

Messaging Briefs

Paid Family and Medical Leave



Introduction

ZERO TO THREE and the National Collaborative for Infants and Toddlers have created the following message brief to help advocates communicate with policymakers about the need and opportunities for enacting policies for paid family and medical leave. This brief is meant to serve as a source of research-tested messaging and broad policy guidance to help you craft messages and materials as you speak with policymakers and other stakeholders.

Making the Case for Prenatal to Three Policies

The following language can serve as a way to introduce paid family and medical leave within the frame of prenatal-to-three policies.

Every child deserves a strong start in life. The foundation we provide for them shapes their future and the future of our communities. We have to get it right.

During the first three years of life, the brains and bodies of infants and toddlers make huge gains in development. Babies' brains develop faster from birth to age three than at any later point, and their early experiences—both positive and negative—build the foundation for brain and body architecture that will support their ability to learn and their overall social, emotional, and physical health.

Parents and caregivers need dedicated paid time off, so they are able to bond with and care for their young children during these critical stages of development. Moreover, paid leave is essential for allowing families to take time off if their children have a serious health need or a family member gets sick.

We must act now to ensure that children grow into socially, emotionally, and physically healthy children who are confident, empathetic, and ready for school and life.



The Need for Paid Family and Medical Leave

Use the following suggested message points and proof points to demonstrate why families need access to paid family and medical leave.

The time after the birth or adoption of a baby is an essential time of development for babies and families. A baby's early relationships with parents and caregivers nurture brain connections that form the foundation for all learning and relationships that follow.ⁱ

Only 15% of working people in the US have access to paid leave through their employers.ⁱ This means too many working parents with very young children are forced to choose between taking the time they need to care for a new child or risk losing their job or income.

When babies have serious health needs, having their parents there can improve their recovery. Having that time can also help parents learn how to best care for their sick children.ⁱⁱ

Black and Latinx families are most impacted by the lack of comprehensive paid leave policies. Families of color are less likely to have access to paid leave through their jobs.

The Opportunity to Expand Access to Paid Family and Medical Leave

These message points provide recommendations to enact or improve paid family and medical leave policies in your communities.

Creating a permanent comprehensive paid family and medical leave program will ensure that parents and caregivers have the paid time off they need to care for their young children without jeopardizing their financial and job security.

Eight in 10 voters support a comprehensive paid family and medical leave policy that covers all people who work.ⁱⁱⁱ

Paid leave improves outcomes for families, employers, taxpayers, and the economy.

- When parents and caregivers have dedicated time at home with their young children, they have time to attend well-child medical visits and ensure that their children receive all necessary immunizations. These practices lower infant mortality and reduce the occurrence and length of childhood illnesses.
- Paid leave is also associated with health benefits for new mothers, including declines in depressive symptoms and improvement in overall health.^v

- When parents can attend to a child’s early medical needs, infant mortality and the occurrence and length of childhood illnesses are reduced, in turn lowering private and public health costs, as well as the need for working parents to take time away from work.
- Paid leave can give parents and other caregivers time to search for quality child care that meets the unique needs of their families, thereby facilitating greater productivity when they return to their jobs after leave.

Starting a Conversation on Equity

Successful conversations about equity and prenatal-to-three policies start with finding common ground. Research that evaluated how convincing equity arguments were to policy influencers when making the case to prioritize prenatal-to-three policies showed that it’s important to consider your audience’s background, perspective, and familiarity when discussing equity.

Strong equity messaging that directly calls out our country’s history of systemic racism is more likely to resonate with audiences who recognize these inequities are embedded into our society’s structures and systems. For audiences less familiar with equity concepts, consider messages on brain development, physical health, and maternal health support, which were found to be most persuasive in making the case for prenatal-to-three policies and can help establish common ground. Start your conversations with what we know works best and then look for ways to educate on equity once you have established common ground.

Find more message guidance in [Building Momentum for Prenatal-to-Three Policies](#).

Calls to Action

Consider using these message-tested calls to action to drive policy change for paid family and medical leave policies.

- Infants and toddlers must be our highest priority. They need our investment in paid family and medical leave now because they only get one chance at a strong start.
- This is our chance to make a powerful commitment to our youngest generation.
- Policymakers must invest in comprehensive paid leave policies that embody the following core principles:
 - Accessibility for all working people;
 - Meaningful duration of leave and a benefit level that makes taking leave financially possible for everyone;
 - Affordable and cost-effective for workers, employers, and government;
 - Comprehensive to cover full range of medical and family caregiving needs;
 - Inclusive in the definition of “family”; and
 - Protective against adverse consequences for taking leave.



About *Think Babies*™

ZERO TO THREE created *Think Babies*, a call to action for federal and state policymakers to prioritize the needs of infants, toddlers, and their families and invest in our future. We advocate for policies that ensure all babies and their families have good health, strong families, and positive early learning experiences. Sign up to join the team that's fighting for our future at www.thinkbabies.org.

About The National Collaborative for Infants and Toddlers (NCIT)

NCIT brings together early childhood leaders and advocates, philanthropy, policymakers, and practitioners working inside and outside government at the federal, state, and local levels to create and strengthen promising policies and programs, share what works, and encourage greater attention to, and investment in, the healthy development of our youngest children. Learn more at www.theNCIT.org.

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- Washington State Parent Ambassadors
- Children's Alliance (Washington)
- Maryland Family Network
- Pennsylvania Partnerships for Children
- Start Early (Illinois)
- Texans Care for Children
- Children at Risk (Texas)
- North Carolina Early Education Coalition
- Groundwork Ohio
- Michigan League for Public Policy
- Michigan's Children
- Early Childhood Investment Corporation (Michigan)
- South Carolina Infant Mental Health Association
- Institute for Child Success (South Carolina)
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- Bloom Consulting (Montana)
- Kids Win Missouri
- Idaho Voices for Children
- Children's Action Alliance (Arizona)
- Southwest Human Development (Arizona)
- Alabama Partnership for Children
- Georgia Early Education Alliance for Ready Students



Endnotes

- i. Phillips, D. A., & Shonkoff, J. P. (2000). *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, DC: National Academy Press. <https://www.nap.edu/catalog/9824/from-neurons-to-neighborhoods-the-science-of-early-childhood-development>
- ii. Heymann, S. J., Toomey, S., & Furstenberg, F. (1999). Working Parents, What Factors Are Involved in Their Ability to Take Time Off From Work When Their Children Are Sick? *Archives of Pediatrics & Adolescent Medicine* 153, no. 8: 870. doi:10.1001/archpedi.153.8.870
- iii. National Partnership for Women and Families. Voters' Views on Paid Family and Medical Leave: Findings from a National Survey. 2018. <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/voters-views-on-paid-family-medical-leave-survey-findings-august-2018.pdf>
- iv. National Partnership for Women and Families. (2015). Children benefit when parents have access to paid leave. NPWF. Retrieved from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/children-benefit-when-parents.pdf>
- v. Chatterji, P. & Markowitz, S. (2008). Family leave after childbirth and the health of new mothers. National Bureau of Economic Research. Retrieved from <http://www.nber.org/papers/w14156>

