



EMPOWERING WOMEN

POLICY SOLUTIONS FOR POSTPARTUM WORKFORCE REENTRY

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ABSTRACT

This policy memo analyzes the pressing challenges faced by women returning to the workforce after childbirth, emphasizing the need for government intervention due to lack of employer support and increased discrimination. The postpartum period's physical, emotional, and logistical complexities lead to 1 in 4 women contemplating leaving their jobs. The proposed government role is seeking to create a healthier workforce, reduce postpartum complications, and alleviate the economic burden associated with insufficient support. Legislative actions must adopt preventative measures, address discrimination, and consider the intersectional needs for women of color.

Policy alternatives, ranging from expansions of the Family Medical Leave Act (FMLA) to federal measures like the Family and Medical Insurance Leave Act, advocate for paid maternity leave. All of which emphasize the idea that the 12 weeks are insufficient. The recommended policy solution for North Carolina proposes a paid maternity leave program covering up to 6 weeks with 90% salary coverage, recognizing the need for future expansion. Along with other changes this aims to create a more supportive work environment. In conclusion, proactive government intervention is critical for addressing postpartum health issues and supporting women in the workforce. Prioritizing women is prioritizing the workforce.



PROBLEM DEFINITION

For many women returning to the workforce after having a child is a daunting and overwhelming task. The period following childbirth often involves a myriad of physical, emotional, and logistical adjustments, making it difficult for women to seamlessly transition back into their careers. On top of the changes that they are enduring, the often lack of support from their employers adds an extra burden to their recovery. According to a poll by the Bipartisan Policy Center, 1 in 4 women have considered leaving their jobs due to a lack of reasonable accommodations or fear of discrimination from an employer (2022). On that same note, 1 in 5 women have experienced discrimination related to pregnancy in the workplace, with the majority of the reports being from younger women (Bipartisan Policy Center, 2022). A study done by Baylor University, showed the link between women who perceived pregnancy discrimination with lower both weights, increased postpartum trips to the doctor and increased levels of postpartum depression symptoms (Robinson, 2020).

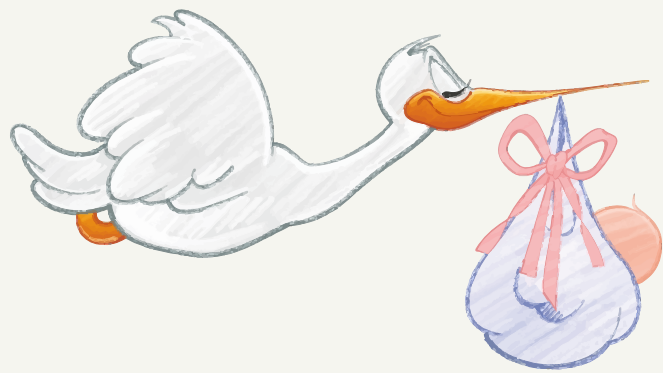
This policy memo will focus specifically on women in their postpartum period as they move to reenter the job force. The postpartum period is largely considered to be “the six to eight weeks after birth because the effects of pregnancy on many systems have largely returned to the pre-pregnancy state at this time” (Berens, 2023). However, recovery looks different for all individuals and for this reason the American College of Obstetrics and Gynecology considers this period to be up to 12 weeks long (Berens, 2023). One article by Wendy Powell argues that the lack of understanding around women’s health is what’s holding women back in their career (2021).

95% of women said that it would be beneficial for their bosses to take employee welfare courses in postnatal health, to be more empathic in the challenges that their employees face (Powell, 2021). After giving birth the majority of women intend to return to their same employers but only 24% actually follow through, the rest stay home or find new, more accommodating employers. Women often fear and experience discrimination and a lack of empathy and understanding from employers. What they really need are workplaces that support them loudly and proudly.

While this policy solution will focus on the general population of women in their postpartum period, it is important to note that many of these struggles detailed disproportionately affect women of color. Research has repeatedly shown that African American women are more than twice as likely to experience postpartum depression as white women; with the risk for Hispanic women also twice as high (Sandoiu, 2020). To approach this conversation without acknowledging its intersectionality, would be failing to address the full picture.

95%
**OF WOMEN THINK THEIR
EMPLOYERS
SHOULD TAKE COURSES IN
POSTNATAL CARE**

ROLE FOR GOVERNMENT



Government intervention is essential in addressing women's postpartum health issues. The wide ranging impact these issues have on the economy, workplace dynamic, public health and the wellbeing of society warrant a proactive role for the government in addressing the challenges women face returning to the workforce after childbirth. By supporting mothers during their postpartum period, the government can contribute to a healthy and more robust workforce. Transitioning to preventative legislative action and boosting postpartum health reduces the healthcare costs associated with postpartum complications and issues, thus promoting the economy. Beyond economic implications, legislative action can reinforce and establish protections against the discrimination women face based on pregnancy and during the postpartum period. Ensuring that all women receive equitable support and a more equitable transition back into the workforce, government intervention needs to specifically address the intersectionality of the issue. Recognizing that women of color face additional barriers and challenges, policy can focus on expanding resources and support and mitigate the disproportionate impact of postpartum issues on marginalized populations.

The impacts of this issue are deeper than they may appear. A 2018 study in Maternal and Child Health Journal found that women who took a paid maternity leave experienced a 47% decrease in the odds of re-hospitalization for their infants and a 51% decrease in the odds of being re-hospitalized themselves in the postpartum period (Booth, 2023). The government's lack of prioritization of women's health issues and postpartum health issues is detrimental to the well being of women and children, but also society. If women make up 50% of the workforce and at least 85% of working women will become mothers during their career, why is this not an issue we are addressing with more importance?

CALIFORNIA	COLORADO	NORTH CAROLINA
California's Paid Family Leave insurance program (PFL) provides you 60-70% of your wages	FAMLI provides Colorado employees with twelve weeks of paid family and medical leave	Up to 12 weeks of unpaid leave during a 12-month period to care for a newborn, adopted or foster child
After California passed its paid family leave law, poverty risk among mothers of infants decreased by more than 10%	Funded through a payroll tax paid half by employers and half by employees	Workplaces are not required to give the full 12 weeks of pregnancy leave and many women only receive 6-8 weeks of leave
Up to 8 weeks of total pay	Eligible to take paid leave after they have earned at least \$2,500 in wages within the state over a one-year period	There's no separate state law in North Carolina that gives you the right to take pregnancy leave or parental leave

POLICY CONTEXT

PREGNANCY WORKERS

FAIRNESS ACT

In the summer of 2023, the US government passed the Pregnancy Workers Fairness Act (PWFA). This requires that employers provide “reasonable accommodations” to a worker’s known limitations related to pregnancy, childbirth, or related medical conditions, unless the accommodation will cause the employer an “undue hardship.” (US Equal Employment Opportunity Commission [EEOC], 2023). Since this is a newer policy there isn’t much existing research about its enforcement and benefits. However one thing to be considered is that there is no definition for “undue hardship”. Employers can and have argued that these accommodations are causing stress on the company and have used it as ground to fire or deny accommodations.

FAMILY & MEDICAL

LEAVE ACT

When returning to work women are expected to work as if their bodies haven’t gone through immense changes . The American Public Health Association, the Society of Maternal-Fetal Medicine, the American Academy of Pediatrics and the Pediatric Policy Council recommend a minimum of 12 weeks of paid parental leave (Family Forward NC). Despite this, the average maternity leave for women is a little over 4 weeks, which falls within the postpartum recovery phase (Hastwell, 2023). Currently the United States is the only developed nation in the world with no national paid leave (Family Forward NC). Few states have policies that support women and their children in this transition phase and the states that do have them, the policies are unclear and loosely enforced. Currently, 11 states offer paid family and medical leave programs (National Conference of State Legislators [NCSL], 2022). Of these programs Oregon has consistently been ranked in the top, with some of its highlights being 12 weeks per year for personal or family health conditions, childbirth, adoption, or reasons related to sexual assault, stalking or harassment (NCSL, 2022). North Carolina has no set maternity leave laws, certain employers must allow employees to take time off under the Family and Medical Leave Act (FMLA). But even then the standards of FMLA are not high. It requires all public agencies, schools, and companies that employ more than 50 people to allow up to 12 weeks of unpaid leave for the birth or adoption of a child (Gibbons Law Group). Even with these regulations in place more than 50,000 pregnancy discrimination claims were filed with The Equal Employment Opportunity Commission and Fair Employment Practices Agencies within the last 10 years (Robinson, 2020).

POLICY ALTERNATIVES

1

Increase in paid maternity leave.

First focusing statewide in North Carolina, one policy approach can start with expanding the FMLA, the Family Medical Leave Act, from up to 12 weeks of unpaid leave during a 12 month period after childbirth, to up to 12 weeks of paid leave during the 12 month period after childbirth and up to 24 weeks of leave in total duration during the 12 month after birth period. While this policy solution might be considered a sudden of abrupt change, UNICEF recommended six months, or 24 weeks as the ideal amount of time for maternity leave policies. North Carolina would not be the first state to expand FMLA and adopt paid maternity leave as 11 states – California, Colorado, Connecticut, Delaware, Massachusetts, Maryland, New Jersey, New York, Oregon, Rhode Island, and Washington—and the District of Columbia currently offer paid family and medical leave. These benefits are offered by the state or the employers depending on the state policy.

3

Implicit bias training and inclusive hiring

Implementing implicit bias training and focusing on more inclusive hiring practices are essential to protecting mothers in the workforce. Implicit bias training and inclusive hiring processes not only acknowledge and fight against the disproportionate impact postpartum health issues and stress have on employees of color, but also ensure that pregnant women and women in the postpartum period are not experiencing discrimination due to their status.

2

More moderate transition to paid maternity leave

A less aggressive and more moderate approach would be transitioning from the FMLA federally provided 12 weeks of unpaid maternity leave during a 12 month period in North Carolina, to 6 weeks of paid maternity leave during a 12 month period, and 12 additional weeks of unpaid leave. This policy alternative would still allow mothers financial, physical and mental relief throughout their postpartum journey and increase the support they currently have, decreasing the medical costs exhausted in fixing the issues exacerbated by unpaid and shortened maternity leave.

4

On the Federal level

Federally, legislators and Congress can enact an updated Family and Medical Insurance Leave Act. This updated act would ensure access to paid medical leave, which includes and primarily focuses on maternity leave, and meets the needs of the postpartum process which includes childcare and increased healthcare and living costs. Once comprehensive federal legislation is passed, employers can provide additional hours of leave and supplement support for their employees during their postpartum period.

5

POLICY SOLUTIONS AND CONCLUSION

While the following policy memo went into a variety of alternatives to address the transition for postpartum women back into the workplace in North Carolina specifically, our policy recommendation combines a few of these. In combination with a paid maternity leave program similar to that of Oregon's, we also recommend a mandated implicit bias training program for all executive members/managers of companies and those who oversee employees. The hope is that in combination with stronger paid maternity leave, women can begin to feel more supported, understood and be less fearful of discriminatory practices. Having conversation and reducing the stigma around women working while pregnant will allow for stronger accommodations and to encourage women to speak up.

In regards to paid maternity leave, we recommend North Carolina enacts an up to 6 week guaranteed maternity leave requirement with coverage of 90% of an employees salary. Even at 6 weeks, which is half the recommendation of the American Public Health Association, change takes time and we recognize that it may be a challenging adjustment for employers to go from no paid leave to 12 weeks. The hope would be that in coming years employers will begin to see the benefits, such as employee retention, work quality and overall satisfaction, in offering paid maternity leave and extend the allotted weeks. These benefits would be implemented by employers with assistance from the state as needed.

Active engagement in legislative efforts surrounding postpartum health creates an environment where mothers, and women preparing to be mothers, are not only encouraged to return to work and embrace their pregnancies, but are provided with the tools and healthcare needed to thrive personally and professionally. This protection should not be a luxury in an industrialized nation. Paid maternity leave is a necessity that will save the lives of women and children in America. By prioritizing postpartum health through policy and legislation, we will be able to promote a healthier and happier workforce and improve overall societal well being.

SOURCES

50+ maternity leave statistics in 2022. (2020, November 4). Shortlister. <https://www.myshortlister.com/insights/maternity-leave-statistics>

Average paid maternity leave by state in 2023. (2023, November 1). Annuity.Org. <https://www.annuity.org/personal-finance/financial-wellness/average-paid-maternity-leave-by-state/>

Bpc – morning consult: 1 in 5 moms experience pregnancy discrimination in the workplace | bipartisan policy center. (2022, February 1). Retrieved November 13, 2023, from <https://bipartisanpolicy.org/blog/bpc-morning-consult-pregnancy-discrimination/>

Hastwell, C. (2023, March 1). How competitive is your company's paid parental leave? Great Place To Work®. Retrieved November 13, 2023, from <https://www.greatplacetowork.com/resources/blog/how-competitive-is-your-companys-paid-parental-leave>

Hidalgo-Padilla, L., Toyama, M., Zafra-Tanaka, J. H., Vives, A., & Diez-Canseco, F. (2023). Association between maternity leave policies and postpartum depression: A systematic review. *Archives of Women's Mental Health*, 26(5), 571–580. <https://doi.org/10.1007/s00737-023-01350-z>

How maternity leave affects your health. (2022, September 7). Forbes Health. <https://www.forbes.com/health/womens-health/how-maternity-leave-affects-health/>

Maternity leave laws in north carolina. (n.d.). Gibbons Law Group, PLLC. Retrieved November 13, 2023, from <https://www.carolinaemploymentlawyer.com/library/what-are-the-maternity-leave-laws-in-north-carolina-phil-gibbons-law.cfm>

Parental-leave. (n.d.). Family Forward NC. Retrieved November 13, 2023, from <https://familyforwardnc.com/family-forward-policies/parental-leave/>

Ph.D, B. R. (2020, July 11). Pregnancy discrimination in the workplace affects mother and baby health. Forbes. Retrieved November 13, 2023, from <https://www.forbes.com/sites/bryanrobinson/2020/07/11/pregnancy-discrimination-in-the-workplace-affects-mother-and-baby-health/>

Postpartum depression in women of color: 'More work needs to be done.' (2020, July 17). <https://www.medicalnewstoday.com/articles/postpartum-depression-in-women-of-color-more-work-needs-to-be-done>

Powell, W. (2021, March 19). Is a lack of understanding around women's health holding women back in their career? MedCity News. <https://medcitynews.com/2021/03/is-a-lack-of-understanding-around-womens-health-holding-women-back-in-their-career/>

State family and medical leave laws. (n.d.). Retrieved November 13, 2023, from <https://www.ncsl.org/labor-and-employment/state-family-and-medical-leave-laws#:~:text=Paid%20Family%20Leave,paid%20family%20and%20medical%20leave.>

The National Partnership for Women and Families. (2023). The Family And Medical Insurance Leave (FAMILY) Act. <https://nationalpartnership.org/wp-content/uploads/2023/02/family-act-fact-sheet.pdf>

The urgent necessity for paid parental leave. (2022, April 1). <https://www.apa.org/monitor/2022/04/feature-parental-leave>

Uptodate. (n.d.). Retrieved November 13, 2023, from <https://www.uptodate.com/contents/overview-of-the-postpartum-period-normal-physiology-and-routine-maternal-care>

What you should know about the pregnant workers fairness act. (n.d.). US EEOC. Retrieved November 13, 2023, from <https://www.eeoc.gov/wysk/what-you-should-know-about-pregnant-workers-fairness-act>