

# Paid Parental Leave

ACCESS TO MATERNAL AND PATERNAL PAID LEAVE AROUND THE BIRTH OF A CHILD

## Why It's Important

In the first months and year of life babies discover the world through experiences with parents. Neuroscience and behavioral research confirm that the foundation for future relationships, health, and the capacity to learn and thrive throughout life begins before birth and is influenced strongly prenatally and during the first three years of life.<sup>1</sup> This critical time in a child's life is a unique opportunity for parents to address healthy development, bonding and attachment, breastfeeding and ensure infants get proper nutrition and immunizations. Forming secure parent-child relationships requires care, consistency, and above all, time. Paid parental leave is critical, as parental involvement during the early years of a child's life strengthens bonds, helps with forming secure relationships, and decreases chronic stress among families with newborns.

*"[Women, children, and families need] time off from work to establish a bond, breastfeeding, the new family dynamic, and to let our bodies heal. Not having PAID maternity leave is detrimental to all families where they find themselves financially in trouble from take a week or two off work but then have to make a terrible decision to leave their children in order to provide for them." – Needs Assessment Discovery Survey Respondent*

Access to paid parental leave is linked to fewer infant deaths, increased breastfeeding duration, and improved birth and developmental outcomes.<sup>1,4,5</sup> Paid parental leave is also associated with improved maternal mental health, including a decreased likelihood of exhibiting depressive symptoms or psychological distress.<sup>1</sup> Additionally, paid leave allows women time to recover physically from childbirth. Women who took paid leave experienced a 51 percent decrease in the odds of being re-hospitalized at 21 months postpartum, compared to women taking unpaid or no leave.<sup>2</sup> Research shows that paid leave has many economic benefits as well. It increases the likelihood that workers will return to work after childbirth, improves employee morale, reduces costs to employers through improved employee retention, and improves family incomes.<sup>3</sup>

**The United States is one of the only developed countries worldwide that does not offer nationwide paid parental leave.<sup>2</sup>**

**Several states have family-leave laws that support paid parental leave: Minnesota is not one of them.**

*"I wanted to take more time off of work requested 3 extra weeks after taking off 12 but was denied because our department was short-staffed. I work in healthcare as a master's level social worker. It is terrible to me that as a health care organization we only get 6 weeks of short-term disability at 50% of salary - so essentially 3 weeks paid leave... yet counsel our patients about the importance of breastfeeding for the 1st year, while making it nearly impossible to take more than a short, essentially unpaid leave & then need to pump at work." – Minnesota PRAMS Survey Respondent*

## PAID PARENTAL LEAVE

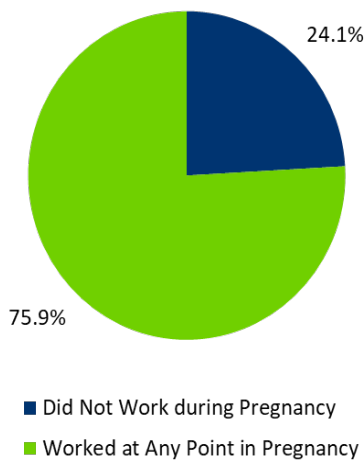
Data from Minnesota Pregnancy Risk Assessment Monitoring System (PRAMS) shows that of women who worked during their most recent pregnancy and who had returned or planned to return to work (see Figure 1):

- 51.5 percent took paid leave
- 65.1 percent took unpaid leave.

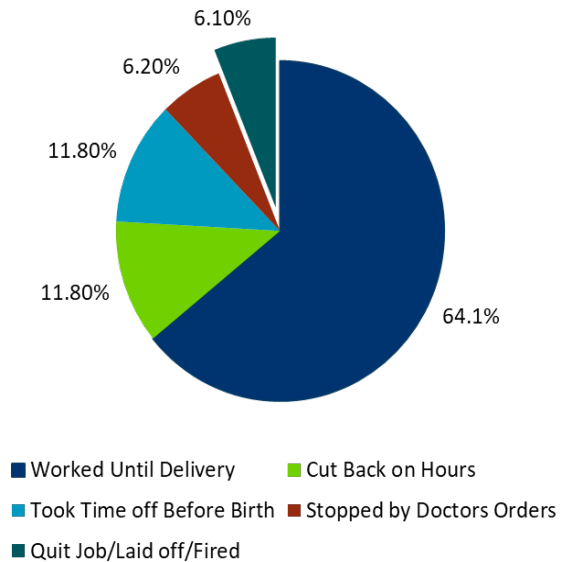
Of those that took paid leave, 40 percent also took unpaid leave. That leaves half of working Minnesota mothers with no access to the benefits of paid parental leave. There are a lot of limitations to the data we currently have on paid leave – we don't know **how** women received paid leave. From qualitative data in PRAMS we see that many received paid leave through using sick and vacation time or short-term disability. These type of paid leaves are inadequate, leaving families financially stressed, and women returning to work with no access to time off to care for sick infants.

**Figure 1. Proportion of Women in the Workforce, 2016**

### Mothers Working Status During Most Recent Pregnancy



### Working Pregnant Women Schedule during Last Month of Pregnancy



Source. Minnesota's Pregnancy Risk Assessment Monitoring System (PRAMS)

## Focus on Health Equity

In Minnesota, there is unequal access to paid leave across populations of different income levels and racial/ethnic groups. People of color and American Indians are more likely than white Minnesotans to be in low-paying, less secure jobs with fewer benefits including access to paid parental leave.<sup>6</sup>

*"The stress of unpaid maternity leave has left my family struggling to survive, to pay bills and we almost couldn't pay rent (I had to borrow money) which then we almost got evicted. Our rent is also outrageous amount. The stress of having a baby without paid maternity leave has taken its toll mentally, physically, emotionally, and spiritually." – Minnesota PRAMS Survey Respondent*

## PAID PARENTAL LEAVE

Data from Minnesota PRAMS shows, of working new mothers who had access to paid parental leave, those families with incomes under 185% federal poverty level took on average 6.6 weeks of leave – this is 3.2 less weeks than mothers with incomes over 185% the federal poverty level. Similarly, African American mothers took on average 2.6 less weeks of leave and were significantly less likely to have access to paid leave than White, non-Hispanic mothers after the birth of their new babies. It's also important to note that when a mother has access to paid leave, Minnesota PRAMS does not distinguish the amount of leave taken that was paid versus unpaid.

Nationally, over 20 percent of low-income and part-time workers reported having no family leave available and only 4 percent of workers in the lowest income category had access to paid family leave.<sup>2</sup> There are federal and Minnesota laws protecting pregnant women from discrimination and allowing job-protected leave, but these fall short of producing the benefits of paid leave, especially for low-income workers. Small employers and lower-paying jobs are less likely to provide paid leave -- a problem compounded by the fact that workers in low paying jobs are also less likely to be able to take advantage of unpaid leave. The U.S. Department of Human Services determined that positive effects of parental leave was observed only when the leave was paid (2017).<sup>6</sup>

## Additional Considerations

### Importance of Fathers

Although paid leave is often framed as an issue that matters to working women, paid parental leave is also critically important for fathers. Policies that ensure fathers have the support they need to prioritize their family responsibilities, while also meeting work demands, can significantly increase the personal and economic wellbeing of their families.<sup>7</sup> Paternity leave – and especially longer leaves of several weeks or months – can promote parent-child bonding, improve outcomes for children, and even increase gender equity at home and at the workplace.

### CYSHN

Children and youth with special health needs (CYSHN) often need additional medical services to address physical, developmental, behavioral, or emotional health conditions. Families of CYSHN may need to cut down on their work hours, stop working, and often experience higher out of pocket healthcare costs. Families of CYSHN are more likely to have to cut back on work hours or stop working if the family income is below 100 percent of the federal poverty level, thus compounding disparities seen among families with access to paid leave, household income, and ability to continue working while caring for a CYSHN.<sup>8</sup>

### Discovery Survey Results

In the summer of 2018, Minnesota's Title V Maternal and Child Health Needs Assessment distributed a Discovery Survey asking Minnesotan's "what are the biggest unmet needs of women, children, and families in your community". More than 2,700 Minnesotan's responded. Paid parental leave was mentioned 126 times and was one of the largest unmet needs of families in Minnesota ranking as the 11<sup>th</sup> most frequent theme mentioned.

## Important Note on Equity and Intersectionality

The Minnesota Department of Health's Title V Needs Assessment team acknowledges that structural (social, economic, political and environmental) inequities can result in poor health outcomes across

generations. They have a greater influence on health outcomes than individual choices or a person's ability to access health care, and not all communities are impacted in the same way.

**All people living in Minnesota benefit when we reduce health disparities.**

We also acknowledge that the topic addressed in this data story does not exist in isolation— which is important to remember as we do needs assessments and as we start thinking about how we approach solutions. In addition to the needs themselves being intersectional, there are also intersecting processes and systems through which power and inequity are produced, reproduced, and actively resisted.

## Citations

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5/1/2019

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