

## **Parental Work Schedules and Adolescent Health Behaviors**

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Adolescence involves a number of developmental transitions that require young individuals to negotiate steps toward adulthood (Graber, Brooks-Gunn, & Petersen, 1996; Roth & Brooks-Gunn, 2000; Schulenberg, Maggs, & Hurrelmann, 1997). Some youth find the demands of adolescence difficult (Eccles, 1999; Eccles et al., 1993) and are thus more likely to engage in risky behavior and develop a psychological problem. A great deal of research over the last few decades has investigated the factors contributing to such adverse outcomes (for a review, see Eccles & Gootman, 2002; Steinberg & Morris, 2001). In this paper, we examine whether one such potential risk factor, parents' working nonstandard hours throughout the child's developmental years, is associated with cigarette smoking, alcohol use, drug use, sexual activity, delinquency, and depression in early adolescence.

Nonstandard work schedules are common in the current labor market. U.S. Census data show that about 15% of the workforce (approximately 15 million people) work evenings, nights, rotating shifts, or irregular shifts (Bureau of Labor Statistics, 2005). Of those studies that have directly examined the associations between parental work schedules and children's cognitive and behavioral outcomes, most have focused on younger children and have found negative relationships (Dosa et al., 2002; Han, 2005, in press; Heymann, 2000a; Joshi & Bogen, 2007; Strazdins et al., 2006; Strazdins et al., 2004), whereas two studies have found no significant effects (Dunifon, Kalil, & Bajrachaya, 2005; Ross Phillips, 2002). To date, only two studies have focused on adolescents, finding a mixed relationship between parental work schedules and adolescent-parent relationships (Davis, Crouter, & McHale, 2006; Han & Waldfogel, 2007).

Despite the findings of these few studies, the relationship between parental nonstandard shift work and adolescent outcomes has not been fully explored. However, theory and a limited body of research suggest that parental nonstandard work schedules could have negative effects on adolescent outcomes if the shift reduces parental monitoring or adolescent-parent closeness, positive effects if the shift allows for greater monitoring or closeness, or overall neutral effects if the shift creates some negative and some positive effects. Indeed, some previous studies have examined the relationships between parental work schedules (the majority of them focusing on maternal work schedules), parental monitoring, child-parent relationships, parenting practices, and child outcomes. However, no study has yet examined the pathways by which parental work schedules are linked with overall adolescent health behaviors, with particular attention to parental monitoring, adolescent-parent relationships, and the home environment.

This study will thus fill this knowledge gap by exploring the mechanisms by which parental work schedules are associated with adolescents' health behaviors. This study will take advantage of a large sample of children from the 1979 cohort of the National Longitudinal Survey of Youth–Child Supplement (NLSY79-CS) to examine (a) whether mothers' and fathers' work schedules are associated with adolescents' cigarette smoking, alcohol drinking, using drugs, delinquency, risky sexual behaviors, and depression, and if so (b) whether parental monitoring, adolescent-parent relationships, and the home environment may help explain these associations. Special attention will also be paid to the patterns of both parents' work schedules as well as to children in single-mother and low-income families because these family situations may have special implications for the relationships under study.

The NLSY79 is well suited for this analysis because, in addition to collecting detailed information on family demographic background, it also contains information on various

dimensions of parental work schedules and child health outcomes along with a rich set of information on the home environment. Children aged 10-14 report how close they are to their mother and father, how often their mom and dad misses important events, whether they believe their mother and father spends enough time with them, and how well they share ideas with their mother and father. In addition, children aged 10-14 report their risky health behaviors including smoking, drinking alcohol, using drugs, having sexual intercourse, and delinquency. As part of the CYA survey, mothers also report on how often their child is disobedient at school and has trouble getting along with a teacher, and whether the child's behavior ever required a parent to go to the school. Most importantly, the NLSY-CS remains the one and only national survey that includes longitudinal information on both parental work schedules and children's various outcomes.

The sample for the present study will consist of all of the children of mothers in the NLSY-CS who have successfully been followed for a thirteen to fourteen year period, with no missing data on either of the outcome variables at ages 13 or 14. Approximately 3,000 children are available for analysis. Of these, 54% are non-Hispanic White, 26% are non-Hispanic African American, and 19% are Hispanic. To reduce potential omitted variable or selection bias, an extensive set of child, parental, and family characteristics that have been shown in prior research to be associated with family process and adolescent development will be controlled for in the proposed models. Unless otherwise noted, each of the following characteristics were measured as of the time of the interview and child assessment at age 13 or 14: whether the child is a boy, whether the child has any older siblings, whether the child has any younger siblings, whether the child had a low birth weight, the mother's educational level at birth, the mother's cognitive ability (measured by her score on the Armed Forces Qualifying Test), the mother's age at the

child's birth, the mother's marital status at birth, the family's income the year before the child's birth, the average family income over the years, the number of years that the child has lived in a single-mother family, the number of years that the child's family has received welfare, the mother's work hours per week, and the father's age and work hours per week (in two-parent families). Of course, even with these extensive controls, the possibility remains that families differ in other ways that cannot be controlled for in the data and that might bias the results. Structural equation modeling will be used to examine these relationships.

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