



RUTGERS HEALTH
School of Public Health

NURTURE NEW JERSEY

Progress in Increasing Access to
Paid Family Leave in New Jersey,
An Evidence-Based Strategy for
Improving Maternal and Infant Health

Nurture NJ is a comprehensive initiative to improve maternal and infant health outcomes within the state with a focus on reducing racial and ethnic disparities. A key strategy in this initiative is the expansion of paid leave benefits. Increasing access to paid family leave is critical for promoting racial equity, as nationally, Black families are less likely to have access to employer-based leave policies (Romig & Bryant, 2021). Paid leave has been shown to improve family economic security, in part by increasing job retention, particularly for women (Romig & Bryant, 2021).

In 2019, Governor Phil Murphy signed legislation to expand paid leave benefits in New Jersey. The expansion, an explicit component of Nurture NJ, is administered by the New Jersey Department of Labor and Workforce Development (New Jersey Department of Labor, n.d.).



Beginning in 2020, eligible pregnant workers and their partners became entitled to up to 12 consecutive weeks of Family Leave Insurance (FLI) to bond with a new child, with a maximum benefit rate calculated at 85% of the claimant's average weekly wage.



In addition, Temporary Disability Insurance (TDI) is available from 4 weeks before and up to 8 weeks after delivery for pregnant workers to recover from pregnancy, with time extensions available for pregnancy complications.



A Maternity Coverage Timeline Tool is available to help New Jersey pregnant workers plan their parental leave timeline and understand how FLI and TDI can work together (Maternity Coverage Timeline Tool, n.d.).



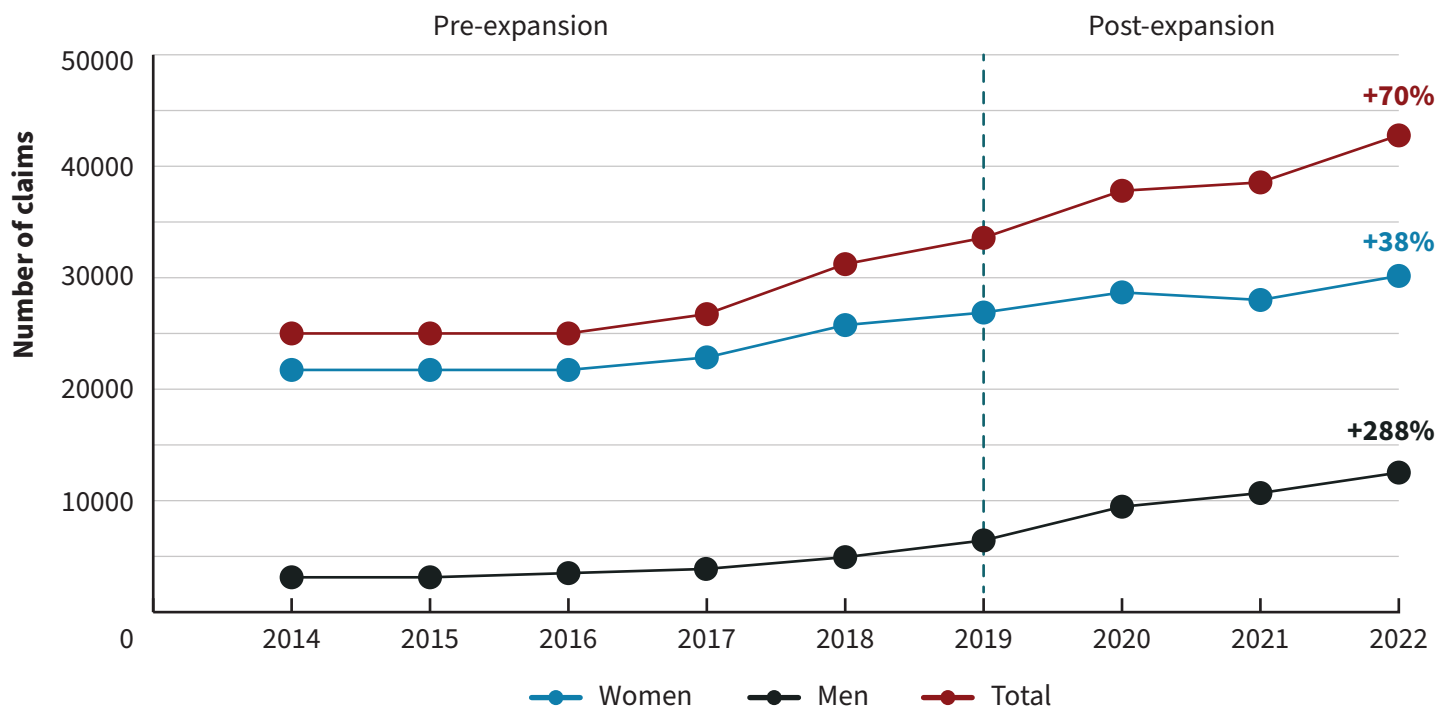


Figure 1. Number of eligible bonding claims for Family Leave Insurance for women, men, and total. Teal dotted line indicates start of policy changes.

Figure 1 shows that these policy changes were effective in increasing utilization of family leave benefits.



Beginning in 2019, the number of eligible Family Leave Insurance bonding claims rapidly increased, from 25,033 total claims in 2014 to 42,674 claims in 2022, an increase of 70%.



Both women's and men's claims increased over this period of time.

Furthermore, average duration of leave taken increased from 5.4 weeks in 2014 to 9.7 weeks in 2022. Data on paid leave claims disaggregated by race and ethnicity began to be collected in 2020 so examination of trends before and after the expansion is not possible; however further research will examine differences in use of paid family leave by race and ethnicity when more data become available.

Research shows that access to paid family and medical leave benefits is associated with several key maternal and infant health indicators, including:



Increased breastfeeding initiation and duration (Perry et al., 2024; Pac et al., 2019)



Increased attendance at postpartum visits (Perry et al., 2024),



Lower risk of postpartum depression (Mandal, 2018; Perry et al., 2024)



Lower odds of maternal and infant hospital admissions (Jou et al., 2018)



Access to paid temporary disability leave during the prenatal period is also associated with lower incidences of low birth weight and early term (Nandi et al., 2016; Stearns, 2015). These associations are particularly pronounced in Medicaid-covered populations (Perry et al., 2024). In addition, research shows that the more generous the leave policies, the more beneficial for maternal and infant health (Chatterji & Markowitz, 2005; Snyder, 2020; Staehelin et al., 2007).

Expanded access to paid family leave in New Jersey, which substantially increased the number of women and men taking bonding leave and the average duration of leave, has the potential to reduce racial disparities in maternal and infant health, contribute to healthy child development, and improve economic security for New Jersey families. The increased utilization of paid leave is an example of an improvement made for families as part of Nurture NJ.

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