

# How the Financial Status of a Person Can Affect Their Ability to Take Unpaid Maternity Leave and as a Result, Lead to Gender, Health, and Financial Inequalities.

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## Abstract

Introduction: Maternity leave allows a mother and child to bond while healing emotionally and physically from childbirth. In the United States, however, not all employers have a paid maternity leave policy, and women often shorten their leave after childbirth for fear of losing their job. The Family Medical Leave Act (FMLA) is a US federal policy created with the aim to allow women to take maternity leave while securing their employment when they return. However, this is taken as unpaid leave. Additionally, access to FMLA unpaid leave is not universally available. Two case studies of mothers describing their difficulties with FMLA while recovering from childbirth were analyzed for themes and commonalities to help identify factors that may result in inequities across race, financial status, health and employment in a qualitative study. The case studies are examples that can be applied to many in the US. Financial status and job insecurity made taking unpaid maternity leave more difficult, and what influenced the amount of time spent on unpaid leave were found. Paid maternity leave is not always available for women, and they sometimes have to accept unpaid maternity leave via FMLA. This leads to inequities and additional financial, emotional and health burdens.

*Keywords: Identity, Gender, Socioeconomic class, Education, Politics*

## 1. Introduction

Maternal leave is the time a mother spends away from work after giving birth to a child. It allows the mother to heal physically and emotionally, and adjust to the needs of a new baby (Masters, 2022). A review of the literature shows that maternal leave is beneficial for the health of the mother and baby (Booth, 2023). Staehelin et. al. reported a review of 13 original studies which together found a positive association between the length of maternity leave and the mother's health. More specifically, increasing maternity leave from 6 or fewer weeks to 12 or greater weeks was associated with a reduction in depressive symptoms (Chatterji, 2004 and Hyde, 1995). McGovern et. al. reported that the length of maternity leave and maternal health has a direct association. With regards to the direct health of the child, it was found that the length of parental leave was inversely related to infant mortality rates (Ruhm, 2000).

As discussed above, there is a clear benefit to maternity leave. This benefit is even stronger when the maternity leave is paid leave. The transition to parenthood is difficult and takes a large toll on every new parent; these changes include weight changes, mood swings, hormonal shifts, and mood disorder risk (Abrams, 2022). A significant benefit of providing paid maternity leave is the overall improved health of women, both physical and mental. According to Abrams, paid leave after giving birth results in a 51% decrease in the risk of rehospitalization. This was demonstrated in Norway when the 12-week unpaid leave policy was changed to a 16-week paid leave policy, leading to a dramatic increase in the health of mothers in terms of blood pressure, pain levels, exercise, and smoking behaviors (Abrams,

2022). Paid parental leave policies not only bolster health, but they also improve household security, relationship security, and reduce the levels of intimate partner violence. After California passed its paid family leave law, poverty risk among mothers of infants decreased by more than 10% (Abrams, 2022). Aside from physical benefits, paid maternity leave improves the mental health of parents.

Providing paid leave also results in greater health for the newborn children. Paid leave is associated with lower infant mortality rates and higher rates of vaccination, especially for lower income families (Abrams, 2022). The likelihood of infants being re-hospitalized in the first year is reduced by 47% (Coombs, 2021). A child's development and immunity is boosted as well due to the fact that women with access to paid leave breastfeed their children more often (Abrams, 2022). There is also an association between paid maternal leave and brain activity in infants that causes more mature early cognitive functioning (Abrams, 2022). Toddlers who had parents with paid parental leave had better language skills and fewer behavioral issues. The incidence of head trauma in children younger than 2 years old has been reduced when parental paid leave is provided due to lower levels of stress and abusive behavior of parents (Coombs, 2021).

Many countries outside of the United States (US) have recognized the need to support their working mothers and fathers in the early stages of parenthood and have actively taken measures to ensure that this support is provided. At least 178 countries have guaranteed paid maternity leave and 50 countries have guaranteed paid paternity leave (Human Rights Watch 2011). More than 100 countries offer a minimum of 14 weeks of paid maternity leave, including some of the most developed nations in the world such as Canada, Australia, and the United Kingdom.

Furthermore, for members of the Organization for Economic Co-Operation and Development (OECD), the average country provides 18 weeks of paid maternity leave, with 13 of these weeks at full wages (Human Rights Watch, 2011). The US is the only member of OECD that does not offer a national paid leave policy. Currently, there are only eight countries that do not guarantee paid leave, and of these eight countries, the United States is the only country that is classified as a wealthy or high-income country (Sholar, 2016). The US falls short of its international counterparts with about one-fifth of U.S. employees having little or no access to maternity leave (Ray, Gornick, & Schmitt, 2008). Paid leave also strengthens a country's generosity and performance by giving parents who work for low wages the financial security they need to take leave and care for their new children (Ray, Gornick, & Schmitt, 2008). The US as a country, however, has not implemented a universal paid leave policy. There are a few states that have implemented paid leave policies, such as New York. The benefits are evidenced by a 20% reduction in the number of female workers who left their jobs in the first year after giving birth and a 50% reduction in the first five years (Miller, 2020). For women without access to family paid leave, 30% quit their job within a year after giving birth and one in five did not return to employment over 10 years (Miller, 2020).

In 1993 the US enacted the Family and Medical Leave Act (FMLA). This is a federal labor law that was established to help lessen the detriment that workers experience when they have family emergencies and have to take time away from work. Maternity leave is one of the conditions that meet this criteria. Eligible employees are able to take up to 12 weeks of unpaid leave within a 12-month period for certain circumstances such as the birth of a child, childcare within the first year of birth, placement or subsequent care of an adopted or foster child, care for a relative with a serious health condition, or a serious health condition that can prevent the employee from performing his or her job's essential functions (French, 2019). FMLA guarantees that if a parent takes unpaid leave from work to take care of a newborn, their employed position will be protected, and their health benefits will continue while on leave. After the twelve weeks are over, they will be able to resume their job at an equal level of opportunity as was offered before the leave.

Although FMLA was passed with the good intentions of protecting employees needing time away from work for the reasons listed above, it is an imperfect solution. As noted above, even though FMLA ensures job security, the FMLA protected time away from work is unpaid. Masters explains that there are other restrictions to qualifying for FMLA. There are many stipulations for eligibility such as a required year of working at least 1,250 hours with the employer, and that the employee needs to continue making payments to the company plan for health insurance.

Additionally, FMLA only covers one person in a couple per company, you cannot be one of the highest earners within your company, and your employer may contest leave in certain circumstances (Masters, 2022). She explains that only about 60% of American workers qualify for FMLA benefits.

## 2. Research Objectives

Two maternal case studies are examined to identify factors that would make taking maternity leave difficult. In the first case, the mother takes FMLA maternity leave, but as an unpaid benefit. This will allow us to find stressors under this situation. In the second case we find a mother who was not eligible for FMLA maternity leave, and instead used limited vacation time for a short leave. These cases will help us to identify gender, health, and socioeconomic stressors related to these two case studies that can be broadly applicable to the US population.

## 3. Methods

This qualitative study analyzes the experience of 2 different women who faced challenges with accessing paid leave. By doing a qualitative study, first-hand experience that discusses why one may or may not take maternity leave is able to be obtained which allows for factors in decision making to be narrowed down. Using two experiences pulled from the internet, these women not only talk about their decision to take maternity leave, but also how their decision affected their day to day lives and financial situations. Marie, a high school teacher in New York, took unpaid leave after giving birth but had to return to work before she was ready and resulted in a difficult and unstable childcare situation for her and her family. Jessica Shortall, a social entrepreneur, discusses how unpaid maternity leave leads to gender inequality and economic issues due to the working mothers not being able to work at their full potential, and as a result, sometimes choosing to leave the workforce. She mentions how society hides the struggles of working mothers behind a perfect facade and puts immense pressure on mothers to be able to handle both working and taking care of a baby. She tells the story of Tara, the sole earner for her family who struggles with postpartum depression and caring for a toddler and a newborn during her short, allotted maternity leave from work. The experiences of these two women, Marie and Tara, will help to analyze the struggles of maternity leave.

## 4. Results

### 4.1 Case Study 1: Marie

Marie is a 33-year-old high school teacher for 9 years, living in New York. She has two children: a 4-year-old son, Max, and newborn daughter, Olive. Marie shared her story with the International Labour Organization to make people aware of the difficulties that come with maternity leave. After giving birth to her second child Marie wanted to stay home and care for her newborn child, but she was not able to take paid maternity leave or sick leave because she had used up her days while caring for her first child. Fortunately, the job that Marie held offered unpaid maternity leave, securing her job even though she would not be paid for the time away (similar to FMLA leave).

Taking unpaid maternity leave meant that her growing family would be living off only a single income for a few months, putting her family in a difficult financial situation. It also placed her partner under additional pressure because he had to work overtime to generate additional income to provide for his family, instead of spending time with his newborn.

Unfortunately, Marie was only given 12 weeks to return before her health insurance would be put at risk. If she didn't feel ready to go back, she would be putting herself at risk for additional health problems such as postpartum depression. If she decides to take more time to recover, she risks compromising her health insurance and job position. Going back to work also meant Marie needed assistance with her family, however, childcare was an obstacle for Marie's family. It was expensive and caused her to be late to work daily due to having to drop her son to daycare every morning. Her work productivity was severely less than her peers due to this stress and she consistently would come in late or not at all.

Marie was lucky that her coworkers supported her by "providing (her) with space to pump breast milk" and covered her if she had conflicts with childcare, but even she felt that she received "no help or support from the government and social systems." For Marie, "breastfeeding is a job" and having to return to work dampened her ability to feed her child. Pumping can be very irregular and unexpected, so if it occurred while she was teaching, it could have disrupted her job, students, and it was also emotionally exhausting for her.

What Marie experienced isn't unique and is something that many women deal with after giving birth. The lack of paid maternity leave has a direct correlation to gender, wage, and experience gaps. In traditional gender roles, childcare is often delegated to the mother. When women take this time off, they are at risk of earning lower wages and being passed up for promotions. The downstream effect of this was the risk of losing her job due to having limited time to recover from giving birth. Since Marie is a teacher, this affected the education that she was able to provide to her students, causing all of them to be indirectly affected by her limited maternity and healthcare benefits.

#### 4.2 Case Study 2: Tara

Tara is a working mother with two children, a 2-year-old son and a newborn daughter. Tara was a manager for a small business, one that offered no paid maternity leave and is exempt from FMLA. On January 29, 2016 Tara gave birth to her second child and began her maternity leave. Tara's husband had a medical condition that prevented him from working therefore their family relied on Tara's income. Money was tight from medical expenses and the cost of providing for a full family on a single income. Tara's maternity leave consisted of 20 days, all of them from rolled over vacation days. Tara's company offered no paid leave, and she is ineligible for FMLA due to the low employee count at her company. Even if she were eligible, Tara would not have been able to take the unpaid leave because her "family can't afford the loss of even one paycheck." The doctors and nurses that attended to Tara during her C-section birth were shocked to hear about her situation and were worried about how returning to work so fast would affect Tara's health. Experts recommend 2 to 3 weeks of complete rest following a C-section surgery. Returning to work too quickly can be extremely dangerous considering that it is a major surgery. Tara's doctors also suggested that mothers should stay at home for 3 to 6 months following the birth of a child.

Ten days before returning to work, Tara emailed her bosses to let them know her expected date of return and mentioned "doing that gave me anxiety". Tara was "pretty depressed" and "feeling stressed about catching up at work" upon her return. She had a follow up appointment with her doctor to check for issues, both physically and mentally, but she said that regardless of the result of the appointment, "even if the docs checked it out and didn't think I was ok I'd still have to go back for the paycheck." This was a major health risk, causing her to later have to take time off from work and putting her in a worse situation. Tara was diagnosed with postpartum depression, a common problem for women after giving birth. Tara had less than 3 weeks leave. Increasing maternity leave from less than 6 weeks to at least 8 weeks is associated with a decline in depressive symptoms of 11% and a decline in depressive symptoms of 15% for at least 12 weeks. (Stahelin et al, 2007) In addition, Tara didn't feel "ready" to return to work, but she had no other option. She was exhausted from working all day and staying up all night to feed her kid. As a result, her work productivity was significantly lower, putting her job at risk. She was also feeling upset from the loss of meaningful time with her kids. With Tara at work and her husband busy caring for 2 young children, their household chores such as cleaning and cooking suffered.

### 5. Discussion

Maternity leave is an important time for a mother and a newborn child that can be beneficial for the health of the mother and early childhood development. Internationally maternity leave has been viewed as an essential component for parent and child and has been implemented as national policies abroad. In the US, however, there is not a universal policy for paid maternity leave. As an alternative, the US instituted FMLA which can be used in instances such as the birth of a child. However, FMLA is not a fool-proof solution as alluded to previously.

FMLA is unpaid leave, placing significant stress on families who might not be able to afford being without a paycheck or salary for that time. This especially hits hard for low-wage workers. As seen in Tara's case study, she was unable to take unpaid leave due to the fact that her income supported the family. Furthermore, her small business did not have a paid maternity leave policy. Tara suffered from postpartum depression and her efforts at work were not as efficient due to her exhaustion. We see here that if the US had a national policy for paid maternity leave, this would have afforded Tara better postpartum health benefits, improved bonding with her child, and improved health of the baby (Abrams 2022 and Coombs 2021). Employees who work part-time or have low-wage jobs are those for whom

access to paid leave is most severely limited; since paid leave is limited, FMLA would provide at least some job security if they take maternity leave. Among the bottom 25% of low-paid workers, only 9% had access to paid family leave in 2020 (Coombs, 2021). People who get paid leave are much more likely to be affluent, well educated, and white, which only strengthens the racial inequities, rather than reducing this disparity (Abrams, 2022). People of color are much more likely to experience additional stressors during parenthood. The U.S. Bureau of Labor Statistics data indicates that about 47% of white parents, 41% of black parents, and just 23% of hispanic parents have access to paid leave (Abrams, 2022).

Even in cases where a mother qualifies for FMLA, this act only helps a small percentage of people. This is due in part to the fact that many mothers cannot afford to be on unpaid leave for 12 weeks since they have to continue paying their previous financial obligations as well as the new obligations that come with having a child. Women may choose to limit their maternity leave in order to provide a steady income, which can lead to long-term problems from the absence of safe and necessary recovery of the body and bonding with the newborn. This is particularly true when the mother has a Cesarean section or a complicated natural childbirth. In Marie's case we noted that she was able to take maternity leave, however this was taken as unpaid leave. Given her family situation, this creates a significant stress in caring for her 2 children and places a significant burden on her husband to work overtime. Additionally, she felt rushed to return to work after 12 weeks, even though she did not feel ready, out of fear of losing her health benefits and employment. While FMLA protects one's employment, it only does so for up to 12 weeks. This finite and generalized length of time may be short of what new families need (Abrams 2022).

Gender equity is diminished in the absence of paid parental leave policies. Traditional gender roles have created the divide between how women and men are expected to bear the load of caring after children. We saw this in the case of Marie when her husband worked overtime while she was on unpaid maternity leave. Often, women would reduce their employment or their wages due to the expectation that they would be the primary caretaker. This leads to the gender pay and opportunity gap in many fields of employment.

Congress has consistently been reluctant to expand FMLA or enact a new paid leave act, restricting this progress. One reason for this is that socially conservative lawmakers oppose such policies because they are advocates for limiting the government's role in family affairs. Another reason is the difficulties in organizing a campaign for FMLA expansion that will gain enough support and attention. The most compelling explanation for why FMLA is not being broadened in the United States, according to Sholar, is that businesses often oppose these mandates since they fear the loss of profit or the ability to stay competitive. However, research has suggested the contrary. The expansion of FMLA will not harm these businesses and will actually help them form a stronger work environment and relationship with their employees by increasing communication and preventing women from leaving the workforce. Since businesses have such powerful lobby groups in the United States, the legislators often protect the business' concerns, even if they are unfounded (Ray, Gornick, & Schmitt, 2008). Looking at the experiences other countries have had implementing flexible parental leave with pay and job protection, it appears to be feasible and not harmful to businesses. Furthermore, it promotes gender equality, makes the work environment stronger, and results in more profit.

The financial status of a person can affect their ability to take unpaid maternity leave and as a result, leads to gender, health, and financial inequities. As Marie and Tara described in their recollection of their experiences, the lack of support from government systems put their families at risk of financial instability, created an unhealthy environment, put their jobs at risk, and has affected the relationship they are able to have with their children. Marie reflected on her struggles with childcare, and the difficult position she was put in when she had to make the choice between good health and healthcare. Tara described her postpartum depression and having to return to work after a major surgery because her family could not afford for her to miss a day of work. The ability to take time to recover after an emotional and exhausting experience should not be treated as a privilege but more so as a basic right. These women are in dangerous states, both mentally and physically, yet they are being treated as machines who do not need to heal. Something has got to change.

## **6. Conclusion**

The US has not enacted a paid maternity leave policy due to pressure from lobbyists and resistance from

employers. Because of this, gender equity is diminished, and traditional gender roles after the birth of a child still contribute to the wage gap between men and women. The lack of a national paid maternity leave policy also creates further disparity between the lower economic class and the middle and upper classes. The health of a mother and her child and the bond they form in early childhood should not be determined by socioeconomic class, but it should be a protected privilege embraced by our national government. As a nation we could benefit from this policy as it would reduce stress, reduce mortality, improve perinatal health of the mother and child, and empower families to spend time with each other and not worry about job security. Paid leave policies have so many more benefits than those unique to the mother and baby, they can strengthen the country overall.

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