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Working and Caring for a Child with Chronic Illness: Workplace Concerns

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ABSTRACT

This paper shares some findings from the initial, qualitative stage of a larger, national study currently being undertaken in Australia, exploring the experiences of parents who are working full time and caring for a child with chronic illness. The findings highlight the limited support that most parents receive in their workplace, especially from employers. In-depth interviews revealed the negative and unsupportive attitude that employers had towards these parents. The provision of flexible work arrangements and leave entitlements, which were critical supports for these parents, were rarely offered by employers. Respondents reported high levels of frustration and difficulty balancing their dual roles.

Keywords: Chronic illness; Employment; Flexibility; Family-friendly workplace

INTRODUCTION

In recent years, several demographic trends have impacted on the caring responsibilities of parents. The rise in single-parent families (Bianchi, 2000; Australian Bureau of Statistics [ABS] 2004), the increase in women employed outside the home (United States Bureau of the Census, 1992; ABS, 2004) and the rise of dual-earning families (Hughes, 1998; Lewis, Kagan & Heaton 2000) have increased the number of parents who are entering the workforce. For these parents, especially those working full time, balancing work and family life has been a challenge. Many organizations, in an attempt to ease the pressures on these parents, introduced specific policies referred to as family friendly policies. These include parental leave, childcare assistance and reduced working hours (Hogg & Harker, 1992; Forth et al, 1997). Unfortunately, these policies and practices have tended to be targeted towards parents, especially mothers, of young and healthy children (Lewis et al, 2000). The needs of parents of children with chronic illness have received little or no attention.

Children with chronic illness represent a significant proportion of the world population. Estimates indicate that approximately 31% of children under the age of 18 years have one or more chronic illness (Melnyk et al, 2001; Vickers, Parris & Bailey, 2004). More specifically, in Australia, there are almost 300 000 children aged between 0 and 14 years (7.5%) that have a disabling chronic condition, most of whom are cared for at home (Australian Institute of Family Welfare [AIHW], 2002). Although there is much evidence that highlights the stresses and strains facing parents of children with chronic illness most of the

research has neglected the issues facing such parents who are also working full time. This paucity of research is largely due to a prevailing assumption that parents, especially mothers of children with chronic illness, are not or should not be employed (Kagan et al, 1998; Vickers, 2006). However, these parents do need to work for the same economic, psychological and social reasons as other parents (Kagan et al, 1998). A recent Australian study showed that out of 547 parents who cared for a child with chronic asthma, 85 % of fathers and 45 % of mothers were in full time employment (Mihirshahi et al, 2002).

The fact that parents of children with chronic illness do work poses the question whether employers are assuming their needs are similar to those of parents with healthy children. The few studies that have tackled this issue have shown that the stressors involved in working and caring for a child with chronic illness are tremendous and those parents involved require much greater support (Freidman et al, 1995; Lewis et al, 2000; Vickers, 2006). The most commonly cited difficulty facing these parents has been locating appropriate and affordable child care. Although parents of healthy children also need to deal with issues of child-care quality and cost, parents of children with chronic conditions face additional constraints, such as limited availability of child care due to the inability or unwillingness of child-care providers to accept children with chronic conditions especially those requiring constant supervision (Berk & Berk, 1982; Chang & Teramoto, 1987), logistic problems like distance from home, and the lack of well trained caregivers that can provide optimal care for their child (Freeman et al, 1995; Cuskelly, Pulman & Hayes, 1998; Chavkin et al, 2002). The situation is further aggravated during school holidays when working parents need to make alternative arrangements to care for their child.

These parents also face the challenge of attending their child's medical appointments and meeting job responsibilities. Frequently, due to time restrictions, parents must rely on their sick leave entitlements to care for their child and in some cases even have to choose either missing work or attending medical appointments. To add to their woes is the huge financial burden that these parents endure caring for their child. Reports indicate that out of pocket expenses are *three times higher* for parents of children with severe chronic illness compared to other parents which explains why many of these parents work full time

(Leonard, Brust & Sapienza, 1992; our emphasis). In order to cope with the challenges of caring for a child with chronic illness parents are forced to modify their working arrangements. Studies have shown working parents choosing part time work, moving from the private to the public sector (Vickers, 2006), cutting back on their paid hours of work, as well as rearranging work schedules, taking time off and, in some cases, even ceasing work in order to meet their child's needs (Hirst, 1985; Jutras & Veilleux, 1991; Barnett & Boyce, 1995; ABS, 2000; Leiter et al, 2004).

Having flexible work arrangements seems to be crucial for these parents to balance their dual roles. Unfortunately employers who acknowledge the importance of flexibility often assume that these needs are short term and warranted only during childhood years of parenting (Lewis et al, 2000). The work-family needs of parents of children with chronic illness, however, are more long term and more intense than other parents. Furthermore, for working fathers who are increasingly involved in caring duties, their need for flexibility are often not recognized at work in the same way as mothers (Arksey, 2002). It is evident that parents of children with chronic illness are lacking support especially in the workplace. There is an urgent need for further investigation into this area of family life in order to identify avenues, especially for employers, where further support can be provided. In this paper, this issue will be addressed by drawing on qualitative findings from a study exploring the experiences of parents who are working full time and caring for a child with chronic illness. More specifically, the experiences of these parents' in their workplace and their relationship with employers and colleagues will be examined. Implications drawn from these findings will then be proffered to assist organizations in meeting the needs of these parents.

METHOD

The study involved qualitative, in-depth, semi-structured, phenomenological interviews exploring the experiences of parents who are working full time and caring for a child with chronic illness. This forms part of a larger mixed method study.

Recruitment

For inclusion in this study, parents had to be working full time or equivalent, taking care of a child,

defined as 18 years or younger who has a chronic illness, living in a capital city or metropolitan area of Australia, and be fluent with the English language. The term “full time or equivalent” was used to include parents who were self-employed, undertaking multiple part-time/casual roles, full-time study, or were in the full-time permanent paid labour force. Chronic illness was defined as a significant illness or disability, which may be physical, emotional or cognitive and continues for at least six months, requiring ongoing medical intervention to treat acute episodes and/or ongoing problems (Vickers, 2005; 2006). Purposive sampling was used to select parents for the study. Parents were recruited through informal contacts of the study investigators, word of mouth and snowballing techniques (Watters & Biernacki, 1989). Recruitment was also carried out through a large children’s hospital in Sydney, Australia. Nine females and three males were recruited for this study. The ages of the parents ranged from 30 to 50 years with an average age of 42. All parents worked full time (or equivalent) with eleven of the parents having partners who also worked full time. Two respondents had to care for another adult as well. The children in this study aged from 3 to 18 years and had diverse chronic conditions.

Data collection

In-depth, semi-structured interviews were conducted, taped and transcribed verbatim. Brief demographic details about the child and the parents were collected prior to the commencement of the interview. During the interview, parents were asked about their lived experience with special attention directed to the identification of areas where support was required. A number of focus areas were used to guide the discussion including: caring responsibilities; getting carers; financial implications; family and partner relationships; dealing with professionals; work life; workplace conditions; grief/sorrow; sources of information; and practical needs. Probing and story telling were also used to encourage parents to talk more about their experiences.

Data analysis

All interviews were transcribed and analysed using thematic analysis (Van Manen, 1990). Transcripts were read and coded using NUD*IST Vivo software (NUD*IST Vivo, 1999). Significant statements from each transcript were extracted, meanings formulated and organised into various themes. Evidence of these themes was explored in each of the transcripts. Sub themes were also identified.

FINDINGS

Several themes emerged from the thematic analysis of the data. Reported here are the parents' vivid experiences from the theme "Workplace". Exemplars from the analysed text are used to illustrate sub themes. Parents are identified with pseudonyms to protect their privacy.

Workplace

There were mixed feelings among parents regarding their work experiences. Four of the twelve parents interviewed were content with their current employment while the remaining eight voiced serious concerns. For these parents, the main factors in their workplace that affected their work-family balance were flexible work conditions, the attitude of employers, available leave entitlements and existing support services.

Flexible work conditions and attitude of employers

The flexibility to be able to change working hours or their place of work to suit their individual needs was vital for all parents interviewed to help maintain a work-family balance. Unfortunately, only a handful of these parents had jobs that offered this flexibility. Interestingly, most of the parents who had family-friendly jobs were in the government service. There seemed to be a general consensus among these parents that private organisations seldom acknowledged their family situation and rarely provided the same flexibility that government jobs offered. David, who had a son with cerebral palsy, struggled for numerous years working for various private organisation before entering the government sector where he was able to modify his working arrangements to meet his family responsibilities:

David: My current job as such provides you the flexibility because one of the things is, it is a family friendly job and you can work in between 7.00am-7.00pm. In a 12 hour day, you can work anytime the required hours or you can work the minimal ... then the other day you can work more hours. So it is flexible ... but in the earlier jobs, no. The private employer, definitely, there is no flexibility ... because they have to satisfy their clientele and they have to look for their business to grow. I mean they probably empathize with you but they say, unfortunately, their hands are tied.

Similar sentiments were voiced by Jason and Michelle who both worked for several years in the government sector juggling their shifts in order to care for their son who had a terminal genetic disorder. These parents were extremely satisfied with their working conditions and were clearly grateful to their employers for offering flexibility:

Researcher: Are you happy with your work conditions?

Michelle: I am, I am lucky!

Jason: You are doing a government job but, like, you couldn't expect a private enterprise to be supporting us the way that you get supported there. Really you can't have people swap their shifts at the drop of a hat, you know, at a day's notice or something. You can't expect that in private enterprise. So, if we were in any other type of organization we would be in a lot of trouble.

Parents highlighted that the provision of flexibility was often dependant on the attitude of their employers. Those employers who recognized and understood the strains of caring for a child with chronic illness were found to provide more latitude to parents. Furthermore, these employers were seen as more approachable particularly during emergencies where flexibility was most needed. For Rose, who was caring for a child with a severe developmental disability, having an understanding employer provided the comfort and reassurance she so dearly needed, especially when her child's condition deteriorated and needed to be hospitalized:

Rose: She [Her manager] was very family orientated and was very supportive ... so I always felt very comfortable if the wheels happened to fall off. And I could go to her and say, "I actually need to have a week off because my family's falling apart". She would go, "Yes".

Unfortunately such positive experiences were limited. Most parents felt their employers neither acknowledged their family situation nor had any comprehension about the unrelenting stressors that were involved in caring for a child with chronic illness. This lack of understanding was evident as employers, knowing the circumstances of these parents, still offered little flexibility. For example, David received no flexibility in his previous causal jobs and found it extremely difficult balancing his work and family tasks

especially during the initial stages of his son's diagnosis when frequent hospital visits were required:

David: It is highly difficult because although they [His employers] have got proof that you have got a problem, they say it's not their business requirement, they cannot compromise.

Employers seemed to assume that these parents could easily separate their family life from work life. As some parents pointed out, the demands of caring for a child with chronic illness made it impossible for them to neglect their family responsibilities even while they were working:

Leanne: They have this funny attitude, like, they think that your job is your whole life and they just don't understand that it doesn't mean that you don't care about your job but that it is not your whole life and that you do have other responsibilities.

Susan: She [Her employer] doesn't have this comprehension that you still have a child to care for even though they are in hospital. You can't not care for them and stay home and do all this work.

Even in some government organisations that claimed to have family friendly policies, the attitude of employers played an important part in putting these policies into practice. This was reflected in Leanne's experiences with her nurse unit manager. Leanne, who had three children, two of whom had a chronic illness and a husband who was suffering from post traumatic stress, was the sole carer and earner of the family. Furthermore, financial constraints, lack of family support and difficulty in getting affordable child care meant that Leanne had no choice but to stay at home during the day and care for her children. This predicament forced her to constantly request night shifts at work whenever the rosters were prepared. Often, however her manager would deny these requests and sometimes even change her shifts to day time at short notice without taking into account her family commitments. This angered Leanne and exacerbated her problems, aggravating an already stressful situation:

Leanne: Work can be annoying because, working for the State Government in disabilities, they get really uppity about, "You shouldn't be only working nights you should be working days as well." ... they were very family unfriendly employers. They were always saying, "You have to come and work this certain shift. Every one should work all shifts". Well that is not family

friendly employment ... because they say you have to do a seven o'clock start and I can't do it. So, I have to get like my poor 80 year old mother-in-law to come and stay with the kids and, like, she can't mind him. So, you know, it is a big drama.

This uncaring and inconsiderate attitude of Leanne's employer was further exhibited when she and her husband, who used to work in the same hospital, were often rostered on the same shifts making it impossible for them to care for their children:

Leanne: My husband and I were working together in the same place and they didn't even always coordinate that ... they wouldn't necessarily roster to, like, coordinate.

Some parents also recalled instances where employers were unsympathetic, making comments that were hurtful and thoughtless whenever parents took leave or modified their working arrangements. It was clear that these employers had no empathy for these parents nor did they acknowledge their precarious position. For example, Susan who had a child with a terminal illness, gave an account of her employer's response when she requested a few days leave when her son's condition deteriorated and he had to be hospitalized:

Susan: My immediate boss is like, "So, that means you are going to be away for a couple of days?" Not a caring way that she talks. It is like an inconvenience to her. Even when I am taking work home on the weekend to do, she was like, "Well, will you get all this done on the weekend?"

For Molly, the insensitivity and lack of understanding from her manager was hard to comprehend despite being a dedicated employee and fulfilling all her job responsibilities:

Molly: The head lady would say, "What would happen if you weren't around? You have a job here. You have a responsibility." It is like they are paying for you out of their own pocket to do the job. If I wasn't doing the job I could say, "Well, fair enough" but I *was* doing the job.

Even during emergencies, parents seemed to receive little or no understanding from their employers. This was reflected in Jane's experiences of trying to juggle full time employment and care for a child with a severe muscular disorder. Due to the severity of her son's condition, Jane had to rely on professional

carers like Home Care while she worked. Unfortunately, these services were unreliable and often resulted in her leaving work unexpectedly whenever carers were unavailable to care for her child. These disruptions were seen as unacceptable by her employers:

Jane: They knew the circumstances before I went there and I had organised so I could be there for the whole day, until 4.30pm ...But then it was the days like, if I got a phone call in the afternoon that Home Care is not here, I had to go home. Then I had to go upstairs and say, “I have got to leave. Home Care has not shown up. I have to go”...They got frustrated with that. They got very frustrated that I had to go.

Shockingly, one employer even resorted to drastic measures to limit the flexibility in the workplace. As Leanne explained, her manager would often intimidate and threaten serious consequences for her whenever she requested night shifts instead of day shifts. These actions threatened her fragile work-family life causing further unnecessary stress and leaving her feeling scared and helpless:

Leanne: When we had this other boss, she would always write these intimidating letters saying, “You must work days and we will stop you working nights and make you work 24 hour a day rotating shifts. No set shifts.” And things like that. And the silly thing was they didn’t have anyone wanting to do the shifts that I was doing but she still did it. The mentality is like put a fear into you like, “We will make it harder for you to work,” and saying you have to do things that are totally unrealistic ... it causes a lot of unneeded stress.

It was clear that Leanne’s employer had no regard for her family situation and was actually making it harder for her to manage her work and family responsibilities. Leanne’s traumatic experience exemplifies how the flexibility offered in the work place was intertwined and dependant on the attitude of employers.

Leave entitlements

The availability of leave entitlements such as sick leave, Carer’s leave, annual leave, flex leave and even family and community services (FACS) leave played a vital part in alleviating some of the stress

experienced by these parents. Many relied on these various forms of leave to attend the numerous medical test and appointments that were required for their child as well as to care for them during emergencies, whenever professional carers were unavailable, or when their child had to be hospitalised. For Vicky, having these leave entitlements enabled her to cope with the unending medical appointments that were needed during her daughter's illness exacerbation. Vicky's appreciation of her employer's understanding and willingness to let her take leave frequently was clearly evident:

Vicky: I will apply for parent care [leave] ... I will probably just apply for half a day caring or maybe nothing, because they [her employers] are so good. I am even happy to have it unpaid, you know, because they really reciprocate so much.

Similar feelings of content were also voiced by parents who worked in organizations that offered the flexibility of earning extra leave and even converting their unused entitlements to other leave:

David: There is a flexibility which is brilliant because there is a provision where I can work a bit more in one week and I can build a little bit of flex [leave] so when I'm in need I can take it.

Jason: You don't have to use your own sick leave because you can convert that into Carer's leave and you can use it all the time. We are lucky to have that type of thing.

Unfortunately not all parents interviewed had positive comments about leave entitlements. Those who worked casually or were employed on a contract basis were rarely provided any leave and often lost pay whenever they took time off to care for their child. This annoyed parents, especially those who frequently took time off, causing further financial burden for these families. Some parents that were eligible for leave entitlements voiced concerns about the bureaucracy and rigid policies surrounding taking leave that existed in their work place. Cynthia, who had a child with a muscle disorder, found it pointless apply for Carer's leave whenever her daughter required attention, since it was not regarded as an additional entitlement but, rather, came out of her sick leave. What irritated Cynthia even more was the need to provide detailed documentation every time such leave was requested:

Cynthia: It's hard because even with Carer's leave, that comes out of your sick leave entitlement.

It's not additional. And when I have time off for Chantelle [her daughter] I apply for it as sick leave because with sick leave, I don't have to provide documentation. If I apply for Carer's leave, I've got to provide documentation.

One parent also pointed out that although leave entitlements were available it was still dependent on their employer's discretion. Leanne explained how her previous manager often rejected her leave requests without any legitimate reason, causing her much anguish. Leanne's experience illustrated the unsympathetic and inconsiderate nature of her employer in providing basic leave entitlements:

Leanne: It depends upon who is the individual boss I suppose but they are not necessarily family orientated when they should be. The lady we had before ... she didn't like to give out FACS leave. You know, even if you had a medical certificate, she still didn't want it to come out of your holidays even though you should be entitled to FACS leave. She would just knock it back.

Existing support services

All parents interviewed clearly cherished any form of support that was offered in their work place. Although the support received was limited, it was greatly valued by these parents and provided some relief to their highly stressful lives. The most commonly mentioned source of support in the workplace was colleagues, who were seen as accommodating and helpful, especially in times of emergency, providing much needed comfort and reassurance:

Rose: I actually feel quite safe and quite comfortable; that if there was a crisis related to my daughter, I would get whatever it was that I needed to get on and fix that up, without a doubt.

Some parents were able to talk openly to colleagues and confide about personal problems which was great source of emotional support for them. Others, like Jason and Michelle, received crucial financial assistance through charity drives organized by their colleagues which helped them care for their child with a terminal illness:

Jason: Our main source of income was through our colleagues doing a charity drive for us. That

is how we were able to survive. Otherwise, we had no way.

Few parents also highlighted the importance of informal support in their workplace. Being able to make and receive personal phone calls and even being allowed to bring their child into work during emergencies was greatly appreciated by these parents and reduced the anxiety these parents felt at work:

Jane: In circumstances where I have no choice they [her employer] have been really good. I can stick him [her son] in the corner and ... he will not stop me from doing my work.

Molly: If someone rings up and says, “There is something wrong with Mark” [her son], the woman at the front would make sure someone would find you. So, yeah, I am very, very lucky for that.

Surprisingly, few parents talked about the importance of counseling services at work. For many, these services were unavailable while the few that had these facilities either never utilized them or felt they were not beneficial, “*I never used it [counselors] because I didn’t find it is going to help me.*” (**David**)

DISCUSSION AND IMPLICATIONS

This study offers valuable insight into the experiences of parents of children with chronic illness who are working full time in Australia. It has provided us with a glimpse into their working lives and has identified several key points. Firstly, the findings illustrate that having flexible arrangements and access to leave entitlements in the workplace is vital for these parents to maintain a work-family balance. Furthermore, it has been shown that having a supportive work environment can help alleviate some of the stressors facing these parents. There is an extensive body of literature that highlights the importance of supportive work conditions. Findings have shown that one of the major factors contributing to achieving a positive work/family balance is the availability of family-friendly work conditions like flexible start finish work times, the ability to take time off for appointments, reasonable working hours and the availability of parental leave (Lewis et al, 2000; Gray & Tudball, 2002; Gornick & Meyers, 2003; Richardson & Prior, 2005). Furthermore, according to Pocock (2005), one of the foundations of a successful work/family

balance adequate employment with basic leave entitlements, predictable hours and pay.

Unfortunately, for most parents interviewed in this study such working conditions were never provided. The findings confirm and extend the work of Vickers (2006), who highlighted the limited support that parents of children with chronic illness are receiving in their workplace, and the enormous anxiety and tension they endure trying to maintain full time employment. Although most working parents experience similar difficulties in their work place, it is exacerbated in parents of children with chronic illness. What distinguishes these parents from other working parents is the intensity and complexity of arrangements required to balance their work and caring responsibilities. The need to constantly monitor their children, especially those with severe chronic conditions coupled with the difficulty in locating appropriate and affordable child care makes it vital for them to have flexible work conditions. The lack of support received by these parents could be attributed to the fact that many workplaces in Australia have scarcely altered their work conditions over the years and recognized the major family responsibilities that many workers have as well (Richardson & Prior, 2005). In addition, friendly benefits have not been universally available, and those that are, have tended to be concentrated in the public sector (Gray & Tudball, 2002).

This study has also shown that the lack of support in the workplace can be attributed to the negative attitude and mentality of employers. The reluctance of many managers to provide flexibility and honour leave entitlements seems to stem from their assumption that work and family life can and should be kept separate (Lewis et al, 2000). Another possible reason for employers limiting flexibility, even when supportive policies exist, is their assumption that the ideal worker is one who works full time, often for long hours, and does not allow the family to interfere with work (Lewis & Taylor, 1996; Lewis, 1997). This study has confirmed that such assumptions are wrong, especially for parents of children with chronic illness. Due to the unpredictability and unrelenting nature of chronic conditions it is impossible for these parents to avoid their family responsibilities even in their workplace. The findings further show that parents who are offered flexibility are willing to reciprocate by working harder, forfeiting their leave and

even taking work home, all of which challenge the notion that parents with family commitments are not committed to their jobs and are not “ideal workers”.

There is an urgent need for employers to change their mindset towards parents of children with chronic illness and provide more support to them in the workplace. As the survival rates of children with chronic illness improve (Gibson 1995) and more parents enter into the work force (Lewis, Kagan & Heaton 2000), it is clear that employers can no longer be inconsiderate and unsympathetic to these parents and ignore their needs. Organizations need to be educated about the needs of parents of children with chronic illness who are working full time and realize that their support needs are far greater and more complex than other parents. Appropriate acknowledgement may result in greater support for these parents. Employers also need to realize that neglecting the needs of these parents is not beneficial to their organization. A lack of employer support can create anxiety for these parents and reduce their morale and effectiveness at work. As one parent said, *“They have this silly attitude that if people are unhappy they will get more work out of them but it doesn’t work that way”* (Leanne). Instead, if employers provided a more supportive workplace, parents could make a full contribution at work and improve the productivity of the organization. Furthermore, it has been shown that diverse experiences and commitments like caring for a child with chronic illness can enrich the lives of people and enhance their work force contributions by providing them a greater understanding of a range of clients or customers (Hall & Parker, 1993; Raabe, 1996). This seems quite relevant especially in the context of this study where most parents interviewed worked in the nursing and teaching industry, providing services to a variety of clients. A further advantage of providing support to these parents is the commitment and loyalty that these parents offer in return. This is supported in the findings which show that improving work conditions for these parents can be mutually beneficial to both parties. It thus seems logical and in the best interests of the organizations, even private organizations which are often labeled as “family unfriendly”, that employers change their attitude and become more caring and accommodating towards these parents so as to improve working relations in their workplace and maximize employee potential.

A shift in thinking will find employers more willing to implement supportive policies in the workplace. The present findings have highlighted various avenues where employers can provide extra support to families. These include offering flexible working hours, allowing changes of shifts on short notice, providing easier access to leave entitlements, allowing leave entitlements to be used for caring duties, allowing parents to leave work during emergencies, offering greater flexibility and entitlements for casual employees, providing informal support and offering professional counseling at work.

In addition to providing these services, Lewis and colleagues recommend the need to look beyond the workplace and provide greater support, both informal and formal, within the community (Lewis et al, 2002). Having affordable and appropriate childcare and greater flexibility among health care and other professionals can enable these parents to develop appropriate strategies to manage their multiple commitments. Lastly, the government can also play a vital role in supporting these parents by providing incentives to employers who offer flexibility and passing legislation that is more family friendly like the recent amendments in the Australian health sector providing family and community services (FACS) and carers leave to casual employees as well (New South Wales Health, 2006).

CONCLUSION

This study has highlighted the limited support that parents of children with chronic illness who are working full are receiving in their workplace in Australia. We have also argued that this lack of support is largely due to the negative and unsupportive attitude that employers have towards these workers. There is an urgent need for employers to change their ingrained assumptions about the needs of these workers and adopt a more holistic approach in supporting them, both in and out of the workplace. Although these conclusions cannot be generalized, given the limited nature of this initial study, they do emphasize the need for further investigation into this neglected area of work life especially in the wake of the recently introduced workplace reforms in Australia (Workplace Relations Amendment [Work Choices] Bill, 2005).

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