The likelihood of employees becoming carers

In an era in which policies aim to increase labour force participation in the context of an ageing population, an important question is how many employees will experience the competing demands of paid work and informal care responsibilities? Until recently, the only way of answering this question in Australia was to ask how many people were informal carers and employed at a single point in time, using cross-sectional data. According to the 2003 Australian Bureau of Statistics (ABS) Survey of Disability, Ageing and Carers (SDAC), at a single point in time, about 13% of employees combine informal caring and employment (Thomson, Hill, Griffiths, & Bittman, in press). However, using the narrower category of primary carer—that is, the person who provides the most informal assistance to a care recipient, as distinct from any informal assistance—the answer is a much lower figure of 2%. The proportion of primary carers in this situation is important, because being a primary carer is one of the requirements that gives informal carers a claim on some state support for their caring. In other words, the primary caring role makes them eligible for Carer Payment (a tightly targeted pension) or Carer Allowance (financial assistance). Many of these carers are also employed; a study by Gray, Edwards, and Zmijewski (2008) found that almost a quarter of Carer Payment recipients and half of Carer Allowance recipients in their sample were employed.

However, there is a better way of thinking about the likelihood of people finding themselves combining employment with significant caring responsibilities. The alternative approach is to think of the risk of caring responsibilities arising during an individual’s working life. This is the way we think when we say that one in every three marriages will end in divorce. At any single point in time, the rate of divorce is very low; 1.3% of married persons were divorced in 2001, the most recent year in which this rate was calculated (ABS, 2007). This longitudinal way of thinking allows us to estimate the risk of combining employment with the responsibility of caring for a frail older person or a person with a disability. Using data from Waves 2 to 4 of the Household Income and Labour Dynamics Australia (HILDA) survey, we estimate that between 240,000 and 320,000 or 3–4% of Australian employees become carers each year. This figure is similar to that of Pavalko and Henderson (2006), using longitudinal data in the United States (US), who found that around 6% of female employees became carers in any two-year period. It also accords with research in the United Kingdom (UK), which suggests that a large percentage of the workforce will be exposed to this risk. Heitmeuller and Inglis (2004) used the British Household Panel Survey to track respondents between 1991 and 2002 and found that 44% of the working-age population had caring responsibilities at any one point in time, while 1% provided informal care for all eleven years. Other projections using this survey suggest that nearly everyone will be a carer at some point in their lives, and that more than 50% of women and 40% of men will be involved in providing informal care for more than 20 hours per week by age 65 (Hirst, 2002).

Studies in Australia and overseas indicate that the decision to leave work or remain in paid employment depends on a variety of circumstances (Arksey, Kemp, Glendinning, Kotchetkovic, & Tozer, 2005; Gray et al., 2008; Henz, 2004, 2006; Hutton & Hirst, 2000; Pavalko & Henderson, 2006; Scharlach, Sobel, & Roberts, 1991). The most obvious of these is intensity of care. In situations where there is one primary carer and the care recipient has severe or profound limitations on their capacity to conduct core daily activities of living—such as mobility, communication and personal care—the need for assistance will be greater and the associated carer responsibility intense. Where the care recipient has milder difficulties or where the responsibilities of care can be shared, then the caring role will be correspondingly lighter.

Greater household wealth and having a spouse who is employed can lead to having either a greater capacity to purchase caring services or a buffer against reduced income from employment. The level of employee earnings is, in turn, affected by a combination of years of education and experience in the workforce and may also be associated with the capacity to reduce hours of work. Employees who commence care are more likely than the rest of the population to reduce their hours of work or withdraw from the labour force altogether. Thomson et al. (in press) found that roughly a third of...
women working full-time when they began caring were no longer working full-time in a subsequent year. About one-quarter of women who were working part-time and who commenced caring responsibilities also left employment in a subsequent year. In addition, once carers leave employment they may have difficulties returning to paid work. Gray et al. (2008) found that barriers to gaining employment for carers who were not employed included difficulties in arranging work hours and a lack of alternative care arrangements. Workplace arrangements such as family leave have been shown to support new carers to remain in employment (Palvalko & Henderson, 2006).

Strangely, while the literature on combining work with the care of healthy young children is profuse, the literature on those who juggle employment and care for adults or children with a disability is relatively sparse. There are some celebrated analyses of the penalty in earnings associated with motherhood; however, there is no parallel stream of research on earnings forgone as a result of being responsible for the care of adults or children with disabilities. Yet income security for carers is an increasingly important policy issue, as is planning for a self-funded retirement. The long-term effects of juggling work and care are on relationships, social participation and health also should not be underestimated. Using information from the HILDA survey, our study, Negotiating Caring and Employment (Thomson et al., in press), attempted to address this deficit. This article focuses on a component of the study that examined those job characteristics which act as facilitators or barriers to carers’ employment.

Data on the dynamics of caring and employment

The HILDA survey is a nationally representative panel survey that started in 2001. Nearly 10,000 workforce-aged respondents provided information in each of the first four waves of data collection (2001–04). There was no specific question identifying carers in the HILDA data until 2005. Nevertheless, it is possible to identify carers in the HILDA data by using a mixture of responses to questions in the personal interview and data gathered by the self-completion questionnaire (Watson & Wooden, 2002). The self-completion questionnaire asked respondents about how much time they spent caring. Those caring more than 20 hours per week were classified as having an “intensive” burden of care, those spending 5–20 hours per week on caring were classified as having “medium” caring responsibilities, and those devoting less than 5 hours per week to this task were placed in the category of having “lighter” caring duties. In addition, anyone who indicated in their personal interview that they: (a) received Carer Allowance or Carer Payment (which both categories are reported in Table A1 in the Appendix. The results for the model with only control characteristics and satisfaction with aspects of their job. Mode of employment covers whether the individual was self-employed or worked part-time before caring, was in a casual rather than permanent job, worked in the private sector, had an irregular schedule, or worked some hours from home. In addition, under this heading, we investigated whether union membership, being in a supervisory position, and the size of the workplace made a difference. Occupations vary in the amount of autonomy and flexibility an employee has with respect to the competing demands of work and care and this factor was also considered in the analysis.

Previous research has revealed wide differences in access to carer-friendly provisions—notably, carers’ leave, flexible start and finish times, permanent part-time work, or home-based work (Bittman, Hoffman, & Thompson, 2004; Gray & Tudball, 2002). Access to these arrangements may be important in enabling carers to continue their employment; however, previous research also highlighted that employees’ knowledge of workplace arrangements is poor, their implementation is frequently haphazard and the take-up of relevant provisions is often low (Bittman et al., 2004; Gray & Tudball, 2002). So carers’ perceptions of what is possible in their workplace may be more important predictors of whether they remain employed at the onset of caring responsibilities than having access to formal provisions.

In the HILDA survey, respondents were asked to rate on a scale of 1 to 7 various aspects of their job. From these answers it was possible to identify employees reporting (a) high stress in their job, (b) low levels of job security, (c) doing routine work, (d) having lower levels of autonomy in their job, and (c) that their workplace was not family-friendly.

A further dimension is employees’ ratings of the satisfaction they gain from work, which may affect a carer’s decision to leave or continue in work. HILDA respondents were asked to indicate on a scale of 1 to 10 how satisfied they were with their pay, job security, the work itself, the hours worked and the ability to balance work and non-work commitments.

Barriers and facilitators: Job characteristics

The study used probit regression models to estimate the effect of factors in the work situation associated with employees leaving work in the first year they report taking on care responsibilities. The models controlled for demographic characteristics and household constraints and resources and commitments; and demographic differences known to affect participation in employment (see Table A1). A range of variables drawn from the HILDA data was used to identify different aspects of work: mode of employment, occupation, workplace arrangements, subjective job characteristics, and satisfaction with aspects of their job. Mode of employment covers whether the individual was self-employed or worked part-time before caring, was in a casual rather than permanent job, worked in the private sector, had an irregular schedule, or worked some hours from home. In addition, under this heading, we investigated whether union membership, being in a supervisory position, and the size of the workplace made a difference. Occupations vary in the amount of autonomy and flexibility an employee has with respect to the competing demands of work and care and this factor was also considered in the analysis.

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Results
The baseline predicted probability of a new carer leaving the labour force was 8%. This probability referred to an individual with the average characteristics of the new carer sample: a woman, aged 45 years, of English-speaking background, without a disability, caring for less than 5 hours per week, not an outright home owner, and in a couple, whose partner was not a carer, and whose partner was earning around $32,000 a year.

Table 1 reports the proportion of employees who became carers in Waves 2–4 and all Wave 1 employees who reported that they definitely had access to each workplace arrangement in their current job. The proportion of new carers who had access to each of these presumably carer-friendly workplace arrangements was almost identical to the proportion found among all employees. Among employees who became carers, the most common arrangement available (for over 50% of this group) was the ability to use permanent part-time work in their current job. This may indicate that a higher proportion of these employees were already part-time employees. The least common carer-friendly workplace arrangement was the ability to work from home, a provision that was available to less than 20% of both new carers and all employees. Employees who became carers were marginally less likely than all employees to have access to flexible start and finish times.

It is important to know whether any one specific workplace arrangement or combination of arrangements enables a carer to continue in employment. Figure 1 illustrates the proportion of new carers and all employees who had access to various combinations of workplace arrangements. In this diagram, the least carer-friendly working condition was where employees had no access to any of these workplace arrangements, while the most carer-friendly circumstances were protective of the employee when union membership was available.

Perhaps somewhat surprisingly, many of the modes of employment characteristics were not significantly associated with leaving employment, including: being self-employed, working some hours from home, working irregular schedules, and whether working in the private or public sector.

Workplace arrangements
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were where employees could access all four. Once again, the
distribution of the number of arrangements is very similar for
employees who become carers and all employees. The highest
proportion, around a quarter of the employees who
become carers and all employees, did not have access to any
of these carer-friendly provisions. In contrast, less than 10%
had access to all four provisions. Almost half of employees
(48%), regardless of carer status, reported that they were
unable to use any, or at best, only one carer-friendly arrange-
ment in the workplace. Just over a quarter of employees
(26–27%) had access to three or more carer-friendly pro-
visions. In summary, the distribution of carer-friendly
arrangements is heavily skewed towards the low end of
access to these provisions, with the vast majority of the
employees reporting access to two or fewer workplace pro-
visions. In addition, employees who became carers had similar
levels of access to these arrangements as all employees.

The multivariate analysis was designed to discover if
access to these workplace arrangements might help
employees who have become carers to remain in employ-
ment. Table 2 shows that employees with access to any
arrangements were less likely to leave employment than
those with no access. The analysis suggests that the criti-
cal factor is having some access to any arrangement rather
than none, because, among employees who became carers,
having a greater number of provisions was not associated
with a greater likelihood of remaining employed, holding
other factors constant.

**Employees’ ratings of their job characteristics**
A consistent finding in the analysis was that individuals who
perceived their jobs to be insecure had a higher probability
of leaving employment once they undertook informal car-
ing. The relationship between perceived low job security
and the decision to leave employment was one of the
strongest associations found in this study. For a new carer
with base case characteristics (caring for less than 5 hours
per week), reporting low job security increased the proba-
bility of leaving employment by 14 percentage points. The
effect for intensive carers was 26 percentage points. Two
interpretations of this finding about low job security spring
to mind. First, those who believe their employment is pre-
carious may feel less able to request work conditions
compatible with their caring responsibilities. Thus, even if
carers have formal access to workplace arrangements, they
may lack “effective access” due to the workplace culture or
an individual supervisor who is not supportive of employees
taking up such arrangements. Alternatively, those rating
their continuing employment prospects as poor may be
resigned to the eventual loss of their job and view the new
care responsibilities as a reason to bring forward the cessa-
tion of their employment. In-depth studies may be able to
determine which of these competing interpretations is the
most salient. But for the moment, it is worth noting that
carers feeling secure in their current job was a powerful pre-
dictor of them maintaining employment despite an
increased responsibility for care.

The propensity to leave the workforce when faced with an
increased responsibility for care is not restricted to those
with casual jobs. Correlation analysis revealed that casual
employment and low ratings of job security were not sig-
nificantly related. This indicates that some permanent
employees also rated their jobs as insecure and their short-
term prospects of remaining in their current job as low.

A related finding was that employees who reported that
they lacked autonomy in their jobs were more likely to
leave employment at the onset of care. This aspect of job
design seems to have more influence over the decision to
remain in or to leave employment than having a routine
job, stress or the perceived level of family-friendliness
of the carer’s workplace, since these subjective job char-
acteristics were not found to have a significant association
with leaving employment at the onset of care.

**Job satisfaction**
The findings about the salience of perceived job security
were reinforced by the analysis of job satisfaction. Among the
five satisfaction measures outlined earlier, higher ratings of
satisfaction with job security and satisfaction with pay were
significantly associated with a lower probability of leaving
work. This mirrored the other findings reported above, sug-
gest that a sense of insecurity in employment was a
significant factor in inducing new carers to leave their jobs.
The other four measures of job satisfaction—satisfaction
with hours, the work itself, and the flexibility to balance work
and non-work commitments—were not significantly associ-
ated with leaving work once commencing care.

![Figure 1](employees_with_access_to_a_combination_of_carer-friendly_workplace_arrangements)

**Table 2**  The effect of having access to workplace arrangements on leaving employment

<table>
<thead>
<tr>
<th>Number of workplace arrangements</th>
<th>Probit coefficient estimate</th>
<th>Standard error</th>
<th>p-value</th>
<th>Predicted probability of leaving employment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Caring &lt; 5 hours per week</td>
</tr>
<tr>
<td>Reference group: no access</td>
<td>0.16</td>
<td>0.23</td>
<td>&lt; .01</td>
<td>.06</td>
</tr>
<tr>
<td>One</td>
<td>-0.62</td>
<td>0.21</td>
<td>&lt; .01</td>
<td>.06</td>
</tr>
<tr>
<td>Two</td>
<td>-0.61</td>
<td>0.22</td>
<td>&lt; .05</td>
<td>.06</td>
</tr>
<tr>
<td>Three</td>
<td>-0.47</td>
<td>2.2</td>
<td>&lt; .05</td>
<td>.07</td>
</tr>
<tr>
<td>Four</td>
<td>-0.43</td>
<td>0.28</td>
<td>.12</td>
<td>.08</td>
</tr>
</tbody>
</table>

Notes: Predicted probabilities refer to the base case scenario outlined in the main text, with levels of caring as indicated.
Conclusion

The difficulties of reconciling the care of young children and employment have attracted substantial attention throughout the developed world. However, the difficulties of reconciling work with caring for frail older people, those with long-term illness or those with a disability have only recently become a topic of investigation and included in policy debates. Yet, the newly available data from longitudinal studies show that, over the course of a working life, the risk of employees acquiring substantial caring responsibilities is high (probably close to 1 in 2). Becoming a carer is often an unplanned life event. It is more likely to occur once a career is well-established but nevertheless, when it happens, it significantly lowers workforce participation, especially for women.

A variety of characteristics of the mode of employment increases the probability of employees leaving employment in response to the onset of new caring responsibilities. These are: being a casual rather than a permanent employee, working part-time, having no supervisory responsibilities, not belonging to a union, and working for a smaller firm (less than 100 employees).

Lack of access to any carer-friendly workplace arrangements also predicts that employees are likely to leave their jobs when they become carers. In contrast, access to at least one workplace arrangement (special leave for caring, permanent part-time work, flexible start and finish times, or home-based work) improves the odds of staying in employment. Among these workplace arrangements, access to permanent part-time work most significantly increases the odds of remaining in employment for new carers. Having access to special leave for caring plays a less influential role in helping employees combine care and employment.

Employees’ perceptions of poor job security reveal a persistent and powerful tendency to increase the risk of leaving the workforce. Lack of autonomy in the workplace also significantly predicts that new carers will leave the workplace. In these circumstances, it is no surprise to find that higher satisfaction with job security and, to a lesser extent, satisfaction with pay also improves the prospects of new carers remaining in employment.

Perhaps the most important thing this analysis demonstrates is the power of longitudinal analysis. Understanding the changing prevalence of caring and its effects will increase greatly as the successive waves of data accumulate and improvements are made to the instruments. Given the projected effects of structural ageing and the financial difficulties of funding retirement and health care for baby boomers, these kinds of studies will provide vital, policy-informed information.

Endnotes

1 A “carer” is defined in the ABS Survey of Disability, Ageing and Carers as “a person of any age who provides any informal assistance, in terms of help or supervision, to persons with disabilities or long-term conditions, or persons who are older (i.e. aged 60 or over). The assistance has to be ongoing, or likely to be ongoing, for at least six months” (ABS, 2003, p. 71).

2 Carer Payment is an income- and asset-tested pension with a single rate of $846.80 a fortnight. Carer Allowance is an income top-up payment of $100.60 a fortnight, which is not income-tested. The requirements for Carer Payment are very stringent and only 116,614 people received this payment as at June 2007, compared with 393,263 recipients of Carer Allowance at the same time (Edwards, Higgins, Gray, Zmijewski, & Kingston, 2008).

3 This paper uses unit record data from the Household, Income and Labour Dynamics in Australia (HILDA) survey. The HILDA Project was initiated and is funded by the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) and is managed by the Melbourne Institute of Applied Economic and Social Research (MIAESR). The findings and views reported in this paper, however, are those of the authors and should not be attributed to either FaHCSIA or the MIAESR.

4 Around 13% of women and 9% of men reported care responsibilities in Wave 1 of HILDA, which accords with the ABS estimate (using the SHIC) that 12.5% of the adult population are carers (ABS, 2003), although HILDA-based estimates exclude some carers of children with a disability. About 3–4% of women and 2% of men reported inclusive care responsibilities (cared for more than 20 hours per week) in the HILDA survey. These figures correspond with the ABS estimate that 2.4% of the adult population are primary carers (provide the main assistance to a person who needs help with self-care, communication or mobility). Due to differences in survey methods for HILDA (Waves 1–4) and the ABS SDAC, the carer populations identified in these surveys are likely to be different.

References


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Acknowledgements and disclaimers: The Negotiating Caring and Employment project was funded under the Australian Research Council Linkage Grant Scheme. The project is a partnership between the Social Policy Research Centre (SPRC), the University of New England and a consortium of New South Wales State Government departments, including: the Department of Premier and Cabinet; Office for Women’s Policy; Public Sector Workforce Office; Department of Ageing, Disability and Homecare; Department of Health; Office of Industrial Relations; and Carers NSW. The views expressed in this paper are those of the authors and do not necessarily reflect the views of the above departments or the responsible ministers, including the Minister for Ageing, the Minister for Disability Services and the Minister for Health, or the NSW State Government.
### Table A1  Leaving paid employment among new carers, probit models

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>-2.542</td>
<td>0.487</td>
<td>***</td>
<td></td>
</tr>
</tbody>
</table>

#### Model 1 (controls only)

Care responsibilities, family support and resources, demographics

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caring for 5–20 hours per week</td>
<td>0.270</td>
<td>0.179</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caring for &gt; 20 hours per week</td>
<td>0.737</td>
<td>0.192</td>
<td>***</td>
<td>0.12</td>
</tr>
<tr>
<td>Has child aged under 5 years</td>
<td>0.644</td>
<td>0.256</td>
<td>**</td>
<td>0.10</td>
</tr>
<tr>
<td>One child aged 5–14 years</td>
<td>-0.246</td>
<td>0.237</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two children aged 5–14 years</td>
<td>-0.058</td>
<td>0.219</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has child aged 15–20 years</td>
<td>-0.150</td>
<td>0.189</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does not have a partner</td>
<td>0.619</td>
<td>0.311</td>
<td>**</td>
<td>0.10</td>
</tr>
<tr>
<td>Spouse is a carer</td>
<td>-0.478</td>
<td>0.236</td>
<td>**</td>
<td>-0.08</td>
</tr>
<tr>
<td>Log of spouse's earnings</td>
<td>0.057</td>
<td>0.028</td>
<td>**</td>
<td>0.009</td>
</tr>
<tr>
<td>Home-owner</td>
<td>-0.011</td>
<td>0.181</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>-0.236</td>
<td>0.162</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0.012</td>
<td>0.008</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Born in non–English speaking country</td>
<td>0.363</td>
<td>0.230</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has disability</td>
<td>0.331</td>
<td>0.173</td>
<td>*</td>
<td>0.05</td>
</tr>
</tbody>
</table>

#### Model 1 plus individual variables

Mode of employment

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-employed</td>
<td>0.397</td>
<td>0.218</td>
<td>*</td>
<td>-0.10</td>
</tr>
<tr>
<td>Previously worked part-time</td>
<td>0.743</td>
<td>0.168</td>
<td>***</td>
<td>0.11</td>
</tr>
<tr>
<td>Casual</td>
<td>0.671</td>
<td>0.171</td>
<td>***</td>
<td>0.10</td>
</tr>
<tr>
<td>Private sector</td>
<td>0.022</td>
<td>0.160</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works irregular schedule</td>
<td>0.246</td>
<td>0.186</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works some hours from home</td>
<td>-0.261</td>
<td>0.178</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is union member</td>
<td>-0.352</td>
<td>0.174</td>
<td>**</td>
<td>-0.06</td>
</tr>
<tr>
<td>Supervises other employees</td>
<td>-0.659</td>
<td>0.170</td>
<td>***</td>
<td>-0.10</td>
</tr>
<tr>
<td>Workplace has 20–99 employees</td>
<td>-0.200</td>
<td>0.172</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workplace has &gt; 99 employees</td>
<td>-0.405</td>
<td>0.200</td>
<td>**</td>
<td>-0.07</td>
</tr>
</tbody>
</table>

Occupation

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labourers and related workers</td>
<td>0.807</td>
<td>0.239</td>
<td>***</td>
<td>0.13</td>
</tr>
</tbody>
</table>

Workplace arrangements in current job

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to use special leave for caring for family members</td>
<td>-0.269</td>
<td>0.152</td>
<td>*</td>
<td>-0.04</td>
</tr>
<tr>
<td>Able to use permanent part-time work</td>
<td>-0.487</td>
<td>0.157</td>
<td>***</td>
<td>-0.08</td>
</tr>
<tr>
<td>Able to use home-based work</td>
<td>-0.086</td>
<td>0.197</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Able to use flexible start and finish times</td>
<td>-0.095</td>
<td>0.151</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Subjective job characteristics

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reports high stress in job</td>
<td>-0.039</td>
<td>0.197</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reports low job security</td>
<td>0.725</td>
<td>0.170</td>
<td>***</td>
<td>0.11</td>
</tr>
<tr>
<td>Is in more routine work</td>
<td>0.169</td>
<td>0.163</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has low level of autonomy in job</td>
<td>0.364</td>
<td>0.152</td>
<td>**</td>
<td>0.05</td>
</tr>
<tr>
<td>Workplace is not family-friendly</td>
<td>-0.003</td>
<td>0.225</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Satisfaction levels

<table>
<thead>
<tr>
<th>Variable</th>
<th>Coefficient</th>
<th>Standard error</th>
<th>Significance</th>
<th>Average marginal effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total satisfaction with pay</td>
<td>-0.060</td>
<td>0.027</td>
<td>**</td>
<td>-0.01</td>
</tr>
<tr>
<td>Satisfied with job security</td>
<td>-0.164</td>
<td>0.031</td>
<td>***</td>
<td>-0.02</td>
</tr>
<tr>
<td>Satisfied with work itself</td>
<td>0.021</td>
<td>0.035</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied with hours worked</td>
<td>0.016</td>
<td>0.030</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied with flexibility to balance work and non-work commitments</td>
<td>-0.020</td>
<td>0.027</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Sample size** 595

Notes: *** p < .01, ** p < .05, * p < .1. Models estimated in SAS version 9.2 using proc probit and proc qлим to estimate average marginal effects. Coefficients in this table for job characteristics are based on models estimated using all controls plus that individual variable. Full results for each model are available from the authors on request.