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Presented at:
Ill International Community, Work and Family Conference: Innovation and Sustainability

April 16, 2009
Utrecht University, the Netherlands

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Work-Life Integration for Families with Children who have Emotional or Behavioral Disorders

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Employed Parents of Children with Disabilities

UNICEF (2006) estimates that there are 150 million children with disabilities worldwide.

Parents of children with disabilities can find work-life integration very difficult (Kagan, Lewis, & Heaton, 1998; Rosenzweig & Brennan, 2008), and require flexibility at work to meet their caregiving responsibilities.

This paper examines supports for work flexibility through a cross-national comparison of policies and programs in Germany, the USA, and Sweden.
Exceptional Caregiving

Encompasses the unusual physical, psychological, emotional, familial, time, and financial demands on parents who care for children with disabilities.

In contrast with children with typical development, children with disabilities have care needs that:
- May increase as the child grows older,
- Are more frequent and intense, and
- May result in crisis-related disruptions at work.

Frequently parents must adjust their employment or even leave the workforce altogether (Brennan & Brennan, 2005; Powers, 2003).

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Workplace Flexibility

Employee-driven workplace flexibility permits family members to have a degree of autonomy to control work location, timing, and/or process (Kossek, Lautsch, & Eaton, 2005).

Workplace flexibility can be either formal or informal (Eaton, 2003):

- Formal flexibility can be supported by national policies that guarantee access to part-time work, to family leave, or to request flexible work arrangements.
- Formal flexibility can also be written into the employing organization’s policy.
- Informal flexibility is not documented as policy, but available to some employees based on supervisory discretion.
Cross-national Policy Comparisons

Allow for the review, analysis and synthesis of formal flexibility policies supporting parents of children with disabilities.

Permits comparison of supports across countries with different types of social policies (Esping-Andersen, 1999; and also Aspalter, 2006; Bambra, 2007).

Three countries were selected for our comparison that exemplify differing approaches to family policy:

- Conservative—maintain the traditional family and gendered division of labor (Germany).
- Social democratic—support all individuals as part of their citizenship rights, supplying generous supports (Sweden).
- Liberal—emphasize personal choice and responsibility, and the connection of the employee to the market (USA).
Prior Cross-national Comparisons of Work-Life Policies Did Not Address Exceptional Caregivers

Organization for Economic Co-operation and Development conducted a series of major studies (OECD, 2002-2007) on work-family life policies in 30 member countries and found substantial differences in policy generosity and their success in:

- Promoting child development
- Increasing workforce participation
- Attaining greater gender equity in employment and care of children.

International Network on Leave Policy and Research compared 22 economically-developed countries, 17 from the EU (Moss & O’Brien, 2002), but no synthesis on leave to care for children who were ill or disabled was undertaken.
Recent Cross-national Studies Rated the Quality of Leave Policies or Flexible Work Statutes.

Center for Economic and Policy Research (Ray, Gomick, & Schmitt, 2008) rated the generosity and gender-equality promotion of parental leave policies in 21 countries and formulated a gender-equality index.

Building on the work of Kamerman (1991), Parry (2001) rated three countries on the quality of their leave policies on the basis of scope (coverage), remuneration (wage replacement), and duration (length of replacement or job protection).

Institute for Women’s Policy Research compared the flexible work statutes of 21 countries and found that 17 allowed parents flexibility, and 5 guaranteed all workers the right to ask for and obtain flexible work arrangements (Hegewisch & Gomick, 2008).
Method of the Current Study

Drawing on existing cross-national comparisons, research specific to each country, and primary sources, this study:

- Examined the historical and political context of universal and targeted work-life policies supporting families of children with disabilities,
- Compared special supports for these families, and
- Considered laws addressing flexible work arrangements.

Using a cross-national analysis, the policies were examined for their generosity and capacity to promote work-life integration for employed parents of children with disabilities.
### Cross-National Comparison of Characteristics

<table>
<thead>
<tr>
<th>Country</th>
<th>Gross Domestic Product*</th>
<th>Human Development Index*</th>
<th>Gender Development Index*</th>
<th>Women 15-64 years who are employed**</th>
<th>Proportion of Children with Disabilities+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany</td>
<td>$31,766</td>
<td>0.940</td>
<td>0.937</td>
<td>61.5%</td>
<td>1.0 (under 15 years)</td>
</tr>
<tr>
<td>Sweden</td>
<td>$34,056</td>
<td>0.958</td>
<td>0.958</td>
<td>72.1%</td>
<td>1.7% (under 16 years)</td>
</tr>
<tr>
<td>United States</td>
<td>$43,968</td>
<td>0.950</td>
<td>0.937</td>
<td>66.1%</td>
<td>8.8% (under 15 years)</td>
</tr>
</tbody>
</table>

*UN (2008); **OECD (2008b); +National Records
## Cross-national Comparisons of Definitions of Disability

<table>
<thead>
<tr>
<th>Country</th>
<th>Definition of Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany</td>
<td>Deviation from typical physical functions, mental capacities or psychological health for more than 6 months, resulting in limited participation in social life (SGB IX, Koch, 2004). A “degree of disability” is assessed using a scale (scores range from 20 – 100, with 50 = high degree of impairment; die Grad der Behinderung; OECD, 2003).</td>
</tr>
<tr>
<td>Sweden</td>
<td>Functional or mental impairment that is major and causes considerable difficulties in daily life and requires an extensive need for support or services (LSS, 1993; Socialstyrelsen, 2006b).</td>
</tr>
<tr>
<td>United States</td>
<td>American with Disabilities Act of 1990 (ADA) refers to disability as “a physical or mental impairment that substantially limits one or more major life activities” or those ‘who have a record of’ or are ‘regarded as’ having such impairment” (29 USC 705(20)(B)).</td>
</tr>
</tbody>
</table>
# Family Supports for the Care of Children who have Disabilities or have Special Health Care Needs

<table>
<thead>
<tr>
<th>Type of Leave Available</th>
<th>Germany</th>
<th>Sweden</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Maternity leave</td>
<td>Parental leave</td>
<td>Family medical leave</td>
</tr>
<tr>
<td></td>
<td>Parental leave</td>
<td>Sick leave</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Child sick leave</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Persons Covered</th>
<th>Mothers for maternity leave</th>
<th>Both parents entitled to paid parental leave whether or not they are employed</th>
<th>Only workers employed full-time in past year with govt. agencies or by organizations &gt;50 employees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Both mothers and father entitled to parental leave (with restrictions)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Uptake of Leave</th>
<th>92% took leave (under previous policy) 5% uptake by fathers</th>
<th>87% leave days used (82.8% by mothers; 17.2% by fathers)</th>
<th>9% of workforce uses FMLA</th>
</tr>
</thead>
</table>

| Duration of Leave       | 365 days over 48 months                                                        | 480 days (6 weeks prenatal to 8 years)                                         | 60 work days per year                                                          |
### Family Supports (Continued)

<table>
<thead>
<tr>
<th>Compensation During Leave</th>
<th>Germany</th>
<th>Sweden</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal benefit</td>
<td>•</td>
<td>•</td>
<td>•Unpaid, although some states and some companies provide compensation during leave.</td>
</tr>
<tr>
<td>Childrearing benefit</td>
<td>•</td>
<td>•80% of parent salary for the first 390 days</td>
<td></td>
</tr>
<tr>
<td>Individual states may also pay means-tested benefit.</td>
<td>•</td>
<td>•Lower compensation flat rate for an additional 90 days</td>
<td></td>
</tr>
<tr>
<td>Sick leave is paid up to 80% of earnings (with no ceiling) through health insurer.</td>
<td>•</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Flexible Work Arrangements (FWA)</th>
<th>Germany</th>
<th>Sweden</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>No law requires firms to grant FWA.</td>
<td>•</td>
<td>•Parents can request flexible work arrangements including a gradual return to work after a leave, intermittent leave, reduced hours to care for children.</td>
<td>•No law requires employers to grant FWA.</td>
</tr>
<tr>
<td></td>
<td>•</td>
<td></td>
<td>•Family Responsibilities Discrimination litigation protects against retaliation or unfair treatment of employees with FWA.</td>
</tr>
</tbody>
</table>
## Family Supports (Continued)

<table>
<thead>
<tr>
<th>Special Supports</th>
<th>Germany</th>
<th>Sweden</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Child rearing allowances</td>
<td>• Heavily subsidized child care and early childhood education;</td>
<td>• Supplemental Security Income payments for children with disabilities.</td>
<td></td>
</tr>
<tr>
<td>• Family allowances with no time or age limitations for children with disabilities</td>
<td>• Particular child allowances for families of children with disabilities;</td>
<td>• Child care subsidies prioritized for children with special needs, as defined by each state.</td>
<td></td>
</tr>
<tr>
<td>• Housing support</td>
<td>• Counseling, therapy, and personal support;</td>
<td>• In every Head Start program for low-income families, at least 10% of children enrolled must have a disability.</td>
<td></td>
</tr>
<tr>
<td>• Preventive supports</td>
<td>• Personal assistant;</td>
<td>• Special education services for those whose disability meets standard.</td>
<td></td>
</tr>
<tr>
<td>• Classroom integration supports</td>
<td>• Companion service;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Specialized schools</td>
<td>• Relief service and respite care;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Individual, family therapy, and parent support.</td>
<td>• Supervision</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Guaranteed residence in a family home.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Conclusions from Cross-national Comparison

Leave Policies (that make accommodation for parents whose children are ill or require special health care needs).

- Even after recent increases in Germany, Sweden still the most generous in terms of scope, remuneration, and duration.
- US stands alone with unpaid leave.

Flexible work arrangements (FWA)

- Swedish parents have statutory rights to request, not present in Germany or US; some litigation protection in US.
- FWA in Germany and US often arranged informally.

Special supports for families

- Both Sweden and Germany have adopted a generous menu of supports; fewer supports in US.
Future Research Directions

- Studies which establish the effects of paid leave on workforce participation for this group of parents are critical next steps for OECD countries.

- Need for large national surveys of employed adults to include well-structured questions on the disability status of children in the family.

- As major longitudinal studies of children with disabilities are launched, it is important to include consideration of their parents’ work lives in the factors being tracked.

- Given the career consequences established in smaller studies of parents, tracking of career trajectories of parents is crucial.
Policy Conclusions

Policymakers need to examine the results of cross-national comparisons of work-life policies, and listen to those affected by these policies in their own countries so that they can promote workforce participation and assist families to stay out of poverty.

In the US, FMLA should cover all workers, and be paid, in order to increase its uptake by families who care for children with illness or disability, and help them stay engaged in the workforce (See Brennan & Marsh, 2008).
Funds to support this activity come from The Child, Adolescent and Family Branch, Center for Mental Health Services, Substance Abuse Mental Health Services Administration, U.S. Department of Health and Human Services; and from The National Institute on Disability and Rehabilitation Research, U.S. Department of Education. (Grant H133B990025)