



Working Conditions and Parents' Ability to Care for Children's Preventive Health Needs

Background

Access to preventive care, immunizations, screenings, and annual check-ups is crucial to children's healthy development. However, millions of children across the United States miss out on recommended appointments or comprehensive preventive care each year.

Parents' work schedules can make it difficult to fully meet their children's health needs. The vast majority of parents of children under 18 are working at a paid job. Yet most pediatricians' offices only offer appointments during the day. Risk of job and income loss can prevent parents who lack paid leave or flexibility from bringing children to preventive care.

Flexible work conditions may help parents better balance their work and caregiving obligations. Drawing on a national survey, this study examines the impact of four workplace policies on working parents' ability to meet their children's preventive health needs in the U.S.

Methods

Data were used from the Work, Family, and Community Nexus survey, a nationally representative survey designed to assess the impacts of working conditions on family and community well-being. The study sample is drawn from the 917 employed adults with at least one child younger than 18 years who participated in the survey.

The survey asked respondents: "How often have you been unable to meet children's preventive health care needs such as immunizations, annual check-ups, or help with daily treatments?" The response options were: never, sometimes, frequently, and always unable.

- This study collapsed the latter three options into a single "unable to meet preventive health care needs" category for the analysis.



The survey also asked respondents about their access to four workplace conditions that are likely important to working parents' abilities to meet their children's health needs: (1) ability to make or receive a phone call during work hours, (2) ability to change the time one starts or ends one's work day, (3) the ability to set one's regular schedule, and (4) having an accommodating and supportive supervisor.

- For each of these conditions, respondents were asked whether they are available: (1) without any penalty or cost at work, (2) with a small penalty or cost at work, (3) with a large penalty or cost at work, or (4) not available at all. The first two of these were collapsed into a category indicating access to the policy and the second two were collapsed into a category indicating lack of access to the policy.
- Due to survey length constraints, not all work conditions questions were asked of all respondents. In particular, the question regarding ability to make a phone call was only asked of roughly half of survey participants, reducing the sample size of the model in which it was included.

Logistic regression models were used to examine the relationship between parents' work conditions and their ability to care for children's preventive health needs. The first model included three of the four work conditions; the second included all four measures.

The models controlled for: respondent's marital status, education level, and gender, spouse's education level, household income, number of children in the household, and whether there was an adult or caregiver in the home who is not working or in school full-time who could potentially meet the child's preventive health care needs.

Findings

Being able to make a personal phone call at work was associated with a 56% reduction in the odds of being unable to meet children's preventive health needs ($p < .05$).

Working at a job that allowed for schedule adjustments was associated with more than 40% lower odds of being unable to meet preventive care needs ($p < .05$).

Discussion

This study demonstrates that flexible workplace policies can make it easier for parents to meet their children's preventive health needs. However, these policies often still require parents to make up work hours or take unpaid leave, which can place a significant burden on parents working long hours for little pay.

A more comprehensive and supportive approach would be universal access to paid leave that can be used for preventive care. The only federal policy addressing family health needs in the United States, the Family and Medical Leave Act, does not cover care for preventive or routine health needs. Likewise, though three states at the time of this study had paid family leave policies, none extended to parents obtaining preventive care for their children.

Legislation guaranteeing access to paid sick days and/or short-term leave to address and recover from an illness or to care for a family member with an illness, now in place in the state of Connecticut and several U.S. cities, is likely to be a better vehicle for covering preventive care needs. In addition, pediatricians' offices could better accommodate working parents' schedules by offering evening hours and taking patients' questions via email.

Table 1. Bivariate Analysis of Whether Parents with Access to Workplace Flexibility Policies at Little or No Cost Are Less Likely to Report Being Unable to Meet Child's Preventive Health Needs

Variable	Percentage Who Were Unable to Meet Child's Preventive Health Care Needs		
	Without Flexibility	With Flexibility	P
Can make personal calls	25.0	8.0	.000
Can adjust schedule	17.3	9.5	.001
Supervisor is accommodating	21.7	11.3	.002
Can set schedule	17.8	9.4	.001

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