

The coronavirus & work–life inequality: Three evidence-based initiatives to update U.S. work–life employment policies

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abstract

The coronavirus crisis has illuminated how poorly the United States compares with other major industrialized nations in providing workers across all industries equal access to paid sick and family leave, employee-requested flexible scheduling, and reasonable work hours. Many essential workers in frontline jobs (such as those in health care, food services, and public safety) have been unable to access benefits that support work–life balance and that play a critical role in helping employees manage job stress and protect their health. At the same time, many nonessential workers (disproportionately women) who can telecommute to prevent exposure have been left juggling a demanding job while also caring for children, elders, or others at home. We propose three evidence-based national initiatives that would improve U.S. work–life policy: ensure employees have access to and the ability to use paid sick leave and family leave, mandate that employers create emergency backup staffing infrastructures, and give employees the right to request flexible and reasonable work hours. These work–life policies are based on principles of balanced flexibility that benefit employers, employees, and society as a whole.

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The COVID-19 pandemic¹ has led to many policy debates centered on mitigating economic loss and containing the public health contagion. However, national policy on the work–life balance of U.S. workers, which has been hugely affected by the pandemic, remains underexamined. In this article, we highlight work–life inequalities that the pandemic has exposed across job types in the United States and between the United States and economically similar nations, and we share research on three evidence-based work–life policies that support both organizational productivity and employee well-being.

COVID-19 Work–Life Impacts on Essential & Nonessential Workers

In spring 2020, the rapid spread of the novel coronavirus and the severity and lethality of the disease it causes prompted most U.S. states to institute a period of mandatory stay-at-home orders.² Employees whose jobs permitted telecommuting worked from home. It is estimated that before the pandemic, about 29% of the U.S. population could do some or all of their work remotely—including one in two employees in technology jobs and one in 20 service-sector employees.³ Since the pandemic began, this figure has expanded to a majority of the workforce (62%),⁴ and some major companies (such as Facebook and Google) have announced that remote work will continue through 2020 or beyond.⁵ The pandemic has closed day care operations and schools, so employees with children have had the added burden of managing childcare and overseeing schoolwork during normal work hours. Employees who had relied on elder care in-home services or adult day care centers to help with aged family members or dependents have had to provide care themselves. The burdens of childcare and elder care have fallen disproportionately on female telecommuters.⁶

Some 49 million to 62 million employees work in occupations labeled “essential” by the U.S. Department of Homeland Security,⁷ often in customer-facing jobs⁸ in industries such as public safety, health care, and food retail

and manufacturing.⁹ These frontline workers frequently have a harder time than other workers when juggling work and home responsibilities, for several reasons. They usually do not have the option to work from home even if they need to tend to children and adults whose schools or care centers are closed. National labor statistics show¹⁰ that many essential workers have heavy family demands in addition to their stressful occupations,¹¹ yet they often hold low-paid hourly jobs and have few supports for work–life balance.¹² Specifically, these essential jobs may not offer paid sick leave, flexible scheduling, or ways to limit excessive work hours.¹³ What is more, research suggests that many essential workers risk backlash from their employers for requesting individualized work–life accommodations, particularly those who are in equal employment opportunity–protected groups.¹⁴ The number of people in that category is large, as women and minorities are overrepresented in occupations that are classified as essential: 75% of hospital workers are women, and 50% of people who work in food manufacturing and 40% who work in grocery stores are Black, Asian, or Hispanic.¹⁵

Pandemic Highlights Opportunities to Close U.S. Work–Life Policy Gaps

Although the COVID-19 pandemic has not created the work–life imbalance problem in the United States, it has made the difficulties highly visible and exacerbated them, particularly for essential workers, and it has highlighted how poorly this country compares with other nations on this issue.¹⁶ The United States currently lags behind nearly all major industrialized countries in adopting national work–life policies that research has shown to improve worker health and the quality of both work life and family life.¹⁷ Instead, the nation relies on a patchwork system of voluntary employer or labor-negotiated policies that govern work–life benefits such as paid sick leave and family leave, backup staffing, and flexible scheduling. Large companies are more likely to offer these benefits than smaller ones, but even large companies exclude many essential or lower level jobs from eligibility for such benefits.¹⁸ (See note A.) Here, we examine

three work–life policies that, if implemented, would enable pandemic readiness and match evidence-based best practices. These policies are national paid sick leave and family leave, a mandate to have an emergency backup staffing infrastructure, and the right of employees to request flexible and reasonable work schedules.

Three Recommended Evidence-Based U.S. Work–Life Public Policy Initiatives

National Paid Sick Leave & Family Leave

National studies show that when employees are sick, those without paid sick leave, as compared with employees with paid sick leave, are less likely to seek medical care, more likely to go to work while ill, and more likely to experience workplace injuries.^{19–21} Conversely, employees who have paid sick leave are 40% more likely to be vaccinated against contagious diseases than are those without the benefit.²² These trends have tremendous implications for the spread of contagious diseases to coworkers, customers, and others. It is estimated that during the 2009–2010 H1N1 flu pandemic, infected employees who went to work infected 7 million people and caused 1,500 deaths.²³

Paid sick leave actually prevents productivity losses from absenteeism—because employees take care of new or chronic health issues before they become more serious and lead to longer absences—and from presenteeism—that is, being at work but not functioning fully because of health problems.²⁴ On the basis of 2007–2014 data from the Medical Expenditure Panel Survey, it is estimated that, overall, paid sick leave could have saved employers \$63 million to \$1.88 billion between 2007 and 2014 by reducing absences that were due to influenza-like illnesses.²⁵ The American Productivity Audit of 28,902 employees estimates that employers lose an average of 1.32 weekly hours per employee because of chronic health conditions, translating into \$225.8 billion in annual losses.²⁶

Family leave, which enables workers to take short employment breaks with job security, is

another way to give employees the ability to handle child and elder care demands and family illnesses while still remaining connected to the labor force. Beyond helping employees, this policy can benefit the U.S. economy by reducing the number of people who lose their jobs and have to draw on public assistance and the number of people (often female caregivers) who drop out of the labor market because of family demands and thus end up reducing their social security contributions. A majority of workers, regardless of whether they are married or have children, will manage care for family members sometime during their careers. Caregiving demands have become particularly challenging during the pandemic, but even before it began, the policies in place gave only about one-fifth of the U.S. workforce access to some amount of paid family leave.²⁷ In states that offer paid family leave (see note B), studies have found improvements in productivity or profitability for employers, particularly when the duration of the leave is less than one year.²⁸ Most family leaves provide employees with partial wage replacement (50%–70% of earnings) for up to 12 weeks to care for a new child (biological, adopted, or fostered) or a sick family member (parent, child, spouse, or registered domestic partner). Leave programs are funded through employee contributions, and sometimes employers also contribute, as they do for unemployment or temporary disability insurance.

Data from California were examined to identify pre- and post-leave effects on employers from 2000 to 2014; they showed lower employee turnover rates, an outcome that reduces labor costs for employers.²⁸ Researchers conducting another California study estimated that seven to 12 months after a child’s birth, women’s participation in the workforce was 15%–20% higher than it would have been without the program.²⁹ Similarly, other studies using data from California and New Jersey have found that women who used paid leave for a short duration returned to work sooner than did women who had to take leave with no pay.³⁰

Family leave benefits employees in multiple ways. New mothers were less likely to live in poverty in the year after their child’s birth once

California's leave program began.^{30,31} Paid leave also lengthens the time that mothers breastfeed³² and aids their ability to arrange for childcare.³³ The United States can learn from countries that have a longer history of paid family leave. When Iceland implemented paid family leave, which includes incentives for men to use it, the country reported improvements in gender pay equality and parity in staying in the labor market.³⁴ A Norwegian study analyzed historical data and found benefits for children as well—high school dropout rates were 2%–3% lower and earnings at age 30 years were 5%–7% higher after the country's four-week paid maternity leave was introduced.³⁵

Emergency Backup Staffing as Flexibility Infrastructure

Many essential industries, such as hospitals, nursing homes, prisons, food manufacturers, and grocery stores, are at risk of and have experienced COVID-19 outbreaks. This increased exposure has serious health consequences for the most vulnerable in society: as of May 2020, 42% of U.S. coronavirus deaths were in nursing homes or assisted-living facilities.³⁶ When organizations do not have adequate backup staffing options, workers may have their requests to take time off to care for themselves or their families denied; they are thus more likely to work when sick and to expose others to contagious illnesses in their workplaces. To avert worker shortages, employers can institutionalize backup or emergency staffing—for instance, by having a rotating on-call system of trained, certified workers who can fill in when needs arise. Such infrastructure systems help to compensate for an understaffed workforce during disease outbreaks, weather emergencies, or school closures while maintaining productivity and critical work–life supports.³⁷

Multiple studies have found that health care understaffing, particularly in nursing, is linked to turnover,³⁸ job dissatisfaction,³⁹ fatigue,⁴⁰ and burnout in employees, and it correlates with poor patient care, including serious infections^{41,42} and missed medical treatments.^{42–44} One large study found that reducing burnout in nurses by 30% could lower patient-infection

rates and save hospitals up to \$68 million a year.⁴² A nursing home study found that improving work–life flexibility with sufficient staffing resulted in less burnout (specifically, less emotional exhaustion), which was correlated with lower patient-infection rates (an indicator of the quality of care).⁴⁵

In retail stores, such as grocery stores that employ essential workers, understaffing harms service quality, which is linked to both lower customer satisfaction⁴⁶ and lower job satisfaction,⁴⁷ and decreases profitability.⁴⁸ A study involving 41 retail stores across 17 states estimated that those that were understaffed during peak periods experienced an 8.56% loss in sales, on average.⁴⁹

Legal Right to Request Flexible Reasonable Work Schedules

Research shows that when employees have some flexibility and control over when and where they work, they are less likely to experience burnout and to have childcare or health problems; employee turnover decreases as well.⁵⁰ In light of these documented benefits, several countries, including the United Kingdom, Sweden, Denmark, Germany, and Australia, have legally protected workers' rights to request flexible work arrangements.^{51,52} Flexible work schedule policies were initiated to address childcare responsibilities and gave employees the right to request changes in when they work (flextime), how many hours they work (flexload), and where they work (flexplace).⁵³ Employers are obligated to formally respond to these requests, indicating whether the changes can be accommodated and the specific grounds for any refusals, such as cost or customer demands.⁵⁴

Multiple studies involving small, medium, and large employers have shown that such policies enhance employees' desire to work at companies that offer them.⁵⁵ When first adopted, the U.K. law focused on workers with children who were under six years of age or who were disabled and at home. A 2008 study found that employers would save £22 million annually from reduced turnover and absenteeism and would enjoy increased profitability if the law

were expanded to include employees with children up to age 16 years;^{55,56} since then, the law granting the right to request flexible working has been expanded multiple times and now applies to most U.K. employees regardless of whether they have children at home.⁵⁷

The U.K. government also funds a recurring Work–Life Balance Employee Survey. In 2012, reported survey results identified the three most frequently requested types of job flexibility: flextime, telework, and part-time or reduced hours.⁵⁵ Nearly half of employees using flexible work options reported no negative consequences, and most reported benefits of more time with family, improved work–life balance, and better childcare arrangements.⁵⁵ Another U.K. study using longitudinal household data from 2009 to 2014 found that women who were able to telework after childbirth were more likely to stay with their employer and work full time.⁵⁸

In Australia, the Fair Work Act has set limits on work hours to protect worker health (including on overtime hours, which employers may request but employees are not required to accept).⁵⁹ Yet in the United States, up to one-fourth of employees, including many in essential jobs, may be required to work overtime, with no right of refusal,⁶⁰ and no federal guideline delineates maximum weekly hours. Working long hours can have adverse effects on employee health, with such outcomes as hypertension,⁶¹ chronic infections,⁴⁰ and depression.⁶² Working overtime also increases injury risk: a U.S. study of over 10,000 workers found that individuals working overtime were 61% more likely to get injured.⁶³

Conclusion

The United States could face serious negative health and economic consequences and a shortage of essential workers if national lawmakers do not establish policies to support work–life balance in the workplace.¹³ Work–life benefits are not consistently available across jobs and employee demographic groups, and lack of access to them has become a form of

job inequality—one that has been exacerbated by the COVID-19 pandemic. American workers in different industries face unequal access to policies that support work–life balance, leaving too many of them facing the consequences of chronic work–life stress, which can affect health, mental health, and job satisfaction. Because women are overrepresented in essential industries and given that even those who are able to telework are likely to handle more of the family caregiving and household demands while working than men are, the lack of national work–life balance legislation may halt the progress that was made in gender equality before the pandemic.⁶⁵

Research suggests that job inequality can be mitigated through policies based on principles of “balanced flexibility,” in which both employers and employees are engaged in decisionmaking and both work and nonwork demands are considered.⁶⁶ The societal problem of how to balance company and worker needs for managing work hours and leave is growing into a health problem for the nation’s workforce and the U.S. economy. Responding to the work–life needs of U.S. workers and their families has generally relied on the largesse of individual employers, and work–life policies have often been culturally viewed as an individual problem and not a U.S. public health and economic issue. Yet on the basis of a large body of research, we argue that national work–life employment policies in the United States should be updated to include paid sick leave and family leave, mandated employer emergency backup staffing plans, and the right of workers to request flexible schedules and reasonable work hours. Such innovations would protect the well-being of workers and their families while also boosting productivity and public health. In addition, these work–life policy initiatives would bring U.S. employment and occupational health policies up to the level of other major industrialized countries. These policies would be a huge help in mitigating the employment stresses of both essential and nonessential workers during the coronavirus pandemic and would better prepare the nation for the next crisis.

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endnotes

A. Although the Families First Coronavirus Response Act provided several weeks of full or partial pay to quarantined workers or workers with children whose schools were closed,⁶⁷ most essential workers were unable to access those federal funds and lacked access to other paid sick leave or family leave benefits.⁶⁸

B. At the time of this article's publication, only California, New Jersey, Rhode Island, New York, Oregon, Connecticut, and Washington, DC, require paid family leave, and not all of them protect the jobs from being lost while employees are taking the leave.^{69,70}

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