

Fact Sheet

New Jersey Family Leave Insurance: Health Outcomes

April 2023



New Jersey Family Leave Insurance (NJFLI) is available to most workers in New Jersey. There are benefits to taking NJFLI for both the leave-taker and the person for whom they are caring. This factsheet will outline the health benefits of taking leave.

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 \$993 per week (increasing to \$1025 in 2023). Leave can be taken for bonding with a new child, caring for a sick family member, or for coping with domestic or sexual violence. The definition of family includes anyone an employee may consider family. More information for employees from the New Jersey Department of Labor can be found at their [website](#).

Key Points

- Mothers who take leave are more likely to breastfeed and breastfeed for longer periods, which could result in lower risk of health problems for the children.ⁱⁱ
- Among mothers who worked prior to taking leave, taking less than 8 weeks of leave was associated with negative overall health and taking less than 12 weeks of leave was associated with increased depressive symptoms.ⁱⁱⁱ
- Mothers and fathers report less stress over the transition to parenthood and report greater well-being across that transition when fathers take leave.^{iv}
- Paternity leave is associated with less of an increase in stress and fatigue during the father's transition to parenthood.^v
- Implementation of paid leave in California was also associated with parents reporting improved health among infants. It was also associated with improved self-reported mental health among mothers.^{vi}
- Implementation of paid leave in California was associated with decreased hospital admissions among infants for gastrointestinal and respiratory illnesses.^{vii} More generally, mothers who took leave and their infants were less likely to be re-hospitalized after the birth.^{viii}
- Parents of children with serious healthcare needs report that when they are able to take paid family leave, their children benefit physically and emotionally. In addition, 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.^{ix}

- There is very little research on those who take leave for elder care and none on health outcomes. One study did find that nursing home use decreased significantly after the implementation of PFL in California.^x

The key points above indicate that using NJFLI can result in improved health, not only for those who take leave, but for the family members who are in the leave-takers' care. While on leave, parents or caregivers can focus more on caregiving without having to worry about reporting to work every day. While much of the research focuses on leave taken at the birth of a child, there is also evidence that ill children whose parents take leave and the parents themselves also benefit.

ⁱ New Jersey Department of Labor and Workforce Development, "Family Leave Insurance: Information for Workers," <https://nj.gov/labor/myleavebenefits/worker/fli/>.

ⁱⁱ Eileen Appelbaum and Ruth Milkman, "Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California," 2011, <https://escholarship.org/uc/item/6bm118ss>.

ⁱⁱⁱ P. Chatterji and S. Markowitz, "Family Leave After Childbirth and the Mental Health of New Mothers," *JOURNAL OF MENTAL HEALTH POLICY AND ECONOMICS* 15, no. 2 (2012): 61–76.

^{iv} S.I. Cardenas et al., "Associations between Paid Paternity Leave and Parental Mental Health Across the Transition to Parenthood: Evidence from a Repeated-Measure Study of First-Time Parents in California," *Journal of Child and Family Studies* 30, no. 12 (2021): 3080–94, <https://doi.org/10.1007/s10826-021-02139-3>.

^v Cardenas et al.

^{vi} L. R. Bullinger, "The Effect of Paid Family Leave on Infant and Parental Health in the United States," *Journal of Health Economics* 66 (May 16, 2019): 101–16, <https://doi.org/10.1016/j.jhealeco.2019.05.006>.

^{vii} Ariel Marek Pihl and Gaetano Basso, "Did California Paid Family Leave Impact Infant Health?," *Journal of Policy Analysis and Management* 38, no. 1 (2018): 155–80, <https://doi.org/10.1002/pam.22101>.

^{viii} Judy Jou et al., "Paid Maternity Leave in the United States: Associations with Maternal and Infant Health," *Maternal and Child Health Journal* 22, no. 2 (February 2018): 216–25, <https://doi.org/10.1007/s10995-017-2393-x>.

^{ix} 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>.

^x 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>.

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