



Office of the Assistant Secretary for Planning and Evaluation, U.S.
Department of Health and Human Services

OFFICE OF HUMAN SERVICES POLICY

Supporting Employment Among Lower-Income Mothers: The Role of Paid Family Leave

Authors: Pamela Winston, Elizabeth Coombs (Mission Analytics Group), Rashaun Bennett, and Lauren Antelo

HIGHLIGHTS

This is the second of two ASPE briefs about a qualitative study examining lower-income mothers' attachment to work around the time of childbirth and the role of state paid family leave (PFL) programs in supporting their return to employment. Highlights are:

- Mothers, especially single mothers and those with the fewest family resources, described PFL as supporting their return to employment. It provided them with subsidized time to prepare to return to work, and it allowed some mothers to take more leave than they could have afforded without PFL. Other mothers said the time it offered kept them from quitting work altogether.
- PFL provided time to arrange acceptable child care, recover from pregnancy and childbirth, bond with the baby, help the baby transition to nonparental care, and initiate and maintain breastfeeding.
- Mothers described limitations to the program, including the amount of wage replacement and length of leave, but valued the time to care for their baby and plan their return to work.
- A [companion brief](#) explores why mothers returned to work after childbirth (or did not), why they returned to their pre-birth employers, and factors that eased—or made more difficult—the transition back to work.

Introduction

After many years of increase, women's labor force participation in the United States has declined in recent years from a high of 60.7 percent in April 2000 to 57.5 percent in February 2019 (Federal Reserve Bank of St. Louis 2019). At the same time, lower-income women tend to have less labor force participation than higher-income women do and to leave employment around the time of childbirth at notably greater rates (Laughlin 2011, U.S. Department of Labor 2016). Not surprisingly, childbirth is a time of particular economic instability for lower-income mothers and their families (Stanczyk 2018).

State paid family leave (PFL) programs, recent research suggests, contribute to greater work attachment among new mothers following childbirth. This finding indicates the potential of these

programs to alleviate financial need among mothers by supporting their employment. This support is especially important for lower-income women, who often lack alternative resources. PFL programs provide partial replacement of lost wages for a limited time for working parents who take leave for childbirth or adoption.¹

Several studies indicate that PFL supports mothers' post-birth employment outcomes, including work attachment, a higher probability of increased wages, and attachment to pre-birth employers (Baum and Ruhm 2016, Byker 2016, Houser and Vartanian 2012, Milkman and Appelbaum 2013, Rossin-Slater et al. 2013, Winston et al. 2017). A few studies found these results for disadvantaged mothers in particular.

However, research to explore how and why PFL may help mothers remain attached to work has largely been lacking. This study used qualitative methods to address these questions. It focused on lower-income mothers around the time of childbirth, asking them whether the PFL programs in which they participated played a role in supporting their attachment to work and, if so, how. It also examined more broadly why they remained attached to employment and to their prior employer or left the labor force around the time of childbirth; these questions are addressed in a [companion brief](#). These briefs are part of a body of [ASPE research](#) that explores the role of PFL as a support for lower-income working families.

The mothers in the convenience sample we talked with were not representative of all lower-income new mothers in their states or in the country as a whole, nor of all lower-income women who are eligible for or used PFL. Because the study focused on lower-income mothers receiving PFL, it did not provide the perspectives of mothers who did not use the program for reasons such as lack of awareness or inability to afford the reduced wage replacement that PFL provides. Despite these limitations, our conversations with these mothers allowed us to understand better *how* PFL helped them remain attached to work, a topic quantitative research has not addressed.

What Is Paid Family Leave?

PFL is a policy to provide parents with time away from employment to care for and bond with their newborn child by supplementing their incomes. Four states have established PFL programs: California (2004), New Jersey (2009), Rhode Island (2014), and, most recently, New York (2018). Our study focused on mothers in the first three states because these programs were fully implemented at the time of data collection. Three other jurisdictions—the District of Columbia, Massachusetts, and Washington—have enacted PFL programs, but they were not yet in effect at the time of the study.

PFL programs in the three study states provided four to six weeks of wages subsidized at 60 to 70 percent of prior earnings. These PFL wage subsidies for mothers were in addition to—and typically followed—about six to 10 weeks of leave at similar pay under state temporary disability insurance (TDI) programs for pregnancy- and childbirth-related disability. Five states currently have state-level TDI programs.² The four states that have implemented PFL to date also adopted TDI programs in the 1940s to provide partial wage replacement to certain workers facing short-term injury or illness unconnected to work. The federal Pregnancy Discrimination Act of 1978 required that TDI cover the effects of pregnancy and childbirth consistent with coverage of other “disabilities” (U.S. Equal Employment Opportunity Commission 2008). In the study states, the two programs are interconnected and are administered by the same agencies, with similar requirements and benefits.

For mothers that took the full amount of both TDI and PFL, total leave after birth could range from about 10 to 16 weeks, depending on the state and the mothers' health, which affected the

¹ State PFL programs also provide financial support for the care of certain other family members, but the majority of claims are for bonding with newborns, which is the focus of this study.

² The five states with TDI programs are California, Hawaii, New Jersey, New York, and Rhode Island. Puerto Rico also has a TDI program. For more information on TDI and PFL programs across the states, see National Partnership for Women and Families (2019).

length of TDI leave. Fathers or other parents were also eligible to take PFL in each state. TDI and PFL are social insurance programs, and payroll taxes on workers but not employers fund the currently implemented programs (they are not funded by general revenues). Table 1 and [Appendix A](#) provide further detail on PFL in the study states.

Table 1. State Paid Family Leave Policies (2018)

Program	Minimum Prior Wages	Benefit Length	Wage Replacement Rate up to Cap	Job Protection	Year
CA Paid Family Leave	\$300	6 weeks	60% to 70%*	No (unless covered by FMLA, other state law)	2004
NJ Family Leave Insurance**	\$3380	6 weeks	66%	No (unless covered by FMLA, other state law)	2009
RI Temporary Caregivers Insurance	\$4040	4 weeks	60%	Yes	2014

* California made changes to its PFL program effective January 2018, raising the wage replacement rate to 70 percent for low-income parents and eliminating a one-week unpaid waiting period. Most of the mothers in this study took PFL under the old system, but some did under the new. ** New Jersey enacted substantial changes to its PFL program in February 2019 to be effective July 2020, including an increase to 12 weeks leave, job protection for certain employees, and an increased wage replacement rate up to a maximum of 85 percent, among other provisions (Nacchio and Diana 2019).

Paid leave programs complement the federal Family and Medical Leave Act of 1993 (FMLA), which offers up to 12 weeks per year of *unpaid* leave for family caregiving or a worker’s own medical care. In contrast to the FMLA, PFL programs have no firm-size or job-tenure requirements.³ The FMLA excludes workers at small firms or with less than one year on the job. Because of its eligibility criteria, it covers about 60 percent of U.S. employees and an estimated one-third of low-income workers (Klerman et al. 2013, Joshi et al. 2016). Unlike most PFL programs, however, the FMLA provides job protection that allows workers to return to their prior job or an equivalent one. Of the PFL programs in the study, only Rhode Island provided job protection (though in other states workers could be covered by the FMLA or equivalent state laws, or their employers could choose to save their jobs for them).

Lower-income working parents are the least likely to receive paid parental leave from their employers, and therefore have the potential to benefit disproportionately from state PFL programs.⁴ Many higher-income parents get paid leave of some sort from their employers and can use it when they have a baby. About 27 percent of jobs with wages in the top quartile come with dedicated paid family leave, and over 90 percent come with other forms of paid leave, such as sick leave or vacation time. In contrast, very few lower-wage jobs offer paid family leave (about 7 percent of jobs at the bottom quartile of wages), and about half or fewer offer paid sick leave or vacation time (U.S. Bureau of Labor Statistics 2018).

Several other states are considering PFL programs, and diverse federal lawmakers have introduced PFL proposals that use varying approaches to provide partially subsidized leave. President Trump’s budgets for past three federal fiscal years have also included PFL proposals for new parents.⁵

³ The FMLA requires least one year’s tenure with the current employer, part-time or more, and applies to workers with an employer that has at least 50 employees in a 75-mile radius, among other provisions.

⁴ See Appelbaum and Gatta (2019) for analysis of low participation in PFL by low-income parents and lessons from recent initiatives to increase awareness and uptake. See also Gupta et al. (2018) on the importance of PFL for low-income families.

⁵ See AEI-Brookings Working Group on Paid Family Leave (2017) for an analysis of key issues and alternative approaches to PFL provision.

The Mothers in Our Sample

This study drew on focus groups and semi-structured interviews with 75 lower-income mothers, as well as a short demographic questionnaire that all mothers completed. All study participants had used their state's PFL program for the birth of a child in the prior two years, and had a household income below the area median for the county in which they lived.⁶

The majority of the mothers in the study used all the weeks of PFL available to them, in addition to TDI, amounting for many to a total of about 10 to 14 weeks of post-birth leave. Several said they took longer leaves, however, apparently because of health issues covered by additional TDI, or under the FMLA, state law, or simply with their employer's agreement. Thirty-five percent were first-time mothers.

About 70 percent of the mothers had incomes under \$50,000 (38 percent at \$25,000 or less). Thirty percent were single parents, while the rest lived with their child's father. Mothers of all major race-ethnicity groups participated in the study: 38 percent identified as white, 22 percent as black, 12 percent as Asian, 4 percent as American Indian/Alaska native, and 1 percent as native Hawaiian or other Pacific Islander; the rest declined to identify their race. More than half the total identified as Hispanic, consistent with the focus on lower-income mothers and the disproportionate presence of Californians (about 40 percent of whom are Hispanic) in the study. They lived in a mix of urban, suburban, and rural locations.

Most of the mothers (about 70 percent) said they returned to work after childbirth. Eighty-seven percent of those who went back to work returned to their pre-birth employer, while the remainder moved to a new employer. About 30 percent left work altogether around the time of childbirth, several before but most after. Thirteen percent said they were fired or laid off, and almost 17 percent quit.

The mothers held a range of jobs before childbirth, including retail, administrative, health care, child care, food service, social services, customer service, and agricultural labor. Several said they worked for staffing agencies rather than directly for employers. Some worked multiple jobs or combined school and work. A few worked seasonally.

[Appendix A](#) provides further detail about the study sample and methods, and [Appendix B](#) provides the study discussion guide.

Findings

This brief first focuses on the broad benefits of PFL for returning to work that the mothers in the study identified. Second, it examines specific aspects of PFL that most supported their return to employment. Third, it discusses the limitations of PFL that the mothers cited.

"After the [paid leave] you say, 'Well this helped me a lot, this program. I'm more rested, calmer, better physically and I can go back to work.'" *Lucy, Providence, RI*

"It is just like night and day [compared to a prior birth without PFL] when it comes to being able to really be there and have a nice amount of time before returning back to work." *Cindy, Los Angeles, CA*

"It helped me create a bond with my baby. It helped me prepare to go back to work. And it just took that stress away...from me having to rush back to work." *Jennifer, Los Angeles, CA*

⁶ We did not use the federal poverty threshold because it does not generally differ by geographic area, whereas we knew the cost of living varied widely across the locations in the study, which included San Francisco and San Jose, California, as well as locations with a much lower cost of living. Instead, we included women below the median income for their county (for this reason, we refer to them as lower income rather than low-income).

Broad Benefits of PFL: Time and Income Support

Most of the mothers who returned to work said that PFL helped them go back—largely by providing subsidized time. The mothers in the study who returned to work after childbirth (almost three-quarters of the sample) described a range of ways that PFL facilitated their return to work. They emphasized the money it provided and the time that the money bought. This support was especially important for lower-income mothers and those without family support. While several of the more advantaged mothers indicated that they would have been able to take at least some time off even without PFL, all the mothers described it as helping them to do things they valued. This included bonding with the baby, breastfeeding, recovering physically and mentally, and supporting their new family's adjustment and stability.

PFL substantially lowered their stress levels at a time of major adjustment, some said. Many also cited the importance of the time to take the steps necessary to return to work. These steps included arranging for acceptable child care, transitioning from breastfeeding to pumping and bottle feeding, rearranging their work schedules or job duties, and recovering enough physically and mentally to be able to work. Many of the mothers emphasized the role of PFL in supporting their family's stability. Several had older children with whom they had not used PFL, and vouched for the positive difference they felt the program made to them.

Mothers valued the money PFL provided, even at partial pay. The mothers we spoke with appreciated the income they received through PFL and what it bought them. They used these funds to keep up with some of their bills, they said, and to offset new costs such as diapers, formula, and other baby supplies.

For some women, this support was vital. This was especially true for single mothers, women in very low-wage jobs, those without family members nearby, mothers who were new to the area, and women experiencing instability such as precarious housing or the end of the relationship with their child's father.⁷ Those in physically demanding jobs such as agriculture and food service also said it helped substantially at a critical time. A few mothers said the money helped them pay their rent or find new housing, alleviating worries about homelessness.

Most of the mothers said that the 60 to 70 percent wage replacement PFL offered did not meet their financial needs while they were on leave. Some cut short their leaves and returned to work early because they needed a full income. In some of the two-parent families, the partner or spouse declined to participate in the PFL program because the family could not take the additional reduction in wages. But overall, the mothers in the study welcomed the subsidy PFL provided.

"That money I had helped me pay my rent on time and not have the worry about becoming homeless, in addition to taking care of my little baby." *Coco, San Francisco, CA*

"Just even like the small payments that I got for those six weeks, it really helped to buy groceries and formula. Even though my husband was helping, it wasn't enough. So having the money from paid family leave, that was a big help." *Terrance, San Jose, CA*

"Even though I'm complaining about it, that it was a little amount of money, you know, it was still significant. It was helpful. It was very, very helpful." *Liz, Santa Rosa, CA*

"It benefits us. If this program didn't exist, disability and paid family leave, it would be straight out of the hospital and a few days and then back to work." *Flor, Gilroy, CA*

"If I didn't take that program, I would have had to go back to work and leave him younger. Because I needed the money. But the disability and the paid time off was good. It helped me a lot." *Rebecca, Fresno, CA*

⁷ Some research indicates that some low-income women do not take PFL because they cannot afford the wage reduction. Because we limited our sample to mothers who had used the program, we did not consider those perspectives.

Some mothers said that without PFL, they would have had to return to work very quickly; others said they would have left work entirely.

Some of the lowest-income mothers said that in the absence of paid leave (PFL and TDI) they would have needed to go back to work within weeks or days. A few were single mothers and felt particular pressure to earn income; PFL allowed them to take at least some time off after childbirth. An agricultural worker and a supermarket cashier—both single mothers—were among those who expressed this view.

Several other mothers indicated that in the absence of PFL, they would have found it untenable to find child care, leave their babies in nonparental care at only a few weeks of age, and go back to work shortly after childbirth. Instead, they believed they would have left work altogether, either by quitting or being let go. One mother asserted that she would have been fired if she had not taken PFL because she would have been unable to function in the workplace immediately after childbirth.

Our qualitative findings were consistent with quantitative research indicating that PFL is associated—in particular for lower-income mothers—with more use of leave (by women who might otherwise forgo leave or drop out of work) and longer leaves (by women who might otherwise take only a short time off after childbirth) (Baum and Ruhm 2016, Rossin-Slater et al. 2013).

Aspects of PFL Most Helpful in Returning to Work

PFL provided time to arrange and prepare for child care. Many mothers used the time on leave to find a professional child care provider, arrange for family members or friends to provide care (which could entail work-shift changes for them), or change their own shifts to better match available care. They also applied for child care subsidies or subsidized slots and got onto waiting lists. A few received subsidies or slots while on leave. Mothers also looked for hard-to-locate care, such as during the night shift, and sought care they could afford to pay for out of pocket.

While finding child care is difficult for many mothers, lower-income women can experience additional challenges such as substantial financial constraints, nontraditional work hours, and unpredictable or irregular schedules (Baldiga et al. 2018, Lambert et al. 2014, Smith and Adams 2013). Some mothers in the study had family and other social support, but for many these factors were not enough to allow them to take time off after birth. PFL allowed the mothers time to make phone calls, visit centers and providers, negotiate work schedules, coordinate with family members who could help, or reach their turn on a waiting list to get a slot or subsidy.

“If I didn’t have access to paid family leave, I probably wouldn’t be working again because I definitely know when I had my baby, I’d be like, ‘Okay, I need to take time off.’ So, I wouldn’t have returned...”
Anna, Los Angeles, CA

“It was helpful as far as just coming up with a plan of action, and meeting with daycare providers, and going in to talk to people, and get a good feel [of it] for him.” *Star, Sacramento, CA*

“It gave me the time...to put in the paperwork [for a child care subsidy]. And then whatever they needed, I was able to come back and turn in more paperwork, as far as child care goes. It gave me that extra time to do those things, to get stuff done.” *Michelle, Fresno, CA*

“It gave me time to prepare when I was going to go back on my [work] schedule, to prepare who is keeping the baby, and how the schedule would work out.” *Danielle, Sacramento, CA*

“It was huge. That was the time for us to really get on our schedules and kind of learn the new baby and for us to kind of learn our new family dynamic.” *Kristine, Sacramento, CA*

“Well, emotionally, mentally [the time helps] because I see the baby developing a little bit, connecting with other people, not just being, you know, a few weeks old and not knowing anything.” *Jess, East Orange, NJ*

The time off during PFL also simply allowed the baby to get older before moving to care by a provider, family member, or friend. Many mothers expressed anxiety about having a very young child in nonparental care, sometimes even in care by members of their extended family. Some had fears about the baby's safety. Some felt that the time immediately following birth was not a developmentally appropriate age for a child to be in nonparental care. After taking leave for a few months, the mothers said they felt more comfortable leaving their babies in care.

Some mothers said that PFL gave them time to develop consistent routines for the babies, which supported the transition to nonparental care. Greater consistency in the babies' schedules made it much easier for the mothers to juggle parenting and work responsibilities when they returned to their jobs. These routines also helped others, such as family members and professional caregivers, to look after the babies when they began caring for them. Finally, several mothers said that PFL simply allowed the time for their babies to transition to professional child care—or care by another family member—by starting gradually before the mothers began working again.

The mothers universally saw time to bond as highly valuable. All of the mothers said they valued the time to bond with their babies. They said they prized the opportunity to care for—and simply be with—their new baby without having to worry about work as a competing priority. “At least for those weeks,” said one single mother, “one is at peace.” Essentially all the mothers in the study stressed the bonding that PFL allowed as one of its most important benefits.

Mothers also noted that having time to bond before going back to work made returning more acceptable. Some of the mothers said that leaving their babies at six to eight weeks of age (when TDI coverage in the study states typically ends) would have been intolerable when the babies were so young and the mothers had spent so little time bonding with them. Although many did not want to leave their babies when it was time to work, PFL made the transition somewhat less difficult.

PFL also helped mothers address the baby's health care and other needs. Mothers stressed the importance of time to care for their babies' health needs, such as vaccinations, well-baby check-ups, and medical appointments for specific health or developmental concerns. PFL also gave the mothers time to become better attuned to their babies over the first few months and to adjust the care as their needs changed or they got older.

Many of the women said PFL assisted them in establishing breastfeeding and transitioning to pumping and bottle feeding. Many of the mothers we talked with expressed a commitment to breastfeeding their babies. They seemed aware of the health benefits for their children, and some noted that it was much cheaper than formula, a clear benefit for lower-income

“It was great because I was able to bond with my baby and breastfeed. You just need that time with your baby. You are a mother and...your baby needs you....That is very important for all mothers.” *Vero, Los Angeles, CA*

“I'm very thankful for paid family leave. Because I don't know what I would do if I didn't have those six weeks to bond with my child, you know?” *Terrance, San Jose, CA*

“It helps with all the stuff you're not able to do [when you work], especially doctor's appointments. They need their shots....And at the beginning, things change for them. If you need formula changes, stuff like that, you have that time to figure all that out before you go back to work. So it's helpful in that sense.” *Alexa, Fresno, CA*

“I don't know. I think without the time off I would have given up breastfeeding, though I didn't want to. But I think I probably would have.” *Julie, San Diego, CA*

“[The time off] allowed you to get on a pump schedule and try to figure out how things are going to work out once you return [to work].” *Samantha, Sacramento, CA*

families. They valued the time they had while on PFL to establish breastfeeding. A few suggested that without this, they might have been unable to breastfeed for any length of time. Some also saw their leave as helping with the transition to pumping and bottle feeding in anticipation of returning to work. They recognized the challenges that the workplace could pose for maintaining breastfeeding and pumping. Getting a head start while on PFL made maintenance of breastfeeding seem more feasible.

Time on PFL to recover physically and mentally was essential to returning to work. Many mothers talked about the physical and mental demands of pregnancy, childbirth, and postpartum recovery, as well as the demands of caring for a young infant. As noted above, the states' TDI programs supported mothers' recovery from pregnancy and childbirth, typically with six to 10 weeks of subsidized leave after giving birth. But many mothers credited the additional time they took while on PFL with helping them more fully recover before they had to go back to their jobs. Some mothers said they experienced significant depression and anxiety after childbirth, particularly (for some) in the face of returning to work. The time on PFL allowed some alleviation of these conditions.

Some mothers cited the time to develop new household routines and address logistics necessary to begin work again. PFL was seen as helpful in getting used to family life with the new baby and taking care of a variety of practical matters in addition to child care, the babies' medical care, and mothers' recovery. Some talked about the time available for the mother to take on the new responsibilities that come with a first child. Others commented on broader adjustments for siblings and parents when a new baby arrives. One mother summed it up: "It takes a while to adjust to, you know, a new schedule and being so busy...It's a continuous pattern that new moms need to get used to." Some mothers had specific circumstances, such as taking on new parenting responsibilities in the midst of a breakup with the baby's father. Two mothers had to find new places to live while on leave. A few mothers put acclimating to the lack of sleep that would go with juggling parenthood and work in the future into this category of necessary activities.

The availability of PFL for fathers also supported some mothers' return to the workplace.

About a quarter of the mothers said their husbands or partners either had taken PFL or were planning to. Several said that it helped them make the transition back to work and that the father's time on leave supported the family as a whole. Not all families could afford to have both parents at reduced wages, but the mothers saw it as beneficial when fathers did use it. Some mothers were unaware that the father was eligible for PFL. In at least a few cases, it appeared that the fathers had been given incorrect information by their workplaces about their eligibility and believed they could not take it.

"I think it's also good we have time to heal after giving birth, so that time [on PFL] helps. Aside from the bonding time, of course. That's enjoyable, but nobody wants to give birth and go right back to work.... Giving birth is not that easy." *Lilly, Fresno, CA*

"The healing part [is important], just because if you're in pain a lot you can't really function when you are at work. I feel that that helped me heal the cut that I had, it just made me feel better. Yeah, I felt that that was the most important thing." *Ruby, Gilroy, CA*

"And as far as like grocery shopping, and getting everything done, and dinner planning. It just felt like that time really gets you to where you can set a better routine for your family and kind of work all around the new baby." *Kristine, Sacramento, CA*

"It is also important that the fathers, the men, know that they have access to this. Because for them it is also important, the connection between the father and the baby. For me, it helped my family a lot so, yes, I think it's really good." *Queen, San Francisco, CA*

Limitations of PFL

Mothers said the amount of wage replacement was not enough to make ends meet. Most mothers described challenges in living on the partial wage replacement PFL offered. Several said that they went into debt when using the program. This debt, they said, required payment of late fees for bills and affected their credit. Some struggled to pay for child care, particularly when providers required up-front payments. They also cited difficulties in paying back-due charges for their health insurance while they were on leave. Several said they had been unaware they would owe federal taxes on their PFL payments and later were surprised by those charges.

Mothers addressed the limited financial support of PFL in a variety of ways. Most received other assistance while away from work. Some women drew on public programs in addition to their PFL payments. About three-quarters mentioned using WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children). Some used SNAP (the Supplemental Nutrition Assistance Program, also known as “food stamps”). Others talked about the benefits of tax credits such as the Earned Income Tax Credit. Four who were laid off said they received unemployment insurance payments. Two mothers said they got child support payments. Several indicated they received cash assistance (Temporary Assistance for Needy Families) while on leave, and some appeared to participate with their babies in Medicaid or the Children’s Health Insurance Program. Two who participated in home visiting programs for new mothers got a range of services from their home visitor. Several said they received child care assistance—one participated in Early Head Start, and others got subsidies or subsidized slots.

Some mothers noted difficulties in getting public assistance. Some said they did not qualify; our demographic data confirmed that some mothers were unlikely to be income-eligible for key programs such as subsidized child care. Others said the system to apply was too complicated. Several mothers expressed reluctance to use government assistance.

Mothers supplemented their PFL payments by other means as well. Some said they had saved money in advance, and several drew on other sources of paid leave, such as vacation time. Many relied on their spouse or partner, or contributions from the baby’s father if they did not live together. Some got help from family members—one said her aunt paid her rent, a few others lived with parents or siblings, and family members offered free babysitting. Friends, community organizations, and churches helped with diapers and other baby needs. Some mothers did odd jobs.

Many mothers, though not all, said the length of leave was too short. The mothers appreciated having any paid time off at all. But many felt that about three months, the typical length of PFL combined with TDI leave, was insufficient. They felt they needed more time in order to be prepared to return to work and effective at their jobs. Many felt their babies required

“It’s like the bills that you really need to pay, you pay them. The ones that, like credit cards and stuff, you just let it go until you can start paying it again, which ruins your credit for the future.”
Victoria, Fresno, CA

“Child care was the hardest, finding affordable child care.... You’re not even getting full pay [on PFL], but now you have to come up with this money to pay the [caregiver] up front....It’s very taxing, it’s stressful. But you gotta go back to work, so what are your options?” *Nicole, East Orange, NJ*

“Yes, definitely [we used] WIC, since I did have to start giving the baby formula. I know that is very pricey. So that, for sure, has helped me. As well as, you know, just providing us with typical things like eggs, milk, cheese, yogurt, things like that. With our grocery bills, [WIC] has been a big help.” *Alice, San Jose, CA*

“That was a hard six weeks, really hard. It was my husband that was working during that time, and he was the one paying all the bills.” *Jen, Fresno, CA*

more time to be ready for nonparental care. Some took more time under the FMLA or parallel state law, or with their employer's agreement. Others quit work entirely, as discussed earlier. Most thought that between six months and a year would be more appropriate for the baby to enter nonparental care and to facilitate their own work return.

Some women said that gaining accurate information about the availability, requirements, and benefits of PFL was difficult. Mothers in the study gained information on PFL from a variety of sources. Some women were told about PFL by their employers, and some said they received notification from the state agency that administers PFL as they reached the end of their time on TDI. In each of the three study states, employers are responsible for notifying employees of the availability of PFL, at a minimum by posting a notice describing the program, though the exact requirements vary by state. Some employers appeared to give the mothers complete information about PFL and even helped them apply.

Some women said, however, that their workplaces did not notify them about the program, or that the information they received was unclear. In some cases, employers may not have known about PFL or their responsibility to communicate its availability. Some may not have felt a strong incentive to notify workers. Some employers appeared to misunderstand the program. For example, some mothers' comments suggested substantial confusion among their employers about the differences between PFL and the FMLA, which covers only certain eligible workers. Workers employed by staffing agencies seemed to have particular challenges. One factory worker, employed by a staffing agency rather than directly by the factory owner, was asked if she had learned about PFL from her employer. She responded, "No, because you know I work for an agency, and this agency doesn't give you details...I don't know if they are abreast of these things."

Many of the women we spoke with said they learned about the program from other sources. Most common were coworkers, family members, health care providers, the state's TDI and PFL programs and websites, and social service organizations and providers.

Many mothers said it was difficult to learn clear, consistent, and complete information about the program. Several of the mothers in the focus groups seemed to think, incorrectly, that FMLA eligibility requirements applied to PFL (e.g., one-year job tenure and a minimum firm size), possibly because this was what their employer understood. Several women realized during the focus group discussion that they had misunderstood their available benefits and had requested or received less TDI or PFL than they could have received.

Some did not understand how TDI and PFL related to each other. For example, one thought TDI was only for the period

"[We need] more than six weeks [of PFL]. You know, if we're planning to get child care, figure out our situations, a little bit more time [would be good], so we could figure that out." *Sarah, San Francisco, CA*

"You have to go back to work and one can never forget that.... I wished I'd had more time but you know that sometimes one has to go back to work, either because of your situation or so that the baby doesn't get used to you so much...the more the baby gets used to you, the harder it is to leave him." *Lucy, Providence, RI*

"My HR department didn't do anything for me. They did explain the program and it was very confusing to me. It made me think, 'Well, if you are a professional and it doesn't sound like you understand the program, how am I supposed to understand the program?'" *Tiffany, Sacramento, CA*

"My job is at a small company. I remember with my first child, I was like, 'You know I get the paid family leave.' He's like, 'No, you don't. We're under 20 employees' or whatnot. I had to fight it. Like it was a fight when I was on maternity leave to take it. I didn't even get the full time. He made me take my vacation and then I didn't get the full paid family leave the first pregnancy." *Nicole, San Diego, CA*

"My supervisor...she had a baby one year before, so she explained to me everything. Like, 'No, you have to do this and then that.' Yeah, [my employers] were very helpful." *Emma, San Diego, CA*

before birth, and she began her six weeks of PFL immediately after her baby was born. A few appeared to have been mistaken about their own PFL use and actually took only TDI. Prior research also found substantial levels of confusion about PFL and the differences among the leave programs (Winston et al. 2017, Tisinger et al. 2016, Setty et al. 2016).

Many mothers said they found navigating the state PFL systems to be challenging.

Many mothers we spoke with (though not all) said they found it difficult to interact with the state agencies that administered PFL. The program rules around topics such as taxation of benefits or intermittent use of leave were confusing to many. Mothers also said they did not understand the benefit calculations. Some said they received delayed payments or payments at erratic intervals. Some found the program websites hard to navigate. Most said they had trouble reaching agency staff, and some said that it was difficult to address errors such as delayed or shorted payments. These comments were fairly consistent across the three study states. One woman solved the problem of contacting PFL staff by using the number for the desk phone of an agency worker she got from her health care provider rather than the main number. Another contacted a different department to learn the optimal time to call the PFL agency.

However, some California mothers observed that the state's web-based system was easy to access. Several also commented on improvements in California's system as a whole since they had first interacted with it around the birth of an older child (the state agency has undertaken outreach and improvement efforts in recent years). Some mothers praised the elimination in California of a prior unpaid one-week waiting period and the increase in the wage replacement rate from about 55 to 70 percent for lower-income workers, both effective January 2018.

While some mothers had formal job protection, others worried about the lack of it.

As noted above, the FMLA offers formal job protection to eligible workers for leaves for family caregiving (it is estimated to cover 59 percent of private sector workers overall and about one-third of lower wage workers). This protection allows parents who take leave for the birth of a child to have their job, or an equivalent one, held for their return. Some states, including the study states, also have laws that are similar to the FMLA but expand on it in some way. Among the state PFL programs in our study, however, only Rhode Island's provided job protection for covered working parents. This meant that mothers in California and New Jersey did not necessarily have their jobs saved for them after PFL ended. In some cases, however, it was clear from the mothers' comments that their jobs were protected by the FMLA or similar state law, or their employers held their positions for them voluntarily.

Other mothers worked for employers that were too small for the FMLA to apply, or they had insufficient time on the job to meet its requirements. Some also said their employers were not supportive of their taking time off around childbirth. About half of the women in the study who did not return to work after childbirth said they were fired or laid off before or after childbirth. Some were fired while pregnant, and a few suggested they had been let go because of pregnancy-related health problems. Several were let go after childbirth. For some mothers, the lack of job

"A woman came to the field, one of those ladies from the county....She came to explain to us about the programs...and she is the one who told me....She told me, 'You can apply to [PFL].'" *Magali, Gilroy, CA*

"They were messing up my payments, so I wasn't getting the right amounts and I had to keep going down there and dragging my baby around. That was very inconvenient. The inconsistency [in my payments] didn't help anything." *Lilly, Fresno, CA*

"For like three weeks I couldn't get ahold of somebody. I called another department, it wasn't Paid Family Leave. But I called and they're like,...'If you call right before the end of the day before they stop answering their phone, they'll pick up.'" *Zara, San Diego, CA*

"With the new system it's very efficient. You can do everything online. You get money right away. You get it through the debit card. I think it's very efficient." *Hope, San Jose, CA*

protection was a clear cause of concern. One mother in a state without PFL job protection described the current system as “kind of scary...you take the opportunity to bond with your child and then you’re unable to return back to your job because they filled it with someone else.”

Discussion and Implications

Lower-income mothers face particular economic vulnerability around childbirth, a critical time both for them and for their young children. They tend to leave work at higher rates than other women do and are less likely to receive paid leave through their employers than higher-income women. Quantitative research suggests that PFL helps mothers stay attached to the workforce around childbirth, encourages attachment to their prior employers, and is associated with longer leave-taking, particularly for lower-income mothers. This qualitative study offers mothers’ perspectives on potential reasons for these effects. A [companion brief](#) looks at the reasons why mothers say they remained in the workforce, returned to their prior employers, or left the labor force altogether.

The mothers who participated in this study indicated several ways that the PFL program in their state helped them stay attached to work after they had their children. Key among them was the subsidized time PFL provided. With this time, they were able to arrange child care, recover physically and mentally, bond with their babies as the infants grew enough to make nonparental care more acceptable, establish breastfeeding, and prepare to pump on return to work, among other things.

PFL appeared to help all the mothers in the study, but in particular the most disadvantaged, who lacked additional income and sometimes social and family support to help them prepare for work while parenting a new baby. These mothers suggested that PFL let them stay with their baby after birth for more than a few days or weeks, or prevented them from feeling pushed out of the workforce altogether. Mothers highlighted limitations to the program, such as the amount of money and time, the lack of job protection, and administrative hurdles. However, most valued the benefits of PFL very highly. As one mother concluded, “Even with all the challenges and even with being how hard it was to get it and how hard it was to find out about it, it was still helpful....The fact that it is there is definitely beneficial.”

Mothers cited barriers to returning to work that were beyond the scope of PFL policies to address, regardless of their design or implementation. As the [companion brief](#) discusses, almost a third of the mothers in the study left work entirely around the time of childbirth; for many of them, PFL appeared beneficial but not sufficient to keep them attached to employment. Foremost among these barriers was the availability of adequate child care and its cost. In addition, the mothers identified challenges such as job scheduling that could accommodate parenting responsibilities and available child care, and inconsistent accommodations for breastfeeding.

This study suggests several directions for future research that could guide policy and practice. In particular, as additional jurisdictions consider adopting PFL, further analyses should be conducted of the trade-offs among core PFL program features. These include wage replacement rates (especially for lower-wage workers), leave length, extent of job protection, effectiveness of outreach efforts, and efficiency of customer service. The best-designed programs are of limited use if the people they are intended to help struggle to participate.

Program innovations, such as allowing mothers to phase out of PFL more gradually as they return to work, or assigning to new mothers a designated PFL navigator within the state agency to help them participate more easily in the system, could also be considered. Mothers could also be invited to communicate and share information with others in their state’s PFL program through support groups or websites. The mothers themselves raised several of these possibilities.

The implications of these trade-offs and innovations for program costs and funding needs, program take-up, parents' work attachment, and parents' and employers' experiences and satisfaction with the program should be part of these analyses.

In addition, the experiences of—and lessons from—lower-wage employers interacting with state PFL programs are an important area for further inquiry. Understanding better the experiences of lower-wage and hourly employers in learning about and participating in states' PFL programs could inform efforts to make implementation more effective. Identifying the barriers that hinder employers' effective participation in PFL, and highlighting successful workplace strategies, could offer valuable and actionable information to policymakers, employers, and others seeking to support parents' work and caregiving responsibilities.

Acknowledgements

The authors would like to thank Patrick Landers and Marissa Abbott of the Institute for Research on Poverty at the University of Wisconsin–Madison; Karen White and Yarrow Willman-Cole of Rutgers University; Helen Mederer of the University of Rhode Island; Christina Yancey and Kuangchi Chang of the U.S. Department of Labor; Robin Ghertner, Nina Chien, and Jennifer Burnszynski of ASPE; Pam Joshi of the Heller School at Brandeis University; Pronita Gupta of the Center for Law and Social Policy; the collaborating partner agencies and staff in the study states; and all the mothers we spoke with for their contributions to this study and this brief.

References

- AEI-Brookings Working Group on Paid Family Leave. 2017. "Paid Family and Medical Leave: An Issue Whose Time Has Come." American Enterprise Institute. Retrieved from: <http://www.aei.org/publication/paid-family-and-medical-leave-an-issue-whose-time-has-come/>
- Appelbaum, E. & Gatta, M. 2019. "Passing Paid Leave Laws Is Just the Beginning: Lessons from the Field on Raising Awareness." Center for Economic and Policy Research. Retrieved from: <http://cepr.net/images/stories/reports/paid-leave-2019-02.pdf>
- Baldiga, M., Joshi, P., Hardy, E., & Acevedo-Garcia, D. 2018. "Child Care is Unaffordable for the Majority of Working Parents, Especially for Low-Income and Black and Hispanic Working Parents." *Data-for-Equity Research Brief: Child Care Affordability*. Diversitydatakids.org. Heller School for Social Policy and Management, Brandeis University. Retrieved from: <http://www.diversitydatakids.org/files/Library/policy/ChildCare.pdf>.
- Baum, C. L., & Ruhm, C. 2016. "The Effects of Paid Family Leave in California on Labor Market Outcomes." *Journal of Policy Analysis and Management*, 35(2): 333–356.
- Byker, T. 2016. "Paid Parental Leave Laws in the United States: Does Short-Duration Leave Affect Women's Labor-Force Attachment?" *American Economic Review*, 106(5): 242–246.
- Federal Reserve Bank of St. Louis. 2019. "Civilian Labor Force Participation Rate: Women." FRED Economic Data. Economic Research, Federal Reserve Bank of St. Louis. Retrieved from: <https://fred.stlouisfed.org/series/LNS11300002>
- Gupta, P., Goldman, T., Hernandez, E., & Rose, M. 2018. "Paid Family and Medical Leave Is Critical for Low-Wage Workers and Their Families." Center for Law and Social Policy. Retrieved from: <https://www.clasp.org/publications/fact-sheet/paid-family-and-medical-leave-critical-low-wage-workers-and-their-families/>
- Houser, L., & Vartanian, T. 2012. "Pay Matters: The Positive Economic Impacts of Paid Family Leave for Families, Businesses and the Public." New Brunswick, NJ: Center for Women and Work, School of Management and Labor Relations, Rutgers, The State University of New Jersey.
- Joshi, P., Baldiga, M., Earle, A., Osypuk, T., & Acevedo-Garcia, D. 2016. "Reducing Disparities and Improving Access to Affordable Family and Medical Leave." Diversitydatakids.org. Presentation at Work and Family Research Network Conference, June 23, 2016.
- Klerman, J. A., Daley, K., & Pozniak, A. 2013. "Family and Medical Leave Act in 2012: Technical Report." Prepared for the U.S. Department of Labor. Washington, DC: Abt Associates.
- Lambert, S. J., Fugiel, P. J., & Henly, J. R. 2014. "Precarious Work Schedules Among Early-Career Employees in the US: A National Snapshot." University of Chicago Employment Instability,

- Family Well-Being, and Social Policy Network. Retrieved from:
https://ssa.uchicago.edu/sites/default/files/uploads/lambert.fugiel.henly_precarious_work_sch_educules.august2014_0.pdf
- Laughlin, L. 2011. "Maternity Leave and Employment Patterns of First-Time Mothers: 1961–2008." Washington, DC: U.S. Census Bureau.
- Milkman, R., & Appelbaum, E. 2013. *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press.
- Naccio, M. & Diana M. 2019. "New Jersey Expands Family Leave Laws." *The National Law Review*. Retrieved from: <https://www.natlawreview.com/article/new-jersey-expands-family-leave-laws>
- National Partnership for Women and Families. 2019. "State Paid Family and Medical Leave Insurance Laws: February 2019." Washington, DC: National Partnership for Women and Families. Retrieved from: <http://www.nationalpartnership.org/our-work/resources/workplace/paid-leave/state-paid-family-leave-laws.pdf>
- Rossin-Slater, M., Ruhm, C. J., & Waldfogel, J. 2013. "The Effects of California's Paid Family Leave Program on Others' Leave-Taking and Subsequent Labor Market Outcomes." *Journal of Policy Analysis and Management*, 32(2), 224–245.
- Setty, S., Skinner, C., & Wilson-Simmons, R. 2016. "Protecting Workers, Nurturing Families: Building an Inclusive Family Leave Insurance Program." New York, NY: National Center for Children in Poverty, Mailman School of Public Health, Columbia University. Retrieved from: http://www.nccp.org/publications/pdf/text_1152.pdf
- Smith, K., & Adams, N. 2013. "Child Care Subsidies Critical for Low-Income Families amid Rising Child Care Expenses." Policy Brief No. 20. Durham, NH: Carsey Institute, University of New Hampshire. Retrieved from: <https://scholars.unh.edu/cgi/viewcontent.cgi?article=1194&context=carsey>
- Stanczyk, A. 2018. "What Changes in Household Income Around a Baby's Arrival Tell Us About the Importance of Paid and Family Medical Leave." *Urban Wire*. Washington, DC: The Urban Institute. Retrieved from: <https://www.urban.org/urban-wire/what-changes-household-income-around-babys-arrival-tell-us-about-importance-paid-family-and-medical-leave>
- Tisinger, R., Johnson, M., Hoffman, A., Davis, C., Jean-Baptiste, M., & Tanamor, M. 2016. "Understanding Attitudes on Paid Family Leave: Discussions with Parents and Caregivers in California, New Jersey and Rhode Island." Prepared by L&M Policy Research for the U.S. Department of Labor. Retrieved from: https://www.dol.gov/asp/evaluation/completed-studies/Paid_Leave_AwarenessBenefitsBarriers.pdf
- U.S. Bureau of Labor Statistics, U.S. Department of Labor. 2018. "Table 32. Leave Benefits: Access, Private Industry Workers, March 2018." Employee Benefits Survey, National Compensation Survey. Retrieved from: <http://www.bls.gov/ncs/ebs/benefits/2018/ownership/private/table32a.htm>
- U.S. Department of Labor, Women's Bureau. 2016. "Labor Force Participation Rate by Educational Attainment and Sex, 2016 Annual Averages." Retrieved from: https://www.dol.gov/wb/stats/NEWSTATS/latest/Lf_par_rate_edu_att_sex_hisp2016_txt.htm
- U.S. Equal Employment Opportunity Commission. 2008. "Facts About Pregnancy Discrimination." Retrieved from: <http://www.eeoc.gov/facts/fs-preg.html>
- Winston, P., Pihl, A., Groves, L., Campbell, C., Coombs, E., & Wolf, S. 2017. "Exploring the Relationship Between Paid Family Leave and the Well-Being of Low-Income Families: Lessons from California." Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. Available from: <https://aspe.hhs.gov/pdf-report/exploring-relationship-between-paid-family-leave-and-well-being-low-income-families-lessons-california>