Parental Leave Policy: Comments on Lero, Kamerman and Ruhm

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Introduction

Lero, Kamerman and Ruhm's commentaries in the area of parental leave policy have been extensively published. But, as Lero has suggested in her review, "There are still relatively few studies that address these concerns, and results are neither consistent nor generalizable outside of the United States, where maternity/parental leave, health care, and child care policies are atypical of the rest of the world's industrialized nations." As early as 1991,[1] over a hundred countries, including virtually all of the industrialized nations, had parental leave policies. According to Kamerman, Canada has one of the most generous policies, with one year of paid leave. By contrast, the European Union has mandated a shorter 14-week paid maternity leave. The United States provides a brief leave, which is unpaid. Surprisingly, research on leave policy has been conducted primarily in the United States, a fact which may lead authors such as Kamerman to mitigate their commentaries, referring to the "potential" impact of leave policies. Therefore, we must bear in mind that these authors were presented with a very limited set of mixed data for review.

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Research and Conclusions

Kamerman discusses Ruhm's study,[2] which suggests that parental policies improve child health (so far as birthweight and infant or child mortality are concerned) and that paid leave reduces the need for out-of-home infant and toddler care. She goes on to note that there may be "negative consequences for women who take extended leaves (e.g., three years), particularly if they take multiple, sequential leaves." Ruhm's study was based on European data, with expected positive results.

Ruhm's review exposes the negative effects of early paid maternal employment as shown in many American studies. The studies reviewed invariably demonstrate that not only did maternal employment during a child's first year produce negative outcomes, but in some cases it offset any benefits gained during maternal employment during the second and third year of a child's life. The papers reviewed by Ruhm that support this contention are, as yet, unpublished.[3-5] Many other studies that have explored the effects of a mother's absence on social and emotional relationships (such as the Belsky[6] studies, cited in Ruhm's commentary) have been largely refuted by an extensive NICHD study.[7] The NICHD study demonstrated that children who received early child care showed normal emotional and cognitive development. Therefore, Ruhm's statement that "maternal employment during a child's first year appeared to negatively affect subsequent cognitive test scores and was associated with increases in behavioural problems" has been disproved. Further, Ruhm posits that a decrease in the frequency and duration of breastfeeding may mediate the negative effects associated with working during a child's first year of life. However, his theory (based on dated references from 1989 to 1994)[8-10] overlooks the growth of the breast pump industry and the growing incidence of breastfeeding amongst working women. This tendency suggests that infants are not being deprived of their mother's milk.

Lero's commentary stresses the highly individual nature of the effects of maternal employment and maternal leave on children. Citing the Wisconsin Maternity Leave and Health Study, which showed no differences between homemakers, part-time, and full-time employed women in measures of mental health that included depression, anxiety, self-esteem and the length of leave, she holds that the length of leave taken is not, in itself, a significant contributor to maternal mental health. In fact, as Lero points out, several investigators have reported that depression was greatest among mothers who wished to return to work but took longer leaves than they would have preferred or who chose to remain at home for other reasons.[11-13] Therefore, Lero

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notes, it would appear that a mothers' satisfaction with her role and spousal and social support for that role may be preponderant considerations in mother–infant interactions and may constitute mediating factors in maternal employment and child development outcomes.

Lero's commentary highlights the importance of conducting research on leave where options are available and optimal, such as in Canada or in European countries. Moreover, the only truly valid comparisons to be made are between mothers who elect to stay home for lengthy paid leaves and mothers who prefer to return to work and place their children in quality, affordable childcare services. For, at the very least, maternity leave research must be interpreted and discussed in the context of best-case alternatives, including research on high-quality, affordable childcare services.

Implications for Development and Policy

The commentaries from Lero, Kamerman, and Ruhm offer laudable implications for maternal leave policies. Kamerman suggests that the concept of a year of paid leave that comes close to a full wage replacement and a guaranteed place for a child in quality, affordable care appears to be gaining acceptance. But in reality, with exception of France and Sweden, mothers have not been offered optimal alternatives. Ruhm contends that the first year of life is sufficiently important to justify the comparatively lengthy paid leave policies available in Europe but not yet available in the US. He goes on to suggest that child development has been addressed as a passing concern and that science has been largely "ignorant about the tradeoffs that the various policies may entail." "Trade-off" is a key term in the United States as leading authorities on child development often support maternal leave *at the expense of* providing more optimal childcare. For her part, Lero points out that more research is needed on supports in the workplace, such as greater scheduling flexibility, breastfeeding accessibility, and high-quality daycare facilities.

I would concur with the recommendations made by these authors and would also recommend that employers provide an equal-opportunity voucher-like system wherein employees would be offered leave-taking credits in the form of maternity leave, child care, wellness centre participation, elderly care leave, or additional medical benefits. Employers in the US are inconsistent in their leave practices, providing leave benefits to some employees and not others. In the cafeteria-style system I am proposing, employees could elect to use their voucher benefits for a return to school, additional training, or a leave with the approximate benefits of maternity leave. Since the basic communication skills of infants develop within the first 3–5 months of life

and given the new data supporting quality care for infant development, a similar duration of leave for long-term employees appears reasonable. At the very least, tax-free savings instruments should be made available to people who wish to invest in childcare, and such programs should be a pre-tax. Federal funds could be profitably spent on studying countries where both maternity leave and childcare alternatives are available so that the various benefits of home and childcare environments may be assessed to the advantage of parents and children alike.

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