdependency and accountability that will improve knowledge of all areas as well as provide increased depth of patient care. The team approach allows for the utilization of more skills and knowledge. It is not merely the notion of 'two heads are better than one,' but rather the principle of job sharing, resource sharing and responsibility sharing which results in better service delivery."[55] It was apparently hoped that job sharing and the team approach would mean better service through a cooperative, shared approach and heightened job satisfaction through closer relations among team members.

Other benefits, related to the above, were not identified specifically in the proposal but were thought to be necessary to consider. For example, although the precise relationship between job satisfaction and performance is unclear there seems to be little dis-

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[55]Ibid., p. 4.

agreement about the strong connections between job satisfaction and employee absenteeism and turnover.[56] Simply put, the more satisfied an individual is with his job the more likely he is to attend to and remain with his job. The more dissatisfied he is the more likely he is to stay away from or leave his position. The rammifications for the organization are obvious. If an employee is absent then his job is not done. If the employees in a single position continue to change then the cost to the organization of training new employees will be significant. Job sharing may make some contribution in this area.

Anticipated Problems of Job Sharing

In their proposal the workers also identified some of the potential problems with job sharing, focusing particularly on communication. For example, under this scheme workers are away from the hospital and, therefore, away from the regular routine one or two days each week. Problems may arise for a worker who has been absent and misses important information about patients or procedures. Complete and up-to-date communication is essential if problems are to be avoided. As a result, the workers emphasized that each person would remain responsible for her cases, no matter who else became involved, that extra meetings would be scheduled to provide information and that a premium would be placed on prompt, accurate record keeping.

The workers also acknowledged that their part time status under the job sharing model meant forfeiture of some employee benefits and reductions in others. The job sharers relinquished their pension plan

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[56]Lawler and Porter, "The Effect of Performance on Job Satisfaction," p. 22.

and group life insurance benefits and experienced appropriate
reduction in their salary, vacation and sick time.

Finally, other potential problems with job sharing were noted.
A standard concern was that job sharing would make supervision that
much more difficult. As one fearful supervisor explained, "I suppose
carried to the ultimate, with forty established positions, in theory,
you could have eighty people and what sort of an administrative
problem do you have if this theory were to be carried out." In
effect the concern appears to be that job sharing, because of the
increased number of workers and their part time status, would make
supervisory control more difficult.

Summary

The four worker job sharing model emerged from these conditions
and with the above objectives in mind. From the outset the model
seemed to function well. Yet the memorandum of agreement stated, and
the workers themselves agreed, that because of the experimental nature
of the entire project a complete and thorough evaluation would take
place after a one year trial period. Such an evaluation would review
the project and determine if the objectives were being met or if the
potential problems were interfering significantly with the model.
Overall, the evaluation was requested to determine if the four worker
job sharing model was, on balance, a success.

CHAPTER IV

METHOD

Armed with this background information the evaluation proceeded
to the next step, the selection of a method of approach. The purpose
of the study was reviewed once again, the situational limitations con-
sidered and then, based on this evidence, the most appropriate design
was chosen.

Purpose

An evaluation is simply an attempt "to utilize the scientific
method for the purpose of assessing the worthwhileness of an
activity."[57] And of course "All social institutions or subsystems,
whether medical, educational, religious, economic or political are
required to provide 'proof' of their legitimacy and effectiveness in
order to justify society's continued support."[58]

In this case the "purpose" seemed clear. The participants were
anxious to see whether the four worker job sharing model was in fact
achieving its primary goals of improving social work service at the
outpatient level, with all the subsequent benefits, and creating more
satisfied social workers. They wondered too if there were other, less
obvious, benefits to job sharing which only a thorough study would

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[57]Edward A. Suchman, Evaluative Research (New York: Russell
Sage Foundation, 1967), p. 20.

[58]Ibid., p. 2.

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reveal. Furthermore, they wanted to know if possible disadvantages or difficulties, such as failed communication, were hindering service and, in fact, negating any advantages which the model might be delivering. Overall, they wanted an outside observer to describe the present condition of the job sharing model and to suggest further improvements.

Limitations of the Research Design

While the intent of the evaluation seemed clear the many limitations upon the situation shrouded the project. In theory an evaluation of any sort is stronger if the general topic area has a sound theoretical base, if the sample under consideration is significant in size, if there is adequate before treatment data and if the experimental group can be compared with other similar groups.

Unfortunately, this situation appeared to be lacking in all four areas. First, as the earlier review indicated the concept of job sharing is fairly new and has not yet been thoroughly researched. There are only a very few serious articles which discuss the subject and even fewer which present any substantial research evidence. As a result, a study on job sharing does not build from a sound theoretical base and thus must be somewhat tentative and exploratory in nature.

Secondly, the number of social workers who are involved in job sharing at the Women's Centre is small. Studies which consider a large sample of subjects can be generalized with more confidence to the wider context. In the current situation the small number of workers

means that conclusions must be interpreted with much more caution.

Thirdly, this example is seriously lacking in before job sharing data. While data can be gathered now that job sharing is in place little data is available before job sharing was implemented. For example, there is no indication of the quantity or quality of social work service or the levels of job satisfaction before job sharing was instituted. This means that the current standard of service and satisfaction could not be compared to previous levels and thus made more meaningful.

Fourthly, it became apparent that the unit at the Women's Centre could not be meaningfully compared to other units. Job sharing cannot be promoted in all settings. The Women's Centre offered certain conditions which other units simply could not duplicate. The Women's Centre presented a situation where the workers, rather than management, advanced the cause of job sharing and where workers were able to share jobs because of the relatively homogeneous nature of their work. Other workers may not have the freedom to alter the structure of their work or to share the work because their tasks are too diversified. Moreover, the Women's Centre offers a unique service in that it serves both private and staff patients in fairly large numbers. There is no other centre in Winnipeg which serves such a varied and large group of patients and could be used for comparative purposes. Finally, the Women's Centre cannot be compared to other units because their respective goals would be radically different and therefore not comparable. The Women's Centre implemented job sharing in part because they wanted more flexibility to deal with client

demand and as a result anticipated some specific consequences. Other

units might consider job sharing for different reasons and thus

anticipate different results. Thus the results at the Women's Centre

could not be precisely compared with the results which might

accrue to other units.

While all these difficulties were acknowledged it was more

difficult to overcome them. Perhaps the first limitation, the lack

of research on job sharing, could be accepted as a challenge to

provide some further study and illumination in this area. But the

others had to be acknowledged as relatively permanent shortcomings.

Sources of Qualitative Information

It was determined that an in depth case study approach,

bolstered whenever possible by some comparative work would be the most

appropriate way to approach the problem. A case study, the

"observation of a single group at one point in time usually subsequent

to some event that allegedly produced change"[59] is designed to gather

a good deal of largely subjective information about a particular

situation. Therefore, a wide variety of sources were consulted,

including the existing hospital, and particularly social work, records.

The original job sharing proposal and agreement was examined.[60] Case-

load and personnel records from the Department of Social Work were also

considered. Finally the results of a Department wide audit of social

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[59]David Nachmias and Chava Nachmias, Research Methods in the
Social Sciences (New York: St. Martin's Press, 1976), p. 42.

[60]Lockhart, Ridley, Sholikowski, Yurkowski, "The Four Worker
Job Sharing Approach to Comprehensive Patient Care."

work recording practice, "Social Work Recording in the Patient's Medical Record"[61] were examined. While the audit basically assessed the standards of acceptable social work recording it also contained information on record keeping for the Department as a whole and for the individual units within the hospital in particular.

The primary source of information was forty-three semi-structured interviews, ranging in length from fifteen minutes to three and a half hours. The subjects included the four social workers involved, their supervisor, the Director and Assistant Director of the Department of Social Work, members of the Health Sciences Centre Manpower Department, nursing staff, workers in external agencies and other professionals who had had some contact with the job sharers. Each subject was asked to indicate his/her connection to the job sharers and to specifically appraise the model's strengths and weaknesses.

Unfortunately, the case study approach, utilizing techniques such as these, is readily recognized as the weakest quasi-experimental design. It does not offer a baseline measure of the study group or a control group with which to compare. Furthermore, the case study approach in this situation relies heavily on interviews with the participants themselves and their testimony must be approached with caution. For example, the social workers who developed the project were obviously pleased with the results and were anxious to preserve

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[61]Ambrose S. Ojah, "Pursuing Quality Assurance:Social Work Recording in the Patient's Medical Record" A report of the findings and recommendations of the Staff Audit Committee, Department of Social Work, Health Sciences Centre, Winnipeg, Manitoba, May 1980.

the status quo. One described her feelings thusly, "By having the extra day [off] it's almost a feeling of playing hookey. You're pulling something off on someone. You should be someplace else." The workers appeared reluctant to express anything but complete satisfaction with the project. As a result, these workers viewed the model from a particular perspective and cannot be considered completely reliable and objective observers of the situation.

Sources of Quantitative Information

In addition to these semi-structured interviews a review of patient charts at the Women's Centre was undertaken. A complete list of the 382 women who attended the Centre's outpatient clinics between May 1 1978 and April 30 1979 was compiled and a random sample of 100 patients was drawn by the lottery method. This group represented a sample of clients who had been served in the outpatient department under the traditional scheduling pattern. Their charts were reviewed and quantitative information pertaining to the presence of social work involvement, the initial date of hospital and then social work contact relative to expected delivery date and the number of social work contacts was noted. From a list of 416 patients who attended the outpatient department between May 1 1979 and April 30 1980 a sample of 100 was again drawn, randomly, to represent the group of patients served under the job sharing approach. The same information was extracted from their charts and noted.

The obvious weakness of this approach is the possible in-accuracy of the record keeping of the social workers. There is no

assurance that the records have been maintained consistently. And

of course gathering data on the quantity of services delivered

provides only inferential data on the quality of services delivered.

Yet the approach does provide at least some evidence on the quantity

of service (and inferentially on the quality of service) delivered

after the introduction of job sharing, compared with the service

delivered before job sharing.

In addition an attempt was made to assess the level of job

satisfaction among the workers through a device known as the Job

Descriptive Index (JDI).[62] Mindful of the debate over the significance

of job sharing and the various dimensions of satisfaction, the JDI

nevertheless does attempt to assess job satisfaction.

The Index is presented in five separate although undoubtedly

overlapping categories -- work, pay, promotion, supervision and co-

workers. (see Appendix I). Under each category a word or phrase is

presented and the worker is asked to indicate whether the phrase

accurately describes their work. From these responses, scores for each

area (e.g. satisfaction with pay) are computed, although an overall

satisfaction score cannot be calculated.

In the present evaluation the Index was presented intact with

only one exception. On the pay scale one question on profit sharing

was deemed inappropriate and eliminated. The slightly revised Index

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[62]Patricia Cain Smith, Lorne M. Kendall, Charles L. Hulin,
The Measurement of Satisfaction in Work and Retirement (Chicago:
Rand McNally & Company, 1976).

was distributed to the 92 hospital based social workers in the City

of Winnipeg including of course, the four job sharers at the Women's

Centre. Each respondent was also asked to provide some basic demo-

graphic data including sex, age, marital status, number of dependents,

education, years of social work experience, years at present job

(hospital experience), name of hospital, type of work (medical or

psychiatric social work), nature of work (direct or indirect service),

status (job sharing or non-job sharing) and level of income.

Generally, the results from this scale have been so impressive

that it is regarded as the standard measurement tool in the area of

job satisfaction. One observer noted that the Index "is being widely

used in satisfaction research. It was very carefully developed and

documented, is relatively easy for workers to use and understood and

relates logically and empirically to other measures of job satis-

faction." The same observer continued on to predict, confidently,

that "As more and more investigators adopt this measurement of satis-

faction, differences in results and interpretation due to the nature

of the measurement process will disappear and the construct of

satisfaction will be better understood."[63]

Summary of Research Design

Overall, then, this study of the four worker job sharing model

utilized a variety of information gathering approaches. Existing

hospital documents and interviews with workers and administrators were

used as primary sources of information. However, two comparative

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[63]Frank J. Landy and Don A. Trumbo, Psychology of Work
Behavior (Homewood, Ill.: The Dorsey Press, 1976), p. 358.

samples of one hundred patient charts were examined and the Job

Descriptive Index was also completed by the four job sharers at the

Women's Centre and eighty-eight control proup workers.

CHAPTER V

RESULTS

On the following pages the actual results of the evaluation
are presented in three parts. The first two list the potential and
actual advantages of the four worker job sharing model for the
organization and for the individual and then consider the testimony
from the interviews and the returns from the other measurement devices.
It is important to note that the distinction between organizational
and individual benefits is somewhat arbitrary for there is no doubt
that advantages for the organization benefit the individual and that
the reverse is also true. However for the purpose of clarity each
has been identified separately and then the evidence presented. The
third part of this chapter suggests the possible disadvantages of
job sharing and again the actual results.

Potential Advantages to the Organization

The four worker job sharing model promised significant
advantages to the organization. These suggested benefits included
improved service, heightened employee job satisfaction, reduced
absenteeism and turnover and other lesser benefits.

Improved Social Work Service

From the perspective of the organization the most important
anticipated advantage of this model was that it would improve the
delivery of social work service in the Outpatient Department of the

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Women's Centre. Improved delivery through greater flexibility would mean that a greater number of outpatients could be contacted, that they could be seen earlier in their pregnancy, that the client - social worker relationship could develop more fully and that referrals to other agencies could be made at an earlier time.

In order to assess these beliefs, interviews with both social work and nursing staff were conducted. When asked whether they felt they were seeing more people at the outpatient stage, the job sharing social workers unanimously responded that "we weren't touching as many people as we are now." They appeared to be convinced that the number of patients who had been contacted had increased, although they were unable to provide any evidence to support this belief. The nursing staff responded more cautiously but admitted that in the past "it seemed as though the social workers didn't have enough time to see all of the patients that probably needed to be seen." The head nurse went on to observe that, "I think also the social workers felt that by changing to a four day work week that it would give them more opportunity to see more patients. Now I think perhaps it has helped." Another nurse echoed these cautious comments and estimated that the social workers were now seeing as many as 75% of the outpatients. A third added that by increasing their contacts at the outpatient level the social workers had eased the burden on nursing. Outpatient staff could once again concentrate on the patient's physical requirements, confident that the social workers would attend to the patient's social needs.

The social workers also felt that under the job sharing model they were seeing patients at an earlier point in their pregnancy and this was creating several benefits. One suggested that, "now it makes a difference because we're getting them earlier in their months and helping them to plan on throughout their pregnancy." Another offered the following colourful comparison. "We're able to pick up a lot of problems, especially through outpatients, that we weren't picking up 'til they were on the wards ... then everybody was in a great panic because the girl hadn't done any planning, she came in with no clothes, she had no place to go, that kind of thing. And basically a lot of our staff patients are the ones that run into a lot of these problems and now they are picked up sooner and usually resolved before she even comes into the hospital. So we don't have everybody running around in an uproar saying, 'She's got to be out in two hours and can you do this?'" A third commented that meeting patients earlier offered a better opportunity for real social work service. "It allows me to do some of the teaching and planning kinds of things that I feel are more social work than crisis oriented. That to me is social work, more than just putting the bandage on." Other staff in the outpatient department were hesitant to comment on this aspect, indicating that it was possible that patients were being seen earlier but unable to confirm this through their own experience.

The social workers also observed that seeing clients earlier permitted a different and a longer relationship where the worker had a better opportunity to really get to know the patient. The advantage here seemed apparent. "The more you see a person .... You might see

them the first two times and things look pretty good and then the third time, when they finally trust you, that's when you find out, no, things aren't good. 'I told you they were good because I didn't want to face it but now that I know you I'll tell you.'" Every worker felt that they were getting to know their clients better and that this was having positive effects in counselling.

Finally, the workers felt that because they knew their clients better and understood their needs more fully they were able to make referrals to outside agencies at an earlier date. This allowed for overlap and continuity in services. However, workers in other agencies, particularly the Children's Aid Society of Winnipeg, hesitated to confirm this advantage. They did feel that they were seeing clients earlier but felt that it was due primarily to an increased emphasis on pre-natal care within their own agency rather than on earlier referrals from other sources, such as the Women's Centre. Again, this was a difficult area to assess accurately.

Overall the social workers at the Women's Centre intuitively felt that they were achieving the goal of improving service at the outpatient stage, although there was still room for improvement. Other staff were less certain of this advantage, although they admitted that they often were simply not in a position to assess the situation accurately. However, they agreed that the pre-natal patient required a good deal of attention and welcomed the greater emphasis on the needs of that patient group.

However, it was apparent that these subjective assessments of social work service at the Women's Centre needed to be supplemented

by more reliable, objective evidence. Thus samples of outpatient charts were examined. One group from the year before job sharing and the second from the first year of job sharing were examined and compared. (A summary of this data appears in Table 5 - 1)

The concern as to whether the social workers were seeing more people in the outpatient clinics was answered rather quickly and easily. Between May 1, 1978 and April 30, 1979, the year just preceding job sharing, only 38% of all outpatients in the sample had been involved with a social worker. Conversely, 62% had not had any contact with social work. However, between May 1, 1979 and April 30, 1980, the first year of job sharing, 75% of all outpatients had seen a social worker and only 25% had evaded social work's attention. Thus, examination of the records suggests that twice as many patients were seen at the outpatient level under job sharing than under the old pattern.

The patients' records also permitted some comparison as to the date of initial outpatient and their social work contact. From the "before job sharing" sample reviewed it was determined that patients were seen in the outpatient department by the medical staff at a point on average 4.44 months advanced into pregnancy. Social work contact was made, if it was made at all, at a point 5.78 months into the pregnancy. However, in the first year of job sharing, initial outpatient contact was made at 4.24 months while social work contact was now being made at 4.74 months. Thus, the time of initial outpatient contact improved from 4.44 to 4.24 months pregnant, an increase of only a few days. However, the initial date of social

TABLE 5 - 1

CHARACTERISTICS OF OUTPATIENTS

(Women's Centre - New Pre-Natal Clinic)

	Group 1	Group 2
Average patient age	22.00 yrs. n = 100	22.14 yrs. n = 99
Residence	Wpg. - 71 Rural - 29 Unknown - 0 n = 100	Wpg. - 80 Rural - 19 Unknown - 1 n = 100
Marital status	married - 38 other - 61 unknown - 1 n = 100	married - 23 other - 74 unknown - 3 n = 100
First OPD (pre-natal) contact	4.44 months pregnant n = 99	4.24 months pregnant n = 100
OPD referral to social work?	yes - 37 no - 62 unknown - 15 n = 100	yes - 73 no - 19 unknown - 8 n = 100
OPD social work contact?	yes - 38 no - 62 n = 100	yes - 75 no - 25 n = 100
First OPD (pre-natal) social work contact	5.78 months pregnant n = 38	4.74 months pregnant n = 75

Average number of OPD
  (pre-natal) social work
  direct contacts
	1.97 direct
	contacts per
	patient
	n = 38
		2.06 direct
		contacts per
		patient
		n = 75

Group 1 = 100 patients selected from a total group of 382 patients
      seen at the Women's Centre OPD, New Pre-Natal Clinic between
      May 1 1978 and April 30 1979 (before job sharing)

Group 2 = 100 patients selected from a total group of 416 patients
      seen at the Women's Centre OPD, New Pre-Natal Clinic between
      May 1 1979 and April 30 1980 (after job sharing)

work outpatient contact improved from 5.78 to 4.74 months, an advance

of more than a month.

The number of contacts made per patient, and cited in the

medical record during the pre-natal period was also noted. In

1978-79, 1.97 direct contacts were made by the social worker with

each patient, while in 1979-80, 2.06 contacts were made. While this

marked a very slight increase in the number of contacts per patient

it was not judged to be significant. It should be noted that there

was an increase in the number of outpatients involved with social

work. However while this and the total number of direct contacts did

increase, the number of contacts with each outpatient remained

constant.

Finally, the charts were searched to see if accurate

information as to the occurrence, number and date of referrals to

other agencies could be determined. Unfortunately, this information

was either not available or incomplete, so conclusions could not be

drawn.

Extension of Social Work Service

A second major advantage which was expected was that job

sharing would allow for the extension of service to some areas of the

Children's Centre. Interviews with the social workers involved

suggested that the provision of this service was not a problem as it

involved only occasional contacts. The nurses at the Children's

Centre reported that they were pleased to have the service and that

it had been of a high standard.

But questions were raised about the decision to extend the
service. The assumption that additional womanpower was available
seemed highly questionable to the participants. In fact, no
additional woman hours were available. Under the traditional working
pattern one hundred and twenty hours were divided three ways while
under the job sharing pattern the same one hundred and twenty
hours were available and divided four ways. In effect, the social
workers at the Women's Centre had no more time to offer under this
new pattern than they did under the old, although they did try to
cope with these extra responsibilities. Another problem was raised
by the nurses at the Children's Centre. While they appreciated the
assistance, they indicated that they would have preferred to have
the services of workers who were located closer to the wards and
who could attend the weekly rounds on a regular basis. So while they
appreciated the help, they felt that it fell short of their require-
ments.

Heightened Job Satisfaction

A third major advantage and benefit of job sharing was expected
to be heightened job satisfaction for the job sharers. The deter-
mination of job satisfaction was assessed through interviews with
various staff and the returns from the Job Descriptive Index.

During the interviews all the social workers stated that, under
the job sharing concept, "there is more satisfaction with the job."
The workers reported that because they were happier they performed

better. One added that, "You're ... happy to do the little extras like maybe stay an extra half hour or extra hour and not claim the overtime but just do it." Other staff noted that the workers seem "extremely pleased" with the situation and guessed that they might be performing better as a result. However, most stated that they had always found the workers to be pleasant and had not noted any remarkable improvement or change in attitude.

Of course, a much more accurate assessment of job satisfaction is provided by the Job Descriptive Index. The Index was distributed to the ninety-two hospital-based social workers in the City of Winnipeg and replies were received within the allotted time from eighty-two. This yielded a highly satisfactory response rate of ninety per cent. The job satisfaction scores of the four job sharers were compared with the remaining seventy-eight non sharers.

The results for each subscale (work, supervision, co-workers, pay and promotions) are presented separately. Within each subscale first a comparison is made between levels of satisfaction of the job sharers and the non job sharers. Table 5 - 2 summarizes these findings. Second, figures are presented which suggest which demographic factors have most heavily influenced the satisfaction scores. Tables 5 - 3 through 5 - 7 reveal this data.

Work

On the 'Work" subscale, out of a possible score of 54, the four job sharers produced an average score of 47.25 (s.d. = 4.43) while those who worked in the regular way combined for an average score of 38.99

TABLE 5 - 2

JOB SATISFACTION SCORES

Variable	Number of Cases	Mean	Standard Deviation	Standard Error	F Value	2-Tail Prob.	Pooled Variance Estimate			Separate Variance Estimate		
							T Value	Degrees of freedom	2-Tail Prob.	T Value	Degrees of freedom	2-Tail Prob.
Work												
Group 1	78	38.9872	8.255	0.935								
					3.48	0.331	-1.98	80	0.051	-3.44	4.16	0.026
Group 2	4	47.2500	4.425	2.213								
Pay												
Group 1	75	15.7467	5.120	0.591								
					2.37	0.154	0.55	77	0.581	0.38	3.14	0.732
Group 2	4	14.2500	7.890	3.945								
Promotion												
Group 1	74	7.5676	6.333	0.736								
					1.92	0.662	-0.06	76	0.955	-0.08	3.65	0.943
Group 2	4	7.7500	4.573	2.287								
Supervision												
Group 1	78	43.6923	10.875	1.231								
					118.27	0.002	-1.79	80	0.077	-7.38	61.54	0.000
Group 2	4	53.5000	1.000	0.500								
Co-Workers												
Group 1	77	45.6364	7.703	0.878								
					0.0	1.000	-2.16	79	0.034	-9.52	76.00	0.000
Group 2	4	54.0000	0.0	0.0								

Group 1 = non-job sharers

Group 2 = job sharers

(s.d. = 8.26). (See table 5 - 2). A t-test determined that the satisfaction scores on the "Work" subscale of the job sharers were significantly higher than the scores of those who did not job share. ($t = 1.98$, df = 80, $p < .051$). In other words, the job sharers were significantly more satisfied with their work than other social workers.

Further on the "Work" subscale the variable, status, whether an individual job shared or did not, appeared to be the most important variable, explaining more than four per cent of the variance in the scores. (See table 5 - 3). When status was combined with social work experience, sex, number of dependents, hospital experience and educational level, they explained more than twenty per cent of the variance. In essence, of all the demographic factors which were recorded, whether one job shared or not was the most influential variable in determining an individual's satisfaction with work score.

TABLE 5 - 3

VARIABLES AFFECTING "WORK" SATISFACTION SCORES

Variable	Multiple R	R Square	RSQ Change	Simple R	Beta
Status	0.21605	0.04668	0.04668	0.21605	0.24445
Social Work Exper.	0.31934	0.10198	0.05530	0.20806	0.32769
Sex	0.36200	0.13104	0.02907	0.12157	0.28387
Dependents	0.40857	0.16693	0.03589	0.13366	0.21419
Hospital Exper.	0.43081	0.18560	0.01867	0.03737	-0.21170
Education	0.44780	0.20053	0.01493	0.14910	0.14299

Supervision

On the "Supervision" subscale, again working from a possible score of 54, the job sharers scored 53.50 (s.d. = 1.00) and the non job sharers averaged 43.69 (s.d. = 10.88) (See table 5 - 2) Again the satisfaction with supervision scores of the job sharers were found to be significantly higher than the scores of the non job sharers ($t = 7.38$, df = 61.54, $p < .001$). Furthermore status appeared to be the most influential demographic variable in determining satisfaction with supervision scores (See table 5 - 4). This factor accounted for three per cent of variance while it combined with the type of social work (medical or psychiatric), hospital experience and education to explain eleven per cent of the variance.

TABLE 5 - 4
VARIABLES AFFECTING "SUPERVISION" SATISFACTION SCORES

Variable	Multiple R	R Square	RSQ Change	Simple R	Beta
Status	0.19653	0.03862	0.03862	0.19653	0.25008
Type of work	0.24959	0.06230	0.02367	0.11876	0.16126
Hospital Exper.	0.28475	0.08108	0.01879	-0.11228	-0.21381
Education	0.33238	0.11048	0.02939	0.08196	0.20421

Co-workers

On the "Co-workers" subscale all the job sharers scored the maximum number of points, 54 (s.d.= 0.00) while the non-job sharers produced an average score of 45.64 (s.d. = 7.71) (See table 5 - 2). However, because the job sharers scores showed no standard deviation (and t-tests require a standard deviation greater than zero) it was

impossible to conduct a test of significance. However, it was noted

that the satisfaction with co-workers scores of the job sharers were

markedly higher than those of the non job sharers. Also on the

"Co-workers" scale, status was again the most important variable at

five per cent, while it, the nature of the work (direct or indirect

service) and social work experience explained nine per cent of the

variance (See table 5 - 5). In other words, this meant that

satisfaction with co-workers was most heavily influenced by the fact

of whether one job shared or did not.

TABLE 5 - 5

VARIABLES AFFECTING "CO-WORKERS" SATISFACTION SCORES

Variable	Multiple R	R Square	RSQ Change	Simple R	Beta
Status	0.23585	0.05562	0.05562	0.23585	0.22157
Nature of work	0.26919	0.07246	0.01684	0.10143	0.19234
Social Work Exper.	0.30320	0.09193	0.01947	-0.10704	-0.13604

Pay

On the "Pay" subscale the mean scores of the job sharers, 14.25

(s.d. = 7.85) and of the non job sharers, 15.75 (s.d. = 5.12) from a

possible score of 24 were not significantly different. (See table

5 - 2). Upon further examination of the "Pay" subscale income level

was, not surprisingly, the most important variable in determining

satisfaction with pay (See table 5 - 6). It was also found that

income level, the nature of the work (direct or indirect service) and

the number of dependents were important determinants of the pay score,

explaining almost sixteen per cent of the variance.

TABLE 5 - 6

VARIABLES AFFECTING "PAY" SATISFACTION SCORES

Variable	Multiple R	R Square	RSQ Change	Simple R	Beta
Income	0.30355	0.09214	0.09214	0.30355	0.54089
Nature of work	0.38069	0.14492	0.05278	0.00166	-0.21478
Dependents	0.39870	0.15897	0.01404	-0.05766	-0.11599

Promotions

On the final subscale, "Promotions," both job sharers and non
job sharers scored at about the same, relatively low level of satis-
faction. (See table 5 - 2). The job sharers produced an average
score of 7.75 (s.d. = 4.57) and the non job sharers, 7.58
(s.d. = 6.33) from a possible score of 27. In addition the nature of
the work (direct or indirect service), greatly influenced the satis-
faction with promotion score to the extent that it accounted for
twenty per cent of the variance in the scores (See table 5 - 7).
Variables such as hospital experience, social work experience, income
level, sex and status combined to explain a further six per cent of the
variance.

TABLE 5 - 7

VARIABLES AFFECTING "PROMOTIONS" SATISFACTION SCORES

Variable	Multiple R	R Square	RSQ Change	Simple R	Beta
Nature of work	0.44422	0.19733	0.19733	0.44422	0.36095
Hospital Exper.	0.46226	0.21369	0.01636	-0.08240	-0.26781
Social work Exper.	0.48131	0.23165	0.01797	0.21697	0.20973
Income	0.48965	0.23995	0.00830	0.31336	0.20229
Sex	0.50224	0.25225	0.01229	-0.16223	0.18271
Status	0.51252	0.26268	0.01043	0.00650	0.11094

Overall, in the area of job satisfaction it was noted through interviews with the participants and the results of the Job Descriptive Index that the job sharers felt more satisfaction with their work, their supervisors, and their co-workers. It was also suggested that this may have had a positive effect on job performance.

Reduced Absenteeism and Turnover

As a further advantage to job sharing it was felt that the model would contribute to reduced absenteeism and turnover. With regard to absenteeism, the personnel and attendance records from the Department of Social Work revealed that each job sharer averaged 2.75 days absent over a twelve month period. When this figure was adjusted to compensate for their part time status the average number of days absent rose to 3.6 per year. On the other hand, the remaining eighteen Health Sciences Centre social workers who had been employed full time for the year under examination were absent on average, 5.82 days per year. As a result there was some indication that job sharing may have contributed to a reduction in the number of days absent.

With regard to turnover, the records in the Department of Manpower indicated that, since the beginning of the job sharing project, the job shared positions at the Women's Centre had been filled by the same people, creating a turnover rate of 0%. On the other hand, staff in the Department of Manpower noted that an annual turnover rate of 15 to 20% was not unexpected. In 1979 the turnover rate for the Department of Social Work had been 29.4% while in 1980 it was projected to stand at 20.6%. Clearly the job sharers had been a more

stable work group than other, non job sharing social work units within the hospital.

Other Advantages

Other advantages to job sharing for the organization were cited during the course of this investigation. One job sharer felt that in the past the image of social work at the hospital had not been entirely positive but that job sharing had made a change in that impression. First the Department of Social Work's endorsement of the job sharing concept had helped to create an impression that social work was somehow more imaginative and flexible in their response to employee concerns. Secondly job sharing, by requiring good communication between the social workers and other staff and by permitting flexibility in service delivery, had allowed the social workers to reach others and tell them about the aims of social work service. This worker felt that for these reasons job sharing had improved social work's general image.

Another advantage for the hospital was that job sharing had permitted the organization to draw upon a wider pool of employees. The concept had allowed the organization to retain a staff member whose career as a full time worker was threatened by illness. It had also permitted the organization to retain other valued employees who might at some point have opted for part time employment. Furthermore, in the future the existence of job sharing might prove to be an attractive lure for prospective employees. This advantage of allowing for the retention of valued employees has often been cited in the literature

as a feature of job sharing.

Potential Advantages to the Individual

While job sharing benefits the organization it may also profit
the individuals who are involved in the project. Such advantages as
the development of a supportive team atmosphere, the improved physical
and mental health of the workers and increased opportunity for
alternative activities have been suggested. Unfortunately in this
investigation these individual benefits could not be examined in a
rigorous fashion and considerable emphasis had to be placed on the
subjective testimony of the participants.

Promotion of Team Concept

Job sharing demands that the participants, of necessity, work
as a closely knit team. The advantage of working in this manner seemed
obvious to the job sharers. First they commented immediately on the
personal advantages which each of them had felt. They each indicated
that they drew strength from being part of a closely knit group. "I
really like sharing my job with other people in that I'm also sharing
my concerns." Another candidly admitted that "I don't like working
autonomously. I like having other people. As a new worker I thought
it was a good opportunity to work with three people who were
experienced and be able to do case discussions and have an opportunity
to work with them and see what they were doing as well. That was
appealing." In fact, they all tried to describe the intangible feeling
that they received while working as a member of a team. One sharer
tried to describe what it was like to work in the past as opposed to

the present shared method. "I didn't feel like I belonged as much as I do now."

Beyond these very personal feelings of closeness and camaraderie the team members cited other practical advantages to the team concept which job sharing had promoted. The burden of decision making and responsibility is shared. The workers commented that "You're not having to make decisions on your own" and "you've got someone else to help you out". Another explained that consultation of this sort was a commonplace event. "We do a lot of that. We'll sit down and discuss a case and say 'what would you suggest I do with this?'" Furthermore, the closeness that is promoted by the team concept has apparently encouraged the workers to explore the possibilities of joint interviews or to pass a particularly difficult case on to another worker if progress is not being made.

These practical advantages of the team concept were apparent not only to the workers themselves but also to their supervisor. He stated that the dynamics of teamwork had had a positive effect on the group as a whole. "I think they're being more creative. I sense when they do come and see me and they have talked things out they're sort of at a more creative level." Apparently, job sharing has resulted in workers who are more closely connected and this in turn has had further positive effects.

Improved Physical and Mental Health

A second major advantage which was mentioned by all four workers was the extra time that the three or four day work week allowed for rest and relaxation. All workers felt that this respite had contributed to their own improved physical and mental health. One worker in particular, who had been in failing health, would undoubtedly have been forced to resign simply because she would have been physically unable to continue to work full time. The three day week allowed her to combine her necessary rest periods with part time work. The physical and mental conditions of the other workers were not as critical but one did note that under the five day a week grind, "at times I almost became overwhelmed." Under the part time plan all readily admitted that they feel better. One said, "I find it easier to be just involved for four days." Another suggested "it makes a difference knowing that you have those three days off." A third commented that the extra day of rest "gives me an extra day to catch my breath and come back refreshed and renewed and very eager." The fourth worker noted these same advantages and felt that they had extended to her private life, "I like my job a lot better. I'm easier to live with I think than I was then."

Many of the other hospital staff commented on the job sharer's increased enthusiasm, which perhaps reflects improved physical and mental health. "I do think that they're quite enthused when they come back after having a day off," and "they always seem happy" were typical comments. Their social work supervisor appreciated the fact

that they appeared to him to be better rested. "Certainly the mental and physical health of my staff are important because if they're not around here then I've got problems. If I don't worry about it in terms of them as people then I have to worry about it as a supervisor. If they're away it makes my job harder. What they can bring to the job, I think is a hell of a lot more when they've got that rest."

Increased Opportunity for Alternative Activities

From this point a third major advantage for the individual emerged. One job sharer suggested that the part time job sharing approach "gives me a chance to get into other things without being totally exhausted all the time." It appears that more non-work time has increased the opportunity to pursue other interests. These "other things" in this instance have ranged from professionally related considerations to family responsibilities to personal leisure time activities.

One worker commented that she simply enjoyed the extra time away from the hospital to reflect on her work and to consider ways in which her service could be improved. Others have used the additional time to read about professionally related matters and/or to take further courses through either the School of Social Work or other institutions of higher learning.

Most of the workers commented that part time work allowed them to complete their paid work and attend to home and family responsibilities. Another commented in particular that she was enjoying the opportunity to keep her house in order, look after her family and see

her growing children on a more regular basis. Further, this has meant that "my life is more ordered. The family's life is more ordered because of that one day." A younger worker speculated that, "if I ever decide to have kids it's better to have a part time job. I can continue having a job as well as stay home part of the time."

Not surprisingly, all of the workers stated that they began to increase their participation in outside, alternative activities. One took another part time job, less for financial reasons but more for the opportunity for a change of pace. Others became involved in volunteer work, exercise and swimming classes, as well as visiting family and friends.

The opportunity that part time work such as job sharing affords for alternative activity seems quite apparent. However, one worker candidly admitted that "I was a bit threatened over how I was going to handle the three day program," feeling that she enjoyed a full day's work and might not be able to cope with part time work and increased time off. However, to her surprise, she found that she made the transition quite easily and is "really enjoying" the increased opportunities that she now has available. The extra day off has allowed her to pursue and develop interests in other areas which have contributed to her overall development. All four workers stated that having "more spare time for myself" was perhaps the most important factor in the decision to pursue the job sharing option.

Potential Disadvantages

In contrast to the apparent advantages of job sharing, there are a number of concerns about the model. As one supervisor suggested warily, "Well, if it's as good as all that, why don't we fire all the full time people and take on twice as many half time people." Certainly there may be difficulties with communication, continuity, the emphasis on outpatients leading to a reduction in service in other areas, supervision and administration, reduced salary and benefits for the job sharers and perhaps other difficulties. Again it was difficult to examine these concerns in a rigorous manner due to the shortage of information and the lack of a comparative example. As a result, the approach taken was to interview the social workers and the other staff at the Women's Centre individually. This method was supplemented by as much comparative material as possible.

Communication

The most serious concern cited in the literature about job sharing relates to communication. The job sharing social workers indicated that they were well aware of the potential problems which failed or missed communication through part time shared work might create. One emphasized that "There has to be continual communication between the four of us or this system would never work." Another pointed out that, "we have to be on our toes always. We're not functioning as individuals, we're functioning as a team. When we get a bit of information we have to share it with the team. It's a different kind of approach."

The workers maintain that their awareness that this "different kind of approach" is needed has meant that communication has not been a significant problem. One or two admitted that, at first, communication and sharing of information amongst the four of them had been difficult. Some workers neglected to pass on necessary information to their colleagues and this caused some initial upset. This problem was dealt with immediately and in a straightforward fashion. Since that time all the workers have endeavoured to make certain that messages are relayed promptly and accurately.

The workers have apparently created a number of devices to ensure that the flow of information is maintained. First, they are all together at the hospital for two full days of every week and, therefore, there is plenty of opportunity to meet informally as they work in the same general area and have coffee breaks and lunch together. In addition, they all meet every Thursday morning to discuss recent developments and to ensure that all are aware of current situations. At this point "things are brought to a head before they're out of proportion." One worker suggested that this regular meeting was the most crucial element in ensuring good communication and recommended that it be a fundamental component for anyone considering job sharing. "If it's part of your regular agenda, to sit down and say, 'This happened, how can we change it,' then it's not threatening to any one individual."

Each worker also maintains notes, using the Subjective-Objective-Assessment-Plan (S.O.A.P.) system of recording in the patient's medical. These notes ensure that accurate, up-to-date

information is always on hand. "I doubt whether it [job sharing] would work if we didn't have the S.O.A.P.ing system in the hospital." This note making exercise apparently has not meant that much more work. "It just means you make an extra effort to make them that much clearer and that much better. The notes are supposed to be done anyway."

In addition, each worker keeps a card file on each patient which the others may refer to in the event of emergency and absence by the regular worker. Each worker also leaves notes on the desk of an absent colleague if she has an important message to convey. Each worker made special mention of the office secretary, who has assumed responsibility for ensuring that all messages are relayed and that all emergencies are covered. As a last resort, if further information is required and these regular channels of communication have not provided sufficient information the workers do not hesitate to telephone another at home on her day off.

A more objective source of information about communication and communication problems may be other workers who have had to deal with the part time job sharers. When asked if they had been able to adjust to the part time schedule of the job sharers and to communicate effectively and efficiently with them, each responded positively. The staff in the outpatient department commented that it was relatively - easy to adjust to the part time schedule and to make contact on the appropriate days. Another observed that insofar as communication has been concerned, "I think they've made an exceptional effort to try and avoid this problem." None could recall any incidents of missed, con-

fused or failed communication with these workers.

Other workers, including those from other agencies, reported similar experiences. They admitted that they had made small adjustments but had not experienced any problems. One stated simply that, when calling, "if I can't reach one I just go for another," suggesting that responsibilities are easily transferred and shared. A second noted that having full time workers does not necessarily ease communication difficulties. "You're not always going to get the person. With other agencies you have to leave a message and they call you back. So it's not that much different. And they may have the same problem reaching us because there are times when we're out and may not return until after their office is closed." A supervisor at the Health Sciences Centre noted, in a similar vein, that "I have no difficulty reaching the people at the Women's Centre. I have no greater difficulty than I have reaching anyone else. Sometimes I wonder about why it is I can't reach somebody who is supposed to be here, on site, eight hours a day, five days a week."

A third source, the report of the Staff Audit Committee of the Department of Social Work at the Health Sciences Centre entitled "Social Work Recording in the Patient's Medical Record," commented on the effectiveness of written communication by all Health Sciences Centre social workers, including the job sharers. The report noted that the presence of social work recording was found in 70% of the Department's charts and 72% of the Women's Centre charts; the S.O.A.P. format was used in 70% of the Department's records and 72% of the

Women's Centre's records; the problem was identified on 90% of the social work charts, 94% of the Women's Centre charts; and the date and signature of the social worker involved was included on all charts familiar to the Department and to the Women's Centre staff. These percentages suggest that the social workers at the Women's Centre are doing well, relative to their peers, in recording their contacts with patients.

Of course, it is possible that the need for more communication requires extra time on the part of the staff, but this suggestion is difficult to verify. However, one worker stated that, "I don't see extra communication as a disadvantage." Instead, she observed that the need for extra communication had brought her a closer, more satisfying relationship with her co-workers and had forced her to maintain accurate records, an unappealing but necessary task. So, at least for this one worker, communication and the extra time that it might require had moved from a potential disadvantage to an actual advantage.

Continuity of Care

The second major concern which has been voiced is that job sharing will lead to some patient or client sharing and thus some disruption or lack of continuity in service delivery. A patient who has been dealing with one social worker may be forced to deal with a different person in the event of the absence of the regular social worker. This is particularly dangerous in a social work relationship where intimacy is developed only after a series of contacts.

The social workers involved in the project maintain that the

sharing of clients, or clients dealing with more than one worker, does not happen very often. The workers pointed out that they are away from the hospital for only one full day a week and this is not long enough to create a serious problem. Usually problems are anticipated and planned for in advance. On the other hand problems at the Women's Centre are rarely serious enough that they can't be postponed for a day or so until the regular worker returns. One worker suggested simply that "If they [patients] know you're not here nothing really crops up," a comment which perhaps brings into question the need for social workers.

On occasion though, an unexpected crisis does arise and others are required to fill in for an absent colleague. The workers all indicated that they felt comfortable with this responsibility and had not experienced any problem. "We're all aware of what all the other people do and certainly how to handle the other jobs so that if we're called upon to do it then we can." They indicated that as a last resort they felt quite comfortable calling a colleague at home in order to ensure that the appropriate plan is followed.

From conversations with the workers themselves and other know-ledgeable staff both within and outside the hospital, there appears to be no evidence of patient dissatisfaction. One worker suggested, in her experience with clients, "I don't think that it's made that great a difference to them." A nurse in the outpatient department (which presumably would be the area most affected by discontinuity) commented that, "I haven't had any negative feedback from clients in terms of

the social work input -- the medical input is a different story."

Both commented that patients will occasionally telephone or drop

in and, finding that their regular worker is not in, simply telephone

or return another day.

A few staff members though did feel that the job sharing

approach had meant some disruption in service. One commented that

"total continuity isn't there." Another suggested that the problem

of continuity did come up on occasion and that some improvisation

had been required. Neither could recall any specific examples

though.

The great majority of workers associated with the Women's Centre

social workers felt that job sharing had not created any problems.

They reported that absences by one or two are handled well by the

remaining social workers. Comments such as "there's always some-

body else [to call upon] , "if she's not in then one of the other social

workers will take over" and "I've always felt I could contact some

of the other girls in the department that are on. It certainly hasn't

caused us any inconvenience" were commonplace. Most were impressed

with the way in which absences are handled. "They're pretty good

about sharing their own roles and cases so that the next worker would

just pick up wherever she left off." "I'm really impressed with the

way things are shared. It's almost as if the person going off clued in

the person coming on." Another commented admiringly, "I'm really quite

amazed that they can do it as well as they can because I don't think

I could ... They seem to be able to pick up on the other's jobs so easily."

Reduced Service

A third potential problem, peculiar to this example, is the possible reduction in service on the inpatient wards of the Women's Centre. It is conceivable that the decision to increase service in the outpatient department, with no more available working hours, would result in a corresponding decrease in service on the inpatient wards. With this concern in mind, the social workers and inpatient staff were questioned closely.

The job sharers reported that they saw the shift in services as merely a wise redeployment of available services. They had shed some extraneous inpatient responsibilities in favour of some much needed outpatient services. In their opinion, the inpatient department had lost time and services which were not really required while the outpatient department had gained significantly.

Interestingly enough, most of the inpatient staff appeared to agree with this assessment. One did complain though that the decreased emphasis on inpatients had created a problem. "We've found since they've gone to a shorter number of days in the week that frequently when we call the other girls are busy .... There is a longer waiting period usually." Most, however, did not feel this way. A few head nurses were not even aware that the social workers had reduced their weekly working hours. Most did not feel that the reduction was problematic. "I really haven't noticed that the new working module

that they're working with over the past year has made any

difference ...." "I don't really think their changing hours has

affected us in any way." All inpatient staff though, including the

single complainant, were well satisfied with the social work input.

"We've never had a problem really. If we need anyone we just call

down and someone will always come. They've never said they're too

busy or they couldn't see a patient." Most inpatient staff rated the

social work service as "above average" or "excellent."

Administration

Another major concern is that job sharing places a considerable

strain on administrative and supervisory personnel, particularly in

terms of communication, accountability, worker commitment and internal

dissension. In order to determine whether this has in fact occurred,

the administrative and supervisory staff within the department of

social work were consulted.

Communication with the job sharers has required some adjustment

on the part of the supervisors. The administrators in the department

have found some difficulty in scheduling staff and staff subcommittee

meetings, simply because all the job sharers are on site for only two

days of the week. Their direct supervisor has found it necessary to

schedule regular weekly meetings with the four job sharers, a device

which he uses anyway for all the workers under his charge. On the

whole, these adjustments to facilitate communication are seen as minor

because the advantages outweigh any minor adjustments which must be

made. The supervisor testified that the model "made my job easier

because I have a team that works well, four people who work well

together and judging by the feedback I get, (not from them), the

service they're providing is well thought of."

A second, oft expressed concern in the literature about job

sharing, is that accountability is reduced because of the loss of the

one worker - one job concept. In effect, it is feared that sharing

responsibilities makes it more difficult to determine responsibility

for particular clients. The workers themselves don't view this as

a problem, maintaining that they still have core responsibilities and

that, while others may cover temporarily, they are still responsible

for that patient or client. Their supervisor concurs. "I would hold

each one of them accountable for X number of clients no matter what

went wrong, no matter who else was involved. So there's total

accountability." Thus, in this situation at least, there is no great

concern over loss of the one woman - one job concept.

In addition, some commentators have suggested that job sharing,

like other part time work, is an indication that workers are not really

serious about their work and that they lack commitment. The staff at

the Women's Centre and in the Department of Social Work reacted quickly

to this charge. The workers involved were offended and suggested that,

on the contrary, they felt more committed to the model in particular

and to the effective performance of their jobs in general. Supervisory

staff also reacted quickly. One stated that "the fact that you don't

want to work full time doesn't mean that you're not committed. I think

that's baloney. I don't buy it." Another made specific reference to

the group and emphasized that "we're fortunate to have very, very
committed people over there" and dismissed any suggestion that they
weren't serious about their work. A third denied the suggestion that
commitment was lacking. "I would never attribute that reason to this
group of four at all. I mean you can tell by the way they work."
Overall, the concern about commitment was not supported.

The suggestion that job sharing might lead to some resentment
among other staff because the same opportunity was not afforded them
was also raised. One supervisor confidently stated that, "I've never
heard anything .... If there was that kind of stuff going on I'd be
able to pick it up." To support this view, other hospital workers
associated with the job sharing workers denied any ill-feeling. One
admitted that, "I think it's a great idea. I wish we could do it,"
but another reflected the views of all when she said, "I think they're
really lucky to work four days. I certainly am envious but I don't
resent it all." A third admitted some jealousy but did not feel any
resentment because the job sharers had made a choice to exchange money
for more leisure time. It was a choice she and most others did not
feel they could afford.

Cost

Another widely cited disadvantage of job sharing is that it is
more costly and more difficult to administer the standard employee
benefits. In order to check this concern those with responsibility
for calculating benefits were sought out and their opinions noted.

First, the benefit package for job sharers is apparently not

any more expensive for the hospital. Certain benefits (salary, vacation and sick time) are offered on a pro-rated basis, according to the amount of time worked and other benefits (pension plan and insurance benefits) are forfeited by the employees. Thus increased costs are not incurred.

Secondly, every individual encountered stated that the advent of job sharing had not made any difference whatsoever to them in administrative terms. The secretarial staff reported that it was "not difficult" to adjust and calculate part time hours, although one admitted that it would be much more difficult if every worker in the department moved to part time status. Staff in the manpower and financial services sections indicated that job sharing had not required any special arrangements. "As far as we're concerned in our department it's virtually the same as any part time person working anywhere else in the organization. We don't see it as a problem at all." The financial services supervisor suggested that, "It makes no difference whether you're calculating something for a part time or a full time person. It's just going to be less hours for a part time person." Indeed all the administrative people involved with the job sharers reported that job sharing had not presented any special administrative problems.

Reduced Salary and Benefits

Another obvious disadvantage to job sharing, indeed to all part time work, is the reduced salary and benefits which the worker receives. While this is an important drawback the individuals involved in the

experiment do not consider it a problem.

Each social worker was questioned separately about the reduction in salary. All had the same reaction. One reported that the salary loss "doesn't bother me. I'd much rather have the program the way it is than have the additional salary." A second echoed this comment. "The money is so minor balanced with getting a day off." A third admitted that, "I miss the salary," but in the next breath added, "but the way I've been feeling it's not that much of a sacrifice." The fourth was more philosophical but essentially agreed with the others. "I'm making just as much now as I did when we first went on it with all the salary increases and everything. So it hasn't really made such a major difference." In summary they all agreed that "It would be nice to have the full salary but I don't think the extra day is worth it." Each worker was quite willing to exchange a portion of her salary for the other benefits offered by job sharing.

Similarly the reduced or lost benefits did not seem to be of much concern to the workers. The reduced number of vacation days and sick time was not perceived as a real loss. As a full time worker each received twenty days or four weeks while now each receives sixteen days, but added to the regular day off equals the same four weeks. The loss of pension plan contributions affected two workers but they seemed unconcerned. Both transferred to RRSP programs. Similarly the loss of insurance coverage "was too bad ... but it wasn't the end of the world."

Other Disadvantages

Other concerns about job sharing have been brought forward
through the course of this investigation and through discussions
with various individuals. Two of the more interesting observations
were made by the supervisor of the workers at the Women's Centre.
First, while clearly impressed with the job sharing model, he
expressed concern that the group has been less willing to reveal
problems and discuss possible solutions because of their investment
in and commitment to the model. "The four of them individually
don't hesitate to come to see me; collectively it's different."
Further he mused, "I guess they're always worrying that their team
and the high feeling that I have ... for it may come down a notch
or two if they come over with a problem. It's almost like the team
can't handle it ... or the team has a problem and that's going to say
... the team's not working well. And I'm trying to say to them,
'That doesn't make sense to me.'" As a result "I have a sense that
there's just a wee bit more of that sense of defensiveness, wanting
to work their own thing out before they come and see me. They'll still
come and they'll still raise their issue or their problem but I sense
it's with a lot more thought. And maybe that's not so bad ...."
Generally, the supervisor felt that this occasional reluctance to
discuss problems openly and frankly inhibits honest exchange.

A second observation referred to the emerging team concept.
While the concept generally has merit, it may cause problems if a
natural leader emerges and the other three recede into the background.

"If it gets to the point where the other three begin to lose confidence in themselves and rely on what they think is a more articulate person" problems may arise. Again he suggested that this is a tendency which must be guarded against.

Another concern, perhaps unique to this setting, was raised by a number of people including the job sharers themselves. Apparently the increase in the number of staff people has not led to a corresponding increase in office space. As a result, one office is shared by two social workers and conditions are generally crowded. All spoke of the problems of sharing one desk and one telephone and finding interview space. The shortage of space is a problem that cannot be easily resolved.

Two other complaints were raised by nurses in the outpatient department although they admitted that they may be only partly related to job sharing. Most of the nurses complained that the social workers attended too many meetings. They admitted that the workers indicated they could be called from the meeting but complained that often by the time they returned to the department patients, grown tired of waiting, had already left. In addition the nursing staff complained that the social worker's notes in the patient charts were a bit lengthy. They acknowledged that it was difficult to briefly note all the necessary information but they hoped that they could be condensed somewhat. As one nurse said, "If you are in a hurry you may not read that note as carefully as what you would" or indeed if the notes are too lengthy they may be passed over altogether.

A final disadvantage to job sharing has not been experienced
by this group as yet but undoubtedly will be in the future. Sharing of
jobs unquestionably makes it more difficult to replace an individual
who for one reason or another leaves his/her job shared position.
Hiring is more difficult because it is essential that the new person
fit in well with his/her new colleagues. Further, the loss of one
worker, according to the terms of the written agreement places the
part time status of the others in jeopardy. "[A] review of the
Agreement will be undertaken in the event that ... a staff member,
who is part of the job sharing plan, terminates employment with the
Department of Social Work, or transfers out of the plan."

Every worker and supervisor who was interviewed mentioned that
this future occurrence concerned them as a potential problem with job
sharing. Most, in fact, cited this as the only disadvantage to job
sharing they could identify. When pressed to name a problem, one
replied that, "I think a potential disadvantage could be if, for one
reason or another, one of the social workers discontinued her employ-
ment here. I think then there would have to be a very, very close look
at who was to replace her if the job sharing was to continue. I think
it would have to be somebody who would fit in well ...." Another was
even more concerned. "I'd really be worried about somebody with a
different personality and how it would work out in this area."

While the problem of trying to adjust to a new worker is readily
apparent, the solution is difficult. The workers admit that they are,
unconsciously perhaps, on the lookout for potential candidates for any

vacancy that may arise. Of course, they are hopeful of being included in any interviewing and selection process to hire a new worker. "It's very important that it be someone we all agreed on."

Their supervisor recognizes these feelings and promises that "if one of them quit I would certainly involve the other three in the interviewing process. That would be an absolute must. There's no way that I would do the interviewing and then the selection .... I would certainly involve all of them and not just one or two of them ...."

But the difficulty of trying to match a new employee with an established group must be acknowledged. "It's always a gamble when you do it that way. It [this model] happened initially ... it just evolved, it just happened. Whether you can have it happen by now selecting someone to fit into it, I'm not sure. I suspect that it would be more difficult." As the supervisor cautioned, "I'm not so sure how successful or how effective the team would be with a new person in it."

In this chapter the essential results from the investigation of the four worker job sharing model have been presented. Clearly there are advantages and disadvantages and considerable evidence for each position. In the next chapter the merits will be weighed and a general conclusion about the model reached.

CHAPTER VI

DISCUSSION

The evidence on the four worker job sharing model as employed by the social workers at the Women's Centre is at hand. Now it is necessary to review that evidence and try to come to some conclusions about the strength and viability of the job sharing model.

On the whole the advantages expected from job sharing appear to have been realized. The four worker job sharing model was implemented primarily to permit a better distribution of social work womanpower by increasing the flexibility in staff scheduling. More specifically it allowed a greater emphasis on the outpatient department, an important advance because the department is viewed as the first, and perhaps the most critical, point of contact. Interviews with staff, and more importantly, the strong evidence from the review of patient charts, suggests that the quantity, appropriateness and timeliness of outpatient social work service was improved. The social workers apparently saw more patients and, on the whole, saw them earlier in their pregnancy. While one can only speculate on the quality of service, the increased number of contacts and earlier point of engagement may mean superior social work service.

However, this conclusion should be tempered by several cautionary notes. First, there is evidence to suggest that, because concern was expressed about outpatient pre-natal care, increased

emphasis was placed on this area by the medical staff, by the social workers and by other agencies. This emphasis may be contributing to the improvement in outpatient services. Secondly, the interviews were, of course, subjective impressions. Social workers, staff and external workers are not in a real position to make completely accurate service assessments. Finally, the patient records may not be reliable due to inadequate or erratic record keeping methods.

However, it seems reasonable to conclude that the job sharing pattern led to increased and improved social work service in the outpatient department. More women are being seen and they are being seen earlier in their pregnancy. It is also possible that they are becoming known to the workers in greater depth and are being referred to other agencies at an earlier point in time.

At the same time there is little evidence that increased emphasis on the outpatient department led to a deterioration in inpatient services. Most inpatient staff commented that social work service remained good. Overall inpatient workers appear to be well satisfied that the quantity and quality of social work service to their wards has been maintained. The fact that workers are now spending more time in the outpatient department has not been a problem. In fact, one nurse saw this as an advantage. She explained that because these social workers have broadened their experience they have helped her to better understand the cycle of care in the hospital. The flexibility of the job sharing model has improved service in the outpatient department but has not affected service in the rest of the

Women's Centre.

The model was also expected to improve the delivery of service by permitting an extension of service by the Women's Centre workers to the Children's Centre. Evidence confirmed that this service has been delivered in a satisfactory manner. However, the rationale for using job sharing in this way is questioned by the result that the extension of service to the Children's Centre was discontinued and responsibility transferred to another unit.

Job sharing, because of its flexibility and part time nature was also expected to increase the job satisfaction of workers. Although the value of heightened employee satisfaction is unclear and the measurement devices equally uncertain, it appears that this was accomplished. Interviews with staff suggest that the social workers at the Women's Centre are more satisfied with their work than they have been in the past. The comprehensive Job Descriptive Index indicates rather strongly that the job sharers are significantly more satisfied with more important elements of their work than are other non-job sharing social workers in similar hospital settings.

It was anticipated that the four job sharing social workers at the Women's Centre would be more satisfied than other workers in terms of their satisfaction with work, supervision and co-workers. One might speculate that the job sharers would be more satisfied because their work allows them more flexibility and forces them, of necessity, to form closer bonds with their supervisors and fellow workers. However it was a surprise to learn that the job sharers, despite their part time status, did not score significantly lower

than the rest on the "Pay" and "Promotion" subscales. This is note-
worthy because part time work is generally regarded as offering lower
levels of pay and poorer promotional opportunities.

This study also suggests that job sharing at the Women's Centre
contributed to reduced absenteeism and turnover among the social work
staff. This, in turn, benefited the organization in terms of
efficiency and continuity. Other apparent advantages, as suggested
by the participants in the project, include an improved image for
social work within the hospital and an expanded pool of actual and
potential employees.

Several advantages have been felt by the job sharers themselves.
These include application of the team concept (allowing for sharing
of decision making and responsibility), improved physical and mental
health and increased opportunities to pursue other interests outside
of work.

The possible disadvantages of job sharing seem largely to have
been anticipated by the planners of the four worker job sharing model.
The major concerns focused on the potentially disastrous effects of
failed communication and discontinuity in service. While communication
was identified clearly as a possible problem with job sharing, it
appears that the job sharers recognized this potential and worked
hard to guard against it. Comments from a large number and variety of
persons connected to the job sharers suggest that these concerns have
not emerged as actual problems. Most applauded the efforts of the
job sharers to ensure prompt and accurate communication. As a result,
there does not seem to be any evidence, from any source, of gaps in

communication or defects in service.

Lack of continuity also could be a problem with job sharing. However, it does not appear to be a problem in this particular situation. A few staff indicated that the part time schedule of the job sharers required some adjustment in their everyday service. Most indicated though, that there had been no problem at all and no disruption in service. The less than radical nature of the job sharing model and the commitment and concern of the workers involved have been key factors. Of course, patients may not complain about disruptions in service for another simple reason. As one worker observed, somewhat cynically, "So many of the people that end up seeing any kind of social service agency or agent have already been bounced around generally through the system. Even for myself as a worker now, when I'm calling an agency on behalf of a client I'm bounced around so much that it begins to be a rite of passage." But, for whatever reason, lack of continuity in service does not seem to be a major problem.

Disadvantages to the organization, in terms of supervisory and administrative difficulties, have not materialized. Interviews with all the supervisors and administrators connected to the project revealed little or no concern with communication, accountability, lack of commitment, resentment among other staff or payroll adjustments. Job sharing may create some concerns for supervisory personnel who feel it is necessary to tightly control their staff. In this particular situation though, the supervisory personnel felt that the

small adjustments which job sharing required were a small price to pay for improved service and improved job satisfaction for workers.

There are two further disadvantages which must be mentioned. Certainly the lost salary and benefits suffered by the job sharers is an undeniable and unavoidable problem. Each worker had to assess whether the advantages promised by job sharing outweighed this disadvantage. The workers decided that lost salary and benefits did not outweigh the benefits. Secondly, there may be some future difficulty in hiring new staff to replace the current job sharers as they leave. However within this project this appears to have been anticipated to a certain degree and some plans made for hiring new staff. The job sharers remain watchful for candidates for positions on staff and their supervisor has agreed to involve them in any future interview and selection process.

Overall then the evidence gleaned during this research suggests rather strongly that the job sharing model has achieved its objectives. Furthermore the potential difficulties, by and large, have not materialized.

The conclusion that job sharing has had a positive effect is clearly supported by those involved with the project. The workers themselves are convinced of the soundness of the model. One judged that "it's an excellent approach for this particular setting and I think it's working very well." Another assessed the situation in even more expansive terms. "I still think it is so great I wonder when the bubble is going to burst. I just can't believe my luck

because it's an ideal, perfect job. I love it."

These workers sound even more committed to their model when asked to consider a return to their traditional work pattern. "I don't think that I would ever go back to a full time job unless I absolutely had to." "I think actually once you're working in it it would be very hard to go back to the other." "I think I'd find it really difficult working five days a week."

But testimony on the strength of the four worker model also comes from other sources. The nurses in the outpatient department, who have perhaps been in the best position to assess the changes caused by job sharing, have noted that services have improved and are of high quality. One suggested that the Women's Centre social workers "do a really good job. I think our patients probably get about the best kind of care as far as the social aspect goes." Nurses in other parts of the hospital and workers in other agencies echoed these comments. They suggest either that services have remained at the same high level or have improved under the job sharing model. The following comments are typical. "I have no complaint at all. I'm very satisfied"; "They're really very good"; "In my opinion they do an excellent job"; "I think it's one of the best in the city."

Thus, taking into account the limitations of the study, and weighing the apparent advantages of job sharing with the potential disadvantages, it appears that this four worker job sharing plan has been a success. The model has, by and large, achieved its goals and the participants have tried to anticipate and minimize the potential problems.

CHAPTER VII

CONCLUSION

This essay has been about work and the search for joy in the
workplace. More specifically, it has been about one innovative
attempt to change the structure and the consequences of work. In
this final section the evidence from the preceding sections on the
importance of work, the changes in the structures of work as well as
the emergence and apparent success of the four worker job sharing
model will be reviewed. Beyond this, the reasons for the success
of the model will be briefly considered and, finally, the
implications of this study will be noted.

Work is clearly a fundamental human need and activity. Through
work man not only sustains his own life but also shapes and defines
his existence. However, while this basic conception is well
established, the basic structure of work is changing. Cultural, social
and demographic forces have combined to force changes in the work-
place. The result has been the introduction of structural challenges
such as job enlargement, job enrichment and industrial democracy and
scheduling alternatives such as the compressed work week, flexitime
and permanent part time work. Research has begun to suggest that
these new approaches produce a variety of benefits including improved
production, greater job satisfaction among employees and other

advantages.

Clearly the four worker job sharing model designed by the social workers at the Women's Centre is a good example of these new approaches. In this situation the workers made a concerted attempt to make their workplace more responsive to production and personal requirements. Specifically, they created a flexible scheduling pattern which allowed for more timely service and enabled each worker to satisfy her own personal needs and objectives. In addition, they tried to anticipate and respond to the potential difficulties with job sharing. Overall, the job sharing experiment has been a success.

However, the reasons for the success of the model are open to speculation. It would appear though that the characteristics of the four women who first planned and now are operating the model are highly important. First, each one is a competent, dedicated social worker. One supervisor called them "pioneers in social work excellence at the Centre." But more importantly, they are a closely knit and compatible group, which is reflected in their actions as well as their comments. They are often found together and could be viewed as friends as well as co-workers. One provided this unsolicited evaluation of her co-workers "I like everybody here. I think that makes a difference too -- that you really do care about the people that you work with." Another concluded with reference to her colleagues, "it's just really nice to come here."

In addition, these workers are committed not only to each other

but to the success of the job sharing model that they have devised.

In the view of their supervisor,

> I think it's working because they invested a lot. It
> wasn't just a question of sitting down and thinking of
> something, a way to get a day off. There's an investment
> in the sense that two of them had to give up their pension
> plans. . . . . So it's not just a question of they saw
> an easy way out or they saw an easy thing that they wanted
> to take advantage of. They, financially and in terms of
> some degree of security (i.e. pension) gave up something.
> That says to me it goes beyond any kind of thinking that
> we simply want a day off, we want an easier job.

Another outside observer suggests that "If they weren't that committed

to the program and to each other then I'm not sure it would work as

well." Certainly the success of the four worker job sharing model

can be credited primarily to the efforts of the four job sharers.

A second key factor in the model's success is the quality of

the people in administrative and supervisory positions within the

hospital. They have created an environment which encourages innovation

and accepts new ideas such as job sharing. The philosophy of the

Director of Social Work established a tone for the department.

"I've always felt for many years that one of the things that is needed

in social work generally is freedom to try new ideas because if you

don't have that, God help you. And as long as the protections are

built in and it doesn't seem that it's going to do any great damage to

anybody then I think it's worth trying. As long as you can build

in that if it doesn't work you can 'can it' rather quickly . . .

I'm willing to try."

The social work supervisor responsible for the Women's Centre

identified by one observer as "very open, very concerned about his

staff" echoes this philosophy. "My reaction to any staff member

coming to me and saying 'Hey, I've got an idea but I haven't really

figured it out yet or if I come up with something . . . .'   I'm

always open to that. I'll never pooh-pooh it and I'll never say,

'We've been doing it for three years, you're not doing it!' I've

never done that in any job and I never will." So when the workers

suggested job sharing, their supervisor responded positively and

encouraged them to develop it further. The fact that individuals

within the department responded and encouraged the workers to proceed

undoubtedly aided in its development and eventual success.

Other factors may have had some bearing on the success of the

plan too. The fact that this job sharing model is a relatively

mild version of the standard half time job sharing arrangement

may have been to its advantage. This particular job sharing model

requires most of the workers to work three-quarters of the time and

to overlap in their coverage. Other models restrict workers to

half time and may not allow for any overlapping coverage. This

model combines many of the advantages of part time work (i.e. meeting

production demands and staff needs) while easing some of the strains

of a part time arrangement, primarily communication.

In addition, the nature of the work made the plan easier to

implement. The work is, by and large, not crisis oriented. Instant

communication and continuity are not usually required. Patients

generally are able to wait until their regular social worker returns.
Further, the work of all four workers is similar, so sharing of tasks
can take place. One can fill in for another and remain confident
that her replacement has the necessary knowledge and skills to complete
the task. Certainly, this similarity in work has some bearing on the
success of the model.

This general review of work and particular examination of
a job sharing model suggests a number of conclusions. First,
experiments such as the four worker job sharing model indicates that
changes in the workplace are indeed taking place. Secondly, the
success of the model suggests that changes will continue to occur.

For many the change is long overdue. "The world of work
remains in stark contrast to the world away from work. Particularly
today society is in ferment. Self-fulfillment and a new attitude
toward nature and self are emerging -- and not only among youth or
women. Society itself has become more tolerant and permissive
without any apparent shock to its growth or survival. Only the work-
place remains unchanged in a changing world."[64]

What these inevitable changes will create, other than
establishing a workplace which "is not likely to resemble the old
grindstone so familiar to those of us who grew up stuck to it,"[65]

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[64]Yankelovich, "The Meaning of Work," p. 47.

[65]Ibid.

is unclear. What is clear is that while work will endure it is not likely to remain unalterably the same.

Furthermore, this study indicates that structural changes, particularly job sharing, may work in a variety of settings. Clearly the calibre of the people involved, the work and the job sharing schedule are of some importance. On the other hand these factors may be overvalued.

Job sharing may work if there is simply a strong desire on the part of workers and employers to improve work scheduling and to raise the quality of working life. During this study one observer suggested that full time work is often based on a flimsy rationale which focuses more on historical precedent and individual needs than work realities. "It's great for the ego sometimes to think that you're valuable or you're important or you're necessary but . . . . I could say this place needs me seven days a week, twenty-four hours a day. That's bullshit. It really is." He also reacted strongly to the suggestion that the part time job sharing model could work only in certain situations. "I wonder if that's really so or whether it's part of us that somehow feels the place can't do without me . . . it's remarkable that when I'm not here for X number of days . . . the place carries on, the things get done . . . so I'm not sure whether that kind of reaction really reflects the job per se." This review suggests that job sharing may have wider possibilities than are commonly believed.

Work is a fundamental part of human existence. This study has suggested though that the antiquated structures of work are being successfully changed, and further, that the changes which are occurring may have wide applicability. Albert Camus once asserted that, "without work all life goes rotten. But when work is soulless it stifles and dies." The results from the four worker job sharing experiment suggest that this aphorism must be true and that now, more than ever, meaningful changes in the workplace can and must be allowed to occur.

APPENDIX

Please allow me to introduce myself. My name is Patrick Harrison and I am a student in the Master's program at the School of Social Work, University of Manitoba.

In order to complete the requirements for my degree, I am conducting a case study of the job sharing model that is employed by the social workers at the Women's Centre of the Health Sciences Centre. As a part of that study, I am trying to establish the general level of job satisfaction among hospital-based social workers in the City of Winnipeg. Therefore I would like to ask you to take just a few minutes to read and then complete the enclosed Job Descriptive Index, which is a standardized scale for measuring job satisfaction.

Although the Director of Social Work at your hospital is aware of this survey, the results are strictly for use in this study and will not be seen by your administrators, supervisors or co-workers. You may be assured that you cannot be identified and that your answers are completely anonymous. (The number at the top of the page is purely for research identification purposes).

Please complete the Index and demographic sheet, and return them by Friday, June 13, 1980 in the enclosed stamped and addressed envelope. If you have any questions or concerns please telephone me at   .

Thank you for your time and anticipated cooperation.

Yours truly,

Patrick Harrison.

JOB DESCRIPTIVE INDEX

This index considers five areas of your job: the type of work, the pay, the opportunities for promotion, the supervision, and the co-workers on the job. Under each area there is a list of adjectives or short phrases and you are asked to indicate whether each adjective or phrase applies, most of the time, to the particular facet of your job. For example, under "Work", if an adjective or phrase describes your work, please write "Y" (for Yes) beside the word. If the adjective or phrase does not describe your work, please write "N" (for No) beside the word. If you cannot decide, enter a question mark (?). Please complete all five areas.

I WORK

_____ Fascinating

_____ Routine

_____ Satsifying

_____ Boring

_____ Good

_____ Creative

_____ Respected

_____ Hot

_____ Pleasant

_____ Useful

_____ Tiresome

_____ Healthful

_____ Challenging

_____ On your feet

_____ Frustrating

_____ Simple

_____ Endless

_____ Gives sense of accomplishment

II PAY

_____ Income adequate for normal expenses

_____ Satisfactory profit sharing

_____ Barely live on income

_____ Bad

_____ Income provides luxuries

_____ Insecure

_____ Less than I deserve

_____ Highly paid

_____ Underpaid

III PROMOTIONS

_____ Good opportunity for advancement

_____ Opportunity somewhat limited

_____ Promotion on ability

_____ Dead-end job

_____ Good chance for promotion

_____ Unfair promotion policy

_____ Infrequent promotions

_____ Regular promotions

_____ Fairly good chance for promotion

IV SUPERVISION

_____ Asks my advice

_____ Hard to please

_____ Impolite

_____ Praises good work

_____ Tactful

_____ Influential

_____ Up-to-date

_____ Doesn't supervise enough

_____ Quick tempered

_____ Tells me where I stand

_____ Annoying

_____ Stubborn

_____ Knows job well

_____ Bad

_____ Intelligent

_____ Leaves me on my own

_____ Lazy

_____ Around when needed

V CO-WORKERS

_____ Stimulating

_____ Boring

_____ Slow

_____ Ambitious

_____ Stupid

_____ Responsible

_____ Fast

_____ Intelligent

_____ Easy to make enemies

_____ Talk too much

_____ Smart

_____ Lazy

_____ Unpleasant

_____ No privacy

_____ Active

_____ Narrow interests

_____ Loyal

_____ Hard to meet

Please complete the following demographic sheet. Complete
anonymity of responses by each respondent will be strictly observed.
However it is important to gather such data as sex, year of birth,
etc. as such factors may have some relationship to the job satisfaction
data that is collected.

SEX _____ male _____ female   YEAR OF BIRTH _____

CURRENT MARITAL STATUS   NO. OF DEPENDENTS

_____ never married   _____ none

_____ married, living w/ spouse   _____ one

_____ separated   _____ two

_____ legally separated   _____ three

_____ divorced   _____ four

_____ widowed   _____ five

_____ living as married   _____ more than five

EDUCATION   YEARS OF EXPERIENCE AS A
                                      SOCIAL WORKER

_____ Bachelor of Arts   _____ one year or less

_____ Bachelor of Arts (Honors)   _____ one year one day to
                                              two years
_____ Master of Arts
                                      _____ two years one day to
_____ Bachelor of Social Work   five years

_____ Master of Social Work   _____ five years one day to
                                              ten years
_____ other (specify) _____
                                      _____ ten years one day
                                              or more

YEARS OF EXPERIENCE IN PRESENT HOSPITAL

_____ one year or less

_____ one year one day to two years

_____ two years one day to five years

_____ five years one day to ten years

_____ ten years one day or more

INCOME

_____ less than $10,000

_____ $10,000 - 14,999

_____ $15,000 - 19,999

_____ $20,000 - 24,000

_____ more than $25,000

NATURE OF PRESENT WORK
(APPROX. PERCENTAGE OF TIME
SPENT IN):

_____ % direct service

_____ % indirect service
          (supervision,
           administration)

_____ % other (specify)

          _____

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