

Fact Sheet

New Jersey Family Leave Insurance: Family Caregivers

April 2023



New Jersey Family Leave Insurance (NJFLI) is available to most employees in New Jersey. NJFLI can be taken to care for a family member with a serious physical or mental illness. It can also be used to care for a family member who is experiencing domestic or sexual violence. The definition of family is expansive and includes anyone related by blood to the employee or any individual the employee considers family. NJFLI can be taken as 12 consecutive weeks or 56 days if taken intermittently.ⁱ The wage replacement rate currently is 85% of a parent's average weekly wage up to a maximum of \$1025 per week. More information for employees from the New Jersey Department of Labor can be found at their [website](#).

Key Points

- In New Jersey, around 16% of NJFLI claims in 2021 were for caregiving, this reflects around 7300 caregivers, 71% of whom were female.ⁱⁱ AARP estimates that there are over 1 million caregivers in New Jersey.ⁱⁱⁱ This means that only a tiny fraction of those who are caregivers are using their leave in a given year. While some of these caregivers may not need to take leave, some may indeed need leave but are not taking it.
- The population of New Jersey is aging. The population of New Jersey who are 65 and over is expected to reach around 19% of the population in 2040.^{iv} In the 2020 Census, New Jersey residents who were 65 and older represented 16% of the population.^v
- Caregiving leave is often reactive, rather than proactive. This means that caregivers may not have a lot of advance notice of the acute care crisis that may cause them to need leave.^{vi} This could be because of sickness or injury, because of domestic violence situations, or some other acute or urgent medical event.
- Some caregivers do not even realize they have access to paid leave. Researchers examining parents' awareness of California's paid leave insurance found that nearly three-quarters of parents of seriously ill children with high levels of need for leave were mostly unaware of the availability of paid leave. Around 15% of parents knew about leave and only a third of those who knew about leave took it.^{vii}
- Caregivers who work in low-wage jobs may not have the resources to outsource their family caregiving needs and may spend more hours on caregiving. Caregivers with lower levels of education and lower earnings have been shown to spend more hours in family caregiving than those with higher levels of education and income.^{viii}

- Prior research has found that those who care for either a child or an elder experience more workplace discrimination than those who do not care and that those who care for both children and elders (sandwiched caregivers) are even more likely to experience discrimination.^{ix} Caregivers have reported that the culture at their workplace may be supportive of leave for bonding with children, but may be less supportive of leave for caregiving, thus leading caregivers to avoid using FLI for such leave.
- Family caregivers report experiencing financial hardships, including stopping saving and taking on debt. They also report using up part of their savings while caregiving. Over 60% of family caregivers in this survey report not having access to paid family leave through work.^x
- Family caregiving is often gendered. In a national survey, 60% of caregivers identified as women.^{xi} In New Jersey, 71% of caregiving leave was taken by women in 2021.^{xii}
- California's paid family leave law was associated with an increase in caregiving women remaining in the labor force, allowing them to continue to participate in contributing to their own retirement and their current financial stability.^{xiii}
- While caregiving is often gendered, any caregiver who leaves the labor force risks the financial consequences that come from lack of contributions to retirement and social security.
- Parents who are caring for children with serious healthcare needs report that they either did not miss work when their child needed them or they report returning to work too soon after taking a leave. However, parents with access to paid leave had nearly 3 times greater odds of missing work when their children needed them compared to parents without access to paid leave.^{xiv}
- Parents of children with serious healthcare needs report that when they are able to take paid family leave, their children benefit physically and emotionally. Additionally, parents report that their own mental health is better when they can take leave, and that leave reduces their levels of stress given their caregiving duties. However, these parents also reported that there were negative effects on their finances and job performance.^{xv}
- Paid family leave can buffer the emotional and physical toll of caregiving, but also allows a caregiver to save their vacation and sick time for their own health needs and respite.^{xvi}
- Additionally, the use of paid family leave for family caregiving may allow families to postpone moving their loved one into a care facility, thus reducing nursing home use in the community^{xvii} or allowing for a greater number of available nursing home beds.
- Prior research has shown that families seek information about leave from their care team, especially the social workers or care managers who help them with discharge or with planning for care after an acute illness or hospital stay.^{xviii}

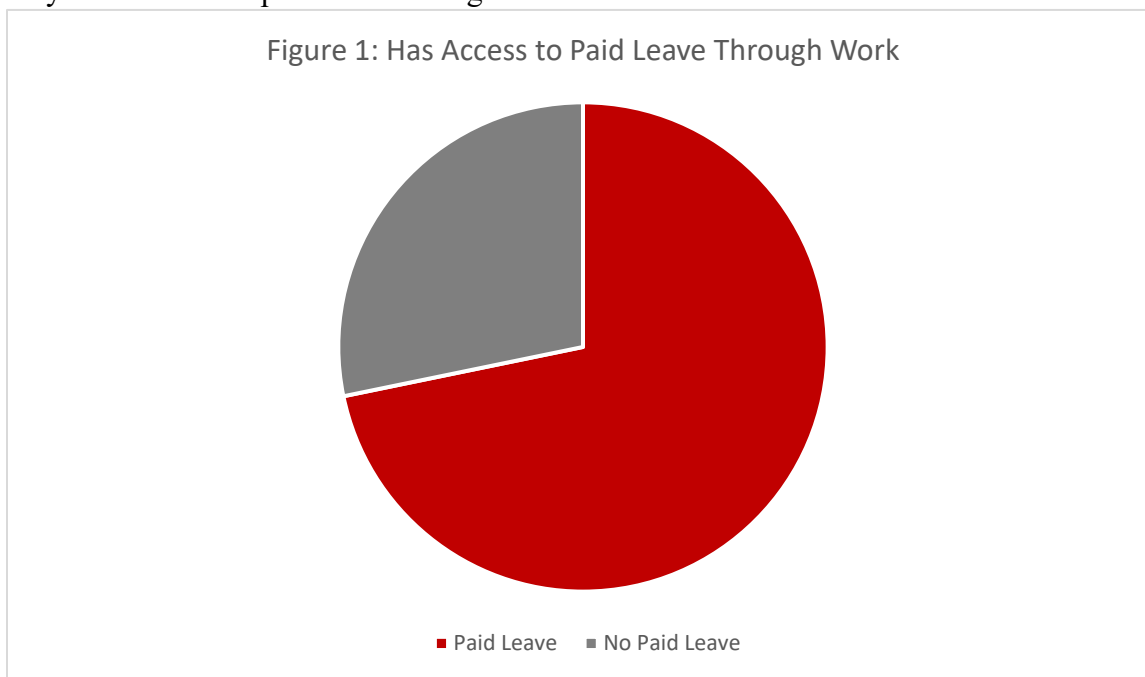
The research evidence outlined above suggests that there are benefits to more caregivers remaining in the workforce if it is paired with having access to paid leave. Given that NJ is one of the few states to offer paid leave for caregivers, it is important to reflect on the landscape of care in NJ and who might benefit from this access to leave.

Caregiver Demographics

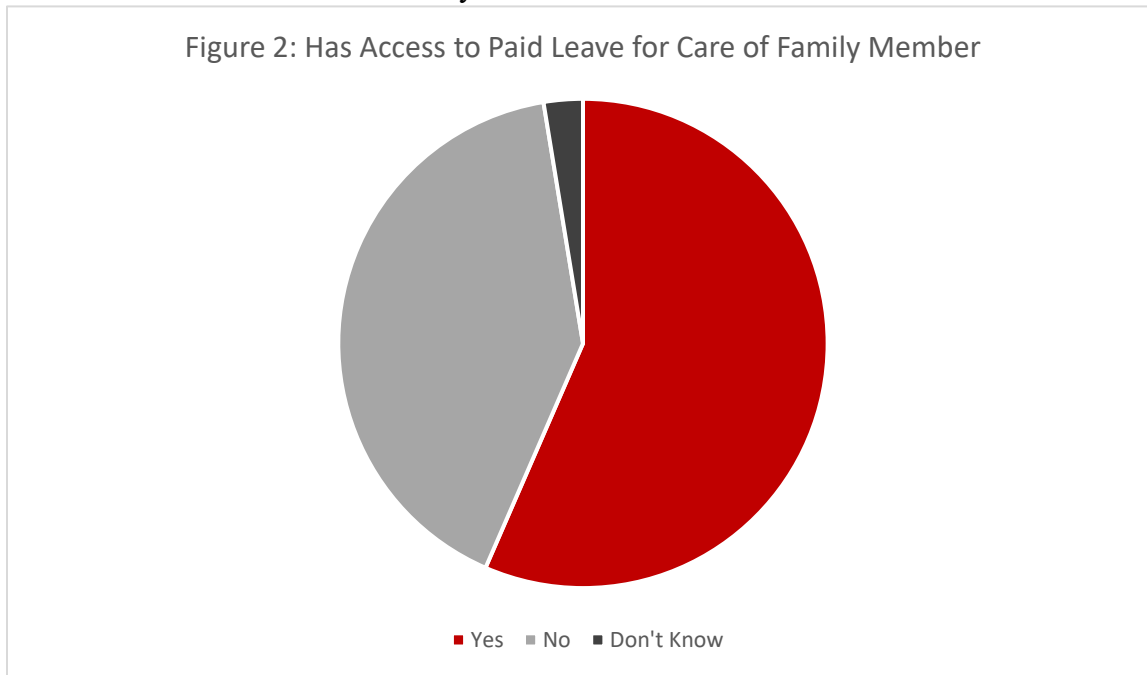
The American Time Use Survey (ATUS) is a nationally representative survey that is administered to a subset of those who have answered the Current Population Survey, which is a subset of the US Census. The ATUS tracks the amounts of time respondents spend on a variety of activities, including caregiving. Childcare and eldercare are included as possibilities for the type of care a respondent could have given in each survey time period. In addition, in 2011, 2017, and 2018, additional questions were asked about respondents' ability to take leave to care for a sick family member. Below we will outline the demographic characteristics of respondents from New Jersey who have some caregiving responsibilities. In order to be eligible to answer these questions, respondents must be employed, receive a wage or salary, and have answered a series of questions that would have indicated they were eligible to participate in this module.

Leave-takers in New Jersey

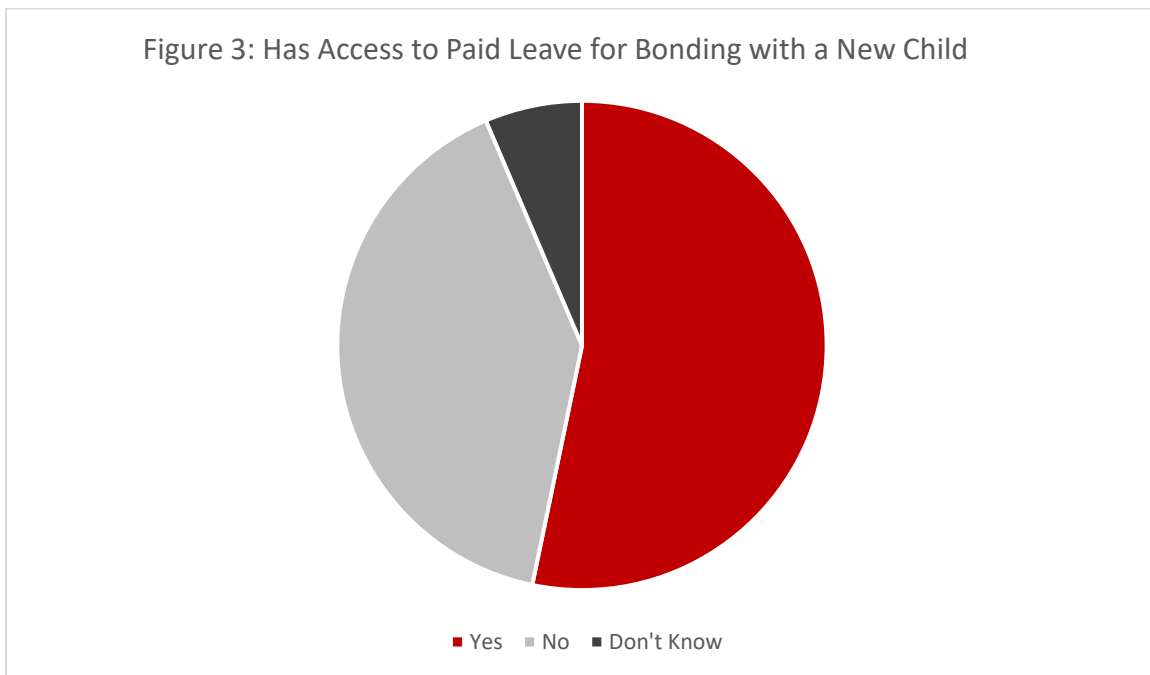
As illustrated in the chart below, nearly 72% of New Jersey respondents indicated that they have access to paid leave through their work.



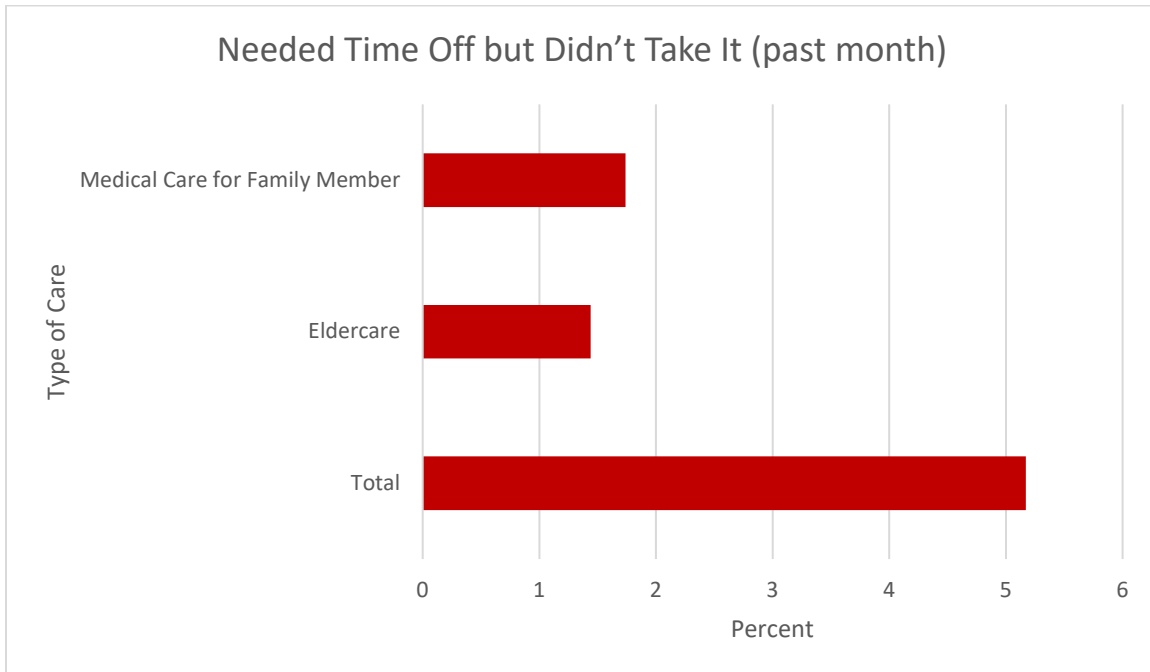
When asked if that paid leave can be used to care for a family member, nearly 57% reported that their leave could be used in that way.



When asked if that leave could be take to bond with a new child, around 53% reported that their leave could be used in that way.



Over 5% of respondents in New Jersey indicated that they needed time off but did not take it. Almost 1.5% needed time off for eldercare but did not take it and 1.75% of those who needed time off to care for a sick family member did not take it.



Summary

The above information outlines caregivers' need for leave but lack of knowledge and use of it. Given this, it is important to find ways to inform them of the leave benefit. One place where this can happen is in caregivers' communities, where they interact with professionals who might know about leave. These community intermediaries are those providers or establishments who can provide information to caregivers when they accompany a patient to an appointment or procedure. An intermediary could be a cancer center where a loved one is receiving chemotherapy, a health center where someone may receive other kinds of treatment, a doctor's office, a mental health facility where a loved one is receiving acute care, or a hospice center that may provide end of life care. In these spaces, caregivers often accompany the patient or client to appointments where they may learn about treatments and other aspects of a loved one's care plan. This can also be a place where they learn more about the possibility of taking FLI to assist them in their caregiving. Indeed, prior research has shown that families seek information about leave from their care team, especially the social workers or care managers who help them with discharge or with planning for care after an acute illness or hospital stay.^{xix} Sessions focused on discharge planning or planning for future treatments can be important moments when intermediaries can ensure family caregivers are aware of their leave benefit and know how to access the application.

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- ⁱ New Jersey Department of Labor and Workforce Development, “Family Leave Insurance: Information for Workers,” <https://nj.gov/labor/myleavebenefits/worker/fli/>.
- ⁱⁱ Office of Research and Information, “Family Leave Insurance and Temporary Disability Insurance: Combined Annual Activity Report 2021,” New Jersey Department of Labor and Workforce Development (December 2022), [https://nj.gov/labor/myleavebenefits/assets/pdfs/Annual FLI TDI Report for 2021.pdf](https://nj.gov/labor/myleavebenefits/assets/pdfs/Annual%20FLI%20TDI%20Report%20for%202021.pdf).
- ⁱⁱⁱ Hilary Appelman, “AARP New Jersey is Working to Assist Over 1 Million Family Caregivers in the State,” AARP (March 1, 2022), <https://states.aarp.org/new-jersey/hilary>.
- ^{iv} University of Virginia Weldon Cooper Center, Demographics Research Group, National Population Projections (2018), <https://demographics.coopercenter.org/national-population-projections>.
- ^v U.S. Census Bureau, “American Community Survey 1-year Estimates,” Census Reporter Profile Page for New Jersey (2021), <https://censusreporter.org/profiles/04000US34-new-jersey/>.
- ^{vi} Paul J. Chung et al., “Employment, Family Leave, and Parents of Newborns or Seriously Ill Children,” *Academic Pediatrics* 12, no. 3 (May 2012): 181–88, <https://doi.org/10.1016/j.acap.2012.02.001>.
- ^{vii} Mark A. Schuster et al., “Perceived Effects of Leave From Work and the Role of Paid Leave Among Parents of Children With Special Health Care Needs,” *American Journal of Public Health* 99, no. 4 (April 2009): 698–705, <https://doi.org/10.2105/AJPH.2008.138313>.
- ^{viii} K. Robin Yabroff and Youngmee Kim, “Time Costs Associated with Informal Caregiving for Cancer Survivors,” *Cancer* 115, no. S18 (2009): 4362–73, <https://doi.org/10.1002/cncr.24588>.
- ^{ix} Christine A. Henle et al., “Eldercare and Childcare: How Does Caregiving Responsibility Affect Job Discrimination?,” *Journal of Business and Psychology* 35, no. 1 (February 2020): 59–83, <https://doi.org/10.1007/s10869-019-09618-x>.
- ^x National Alliance for Caregiving and AARP, “Caregiving in the U.S.: 2020 Report” (2020), <https://www.caregiving.org/wp-content/uploads/2021/01/full-report-caregiving-in-the-united-states-01-21.pdf>
- ^{xi} National Alliance for Caregiving and AARP, “Caregiving in the U.S.: 2020 Report” (2020), <https://www.caregiving.org/wp-content/uploads/2021/01/full-report-caregiving-in-the-united-states-01-21.pdf>
- ^{xii} Office of Research and Information, “Family Leave Insurance and Temporary Disability Insurance: Combined Annual Activity Report 2021,” New Jersey Department of Labor and Workforce Development (December 2022), [https://nj.gov/labor/myleavebenefits/assets/pdfs/Annual FLI TDI Report for 2021.pdf](https://nj.gov/labor/myleavebenefits/assets/pdfs/Annual%20FLI%20TDI%20Report%20for%202021.pdf).
- ^{xiii} Joelle Saad-Lessler, “How Does Paid Family Leave Affect Unpaid Care Providers?,” *The Journal of the Economics of Ageing* 17 (October 1, 2020): 100265, <https://doi.org/10.1016/j.jeoa.2020.100265>.
- ^{xiv} Chung et al., “Employment, Family Leave, and Parents of Newborns or Seriously Ill Children.”
- ^{xv} Schuster et al., “Perceived Effects of Leave From Work and the Role of Paid Leave Among Parents of Children With Special Health Care Needs.”
- ^{xvi} Alison Earle and Jody Heymann, “Protecting the Health of Employees Caring for Family Members with Special Health Care Needs,” *Social Science & Medicine* 73, no. 1 (July 1, 2011): 68–78, <https://doi.org/10.1016/j.socscimed.2011.05.016>.
- ^{xvii} Kanika Arora and Douglas A. Wolf, “Does Paid Family Leave Reduce Nursing Home Use? The California Experience,” *Journal of Policy Analysis and Management* 37, no. 1 (2018): 38–62, <https://doi.org/10.1002/pam.22038>.
- ^{xviii} Chung et al., “Employment, Family Leave, and Parents of Newborns or Seriously Ill Children.”
- ^{xix} Schuster et al., “Perceived Effects of Leave From Work and the Role of Paid Leave Among Parents of Children With Special Health Care Needs.”

ABOUT THE CENTER FOR WOMEN AND WORK

The Center for Women and work (CWW) promotes economic and social equity for women workers, their families, and their communities. CWW conducts research, advances education, and engages in programming that support women in the workplace and contribute to effective policy making. CWW's work focuses on providing training, technical assistance, and programs for students, educators, industry, and governments; analyzing and addressing issues that directly affect the living standards of working families locally and globally; and collaborating with partners to support community-level work. CWW is housed within the School of Management and Labor Relations at Rutgers, The State University of New Jersey and is a member of the Institute for Women's Leadership Consortium.



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