

## **TITLE: VMS Position Statement Strongly Recommends Twelve Weeks of Paid Parental Leave**

**WHEREAS:** The United States and Papua New Guinea are the only two countries out of 170 in a United Nations report that do NOT offer any paid nationally mandated leave for the mother following birth of a baby. Due to the lack of a mandated universal policy, only 13 percent of US workers have access to paid family leave.

Health disparities exist among different socioeconomic groups associated with the lack of paid parental leave. Many parents with a higher family income can afford to take unpaid leave for months and stay home with their infants, but millions of parents, usually women, in lower socioeconomic groups with low-paying or part-time jobs do not take leave because they cannot afford to live without the income they provide for their families. In almost half of all two-parent households, both parents now work full time; in 40 percent of all families with children, the mother is a primary breadwinner. A paid parental leave would address health disparities, which is of central importance to the health of Vermonters. There is a strong body of evidence that supports the health benefits and the mental health benefits of having at least 12 weeks of paid parental leave for all parents after the birth of an infant. Paid parental leave should be equally available to those who give birth, to their spouses or partners, including same-gender partners, to those who adopt a child at any age, and to those who have a child through surrogacy.

This topic is of particular significance to the Vermont Medical Society and to public health and mental health in general. The presence of paid parental leave has the potential to have a salutary effect on the lives of our patients, on the health of the larger community, and on our own lives.

There is significant evidence that paid parental leave results in a significant decrease in maternal depression and infant mortality. There is an evidence basis that paid leave results in an increase in the induction and duration of breastfeeding, which confers physical as well as psychological benefits. Paid parental leave would allow more mothers to achieve the American Academy of Pediatrics recommendation of at least 6 months of exclusive breastfeeding, if they so desire.

There is an evidence basis that paid leave results in a significant improvement in parent-child attachment and that paid paternal leave is associated with an increase in paternal involvement, which has been shown to have a positive impact on child development and maternal depression.

This position statement is a statement of principle recognizing that the federal government, federal agencies, state governments, companies in the private sector, and institutions implement paid leave in varying ways compatible with their benefit packages. A number of successful solutions have been designed which have allowed the leave to be paid with minimal additional cost to employers or employees.

**BE IT RESOLVED:** The Vermont Medical Society strongly recommends 12 weeks of universal paid leave be granted for all parents: to those who give birth, to their spouses or partners including same-gender partners, to those who adopt a child, and to those who have a child by surrogacy. There is an evidence basis that at least twelve weeks of parental leave following the birth of an infant confers mental, physical, and public health benefits for parents and children.