



the work and family legal center

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## FACT SHEET:

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# THE PUBLIC HEALTH CASE FOR WORKPLACE FLEXIBILITY

**Research studies consistently show that workplace flexibility provides financial benefits to businesses.<sup>1</sup> However, the value of flexibility extends beyond the organizational bottom line. By improving the physical and mental health of employees, workplace flexibility constitutes an important preventative health care strategy. Employees' families also benefit from flexible workplace policies; workplace flexibility improves health outcomes for newborns and children and allows workers to provide better care to their elderly loved ones. These positive outcomes ultimately affect entire communities, as workplace flexibility stops the spread of illness, eases the burden on our health care system, and helps to protect our environment.**

### **Workplace flexibility reduces employee stress, encourages healthier lifestyles, and improves the long-term health of employees.**

- Employees with access to flexible workplace policies exhibit significantly better physical health and mental health than other employees.<sup>2</sup>
- A 2008 survey of low-income, hourly workers found that stress levels are more than two times greater for workers who feel they lack sufficient workplace flexibility, as compared to workers who feel they have the necessary amount of flexibility.<sup>3</sup> In this same survey, 77% of managers said that flexible workplace policies have a positive effect on workers' health and stress levels.<sup>4</sup>
- Employees who report that work-related stress impacts their family life are twice as likely to suffer from substance dependence and 2.5 times more likely to have an anxiety disorder than workers who do not have such stress.<sup>5</sup>
- Employees who believe they have workplace flexibility lead healthier lifestyles, as demonstrated by their sleep habits, level of physical activity, and stress management.<sup>6</sup>
- When managers support workplace flexibility, research shows that their employees sleep better and have a lower risk of cardiovascular disease.<sup>7</sup>
- Multiple studies have found a connection between inflexible work hours, work-related stress, and unhealthy dietary habits.<sup>8</sup> Stress and unhealthy eating habits contribute to obesity and decrease the health outcomes of workers and their families.<sup>9</sup>
- Telework and other flexible workplace policies can reduce the strain associated with long, daily commutes. A recent Gallup survey of more than 170,000 American workers demonstrated that employees with long commutes are more likely to report recurrent neck or back pain, high cholesterol, and obesity. Workers with shorter commutes are more rested and report fewer worries than those with long commutes.<sup>10</sup>

### **Workplace flexibility and paid sick leave benefit whole communities by preventing the spread of illness and reducing the burden on the health care system.**

- The Bureau of Labor Statistics has reported that 50 million American workers do not have paid sick leave.<sup>11</sup> These workers cannot stay home to care for themselves or their children without losing pay or possibly risking their jobs. In addition to improving the health of those who are sick, workplace flexibility reduces the spread of illness in the workplace, in schools, and throughout the community.<sup>12</sup>
- A 2010 study found that more than 87% of restaurant workers do not receive paid sick days, and more than 63% of restaurant workers reported cooking and serving food to the public while ill.<sup>13</sup>
- Twenty-seven percent of low-income women delay seeking healthcare because of their inability to take time off from work.<sup>14</sup> Due to workplace inflexibility and a lack of paid sick days, many workers and their children have no choice but to seek care in hospitals after work; such unnecessary usage of emergency rooms burdens hospitals and increases health care costs.<sup>15</sup>

### **Parents with workplace flexibility can better ensure their children's health and well-being.**

- As many as 86 million workers do not have paid sick leave to care for ill children.<sup>16</sup> Additionally, more than 50% of working mothers are unable to take days off from work to care for a sick child.<sup>17</sup>
- Children are more likely to miss doctors' appointments when their parents lack workplace flexibility.<sup>18</sup> Moreover, research shows that sick children have better vital signs, faster recoveries, and shorter hospital stays when cared for by their parents.<sup>19</sup>
- According to a 2007 study, parents' work-related stress negatively impacts the mental health of their children.<sup>20</sup>
- Studies have also found a connection between work-family conflict, parents' inability to eat dinner with their children, and childhood obesity.<sup>21</sup> Children who regularly eat dinner with their families consume more fruits and vegetables each day than children who never or only occasionally eat dinner with their families.<sup>22</sup>

### **Flexible workplace policies that support breastfeeding improve the health of newborn children and their mothers.**

- In 2009, more than 56% of mothers with a child younger than one year of age were participating in the labor force.<sup>23</sup>
- The American Academy of Pediatrics recommends exclusive breastfeeding for the first twenty-six weeks after birth.<sup>24</sup> However, inflexible schedules and lack of sufficient breaks are often obstacles to expressing breast milk in the workplace.<sup>25</sup> Studies show that full-time employment decreases the duration of breastfeeding and

represents one of the best predictors for a mother's discontinuance of breastfeeding at 12 weeks postpartum.<sup>26</sup>

- Workplace flexibility is critical to supporting breastfeeding workers. The U.S. Centers for Disease Control and Prevention has highlighted several important business practices that support breastfeeding, including telework, flexible scheduling, part-time options, and longer maternity leave.<sup>27</sup>
- Research shows that breastfeeding has significant health benefits for children. There is evidence to suggest that breastfeeding decreases the incidence and severity of bacterial meningitis, diarrhea, urinary tract infections, respiratory tract infections, and several other infectious diseases.<sup>28</sup> Breastfeeding is also associated with decreased rates of sudden infant death syndrome, asthma, obesity, lymphoma, and leukemia.<sup>29</sup>
- In addition to the tremendous benefits for infants, breastfeeding has been shown to have health advantages for mothers. As reported by the U.S. Department of Health and Human Services, breastfeeding is associated with lowering a mother's risk for type 2 diabetes, breast cancer, ovarian cancer, and postpartum depression.<sup>30</sup>
- According to a 2010 research study, if 90% of American families breastfeed for six months, the United States would save \$13 billion and prevent more than 900 infant deaths each year.<sup>31</sup>
- As demonstrated by CIGNA's corporate lactation program, employer support for breastfeeding can reduce absenteeism and lower health care expenses for employees and their families.<sup>32</sup>

**Flexible workplace policies improve the health of both family caregivers and their loved ones. Workplace flexibility also benefits the community by allowing more workers to care for elderly relatives, a service that reduces health care expenditures and eases the burden on hospitals and nursing homes.**

- Many Americans experience the stress of balancing work and caregiving responsibilities. According to a study of caregiving patterns in 2008, more than 65 million Americans served as an unpaid family caregiver to an adult and/or child with special needs. Approximately 73% of these individuals were employed for part or all of this time.<sup>33</sup> It is estimated that 29 million full-time workers in the U.S. currently serve as unpaid family caregivers.<sup>34</sup>
- As compared to the general working population, workers who provide eldercare are less likely to report having the flexibility necessary to balance their work and family responsibilities.<sup>35</sup>
- Workers who provide care to an elderly relative or friend are more likely to report high cholesterol, diabetes, hypertension, and heart disease.<sup>36</sup> Caregivers who work in both white-collar and blue-collar jobs are also more likely than non-caregivers to report stress at home, stress at work, mental fatigue, and time pressure.<sup>37</sup> In a 2010 study of employees who provide unpaid eldercare, 20% of female caregivers over age

50 reported moderate or severe symptoms of depression.<sup>38</sup> Multiple studies have concluded that workplace flexibility is a key component of helping caregivers to both manage stress and to achieve better health outcomes.<sup>39</sup>

- The cost of medical care for employed caregivers is about 8% higher than for non-caregivers.<sup>40</sup> By providing greater flexibility to employed caregivers, businesses can improve the health and stress levels of caregivers, while generating savings from reduced health care costs and increased employee productivity.<sup>41</sup>
- The availability of family caregiving also benefits its recipients. In addition to getting invaluable assistance with medical visits and other daily health needs, research has shown that beneficiaries of family caregiving are more likely to have shorter hospital stays.<sup>42</sup> Recipients of family caregiving are also less likely to have nursing home care or home health care paid for by Medicare.<sup>43</sup>
- All Americans benefit from flexible workplace policies that encourage and support family caregivers. Research has shown that reducing a caregiver's stress level decreases a recipient's likelihood of entering a nursing home.<sup>44</sup> Unpaid family caregivers not only help to ease the burden on our crowded hospitals and long-term care facilities but also create enormous financial savings. In 2007, unpaid family caregivers in the United States provided services valued at approximately \$375 billion a year, a figure that exceeds annual Medicaid spending.<sup>45</sup>

**Workplace flexibility provides savings to commuters, while also creating significant environmental benefits, such as decreased pollution and lower fuel consumption.**

- Almost 20% of American workers spend more than 30 minutes commuting to work.<sup>46</sup>
- The U.S. General Services Administration has determined that its 14 telework centers have decreased employees' commutes by 2.8 million miles, saved 115,000 gallons of fuel, and avoided the release of 2.3 million pounds of emissions.<sup>47</sup>
- It is estimated that if all federal employees telecommuted two days a week, the release of pollution would be reduced by 2.7 million tons.<sup>48</sup>
- In a 2006 experiment, 140 businesses in Houston allowed more than 20,000 employees to work flexible schedules for two weeks. The change in commuting patterns led to a 5.8% reduction in travel time for peak-time commuters on two of the city's major freeways.<sup>49</sup> Moreover, 68% of participants reported a shorter commute than the previous week, and nearly 60% reported lower levels of stress than usual.<sup>50</sup>
- According to a 2009 study of urban traffic, it is estimated that Americans waste approximately 2.8 billion gallons of gas a year due to traffic jams. Traffic jams cost the nation approximately \$87.2 billion a year in wasted fuel and lost productivity.<sup>51</sup> Telecommuting and other flexible workplace arrangements can help to decrease traffic, pollution, and wasted fuel.<sup>52</sup>

<sup>1</sup> The concept of workplace flexibility encompasses a range of policies, including part-time work, flexible workday schedules, leave policies, and telecommuting. For more information on how workplace flexibility benefits employers see: A Better Balance, “The Business Case for Workplace Flexibility,” Nov. 2010, *available at* <http://abetterbalance.org/web/ourissues/fairnessworkplace>; Executive Office of the President, Council of Economic Advisers, “Work-Life Balance and the Economics of Workplace Flexibility,” March 2010, p. 13.

<sup>2</sup> Marcie Pitt-Catsoupes, Christine Matz-Costa and Elyssa Besen, “Workplace Flexibility: Findings from the Age & Generations Study,” The Sloan Center on Aging & Work at Boston College, 2009, p. 12, *available at* <http://bc.edu/research/agingandwork/publications.html>; *see also* Letter from Katie Corrigan and Michael Teter to Department of Health and Human Services (Sept. 2, 2008) (on file with author), *available at* <http://workplaceflexibility2010.org/images/uploads/HP2020letter09-2-08-1.pdf>; James T. Bond, Cynthia Thompson, Ellen Galinsky and David Prottas, “Highlights of the National Study of the Changing Workforce: Work-Life Supports on the Job,” Families and Work Institute, 2002, p. 14.

<sup>3</sup> Corporate Voices for Working Families, “Innovative Workplace Flexibility Options for Hourly Workers,” May 2009, pp. 95-96, *available at* <http://www.cvworkingfamilies.org/system/files/CVWFflexreport-FINAL.pdf> (defining lower wage workers as those who earn less than \$10 per hour or less than \$20,000 annually).

<sup>4</sup> *Ibid.*, p. 90.

<sup>5</sup> Kelleen Kay and David Gray, “The Stress of Balancing Work and Family: The Impact on Parent and Child Health and the Need for Workplace Flexibility,” New America Foundation, Oct. 2007, p. 6 (reviewing CDC data and the National Comorbidity Survey).

<sup>6</sup> “Employees with Workplace Flexibility Have Healthier Lifestyle Habits,” Wake Forest University Baptist Medical Center, Dec. 11, 2007, *available at* <http://www.physorg.com/news116529551.html>.

<sup>7</sup> Amy Roeder, “Managers’ Attitudes Toward Work-Family Issues Can Affect Employees’ Health,” Harvard School of Public Health, News Features, Aug. 30, 2010, *available at* <http://www.hsph.harvard.edu/news/features/features/work-family-policies-health.html>. *See also* Devin Dwyer, “Can a Flexible Boss Improve Your Health? Employees Who Work in Supportive Workplaces are Happier and Healthier, Study Finds,” ABC News, Oct. 14, 2009, *available at* <http://abcnews.go.com/Health/study-flexible-boss-workplace-means-healthier-employees-families/story?id=8819760> (describing preliminary research findings of the Work, Family & Health Network).

<sup>8</sup> *See, e.g.*, Sheri Hall, “Cornell Study: Long Work Hours, Job Dissatisfaction Affect What Family Eats at Home,” Cornell University Chronicle, Sept. 14, 2009, *available at* <http://www.news.cornell.edu/stories/Sept09/workingFamilyfood.html>; Nationwide Better HealthSM, “As obesity rates continue to rise, is the workplace a source of or solution to unhealthy lifestyle habits?” Press Release, Sept. 17, 2007, *available at* <http://www.nationwide.com/newsroom/press-release-obesity-rates-continue-rise-2007.jsp>; Kathy Gurchiek, “Job Stress, Thin Wallets Fatten U.S. Workers,” Society for Human Resource Management, May 21, 2010, *available at* <http://www.shrm.org/>.

<sup>9</sup> *Ibid.*

<sup>10</sup> Steve Crabtree, “Wellbeing Lower Among Workers With Long Commutes,” Gallup, Aug. 13, 2010, *available at* <http://www.gallup.com/poll/142142/wellbeing-lower-among-workers-long-commutes.aspx>.

<sup>11</sup> National Partnership for Women & Families, “New Findings: Paid Sick Days Next Step to Build on Health Care Reform — 50 Million Workers Lack Paid Sick Time,” April 27, 2010, *available at* <http://www.nationalpartnership.org/>.

<sup>12</sup> *See, e.g.*, Graham Lowe, “Creating Sustainable Organizations: How Flexible Work Improves Wellbeing and Performance,” FlexPaths and American Express, Oct. 2010, *available at* <http://flexpaths.com/files/u1/FlexPathsBooKfinal.pdf> (summarizing evidence on the connections between wellness programs, workplace flexibility, business profitability, and employee health and engagement); Steven Greenhouse, “At Work With the Flu,” NEW YORK TIMES, Nov. 3, 2009, at B1.

<sup>13</sup> The Restaurant Opportunities Centers United, “Serving While Sick: High Risks & Low Benefits for the Nation’s Restaurant Workforce, and Their Impact on the Consumer,” Sept. 30, 2010, p. ii, *available at* [http://rocunited.org/files/roc\\_servingwhilesick\\_v06%20\(1\).pdf](http://rocunited.org/files/roc_servingwhilesick_v06%20(1).pdf).

<sup>14</sup> Institute for Women’s Policy Research, “Women and Paid Sick Days: Crucial for Family Well-Being,” Fact Sheet, Feb. 2007, p. 1, *available at* [http://www.iwpr.org/pdf/B254\\_paidicksdaysFS.pdf](http://www.iwpr.org/pdf/B254_paidicksdaysFS.pdf).

<sup>15</sup> *Ibid.*; National Partnership for Women & Families, “Paid Sick Days Improve Our Public Health,” Fact Sheet, Sept. 2010, *available at* [http://www.nationalpartnership.org/site/DocServer/Fact\\_sheet\\_Paid\\_Sick\\_Days\\_Improve\\_Public\\_Health\\_5\\_09.pdf?docID=4185](http://www.nationalpartnership.org/site/DocServer/Fact_sheet_Paid_Sick_Days_Improve_Public_Health_5_09.pdf?docID=4185).

<sup>16</sup> Vicky Lovell, “No Time to be Sick: Why Everyone Suffers When Workers Don’t Have Paid Sick Leave,” Institute for Women’s Policy Research, May 2004, p. ii, *available at* <http://www.iwpr.org/pdf/B242.pdf>.

<sup>17</sup> Institute for Women’s Policy Research, “Women and Paid Sick Days,” p. 2.

<sup>18</sup> Letter from Corrigan and Teter to DHHS (summarizing findings by Jody Heymann in THE WIDENING GAP: WHY AMERICA’S WORKING FAMILIES ARE IN JEOPARDY AND WHAT CAN BE DONE ABOUT IT, 2000, Basic Books).

<sup>19</sup> *See, e.g.*, National Partnership for Women & Families, “Paid Sick Days Are Good for Children’s Health,” Fact Sheet, Last Accessed on Nov. 2, 2010 at [http://www.nationalpartnership.org/site/DocServer/PSD\\_FactSheet\\_ChildrenHealth\\_080926.pdf?docID=4182](http://www.nationalpartnership.org/site/DocServer/PSD_FactSheet_ChildrenHealth_080926.pdf?docID=4182)

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<sup>20</sup> Kay and Gray, “The Stress of Balancing Work and Family,” p. 9.

<sup>21</sup> *Ibid.*, pp. 8-9.

- <sup>22</sup> Jean Flatley McGuire, Phyllis Brashler and Kaitlyn Kenney, “Promoting Children’s Well-Being: The Role of Workplace Flexibility,” *Workplace Flexibility 2010*, Georgetown University Law Center, p. 7.
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- <sup>24</sup> The American Academy of Pediatrics, “Policy Statement: Breastfeeding and the Use of Human Milk,” *PEDIATRICS*, Vol. 115, No. 2, Feb. 2005, pp. 496-506, *available at* <http://aappolicy.aappublications.org/cgi/content/full/pediatrics;115/2/496>.
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- <sup>32</sup> Workplace Flexibility 2010, “Meeting the Needs of Today’s Families,” p. 8 (reporting that “CIGNA’s corporate lactation program resulted in a costs savings of \$60,000 in reduced absenteeism among breastfeeding mothers, and an additional \$240,000 in reduced health care expenses for the employees and their children.”).
- <sup>33</sup> National Alliance for Caregiving in collaboration with AARP, “Caregiving in the U.S. 2009,” November 2009, pp. 12, 52-53.
- <sup>34</sup> *Ibid.*
- <sup>35</sup> Pitt-Catsoupes, Matz-Costa, and Besen, “Age & Generations: Understanding Experiences at the Workplace,” The Sloan Center on Aging & Work at Boston College, March 2009, p. 17, *available at* <http://bc.edu/research/agingandwork/publications.html>.
- <sup>36</sup> *Ibid.*, pp. 13-14.
- <sup>37</sup> The MetLife Mature Market Institute and National Alliance for Caregiving, “The MetLife Study of Working Caregivers and Employer Health Care Costs: New Insights and Innovations for Reducing Health Care Costs for Employers,” Feb. 2010, pp. 15-17.
- <sup>38</sup> *Ibid.*, p. 14.
- <sup>39</sup> *Ibid.*, pp. 24-25 (calling for paid time off programs, telecommuting arrangements, and flexible schedules for unpaid caregivers). See also Ari Houser and Mary Jo Gibson, “Valuing the Invaluable: The Economic Value of Family Caregiving, 2008 Update,” AARP Public Policy Institute, Nov. 2008, p. 7, *available at* [http://assets.aarp.org/rgcenter/il/i13\\_caregiving.pdf](http://assets.aarp.org/rgcenter/il/i13_caregiving.pdf) (concluding that a range of family-friendly workplace policies are necessary in order to prevent caregivers from becoming overwhelmed and risking their own health).
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- <sup>41</sup> National Alliance for Caregiving, “Caregiving in the U.S. 2009,” pp. 12, 52-53 (calculating that absenteeism attributed to family caregiving costs U.S. employers more than \$5 billion a year, while partial absenteeism costs employers \$1.9 billion a year and workday interruptions due to caregiving responsibilities cost \$6.2 billion a year).
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- <sup>44</sup> *Ibid.*, p. 6.
- <sup>45</sup> ---, “2008 Update,” at pp. 1-2 (estimating that the total amount of Medicaid spending in 2007—including federal and state contributions for medical and long-term spending—was \$311 billion).
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