



Health Impact  
Assessment  
Paid Family Leave and Safe  
Leave in North Carolina

**ASSESSMENT REPORT**

November 2022



**NCCADV**

North Carolina Coalition  
Against Domestic Violence

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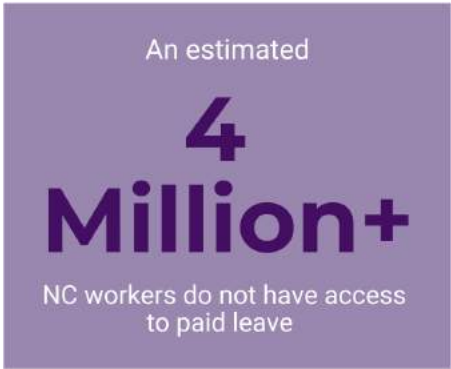
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# Executive Summary

In 2019, the North Carolina Coalition Against Domestic Violence (NCCADV) contracted with ETR Services, LLC to conduct a health impact assessment of employer-based paid leave policies in the state. Of particular interest were parental leave policies for growing families and safe(ty) leave for individuals experiencing intimate partner violence.



## Methods

Data for this health impact assessment come from secondary sources including:

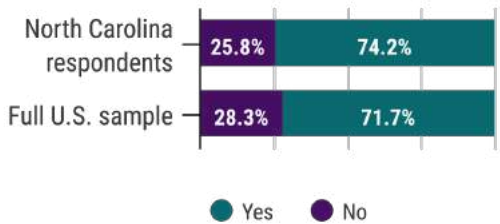
- General Social Survey (GSS), 2012
- National Intimate Partner Violence Survey, 2010-2012
- Pregnancy Risk Assessment Monitoring System (PRAMS), 2016-2019
- Survey of Income and Program Participation (SIPP), 2020
- United States Bureau of Labor Statistics, 2005-2021
- United States Census (Census), 2019



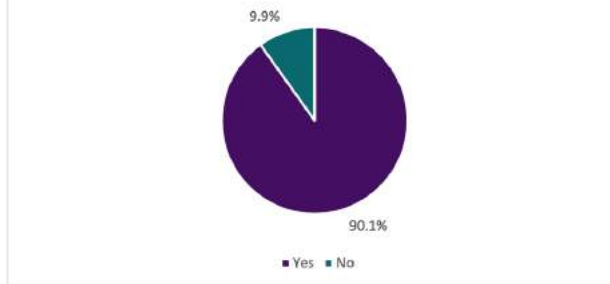
Semi-structured Interviews were also conducted with ten working parents. Half of them reported experiencing intimate partner violence near or during the time they were pregnant.

## Who does this affect?

**An estimated 74% of NC workers continued working during a pregnancy**



**Among those who worked during a pregnancy, 90.1% continued to work right up until birth**



**67%**

NC working families with two working parents and a child under the age of 6



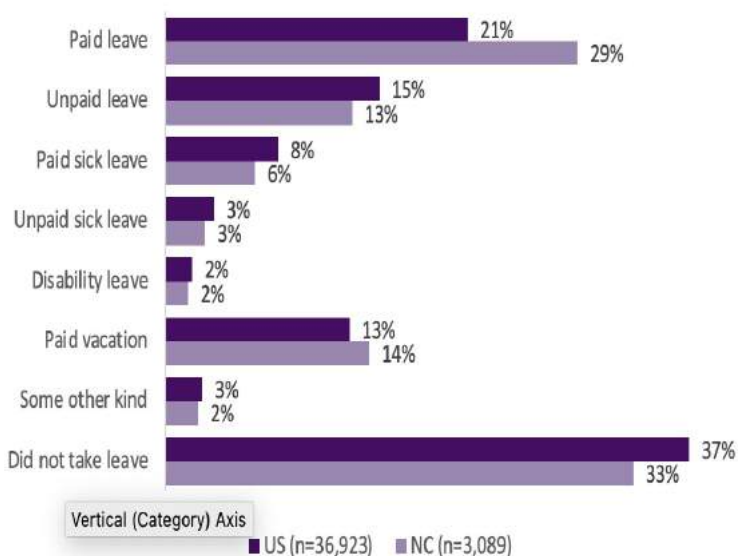
**73%**

NC working families with two working parents and a child between the ages of 6 and 17

# Executive Summary



Type of leave used after birth of child



6

## Quick Findings

- An estimated 77% of new parents return to work after the birth of a child.
- An estimated 35% of new parents take one month of leave or less after the birth of a child.
- An estimated 58% of new parents take two months or less of leave after the birth of a child.

Source: SIPP, 2020

## Benefits of Paid Leave

The benefits of paid parental leave are well-documented. In comparison to workers without access, workers with access to paid parental leave report:

- (1) better maternal health outcomes
- (2) greater emotional investment and engagement in caregiving among fathers
- (3) lower rates of infant mortality and post-neonatal mortality
- (4) lower rates of pediatric abusive head trauma
- (5) increased length of breastfeeding and
- (6) increased well-baby care and vaccinations

Paid leave also increases worker retention by increasing the likelihood that a new parent will return to work. It also improves employee morale and family incomes. Birth can be a traumatic experience for new parents. Postpartum depression, birthing complications, and health emergencies among newborns all impact new parents' physical and mental health in a variety of negative ways.

### NC PRAMS Data (Pregnancy Risk Assessment Monitoring System)

This includes birthing people who gave survey responses before, during and after pregnancy.

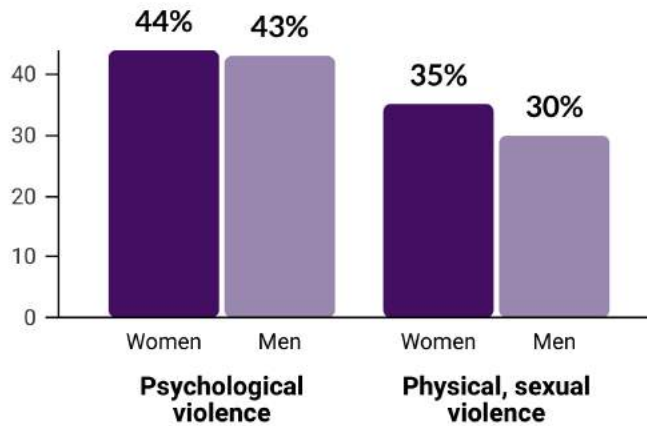
	NC 2017 %	NC 2018 %	NC 2019 %	Overall 2019 %
Self-reported depression in the 3 months before pregnancy	13.0	11.5	15.3	15.1
Self-reported depression during pregnancy	13.7	12.5	15.1	14.8
Self-reported postpartum depressive symptoms**	11.7	11.8	10.7	13.4

Source: Pregnancy Risk Assessment Monitoring System (PRAMS), 2016–2019

# Executive Summary

As of August 2020, thirteen states had passed paid sick leave laws that include paid safe leave. Although policies vary by state, safe leave laws typically require employers to provide paid leave from work when an employee or employee’s family member is experiencing intimate partner violence, sexual assault, and/or stalking. North Carolina does not currently have a safe leave law but does mandate that employers provide “a reasonable period of leave” for victims and survivors of intimate partner violence to obtain a court order or obtain relief. This mandate does not require that leave be paid, and the length of leave is subject to interpretation.

Just over 40% of women and men will experience psychological violence during their lifetime while approximately one in three women and men will experience physical or sexual violence during their lifetime.



Source: National Intimate Partner Violence Survey, 2010 – 2012

	NC 2019 (%)
Experienced IPV during the 12 months before pregnancy by a husband or partner and/or an ex-husband or partner	4.1
Experienced IPV during pregnancy by a husband or partner and/or an ex-husband or partner	2.5

Pregnancy does not protect against intimate partner violence.

Source: Pregnancy Risk Assessment Monitoring System (PRAMS), 2016–2019



# Introduction

The term '**paid leave**' describes a variety of possibilities:

- (1) paid **parental leave** for birth or adoption of a new child
- (2) paid leave to provide care to an aging family member
- (3) **safe(ty) leave** for victims/survivors of intimate partner violence
- (4) paid time off (PTO) - that can be used for personal health and wellbeing, caregiving, emergencies, and vacations.

For the purposes of this health impact assessment, **paid leave** is defined as job-protected, employer-paid time away from work that: (1) accommodates caregiving responsibilities, (2) does not require a worker to choose between family health, personal safety, and economic stability, and (3) does not overlap with paid **sick leave** or paid **annual leave**.

This assessment focuses on two types of paid leave: **parental leave** and **safe(ty) leave** (see glossary for definitions). This report focuses on access to paid leave prior to the ongoing COVID-19 pandemic, a global crisis with widespread economic, social, and political consequences for people all over the world.

A discourse analysis conducted on behalf of NCCADV shows that conversations among key stakeholders in the state shifted to discussions of paid **sick leave** during the pandemic, reflecting the ongoing challenges in the state with testing for and curbing the spread of the COVID-19 virus. It is almost certain that the need for parental leave remained strong in the state during this time, but has taken a backseat to other, more pressing discussions.

**Annual leave (vacation):** employer-paid (and job-protected) time away from work to be used at the worker's discretion

**Bereavement leave:** a form of job-protected leave available to workers when they experience the death of a loved one (who is generally a close relative)

**Paid leave:** employer-paid (and job-protected) time away from work that accommodates caregiving responsibilities, does not require a worker to choose between family, personal safety, and economic stability and does not overlap with paid sick leave or paid annual leave benefits

**Parental leave:** employer-paid (and job-protected) time away from work that accommodates caregiving responsibilities for at least one dependent child

**Sick leave:** employer-paid (and job-protected) time away from work available to workers experiencing personal short-term illness (or the illness of a dependent child)



# Introduction

This health impact assessment is organized into three parts.

First, literature on the health impacts of paid leave are summarized with an emphasis on the health impacts associated with paid leave.

Next, quantitative findings from secondary data sources are presented. These include findings related to:

- attitudes about paid leave
- demographics of North Carolina's workforce
- national and state-level availability of paid leave
- national and state-level use of paid leave

Finally, qualitative findings from interviews with NC working parents are summarized, and five case studies that highlight the need for improved supports for workers are presented.

Conclusions and implications are presented in a final section of the report.

## A Note on Language

COVID-19 severely impacted our ability to conduct primary data collection for this health impact assessment. As a result, this assessment relies heavily on quantitative analysis of secondary data sources. This meant that the data were already collected by a government office or as part of another government-funded research study and the evaluator had no input on the data collected. Consequently, the quantitative findings are often reported using language that does not reflect values of the evaluator and NCCADV.

Due to these limitations, official data are incomplete and do not answer all the questions one may have about how paid leave is distributed across different groups of workers (e.g., adoptive parents, LGBTQ parents, workers in sectors other than the limited categories documented by government sources, etc.)

Data on safe leave and its impact on worker health, productivity, and retention are not available. Similarly, there is little data collected about children of victims and survivors leaving relationships impacted by intimate partner violence (IPV), which may also require additional support from a parent that necessitates missing work.

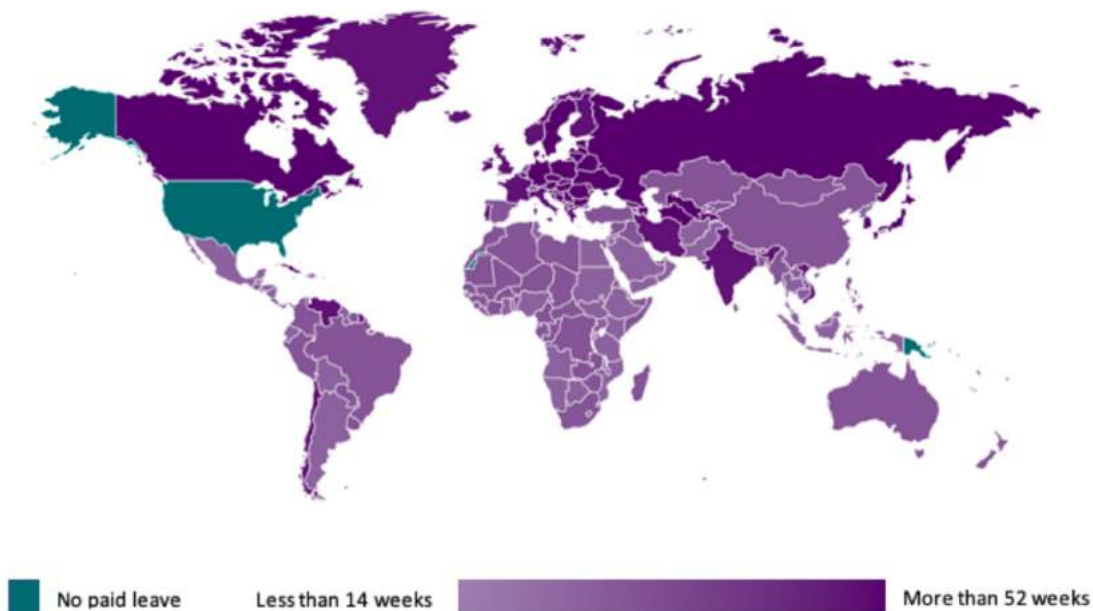
# Why is Paid Leave Beneficial?

The benefits of paid parental leave are well documented. In comparison to workers without access, workers with access to [paid parental leave](#) report: better maternal health outcomes (Aitken et al. 2015) [\[1\]](#); greater emotional investment and engagement in caregiving among fathers (Gault et al. 2014 [\[2\]](#); O'Brien 2009) [\[3\]](#); lower rates of infant mortality and post-neonatal mortality (Patton et al. 2017) [\[4\]](#); lower rates of pediatric abusive head trauma (Klevins et al. 2016) [\[5\]](#); increased length of breastfeeding (Manley, 2015) [\[6\]](#); and increased well-baby care and vaccinations (Gault et al. 2014) [\[7\]](#).

Paid leave also increases worker retention, increases the likelihood that a new parent will return to work, improves employee morale and family incomes, and improves worker retention (Gault et al. 2014 [\[8\]](#); Mulvaney, 2014) [\[9\]](#).

Presently the United States lags behind many other developed countries in its protections for workers. It is the only developed nation without federally mandated paid leave for new parents (see Figure 1; Burtle and Bezruchka 2016 [\[10\]](#); see also Chen 2016 [\[11\]](#) for implications for caregiving of aging adults). Enacted in 1993, the Family and Medical Leave Act (FMLA) provides full-time and part-time U.S. employees with up to twelve weeks of unpaid, job-protected leave per year during which time the employee's group health benefits must be maintained.

Figure 1. Paid maternal leave, by country



## Benefits - cont.

FMLA is mandated for all public agencies, public and private elementary and secondary schools, and private businesses with at least 50 employees. FMLA is accessible to workers who experience a(n): birth of a child; adoption or foster child placement; serious personal illness or injury; and/or primary caretaking responsibilities for an immediate family member with serious illness or injury.

Although FMLA is undisputedly an important piece of federal legislation that protects workers' rights and livelihoods, it does not provide adequate protections for the health of families and/or caregiving workers. This is especially true for workers from marginalized communities and other vulnerable populations. LGBTQ+ workers face heightened discrimination and unequal relationship recognition in the workplace (Maxwell et al. 2018) [12]; racial and ethnic minorities, farmworkers, contract workers, **shift workers**, and other groups who experience heightened workplace discrimination and labor market exploitation are also particularly likely to benefit from access to paid leave. Workers from lower income levels, without insurance, and working part-time typically receive less generous benefits than other workers, if they receive benefits at all (Shepherd-Banigan and Bell, 2014) [13], which likely serves as another mechanism through which social class advantages (and disadvantages) are reproduced.

Victims and survivors of IPV are often overlooked as a population in need of paid leave. Because intimate partner violence often impacts the work life of victims and survivors, resulting in missed work, lost wages, and diminished performance as a result of chronic stress and allostatic load, victims and survivors are likely to benefit from access to employer-based paid leave as well.

As Baum and colleagues (2017) [14] explain, chronic stress results when stress lasts for an abnormally long time, either because it is repeated or episodic, occurs continuously, or because it poses severe threat that is not easily diffused or avoided. This has direct implications for individuals and families experiencing intimate partner violence, because this type of violence is episodic, it can occur with little to no warning, and poses a significant risk to an individual's physical and mental wellbeing (Campbell, 2002 [15]; Dutton et al. 2006 [16]; Gilbert et al. 2014) [17]. **Allostatic load**, or the wear-and-tear on the body that occurs in response to repeated or prolonged activation of a person's stress systems, is associated with poor health outcomes for adults and children alike (McEwen, 1998 [18], 2002 [19], 2003 [20]; McEwen and Stellar, 1993 [21]; McEwen and Wingfield, 2003 [22]; Rogosch et al. 2011) [23]. These vulnerabilities are often compounded among economically disadvantaged workers and individuals experiencing cumulative abuse. Thus, understanding and mitigating the adverse health impacts of intimate partner violence requires consideration of all types of abuse across the lifespan (Scott-Storey, 2011) [24].

# Benefits - cont.

Research suggests that paid leave benefits can alleviate work-family conflict (Allen et al. 2014) [25] which in turn reduces stress within the family – a benefit that may carry over to both partners in two-partner households.

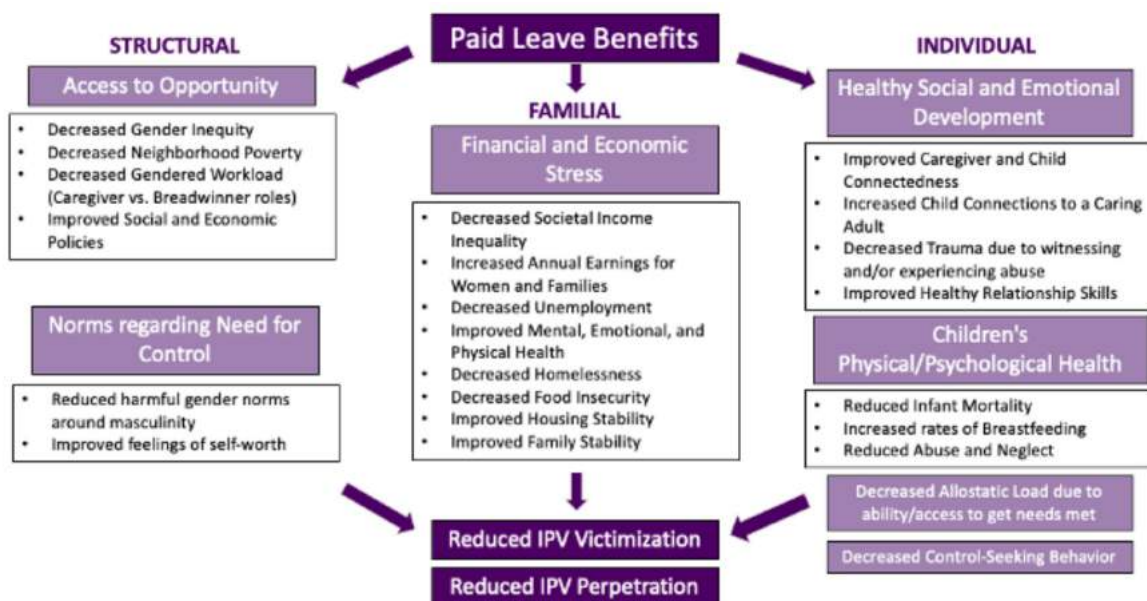
Similarly, greater economic stability is likely to promote positive health and wellbeing outcomes for both partners in a two-partner household, but also provides victims and survivors with economic resources needed for leaving an abusive relationship.

Understanding how to mitigate the negative health impacts of intimate partner violence by economically strengthening employer-based supports for victims and survivors is also important (see Figure 2).

In addition to providing financial support and job protection during times of acute stress and violence, strengthening employer-based supports presents an important opportunity to disrupt the negative effects of trauma and childhood adversity (e.g., child maltreatment, witnessing IPV, and family dysfunction) and their prospective health impacts (Gilbert et al. 2014) [26].

Although there is little empirical evidence documenting the effects of employer-based paid leave benefits for victims and survivors of intimate partner violence (Vermont Department of Health, 2015) [27], there is good reason to trust that employer-based paid leave policies will produce beneficial health outcomes for victims/survivors and perpetrators of intimate partner violence. Accordingly, we maintain that paid leave protections are an important protective mechanism for adults and children affected by intimate partner violence.

**Figure 2.** How paid family leave impacts factors related to intimate partner violence on the structural, familial, and individual levels



# U.S. Attitudes Toward Paid Leave

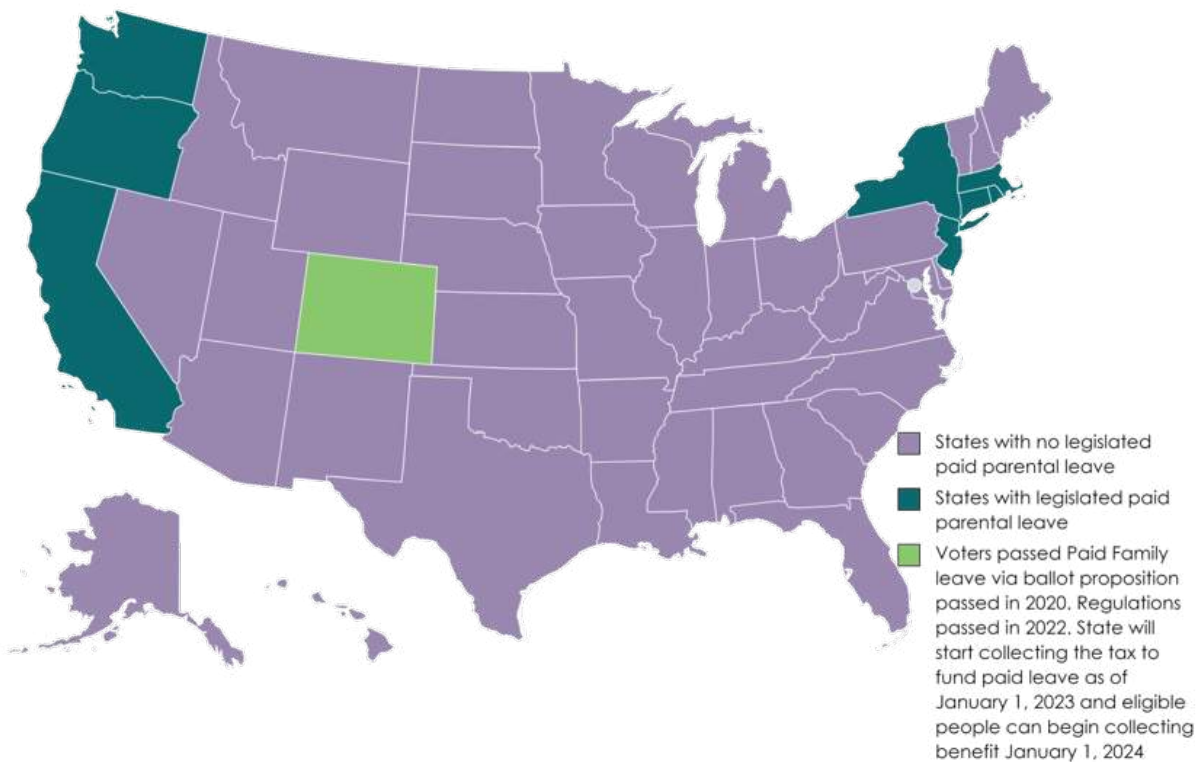
The [General Social Survey \(GSS\)](#) is a nationally representative survey of adults in the United States. Conducted annually by the National Opinion Research Center (NORC) at the University of Chicago since 1972, the GSS has collected data on contemporary US culture to document and explain trends and shifts in opinions, attitudes, and behaviors.

The GSS contains a core set of demographic variables along with various modules that focus on topics of interest. Topics covered include civil liberties, crime and violence, intergroup tolerance, morality, national spending priorities, psychological well-being, social mobility, and stress and traumatic events. The GSS has provided politicians, policymakers, and scholars with clear, unbiased perspectives on key social issues since its inception.

Since 1974, the GSS has included a number of questions related to paid leave. These include:

- Consider a couple who both work full-time and now have a newborn child. One of them stops working for some time to care for their child. Do you think there should be paid leave available and, if so, for how long?
- Who should pay for this leave? The government, the employer, both the government and the employer, or other sources?
- Still thinking about the same couple, if both are in a similar work situation and are eligible for paid leave, how should this paid leave period be divided between the mother and the father?

**Figure 3.** States with legislated paid parental leave



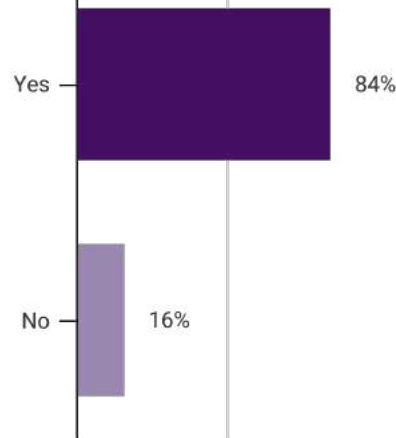
# Findings

Chart 1 here shows findings regarding paid leave from GSS data for 2012. Findings show that most respondents reported favorable attitudes toward paid leave. When asked if paid leave should be made available to working families, 84% of respondents selected “yes.”

For those who responded affirmatively, a follow-up question was asked about the length of paid leave that should be provided to working families: responses ranged from 1 to 72 months with a mean suggested length of paid leave for 5.3 months.

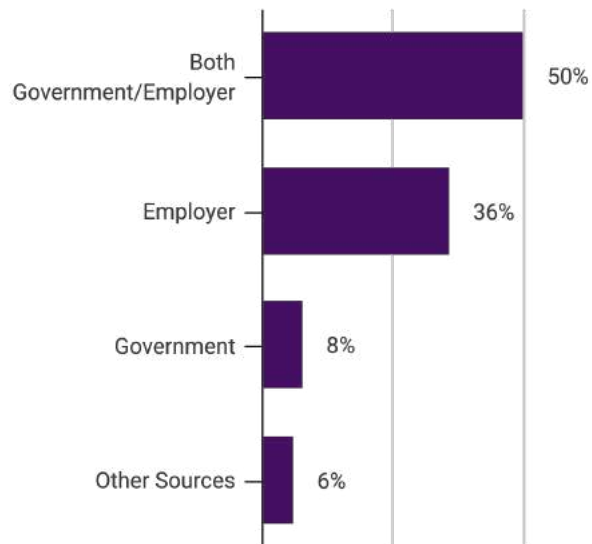
When asked who should be responsible for covering the costs of providing paid leave to working families, respondents overwhelmingly indicated that employers have a responsibility to cover at least part of the costs of paid leave for new parents. Thirty-six percent of respondents reported that the employer should cover the costs of paid leave while another 50% of respondents said the employer and government should share the costs. Only 8% of respondents reported that the government should be solely responsible for covering the costs of paid leave for families with a newborn child (see Chart 2.).

Chart 1. Paid leave should be provided



Source: GSS, 2012

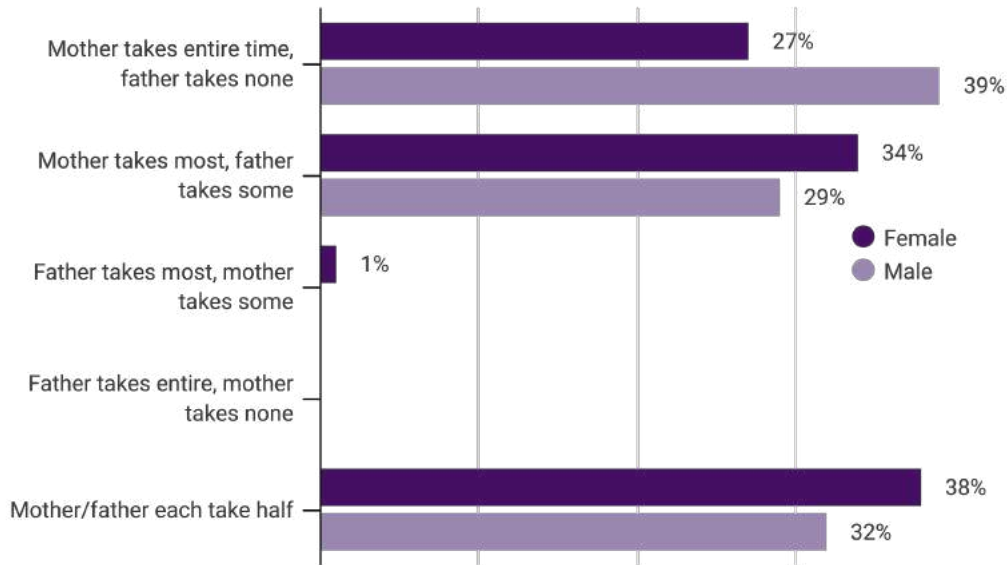
Chart 2. Who should pay?



Source: GSS, 2012

# Findings

Chart 3. Who should take paid leave?



Source: GSS, 2012

The GSS also asks respondents to identify who should directly benefit from paid leave policies. In other words, who should actually take paid leave when a new child is born? Responses were mixed, with one glaring exception: respondents agree that mothers should disproportionately benefit from paid leave policies. Twenty-seven percent of female respondents and 39% of male respondents reported that the mother should take the entire paid leave period while the father takes none. An additional 34% of female respondents and 29% of male respondents indicated that the mother should take most and the father take some of any paid leave made available to parents of a newborn. Approximately one third of male and female respondents would like to see new parents split any paid leave time made available to new parents (see Chart 3.).

# NC Demographics



Table 1. Sex	Total (%)
Female	5,393,757 (51.4%)
Male	5,094,327 (48.6%)

Table 2. Age	Total (%)
Under 5 years	596,583 (5.7%)
5 to 9 years	615,543 (5.9%)
10 to 14 years	686,687 (6.5%)
15 to 19 years	713,066 (6.8%)
20 to 24 years	689,128 (6.6%)
25 to 34 years	1,401,663 (13.4%)
35 to 44 years	1,312,661 (12.5%)
45 to 54 years	1,363,200 (13.0%)
55 to 59 years	700,481 (6.7%)
60 to 64 years	658,137 (6.3%)
65 and over	1,750,935 (16.7%)
Median age (in years)	39.1

Table 3. Race	Total (%)
Asian	309,905 (3.0%)
Black/African American	2,253,481 (21.5%)
Native Hawaiian and Other Pacific Islander	6,878 (0.1%)
White	7,144,510 (68.1%)
Some other race	351,465 (3.4%)
Two or more races	295,137 (2.8%)

Table 4. Ethnicity	Total (%)
Hispanic or Latino/a (of any race)	1,022,995 (9.8%)
Not Hispanic or Latino/a	9,465,089 (90.2%)



# The North Carolina Workforce

North Carolina residents are female (51%) and most (90.2%) do not identify as Hispanic or Latino/a. Sixty-eight percent of residents are white and 21.5% identify as Black or African American. The median age is 39.1 years with 38.9% of residents falling within the ages of 25 and 54 years old. Data indicate a large proportion of young to mid-career adults and retired adults over the age of 65 (see page 9 for additional details).



Tables 5 and 6 provide information on the number of NC workers with children under the age of 6 years and between the ages of 6 and 17 years (respectively). Each table also indicates the percentage each group represents of the civilian labor force in the state. For example, there were 683,764 working parents with at least one child under the age of 6 in their home in 2019 and this represented 13.8% of the total civilian labor force in the state. Among those 600,000+ working parents, 460,380 lived in a household where both parents worked (representing 9.3% of the total civilian labor force in NC). There are over twice the number of working parents with children ages 6-17 years relative to parents with children under 6 years of age.

**Table 5.** NC workforce with children under the age of 6 years, 2019 (pre-COVID-19)

	# NC workers	% of NC workforce
Working with own children in household	683,764	13.8%
Both parents working with children in household	460,380	9.3%

Source: U.S. Census, 2019

**Table 6.** NC workforce with children aged 6 – 17 years, 2019 (pre-COVID-19)

	# NC workers	% of NC workforce
Working with own children in household	1,479,224	30.0%
Both parents working with children in household	1,081,386	21.9%

Source: U.S. Census, 2019

**Own children** in a family are sons and daughters, including stepchildren and adopted children, of the householder.

# The North Carolina Workforce

Using the same data, Table 7 shows the percentage of working parents in families where both parents are working for each of two age groups. Sixty-seven percent of working parents with children younger than 6 years lived in households where both parents worked. Also, 73.1% of working parents of children aged 6 to 17 years lived in households where both parents worked. As one might expect, this percentage for families with both parents working is higher among those with older children in the home.



**Table 7.** NC civilian workers with children, 2019 (pre-COVID-19)

	Working with own children in household	Both parents working with children in household	% of families with both parents working
Under 6 years	683,764	460,380	67.3%
6 – 17 years	1,479,224	1,081,386	73.1%

Source: U.S. Census, 2019



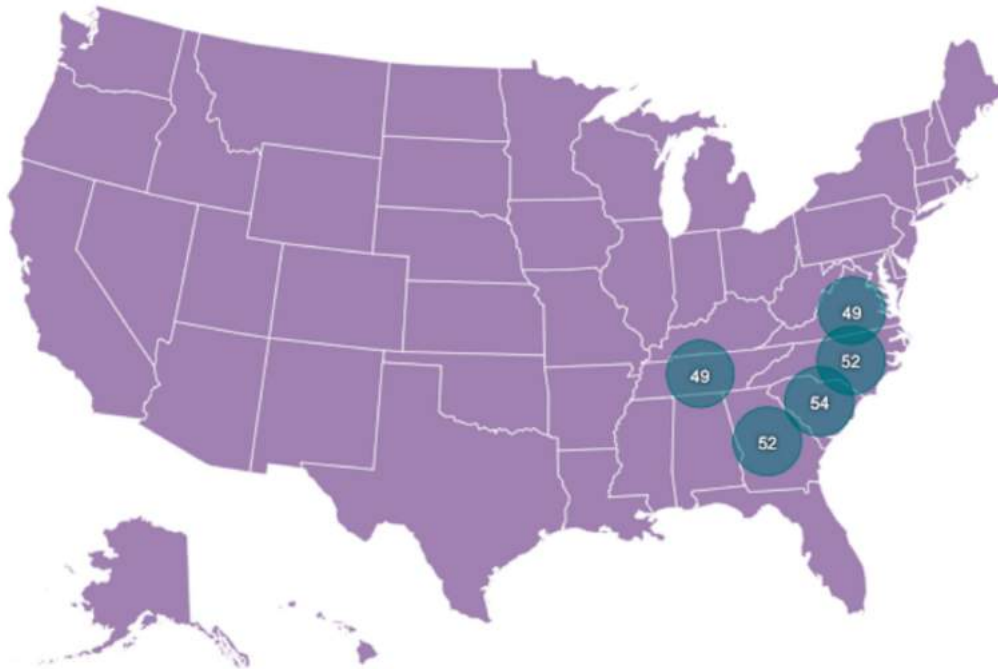
# The North Carolina Workforce

As Figure 4 illustrates, North Carolina reported more births in 2019 than many of its neighbors. Comparing the number of births and the number of unmarried women who gave birth in 2019 to the numbers reported by adjacent states, North Carolina (52 per 1,000) ties with Georgia (52 per 1,000) in highest number of births among women aged 15 to 50 in 2019.

North Carolina (34 per 1,000) comes in second to South Carolina (36 per 1,000) in the number of unmarried women aged 15 to 50 who gave birth in 2019, followed by Georgia (33 per 1,000), Tennessee (32 per 1,000), and Virginia (24 per 1,000). These families may find themselves at a disadvantage than their married counterparts in terms of income, childcare, and other forms of tangible and intangible support.

Between higher birth rates and expectation of high numbers of families who may need employer-based supports, these findings help make a case for strengthening paid leave policies for NC workers.

**Figure 4.** Number of women aged 15-50 years old who had a birth in 2019 (per 1,000 in population)



Source: U.S. Census, 2019

# Navigating Parenthood

During the COVID-19 pandemic, ten parents in North Carolina were interviewed about their experiences with navigating caregiving and employment. During interviews, caregivers described the creative ways in which they balanced taking leave from work when their children were born. Even though interviewees differed in many consequential ways (e.g., educational background, socioeconomic status, relationship status, access to paid leave, access to safe housing and personal safety, social support), all interviewees uniformly agreed that becoming a new parent is challenging. Among those with access to paid leave, interviewees also agreed that the time provided was invaluable:

*It was amazing, because that relieved a lot of stress. It's already stressful as it is to maintain and be able to survive, taking care of yourself. So you know, to have someone else to take care of just to be able to bond with her and not have to worry about money, while I was out, not have to worry about job security, while I was out. And you know, still be able to make ends meet and take care of everything that we needed that you know have time to take her to her appointments and my appointments that are necessary after giving birth, it was a load off. It was very, very helpful.*

Parents shared stories about the well-known realities of parenthood, such as little sleep, developing new routines, and figuring out who will miss work when the child is sick, as well as the less often talked about experiences of navigating trauma with a newborn. While interviewees' experiences align with and elucidate much of the quantitative results shared thus far, their stories further underscore the urgent need for paid leave by highlighting the complexities of birth, relationships, identities, and what it means to provide a safe, loving, and supportive home.

The following stories provide insight into the varied ways that workers navigate growing their families while working and illustrate the uncertainty and unanticipated challenges that often come with caring for a newborn.

# Leah's Story

When Leah and her husband decided to grow their family, both worked for a county government that provided twelve weeks of paid leave benefits to new parents. However, because they worked for the same county, they had to divide the leave between them:

*They offered twelve weeks. The problem that we had was that if both parents work for the county, the parents have to divide the leave between them. So, that was inconvenient for us, but what we did was I took the full maternity leave and he took vacation time because he had it.*

Leah went on to explain that her husband was able to take vacation when their daughter was born because he held a supervisory position within Emergency Management Services (EMS): otherwise, getting time off the truck (i.e., an ambulance) "is an obstacle-ridden path." As a result, many professionals within their field accrue and bank vacation time because they are unable to take time away from work.

With Leah receiving pay for the first three months of their daughter's life, the family was able to transition into a new routine without having to worry about finances. However, when they became a one-income household, things became more challenging:

*But when we lost my [Leah] income it was rocky, it was hard. And our finances were a mess. We went into debt and then worked and got back on track. And we have since then been able to steer them better. But, having that income, you know, through my pregnancy, meant that I could set up the nursery because I was making money. I could buy what I needed to buy for her. And then when she was born and we've got this newborn and we're all bewildered and, you know, our finances were as they had been, so that wasn't another thing to think about and stress us out and another thing to be brand new and unfamiliar and scary at that time. That was deferred until she was three months old and we were kind of in the groove of having a baby, so that was definitely helpful....And that's major when you're worried about finances. Nothing is unaffected by finances, which is increasingly obvious the less money you have.*

After their daughter's birth, Leah experienced a lot of anxiety and struggled with "a complete overhaul of her identity." For Leah, becoming a mother helped her gain greater clarity on her own upbringing and to acknowledge the childhood trauma she endured:

*It was a very, very difficult time for me personally because my mother is not a good person. And within the last year I have become estranged with her. And that was catalyzed by her treatment of my child when she was born. And when that happened, or when those things happened, because it was over a series of visits, it got me thinking about how she raised me. And I've been going through that process since I've had her, I mean it's been ongoing in these two years, she turned two last month, that I see- She used to talk about how she hit us when we were infants. Not talk about it, brag about how she would slap us when we were breastfeeding. And when I was a child I accepted that that was the right thing to do. And when I'm holding my child and she's breastfeeding it hits me very, very hard how wrong that is.*

In Leah's case, she never planned to be navigating emotional trauma and severing ties with a parent while caring for a newborn. But having a supportive partner, a healthy little girl, and the freedom to not return to a high-stress job after the birth of her child has laid a strong foundation for healing and resilience.

# Seeing Connections

Leah was afforded access to paid parental leave as a result of her employment with a local government office. Although access to paid leave remains low nationally, state and local government employees are more likely to have access to paid leave through their employer. As Chart 4 illustrates, access to paid leave varies considerably by business sector [29].

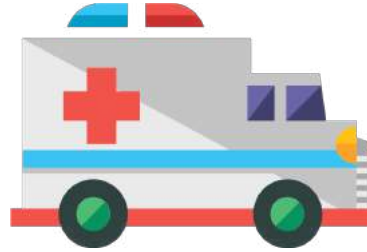
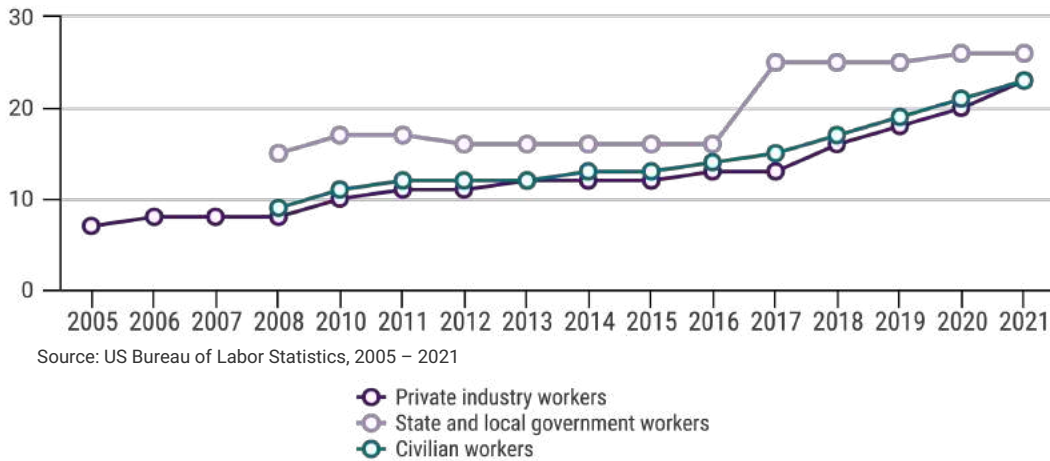


Chart 4. National access to paid leave by business sector, 2005 – 2021 [31]



**Civilian workers** are defined as private industry workers and state and local government workers. **Private industry workers** include workers employed in businesses owned by individuals or groups of individuals. **State and local governments** include workers employed by state and local governments across the U.S. These definitions can be accessed at: <https://www.bls.gov/bls/glossary.htm>

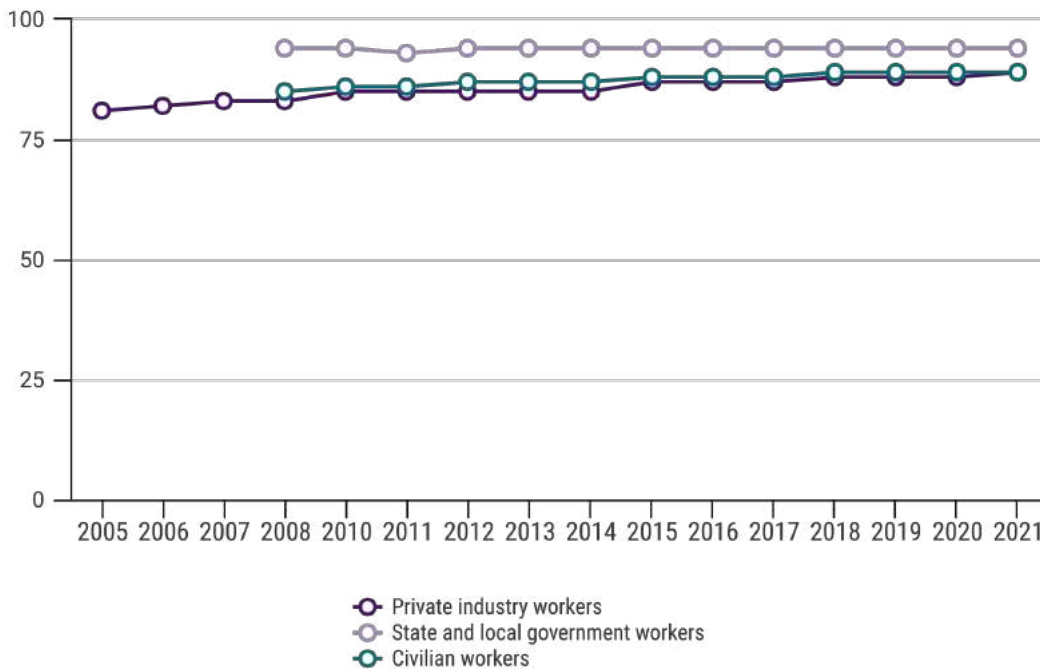
Regardless of business type, less than one third of workers across the nation have access to paid leave. For more than a decade, state and local government workers tend to have better access than private industry workers (with a notable increase in 2016) [30]. Although the level of paid leave access for state and government workers has remained relatively stable since 2017, private industry workers have made significant strides toward catching up and broadening access to paid leave benefits for workers.



# Seeing Connections

Chart 5 shows trends in national access to unpaid leave by type of business sector. Although access is high across the three sectors displayed, unpaid leave does not offer workers any financial support while a worker is out on leave. For families with low-income(s), uninsured or under-insured, one parent in the home, and workers who are unable to forego a paycheck for an extended period of time, this may place pressure on a new parent to return to work before they or the baby are ready.

**Chart 5. National access to unpaid leave by business ownership sector, 2005 – 2021 [32]**



Source: US Bureau of Labor Statistics, 2005 – 2021

State-level estimates of access to paid leave by business sector are not available. However, using the national average by business sector as a proxy, the number of NC workers with and without access to paid leave can be estimated (see Table 8.). Findings mirror national proportions for access to paid leave. While state and local government workers have higher levels of access, findings suggest a low proportion of NC workers have access to paid leave overall regardless of type of work.

Table 9 presents similar estimates by occupation. Thirty-nine percent of NC workers fall within the management, professional and related occupational group, with about one third of this group having access to paid leave nationally. Sales and office and service are the next two most popular occupational groupings (20% and 17%, respectively) with each having a quarter or less access to paid leave nationally.

# Seeing Connections

**Table 8.** Estimated access to paid leave by type of worker, 2019 (pre-COVID-19)

	# in NC [33]	% National w/ access to PL [34]	Estimated NC access to PL	Estimated NC access – no PL
Private industry workers	3,989,591	18%	718,126	3,271,465
State and local government workers	651,993	25%	162,998	488,995
Self-employed civilian workers	283,117	19%	53,792	229,325
Unpaid family workers	13,136	-	-	13,126
Total	4,937,837		934,916	4,002,911

Source: US Bureau of Labor Statistics, 2005 – 2021

“Private industry workers” are workers employed by a company owned by one or more people. “State and local government” employees work for state and local governments in NC. “Self-employed civilian workers” are private industry workers who work themselves (i.e., own their own business). “Unpaid family workers” include caregivers who do not receive compensation for their work (i.e., they are not considered part of the formal labor market).

**Table 9.** Estimated access to paid leave by occupation, 2019 (pre-COVID-19)

Occupational Group	# NC Workers (%) [35]	% National w/ access to PL [36]	Estimated NC access to PL	Estimated NC access – no PL
Management, professional, and related	1,940,010 (39%)	34%	659,603	1,280,407
Service	835,953 (17%)	15%	125,393	710,560
Sales and office	992,998 (20%)	25%	248,250	744,748
Natural resources, construction and maintenance	468,079 (10%)	16%	74,893	393,186
Production, transportation, and material moving	700,797 (14%)	13%	91,104	609,693
Total	4,937,837		1,199,243	3,738,594

Source: US Bureau of Labor Statistics, 2005 – 2021

It is also important to note that the approach taken to estimate the number of NC workers with/without access to paid leave in consequential, with type of worker producing a far more conservative estimate than occupation.



# Alesha's Story

Alesha was working as a nanny when she and her husband decided to have a child. Although she enjoyed her job and felt both lucky and supported by the family she worked for, she did not receive any of the benefits that come with working for a larger organization, institution, or company: "I was just being paid my, you know, my basic salary or whatnot. But I didn't have any type of leave or anything like that. So if I missed work, I just missed work, you know. I lacked an income." Even though her husband had access to paid leave, he chose to not take time away from work. Alesha explained, "At that time we weren't financially stable so it was a necessity for him to work."

Alesha worked right up until birth. Her daughter arrived early – at just 24 weeks – and experienced myriad health challenges for the first few months of her life. Her daughter stayed in the neonatal intensive care unit (NICU) for three months. During this time, Alesha qualified for Medicaid, which helped offset the costs of her daughter's care, and utilized SNAP benefits to help with food costs while she was out of work. Alesha decided to return to work after about a month, noting that she was unable to do anything at home with her daughter in the hospital:

*I was out of work, I want to say maybe a month. Simply because, I mean, I wasn't able to do anything at home. Like I said, my daughter was twenty-four weeks and so she was in the hospital. The family that I worked for actually stayed about ten minutes from the hospital where she was located at. So, I would just go into work and after I get off from work go to the hospital and spend time with her, you know. It wasn't a point in me sitting at home, you know, doing nothing.*

Unsurprisingly, this was a stressful time in Alesha's life – being away from her newborn daughter, the financial consequences of being out of work, and navigating a relationship where she did not always feel understood or supported by her partner,

*Oh, it was so, so stressful. Again, you know, I was dealing with the issue of finances, you know, from having been out. And, you know, we were trying to recover from that. It was during a winter time and so I can remember vividly, my husband had left for work and the- I was out of work that day because it was a lot of snow and the hospital had called me with some news about my daughter and wanted me to get there- something about a transfusion or something like that. Like, I literally went to go see her every day and, you know, he was telling me he couldn't get off from work so that I could go be there. And my mom, she was working in the school system, so she was out that day for the snow too. And I remember me and my mom, my mom taking me to the hospital to see my daughter in all that snow. And as we were driving down the road, all we could see was a pickup truck fishtailing towards us. And I'm just like, "Please, let me get to see my baby girl." And luckily, he gained control before it impacted us. And we were able to continue on and, you know, of course, we was all shaken up. And I told my husband about it. He was, you know, he got on me for being out there, but, you know, I told him I was going to see my baby girl. You know, I had seen her every day since she had been born. I was going to see my baby girl. So, that whole situation as far as providing wear and tear on the vehicles and, you know, constantly being at the hospital created a little bit of friction between us, you know. But I mean now looking back at it, she's our miracle baby. She held us together and all that good stuff.*

# Seeing Connections

And once her daughter came home, Alesha was confronted with a new, unexpected challenge: her daughter did not want her husband to care for her. Alesha explained,

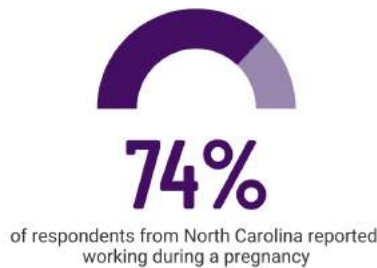
*That was very rough. Simply because she wanted absolutely nothing to do with my husband. He could not hold her, anything. Like, she wanted absolutely nothing to do with him. She was about two years old before she would even start going to him. So that was quite a lot on us because I was the only one in the family that could deal with her. And she did have some digestive issues. I called her the exorcist baby, when she threw up, like, she threw up everywhere. And so, I was handling all of that, you know, and he couldn't be there to really help me because she wouldn't deal with him. So, yeah, that was quite a bit.*

Working right up until the birth of a child - such as Alesha did - is not uncommon. Based on data from the 2020 Survey of Income and Program Participation (2020 SIPP), approximately three out of four pregnant people work during a pregnancy while more than 90% of those who worked during a pregnancy worked right up until the birth of their child.

**Table 10.** Worked during pregnancy

	North Carolina	Full US sample
Yes	3401 (74.2%)	41387 (71.7%)
No	1185 (25.8%)	16296 (28.3%)
n	4586	57683

Source: SIPP, 2020



**Table 11.** Continued working right up until birth

	North Carolina	Full US sample
Yes	3089 (90.8%)	36923 (89.2%)
No	312 (9.2%)	4464 (10.8%)
n	3401	41387

Source: SIPP, 2020

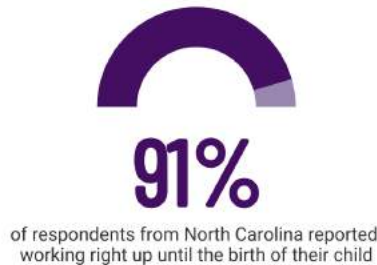


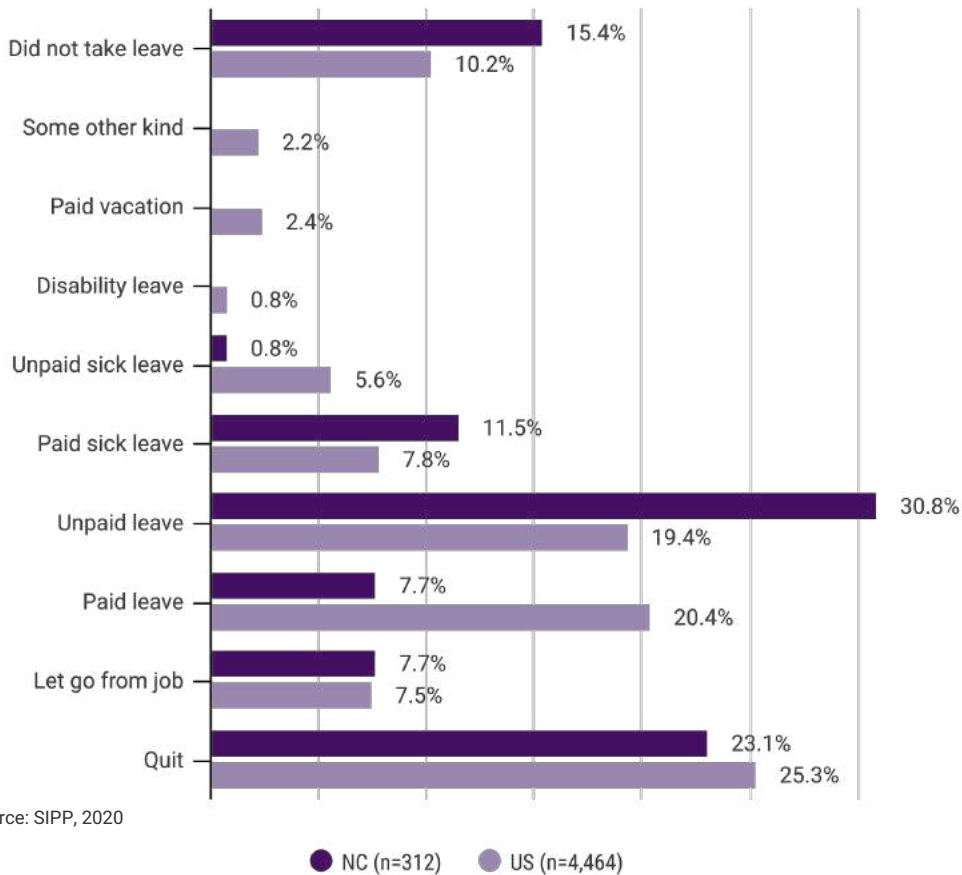
Table 10. provides information about the number of respondents who worked during a pregnancy for North Carolinians and the full US sample. Approximately 74% of NC respondents indicated they did work during a pregnancy (compared to approximately 72% nationally). Of those who worked during pregnancy, almost 91% reported that they continued working right up until birth (compared to about 89% nationally; see Table 11.).

# Seeing Connections

Charts 6 and 7 show the types of leave used by those who continued to work right up until birth (Chart 6) and those who did not. Several notable differences are observed:

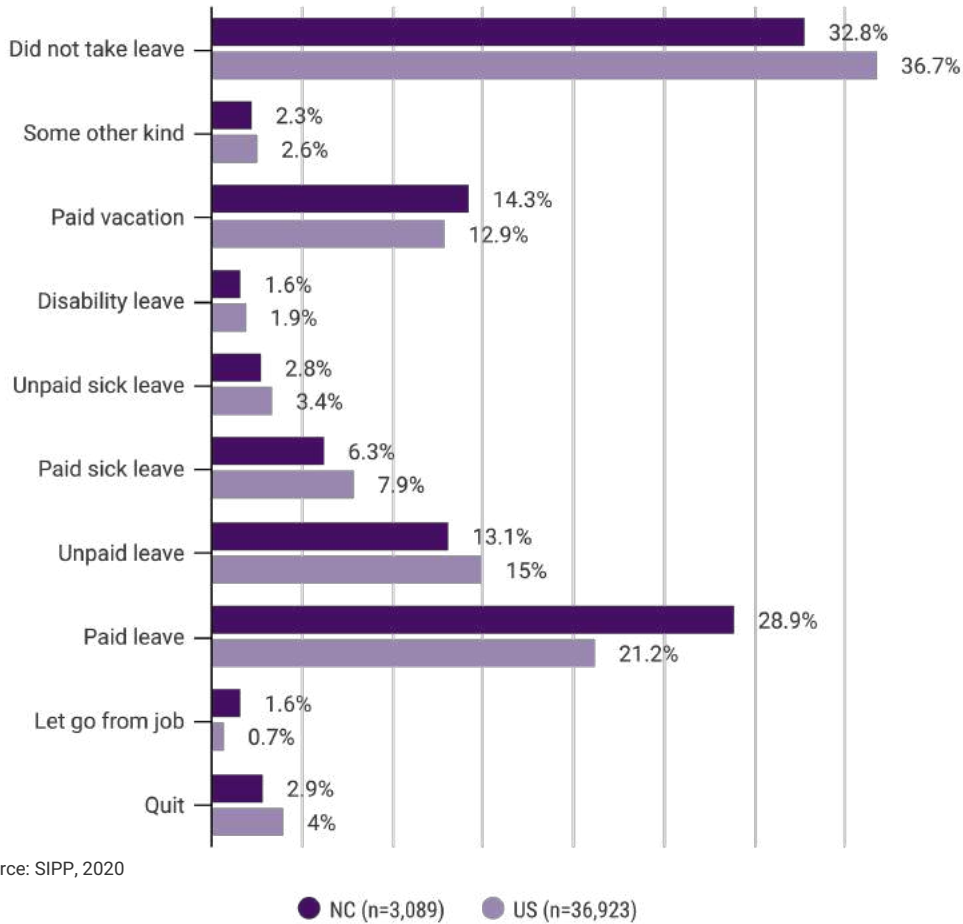
- Many workers who do not work right up until their child is born either take unpaid leave (NC: 30.8%, US: 19.4%) or quit their jobs (NC: 23.1%; US: 25.3%).
- Approximately 8% of NC respondents indicated they were let go from a job prior to the birth of their child. Among those who did not take leave before their child was born, an additional 2% of NC respondents reported being let go from their job after the birth of their child. This is illegal based on the federal Pregnancy Discrimination Act.
- There is a significant gap between the percentage of NC workers who take paid leave before their child is born compared to the national average (7.7% compared to 20.4%, respectively).
- The sum of the percentages total greater than 100%, which suggests that workers may utilize multiple forms of leave to cover their time away from work when having a child (e.g., paid sick leave plus paid vacation time).
- The experiences of those who work right up until their child is born are likely to be starkly different than that of workers who take leave before the birth. Proportionally, workers who work right up until their child is born are less likely to take leave of any kind, less likely to quit their jobs, and more likely to use their vacation time for the birth.

**Chart 6. Type of leave used before birth of child**



# Seeing Connections

Chart 7. Type of leave used after birth of child



Source: SIPP, 2020

Respondents who indicated that they did not work right up until their child was born were also asked to share when they stopped working before the birth of their child (see Table 12.). Approximately 35% of these respondents indicated they stopped working within one month (or less) of their child being born (compared to 31% nationally). Approximately 58% of North Carolinians stopped working within two months (or less) of the birth of their child (compared to 51% nationally).

# Seeing Connections

**Table 12.** Duration of time not working before birth of child

	North Carolina	Full US sample
Less than 1 month of leave	48 (15.4%)	636 (14.2%)
1 month	60 (19.2%)	756 (16.9%)
2 months	72 (23.1%)	876 (19.6%)
3 months	-	492 (11.0%)
4 months	60 (19.2%)	804 (18.0%)
5 months	12 (3.8%)	300 (6.7%)
6 months	24 (7.7%)	336 (7.5%)
7 months	12 (3.8%)	120 (2.7%)
8 or 9 months	24 (7.7%)	144 (3.2%)
n	312	4464

Source: SIPP, 2020

Tables 13 and 14 present information about returning to work after and the duration of time not working after the birth of a child. Among those who did not work right up until the birth of their child, approximately 77% returned to work months after their child was born. Although respondents indicated a wide range (0 to 77 months) in leave before returning to work, the average period of leave from work was approximately 11 months and the modal response was one month. Although the range of responses was wide, most NC respondents returned to work in four months or less.

**Table 13.** Worked after birth of child [37]

	North Carolina	Full US sample
Yes	240 (76.9%)	3264 (73.1%)
No	72 (23.1%)	1200 (26.9%)
n	312	4464

Source: SIPP, 2020

**Table 14.** Duration of time not working (in months) after the birth of the child

	North Carolina	Full US sample
Min – Max	0 – 77	0 – 116
Mean	10.75	14.68
Median	4.00	5.00
Mode	1.00	1.00
n	240	3264

Source: SIPP, 2020

# Ellen's Story

When Ellen and her wife decided to grow their family, they knew they would have to plan and budget carefully. Ellen's partner, Sonja, was a consultant who owned her own business while Ellen worked for the county government. Although Ellen's job provided twelve weeks of paid leave, Sonja's did not. Together, Ellen and Sonja made a budget and plan for Sonja to transition back to work six to eight weeks after the child was born. Ellen shared,

*...we sort of brainstormed what we would have to be thinking about even before she got pregnant, knowing that it would have to be this unpaid leave. And we sort of looked at our monthly expenses, what we typically spend and tried to sort of project out what that might look like for the weeks she would need to be taking off and how much she typically makes during a set time period. We tried to save ahead of time, which we sort of did but sort of didn't do because we didn't have a lot of spare cash to work with. We did the best we could... So, that was kind of what we did and honestly we ended up, I don't recommend it, but we ended up relying on credit cards when we didn't have the money, knowing we would just pay it back after.*

Ellen also shared that Sonja experienced a difficult labor and their son had difficulties with processing bilirubin while very young. This added stress to an otherwise joyful time in her life:

*It was so overwhelming in the best way and the scariest way. Sonja had kind of a tough labor, so when he was finally there, I didn't expect it but I just, like, burst into tears. And he had some complications the first couple of days. He was a really big baby. He was nine pounds ten ounces. And when babies are that big sometimes they have an issue with their bilirubin. Their liver has to be able to process and break that down, but sometimes big babies, they aren't equipped to process it as quickly as they need to because there's so much of it. So, he had to go under these UV lights that sort of helped break it down for days. We were at the hospital for five days and we could only pick him up every three hours for thirty minutes at a time. So, that was really stressful and when we came home it was finally- it took about a week or two to abate. Honestly, those first few weeks were just kind of a whirlwind of awe and surrealness. You know, the sleep deprivation is so real, but it doesn't even really feel that bad in the beginning because you're just so in awe of this new circumstance and this new little person and it was really lovely. And I had paid leave, I mean, I had paid leave and that was a huge, huge relief. Like, I didn't have to worry about any of that. Sonja didn't have paid leave, so we still had to be, you know, cautious of spending. But that just made it so we could have a time where we just enjoyed it and just enjoyed our time as a family. And it was early summer, so it was gorgeous out.*

Despite his early difficulties with processing bilirubin, Ellen and Sonja's son was healthy. However, Ellen became very concerned with her own health during the first few months of her son's life, fearing that she would get him sick.

*I became even more paranoid about getting sick myself. Mostly because I didn't want to pass anything on to him. So, that was certainly something. And I've also gotten sick way more frequently since he started daycare because that's just a cesspool of germs. When he was younger, when he was a baby baby, like, before he even got his vaccinations, I was really worried about getting him sick. And I sort of have eased up since he's got his first round of vaccinations, I've felt a little better. And I continue to feel better. Now, he's the one getting me sick.*

# Ellen's Story

Ellen also discussed the mental and emotional effects that accompany the birth of a child. She described feeling a multitude of emotions – happiness, pride, fear, guilt – during the first few months of her son's life. For many people, Ellen included, having a child is such a significant life event that one's identity is fundamentally altered.

*I think emotionally and mentally I think there's just a lot of identity reckoning after you become a parent because it takes up so much of your time and your brain space so you're like, "Well who am I now that I'm a parent? How do I continue to be me and what does it mean to be me now that there's this other human who I love so much and love to spend time with but?" So, there's a lot of internal reckoning, which is a part of growing and growth, but it definitely can be a little bit scary because, you know, you're kind of like "Is this all I am now? Am I just a mom?" Then there's also this pride. I feel proud to be his parent. I'm just a worrier, so I'm always kind of worried about one thing or another.*

Sonja, Ellen's partner, often likened paid leave to a mental health policy for new parents because she believed their ability to both take leave helped guard against postpartum depression. Ellen explained,

*Well, one of the things that Sonja said a lot when we were home on leave was that the paid parental leave policy was not just for caregiving – it was also sort of a mental health policy. She said that a lot. Because she and I are both at risk for postpartum depression and postpartum anxiety and I was pretty worried that she was going to have that. And she said many times that if I hadn't been home, and she was with the baby by herself, that she thinks that she would've experienced it.*

With time, Ellen and Sonja found their stride and navigating parenthood became easier. During this time, Ellen also decided to transition to a new position with a large nonprofit. She began working part-time at her new position when her son was about 8-weeks old. She said, "My brain was ready to be working again. My brain had been so focused on, 'When did he eat, when did he last sleep?' [It's] Just a very different way to use your brain."

Although Ellen's new position is a promotion in title and salary, the paid leave benefits are less generous than those offered through her prior job with the county. Knowing that she and her wife plan to have a second baby in the next year, Ellen has already begun to think through a financial plan that will help keep the family afloat while she takes time away to have a child and nurse the infant for the first three months of its life.

*I knew that we wanted to have a second baby and I knew that the leave policy wasn't as generous when I accepted the job. So, I mean, it's not like I went into it blind, but I've been doing some calculations like, "Okay, if I have this many days of vacation and this transfers over and there's the second family leave pool and I've got this many days. Okay and then technically I could go on short-term disability, that's one of the things that's recommended is you can also go on short-term disability when your paid-leave runs out and get a percentage of your salary for a certain period of time. And then you can take FMLA. I mean, FMLA is an option for my position, my company, but it's twelve weeks of unpaid leave, like who can afford to do that? Like, and I know, that I'm fairly privileged and I still am like, "How? We can't do that." So, it's going to be a cobbling of vacation time and sick time and a couple weeks of unpaid time or a percentage of my salary. So we're going to- you know, we'll be working to try and put some money aside from that and probably plan to lean on credit cards a little bit if we have to. So, yeah, it's definitely not ideal, but it's better than some situations I know.*

# Seeing Connections

Ellen and Sonja's experience is familiar to many people that have just given birth. According to Pregnancy Risk Assessment monitoring data, at least one in ten pregnant people report experiencing depression in the three months before and during pregnancy as well as the period following birth (Table 15). Although Medicaid is often available to help cover the costs of prenatal care, almost an estimated one-quarter of pregnant people will not have access to any type of health insurance one month before pregnancy and during the time period following birth (Table 16).

**Table 15.** Self-reported depression before, during, and after pregnancy

	NC 2017 % (n)	NC 2018 % (n)	NC 2019 % (n)	Overall 2019 %
Self-reported depression in the 3 months before pregnancy	13.0 (986)	11.5 (911)	15.3 (867)	15.1
Self-reported depression during pregnancy	13.7 (973)	12.5 (895)	15.1 (859)	14.8
Self-reported postpartum depressive symptoms**	11.7 (974)	11.8 (903)	10.7 (850)	13.4

Source: Pregnancy Risk Assessment Monitoring System (PRAMS), 2016–2019

**Table 16.** Medical insurance coverage before, during, and after pregnancy

	NC 2019	Overall 2019
<b>One month before pregnancy</b>		
Private insurance	60.7	62.7
Medicaid	15.8	22.6
No insurance	22.9	13.8
<b>For prenatal care</b>		
Private insurance	56.3	59.8
Medicaid	37.2	36.2
No insurance	6.5	2.8
<b>Postpartum</b>		
Private insurance	55.8	57.7
Medicaid	24.1	29.9
No insurance	20.1	11.5

Source: Pregnancy Risk Assessment Monitoring System (PRAMS), 2016–2019



# Safe(ty) Leave

As of August 2020, thirteen states across the US have passed paid sick leave laws that include paid safe leave [38]. Although language varies by state, safe leave laws typically require employers to provide paid leave from work when an employee or employee’s family member is experiencing intimate partner violence, sexual assault, and/or stalking. North Carolina does not currently have a safe leave law but does mandate that employers provide “a reasonable period of leave” for victims and survivors of intimate partner violence to obtain a court order or obtain relief [39]. The mandate is left up to subjective interpretation by employers and periods of leave are not paid.

**Safe(ty) leave:** short-term, employer-paid (and job-protected) time away from work available to workers experiencing intimate partner violence

Like many other types of national data, intimate partner violence (IPV) statistics lag in their release. Additionally, many forms of violence are notoriously under-reported, thus presenting challenges in adequately understanding the true prevalence of IPV across the state and nationally. However, existing data suggest that 35% of women and 30% of men in North Carolina will experience physical or sexual violence and/or stalking in their lifetime (see Table 17.). Approximately 44% of women and 43% of men residing in North Carolina will experience psychological violence during their lifetimes.

**Table 17.** Intimate partner violence experienced during lifetime, lifetime percentages in North Carolina

	Women	Men
Psychological violence	44%	43%
Physical or sexual violence, and/or stalking	35%	30%

Source: National Intimate Partner Violence Survey, 2010 – 2012

**Table 18.** Intimate partner violence experienced during lifetime, lifetime percentages in the United States

	Women	Men
Psychological violence	47%	47%
Physical or sexual violence, and/or stalking	37%	31%

Source: National Intimate Partner Violence Survey, 2010 – 2012



**35%**

of women in North Carolina may experience physical violence, sexual violence, or stalking during their lifetime

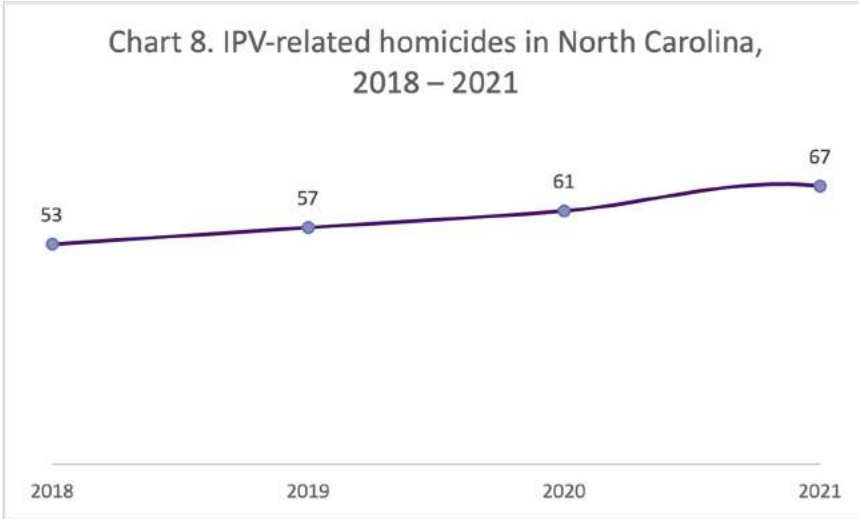


**37%**

of women in the U.S. may experience physical violence, sexual violence, or stalking during their lifetime

# Safe(ty) Leave

As Chart 8 shows, the number of IPV-related homicides in North Carolina are steadily increasing over time. With at least one in three North Carolina residents experiencing some form of intimate partner violence in the state, this suggests there is a sizable need for safe leave to be strengthened within the state.



Source: North Carolina Coalition Against Domestic Violence

**Table 19.** Intimate partner violence before and during pregnancy

	NC 2017 (%)	NC 2018 (%)	NC 2019 (%)	Overall 2019 (%)
Experienced IPV during the 12 months before pregnancy by a husband or partner and/or an ex-husband or partner	2.7	3.4	4.1	3.0
Experienced IPV during pregnancy by a husband or partner and/or an ex-husband or partner	2.1	2.8	2.5	2.0

Source: Pregnancy Risk Assessment Monitoring System (PRAMS), 2016–2019

Selena and Jaime’s stories (included next) provide additional insight into the difficulties that arise while navigating interpersonal violence while working and beyond.

# Selena's Story

Selena tried many times to leave the man that abused her, no simple feat for a mother of four children. She moved from place to place, each time hoping that she would find safety, and time and time again he made his way back into her home. She planned and saved, moved multiple times, and tried to find her way to safety, yet lacked the resources and support needed to keep her and her children safe from harm. At one point, she even stopped taking showers and making herself presentable in hopes that he would decide to leave her alone. Selena also tried to access supports through her employer, but to no avail. She discussed her experiences using the Employee Assistance Program (EAP), a program that turned out to be challenging, time-consuming, and inadequate for her circumstances:

*I tried to get the help from my job. I will say that. My job was mostly unsupportive in that regard. In addition to that, my older daughter was also so traumatized and triggered by all that she had witnessed that she had started cutting very badly. And in the dealing with the cutting, the trying to escape him, they ended up firing me. And I had asked for support multiple times and they still ended up firing me. So, the sad thing was the losing of the job.*

*I used the EAP [Employee Assistance Program]. They link you to therapy, and if you're having particularly bad circumstances, you can call someone. But here's how the job was set up: I called someone, someone suggested that I take some time to myself and in an attempt to take some time to myself, I was violently assaulted and he took the kids and my car so that I couldn't leave the house. And I did end up leaving – by ambulance. But I still had to go back to work the next day. And the process for being able to get the help to get the leave was so long and drawn out that when I should have been resting from work at that point, healing, getting the staples out of my head, etc., I was having panic attacks on the phone with customers. It took almost a year to get the family leave that I needed just to deal with the anxiety. I could not get the leave that I needed to deal with the domestic violence. So, you know, you have to document whatever you're taking time for. So anytime there was a situation where I was assaulted and probably would have been better off talking to the police than working. If I took that time away from work, there was an occurrence on the record. So eventually, there were enough of those incidents of violent outbursts and leaving the house with, you know, babies crying in the background while I was supposed to be on the clock that, you know, my job got fed up. And it wasn't fed up at poor performance. It was fed up at the consequences of being in that situation, and I'm going to word it that way because had I not been in that situation, I would have been doing my job as I always have.*

An Employee Assistance Program (EAP) is a voluntary, work-based program that offers free and confidential assessments, short-term counseling, referrals, and follow-up services to employees who have personal and/or work-related problems. EAPs address a broad and complex body of issues affecting mental and emotional well-being, such as alcohol and other substance abuse, stress, grief, family problems, and psychological disorders. EAP counselors also work in a consultative role with managers and supervisors to address employee and organizational challenges and needs. Many EAPs are active in helping organizations prevent and cope with workplace violence, trauma, and other emergency response situations. More information available at: <https://www.opm.gov/faqs/OA.aspx?fid=4313c618-a96e-4c8e-b078-1f76912a10d9&pid=2c2b1e5b-6ff1-4940-b478-34039a1e1174>

# Selena's Story

After being evicted from her apartment and having nowhere else to go, she moved in with her abuser and his mother. Yet this arrangement offered no additional protection – Selena was severely beaten and faced challenges in accessing support from the legal system:

*And the solution was we ended up moving into his mom's house, which how about throwing the frying pan right into the fire. As a result of that, the violent assault that resulted in staples in my head. Correspondence about the court dates were hidden. I didn't know, go to court. And I could have called, in hindsight, I could have called. However at the time as I'm sure you can imagine, the trigger of now being in the house with him and his mom, who willfully ignored what was going on and did a ton of victim blaming. It didn't dawn on me to call and find out when the court date was. And then after I processed that over some years, if I had gone to court and he had been found guilty of busting my head open and we all lived in his mom's house – what were we going to do next? Because my plan didn't work. The next time I decided to leave him, I eventually did in the middle of the night...*

When Selena was finally able to, she woke the children in the middle of the night and left despite not having a strong plan in place:

*I eventually did in the middle of the night one night make a decision to leave the twins at his mom's house. I woke up my kids in the middle of the night and we gathered as much of our things as we could and we did go to my mom's house. And it didn't matter at that point if the space was available or not, I was willing to sleep in the truck in her driveway.*

This time, Selena reached out to local domestic violence agencies and received the resources and support she needed to build a new life free from violence. Some things got easier, though she and her children continue their work to heal and move forward.

*I want to say that I finally feel that I have what I need to win. I finally feel like I have a team to support me in winning the fight against domestic violence, in winning the fight for my children's safety.*

# Jaime's Story

Born and raised in Texas, Jaime is a mother of three. She describes herself as Sour Patch Kid, i.e., appearing sour on the outside but really sweet once you talk to her. Jaime shared how she ended up in North Carolina during our interview, which was the result of an unknown move orchestrated by her abusive first husband:

*Without even me knowing, two days after we got married we moved from Texas to North Carolina. I could not work. Because I started working after, but I could not work. I could not get a license. I couldn't get anything. I had to ask for permission for sanitary napkins.*

Jaime struggled to find support. She felt too ashamed to talk to her parents about what was happening and when she did attempt to open up to her pastor, the counsel she received was unhelpful and toxic.

*I didn't disclose to my parents until after he went to prison because I was ashamed. I attempted to speak back to my pastor at that time and that was the worst flop ever. I was trying to reach out just to get some guidance, you know, what should I do? This is what's happening. And he [the pastor] basically told me that I made the decision to marry him. And so I have to deal with anything that happens after and if he was being abusive, then I should pretty much check myself because I needed to be submissive to my husband. So, that was the last time I ever had a conversation with him about anything.*

After the birth of their daughter, Jaime's husband was arrested and imprisoned for criminal activity. Without family in the area, Jaime was forced to rely on her husband's family to help with childcare while she worked.

*With my daughter I went from not being able to work, not being able to do anything, make any decisions, not having a license, to having to get a job. He had gotten arrested and I got a job the next day, because now, everything was going to be on me. At that point his family was assisting with the caretaking while I was at work, but after that it was just, you know, it was mom mode.*

After saving some money, she was finally able to move with her children to a different county, where she met and married another man that would abuse them for the first five years of their marriage. She continued to work throughout the marriage, but kept her abuse secret for years and years. When she finally began to talk to her coworkers about what was going on at home, she encountered an unsupportive environment. She knew there was an agency line that she could utilize, but found the support it offered to be unhelpful for her situation:

*I knew of the agency line, like you can call...I can't think of the name. It's just a number that you can call the employers and they can either refer you out or, you know, provide some type of supportive counseling or services. But that was about it. But at that moment when I was experiencing what I was experiencing it just didn't do what I needed. I tried [calling the agency line] once and I guess at that point part of it was me, where I wasn't really ready to talk about what was going on. So I didn't want to disclose what was happening and then- I was just like, well, I'll just figure it out. But I didn't know about paid leave. I kind of knew about FMLA, but I didn't know that being in an abusive relationship that I could access it. I thought it was like, oh, if you get sick, or if you have surgery or something. That's it, but not what I needed it for.*

# Jaime's Story

She also recalled a time when her boss noticed bruising on her neck. Mistaking it for hickeys, her boss chastised her for coming to work with hickeys on her neck. This experience further deterred her from disclosing her abuse to her employer:

*One of the things that I will say that deterred me from even talking about it was one instance, my ex-husband had strangled me. And so I had never talked about it at work. You know, I would cover bruises, but this time I had a lot of the bruising and my boss had come up to me and he said, 'you shouldn't come to work with hickeys.' So, I was just like, 'sorry, don't want to talk about it, and covered it up.' But in my opinion, if we have employers that understand or that know or that can see the signs, it is not as shameful because that was very shameful to me and I would have felt like, 'okay, now I can come to my employer, have these conversations and then we can collectively talk about what I need to do or you know where I need to go.'*

Jaime went on to share,

*I ended up talking to the customer service manager that I worked with and this was just a few days later, we talked about it. And she ended up disclosing to him that's what that was, but we never talked about it. Just like it was an instance that never happened, never offered the employee line, never pulled me into the office and said, you know, 'well, why don't you know do this or let's call the police, let's make a report.' Just nothing.*

This experience only exacerbated Jaime's feelings of exclusion at work. She went on to explain:

*I didn't feel like I belonged. When you saw the management, they were white males. When you started seeing the Customer Service Manager and everybody else kind of lower, it was white females. We did have, like, African American females and males that were cashiers, but you have very, very limited Spanish speaking workers. So it was like would you even understand, one, because I'm a female and two, because I'm a Hispanic female. So I just didn't feel like I belonged or like I had somebody that was going to be supportive.*

Although Jaime is now employed in a supportive environment, she continues to caution others in similar situations to carefully consider how they share information about their abuse with employers.

*If you don't have a good relationship with your employer. If you don't know them like that. Don't say anything about your 50B. Go get it, legally you have the right to take the day off and go get it. But if you get it, then now you're a liability. So unless you are on good terms and you feel comfortable don't suggest it and we have had people get fired or, you know, because they have one. And we have had others that say, I just don't even want to chance it because this is my only income and if I lose this income, then I'm back to square one.*

# Key Take-Aways



North Carolina has a large workforce, a birth rate that outpaces many surrounding states, and uneven access to paid leave for parents. Depending on how the estimate is derived, 3.7 to 4 million workers in North Carolina are working in jobs that do not provide access to paid leave. Even among managers and professionals, where paid leave tends to be more readily available, almost 1.3 million NC workers (66%) are without these benefits.

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As a nationally representative sample, GSS findings on attitudes related to paid leave suggest that US residents are overwhelmingly supportive of paid leave for new parents and believe that employers should at least share in covering the costs of paid leave for parents of newborns. Additionally, findings also make it clear that US residents see mothers as the primary beneficiaries of paid leave policies, either entirely or in combination with fathers.

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2020 SIPP data shed light on the complexities of paid leave and its use. North Carolina deviates from the national average in a number of key areas, such as the percent of workers utilizing unpaid leave benefits before a child is born (30.8% in NC compared to 19.4% nationally) and the percent of workers who do not take leave prior to their child's birth (15.4% in NC compared to 10.2% nationally). Although on par with the national average, the percent of workers who are let go from a job both before (7.7% in NC and 7.5% nationally) and after (1.6% in NC and 0.7% nationally) the birth of their child despite federal protections provided by the Pregnancy Discrimination Act is disturbing and underscores the need for stronger protections for pregnant people in the workforce.

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Trends in PRAMS data show that at least one in ten women in North Carolina may experience depression in the three months preceding pregnancy, during pregnancy, and following birth.

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# Conclusion

The United States is the only developed nation in the world that does not provide paid leave to new parents despite overwhelming research and reports from other countries that indicate that paid family leave provides significant health and labor market benefits. This also stands in stark contrast to public sentiment: based on findings from the 2012 General Social Survey (GSS), the majority of U.S. workers believe paid leave should be provided to workers. More than two-thirds (86%) of GSS respondents surveyed believe that employers should be either primarily or jointly responsible [40] for paying workers while they are out on leave. GSS respondents also indicated that mothers (and other birthing people) should be the primary beneficiaries of parental paid leave policies, if and when implemented within the workplace.

Even though paid leave is not mandated nationally, some employers have implemented policies to attract new workers, bolster employee retention, and institutionalize a family-friendly corporate ethos. However, access remains low and uneven. Based on data from the US Bureau of Labor Statistics, less than one-third of workers nationally have access to employer-provided paid leave and access to paid leave varies according to employment sector and occupation. Individuals who work for state and local governments and those within managerial and professional positions are more likely to have access to paid leave than private industry workers and workers in all other occupations reported on by the U.S. Census. Service workers and those who work in construction and natural resources are less likely to have access to employer-provided paid leave.

The 2020 Survey of Income and Program Participation survey data provided insight into the types of leave taken before and after the birth of child. Although the percentage of NC respondents who utilized paid leave after the birth of a child was higher than the national average (28.9% vs 21.2%, respectively, North Carolina lags in the percent of workers utilizing unpaid leave benefits before a child is born (30.8% in NC compared to 19.4% nationally) and the percent of workers who do not take leave prior to their child's birth (15.4% in NC compared to 10.2% nationally). These findings provide a basis for additional research on factors correlated with access and/or use of paid leave in North Carolina to more fully understand state-level and regional patterns in the data. These might include: rates of poverty and per capita income profiles for North Carolina relative to other states; relative age profile of the state population and workforce participation patterns for North Carolina; and state-level policies with respect to family support and paid leave (perhaps even Right To Work policies that grant greater authority to employers to determine working conditions).

Lastly, qualitative interviews with NC residents highlight the complexities associated with growing one's family, for both the birthing and non-birthing partner, as well as the challenges that victims and survivors of IPV encounter when they turn to their employers for help. Together, these findings warrant additional consideration and advocacy on behalf of working parents and victims and survivors of IPV, including renewed discussions about paid leave and safe leave for North Carolina workers.



# Limitations

There are numerous limitations to this work and we ask the reader to keep these points in mind while reviewing this report:

- COVID-19 severely impacted ability to conduct primary data collection. After a protracted IRB process, the evaluation team received IRB approval just before the COVID-19 pandemic swept the nation. As a result, the IRB at UNCG suspended all data collection for a period of time. Once data collection resumed, challenges remained in recruiting interviewees to participate, organizing focus groups during a time when gathering was discouraged, and securing interviews with parents, many of whom were newly tasked with working from home while caring for and/or schooling their children.
- As a result, the evaluation team relied heavily on quantitative analysis of secondary data sources. This meant that the data were already collected by a government office or as part of another government-funded research study and the evaluator had no input on the data collected. Consequently, the quantitative findings are often reported using language that does not reflect choices made by the evaluator or NCCADV.
- Due to limitation in data collection, this report uses only binary gendered language (man and woman, mother and father). The authors recognize this does not encompass and address all experiences of pregnancy and family.
- Data on safe leave and its impact on worker health, productivity, and retention are not available. Similarly, there is little data collected about children of victims and survivors leaving relationships impacted by intimate partner violence (IPV), which may also require additional support from a parent that necessitates missing work.
- Lastly, this report intentionally focuses on access to paid leave prior to the ongoing COVID-19 pandemic. A discourse analysis conducted on behalf of NCCADV shows that conversations among key stakeholders in the state shifted to discussions of paid sick leave during the pandemic, reflecting the ongoing challenges in the state with testing for and curbing the spread of the COVID-19 virus. It is almost certain that the need for parental leave remained strong in the state during this time, but has taken a backseat to other, more pressing discussions.

# Methodological Appendix

## General Social Survey

The General Social Survey (GSS) is a nationally representative survey of adults in the United States. Conducted annually by the National Opinion Research Center (NORC) at the University of Chicago since 1972, the GSS has collected data on contemporary US culture to document and explain trends and shifts in opinions, attitudes, and behaviors. The GSS contains a core set of demographic variables along with various modules that focus on topics of interest. Topics covered include civil liberties, crime and violence, intergroup tolerance, morality, national spending priorities, psychological well-being, social mobility, and stress and traumatic events. The GSS has provided politicians, policymakers, and scholars with clear, unbiased perspectives on key social issues since its inception.

Since 1974, the GSS has included a number of questions related to paid leave. In 2012, these specific questions related to paid leave were included on the GSS:

- Consider a couple who both work full-time and now have a new born child. One of them stops working for some time to care for their child. Do you think there should be paid leave available and, if so, for how long?
- And who should pay for this leave? The government, the employer, both the government and the employer, or other sources?
- Still thinking about the same couple, if both are in a similar work situation and are eligible for paid leave, how should this paid leave period be divided between the mother and the father?

## Census Data

Demographic information about North Carolina and its workforce were compiled from the 2019 U.S. Census and the 2019 American Community Survey.

## 2020 Survey of Income and Program Participation

Data on use of paid leave comes from the 2020 Survey of Income and Program Participation (2020 SIPP). Each year since 1983, SIPP has drawn a nationally representative sample of individuals 15 years of age and older in households in the civilian non-institutionalized population. Respondents who participate in the survey agree to be interviewed once every four months for approximately two and a half years.

SIPP collects parental leave information for all respondents who have at least one biological child. SIPP survey questions that address parental leave include:

- Whether they worked for pay at any time during the pregnancy (see Table 7)
- Whether they continued working right up to the birth (see Table 8)
- What type(s) of leave they used after the child was born and up to the time the baby was 12 weeks old (see Chart 7)
- How long (in months) prior to the birth they stopped working (see Table 9)
- What type(s) of leave (if any) they used prior to the birth (see Chart 6)
- Whether they worked at any time after the birth (see Table 10)
- How long (in months) after the birth they started working (see Table 11)

SIPP also collects demographic data and limited geographic data that can be used to disaggregate data to the state-level.

# Methodological Appendix

## **U.S. Bureau of Labor Statistics**

In 1884, the Bureau of Labor was established by the Department of the Interior. Since that time, the Bureau of Labor Statistics has collected labor force and economic data annually across a variety of metrics and outcomes. These data are available online in their aggregate form.

## **Qualitative Interviews**

Ten semi-structured interviews were conducted during the course of this health impact assessment. Qualitative data collection was severely impeded by the emergence of COVID-19, the resulting closure of many businesses and schools, a directive from UNC-Greensboro's Institutional Review Board to cease all data collection involving persons, and for the ensuing reticence of people to agree to participate in interviews or focus groups during a time when economic and social uncertainty prevailed.

Among those who did agree to participate in an interview, interviews were conducted in-person or by Zoom, at the individual's discretion. All interviews were recorded and transcribed afterward. Participants were financially compensated for their participation.

# Endnotes

- [1] Aitken et al. 2015. "The maternal health outcomes of paid maternity leave: a systematic review." *Social Sciences & Medicine*, 130:32-41.
- [2] Gault et al. 2014. "Paid parental leave in the United States: what the data tell us about access, usage, and economic and health benefits." Institute for Women's Policy Research.
- [3] O'Brien, M. 2009. "Fathers, parental leave policies, and infant quality of life: international perspectives and policy management." *The ANNALS of the American Academy of Political and Social Science*, 624(1).
- [4] Patton et al. 2017. "Paid parental leave policies and infant mortality rates in OECD countries: policy implications for the United States." *World Medical and Health Policy*, 9(1):6-23.
- [5] Klevins et al. 2016. "Paid family leave's effect on hospital admissions for pediatric abusive head trauma." *Injury Prevention*, 22(6):442-445.
- [6] Manley, M. 2015. "Mommy and me: the impact of paid family leave on breastfeeding." *Chicago Policy Review* (Online), <http://proxying.lib.ncsu.edu/index.php?url=http://search.proquest.com/docview/1717309707?accountid=12725>
- [7] Gault et al. 2014. "Paid parental leave in the United States: what the data tell us about access, usage, and economic and health benefits." Institute for Women's Policy Research.
- [8] Gault et al. 2014. "Paid parental leave in the United States: what the data tell us about access, usage, and economic and health benefits." Institute for Women's Policy Research.
- [9] Mulvaney, M. 2014. "Leave programs/time off and work-stress family employee benefits programs, organizational commitment, and self-efficacy among municipal employees." *Public Personnel Management*, 43(4):459-489.
- [10] Burtle, A., and S. Bezruchka. 2016. "Population health and paid parental leave: what the United States can learn from two decades of research." *Healthcare*, 4(30).
- [11] Chen, M. 2016. "The growing costs and burden of family caregiving of older adults: a review of the paid sick leave and family leave policies." *The Gerontologist*, 56(3):391-396.
- [12] Maxwell et al. 2018. "U.S. LGBTQ Paid Leave Survey." Public Education & Research, Human Rights Campaign Foundation.
- [13] Shepard-Banigan, M., and J. Bell. 2014. "Paid leave benefits among a national sample of working mothers with infants in the United States." *Maternal and Child Health Journal*, 18(1):286-295.
- [14] Baum et al. 2017. "Socioeconomic status and chronic stress: does stress account for SES effects on health?" *Annals of New York Academy of Science*, 131-144.
- [15] Campbell, J. 2002. "Health consequences of intimate partner violence." *The Lancet*, 359:1331-1336).
- [16] Dutton et al. 2006. "Intimate partner violence, PTSD, and adverse health outcomes." *Journal of Interpersonal Violence*, 21(7):955-968.
- [17] Gilbert et al. 2014. "Childhood adversity and adult chronic disease: an update from ten states and the District of Columbia, 2010." *American Journal of Preventative Medicine*, 48(3):345-349.
- [18] McEwen BS. 1998. "Stress, adaptation, and disease. Allostasis and allostatic load." *Annals of the New York Academy of Sciences*, 840:33-44.
- [19] McEwen BS. 2002. "Protective and damaging effects of stress mediators: The good and bad sides of the response to stress." *Metabolism*.
- [20] McEwen BS. 2003. "Mood disorders and allostatic load." *Biological Psychiatry*, 54:200-207.
- [21] McEwen BS, Stellar E. 1993. "Stress and the individual: Mechanisms leading to disease." *Archives of Internal Medicine*, 153:2093-2101.

# Endnotes

[22] McEwen BS, Wingfield JC. 2003. "The concept of allostasis in biology and biomedicine." *Hormones and Behavior*, 43:2–15.

[23] Rogosch et al. 2011. "Child maltreatment and allostatic load: consequences for physical and mental health in children from low-income families." *Development and Psychopathology*, 23:1107-1124.

[24] Scott-Storey, K. 2011. "Cumulative abuse: do things add up? An evaluation of the conceptualization, operationalization, and methodological approaches in the study of the phenomenon of cumulative abuse." *Trauma, Violence, and Abuse*, 1-16.

[25] Allen et al. 2014. "The link between national paid leave policies and work-family conflict among married working parents." *Applied Psychology: An International Review*, 63(1), 5-28.

[26] Gilbert et al. 2014. "Childhood adversity and adult chronic disease: an update from ten states and the District of Columbia, 2010." *American Journal of Preventative Medicine*, 48(3):345-349.

[27] Vermont Department of Health. 2015. "A health impact assessment of paid sick leave in Vermont."

[28] 2019 U.S. Census, available at [www.census.gov](http://www.census.gov)

[29] Civilian workers defined as private industry workers and state and local government workers. Private industry workers include workers employed in businesses owned by individuals or groups of individuals. State and local governments include workers employed by state and local governments across the U.S. These definitions can be accessed at: <https://www.bls.gov/bls/glossary.htm>

[30] Access to paid leave was not reported separately for state and local governments prior to 2008. Along with this change in reporting, the Bureau of Labor Statistics also began reporting the total percentage of civilian workers (inc. both private employees and state and local government employees) in 2008 as well.

[31] "Private industry workers" and "state and local government workers" are mutually exclusive categories. "Civilian workers" includes both "private industry workers" and "state and local government workers."

[32] See footnotes 29 – 31 for how these categories are defined and reported.

[33] From 2019 American Community Survey.

[34] From the US Bureau of Labor Statistics, represents the average percentage of workers with access to paid leave by business ownership type. Because these numbers are not available at the state level, the national average is used as a proxy for estimating the numbers of workers in NC with and without access to paid leave benefits.

[35] From 2019 American Community Survey.

[36] From the US Bureau of Labor Statistics, represents the average percentage of workers with access to paid leave by occupational group. Because these numbers are not available at the state level, the national average is used as a proxy for estimating the numbers of workers in NC with and without access to paid leave benefits.

[37] Did you work for pay at any time after the birth of the child?

[38] Source: Safe Leave: Key Considerations, available at <https://www.ncacc.org/wp-content/uploads/2021/01/NC-Safe-Leave-Key-Considerations.pdf>

[39] Source: Family Forward NC, [https://familyforwardnc.com/family-forward-policies/sick-safe-](https://familyforwardnc.com/family-forward-policies/sick-safe-leave/#:~:text=North%20Carolina%20does%20not%20have,not%20need%20to%20be%20paid)

[leave/#:~:text=North%20Carolina%20does%20not%20have,not%20need%20to%20be%20paid](https://familyforwardnc.com/family-forward-policies/sick-safe-leave/#:~:text=North%20Carolina%20does%20not%20have,not%20need%20to%20be%20paid)

[40] In combination with the US government.

# Glossary of Terms

**Allostatic load:** the repeated wear-and-tear on the body associated with repeated or prolonged activation of stress systems (e.g., sympathetic nervous system, hypothalamic-pituitary-adrenal axis, cortisol, etc.)

**Annual leave** (vacation): employer-paid (and job-protected) time away from work to be used at the worker's discretion

**Bereavement leave:** a form of job-protected leave available to workers when they experience the death of a loved one (who is generally a close relative)

**Chronic stress:** stress that persists for an abnormal amount of time because it occurs repeatedly or episodically, continuously, or because it poses severe threats that are not easily diffused or avoided

**Cumulative abuse:** co-occurring or compounding forms of abuse (i.e., physical, sexual, psychological, emotional, verbal, financial, etc.) that occur at a single point in time or cumulatively across the lifespan

**Employer-based paid leave:** leave benefits that are the responsibility of the employer, not mandated and governed by federal statutes

**Flextime:** an employment model where a worker can customize their work schedule within a certain range of hours and days (typically specified by the employer). Flextime is also used to describe employment models where workers adjust their own schedules based on their work demands and the organization's need to prevent workers from working overtime

**Health impact assessment (HIA):** a combination of procedures, methods and tools through which the health-related consequences of a policy, program or project may be assessed and/or predicted

**IPV rehabilitant:** an individual who is currently participating in a rehabilitation program operated by a licensed professional to address prior perpetration of intimate partner violence

**Job-protected** (paid leave): allows a worker to be away from work without fear of losing one's job and/or being replaced

**Paid leave:** employer-paid (and job-protected) time away from work that accommodates caregiving responsibilities, does not require a worker to choose between family, personal safety, and economic stability, and does not overlap with paid sick leave or paid annual leave benefits

**Parental leave:** employer-paid (and job-protected) time away from work that accommodates caregiving responsibilities for at least one dependent child

**Safe(ty) leave:** short-term, employer-paid (and job-protected) time away from work available to workers experiencing intimate partner violence

**Shift work(ers):** an employment model that is designed to utilize shifts of workers to provide labor/services 24 hours a day

**Sick leave:** employer-paid (and job-protected) time away from work available to workers experiencing a personal short-term illness (or the illness of a dependent child)

the 1990s, the number of people in the world who are poor has increased by 1 billion.

There are a number of reasons why the number of people in the world who are poor has increased. One of the main reasons is that the world's population has grown rapidly.

Another reason is that the world's resources are being used up. This means that there is less food, water, and energy available for everyone.

A third reason is that the world's economy is not growing fast enough. This means that there are not enough jobs available for everyone.

There are a number of things that we can do to help reduce the number of people in the world who are poor. One of the most important things is to help the world's economy grow faster.

Another important thing is to help the world's resources last longer. This means that we need to use them more carefully.

Finally, we need to help the world's population grow more slowly. This means that we need to have fewer children.

There are a number of things that we can do to help the world's economy grow faster. One of the most important things is to help the world's people have more money.

Another important thing is to help the world's people have more jobs. This means that we need to create more jobs.

There are a number of things that we can do to help the world's resources last longer. One of the most important things is to help the world's people use resources more carefully.

Another important thing is to help the world's people use resources more efficiently. This means that we need to use less of them.

There are a number of things that we can do to help the world's population grow more slowly. One of the most important things is to help the world's people have fewer children.

Another important thing is to help the world's people have children later in life. This means that we need to help them have more money.

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