Family and Medical Leave Act: 
Its Communicative Impact on Families and Employers

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The demographics of the American workplace have changed dramatically during the last fifty years. Since 1950, the number of female employees has tripled, while the number of men increased only 55 percent (General Accounting Office, 1992). Although women are traditionally the family care providers in American culture, nearly 60 percent of mothers with children under the age of six work outside the home (General Accounting Office, 1992; Monroe, Garand, & Teeters, 1995; Ramsburg & Robertson, 1996; Scharlach & Grosswald, 1997). Also, 85 percent of women will be pregnant during their working careers (U.S. Dept Labor, 1993b).

In all, 47 percent of American workers have some type of dependent care responsibility, whether for a child, an elder, or a disabled adult (Galinsky, Bond, & Friedman, 1993). Considering that by the year 2030, one out of every five Americans will be elderly, dependent care duties are expected to dramatically increase (AARP, 1993; Scharlach & Grosswald, 1997). Even employees without elderly family members may be called upon to provide on-site medical care for seriously ill family members, given that rapid advances in medical science coupled with a growing concern about the spiraling costs of medical care have led to a common policy of early release from hospital stays (Northouse & Northouse, 1992). Thus, seriously ill patients as well as patients recovering from surgeries routinely are sent home to recuperate under the care of a family member. Full recovery may require several days or months in a relatively helpless state. Obviously, employed family members may be called upon to care for these seriously ill family members.

Whether an employee needs family leave for the birth of a child, to nurse an ailing spouse, or to care for an elderly parent, most companies in the United States fail to provide workers with adequate time off to tend to family demands (Moskowitz, 1996; Ramsburg & Robertson, 1996). If family leave decisions were left to the discretion of individual organizations, some employees would receive excellent care, but many would be forced to choose between work and the family. Due to exigent family needs and the desire to provide uniform availability of at least minimum family and medical leave opportunity, the United States Congress passed and the President signed the Family and Medical Leave Act of 1993 (FMLA).
The purpose of this essay is to provide an analysis of the communicative issues related to the FMLA as it affects family needs. The analysis proceeds from a theoretical and social scientific perspective, not from a legal or political perspective. Specifically, the present essay explains the FMLA act itself as well as its limited implementation to date and then examines the problems inherent in its current, limited implementation, especially the potential, negative communicative impact on employers and families. Finally, several proposed revisions to the FMLA are presented and evaluated in terms of their ability to address the financial and communicative needs of both families and employers.

**The Provisions of the Act**

The FMLA provides both public and private sector employees, who have appropriate documentation, a minimum of 12 weeks of unpaid leave time under the following three circumstances: (a) a worker experiences a serious health condition that makes the employee unable to perform his or her job functions (Shaller & Qualiana, 1993, p. 8); (b) a worker provides needed medical care to an immediate family member with a serious health condition (U.S. Department of Labor, 1993a, p. 6); or (c) upon the birth of a child as well as the placement of a child in the worker’s home for adoption or foster care. The act also insures a continuation of workers’ health benefits, job guarantees, and notification of rights. Prohibited employer conduct includes refusing to authorize leave, discouraging an employee from using leave, denying benefits to employees taking leave, treating employees who use accrued paid leave for FMLA purposes differently than those who use paid leave for other purposes, and disciplining or terminating an employee for taking leave (Fitzpatrick & Topazian, 1995, p. 35-36).

Exempted from these provisions are private sector employers with less than 50 employees. Thus, approximately half of all workers in the U.S. are eliminated from FMLA coverage (Shaller & Qualiana, 1993, p. 6). Additionally, the act covers only employees who have been employed for at least 12 months and who have worked at least 1250 hours in the 12 months preceding commencement of the FMLA leave [i.e., a minimum of 24 hours per week] (Fitzpatrick & Topazian, 1995, p. 34).

It is important to note that the FMLA does not require employers to grant paid leave under the circumstances covered by the act. Various types of paid leaves otherwise available to employees may, however, be substituted for all or part of the unpaid leave period [of twelve weeks] (Shaller & Qualiana, 1993, p. 11). Thus, workers may use sick, vacation, and personal
days for circumstances covered by the FMLA, but employers are under no legal obligation to continue paying employees if their paid leave days run out prior to the 14 day leave period guaranteed by FMLA, nor are employers legally obligated to provide 14 days of paid leave in addition to accumulated sick, vacation, or personal days.

Much debate surrounded passage of the FMLA. Opponents argued that the FMLA would unnecessarily burden business, would be costly, and would strangle employer flexibility (Congressional Digest, 1993; Haas & Hwang, 1995). Opponents’ major fear was that this legislation would reduce business efficiency, hindering the competitiveness of American business (Scharlach & Grosswald, 1997). Additional concerns included the ability of employers to develop new work policies dealing with job guarantees and health benefits, as mandated by the FMLA, in a timely manner.

In reality, the FMLA has benefited employers. Many managers credit the alternatives offered by the FMLA with saving organizations money and contributing to a happier and more productive work force. In addition, some have reported an increase in productivity, retention levels, and a decline in employee recruitment costs (Haas & Hwang, 1995; Moskowitz, 1996; Scharlach & Grosswald, 1997).

Passage of the FMLA and preliminary reports of its success contribute to the appearance of a business climate that is supportive of family matters. However, extant FLMA implementation allows many employers to continue relatively restrictive leave-taking policies.

**Implementation of FMLA**

**Who Takes Advantage of FMLA Benefits and Who Does Not**

Following enactment, the Family Leave Commission sponsored a comprehensive, bi-partisan study of private sector employers’ experiences with family leave policies and the perceived impact of FMLA. The commission’s Employer Survey examined the extent to which the FMLA was implemented, the cost/benefit impact of the FMLA for employers, and the potential impact if the FMLA was expanded to include businesses currently not covered under the law. The survey involved telephone interviews with a person identified as most likely to be informed about family and medical leave policies at a stratified random sample of 1,206 private work places throughout the United States.

The Family Leave Commission (1996) survey revealed that while two-thirds of employers were in compliance with FMLA, approximately ten percent of the employers
discontinued some benefits during employee leaves. Of those discontinued benefits, one-third were health benefits-- a clear violation of the FMLA. The groups of workers most likely to have negative experiences with FMLA benefits, such as difficulty in arranging leave, dissatisfaction with amounts of leave taken, discontinued benefits, or concerns about job repercussions associated with the leave-taking, were women, non-whites, and nonsalaried employees (Family Leave Commission, 1996; Klerman & Leibowitz, 1994; Scharlach, & Grosswald, 1997).

Nonetheless, if the FMLA provided needed employee benefits, then organizations should witness dramatic numbers of employees taking family-related medical leave. Findings of the Family Leave Commission (1996) revealed that this simply was not the case. In fact, even when employers offered family leave, few employees took advantage of this benefit. To discover an explanation for the low employee use of FMLA benefits, the Commission conducted telephone interviews with 2,342 U.S. employees regarding their leave-taking experiences. The survey revealed that approximately 20 percent of respondents qualified for FMLA-type leaves. Of that 20 percent, half took leaves but did not recognize the leave as FMLA; generally, these leaves were in the form of employee vacation days. An additional seven percent took FMLA labeled leaves; the remaining 3 percent needed leaves but did not take them. The average leave time for employees was 10 days. The mean paternity leave time was one week; the majority of fathers used paid vacation time to avoid income loss.

**Potential Explanations for Employees’ Limited Use of FMLA Benefits**

Financial Need. Among the employees who stated a need for FMLA benefits but refused to take a leave, 64 percent indicated that they could not financially afford to take time off from work. Recall that the leave guaranteed by the FMLA is unpaid. Often the very employees who most need to avail themselves of family leave, can ill afford to take the time off without pay. Twenty-six percent of caregivers spend up to ten percent of their monthly incomes paying others to provide needed care to family members (AARP, 1993; Family Leave Commission, 1996). While the decision not to take parental leave can be costly for any parent in terms of lost wages as well as wages paid to others to provide part of the needed care, such a decision often functions as a double-edged sword for lower income single mothers in particular, as they often pay as much as 25% of their wages for child care (Cherlin, 1999). Of those employees who took family medical leave, nine percent were forced to turn to public assistance to compensate for the wages lost during the leave. The percent turning to public assistance rose to 12 percent among women.
These statistics indicate that the employees who need leave-taking the most are the least able to afford to take unpaid leave, due to lost wages as well as the additional expenses involved in caregiving (e.g., medicines for a sick family member).

Thus, the Family Leave Commission survey (1996) identified financial need as the number one reason employees fail to take a desired family medical leave. In addition to the inability to financially afford time away from work, a variety of reasons exist to explain why relatively few employees take advantage of FMLA benefits.

Based on widely accepted theories, these authors offer four additional explanations for why so few employees take advantage of FMLA benefits: (a) At the broadest level, the FMLA is not yet an institutionalized part of society. (b) At the cultural level, gender stereotypes exist regarding which employees should take family leave. (c) At the organizational level, many organizational and work group climates are not conducive to leave taking. (d) Finally, at the individual level, in addition to the monetary pressures identified by the Commission interviews discussed above, employees face concerns regarding loss of their benefits or position.

Institutional theory. The FMLA is relatively new (i.e., 1993). It has not yet been institutionalized as a valued, necessary, and taken-for-granted part of an organization’s operation or of society. Institutional theory, an organizational theory originally developed by Selnick (1949), has been reframed in three different ways (Scott, 1987). Over time, its explanatory focus shifted from intraorganizational values and dynamics to structures and processes at the organizational field or societal levels. Excellent reviews of institutional theory and the central premises of the different approaches exist (e.g., DiMaggio & Powell, 1991; Perrow, 1979; Scott, 1987; Tolbert & Zucker, 1997).

This macro-theory has been employed to explain the effects of government laws and policies on employment structures (e.g., Sutton, Dobbin, Meyer, & Scott, 1994) and personnel policies (Baron, Dobbin, & Jennings, 1986; Edelman, 1992; Tolbert & Zucker, 1983). For example, in a communicative vein, Edelman (1992) suggested that organizations who employ formal structures as symbolic gestures of compliance with government policy are less likely to provoke protest by protected classes of employees or community members are more likely to secure government resources and are less likely to trigger audits by regulatory agencies (p. 1542).
Institutionalism involves an on-going process (Tolbert & Zucker, 1997). Market forces, technological changes, and/or legislation (e.g., the FMLA) trigger innovations within organizational processes and/or structures. Before these innovations become part of the valued, necessary, and taken-for-granted norms of society, they must go through three stages: habitualization, objectification, and sedimentation (Tolbert & Zucker, 1997). During the first two stages, the innovation is subject to critical evaluation, modification, or even elimination. During the habitualization stage, new structural arrangements and policies emerge in response to specific organizational problems (as was the case with the FMLA). Comparatively few organizations adopt these new, often impermanent, structures or policies. Later, in the objectification stage, an increased consensus among decision-makers emerges about the innovations value, thus increasing adoption of the innovation. The more widespread the innovation becomes, the more likely others will view it as an optimal alternative, and the less influential decision-makers individual judgments will be. Ultimately, at the sedimentation stage, a process or structure becomes deeply embedded in a social system.

Based on institutional theory, the present authors argue that FMLA benefits may be underutilized in part because, unlike the extant workman’s compensation policy, the FMLA innovation is still in the habitualization or perhaps the objectification stage of institutionalization. Until more communicative activity takes place, especially discussion among decision-makers that leads to a consensus of acceptance and that consensus is widely reported in industry and/or the general mass media, employers and workers may continue to view FMLA benefits as a potentially temporary innovation, perhaps ultimately detrimental to the organization and/or its employees, and thus a risky option for early adoption.

Cultural stereotypes. The reasons for under-utilization of FMLA benefits may include more than its relative recency. Another reason for under-utilization may be that such leaves challenge already institutionalized societal norms and assumptions. A key feature of institutional theory is that existing cultural understandings are determinants of individual behavior (Strang, 1994). Cultural understandings in the form of gender stereotypes exist both nationally and internationally regarding which employees should take family leave. Specifically, gender stereotypes typically encourage the view that the male employee should continue on the job while the female stays home with the children. Haas and Hwang (1995) attributed men’s reluctance to take family leave to the gendered culture of work organizations. However,
something broader than a specific organization’s climate, as it relates to family leave, appears to be displayed in FMLA’s low usage. The text of the FMLA itself acknowledged that the primary responsibility for family caretaking often falls on women (Family and Medical Leave Act, 1993, p. 1).

The second leading factor employees mentioned during interviews for underutilization of the FMLA was the workers’ fear of being stereotyped if they took leave (Family Leave Commission, 1996). While few statistics are available, companies that offer paternity leave say few men take it. For example, in 1990, the Campbell Soup Company’s headquarters reported that not a single employee had taken paternity leave since the food company began offering a three-month unpaid benefit. The Unum Insurance Corporation in Maine initiated a family leave policy in 1978; they reported that one male employee took paternity leave, while 250 women took maternity leave during the same period. That one father’s leave was only two weeks long, although the insurance company allowed twelve weeks of unpaid leave. According to Unum, twenty-five men inquired about the leave, but decided against taking it. Dow Jones and Company, who has offered a six month unpaid paternity leave since 1990, reported fewer than ten men taking leave, while more than 200 women took parental leave (Alexander, 1990).

Also, men’s hesitancy to take family leave is not an occurrence attributable to the relative recency of FMLA’s passage in the U.S. Sweden, a country with long-standing family leave policies, has few men request family leave time, even though employee salary is paid at ninety percent of previous earnings for eighteen months (Baker, 1997). To combat gender-based stereotypes regarding parenting, countries such as Sweden and Canada have initiated organization-wide programs geared toward re-educating employees on the importance of gender-equal family leave-taking (Baker, 1997). Thus, some employers are attempting to communicate alternative view points regarding gender-based parenting behaviors via formal training.

While it is relatively easy to attribute male-female differences in behavior to sex role stereotyping, other causal factors also may be at work in determining who provides family caregiving. If a family decides to have one of its two or more workers take unpaid leave to attend to the needs of a dependent family member, they may elect to have the person earning the least amount of money provide that care. Women are more likely than men to be selected by this criteria, as they typically earn less than men (U.S. Bureau of the Census, 1995). If multiple causal factors predict that women are more likely than men to elect family medical leave, then it
behooves us to create an organizational climate that supports women who elect to provide this important service in our society. Indeed, the FMLA itself was passed, in part, because [family] responsibilities affects the working lives of women more than it affects the working lives of men; and ... employment standards that apply to one gender only have serious potential for encouraging employers to discriminate against employees and applicants for employment who are of that gender (Family and Medical Leave Act, 1993, p. 1).

Organizational climates. In contrast to the supportive climate suggested above, respondents to the Family Leave Commission (1996) survey reported fear of negative career consequences, resulting from the leave-taking, as the third major reason (mentioned by 22%) for not taking the FMLA. Indeed, many of their fears were justified. For example, while FMLA generally guarantees leave-takers the same job when they return to work (U.S. Department of Labor, 1993a), 61 percent of the 3,167 complaints lodged by employees with the U.S. Department of Labor during its first two years of administering FMLA concerned an employer’s refusal to reinstate an employee to the same or equivalent position (Family leave, 1995, p. 17). Another 14 percent of the Family Leave Commission (1996) respondents worried about losing their seniority; indeed, employers are under no legal obligation to continue to accrue [seniority] during periods of unpaid FMLA leave (U.S. Department of Labor, 1993a, p. 9). In workplaces where management perceives FMLA negatively, there is greater employee fear that leave-taking could create permanent career damage (Alexander, 1990; Haas & Hwang, 1995; Scharlach & Grosswald, 1997).

Employees awaiting promotions were most likely to view leave-taking as something wonderful for sanity, but suicide for the career. According to one interviewee, "No CEO would ever speak out against family leave. It is subtle, unspoken, never in print. It is just the way the game is played you can’t afford to be gone if you want to be a player" (Alexander, 1990, p B6). The previous statement made by the community affairs director of a major computer organization, as well as the concerns expressed by employees in the survey, recognize the power of the informal organizational climate.

An organization’s specific local influences potentially reinforce the low usage of FMLA benefits. An organization’s climate toward employees’ use of FMLA benefits influences employee behavior. The manner in which employees interpret assumptions, norms, and organizational expectations seem to pose the greatest obstacle to people, especially men, taking
these leaves. Formal and informal organizational communication with top management, supervisors, and coworkers impact how employees come to understand inherent beliefs in organizational policies and practice (see Allen, 1995). Researchers focusing on an organization’s psychological climate (e.g., James, James, & Ashe, 1990; Koys & DeCotiis, 1991) examined employee perceptions of dimensions including fairness within a workplace as well as leader facilitation and trust (see Allen, 1995, for a review of the climate literature and an articulation of the view of climate taken in the current study).

One psychological climate dimension potentially related to the FMLA is perceived organizational support (Eisenberger, Huntington, Hutchison, & Sowa, 1986). This concept involves employees’ global perceptions of the extent to which their organization values their contributions, cares about their well being, and is equitable as well as fair in rewarding extra effort and loyalty. An organization’s concern and caring for employees may be communicated through a variety of media including through organizational policies (Eisenberger et al., 1986). How an organization’s top management, supervisors, and coworkers communicate about FMLA potentially influence employees’ perceptions of organizational support as well as their leave-taking behaviors per se.

The Family Leave Commission survey (1996) revealed that 12 percent of the leave-takers rated the ease with which they were able to arrange for their leave as somewhat difficult or very difficult. Ellison (1997) posited that a negative organizational view of FMLA benefits is cold toward both employee leave-taking and employee well-being.

Work group climates. Communication with superiors and co-workers is an important influence on employees’ perceptions regarding psychologically important aspects of the work environment (Ashforth, 1985; Campbell, Dunnette, Lawler, & Weick, 1970; James et al., 1990; Poole & McPhee, 1983). Individuals’ experiences of their situations, the objects around them, and even their own needs are dependent on their social environment (Salancik & Pfeffer, 1978). Such workplace communication, as a form of perceptual control (McPhee, 1993), can have important implications for whether or not employees use FMLA benefits. Supervisor resistance is a key contributor to employees’ fear of leave-taking (Mercer, 1993; Scharlach & Grosswald, 1997). In an examination of employers’ experiences with FMLA, the Families and Work Institute found that the most powerful predictor of leave difficulty was the manager’s ability to interpret and implement the policy for employees (Warren & Johnson, 1995). Warren and
Johnson (1995) further concluded that employed mothers who perceived their supervisors as supportive, reported lower levels of strain between work and family roles.

Peer pressure, an often potent form of workplace control, also may perpetuate the belief that leave-taking unfairly burdens co-workers with extra assignments. Peer work relationships are a major contributor to employee hesitancy to risk career damage by taking family leave time (Alexander, 1990; Baker, 1997). In a study of Swedish organizations, Baker (1997) concluded that women’s work situations and peer relationships tended to deteriorate once they began to claim their family-leave rights. Like Sweden, many U.S. employees are not considered eligible for advancement if their workplace peers do not hold them in high esteem. Peer relationships can become strained and permanently damaged when the leave-taker’s absence forces already overworked employees to pick up the slack. In the hands of an organization that is negatively predisposed toward FMLA, peer resentment can become an effective tool for discouraging employee utilization of family leave.

The peer pressure referred to by Alexander (1990) and Baker (1997) illustrates concertive control (Barker & Cheney, 1994; Tompkins & Cheney, 1985). This form of control, which is most frequently discussed in terms of organizational teams, shifts the focus from management’s control to workers’ control as workers communicate with each other to create rules and norms that govern their own behavior. Control then emanates from the concertive, value-based actions of organizational members, especially from their process-oriented communicative behaviors.

**Summary**

The present section reviewed factors potentially explaining low usage of FMLA benefits. While several factors may be influential, the present authors contend that forces at the macro, group, and individual levels appear to limit full implementation of the FMLA at this time. Is the limited implementation described above a problem for the families and/or employers involved? We content in the next section that such limited implementation has potentially disastrous communicative implications for both parties.

**Problems with the Status Quo**

**Disadvantages for Families**

Fox (1999) argued that families constantly face transitions, from birth to death. Schlossberg (1984) described transitions as life events creating changes in "relationships, routines, assumptions, and/or ideas within the settings of self, work, family, health, and/or
economics” (p. 43). Parkes (1971) posited that life transitions may contribute to increased levels of stress as life transitions make necessary the endowment of one set of assumptions and the development of a fresh set to enable the individual to cope with the new altered life space (p. 103).

When parents opt not to take family leave during transitions in the family structure, there are potential negative implications for the family. The negative implications are especially obvious at three crucial transitions that occur in the life of most American families: at the birth or adoption of a child, during the illness of family members, and when providing care for an elderly family member. The present section will discuss each of these circumstances in turn, explicating the importance of communication in effectively navigating these transitions to the family structure. Given that interpersonal communication between family members is necessary to effectively navigate each of these transitions, it is essential that employees avail themselves of FMLA benefits so that they can be present with family members to provide the communication that is part and parcel of successfully navigating family transitions.

Birth or Adoption of a Child. The earliest family transition typically occurs at the time of birth or adoption of the first child. Families repeat this transition when and if they opt to add subsequent children to their family. Optimal family communication during infancy brings together a skilled infant and an adult tuned to respond. In the case of the typical infant in the typical family, this communication provides the context for a gradual unfolding of the child’s potential ... and responsive communication from parents sets the course for optimizing cognitive, social, and language development (Barratt, 1995).

The primary tasks during this transition are attachment and caregiving (Wynne, 1984). In brief, attachment research documents that the caregivers consistent perceptions and accurate interpretations of the infant’s behavior, as well as appropriate responses to infant’s signals, serve to nurture the development of security. Insecure attachments develop as a function of the primary caregiver’s inconsistent or negligent perception, interpretation, and responsiveness (Yingling, 1995, p. 29-30). The consistent presence of a primary caregiver, typically a parent, during infancy constitutes the basis for attachment. Infant attachment with primary caregivers is of extreme importance for healthy development cognitively and socially. Additionally, such bonds are an established, necessary requisite for creating healthy parent-child relationships. Bowlby (1969) observed that infants begin attaching at birth and that this bonding evolves until around
the ninth month of age. Trust then is instilled by creating an attachment structure between child and the primary caregiver. In the parent’s absence, the child experiences distress and detaches from other persons. Infants primarily are fully attached to the primary caregiver, typically the mother, between the 25th and 32nd weeks of life (Schaffer & Emerson, 1964).

Ainsworth (1973) described parents as the predominate base for secure attachment leading to the child’s confidence to explore greater parts of the environment, particularly the unknown. When children enter into strange situations and their security is compromised, those who are securely attached to the primary caregiver will return to the safe haven provided by the parents for emotional refueling (Mahler, 1968). Prolonged absence from the parent threatens necessary bonding, puts the parent-child relationship at risk, and stifles the child’s cognitive and socioemotional growth (Miller, 1983; Wynne, 1984).

Specifically, consistency in nurturing and discipline with the primary care provider create secure attachments. Note that both nurturing and discipline are accomplished communicatively. When parents work full-time, they typically employ alternative caregivers who may or may not provide nurturing and discipline in a manner consistent with the parents. Thus, child care arrangements, other than consistent parental care, pose a potential threat to the security of developing children.

Once the secure attachment is in place and the child has the confidence to explore the environment, then cognitive processes become more complex. The child’s ability to reason, problem solve, learn language, and comprehend novel situations largely depends on secure attachments. This security is enhanced through consistent association with the primary caregiving parents beyond infancy in such ways as stimulating the child, reading aloud, and serving as role models for the child’s educational aspirations (Rice, 1993).

The consistent presence of the parent during the formation of healthy attachments also has strong implications for a child’s socioemotional development. Parents teach values of cooperation, concern for others, unselfishness, and responsibility. If parents are consistently absent from the home, often other adults or peers have a greater socializing influence on young children’s competence in engaging in socially appropriate behaviors. Burleson, Delia, and Applegate (1995) stressed the importance of family socialization to the culturally appropriate social and cognitive competencies achieved through continuous communication behaviors such as persuading, comforting, informing, and discipline. Children receiving consistent nurturance
and emotional support from parents show lower levels of aggressiveness than those lacking this support (Zelkowitz, 1987).

Parents’ job-related fatigue and stress may have negative consequences on the development of the child (Moen, 1989). Much research has emphasized the negative consequences of job spillover, as evidenced by parents’ emotional withdrawal or by their controlling, punitive behavior toward their children (Jorgenson, 1995). Studies of stressed parents indicate increased levels of negative behaviors in children (Brody & Forehand, 1988; Cutrona & Troutman, 1986; Dix, Reinhold, & Zambarano, 1990; Mebert, 1991; Vaughn, Bradley, Joffe, Seifer, & Barglow, 1987). Among women employees who care for their children and an elderly parent, seventy percent reported stress and worry (Emlen, Koren, & Louise, 1988). Burke, Weir, and Duwors (1980) connected levels of work and family conflict to high amounts of employee stress, especially among those working extended hours or who have little control of work scheduling. Increased employee stress is correlated with increased job dissatisfaction (Monroe, Garand, & Teeters, 1995). Workers experiencing work and family conflicts reported that they would leave their present employer for another job that eased these stresses (Monroe, Garand, & Teeters, 1995).

Providing Care for Physically Ill Family Members. Occasions also arise in which employees must care for ill family members often leading to significant disruptions of family member roles. Illness in the family may create a state of uncertainty necessitating the need for information and adaptation (Albrecht & Adelman, 1987). The significance of support from family members during periods of stress or crisis has been widely discussed (see Eggert, 1987). Unfortunately, health care professionals are not always helpful to family members (Bond, 1982; Northouse, 1984). Needed information often is difficult or time-consuming to obtain from these professionals, leading to added amounts of stress (Thorne & Robinson, 1988; Wright & Dyck, 1984). Understanding one’s options in such crises increases a sense of empowerment over the stressor (Albrecht & Adelman, 1987; Parks, 1985). Such knowledge of options typically is obtained via direct, interpersonal communication with medical professionals who can discuss treatment options with family members.

Much research describes the positive health outcomes associated with receiving social support. Several authors (Dean & Lin, 1977; LaRocco, House, & French, 1980) describe social support, typically defined as positive feedback and/or expressions of positive regard.
communicated to another, as having a buffering effect, thereby reducing the impact of a stressor. Other authors (Anehensel & Stone, 1982; Thoits, 1982) described social support as directly preventing the ill effects of a stressor. Social network interactions with such persons as close family members greatly influences persons’ health-maintenance practices (Antonucci, 1985; Barrera, 1981; Blythe, 1983; Flint, Query, & Rabb, 1997; Query & Kreps, 1996)

Workplace stress confounds the existing stress resulting from the illness. Family members are vital connections in the treatment process, yet when they are under tremendous amounts of stress, they are less effective in caring for the ill family member (Northouse, & Northouse, 1992). Thus, time away from the workplace often is necessary for reducing such uncertainty and stress. Employees who are confident they will receive support from their organization should realize a greater sense of empowerment in fully understanding diagnoses and treatment options, making well-informed decisions, and/or providing at-home care for the family member. Thus, the presence of this type of external source of support aids family members in effectively adjusting to the health-related crisis (Wills, 1985). In addition, support enhances the quality of patient-family communication which has direct links to relieving psychological distress (Gotcher, 1993).

Assistance to the Elderly. In addition to the importance of family caregivers to infants, young children, and physically ill family members, workers frequently provide assistance to elderly relatives, especially parents. High levels of both instrumental and psychological aid tend to be provided with increasing age (Noller & Fitzpatrick, 1993, p. 268). An estimated 80-90% of elders’ medical and personal care such as household tasks, shopping, and transportation are provided by family members (Mares, 1995). Indeed, the family seems to be the primary source of interaction and support for the elderly (Noller & Fitzpatrick, 1993, p. 257). These responsibilities can add to the stress of an already hectic work life.

Caring for elderly family members can create great personal strain. The stress and strain associated with providing care to elderly family members compromises the psychological well-being of all parties involved (Sheehan & Nuttall, 1988). Sukosky (1990) cited numerous studies documenting the relationship between elder abuse and care providers’ feelings of stress and overwork.

Summary. The birth or adoption of a child creates substantial changes in family dynamics (Belsky, Lang, & Rovine, 1985), and often is quite stressful (Turner & West, 1998). During such
transitions, persons need to rely on society at large and society’s resources in assisting parents in developing strong parent-child bonds (Belsky, Lang, & Rovine, 1984; Kazak, 1987; Weiss, 1989). Parents appear to benefit more from the provision of support during the transition to parenthood than during later stages of the child’s life (Crnuc & Greenberg, 1987). Similarly, caring for physically ill family members and caring for elderly family members can create great personal strain, as well, requiring the need for support. When support is not offered, such as in family or medical leave, caregivers are greatly deprived (Ambert, 1992).

Disadvantages for organizations

Employers who attract productive workers may discover that some of these employees also care for young children, elderly family members, and/or ill family members. To retain and support such workers, employers may need to revise their family leave policies and/or revise the messages that management directly or indirectly sends to employees regarding such leave. Indeed, both subtle and obvious messages can create a chilly or inhospitable climate for valued employees with significant family responsibilities.

An organization’s climate regarding FMLA benefits may have an important impact on attitudinal employee commitment. Just as committed employees may contribute more to their organizations, the reverse also frequently is true. Uncommitted employees may produce less, be absent more, and be more likely to voluntarily leave their organization, given a better alternative.

For over two decades, the relationships between attitudinal organizational commitment and various positive and negative individual- and organizational-level outcomes has been researched and numerous factors influencing commitment have been identified (see Meyer & Allen, 1997). Attitudinal organizational commitment is defined as the relative strength of an individual’s identification with and involvement in a particular organization (Putti, Aryee, & Liang, 1989). This type of commitment involves an employee’s desire to remain employed at an organization, willingness to exert effort on its behalf, as well as his/her belief in and acceptance of the organization’s goals and values (Mowday, Steers, & Porter, 1979). Organizations desire committed employees because commitment has been linked to many positive outcomes for employers including increased organizational citizenship behaviors, increased extra-role and in-role job performance, as well as lower voluntary turnover and absenteeism (see Meyer & Allen, 1997, for a review of the literature).
Although relatively little research has examined the impacts of benefits (e.g., FMLA) on commitment, some research on this subject does exist. Meyer and Allen (1997) cited several authors (e.g., Goldberg, Greenberger, Koch-Jones, O’Neil, & Hamill, 1989; Grover & Crooker, 1995) who found positive relationships between employee commitment and an organization’s family-responsive benefits such as flexible hours and day-care assistance. However, Koys (1988, 1991) warned that the relationship between employee commitment and family-responsive benefits may be reduced if employees see the benefit as a token gesture or as a response to external pressure-- as may be the case with FMLA benefits.

To better understand the relationship between an organization’s actions and employee commitment, Eisenberger et al. (1986) introduced the concept of perceived organizational support, as defined earlier. Researchers have theoretically based perceived organizational support on social exchange theory and reciprocity (e.g., Allen, 1995; Eisenberger et al., 1986; Hutchison, Riel, Frum, & Howsden, 1997; Wayne, Shore, & Liden, 1997). This approach emphasizes employee beliefs about the organization’s commitment to them where commitment to the organization is based on commitment from the organization [emphasis added] (Hutchison et al., 1997: 28).

Perceived organizational support researchers frequently refer to Blau’s (1964) discussion of social exchange and reciprocity. The reciprocity norm obligates people to respond positively to favorable treatment from others (Blau, 1964; Gouldner, 1960) because people dislike feeling indebted and seek to reduce such feelings through reciprocation (Greenberg, 1980). Indeed, Eisenberger, Cummings, Armeli, and Lynch (1997) said that the norm of reciprocity requires employees to respond positively to favorable treatment from employers. When employees perceive high levels of organizational support, they feel obligated and desire to repay the organization. One again, the opposite also can be true. High perceived organizational support consistently is related to higher attitudinal organizational commitment (e.g., Allen, 1992; Allen & Brady, 1997; Eisenberger et al., 1986) as well as positive outcomes for the organization in terms of job attendance, performance outcome expectancies, effort-reward expectancies, evaluative and objective measures of in-role job performance, help given to coworkers, constructive suggestions for improving the organization’s operation, voluntary turnover intentions, and organizational citizenship behaviors (e.g., Allen, 1996; Eisenberger, Fasolo, & Davis-LaMastro, 1990; Eisenberger et al., 1997; Settoon, Bennett, & Liden, 1996; Shore &
Wayne, 1993; Wayne et al., 1997). Hutchison et al. (1997) found organizational policies concerning leave scheduling and dependent care options had a direct affect on employees’ perceptions of conflict between their roles as work and family members and affected their perceptions of organizational support directly. They concluded that, consistent with the social exchange model of commitment, work-family conflict affects employee organizational commitment by way of its effects on their perceptions of organizational support.

Summary. Both organizational commitment and perceived organizational support have been linked to intraorganizational communication such as top management’s messages and policies, superior-subordinate communication, and co-worker communication (see Allen, 1992, 1995, 1996). Therefore, workplace messages regarding the FMLA have the potential to influence employee attitudinal organizational commitment and perceived organizational support-- either positively or negatively. Ultimately, such messages also may influence employee behaviors with either positive or negative implications for their organization. Although little research has explored the linkages between an organizations’ family leave policy, intraorganizational communication, perceptions of support/commitment, and perceived organizational support, it seems likely relationships exist.

Summary and Conclusions

When employees fail to take time away from work to navigate transitions in the family structure (i.e., the birth or adoption of a child, caring for an elderly family member, assisting a family member through a serious illness), the employees may be contributing to potentially negative outcomes in the family (e.g., delaying a family member’s recovery from surgery), seriously compromising the quality of life in their families. Further, when employers fail to provide attractive FMLA benefits and/or fail to encourage employees to consider taking FMLA benefits, they also may be contributing to potentially negative outcomes in individual families--negative outcomes that may have long-term negative impact on the functioning of our society (e.g., children with attachment disorder).

The family plays two vital roles in contemporary society, both of which are enacted primarily via face-to-face interpersonal interaction. The family socializes children to become responsible members of society and it provides support (social, fiscal, and physical support as needed) to its members, both young and old. When individuals and institutions fail to take the actions necessary to create an environment in which family members can communicate
effectively to fulfill these functions, they are creating an environment in which it becomes at best
difficult and at worst impossible for families to perform their two primary functions.

Ever increasing family demands are being placed on workers to choose between work
and family (Family Leave Commission, 1996). When companies fail to provide employees with
adequate time off surrounding the birth or adoption of a baby, during illness of family members,
or at a time when an older family member needs special care, then, from the perspective of the
employees who serve as care providers, the organization’s policies fail to support them during
the most eventful times in their lives. As long as this failure remains the standard operating
procedure of the organization, the affected employees may continue to interpret the company’s
negativity toward family leave-taking as negativity toward them as individuals as well as their
families. Thus, a valuable component in the relationship between organization commitment and
perceived organizational support will be sacrificed. The organization may lose an excellent
opportunity to convince employees that the modern organization is one that believes that
"compassion makes a difference (Noer, 1993, p. 81). Conversely, organizations will benefit
greatly in terms of several important outcome variables if it can convince the employees that it is
supportive and caring.

Proposed Solutions

The present authors join Kamerman and Kahn (1987) in advocating for a responsible
workplace that provides working conditions enabling employees to take care of family concerns
while maintaining their jobs. We recommend the creation of responsible workplaces by
providing employees with a menu of options that allow for a balancing of competing interests
(i.e., work and family responsibilities) in stressful situations. Such options could include at least
the following: self-insurance, flex-time, job-sharing, and enhanced family medical leave policies.

Self-Insurance.

A minimal solution, applicable in relatively large companies, involves the use of paid
sick days to attend to family business. If employees are permitted to take sick days to care for
needy family members, employees will have the option of family leave paid via personal sick
days. The FMLA provides employers the discretion to allow employees to use accumulated sick
days to create, in effect, paid FMLA benefits (U.S. Department of Labor, 1993a). Further, if the
organization’s benefits office developed an internal bank of sick days, employees could
voluntarily donate a sick day every quarter or half year, and then, as needed, employees could
borrow sick days from the bank to provide sick leave during an employee’s extended illness and/or during an extend family leave until a transition is navigated and/or the crisis is passed.

Similarly, the benefits office of relatively large companies could ask their health insurance carrier to develop an optional insurance policy that paid employees their standard wage during the 14 days of leave provided for in the FMLA. Such coverage would be optional for employees and not every employee would opt for the voluntary coverage; perhaps those most likely to need the funds during a family crisis would be the most likely to decline this and many other voluntary coverages as a cost saving measure.

*Flex-time.*

Flexible working hours allow employees to choose, within limits, their most desirable work hours (Galinsky, 1992; Hochschild, 1997). This phenomenon is called flex-time. Flex-time allows employees to share caregiving responsibilities with other family members who work differing hours. For example, a father, mother, and grandparent with flexible work hours could each work full time, while splitting the child-care responsibilities for an infant in such a way that the infant has the opportunity to bond with three family members (and they with the infant) while avoiding the added cost of paying for child care outside the family.

*Job-Sharing and Permanent Part-Time Positions.*

Because employees may take FMLA leave intermittently -- which means taking leave in blocks of time, or by reducing their normal weekly or daily work schedule (U.S. Department of Labor, 1993a, p. 5), employers may offer workers two important alternatives to unpaid leave: Both job-sharing and permanent part-time work may be offered as FMLA intermittent leave (U.S. Department of Labor, 1993a, p. 5). While the FMLA requires employers to grant intermittent leave when medically necessary (Shaller & Qualiana, 1993, p. 10), the employer voluntarily could extend this option to workers under all circumstances covered by the FMLA, thus allowing workers on a FMLA leave to continue earning an income via job-sharing or permanent part time work.

Allowing employees, especially lower-level workers who can ill afford to take leave without pay, the opportunity of share jobs provides employees the opportunity to spend extensive time with family members while maintaining their position and allows their employers to benefit from their services. When the employer offers job sharing along with full time benefits, at least for a limited time, employees can attend to urgent but temporary family matters that require
attention for a few days, a few weeks, or a few months. For example, two employees could job-share while one provides partial care to a family member recovering from major surgery and the other helps care for an elderly parent. One could work in the morning, while the other works in the afternoon at the same job and literally share the same desk, counter, or machine. Each employee would only need to pay for home-health care for four hours a day rather than a full eight-hour day.

A different solution may be needed for employees with a family medical situation that extents for a longer time period, such as in the case of a dying parent. For valued employees, companies could offer permanent part-time work with full benefits and the option for the employee to compete for a full time position, without prejudice, when the employee is ready to return to full time work.

**Enhanced FMLA Benefits.**

Wage Replacement. Most current proposals for revision of the FMLA include a uniform system of wage replacement for periods of family and medical leave. In Canada, employees on maternity, parental, and personal sick leave receive wage replacement through their national insurance system, which allows up to a maximum leave of thirty weeks in any fifty-two week period. Vermont considered using unemployment insurance funds to pay for certain types of family leave. A bill was introduced in California that would amend the state’s unemployment insurance code to allow workers who take leave under California’s family and medical leave law to be eligible for benefits (Moskowitz, 1996). Paid family leave has been recognized as a factor that contributes to reducing poverty rates, especially among single parents (Baker, 1997).

**Education and Training.**

Another element also included in most FMLA realignment proposals is a call for training and other education measures aimed at educating and motivating managers to effectively communicate family leave policies to employees. Training must be geared to enforcing the FMLA policies already enacted. However, additional initiatives to encourage workers to take advantage of programs, new and old, also would be appropriate. In an attempt to encourage male employees to avail themselves of family leave options, Sweden initiated ten paid daddy days, available to men after childbirth or adoption (Hass and Hwang, 1995). Sweden’s program included renewed employer and employee training which served to communicate the country’s positive stance on family leave-taking.
In U.S. organizations, there is a need for increased sensitivity to family leave-taking. Innovative training and education programs could address such a need. For example, a training program could ensure that workers understand the organization’s recognition of the profitability of establishing a family-friendly environment. Of course, organizational change will not occur by simply spouting forth words of support. Simply changing the mantra will remain ineffective if employees continue to perceive their work environment as only reluctantly conceding minimal support for FMLA, and doing so under duress. Instead, training and educational initiatives should work toward actually creating supportive work climates for employees with family responsibilities.

In total, this essay creates a strong case for maintaining the FMLA and enhancing its benefits and implementation. If employers generally refuse to provide any more than the minimal coverage provided by law, should the law be revised to include mandated training programs and wage enhancements? While the answer to such a question is beyond the scope of the present paper, it provides fertile ground for a meaningful policy debate as well as future research by concerned parties. Similarly, some have argued that the FMLA should be revised to extend benefits to all employees regardless of the organizational size. Indeed, Vermont’s parental leave law applies to employers who have ten or more employees and, as of April 1994, the District of Columbia’s family and medical leave law will apply to employers with twenty or more employees (Shaller & Qualiana, 1993, p. 18-19). The issue of expanded coverage, while beyond the scope of the current project, merits thoughtful attention and consideration.

Summary.

The present authors propose that organizations address the under-utilization of FMLA benefits by offering employees the option to address family transition via self-insurance, flex-time, job-sharing or permanent part-time work. We also recommend two potential enhancements to FMLA benefits: wage replacement and increased training and education. We believe these solutions have several advantages over the status quo of limited implementation of the FMLA, as discussed in the next section.

Advantages of Proposed Solutions

Workers stand to benefit from our proposals in three ways. First, workers could select the most appropriate option for their circumstance among several options that accommodate family transitions. Further, our proposals address the number one reason workers cited for failing to take
advantage of FMLA benefits-- reduced benefits and financial income (Family Leave Commission, 1996). Third, our proposals allow workers to more adequately address both the needs of work and the needs of their families by allowing continued affiliation with a company while attending to critical family needs; thus, our proposals allow workers to build strong and healthy families as well as strong and healthy careers.

Our proposals provide several additional benefits to organizations. Through their implementation of family-friendly policies, employers may attract superior employees who also care for young children or the elderly (Glass & Estes, 1997). Further, employers who adopt our proposed options and enhanced FMLA benefits create an environment in which employers are likely to commit to the company-- a characteristic correlated with many highly desirable outcomes for organizations including increased organizational citizenship behaviors, increased extra-role and in-role job performance, as well as lower voluntary turnover and absenteeism (Meyer & Allen, 1997).

In sum, when viewed from a social exchange perspective, our proposals benefit both worker and workplace. These proposed leave-taking policies offer benefits that could ease work and family conflict and thus relieving stress for the workers, allowing them to be more productive in the workplace and the home.

**Disadvantages to Proposed Solutions**

Of course, the proposed changes here advocated also have disadvantages. However, the present authors believe these disadvantages are relatively limited in scope, can be readily addressed, and do not outweigh the significant advantages of the suggested solutions. The self-insurance proposals have the drawback of all voluntary coverages-- because they would be optional for workers, not every employee would opt for voluntary coverage, especially those most likely to need the funds during a family crisis. Clearly, the success of such programs would be substantial aided by the company underwriting their cost, as they typically do for employees’ group medical, disability, and life insurances. Further, these programs would only work at relatively large organizations who have a sufficient number of employees to build a substantial reserve bank of sick days quickly-- rapidly enough for both start-up and to recover from frequent and/or repeated usage. Thus, smaller companies may find one or more of the other proposals here advocated (e.g., flex-time) more workable in addressing the current limited implementation of the FMLA.
One drawback to flex-time is that it typically is offered only to managers and professionals (US Bureau of the Census, 1993). However, many clerical, janitorial, and sales positions also could be converted to a flex-time option with no appreciable decrease in output. Another potential disadvantage to flex-time occurs when the flex-time employees work extensively with other employees who remain full-time; in this case, flex-time can cause coordination difficulties. However, through the use of either split-shifts or through co-operation with co-workers, meetings can be arranged within reasonable hours.

Job-sharing requires more co-operation than usual between co-workers. However, friendly agreements between job-sharers to overlap 15 minutes and to contribute those 15 minutes a day without pay can solve coordination concerns.

Permanent part-time work with full benefits and enhanced FMLA benefits would impose a financial burden on employers. The issue becomes whether or not the cost of providing these benefits outweighs the cost of not providing the benefits (i.e., the cost of employee turnover, retraining, lack of employee commitment, etc.). Comparing these two costs to assess which is greater is a project clearly beyond the scope of the present analysis. However, the task of comparing these two types of costs is worthy of further policy discussion and social scientific study.

Conclusions

The Family Leave Commission survey (1996) revealed that relatively few employees, especially male employees, have taken advantage of FMLA benefits since its adoption. Results from employee surveys indicated that most workers fail to take family leave time because they are financially unable to afford leave without pay. Other fears, including stereotyping and career damage, were offered as reasons for not taking family leave time. Current social scientific theory offers several additional theoretically compelling reasons for this phenomenon. The present authors raise concerns about the potentially devastating effect on families if workers are not available to provide social and psychological support to family members, via interpersonal communication, as well as physical support during important family transitions. Further, organizations may be detrimentally effected by employees’ potential negative perceptions of employers based on their lack of support for family issues. To address these concerns, the present authors propose that employers offer a range of options to workers desiring to address both work and family concurrently, including self-insurance, flex-time, job-sharing, and
permanent part-time work. Further, we recommend that employers voluntarily enhance their FMLA benefits to include financial support and the training and educational initiatives necessary to create a family-friendly organizational climate. While these proposals are not without their potential disadvantages, they offer us the opportunity as a society to enact a realistically humane and integrated adult work life--a work life that can benefit all parties involved in the long run.

References


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