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*Implementation of Paid Family Leave
in New Jersey: A Promising Work in Progress*

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ABOUT THIS REPORT

New Jersey is a leader in advancing policies that promise to support the health, well-being, and economic stability of working families. In 2009, New Jersey became the second state in the nation to pass a paid family leave policy, providing millions of workers access to paid time off to care for themselves, a new child, or a seriously ill loved one. In 2019, advocates won support to expand and strengthen the existing policy to offer a higher wage replacement, longer leave times, and a more expansive and inclusive definition of family. The research evidence on paid family leave suggests that by strengthening the policy in some of these key areas, more robust uptake—particularly among low-wage workers—will follow.

New Jersey's achievement in establishing a paid family and medical leave policy continues to serve as a model to other states and to the nation. Yet policy implementation remains a challenge. A goal of this report, *Implementation of Paid Family Leave in New Jersey: A Promising Work in Progress*, is to offer a glimpse into the state of paid family and medical leave implementation through the perspectives of employees, employers, advocates, and other stakeholders. The report also offers recommendations grounded in research evidence and New Jersey know-how about where the best opportunities may be to improve implementation and uptake of the program. The Rutgers Center for Women and Work is grateful for the time that stakeholders made to share their experiences and expertise.

Because access to paid family and medical leave holds so much promise to support the health, well-being, and economic stability of working families in New Jersey, investments that lead to an increase in uptake are likely to yield meaningful returns. At the same time, shifting our social, political, and economic landscape to one that embraces and values care is a long-term strategy that also requires investment. Caring labor, both paid and unpaid, remains woefully undervalued and largely invisible, plagued by structural inequalities. A culture that supports time to care for all who need it, from the youngest to the oldest among us, and for those with illnesses and chronic conditions, is essential to building an infrastructure that promotes the health and well-being of all. Paid leave policy is one way to support this culture of care.

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EXECUTIVE SUMMARY

State of the State: New Jersey Paid Family and Medical Leave Implementation

In 2009, New Jersey became the second state in the nation to implement a paid family and medical leave program. The Family Leave Insurance (FLI) program became part of the State's Temporary Disability (TDI) infrastructure. In 2019, advocates won a significant victory [expanding FLI effective July 1, 2020](#). [Implementation drivers of state level paid family and medical leave policy](#) can be organized into four categories of activities: state administration; outreach and communication; culture; and policy development. Using these categories to organize our findings, we offer a quick guide on the state of policy implementation in New Jersey.

State Program Administration

The takeaway. The TDI/FLI program is administered by the New Jersey Department of Labor and Workforce Development (DOL). Agency staff and leaders are aware of some key implementation challenges that have plagued the TDI/FLI program since its inception. Advocates have pushed for improvements to the website, to outreach and engagement efforts, and to program efficiency, and have established a productive working relationship with the current DOL team that oversees the program. Improvements to the website and [public-facing program materials](#) have followed and include an [employer toolkit](#) as well as social media advertising campaign intended to reach fathers and Spanish speakers. The DOL team has conducted training with State partners, including the NJ Department of Children and Families (DCF), to help them understand how TDI/FLI can support the working families they serve. The State has invested in focus groups and polling research with the intention of better targeting outreach and engagement efforts. Prior to the early days of the pandemic, DOL issued a [request for proposals](#) to modernize the TDI/FLI claims management system, which currently relies on a mainframe that dates back to 1988. DOL agreed to participate in a four-week discovery sprint with [New America](#) to take a critical look at program implementation and is implementing some of the recommendations and lessons learned from that process.

Stakeholders indicated that the prior administration did not prioritize implementation of FLI. While the current DOL staff and leadership have demonstrated that they are committed to improving the program's administration, workers and employers continue to have uneven experiences navigating the requirements of the program. Administrative barriers include delayed payments, rejected applications, waiting for medical doctors to complete paperwork, and confusion regarding how to complete several questions on the online application. Even the most supportive employers indicated they find managing leave-taking and helping their employees through the process somewhat overwhelming. Others were unaware of the expansion that went into effect in July 2020.

Outreach and Communication

The takeaway. Awareness and know-how surrounding the FLI policy has been problematic since the program's beginning. [In 2012](#), only 40 percent of NJ residents were aware of the FLI program; most who knew about it did not know the program could be utilized to care for a seriously ill family member. In 2020, only 53 percent of NJ residents were aware of the FLI program. Residents earning under \$100K were less aware than those making over \$100K (41 percent versus 65 percent).¹

Some employers and HR professionals we talked with were unaware of key features in the program's recent expansion, while others were not clear on how the program was funded, and believed it was something that employers funded. Workers often go to their employer first to learn about benefits and programs; thus, employers are a critical touch point. HR managers indicated that they could benefit from more education and training about the policy to better position themselves to help employees navigate the program and solve problems. Employers can serve as either a barrier or a catalyst for ensuring that paid leave programs reach those they are intended to support.

There are undoubtedly pockets of knowledge and know-how regarding FLI across the state. The [Time to Care Coalition](#), housed within New Jersey Citizen Action, is the nexus of this information, fielding calls from individuals and organizations about issues such as how FLI works, who is eligible, and what to do when an application is denied or payment is delayed. TTC launched a [Facebook group](#) that individuals can use for general information or feedback on specific situations. This nexus of information is beneficial to those who are affiliated with organizations that are part of the coalition, or to individuals who may stumble across the Facebook page when looking for help. The DOL also monitors the Facebook group for trends to assist them with making improvements to public information available on their website. However, there are resource and capacity challenges that the Coalition faces in scaling up this work, and it remains a fairly informal source of information to individuals. In addition, the Coalition recognizes that the table needs a wider range of partners to develop support and understanding about the benefits of paid family and medical leave. Efforts to build a broader table will be advanced through the [New Jersey Paid Leave Outreach Collaborative](#).

Unions and worker centers are also well positioned to educate their members about FLI, though some advocacy organizations we spoke with indicated that their members are typically ineligible for the program due to job misclassifications or are not able to access it because of their documentation status. Nursing home workers we spoke with indicated that they learned about the FLI program through their union shop steward. When asked what else would be useful in raising awareness about the program, these workers said they wanted information in clear language that

¹ Based on an Eagleton Poll and research conducted by the Heldrich Center for Workforce Development in consultation with the Rutgers Center for Women and Work on behalf of the New Jersey Department of Labor and Workforce Development.

can be handed to someone or posted in a break room coupled with information from HR during an “in-service” or staff meeting. Workers in other industries shared similar feedback.

One possible opportunity for promotion of paid family leave that surfaced during the interviews was in the human service arena. Home visiting, maternal infant health programs, hospice services, mental health and substance abuse treatment programs, cancer centers, and other healthcare settings are all possible points of connection for workers who may be in need of leave to care for a family member. These human service agencies could be better positioned to provide information about TDI/FLI so that clients and patients and their families more fully understand what benefits may be available to them to support their care giving.

Both the state and TTC leadership indicated that they are committed to partnering with each other to strengthen outreach and engagement efforts. And at the same time, they acknowledged that the pandemic stunted some of the work that had been advancing. The bill to expand FLI allocates \$1.2 million to education and outreach efforts, of which not less than \$600,000 annually is designated to contracts with community-based organizations to assist with education and outreach about FLI benefits. At the time this report was published, these funds have yet to be released. Our understanding is that the unprecedented demand placed on the State’s unemployment insurance system has contributed to delays.

Culture

The Takeaway. [Prior research](#) has demonstrated that the large majority of NJ residents are in favor of paid family leave. Yet taking paid family leave is far from being viewed as a “right” or a societal good.

Employers can create intentional and unintentional barriers that discourage leave-taking. One interviewee spoke to the incongruent messages some organizations present, outwardly encouraging employees to engage in “self-care” and wellness activities, while not expecting employees to take time off to care for an ill family member:

They’re like you could go to yoga on your lunch hour, and/or go to your 20-minute yoga class, but don’t take time off for your dad’s heart attack like, you know what I mean...but it doesn’t come out that way, it’s like, oh, this person’s out again because of blah blah blah. Because her family is like an avalanche. Because sometimes what happens if you have someone with a lot of sickness in their family and then they become that person who uses the benefit because they have the need. And then they’re not as reliable. So, this is the cultural language of an organization that makes people not want to be that person.

In interviews with workers, workplace culture was mentioned as a barrier to increasing the uptake of paid family leave, especially for a non-birthing spouse. Even though the FLI program is gender neutral in the way that any employee can take leave for bonding or for caring for a family member, participants acknowledged that men encounter more hostility in the workplace when it comes to

requesting leave, sometimes from management, but also from peers. One worker gave an example of how a male colleague experienced leave-taking:

...he got a little bit of, I don't want to say backlash, but no one, it wasn't from like anybody really important within the company, but like from co-workers, he'd get like little nitpicker comments of why are you taking leave? You know, it's not like you had the baby or stuff like that. But from my understanding, once again, HR and his direct managers were all totally OK with it, just like the boy thing.

Workplace culture does have the potential to change, with one worker offering how her non-birthing spouse was the first father to take leave in his workplace. He became the go-to source of information about FLI, though in this case, the employer presented a number of barriers to fathers who were trying to take FLI.

When asked how we might be able to change the culture around leave-taking to care for a loved one, one social worker who works in oncology offered:

I think we need to give stories to managers about what an employee's experience is like when they sit in the office for six hours, when their loved one is getting their first chemo treatment...you know, cancer is in some ways unifying in that almost everybody has been affected by it somehow. And I think that people are always sorry about people abusing the system, but then they don't use it when they need it, which is a different kind of problem.

Policy Development

The Takeaway. The policy was updated in July 2020 to reflect changes that were intended to increase uptake of leave by expanding time that can be taken and increasing the wage replacement. Both are thought to encourage uptake by low-wage workers in particular. However, problems remain. Those interviewed named job protection, wage replacement, and enforcement as three mechanisms of the policy that remain a challenge or point of confusion.

Job protection is not included in the FLI policy itself. Rather, job protection is included in the separate [New Jersey Family Leave Act](#) (NJFLA). This leads to some confusion among employers and employees alike. While the TDI/FLI, administered by the DOL, covers the wage replacement, workers who have concerns that their job protection rights have been violated must go through the NJ Division on Civil Rights (DCR). The DOL has taken recent steps to provide job protection information on their website rather than only referring employees to DCR. One advocate explained that the information about TDI/FLI should be put into plain language for employees to understand. Employees should know that they may be entitled to the wage replacement but may not always have job protection through TDI/FLI.

Provisions	Initial Law, 2009	Expansion, 2020
Weeks of Leave	6 weeks	12 weeks
Wage Replacement	66% up to max benefit of \$667/ week	85% up to max benefit of \$903/ week
Definition of Family	Child < 18, Parent, Spouse, Civil union partner	Children of any age (including foster), Parents-in-law, Siblings, Grandparents, Grandchildren, Domestic Partners, Any other individuals related by blood, Any other individuals with whom you have the equivalent of a family membership

While wage replacement at 85% was increased under the expansion in July of 2020, it still may be difficult for lower wage workers to take the leave to which they are entitled. In addition, for those employees making more than the maximum benefit (around \$55,000 per year), the wage replacement rate may not be enough for them to take leave for the entire 12 weeks. Delays in receiving benefits can be challenging for any leave taker, especially for those living “paycheck to paycheck” prior to leave-taking. Multiple interviewees noted that some employees may choose to use the paid time off allotted by their employer rather than the FLI because they would at least receive their full wages. This helps employees with generous benefit packages but makes the decision to take leave difficult for those who do not have access to these employer programs and who earn more than the maximum benefit. Some employers choose to make employees whole, by offering the difference between the 85% wage replacement and the employees’ full salary using employees’ PTO. Again, this would only aid those whose employer offers that as a benefit.

There is no enforcement mechanism under the law for FLI, and this remains a problem according to both advocates and employees despite some protections available through the NJFLA. Some employees experienced pushback from their employers when they attempted to take leave. For the employees interviewed, this happened most often for non-birthing partners who tried to take leave. They experienced retaliation, and some chose to pursue legal challenges against those employers. Advocates noted, however, that employees should not be the ones responsible for such enforcement. Instead, advocates pushed for a more aggressive enforcement that involves the DOL or monitoring businesses rather than waiting for employees to file a complaint. The DOL has indicated there is no provision in the law for them to do engage in these activities. This is especially important for low-wage workers as they may not have the leverage that higher-wage workers have with their employers. Low-wage workers may not be as comfortable advocating for themselves if they think their employer views them as expendable. So, advocates explained that enforcement should be top down, rather than bottom up:

Without enforcement, there's just lots of employers, particularly small employers, who say, you know, I'm not going to do this.... or that, you know, maybe they do know about it, maybe they don't, but they have no incentive to learn about it. And so unless there's stronger enforcement, you know ... like it should be a more routinized kind of

enforcement rather than relying on complaints and even then like those having a robust enough group to go out and investigate complaints on all kinds of worker issues is important.

Opportunities to Increase Awareness, Understanding and Uptake

There are many opportunities to increase awareness, understanding, and uptake of FLI. The State of New Jersey plays a crucial role in regulating, supporting and funding organizations that provide a wide range of services and supports to NJ residents. In many instances these and other entities offer critical points of engagement or touch points with NJ residents who are welcoming a new child or may be confronting a family illness. There are potential opportunities within program intake processes that could be leveraged to increase awareness about FLI and an understanding of its benefits. Many of these programs and services are housed in the community and may serve as trusted messengers.

Examples of potential opportunities and messengers:

- The Children’s System of Care (PerformCare)
- Family Support Organizations
- Maternal/infant home visiting programs
- Family Success Centers
- Cancer centers and other centers where someone may require long term treatment, like dialysis
- Visiting nurse (including hospice) programs
- Health insurance companies (case managers)
- OB/GYN offices
- Birthing centers
- Doula programs
- Federally Qualified Health Centers (FQHC’s)
- Child Protection and Permanency caseworkers/nurses
- Rehab facilities
- Other medical offices/facilities

Partnering with the agencies and organizations that run these programs on how their intake processes work and where there might be opportunities to screen and educate individuals about the FLI program could lead to modest changes in processes that significantly improve the awareness and uptake of FLI. In some instances, it may be beneficial to co-locate a navigator to assist clients with enrolling in TDI/FLI. We believe that if organizations in healthcare and human services understand the benefits of FLI for their client and their client’s family, they will be open to partnering on outreach and engagement, especially if resources are invested into doing that well.

The research evidence that supports the benefits of paid family leave needs to be customized for different stakeholders to build understanding and strengthen buy-in.

Raising awareness of the program by targeting specific communities in NJ in culturally competent ways in relevant media markets was emphasized by some stakeholders we interviewed. We therefore recommend getting well-developed, clear information to residents through:

- New parent and breastfeeding support groups
- Pre-birth education classes
- Lactation consultants
- WIC offices and other social service agencies
- Community hubs like places of worship or cultural centers
- Pharmacies

Advocates should be well positioned and supported to partner with DOL on program implementation and program improvements. NJ is embarking on modernizing their claims system, and it is important that advocates and others, including workers, have an opportunity to engage in designing the new system to ensure that it is user friendly and that the right data are collected to support quality improvement, target outreach and engagement, and improve enforcement efforts.

A data dashboard can help identify policy implementation issues. There is opportunity with a new claims system to build a data dashboard that can capture and display important indicators such as reason for leave; gender; race; industry; geographic information; income; and family composition. Availability of this type of information can inform how the State, advocates, and other stakeholders focus their efforts to improve uptake of the program or improve the program itself. Dashboards can be built internally at DOL, or as [other State agencies have done](#), through a collaboration with a university research partner. Individualized dashboards for employees taking leave can also be useful in allowing employees to access their leave information, including the status of their application, how many weeks they have left, their wage replacement amount, and an accounting of intermittent leave taken.

Evidence-informed education and outreach materials or “toolkits” need to be developed that explain the benefits of paid family leave and are tailored for specific organizations, programs, industries, and sectors. This toolkit could be similar to the DOL employer toolkit with various types of content such as printed brochures, slideshows or recorded webinars, and social media graphics. These resources should include information about FLI as well as information about job protection and other paid leave programs such as Temporary Disability Insurance and Earned Sick Leave.

Strategic employer and industry champions should be identified. Employer and industry leaders can play a pivotal role in influencing others to create a workplace culture that values employees as

caregivers and that supports a culture that enables employees to take paid time off to support themselves or a loved one.

Employee resources should be developed and available to support workers in having conversations with their employer about taking time off to care for themselves or a loved one. While the employees and advocates we spoke with understand it is important that workers understand their rights, they also acknowledged that it is important that employees have resources to help them have conversations with their employer about their needs. This is an area where programming and supports appear to be underdeveloped.

An informational helpline should be created to field inquiries about FLI and other rights to take leave that are not related to an individual's specific FLI claims questions. The DOL phone number receives both types of calls, and it can be difficult to get through to a claim processor. Individual claimants are often unable to get through when they have a valid reason to speak to a claims adjuster. Questions about the program, or taking leave more generally, do not require the level of access that a DOL claims adjuster has. By establishing and publicizing a helpline, such inquiries could instead be handled by another party that could invest the time in helping the individual understand the FLI program and its application process and inform them of their rights to take leave more generally. Other states such as California and New York have such a call center, often managed and run by a community-based organization.

Similarly, investing in a navigator program would assist applicants through the application process. Initially this could be run as a small experimental pilot with a community partner to host the navigator to gain an understanding of its benefits. Knowing who has information about each of the different policies and how they fit together could go a long way to encouraging applicants to engage in applying. Navigator programs could also be a potential asset to employers without HR departments to assist with employee education about the program.

INTRODUCTION

Paid family leave consists of paid time off to care for a family member. In the U.S., nine states and the District of Columbia have implemented a paid family leave policy. Five states and DC are currently issuing benefits, while four states will begin paying out benefits in the coming years. The amount of time allotted ranges from four weeks for family leave in Rhode Island to eight weeks in California and DC to a maximum of twelve weeks in the other states, including New Jersey. The wage replacement rates are complex, ranging from about 60% of a worker's salary to 100%, with each state having a cap that is most often a percentage of the average weekly wage in that state. During the pandemic in 2020, the federal government added temporary paid family leave for Covid-related reasons. In the remainder of this review, we discuss paid family leave outcomes in general, present case studies of New Jersey and California, examine non-parental uses of paid leave, and examine changes during the pandemic.

Paid Family Leave – Outcomes

Much of the research on family leave centers on parental leave—leave taken within the first year of a birth or adoption of a child. Houser and Vartanian (2012a) found that paid leave is associated with greater labor force attachment among women and decreased participation in public assistance among both men and women. However, Ybarra et al.(2019) suggest that this might be more complex for single mothers who are eligible for TANF, indicating that at low wage replacement levels, low-income single mothers may still face material hardships even with the use of paid family leave. The passage of paid family leave in both California and New Jersey was associated with increased labor force attachment by women, especially those who have less than a bachelor's degree and therefore may not have been able to afford leave prior to the law (Byker, 2016). State paid family leave laws are also associated with an increase in leaves taken by fathers and longer leaves taken by mothers as compared to parents in states without these laws (Houser & Vartanian, 2012b). Longer leaves are associated with fewer depressive symptoms among new mothers and are associated with lower odds of infants being re-hospitalized after birth (Chatterji & Markowitz, 2005, 2012; Jou et al., 2018). Mothers who take shorter paid leaves had lower scores on the CES-D depression scale than mothers who took shorter leaves that were unpaid (Mandal, 2018).

Researchers have found a number of associated outcomes with fathers taking leave. Fathers who take long leaves—greater than two weeks—are more likely to be engaged in caretaking even after the period of leave ends (R. J. Petts & Knoester, 2018; Pragg & Knoester, 2017). Among economically-disadvantaged families, mothers report more positive relationships over time with fathers who take leave, with the most favorable reports associated with fathers who take longer leaves of one or two weeks (R. J. Petts & Knoester, 2019; Pilkauskas & Schneider, 2020).

Children's positive perceptions of their fathers' engagement with them are also associated with paternity leave longer than two weeks (R. Petts et al., 2019).

A qualitative study of lower-income mothers (those whose income was below the median for their home county) from three paid family leave states—CA, NJ & RI—found that the majority of the mothers who were interviewed returned to work after using their leave, some of them before the full length of leave time allotted because they needed their full wages, rather than the partial replacement (Winston et al., 2019). Mothers cited job protection during leave, a sense of obligation to their employer, and access to post-leave supports like flexible work schedules as reasons for returning to their employer after their leave. Mothers cited some barriers to returning to work including difficulty finding childcare and workplace conditions that were not conducive to work-family balance. The mothers in this study also noted that they were able to take the time they needed to bond with their child while receiving partial pay, which lowered their stress levels during leave. Among single mothers or very low-income mothers, the partial pay alleviated some of the financial stress that would have come from having to take leave with no pay, including some who indicated it kept them from worrying about homelessness. Paid family leave also gave the mothers in this study time to arrange for childcare and prepare for a return to work and even provided the time to remain on a waiting list for a childcare subsidy. Some noted that they would have had to return to work much sooner if they did not have access to paid family leave. The amount of wage replacement did lead to some financial troubles, resulting in some of the mothers relying on public benefits like WIC and SNAP to supplement the partial wage replacement. Many of the mothers reported that their employer was not helpful in providing information about paid family leave, and they had to rely on sources outside of their employer to learn about the benefit. They also indicated that understanding how the different programs worked together was confusing.

New Jersey

While New Jersey has been paying out benefits from the Family Leave Insurance (FLI) program since 2009, the uptake has not increased in the same way each year as it has in California. As of 2017, the rate in New Jersey had remained about the same each year (Dunford & Fellow, 2017). It remains to be seen whether the expansion that went into effect in 2020 will lead to an increase in the rate of uptake. Most of the claims in New Jersey as of 2017 were for bonding with a new child, while it appears that fewer than 1 percent of family caregivers made an FLI claim for other caregiving (Dunford & Fellow, 2017). In addition, the share of men's claims in New Jersey is much lower than in the other early adopter states, California and Rhode Island.

Studies conducted in New Jersey since the passage of Family Leave Insurance have examined employers' as well as employees' experiences. In a study of employers, Appelbaum & Lerner (2014) found that the employers that they interviewed did not experience changes in employee productivity or turnover after the passage of Family Leave Insurance. Employers reported that FLI improved morale and decreased stress among employees. Employers reported that leave-taking was gendered, with women taking more leave and taking longer leaves. Findings were mixed when employers were asked about finances following passage of the law. Most employers reported no

change, while a small number of employers reported saving money and a small number reported spending extra money on temporary employees and support for the workers on leave. Additionally, some employers noted that intermittent leave was more difficult to support. In a study of how the gender wage gap is affected by access to FLI, Tito (2016) found that in those NJ counties with a higher concentration of FLI-eligible employees, the gender wage gap was smaller than in counties with a lower concentration of FLI-eligible employees.

Family Leave Insurance in New Jersey is associated with improved mental and physical health outcomes among women, especially those in lower income categories (Pal, 2017). In a qualitative study of low-income (less than 250% of the poverty line) parents in New Jersey cities (Trenton, Camden, and Newark), Setty et al. (2020) examined the supports and barriers to taking paid family leave. Their study included a group of mothers who did use FLI and a group who did not. They found that those who used the FLI program were grateful to have the financial ability to bond with their child after birth. However, some experienced delays in payments that led them to go back to work earlier than they anticipated. Some mothers experienced difficulty and confusion when applying for the benefit and expressed that they received information about FLI from sources outside their employer. While the wage replacement was needed and helpful, it was not enough to meet many families' needs, with some mothers noting that their income decreased right at the time that their expenses increased due to the new baby. Mothers who did not use the program experienced a number of barriers—they took a shorter length of leave than those who received FLI, some expressed that they took extended unpaid time off because they could not secure adequate childcare, while others took very short leaves because they feared they would lose their job. Lack of awareness was the primary reason for not using FLI, with some mothers learning about it because of the study. In addition, the mothers who did not use FLI reported that their employer did not tell them about their eligibility or told them inaccurate information about it.

More recently, the New America Foundation (Zucker, 2021) conducted a short, intensive examination of the paid leave policy in New Jersey. Their results confirmed what other researchers have found, but they also were able to pinpoint some areas where improvement is needed in order to increase uptake. In particular, they noted that while passing paid family leave policy is an important first step, a focus on successful implementation, though challenging, is a necessary component. In their research, the team found that there were common themes that would address implementation, including clear and plain language in the application and materials, job protection, use of employers in outreach efforts, cultural change normalizing leave and caregiving, effective use of data, and an easy application process.

California

California was the first state to pass a paid family leave policy, so there are more studies examining California than the other states. Studies show mixed results about the effects of California's paid family leave program on mothers' employment outcomes and attachment to the labor force. Passage of paid family leave in California is associated with a greater likelihood of mothers returning to work and with a greater number of work hours in the year to three years after the birth

(Baum & Ruhm, 2016; Rossin-Slater et al., 2013). Das and Polachek (2015) looked specifically at younger women in California and found that their labor force participation increased after the law, but their use of unemployment insurance also increased, indicating that employers may be relying on the labor of older workers to avoid employing workers who may eventually use paid family leave for the birth of a child. Among low-income mothers, California's paid family leave is associated with a return to work one year after childbirth and was especially important during the Great Recession, indicating that paid family leave is an important support for low-income mothers during times of economic downturn (Kang et al., 2021). Moreover, after the passage of paid family leave in CA, mothers took double the amount of leave, from around three to six weeks, with most of that growth occurring for Black and Hispanic mothers as well as those who were non-college educated and unmarried (Rossin-Slater et al. 2013).

There is some mixed evidence on wage outcomes in California. While Rossin-Slater et al. (2013) found that there may be a wage benefit to California's paid family leave law, Bailey et al. (2019) studied mothers' employment outcomes, and their analysis suggests that mothers who take paid family leave still incur a wage penalty over time. They suggest that the paid leave may result in mothers investing more time into their children, therefore resulting in a wage penalty. For the most disadvantaged mothers, there may be a greater benefit to paid family leave. Stanczyk (2019) found that paid family leave in California reduced poverty risk for low-income, less-educated and single mothers, and it improved household income.

Health outcomes in California have also been studied. After the passage of paid family leave in CA, parents reported better health outcomes for their children (Bullinger 2019). Additionally, mothers' self-report of mental health improved after the passage of the law, and both parents reported that they were coping well with the day-to-day parenting duties. Bullinger (2019) also found that low-income mothers were more likely than high-income mothers to report improvements in mental health and in their ability to cope with the day-to-day parenting duties. Decreased hospital admissions for infants were also associated with the passage of paid family leave in California, especially for respiratory and gastrointestinal illnesses (Pihl & Basso, 2018). The passage of paid family leave in California was also associated with increased rates of breastfeeding (Huang & Yang, 2015). Additional studies have also shown that California's law was associated with decreased reports of postpartum distress and depression, especially among single and young mothers (Doran et al., 2020). The positive effects of the passage of paid family leave may even extend into elementary school, with children in California showing improved health outcomes, especially those children from disadvantaged backgrounds (Lichtman-Sadot & Bell, 2017).

Workers experience different kinds of barriers to their uptake of leave. They may experience stigmatization in the workplace for needing or taking leave (Albiston & O'Connor, 2016). Low-wage workers may face the greatest fear of stigmatization or retaliation and therefore face barriers to leave-taking that are not just focused on wage replacement. Albiston & O'Connor (2016) interviewed low-wage workers in California who had access to the state's paid family leave program. They found that those who needed leave but did not take it were more disadvantaged

than those workers who took leave—in nativity, in education, in age and in race. They also found that those who needed leave but did not take it were more likely to be married. In addition to demographic differences, the researchers found that those who needed but did not take leave also worked for employers that did not offer as many family-friendly benefits like paid sick and vacation days or flexible work hours. They were also less likely to be in a union and more likely to have a job with precarious or part-time hours. The workers who were interviewed noted that those who took leave were viewed in the workplace as not as committed to their job and as not dependable and this resulted in changes in hours. Workers also overheard what others said about those who took leave and determined that leave-taking was not supported, even if offered. While in some workplaces taking maternity leave was considered acceptable, longer leaves taken by fathers were questioned. This study also found that higher-wage workers were presumed more committed to their jobs and therefore were not stigmatized for taking leave at the same level as low-wage workers who were not presumed to have the same level of commitment to their work. Additionally, workers with longer tenure were not stigmatized for leave-taking at the same levels of those who had worked for the employer for a shorter period. The implication of this study is that there are some employers who view leave-taking as a privilege or reward for a certain group of workers, rather than a right for all workers. Finally, workers in this study bore a financial burden for not taking leave. They did not take leave because they feared retaliation, so could not benefit from the wage replacement for their own care work. Instead, they had to outsource the care work, therefore incurring a greater financial cost than if they were to take the leave on their own.

Additional research on employers in California has shown that in companies that have high earnings premiums, workers are more likely to take leave (Bana et al., 2018b). They posit that firms that have a workplace culture that encourages leave are more likely to have employees take leave. If companies with lower earnings premiums were to encourage leave, more people would take leave, regardless of changes in policy provisions. Additionally, Bana et al. (2018a) find that the lowest paid workers in California are the least likely to take leave. These two studies indicate that there continues to be an income disparity in leave-taking, even in a state with a paid family leave program.

Non-parental Leave

In many states, family leave can also be taken to care for oneself or a loved one. Non-parental leave has been studied less. Arora & Wolf (2018) found that in California, the paid family leave law was associated with a lower rate of nursing home use, which may be associated with a reduction in the use of Medicare funds for such stays. Schuster et al. (2008) found that leave use did not change among California parents of children with serious illnesses. Instead, they found that these parents were not aware that they could use paid family leave for care for their ill child and instead missed days of work to care for their child. Additionally, parents who knew about paid family leave but did not take it expressed fear of job loss or retaliation if they took leave. Chung et al. (2012) studied both parents of newborns and parents of children with special needs in California. They conducted qualitative interviews and found that the parents of newborns were able to plan better for leave since they knew the birth was coming, while the parents of children

with special needs found it harder to plan for leave because their need for leave often appeared suddenly. Additionally, both sets of parents found it difficult to access their benefits and understand their rights, and they expressed confusion about the ways in which different programs overlapped. Some of these parents were unable to take leave because of these barriers, and they expressed greater stress because of it.

COVID-19

The COVID-19 pandemic caused widespread unemployment and the need for workers to stay home from work. In addition, schools were closed, and parents were left to find suitable care for their school-aged children who were now at home. Congress passed the Families First Coronavirus Response Act that gave parents up to 12 weeks of paid leave for pandemic-related reasons. These workers were paid at two-thirds of their salary up to \$12,000 (Robert Wood Johnson Foundation, 2021). These provisions ended in December of 2020 and the tax credits for employers who offered leave ended September 2021. This is the only federal paid leave that covers a large percentage of workers in the United States and is potentially a way for Congress to extend federal paid leave permanently. In addition, states also provided for some amount of paid sick or family leave to cover workers who had to care for family members sick with Covid-19 or children who were quarantined or home from school. New Jersey's Earned Sick Leave law allowed for employees to use sick days for Covid-19 related reasons including testing, quarantine, illness, vaccination or school closure. Employees were also able to use Pandemic Unemployment Assistance (PUA) to cover time out of work because of the pandemic.

PROJECT DESIGN

This study was conducted to develop an understanding about the state of paid family and medical leave implementation in New Jersey. We started with an ambitious set of research questions that guided our work. In order to address the research questions, we conducted hour-long qualitative interviews with employers, employees, advocates, funders, and state administrators. We recruited employees through a Facebook group dedicated to answering questions about Family Leave Insurance (FLI), through the Time to Care Coalition, and by networking with organizations that represent or advocate on behalf of low-wage sector employees. In addition, we worked with a healthcare union to set up a focus group of workers who are employed in the long-term care industry. Finally, we used snowball sampling using word of mouth to capture other employees who had experience taking leave. We recruited employers through employer organizations. We recruited advocates through the Time to Care Coalition, which brings together advocates interested in paid family leave. We also recruited advocates through word of mouth, asking to interview those who we thought would have some point of contact with New Jersey residents who would take leave. We recruited funders by contacting those whom we knew played some role in pushing for paid family leave, including the most recent expansion in July 2020. Finally, we recruited the administrators of FLI in New Jersey who work in the Department of Labor and Workforce Development.

Questions For:			
Advocates	Workers	Employers	Funders/Admin/Other Stakeholders
What role have advocates played in advancing uptake?	What barriers do workers confront?	What would help employers encourage FLI uptake?	What has been the role of key state agencies and funders in advancing FLI uptake?
What strategies have been employed?	What was their user experience?	What roles have employers played in advancing uptake of FLI?	Where are opportunities to advance uptake?
Who have Advocates focused outreach and engagement with?	How do workers learn about the program?	What has been employer experience with FLI and expansion and implementation?	What agencies, resources and data can be brought together to support advancing paid leave implementation?
What has been successful/ challenging and what other information and resources are needed?	What ideas can workers contribute for reducing barriers?	What would help employees?	Where might the uptake of FLI intersect with other goals (such as economic and racial equality, child and family health and well-being, and worker health and safety)?

Sample

Interviews included ten workers, eight employers, eight advocates, four funders and four state administrators. All of the employees interviewed identified as women. Among those who volunteered their hourly wage or salary, the answers were quite different. The different wages were reported as follows: \$13.46/hr, \$18.48/hr, \$35,000/yr, \$24.15/hr, \$66,000/yr, \$33.45/hr and \$80,000/yr. The majority of employees interviewed used TDI and/or FLI for the birth of a child. One was using it to care for an older child who had special needs, though she also had used FLI for the birth of a younger child. In addition, some interviews revealed that there was overlap between categories with some employees participating in advocacy and some advocates and employers having experienced using leave themselves. When these overlaps were discovered during the interview, we asked questions of those participants that we had asked of others in that category. So, an employee who was also an advocate was asked about her advocacy as well as her experience with leave.

The interviews were transcribed using NVivo’s auto transcription feature and a member of the research team verified those transcriptions. Members of the research team then analyzed the transcripts using thematic analysis. Themes were developed using the research questions, but codes were also assigned as new information appeared in the transcripts. Members of the team compared codes to confirm themes.

FINDINGS

Results from the interviews point to several overarching themes that were common across participant types. This section describes the most common themes, with illustrative quotes provided to highlight the voices of the participants. The main themes outlined are: (1) the meaning of leave for those who took it, (2) the barriers that workers encounter when applying for leave or asking their employer for leave, (3) workplace culture around leave, and (4) recommendations for changes that may increase uptake among workers. In addition, this section includes a summary of the unique perspectives of each type of participant—employer, employee, advocate, state administrators.

Value of Leave to Employees

Each employee was asked what taking leave meant for them and for their family. The employees interviewed were all women and the majority took leave for the birth of a child, though one also took leave to temporarily give full-time care to her child with special needs. Those who spoke of the meaning that the leave had on their bonding experience described the ability to establish breastfeeding, to take extra time to find the right childcare center, and to just have the time to spend with their newborn child.

For some mothers, establishing breastfeeding takes some time, and some of the mothers who spoke about what leave meant to them spoke of the extra time they had as beneficial to establishing breastfeeding. One participant did not choose to breastfeed an older child because she did not have the time. When asked what FLI meant to her, she answered:

It meant a lot to me because . . . I wasn't breastfeeding my first daughter. So, with this baby, I breastfed. So, it was good for me and her at the time, for her to breastfeed and just be home and actually bond instead of just sending her straight to daycare. . . as far as with the whole breastfeeding, it really it was actually good. It was a lot better. And I didn't have to rush to get back to work and find a sitter and all that stuff like I actually could take my time in finding daycare and things like that.

Those whose leave occurred during the COVID-19 pandemic expressed that they were happy to have had the leave so that they could stay home longer to stay safe, especially if their job could not be done from home. One participant mentioned this pandemic experience as well as breastfeeding:

It was amazing, especially during the pandemic. I was nine months pregnant, working in the ICU during the pandemic when we didn't know was I at higher risk being pregnant and worrying about my baby and bringing something home. So, the fact that I could take the paid disability and the family leave just to have the peace of mind, to be safe and not be worried about bringing a novel virus home to my infant. I'm breastfeeding . . . so the fact that I could have that stress off my shoulders . . . I'm pumping at work now, but that I had all that time to just establish breastfeeding and bond and just take care of her. And I mean, anyone that has kids knows as well that you don't get a full night, I still haven't had

a full night's sleep in a year. So if I had to go back to work with an infant, a six week old, I don't know how...I know people do that, but I don't know how they do that, especially with the level of stress at my job. I wouldn't have been able to do that so that I could bond with my daughter, that I could breast feed, that I knew that I was keeping them safe was just huge. And financially, it didn't mean losing our home or losing my health insurance and knowing that I had a job that I could go back to.

Another participant also spoke of the comfort she felt giving birth during the pandemic, knowing that she had the extra time to be safe and spend with her newborn:

Security, peace, knowing that I can be home with my children during a pandemic and a newborn? . . . And it's even scarier now because of COVID . . . I wouldn't be nearly as anxious, but because of the situation that we're in with the pandemic, it was really frightening thinking about having to put my six-week-old or my twelve-week-old or however old into daycare with people I don't know during a pandemic where anything could happen. So it made me feel a lot better knowing I could be home with them.

Some of the employees took leave both prior to the July 2020 change in benefits as well as after, so they had a unique perspective on the impact the changes had on their leave experiences. Those who took leave on either side of the change were asked specifically how the change affected their leave. They answered that they were able to take a longer leave after the changes and that the increased wage replacement allowed them to feel more comfortable taking that longer leave.

Employees expressed that the wage replacement with FLI allowed them to return to work in a time that felt right to them, rather than feeling like they either had to return to work too early, or not return at all. The three participants quoted below spoke about how the wage replacement allowed their families to survive—two of whom experienced the disruption of a spouse's job loss and one who encountered unexpected medical expenses during leave:

Participant 1: Normally, I would say my husband has a good job and we would have been fine, but we wouldn't have been. I carry all of our benefits. . . . we would have thought that it would have been fine that I could have just taken like unpaid time and that we would be OK financially. But given that he lost his job, we would be in trouble, I think, if we didn't have the paid benefit.

Participant 2: If it was unpaid, it wouldn't have been good. Honestly, my husband's been out of work because of Covid right now and it wouldn't have been easy. We would had to have probably cut back on a lot of basic necessities. So definitely I wouldn't have been able to stay home.

Participant 3: With the wage replacement, I don't think I would have chosen to return to work any sooner, but it would have significantly impacted how we handled our family budget. . . . My husband had surgery, my daughter had surgery and started her orthodontic treatment, which I'm paying for out of pocket. I would not have been able to

start that because you know that percentage of my income that I would have been missing would have been stretched so much thinner.

Mothers also expressed that the length of leave made a difference to their healing and adjustment after childbirth. They expressed that a six-week leave is not enough to fully heal from childbirth. One mother expressed this as feeling like herself again:

Getting time to actually heal, because I had a C-section for one, but just after having a baby in general, however you have that baby, it's not easy. It's not mentally easy because you're learning how to be yourself again. You're not just you anymore. You're you with the baby. So it's learning to love yourself again and learning a new routine and learning how life is going to work now with an added human being. So it's definitely helped me get more into a routine and how I want to do things when I do eventually go back to work.

Another mother gave a detailed explanation of many of the things that parents have to deal with during the first months of caring for a child and how FLI allowed her to deal with those things without worrying about going back to work too early. When she was asked what family leave meant for her family, she answered:

Everything. Absolutely everything. . . . At every point in time where it's normal for people to go back to work after six weeks for a vaginal delivery, eight weeks for a C-section, you know, six to 10 weeks, whatever it is every week, I've just been like, wow, I am so not prepared to go back and to leave this. And I don't know how people do it unless they want to. Right. So, if you feel like you're being taken away from this experience, it's just heartbreaking to me so this has been everything. In general, specifically with her, she had a tongue in the lip tie, which has really impacted feedings, and when she was born she was five fourteen but went down to five ten. . . . We were in a really scary zone of if she was going to be healthy. And I was in a lot of pain with breastfeeding. It took a surgery and three lactation consultants and weekly doctor's appointments . . . I was on the phone with the insurance company, with doctor's offices to do her surgery . . . And to think that just when we were able to start coming out of that, that I would have had to leave would be insane to me.

Common phrases or words used in many of these interviews when asked about the meaning of leave was “everything” or “the world.” Multiple women spoke of the importance of establishing breastfeeding, the importance of healing one’s body, the safety and security that came from taking leave during a pandemic, and the financial buffer that the wage replacement provided in the event of a spouse’s job loss or unexpected medical expenses. They expressed that they may not have been able to take as long a leave at a lower wage replacement or they would have had to significantly change the way they budgeted, with little room for a buffer.

Barriers to Uptake of FLI

Multiple participants mentioned various barriers that families face when anticipating a need to apply for leave—whether for bonding, caring for a sick family member, or caring for a child with

special needs. Some barriers were technical in nature, involving the application process or payment. Some barriers were employer-focused like lack of knowledge among employers, fear of retaliation, or a workplace culture that was not supportive of leave. Some barriers were policy-focused, involving places or situations where the policy was not working as intended or where policy awareness was not at a level that would encourage broad uptake, especially among certain populations where knowledge of the policy might be low.

For participants who applied by paper, the process was slow and time-consuming. For those who applied online, most of the application process was easy, but there was a set of questions that was confusing to more than one applicant. The questions about the exact date of the return to work were difficult to answer and applicants were not sure how to respond. When asked about what in particular was hard, one worker answered:

So questions like the last day of work . . . and it's not clear what they mean by the last day worked, last day paid by the company that portion was confusing because it could mean so many different things for different people.

Some of those who experienced these types of barriers found themselves seeking help through a Facebook group whose purpose is to help families navigate NJ's paid family leave policy. This Facebook group and the advocacy organization that supports it were tagged as a nexus of information in New Jersey—they field calls and answer questions from workers on a regular basis. In addition, the state administrators use the information from this Facebook group to discern what kinds of questions workers have about NJFLI. While this nexus of information is beneficial to those who know about it, there are some questions about how workers who do not know about this organization and their Facebook group get their questions addressed, especially as employers we interviewed indicated that they also struggle with the know-how required to assist employees with navigating the process. When a worker who is active on the Facebook Group was asked about the confusing start date questions, she answered that she has seen that question quite a lot on the page:

And I'm a part of . . . the New Jersey Family Leave Facebook. And a lot of people ask questions about applying because some of the questions are kind of confusing. Like the one of them that sticks out in my head says when you apply for TDI when do you plan on to return to work? To me, that means, like, am I telling them I'm going back in May because that's when I'm going back? Or do I tell them after I'm cleared from disability, which is only the four weeks, six weeks, whatever it is. So that one definitely was a little confusing.

Multiple participants, including advocates and employees, also mentioned the delayed receipt of payment as both a frustration and barrier. While applications may have been approved right at the time of the birth or other event when leave was needed, some workers did not receive their payment until weeks after the start of the leave. For some, this was not as much of an issue because they had other saved funds or a spouse's income. Others, however, had to adjust their budgets while they waited for the first payment to come, which is difficult for workers who live paycheck to

paycheck and are already taking a pay cut for the wage replacement. While some workers said that the application and approval process was smooth, other workers mentioned that it was hard to check their claim status online and they were unsure about whether they were approved for their leave or not. In addition, some workers expressed confusion during the application process about the difference between intermittent and continuous leave and were not sure which of these leaves to take and what the differences were.

Employer-focused barriers ranged from lack of knowledge or organization on the employer's part to employers' difficulty adjusting to workers' absences to a workplace culture that is hostile to leave. Employees mentioned that if their HR department had an organized way to talk about leave, they found it much easier to apply for and receive the benefits. Some employees received detailed explanations from their employers explaining the exact parameters of the leave timing and wage replacement. Others, however, encountered employers who were not as helpful and therefore the employees did not feel as supported as they attempted to apply for leave.

Employers expressed that sometimes even if they had the knowledge about the leave, they could not fill out the paperwork for their employees, so they did not have the detailed information necessary to help walk an employee through each step of the process. Replacing a worker who is out on leave was also mentioned as a barrier, especially by employers. Some employers hired temporary workers to take the place of the workers on leave and were able to plan accordingly. Others, however, explained that work had to sometimes be redistributed among staff, rather than with temporary workers. Employers with staff with a particular skillset or staff that go into people's homes for their work found it harder to replace workers who are on leave because clients of those workers may not want another person in their home, or those workers may have unique knowledge that is hard to replace.

Workplace culture was mentioned as a barrier, especially for a non-birthing spouse or partner. Even though the NJFLI program is gender neutral in that any worker can take leave for bonding or for caring for a family member, participants indicated that men encounter more hostile workplace cultures when it comes to requesting leave. One mother explained that her husband encountered a workplace culture hostile to paternity leave and suffered a job loss that they attribute to his request for leave:

Yeah, I think there's definitely a stigma. So even though it's hard to get answers at the hospital, I've never heard of anyone losing their job. Like there's a lot of women in health care and a lot of young managers. So even though I had a frustrating experience, I was never in fear of losing my job. Whereas my husband, I remember having a conversation with him. I kind of had some red flags about the culture that he would share with me. And I just said, just be careful. I want you to do it and I want you to apply for it. You're eligible. But what do you think the response is going to be? And like I had some insight there that he didn't have, and he never expected what happened. And I find that when I educate men even to be caregivers for their family, I hear that more often . . . well, none of the other male coworkers that I work with have taken this.

Even when an employer is supportive of leave, some fathers encounter resistance from their co-workers. One mother spoke of a friend whose boyfriend took leave:

Yeah, the one who had a baby in September, her boyfriend he worked at my job as well, he ended up taking leave from what he said, he got a little bit of, I don't want to say backlash . . . it wasn't from like anybody really important within the company, but from co-workers, he'd get little nitpicker comments of why you taking a leave? You know, it's not like you had the baby or stuff like that. But from my understanding, once again H.R. and his direct managers were all totally OK with it, just like the boy thing.

More than one spouse/father became an advocate within his own workplace after taking leave, because these spouses were often the first father to take a full leave:

And he actually, as sad as it sounds, because it was just last year, but he's actually kind of started a movement in his job where a lot of fathers were contacting him. How did you take off? How were you able to be home for your child? A lot of fathers were only taking a week or two weeks after the baby was born of their own personal vacation time and not taking off an extended period for that bonding, which they're entitled to. So, they were contacting him. How was it that you were able to take off all that time last year for your daughter? And we gave them all the information, but they, too, were experiencing that negative, almost retaliation for taking the leave. And still also they were being forced to take their sick time.

Other employees encountered a workplace culture that is not publicly hostile to leave-taking, but employees hear supervisors or other co-workers make comments about a colleague's leave that may then discourage them from taking leave:

I think that what if I could wave a wand, what would I want? It would be like this idea of family, individual, work, right? Who takes care of what? There's this little triangle and some of the messages that we give employees about taking care of yourself . . . if you could go to the yoga on your lunch hour or go to your 20-minute yoga class, but don't take off for your dad's heart attack . . . it's like, oh, this person's out again because of blah blah blah . . . because sometimes what happens is you have someone who has a lot of sickness in their family and then they become that person who uses the benefit because they have the need. And then they're not as reliable. So this is the cultural language of an organization that makes people not want to be that person. . . . So, the other piece is, yes, the H.R. managers need this information, but I think that the other thing is to be very mindful about the messages that they're sending to their employees and about their employees who take who use it.

Fear of retaliation and job loss were also mentioned as barriers. One key informant affiliated with a cancer center explained that caregivers of cancer patients and cancer patients themselves are often afraid to use leave because they are uncertain about how job protection works and if it will

really be honored, and are also fearful of losing their income and possibly their health insurance during an especially vulnerable and uncertain time:

I think people have the feeling that in certain sectors, I think that people have a sense of like . . . if you felt unsafe before, will you feel comfortable exercising the use of this benefit and then feel more unsafe? And it's hard to know because when people are telling you this as a clinician, you don't know if they're just feeling threatened because the illness itself is threatening and their family system is being threatened. So it's really hard to provide guidance about what's the right thing to do because the other piece is like it protects them. But how? What are the steps they need to take? And if someone waits a certain amount of time before there's some sort of perceived retaliation, what's the process for that? Because their family doesn't have money coming in now, so I think that in theory, that sounds nice . . . I think people kind of freeze in terms of what risks they're willing to take and only taking the very the most necessary because they're just trying to get a sense of like, you know, how is their world changing?

Finally, some barriers were focused on the policy itself. In New Jersey, the job protection that is provided by NJFLA is not part of the same policy as the wage replacement provided by NJFLI. This results in confusion among workers as well as employers. Workers are at times unsure of whether their job is protected even if they qualify for pay through FLI. Advocates expressed that for a policy that is more than 10 years old, there is not enough knowledge of the policy among workers and therefore workers may not even know that they are eligible. Advocates also expressed that there is a role for the state to be more proactive with their enforcement of the policy given that employees are paying into the fund and therefore it is their right to take it. Advocates noted that there is no affirmative enforcement built into the policy, so the state relies on workers or advocates to file a complaint and then that complaint gets investigated. Job protection is located in another policy and run through the Office of Civil Rights, so workers are also confused about how the policies work together and work with the federal FMLA job protection. In addition, a doctor has to approve the medical reason for a leave. For some who have a mental health or other reason for leave, recognizing a licensed clinical social worker or psychologist as an authorized approver may go a long way in supporting those who require time off to take care of themselves or a loved one.

Perspectives of Advocates

We interviewed advocates across the state who were actively involved in passing and expanding paid family and medical leave in NJ, as well as leaders in organizations that advocate for or interface with NJ residents who are likely to benefit from leave. This diverse group of stakeholders offered unique perspectives on the state of TDI/FLI implementation, recommendations for outreach and education, and observations about our culture relative to taking time off to care for oneself or a loved one. Advocates had knowledge of different kinds of workers and the kinds of supports or barriers workers faced when applying for or requesting leave. The advocate who was the “nexus of information” in managing the Facebook group has detailed knowledge of the leave policy and the ways in which stakeholders can help to increase knowledge and uptake of leave.

For employers, she explained that there needs to be further education across the state and perhaps further consequences for those employers who do not follow the law:

The biggest glaring gap is employers and H.R. Where do they get their information? How are they incentivized and how do you get them to see the benefits? There's so many different ways and I think the evidence is there and is compelling enough for an employer to want to do this. And frankly, they are obligated under the law, although I don't know that they know that. So making sure that there is a little bit of a carrot and stick approach, I mean, I get wanting to bring them in happily and employers make the case that this is a good thing for their bottom line and retention and all that. But at the same time, I do think we also have to at least advertise or make clear that there are legal responsibilities not just under FMLA because employers do - not always - but they do typically follow FMLA requirements. . . . So, yes, they first have to know they're obligated to do it and then they do have to be held accountable to their obligations. And there are bad employers that probably could be penalized after they've been notified, after they've been told this is their obligation, they still don't do it.

The other advocates were from different agencies across the state. Their experience with NJFLI ranged from cursory to central to the passage of the original policy or the most recent changes to the policy. Their insights are useful in understanding how the policy is lived by workers in New Jersey. Children's advocates outlined how new parents could leverage NJFLI as an alternative to infant childcare, which is often more expensive because it is so staff-intensive. As one of these advocates explained:

[Infant childcare is] uncommon and it often is hard to access for many families. I think the assumption societally is that that is a family concern I think for something like 50 or 60 percent of children under the age of one, all of their parents are in the labor force, either whether they're single parent then it's one, if it's two parents then it's two. All of their parents are in the labor force. So where does that keep going? Right? If they have a parent at home with them, it's not to say that having a parent at home with you is a guarantee that that's high quality care, but . . . parents are generally highly motivated to care for their children and are often uniquely capable, particularly when you think about things like breastfeeding or other kinds of supports And so part of solving the child care supply issue in New Jersey is ensuring that there's sufficient supply of infant care, and if some of that supply and in fact, if a lot of that supply for children under three months, under six months can be provided through family leave, that helps with the supply of child care and it helps parents be assured that the child care that they're getting is high quality because they're the ones providing it.

Advocates were also aware of the barriers that workers face when trying to apply for leave, and they noted that there is a need for greater enforcement so that employers are providing the right information to their employees and approving leaves. Some employees ask for leave and are given misinformation by their employers:

Folks would call in and they would say my employer says I get two weeks because that's what the handbook says. And we'd say, well, look at your pay stub—if it says FLI family leave on there, you're paying into it, you're eligible. And then they go back to their employer and they say, oh, but you don't want that. . . . Or employers who would say we don't do that, you don't get to take that time. And then they'd show them and then it's like oh that, yeah we do that. So I think that and the other concern is that a lot of folks do use their employer based family leave time rather than the state program. So, in some cases . . . the employer program may be better.

Advocates noted that there are substantial barriers for marginalized communities who may not know enough about FLI because they are wary of a system that has not been supportive over time:

... the concern, right, is one that pregnant moms are a vulnerable population for a variety of reasons. And when we're talking about, particularly Black and Hispanic mothers who are less likely to trust systems more broadly, less likely to trust in particular the medical system because of systemic racism, less likely to get first trimester prenatal care, less likely to access the systems, these systems. That's an area where having information about FLI is particularly important. And again, I think it's difficult to sort of spread the word because they're not necessarily plugged in to other systems. If you think about, let's say, parents of school children, there's lots of ways that schools can get information out to parents. There's less if we said how do we get information out to every pregnant mother in New Jersey there's not exactly a system to do that. And so that's a substantial concern when it comes to the bonding side as well.

Employer Experiences with FLI

Employers expressed mixed feelings about the policy itself and their employees' use of it. We interviewed HR workers at different kinds and sizes of employers. They were supportive of their employees taking leave, but sometimes found the administration of it difficult. HR managers noted that assisting employees with the application for leave was time-consuming and difficult and one noted that they were about to transfer the leave responsibility to a third-party insurance company. Another employer whose employees were highly paid noted that their employees often took employer-sponsored PTO rather than NJFLI because the wage replacement cap was too low. This resulted in employees using up their PTO when they could have used the NJFLI instead. One employer noted that employees could top off their NJFLI with PTO so that they were only using enough PTO to get them to full wage replacement.

Employers expressed that they needed more information from the state as information changes and refresher trainings along the way to help them educate their employees properly. One HR manager explained that their employees often come to them for answers rather than the state, so increased employer education is important:

There's got to be a very basic way like I try to teach everybody from as simple of a standpoint as I can and I just say, alright, family leave has nothing to do with pay. That's

just a law that says we're going to hold your job. And then we talk about how the pay works. So, you know, just simple things like that would be really nice just make it very basic. It does not need to be complicated. And if you make it complicated for the average person, it's just as complicated for HR people. We're not spending our entire day working on FLI and disability. And really, the truth is, once you pass somebody over to the state for disability, you kind of move on and you're working on your other things. You pass them on to the state. But if the state is not providing the support that the employees need when they're on these benefits and things are being delayed and they're not getting questions answered and nobody's answering the phone, the documentation is not getting to their employer quickly enough, then the burden comes back to us as their employer and we can't really help them so much. So actually, the idea of like a designated person just for the employer would be really, really, I think, helpful for most employers.

One employer explained that her workforce was not very experienced and many were in their first adult job. For these and probably many workers across the state, explanations of benefits in clear and simple terms is very important. The complexity of the system with job protection and pay being part of separate policies makes it difficult for employers to explain the benefits to employees. Finally, some employers were easily able to handle the workforce disruptions caused by leaves, but others found it difficult to adjust, especially if their employees had specialized training.

State Administrator Perspectives

State administrators of the policy had a unique perspective on the current state of the program as well as what they would need to make the program work more smoothly. Some of their issues centered on the policy provisions, but others could be addressed without a change in the policy. We spoke with state administrators responsible for outreach as well as the director of the program. They noted that while the policy is over ten years old, it was passed in an administration that was supportive of it, but experienced its early implementation during an administration that was unsupportive or at least did not actively support it. Therefore, claimants had to find the information, but the state did not actively promote or participate in outreach. The current administration supports the policy, so administrators at the Department of Labor described making internal changes that would support and buffer the policy going forward.

The state government has been working with advocates throughout the state to educate workers as well as employers about the benefit, how workers can use it and how employers can support those workers:

The other side is partnering with community-based organizations and advocates through the Time to Care Coalition. We really built a partnership with them to try to amplify each other's efforts on outreach. And that's a way for us to also really listen and hear what is the information that's needed . . . what are the languages that are needed? Then I think the other couple components would be we've been trying to make an effort to build some more advertising outreach . . . we had our first digital social media ad campaign that rolled out this year, which was really great. And we're hoping to do more of that. And

again, targeting with that, we made an intentional effort to try to target. Fathers and partners, knowing that they are less likely to utilize the program for the, for family leave insurance, and then I think there's a lot we could do in that realm that is on our list.

Administrators think they have more to do to educate employers on the benefit since workers often go to their employer first when they are in need of family leave. Efforts to date have included building an employer toolkit and working with state and local chapters of the Society of Human Resource Managers (SHRM), chambers of commerce, workforce development boards, and others in order to inform more employers. One of the state administrators explained:

The first place that most employees go to is their own employer when they're looking for these answers. So if that is the case, then we need to spend time on the employer piece and giving them the right information and showing them where to go and showing, teaching them these are your responsibilities as an employer beyond just putting up this poster, that there are certain responsibilities . . . that there are places where you can go to get answers. And I feel like we believe that strongly, that we have a role in educating employers and that it's something that it would be very hard for other organizations to do.

However, this was accompanied by a caveat that sometimes employers see the Department of Labor as enforcers of laws and may not be welcoming to the department when it comes to education about family leave. This tension is acknowledged but the state still believes they have a role in education of employers. They noted that some of this education is focused on ensuring that employers know that FLI is a benefit into which employees pay with payroll deductions and are entitled to it. Some employers still do not understand that they don't pay into it themselves, rather their employees pay into it. In addition, they noted that the state has a role to play as the owner of the FLI program because if the state is not seen as an authority on the program, employers and employees may find inaccurate information elsewhere.

State administrators have tried to instill a change in the internal program culture. Because NJFLI was built on a Temporary Disability system that in years past had made fraud detection a priority, they aim to help claims examiners view themselves as helping families with FLI as a benefit. They are trying to retrain the staff to not see their job as identifying fraud, but instead as trying to support families with their caregiving needs.

State administrators admitted to encountering systemic barriers within the state government to collecting accurate data about leave use and uptake. They pinpointed procurement rules as the reason for this and did not necessarily think there was a way for money from a funder to remedy this:

But any time I see us trying to move forward and give us a system that collects better data or give us a system that is more user friendly or give us a new way for people to interact with us, it's not the money that stops us. It's all of the things that you have to do in order to get to the place where you could buy something.

However, they did note other resources where some funds could help them. The state administrators relied on the Facebook group set up by advocates to glean information about what is working and what is not during the process of applying for and taking leave. They pinpointed this information as vital to their own assessment of their program and thought there could be a way for funds to be allocated toward user testing of the website or application process.

The conversations the administrators have across departments in New Jersey and across states have been instrumental in their thinking about the way the policy is implemented in New Jersey. Therefore, they suggested that having a way to continue to convene multiple departments within the state to discuss overlapping policies and systems can be beneficial. In addition, they suggested that a conference or other convening of state administrators and civil servants from across multiple states could be a useful way to share successes and opportunities for change across all of the states that have passed or are contemplating passing paid family leave laws.

CONCLUSION

Paid family and medical leave has been called upon as a strategy for reducing gender inequality and racial disparities in the workplace, and for improving child and family well-being. It is one part of a larger group of policies that supply the scaffolding for a care infrastructure. While paid family and medical leave was seen as an important policy prior to the pandemic, the disruptions of COVID-19 have served to highlight and exacerbate pervasive structural inequalities while also fueling momentum to have care included as a pillar in our nation's essential infrastructure.

Policy and infrastructure are critical components that help working families to balance care as well as employment, but policy can only go so far without active efforts at implementation and outreach. This study shows the ways in which there are still holes in the implantation of the policy, even though it has been in place since 2009. While the policy is clear and on the books, its initial implementation during an administration that was not actively promoting it set it back. The state's administration must be supportive of a policy to ensure that the agencies within the state are working together to implement and promote the policy and its benefits. Even with a policy passed at the state level, workers are still reliant on their employers to provide them with the space to use their leave benefits. If workers continue to encounter barriers to leave use because of a workplace culture that either actively retaliates against workers or passively indicates a hostility to leave, workers may not feel comfortable taking it. If the state is not actively enforcing the policy and supporting workers, employers may feel comfortable discouraging leave-taking. In addition, even if the policy itself is written in a gender-neutral way, it takes active encouragement to change the culture of care and leave-taking from one that relies almost exclusively on women to one that balances care work between women and men. This may involve tweaks to the policy that encourage men explicitly to take leave, as some European countries have done. It also may be done at the employer level, with employers actively encouraging men to use the leave to which they are entitled. Finally, there are opportunities to promote a culture of care among men themselves through outreach from advocacy organizations or other community groups. This culture of care is

an important component of increasing the uptake of leave—policy can outline the benefits available, but employees have to feel like they will be supported in their leave in order to feel comfortable taking it.

There were some limitations to our study. We interviewed a small number of employees who were all mothers and who mostly used their leave for bonding. We interviewed HR directors, but did not capture employers from smaller companies that may not have an HR department and therefore may have different opinions about if and how their workers take leave.

Because of these limitations and in light of what we learned from the interviews, future research on leave in New Jersey is necessary. Here are some important issues to address:

- FLI uptake appears to be low when the leave is taken for caregiving outside of bonding with a child. There is room for more research on this. In particular, it would be important to examine whether multi-generational households that may include grandparents, aunts, uncles, or other kin, may distribute the care work differently than households with smaller, nuclear families. A report from Generations United (2021) indicates that 79% of multi-generational households report ease of providing care as one reason for living in this type of family arrangement. It will be important to examine further whether living in a multi-generational household also contributes to a disparity in leave use across races or ethnicities given that more Hispanic (45%) and Black (33%) families live in multi-generational households than white families (19%).
- Family members who identify as male are an understudied population as it pertains to leave-taking. Across the lifespan, more women than men participate in family caregiving. It will be important to examine more closely the reasons for the gender divide in caregiving—whether they be workplace culture, family culture, individual identity, financial or some combination of all of these. While population studies give overall numbers and percentages of leave-taking, qualitative studies may provide more nuanced information about why men do not use leave at the same levels as women. The gendered nature of leave-taking contributes to the ongoing and persistent gender wage gap as women are out of the workforce for longer periods. Encouraging more men to take leave may result in a narrowing of this wage gap.
- Workplace culture is another potential area for further research. We learned in this study that the ways in which supervisors and fellow workers talk about leave may influence whether someone takes leave. We also learned that while maternity leave is mostly supported, leaves taken for other reasons are often questioned. New research can provide information about how the state or other advocates may be able to work with employers to change their internal culture and support employees with caregiving and leave-taking.
- Further research is also necessary to determine how paid leave works in tandem with or in opposition to other care policies. Using paid leave in conjunction with other social policies may be a way that families can leverage their own care work with the outsourcing of care

work. Families may be able to leverage paid family leave to avoid the high cost of infant daycare, and then transition to lower cost care later when the family leave is exhausted. More studies are needed to examine how families leverage social welfare policies to provide care for their families and whether paid leave is the right choice for all families. In addition, the more research is needed on how families may use the more expanded definition of “family” to piece together care needs across time—this may also shed light on how multi-generational families might be able to use their leave across family members.

- Workers also told us that even though they appreciated having access to leave, they were not always confident they could take it without retaliation. In addition, the advocate who worked with cancer patients informed us that some families may not want to risk their jobs or health insurance in order to use their leave benefits. This is an important piece of the policy that should be examined further. Families who may need leave, but who also are responsible for the family’s health insurance, may choose to cobble together care in some other way. Further qualitative research with family caregivers who need leave for something other than bonding would be important to understand how this group is dealing with their need for care. New research with workers whose jobs are more precarious might also reveal some additional information about how these workers view the benefits to which they are entitled and whether they feel that they can use these benefits.
- Given the recommendations in this report, targeted outreach efforts and their outcomes could be studied to see whether these efforts result in greater leave uptake. Providing a subset of human service agencies with the resources necessary to assist families with family leave could result in more families using leave and feeling financially able to tolerate a longer leave.
- Targeted interventions could also be implemented and tested around the culture of care in workplaces. There is an opportunity to develop training or materials that would teach employers how to speak about leave and how to speak about care that would encourage leave-taking rather than discourage it. In addition, training could be targeted to the workers themselves to challenge the notion that care work is meant to be done by women and to encourage workers to support each other in their leave-taking.
- Further quantitative research is also needed to determine what sociodemographic characteristics are associated with greater numbers of workers taking leave and taking longer leaves. These characteristics could be work-related, family-related or both, but more detailed data are needed about the workers who take leave.

In conclusion, this qualitative study produced rich information directly from stakeholders that will help to inform policymakers and advocates moving forward. While New Jersey continues to be a leader in paid family leave, these interviews indicate that there is room for improvement and further outreach and education as well as research is necessary to continue to increase uptake. In particular, leaves outside of maternity leave (including paternity leave and leave that is not for

bonding) are still understudied and could be a source of uptake that can be explored and exploited. Additionally, developing a culture of care that includes paid family leave as well as other social policies is still a need in New Jersey and can be addressed at the employer level, but also at the individual level. We have identified through these interviews and the themes that developed some interventions and recommendations that can contribute to increasing knowledge and uptake of leave in New Jersey. These recommendations do require the efforts of advocates, employers and state administrators together, and there must be political will to move forward. However, we believe that these efforts will result in improved outcomes for families if they result in families feeling more supported across the lifespan in their need *to* care as well as their need *for* care.

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ABOUT THE CENTER FOR WOMEN AND WORK

The Center for Women and work (CWW) engages in research, education and programming that promotes economic and social equity for women workers, their families, and communities. CWW's work focuses on addressing women's advancement in the workplace; providing technical assistance and designing programming for educators, industry, and government; and engaging in issues that directly affect the living standards of working families in New Jersey and across the nation. CWW is housed within the School of Management and Labor Relations at Rutgers, The State University of New Jersey and is a member of the Institute of Women's Leadership Consortium.

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