



Voices of Child Health in Chicago REPORT

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REPORT HIGHLIGHTS

Among employed parents in Chicago, nearly four in ten did not receive paid leave of any kind.

One out of every six employed parents said that in the previous week there were times when they needed to take off work but they did not.

Children with worse health status were less likely than children with better health status to have a parent who received paid leave at their job.

Parental Paid Leave and Youth Health in Chicago

Paid leave enables employees to take time off for illness or medical care for themselves or a family member without wage penalty. For working parents, paid leave provides a mechanism to care for sick children and attend children's routine and illness-related medical appointments. To learn more about parental paid leave and child health, Ann & Robert H. Lurie Children's Hospital of Chicago teamed up with the Chicago Department of Public Health (CDPH) on the 2017–18 Healthy Chicago Survey, Jr. We asked 1,002 Chicago parents and guardians (referred to here as parents) about their employment and paid leave, and about the health status of their children. For more information about these issues, please go to our informational resources at luriechildrens.org/ParentalLeaveYouthHealth.

A large proportion of employed parents did not receive paid leave

Seventy-one percent of parents in our sample were employed. Among employed parents, nearly four in ten did not receive paid leave (39%) (Figure 1), which is similar to parental paid leave access rates in other research.¹ Furthermore, 17% of employed parents said that in the previous week there were times when they needed to take off work but they did not.

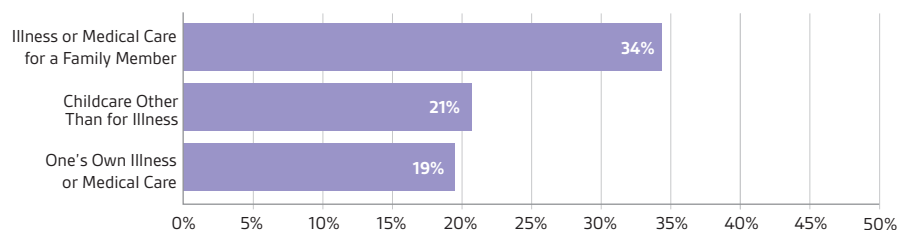
Figure 1. Proportion of employed parents who did not receive paid leave



Reasons that parents needed to take time off work

The most common reasons that parents needed to take time off work were for illness or medical care for a family member such as a child (34%), childcare other than for illness (21%), and one's own illness or medical care (19%) (Figure 2). The most common reason that parents did not take time off work when they needed to was that they could not afford the loss in income (31%).

Figure 2. The most common reasons that parents needed to take time off from work



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Youth health status and parental employment and leave

We asked parents about the health status of each of their children using a five-option scale. Children whose health was “excellent” or “very good” were grouped as having “better” health status. Children whose health was “good,” “fair,” or “poor” were grouped as having “worse” health status. Among youth with better health status, 73% had a survey-responding parent who was employed, compared to 54% of youth with worse health status. Other research has shown that having a child with worse health status (e.g., because of a chronic condition) is associated with reduced employment of mothers and fathers.²

Importantly, children with worse health status were less likely to have a survey-responding parent who received paid leave at their job (45%) than children with better health status (64%).

Seventeen percent of youth with better health status and 15% of youth with worse health status had a survey-responding parent who needed to take time off work in the previous week but did not. This suggests that not being able to take time off work when one needs to is a universal challenge for all parents, regardless of their child’s health status.

Other research has shown that when parents have paid sick leave, their children are more likely to receive the flu vaccine and an annual medical checkup, and less likely to receive delayed medical care and be taken to the emergency room, compared to children of parents who did not have paid sick leave.³

Youth health status and family income

Children from families with higher income were generally healthier than children from families with lower income. Among children whose family income was at least 400% above the Federal Poverty Line (FPL), 92% had better health status, compared to 81% of children with family income between 100–399% of the FPL, and 76% of children with family income lower than 100% of the FPL.

Conversely, among parents in families that are <100% of the FPL, 34% have access to paid leave compared with 55% of parents in families that are 100–399% of the FPL, and 82% of parents in families that are at least 400% above the FPL. This is consistent with other studies that found children from lower-income families are less likely to have parents with access to paid leave.¹ Additionally, by income level, the lowest-income workers are the most likely to have irregular work schedules.⁴ In turn, irregular work schedules are associated with adverse health and social outcomes for workers, such as stress and work-family conflict.^{5,6} Irregular work schedules can be particularly difficult for parents who must secure childcare, sometimes at a moment’s notice.⁷

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HOW THE SURVEY WAS CONDUCTED

This report presents findings from the 2017–18 Healthy Chicago Survey, Jr., administered by the Chicago Department of Public Health in collaboration with Lurie Children’s. The survey was administered via phone interviews from December 2017 through June 2018. The sample consisted of 3,310 adults in Chicago, 1,002 of whom were the parent, step-parent or guardian (referred to as “parents” in this report) of at least one child under 18 years old living in the household. The survey cooperation rate was 18%. All analyses were conducted with statistical weighting so that they are representative of the adult population of the City of Chicago during the time period of data collection.

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