

Impact of Parent/Caretaker Employment on Child Health



Health and Policy Context

Evidence suggests *employment* can be a multifaceted *social driver of health* that affects adult employees as well as their families and children. In the United States, adults may rely on their job for both their income as well as their own and their family's *health insurance*. Moreover, employment can provide individuals with a sense of *meaning* and social connection.¹ As such, children can be profoundly affected by their parents'/caretakers' employment situation, especially if parents/caretakers are *precariously employed* (i.e., insecure, uncertain and unstable *employment*), unemployed, or lack "*good jobs*" (i.e., jobs with equitable, respectful workplaces that provide economic stability and mobility).² Notably in 2021, more than 21 million U.S. children's parents/caretakers lacked *secure employment*.

Level of Education is associated with employment disparities, so *workforce development programs* can help individuals learn new skills to become qualified for in-demand jobs. Several federal initiatives support workforce development. For example, from July 2021 to June 2022, more than 400,000 individuals received *career* or training services through the federally funded *Workforce Innovation and Opportunity Act (WIOA)* (Pub. L. 113-128)³. Congress continues to discuss additional policies that promote workforce development, and coalitions such as the *Healthcare Anchor Network* continue to support policies that build local economies through inclusive hiring and workforce development programs. In addition to federal policy solutions, the private sector, including *health systems* and other stakeholders, has implemented initiatives to develop and elevate the workforce in their communities.

This issue brief highlights how parents'/caretakers' steady participation in safe and stable *work* environments can impact their children's health and well-being.

Impact of Stable Workforce Participation on Child Health, Development and Well-Being

Parent/caregiver workforce participation can determine family income, health insurance status, and parental well-being (e.g., physical, mental health), all of which can profoundly impact child physical and behavioral health, development and well-being.

Disproportionate Impact on Disinvested Communities and Communities of Color

Precarious employment disproportionately impacts women and *people of color*. Often people who are impacted by precarious employment reside in historically disinvested communities, which may lack *employment opportunities*, as compared to wealthier neighborhoods. Furthermore, those who live in these communities, regardless of race, may have insufficient access to transportation to commute to other areas with better work opportunities.



Well Beyond Medicine

Impact of Stable Workforce Participation and Good Jobs on Household Income

One *study* suggests almost half of U.S. families with young children have faced a high risk of falling into poverty within the first six years of their child's life due to precarious employment. Moreover, *low-wage jobs* are commonplace in the U.S. *Another study* showed more than one-third of full-time working families do not earn enough to cover basic needs, and one-quarter of working families do not have access to health insurance. Not only may families with *low-incomes* struggle to afford basic needs (e.g., food, housing), but children who experience *poverty* during the first six years of life are also more likely to receive low-quality education. They are also less likely to enter a steady, well-paying job, and more likely to have poorer mental health.

Impact of Stable Workforce Participation and Good Jobs on Child Health

Parent/caretaker employment in a high-quality, well paying job can profoundly impact child health and well-being. Specifically, parent/caretaker *economic security*, directly influences child health, development and educational outcomes.

- **Physical Health:** A growing body of evidence suggests parents'/caregivers' employment status can directly impact their children's physical health. For example, a 2020 survey showed that mothers experiencing unemployment report high rates of *skipped or delayed medical appointments* for their children. Moreover, another study shows unstable work schedules can hinder parents'/caretakers' ability to effectively manage their *child's asthma* by disrupting their ability to monitor their child's symptoms, administer medication, and schedule doctor's appointments. The study also found children with parents'/caretakers facing unpredictable work schedules are more likely to experience increased asthma attacks and emergency room visits, which is likely due to greater household stress and economic insecurity. Lastly, maternal *precarious employment* is associated with an increased risk of their children being overweight or obese, attributable to lack of time to coordinate a nutritious diet and difficulty affording healthy foods.
- **Social, Emotional and Mental Health:** *Research* demonstrates an association between parents'/caretakers who have a positive work experience (i.e., feeling in control, effective, challenged, supported at work) and positive child development and behavioral health outcomes. Parents'/caretakers who are precariously employed are more likely to experience *job stress* than individuals who are engaged in less precarious work, which can impact the whole family, including their *children's well-being*. Moreover, *families* experiencing job loss report higher levels of stress across both parents'/caretakers and adolescents. Studies also show parental unemployment is associated with higher risk of *adverse childhood experiences*, such as risk for neglect and child maltreatment, which can have long-term behavioral health impacts.⁴
- **Social Drivers of Health:** Precarious employment and employment in jobs that do not pay *family-sustaining wages* can impact key social drivers affecting child short- and long-term health and *well-being*, such as *food* and *housing* insecurity and academic performance. For example, one study showed that children in households facing long-term unemployment are more prone to experience poverty, leading to *food insufficiency* and difficulties in meeting housing payments. These adversities can also extend to a child's educational experience, including *increased school absence* rates. The long-term implications include lower chances of college attainment and a higher likelihood of *unemployment or lower wages* in adulthood, creating a cycle of socioeconomic challenges that can span generations.

Conclusion

This brief highlights the profound and multifaceted impact of parent/caregiver workforce participation on child health and well-being. Families who experience precarious employment may experience other barriers to employment (e.g., low levels of education) making it difficult to overcome a *cycle* of poverty. They may also experience other negative social drivers of health, compounding challenges to their health and well-being. *Evidence* suggests that increasing the number of good, well-paying jobs can increase workforce participation and overall economic vitality. The public and private sector can play an important role in increasing opportunities for secure, high-quality employment by supporting workforce development in their communities. The impacts of such efforts could have lasting impacts on the health and well-being of families and children.

Endnotes

1 Over 70% of workers and 53% of children are covered by employer-sponsored [health insurance](#).

2 The [definition](#) of “good job” varies. In 2022, the [Good Jobs Champions Group](#), convened by the Families and Workers Fund and Aspen Institute Economic Opportunities Program, released a new, working definition of “good job” that focuses on economic stability (e.g., stable, family-sustaining pay, sufficient and accessible benefits, fair scheduling, safe working conditions), economic mobility (e.g., opportunity to advance, training, wealth-building opportunities), and equity, respect and voice (e.g., transparent, inclusive culture, ability to improve workplace).

3 WIOA is up for reauthorization in 2024.

4 This study does not specifically account for caregiver (i.e., nonparent caregiver) unemployment. Study results demonstrate that paternal unemployment and “any parental” unemployment is associated with increased risk of ACEs. Maternal unemployment is not associated with increased risk of ACEs. “Any parental” unemployment is defined as either parent, both parents or undefined.

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