



New Directions in Employment and Training Research and Evaluation: Employer-Based Work-Family Interventions

OPRE Report #2021-242 | December 2021

Prepared by MEF Associates
Danielle Fumia and Eunice Yau

Introduction

The Office of Planning, Research, and Evaluation (OPRE), within the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services, has a long history of supporting rigorous research and evaluation on the broad range of human services programs that fall under ACF's auspices. Many of ACF's programs support employment among low-income populations, and, consequently, OPRE regularly supports numerous evaluations of employment and training (E&T) programs for low-income populations. Though many E&T programs for populations with low incomes have historically been heavily influenced by the field of Economics, OPRE looks more broadly for theories and approaches to inform its work.

Two briefs on *New Directions in Employment and Training Research and Evaluation* identify approaches from fields not typically drawn on in E&T that present opportunities to potentially strengthen the design, delivery, and effectiveness of E&T programs through research and evaluation. The briefs were developed through an iterative and exploratory process by the *Next Steps for Employment and Training Research: Roundtable and White Paper* project (see the sidebar on the next page for additional information). An initial literature scan identified seven promising academic disciplines that provide new perspectives and approaches to the field of E&T.¹ A broad scan of research and scholarship between 2010 and 2020 within those disciplines revealed topics and experts with a focus on E&T activities or low-income populations. We then conducted a series of conversations with experts within those disciplines who are advancing research on interventions and approaches related to E&T that could support improved outcomes for low-income and



vulnerable populations served by ACF programs.² Two focal topics of those interviews— technology-based support for low-income jobseekers and employer-based interventions to support low-income jobseekers and workers — were selected for further exploration in these briefs.

This brief focuses on employer-based interventions intended to reduce the inherent conflict many employees face in managing work and life demands. This conflict can have significant implications for low-wage workers and employers themselves.

The remaining sections of this brief describe prior research on employer-based work-family interventions and provide potential directions for research and evaluation in this field. This brief begins by describing an employer’s role in designing the work environment and how employer decisions can impact key outcomes for workers and their families. It then provides background on work-family interventions and reviews relevant research on four employer-based work-family interventions: supportive supervision, stable scheduling, flexible work arrangements, and paid leave. It concludes with implications of this work for E&T research and evaluation.

The Role of Employers in Shaping the Work Environment and Work Outcomes

The nature of the work environment has implications for work and non-work outcomes of employees, from earnings and employment to measures of work-family conflict, individual health, and child wellbeing. The substantial role that employers play in creating that environment warrants further research on employer-based interventions. Economic research, however, tends to focus on interventions that target individual jobseekers and employees to address specific individual barriers to employment (e.g., lack of education and training, substance use disorder, prior justice-system involvement). In contrast, researchers from a diverse set of disciplines including Social Psychology, Industrial-Organizational Psychology, and Sociology consider how the employer and workplace policies

ABOUT THIS PROJECT

For the *Next Steps for Employment and Training Research: Roundtable and White Paper* project, funded by OPRE, MEF Associates facilitated a roundtable that served as a springboard for a series of white papers to explore future research topics related to E&T programs for low-income populations. The [first white paper](#) discusses the current knowledge gaps and suggested areas for further research on designing effective E&T programs for populations with low incomes (Fishman et al., 2020). The [second white paper](#) discusses ongoing trends in the labor market and their potential effects on the nature of work over the next 10 to 15 years for low-income populations (Miller, 2021). These papers underscore the evolving nature of the labor market as well as policy and systems contexts. Exploring these emerging trends and future research areas presents the opportunity to innovate and advance the field of E&T for low-income populations as the labor market and nature of work evolve over time.

¹ The disciplines included Public Health, Business and Management, Human-Computer Interaction, Sociology, Geography, Psychology, and Anthropology.

² We conducted a small number of conversations with relevant experts, and the topics of the conversation were customized to the individual’s expertise. These conversations adhered to requirements of the 1995 Paperwork Reduction Act (44 U.S.C. 3501 et seq.).

and practices can impact employees’ outcomes, from employment to family wellbeing, and employers themselves.³

Employers play a critical role in creating workplace policies and in shaping the implementation of laws and regulations (e.g., minimum wage, paid leave laws). This role has increased relevance for low-wage and historically marginalized workers because they often work in occupations with greater job and schedule instability, fewer workplace protections, and fewer benefits. Variation in employers’ practices leads to a patchwork of policies and inconsistent standards across occupations and workplaces, often leaving many low-wage and marginalized workers without access to benefits (e.g., see Boesch, 2020) or with fewer protections. For example, a recent study found that 50 percent of hourly workers with low wages in the service industry had no input in their work schedules. Approximately one-third of workers in that study faced weekly variation in their schedule and received less than one week’s advance notice of their schedule (Schneider & Harknett, 2019). In general, low-wage workers and workers in certain industries, such as food service or hospitality, often have less access to employer-provided paid leave, workplace flexibility, and childcare, as shown in Table 1.

Table 1: Percentage of Workers with Access to Employer-Sponsored Benefits across Wages and Industries (March 2021)⁴

	Paid personal leave	Paid sick leave and vacation	Paid family leave	Unpaid family leave	Flexible work location	Flexible work schedule	Childcare
Percentage of workers from each industry							
All industries	46	70	23	89	8	14	10
Accommodation and food services	7	32	9	78	-	10	8
Construction	32	63	12	84	2	4	2
Leisure and hospitality	8	33	9	77	-	9	7
Retail trade	43	59	23	92	1	5	2
Percentage of workers from each wage quartile							
Highest wage quartile	64	91	37	94	19	27	19
Lowest wage quartile	24	42	12	81	1	8	5

This data includes workers in private industry only. The highlighted industries are ones that often employ low-wage or hourly workers or both. Occupations within these industries might vary. Industries based on the 2012 North American Industry Classification System. See <https://www.census.gov/naics/> for more information on each industry category.

For definitions of each benefit, see the Bureau of Labor Statistics (BLS) glossary at <https://www.bls.gov/ncs/ebs/national-compensation-survey-glossary-of-employee-benefit-terms.htm>. The lowest wage quartile includes occupations with an average wage of less than \$15.00/hour. The highest wage quartile includes occupations with an average wage of more than \$32.20/hour. Dash (-) indicates no workers or results did not meet BLS publication criteria.

³ Workplace policies refer to formal rules that identify available workplace benefits and conditions under which an employee may use them. Workplace practices refer to the procedures that employers and employees should follow to access benefits. Laws and regulations refer to mandated benefits imposed by local, state, or federal governments.

⁴ National Compensation Survey: Employee Benefits in the United States, March 2021. <https://www.bls.gov/ncs/ebs/xlsx/employee-benefits-in-the-united-states-dataset.xlsx>. Estimates come from March 2021. Estimates before the COVID-19 pandemic demonstrate a similar relationship.

When laws and regulations do establish minimum standards and requirements for employment conditions (e.g., minimum wage), employers often control the specific ways in which they implement these mandates in the workplace. For example, to avoid the potential cost of compliance, employers might decide to hire independent contractors instead of permanent employees; use part-time rather than full-time labor; or simply fail to comply with laws and regulations.⁵ Employers also contribute to an organization's culture in ways that can empower employees or discourage them from taking advantage of benefits that do exist.

Whether employers create policies or implement existing laws has implications for potential evaluation approaches and available data. In both cases, variation in employer practices provides opportunities for research to identify promising and effective employer-based interventions. In the absence of laws or regulations, employers can experiment with different types of workplace interventions, and researchers can potentially implement rigorous experimental designs and draw on employer and employee data to evaluate effects. Researchers can also evaluate variation in laws and regulations to assess how employers implement these requirements as well as

Implications of the COVID-19 Pandemic on Workers, Employers, and the Workplace

Less Willingness to Work in Low-Wage, Low-Benefit Jobs. Many businesses have reported difficulty filling low-wage positions, and many have started offering higher wages or other benefits, such as referral bonuses and emergency child care options, to attract and retain workers (Repko & Lucas, 2021).

Shifting Occupations for Low-Wage Workers. Automation and digitalization of the service industry has increased—for example, online-shopping increased 32 percent in 2020 (Tyson et al., 2021)—likely shifting demand to other low-wage occupations (e.g., delivery drivers) or higher-skill occupations requiring more training (e.g., software developers). Additionally, 66 percent of unemployed workers have considered changing careers (Pew Research Center, 2021).

Changing Family Care Arrangements. Childcare center and school closures have shifted childcare and family responsibilities. Changing care needs and arrangements might lead workers to leave the workforce or to require greater schedule flexibility from employers. For example, one survey in Spring 2020 found that 25 percent of women and 13 percent of men who had left the workforce did so because of childcare needs (Modestino et al., 2020). Moreover, the survey found the loss of work because of childcare needs has been greater for women of color, lower income women, and women with less education (Modestino et al., 2020).

Preference for More Telework and Flexible Scheduling Opportunities. Most workers whose jobs can be performed from home want to continue teleworking all or most of the time after the pandemic (Pew Research Center, 2020). This group might include some of the 30 percent of workers with below median incomes who report their jobs could be done from home (Gould & Shierholz, 2020).

⁵ For example, Kelly (2010) finds failure to comply with the Family Medical Leave Act, while Cooper & Kroeger (2017) find evidence of violations of minimum wage laws that affected 17 percent of the low-wage workforce in 10 states.

measure their effectiveness, typically using quasi-experimental designs.

Decisions regarding whether and how to implement workplace policies and practices have implications for both employees and employers. Interventions that modify the work environment or job characteristics can impact work outcomes, such as employee job satisfaction or earnings, as well as employer-level outcomes, such as overall productivity or firm-wide retention rates (Kelly et al., 2008). These interventions might also affect non-work outcomes, such as individual or family wellbeing, physical and mental health, or parent-child interactions. Employers might also implement policies and practices in the workplace that are unrelated to specific work characteristics (e.g., free cancer screenings), which can improve employee health and wellness as well as affect employment status, retention, and other work outcomes (Sama-Miller et al., 2019).

Examples of work-family conflict include an employee's irregular work schedule that interferes with childcare duties or job stress that affects an employee's physical and mental health and limits the quality of their family interactions.

Work-Family Interventions to Address Work-Family Conflict

Conflict between work and non-work lives can diminish the quality of both. In shaping the work environment, employers can influence employees' lives both in and outside the workplace. This brief, therefore, focuses on employer-based work-family interventions, defined as interventions or policies intended to “reduce work-family conflict and/or support employees' lives outside of work” (Kelly et al., 2008). Work-family conflict arises when individuals experience competing work and family demands, such as work scheduling or workloads that interfere with family responsibilities, and they must find a way to manage both.⁶

Non-work needs often pose a barrier to sustained employment, especially for low-wage workers. Surveys of low-income individuals and providers that assist individuals seeking employment find that an individual's physical and mental health, childcare needs, other family care obligations, and transportation and housing needs can all present barriers to accessing and maintaining employment (Bowie & Dopwell, 2013; Bloom et al., 2011; Dworsky & Courney, 2007; National Partnership for Women & Families, 1999).⁷ Time and financial resource constraints as well as challenging employment conditions, such as unpredictable scheduling or lack of advancement opportunities, can exacerbate the

⁶ Two forms of work-family conflict exist: work-to-family conflict and family-to-work conflict (e.g., see Zhang et al., 2012). Family-to-work conflict refers to family responsibilities (e.g., caring for children or parents) that interfere with work performance. This brief focuses primarily on work-to-family conflict and how workplace demands can interfere with family commitments and contribute to one's experience in and outside the workplace.

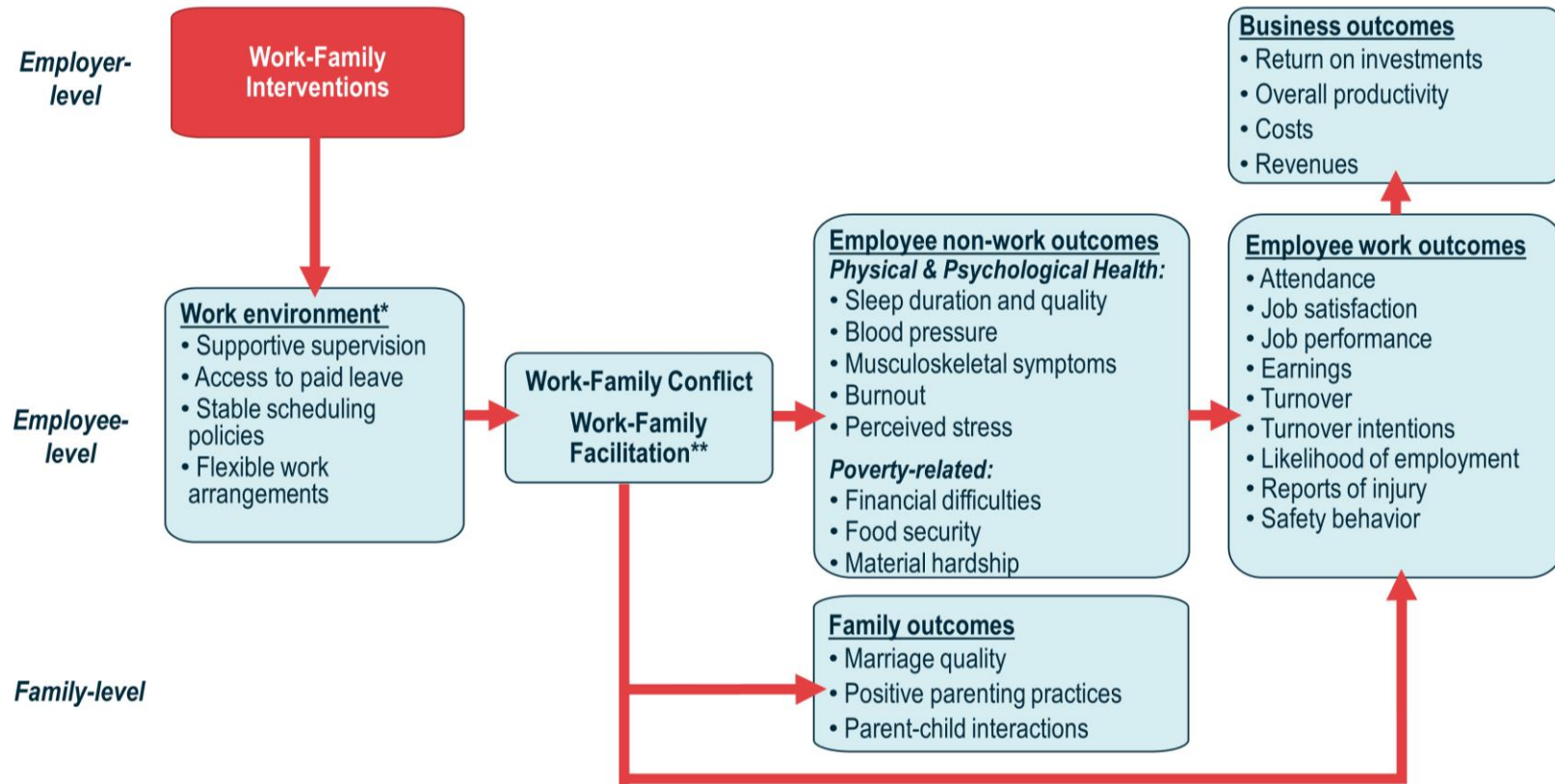
⁷ The prevalence of these barriers varies across surveys. For example, in some surveys 18 to 20 percent of low-income respondents reported that having young children presented a barrier to employment (Bloom et al., 2011), although other surveys found that young children presented a barrier for more than 70 percent of low-income respondents (Dworsky & Courney, 2007; National Partnership for Women & Families, 1999).

conflict between work and family needs and can prevent low-wage workers from overcoming these barriers (Miller, 2021; Williams et al., 2013). Furthermore, employers of low-wage workers can be reluctant to accommodate the personal and family needs of their employees (National Partnership for Women & Families, 1999). Employer-based work-family interventions can help individuals to manage competing work and family responsibilities, potentially alleviating substantial barriers to employment and improving employee and family wellbeing.

Research demonstrating the effect of work-family interventions for low-income workers remains relatively limited; however, a healthy body of work on workers in general provides important context for how researchers have conceptualized and evaluated work-family interventions. Theory and empirical evidence suggest that workplace interventions can impact work-family conflict by making the work environment more conducive to employees' family obligations (Kelly et al., 2008). Whether they allow infants in the workplace, institute flexible scheduling for caretakers, or encourage workers to take advantage of family leave benefits, employers can create working conditions that reduce work-family conflict. Increasing opportunities for employees to manage work-family conflict can then affect employees' work-related attitudes and behaviors as well as individual and family wellbeing (Kelly et al., 2008; Winston, 2014; Kossek et al., 2014). Indeed, less work-family conflict has been shown to correlate with increased job satisfaction (Bruck et al., 2002; Rhee et al., 2020), attendance (Boyar et al., 2005), and retention (Armstrong et al., 2007; Carr et al., 2008) as well as improved non-work outcomes, such as employee health (Allen & Armstrong, 2006; Hammer & Sauter, 2013).

By impacting employee behavior, these interventions can in turn impact employer outcomes, such as productivity and overall retention (Kelly et al., 2008; Winston, 2014). Studies show, in fact, that interventions that support workers in reconciling work and family demands can reduce conflict and improve other employee outcomes (Butts et al., 2013; Winston, 2014) as well as employer outcomes, such as overall productivity, retention, and revenues, either directly or through effects on employee behavior (Kelly et al., 2008; Barbosa et al., 2015; Williams et al., 2018a, 2018b). Figure 1 summarizes these various pathways explored in the literature.

Figure 1: Causal Pathways Considered in Work-Family Intervention Research⁸



*Work-family interventions can impact various characteristics of the work environment; the examples listed are explored further in this brief.

**Work-Family Facilitation refers to ways in which employers can facilitate employees' ability to meet both work and family demands.

⁸ The pathways in this figure are adapted from Kelly, et al. (2008).

Findings from Select Studies of Work-Family Interventions

Work-family interventions can impact the work environment structure, which is critical to realizing positive effects on employer and employee outcomes (Kelly et al., 2008). We identify four interventions in the textbox below that employers and lawmakers have implemented recently to support workers, particularly those with low wages, in sustaining employment and managing family needs and that researchers and evidence suggest can have the intended effects (Winston, 2014; Kelly et al., 2008).⁹

Supportive Supervision. Supervisors receive training and tools to support employees' non-work needs

Stable Scheduling. Policies that increase schedule predictability and stability (e.g., requiring advance notice of schedules or compensation for employer-requested schedule changes with little notice)

Flexible Work Arrangements. Policies that allow for flexible scheduling or flexible locations for performing work

Paid Leave. Policies that offer paid time off including sick, family, or vacation leave (see Winston et al., 2017, for examples of how these policies support workers with low incomes)

We then reviewed selected literature on these interventions. The selected U.S.-based studies (described in greater detail in the Appendix) and the expanded examples below demonstrate several key takeaways representative of the larger literature on work-family interventions.

- **Researchers have used a range of methods to evaluate work-family interventions.** The selected studies demonstrate the range of methods used including employer-based randomized controlled trials, quasi-experimental designs, and natural experiments. Studies of employer-based interventions used both experimental and quasi-experimental approaches. Studies of laws and regulations tend to use quasi-experimental methods to evaluate the effect of having a local or state law in place; some research has also examined how employers implement these laws in the workplace.
- **Researchers consistently evaluate employee work and non-work outcomes but are less likely to measure employer outcomes.** All selected studies evaluated effects on employee outcomes, and many consider health and family measures. Three of the example studies evaluate effects on employer outcomes, but most do not.

⁹ For example, a subset of states implemented paid sick leave laws in recent years. As of July 2020, 13 states and the District of Columbia passed paid sick leave legislation (National Conference of State Legislatures, 2020). Many municipalities and some states have also implemented stable scheduling laws including Seattle, San Francisco, Philadelphia, Chicago, New York City, and the state of Oregon.

- Selected studies demonstrate mixed effects on employee and employer outcomes. The included *supportive supervision* studies show varying overall effects on employee health, family, and employment outcomes depending on target population, with fewer improvements for low-wage workers. Selected studies show that *stable scheduling policies* had a positive effect on schedule stability, job satisfaction, and health-related outcomes, with varying effects on material hardship and no direct impact on work-family conflict. Effects of *paid leave policies* vary with most studies showing that paid leave policies are positively associated with the amount of leave used and job retention but not associated with an employee's stress levels or ability to manage work and family responsibilities. *Flexible work arrangements* are positively associated with family and employment outcomes.
- The few studies that evaluate employer outcomes found mixed results. Only three of the selected studies measure effects on employer-level outcomes. The STAR intervention and the Stable Scheduling Study measured economic returns for employers resulting from improved employer-level productivity, reduced turnover, and increased sales. An intervention consisting of

Challenges in Work-Family Intervention Research

Employer recruitment. Relatively little existing research relies on employer-based experimental or quasi-experimental designs that can identify causal effects of work-family policies (Kelly et al., 2008; Kossek et al., 2014). Rigorous research can require considerable time and effort to recruit employers who might lack the time, interest, or staff necessary to implement interventions (Ablah et al., 2019; Kidd et al., 2004); for example, employers with high turnover might hesitate to invest in workplace intervention research. However, researchers have successfully recruited employers using various strategies like involving intermediaries (e.g., individuals at community organizations with strong connections to both researchers and employers) (Miller et al., 2008; Linnan et al., 2012; Hammerback et al., 2018) or providing funding to offset participation costs (Ablah et al., 2019).

Data Availability. Examining all the potential effects of work-family interventions requires data on work performance as well as survey data on individual wellbeing and family interactions before and after an intervention. Similarly, researchers might require employer-level information on specific workplace practices and employer-level outcomes, such as overall productivity or revenues. However, many work-family intervention studies use administrative data from a single point in time rather than before and after an intervention (Kelly et al., 2008). Notably, studies of employer-based interventions to promote health behaviors or knowledge often use both experimental designs and longitudinal data, demonstrating that opportunities exist for rigorous research (Kelly et al., 2008; Stiehl et al., 2018).

Policy Availability versus Policy Use. Some research considers policy availability rather than use. Policies that support work-family outcomes will have an effect only if employers create circumstances that allow employees to use them (Allen et al., 2013; Kelly et al., 2008). This issue can be more pronounced for low-wage or hourly workers who might be less empowered to use existing policies.

supervisor training, case management, and life skills training found no effect on firmwide retention rates (Miller et al., 2008).

- **Effects varied by employee characteristics.** Studies show that the effectiveness of supportive supervision interventions might depend on employee characteristics such as employees' family structure, caregiving requirements, or baseline work-family conflict and supervisor support. For example, the selected supportive supervision studies show few positive impacts on workers overall but find positive impacts on family wellbeing for married employees and reduced intention to voluntarily change jobs or companies for workers with greater baseline work-family conflict, workers with especially low wages, younger workers, or workers at firms with high turnover.
- **Low-wage workers and workers from historically marginalized groups appear to benefit from many work-family interventions.** Studies of stable scheduling interventions that specifically targeted low-wage workers found positive effects on employees' health and wellbeing as well as on job satisfaction and on employer revenue. Studies of paid leave and flexible work arrangements examined effects for subsets of historically marginalized individuals. Findings indicated that mothers with less education and Black and Hispanic mothers experienced greater increases in the amount of paid leave used than other mothers. Flexible scheduling and work-from-home opportunities had a larger positive association with parent-child interactions for low-income mothers as compared with middle- and high-income mothers.

These high-level takeaways demonstrate the promise of these employer-based work-family interventions in potentially improving employee and employer outcomes as well as the opportunity for conducting more rigorous research on employer-based interventions.

Next, we provide two examples of interventions and their corresponding evaluations that are particularly instructive: the STAR intervention and the Stable Scheduling Study. They demonstrate how employer-based interventions that address potential causes of work-family conflict can have positive outcomes for workers, particularly workers with low wages, and employers.

Intervention Example: STAR Intervention



Intervention Description

Researchers at the Work, Family & Health Network (WFHN) tested the STAR (“Support. Transform. Achieve. Results.”) intervention over five years through two group-randomized field experiments. The core components of STAR include 1) facilitated supervisor training sessions on strategies to demonstrate support for employees’ personal and family lives and 2) participatory training sessions where employees and supervisors have facilitated discussions to identify new work practices and processes to increase employees’ control over their work time. One experiment was conducted with 56 sites of the information technology (IT) division of a U.S. Fortune 500 company (TOMO), which consisted of higher-wage, salaried employees. The other experiment was conducted at 30 nursing homes managed by a long-term care company (Leef) and included lower-wage, hourly workers (DePasquale et al., 2018; Kelly et al., 2014).

Data on a wide range of measures was collected from managers, employees, spouses or partners, and children at baseline and at 6-, 12-, and 18-months follow-ups through a computer-assisted personal interview that included a self-report survey and biometric health measurements. The WFHN researchers have published more than 50 papers about the STAR intervention and have evaluated more than 40 employee and employer outcomes including employees’ work environment (e.g., job control, supervisor support for their family and personal lives, obligation to come to work when sick), family life (e.g., parenting practices, couple relationships, time with children), and health and wellbeing (e.g., sleep quality, stress, physical health), as well as employer-level outcomes (e.g., safety compliance, organizational commitment, turnover intentions).[^]

Key Findings and Takeaways

- **The STAR intervention had varying effects across the two test sites.** At TOMO, the intervention led to greater employee schedule control, greater perceived supervisor support for employees’ family and personal lives, fewer work-family conflicts, and increased daily shared time between mothers and daughters (Davis et al., 2015; Kelly et al., 2014). At Leef, the intervention decreased stress levels for double-and-triple-duty caregivers^{^^} and reduced turnover intentions for double-duty child caregivers but had no effect on the overall workforce (DePasquale et al., 2018; Hammer et al., 2016; Kossek et al., 2019).
- **Researchers found mixed effects on employer-level outcomes.**^{^^^} At Leef, STAR led to improvements in safety compliance at the 6-month follow-up but only when supervisors exhibited greater support for employees’ family and personal life compared with the baseline (Hammer et al., 2016). At TOMO, it was unclear about the extent to which there were measurable financial benefits to the employers implementing STAR (Barbosa et al., 2015).
- **This intervention demonstrates one way to evaluate an employer-based intervention by recruiting large employers with multiple sites and randomizing sites to different conditions.**

[^] A public-use dataset and accompanying documentation are available at <https://workfamilyhealthnetwork.org/data>.

^{^^} “Double-duty caregivers” are employees who informally care for children (“double-duty-child caregivers”) or older adults (“double-duty elder caregivers”) whereas “triple-duty caregivers” are individuals who informally care for children and older adults.

^{^^^} To our knowledge, most current publications do not report aggregate employer outcomes, such as overall labor productivity; however, studies are still being published from the Work, Family & Health Network.

Intervention Example: Stable Scheduling Study



Intervention Description

The Stable Scheduling Study tested an intervention designed to increase schedule stability for retail workers by increasing their schedule consistency, predictability, adequacy, and input into their schedules. A cluster randomized experiment conducted at 28 Gap stores in the San Francisco and Chicago metropolitan areas included a total of 1,447 predominantly part-time, hourly associates over the one-year study.[^] Managers in intervention stores committed to implementing additional stable scheduling practices for associates.^{^^}

To evaluate employee and employer outcomes, researchers analyzed company administrative data including sales and traffic records as well as data from surveys, interviews, and focus groups of managers and associates. The outcomes of interest include workers' schedule stability, food insecurity, financial insecurity, work-life conflict, and health outcomes as well as employer-level business outcomes. Below we summarize current findings. Stable Scheduling Study researchers are continuing analysis of workers in low-income households which could provide additional information about the relationship between stable scheduling interventions and outcomes for low-income workers.

Key Findings and Takeaways

- **Baseline data suggests that unstable work schedules negatively affect employees' health and wellbeing.** Additionally, more than one-quarter of workers reported that their work schedules interfered with family activities, such as attending events important to their child (Williams et al., 2018b).
- **The intervention moderately improved associates' schedule stability by increasing consistency, predictability, and their input into their work schedules.** However, adequacy of work hours did not increase for the average part-time associate, and about one-half of the associates in both treatment and control stores indicated that they would like to work more hours (Williams et al., 2018a).
- **Though the improvements in associates' schedule stability were modest, the intervention still had positive effects on their health and wellbeing.** Overall, sleep quality improved, which is associated with improvements in other distal health outcomes. The intervention did not have any overall effects on workers' work-family conflict or food insecurity. Models that control for household income suggest that the intervention decreased perceived stress and financial insecurity. It also decreased stress among parents and individuals who worked two jobs (Williams et al., 2018b).
- **Employer outcomes improved. Median sales and labor productivity increased, including an estimated \$2.9 million increase in revenue.^{^^^}** Early results show that turnover among experienced store associates decreased, although overall turnover did not (Williams et al., 2018a).

[^] Most associates were economically vulnerable individuals who reported experiencing financial and food insecurity, and half had a household income of \$40,000 or less in the year before the study.

^{^^} Following the study pretest, Gap rolled out new policies nationwide requiring stores to finalize and publish work schedules two weeks in advance and eliminate on-calls (i.e., scheduling tentative shifts that might be cancelled only a few hours before they are scheduled to start). The intervention consisted of five additional stable scheduling practices: 1) using a mobile app that allowed associates to swap shifts and store managers to post shifts that needed to be filled after the schedule was published, 2) establishing standard shift start and end times, 3) improving consistency of days and times associates were scheduled to work, 4) giving a core team of associates a "soft guarantee" of 20 or more hours of work per week, and 5) adding staff to some sales floors at consistent specified times, targeting stores most likely to increase sales as identified by researcher analysis.

^{^^^} In the retail industry, companies invest considerable resources to achieve sales increases of 1.0–2.0 percent; the intervention increased median sales by 7.0 percent. Labor productivity (sales per hour of labor) increased by 5.0 percent. In comparison, overall retail labor productivity grew by about 2.5 percent per year between 1987 and 2014 (Williams et al., 2018a).

New Directions for Research and Evaluation

This brief explores the importance of employer-based work-family interventions that can support workers, particularly individuals experiencing work-family conflict. These interventions—which focus on increasing supervisor support, access to paid leave, schedule stability, and flexible work arrangements—might be particularly valuable in supporting low-wage workers with families who typically have less access to these types of benefits. Below we describe advances in research and data collection that could expand the evidence on effective employer-based work-family interventions for low-wage workers. We then provide strategies to engage and encourage employers to participate in studies of work-family interventions.

Promising Pathways for Research and Evaluation

- **Evaluate work-family interventions rigorously for low-wage workers.** Interventions to increase supervisor support, schedule stability, flexible work arrangements, and access to paid leave hold promise for reducing work-family conflict and improving outcomes for low-wage workers and their families, but evidence is still limited. Future research could implement experimental or quasi-experimental studies of employer-based interventions to determine their effectiveness across low-wage sectors. Moreover, available evidence suggests effects differ by individuals' baseline characteristics such as family structure, care obligations, income, and job sector. Future research could explore these differences to inform what works and for whom.
- **Invest in data collection.** Increasing data availability could further expand the body of rigorous research. Collecting longitudinal data through employee surveys pre- and post-intervention and obtaining employer-level data could provide valuable information on intervention effects. Many studies have data on only short-term employee outcomes at work and are unable to consider longer-term effects or impacts on family or employer outcomes, such as parent-child interactions, child health and development, or employer-level productivity and revenue. Expanded data collection could also allow researchers to develop models that account for employee background characteristics and the nested nature of employer and employee data. Improved data and estimation procedures could help determine the full benefits of work-family interventions.
- **Update research on barriers to employment for low-wage workers.** Conditions for workers, particularly low-wage workers, have changed considerably in recent years; for example, the expansion of the digital economy has changed the demand for in-person retail and food service workers (Carré et al., 2020). Contemporary surveys of low-wage workers and staff who assist workers in finding employment would reflect the current political and economic landscape and potentially identify barriers related to shifts in automation, demography, and laws as well as implications from the COVID-19 pandemic. Changes in barriers to employment

might highlight alternative promising employer-based interventions for future study.

Strategies for Recruiting Employers to Participate in Research and Evaluation

- **Identify employer characteristics that might increase their likelihood of participation in rigorous research studies.** Large employers might have more resources to implement interventions and better data infrastructure for evaluation, potentially making them more willing participants (Hannon & Harris, 2008). Researchers could also recruit employers struggling with a particular outcome, such as retention, by highlighting interventions that could help them improve in that area. Research on strategies to recruit employers to participate in health promotion activities has found few differences between employers who do and employers who do not participate, suggesting that this approach might improve participation without harming external validity (Biener et al., 1994; Thompson et al., 1997; Barbeau et al., 2004).
- **Leverage intermediaries to connect researchers to employers.** Recruiting employers for research studies is difficult and requires developing strong relationships between researchers and employers. Researchers found that referrals from community partners increased the rate of employer participation (Linnan et al., 2012; Hammerback et al., 2018) and decreased the cost per recruited employer as compared to cold calls or drop-in site visits without a referral (Linnan et al., 2012). Some studies found success funding positions for individuals whose primary responsibility included meeting with and recruiting employers (Ablah et al., 2019; Miller et al., 2008). Moreover, developing relationships with employers allows research recruiters to gauge commitment and willingness to participate ahead of randomization, which can limit bias and cost associated with employer dropout post-randomization (Thompson et al., 1997).
- **Consider recruiting a large employer with multiple sites and randomizing sites to different conditions.** The STAR intervention and the Stable Scheduling Study took the approach of recruiting a single management company or corporate office that operated multiple sites and randomizing different sites to treatment and control conditions.
- **Communicate the potential economic and social returns on investment to implementing work-family policies and practices.** Opportunities to reduce expenses, increase revenues, or implement interventions at low or no cost can result in economic returns and provide a business case for employers to participate in research on work-family interventions (Kidd et al., 2004; Hannon & Harris, 2008; Ablah et al., 2019). Moreover, employers might respond to the potential social return on investment that work-family interventions can have on their employees' wellbeing, on the employers' organizational value system, and on society as a whole. For example, studies of recruitment approaches for workplace health and

safety interventions found that employers who observed positive impacts on their employees' health, had a strong commitment to health and safety, or both were more likely to implement a given intervention (Kidd et al., 2004; Ablah et al., 2019). Researchers could highlight the potential returns to participation in their recruitment communication materials.¹⁰

- **Involve employers and employees in developing intervention components.** The Stable Scheduling Study and the STAR intervention targeted work practices identified by employers and employees as feasible to implement and likely to address the intended goals. This approach reflects the principles of participatory evaluation practices and can increase employer buy-in.¹¹ Notably, this practice can also help translate successful interventions from higher-wage sectors to lower-wage ones. For example, an IT company in the STAR Intervention implemented a flexible work *location* arrangement for their employees. A nursing home company modified this intervention into a flexible work *schedule* arrangement for its employees who cannot telework.
- **Provide practical and actionable information to the employer.** Researchers in the Stable Scheduling Study analyzed store data to identify stores where additional staffing at specified times would likely increase sales, one of the five intervention components. These stores received additional staffing hours funded by Gap (i.e., at no cost to the store's labor budget), suggesting that providing actionable research can increase employer investment and engagement with testing interventions (Williams et al., 2018a).
- **Take advantage of approaches that do not require recruiting employers.** Studies of secure scheduling and paid leave laws cited in the Appendix demonstrate how researchers can learn from variation in employer-based policies and government mandates without recruiting employers. The sample studies demonstrate how researchers collected data from workers using social media surveys or obtained state- and local-level administrative data and then used quasi-experimental methods to conduct retrospective analyses of the impacts of work-family policies. This approach allowed them to assess the effectiveness of these policies without engaging employers.

¹⁰ For example, the Safety and Health Improvement Program researchers developed employer recruitment slides targeting organizational leadership that highlights the costs of workplace injuries to employers to emphasize the value of the intervention that improves safety: <https://www.yourworkpath.com/ship>.

¹¹ Participatory evaluation refers to an approach where evaluators collaborate in some way with individuals, groups, or communities that have a stake in the intervention or program being evaluated during the evaluation process. This approach might include involvement in the evaluation design or shared ownership and control of evaluation decision-making. These individuals typically have a vested interest in the intervention or program being evaluated (Cousins & Whitmore, 1998). In the Stable Scheduling Study and the STAR intervention, these individuals included staff, managers, or board members.

Appendix: Selected Studies Evaluating Employer-Based Work-Family Interventions

Bolded studies have findings for low-wage populations. All studies are based in the United States.

Citation	Intervention description	Research design	Target population	Sample size	Outcome type	Summary of findings
Work-family intervention: Supportive supervisor training						
Hammer, et al., 2019. <i>Supervisor support training effects on veteran health and work outcomes in the civilian workplace.</i> Brady et al., 2020. <i>Supportive Supervisor Training Improves Family Relationships Among Employee and Spouse Dyads.</i> Hammer et al., 2020. <i>Training supervisors to support veterans at work: Effects on supervisor attitudes and employee sleep and stress.</i>	Supervisor support training	Experimental	Veterans	497 individuals in 35 organizations	Health outcomes Turnover intentions Job performance Family outcomes Supervisor attitudes	Supervisor attitudes towards employees improved, but the intervention had no direct effects on employee work or health outcomes. For married employees, the intervention increased marriage quality but had no effect on positive parenting practices.
Hammer et al., 2019. <i>Exploration of the impact of organisational context on a workplace safety and health intervention.</i>	Supervisor support training, facilitated team effectiveness process sessions	Experimental	Field construction workers	249 individuals in 20 workgroups	Employee perceptions	No main effects on employees' perceptions of family supportive supervisor behaviors, team effectiveness, and work-life effectiveness.
Hammer et al., 2011. <i>Clarifying work-family intervention processes: the roles of work-family conflict and family-supportive supervisor behaviors.</i>	Supportive supervision training	Quasi-experimental	Grocery store employees	239 employees in 12 stores	Self-reported supervisor behavior Work-family conflict Job satisfaction Turnover intention	Employee health improved for individuals with the average amount of work-family conflict. The intervention had no effect on job satisfaction, employee turnover, or supportive supervisor behavior. Further analysis suggests that effects are moderated by baseline work-family conflict. For example, the intervention improved job

Citation	Intervention description	Research design	Target population	Sample size	Outcome type	Summary of findings
					Physical health	satisfaction and turnover intentions only for individuals with greater baseline conflict levels.
Miller et al., 2008. <i>Findings for the Cleveland Achieve Model: Implementation and Early Impacts of an Employer-Based Approach to Encourage Employment Retention Among Low-Wage Workers.</i>	Supervisor training, on-site case management services, life skills education	Experimental	Low-wage workers, primarily nurse's aides	697 low-wage workers at 44 firms	Case management service receipt Job satisfaction Retention Employment Earnings Employer outcomes	Service receipt increased, but the intervention had no significant effect on retention, employment, or earnings overall. It did reduce turnover rates for individuals earning especially low wages, young workers, and individuals at firms with high turnover rates. For some firms, it also had a small positive effect on retention and days worked in the short-term. The intervention had no effect on firmwide retention rates.
Work-family intervention: Stable scheduling						
Haley et al., 2019. <i>The Evaluation of Seattle's Secure Scheduling Ordinance: Year 1 Findings.</i> Harknett et al., 2021a. <i>Seattle's Secure Scheduling Ordinance Year 2 Worker Impact Report.</i> Harknett et al., 2021b. <i>Improving health and economic security by reducing work schedule uncertainty.</i>	The Shift Project: Stable scheduling	Quasi-experimental/difference-in-differences	Hourly workers in low-wage service sector	3,060 workers in Seattle and other metropolitan areas	Schedule stability Schedule satisfaction Job satisfaction Material hardship Sleep quality	Seattle's Secure Scheduling Ordinance (SSO) is intended to improve hourly workers' schedule stability by requiring large retail and food service establishments to provide workers with more secure scheduling plans (Seattle Municipal Code 14.22). The Shift Project found that the Seattle SSO increased employees' schedule stability, schedule satisfaction, job satisfaction, happiness, and sleep quality while also reducing material hardship. However, it did not lead to significant improvements in workers' reported psychological distress.

Citation	Intervention description	Research design	Target population	Sample size	Outcome type	Summary of findings
						Researchers also considered employer implementation of the SSO, an important consideration because employers are in the role of policy implementer rather than policymaker. They found most employers were working to align their practices with the SSO provisions, although levels of adoption and alignment varied.
Work-family intervention: Paid leave						
Baum & Ruhm, 2016. <i>The Effects of Paid Family Leave in California on Labor Market Outcomes.</i>	Paid family leave	Quasi-experimental	Employed parents	4,196	Amount of paid leave used Likelihood of employment	California's Paid Family Leave program increased the leave-taking of new parents in California and increased the likelihood of employment for mothers 9 to 12 months after childbirth.
Rossin-Slater et al., 2013. <i>The Effects of California's Paid Family Leave Program on Mothers' Leave-Taking and Subsequent Labor Market Outcomes.</i>	Paid family leave	Quasi-experimental	Mothers	14,947	Amount of paid leave used	California's Paid Family Leave Program raised the probability of employed mothers taking more time off. Though not definitive, findings suggest that mothers with less education and Black and Hispanic mothers had larger increases in the amount of paid leave used.
Han et al., 2009. <i>Parental Leave Policies and Parents' Employment and Leave-Taking.</i>	Unpaid and paid family leave	Quasi-experimental	Employed parents	33,165	Likelihood of taking leave Employment rate	Parental leave expansion is associated with an increase in both mothers' and fathers' leave-taking but had no relationship with employment.
Choper et al., 2019. <i>Uncertain Time: Precarious Schedules and Job Turnover in the U.S. Service Sector.</i> Schneider, 2020. <i>Paid Sick Leave in Washington State:</i>	The Shift Project: Paid sick leave	Quasi-experimental/ difference-in-differences	Workers in low-wage service sector	12,772 service workers	Use of paid sick leave Presenteeism (i.e., working while sick)	The Shift Project found that Washington's sick leave policy increased the share of workers reporting paid sick leave and reduced employees' working while sick. It had no impact on either employee and

Citation	Intervention description	Research design	Target population	Sample size	Outcome type	Summary of findings
<i>Evidence on Employee Outcomes, 2016–2018.</i>					Work-family conflict	family stress or an employee’s ability to manage work and family needs.
Hill, 2013. <i>Paid Sick Leave and Job Stability.</i>	Paid sick leave	Quasi-experimental	Employed individuals	13,900	Job retention	Access to paid sick leave reduced the probability of job separation.
Work-family intervention: Flexible work arrangements						
Kim, 2020. <i>Workplace flexibility and parent-child interactions among working parents in the U.S.</i>	Flexible hours Work from home Part-time employment	Quasi-experimental/ correlational	Parents	8,250	Parent-child interactions	Flexible work arrangements are associated with more parent-child interactions including more daily routine activities (e.g., teeth brushing, meal preparation) and enrichment activities (e.g., reading, singing songs). However, the relationship varied by type of arrangement. Flexible scheduling and work from home were positively associated with routine and enriching interactions for low-income mothers; these effects were larger for low-income mothers than for middle- and high-income mothers.
Moen et al., 2011. <i>Does Enhancing Work-Time Control and Flexibility Reduce Turnover? A Naturally Occurring Experiment.</i>	Flexible hours (ROWE—Results-Only Work Environment)	Natural experiment	Employees at Best Buy corporate headquarters	775	Turnover Turnover intentions	Employees who participated in ROWE (Results-Only Work Environment) had lower rates of turnover and reduced turnover intentions.

References

- Ablah, E., Umansky, E., Wilcox, E.A., Usher, J., Church, J., & Barnes, V. (2019). Innovative Recruitment Strategies for a Comprehensive Worksite Wellness Initiative. *Health Education Research, 34*(6), 569–577.
- Allen, T.D. & Armstrong, J. (2006). Further Examination of the Link Between Work-Family Conflict and Physical Health: The Role of Health-Related Behaviors. *American Behavioral Scientist, 49*(9), 1204–1221. <https://doi.org/10.1177/0002764206286386>
- Allen, T.D., Johnson, R.C., Kiburz, K.M., & Shockley, K.M. (2013). Work-Family Conflict and Flexible Work Arrangements: Deconstructing Flexibility. *Personnel Psychology, 66*(2), 345–376. <https://doi.org/10.1111/peps.12012>
- Armstrong, D.J., Riemenschneider, C.K., Allen, M.W., & Reid, M.F. (2007). Advancement, voluntary turnover and women in IT: A cognitive study of work-family conflict. *Information & Management, 44*(2), 142–153. <https://doi.org/10.1016/j.im.2006.11.005>
- Barbeau, E.M., Wallace, L., Lederman, R., Lightman, N., Stoddard, A., & Sorensen, G. (2004). Recruiting Small Manufacturing Worksites That Employ Multiethnic, Low-Wage Workforces into a Cancer Prevention Research Trial. *Preventing Chronic Disease, 1*(3), 1–9.
- Barbosa, C., Bray, J.W., Dowd, W.N., Mills, M.J., Moen, P., Wipfli, B., Olson, R., & Kelly, E.L. (2015). Return on Investment of a Work-Family Intervention: Evidence from the Work, Family, and Health Network. *Journal of Occupational and Environmental Medicine, 57*(9), 943–951. <https://doi.org/10.1097/JOM.0000000000000520>
- Baum, C.L. & Ruhm, C.J. (2016). The Effects of Paid Family Leave in California on Labor Market Outcomes. *Journal of Policy Analysis and Management, 35*(2), 333–356. <https://doi.org/10.1002/pam.21894>
- Biener, L., DePue, J.D., Emmons, K.M., Linnan, L., & Abrams, D.B. (1994). Recruitment of Work Sites to a Health Promotion Research Trial. Implications for generalizability. *Journal of Occupational Medicine, 36*(6), 631–636.
- Bloom, D., Loprest, P., & Zedlewski, S.R. (2011). *TANF Recipients with Barriers to Employment* (Temporary Assistance for Needy Families Program—Research Synthesis Brief Series Brief 1). Washington, DC: Urban Institute and Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Boesch, D. (2020, September 1). The Urgent Case for Permanent Paid Leave. *Center for American Progress*. <https://www.americanprogress.org/issues/women/reports/2020/09/01/489914/urgent-case-permanent-paid-leave/>
- Boyar, S.L., Maertz, C.P., & Pearson, A.W. (2005). The effects of work-family conflict and family-work conflict on nonattendance behaviors. *Journal of Business Research, 58*(7), 919–925. <https://doi.org/10.1016/j.jbusres.2003.11.005>
- Bowie, S.L. & Dopwell, D.M. (2013). Metastressors as barriers to self-sufficiency among TANF-reliant African American and Latina women. *Journal of Women and Social Work, 28*(2), 177–193.

- Brady, J., Hammer, L., Mohr, C., & Bodner, T. (2020). Supportive Supervisor Training Improves Family Relationships Among Employee and Spouse Dyads. *Journal of Occupational Health Psychology, 26*.
<https://doi.org/10.1037/ocp0000264>
- Bruck, C.S., Allen, T.D., & Spector, P.E. (2002). The Relation between Work-Family Conflict and Job Satisfaction: A Finer-Grained Analysis. *Journal of Vocational Behavior, 60*(3), 336–353.
<https://doi.org/10.1006/jvbe.2001.1836>
- Butts, M.M., Casper, W.J., & Yang, T.S. (2013). How Important Are Work–Family Support Policies? A Meta-Analytic Investigation of Their Effects on Employee Outcomes. *Journal of Applied Psychology, 98*(1), 1–25.
<https://doi.org/10.1037/a0030389>
- Carr, J.C., Boyar, S.L., & Gregory, B.T. (2008). The Moderating Effect of Work-Family Centrality on Work-Family Conflict, Organizational Attitudes, and Turnover Behavior. *Journal of Management, 34*(2), 244–262.
<https://doi.org/10.1177/0149206307309262>
- Carré, F., Tilly, C., Benner, C., and Mason, S. (2020). *Change and Uncertainty, Not Apocalypse: Technological Change and Store-Based Retail*. Berkeley, CA: UC Berkeley Labor Center and Working Partnerships USA.
- Choper, J., Schneider, D., & Harknett, K. (2019). *Uncertain Time: Precarious Schedules and Job Turnover in the U.S. Service Sector*. Washington Center for Equitable Growth. <http://www.equitablegrowth.org/working-papers/uncertain-time-precarious-schedules-and-job-turnover-in-the-u-s-service-sector/>
- Cooper, D. & Kroeger, T. (2017). *Employers Steal Billions from Workers' Paycheck Each Year*. Washington, DC: Economic Policy Institute.
- Cousins, J.B., & Whitmore, E. (1998). Framing participatory evaluation. *New Directions for Evaluation, 1998*(80), 5–23. <https://doi.org/10.1002/ev.1114>
- Davis, K.D., Lawson, K.M., Almeida, D.M., Kelly, E.L., King, R.B., Hammer, L., Casper, L.M., Okechukwu, C.A., Hanson, G., & McHale, S.M. (2015). Parents' Daily Time With Their Children: A Workplace Intervention. *Pediatrics, 135*(5), 875–882.
- DePasquale, N., Polenick, C.A., Davis, K.D., Berkman, L.F., & Cabot, T.D. (2018). A Bright Side to the Work-Family Interface: Husbands' Support as a Resource in Double-and-Triple-Duty Caregiving Wives' Work Lives. *The Gerontologist, 58*(4), 674–685. <https://doi.org/10.1093/geront/gnx016>
- Dworsky, A. & Courtney, M. (2007). Barriers to Employment among TANF Applicants and Their Consequences for Self-Sufficiency. *Families in Society: The Journal of Contemporary Social Services, 88*(3), 379–389.
- Fishman, M., Bloom, D., & Elkin, S. (2020). *Employment and Training Programs Serving Low-Income Populations: Next Steps for Research* (OPRE Report 2020-72). Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Gould, E. & Shierholz, H. (2020, March 19). Not everybody can work from home: Black and Hispanic workers are much less likely to be able to telework. *Working Economics Blog*. <https://www.epi.org/blog/black-and-hispanic-workers-are-much-less-likely-to-be-able-to-work-from-home/>
- Haley, A., Harknett, K., Harper, S., Lambert, S., Romich, J., & Schneider, D. (2019). *The Evaluation of Seattle's Secure Scheduling Ordinance: Year 1 Findings*. Seattle, WA: West Coast Poverty Center, University of Washington.

- Hammer, L.B., Brady, J.M., & Perry, M.L. (2020). Training supervisors to support veterans at work: Effects on supervisor attitudes and employee sleep and stress. *Journal of Occupational and Organizational Psychology*, 93(2), 273–301. <https://doi.org/10.1111/joop.12299>
- Hammer, L.B., Brockwood, K.J., Bodner, T., Mohr, C.D., & Wan, W.H. (2019). Supervisor support training effects on veteran health and work outcomes in the civilian workplace. *Journal of Applied Psychology*, 104(1), 52–69.
- Hammer, L.B., Johnson, R.C., Crain, T.L., Bodner, T., Kossek, E.E., Davis, K., Kelly, E.L., Buxton, O.M., Karuntzos, G., Chosewood, L.C., & Berkman, L. (2016). Intervention Effects on Safety Compliance and Citizenship Behaviors: Evidence from the Work, Family, and Health Study. *The Journal of Applied Psychology*, 101(2), 190–208. <https://doi.org/10.1037/apl0000047>
- Hammer, L.B., Kossek, E.E., Anger, W.K., Bodner, T., & Zimmerman, K.L. (2011). Clarifying Work-Family Intervention Processes: The Roles of Work-Family Conflict and Family Supportive Supervisor Behaviors. *The Journal of Applied Psychology*, 96(1), 134–150. <https://doi.org/10.1037/a0020927>
- Hammer, L.B. & Perry, M.L. (2019). Reducing work-life stress: The place for integrated interventions. In H.L. Hudson, J.A.S. Nigam, S.L. Sauter, L.C. Chosewood, A.L. Schill, & J. Howard (Eds.), *Total worker health* (pp. 263–278). American Psychological Association. <https://doi.org/10.1037/0000149-016>
- Hammer, L.B. & Sauter, S. (2013). Total Worker Health and Work-Life Stress. *Journal of Occupational and Environmental Medicine*, 55, S25. <https://doi.org/10.1097/JOM.0000000000000043>
- Hammer, L.B., Truxillo, D.M., Bodner, T., Pytlovany, A.C., & Richman, A. (2019). Exploration of the impact of organisational context on a workplace safety and health intervention. *Work & Stress*, 33(2), 192–210. <https://doi.org/10.1080/02678373.2018.1496159>
- Hammerback, K., Hannon, P.A., Parrish, A.T., Allen, C., Kohn, M.J., & Harris, J.R. (2018). Comparing strategies for recruiting small, low-wage worksites for community-based health promotion research. *Health Education & Behavior*, 45(5), 690–696.
- Han, W.-J., Ruhm, C., & Waldfogel, J. (2009). Parental leave policies and parents' employment and leave-taking. *Journal of Policy Analysis and Management*, 28(1), 29–54. <https://doi.org/10.1002/pam.20398>
- Hannon, P.A. & Harris, J. R. (2008). Interventions to Improve Cancer Screening. *American Journal of Preventive Medicine*, 35(1), S10–S13. <https://doi.org/10.1016/j.amepre.2008.04.007>
- Harknett, K., Schneider, D., & Irwin, V. (2021a). *Seattle's Secure Scheduling Ordinance Year 2 Worker Impact Report*. Seattle, WA: West Coast Poverty Center, University of Washington.
- Harknett, K., Schneider, D., & Irwin, V. (2021b). Improving health and economic security by reducing work schedule uncertainty. *Proceedings of the National Academy of Sciences*, 118(42). <https://doi.org/10.1073/pnas.2107828118>
- Hill, H.D. (2013). Paid Sick Leave and Job Stability. *Work and Occupations*, 40(2), 143–173. <https://doi.org/10.1177/0730888413480893>
- Kelly, E.L. (2010). Failure to Update: An Institutional Perspective on Noncompliance With the Family and Medical Leave Act. *Law & Society Review*, 44(1), 33–66. <https://doi.org/10.1111/j.1540-5893.2010.00395.x>
- Kelly, E.L., Kossek, E.E., Hammer, L.B., Durham, M., Bray, J., Chermack, K., Murphy, L.A., & Kaskubar, D. (2008). Getting There from Here: Research on the Effects of Work-Family Initiatives on Work-Family Conflict and

- Business Outcomes. *Academy of Management Annals*, 2(1), 305–349.
<https://doi.org/10.5465/19416520802211610>
- Kelly, E.L., Moen, P., Oakes, J.M., Fan, W., Okechukwu, C., Davis, K.D., Hammer, L.B., Kossek, E.E., King, R.B., Hanson, G.C., Mierzwa, F., & Casper, L.M. (2014). Changing Work and Work-Family Conflict: Evidence from the Work, Family, and Health Network. *American Sociological Review*, 79(3), 485–516.
<https://doi.org/10.1177/0003122414531435>
- Kidd, P., Parshall, M., Wojcik, S., & Struttman, T. (2004). Overcoming Recruitment Challenges in Construction Safety Intervention Research. *American Journal of Industrial Medicine*, 45(3), 297–304.
- Kim, J. (2020). Workplace Flexibility and Parent-Child Interactions Among Working Parents in the U.S. *Social Indicators Research*, 151(2), 427–469. <https://doi.org/10.1007/s11205-018-2032-y>
- Kossek, E.E., Hammer, L.B., Kelly, E.L., & Moen, P. (2014). Designing Work, Family & Health Organizational Change Initiatives. *Organizational Dynamics*, 43(1), 53–63. <https://doi.org/10.1016/j.orgdyn.2013.10.007>
- Kossek, E.E., Thompson, R.J., Lawson, K.M., Bodner, T., Perrigino, M.B., Hammer, L.B., Buxton, O.M., Almeida, D.M., Moen, P., Hurtado, D.A., Wipfli, B., Berkman, L., & Bray, J.W. (2019). Caring for the elderly at work and home: Can a randomized organizational intervention improve psychological health? *Journal of Occupational Health Psychology*, 24(1), 36–54. <https://doi.org/10.1037/ocp0000104>
- Linnan, L., Harrington, C., Bangdiwala, K., & Evenson, K. (2012). Comparing Recruitment Methods to Enrolling Organizations into a Community-Based Intervention Trial: Results from the NC BEAUTY and Health Project. *Journal of Clinical Trials*, 2(3), 1–5.
- Miller, C. (2021). Understanding the Changing Nature of Work: Implications for Research and Evaluation to Inform Programs Serving Low-Income Populations (OPRE Report 2021-178). Washington, D.C.: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Miller, C., Martin, V., Hamilton, G., Cates, L., & Deitch, V. (2008). Findings for the Cleveland Achieve Model: Implementation and Early Impacts of an Employer-Based Approach to Encourage Employment Retention Among Low-Wage Workers. MDRC.
- Modestino, A.S., Ladge, J., & Lincoln, A. (2020, July 29). The importance of childcare in reopening the economy. *Econofact*. <https://econofact.org/the-importance-of-childcare-in-reopening-the-economy>
- Moen, P., Kelly, E.L., & Hill, R. (2011). Does Enhancing Work-Time Control and Flexibility Reduce Turnover? A Naturally Occurring Experiment. *Social Problems*, 58(1), 69–98. <https://doi.org/10.1525/sp.2011.58.1.69>
- National Conference of State Legislatures. (2020, July 21). *Paid Sick Leave*. National Conference of State Legislatures. <https://www.ncsl.org/research/labor-and-employment/paid-sick-leave.aspx>
- National Partnership for Women & Families. (1999). *Detours on the Road to Employment: Obstacles Facing Low-Income Women*. Washington, DC: National Partnership for Women & Families.
- Pew Research Center. (2020). How Coronavirus Has Changed the Way Americans Work. <https://www.pewresearch.org/social-trends/2020/12/09/how-the-coronavirus-outbreak-has-and-hasnt-changed-the-way-americans-work/>

- Pew Research Center. (2021). Unemployed Americans are feeling the emotional strain of job loss; most have considered changing occupations. *Pew Research Center*. <https://www.pewresearch.org/fact-tank/2021/02/10/unemployed-americans-are-feeling-the-emotional-strain-of-job-loss-most-have-considered-changing-occupations/>
- Repko, M. & Lucas, A. (2021, August 11). *Labor shortage gives retail and restaurant workers the upper hand—for now*. CNBC. <https://www.cnbc.com/2021/08/11/labor-shortage-gives-retail-and-restaurant-workers-the-upper-hand.html>
- Rhee, M.-K., Park, S.K., & Lee, C.-K. (2020). Pathways from workplace flexibility to turnover intention: Role of work-family conflict, family-work conflict, and job satisfaction. *International Journal of Social Welfare*, 29(1), 51–61. <https://doi.org/10.1111/ijsw.12382>
- Rossin-Slater, M., Ruhm, C.J., & Waldfogel, J. (2013). The Effects of California’s Paid Family Leave Program on Mothers’ Leave-Taking and Subsequent Labor Market Outcomes. *Journal of Policy Analysis and Management*, 32(2), 224–245. <https://doi.org/10.1002/pam.21676>
- Sama-Miller, E., Kleinman, R., Timmins, L., & Dahlen, H. (2019). *Employment and Health Among Low-Income Adults and their Children: A Review of the Literature*. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Schneider, D. (2020). Paid Sick Leave in Washington State: Evidence on Employee Outcomes, 2016–2018. *American Journal of Public Health*, 110(4), 499–504. <https://doi.org/10.2105/AJPH.2019.305481>
- Schneider, D. & Harknett, K. (2019). Consequences of Routine Work-Schedule Instability for Worker Health and Well-Being. *American Sociological Review*, 84(1), 82–114.
- Stiehl, E., Shivaprakash, N., Thatcher, E., Ornelas, I.J., Kneipp, S., Baron, S.L., & Muramatsu, N. (2018). Worksite Health Promotion for Low-Wage Workers: A Scoping Literature Review. *American Journal of Health Promotion*, 32(2), 359–373. <https://doi.org/10.1177/0890117117728607>
- Thompson, B., van Leynseele, J., & Beresford, S.A. (1997). Recruiting Worksites to Participate in a Health Promotion Research Study. *American Journal of Health Promotion*, 11(5), 344–351.
- US Bureau of Labor Statistics. (2020). *Labor force characteristics by race and ethnicity, 2019* (BLS Reports No. 1088).
- Williams, J.C., Blair-Loy, M., & Berdahl, J.L. (2013). Cultural Schemas, Social Class, and the Flexibility Stigma. *Journal of Social Issues*, 69(2), 26.
- Williams, J.C., Lambert, S.J., Kesavan, S., Fugiel, P.J., Ospina, L.A., Rapoport, E.D., Jarpe, M., Bellisle, D., Pendem, P., McCorkell, L., & Adler-Milstein, S. (2018a). *Stable Scheduling Increases Productivity and Sales*. University of California Hastings College of the Law, University of Chicago School of Social Service Administration, University of North Carolina Kenan-Flagler Business School. <https://worklifelaw.org/publications/Stable-Scheduling-Study-Report.pdf>
- Williams, J.C., Lambert, S.J., Kesavan, S., Fugiel, P.J., Ospina, L.A., Rapoport, E.D., Jarpe, M., Bellisle, D., Pendem, P., McCorkell, L., & Adler-Milstein, S. (2018b). *Stable Scheduling Study: Health Outcomes Report*. University of California Hastings College of the Law, University of Chicago School of Social Service Administration, University of North Carolina Kenan-Flagler Business School. <https://worklifelaw.org/publications/Stable-Scheduling-Study-Report.pdf>

Winston, P. (2014). *Work-Family Support for Low-Income Families: Key Research Findings and Policy Trends*. Washington, DC: Assistance Secretary for Planning and Evaluation, Office of Human Services Policy.

Winston, P., Pihl, A., Groves, L., Campbell, C., Coombs, E., & Wolf, S. (2017). *Exploring the Relationship Between Paid Family Leave and the Well-being of Low-Income Families: Lessons from California*. Washington, DC: Assistance Secretary for Planning and Evaluation, Office of Human Services Policy.

New Directions in Employment and Training Research and Evaluation Employer-Based Work-Family Interventions

OPRE Report #2021-242

December 2021

Authors: Danielle Fumia and Eunice Yau

Suggested citation: Fumia, Danielle and Eunice Yau. 2021. *New Directions in Employment and Training Research and Evaluation: Employer-Based Work-Family Interventions*. OPRE Report 2021-242, Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Submitted to:

Hilary Bruck, Director, Division of Economic Independence

Lauren Deutsch Stanton, Social Science Research Analyst

Office of Planning, Research, and Evaluation

Administration for Children and Families

U.S. Department of Health and Human Services

Project Director: Mike Fishman

MEF Associates

1330 Braddock Place, Suite 220

Alexandria, VA 22314

Contract Number: HHSP2332015000771

Disclaimer: The views expressed in this publication do not necessarily reflect the views or policies of the Office of Planning, Research, and Evaluation; the Administration for Children and Families; or the U.S. Department of Health and Human Services. This report and other reports sponsored by the Office of Planning, Research, and Evaluation are available at www.acf.hhs.gov/opre.



[Sign-up for the OPRE Newsletter](#)



Follow OPRE on
Twitter
[@OPRE_ACF](#)



Like OPRE's page on
Facebook
[OPRE.ACF](#)



Follow OPRE on
Instagram
[@opre_acf](#)



Connect on
LinkedIn
[company/opreacf](#)

