

Title: *Working and Caring for a Child with Chronic Illness: Disconnected and Doing it All*

Author: Margaret H. Vickers, University of Western Sydney

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Reviewed By: J. Gary Linn, Ph.D.

Margaret Vickers, in her monograph *Working and Caring for a Child with Chronic Illness: Disconnected and Doing it All*, describes the lived experience of a little studied group—working women who have chronically ill children. This path-breaking work appropriately targets students, researchers, and professionals in health care management, gender studies, social policy, and the sociology of the family.

Through in-depth interviews, poems, and vignettes, Vickers provides richly detailed descriptions and analyses of the relationships, issues, and feelings that define these women. By reading this monograph, the health care manager will be sensitized to their time constraints and psycho-social stress, the researcher in gender studies and health policy will learn about their often unmet needs for social and material support, and the student in family sociology will develop an understanding of how they struggle with stigma and role strain on a daily basis.

Vickers' pilot study of working women with chronically ill children sets the demographic and relational parameters for her own (and others) qualitative and quantitative research on this group. This is the value of an expertly done exploratory study of a problem and group for which we essentially have no data; based upon the valuable and provocative findings of this inquiry, Vickers was able to obtain a substantial grant from the Australian government to expand her work on working mothers with chronic illness.

Readers will find this monograph interesting both for its findings and method. In rich and intimate detail, Vickers presents a global picture of working women with chronically ill children. We come to know the relational causes of their role strain; they have young children with many special needs, demanding professional work obligations, and (sometimes) indifferent or nonexistent husbands/partners. We are given a lens to view their personal anguish and frustration. Further, we are walked through the meticulous process of action-related qualitative research. Vickers gives a thorough explanation of how she obtained her data through repeated in-depth interviews, poetry, and the use of constructed vignettes. Finally, we learn about the empowerment and successes of some of the women with chronically ill children who participated in this process. Nevertheless, there are some acknowledged and unacknowledged limitations to this study.

The purposefully selected sample of nine, which in the initial in-depth interviews provides a wide range of lived experience of women in the workforce with chronically ill children, dwindles to two at the final stage of the research. This does not compromise the

validity of the study because most of the reported findings are from the initial interviews. I am confident in her larger funded investigation, Vickers will be able to increase her sample size to at least 25 or 30 participants and have sufficient paid staff to stay in touch so most of them will not be lost over time. This will be important if she wants to have a robust test of her action theory, which requires feedback from participants after they have been given potentially helpful information and support "early on" in the research process.

There are no women in this study whose husbands/male partners fully share in the care of the chronically ill (and other) children. If Vickers seeks to provide a representative account of the lived experience of working women with chronically ill children, she needs to also sample couples that have more egalitarian childcare role sharing. Surely, in an advanced post-industrial society like Australia, they are a substantial group whose views should be reported.

The external validity of Vickers' work may be compromised somewhat because her study was done in a culturally homogeneous society (Australia) where there is a high level of social services and a long tradition of progressive legislation in support of workers. The United States, with a culturally more diverse population, and (despite Family Leave legislation) a work force that in many cases has few protections or supports for parents with chronically ill children, might have a wider range of experiences. Specifically, higher status women who work in large public or private organizations would be covered by the Family Leave Act and often have resources to access services needed to care for a chronically ill child (even if they have an uncooperative partner), while women working in small businesses and low level clerical (and other) positions would have few options and be potentially more stressed as a result of having to fulfill work and childcare obligations.

Two other limitations of Vickers' monograph are that it is only available in a more expensive cloth-bound edition in standard font. Optimally, there would a large print inexpensive soft cover copy on the market. Nevertheless, because this book makes an important contribution to knowledge about an increasingly important group—working women with chronically ill children—I recommend it with high enthusiasm.

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