California’s Paid Family Leave is an insurance program that allows individuals to be compensated when they need to take time off of work to help care for a family member or newborn child, including adoption. This law was enacted in 2002 throughout the state and is governed by the State Disability Insurance program. This family impact analysis examines California’s Paid Family Leave through a family’s perspective. Research was done utilizing the University of Wisconsin – Stout’s library database to find peer-reviewed scholarly articles on the subject.

After conducting a literature review on a variety of scholarly resources, there are explanations of the problems, solutions, and analyses of paid family leave in relation to the addition of a newborn.

The United States is the only industrial nation that does not offer paid maternity leave to families. This lack of paid leave creates many problems for the entire family especially from a financial standpoint. Breastfeeding is becoming an essential aspect of raising a healthy baby yet mothers who must return to work often quit breastfeeding because of the obstacles associated with employment. The physical, mental, and social health of both infants and mothers are greatly negatively impacted when mothers are forced to return to work too soon. The entire family is affected by a lack of necessary time off for parents after the birth of a child from marital discourse to unfair gender expectations and stereotypes both at home and in the work place.

A unified paid leave policy across the United States is necessary to provide a positive solution for all individuals involved. The California Paid Family Leave Policy helps with wage replacement income for the individual that is taking time off for care for that loved one. California is pioneering a way to make a policy that will help people find a way to afford time off with children.
The Family Medical Leave Act (FMLA) is one way that employees are able to take time off with fifty percent of wage replacement of what they have made during that year and the previous year. Many employers and states offer solutions such as paid leave options for both men and women. Solutions are needed to give mothers the option to continue breastfeeding while they return to work. Health issues and financial stability within the growing family require solutions in employment. After years of trial and error, policies that are family focused are being implemented within the work environment that will benefit families and individuals.

The California Family Leave Policy was enacted by the state of California and was the first of its kind in the United States, the only industrialized nation without a paid leave policy (Pressman & Scott, 2014). This program helps new parents to take time off after childbirth to care for their newborn at home, and provides up to six week’s pay at fifty-five percent of prior weekly earnings up to a maximum of nine hundred and eighty-seven dollars a week. The California paid leave policy provides up to six weeks’ pay at fifty-five percent of prior weekly earnings up to a maximum of nine hundred and eighty-seven dollars a week, within the first 12 months of a new family member’s arrival.

According to research, paid leave can be taken in hourly, daily, or weekly increments as needed (The California Work and Family Coalition, 2013). Furthermore, an employee may take their paid leave intermittently while working part-time (State of California Employment Development Department, 2016). Is this type of paid leave enacted in any other countries in the United States? Yes, in California, New Jersey, and Rhode Island.

Implementation of the California Paid Family Leave Policy program in the community or state starts with an assessment of needs for such a policy. The Paid
Family Leave Policy is designed to help families that need financial help when they go on maternity leave or have a family member get sick and need personal time to take care of the loved one. Parents of newborns voiced frustrations with acquiring information about family leave. Health care providers are not common sources of information for parents of newborn and human resources departments of employers do not freely give information or offer sound advice (Chung et al., 2012).

Employees are only eligible for FMLA if they have worked in the public sector, or for a private employer with fifty or more employees. The California Paid Leave (PFL) program does an adequate job of recognizing that individual’s development and well-being are profoundly affected by the quality of their relationships with close family members and family member’s relationships with each other. The FMLA may not cover all parents, as in if they don’t work full time or live in poverty and may not cover wage replacement and saving of their jobs when they come back from leave. In the research that was conducted about the California Paid Leave Policy we used the for the Family Impact Analysis part of this paper. We researched how family is impacted by the policy in which how parents take time off for maturity or for a family that is seriously ill.
Problems

Inadequate Leave Options

New parents face many challenges after the birth of a child. One notable challenge is not being able to take adequate time off work to care for their infant. The Family Medical Leave Act of 1993 (FMLA) requires employers to give employees up to twelve weeks of job-protected leave for the birth of a child or adoption (Chung et al., 2012; Pressman & Scott 2014). Unfortunately, FMLA has many exceptions that make it difficult for new parents to benefit from it or even use it. FMLA does not cover part-time employees, employees who have been with their current company for less than a year or employees who work for companies employing less than fifty workers. Any FMLA leave requested by employees is paid at the employers' discretion according to the companies' policies (Pressman & Scott 2014). Key employees can also be denied this benefit if their employer asserts that it would cause “substantial and grievous injury” to the company (Pressman & Scott, 2014). Accounting for all of these exceptions means that only about twenty percent of new mothers are eligible for FMLA. Considering that the leave is unpaid approximately only seven percent of the female workforce is able to take advantage of FMLA (Pressman & Scott 2014).

Every nation in the world, whether rich or poor, should provide paid family leave (Lerner 2015). Over 100 countries, including industrialized nations, have adopted parental leave polices insure the right to at least two or three months of paid leave around the time of childbirth (Ruhm 2000). The United States is the only industrialized nation without a paid parental leave policy (Pressman & Scott, 2014). Some states, however, have decided to enact their own paid leave policies. California was the first state to pass the Paid Family Leave Insurance (PFLI)
program in September 2002 and enacting it on July 1, 2004 (Chung et al., 2012). Two other states, New Jersey and Rhode Island, have followed suit to enact their own paid leave policies for new parents effective in 2008 and 2014 (Pressman & Scott, 2014). This means that forty-seven states are not following paid family leave standards that other nations have deemed to be necessary with parental leave policy. PFLI can help ease the financial burden of parents who might not otherwise be able to take advantage of FMLA, but for many new parents this is still not enough. California provides up to six weeks’ pay at fifty-five percent of prior weekly earnings up to a maximum of nine hundred and eighty-seven dollars a week. New Jersey offers the same duration of leave at sixty-six percent of previous weekly pay up to a maximum of five hundred and forty-six dollars (Pressman & Scott, 2014). Even with the paid leave that California and New Jersey offer, families still find the pay cut to be difficult on finances.

Employees may not take advantage of either paid or unpaid leave because they lack the knowledge regarding the policies. In a survey of California adults, just twenty-eight percent knew about PFLI and fifty-five percent knew about FMLA. Employees who know about the programs do not fully understand all their options (Chung et al., 2012). Parents of newborns voiced frustrations with acquiring information about family leave. Health care providers are not common sources of information for parents of newborns and human resources departments of employers do not freely give information or offer sound advice (Chung et al., 2012). Current leave policies clearly are not working as well as they should when you consider the results from a 2012 survey performed by Abt Associates for the Department of Labor which found that out of ninety-three women who took leave to care for a new baby, about twenty-three percent were back to work within two
weeks (Lerner, 2015). This is a concerning discovery considering all the health implications addressed below.

**Breastfeeding**

Research indicates that breastfeeding is important to a child’s health, but barriers such as inadequate maternity leave make it difficult to initiate and sustain breastfeeding. Infants who are breastfed have a lower risk of sudden infant death syndrome, asthma, and childhood obesity. Their mothers have lower risks of breast and ovarian cancers as well as osteoporosis (Hurst 2007). The American Academy of Pediatrics recommends that infants are breastfed exclusively for the first six months and continue to breastfeed with the addition of solid foods until the age of one year (Hurst 2007). One of the biggest reasons that women discontinue breastfeeding early or choose not to breastfeed at all despite the benefits is due to work related issues; primarily not having sufficient time off from work or a work environment that does not support breastfeeding (Obuanu et al 2011). The American Academy of Pediatrics discovered that working mother’s breastfeed less than mothers who are not working or have suitable leave options. Increasing the percentage of infants that are breastfed is one of the United States Government’s public health goals and is outlined in both Healthy People 2010 and 2020, yet the United States family leave policy is not conducive in promoting this goal.

Time matters when it comes to breastfeeding. Longer maternity leave is associated with higher rates of breastfeeding and longer continuation of breastfeeding (Obuanu et al 2011). On average, each week of maternity leave available to the mother was associated with another half week of breastfeeding and all the benefits. Mothers receiving paid maternity leave were associated with higher rates of breastfeeding and longer continuation of breastfeeding than those taking unpaid leave (Ruhm 2000). When California became the first state in the
United States to implement a paid family leave policy, the rate of breastfeeding rose as much as twenty percent up to nine months after the birth of a child (Huang & Yang 2015). The biggest problem associated with breastfeeding is the time it takes away from work, especially for families in need of the income (Rippeyoung 2012). This problem is witnessed most with single and low income mothers and their infants. It is difficult or nearly impossible for a woman to breastfeed while on the clock at work (Rippeyoung 2012). Many women therefore must choose to formula feed while working as a necessity to continue their employment. Formula feeding will also add an additional one-thousand seven hundred and thirty-three dollars cost per year to the family (Hamm 2013).

**Negative Impacts on Health**

The National Longitudinal Survey of Youth proposed that longer maternal leaves benefit the child’s health and development drastically (Chatterji and Markowitz, 2005). An infant’s life is so delicate that the health factors associated with mother’s returning to work can be the difference between life and death. Winegarden and Bracy found that paid maternal leave was associated with reduction of the death rates among infants and young children (Ruhm 2000). The timing of a mother’s return to work makes a big difference in the lives of the children. Children whose mother’s return to work after nine months saw no difference in cognitive or behavior health then children whose mothers remained home with them for three to four years but if a mother returned to work within the first month of a child’s birth their IQ score, tested with an average of a seven point deduction (Han, Waldfogel, & Brooks-Gunn 2001).

The negative effects caused by an inability of a mother to take family leave for an infant last a lifetime. Maternal employment during the first year of the infant’s life was associated with increases in behavioral problems that lasted into
adulthood (Ruhm 2000). Children whose mothers were absent due to work also had long term issues with the ability to form secure attachment bonds, not only with their mothers but other people throughout their lifespan. Maternal employment in the first year of life is associated with insecure attachment (Han, Waldfogel, & Brooks-Gunn 2001). The children also suffer from an inability to adjust and act appropriately in emotional situations. Maternal employment in the first year of life has a delaying, nonexistent effect on later emotional development (Han, Waldfogel, & Brooks-Gunn 2001). Children whose mothers returned to work within three months after birth had lower cognitive test scores throughout childhood (Chatterji and Markowitz, 2005). Achievement scores on test are even affected. A reduced math achievement score by an average of five points at age seven and a reduction in reading comprehension by an average of five points both at age five and eight (Han, Waldfogel, & Brooks-Gunn 2001). The above research suggests that giving parents the right to longer periods of parental leave with compensation for income will lead to improvement on the children’s cognitive and behavioral health.

The length of maternity leave can have a big influence on both the mother and the child. There is a significant amount of research by Dagher, McGovern, and Dowd on mothers who take varying amounts of time off. They discovered mothers who have shorter maternity leave have a greater chance of experiencing depression and other mental health issues; returning to work shortly after childbirth does not allow the mother to fully heal, physically and mentally, after delivery. Stress issues related to missing and getting behind at work also play a role in the mental health of a lot of mothers (Dagher, McGovern, and Dowd 2014). Mothers who return to work less than six months after having their child have an increased risk of postpartum depression symptoms (Dagher, McGovern, and Dowd 2014). The first three months after the birth of a child have the greatest amount
of risk in these depression symptoms (Dagher, McGovern, and Dowd 2014). Women with infants have had the fastest growth in labor force participation of any group in the United States (Han, Waldfogel, & Brooks-Gunn 2001). Increasing maternity leave by one week is seen to have a six to seven percent decline in symptoms of depression for the mother (Chatterji and Markowitz 2005). Household income plays a large role in the amount of leave a mother is financially able to take and directly relates to the risk of depression. Households where the average income is between twenty-five to fifty thousand dollars annually experienced the greatest amount of depression (Dagher, McGovern, & Dowd, 2014).

Physical health is also affected by leave options especially related to a mother’s income. Mothers who had household incomes of one hundred thousand dollars or more annually had better physical health than women with incomes less than twenty-five thousand dollars (Dagher, McGovern, & Dowd 2014). The length of leave is positively correlated with a woman’s physical health, meaning that the longer the leave was, the healthier the mother was physically (Dagher, McGovern, & Dowd, 2014). Women who returned to work within the first year experienced higher rates of respiratory infections than women who remained at home (Wiese & Ritter, 2012). This is due to the women having a greater amount of direct exposure to infections either within their workplace or the daycare that their child is in (Wiese & Ritter, 2012). The physical health of a mother is of utmost importance during the first year due to the demands of an infant. The typical six week recovery time recommended to mothers may not be long enough. It takes the full six weeks, if not longer, for a woman’s body to return to its non-pregnant state (Dagher, McGovern, & Dowd, 2014). Many women experience minor to moderate physical pain for weeks to months after delivery (Dagher, McGovern, & Dowd,
An early return to work is expected to be problematic as most women are still in the process of healing four months after childbirth (Wiese & Ritter, 2012).

**Family Disparities**

The transition into parenthood can produce negative emotions not only with mothers but with fathers and within the couple relationship as well. The bond between an infant and parents is the foundation for physical, psychological and emotional growth (Young 2013). A strong relationship that is built on support and positivity from the parents creates a better bond with the infant (Young 2013). As the infants grow they develop a strong attachment to those individuals that have been able to provide a stable and loving environment. This initial bonding process provides the support and encouragement for the infant to reach many of the important emotional, social and developmental milestones (Young 2013). Increasing demands on fathers, the couple, and mothers in particular can strain the family, and even more so when there is inadequate support within the relationship.

A strain on the relationship of the couple is very common. There are two main points of dissatisfaction in relationship after the birth of a child: poor relationship satisfaction and a perception of poor support from their partner (Ayers & Parfitt 2014). Most couples show a decrease in positive interaction, increase in conflict, and a decline in relationship satisfaction after the birth of a child (Mortensen, Torsheim, Melkevik, & Thuen 2012). The issues that are most common in contributing to couple dissatisfaction after the birth of a child are relationship duration, pregnancy planning, religious views, and income (Mortensen, Torsheim, Melkevik, & Thuen 2012).

Women that are career oriented feel torn between staying home and work. Between 1980 and 1998 the increase of women with infants in the workplace rose from thirty-eight percent to fifty-nine percent (Ruhm 2000). Trying to balance
work and family causes a frustration at the loss of one’s work identity and the increase of household and family related responsibilities (Levy-Shiff 1994). As a partner struggles to find their new identity additional stress is put on the couple relationship (Levy-Shiff 1994). For the partner that continues to work, a new stress of balancing work and home adds to the changes and challenges of adjusting to the new family dynamic (Minnotte, Minnotte, & Bonstrom 2015). The stress this partner feels at work is then carried home to the already frustrated home-based partner. (Minnotte, Minnotte, & Bonstrom 2015).

**Gender Inequalities**

The couple dissatisfaction at home is only increased by the inequalities that are faced in the workplace. The gender wage gap leaves mothers earning an average of nineteen percent less than fathers. For every dollar made by a father the mother will only earn eighty-one cents (Katz-Wise, Priess, Hyde, & García 2010). The inequality for mothers doesn’t just end with wages, employers noted being reluctant to hire or promote mothers because they expect them to take time off to care for the family (Rudman & Mescher 2013). Employers have discrimination ideals towards mothers labeling them as inferior workers because of the perceived demands of running a household (Rudman & Mescher 2013). Many stereotypes still exist within the workplace about gender roles and who is the primary caregiver within the family. Stereotypes about mother’s domestic roles are reinforced by parallel stereotypes assuming a lack of domestic responsibility for fathers (Garcia 2012).

If companies offer family leave benefits for both sexes, the workplace culture often discourages fathers from using these benefits. Fathers face blatant discrimination in the workplace, including being eligible for fewer leave benefits than mothers (Rudman & Mescher 2013). Employers often do not even provide
parental leave for fathers, and when they do, they often hide it in the fine print, causing many fathers to overlook its availability. According to a 2008 study by the Families and Work Institute, fifty-two percent of employers offer some pay replacement during maternity leave while only sixteen percent of employers offer pay replacement for paternity leave (Garcia 2012). Nine out of ten law firms had separate paternity and maternity leave policies that either gave fathers less leave than mothers or required fathers to prove that they were the "primary caregiver" in order to receive the parental leave (Garcia 2012).

Fathers who seek family leave violate gender norms and risk workplace discrimination and stereotyping. The view of fathers as providers first and caregivers second encourages discrimination against male caregivers and leads to overwork and inflexible work schedules to contribute to stereotypical divisions of labor within families (Rudman & Mescher 2013). Fathers who request a family leave are viewed as poor organizational citizens and ineligible for rewards. In addition to a poor worker stigma, it was found that male leave requesters suffer femininity stigma. They are viewed as weak and uncertain rather than having more masculine traits such as being ambitious or competitive (Rudman & Mescher 2013).

In general, men and women alike risk penalties and discrimination for violating expectations based on gender norms. It appears that men are more disapproved of than women for failing to uphold the “ideal worker” image; possibly because this image is created almost strictly for men, who have traditionally relied on their wives to address family obligations (Rudman & Mescher 2013). The present research supports that men who ask for family leave are feminized for “acting like a woman” and punished as a result. Women, even when they take leaves that are the same length as men, report significantly greater pressure from colleagues, bosses, and workplaces to return to their jobs after taking a leave. People with family
obligations suffer hiring discrimination, miss out on a promotion, or even face termination because their employers penalize workers who do not meet the “best worker” standards.

-Solutions-

Inadequate Leave Options

Millions of Americans are faced with a dilemma of how they will maintain a balance between performing well in their careers and dedicating adequate time to their families. When parents decide to take time off to care for their newborn children, they are confronted with the burden of not only emotional stress, but also financial strain and the concern of being reprimanded by their employer. This predicament does not discriminate and is something people of all socio-economic statuses face. However, the intention of the Family Medical Leave Act (FMLA) was to relieve these tensions in working parents, but it has not provided adequate support for families in today’s society.

Taking extended leave from work through paid family leave is one solution to the financial burden families ensure when they need to take extended time off from work. FMLA is a federal program, offering a length of leave from six weeks to twelve weeks; both short and long-term leave depends on the location and work. A national approach for FMLA requires unpaid leave with job protection. Various forms of FMLA have been proposed, however, variables depending on employer length of time away, paid or unpaid; benefit structure and job protection varies. According to the article in, “Paid parental leave and America’s youngest poor”, paid family leave offers a little over half of the employee’s weekly earnings for up to six weeks, which is funded by employee payroll tax (Pressman & Scott,
Research has shown; this limited amount of time and income just does not suffice and does not allow families to thrive physically or emotionally (Pressman & Scott, 2014).

Other research shows another similar program titled Family and Medical Insurance Act. This program offers a long-term, twelve weeks of paid leave, which would be up to 66% of weekly wage and job protection. Other benefits of this leave Act, is that full-time and part-time employees can receive these benefits. With this provision, more employees and their families will benefit (Chung & Schuster).

The United States is lacking paid family leave compared to other countries. The International Labor Organization examined leave policies in other countries and found that 47% mandated a form of paternity leave, overwhelming, benefits to this leave for both parents (Letitia, 2015). Without paid leave, workers face health, financial and career repercussions (Letitia, 2015). According to the research in the article written by Letitia James, Office of the New Your City Public Advocate, women who received paid leave to care for their child, showed success in the second year of the child’s life, by working more hours, showing higher productively rates. Business owners who are opposed to Paid leave do not help their businesses — but it does not hurt them, either. Looking at this solution, long-term businesses will benefit from an increase in the productivity of their employees.

There are several ways to fund paid leave: employee/employer payroll taxes, Social Security and income taxes. This alternative would offer full pay to new mothers that extend beyond the standard twelve weeks. This policy would be funded by increasing payroll taxes for employees as well as the employer by 0.3 percent (Pressman & Scott, 2014). Adjusting Social Security benefits is also an
alternative to funding paid leave. When parents take time off from work for family leave, they will receive a total of twelve weeks paid leave that would be compensated by extending the time before they would receive social security benefits. The leave policy would allow them to spend more time with their families while their children are young (Pressman & Scott, 2014).

In response to recognizing the need for significant adjustments the United States House of Representatives presented the “Balancing Act of 2007” to address family leave (Hoffman, 2009). This act works to improve overall family life by encompassing medical expenses, childcare and family care assistance as well as reinforcing workplaces that value families. It offers programs such as after school programs, free breakfast programs, and opportunities to work from home. Though the Balancing Act of 2007 was intended to aid families and offers leave for parents, the ratio of four hours of leave during any thirty-day period for a parent to participate in a child-related activity, it fails to focus on the functionality and importance of extended time off for parents of newborns (Hoffman, 2009).

Undoubtedly, thus far, the most successful offer from the federal government is the Family Leave Insurance Act (FLIA). FLIA would allow parents eight weeks of paid leave and accommodate employees with the demands of their jobs (Hoffman, 2009). This Act would allow eligible (determined within each individual company or business) employees to receive a percentage of their income dependent upon their earnings for eight weeks. FLIA is arguably a step in the right direction as it addresses the evident flaws in the Family Medical Leave Act while taking into account the variety of ways families are growing and changing (Hoffmann, 2007).

**Breastfeeding**
The decision to breastfeed is a personal choice for all mothers; this choice has evidence-based information showing the health benefits for both the mother and child. However, many workers are negatively affected when they choose this option. The problems that have been discussed are health issues for child and mother, issues with or lack of support in breastfeeding within the work environment. These problems can affect the parents’ decision to continue or discontinue breastfeeding their child. Some of these factors include lack of privacy and adequate time to pump during work hours. Deficient support, can forces the mothers to make the choice to use formula. Using formula compare to breastfeeding can cause additional financial problems for the family. With the problems that many women face, the government and different agencies have implemented many different solutions to help mothers overcome barriers and support the breastfeeding of their child.

Implementing a policy to support breastfeeding mothers would be an improvement in our healthcare system. All mothers have access to knowledgeable nurses and lactation specialists, especially in the first couple of days when lactation is so important. These nurses and specialists should be aware of the different barriers minority women face to better help them in breastfeeding. A non-supportive hospital experience was noted as the main reason why African American mothers chose not to breastfeed (Department of Health and Human Services 2000). The U.S. Prevention Services Task Force (USPSTF), recommends that coordination of interventions throughout pregnancy, birth, and infancy to help increase the initiation, duration, and exclusivity of breastfeeding. The USPSTF wants education for mothers and, families, to help support the mother while breastfeeding, as well as training of health professional staff about breastfeeding,
and techniques for breastfeeding support (Department of Health and Human Services, 2012).

"Research has shown that there is no better food than breast milk for a baby's first year of life" (USDA 2016). Initiatives within the government are being taken. In January 2011, the United States Surgeon General called, "The Surgeon General's Call to Action to Support Breastfeeding" that requires states that participate in Medicaid programs to cover pregnancy-related services (Department of Health and Human Services, 2012). These pregnancy-related services maybe defined as but are not limited to, prenatal care, delivery, postpartum and family planning services. These services are broad enough to include lactation services, which includes education, individual consultation, and equipment rentals. The opportunity for the leasing of equipment is one solution to help mothers continue to breastfeed while they return to work. The state provides some services to mothers on Medicaid. Mothers returning to work or school and are breast-feeding can receive a breast pump through their insurance (Department of Health and Human Services, 2012). They are covered for a high-grade breast pump for the first year of their child's life. Mothers on Medicaid insurance can also go to lactation classes that will help them effectively breast feed (Department of Human Services 2012).

Mothers could receive disability insurance, which would pay a percentage of their income when they are not working, offering a supportive work environment (Heymann 2016). A mother would not have to take as much leave if the workplace were a supportive environment. Choosing to breastfeed a child should not be viewed as a disability. The workplace should provide space to pump in private, as well as allow a mini refrigerator to store the milk. Offering work flexible hours and breaks to support breastfeeding mothers pump schedule would help support
breastfeeding mothers. Another way the workplace could encourage breastfeeding is by following the “Healthy Families Act” (Earle & Heymann 2011). This Act states that employers must pay two percent of their employees’ wages while they are out.

This way it would be culturally acceptable to breastfeed and would foster a supportive environment for mothers everywhere. For example, California has enacted bills that support breastfeeding when a mother returns to work. An example of the statement is as follows, according to Assembly Concurrent Resolution No. 155: which states that within the State of California, the legislature encourages employers to strongly support and encourage the practice of breastfeeding, offering all employees adequate facilities for breastfeeding or expressing milk (California Breastfeeding Laws & Regulations, 1995).  

Another service the state provides to mothers is the WIC (Women Infant and Children) program. This food program for mothers and children; they highly encourage breast-feeding. They give counseling and support throughout the mother’s breast feeding journey (USDA 2016). With continued use in these local state programs and support mothers should be able to successfully and happily breastfeed. WIC also helps mothers and children financially afford formula, when breastfeeding is not an option that families choose to use for their child.

Solutions for the Negative Impacts on Health

With so many possible negative impacts on health that one can experience after pregnancy or a new child coming into the home (physically, mentally, and emotionally), one would assume there would be multiple federal policies/programs in place to assist in the prevention or reduction in negative impacts on the family. However, to date, there have been only two primary policies enacted to address these issues. The Family Medical Leave Act (FMLA) and the Paid Family Leave (PFL) Program. FMLA was put into place in 1993 by former President, Bill Clinton,
and is the only federal policy thus far that provides “job-protected” leave after childbirth (Dagher, McGovern, and Dowd, 2014.) This policy covers employees who have recently given birth to a newborn, have recently adopted a child, or who have become foster parents to a child within one year of placement. The policy covers up to twelve workweeks of leave in a twelve-month period (United States Department of Labor, Family Medical Leave Act online source).

The Paid Family Leave program was not put into effect until 2004. Currently, the state of California is the only state to have adopted this federal program as a component of its State Disability Insurance program. Therefore, benefits are only available to employees working in California (Huang and Yang, 2015). This policy covers any employee who has recently given birth to a newborn or who has newly adopted or fostered a child, for up to six weeks of benefits (Employment Development Department, State of California online source). However, unlike FMLA, the PFL does not promise job security (Huang and Yang, 2015).

According to the National Partnership for Women and Families (2004), since PFL has come into effect, many other states, have noticed the positive effect it is having on families and are working to implement ways to provide paid family leave. Some of the options that states have looked into are: using general funds from state budgets, giving tax credits to employers who offer paid leave, extending existing temporary disability systems, and expanding unemployment insurance programs to families with newborn children (Chatterji and Markowitz, 2005).

It is evident that both the Family Medical Leave Act and the Paid Family Leave program directly address the negative financial impacts of families upon bringing a child into the home. There has also been an increase in the overall health benefits, both physically and emotionally, for the mother and child since the
implementation of both programs. Studies suggest that mothers who have enrolled in the PFL program have reported an increase in the continuation of breastfeeding past the early postpartum period of three months since they do not feel the pressure to return to work as soon as they might have in the past. According to the U.S Department of Health and Services, the positive health benefits to an infant of an extended period of breastfeeding include reductions in the risk of Sudden Infant Death Syndrome, diabetes, asthma, and childhood obesity. The mother benefits as well, from not only the bonding experience of breastfeeding but also from the decreased risks of developing ovarian and breast cancer in the future. (Huang and Yang, 2015).

Mothers who take the full twelve weeks of leave are at a greater advantage for their physical healing during that postpartum period as well. According to some longitudinal studies, completed in a study reported in Journal of Health Politics, Policy & Law, it has been shown that mothers who take only the six weeks leave do not physically heal as well as those who take the twelve weeks leave. Many women are still plagued with several mild to moderate discomforts such as headaches, back and neck aches, and fatigue during the first six weeks postpartum. Studies further show that mothers who take the full twelve-week leave from FMLA are seen to have a much fuller recovery, thus reducing the negative impact of pregnancy and childbirth and the need for further medical care later on in life (Dagher, McGovern, and Dowd, 2014).

Improved mental health is also a benefit for mothers since the enactment of FMLA and PFL. According to research, mothers are at a high risk of experiencing postpartum depression or some other form of mental illness. Mothers who take maternity leave to experience a decrease in their depression by six to seven
percent for each week that the mother takes off past the first initial three months of the postpartum period. (Chatterji and Markowitz, 2005).

Ultimately, maternity leave length does not just affect the mother; it also affects the child’s physical health and cognitive development. Research shows that longer paid leave is associated with a decrease in infant and child mortality (Chatterji and Markowitz, 2005). Data from the National Longitudinal Survey of Youth suggests that cognitive development in childhood is associated with the amount of time the mothers stayed home to bond with and nurture the child. In fact, this research has shown that cognitive development is increased further when mothers take more than twelve weeks of maternity leave (Chatterji and Markowitz, 2005).

Family Disparities

Many people do not necessarily think about the effects of parenthood on a relationship. When a child is born, the sole focus of couples’ lives becomes that child. The more you can bond with your child as a family, the healthier it will be. With our lack of a decent maternity leave program in the United States, families are forced to work soon after having a child. This along with current caregiver role expectations can lead to an unhealthy relationship between parents, which affect the health of the child.

Something that goes along with that is the parenting role expectations. Men and women are seen differently when it comes to parenting. Women are supposed to be the caretaker while men are expected to be the breadwinner. This is considered with some of the maternity leave policies that are in place. When women are offered maternity leave, they become stay at home mothers while their partner is off working and earning the money for the family. With more and more women entering the workforce, men are starting to take on more parenting
responsibilities. Offering maternity leave and not paternity leave further complicates this shift in parenting responsibilities. When a couple brings a child into the world, the mother expects those parenting roles will be shared. If the parenting roles are not split, a stain can be put on the relationship. Many people see women taking maternity leave as a burden while considering paternity leave as "father of the year". Normalization is needed for the role a father plays in parenting so that women can go back to work without putting large amounts of stress on her family. This can be done by allowing both maternity and paternity leave. This allows the family to bond as a complete unit and allows parents to share responsibilities. They can create a routine for themselves and then return to work together and keep that routine going.

Families are impacted positively and negatively when a child is born, one area where families are affected is financial. Solutions for families have made it possible for men and women to remain in the workforce after the child is born or if any issues arise while the woman is pregnant. Many employers offer FMLA. Having this benefit is associated with a greater likelihood of women returning to work part-time or full-time (Schott, 2011). The possibility of returning to work helps the family not enter into as much financial distress, compared to if one of the parties decided to remain home with the child. Reports show that women who have children do report less income significantly, compared to their co-workers with no kids. Men, however, seem to have no ill effect when it refers to their earnings after having a child, which creates a different dynamic in the social-economic relationship between a couple after having a child (Anderson, Hasstedt, Kavanaugh, & Sounfield, 2013). Some states have implemented different programs to help low-income families when leave of employment is needed such as the birth of a child. Wisconsin Works (W-2) is a resource that can be used for short periods, to care
for an infant or an individual that has an at risk pregnancy. With these two programs, women can receive a monthly payment, if eligible for this program. Woman can also participate in other areas such as Food Share, Medicaid, childcare assistance and eventually Job Access to gain employment (Wisconsin Department of Children and Families). This resource is a solution to help offset a family cost when leave is needed after the birth of a child.

**Gender Inequality and Family leave**

Gender inequality within families and at work can be exacerbated by the birth or adoption of a child. This can result in career setback and strain in the couple relationship. When considering family leave, the differences between fathers and mothers should continue to be investigated. Solutions will help bridge the gap. Once again, the United States lacks in the leave policies that are gender neutral. Looking into other countries that offer paternity leave is a solution that appears to be working for families. Research shows that “fathers attach to their babies in the ways similar to mothers and at the same time, making it important for new dads to spend as much time as possible with their newborns” (Balter, 2015). It appears that this statement helps strengthens the need that the United States, needs to look into similar family leave options like other countries such as Belgium. Belgium offers ten days of dedicated paternity leave, either paid or partially paid or unpaid. The country, also offers seventeen weeks of additional days of leave to which new fathers are entitled too.

Studies show more women are entering the career world, which is forcing employers and politicians to attend to employee’s family needs. According to Amy Armenia & Gerstel (2006), "...the entrance of growing numbers of women into the labor force intensified the pressure politicians and employers to attend to
employees' family needs" (Armenia & Gerstel, 2006, p. 872). The Family Medical Leave Act (FMLA) allows workers to leave work for critically ill children, spouse, or parents. This expands past the typical maternity leave for newborns. FMLA guarantees a twelve week job-protected leave to employees. One of the primary goals of FMLA is to concentrate on gender neutrality. As stated by Amy Armenia & Gerstel (2006) "In a 2003 Supreme Court ruling, the majority opinion reiterated the initial view: "The FMLA aims to protect the right to be free from gender-based discrimination" (Armenia & Gerstel, 2006, p. 872), which is being added in the United States.

The creation of FMLA is not the only thing that has increased opportunities for men and women to take leave. Research has been completed in the workplace. "A growing number of researchers are examining what types of workplaces are responsive to institutional pressures in general and changing legislation concerning family and work in particular" (Armenia & Gerstel, 2006, p. 874). Some employers contribute to providing leave for men and women employees. Throughout time, family and work have become a healthier balance between both parents. According to Berit Brandth & Elin Kvande (2016), "Research on work-family balance has seen flexible work arrangements as a key solution for reconciling work and family, but it has given contradictory results regarding fathers" (Brandth & Kvande, 2016, p. 275).

Norway introduced a non-transferrable quota for fathers. This was presented as a part of the parental system. Fathers are given the incentive to take leave. The quota has existed for 22 years and during this time, it has been extended. Currently, it has been expanded from four weeks to ten weeks. Brandndth and Kvande (2016) describe, "The needs of parental caring and labor-market work are equally valued" (Brandth & Kvande, 2016, p. 275). The policy

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incorporates equal value and flexibility. The choices for leave are offered in a variety of ways. Research and documents help provide positive reinforcement to the success of the quota. As stated by Brandth and Kvande (2016) "Both research (Bruning and Plantenga, 1999; Ray et al., 2010; Rostgaard, 2002) and policy documents (Prop. 64L, 2011-2012) tend to regard flexibility in leave arrangements in a positive way..." (Brandth & Kvande, 2016, p. 276). The potential to increase the use of leave, especially for fathers, is an option. Flexible work and flexible leave options are similar to one another because they allow the ability to create solutions. Choice and flexibility are continuously promoted in Norwegian debates. As a result, in 2007, the father's quota became more flexible. Part-time leave combined with part-time work created an open door for men allowing them to experience the flexibility. Another part of quota allowed men to have access to "deferred" leave. These meant men could separate their time of leave into different blocks of time. Periods of full-time leave and part-time may be utilized alternately. Fathers may also take paternity leave concurrently with mothers who take leave. The significance is to make it easier to combine work with childcare. Flexible leave is meant to persuade men to take leave. As stated by Brandndth and Kvande (2016) "Some studies have suggested that parental leave for fathers increases their competence as parents" (Brandth & Kvande, 2016, p. 287). Flexible leave allows all fathers to bond with their children without facing a financial burden. They have the privilege to make the choice to take leave because the quota allows this to happen. This is a very viable solution for allowing men and women to bond with their children at home without worrying about burdens at work.
Family Impact Analysis

In this section, an analysis of the California Paid Leave Policy is conducted through the utilization of the family Impact Checklist. Developed by the Policy Institute for Family Impact Seminars (Bogenschneider, Little, Ooms, Benning, & Cadigan, 2012), the checklist incorporates principles that are useful in determining a policy's effectiveness, specifically in areas of family responsibility, family stability, family relationships, family diversity and family engagement. For the purpose of analyzing the California Paid Leave Policy, all five of the family impact principles were applied.

**Principle 1: Family Responsibility**

- How well does the policy, program, or practice help families build the capacity to fulfill their functions and avoid taking over family obligations unless necessary?

The California Paid Leave (PFL) program does an adequate job of helping families build the capacity to fulfill their functions and avoid taking over family responsibilities unless necessary. Since an individual can take leave to care for babies, foster or adopted children, ill children, spouses/registered domestic partner, parents, siblings, grandchildren, grandparents, and parent-in-laws, it gives the family the ability to fulfill their function while also receiving partial pay. (California Work & Family Coalition, & Next Generation, 2016) Due to this program an individual can take the time off of work to care for the family member in need instead of depending on the other caregivers or government to take over family responsibilities.
• How do you set realistic expectations for parents to assume financially and caregiving responsibilities for dependent, gravely ill, or frail family members depending on their family structure, resources, and life challenges?

The PFL program does a great job of setting realistic expectations for parents to assume financially and caregiving responsibilities for dependent, critically ill, or sick family members depending on their family structure, resources, and life challenges. Individuals who qualify for this program can take up to six weeks of partial pay to care for a family member who is seriously ill or frail. Also, up to three family members are eligible to apply and benefit from the PFL program to care for the sick or frail family member. The six weeks of partially paid leave can be taken at one time, or it can be spread out over time on an hourly, daily, or weekly basis. (California Work & Family Coalition, & Next Generation, 2016) With this, families have the ability to use their resources from the PFL program to provide care while receiving partial pay.

• How does this affect the ability of parents to balance time commitments to work, family, and community?

This program does an adequate job of providing families with the capacity to balance time commitments to work and family. However, it does not affect the family’s ability to balance a families commitments to the community. Under the PFL program individuals can take up to six weeks of partially paid leave to care for a variety of household members including, babies, foster or adopted children, ill children, spouses/registered domestic partner, parents, siblings, grandchildren, grandparents, and parent-in-laws. Individual, who qualify, receive 55% of their current wages which is determined by their highly quarter of earnings in their base period. This gives families members the ability to earn an income while also providing care for a family member in need. A major downfall to this program is
that the PFL does not provide individuals with job security. However, the Family and Medical Leave Act, California Family Rights Act, and the California Pregnancy Disabilities Leave Law are all programs that can assist in this problem. (California Work & Family Coalition, & Next Generation, 2016)

Principle 2: Family Stability

- How to strengthen commitment to couple, marital, parental, and family obligations, and allocate resources to help keep the marriage or family together when this is the appropriate goal?

Our research shows that the policy does strength, parental, and family commitment by allowing parents to take leave due to a birth, adoption, and foster care child. This policy allows parents up to six weeks of benefits in a 12-month period. According to Breidenbach, "this plan allows parents' feelings of competence to know they can spend quality time with their child or children which can also help them to form parent-child bonds may help get children off to a good start and may cement parents' obligations to their children in the future. The marital commitment the FMLA does not target the issue at hand.. At this point, when one spouse is taking care of the other spouse, no income is coming in from either of them to have a sense of financial security for their family. There may be other families that can financially support having the time off to care for a loved one, and this also can strengthen opportunity for these partners. As far as the policy being able to allocate resources to help keep the marriage or family together when this is the appropriate goal. President Obama as part of his commitment to an economy that works for everyone including those balancing work and family has set with the States a State Paid Leave Fund to help those with paid and unpaid leave. Paid and unpaid leave can help workers balance obligations at home and in the
workplace. It can also help parents and those with medical need remain in the workforce.

- How does the policy help families avoid problems before they become a serious crisis or chronic situations that erode family structure and function?

  According to the California Paid Family Leave Policy, the program helps families avoid problems before they become a severe crisis or chronic situations which can erode family structure and function by making sure there are no loopholes in the policy that employers can shirk their responsibilities at work. Employers don't misuse their FMLA leave to take unannounced vacations, take off work at will and without consequences. There are many couples, parents who work two to three part-time job, none of which have enough hours to make the eligible for family and medical leave. This makes things complicated according to NPR, "there need to rule that line up with the realities of the workforce.

- How does the policy balance the safety and well-being of individuals with the rights and responsibilities of other family members and the integrity of the household as a whole?

  According to Breidenbach, many working adults are struggling to balance employment with family responsibilities. The Family and Medical Leave Act of 1993 is designed to help ease this struggle for working families. With an increasing number of women entering the workforce and some becoming pregnant it was imperative to have policies that protected women. These policies were not only critical for women and their families but also, guarantee these women that their job will be available to them should they desire to return to work without any discrimination. This policy also eases the minds of families and family members to care for relatives other than parents, spouses, or children. An example, if one an individual wanted to take care of one of their family members they did not have
the extra added stress because this law they provided this safety net for them to return.

- How does the policy help families maintain regular routines when undergoing stressful conditions or at times of transition?

The FMLA does have programs that help families maintain daily routines when they are experiencing stressful conditions or at times of transition. Routines, for example, is to get regular checkups from primary care physicians, mammograms, prostate exams, flu shots, take medications, monitor one’s health the same way you might care for another. For new mothers, it’s a good idea for to get into a routine as in regular bottle feedings, diaper changes, checkups, and regular sleep hours. The other regular routines in which is a good idea to do is exercise regularly, eat sensible, healthy foods, taking a stress re-education and coping class. Participate in religious or spiritual activities, last but not least love or learn to love yourself by smiling, laughing, and doing things that make you happy. If married or living with a partner, it will be helpful if the other spouse or partner try to help out with some of the family duties this way to alleviate the stress or stressors in one’s life. Parents need to know what the insurance will cover and not cover that need help.

- How to recognize that major changes in family relationships, such as aging, divorce, or adoption are processes that extent over time and require continuing support and attention?

According to the research, the PFL does a strong job of recognizing the significant changes in family relationships such as aging, divorce or adoption are processes that extend over time and require continuing support and attention. The program does this by extending the ability to get paid leave from work due to pregnancy or adoption to including other family members as well. An individual can
benefit from the PFL program to care for babies, foster or adopted children, ill children, spouses/registered domestic partner, parents, siblings, grandchildren, grandparents, and parent-in-laws. (California Work & Family Coalition, & Next Generation, 2016)

- How to provide support to all types of families involved in the issues (e.g. for adoption, consider adoptive, birth, and foster parents, for renamed families, consider birth parents, stepparents, residential and nonresidential parents, etc.)?

California's Paid Family Leave Policy does a strong job of supporting all types of families involved in the issue. This is accomplished through the policy's provision of paid leave for employees within the state of California to bond with a newborn, adoptive child, or foster child (Huang & Yang, 2015). In addition to bonding leave, PFL also offers employees the ability to take paid leave while caring for a sick child; according to California Labor Code Section 245.5 (c) this may include a biological child, adopted or foster child, stepchild, legal ward, child of a domestic partner, or a child to whom the employee stands in loco parentis (University of San Diego, 2015). With that said, nonresidential parents would not be covered by this policy as PFL is only applicable to residents of the state of California. Other parents may have worked than a less year for a company or live in poverty and work part time jobs, they may be excluded from the policy.

**Principle 3: Family Relationships**

- How to recognize that individuals' development and well-being are profoundly affected by the quality of their relationships with close family members and family members' relationships with each other?

Our research suggests that most times it's the woman that will stay home and care for a loved one that is gravely ill or stays home with the newborn, instead
of the man. The man is the one person in the household that makes the money and pays the bills. The California Paid Leave (PFL) program does an adequate job of recognizing that individuals' development and well-being are profoundly affected by the quality of their relationships with close family members and family members' relationships with each other. Since up to three individuals in a family can benefit from a six-week, partially paid leave, it gives the family an opportunity to provide the necessary care for any family member. (California Work & Family Coalition, & Next Generation, 2016) For example, if a child becomes ill the mother can take up to six weeks off while still providing partial pay for the family. If the child is still sick after those six weeks, the father can then benefit from the program as well and take additional time off to care for the ill child. Finally, a sibling or grandparent can also take time off if it is necessary. This program can provide families with the ability to ensure that the ill child's well-being is their top priority, without suffering financially.

- How do we acknowledge how interventions and life events can affect family dynamics and, when appropriate, support the need for balancing change and stability in family roles, rules, and leadership depending up individual expectations, cultural norms, family stress, and stage of family life?

As for mothers staying home with their newborn baby or adopted child, there are also health and emotional benefits that come with enabling workers to stay at home to care for new children (Cohen, 2007). A woman needs time to heal from childbirth and to establish breastfeeding routines with her new child, as well as bonding time for incorporate the child into her family. FMLA supporters focused on the law's simple, but powerful, goal of ensuring that people can have a family and maintain a career (Cohen, 2007). Family needs time to adjust to life events as in having a new child or a family becoming very ill and needs around the
clock caregiving. It’s very hard for a family to have financial support during this time of transition and will put added pressure on the man or the woman that has to stay home with no income coming in to support the increasing demands of everyday life. This program does a good job of assessing and balancing the competing needs, rights, and interest of various family members. The program does this by providing paid leave for individuals while caring for a family member in need. This gives families the ability to care for any significant family member in need.

**Family 4: Family Diversity**

- How well does the policy identify and respect the different attitudes, behaviors, and values of families from various stages of life: family structures, and cultural, economic, geographic, racial/ethnic, and religious background?

  California's Paid Family Leave Policy adequately identifies and respects the different attitudes, behaviors, and values of families from various stages of life: family structures; and cultural, economic, geographic, racial/ethnic, and religious backgrounds. Caring for extended family members can be problematic for individuals with expansive family bonds, among them many families of diverse racial, cultural, and ethnic backgrounds. As California's Paid Family Leave Policy broadens the definition of family beyond parents, spouses, and children to include parents-in-law, grandparents, grandchildren, and siblings, employees have a greater ability to care for extended family members within various stages of life. Furthermore, as PFL is not limited to companies with more than fifty employees, there is an increased likelihood that employees in smaller cities or rural communities will be eligible for family leave. Finally, California's Paid Family Leave Policy adequately addresses differing economic backgrounds with the inclusion of both part-time and full-time employees, in addition to those that are actively
looking for work, or employed prior to the beginning of time one is seeking paid leave (Huang and Yang, 2015).

- How well does the policy recognize the complexity and responsibilities involved in caring for and coordinating services for family members with disabilities (e.g., cognitive, emotional, physical)?

The research that was conducted the California’s Paid Family Leave policy adequately addresses the complexity and responsibilities involved in caring for and coordinating services for family members with special needs (e.g., cognitive, emotional, physical)? According to the Paid Family Leave Policy, employees are eligible to paid leave to care for a new child or family member suffering from a serious health condition; this includes illness, injury, impairment, or physical or mental condition. If a family member becomes seriously ill, PFL not only allows the employee time off while the family member is receiving inpatient care, such as in a hospital, hospice care, or medical facility but also when they are at home and continuing outpatient treatment.

**Principle 5: Family Engagement**

- How well does the policy, program, or practice: provide full information and a range of choices to families, recognizing that the length and intensity of services may vary according to family needs?

This policy does an adequate job of providing information and a range of choices to families and recognizes that length and intensities may vary. Employees who contribute to SDI in California are eligible to choose leave at up to six weeks' pay at fifty-five percent of prior weekly earnings up to a maximum of nine hundred and eighty-seven dollars a week, within the first 12 months of a new family member’s arrival. The policy allows a family to choose the length of the leave and when they take the leave. The California paid leave policy offers a longer time as
well as more flexibility, which is an improvement from FMLA. It also allows employees to use up to half of their incurred sick leave a year to care for a family member. However, there are limitations on some of the laws based on how many employees your company has; this limits choices as some families may not qualify at all, and some families may need more time than what is covered.

- How well does the policy, program, or practice: train and encourage professionals to work in collaboration with families, to allow parents to make their decisions (within the confines of the law), and to respect their choices?

This policy highly encourages professionals to work with families allowing them to make their decisions within the law and encourages professionals to respect their choices. An employee can choose when and how much leave to take, for up to six weeks out of the year with partial pay. However, it could improve because it has been discovered that employees may not take advantage of the benefits because of being uneducated on the policy and not fully understanding its benefits. There is also a social stigma place on benefits offered to both sexes. Workplace discrimination can take place, especially for fathers who profit from this policy. This demonstrates that professionals could be trained to respect better employee’s choices in this system.

- How well does the policy, program, or practice make flexible program options available and easily accessible through co-location, coordinated application and reimbursement procedures, and collaboration across agencies, institutions, and disciplines?

The policy makes flexible options for parents who want time off and now it can be achieved because it is law. Because it is law, all California institutions and agencies must abide by it, which allows the policy to prove an adequate job at
making it options available and easily accessible. However, there are limitations for qualifying for the benefits of this policy, which make it so part-time workers or recently hired workers wouldn't qualify for benefits.

- How do we consider the whole family (even if it is outside the scope of services) and recognize how family decisions and participation may depend on up competing for different family members?

According to the research, there is a seven-day waiting period before benefits are paid, and an employer may require the employee to use up to two of accrued vacation leave before receiving benefits (Compensation & Benefits Report, 2002). Congress didn’t specify what medical conditions are eligible under the law, so there are conflicting ideas and court opinions about what qualifies (Green, 2005). One of the primary reasons administrating FMLA leaves hard is that federal regulations provide just the minimum requirements (Green, 2005). Funded by a payroll tax, the stat-run temporary disability fund will now pay California employees partial pay for up to six weeks of time off if they need to care for a new child or seriously ill family member (Green, 2005).

The California Paid Leave Policy helps new parents to get the time off they need to introduce a new member into their family while not stressing over financial issues that can arise when a parent is not working. Along with Paid Family Leave, the Family Medical Leave Act helps them get wage replacement for fifty percent of their income in which they had made the previous year. Many parents do not have the luxury of taking time off because they fear they will lose their job and lose their income. But with the FMLA they have wage replacement and hold your job up to twelve months after you leave to go on maturity leave or extended absence.
The United States is lacking in family leave compared to many other countries and needs to take a look at other developed countries paid parental leave guidelines and structure a new plan similar to those found to be the most successful. Family demands need to be a priority within business settings. Parental leave, paid sick days, negotiable hours, and the possibility to complete certain tasks from home would be the first steps in making the family a priority. With appropriate paid family leave, families would be able to focus on health factors then working to have their basic needs met. Offering policies that are family orientated can create a holistic environment by helping low-income families and creating positive strides in the socio-economic status. There are a number of benefits to full paid leave; benefits can include up to twelve weeks of paid leave, job protection and is available to full and part time employees.

Equality for both women and men needs to be addressed at the government level and reinforced in modern society. Researchers should continue to do research on paid leave while considering a family's perspective. A concentration of policies that focus on single parenthood and gender neutral should also be conducted and implemented to help benefit all growing families.