

Office of the Assistant Secretary for Planning and Evaluation, U.S.
Department of Health and Human Services

OFFICE OF HUMAN SERVICES POLICY

Supporting Employment Among Lower-Income Mothers: Attachment to Work After Childbirth

Authors: Pamela Winston, Elizabeth Coombs (Mission Analytics Group), Rashaun Bennett, and Lauren Antelo

HIGHLIGHTS

This is the first of two ASPE briefs about a qualitative study examining lower-income mothers' attachment to work around the time of childbirth and the role of state paid family leave (PFL) programs in supporting their return to employment. Highlights are:

- Seventy-five mothers who used PFL participated in the study. Over two-thirds returned to work, the majority returning to their prior employers.
- Mothers who returned to work cited their need for income and desire for financial independence, preference for combining work with caregiving, and supportive workplace policies and practices. They also identified the importance of family help and accessible, trustworthy child care.
- Mothers who left work after childbirth said they did so because of high child care costs, the desire to remain home full time with their babies, the need to attend to babies' health concerns, being fired or laid off, and a lack of workplace supports such as breastfeeding accommodations and scheduling.
- Employment barriers the mothers described appeared similar to those other new mothers experience but generally higher, given their relative lack of financial and family resources.
- A [companion brief](#) explores the role of PFL programs in facilitating work return.

Introduction

After many years of increase, women's labor force participation in the United States has declined in recent years, from a high of about 61 percent in 2000 to 57.5 percent in February 2019 (Federal Reserve Bank of St. Louis 2019). At the same time, lower-income women tend to have less labor force participation than higher income women do (U.S. Department of Labor 2016). They also tend to leave employment around the time of childbirth at notably greater rates. One study conducted by the U.S. Census Bureau, for example, found that 61 percent of first-time mothers without a high school diploma left employment around childbirth (Laughlin 2011). This contrasted with 16 percent among those with a bachelor's degree or more. Not surprisingly, childbirth is a time of particular economic risk for lower-income mothers and their families (Stanczyk 2018).

This qualitative study sought to understand better from lower-income mothers themselves why they remained attached to employment or left the labor force near the time of childbirth. Further,

it examined whether and why they returned to their pre-childbirth employer. It also explored whether state paid family leave (PFL) programs played a role in supporting greater work attachment after childbirth for these women. It built on quantitative research that suggests PFL can help mothers remain connected to the labor force and to their prior employer (e.g., Baum and Ruhm 2016, Byker 2016, Rossin-Slater et al. 2013). The specific role of PFL in work attachment is addressed in a [companion brief](#).

PFL programs provide working mothers with replacement of part of their wages, usually about two-thirds, for about six to 12 weeks after childbirth. Programs in four states have been implemented, and programs in three jurisdictions have been approved but not yet implemented. Payroll taxes on workers, but not employers, fund the current state programs.

Study Approach

We conducted focus groups and semi-structured interviews with 75 lower-income mothers who had used PFL in three of the four states with fully implemented PFL programs at the time of the study—California, New Jersey, and Rhode Island. Mothers also completed a demographic questionnaire. The majority of the mothers were from California, which has the oldest program and the largest enrollment. We sought to learn from the mothers why they remained attached to the labor force (or did not), why they returned to their prior employer (or did not), and the key factors that made it easier (or more difficult) to return to work around the time of childbirth. We defined “lower income” as below the median household income for the county in which the mothers lived. ([Appendix A](#) provides additional detail on the study methods, and [Appendix B](#) provides the study discussion guide.)

The mothers in the convenience sample we talked with are not representative of all lower-income new mothers in their states or in the country as a whole, nor of all lower-income women who are eligible for or have used PFL. Because the study focused on lower-income mothers receiving PFL, it did not provide the perspectives of mothers who did not use the program for reasons such as lack of awareness or inability to afford the reduced wage replacement that PFL provides.

However, our conversations with these mothers allowed us to learn in depth about the factors that led them to return to work and their employers after childbirth, or to leave their jobs and the labor force. In doing so, this study helps us understand better *why* lower-income women may maintain or leave employment around the time of childbirth, and how PFL may help them remain attached to work, topics that the quantitative research to date has not addressed. This information can be valuable to policymakers, employers, and others who seek to engage a larger proportion of Americans in the workforce, especially those at particular risk of separating from employment with potentially negative consequences for themselves and their families.

The Mothers in Our Sample

The mothers who participated in the study met certain criteria, primarily that they had used their state’s PFL program for the birth of a child in the prior two years and that they had a household income below the county household median.¹

About 70 percent of the mothers said they returned to work after childbirth. Eighty-seven percent of those who went back to work returned to their pre-birth employer, while the remainder moved to a new employer. About 30 percent left work altogether around the time of childbirth, several before but most after. Thirteen percent said they were fired or laid off, and 17 percent quit.

¹ We did not use the federal poverty threshold because it does not generally differ by geographic area, whereas we knew the cost of living varied widely across the locations included in the study, which included San Francisco and San Jose, California, as well as locations with a much lower cost of living. Instead, we included women below the median income for their county (for this reason, we refer to them as lower income rather than low income).

The mothers held a range of jobs before childbirth, including retail, administrative, health care, child care, food service, social services, customer service, and agricultural labor. Several said they worked for staffing agencies rather than directly for employers. Some worked multiple jobs or combined school and work. A few worked seasonally.

Table 1. Participant Demographics

Demographic Variable	CA	NJ	RI	Total
<\$25,000	25	2	1	28 (38%)
\$25,000–\$50,000	21	2	–	23 (31%)
\$50,000–\$75,000	14	3	1	18 (24%)
>\$75,000*	5	–	–	5 (7%)
<i>Child's Father Lives at Home</i>				
Yes	46	5	1	52 (70%)
No	19	2	1	22 (30%)
<i>Race</i>				
Asian	9	–	–	9 (12%)
Black or African American	9	7	–	16 (22%)
White	27	–	1	28 (38%)
American Indian/Alaska Native	3	–	–	3 (4%)
Native Hawaiian/Other Pacific Islander	1	–	–	1 (1%)
No response	16	–	1	17 (23%)
<i>Ethnicity</i>				
Hispanic	40	1	1	42 (57%)
Not Hispanic	25	6	1	32 (43%)

* Some participants lived in high cost-of-living areas such as San Francisco and San Jose; a small number had relatively high incomes but are nonetheless below the area median household income.

In addition, as Table 1 indicates, the mothers had a range of demographic characteristics. About 70 percent of the mothers had household incomes under \$50,000, with 38 percent of the total at \$25,000 or less. Thirty percent were single parents, while the rest lived with their child's father. They lived in a mix of urban, suburban, and rural locations. Mothers of all major race-ethnicity groups participated in the study: 38 percent identified as white, 22 percent as black, 12 percent as Asian, 4 percent as American Indian/Alaska native, and 1 percent as native Hawaiian or other Pacific Islander; the rest declined to identify their race. More than half identified as Hispanic, consistent with the focus on lower-income mothers and the disproportionate presence of Californians (about 40 percent of whom are Hispanic) in the study.

Thirty-five percent were first-time mothers. The majority of the mothers in the study used all the weeks of PFL available to them, in addition to temporary disability insurance. They typically used a total of 10 to 14 weeks of post-birth leave between the two programs. Several took longer leaves, however, apparently under the federal Family and Medical Leave Act (FMLA), which provides job-protected unpaid leave and covers about 60 percent of American private sector workers (Klerman et al. 2013), parallel state laws, or voluntary action by their employers.

[Appendix A](#) provides additional information about the PFL policy context and the study sample, including the mothers' work-related outcomes and decisions.

Findings

This brief first focuses on mothers' overarching reasons for returning to work after childbirth. Second, it explores mothers' decisions to return to their pre-childbirth employer and the role of

workplace factors, as well as the role of personal factors in supporting their employment. Third, the brief discusses circumstances that made returning to work more difficult for the mothers and their attachment to employment potentially more tenuous. Finally, it explores why some mothers left work altogether.

Why the Mothers in the Study Returned to Work

Financial need most strongly motivated mothers' returns. Essentially all the mothers we talked with cited financial reasons as the primary, if not sole, reason to return to work. They noted the expenses that came with a new baby, such as diapers; the general costs of supporting a family (65 percent of our mothers had more than one child); and the fact that PFL—which provided only partial wage replacement—gave them substantially less money than they earned from work.

Many said they faced new expenses associated with going back to work, such as up-front child care payments; had accrued unpaid bills while on leave; and had longer-standing debt. A few mothers had to pay to move to new housing. Some also highlighted the need for health insurance and other benefits.

Single mothers and those who indicated they had little support from extended family suggested particular urgency in earning wages again. Several mothers in two-parent families also said that the need for two incomes drove their returns or that they were the primary breadwinner. About 85 percent of the mothers in the study said they used all the PFL to which they were entitled, but some used less because of their need to earn a full paycheck again, including a few who said that delays in their PFL payments led them to return early.

Many were conflicted about returning to work rather than remaining with their baby longer. Some were very unhappy, whereas others were resigned, but most of these mothers saw no choice but to return to work.

Several mothers suggested that their work was in part a sacrifice they made for their children, both for immediate financial reasons and because of broader aspirations. “It doesn’t matter how tired you are,” said one mother, “...you are going to do it for the baby.” Another in the same focus group agreed: “The baby, because you want more for the baby and for yourself. So, yes, the baby.”

Several mothers also stressed their desire for financial independence, including from their spouse or partner. One mother who was still on leave said that relying on her husband’s income alone caused tension. Others noted the broad benefits of having their own money.

Some mothers said they affirmatively wanted to work, income aside. Even at the expense of more time

“What can I tell you? The system. Daily life. How does one survive if one doesn’t earn a salary? You don’t have a fixed salary that allows you to say, ‘I won’t go to work.’ You have to go.” *Lucy, Providence, RI*

“You feel guilty. You feel like ‘I wanna be with my baby.’ But you got to take care of your baby financially. They don’t live off air, you got to go back [to work].” *Nicole, East Orange, NJ*

“Well it was a little difficult because you don’t want to leave your baby, but then your will imposes because you have to work or otherwise how do you survive?” *Lucia, Lancaster, CA*

“[My job provides] a decent income for me to take care of three kids on my own, so I suck it up and do it.” *Lilly, Fresno, CA*

“I still want to work. I still want to feel like myself and not get caught up in the whole ‘I just had a baby at home’ sort of thing.” *Oprah, Los Angeles, CA*

“[It’s] uplifting some days to get up in the morning and take a shower...have a cup of coffee and go to the office. That is pretty cool.” *Tiff, Los Angeles, CA*

“I like where I work, I really like where I work. I like the people, I like what I do.” *Amanda, Sacramento, CA*

with their babies, some mothers said they chose to return to work for reasons beyond money, primarily because they preferred combining work and caregiving to full-time parenting. Several of the women in the study stressed that they liked being employed and expressed a sense of identity tied to working and, as one put it, “being out in the community and knowing things.” Several said that they were not suited to be full-time mothers and needed the balance of work. A few noted that they appreciated the adult world of the workplace.

Some mothers said they enjoyed their jobs or co-workers, contributing to their return. Several, such as a nursing assistant, had physically demanding jobs and appreciated having helpful colleagues in the early days after childbirth. Others, such as a receptionist for a pediatrician and a technician in a medical office, enjoyed the work atmosphere.

Perceptions about what was best for the baby’s well-being informed many women’s decisions. But they reflected tensions between the need for income, with its benefits for the baby and family, and the belief that being a full-time caregiver was best for the baby.

Workplace Supports Helped the Mothers Return

Workplace policies and practices encouraged some mothers in the study to go back to employment and their pre-childbirth jobs. Of the study participants who went back to work, the majority—87 percent—returned to their pre-childbirth employer, often though not always citing positive employer practices as a factor in their decision. This rate is similar to that found in other research on PFL (Winston et al. 2017, Milkman and Appelbaum 2013). Some ways the mothers said their employers supported them were:

- providing baby-friendly work shifts and flexibility
- respecting the need to juggle child care, family health care, and other family responsibilities with work
- granting part-time hours with benefits
- holding the mother’s job for her return
- supporting breastfeeding and pumping
- offering less stressful work on return
- giving a promotion or raise
- providing benefits such as sick leave and health insurance.

Scheduling and other supports helped mothers return. Some mothers stressed the importance of flexibility in their schedules that would let them address family needs as they arose. Many also valued consistent shifts that allowed them to plan in advance to arrange child care or other aspects of their new family schedules. One mother worked for a small family-owned supermarket chain in California that appeared to be the model of a family-supporting lower-wage employer. She and her husband both worked for the company for over a decade and, with its flexible scheduling and other policies, were able to do so while raising four children. A single mother worked as a supermarket cashier, a job that involved being on her feet all day and closing the store late at night. After her return, at her

“[I] knew that I could go back into [my job] full time or part time and kind of rearrange my schedule to where I needed it. The store opens seven days a week from 6:00 in the morning 'til 11:00 at night so I can kind of work my schedule in to fit in around my husband’s schedule....I mean if it wasn’t for our work being so accommodating...there’s no way I could work.” *Kristine, Sacramento, CA*

“The culture is really good about moms, and they won’t shame you for trying to do the best for your family and for your baby.” *Jess, Paterson, NJ*

“Lots of times lately I’m late because I have to take care of [my baby]. I know if I was at another job they probably wouldn’t be for it. That’s one of the reasons I stayed. Because the pay isn’t as great as I would like, and I would start to look at another job, but then I’m like, ‘If I go to another job, I won’t have a rapport with them so they wouldn’t be as understanding.’ That’s why I stayed with them.” *Candi, East Orange, NJ*

request her supervisor moved her to an accountant position during the day at a higher wage, and down to two night shifts a week.

Another mother worked as a receptionist for a salon owned by a small-business owner who allowed her to bring her baby to work, leading her to stay with the job. She attributed the acceptance of a baby in the workplace to a different culture about family and the workplace in her boss's country of origin, saying "everybody works together and it's a very...friendly and compassionate work culture." Several mothers said they were allowed to bring their babies to work under specific circumstances. A few mothers were allowed to change duties to less stressful jobs in order to better juggle their parental responsibilities.

Many mothers also stressed the importance of breastfeeding accommodations. Many mothers valued respect for breastfeeding, and the time and a clean, private place to pump. A substantial proportion of the mothers we spoke with said they breastfed their babies after childbirth, and many, if not most, indicated that they wanted to continue doing so after they returned to work if possible. They mentioned both the health benefits of breast milk for their babies and the fact that it was substantially less expensive than formula. They discussed the inherent challenges in maintaining breastfeeding and said they very much appreciated employers who provided accommodations and support.

Having their jobs held for them brought many mothers back to work and to their prior employers. Not surprisingly, some of the mothers said that simply having a job to go back to contributed to their decision to return to work and to their prior employer. Of the women we spoke with, only two, in Rhode Island, were covered by a PFL program that included formal job protection. But other mothers appeared to have job protection under the FMLA or parallel state laws that covered certain categories of employees (see Appendix A for more information on state and federal family leave and job protection policies). Further, it appeared that some others were not covered by the FMLA, but had their positions held for them by employers acting voluntarily. Mothers also mentioned being allowed to extend their leave without fear of losing their jobs.

Finally, several mothers said they felt obligated to return to their prior employer after taking leave. One had started the job a couple weeks before childbirth and felt she should return; another said her boss "begged" her to come back. Several others said they did not want additional change in their lives while juggling new parenthood and work, which they found a struggle already. One mother who experienced postpartum depression said she remained with her employer after she gave birth because more upheaval at that point was unmanageable, explaining, "[I went back] because at that moment you feel stuck, with no other option than to return to what you already have and not to have to struggle more than what you're already struggling with."

Personal Supports Helped the Mothers Return

Mothers reported positive co-parenting relationships with their baby's father. Seventy percent of the sample lived with their baby's father (we did not ask whether they were married). Some women described close relationships, with a focus on caring for the baby and other children and supporting the mother in her recovery and transition, that substantially eased their

"[My transition back to work] was good. I was breastfeeding and pumping and I think this pregnancy was way easier than the times before because my other jobs didn't have accommodation for nursing....So it made the transition much easier for me because I was doing the nursing and coming back to work." *Jena, San Diego, CA*

"I returned when my daughter was three months old. I supposedly worked six hours a day, but I didn't really work six hours, I worked four hours. And in the middle of the shift I was allowed to do pumping. So I'd store the milk....All that helped me be at peace." *Elena, San Francisco, CA*

return to work. A few fathers were the primary caregiver. In several cases, parents had tag-team arrangements for child care, where they split work shifts and care. In others, fathers' support involved caring for other children, doing household chores and errands, or simply allowing the mother to rest.

Among the mothers participating in the study who did not live with their baby's father, several nonetheless had developed limited co-parenting arrangements that they described as helpful in juggling their responsibilities. Some fathers (it appeared about a quarter of them) also took PFL, and several of the mothers said that having their spouse or partner able to be home with the children substantially eased their transition to work.

Extended family and friends made going back to work easier for many. Other family members and friends could also help make mothers' return to their jobs more feasible. Parents, grandparents, siblings, older children, and friends eased the mother's transition back to work and to life with the new baby. Some mothers cited help from family members and friends with regular child care that enabled them to return to work. Sometimes they paid for this care, often at below-market rates, while sometimes family members offered to care for the new baby for free. Some mothers also felt their babies would receive better care from family members, especially grandmothers, because of the biological bond. Mothers also valued assistance with intermittent babysitting. A few lived with members of their extended family who provided additional help. Some cited financial assistance from family, which contributed to their sense of stability.

Some women found a child care provider, and emphasized the importance of an arrangement they trusted. While some mothers relied on family or friends for child care, others said they lacked such assistance or preferred professional provider care, which some saw as higher quality. In these cases, finding affordable care or getting a child care subsidy supported or even motivated their return to employment.

A few mothers were approved for a child care subsidy or got a subsidized slot while they were on leave after childbirth. They stressed the benefits of this subsidy in enabling their return to work. Other mothers in the study found unsubsidized child care that they paid for out of pocket. A few suggested that a subsidy or babysitter becoming available motivated them to return to work. One woman said she worked for AmeriCorps despite a low salary because they fully paid for her child care.

Some mothers in the study were very positive about the provider they had found for their babies, noting that their comfort with their babies' caregivers made returning to work much easier and less stressful. Several said it was

"My husband has been extremely supportive. He also works, so on his off days, he will keep [our son]. Also, just making sure that if for any reason I have to stay [at work] a little bit extra or I am not there to pick him up, he is there. It is really a team effort making sure that...we keep our heads on steady while we are at work, so we are not stressing out or creating any issues." *Cindy, Los Angeles, CA*

"I have some help at home, my parents and some family members, and help taking care of the kids. Like when you get home you have to prepare lunch, dinner, give everybody a shower, feed them. So if you have an extra hand it is better." *Mai, San Jose, CA*

"My grandmother, she lives in Morgan Hill. So we would drive her out and take her back each week to watch the baby for free, because when I first got back to work we weren't able to afford child care." *Samantha, Sacramento, CA*

"The fact that the lady that helped us take care of our older kids helped us this time, [made the transition back to work easier]. I felt like the baby is in good hands. Yeah, everything was okay." *Ruby, Gilroy, CA*

"I'm so thankful because this is my first time being approved for child care. I work overnight so my kids are asleep, so child care should be a piece of cake for whoever's taking care of my kids. Thankfully, I got approved...I was like how the heck am I going to pay for child care if I got to return back to work? I got approved right before [I had to go back]." *Michelle, Fresno, CA*

reassuring to them to have their babies with providers who had cared for their older children. A couple of the mothers in the study who participated in home visiting programs for new mothers said their home visitors had helped them gain access to high-quality providers that they valued greatly.

Mothers participating in the study also stressed the importance of additional factors that helped them return to employment after childbirth and stay at work. They noted the time they took during PFL to address physical and mental health problems, provide for babies' routine health care, and help the baby make the transition to out-of-home care. They also cited the value of time to get their baby on a more regular schedule and adjust to new routines.

Challenges of Returning to Work

Many mothers faced a range of difficulties in returning to employment, and for some, these challenges made attachment to work more precarious. While some of the challenges the mothers confronted were similar to those of working new mothers in the general population, many in this lower-income group lacked financial and/or family resources to help alleviate them. These women were employed at the time of the study or had concrete plans to return after their parental leave ended, but many said several factors made their return harder. They identified lack of suitable child care, workplace conditions that conflicted with family responsibilities, lack of breastfeeding accommodations, postpartum depression and physical health problems, too little sleep, and general adjustment to the demands of employment. Several of these issues seemed especially intense for single mothers and those with the least family support and fewest financial resources. Some described an unrelenting quality to their daily lives and the challenges of juggling often-unpredictable work responsibilities and the needs of their babies and families.

Mothers said child care challenges delayed their returns or made working more difficult and anxiety-producing. Many of the women in the study who returned to their jobs said they struggled to find appropriate, affordable child care or were uncomfortable with the care they found. Some had partners or family members who could help, though this was not always care the mothers fully trusted. Others lacked family assistance with care altogether. Several talked about the complexity of applying for child care subsidies and the uncertainty of when and whether they would receive assistance. Some were on waiting lists. This experience is consistent with estimates indicating that only about 15 percent of eligible children nationwide receive federal child care subsidies and 25 percent receive state subsidies (Chien 2019). Others said they were not eligible for subsidies. Many struggled to find any child care slot that they could afford without a subsidy.

Care for infants or children with special needs, or care at irregular shifts, was especially difficult to find and afford. Some mothers wanted to change their shifts to match their preferred care but were unable to. Some of the women in the study also expressed a great deal of anxiety about young infants

"You leave work. Get home, you're tired, but you got to start your duties right away. Then by the time you get done with your duties, you're not going to get like more than five hours of sleep. And you do it all again the next day."
Julie, San Diego, CA

"Nothing makes it easy." *Zara, San Diego, CA*

"I really liked [the provider] and it was like the best deal. But her hours don't match with my work hours and that's where I asked my work [to change my schedule] and they declined it. So, we're kind of back at square one." *Kaylee, Santa Rosa, CA*

"You're sad about not trusting where you're leaving him. You know, it's very hard for you to go back [to work], because you always worry, always worry, like 'I hope everything's okay with my child. I hope nothing happens to my baby.'" *Valery, East Orange, NJ*

being in care and the potential for abuse, but felt they had little choice in their provider since they needed to work. Some said that the care they had found was affordable and enabled them to go back to their jobs but left them worried about their babies' well-being. For some mothers, these challenges slowed their transitions to work, while for others they contributed to a greater sense of stress as they left their children in care to return to work.

Workplace conditions could also make returning to employment harder. Some of the mothers who went back to work described challenges balancing work and their families with stressful jobs; a lack of benefits; unpredictable, rigid, or nontraditional hours; and the risk of being fired. Some could not return to work at schedules consistent with the timing of their family responsibilities. They continued trying to do what was necessary for each area of their lives, but they indicated that it was an uneasy balance. The women who worked for staffing agencies rather than directly for employers generally seemed to have fewer benefits and less flexibility. Some said they still needed time away from work to attend to health care for their baby, themselves, or other family members, which was difficult to take with limited or no paid time off. Some felt that the leave they took for their baby's birth, and time they used for their family responsibilities after they returned, made their employers regard them as less valuable and harmed their job advancement.

The lack of a place or time for pumping contributed to challenges in working for some women who wanted to maintain breastfeeding. The logistics of pumping, even with employer support, can make breastfeeding difficult to keep up after mothers go back to work. In our study, a lack of accommodations—either clean, private places or the time to pump—created substantial barriers to returning to work for some mothers who wanted to maintain breastfeeding. This finding is consistent with research estimating that more than half of employed mothers do not have workplace accommodations, and that lower-wage mothers appear to face particular barriers (Kozhimannil et al. 2016). Several of the mothers who participated in the study said they gave up breastfeeding after their leave because it was too difficult to combine it with their jobs. Others described their efforts to get a suitable location in the workplace or the time to pump. For example, one mother who worked at a national big-box store said she was told to pump in an office to which her male managers had keys; despite a note on the door, they walked in on her. Ultimately, she said, she went to the store's labor board, and a lock was installed on the inside. Others, including retail, agricultural, and food-service workers, described workplaces with no available private spaces other than bathrooms, which made pumping nonviable.

“Now I get these comments [from my employer] like, ‘Let’s not have kids for another year.’ Like I belong to them. Like my personal life means nothing to them. But I went back. I needed to.” *Kisha, Los Angeles*

“If you work fewer hours they fire you...Because they want people who work all the hours they want...If the rule for working is eight hours, it should be eight hours. That’s fine. Or if the rule is 10 hours, same. But they shouldn’t take advantage. If it’s more than 10 hours they shouldn’t force you to work.” *Flor, Gilroy, CA*

“The shame I felt about them coming in [while I was pumping], because one of them was the manager who does my schedules, the manager right above me...I avoided him for like a week, not getting hours, not getting anything because I just didn’t know how to [deal with it].” *Saphira, Fresno, CA*

Why the Mothers Left Regular Employment Altogether

Some mothers left employment entirely around childbirth, citing a range of reasons, especially the cost and difficulty of working while caring for a new baby. About a third of

the women we talked with were not working after childbirth. They either did not return after taking PFL or left work after returning briefly. Most (about two-thirds) said they had long-term plans to go back to work, while the remainder had no plans. The mothers left for a mix of reasons. About a third said they had gone back to work after taking PFL and then decided to quit. The non-returners overall had a greater number of children than did the overall sample. They also tended to have an employed spouse or partner—about 80 percent lived with a spouse or partner, compared with 70 percent of the sample as a whole. But several non-returners were single, and while some got help from their babies' fathers, they also relied on help from their extended families and communities and on other means (we did not ask specifically how they made ends meet after their paid leave ended).

Mothers who did not return to work reported household incomes generally similar to those who did return (we expected their incomes might have been greater but this was not the case). Many of the mothers who did not return to work cited the need to cut costs, a few by moving to cheaper locations. Several said they did occasional odd jobs, such as cleaning or doing friends' hair and makeup, to make additional money. None cited safety-net programs as enabling them to leave work for an extended time.

The majority of women in the study who did not return to work said they made their decisions at least in part because child care was too costly or hard to find. It was cheaper or at least similar in cost to stay out of the labor force, many mothers said, especially for those with more than one child in care. Some women lacked reliable help from family, though not all wanted to use family members as their child care providers. While some mothers applied for and received child care subsidies, most appeared to lack access. Some cited the cost of infant care and said they would wait until their baby was older before returning to work. One mother said she quit because of the cost of having to pay for regular child care hours she did not use because her and her husband's work schedules were unpredictable. Some said it was simply too hard to find care.

Overall, many suggested that they would be financially strapped whether they worked or not, particularly because of the need to pay out of pocket for child care. Given the economic and personal costs associated with work, it was seen as too expensive and too difficult to remain in the labor market.

Some mothers preferred to care for their baby full time or felt they needed to for the baby's health. Some of the non-returners said the scales were tipped to stay out of the labor market because, all things equal, they wanted to be with their infants full time, at least while the babies were very young. They did not want to miss their babies'

"I returned back [to work] full force 47 and a half hours a week. And then I realized, 'Okay, I can stay home. It's cheaper that way.' I decided that was the best plan and we'd all be happier that way." *Aubrey, Sacramento, CA*

"I decided to stay home because it was easier, and it was less expensive." *Mia, San Diego, CA*

"So, I would basically just be paying daycare so I could go to work, but I'm working so I can pay for daycare so I can go to work. That was just nuts." *Tiffany, Sacramento, CA*

"That's like my only issue [in returning to work], just child care....Because I can come back to work, but just having somebody that's going to be able to take care of her when I'm away, that's my only issue." *Sarah, San Francisco, CA*

"I'm staying at home because it's just my thing. I want to see my baby all day." *Aubrey, Sacramento, CA*

"You don't get enough time with your babies. I don't know, that's just me. I want to be home with her." *Amber, Sacramento, CA*

development and were not comfortable with the idea that someone else would care for them while they worked.

A few of the mothers felt they had to stay home to address their babies' needs, describing concerns about their health and development. One baby was premature, another mother had complications during pregnancy that affected the baby's early infancy, and another baby stopped taking a bottle when it was time for the mother to return to work.

Finally, at least one mother felt the need to stay home because of her husband's preferences rather than her own. He would not care for their infant daughter until she was toilet trained, despite having cared for their son. This mother felt she had to quit her job to provide child care.

Some of the women in the study were let go around the time of childbirth. Ten of the 22 non-returners who participated in the study said they had been fired or laid off before or after childbirth. Only two mothers lived in Rhode Island, where job protection is part of the PFL program. In the two other states, the FMLA might have covered the mothers during the time after they gave birth, but coverage was not always clear—to us or sometimes to them. While the FMLA covers a majority of U.S. private sector workers, it is estimated to cover only about a third of lower-income workers because of eligibility and other requirements (Joshi et al. 2016). Many mothers appeared to work for employers that were too small for the FMLA to apply or had insufficient time on the job to meet its requirements. Some of these women were let go. Some were fired while pregnant, with a few suggesting they had been let go because of pregnancy-related health problems. Several were let go after childbirth.

Some said that inflexible or difficult job conditions before or after childbirth, including a lack of breastfeeding accommodations, shifted the balance away from work. Several of the mothers in the study said a lack of flexibility in their jobs, or other characteristics that made caring for their families more difficult, pushed them to leave. Some noted their inability to have their employers modify their schedules. A few of the mothers said they quit because of the work conditions during their pregnancies—one cited the need to use cleaning chemicals in her job, and another noted the requirement for employees to go through a metal detector, which she felt was dangerous to her unborn baby.

Some said they experienced a lack of support from their employers around the time of childbirth. One mother was told she could not take more than three weeks of leave after a planned C-section (she had recently been switched from a permanent job with her employer to a staffing agency position assigned to the same employer).

“I had plans [to return]. And then I had the high-risk birth, and her complications. Then our bonding. And I could only think of crying when I thought of leaving her. I had to, like you say, make a balance, and say my daughter is first, because jobs, I can find one or another. I know it's just a matter of time for me to make the decision to go back to work.” *Maria, San Francisco, CA*

“I had my suspicions, because I was pregnant and I wasn't tenured. I believe that I was let go because it was easier to let me go and replace me than to have me [out on leave] at the beginning of the school year.” *Diamond, East Orange, NJ*

“I spoke with them [about taking leave] and they said that it wasn't good for them if I stayed at home for more than three weeks....They said that they couldn't wait for me, so I quit one week before my C-section.” *Marcela, San Jose, CA*

“One reason why I didn't go back to my job was because I asked about the pumping room....You had to walk about five minutes to [get there]....I asked if there would be a pumping room in our building and they said no, I would have to walk back....And they said, ‘Well, you can pump in the bathroom [instead].’...That helped me not feel so bad about not going back.” *Amber, Sacramento, CA*

Others said their supervisors contacted them repeatedly and unnecessarily while they were on PFL, tipping the scales toward leaving these employers.

Difficulties maintaining breastfeeding and pumping at work contributed to several women's decisions to leave employment. A lack of clean, private places or the time to pump created difficulties for some mothers. A few cited their frustration with their workplaces, and their commitment to breastfeeding, as reasons why they did not return to work.

Discussion and Implications

Lower-income mothers face particular economic vulnerability around the time of childbirth, a critical period both for them and for their young children. They tend to leave work at higher rates than other women do, at the same time that public policies encourage employment as the path to self-sufficiency. Quantitative research suggests that PFL programs help mothers stay attached to the workforce around childbirth, encourage attachment to their prior employers, and are associated with longer leave-taking, particularly for lower-income mothers. This study offers mothers' perspectives on potential reasons for these effects. A [companion brief](#) examines the role of PFL in facilitating work attachment.

Most mothers who participated in this study returned to work after their child was born, the vast majority to their prior employer. They said their need for income primarily drove the decision, though they cited other reasons as well, such as an identity tied to work, the desire for financial independence from their partner, enjoyment of their workplaces, and the existence of a job to which to return. Some received substantial support for their return from their employers and family resources.

Lower-income mothers in the study also faced challenges in returning to work. Many of the barriers to employment they described resembled those that other new mothers experience. But the women in our study appeared to experience more substantial challenges than those at higher income levels. This would be expected, given that the financial, workplace, and family resources of lower-income women are typically more limited.² Some of the lowest-income mothers in our study and those with the least help from family described high levels of persistent stress as they attempted to balance the demands of working with the needs of their families.

A subset of the mothers we talked with left work altogether. They were disproportionately but not solely those with a spouse or partner who earned income. Slightly fewer than half of those who left work were fired or laid off, while the others quit around the time of birth. Many said it was too expensive and too difficult to work. Most cited child care costs as a primary reason for not returning. Many felt that they were financially precarious whether they worked or not. Several said that they affirmatively preferred to be a full-time mother, and some had no foreseeable plans to rejoin the labor force. A few said they stayed home to care for a child with health concerns. Some cited job conditions, including a lack of breastfeeding accommodations, as their reason for leaving work. Several said they left regular employment but were able to work informal jobs intermittently.

This study points to several paths for further inquiry. In particular, research can identify lessons from employers of lower-income and hourly workers that seek to—and succeed in—supporting parents around the time of childbirth and beyond. For example, these employers may use practices that allow them to offer more predictable scheduling, breastfeeding accommodations, or help with regular or emergency child care. Other policies that can assist working parents with a new baby include transitional scheduling, such as phased-in hours from part- to full-time work, and formal career ladders that recognize the need for caregiving over the life span. Understanding better why and how these firms take these approaches could help identify

² See, for example, U.S. Bureau of Labor Statistics (2018) on differential access to employee benefits, in particular various forms of leave, and Baldiga, et al. (2018) on the disproportionate child-care cost burden of low-income working parents.

potential incentives and strategies for other employers of lower-income workers that wish to pursue these goals.³

Further, it would be beneficial to understand better the barriers that employers of lower-income parents with young children face in retaining these workers. This information could inform the development of policies to better support both workers who are parents and their employers.

In addition to the [companion brief](#) analyzing the role of state PFL programs in fostering continued employment among new mothers, future ASPE research will look in more detail at the intersection of work, PFL, and families' child care options and decisions.

Acknowledgements

The authors would like to thank Patrick Landers and Marissa Abbott of the Institute for Research on Poverty at the University of Wisconsin–Madison; Karen White and Yarrow Willman-Cole of Rutgers University; Helen Mederer of the University of Rhode Island; Christina Yancey and Kuangchi Chang of the U.S. Department of Labor; Robin Ghertner, Nina Chien, and Jennifer Burnszynski of ASPE; Pam Joshi of the Heller School at Brandeis University; Pronita Gupta of the Center for Law and Social Policy; the collaborating partner agencies and staff in the study states; and all the mothers we spoke with for their contributions to this study and this brief.

References

- Baldiga, M., Joshi, P., Hardy, E. & Acevedo-Garcia, D. 2018. "Child Care Affordability for Working Parents." *Data-for-Equity Research Brief*. Institute for Child, Youth and Family Policy, Heller School for Social Policy and Management, Brandeis University. Retrieved from: <http://www.diversitydatakids.org/files/Library/policy/ChildCare.pdf>
- Baum, C. L., & Ruhm, C. 2016. "The Effects of Paid Family Leave in California on Labor Market Outcomes." *Journal of Policy Analysis and Management*, 35(2): 333–356.
- Byker, T. 2016. "Paid Parental Leave Laws in the United States: Does Short-Duration Leave Affect Women's Labor-Force Attachment?" *American Economic Review*, 106(5): 242–246.
- Chien, N. 2019. "Factsheet: Estimates of Child Care Eligibility & Receipt for Fiscal Year 2015." Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. Retrieved from: <https://aspe.hhs.gov/system/files/pdf/260361/CY2015ChildCareSubsidyEligibility.pdf>
- Federal Reserve Bank of St. Louis. 2019. "Civilian Labor Force Participation Rate: Women." FRED Economic Data. Economic Research, Federal Reserve Bank of St. Louis. Retrieved from: <https://fred.stlouisfed.org/series/LNS11300002>
- Fuller, J. B., & Raman, M. 2019. "The Caring Company: How Employers Can Help Employees Manage Their Caregiving Responsibilities While Reducing Costs and Increasing Productivity." Harvard Business School. Retrieved from: http://www.aei.org/wp-content/uploads/2019/01/The_Caring_Company.pdf
- Joshi, P., Baldiga, M., Earle, A., Osypuk, T., & Acevedo-Garcia, D. 2016. "Reducing Disparities and Improving Access to Affordable Family and Medical Leave." Diversitydatakids.org. Presentation at Work and Family Research Network Conference, June 23, 2016.
- Klerman, J. A., Daley, K., & Pozniak, A. 2013. "Family and Medical Leave Act in 2012: Technical Report." Prepared for the U.S. Department of Labor. Washington, DC: Abt Associates.
- Kozhimannil, K., Jou, J., Gjerdingen, D., & McGovern, M. 2016. "Access to Workplace Accommodations to Support Breastfeeding After Passage of the Affordable Care Act." *Women's Health Issues*, 26(1), 6–13.
- Laughlin, L. 2011. "Maternity Leave and Employment Patterns of First-Time Mothers: 1961–2008." Washington, DC: U.S. Census Bureau.
- Milkman, R., & Appelbaum, E. 2013. *Unfinished Business: Paid Family Leave in California and the*

³ See Fuller and Raman (2019) for a discussion of these issues for workers across caregiving responsibilities and income levels. Williams (2014) discusses strategies employers can take to better accommodate family responsibilities of hourly (often lower wage) workers, while meeting their firms' business needs.

- Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press.
- Rossin-Slater, M., Ruhm, C. J., & Waldfogel, J. 2013. "The Effects of California's Paid Family Leave Program on Others' Leave-Taking and Subsequent Labor Market Outcomes." *Journal of Policy Analysis and Management*, 32(2), 224–245.
- Stanczyk, A. 2018. "What Changes in Household Income Around a Baby's Arrival Tell Us About the Importance of Paid and Family Medical Leave." *Urban Wire*. Washington, DC: The Urban Institute. Retrieved from: <https://www.urban.org/urban-wire/what-changes-household-income-around-babys-arrival-tell-us-about-importance-paid-family-and-medical-leave>
- U.S. Bureau of Labor Statistics, U.S. Department of Labor. 2018. "Table 32. Leave Benefits: Access, Private Industry Workers, March 2018." *Employee Benefits Survey, National Compensation Survey*. Retrieved from: <http://www.bls.gov/ncs/ebs/benefits/2018/ownership/private/table32a.htm>
- U.S. Department of Labor, Women's Bureau. 2016. "Labor Force Participation Rate by Educational Attainment and Sex, 2016 Annual Averages." Retrieved from: https://www.dol.gov/wb/stats/NEWSTATS/latest/Lf_par_rate_edu_att_sex_hisp2016_txt.htm
- Williams, J. C. 2014. "Today's schedules for today's workforce: Hourly employees and work-life fit." Washington, D.C.: U.S. Department of Labor. Retrieved from: https://digitalcommons.ilr.cornell.edu/cgi/viewcontent.cgi?referer=https://www.google.com/&httpsredir=1&article=2639&context=key_workplace
- Winston, P., Pihl, A., Groves, L., Campbell, C., Coombs, E., & Wolf, S. 2017. "Exploring the Relationship Between Paid Family Leave and the Well-Being of Low-Income Families: Lessons from California." Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. Retrieved from: <https://aspe.hhs.gov/pdf-report/exploring-relationship-between-paid-family-leave-and-well-being-low-income-families-lessons-california>