



## Returning to Work and Paid Leave

### Background

- One in four women return to work within 10 days of giving birth.
- Only 14% of American workers—and only 5% of low-wage workers—have access to paid leave.
- The United States offers 12 weeks of unpaid leave under the 1993 Family Medical Leave Act, which covers approximately 60% of the workforce.
- The standard postpartum maternity leave, which lasts 6 weeks, may not be appropriate for all women. When maternity leave is unpaid, some women may need to return to work sooner than 6 weeks to minimize lost income. Other women may need longer postpartum leave to promote family well-being.
- Time off from work after childbirth benefits women by allowing time for physical recovery, establishing breastfeeding, developing a strong emotional bond with the newborn, and attending health care appointments.
- Paid family leave helps to eliminate the barriers to breastfeeding, particularly for women of color. Enabling optimal breastfeeding would prevent 2,619 maternal deaths and 721 fetal deaths annually in the United States.
- Paid leave can reduce risk for child abuse and neglect.
- Partners with access to paid leave are encouraged to take parental leave and serve as care-givers, which has several positive effects for families. Male partners are twice as likely to take paid leave if they have access to a broad paid family and medical leave program.
- More than 2 million college-aged women (ages 18–24 years) become pregnant each year. Women who give birth while in school face unique challenges when they return. Teenagers who give birth while in high school are at high risk of never graduating.

### Assessment

The following are recommendations regarding prenatal care, family leave, and returning to work:

- During prenatal care
  - ask parents about their plans to return to work after the birth.
  - encourage parents to find out what family leave provisions are available from their employer.
  - ensure each parent is aware of his or her rights under the Family Medical Leave Act, state parental leave provisions, and the break time for breastfeeding women provision of the Fair Labor Standard Act
  - assist women with advocacy to employers for practices that promote well-being of new families. These can include structural support for breastfeeding, health care provider facilitation of child care, and accommodation of part-time work.

- Family leave paperwork for employers and insurance companies should be completed in cooperation with childbearing women to ensure that their needs are met without unintended consequences such as termination.
- Returning to work
  - There are no standardized or validated tools for assessing a woman's readiness to return to work after maternity leave.
  - Evaluation of readiness to return to work should include a comprehensive assessment of a woman's physical and psychological health, family needs, and work requirements.
  - New parents may benefit from referrals to social workers or community agencies for assistance in the transition back to work after childbirth.
- All health care providers who care for women and families should advocate for increased paid parental leave as a universal right that benefits child development, families, and society.

## Resources

### The American College of Obstetricians and Gynecologists Clinical Guidelines

- ❖ Employment considerations during pregnancy and the postpartum period. ACOG Committee Opinion No 733. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2018;131:e115–23.

*Provides information on employment during pregnancy and the postpartum period and covers topics such as work accommodations, medical leave considerations, and note-writing for obstetrician–gynecologists.*

- ❖ Health care for pregnant and postpartum incarcerated women and adolescent females. Committee Opinion No. 511. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2011;118:1198–202.

*Outlines the special health care needs of pregnancy and incarcerated women and specific issues related to the use of restraints during pregnancy and the postpartum period.*

- ❖ Health care for women in the military and women veterans. Committee Opinion No. 547. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2012;120:1538–42. *Outlines how to assess the special health care needs of women serving in the military.*

- ❖ Optimizing support for breastfeeding as part of obstetric practice. Committee Opinion No. 658. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2016;127:e86–92.

### Health Care Provider Resources for Patient Care

- ❖ Center for WorkLife Law. Helping patients seek breastfeeding accommodations. Available at: <https://www.pregnantatwork.org/healthcare-professionals/breastfeeding/>. Retrieved March 1, 2018.

*Resource for health care professionals to help patients seek pregnancy and breastfeeding accommodations at work. Includes fact sheets and sample health care provider notes to employers.*

- ❖ United States Breastfeeding Committee. Who is covered by the law? <http://www.usbreastfeeding.org/p/cm/ld/fid=231>

*USBC details federal law relating to workplace accommodations for breastfeeding moms.*

## Health Care Provider Resources for Policy and Advocacy

- ❖ American College of Obstetricians and Gynecologists. Paid parental leave. Statement of Policy. Washington, DC: American College of Obstetricians and Gynecologists; 2016. Available at: <https://www.acog.org/-/media/Statements-of-Policy/Public/92ParentalLeaveJuly16.pdf?dmc=1&ts=20180216T1342384350>. Retrieved March 1, 2018.  
*ACOG Statement of Policy endorsing paid parental leave at 100% with benefits for at least 6 weeks for all workers.*
- ❖ Appelbaum E, Milkman R. Leaves that pay. Employer and worker experiences with paid family leave in California. Washington, DC: Center for Economic and Policy Research; 2011. Available at: <http://cepr.net/documents/publications/paid-family-leave-1-2011.pdf>. Retrieved March 9, 2018.  
*This report examines California employees' experiences with paid family and medical leave.*
- ❖ Desilver D. Access to paid family leave varies widely across employers, industries. Washington, DC: Pew Research Center; 2017. Available at: <http://www.pewresearch.org/fact-tank/2017/03/23/access-to-paid-family-leave-varies-widely-across-employers-industries/>. Retrieved March 1, 2018  
*Analysis of who has access to paid leave and who does not.*
- ❖ National Partnership for Women and Families. Expecting better: a state-by-state analysis of laws that help expecting and new parents. Available at: <http://www.nationalpartnership.org/issues/work-family/expecting-better-a.html>. Retrieved March 1, 2018.  
*Comprehensive analysis of state laws and regulations governing paid leave, paid sick days, protections for pregnant workers and other workplace rights for expecting and new parents in the United States.*
- ❖ U.S. Department of Labor. The cost of doing nothing: the price we all pay without paid leave policies to support America's 21st century working families. A report prepared by the U.S. Department of Labor. Washington, DC: DOL; 2015. Available at: <https://www.dol.gov/wb/resources/cost-of-doing-nothing.pdf>. Retrieved March 1, 2018.  
*The U.S. Department of Labor outlines the positive effect paid family and medical leave will have on families after birth (see pages 20–23).*
- ❖ U.S. Equal Employment Opportunity Commission. Fact sheet for small businesses: pregnancy discrimination. Washington, DC: EEOC. Available at: [https://www.eeoc.gov/eeoc/publications/pregnancy\\_factsheet.cfm](https://www.eeoc.gov/eeoc/publications/pregnancy_factsheet.cfm). Retrieved March 1, 2018.  
*Fact sheet about pregnant women's rights under the Pregnancy Discrimination Act.*

## Patient Resources

- ❖ A Better Balance. Know your rights. Available at: <https://www.abetterbalance.org/know-your-rights/>. Retrieved March 1, 2018.  
*Patients' right and resources related to pregnancy and parenting in the workplace.*
- ❖ Mayo Foundation for Medical Education and Research. Healthy lifestyle. Labor and delivery, postpartum care. Available at: <https://www.mayoclinic.org/healthy-lifestyle/labor-and-delivery/in-depth/working-life/art-20045470>. Retrieved March 1, 2018.  
*Patient resource on how to ease the transition back to work.*

- ❖ Office on Women's Health, U.S. Department of Health and Human Services. Breastfeeding and return to work. <https://www.womenshealth.gov/breastfeeding/breastfeeding-home-work-and-public/breastfeeding-and-going-back-work>.  
*Patient information on planning for breastfeeding at work.*
- ❖ Share with women. Breastfeeding and working. *J Midwifery Womens Health* 2013;58:721–2.  
*Patient education handout.*
- ❖ U.S. Department of Labor. The cost of doing nothing: the price we all pay without paid leave policies to support America's 21st century working families. A report prepared by the U.S. Department of Labor. Washington, DC: DOL; 2015. Available at: <https://www.dol.gov/wb/resources/cost-of-doing-nothing.pdf>. Retrieved March 1, 2018.  
*Information sheet about Title IX protections for pregnant or parenting students.*

## Coding

See [Coding for Returning to Work and Paid Leave](#)