Questions and Answers about Health and Workplace Flexibility:
A Sloan Work and Family Research Network Fact Sheet

Introduction

The Sloan Work and Family Research Network has prepared Fact Sheets that provide statistical answers to some important questions about work-family and work-life issues. This Fact Sheet includes statistics about Health and Workplace Flexibility. (Last updated: January 2009)

What are the impacts of absenteeism and presenteeism on businesses?

- **Fact 1** According to the 2005 CCH Unscheduled Absence Survey, “the average cost of absenteeism rose to $660 per person per year, up from $610 in 2004. Notably the survey only measures direct payroll costs for paid, unproductive time. The high cost of absenteeism hurts organizations even more when other costs, such as lost productivity, morale and temporary labor costs are considered” (CCH Incorporated, 2005).

- **Fact 2** According to the 2005 CCH Unscheduled Absence Survey, “two out of three employees who fail to show up for work aren’t physically ill…The survey found that Personal Illness accounts for only 35 percent of unscheduled absences, while 65 percent of absences are due to other reasons, including Family Issues (21 percent), Personal Needs (18 percent), Entitlement Mentality (14 percent) and Stress (12 percent)” (CCH Incorporated, 2005).

- **Fact 3** When employers were surveyed about the effects of presenteeism [circumstances in which employees come to work even though they are ill], or working while ill, “nearly half (48 percent) of employers surveyed reported that presenteeism is a problem in their organizations, up over 20 percent from the 39 percent who saw it as a problem last year” (CCH Incorporated, 2005).

What impact do employees’ elder care duties have on their time and health?

- **Fact 1** “The average weekly hours of family caregiving for adult relatives amount to a part-time job: 23 hours per week for women, and 19 for men” (National Alliance for Caregiving and AARP, 2004).

- **Fact 2** Of the participants sampled, “nearly six in ten caregivers (59%) say they have worked at some time while they were actively providing care. Of these, six in ten (62%) say they had to make some work-related adjustments in order to help the person they care for. More than half (57%) of working caregivers say that as a result of their caregiving responsibilities they have had to go in (to work) late, leave early, or take time off during the day to provide care” (National Alliance for Caregiving and AARP, 2004, p. 13).
Fact 3 While most caregivers reported that they are in good physical health, “about one in six (17%) considers their health as fair (12%) or poor (5%)” (National Alliance for Caregiving and AARP, 2004, 56). However, caregiving appears to create more emotional stress than physical strain. “One third (35%) of caregivers say taking care of the person they help rates a four or five, on a five point scale where five is very stressful” (National Alliance for Caregiving and AARP, 2004, p. 60).

Fact 4 When caregivers were surveyed about their unmet needs the most frequently reported were “finding time for myself (35%), managing emotional and physical stress (29%) and balancing work and family responsibilities (29%)” (National Alliance for Caregiving and AARP, 2004, p. 14).

Why do employees work when they are sick?

Fact 1 In a recent poll conducted by ComPsych Corporation, 77% of respondents reported going to work when they were sick for the following reasons: 33% “because my workload makes it too difficult to take off,” 26% “because it feels ‘risky’ to take off in the current work environment,” and 18% “because I have to save my sick days for when my kids need me” (ComPsych Corporation, 2004).

Which employees have paid sick leave?

Fact 1 “Only 68 percent of the U.S. workforce have paid time off for personal illness, with managers and professionals, more highly compensated employees, and older employees having greater access than other employees” (Bond, Galinsky, & Hill, 2002, p. 9).

Fact 2 “Only 47 percent of low-wage employees (bottom 25% of wage distribution) have paid sick leave compared with 84 percent of high-wage employees (top 25% of wage distribution)” (Bond, Galinsky, & Hill, 2002, p. 9).

Fact 3 “54 percent of employees have paid time off to care for children” (p. 9). This paid time off “involves being allowed to take a few days off to care for a sick child without losing pay, without using vacation days, and without having to make up some other reason for one’s absence” (Bond, Galinsky, & Hill, 2002, p. 9).

Fact 4 “Although paid time off to care for mildly ill children is not required by law, 49 percent of employers with 50 or more employees allow employees to take some time for this purpose without having to use vacation days or losing pay” (Galinsky, Bond, & Sakai, 2008, p. 19).

How does workplace flexibility positively affect employees’ health?

Fact 1 “The odds of reporting a better self-appraised lifestyle in 2005 than in 2004 were 39% and 82% greater for individuals who reported constant and improved flexibility, respectively, in contrast to individuals whose level of perceived flexibility declined over the year” (Grzywacz, Casey, & Jones, 2007, p. 1305).
Fact 2. “The odds of reporting an increase in hours of sleep per night from 2004 to 2005 were 51% and 72% higher for those with constant flexibility and improved flexibility, respectively, than for individuals whose perceived flexibility declined” (Grzywacz, Casey, & Jones, 2007, p. 1305).

Fact 3. “The average frequency of physical activity was 0.30 and 0.44 points higher for those who agreed and strongly agreed, respectively, to having sufficient flexibility compared to those who disagreed” (Grzywacz, Casey, & Jones, 2007, p. 1305).

Fact 4. “There was no cross-sectional evidence suggesting that greater flexibility is associated with regular attendance in health education seminars; nevertheless, the odds of practicing personal resilience techniques regularly were 54% higher for those who strongly believed they had the flexibility to meet their work and personal needs relative to those disagreed with the flexibility item” (Grzywacz, Casey, & Jones, 2007, p. 1305).

Fact 5. “Individuals who had stable, nonchanging perceived flexibility between 2004 and 2005 were 38% more likely to increase attendance to health education seminars than those who had a decline in flexibility” (Grzywacz, Casey, & Jones, 2007, p. 1305).

Do employees have enough flexibility from their employers to meet their daily personal commitments?

Fact 1. “In 2004, 6.2% of the participants disagreed with the statement indicating that they had sufficient flexibility to meet their daily work, family, and personal commitments whereas most respondents agreed or strongly agreed that the company provided enough flexibility” (Grzywacz, Casey, & Jones, 2007, p. 1305).

Which work–life programs do employers offer?

Fact 1. According to the National Study of the Changing Workforce (NSCW), “nearly three times as many employees in effective workplaces --36%--exhibit very good mental health as employees in ineffective workplaces --13%” (Bond, Galinsky, & Hill, 2002, p. 4). The Families and Work Institute define effective workplaces as those that offer their employees: job autonomy, challenge and opportunity for growth and advancement, supervisory and co-worker support, decision latitude, and flexibility.

Fact 2. “On a scale of 1 to 5 (with 5 being most effective), the work–life programs ranked highest for reducing unscheduled absences are Alternative Work Arrangements (3.5), Flu Shot Programs (3.4), Leave for School Functions, Telecommuting, Compressed Work Week and On–site Child Care (each at 3.3)” (CCH Incorporated, 2005).

Fact 3. “In keeping with the previous findings that employers are promoting health and attempting to reduce stress for employees, there have been increases in wellness programs (60% in 2008, up from 51% in 1988) and in the provision of space and equipment for new mothers to breastfeed (53% in 2008, up from 37% in 1998)” (Galinsky, Bond, & Sakai, 2008, p. 29).
Fact 4  “Interestingly and perhaps surprisingly, 75 percent of employers say that they provide paid or unpaid time off for employees to provide elder care without jeopardizing their jobs” (Galinsky, Bond, & Sakai, 2008, p. 23).

Fact 5  “The majority of employers responded ‘very true’ to statements assessing whether supervisors are encouraged to assess employees’ performance by what they accomplish rather than ‘face time’ (71%) and whether supervisors are encouraged to be supportive of employees with family needs and by finding solutions that work for both employees and the organization (60%)” (Galinsky, Bond, & Sakai, 2008, p. 25).

Fact 6  “Far fewer, however, responded ‘very true’ to statements asking whether management rewards those within the organization who support flexible work arrangements (20%) and whether their organization makes a real and ongoing effort to inform employees of the availability of work life assistance (21%)” (Galinsky, Bond, & Sakai, 2008, p. 25).

How are working conditions in the European Union?

Fact 1  “Slightly more than one in four EU workers considers their health and safety to be at risk because of their work. This proportion has been consistently declining over the last 15 years (from 31% in 1991 to 27% in 2005)” (European Foundation for the Improvement of Living and Working Conditions, 2005, p. 6).

Fact 2  “In 2005, more than 80% of EU workers declared being either ‘satisfied’ or ‘very satisfied’ with their working conditions. The two middle categories (‘satisfied’ and ‘not very satisfied’) have grown in the last 10 years, whereas the proportion of those that declare high levels of satisfaction has decreased by 5%” (European Foundation for the Improvement of Living and Working Conditions, 2005, p. 7).

Fact 3  “For a majority of Europeans, work involves learning new things (70%). Only 43% of European workers consider that their job involves monotonous tasks” (European Foundation for the Improvement of Living and Working Conditions, 2005, p. 5).

Fact 4  “Most European workers are responsible for assessing the quality of their work themselves (73%) and solving unforeseen problems on their own (81%)” (European Foundation for the Improvement of Living and Working Conditions, 2005, p. 4).

Fact 5  “When looking at the change in these indicators in the last 10 years, the picture is not so positive: there is a slow, but clear reduction in the proportion of jobs involving own assessment of the quality, solving unforeseen problems and learning new things (in the three cases, the reduction is around 5%)” (European Foundation for the Improvement of Living and Working Conditions, 2005, p. 5).
The Network has additional resources related to this topic.

   Topic pages provide resources and information, including statistics, definitions, overviews & briefs, bills & statutes, interviews, teaching resources, audio/video, suggested readings, and links.

2. Visit our database of academic literature with citations and annotations of literature related to the issue of Health and Workplace Flexibility. You can connect to this database at: http://library.bc.edu/F?func=find-b-0&local_base=BCL_WF

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References


"The NSCW surveys representative samples of the nation’s workforce once every five years (1992, 1997, 2002). Sample sizes average 3,500, including both wage and salaried employees and self-employed workers” (p. v).

Several of the questions in the National Study of the Changing Workforce were taken from or based upon questions in the Quality of Employment Survey (QES) conducted three times by the Department of Labor from 1969 to 1977. Although the NSCW is more comprehensive than the QES in addressing issues related to both work and personal life and has a stronger business perspective, having comparable data from over a 25 year period has provided a unique opportunity to look at trends over time. The 2002 NSCW uses 25 years of trend data to examine five topics in depth: women in the workforce; dual earner couples, the role of technology in employees’ lives on and off the job, work–life supports on the job, and working for oneself versus someone else (p. v).

To read the Executive Summary or the press release, and to purchase the full report as a PDF E-product, please visit http://www.familiesandwork.org/announce/2002NSCW.html.

To link directly to the Summary of FWI research findings please visit: http://familiesandwork.org/3w/research/3wes.html


The 2005 CCH Unscheduled Absence Survey was conducted online and polled 323 human resource executives in U.S. companies and organizations. The survey included major industry organizations of all sizes in 46 states and the District of Columbia.

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ComPsych Corporation is the world’s leading provider of employee assistance programs (EAP) and serves more than 23 million individuals and 6,000 organizations worldwide.

This survey was conducted over the span of a month and included responses from more than 700 U.S. companies receiving ComPsych services. For more information about ComPsych Corporation please visit: www.compsych.com

“The European Working Conditions Survey (EWCS) is carried out every five years by the European Foundation for the Improvement of Living and Working Conditions, a tripartite European Agency based in Dublin. The questionnaire is developed by the European Foundation team in close cooperation with an expert questionnaire development group. This group comprises representatives of the European social partners, other EU bodies (EU Commission, Eurostat, European Agency for Safety and Health at Work), international organisations (OECD, ILO), national statistical institutes, as well as leading European experts in the field. The sample of the EWCS is representative of persons in employment (according to the Eurostat definition this comprises both employees and the self-employed) in the countries covered for the respective periods. In each country, the EWCS sample followed a multi-stage, stratified and clustered design with a random walk procedure for the selection of the respondents at the last stage. All interviews were conducted face-to-face in the respondent’s own household” (p. 8).


“The 2008 NSE sample includes 1,100 employers with 50 or more employees—77 percent are for profit employers and 23 percent are nonprofit organizations; 40 percent operate at only one location, while 60 percent have operations at more than one location. Interviews were conducted on behalf of Families and Work Institute by Harris Interactive, Inc.” (Galinsky, Bond, & Sakai, 2008, p. 3).


“Data for this project are from employees of a large multinational pharmaceutical company consistently recognized by *Working Mother* magazine as among the most familyfriendly employers in the United States, in large part, because of its commitment to flexibility. Each year during health insurance open enrollment, benefits–eligible US–based employees have the opportunity to complete a HRA as part of the company’s employeewellness program. Approximately 35% of eligible employees complete the questionnaire. The data for this study consisted of 3193 individuals who completed the HRA in both 2004 and 2005. The sample is comprised of 1331 men and 1862 women (Table 1), whose average age in 2004 was 40.8 (standard deviation [SD] .8.98) years. About 80% of the participants were White (non–Hispanic), and roughly 73% were married. Nearly half (48.8%) recorded having at least one dependent under the age of 22 covered by their health plan. Employees from each major division of the organization and employees of different levels (ie, manufacturing personnel to senior executives) participated in the HRA in both years” (Grzywacz, 2007, p. 1303).


This study was a collaborative project between the National Alliance for Caregiving and AARP, in order to further the knowledge-base surrounding the impact of caregiver activities for the elderly. Specific activities performed and needs that are currently left unmet were also explored. Sample participants included 1,247 caregivers, 18 years of age and older, who were interviewed over the telephone. For the full *Caregiving in the U.S.* report please visit: http://www.aarp.org/research/reference/publicopinions/aresearch-import-853.html