The 1,000 Days between a woman’s pregnancy and her child’s second birthday offer a critical window of opportunity to build better, healthier futures. Research shows that paid leave can improve the health of mothers and babies, promote breastfeeding and enable children to get a strong start to life. However, far too many American workers, especially low-wage working women and women of color, do not have access to paid family and medical leave. A lack of paid parental leave disruptions in women’s connections to the labor force and their employer, often leading to financial hardships and career disruptions. Paid leave allows parents, particularly mothers, to avoid having to choose between caring for their families and preserving or gaining financial stability. Making paid leave universally available is especially helpful for women of color, women with less education and unmarried women to be able to afford to take the leave they need while working in jobs that may not offer more benefits.

The COVID-19 pandemic has underscored the need for paid leave and the disparities in who has access to it. Many essential workers are also low-wage workers, which means they have less access to affordable, quality health care. Many of these workers are unable to take paid time off from their job, and in the age of a viral pandemic, that threatens public health and community well-being.

Paid leave saves lives.

- Pennsylvania has seen an increasing trend in pregnancy-related deaths in recent years with 11.4 deaths per 100,000 live births from 2012-2016. For black women, that rate is more than double, at 27.2 pregnancy-related deaths per 100,000 live births.¹
- In 2017, Pennsylvania’s infant mortality rate was 6.1 per 1,000 live births, above the national average of 5.8, according to the CDC.
- The CDC estimates that 700 women die every year in the U.S. from pregnancy-related complications.
- Providing 12 weeks of paid leave in the U.S. could result in nearly 600 fewer infant deaths per year.
- A study of leave-taking in the U.S. found at 21 months postpartum infants had a 47 percent reduction in re-hospitalization when mothers took paid maternity leave.

Workers in PENNSYLVANIA DESERVE PAID LEAVE
Paid leave is a public health imperative.

- Many workers must patch together time off by taking sick leave, vacation, short-term disability, unpaid leave or a combination thereof.

- Women in the U.S. are working later into their pregnancies and returning to work earlier after childbirth than previous generations.

- According to the U.S. Bureau of Labor Statistics, in 2018 a mere 17 percent of workers had paid leave provided by their employers.

- Only 5 percent of the low-wage workers, who earn an average wage of $10.28 per hour, have access to paid time off to attend to their medical or family caregiving needs.

- The length of leave a woman is able to take matters for her health. In a nationally-representative sample of U.S. women who returned to work in the first year after childbirth, women with less than eight weeks of paid leave had a lower overall health status than those with longer leaves.

We conducted multiple, in-depth interviews with four low-income women in Pennsylvania throughout their pregnancy and postpartum period. Each of these women, who vary in age, race, marital status, educational attainment and occupation, have one key thing in common: they do not have access to paid family and medical leave. Here’s what they had to say.

Brianna’s Story

My entire pregnancy felt like a fight, not just for my life but for my baby’s. In Erie we faced several issues because of our race -- some doctors were blatant about how they did not want me as a patient because I’m a black woman. After my first ER visit where they tried to give me painkillers that are dangerous for a fetus, we ended up driving the five hours to Philadelphia as often as we could. My morning sickness and my body's ability to recognize water were severe, which made getting to work by 8 a.m. difficult.

Then, at 12 weeks, I experienced stabbing abdominal pain and visual disorientation. After blood testing at the ER (in Philadelphia, five hours away), I learned I was having issues with my gall bladder, and suddenly my pregnancy became high risk, requiring me to be monitored weekly. We realized that staying in Erie could be detrimental to my health and my baby’s, so we moved to Philadelphia where my baby and I could be properly cared for. My husband’s job was understanding and transferred him, but my transfer was rescinded at the last minute and I was fired.

Pregnant women deserve time to be able to get comfortable with the changes they are going through and should have the support they need for medical expenses. If she needs extra time in the morning to get herself together and make sure the baby’s okay, a pregnant woman should be able to do that without being concerned with whether she’s going to lose her job. I don’t think it’s right that, as a pregnant woman who’s literally living for another person, I had to fight and continually look over my shoulder because the system was against me.

Sources: 1 "As U.S. Maternal Mortality Rates Rise, Department of Health Stresses Importance of Women's Health Care," Pennsylvania Pressroom, 13 May 2019