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# Paid Parental Leave in the United States

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What the data tell  
us about access,  
usage, and  
economic and  
health benefits

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## About this Paper

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## Introduction

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The 1963 report of the President's Commission on the Status of Women recommended that: "Paid maternity leave or comparable insurance benefits should be provided for women workers; employers, unions, and government should explore the best means of accomplishing this purpose." Fifty years later, access to paid family and medical leave of any kind, including maternity leave, is far from universal, and only a few states, and no federal law, provide a mechanism for mothers or fathers to take paid parental leave. One thing that has changed, however, is that due to shifting societal norms, attitudes, and policy knowledge, if the 1963 report were to be written today, it would surely recommend that fathers, as well as mothers, receive access to paid parental leave.

The 1993 Family and Medical Leave Act (FMLA) was an important step toward improving access to leave for new parents, providing men and women with job-protected leave for a range of caregiving purposes, including care for a newborn, care for a newly adopted child, care for a sick family member, and leave for one's own serious illness. The Family and Medical Leave Act, signed into law by President Bill Clinton, was passed after nearly a decade of advocacy. Because the law does not require that employees be paid during their leaves and does not cover companies with fewer than 50 employees, many workers have no access to leave or find it difficult to use the benefits provided by the FMLA. The United States is the only high-income country in the world that does not mandate paid maternity leave (Heymann and McNeill 2013), and only a small portion of employers provide paid parental leave to both mothers and fathers voluntarily.

A number of experts, advocates, and policymakers are calling for a federal paid family and medical leave insurance law that would allow the United States to catch up to other developed nations and to address today's workforce realities, characterized by families with two parents who work outside the home or an employed single mother. In December 2013, members of Congress introduced the FAMILY Act, which would create an insurance fund so that all workers could be paid when they stay home with their infants or newly adopted children and while caring for their own health needs or those of other family members. Such a law would bring substantial health and economic benefits to individuals, employers, and the economy. As discussed in this paper, research suggests that paid family leave increases labor market attachment, economic security, and the health and welfare of families and children, and has the potential to help businesses thrive, reduce spending on public benefits programs, and promote economic growth and competitiveness.

This paper reviews research on the benefits of paid parental leave from the perspectives of individuals, families, employers, and the economy overall. It focuses specifically on leave taken to care for a new child (i.e. maternity or paternity leave). It provides context for the discussion of paid parental leave in the United States by describing state, federal, and international laws and regulations that provide workers with access to paid leave and current efforts to expand access; summarizes research on the availability of paid leave according to existing data sources; and makes recommendations for improving data collection and analysis to more clearly describe the extent of paid family leave in the United States. The paper also suggests ways to increase equity in access to paid leave.

## Family Leave Policies in the United States and around the World

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### Paid Parental Leave Laws Worldwide

Of 186 countries examined in Heymann and McNeill's (2013) analysis of the World Policy Analysis Centre Adult Labour Database, 96 percent provide some pay to women during maternity leave. The United States is the only high-income country, and one of only eight countries in the world (Heymann and McNeill 2013), that does not mandate paid leave for mothers of newborns. Nearly every member of the European Union (EU) provides at least 14 weeks of job-guaranteed paid maternity leave, during which workers receive at least two-thirds of their regular earnings (International Labour Organization 2010).

Eighty-one countries extend paid leave to new fathers, through paternity leave (specific to fathers), through parental leave that can be taken by either parent, or through some combination of the two (Heymann and McNeill 2013). Sixty of these countries pay fathers at least 75 percent of their wages for at least part of the leave taken, yet only 37 provide fathers with the option of taking 14 weeks or more of paid time off (Heymann and McNeill 2013). Several high-income countries also provide workers with the option to combine part of the paid parental leave entitlement with paid employment, facilitating a gradual return to work for mothers, as well as a greater take up of leave provisions by fathers (Fagan and Hebson 2006).

### The Pregnancy Discrimination Act of 1978 and Maternity Leave

The Pregnancy Discrimination Act of 1978 (PDA) prohibits employers from treating a woman (an applicant or employee) unfavorably because of pregnancy, childbirth, or a medical condition related to pregnancy or childbirth. It forbids discrimination based on pregnancy when it comes to any aspect of employment, including hiring, firing, pay, job assignments, promotions, layoff, training, fringe benefits, such as leave and health insurance, and any other term or condition of employment. Fringe benefits include paid sick days, health insurance coverage, and Temporary Disability Insurance (TDI), among those that are especially important to pregnant and childbearing women. The passage of the PDA required that employers provide the same leave to a woman related to medical conditions associated with pregnancy and childbirth as that provided to any employee with a medical condition or temporary disability, such as a broken leg or a heart attack. The PDA does not require employers to provide paid leave, but if they provide paid leave or disability benefits for some medical conditions, they must do so for conditions associated with pregnancy and childbirth as well. The passage of the PDA was a major factor in increasing the labor force participation and earnings of new mothers in that it required employers to provide paid sick leave, health insurance, and TDI benefits long denied them (previously, policies had typically excluded coverage for pregnancy and childbirth, and jobs that were typically kept available for returning workers who had temporary disabilities were not kept available for childbearing women). Many pregnant women left the labor force for childbirth and returned later, often years later prior to the passage of the PDA in 1978 (Spalter-Roth, Withers, and Gibbs 1992).

## **State Temporary Disability Insurance Laws**

In 1946, the Federal Unemployment Tax Act was amended to permit states to use surplus funds from their unemployment insurance programs to pay for disability benefits (but not administrative costs), if they set up new temporary disability programs (U.S. Social Security Administration, Office of Retirement and Disability Policy 2012). Prior to the passage of this federal amendment, Rhode Island had passed a state law in 1942, which similarly allowed for the use of accumulated unemployment funds for disability benefits, making it the first state to institute a system of Temporary Disability Insurance (TDI). California (1946), New Jersey (1948), and New York (1949) were next, enacting their own state laws establishing TDI. Puerto Rico and Hawaii followed two decades later (in 1968 and 1969 respectively; Social Security Administration, Office of Retirement and Disability Policy 2012).

The state TDI programs, which typically pay up to about 50 to 60 percent of an employee's wage for up to 52 weeks of leave for temporary disability, including disability due to pregnancy, are funded by employee contributions, or by both employer and employee contributions, through payroll deduction (Lovell and Rahmanou 2000; National Partnership for Women and Families 2013a). Women typically take 6-10 weeks of temporary disability leave for pregnancy, though if their condition warrants longer leave, they can take the maximum available to them according to state law. Two of the states with TDI, California and Rhode Island, do not require employers to contribute; workers pay for 100 percent of TDI, and each state sets up a mechanism to administer the funds accordingly (U.S. Social Security Administration, Office of Retirement and Disability Policy 2012). The remaining TDI states require employers, in addition to employees, to make contributions to the costs of TDI benefits (U.S. Social Security Administration, Office of Retirement and Disability Policy 2012).

Since the passage of the Pregnancy Discrimination Act in 1978, all employers who provide pay for any short term disability, because they either operate in one of the TDI states or they have voluntarily chosen to provide their workers with paid disability leave, must also provide it for medical conditions related to pregnancy and childbirth. Because programs cover only the medical conditions of pregnancy and childbirth, however, fathers and adoptive parents do not have access to paid leave through TDI to care for or bond with a new child (National Partnership for Women and Families 2013a).

## **The Family and Medical Leave Act of 1993**

In the United States, the Family and Medical Leave Act (FMLA) of 1993 allows eligible employees to take job-protected leave for a serious health condition that makes the employee unable to perform the essential functions of his or her job; the birth of a child or to care for the employee's newly born, adopted, or foster child; or to care for an immediate family member (spouse, child, or parent) with a serious health condition. Public agencies and private firms employing at least 50 workers within 75 miles are covered by the law. Employees are eligible for FMLA benefits if they work 1,250 hours in a year and have worked at least 12 months for their current employer, provided their current employer is covered. As of 2012, 59 percent of employees worked at covered firms and met all eligibility requirements for FMLA benefits (Klerman, Daley, and Pozniak 2013).

While the FMLA does not require employers to provide pay, it does require employers to provide job-protected unpaid leave for both maternity/childbirth and caregiving of the newborn or newly adopted child. The caring leave is provided to both mothers and fathers. Eligible employees, including mothers, fathers, adoptive parents, or someone else acting in *loco parentis*, are guaranteed:

- Up to 12 weeks of unpaid leave annually, with family members of an injured service member able to take up to 26 weeks (this leave may be taken all at once, intermittently, or for part or all of a day throughout the year);
- Continued health insurance benefits to the extent ordinarily provided by the employer; and
- Return to the same or an equivalent job (U.S. Department of Labor 2013a, 2013b).

## State Initiatives to Increase Access to Parental Leave

Several U.S. states have enacted policies to provide workers with family leave benefits that are more generous than those required by the FMLA (see the Appendix for a comprehensive list). They have done so in a variety of ways, from providing more than 12 weeks of job-protected unpaid leave for new parents to instituting a program that provides partial wage replacement for eligible workers who take time to care for a new baby, an adopted child, or an ill loved one.

As discussed above, five states and Puerto Rico have established TDI programs, which provide paid leave for temporary medical disabilities, including conditions related to pregnancy and childbirth. Employees in California, Hawaii, New Jersey, New York, Rhode Island, and Puerto Rico receive at least partial wage replacement while on disability leave or on leave related to pregnancy or childbirth (which is considered a temporary medical disability under the PDA; National Partnership for Women and Families 2013a; U.S. Equal Employment Opportunity Commission n.d.).

In addition, four states have established Family Leave Insurance programs to provide wage replacement specifically to workers who take leave to bond with a new child or care for an ill family member:

- The State of California's Paid Family Leave (PFL) program, established in 2002 as an extension of California's State Disability Insurance (SDI) program, with benefits payable for family leaves that began on or after July 1, 2004, offers partial wage replacement financed entirely by employee payroll taxes. A mandatory contribution to the SDI program is deducted from an employee's wages by the employer for Disability and PFL coverage; there are no direct costs to employers (State of California 2014a). Eligible workers who take time to bond with a new biological, adopted, or foster child, or to care for a seriously ill child, spouse, parent, or domestic partner can receive up to six weeks of wage replacement benefits (State of California 2014a). This leave must be taken concurrently with the 12 weeks of unpaid FMLA leave if the individual is covered by the federal statute. An individual worker's weekly benefit amount is approximately 55 percent of his or her wage, up to a maximum of \$1,075 per week in 2014 (State of California 2014a). Unless covered by the FMLA or California's statute on pregnancy leave, the worker does not have a guarantee of a job upon completing the leave period.

- In 2009, New Jersey established Family Leave Insurance. Similar to California's program, it offers eligible workers up to six weeks of partially paid leave to bond with a newborn or newly adopted child or to provide care for a seriously ill family member (State of New Jersey 2013). In 2014, the program provided two-thirds of an employee's weekly pay up to \$595 per week; like in California, payroll deductions from employees' wages finance the entirety of New Jersey's Family Leave Insurance program (State of New Jersey 2013). Employers transfer the deductions to the Division of Temporary Disability Insurance in the Department of Labor and Work-force Development which then processes the payments (New Jersey Office of Administrative Law 2013).<sup>1</sup> Leave taken for family care reasons or pregnancy is taken concurrently with FMLA leave if the employee is eligible for the FMLA leave. Those not eligible for the FMLA do not have a guarantee of a job at the end of the leave period.
- Washington State passed a Family Leave Insurance Law in 2007, which would provide a full-time worker with up to \$250 per week for up to five weeks to care for a newborn or newly adopted child (Washington State Employment Security Department 2013). A funding mechanism for the program was left undecided at the time of the law's passage. Due to subsequent budgetary constraints, the State legislature has repeatedly placed the program on hold. As of September 2013, H.B. 2044 delayed the implementation of the program indefinitely pending the authorization of funding and an implementation date for the payment of benefits.<sup>2</sup>
- Signed into law on July 11, 2013, Rhode Island's Temporary Caregiver Insurance Program provides eligible claimants up to four weeks of wage replacement to care for a seriously ill child, spouse, domestic partner, parent, parent-in-law, grandparent, or to bond with a newborn child, newly adopted child or new foster-care child, with benefits beginning January 1, 2014. The weekly benefit rate for eligible workers equals 4.62 percent of the wages paid to them in the highest earnings quarter of their base period. For claims with a Benefit Year Begin Date effective July 7, 2013, or later, \$72.00 is the minimum and \$752.00 is the maximum benefit rate, not including dependency allowance. If an eligible claimant has dependent children less than 18 years of age, the claimant may be entitled to a dependency allowance. Incapacitated children over 18 may also be counted toward the dependency allowance. The law requires the employer to provide the same or equivalent job to the worker after the period of leave (Rhode Island Department of Labor and Training 2014).

In addition to the states that have enacted programs to provide paid family leave, several other states have passed family leave laws that provide more coverage for unpaid family leave beyond what is required by the FMLA. For example, Maine's Family and Medical Leave Act provides eligible employees who work for an employer that employs 15 or more employees or any public agency with up to 10 workweeks of unpaid, job-protected leave in a two-year period (State of Maine 2013). Vermont's Parental and Family Leave Act covers employers smaller than those covered under the federal statute: employers with 10 or

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<sup>1</sup> Employers can choose to use private family leave insurance plans that are approved by the Division of Temporary Disability Insurance. In the case of private plans, the private insurer processes benefit payments (New Jersey Office of Administrative Law 2013).

<sup>2</sup> Advocates are currently working on legislation to create a funding mechanism for the program. More information can be found here: <http://waworkandfamily.org/family-and-medical-leave-insurance/our-proposal/>.



more employees are covered under Parental and Family Leave, and employers with 15 or more employees are covered by Short-Term Family Leave (Vermont Department of Labor 2013). See the Appendix for a detailed breakdown of state laws on paid and unpaid family leave that go beyond what is required by the federal FMLA.

## Current Family Leave Campaigns in the United States

Advocates and policy makers around the country are calling out for new local, state, and federal paid family leave policies; some of these campaigns have seen recent successes. In California, a recently enacted law will expand California's existing Paid Family Leave insurance program, also known as the Family Temporary Disability Insurance program, to cover leave to care for additional family members. Beginning July 1, 2014, California workers will be able to receive up to six weeks of wage replacement benefits to care for seriously ill siblings, grandparents, grandchildren, or parents-in-law (California State Senate 2013). Before S.B. 770 was signed, the Family Temporary Disability Insurance program provided for up to six weeks of wage replacement benefits to workers who took time to care for a seriously ill child, spouse, parent, or domestic partner, or to bond with a minor child within one year of the birth or placement of the child in connection with foster care or adoption.<sup>3</sup>

On September 2, 2013, Mayor Michael Bloomberg signed the Pregnant Workers Fairness Act, which amends the city's administrative code to make it an unlawful discriminatory practice for an employer of four or more employees to refuse to provide a reasonable accommodation to the needs of an employee for her pregnancy, childbirth, or related medical condition that will allow her to perform the essential requirements of the job. Such a reasonable accommodation may include bathroom breaks, leave for a period of disability arising from childbirth; breaks to facilitate increased water intake; periodic rest for those who stand for long periods of time; and assistance with manual labor, among other practices.

Many in New York State are still working to pass a Family Leave Insurance (FLI) law that would provide partial wage replacement to workers who take leave to care for a newborn or newly adopted child or a seriously ill family member. The FLI Act has been introduced most recently in 2012, and advocates will continue to push for its passage in the 2013-2014 legislative session (A Better Balance 2013).

On the federal level, Senator Kirsten E. Gillibrand (D-NY) and Representative Rosa DeLauro (D-Conn.) introduced the Family and Medical Insurance Leave (FAMILY) Act on December 12, 2013. The act would create a national insurance program funded by equal employer and employee contributions of approximately \$1.50 a week for a median wage worker (National Partnership for Women and Families 2013b).<sup>4</sup> All workers who are insured for disability insurance benefits under the Social Security Act and

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<sup>3</sup> However, while S.B. 770 gives employees the right to receive pay while taking time off from work to care for their families, it does not provide them with a guaranteed right to return to their job. The right to job-protected family care leave is provided only to workers eligible for benefits under the federal FMLA and/or the California Family Rights Act (Rossin-Slater, Ruhm, and Waldfogel 2011). Women have the right to pregnancy leave under California's Fair Employment and Housing Act (FEHA), which applies to employers of five or more employees and requires them to provide female employees with job-protected leave for pregnancy, childbirth, or a related medical condition (California Department of Fair Employment and Housing 2010).

<sup>4</sup> Employers and employees would each contribute two-tenths of one percent of an employee's wages, up to a maximum of \$243 per year (National Partnership for Women and Families 2013b).

who had earned income from employment during the 12 months prior to the month in which an application for family and medical leave insurance benefits was filed would be eligible to receive family leave benefits, and the program would not be limited to employees of a specific establishment size like the FMLA. The FAMILY Act would provide up to 12 weeks (or 60 workdays) of partially paid leave for workers while they care for themselves during a serious illness, for seriously ill family members, for a newborn or newly adopted child, and for injuries or other conditions and circumstances experienced by family members who are in the military (National Partnership for Women and Families 2013b). The Act would establish within the Social Security Administration an office to be known as the Office of Paid Family and Medical Leave to issue such regulations as might be necessary to carry out the purposes of the Act, to determine eligibility for family and medical leave insurance benefits, and for other purposes.

A number of bills have been introduced in the U.S. Congress that would extend workers' access to family leave. The proposed Family and Medical Leave Inclusion Act (H.R. 1751/S. 846), introduced by Representative Carolyn B. Maloney (D-NY) and Senator Dick Durbin (D-IL) would expand the definition of family under the FMLA to allow workers to take leave to care for a same-sex spouse, domestic partner, a parent-in-law, an adult child, sibling, grandchild, or grandparent who has a serious health condition (National Partnership for Women and Families 2013c). Representative Maloney has also introduced, as of February 5, 2014, the Family and Medical Leave Enhancement Act of 2014 (H.R. 3999), which proposes to extend FMLA protection to employers with 25 or more employees and to allow eligible employees to take up to 24 hours of unpaid parental involvement and family wellness leave annually.<sup>5</sup> Additionally, the proposed Part-Time Worker Bill of Rights Act (H.R. 675), introduced February 13, 2013, by Representative Janice D. Schakowsky (D-IL), would amend the FMLA to eliminate the requirement under current law that an employee have served at least 1,250 hours during the 12-month period before a leave request. The proposed Parental Bereavement Act (H.R. 515/S. 226), introduced by Representative Steve Israel (D-NY) and Senator Jon Tester (D-MT) in February 2013, would amend the FMLA to entitle an eligible employee to up to 12 workweeks of leave during any 12-month period because of the death of a son or daughter. Also in February 2013, Representative Maloney reintroduced the Federal Employees Paid Parental Leave Act (H.R. 517), a bill that would make available to federal employees, for any of the 12 weeks of unpaid leave they are entitled to under the FMLA, four administrative weeks of paid parental leave and any accumulated annual or sick leave, in connection with the birth, adoption, or fostering of a child (Miller, Helmuth, and Farabee-Siers 2009).

## **The Economic Benefits of Paid Family Leave**

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Research shows that paid leave increases the likelihood that workers will return to work after childbirth, improves employee morale, has no or positive effects on workplace productivity, reduces costs to employers through improved employee retention, and improves family incomes. Research further suggests that expanding paid leave is likely to have economy-wide benefits such as reduced government spending on public assistance and increased labor force participation, which would bring concomitant economic gains, generating a larger tax base and increased consumer spending. At least one study, cited by the U.S. Government Accountability Office (2007) finds that paid leave for fathers helps to foster

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<sup>5</sup> Parental involvement and family wellness leave would allow eligible employees to attend their children's or grandchildren's school activities or meet the routine family care needs, like medical or dental appointments, of their children, spouse, or grandchildren.

gender equity, both in the workplace and in the home, since it shortens leaves for mothers, increasing their job tenure and potentially their wage growth. For an additional review of the economic benefits of paid family leave, see Boushey, O’Leary, and Mitukiewicz 2013.

## Improved Labor Force Attachment

The positive relationship between leave availability and labor force attachment among new mothers is well established.<sup>6</sup> Joesch (1997) suggests that women in the labor force can be seen as belonging to one of two groups: the first consists of women who would leave their pre-pregnancy job if no leave were offered because the cost of working (child care and reduced household production) is higher than the cost of staying home (foregone wages). For these women, offering either unpaid or paid leave allows them time to care for their child and arrange for child care once they return to work and thus decreases the extent of work interruptions due to pregnancy and childbirth. The second group of women consists of those who would continue to work during and after pregnancy even if no leave were offered because the cost of staying home is higher than the cost of working. For this group of women, offering leave would encourage them to stay out of work longer after the birth of their child than they normally would have, thus increasing the extent of work interruptions. Joesch, using data from the National Survey of Family Growth, reflecting the years 1980 to 1988, found that women with access to paid leave are more likely to work later into their pregnancies, and that while these women are less likely to start working again within the first month after childbirth than women without paid leave, they are actually more likely than women without paid leave to start working once their child is about two months old. Overall the study finds that women who are offered paid leave are more likely to return to the labor force in the year after they give birth than women who are not offered paid leave.<sup>7</sup>

Berger and Waldfogel (2004) build on this earlier work and use more recent data reflecting the years 1988 to 1996 from the National Longitudinal Survey of Youth (NLSY) to study the relationship between paid leave and pre- and post-birth employment outcomes for women. Like Joesch (1997), the authors find that, after controlling for age, education, race, marital status, and family income, women with access to leave have an increased likelihood of working prior to having their child and also increased likelihood of returning to the labor market after giving birth. Specifically, they find that women with access to leave are about 40 percent more likely to return to work at any time after giving birth than those who do not have access. The authors also find that women who have access to leave are less likely to return to work in the first 12 weeks after giving birth than women without leave, but that after 12 weeks they were 69 percent more likely to return than their counterparts without leave. This suggests that while women who have access to leave may utilize that leave period and stay at home longer than a woman without leave, they are actually more likely to return to work after their period of leave. Although the NLSY provides data on

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<sup>6</sup> Most studies examining leave-taking’s effects on the labor force have focused on women, since women are more likely than men to take leave after the birth of a child. Klerman et al. (2013), for example, find that women are one-third more likely than men to take leave and they take longer leaves. Gornick and Hegewisch (2008) show that the United States is falling behind other developed countries in terms of the labor force participation of college-educated women. Blau and Kahn (2013) estimate that one-third of the gap in labor force participation for all women between the United States and other OECD countries is due to a lack of family-friendly policies in the United States.

<sup>7</sup> Due to the nature of the NSFG data set, it is only known if the women in the sample received any paid leave. The extent of wage replacement is unknown.

both paid and unpaid leave, the authors do not report any tests of any models examining the effects of paid versus unpaid leave and the results summarized here pertain to combined leave.

More recent research on California's paid family leave program finds similar results. Rossin-Slater, Ruhm, and Waldfogel (2011) use the Current Population Survey from 1999-2010 to analyze the impact of California's paid leave policy on leave-taking and post-birth employment. The authors find that offering paid leave increases the amount of leave that is taken. Interestingly, the effect on leave-taking is heterogeneous across groups of women. Specifically, the study finds that less-advantaged women (i.e. who have lower education levels, are unmarried, or are minorities) had a much larger spike in the amount of leave taken than their more advantaged counterparts, largely reducing the disparity in the amount of leave taken that existed previously.<sup>8</sup> This is probably because before the paid leave policy was enacted, lower-income women were less able to afford to stay away from work after giving birth and returned before they would have liked. Offering paid family leave did not completely eliminate the financial worries of staying away from work after giving birth, but, with more economic support, it did give them the option of spending more time with newborns.

Rossin-Slater, Ruhm, and Waldfogel (2011) also find that paid family leave has a modest positive effect on work outcomes post-birth. The research finds that offering paid family leave increases the number of hours that a woman works after returning to work by about 2 to 3 hours per week. This also corresponds to a positive, though insignificant, increase in wage income. The authors posit that because paid family leave allows them to finance time off to care for their child, women who would otherwise have felt compelled to leave their job prior to giving birth or who could not afford to take time from work without pay are now more able to take a reasonable amount of leave.

Baum and Ruhm's 2013 working paper also addresses the labor market effects of California's paid leave program by using the National Longitudinal Survey of Youth (NLSY) to compare changes in leave taking by parents in California compared with those in other states that had not enacted paid leave programs before and after July 2004, when California's program began. Unlike the CPS, used by Rossin-Slater, Ruhm, and Waldfogel (2011), the NLSY allows the researchers to identify the exact timing of a birth and observe the amount of work before and after the birth; the NLSY also allows researchers to determine whether the parent returned to the same firm. Despite the differences in the two data sets and methods used, the findings of the effects of paid family leave are surprisingly similar in the two studies: the availability of paid leave increases use of leave in the early months for mothers, but increases their likelihood of return to work by 9 to 12 months after the birth. Increased work effort by mothers is also found in the first and second years after a birth. Baum and Ruhm also find that the availability of paid leave increases use of leave by fathers in the early weeks after childbirth. The results for paid leave increasing the likelihood of return to the same employer are not strong, but the authors suggest that further research could test the possibility that the paid leave program may encourage those pregnant women who are typically less attached to the labor force to stay on the job longer before birth in order to qualify for the benefits and then subsequently increase the likelihood that they return to the same employer.

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<sup>8</sup> It should be noted that income levels were not used to define the "less advantaged" groups of women.

Because paid family leave increases the likelihood that women return to work, and possibly to the same employer, employers may be able to benefit from reduced turnover and replacement costs.

## Costs and Benefits to Firms

Research on existing paid leave programs suggests that paid leave leads to negligible costs to employers in terms of temporary employee replacement costs or overtime paid to existing employees and has few if any costs—and potentially gains—in terms of employee morale and productivity. Research looking at changes following the implementation of state-administered paid leave programs has been particularly informative for assessing how employers adjust to new paid leave requirements.

Trzcinski and Finn-Stevenson (1991) provide data pertaining to leave prevalence and some of firms' cost concerns by surveying a sample of 621 firms in Connecticut to examine how well firms were complying with an existing statute that required all employers to provide “reasonable leave of absence for disability resulting from pregnancy.” Because firms were allowed a significant amount of discretion in the leave that they offered their employees, the Connecticut General Assembly established a task force to study the availability of leave in the private sector to determine if the statute was actually effective and whether additional protections were needed. Information was obtained on the size of the firm, the type of leave offered, and how the firms made up for the absence of the workers on leave, in addition to other variables of interest. All the firms studied employed ten or more workers. Trzcinski and Finn-Stevenson utilize data from this study to examine the prevalence of maternity leave coverage and the effects of providing coverage on the firms offering it.

In the absence of the Connecticut law, firms could either voluntarily provide leave to families with a new child, or they could simply replace the worker. Evidence from the Connecticut study shows that a number of firms spent at least six weeks searching for replacements, during which time the firm would also be without the employee on leave. For example, approximately 25 percent of firms spent more than 6 weeks to search for replacements for managers. This percentage is notably smaller for positions with fewer responsibilities, though not insubstantial—around 16 percent of firms spent at least 6 weeks to replace clerical and production workers as well. Given that leave of less than six weeks to families with newborns was quite common among firms regardless of size and employee type, it appears that in several cases it would be more costly to the firm to undergo a search for a replacement and to invest time and money training that replacement than it would be to temporarily arrange for coverage of the workers' duties while they are on leave. Studies document a substantial cost to employers of replacing employees, though the costs vary widely depending on the employee category being studied. Hinkin and Tracey (2006) find that among hotels, for example, the cost of replacing a worker can vary based on many factors, including job complexity. They estimate the cost of replacing a worker to be anywhere between \$2,000 and \$14,000, though most replacement costs tended to be between \$4,000 and \$9,000.<sup>9</sup> In a broader study of employers in a variety of industries, Dube, Freeman, and Reich (2010) examine data from the California Establishment Survey to determine the size of replacement costs of various employee types and some factors that determine them. They, like Hinkin and Tracey, find that replacement costs vary by type of employee with an average replacement cost of \$4,039 per worker overall with a substantial standard deviation of \$9,800.

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<sup>9</sup> At the then current minimum wage, \$2,000 represented almost ten weeks of full-time work.

Hiring temporary replacement workers or paying existing workers overtime could result in costs to business, but several research studies, spanning decades, suggest that firms utilize these strategies less often than might be expected. Trzcinski and Finn-Stevenson (1991) find that few firms hired replacement workers. Most simply did without. In fact, the job category that had the highest utilization of temporary workers was clerical work, at only a 43.1 percent replacement rate. Overtime was used even less often to replace workers on leave. Anywhere between 67 and 96 percent of employers did not use overtime to cover for employees in various job categories on leave. Finally, fewer than 15 percent of firms reported any additional costs attributable to leaves of six weeks or longer (aside from hiring temps or offering overtime), such as losses in productivity. The study also finds that in firms of all sizes, very few workers were on leave at a given point in time, with fewer than 3 percent of workers at any firm on maternity/family leave at the time of the survey.<sup>10</sup>

The most recent FMLA surveys also find that employers do not typically replace workers on leave for family care purposes. In 2012, the vast majority (64.5 percent) of all employers temporarily reassigned other employees to cover for workers on family leave, while 3.2 percent hired temporary replacements (Klerman, Daley and Pozniak 2013). In their recent study of California's paid family leave program, Appelbaum and Milkman (2011) also conclude that very few firms incurred additional costs related to replacing workers on leave because they simply passed the work on to other workers temporarily.

After California passed the first state-administered paid family leave program in the country, Appelbaum and Milkman (2011) evaluated how well the program is working and estimate its effects on both firms and employees. Like Trzcinski and Finn-Stevenson (1991), the authors find very minimal cost impact on firms.

One of the primary findings of Appelbaum's and Milkman's study is that 89 percent of employers reported a "positive effect" or "no noticeable effect" on productivity and 99 percent of employers reported an increase in employee morale. Another key finding is that the majority of firms coordinated their own benefits with the program. When asked if the paid family leave program had caused costs to increase, 87 percent of respondents indicated that it had not and 8.8 percent of firms reported that it had even resulted in cost savings because employees were able to use the paid family leave (financed by worker payroll taxes) instead of employer-provided benefits such as paid sick leave and vacation days. Because 60 percent of employers report they coordinated their benefits, the authors surmise that the actual share of employers experiencing cost savings is much higher than 8.8 percent (Appelbaum and Milkman 2011). It is, of course, possible that employers paid higher wages to compensate workers for their payroll deductions (see Jonathan Gruber's 2000 study of cost shifting in the case of Chile's payroll tax, for an example).

According to the available evidence, it appears that firms incur few costs in addition to replacing pay (when paid leave is provided by the employer) and instead experience some substantial benefits. Finally,

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<sup>10</sup> Overall, the study found that many firms offered no leave and most others short leaves, and the legislature passed the Connecticut Family and Medical Leave Act after receiving the results of Trzcinski and Finn-Stevenson's research.

businesses can benefit because paid leave increases the probability of a mother returning to work and shortens her length of leave, as noted in the previous section.

## Contributions of Paid Leave Policies to Economic Growth

Paid family leave may also affect economic growth in various ways, such as through increased labor force participation, increased fertility rates, and reduced spending on public assistance. Higher labor force participation, either by men or women (or both), affects growth by increasing inputs to production. More labor typically results in higher levels of output as long as the capital stock can expand to accommodate it. Since the effect of paid leave on labor force participation rates is typically much higher for women than men, offering paid leave can help push the economy towards gender equality in labor force participation. This equality has obvious implications for economic growth. Aguirre, Hoteit, Rupp, and Sabbagh (2012) find, for example, that increasing women's labor force participation rates to equal that of their male counterparts would increase GDP substantially in many countries. In the United States, GDP could be increased by 5 percent, but in other countries this percentage can be more than 30 percent.<sup>11</sup>

Ruhm (1998), using data from nine European countries across the years 1969-1993, elaborates more on the labor force effects of parental leave mandates. He posits that when leave is made available more workers who are likely to take leave will choose to be in the labor market relative to those who would not take leave. Requiring employers to provide leave for families with new children may also decrease the demand for these workers, presumably because firms view providing these leaves as an additional cost. He also surmises that since leave benefits are often paid by the government in most European countries, the increase in supply is likely much larger than the reduction in demand. If this is true, the impact of parental leave policies should be to increase overall employment levels. Indeed, the author finds that parental leave policies are associated with higher employment to population ratios (by about three to four percentage points) as well as decreased unemployment.<sup>12</sup>

Leave may contribute to increased productivity by reducing turnover, increasing the length of time workers stay at firms or in the labor market, thus helping workers accumulate increased human capital, which enhances their productivity at work. A study of OECD countries shows that family leave, especially when paid, can have a positive impact on productivity. Every one-week increase in available family leave is associated with an increase in aggregate labor productivity and multifactor productivity (Bassanini and Venn 2008). While both paid and unpaid leave are shown to increase productivity, paid

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<sup>11</sup> The authors recognize that when the labor force participation of women first increases there may be initial drags on GDP growth, such as reduced productivity as women new to the labor market learn the skills necessary to complete their jobs effectively and reduced hours when women initially begin to work part time. The estimates of the effects on GDP growth are net of these initial adverse effects.

<sup>12</sup> There is a worry, however, that both the demand and supply shifts should unambiguously lower wages. Though Ruhm's findings do show some evidence of an overall wage decrease, he finds that only longer leaves of 30 weeks correspond to sizable decreases in wages (an approximate 3 percent reduction in wages for longer leaves, versus only about a 1 percent decrease in wages for short leaves of 10 weeks). While the decline in relative wages may seem like a negative side effect, it must be noted that parental leave has a value to those families who take advantage of it. As long as the value of parental leave to families exceeds the costs to firms of providing this leave, the overall effect on the general welfare is positive. Baum and Ruhm (2013) also note a possible opposite effect, that "[p]arental leave rights could increase aggregate employment and wage levels because they preserve employer-employee relationships."

leave has a larger effect; unpaid leave is only linked to higher productivity when paid maternity leave is short or not available (Bassanini and Venn 2008). Based on these results, the authors estimate that the United States would see an increase in multifactor productivity of approximately 1.1 percent over time if it were to institute paid maternity leave at the average OECD level of 15 weeks (Bassanini and Venn 2008).

For countries with rapidly aging workforces, which includes many of those that experienced a significant baby boom after World War II, this increase in women's labor force participation brought about by family-friendly labor market policies, including paid family leave, can be helpful to boosting growth by mitigating the effects of a shrinking workforce (Elborgh-Woytek et al. 2013). In the United States, the labor force participation rates of both men and women have declined in the Great Recession and its aftermath; it is estimated that about half this decline is due to the aging workforce (Congressional Budget Office 2014).

Another effect of family-friendly policies is that they encourage women to have more children. Rovny (2011) studies the effects of increases in parental benefits and child care spending on fertility rates in 17 different OECD countries over the years 1990-99. She finds that countries with more generous family policies tend to have higher fertility rates. In the long run, higher fertility rates will lead to larger pools of working-age citizens contributing to economic growth.<sup>13</sup>

In addition, paid parental leave has the potential to reduce government spending through a reduction in spending on public assistance benefits for newborns and their families. When paid leave is not accessible to new parents, some may rely on public assistance to supplement the incomes they lose while not at work, or, if they leave their jobs, until they find new employment after their child's birth. Studies of unpaid FMLA leave indicate that nearly one-tenth of eligible and covered workers receiving partial or no pay went on some form of public assistance while on leave (Klerman, Daley, and Pozniak 2013). A study by Houser and Vartanian (2012), utilizing data from the National Longitudinal Survey of Youth, 1997-2009, finds that paid family leave reduces the likelihood of receiving public assistance in the year after the birth of a child, and that employees who are offered paid family leave are 39 percent less likely to receive assistance than women who keep working and have no leave at all. They also find that for families who do receive public assistance in the year after birth, new mothers who were offered paid leave report \$413 less in public assistance than those mothers who were not offered paid leave. Thus, implementing paid leave programs appears to reduce the need for public assistance, which can also free up government spending to invest in other activities supportive of economic growth.

## **The Health and Socio-Emotional Benefits of Family Leave**

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Family leave, both paid and unpaid, has been shown to have significant benefits for the health of individual family members and for the well-being of the family overall. The length of leave taken, whether or not that leave is paid, and the proportion of income replaced during paid leave all affect the magnitude of the benefits of family leave.

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<sup>13</sup> It should be noted that all the countries in the Rovney study have fertility rates that are below the replacement level and are therefore likely not concerned that family-friendly policies may lead to very high levels of population growth.



## **Family Leave and Child Health**

The resources and supports available to infants can have critical and sometimes lasting effects on their health and well-being. In the early years of life, children experience rapid rates of brain and nervous system development (Shonkoff and Phillips 2000) and form important social bonds with their caregivers (Schoore 2001). Research suggests that access to maternity leave can affect breastfeeding rates and duration, reduce the risk of infant mortality, and increase the likelihood of infants receiving well-baby care and vaccinations.

### **Increases the Initiation and Length of Breastfeeding**

Maternity leave may benefit children's health through increased rates and duration of breastfeeding. Women are more likely to breastfeed when they take maternity leave, and longer leaves increase both the likelihood and duration of breastfeeding (Berger, Hill, and Waldfogel 2005; Chuang et al. 2010; Lindberg 1996; Staehelin, Berteau, and Stutz 2007). In fact, multiple studies show that early return to work after childbirth increases the probability of early cessation of breastfeeding in the period following childbirth (Guendelman et al. 2009; Hawkins et al. 2007; Visness and Kennedy, 1997).

Breastfeeding can increase bonding between the child and nursing mother, stimulate positive neurological and psycho-social development, and strengthen a child's immune system (U.S. Department of Health and Human Services 2000). It has also been shown to reduce the risk of health problems like diarrheal disease, respiratory illnesses, asthma, acute ear infection, obesity, Type 2 diabetes, leukemia, and sudden infant death syndrome (Ip et al. 2007; U.S. Department of Health and Human Services 2011).

The American Academy of Pediatrics (2012) and the World Health Organization (2013) recommend exclusive breastfeeding for up to six months of age with continuation in conjunction with complementary foods for at least 12 months, if not longer.

Appelbaum and Milkman's (2011) study of California's Paid Family Leave program finds that mothers who took advantage of this paid leave program breastfed for twice as long as those who did not take leave. Using data from the National Longitudinal Study of Children and Youth, Baker and Milligan (2008) measured the effects of Canada's policy change in 2000, which increased job-protected, paid maternity leave from approximately 6 to 12 months. The authors find that women who took paid maternity leave after the reform breastfed longer and were more likely to breastfeed exclusively for the recommended 6 months.

### **Decreases Morbidity and Mortality**

Analysis of comparative international data finds that paid family leave is associated with lower rates of mortality for infants and young children. Heymann, Raub, and Earle (2011), examining national paid maternity leave policies in 141 countries, find that, after controlling for overall resources to meet basic needs (i.e. per capita GDP, government health expenditures, health care provision, and female literacy), 10 paid full-time equivalent weeks of maternity leave were associated with a 9 to 10 percent reduction in neonatal mortality, infant mortality, and under-5 mortality rates. Other studies looking at multi-country

data have affirmed this, finding that while paid leave is significantly associated with a decline in infant mortality, leave that is neither paid nor job-protected has no effect at all (Ruhm 2000; Tanaka 2005).

### **Increases Well-Baby Care and Vaccination Rates**

Children whose mothers take time from work after childbirth are more likely to receive well-baby checkups in the first years of life, suggesting that leaves taken for 12 weeks or longer could be instrumental in promoting child health (Berger, Hill, and Waldfogel 2005).

Longer maternity leave can also help give parents the time they need to make sure their children are properly immunized. Berger, Hill, and Waldfogel (2005) find that, when mothers stay home with an infant for at least 12 weeks after giving birth, their children have a greater likelihood of receiving all the recommended vaccinations. One study by Daku, Raub, and Heymann (2012) compares the current state of maternity leave in 185 countries to vaccination schedules to assess the impact of differential paid maternity leave policies on vaccination rates. The study finds that, after controlling for per capita GDP, health care expenditures, and societal factors, each 10 percent increase in the duration of full-time equivalent paid leave results in increased rates of vaccinations. For example, children are 25.3 percent and 22.2 percent more likely to get their measles and polio vaccines, respectively, when mothers have access to full-time equivalent paid maternity leave; without full-time equivalent pay, however, the duration of paid maternity leave is found to have no significant association with early immunizations and a relatively negligible association with those administered months after birth.

### **The Effects of Family Leave on Maternal Psychological Health**

A mother's emotional well-being and mental health can play an important role in the quality of care she is able to provide to her infant. An appropriate duration of maternity leave can help prevent maternal depression and stress. One study, examining a sample of 3,350 adult respondents to the nationally representative Early Childhood Longitudinal Study – Birth Cohort, demonstrates that women who take a longer maternity leave (i.e. longer than 12 weeks of total leave) report fewer depressive symptoms, a reduction in severe depression, and, when the leave is paid, an improvement in overall and mental health (Chatterji and Markowitz 2012).

Another study, using data from the National Institute of Child Health and Human Development Study on Early Child Care finds that, compared with mothers who waited at least 12 weeks before going back to work after childbirth, returning to work sooner (less than 12 weeks) is linked to greater levels of depressive symptoms, stress, and self-reported poor health (Chatterji, Markowitz, and Brooks-Gunn 2011).

Finally, a prospective cohort study that followed a sample of 817 Minnesota employed mothers during the first year after childbirth shows that the longer the duration of leave from work that a woman takes after giving birth -- up to six months -- the lower are her postpartum depression scores on the Edinburgh Postnatal Depression Scale (Dagher, McGovern, and Dowd 2013). Moreover, this study finds that the total length of paid leave provided by employer policy predicts women's leave duration after childbirth, consistent with the findings of other studies (Hofferth and Curtin 2006; McGovern et al. 2000).

## Reduced Maternal Risk of Disease through Higher Breastfeeding Rates

By increasing the likelihood of breastfeeding initiation and duration, maternity leave may have multiple health benefits for mothers. While no direct causal links have been demonstrated, studies have suggested an association between the duration of breastfeeding and a reduction in a woman's risk for breast cancer (especially in women with a family history of the disease) and ovarian cancer (Beral et al. 2002; Ip et al. 2007; Stuebe et al. 2009) and rheumatoid arthritis (Karlson et al. 2004). Also, in a large, prospective, longitudinal study using data from two cohorts of the Nurses' Health Study, Stuebe et al. (2005) find that breastfeeding for a longer duration may lower the risk of Type 2 diabetes in young and middle-aged mothers.

## Greater Paternal Engagement in Caregiving

Although men are less likely than women to take paid or unpaid parental leave (Klerman, Daley, and Pozniak 2013), fathers who take time from work around childbirth are more likely to spend more time with their children in the months following their children's birth (Huerta et al. 2013), which could reduce stress on the family and contribute to father-infant bonding. Studies have found that fathers who take at least two weeks of leave carry out more child care activities during the first few months of their children's lives than fathers who do not take leave (Huerta et al. 2013; Nepomnyaschy and Waldfogel 2007).

Huerta et al. (2013), in a study of paternity leave and its effect on paternal involvement and child outcomes in the United States, the United Kingdom, Denmark, and Australia, find that paternity leave of 10 days or more is positively associated with fathers' involvement with children and child care-related activities like helping their child with eating or helping their child go to bed. In the United States, paternity leaves of two weeks or more predict fathers' more regular involvement with child care activities compared with men who took no leave at all (Huerta et al. 2013). In limited cases, shorter leaves (less than 10 days) significantly predict fathers' involvement with some child care activities (e.g. in Australia, fathers who took leaves of 10 days or less were more likely to help their children go to bed), but overall, the relationship between shorter leaves and involvement with child care activities is not significant (Huerta et al. 2013).

## Assessing U.S. Data on Paid Parental Leave Coverage

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### Data Sets

Several federal data sources provide information on the provision and use of paid and unpaid leave for parental and/or other caregiving reasons, including the National Compensation Survey (NCS), the Survey of Income and Program Participation (SIPP), the American Time Use Survey (special supplement; ATUS), the 2012 Family and Medical Leave (FMLA) Survey, and the Current Population Survey (CPS), Figure 1 provides a detailed comparison of these sources, which differ in a number of ways, such as how

**Figure 1. Paid Parental/Family Leave Access and Usage Statistics from Five Key Federal Data Sources<sup>14</sup>**

	<b>NCS March 2013 Bureau of Labor Statistics, Department of Labor</b>	<b>2011 ATUS Leave Module (Links to CPS)</b>	<b>SIPP Fertility Topical Module 2006-2008 Panel, Wave 2 Census Bureau</b>	<b>2012 FMLA Worksite and Employee Surveys Abt Associates<sup>15</sup></b>	<b>CPS 1994 - current Census Bureau</b>
<b>Employer or employee survey</b>	Employer	Employee	Employee	Both employer and employee surveys <sup>16</sup>	Employee
<b>Sample</b>	11,893 worksites	6,673 respondents to Leave Module of 12,479 total ATUS respondents in 2011	3,363 women who worked during pregnancy of 5,127 total women with a first birth between 1991 and 2009	1,812 worksites 2,852 workers	50,000-60,000 households each month
<b>Unpaid parental/ family leave coverage</b>	<ul style="list-style-type: none"> <li>87% of workers overall have access to unpaid family leave</li> </ul>	Published results do not provide rates of reported access to unpaid family leave coverage or usage	Not available; only collects data on usage	<ul style="list-style-type: none"> <li>17 percent of worksites reported FMLA coverage (30 percent were not sure) and Abt estimates 35 percent had 50 employees or more within 75 miles of one another.</li> <li>59 percent of current employees work in covered firms and meet tenure and total hours requirements.</li> </ul>	Not available; only collects data on usage

<sup>14</sup> The focus here is on recent surveys of the workforce. There are other data sources for various groups of workers, such as the National Longitudinal Studies of Youth (NLSY), that may collect work histories and ask if employment breaks were taken for childbearing and whether or not they were paid, for the particular groups they survey.

<sup>15</sup> The FMLA surveys were commissioned by the U.S. Department of Labor but conducted by Abt Associates.

<sup>16</sup> The worksite survey included only private employers while the worker survey included both private and public employees.

<b>Percent with paid parental/family leave coverage</b>	<ul style="list-style-type: none"> <li>• 12% of workers have access to paid family leave</li> </ul>	<ul style="list-style-type: none"> <li>• 39% of workers report access to paid leave for reasons related to the birth or adoption of a child<sup>17</sup></li> </ul>	Not available; only collects data on usage	<ul style="list-style-type: none"> <li>• 35% of worksites offer paid maternity leave to all or most of their employees</li> <li>• 20% of worksites offer paid paternity leave to all or most of their employees</li> </ul>	Not available; only collects data on usage
<b>Paid or unpaid parental/family leave usage</b>	Not available; only collects data on coverage	<ul style="list-style-type: none"> <li>• 1.7% of workers took leave (paid or unpaid) for birth or adoption during an average week<sup>18</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 50.8% of working mothers used paid leave of some kind before or after childbirth</li> <li>• 40.7% used paid maternity leave specifically</li> <li>• 42.4% of working mothers used unpaid leave of some kind before or after childbirth</li> </ul>	<ul style="list-style-type: none"> <li>• 21.9% of employees who took leave for FMLA purposes in the past 12 months took it for a reason related to a new child (including paid and unpaid leave).</li> <li>• Among these workers who needed parental leave (in the past 12 months), 56.0% received pay from any source (56.9% of women and 55.0% of men); 8.1% of men and 15.0% of women with a new baby received paid parental leave specifically.<sup>19</sup></li> </ul>	<ul style="list-style-type: none"> <li>• 0.7% of 16- to 44-year-old female employees took (paid or unpaid) parental leave per year, on average since 1994</li> <li>• 45% of 16- to 44-year-old female workers who took parental leave (maternity) received some pay, on average since 1994</li> </ul>
<b>Reasons for parental/family leave included in statistics</b>	To care for a newborn child, a newly adopted child, sick child, or sick adult relative	Reasons related to the birth or adoption of a child	Reasons related to the birth of a child	Pregnancy and related illness, pregnancy/maternity leave, miscarriage, caring	Self-reported maternity leave or paternity leave

<sup>17</sup> Unpublished IWPR calculations based on the 2011 ATUS microdata.

<sup>18</sup> Published results do not differentiate between rates of paid versus unpaid leave usage for the birth or adoption of a child.

<sup>19</sup> Unpublished IWPR calculations based on 2012 FMLA microdata.

<b>listed above</b>				for newborn/newly adopted child/new foster child, and bonding with a newborn/newly adopted child	
<b>Sources of pay included in paid parental/family leave statistics listed above</b>	Maternity leave and paternity leave, and paid leave to care for other family members, excluding any sick leave, vacation, personal leave, or short-term disability leave that can be also be used for those reasons	Sources of pay for those with access to leave not specified.	Maternity, sick, vacation, and other types of paid leave used for maternity purposes (not including disability pay)	Parental leave (including maternity and paternity leave, but not including sick, vacation, paid time off, or other types of leave that can be used for parental reasons)	Sources of pay not specified other than that the pay came from employer
<b>Includes length of parental/family leave</b>	No	No	Provides cumulative percentages of women working after 3, 6, and 12 months after childbirth	Provides a breakdown of the length of leave taken for maternity leave and for paternity leave	No
<b>Past surveys</b>	Conducted annually since 1997, previously called the Employee Benefits Survey (EBS)	Fielded for the first time in 2011	2.5-4 year panels since 1984	Surveys also conducted in 1995 and 2000	Question on family leave has been included every year since 1994
<b>Sources</b>	U.S. Department of Labor 2013c, 2013d	U.S. Department of Labor 2012a; U.S. Department of Labor 2012b	Laughlin 2011	Klerman, Daley, and Pozniak 2013	Boushey, Farrell, and Schmitt 2013; U.S. Department of Labor 2003

they define "parental leave," whether they gather information on paid or unpaid leave or both, or on coverage or usage or both, or from employers or employees. The variations in methodology for collecting data lead to disparate estimates of family leave coverage and usage, providing a confusing and incomplete picture of how family leave is provided and used in the United States.

### **National Compensation Survey**

The U.S. Department of Labor's Bureau of Labor Statistics conducts the National Compensation Survey (NCS), an employer-based survey that examines, among other types of compensation, availability of employee benefits. The most recent NCS, fielded in March of 2013, sampled 11,893 establishments and gathered data about a total of 125 million workers, with 106 million of those working in private industry and 19 million working for state and local governments (U.S. Department of Labor 2013c). The survey includes questions on the provision of paid and unpaid time off, including paid and unpaid family leave. For the purposes of the NCS, 'paid family leave' includes paid maternity and paternity leave, as well as paid leave available to care for a sick family member (Van Giezen 2013). The NCS definition of 'paid family leave,' however, does not include short-term disability leave, vacation, personal leave, or paid sick leave. The NCS includes only leave that is paid with a direct contribution from the employer; so workers who may receive paid leave through state temporary disability insurance or through programs of paid family leave in California, New Jersey, or Rhode Island, which are exclusively funded through employee contributions, will not be counted as receiving access to paid leave in the NCS survey.

The NCS data indicate that, for all workers, only 12 percent have the option to take employer-paid family leave as of 2013, while unpaid family leave is available to 87 percent of workers (some workers may have access to both paid and unpaid family leave; U.S. Department of Labor 2013c). The survey results provide a breakdown of employer-paid and unpaid family leave provision according to worker characteristics (such as time worked), wage level, establishment characteristics (industry and size), and geographic area.

The NCS data show that access to paid family leave is very inequitable, with the lowest wage earners being much less likely than higher earners to receive paid family leave. Employees in the highest-paid 10 percent of the workforce are more than four times as likely to have employer-provided paid family leave as those in the lowest-paid 25 percent of the workforce, although even for the highest-paid, access to paid family leave is by no means common (U.S. Department of Labor 2013c). Only five percent of workers in the lowest 25 percent wage category have access to paid family leave compared with 22 percent of workers in the highest 10 percent wage category (U.S. Department of Labor 2013c). Between 23 and 25 percent of management, business, and financial workers, registered nurses, and hospital workers have access to paid family leave (U.S. Department of Labor 2013c). Only 5 percent of part-time workers have access to paid family leave. According to the survey, unpaid family leave is available to 77 percent of part-time workers and to 75 percent of workers in the lowest ten percent of wage earners (U.S. Department of Labor 2013c).

### **American Time Use Survey Leave Module**

In 2011, the Women's Bureau of the U.S. Department of Labor sponsored a supplemental Leave Module of the American Time Use Survey (ATUS) that collected data on wage and salary workers' access to

leave, use of leave, and ability to adjust their work schedules or location (U.S. Department of Labor 2012a). The ATUS is an annual survey conducted by the U.S. Census Bureau for the Bureau of Labor Statistics that collects detailed information on how workers use their time at work and outside of work. The ATUS surveys individual wage and salary workers over the age of 15, and its results on access to paid or unpaid leave were based on the respondents' knowledge of their access to such leave.

The ATUS Leave Module included questions about access to and reasons for taking leave, including family and medical leave, as well as leave for vacations, errands/personal reasons, and child care. Respondents were also asked whether available leave is paid or unpaid, and the reasons for which they could take that leave. Respondents were asked if they had taken advantage of leave policies in the past week, and if so, what type they used, how long they took leave, and for what purpose (U.S. Department of Labor 2012a).

In 2011, about half of all ATUS survey respondents were employed and participated in the Leave Module (6,673 responses to Leave Module of 12,479 total ATUS respondents in 2011; U.S. Department of Labor 2012a). A little more than nine percent of respondents reported having taken leave in the previous week for any of the family reasons covered in the survey. Notably, while the ATUS does report the percentage of workers who took leave for family-related reasons during an average week, the Bureau of Labor Statistics does not publish the rates of access to family leave according to type, i.e. rates of access to paid versus unpaid, vacation, or sick leave taken for family reasons (though these results can be found in the microdata).

Unpublished IWPR calculations based on the 2011 ATUS Leave Module microdata file show that 39 percent of workers reported access to paid leave for the birth or adoption of a child, and 43 percent had access to paid leave for family illness. A Center for American Progress (CAP) analysis of the ATUS data shows that mothers were slightly more likely than women without children to have access to paid parental leave (55 percent compared with 53 percent), as were fathers, compared with men without children (53 percent compared with 48 percent; Glynn 2012).

Overall, in any given week, the percent of respondents who reported leave for the adoption or birth of a child was very low. Among individuals who took leave from work during an average week, 1.7 percent took it for the birth or adoption of a child, 2.3 percent took leave for child care or elder care purposes (other than caring for a family member who is sick or requires medical care) and 5.6 percent took leave to provide care to a sick family member (U.S. Department of Labor 2012a). In contrast, people were much more likely to take leave for reasons unrelated to family care: 21.9 percent of all respondents reported taking leave for personal illness or medical care, 29.5 percent took it for vacation, and 16.5 percent took it for personal reasons or errands (U.S. Department of Labor 2012a).

Women were much more likely than men to take paid or unpaid leave for reasons related to birth or adoption: 3.2 percent of women, compared with only 0.1 percent of men, took leave to care for a new child during an average week (U.S. Department of Labor 2012a). Yet men were slightly more likely than women to take leave for the purpose of caring for children or elderly family members (other than for illness), with 2.6 percent of men reporting taking leave for these reasons compared with 1.9 percent of women (U.S. Department of Labor 2012a). Individuals working full-time were more than five times as



likely as those working part-time to take paid or unpaid leave for birth or adoption (2.2 percent of full-time workers compared with 0.4 percent of part-time workers); and the highest-paid workers, as well as those working at private, not-for-profit organizations, were also more likely than lower-paid workers to have taken maternity/paternity or adoption leave (3.8 percent of the highest paid workers making \$1,231 or more per week, compared with 1.5 percent of those making between \$831, and \$1,231; 1.5 percent of those making between \$541 and \$830 per week; and 5 percent of private, not-for-profit workers compared with other private sector workers or those working in the public sector; U.S. Department of Labor 2012a).<sup>20</sup>

Some differences along racial/ethnic lines were observable in reports of leave taking during an average week. For example, 2.7 percent of Black workers reported taking leave for the birth or adoption of a child in an average week compared with 1.4 percent of Whites, while only 0.9 percent of Hispanic workers took leave for this reason, compared with 1.7 percent of non-Hispanic workers (U.S. Department of Labor 2012a). The CAP analysis of the 2011 ATUS data shows that this disparity persisted in working parents' overall access to parental leave: only 27.5 percent of Hispanic parents reported having access to parental leave with some pay compared with 60 percent of White working parents, 59 percent of Black working parents, and 54 percent of Asian American working parents (Glynn 2012). Hispanic workers, however, were more than three times as likely to take leave for the care of children or elderly family members (other than for illness) during an average week than their non-Hispanic counterparts (6.2 percent compared with 1.9 percent, respectively). In contrast, 2.4 percent of White workers reported taking leave for family care (other than for illness) compared with only 1.0 percent of Black workers (U.S. Department of Labor 2012a).

Fifty-six percent of wage and salary workers were able to adjust their work schedules or the location of their main job instead of taking time off from work in 2011 (U.S. Department of Labor 2012a). This included wage and salary workers who adjusted their work schedules or location instead of taking leave, as well as those who did so because they did not have access to leave but needed time off from work. Parents of a household child under the age of 13 were more likely to adjust their work schedules or location instead of taking time off from work in an average week than workers who were not a parent of a household child under the age of 18: 10 percent compared with 6 percent (U.S. Department of Labor 2012a).

## Survey of Income and Program Participation

The Survey of Income and Program Participation (SIPP) is a nationally representative household panel survey that provides detailed information on income, labor force participation, federal assistance program participation and eligibility data, and general demographic characteristics (U.S. Census Bureau 2006).<sup>21</sup> In addition to the core items of the survey, SIPP panels include topical modules, including a fertility

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<sup>20</sup> The highest-paid workers are those who earn upwards of \$1,231 per week, placing them in the top 25 percent of earners overall.

<sup>21</sup> In February 2014, the Census Bureau began interviewing a new SIPP panel with a re-engineered survey designed to reduce data collection costs and respondent burden. One aspect of the new instrument is to move selected questions from some topical modules into the core questionnaire and eliminate the remainder. The status of these questions in future SIPP data is unclear; information on the re-engineered SIPP is incomplete on the Census Bureau website at the time of writing.

topical module with questions on employment and leave before, during, and 12 weeks after childbirth (Laughlin 2011). For the 2006-2008 survey, the leave questions were posed to women who worked during pregnancy and whose first child was born between 1991 and the survey date, for a total sample of 3,363 women (Laughlin 2011). A report summarizing the findings compares these data with findings from the 1984, 1985, 1996, and 2001 panels (Laughlin 2011).<sup>22</sup>

From 1981 to 2008, there was an increase in the proportion of working women who reported taking paid leave before or after childbirth (including maternity, disability, sick, vacation, or some other type paid of leave; Laughlin 2011). In the 2006-2008 panel, 50.8 percent of women who worked before a first-time birth reported taking some kind of leave with pay before or after the birth (including sick leave, vacation leave, or maternity leave), and 42.4 percent received leave without pay, with a portion of women using both paid and unpaid leave. The survey found that 41 percent received paid maternity leave specifically (rather than some other type of leave or a combination of paid and unpaid leave) before or after giving birth, while 36 percent received unpaid maternity leave (Laughlin 2011). 9.5 percent received disability leave before or after birth, but the report does not specify whether this leave was paid or unpaid.

As found in other surveys, access to paid leave differs tremendously according to socio-economic characteristics. Sixty-six percent of women with at least a Bachelor's degree had access to some form of paid leave (such as maternity, sick, vacation or some other type of leave) before or after childbirth, compared with only 19 percent of those who did not finish high school (Laughlin 2011). In addition, 56 percent of women working full-time received paid leave, compared with only 21 percent of women working part-time (Laughlin 2011). Part-time working mothers were slightly more likely than mothers working full-time to take unpaid leave, with 46 percent of part-time mothers taking unpaid leave before or after childbirth compared with 42 percent of mothers working full-time (Laughlin 2011).

### **Family and Medical Leave Act Surveys**

The 2012 Family and Medical Leave Act Surveys, conducted by Abt Associates through a contract with the U.S. Department of Labor, assessed employers' and employees' experience with the Family and Medical Leave Act. The FMLA surveys include extensive information on leaves taken by workers and the benefits or problems of administration for employers. The 2012 survey updated previous surveys from 1995 and 2000 and included questions regarding paid leave for the range of conditions covered under the FMLA. The survey had two parts: one that sampled 1,812 FMLA-covered and uncovered worksites and one that sampled 2,852 FMLA-covered or uncovered employees; respondents who had experienced a qualifying event (such as childbirth or illness) were asked additional questions about whether or how their leave needs were met (Daley et al 2013).<sup>23</sup>

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<sup>22</sup> Starting in 1996, the SIPP made a distinction between maternity leave specifically and disability leave used for maternity purposes; before that year, women may have included disability leave in their answers regarding paid or unpaid maternity leave (Laughlin 2011).

<sup>23</sup> For private employers to be covered by the FMLA, they must employ 50 or more people who worked during at least 20 calendar weeks in the current or preceding calendar year. For employees to be eligible they must work for a covered employer at a worksite with at least 50 employees within 75 miles and (i) have 12 months of tenure with this firm and (ii) have worked at least 1,250 hours for the employer during the 12-month period immediately preceding the leave (about 24 hours per week; Office of the Assistant Secretary for Policy 2009).

The FMLA employee survey found that 59 percent of employees met all eligibility requirements for FMLA benefits, while the FMLA worksite survey found that 17 percent of all worksites reported being covered by the FMLA and 30 percent were unsure. The worksite survey found that 35 percent of covered and uncovered worksites offered paid maternity leave and 20 percent provided paid paternity leave to all or most of their employees (Klerman, Daley, and Pozniak 2013).

The employee survey found that, regardless of FMLA eligibility, 13 percent of employees had actually taken leave for a FMLA-covered reason in the past year. Almost 65 percent of all employees taking leave in the previous 12 months reported receiving either full or partial pay during leave; rates of fully- paid leave, however, were 20 percentage points lower when leave lasted longer than 10 days (60 percent versus 40 percent). Twenty-two percent of employees who had taken leave did so to care for a new child (including a newborn, an adopted child, or a foster child; Klerman, Daley, and Pozniak 2013).

Among employees with a need for leave in connection with the arrival of a new child in the past 12 months, 56.0 percent received pay from any source, 56.9 percent for women and 55.0 percent for men; of all those who had a new child, only 8.1 percent of men and 15.0 percent of women received specific parental leave<sup>24</sup> (Institute for Women's Policy Research 2014).

The length of leave taken for parental reasons varied considerably between women and men. Seventy percent of men took parental leave for ten days or less, compared with less than a quarter of women (23 percent); 38 percent of women took leave for 60 days or more, compared with only 6 percent of men (Klerman, Daley, and Pozniak 2013).

The FMLA employee survey also explored the experiences of workers who had an unmet need for leave for FMLA reasons, meaning they experienced some kind of FMLA-qualifying event but could not or chose not to take leave for some reason.<sup>25</sup> Overall, 4.6 percent of respondents reported having had an unmet need for family or medical leave in the last 12 months (Klerman, Daley, and Pozniak 2013). Unmet need for leave to care for or bond with a new child was 2.3 percent of all women with a new child event compared with 6.5 percent of all men with a new child event (IWPR 2014).

Unmet need for leave was greater among women, unmarried workers, workers of color, and low-wage workers than among their respective counterparts. Women had nearly twice the rate of unmet need for leave as men (6.1 percent compared with 3.2 percent, respectively); 5.8 percent of unmarried workers had unmet need compared with 3.7 percent of married workers; 6.7 percent of workers of color had unmet need, compared with 3.8 percent of White workers, and employees making below \$35,000 were more likely to have unmet need for leave (8.2 percent) than those earning more than that amount per year (with rates of unmet need as low as 4.2 percent for employees earning between \$35,000 and \$75,000 and 3.4 percent for employees earning at least \$75,000). By far the most common reason given for the unmet need (46 percent) was that the worker could not afford to take leave without pay (Klerman, Daley, and Pozniak 2013).

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<sup>24</sup> The term "parental leave" refers to leave taken by fathers or mothers, i.e. paternity leave or maternity leave including the maternity leave used by mothers for recovery, but not including vacation or other types of leave (Klerman, Daley, and Pozniak 2013).

<sup>25</sup> Causes of unmet need for leave included ineligibility for FMLA benefits, the need for leave was not covered under the FMLA, or the individual chose not to take leave for which they were eligible.

## Current Population Survey

The Current Population Survey is a nationally representative survey conducted on a monthly basis by the U.S. Census Bureau for the U.S. Department of Labor Bureau of Labor Statistics. The CPS collects detailed data from 50,000-60,000 households on the labor force status of household members age 15 and older (U.S. Department of Labor 2003). Data on the employment status of the population are compiled from surveys of “employed persons” ages 16 years and older, who are asked questions about their employment status during the “reference week,” or calendar week, Sunday through Saturday, which includes the 12th day of the month (U.S. Department of Labor 2003). “Employed persons” are defined as all those who worked at least one hour for pay during the reference week, including those who did not work but were temporarily absent from a job (U.S. Department of Labor 2003).

Respondents who report absence from work can choose from 14 activities to explain their absence, including vacation, illness, childcare problems, labor-management dispute, job training, or other family or personal reasons (Boushey, Farrell, and Schmitt 2013; U.S. Department of Labor 2003). Since 1994, “maternity or paternity leave” has been included in the CPS as a possible reason for absence from work, giving respondents the option of delineating parental reasons for time off and whether or not this leave was paid by the employer. The CPS, however, does not collect data on the specific source or sources of pay utilized while on that maternity/paternity leave, meaning researchers cannot distinguish between pay from formal maternity/paternity leave and pay from the other types of leave often used by workers for maternity/paternity reasons, such as paid sick leave, vacation, paid time off, or (for women) temporary disability leave (Boushey, Farrell, and Schmitt 2013). In addition, workers receiving temporary disability or parental leave payments through state programs typically do not receive pay from employers and so would be unlikely to report pay in this survey.

Boushey, Farrell, and Schmitt (2013) examine the 19 years of CPS data for which information on maternity and paternity leave is available (1994-2012). The authors’ analysis, which is restricted to employed persons ages 16 to 44, shows that women are much more likely to take paid or unpaid maternity leave than men are to take paternity leave. On average, 0.7 percent of women took paid or unpaid maternity leave annually over the last two decades compared with a mere 0.1 percent of men who reported taking paternity leave annually. Rates of pay during this leave have remained relatively stable, with an average of 45 percent of women reporting taking paid maternity leave over the last 19 years (Boushey, Farrell, and Schmitt 2013).

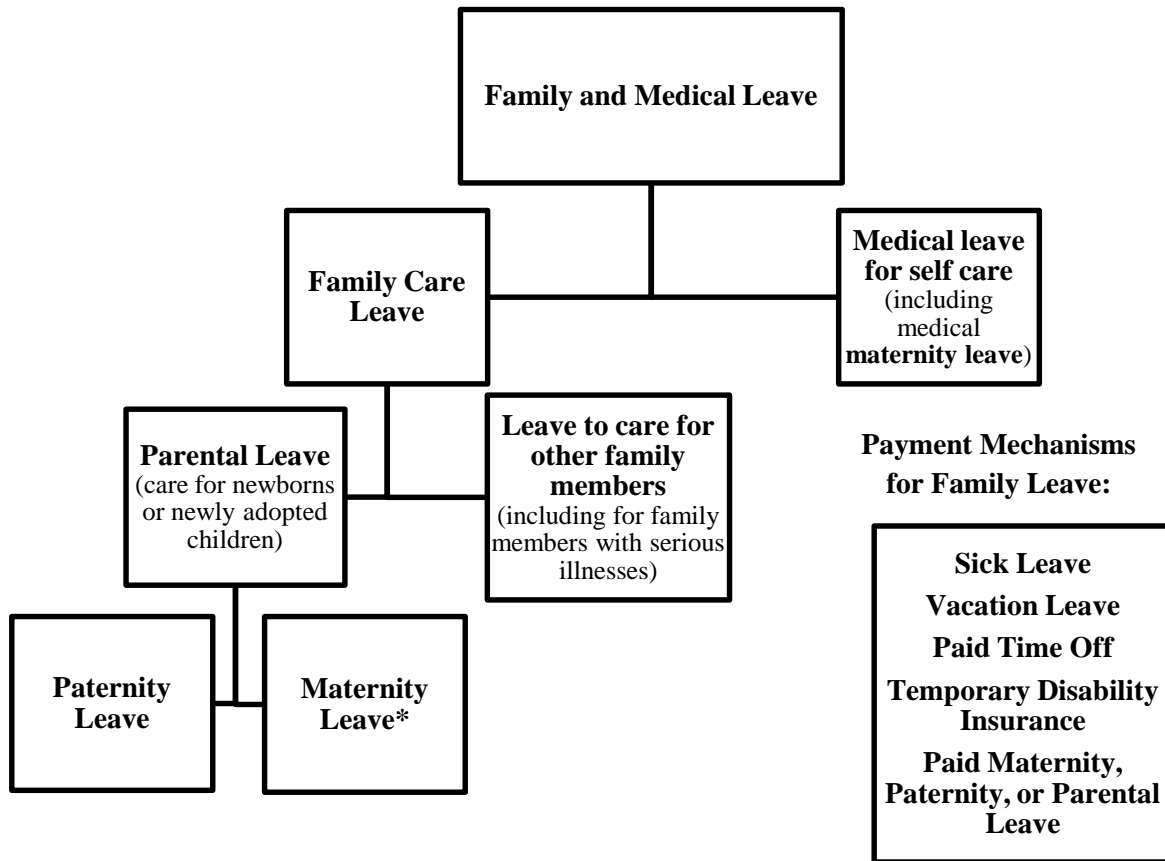
Rates of usage and pay among women, however, differ according to their characteristics. College-educated women, for example, take maternity leave more often than their less educated counterparts and are more likely to receive pay: from 1994 to 2012, an average of 1 percent of women with a college degree took leave annually for maternity reasons and 55 percent reported receiving pay. In contrast, only 0.6 percent of working women with some college or only a high school education and 0.4 percent of working women with less than high school report taking maternity leave annually, and only 35 percent and 25 percent, respectively, received pay during that time. Work intensity also has an effect on maternity leave usage. On average, 0.8 percent of women working full-time reported taking maternity leave annually and 50 percent reported that their leave was paid compared with only 0.5 percent of part-time female employees, 25 percent of whom received pay. Finally, female union members have the highest

rate of reported maternity leave usage at 1.1 percent annually, with 55 percent reporting pay. Non-union members took maternity leave at a rate that echoes the overall average: 0.7 percent annually, with 45 percent reporting pay (Boushey, Farrell, and Schmitt 2013).

## Data Coverage and Data Gaps

Differing methodologies and definitions used across surveys make it challenging to paint a cohesive picture of parental leave access and use in the United States. For example, the NCS definition of ‘paid family leave’ refers to paid leave given to an employee for the care of a new child or an ill family member, excluding sick leave, vacation, personal leave, or short-term disability leave (U.S. Department of Labor 2013d). The FMLA surveys provide information about other types of paid leave for family care purposes, including, but not limited to, paid time off, sick leave, personal days, or vacation time. The SIPP asks questions about taking leave for a new child only to mothers experiencing childbirth. Figure 2 details the many ways family and medical leave can be defined and the potential sources of pay that can be used for family care.

**Figure 2. Defining Family and Medical Leave**



\*In practice, maternity leave often includes both time for mothers’ recovery from childbirth and time for infant care.

There are some similarities in these surveys' results regarding access to paid family leave, as well as considerable differences. The FMLA worksite survey found that 35 percent of worksites offered paid maternity leave to all or most employees (Klerman, Daley, and Pozniak 2013). In the ATUS sample, 39 percent of workers reported having paid leave coverage for reasons related to the birth or adoption of a child (U.S. Department of Labor 2012a). The NCS reports that only 12 percent of workers had access to paid parental leave (including maternity and paternity leave).

Results from the NCS and FMLA Worksite survey provide different information on access to paid leave and allowable reasons for taking leave compared with the SIPP, ATUS, the FMLA employee survey, and the CPS, as the former two surveys ask questions of employers and the latter four interview workers. The NCS is the primary source on employer-provided benefits; however, because it includes only benefits provided by the employer, and thus does not include information on paid leave provided through disability or family care insurance without employer contributions, it almost certainly underestimates the number of workers with access to paid family leave. The accuracy of responses to questions asking workers whether or not their employer provides paid leave depends on how much workers know about whether they have access to leave, whether they are eligible to use it, and how accurately they label the type of leave they could use. Awareness of leave benefits often comes only with need, such that employee surveys may reflect, in part, incomplete employee knowledge of the availability of leave (U.S. Department of Labor 2012a). The questions included in the ATUS on leave taken and the FMLA employee survey on leave needed and leave taken help overcome this problem to some extent. Another inadequacy of the available data is that the survey sample sizes are generally not large enough to allow for any state-level analyses or for much disaggregation by worker characteristics.

While it would be possible to impute inequalities in access to paid leave by race and ethnicity from the data available on paid family leave by matching workers to the American Community Survey according to variables common to both surveys, such as occupation, hours of work, and age of respondent, the ability to calculate rates of access to paid family leave by race/ethnicity directly from the survey findings is weak. The NCS does not collect information on worker demographics, and, while Abt Associates did some analysis of the FMLA data by sex and minority status (White/nonwhite and Hispanic/nonhispanic), the small sample sizes lead to wide, frequently overlapping confidence intervals that prohibit systematic analyses by gender and race/ ethnicity.

Although five surveys that collect some information on paid parental leave are discussed here, several of these surveys do not collect paid family leave information on a regular basis. Only the NCS paid family leave questions have been asked regularly for many years.<sup>26</sup> The CPS has asked about paternity/maternity leave since 1994, along with questions about the reasons for absence from work and whether the worker receives any pay from the employer. In contrast, the ATUS Leave Module was funded by the Women's Bureau of the US Department of Labor for the first time in 2011. It is not known whether these (or similar) questions will be a part of future ATUS data collection efforts. The re-designed SIPP Event History Calendar (EHC), to be implemented starting in 2014, has eliminated most modules, and the status of the maternity leave module is in question.<sup>27</sup> While the 2012 FMLA survey was the third round in the

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<sup>26</sup>The NCS has included family leave benefits data since 2010. From 1985 to 2006 similar questions were asked of employers in the Employee Benefits Survey (EBS).

<sup>27</sup> The maternity leave module was collected six times, in 1984, 1985, 1996, 2001, 2004, and 2008 (Laughlin 2011).

series, the surveys were administered at substantial intervals in time, and researchers do not know when future data might be collected. Only the NCS employer reports of access to leave and the CPS question on maternity/paternity leave appear on a trajectory to be continued regularly in coming years.

With the exception of the CPS, the samples of workers interviewed in the data sets discussed here are generally too small to produce robust estimates of state-level access, which limits, to some extent, their ability to inform state-level policies and practices. While the NCS covers a large sample of establishments, the smallest geographic breakdown of findings is published at the regional level, and microdata are not made available to researchers through public release (although researchers can apply for access through research data centers).

Published reports of the data sets discussed in this paper do not always provide information on the length of leaves taken and sources and levels of pay available to workers. The NCS does not provide any data on usage and therefore the length of leaves taken is not included. The ATUS provides data on the average number of hours of leave taken by workers with different characteristics. In contrast, the FMLA employee survey provides more detailed information regarding source of pay and lengths of leave, as well as length of leave for parental versus non-parental reasons by gender. The SIPP also provides information on the length of mothers' absence from work and the factors associated with the length of time not at work. The SIPP leave module, however, was administered only to mothers with a first birth in the specified time frame and no fathers or adoptive parents, creating a gap in knowledge surrounding what leave arrangements family units as a whole use to take time to care for a new child.

All in all, no one data source provides a complete picture of access to and use of paid parental leave or of the sources of pay for these leaves. Future data collection should seek to fill these gaps so that researchers, advocates, and policymakers can more effectively quantify and communicate how leave is provided, how families use leave, and the extent of unmet need for paid parental leave.

## Recommendations

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### Improving the Data on Paid Parental and Family Leave

More comprehensive data and summary publications are needed to provide and communicate a full understanding of access to and use of paid leave in the United States, as well as the benefits that it brings to society. This will require including questions on family leave in a broader range of surveys administered regularly to employers and employees. Greater integration of questions on work-family issues overall in the federal statistical system would help to ensure that workplace and public policies keep pace with shifting patterns of work in U.S. society. For example, more questions on family leave benefits could be added to the Bureau of Labor Statistics' Current Population Survey and more questions on paid family leave benefits could be added to the question about paid sick days in the National Health Interview Survey.

Moving forward, the data collected on leave in general need to be more complete and consistent. Needed infrastructure improvements include expanding access to the NCS data through virtual research data centers that might encrypt communications to provide data security or remove selected potential

identifying information so that researchers could work with the data more freely without compromising respondent confidentiality. Protecting the confidentiality of establishment respondents is vital, but allowing for greater latitude in disaggregating the data in one dimension (e.g., geography) or another (e.g., industry detail) might allow the data to be used to answer more research questions of interest to policymakers, practitioners, and the general public.

Finally, a renewed discussion of how to extract such information from existing surveys is needed to explore potential solutions to the current data issues. Such an exploration could ask questions like “Should questions on paid family leave be made consistent across surveys?” or “What should surveys be asking to ensure that complete information is being collected?” Establishing a working group dedicated to recommending coordinated and improved practices for collecting data on paid and unpaid family leave could help to provide the information required for policy formulation.

## **Inequality in Access**

A minority of workers in the United States have dedicated paid parental leave, meaning that most new parents must patch together different types of paid leave to ensure they can afford to take time from work to care for or bond with a new child, potentially exhausting leave that will be needed later for illness or vacation. Access to paid leave for family care reasons is limited for most workers in the United States and is inequitably distributed across workers of different characteristics.

One current source of inequity is that men have less access to paid parental leave than do women, even when considering that women who give birth require additional time for physical recovery. The FMLA is gender neutral, and the law requires covered employers to provide up to 12 weeks of unpaid, job-protected leave equally to eligible women and men. In contrast, TDI, which provides a major source of wage replacement for maternity leave, is available only to women giving birth. While men in the states of California, New Jersey, and Rhode Island can take advantage of the dedicated family leave laws that provide them with equal access to paid family leave benefits, the majority of men throughout the country have considerably fewer avenues to receive pay while on family leave. Companies can, of course, choose to provide men with paid paternity leave or allow them to use other types of paid leave for family care purposes or provide adoption leave to both mothers and fathers. Yet, employers often do not offer caregiving leave equally to men and women, or men may be subtly or not-so-subtly discouraged from taking time off to care for a new child, which can contribute to reproducing traditional conceptions of gender roles in society. Future legislation should address the current gender inequity in availability of paid family leave in order to ensure that men and women have equal access to such benefits moving forward, keeping in mind that women giving birth also need medical leave.

Inequality in access to paid family leave is also tied to socio-economic status. One’s educational attainment plays a large role, not only in earnings, but also in access to paid leave benefits. Data from the SIPP show that women with bachelor’s degrees are twice as likely to use paid leave of some kind before or after childbirth as women with only high school diplomas, half of whom leave their jobs instead of remaining employed after giving birth (Laughlin 2011).

The NCS data show that while access to unpaid family leave does not vary much among workers at different wage levels, workers in the lowest wage quartiles are much less likely than the highest earners to



have access to paid family leave, with the highest earners being more than four times as likely as the lowest earners to have access (20 percent of the top 10 percent of earners compared with 4 percent of the bottom 25 percent of earners; U.S. Department of Labor 2013c). The inequality in access to paid family leave may contribute to the widening economic gap between the rich and the poor and compound the already significant challenges facing low-wage workers and their families.

Despite some state-level successes and continued efforts by paid family leave advocates around the country, three rounds of the FMLA survey (1995, 2000, and 2012) have continued to show little change in access to paid family leave. Analysis of the CPS data from 1994-2012 also shows little change (Boushey, Farrell, and Schmitt 2013). This plateau indicates that there exists a gap in access to paid leave that employers are not filling. A reasonable solution to providing paid leave using a shared-cost framework would be a social insurance program that combines employer, employee, and public funding. This would ensure that all workers would have access to compensation while taking time to spend with their families, allowing both workers and employers to take advantage of the full range of benefits that could accrue from paid family leave.

Moving forward, it is also important to ensure that all workers have the information they need to take advantage of their options for family leave under federal and state laws. Especially in places where paid leave provisions exist, more must be done to expose workers to the full range of options provided to them by law or by their employers. In California, for example, one survey shows that more than half of workers who had experienced a qualifying life event were not aware of the existence of the Paid Family Leave program (Appelbaum and Milkman 2011). Most of these workers were from groups who could benefit from paid leave the most – low-wage workers, immigrants, and Latinas/os. Expanding education about access to paid family leave, as well as on the many benefits that can accrue to families from taking such leave, is crucial to increasing its use among diverse groups of workers.

## Conclusion

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Fifty years after the President's Commission on the Status of Women recommended that paid maternity leave be provided for working women, the United States remains without a federal paid maternity or family leave statute.

The benefits of paid family leave to individuals, to businesses, and to society are well-documented. Not only could a paid family leave program keep women in the workforce and decrease their need for public assistance, but it could reduce employer costs and contribute to U.S. economic growth. Paid family leave substantially increases the amount of leave taken by parents and is linked to health benefits like lower rates of infant and child mortality, increased incidence and length of breastfeeding, and improved cognitive development in children. It also allows lower-income families to take care of loved ones without sacrificing much-needed income. The increased use of leave is matched by an increased likelihood of mothers' returning to work after childbirth and with increased work hours by mothers in the two years after birth.

Moving forward, the importance of developing a coherent approach to data collection and research about paid family leave cannot be overstated. More accurately assessing the state of family leave coverage in

the United States with improved federal data collection would make it easier to quantify unmet needs and to assess the costs and benefits of paid and unpaid family leave. Such information and analysis could aid in the design of effective policies at both the state and federal levels.

The need for paid family leave in the United States remains pressing. While a small minority of states has taken bold steps to ensure their residents have access to paid family leave, the majority remain without such benefits. And while the 1993 FMLA has provided the majority of American workers with critical unpaid family leave benefits, such as job protection, new, more comprehensive legislation is needed to build a more productive workforce and a stronger economy.

## Appendix. State-Specific Family Leave Coverage<sup>28-29</sup>

California				
Law/ Program	State Disability Insurance (SDI)	Paid Family Leave (also known as the Family Temporary Disability Insurance Program)	California Family Rights Act (CFRA) (also known as the Moore-Brown-Roberti Family Rights Act)	Fair Employment and Housing Act (FEHA)
<b>Paid Benefits</b>	For claims beginning on or after January 1, 2014, weekly benefits range from \$50 to a maximum of \$1,075. An employee's weekly benefit amount is approximately 55% of the earnings shown in the highest quarter of a worker's base period up to a maximum of \$1,075 per week (State of California 2014b).	The weekly benefit amount is approximately 55% of the earnings shown in the highest quarter of a worker's base period up to a maximum of \$1,075 per week (State of California 2014a). <sup>30</sup>	An employee may choose, or an employer may require the employee, to substitute accrued vacation leave or other accrued paid or unpaid time off. If the leave is taken for the employee's own serious health condition, the employee may choose or the employer may require the use of accrued sick leave (Gov. Code, § 12945.2). <sup>31</sup>	Leave is unpaid but employees have the option to substitute any accrued paid vacation leave or sick leave (California Fair Employment and Housing Act Section 12940-12951). Labor Code Sec. 233(a) gives employees the right to use up to half of their yearly accrued sick leave to care for an ill child, spouse, or domestic partner of the employee.
<b>Funding</b>	Employee payroll contributions to the State Disability Insurance program	Employee payroll contributions to the State Disability Insurance program (State of California	Not applicable	Not applicable

<sup>28</sup> The information in the Appendix is compiled, and sometimes excerpted, from a variety of state government websites. All sources are included in the reference list.

<sup>29</sup> Unless otherwise noted, state government employees are eligible for protection under the laws listed in the Appendix. Most laws that only apply to state public sector employees are excluded (for example, Alaska, Arizona, Colorado, Florida, and Illinois). See the National Partnership for Women and Families' report, *Expecting Better: A State-By-State Analysis of Laws That Help New Parents* for more detail: <http://www.nationalpartnership.org/research-library/work-family/expecting-better.pdf>.

<sup>30</sup> The law gives an employer the option to require an employee to take up to two weeks of earned but unused vacation leave or paid time off. The first week of vacation or paid time off will be applied to the waiting period (State of California 2013).

<sup>31</sup> Sick leave cannot be used for leave related to the birth, adoption, or foster care of a child, or to care for a child, parent, or spouse with a serious health condition, unless an agreement is reached between the employer and employee (Gov. Code, § 12945.2).

	(State of California 2014d).	2013).		
<b>Eligible Reasons for Leave</b>	Non-work related injury, illness, or medical condition, including disability resulting from pregnancy or childbirth, which renders an employee unable to do their regular work for at least 8 consecutive days (State of California 2010a).	To care for a seriously ill child (the employee's or that of a domestic partner), spouse, parent, or registered domestic partner or to bond with a minor child within one year of the birth or placement of the child in connection with foster care or adoption (State of California 2013). <sup>32</sup>	For the birth of a child of the employee, the placement of a child in connection with the adoption or foster care of the child by the employee, or the serious health condition of a child of the employee; <sup>33</sup> to care for a parent or spouse with a serious health condition, or to care for the employee's own serious health condition that makes him/her unable to work <sup>34</sup> (Gov. Code, § 12945.2).	The FEHA prohibits employers' refusal to allow female employees to take a FEHA leave during any time they are disabled by pregnancy, disabled by childbirth, or have a medical condition related to pregnancy or childbirth (California Fair Employment and Housing Act Section 12940-12951).
<b>Length of Leave</b>	Up to 52 weeks of disability insurance benefits (State of California 2014b). For normal pregnancies, the standard period of disability is up to	Up to 6 weeks of wage replacement benefits in any 12-month period (State of California 2014a). <sup>35</sup>	Up to a total of 12 workweeks of unpaid, job-protected leave in any 12-month period (Gov. Code, § 12945.2).	A reasonable amount of unpaid leave up to four months over a 12-month period. <sup>36</sup> FEHA leave is taken in addition to any

<sup>32</sup> A 2013 law (Chapter 350, Statutes of 2013) amended California's Unemployment Insurance Code (Part 2, Ch. 7. Secs. 3300-3303) by expanding the scope of the family temporary disability program to include time off to care for a seriously ill grandparent, grandchild, sibling, or parent-in-law, beginning July 1, 2014 (California State Senate 2013).

<sup>33</sup> Under the CFRA, "child" refers to a biological, adopted, or foster child, a stepchild, a legal ward, or a child of a person standing in *loco parentis* who is either 18 years of age or an adult dependent child (Gov. Code, § 12945.2).

<sup>34</sup> Leave that can be taken for an employee's own serious health condition does not include leave taken for disability on account of pregnancy, childbirth, or related medical condition (Gov. Code, § 12945.2).

<sup>35</sup> Women who take SDI leave for pregnancy-related disability are also eligible to take paid family leave; SDI leave and paid family leave must be taken sequentially (National Partnership for Women and Families 2012).

<sup>36</sup> A "reasonable period of time" refers to the time during which the female employee is disabled due to pregnancy, childbirth, or a related medical condition (California Fair Employment and Housing Act Section 12940-12951).

	4 weeks before and up to 6 weeks after childbirth in any 12-month period (State of California 2010c).			other leave entitlement an employee may have <sup>37</sup> (California Fair Employment and Housing Act Section 12940-12951).
<b>Job Protection</b>	No, unless covered by the federal FMLA or CFRA	No, unless covered by the federal FMLA or CFRA	Yes	Yes
<b>Employer and Employee Eligibility</b>	The worker must be unable to do his or her regular or customary work for at least 8 consecutive days and must contribute to the California State Disability Insurance fund to be eligible for disability insurance (State of California 2014d). <sup>38</sup>	Workers must be unable to perform their regular or customary duties for a 7-day waiting period during each disability benefit period, during which no family temporary disability insurance benefits are payable (California State Senate 2013). Workers must also contribute to the California State Disability Insurance fund (State of California 2010b). <sup>39</sup>	Employees, including state employees, with at least 1,250 hours of service with an employer over the previous 12-month period; employers who employ 50 or more employees; and any state employer or any political or civil subdivision of the state and cities (Gov. Code, § 12945.2).	Employers with five or more employees. All employees employed by covered employers are eligible (California Fair Employment and Housing Act Section 12940-12951). <sup>40</sup>

<sup>37</sup> However, the employee’s physician/practitioner may certify to a longer period if the delivery is by Cesarean section, if there are medical complications, or if the employee is unable to perform her regular or customary job duties (State of California 2010c).

<sup>38</sup> State employees are eligible if their bargaining unit has chosen to opt in to the system (State of California 2013).

<sup>39</sup> State employees are eligible if their bargaining unit has chosen to opt in to the system (State of California 2013).

<sup>40</sup> FEHA does not cover employers that are religious associations or corporations not organized for private profit, and employees who are employed by a family member or under a special license in a nonprofit sheltered workshop or rehabilitation facility are ineligible for FEHA leave (California Fair Employment and Housing Act Section 12940-12951).

<b>Connecticut</b>		
<b>Law/ Program</b>	<b>Connecticut Family and Medical Leave Act (FMLA)</b>	<b>Connecticut Fair Employment Practices Act (CFEPA)</b>
<b>Paid Benefits</b>	Leave is generally unpaid, but an eligible employee may choose to substitute accrued paid leave for FMLA leave. The employer may require employees to substitute paid leave (State of Connecticut <i>Final Regulations</i> ).	Leave is unpaid. Under Connecticut’s Employment Regulations, however, it is illegal for an employer to deny an employee the right to take up to two weeks of accrued paid sick leave to care for the serious illness of a son, daughter, spouse, or parent, or for the birth or adoption of a child of the employee (Conn. Gen. Stat. § 31-51pp(c)(1)).
<b>Funding</b>	Not applicable	Not applicable
<b>Eligible Reasons for Leave</b>	Inability to work or perform regular duties due to a serious health condition for more than three consecutive days and any subsequent treatment period; incapacity due to pregnancy or for prenatal care; incapacity due to a serious chronic health condition; for the placement of a child in connection with adoption or foster care; to care for a seriously ill family member (both physical and psychological care) (Connecticut Department of Labor 2013).	Employers may not deny female employees a “reasonable” leave of absence for disability resulting from pregnancy (Connecticut General Statute Secs. 46a-60(a)(7)).
<b>Length of Leave</b>	Up to 16 weeks of job-protected leave during any 24-month period. If an employee is eligible for both state and federal FMLA laws, leave taken counts against both. Leave may be taken intermittently (State of Connecticut <i>Final Regulations</i> ).	Female employees are entitled to a “reasonable” length of absence from work (Connecticut General Statute Secs. 46a-60(a)(7)).
<b>Job Protection</b>	Yes	Yes
<b>Employer and Employee Eligibility</b>	Employers must have at least 75 employees and employees must have worked 1,000 hours over a 12-month period (does not have to be consecutive) for a covered employer by the date on which any family or medical leave is to commence (State of Connecticut <i>Final Regulations</i> ). <sup>41</sup> Not restricted to heterosexual couples (State of Connecticut “Guidance on the Interaction”).	Eligible workers must work for state or private employers that employ three or more employees (Connecticut General Statute Secs. 46a-51(a)(10)).
<b>Other Family Leave</b>	<b>State Personnel Act:</b> State government employees have additional family leave rights: any permanent employee of the state is entitled to unpaid, job-protected family leave for the birth or adoption of a child; for the serious illness of a child, spouse or parent; <sup>42</sup> for the employee’s	

<sup>41</sup> Covered employers do not include the state, a municipality, a local or regional board of education, or a private or parochial elementary or secondary school (State of Connecticut *Final Regulations*).

<sup>42</sup> “Child” is defined as a biological, adopted or foster child, stepchild, child of whom a person has legal guardianship or custody, or, in the alternative, a child of a person standing in loco parentis, who is (1) under eighteen years of age, or (2) eighteen years of age or older and incapable of self-care because of a mental or physical disability (Connecticut General Statute Secs.5-248(a)).

<b>Laws</b>	own illness; for serving as a bone marrow or organ donor; or for caring for a military service member. <sup>43</sup> Leave may be taken for up to 24 weeks within a two-year period (Connecticut General Statute Secs. 5-248(a)).	
<b>District of Columbia</b>		
<b>Law/ Program</b>	<b>District of Columbia Family and Medical Leave Act</b>	<b>D.C. Parental Leave Act</b>
<b>Paid Benefits</b>	Leave is unpaid unless employees elect to use accrued paid leave (D.C. Register 2013).	The leave provided may be unpaid unless the employee elects to use any paid family, vacation, personal, compensatory, or leave bank leave provided by the employer (District of Columbia Register 1997).
<b>Funding</b>	Not applicable	Not applicable
<b>Eligible Reasons for Leave</b>	The birth of a child of the employee; the placement of a child with the employee for adoption or foster care; the care of a family member of the employee (including an individual in a committed relationship with the employee) who has a serious health condition; and prenatal care or disability related to pregnancy (D.C. Municipal Regulations and D.C. Register 2013).	To attend or participate in a school-related event for an employee's child in which the child is a participant or a subject (District of Columbia Register 1997).
<b>Length of Leave</b>	Up to 16 workweeks of medical leave and 16 workweeks of family leave during a 24-month period. Leave used by employees eligible for both state and federal FMLA laws counts against an employee's entitlements to both (D.C. Municipal Regulations and D.C. Register 2013). <sup>44</sup>	Employees who are parents <sup>45</sup> may take 24 hours of leave <sup>46</sup> during a 12-month period (District of Columbia Register 1997).
<b>Job Protection</b>	Yes	Yes
<b>Employer and Employee Eligibility</b>	Establishments with at least 20 employees on the payroll for at least 20 weeks and employees who have worked for an employer for at least a year and for at least 1,000 hours during the 12-month period immediately preceding the requested family or medical leave (D.C. Municipal Regulations and D.C. Register 2013).	All employees who are parents who work for employers located in the District of Columbia are covered. Leave is unpaid, but workers may use paid family, vacation, personal, compensatory, or leave bank available to them through their employer (District of Columbia Register 1997).

<sup>43</sup> Employees who are the spouse, son or daughter, parent or next of kin of a current member of the armed forces who was injured in the line of duty are entitled to 26 workweeks of leave in a two-year period (Connecticut General Statute Secs.5-248(g)).

<sup>44</sup> Employees can elect to use any paid medical, sick, vacation, personal, or compensatory leave provided by their employer for family leave; this leave shall count against the 16 workweeks of family leave allowed under D.C. law (D.C. Municipal Regulations and D.C. Register 2013).

<sup>45</sup> The term "Parent" means any of the following: (1) the biological parents of a child; (2) a person who has legal custody of a child; (3) a person who acts as a guardian of a child regardless of whether he or she had been appointed legally; (4) an aunt, uncle, or grandparent of a child; or (5) the spouse of any of the foregoing persons (District of Columbia Register 1997).

<sup>46</sup> Leave can include unpaid or paid family, vacation, personal, compensatory, or leave bank leave (District of Columbia Register 1997).

<b>Hawaii</b>		
<b>Law/ Program</b>	<b>Temporary Disability Insurance (TDI)<sup>47</sup></b>	<b>Hawaii Family Leave Law</b>
<b>Paid Benefits</b>	The weekly benefit amount is 58% of an employee's wage base up to a maximum of \$546 in 2014 (State of Hawaii 2013).	An employee or employer may substitute any of the employee's accrued paid leave for family leave (State of Hawaii "Hawaii Revised Statutes"). <sup>48</sup>
<b>Funding</b>	Employers must pay at least half and can elect to pay all of the premium cost. Employees cannot be required to pay more than half the cost (and not more than 0.5% of their weekly wages) (State of Hawaii 2004).	Not applicable
<b>Eligible Reasons for Leave</b>	Inability to work because of pregnancy or a disabling non-work related injury/illness (State of Hawaii 2004).	Upon the birth of a child of an employee or adoption of a child, or to care for an employee's child, spouse or reciprocal beneficiary (which may include a same-sex partner), or parent with a serious health condition (State of Hawaii "Hawaii Revised Statutes").
<b>Length of Leave</b>	The employer's plan determines how long the employee will be paid. If the employer has a statutory plan, i.e. a plan that provides benefits according to the minimum benefit standards as required by law, the employee is entitled to disability benefits, from the eighth day of disability for a maximum of 26 weeks (State of Hawaii, Disability Compensation Division 2014).  If the employer has a sick leave plan which differs from statutory benefits and has been approved by the Disability Compensation Division as an equivalent or better-than-statutory plan, the duration of payments will be determined by the plan (State of Hawaii, Disability Compensation Division 2014).	Up to 4 weeks of paid leave, unpaid leave, or a combination of both in a calendar year; leave may be taken intermittently and is used simultaneously with federal FMLA leave, if the employee is eligible for both (State of Hawaii "Hawaii Revised Statutes").
<b>Job Protection</b>	No, unless also covered by the federal FMLA	Yes
<b>Employer and</b>	Employers of all sizes must provide TDI to their employees (State of Hawaii 2004).	Employers with 100 or more employees for each working day during each of 20 or more

<sup>47</sup> Employers may provide TDI benefits through the following methods: by purchasing insurance from a licensed carrier; by adopting a sick leave policy approved by the Disability Compensation Division (DCD); or by a collective bargaining agreement which contains sick leave benefits at least equal to those provided by the TDI Law (State of Hawaii 2004).

<sup>48</sup> Paid leave includes, but is not limited to paid vacation, personal, or family leave. The use of paid sick leave for family leave is limited to ten days unless a collective bargaining agreement expressly permits sick leave to be used for a longer period of time (State of Hawaii "Hawaii Revised Statutes").



<b>Employee Eligibility</b>	Employees must have been in Hawaiian employment for at least 14 weeks, <sup>49</sup> for at least 20 hours per week during the prior 52 weeks preceding the first day of disability, and earned at least \$400 (State of Hawaii 2014). <sup>50</sup>	calendar weeks in the current or preceding calendar year, and employees who have worked for at least 6 consecutive months for the same employer (State of Hawaii “Hawaii Family Leave”). <sup>51</sup>
<b>Other Leave Laws</b>	Hawaii Administrative Rules, Subchapter 4 on sexual discrimination specifies that all employers must consider disability related to pregnancy as valid justification for a female employee, regardless of tenure and hours worked, to take a reasonable amount of job-protected paid or unpaid leave, the length of which shall be determined by the employee’s physician with regard to the employee’s condition and job requirements (Hawaii Administrative Code §12-46-108).	
<b>Iowa</b>		
<b>Law/ Program</b>	<b>Iowa Civil Rights Act of 1965</b>	
<b>Paid Benefits</b>	Not specified	
<b>Funding</b>	Not applicable	
<b>Eligible Reasons for Leave</b>	Disability related to pregnancy, childbirth, or medical conditions related to pregnancy. Employers cannot refuse a female employee a reasonable amount of leave during the time the employee is disabled, if the available leave offered to the employee through any health or temporary disability insurance or sick leave plan is insufficient (Iowa Code § 216.6(2)(e), (6)(a)).	
<b>Length of Leave</b>	Leave granted may last as long as the employee is disabled, up to eight weeks (Iowa Code § 216.6(2)(e), (6)(a)).	
<b>Job Protection</b>	Not specified	
<b>Employer and Employee Eligibility</b>	Applies to all employers, both state and private, who regularly employ four or more employees and to all employees, regardless of tenure or hours worked (Iowa Code § 216.6(2)(e), (6)(a)).	

<sup>49</sup> The 14 weeks of employment do not have to have been for the same employer or consecutive (State of Hawaii 2014).

<sup>50</sup> Some employees are excluded from coverage such as the employees of the federal government, certain domestic workers, insurance agents and real estate salespersons paid solely on a commission basis, individuals under 18 years of age employed in the delivery or distribution of newspapers, certain family employees, student nurses, interns and workers in other categories specifically excluded by the law (State of Hawaii 2014).

<sup>51</sup> There is no minimum number of hours an employee must have worked to be eligible for family leave benefits (State of Hawaii “Hawaii Family Leave”).

<b>Louisiana</b>	
<b>Law/ Program</b>	<b>Pregnancy Disability Leave Law</b>
<b>Paid Benefits</b>	Not specified
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	For the temporary disability of pregnancy, childbirth, and related medical conditions (La. Rev. Stat. Ann. § 23:341(A)).
<b>Length of Leave</b>	Employees may be granted up to four months of disability leave if the employee is disabled because of pregnancy, childbirth, or related medical conditions, although employers are not required to provide more than six weeks of leave for a normal pregnancy (La. Rev. Stat. Ann § 23:342(b); La. Rev. Stat. Ann. § 23:341(A)).
<b>Job Protection</b>	Not specified
<b>Employer and Employee Eligibility</b>	Applies to employers who employ 25 employees or more during the leave year or the calendar year immediately preceding and to all employees, regardless of tenure or hours worked (La. Rev. Stat. Ann. § 23:341(A)).
<b>Maine</b>	
<b>Law/ Program</b>	<b>Maine Family and Medical Leave Act</b>
<b>Paid Benefits</b>	Family medical leave may consist of unpaid leave. If an employer provides paid family medical leave for fewer than 10 weeks, the additional weeks of leave added to attain the total of 10 weeks required may be unpaid (Maine Legislature, Office of the Revisor of Statutes 1991). Employers who offer paid sick, vacation, or compensatory leave must allow employees to use up to 40 hours in a 12-month period to care for an ill child, spouse or parent (State of Maine 2012). <sup>52</sup>
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	For the birth, adoption, or foster care placement of a child 16 years or younger; for the care of a family member with a serious health condition; <sup>53</sup> and for when an employee donates an organ for human organ transplant. Also available to the worker when the worker's spouse, domestic partner, parent, child, or sibling who is a member of the state military forces or U.S. Armed Forces dies or incurs a serious health condition while on active duty (State of Maine 2013).
<b>Length of Leave</b>	Up to 10 workweeks of job-protected leave in a two-year period (State of Maine 2013).
<b>Job Protection</b>	Yes

<sup>52</sup> Employees who work for an employer with at least 25 employees have the right to use accrued paid leave (including sick leave, vacation leave, or compensatory time) to care for a sick child, spouse, or parent. Employers can adopt a policy limiting the number of hours an employee can use paid leave for these purposes, but that number cannot be less than 40 hours in a 12-month period (Me. Rev. Stat. Ann. tit. 26 § 636).

<sup>53</sup> Family members include the worker's child, parent, spouse, domestic partner, domestic partner's child, or worker's sibling. The birth or adoption may be to/by the worker or the worker's domestic partner (State of Maine 2012).

<b>Employer and Employee Eligibility</b>	Employers with 15 or more workers and all public agencies. Employees must have worked for their employer for at least 12 consecutive months (State of Maine 2013).
<b>Massachusetts</b>	
<b>Law/Program</b>	<b>Maternity leave entitlements</b>
<b>Paid Benefits</b>	Not specified
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	Leave for childbirth or to adopt a child under the age of 18 or under the age of 23 if the child is mentally or physically disabled (Mass. Gen. Laws Ch. 149, § 105D).
<b>Length of Leave</b>	Leave shall not exceed eight weeks (Mass. Gen. Laws Title XXI Ch. 149, Sec. 105D). <sup>54</sup>
<b>Job Protection</b>	Yes
<b>Employer and Employee Eligibility</b>	Female employees who have completed a required probationary period, or, if no probationary period is required, who has been employed full-time by the same employer for at least three consecutive months (Mass. Gen. Laws Title XXI Ch. 149, Sec. 105D. All private and public employers who employ at least six employees (Mass. Gen. Laws Ch. 151B, § 1(5)). <sup>55</sup>
<b>Minnesota</b>	
<b>Law/Program</b>	<b>Minnesota Parental Leave Act</b>
<b>Paid Benefits</b>	Employees may use paid sick leave, if offered by employers, for their own illness or the illness of a sick family member (Minnesota Department of Labor & Industry “Labor Standards”). <sup>56</sup>
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	Birth and adoption, but not foster care placement, of a child (Minnesota Department of Labor & Industry “Labor Standards”).
<b>Length of Leave</b>	Up to six weeks of unpaid job-protected family leave; medical leave is not required by the state (Minnesota Department of Labor & Industry “Labor Standards”).
<b>Job Protection</b>	Yes
<b>Employer and Employee Eligibility</b>	Employers with 21 or more employees at any one site and employees who have been employed with a qualifying employer for at least 12 consecutive months and for an average of one-half the full-time equivalent position in the employee’s job classification during those 12 months (Minnesota Department of Labor & Industry “Labor Standards”).

<sup>54</sup> Executive branch state employees have up to 26 weeks of family and medical leave in a rolling 52-week period (The Commonwealth of Massachusetts Human Resources Division 2009).

<sup>55</sup> The term “employer” does not include a club exclusively social, or a fraternal association or corporation, if such club, association or corporation is not organized for private profit.

<sup>56</sup> If employers offer sick leave (paid or unpaid), employees may use it for themselves or their sick minor child, adult child, spouse, sibling, parent, grandparent or step-parent (Minnesota Department of Labor & Industry “Labor Standards”).

<b>Montana</b>	
<b>Law/ Program</b>	<b>Illegal discrimination: Maternity leave; parental leave for state employees</b>
<b>Paid Benefits</b>	Employers may not refuse any compensation to a woman disabled because of pregnancy which she is entitled as a result of disability or leave benefits offered by the employer (Mont. Code. Ann. §§ 49-2-310(2)).
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	Disability as a result of pregnancy (Mont. Code. Ann. §§ 49-2-310(2)). State government employees who are adoptive parents or birth fathers are eligible for parental leave (State of Montana “Salary and Benefits Information Overview”).
<b>Length of Leave</b>	Employers are prohibited from refusing to grant a female employee a “reasonable amount of absence” for pregnancy and from requiring an employee take a mandatory maternity leave for an unreasonable amount of time (Mont. Code. Ann. §§ 49-2-310(2)).
<b>Job Protection</b>	Yes
<b>Employer and Employee Eligibility</b>	Applies to employers of one or more employees and to all individuals employed by an employer (Mont. Code. Ann. §§ 49-2-101(10-11)).
<b>New Hampshire</b>	
<b>Law/ Program</b>	<b>Equal Employment Opportunity</b>
<b>Paid Benefits</b>	Female employees with a temporary disability related to pregnancy or childbirth shall be treated in the same manner as other employees with temporary disabilities, including the provision of benefits (N.H. Rev. Stat. Ann. § 354-A:7(VI)(c)).
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	For temporary disability resulting from pregnancy, childbirth, or related medical conditions (N.H. Rev. Stat. Ann. § 354-A:7(VI)(b)).
<b>Length of Leave</b>	Employers must allow female employees to take a leave of absence during the time they are temporary disabled (N.H. Rev. Stat. Ann. § 354-A:7(VI)(b)).
<b>Job Protection</b>	Yes
<b>Employer and Employee Eligibility</b>	Employers with six or more employees but not those which are an exclusively social club, or a fraternal or religious association or corporation, if such club, association, or corporation is not organized for private profit; all employees except those employed by a parent, spouse, or child or domestic servants (N.H. Rev. Stat. Ann. §§ 354-A:2(VI)-(VII)).

New Jersey			
Law/ Program	Temporary Disability Benefits Law	Family Leave Insurance	New Jersey Family Leave Act (NJFLA) <sup>57</sup>
<b>Paid Benefits</b>	The weekly benefit amount is two-thirds of an employee's average weekly wage (based on the 8 weeks immediately prior to the week in which disability begins) up to a maximum weekly benefit of \$595 (Department of Labor and Workforce Development, Division of Temporary Disability Insurance 2013).	The weekly benefit rate is two-thirds of an employee's average weekly wage (based on wages earned during the prior 8 weeks), up to a maximum of \$595 (State of New Jersey 2013).	Leave is unpaid.
<b>Funding</b>	Effective January 1, 2014, workers contribute .0038% of the taxable wage base. For 2013 the taxable wage base is \$31,500 and the maximum yearly deduction for temporary disability insurance is \$119.70. Employers pay from 0.10% to 0.75%. For 2014, employers contribute between \$31.50 and \$236.25 on the first \$31,500 earned by each employee during the calendar year. For both workers and employers, the tax base is subject to change each year (Department of Labor and Workforce Development, Division of Temporary Disability Insurance 2013).	The family leave program is financed 100% by worker payroll deductions. Starting January 1, 2014, each worker contributes 0.001% of the taxable wage base. For 2014 the taxable wage base is the first \$31,500 in covered wages earned during calendar year 2014 up to a maximum yearly deduction of \$31.50. The taxable wage base changes each year (State of New Jersey 2013).	Not applicable
<b>Eligible Reasons for Leave</b>	Inability to work due to an accident or sickness not arising out of and in the course of employment, or disability due to pregnancy (Department of Labor and	To bond with a newborn or adopted child within the first 12 months of birth/adoption, or to care for a seriously ill family member <sup>58</sup> (State of New Jersey 2013).	In connection with the birth or adoption of a child or the serious illness of a parent, parent-in-law, stepparent, child, or spouse. NJFLA does not provide leave in

<sup>57</sup> The New Jersey Division on Civil Rights, Department of Law and Public Safety, Office of the Attorney General, enforces the New Jersey Family Leave Act (State of New Jersey "About the NJ Family Leave Act (FLA)").

<sup>58</sup> Family members include an employee's child, spouse, domestic partner, civil union partner, or parent, including parent-in-law or stepparent. The child must be the worker's biological or adopted child, foster child, stepchild, legal ward or the child of the worker's domestic or civil union partner and must be less than 19 years old or, if older than 19 years of age, must be incapable of self-care because of mental or physical impairment (State of New Jersey 2013).

	Workforce Development, Division of Temporary Disability Insurance 2013).		connection with an employee’s own disability (State of New Jersey, Department of Law and Public Safety). <sup>59</sup>
<b>Length of Leave</b>	Up to 26 weeks of paid disability leave for illness or injury. The usual payment period for a normal pregnancy may be up to 4 weeks before the expected delivery date and up to six weeks after the actual delivery date. <sup>60</sup> (Department of Labor and Workforce Development, Division of Temporary Disability Insurance 2013).	A bonding leave claim must be for a period of more than seven consecutive days, unless the employer permits the leave to be taken in non-consecutive periods. In this case, each non-consecutive leave period must be at least seven days.  Care leave may be taken for 6 consecutive weeks, intermittent weeks or 42 intermittent days in a 12-month period beginning with the first date of the family leave insurance claim (State of New Jersey 2013).	The NJFLA provides up to 12 weeks of leave in a two-year period beginning on the first day of the employees’ first day of leave. NJFLA leave is taken simultaneously with federal FMLA leave, if an employee is eligible for both (State of New Jersey, Department of Law and Public Safety).
<b>Job Protection</b>	No, unless covered by the federal FMLA	No, unless covered by the federal FMLA	Yes
<b>Employer and Employee Eligibility</b>	Employers are automatically covered by the State Plan unless covered under an approved private plan. Employees must have worked 20 calendar weeks or more (“base weeks”) for an eligible New Jersey employer, during which they earned at least \$145 or at least \$7,300 during the 52 weeks (“base year”) (State of New Jersey “State Disability Benefits – Employer Information”). <sup>61</sup>	Employers with 50 employees or more anywhere worldwide and employees employed in New Jersey by a covered employer who have worked for that employer for at least 12 months for at least 1,000 hours during the prior 12 months (State of New Jersey “About the NJ Family Leave Act”).	Employers must have at least 50 employees working anywhere in the world and employees must be employed in New Jersey by a covered employer for at least 12 months and for at least 1,000 base hours (State of New Jersey, Department of Law and Public Safety).

<sup>59</sup> Because the NJFLA does not provide leave for an employee’s own disability, women who are disabled due to pregnancy or childbirth do not have job-protected leave to recover from pregnancy, childbirth, or related medical conditions (National Partnership for Women and Families 2012).

<sup>60</sup> If there are medical complications or the worker is unable to do her regular work, her doctor may certify to a longer period of disability either before or after the birth of her child (Department of Labor and Workforce Development, Division of Temporary Disability Insurance 2013).

<sup>61</sup> State workers are only eligible for Temporary Disability Insurance If the government entity for which they work chooses to be a “covered employer” and if/when they have exhausted all accrued sick leave.

New York	
<b>Law/ Program</b>	<b>The Disability Benefits Law</b>
<b>Paid Benefits</b>	The weekly benefit is 50% of a claimant's last eight weeks average gross wage, up to a maximum of \$170 per week (New York State "Disability Benefits").
<b>Funding</b>	Covered employers must pay disability benefits to all eligible employees, though they may collect contributions from employees at the rate of one-half of 1% of an employee's wages up to 60 cents per week (New York State "Disability Benefits"). <sup>62</sup>
<b>Eligible Reasons for Leave</b>	Disability related to an off the-job injury or illness and for disabilities arising from pregnancy (New York State "Disability Benefits").
<b>Length of Leave</b>	Benefits are paid for a maximum of 26 weeks of disability during 52 consecutive weeks. Pregnancy disability that lasts more than four to six weeks prior to childbirth and/or more than four to six weeks after delivery will require an employee to submit more details on their condition from a physician (New York State "Disability Benefits"). <sup>63</sup>
<b>Job Protection</b>	No, unless also covered by the federal FMLA
<b>Employer and Employee Eligibility</b>	An employer of one or more persons on each of 30 days in any calendar year becomes a "covered" employer four weeks after the 30 <sup>th</sup> day of such employment. Employees or recent employees of a "covered" employer who have worked at least four consecutive weeks (New York State "Disability Benefits"). <sup>64</sup>

Oregon	
<b>Law/ Program</b>	<b>Oregon Family Leave Act (OFLA)</b>
<b>Paid Benefits</b>	Family leave is unpaid; however employees are entitled to use any accrued paid vacation, sick or other paid leave (State of Oregon 2012).
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	Employees can take: <b>Parental leave</b> during the year following the birth, adoption, or foster placement of a child under 18 years old, or a child 18 or older if incapable of self-care because of a mental or physical disability. <b>Serious health condition leave</b> for an employee's own serious health condition or to care for a family member with a serious health condition; <sup>65</sup> <b>Pregnancy disability leave</b> (a form of serious health condition leave) for an incapacity related to pregnancy or childbirth before or after birth or for prenatal care; <b>Sick child leave</b> to care for an employee's own child with an illness or injury that requires home care but is not a serious health condition

<sup>62</sup> Employers can use a disability insurance carrier who has been licensed by New York State to write such policies or they can become authorized by the New York State Workers' Compensation Board to self-insure (New York State "Disability Benefits").

<sup>63</sup> Generally, a claimant is covered four to six weeks after a delivery (New York State "Disability Benefits").

<sup>64</sup> State employees are not covered under the Disability Benefits law, though sick leave and sick leave at half-pay may be used during a period of medical disability. They do, however, have access to seven weeks of unpaid parental leave after a new child is born (during which they can choose to substitute another form of accrued paid leave), and female employees can take pregnancy disability leave according to the state's pregnancy disability regulations. Both laws apply to state employees regardless of tenure or hours worked (New York State Department of Civil Service 1982).

	<b>Oregon Military Family Leave</b> by the spouse or same gender domestic partner of a service member who has been called to active duty or notified of an impending call to active duty or is on leave from active duty during a period of military conflict (State of Oregon 2012).
<b>Length of Leave</b>	Up to 12 weeks of family leave within the employer's 12-month leave year; a woman using pregnancy disability leave is entitled to 12 additional weeks of leave in the same leave year for any qualifying OFLA purpose; a man or woman using a full 12 weeks of parental leave is entitled to take up to 12 additional weeks for the purpose of sick child leave. The spouse or same gender domestic partner of a service member who has been called to active duty or notified of an impending call to active duty or is on leave from active duty during a period of military conflict can take a total of 14 work days per deployment after the military spouse has been notified of an impending call or order to active duty and before deployment and when the military spouse is on leave from deployment (State of Oregon 2012).
<b>Job Protection</b>	Yes, but employees on OFLA leave are still subject to nondiscriminatory employment actions that would have taken place regardless of the employee's leave.
<b>Employer and Employee Eligibility</b>	Employers must employ at least 25 people and employees must have worked at least an average of 25 hours/week over the 180-day calendar period immediately preceding the leave. For parental leave, number of hours worked over the 180-day period is not considered (State of Oregon 2012).

### Rhode Island

<b>Law/ Program</b>	<b>Temporary Disability Insurance / Temporary Caregiver Insurance</b>	<b>Rhode Island Parental and Family Leave Act</b>
<b>Paid Benefits</b>	Weekly benefits are 4.62% of the wages paid to an employee in the highest quarter of their base period, with a minimum benefit rate of \$72 and a maximum of \$752 per week, not including dependency allowances for dependent children under 18 years of age and incapacitated children (Rhode Island 2013).	If the employer provides paid parental or family leave for fewer than 13 weeks, the remaining weeks added to attain the total 13 weeks may be unpaid (R.I. Department of Labor and Training, <i>Rhode Island Parental and Family Leave Act</i> ).
<b>Funding</b>	Employee payroll contributions provide for both Temporary Disability Insurance and Temporary Caregiver Insurance. There is no direct cost to employers (Rhode Island 2014).	Not applicable
<b>Eligible Reasons for Leave</b>	Temporary Disability Insurance is for non-work related illness or injury, as well as when a Qualified Health Care Provider determines that a pregnant worker is functionally unable to perform all of her work duties due to medical complications as a result of her pregnancy and or other health issues. Temporary Caregiver Insurance is available to care for a seriously ill child, spouse, domestic partner, parent, parent-in-law or grandparent or to bond with a newborn child, a new adopted child, or a new foster care child (Rhode Island 2013).	<b>Parental leave</b> may be taken for the birth of a child of an employee or the placement of a child 16 or younger with an employee in connection with the adoption of such child by the employee (R.I. Department of Labor and Training, <i>Rhode Island Parental and Family Leave Act</i> ).  <b>Family leave</b> may be taken for the serious illness of a family member, meaning a parent, spouse, child, parent-in-law, or the employee him or herself (R.I. Department of Labor and Training, <i>Rhode Island Parental and Family Leave Act</i> ).
<b>Length of Leave</b>	Up to 30 weeks of paid leave for disability (Rhode Island 2013) and up to 4 weeks of paid leave under Temporary Caregiver Insurance (Rhode Island 2014).	Up to 13 consecutive weeks of unpaid parental or family leave in any two calendar years (R.I. Department of Labor and Training, <i>Rhode Island Parental and Family</i>



		<i>Leave Act).</i>
<b>Job Protection</b>	Yes	Yes
<b>Employer and Employee Eligibility</b>	Employees must have been employed by an employer subject to the Disability Act and have received wages in each of 20 weeks in the year prior to the claim, or received total wages of at least \$5,100 in the prior year regardless of the number of weeks worked (Aaronson 1993). <sup>66</sup>	Employers who employ 50 employees or more; the State of Rhode Island and any state department or agency that acts as an employer; any city, town, or municipal agent that employs at least 30 employees; and any person who acts directly or indirectly in the interest of any employer. Employees who are full-time workers and who have worked for the same employer for 12 consecutive months for an average of 30 hours or more hours per week prior to the effective date of leave (R.I. Department of Labor and Training, <i>Rhode Island Parental and Family Leave Act</i> ).
<b>Tennessee</b>		
<b>Law/ Program</b>	<b>Tennessee Human Rights Act</b>	
<b>Paid Benefits</b>	Leave may be with or without pay at the discretion of the employer but shall not affect the employee's right to receive vacation time, sick leave, bonuses, advancement, seniority, length of service credit, benefits, plans or programs for which they were eligible at the date of their leave (Tenn. Code. Ann. § 4-21-408(c)).	
<b>Funding</b>	Not applicable	
<b>Eligible Reasons for Leave</b>	For adoption, pregnancy, childbirth, and nursing an infant (where applicable) (Tenn. Code. Ann. § 4-21-408(a)).	
<b>Length of Leave</b>	Leave shall not exceed four months (Tenn. Code. Ann. § 4-21-408(a)).	
<b>Job Protection</b>	Yes	
<b>Employer and Employee Eligibility</b>	Employers who employ 100 full-time employees on a permanent basis at the job site or location (Tenn. Code Ann. Sec. 4-21-408(d)(2)). Employees who have been employed by the same employer for at least 12 consecutive months as full-time employees, as determined by the employer at the job site or location (Tenn. Code. Ann. § 4-21-408(a)).	

<sup>66</sup> State employees can become eligible for the Temporary Disability Insurance program if they work for a governmental entity that has elected to participate in, or if they have chosen to become subject to, the program through the collective bargaining process (R.I. Gen. Laws § 28-39-3).

Vermont	
<b>Law/ Program</b>	<b>Parental and Family Leave Act</b>
<b>Paid Benefits</b>	Workers may choose to use up to 6 weeks of paid sick leave, vacation leave, or any other accrued paid leave time during the leave (Vermont Department of Labor 2013).
<b>Funding</b>	Not applicable
<b>Eligible Reasons for Leave</b>	<b>Parental leave:</b> During the pregnancy and/or after childbirth or within a year following the initial placement of a child 16 years of age or younger with the worker for the purpose of adoption (Vermont Department of Labor 2013).  <b>Family leave:</b> For the serious illness of the worker, worker's child, stepchild, ward, foster child, party to a civil union, parent, spouse, or parent of the worker's spouse (Vermont Department of Labor 2013). <sup>67</sup>
<b>Length of Leave</b>	<b>Parental and Family Leave:</b> up to 12 weeks of unpaid leave.  <b>Short-Term Family Leave:</b> up to 4 hours in any 30-day period (no more than 24 hours in a year) to participate in preschool or school-related activities; to attend or to accompany specified family members to routine medical or dental appointments; to accompany specified family members to appointments for professional services related to their care and wellbeing; or to respond to a medical emergency involving specified family members (Vermont Department of Labor 2013). <sup>68</sup>
<b>Job Protection</b>	Yes
<b>Employer and Employee Eligibility</b>	<b>Parental Leave:</b> employers with 10 or more employees who work an average of 30 hours per week over the course of a year (Vermont Department of Labor 2013).  <b>Family Leave:</b> employers with 15 or more employees who work an average of 30 hours per week over the course of a year (Vermont Department of Labor 2013).

<sup>67</sup> Public sector employees have expanded access to family leave following the birth or adoption of a child or to care for a family member with a serious health condition, including a condition related to pregnancy. More information can be found here: <http://humanresources.vermont.gov/policy/manual>.

<sup>68</sup> School-related activities must be directly related to the academic achievement of a worker's child, stepchild, foster child, or ward who lives with the worker. Medical or dental appointments or medical emergencies must involve the employee's child, stepchild, foster child, or ward who lives with the worker or the employee's spouse, parent, or parent-in-law (Vermont Department of Labor 2013).

**Washington**

<b>Law/ Program</b>	<b>Family Leave Insurance Program</b>	<b>Washington State Family Leave Act (FLA)</b>	<b>Family Care Act</b>	<b>Washington State Human Rights Commission regulations against discrimination</b>
<b>Paid Benefits</b>	Weekly benefits would be up to \$250/week for up to five weeks (Washington State Employment Security Department 2013).	An employer does not have to provide paid leave under the FLA, but an employer may choose to pay for all or some of the FLA leave (Washington State Department of Labor and Industries 2010b).	Employees can use paid leave, including sick leave, vacation, holiday, paid time off, or some short-term disability plans for family care leave (Washington State Department of Labor and Industries 2010a).	Employers must treat a woman temporarily disabled by pregnancy the same as they would any employee with a temporary disability, including the provision of paid leave for sickness or other temporary disabilities (Wash. Admin. Code § 162-30-020(4)).
<b>Funding</b>	Program postponed indefinitely, due to a lack of state funding (Washington State Employment Security Department 2013).	Not applicable	Not applicable	Not applicable
<b>Eligible Reasons for Leave</b>	To care for a newborn or newly adopted child (Washington State Department of Labor and Industries 2010).	Leave for the birth of a child of the employee and in order to care for the child; leave for the placement of a child with the employee for adoption or foster care; leave to care for an employee's family member who has a serious health condition, including a registered domestic partner; or leave because the employee has a serious health condition that makes the employee unable to perform the	Leave can be used to care for sick family members, including a spouse, registered domestic partner, child, parent, parent-in-law, or grandparent, with a serious health condition; for the care of a child under 18 who has a routine illness or needs preventive care; for the care of an adult child; or for the short-term care of a pregnant spouse or registered domestic partner, during or after childbirth, as needed (Washington	For temporary disability related to pregnancy or childbirth (Wash. Admin. Code § 162-30-020(4)).

		functions of his or her position <sup>69</sup> (Washington State Department of Labor and Industries 2010b).	State Department of Labor and Industries 2010a).	
<b>Length of Leave</b>	Paid, job-protected leave <sup>70</sup> for up to 5 weeks (Washington State Employment Security Department 2013).	Typically unpaid, job-protected leave for up to 12 weeks, plus an additional 6-8 weeks of pregnancy disability leave if necessary (Washington State Department of Labor and Industries 2010a).	Employees must comply with the terms of the collective bargaining agreement or employer policy applicable to the leave, except for any terms relating to the choice of leave (Washington State Legislature 2002).	An employer shall provide a woman a leave of absence for the period of time that she is sick or temporarily disabled because of pregnancy or childbirth. (Wash. Admin. Code § 162-30-020(4a)). <sup>71</sup>
<b>Job Protection</b>	Yes	Yes		Yes
<b>Employer and Employee Eligibility</b>	Employers must employ at least 25 employees who have been employed for at least 680 hours during the individual's qualifying year (Washington State Legislature 2007).	Employers who employ 50 or more employees for at least 20 workweeks annually within 75 miles of the employee's worksite and employees who have worked for the employer for at least 12 months (the months do not need to be consecutive) and have worked at least 1,250 hours during the last 12 months before the leave is to begin (Washington State Department of Labor and Industries 2010a).	All employers who provide a paid leave benefit are covered under the Family Care Act (Washington State Department of Labor and Industries 2010a).	Employers with at least 8 employees, not including not-for-profit religious or sectarian organizations; all employees except those employed by his or her parents, spouse, or child, or in the domestic service of another person (Wash. Rev. Code § 49.60.040(10-11)).

<sup>69</sup> FLA leave must run after the pregnancy disability leave has ended. This means that a woman who qualifies for FLA leave will likely have at least 18 weeks of total leave, which is more than that provided by the Federal Family and Medical Leave Act (Washington State Family Leave Act Q&A, March 2010).

<sup>70</sup> Employment protection under Family Leave Insurance is only available to an employee if the employer from whom the employee takes family leave employs more than 25 employees and the employee has been employed by that employer for at least 12 months and for at least 1,250 hours during the previous 12 months (Washington State Legislature 2007).

<sup>71</sup> Pregnancy disability leave required by the Washington State Human Rights Commission regulations is in addition to any other leave for which a woman may be eligible (Wash. Admin. Code Title 162, Ch. 162-30, § 162-30-020(4d)).

<b>Other Family Leave Laws</b>	<p><b>Leave for Victims of Domestic Violence, Sexual Assault, &amp; Stalking</b> – victims can take reasonable leave from work for legal or law-enforcement assistance, medical treatment/counseling in a domestic violence shelter or rape crisis program, or for safety and relocation issues. Family members<sup>72</sup> may do the same to help a victim obtain treatment or services. Leave is unpaid but employees may substitute accrued paid leave. All employers are covered regardless of size (Washington State Department of Labor and Industries 2010a).</p> <p><b>Leave for Spouses of Deployed Military Personnel</b> – spouses or domestic partners of military personnel (National Guard, active duty, or reservists) deployed or on leave from deployment during military conflict may take 15 days of unpaid leave per deployment (except at the end of deployment). Employees can choose to use accrued leave as a substitute. All employers are covered regardless of size and covered employees must work at least 20 hours a week on average (Washington State Department of Labor and Industries 2010a).</p> <p><b>Leave for Certain Emergency Services Personnel</b> – job protection for volunteer firefighters, reserve peace officers, and Civil Air Patrol members in certain emergency situations<sup>73</sup> where they must miss or be late for work (Washington State Department of Labor and Industries 2010a).</p>	
	<b>Wisconsin</b>	
	<b>Law/Program</b>	<b>Wisconsin Family and Medical Leave Act</b>
<b>Paid Benefits</b>	Employees can substitute accrued paid or unpaid leave of any other type that is provided by the employer (State of Wisconsin 2011).	
<b>Funding</b>	Not applicable	
<b>Eligible Reasons for Leave</b>	For the birth of a child, placement of a child for adoption or foster care; to provide care for a parent, child, spouse, or domestic partner with a serious health condition; or for the employee’s own serious health condition (State of Wisconsin 2013).	
<b>Length of Leave</b>	In a calendar year: up to 6 weeks for birth or adoption; up to 2 weeks for one’s own serious health condition; up to 2 weeks to care for a parent, child, or spouse with a serious health condition (State of Wisconsin 2013).	
<b>Job Protection</b>	Yes	
<b>Employer and Employee Eligibility</b>	Employers with 50 or more permanent employees during at least 6 of the preceding 12 calendar months and employees who have worked at least 1,000 hours for the employer during the preceding 52 consecutive weeks (State of Wisconsin 2013).	

<sup>72</sup> Family members include a child, spouse, parent, parent-in-law, grandparent, or person the employee is dating (Washington State Department of Labor and Industries 2010a).

<sup>73</sup> Eligible emergency situations refer to when the emergency responder is called to a fire/emergency/or emergency services operation and they are asked to remain at the scene by an incident commander and, as a result, they miss or are late for work (Washington State Department of Labor and Industries 2010a).

## References:

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- A Better Balance. 2013. "The Need for Paid Family Leave."  
<<http://www.abetterbalance.org/web/ourissues/familyleave>> (accessed November 13, 2013).
- Aguirre, DeAnne, Leila Hoteit, Christine Rupp, and Karim Sabbagh. 2012. *Empowering the Third Billion: Women and the World of Work in 2012*. Booz & Company Inc.  
<[http://www.booz.com/media/file/BoozCo\\_Empowering-the-Third-Billion\\_Full-Report.pdf](http://www.booz.com/media/file/BoozCo_Empowering-the-Third-Billion_Full-Report.pdf)> (accessed March 10, 2014)
- American Academy of Pediatrics. 2012. "Breastfeeding and the Use of Human Milk." *Pediatrics* 129(3): e827-e841.
- Appelbaum, Eileen and Ruth Milkman. 2011. *Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California*. Washington DC: Center for Economic and Policy Research.  
<<http://www.cepr.net/documents/publications/paid-family-leave-1-2011.pdf>> (accessed January 23, 2014).
- Aaronson, Stephanie. 1993. *What is Temporary Disability Insurance?* Brief, IWPR #A110. Washington, DC: Institute for Women's Policy Research.
- Baker, Michael and Kevin Milligan. 2008. "Maternal Employment, Breastfeeding, and Health: Evidence from Maternity Leave Mandates." *Journal of Health Economics*. 27(4): 871-887.
- Bassanini, Andrea, and Danielle Venn. 2008. "The Impact of Labour Market Policies on Productivity in OECD Countries." *International Productivity Monitor* 17 (Fall): 3-15.
- Baum, Charles L. 2003. "Does Early Maternal Employment Harm Child Development? An Analysis of the Potential Benefits of Leave Taking." *Journal of Labor Economics* 21 (2): 409-448.
- Baum, Charles L. and Christopher, Ruhm J. 2013. "The Effects of Paid Family Leave in California on Labor Market Outcomes." Working Paper No. 19741. National Bureau of Economic Research (December). <<http://www.nber.org/papers/w19741>> (accessed March 20, 2014).
- Beral, Valerie, D. Bull, R. Doll, R. Peto, and G. Reeves. 2002. "Breast Cancer and Breastfeeding: Collaborative Reanalysis of Individual Data from 47 Epidemiological Studies in 30 Countries, Including 50,302 Women with Breast Cancer and 96,973 Women without the Disease." *The Lancet* 360 (July): 187-195.
- Berger, Lawrence M. and Jane Waldfogel. 2004. "Maternity Leave and the Employment of New Mothers in the United States." *Journal of Population Economics*, 17(2): 331-349.

Berger, Lawrence M., Jennifer Hill, and Jane Waldfogel. 2005. "Maternity Leave, Early Maternal Employment, and Child Health and Development in the U.S." *The Economic Journal* 115 (February): F29-F47.

Blau, Francine and Lawrence M. Kahn. 2013. "Female Labor Supply: Why is the U.S. Falling Behind?" IZA Discussion Paper No. 7140. Bonn: Institute for the Study of Labor (January). <<http://ftp.iza.org/dp7140.pdf>> (accessed February 7, 2014).

Boushey, Heather and Sara Jane Glynn. 2012. "The Effects of Paid Family and Medical Leave on Employment Stability and Economic Security." Washington, DC: Center for American Progress (April). <<http://www.americanprogress.org/wp-content/uploads/issues/2012/04/pdf/BousheyEmploymentLeave1.pdf>> (accessed October 4, 2013).

Boushey, Heather, Jane Farrell, and John Schmitt. 2013. *Job Protection Isn't Enough: Why America Needs Paid Parental Leave*. Washington, DC: Center for American Progress and Center for Economic and Policy Research (December). <<http://www.americanprogress.org/wp-content/uploads/2013/12/ParentalLeave-report-3.pdf>> (accessed March 20, 2014).

Boushey, Heather, Ann O'Leary, and Alexandra Mitukiewicz. 2013. *The Economic Benefits of Family and Medical Leave Insurance*. Washington, DC: Center for American Progress. <<http://www.americanprogress.org/wp-content/uploads/2013/12/PaidFamLeave-brief.pdf>> (accessed January 27, 2014).

Brooks-Gunn, Jeanne, Wen-Jui Han, and Jane Waldfogel. 2002. "Maternal Employment and Child Cognitive Outcomes in the First Three Years of Life: the NICHD Study of Early Child Care." *Child Development* 73 (4): 1052-72.

California Fair Employment and Housing Act. Government Code, Title 2, Division 3, Part 2.8, Section 12940-12951. <<http://www.leginfo.ca.gov/cgi-bin/displaycode?section=gov&group=12001-13000&file=12940-12951>> (accessed February 7, 2014).

California Department of Fair Employment and Housing. 2010. "Fair Employment and Housing Act (FEHA)." <[http://www.dfeh.ca.gov/Publications\\_FEHADescr.htm](http://www.dfeh.ca.gov/Publications_FEHADescr.htm)> (accessed February 7, 2014).

California State Senate. *S. 770, Unemployment Compensation: Disability Benefits: Paid Family Leave Chapter 350*. Sacramento, Legislative Counsel's Digest. 2013.

Chatterji, Pinka and Sara Markowitz. 2012. "Family Leave after Childbirth and the Mental Health of New Mothers." *Journal of Mental Health Policy and Economics* 15 (2): 61-76.

Chatterji, Pinka, Sara Markowitz, and Jeanne Brooks-Gunn. 2011. "Early Maternal Employment and Family Wellbeing." Working Paper Series No. w17212, National Bureau of Economic Research. <[http://www.nber.org/papers/w17212.pdf?new\\_window=1](http://www.nber.org/papers/w17212.pdf?new_window=1)> (accessed September 30, 2013).

Chuang, Chao-Hua, Pei-Jen Chang, Yi-Chun Chen, Wu-Shiun Hsieh, Baai-Shyun Hurng, Shio-Jean Jin, and Pau-Chung Chen. 2010. "Maternal return to work and breastfeeding: A population-based cohort study." *International Journal of Nursing Studies* 47: 467-474.

The Commonwealth of Massachusetts Executive Office for Administration and Finance. Human Resources Division. (2009, January), *Enhanced Family and Medical Leave Guide: For Massachusetts Executive Branch Employees*. Boston, Massachusetts: Human Resources Division.

Congressional Budget Office. 2014. *The Slow Recovery of the Labor Market*. Washington, DC: Congressional Budget Office (February).  
<<http://www.cbo.gov/sites/default/files/cbofiles/attachments/45011-LaborMarketReview.pdf>> (accessed March 18, 2014).

Connecticut Department of Labor. 2013. "Family and Medical Leave Definitions."  
<<http://www.ctdol.state.ct.us/wgwkstnd/fmla/FMLAstatute.pdf>> (accessed December 12, 2013).

Dagher, Rada, Patricia M. McGovern, Bryan E. Dowd, and Ulf Lundberg. 2011. "Postpartum depressive symptoms and the combined load of paid and unpaid work: a longitudinal analysis." *International Archives of Occupational and Environmental Health* 84:735-743.

Daku, Mark, Amy Raub, and Jody Heymann. 2012. "Maternal leave policies and vaccination coverage: A global analysis." *Social Science & Medicine* no 74 (2): 120-124.

Daley, Kelly, Courtney Kennedy, Marci Schalk, Julie Pacer, Allison Ackermann, Alyssa Pozniak, and Jacob Klerman. 2012. *Family and Medical Leave in 2012: Methodology Report*. Washington DC: U.S. Department of Labor. <<http://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Methodology-Report.pdf>>.

D.C. Municipal Regulations and D.C. Register. 2013. "Chapter 4-16, District of Columbia Family and Medical Leave Act." <<http://www.dcregs.dc.gov/Gateway/ChapterHome.aspx?ChapterNumber=4-16>> (accessed April 15, 2013).

District of Columbia Register. 1997. "Employees' Rights Under the Parental Leave Act of 1994."  
<<http://ohr.dc.gov/sites/default/files/dc/sites/ohr/publication/attachments/LawsAndRegs-ParentalLeaveAct-English.pdf>> (accessed January 13, 2014).

Department of Labor and Workforce Development, Division of Temporary Disability Insurance. 2013. *Temporary Disability Insurance Program*. Trenton: Division of Temporary Disability Insurance.  
<[http://lwd.dol.state.nj.us/labor/forms\\_pdfs/tdi/WPR-117.pdf](http://lwd.dol.state.nj.us/labor/forms_pdfs/tdi/WPR-117.pdf)> (accessed January 13, 2014).

Dube, Arindrajit, Eric Freeman, and Michael Reich. 2010. *Employee Replacement Costs*. UC Berkeley: Institute for Research on Labor Employment. Retrieved from:  
<<http://escholarship.org/uc/item/7kc29981>> (accessed March 10, 2014)



Elborgh-Woytek, Katrin, Monique Newiak, Kaplana Kochhar, Stefania Fabrizio, Kangni Kopdar, Philippe Wingender, Benedict Clements, and Gerd Schwartz. 2013. *Women, Work, and the Economy: Macroeconomic Gains from Gender Equity*. Washington, DC: International Monetary Fund (September). <<https://www.imf.org/external/pubs/ft/sdn/2013/sdn1310.pdf>> (accessed March 4, 2013).

Fagan, Collette and Gail Hebson. 2006. *'Making work pay' debates from a gender perspective: A comparative review of some recent policy reforms in thirty European countries*. Luxembourg: Office for Official Publications of the European Communities. <<http://bookshop.europa.eu/en/making-work-pay-debates-from-a-gender-perspective-pbKE6905836/>> (accessed December 2, 2013).

Glynn, Sarah J. 2012. *Working Parents' Lack of Access to Paid Leave and Workplace Flexibility*. Washington, DC: Center for American Progress. <<http://www.americanprogress.org/wp-content/uploads/2012/11/GlynnWorkingParents-1.pdf>> (accessed December 17, 2013).

Gornick, Janet C. and Ariane Hegewisch. 2010. *The Impact of "Family-Friendly Policies" on Women's Employment Outcomes and on the Costs and Benefits of Doing Business*. Research review prepared for the World Bank. Washington, DC: Institute for Women's Policy Research.

Gornick, Janet C. and Ariane Hegewisch. 2008. *Statutory Routes to Workplace Flexibility in Cross-National Perspective*. IWPR #B258. Washington, DC: Institute for Women's Policy Research.

Gruber, Jonathon. 2000. "The Incidence of Payroll Taxation: Evidence from Chile." *Journal of Labor Economics* 15(3): S72-S101.

Guendelman, Sylvia, Jessica L. Kosa, Michelle Pearl, Steve Graham, Julia Goodman, and Martin Kharrazi. 2009. Juggling work and breastfeeding: effects of maternity leave and occupational characteristics. *Pediatrics* 123(1): e38-e46.

Hartmann, Heidi. 1990. *Unnecessary Losses: Costs to Americans of the Lack of Family and Medical Leave*. Washington, DC: Institute for Women's Policy Research. <<http://www.iwpr.org/publications/pubs/unnecessary-losses-costs-to-americans-of-the-lack-of-family-and-medical-leave>>.

Hawaii Legislative Reference Bureau. 2013. "Using Sick Leave to Care for Family Members: Issues and Options." <<http://hawaii.gov/lrb/rpts03/sklvfs.html>> (accessed December 12, 2013).

Hawkins, Summer S., Lucy J. Griffiths, Carol Dezateux, and Catherine Law. 2007. "The impact of maternal employment on breastfeeding duration in the UK Millennium Cohort Study." *Public Health Nutrition* 10(9): 891-896.

Hegewisch, Ariane and Yuko Hara. 2013. *Maternity, Paternity, and Adoption Leave in the United States*. IWPR #A143 Update. Washington, DC: Institute for Women's Policy Research.

Hegewisch, Ariane. 2009. "Flexible working policies: A comparative review." UK Equalities and Human Rights Commission; Research Report 16.

<[http://www.equalityhumanrights.com/uploaded\\_files/research/16\\_flexibleworking.pdf](http://www.equalityhumanrights.com/uploaded_files/research/16_flexibleworking.pdf)> (accessed September 30, 2013).

Heymann, Jody and Kristen McNeill. 2013. *Children's Chances: How Countries Can Move from Surviving to Thriving*. Cambridge: Harvard University Press.

Heymann, Jody, Amy Raub, and Alison Earle. 2011. "Creating and Using New Data Sources to Analyze the Relationship between Social Policy and Global Health: The Case of Maternal Leave." *Public Health Reports* 12 (3): 127-34.

Hill, Jennifer L., Jane Waldfogel, Jeanne Brooks-Gunn, and Wen-Jui Han. 2005. "Maternal employment and child development: A fresh look using newer methods." *Developmental Psychology* 41 (6): 833-850.

Hinkin, Timothy and J. Bruce Tracey. 2006. "The costs of employee turnover: when the devil is in the details." *Cornell University School of Hospitality Management CHR Reports*, 6 (15).

Hofferth, Sandra L., and Sally C. Curtin. 2006. "Parental leave statutes and maternal return to work after childbirth in the United States." *Work and Occupations* 33(1): 73-105.

Houser, Linda and Thomas P. Vartanian. 2012. *Pay Matters: The Positive Economic Impacts of Paid Family Leave for Families, Businesses and the Public*. New Brunswick, NJ: The Center for Women and Work. <<http://smlr.rutgers.edu/paymatters-cwwreport-january2012>> (accessed October 3, 2012).

Huerta, Maria del Carmen, Willem Adema, Jennifer Baxter, Wen-Jui Han, Mette Lausten, RaeHyuck Lee, and Jane Waldfogel. 2013. "Fathers' Leave, Fathers' Involvement and Child Development: Are They Related? Evidence from Four OECD Countries." *OECD Social, Employment and Migration Working Paper* No. 140, OECD Publishing. <<http://dx.doi.org/10.1787/5k4dlw9w6czq-en>> (accessed September 27, 2013).

Institute for Women's Policy Research. 2014. Analysis of 2012 FMLA employee survey microdata (public use file), collected by Abt Association under contract to U.S. Department of Labor.

International Labour Organization. 2010. *Maternity at Work: A review of national legislation: Findings from the ILO Database of Conditions of Work and Employment Laws*. Geneva, Switzerland: International Labor Organization.  
<[http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms\\_124442.pdf](http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms_124442.pdf)> (accessed September 27, 2013).

Ip, Stanley, Mei Chung, Gowri Raman, Priscilla Chew, Nombulelo Magula, Deirdre DeVine, Thomas Trikalinos, and Joseph Lau. 2007. *Breastfeeding and maternal and infant health outcomes in developed countries: evidence report/ technology assessment*. Rockville: Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services, AHRQ Publication No. 07-E007.

Joesch, Jutta M. 1997. "Paid Leave and the Timing of Women's Employment Before and After Birth." *Journal of Marriage and the Family*, 59(4): 1008-1021.

Karlson, Elizabeth W., Lisa A. Mandl, Susan E. Hankinson, and Francine Grodstein. 2004. "Do breast-feeding and other reproductive factors influence future risk of rheumatoid arthritis? results from the Nurses' Health Study." *Arthritis & Rheumatology* 50(11): 3458-3467.

Klerman, Jacob, Kelly Daley, and Alyssa Pozniak. 2013. *Family and Medical Leave in 2012: Technical Report*, Cambridge: Abt Associates. <<http://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Technical-Report.pdf>> (accessed September 27, 2013).

Lalive, Rafel and Josef Zweimüller. 2005. "Does Parental Leave Affect Fertility and Return-to-Work? Evidence from a 'True Natural Experiment.'" Discussion Paper No. 1613. Bonn: Institute for the Study of Labor. <<http://ftp.iza.org/dp1613.pdf>> (accessed October 7, 2013).

Laughlin, Lynda. 2011. *Maternity Leave and Employment Patterns of First-Time Mothers: 1961-2008*. Current Population Reports, U.S. Census Bureau. <<http://www.census.gov/prod/2011pubs/p70-128.pdf>> (accessed on September 27, 2013).

Lindberg, Laura. 1996. "Women's decisions about breastfeeding and maternal employment." *Journal of Marriage and the Family* 58 (1): pp. 239-51.

Lovell, Vicky and Hedieh Rahmanou. 2000. *Paid Family and Medical Leave: Essential Support for Working Women and Men*. Washington, DC: Institute for Women's Policy Research. <<http://www.iwpr.org/publications/pubs/paid-family-and-medical-leave-essential-support-for-working-women-and-men>> (accessed December 2, 2013).

Mather, Mark. 2012. "Fact Sheet: The Decline in U.S. Fertility." Washington, DC: Population Reference Bureau. <<http://www.prb.org/Publications/Datasheets/2012/world-population-data-sheet/fact-sheet-us-population.aspx>> (accessed October 7, 2013).

Maine Legislature, Office of the Revisor of Statutes. 1991. Title 26: Labor and Industry, Chapter 7: Employment Practices, Subchapter 6-A: Family Medical Leave Requirements Heading: PL 1987, C. 661(NEW). August: Office of the Revisor of Statutes.

McGovern, Patricia M, Bryan E. Dowd, Dwenda Gjerdingen, Ira Moscovice, Laura Kochevar, and Sarah Murphy. 2000. "The determinants of time off work after childbirth." *Journal of Health Politics, Policy & Law* 25(3): 527-564.

Miller, Kevin, Allison S. Helmuth, and Robin Farabee-Siers. 2009. *The Need for Paid Parental Leave for Federal Employees: Adapting to a Changing Workforce*. IWPR #A141. Washington, DC: Institute for Women's Policy Research.

Minnesota Department of Labor & Industry. 2013. "Labor Standards—State Parental Leave Act, Federal Family and Medical Leave Act (FMLA)." <<http://www.dli.mn.gov/LS/ParLeave.asp>> (accessed September 30, 2013).

National Partnership for Women and Families. 2012. *Expecting Better: A State-by-State Analysis of Laws that Help New Parents*. Washington, DC: National Partnership for Women and Families (May). <<http://www.nationalpartnership.org/research-library/work-family/expecting-better.pdf>> (accessed February 20, 2014).

National Partnership for Women and Families. 2013a. *Existing Temporary Disability Insurance Programs*. Washington, DC: National Partnership for Women and Families. <<http://www.nationalpartnership.org/research-library/work-family/paid-leave/existing-tdi-programs.pdf>> (accessed February 20, 2014).

National Partnership for Women and Families. 2013b. *The Case for a National Family and Medical Leave Insurance Program (The FAMILY Act)*. Washington, DC: National Partnership for Women and Families. <[http://go.nationalpartnership.org/site/DocServer/FAMILY\\_Act\\_Fact\\_Sheet.pdf](http://go.nationalpartnership.org/site/DocServer/FAMILY_Act_Fact_Sheet.pdf)> (accessed September 30, 2013).

National Partnership for Women and Families. 2013c. *Work and Family Agenda for the 113th Congress*. Washington, DC: National Partnership for Women and Families. <[http://go.nationalpartnership.org/site/DocServer/Work\\_and\\_Family\\_Agenda\\_113th\\_Congress.pdf?docID=11662](http://go.nationalpartnership.org/site/DocServer/Work_and_Family_Agenda_113th_Congress.pdf?docID=11662)> (accessed September 30, 2013).

Nepomnyaschy, Lenna and Jane Waldfogel. 2007. "Paternity Leave and Fathers' Involvement with Their Young Children: Evidence from the American Ecls-B." *Community, Work and Family* 10 (4): 427-453.

New Jersey Office of Administrative Law. 2013. "New Jersey Administrative Code." Trenton: Office of Administrative Law. <<http://www.lexisnexis.com/hottopics/njcode/>> (accessed January 6, 2014).

New York State Department of Civil Service. 1982 (updated 1991). *Attendance and Leave Manual*. Albany, NY: Department of Civil Service. <[http://www.cs.ny.gov/attend\\_leave\\_manual/022LeavesWithoutPay/22\\_1/22\\_1Rulespages-LeaveofAbsenceDuration.htm#b1](http://www.cs.ny.gov/attend_leave_manual/022LeavesWithoutPay/22_1/22_1Rulespages-LeaveofAbsenceDuration.htm#b1)> (accessed February 21, 2014).

New York State Workers' Compensation Board. "Disability Benefits (Off-the-Job Injury or Illness)." Schenectady: Workers' Compensation Board. <[http://www.wcb.ny.gov/content/main/offthejob/IntroToLaw\\_DB.jsp](http://www.wcb.ny.gov/content/main/offthejob/IntroToLaw_DB.jsp)> (accessed November 14, 2013).

R.I. Department of Labor and Training, Labor Standards Division. *Rhode Island Parental and Family Medical Leave Act: Administrative Regulations*. (RIGL 28-48). Cranston: R.I. Department of Labor and Training, Labor Standards. <[http://www.dlt.ri.gov/ls/pdfs/MedicalLeave\\_rr02.pdf](http://www.dlt.ri.gov/ls/pdfs/MedicalLeave_rr02.pdf)> (accessed January 27, 2014).

Ray, Rebecca, Janet C. Gornick, and John Schmitt. 2010. "Who Cares? Assessing Generosity and Gender Equality in Parental Leave Policy Designs in 21 Countries." *Journal of European Social Policy* 20 (3): 196-216.

Rhode Island Department of Labor and Training. 2013. "Temporary Disability Insurance/Temporary Caregiver Insurance." <<http://www.dlt.ri.gov/tdi/>> (accessed October 9, 2013).

Rhode Island Department of Labor and Training. 2014. "TDI/TCI Frequently Asked Questions." <<http://www.dlt.ri.gov/tdi/tdifaqs.htm>> (accessed January 13, 2014).

Richard, Jennifer. 2013. "Senate Bill 770: Paid Family Leave for Additional Close Family Members." Office of Senator Hannah-Beth Jackson. <[http://workfamilyca.org/campaigns/SB770\\_Factsheet.pdf](http://workfamilyca.org/campaigns/SB770_Factsheet.pdf)> (accessed September 30, 2013).

Rossin-Slater, Maya, Christopher J. Ruhm, Jane Waldfogel, 2011. "The Effects of California's Paid Family Leave Program on Mothers' Leave-Taking and Subsequent Labor Market Outcomes." NBER Working Papers 17715, National Bureau of Economic Research, Inc. <<http://ideas.repec.org/p/iza/izadps/dp6240.html>> (accessed September 30, 2013).

Rovney, Allison E. 2011. "Welfare state policy determinants of fertility level: A comparative analysis." *Journal of European Social Policy*, 21(4): 335-347.

Ruhm, Christopher. 1998. "The Economic Consequences of Parental Leave Mandates: Lessons from Europe." *The Quarterly Journal of Economics* 113 (1): 285-317.

Ruhm, Christopher. 2004. "Parental employment and child cognitive development." *Journal of Human Resources* 39 (1): 155-92.

Ruhm, Christopher. 2000. "Parental Leave and Child Health." *Journal of Health Economics* 19 (6): 931-960.

Schore, Allan N. 2001. "Effects of a Secure Attachment Relationship on Right Brain Development, Affect Regulation, and Infant Mental Health." *Infant Health Medical Journal* 22(1-2): 7-66.

Schwartz, Eleanor Bimla, Roberta Ray, Alison Stuebe, Matthew Allison, Roberta Ness, Matthew Freiberg, and Jane Cauley. 2009. "Duration of Lactation and Risk Factors for Maternal Cardiovascular Disease." *Obstetrics & Gynecology* 113 (5): 974-982.

Shonkoff, Jack P. and Deborah Phillips, eds. 2000. *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, DC: National Academy Press.

Spalter-Roth, Roberta, Claudia Withers, and Sheila Gibbs. 1992. *The Pregnancy Discrimination Act of 1978: A Ten Year Progress Report*. Washington, DC: Institute for Women's Policy Research.

State of California, Employment Development Department. 2010a. "Basic Eligibility for Your Employees." <[http://www.edd.ca.gov/disability/Employer\\_Eligibility.htm](http://www.edd.ca.gov/disability/Employer_Eligibility.htm)> (accessed January 23, 2014).

State of California, Employment Development Department. 2010b. "Paid Family Leave Eligibility." <[http://www.edd.ca.gov/Disability/PFL\\_Eligibility.htm](http://www.edd.ca.gov/Disability/PFL_Eligibility.htm)> (accessed January 13, 2014).

State of California, Employment Development Department. 2010c. "Pregnancy." <[http://www.edd.ca.gov/Disability/FAQ\\_DI\\_Pregnancy.htm](http://www.edd.ca.gov/Disability/FAQ_DI_Pregnancy.htm)> (accessed January 23, 2014).

State of California Employment Development Department. 2013. "Fact Sheet: Paid Family Leave." <[http://www.edd.ca.gov/pdf\\_pub\\_ctr/de8714cf.pdf](http://www.edd.ca.gov/pdf_pub_ctr/de8714cf.pdf)> (accessed November 4, 2013).

State of California Employment Development Department. 2014a. "Paid Family Leave Benefits." <[http://www.edd.ca.gov/disability/PFL\\_Benefit\\_Amounts.htm](http://www.edd.ca.gov/disability/PFL_Benefit_Amounts.htm)> (accessed January 13, 2014).

State of California Employment Development Department. 2014b. "Disability Insurance Benefit Amounts." <[http://www.edd.ca.gov/Disability/DI\\_Benefit\\_Amounts.htm](http://www.edd.ca.gov/Disability/DI_Benefit_Amounts.htm)> (accessed January 13, 2014).

State of California Employment Development Department. 2014c. "Disability Insurance Eligibility Amounts." <[http://www.edd.ca.gov/Disability/DI\\_Eligibility.htm](http://www.edd.ca.gov/Disability/DI_Eligibility.htm)> (accessed January 13, 2014).

State of California Employment Development Department. 2014d. "SDI Contribution Rates." <[http://www.edd.ca.gov/disability/sdi\\_contribution\\_rates.htm](http://www.edd.ca.gov/disability/sdi_contribution_rates.htm)> (accessed January 13, 2014).

State of Colorado. 2009. "Frequently Asked Questions about Family/Medical Leave for State Employees." <<https://www.colorado.gov/pacific/sites/default/files/FMLA%20FAQ's.pdf>> (accessed January 13, 2014).

State of Connecticut Department of Labor. *Final Regulations: State of Connecticut Family and Medical Leave Act*. Wethersfield: Connecticut Department of Labor. <<http://www.ctdol.state.ct.us/wgwkstnd/laws-regs/famedreg.pdf>> (accessed November 14, 2013).

State of Connecticut Department of Labor. *Guidance on the Interaction between the New Federal FMLA Regulations and the Connecticut FMLA Regulations*. Wethersfield: Connecticut Department of Labor. <<http://www.ctdol.state.ct.us/wgwkstnd/fmla/FMLA-Guidance.pdf>> (accessed November 14, 2013).

State of Hawaii, Disability Compensation Division. 2014. "About Temporary Disability Insurance." <<http://labor.hawaii.gov/dcd/home/about-tdi/>> (accessed January 13, 2014).

State of Hawaii Department of Labor and Industrial Relations, Disability Compensation Division. 2004. "Highlights of the Hawaii Disability Insurance Law." <<http://labor.hawaii.gov/dcd/files/2013/01/TDI-highlights.pdf>> (accessed January 13, 2014).

State of Hawaii Department of Industrial Relations, Disability Compensation Division. 2013. "2014 Maximum Weekly Wage Base and Maximum Weekly Benefit Amount."  
<<http://labor.hawaii.gov/dcd/files/2013/01/New-Wage-Base.pdf>> (accessed January 13, 2014).

State of Hawaii Wage Standards Division. "Hawaii Revised Statutes (HRS): Chapter 398, Family Leave."  
<[http://www.capitol.hawaii.gov/hrscurrent/Vol07\\_Ch0346-0398/HRS0398/HRS\\_0398-.htm](http://www.capitol.hawaii.gov/hrscurrent/Vol07_Ch0346-0398/HRS0398/HRS_0398-.htm)> (accessed November 4, 2013).

State of Hawaii Wage Standards Division. "Hawaii Family Leave: Frequently Asked Questions."  
<<http://labor.hawaii.gov/wsd/hawaii-family-leave/>> (accessed November 4, 2013).

State of Maine Bureau of Labor Standards. 2012. *Regulation of Employment*. Augusta: Bureau of Labor Standards. <<http://www.maine.gov/labor/posters/regulationofemployment.pdf>> (accessed September 30, 2013).

State of Maine Department of Labor. 2013. "Maine Employee Rights Guide."  
<[http://www.maine.gov/labor/labor\\_laws/publications/employeeightsguide.html#Family](http://www.maine.gov/labor/labor_laws/publications/employeeightsguide.html#Family)> (accessed January 13, 2014).

State of New Jersey Department of Labor and Workforce Development, 2013. *Your Guide to Family Leave Insurance in New Jersey (PR-119)*. Trenton: Department of Labor and Workforce Development. <[http://lwd.dol.state.nj.us/labor/forms\\_pdfs/tdi/WPR-119.pdf](http://lwd.dol.state.nj.us/labor/forms_pdfs/tdi/WPR-119.pdf)> (accessed September 30, 2013).

State of New Jersey Department of Labor and Workforce Development, "State Disability Benefits - Employer Information." <[http://lwd.dol.state.nj.us/labor/tdi/employer/state/sp\\_emp\\_memu.html](http://lwd.dol.state.nj.us/labor/tdi/employer/state/sp_emp_memu.html)> (accessed January 13, 2014).

State of New Jersey Department of Law and Public Safety. "About the NJ Family Leave Act (FLA)."  
<<http://www.nj.gov/oag/dcr/law.html#FLA>> (accessed January 13, 2014).

State of Oregon Bureau of Labor and Industries. 2012. "Oregon Family Leave Act." Portland: Bureau of Labor and Industries. <[http://www.oregon.gov/boli/TA/docs/OFLA\\_Poster\\_2014.pdf](http://www.oregon.gov/boli/TA/docs/OFLA_Poster_2014.pdf)> (accessed January 6, 2014).

State of Wisconsin Department of Workforce Development. 2011. *Wisconsin Family and Medical Leave Act*. Madison: Department of Workforce Development. <[http://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd\\_7983\\_p.pdf](http://dwd.wisconsin.gov/dwd/publications/erd/pdf/erd_7983_p.pdf)> (accessed December 12, 2013).

State of Wisconsin Department of Workforce Development. 2013. "Wisconsin Family and Medical Leave Act." <[http://dwd.wisconsin.gov/er/family\\_and\\_medical\\_leave/](http://dwd.wisconsin.gov/er/family_and_medical_leave/)> (accessed December 12, 2013).

Staehelin, Katharina, Paola Coda Berteza and Elisabeth Zemp Stutz. 2007. "Length of maternity leave and health of mother and child – a review." *International Journal of Public Health*, 52: 202-209.

Stuebe, Alison M., Walter C. Willett, Fei Xue, and Karin B. Michels. 2009. "Lactation and Incidence of Premenopausal Breast Cancer, A Longitudinal Study." *Archives of Internal Medicine* 169 (15): 1364-71.

Stuebe, Alison M., Janet W. Rich-Edwards, Walter C. Willett, JoAnn E. Manson, Karin B. Michels. 2005. "Duration of Lactation and Incidence of Type 2 Diabetes." *Journal of the American Medical Association* 294 (20): 2601-2610.

Tanaka, Sakiko. 2005. "Parental Leave and Child Health across OECD Countries," *Economic Journal* 115 (501): F7-F28.

Trzcinski, Eileen and Matia Finn-Stevenson. 1991. "A Response to Arguments against Mandated Parental Leave: Findings from the Connecticut Survey of Parental Leave Policies." *Journal of Marriage and the Family*, 53(2): 445-460.

U.S. Census Bureau. 2006. "Survey of Income and Participation: About." Washington, DC: U.S. Census Bureau <<http://www.census.gov/programs-surveys/sipp/about.html>> (accessed February 19, 2014).

U.S. Department of Health and Human Services. 2000. *HHS Blueprint for Action on Breastfeeding*. Washington, DC: Department of Health and Human Services, Office on Women's Health. <<http://www.womenshealth.gov/archive/breastfeeding/programs/blueprints/bluprntbk2.pdf>> (accessed December 5, 2013).

U.S. Department of Health and Human Services. 2011. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General. <<http://www.surgeongeneral.gov/library/calls/breastfeeding/calltoactiontosupportbreastfeeding.pdf>> (accessed December 2, 2013).

U.S. Department of Labor, Office of the Assistant Secretary for Policy. 2009. "Health Benefits, Retirement Standards, and Workers' Compensation: Family and Medical Leave." Washington, DC: U.S. Department of Labor. <<http://www.dol.gov/compliance/guide/fmla.htm>> (updated September 2009, accessed September 30, 2013).

U.S. Department of Labor, Bureau of Labor Statistics. 2003. "BLS Handbook of Methods." Washington, DC: U.S. Department of Labor. <[http://www.bls.gov/opub/hom/homch1\\_itc.htm](http://www.bls.gov/opub/hom/homch1_itc.htm)> (accessed March 20, 2014).

U.S. Department of Labor, Bureau of Labor Statistics. 2012a. "Access to and Use of Leave – 2011 Data from the American Time Use Survey." Washington, DC: U.S. Department of Labor. <<http://www.bls.gov/news.release/pdf/leave.pdf>> (accessed September 26, 2013).

U.S. Department of Labor, Bureau of Labor Statistics. 2012b. American Time Use Survey Leave Module Questionnaire. Washington, DC: U.S. Department of Labor. <<http://www.bls.gov/tus/lvmquestionnaire.pdf>> (accessed December 20, 2013).



U.S. Department of Labor, Wage and Hour Division. 2013a. "FMLA leave for birth, bonding, or to care for a child with a serious health condition on the basis of an 'in loco parentis' relationship." Fact Sheet #28B: <[www.dol.gov/whd/regs/compliance/whdfs28B.pdf](http://www.dol.gov/whd/regs/compliance/whdfs28B.pdf)> (accessed September 30, 2013).

U.S. Department of Labor, Wage and Hour Division. 2013b. "The Family and Medical Leave Act." Fact Sheet #28. <<http://www.dol.gov/whd/regs/compliance/whdfs28.pdf>> (accessed September 30, 2013).

U.S. Department of Labor, Bureau of Labor Statistics. 2013c. *Leave benefits: Access, civilian workers: National Compensation Survey, March 2013*. Washington, DC: U.S. Department of Labor. <<http://www.bls.gov/ncs/ebs/benefits/2013/ownership/civilian/table21a.pdf>> (accessed September 26, 2013).

U.S. Department of Labor, Bureau of Labor Statistics. 2013d. "National Compensation Survey: Glossary of Employee Benefit Terms." Washington, DC: U.S. Department of Labor. <[http://www.bls.gov/ncs/ebs/glossary20122013.htm#paid\\_leave](http://www.bls.gov/ncs/ebs/glossary20122013.htm#paid_leave)> (accessed October 1, 2013).

U.S. Equal Employment Opportunity Commission. n.d. "Pregnancy Discrimination." Washington, DC: U.S. Equal Employment Opportunity Commission. <<http://www.eeoc.gov/laws/types/pregnancy.cfm>> (accessed December 2, 2013).

U.S. Government Accountability Office. 2007. *Women and Low-Skilled Workers: Efforts in Other Countries to Help These Workers Enter and Remain in the Workforce*. GAO-07-817. <<http://www.gao.gov/assets/270/262003.pdf>> (accessed March 4, 2014).

U.S. Social Security Administration, Office of Retirement and Disability Policy. 2012. "Temporary Disability Insurance Program Description and Legislative History." Washington, DC: U.S. Social Security Administration. <<http://www.ssa.gov/policy/docs/statcomps/supplement/2012/tempdisability.html>> (accessed November 7, 2013).

Van Giezen, Robert W. 2013. "Paid leave in private industry over the past 20 years." *Beyond the Numbers: Pay & Benefits* 2 (18). U.S. Bureau of Labor Statistics. <<http://www.bls.gov/opub/btn/volume-2/paid-leave-in-private-industry-over-the-past-20-years.htm>> (accessed September 30, 2013).

Vermont Department of Labor. 2013. "Parental Leave, Family Leave, and Short-Term Family Leave." <<http://www.labor.vermont.gov/Portals/0/Wage%20Hour/WH-14%20Parental%20Family%20Leave%20Poster.pdf>> (accessed December 12, 2013).

Visness, Cynthia M., and Kathy I. Kennedy. 1997. "Maternal employment and breastfeeding: findings from the 1988 National Maternal and Infant Health Survey." *American Journal of Public Health* 87(6): 945-950.

Waldfoegel, Jane. 2001. "Family and medical leave: evidence from the 2000 surveys." *Monthly Labor Review* (September). <<http://www.bls.gov/opub/mlr/2001/09/art2full.pdf>> (accessed October 3, 2013).

Washington State Department of Labor and Industries. 2010a. "Job Protected Family Leave Laws." <<http://www.lni.wa.gov/WorkplaceRights/files/FamilyLeaveLawsTable.pdf>> (accessed January 13, 2014).

Washington State Department of Labor and Industries. 2010b. "Washington State Family Leave Act Q&A." <<http://www.lni.wa.gov/WorkplaceRights/files/FamilyLeaveFAQs.pdf>> (accessed January 23, 2014).

Washington State Employment Security Department. 2013. "Family Leave Insurance." <<http://www.esd.wa.gov/newsandinformation/legresources/family-leave-insurance.php>> (accessed December 12, 2013).

Washington State Legislature. 2007. *Family Leave Insurance*. [Chapter 48.86 RCW] Olympia: Washington State Legislature. <<http://apps.leg.wa.gov/rcw/default.aspx?cite=49.86#>> (accessed January 13, 2014).

Washington State Legislature. 2002. *Sick leave, time off — Care of family members*. [Chapter 49.12, Section 49.12.270] Olympia: Washington State Legislature. <<http://apps.leg.wa.gov/rcw/default.aspx?cite=49.12.270>> (accessed January 13, 2014).

World Health Organization. 2013. "Maternal, Newborn, Child, and Adolescent Health." <[http://www.who.int/maternal\\_child\\_adolescent/topics/child/nutrition/breastfeeding/en/](http://www.who.int/maternal_child_adolescent/topics/child/nutrition/breastfeeding/en/)> (accessed October 3, 2013).