

Global Maternity Benefits and Their Impact on Maternal and Child Well-Being

Jing Zhang, Candice Thomas, Bobbie Dirr, Rissa Cone
and Christiane Spitzmueller

Abstract Maternity benefits across the globe vary widely by country. In some countries, they include health benefits for mother and child, medical leave, and/or access to infant care support, although in other countries benefits are rather limited. In this chapter, we provide an overview of global maternity benefits that are legally required within countries and discuss the evidence pertaining to their effectiveness in promoting maternal and child well-being. Following a brief description of maternity policies in different countries, we reviewed the global similarity and variances in these policies. Although maternity benefits are beneficial in improving maternal and child well-being, it may not affect all outcomes equally and positively. By summarizing the maternity policies' influence on mothers' work choices, psychological/mental health, and child health, we provide a holistic picture of the benefits and costs of maternity leave. We also comment on the methodological barriers to the study of maternity benefits and end with a list of suggestions for researchers, policy makers, and organizations.

Keywords Maternity policies · Maternal well-being · Child health

Given the steady increase of women working for pay across industrialized and developing countries, family-supportive work policies that regulate maternity benefits and employment, are becoming more important (Stahelin et al. 2007). Maternal policies are generally defined as policies that allow parents to continue working while also providing care for their children. Maternal policies include but are not limited to: maternity/parental leaves, flexible work arrangements for parents, out-of-home childcare, and other public policies that affect caregivers' efforts to combine work and family responsibilities, such as laws about working hours, tax policies, and the public pension system (Kelly 2005). In this chapter, we provide an

J. Zhang (✉) · C. Thomas · B. Dirr · R. Cone
University of Houston, Houston, USA
e-mail: jingzhang.prc@gmail.com

C. Spitzmueller
Department of Psychology, University of Houston, Houston, USA

overview of global maternity benefits that are legally required and discuss the evidence pertaining to their effectiveness in promoting maternal and child well-being.

From a societal and political perspective, maternal policies have been adopted for several reasons, such as improving women's economic independence, increasing gender equality and social equality, increasing infants and mothers' psychological and physical health (Queneau and Marmo 2001), and sustaining a stable labor force. The failure to adopt family-supportive policies may have adverse impact on employees and their families. In addition, organizations failing to provide adequate support for families may ultimately face difficulty in attracting and retaining top talent (Korabik et al. 2003).

Even though maternal policies are generally believed to be beneficial to mothers, children, and the society as a whole, they also have their costs to employers and employees. Oftentimes, as discussed in other chapters (e.g. chapter by Greber and Wiese on decisions to return to work) employers face a number of uncertainties surrounding employees' maternity leave. For instance, the employee may not be able to predict how soon they will return. Additionally, many organizations are uncertain whether women returning from maternity leave will be able to successfully reconcile family and organizational demands (such as frequent travel, long hours). Costs may arise for employees utilizing maternal policies (i.e. where child care is partially subsidized), in addition to costs for organizations. For example, because maternal policies (e.g., maternal leave) are generally applied to female employees (Ondrich et al. 1996), organizations at times utilize parents' leave to justify the wage penalty many women continue to experience.

Given these potential pitfalls and the complexity of maternity policies, a significant amount of additional research evidence is needed to demonstrate to policy makers whether maternity benefits are of benefit to society, and under what conditions their value to children, family, employers and society as a whole can be maximized. Therefore, the current chapter serves two primary purposes: (1) to outline what maternity policies countries require legally, and how these policies/benefits impact organizations, mothers, and infants in both positive and negative ways; and (2) highlight gaps in the literature and provide directions for future research.

There is large variation in the breadth and content of policies adopted across the globe. In addition, variability not only exists across different countries' legal frameworks, but also within countries. Particularly in countries where legally required benefits are not extensive, many organizations opt to provide benefits that go above and beyond what is legally required. Within countries, maternity benefits and policies are also not static over time: Change in the last several decades has been widespread across industrialized countries due to the cyclical nature of global economic development and transformations in family structure (e.g., increase in dual-earner families; Gauthier 2002). Both of these aspects (i.e., cross-culture and variability) have led to significant complexities for researchers interested in investigating and comparing the benefits and drawbacks of different maternity benefits.

Even though not all research findings are consistent across countries and although much of the research on maternity benefits remains descriptive, researchers around the world have been able to progress a research agenda with the goal of shedding light on measurable outcomes of maternity benefits, as well as contextual factors that determine whether benefits lead to desirable outcomes. Altogether, these studies can be classified into two groups: monocular and multi-core. Monocular studies focus on only small numbers of countries and cover multiple aspects of both policies and outcomes. For instance, Rønsen and Sundström (2002) compared Finland, Norway, and Sweden on a number of family policies for a two-decade period, namely from 1972 to 1992. In contrast, multi-core studies compare multiple countries on one or two aspects of maternal benefits (most of them focus on maternal leave) and a single outcome. Representative of this classification of studies is a literature review by Hegewisch and Gornick (2011) which compared the effects of various maternal policies on mother's employment across Organization for Economic Co-operation and Development (OECD) countries.

Since both cultural differences and combinations of policies affect the outcomes of maternity policies, a comprehensive summary of various maternity policies around the world and their effect on both mother and children is necessary. Until now, literature examining multiple countries, maternity policies, and outcomes has been scant (for exceptions, please see Korabik et al. 2003). This chapter aims to fill this gap. Through this chapter, we aim to provide an updated review of various maternity benefits around the world. Moreover, we itemize the influences of maternity policies on the mothers' mental health, work experiences, and child development and health. By identifying several methodological barriers in studying global maternity policies, we point out directions for future studies utilizing predominant theoretical frameworks originating in the work-family interface literature. Finally, we provide suggestions for policy makers and employers aiming to utilize the most beneficial policies to maximize desirable outcomes for individuals, families, employers, and societies.

Variance and Similarity of Policies in Different Countries

Global maternity policies are heterogeneous. As a consequence, a fully comprehensive and exhaustive assessment of all policies and their consequences is beyond the scope of this chapter. Instead, we offer a generalized perspective of policies offered across cultural and national contexts, as well as an analysis of similarities and differences between them as they affect relevant outcomes for women, families, and employers.

Maternity Benefits/Policies in European Countries. Finland, Norway, and Sweden are typically characterized as having high state support for families and mothers, with Swedish parents currently enjoying the longest paid parental leave globally (480 days). Both Finland and Norway offer financial support or significant

tax deductions for families, and sponsored or subsidized childcare facilities or care (Gauthier 2002). In addition, the Scandinavian countries legally guarantee that mothers can reduce working hours while limiting employers' ability to derive negative repercussions on the basis of women taking advantage of maternity policies. However, the detailed legal framework governing maternity leave still varies substantially within Scandinavia: for instance, in Finland mothers can reduce working hours until their child is in their first term of school; in Norway mothers can reduce only a limited number of hours while they are breastfeeding; and in Sweden mothers can reduce to 75 % of full time until the child is aged 7 (Rønsen and Sundström 2002).

Germany, France, and the Netherlands typically offer a medium level of support for families and mothers through cash support for families and relatively long maternal leaves. The level of support tends to depend on employment status and is generally targeted towards the mother (Gauthier 2002), although legal frameworks are written to support cases where fathers function as primary caregivers. Additionally, when an individual qualifies for maternal support, these countries each provide fully paid leave with both a job guarantee and ability to work part-time upon that individual's return. In Germany mothers are entitled to up to 3 years of protected leave with approximately 14 weeks of paid maternity leave, while mothers in France and the Netherlands are entitled to 16 weeks of paid maternity leave (OECD 2010, 2014).

Countries in southern Europe such as Italy, Greece, Portugal, and Spain, typically have high degrees of variation between them. Employees in Italy, Greece, Portugal, and Spain are entitled to between 16 and 21.7 weeks of paid maternity leave (varies by country; OECD 2014). In many cases, benefits in these countries are a mixture of universal and private benefits. In general however, there tends to be a more limited level of financial support and tax deductions to facilitate the economic well-being of families. Along with that, parental leave and childcare support vary significantly (Gauthier 2002).

The United Kingdom (UK) and Switzerland offer comparatively limited maternal benefits: There is little cash support to families except those with high need, medium to short maternity leaves, and childcare is typically the responsibility of the parents or the private sector (Gauthier 2002). And though the UK offers mothers up to 52 weeks of maternity leave, only some of that time is paid. Switzerland offers only 16 weeks of job-protected, paid maternity leave and mothers are not allowed to return to work within the first 8 weeks after the child's birth (Ray 2008; OECD 2010).

Maternity Benefits/Policies in North America. The United States (U.S.) provides low federal support for maternal benefits, although employer support varies by industry and organization. Approximately 21 % of companies offer parental leave above the twelve weeks of unpaid job protected leave that is legally entitled to employees based on the Family and Medical Leave Act (FMLA; SHRM 2015). Overall, financial and tax-based support for families is limited to those with significant financial need (i.e. who live below the poverty line). Similarly, the available short parental leave in the United States is contingent upon women having worked sufficiently long enough with their employer to qualify. Further, unless employers

provide supplemental voluntary support for maternity leave, most maternity leave in the United States is unpaid (79 %; SHRM 2015) or requires the utilization of previously accrued sick days (Gauthier 2002). In the U.S., parental leave is lumped into family leave policies without a specific parental leave policy and does not include statutory paid leave. Canadian benefits are more comprehensive and provide longer leave of approximately one year, including up to 17 weeks of pregnancy leave and up to 37 weeks of parental leave during the child's first year.

Maternity Benefits/Policies in Australia and New Zealand. Broadly speaking, Australia and New Zealand offer only limited legally mandated maternity benefits. Financial incentives and tax deductions are implemented to reduce the financial strain many young families experience. For the most part, childcare provision is the responsibility of parents and the private sector, with state-sponsored parental leave being relatively minimal (Gauthier 2002). However, although leave times are relatively brief, mothers in New Zealand have paid leave at 100 % of their former salary and also have access to additional paid leave for pregnancy related medical attention (Ray 2008). Maternity leave in Australia is paid out differently than in many other countries: Mothers are provided a lump-sum for each newborn child, regardless of whether or not the mother takes leave from work (Ray 2008).

Maternity Benefits/Policies in Japan. In general, Japan is characterized as providing somewhat limited maternity benefits. As such, Japan only offers very limited financial support to families, maternity leave is brief, and childcare provision is primarily the responsibility of the parents or the private sector. Female workers are allowed to take six weeks of pre-birth and eight weeks of post-birth leave, with 60 % of their wages paid through governmental social insurance (Tanaka 2005). In 1999, Japan offered an average of 12 weeks of maternity leave (Gauthier 2002). In 2001, 53.5 % of Japanese private companies provided childcare leave (Ministry of Health and Welfare of Japan 2002). The availability of paid maternity leave also varies by organization and salary, depending on employer enrolment in the national health system (Ray 2008).

Maternity Benefits/Policies in Developing Countries. So far, we have discussed benefits in many industrialized countries, but are benefits and policies also available for mothers in developing countries? Balancing work and family responsibilities for new mothers is ubiquitous and is not unique to Western cultures. How do developing countries provide support for working mothers and families? Unfortunately, for the most part, maternity policies and benefits in developing countries are limited and those that exist demonstrate considerable variance in who can access them. Oftentimes, employment law is not particularly punitive towards employers in discouraging gender-based discrimination. For instance, in Nigeria many shift work positions are legally limited to being available only to men, even if women are able to demonstrate adequate suitability for the position. While most developing countries have some formal maternity benefits in place—such as paid maternity leave for some women—many women are not eligible for these benefits due to a variety of factors such as their participation in informal employment. Malaysia, for example, does offer paid maternity leave benefits for working mothers; however, the provision of benefits often depends on demographic,

occupation, and employment factors. Within Malaysia, being of Indian decent, having higher education, and holding a full-time and year-round job, for example, are all associated with an increased probability of receiving paid maternity leave (Bernasek and Galloway 1997).

Global Similarity and Convergence of Policies

Although there are vast dissimilarities in the types of maternity policies and benefits offered by countries, there are several observable, general global trends. Overall, within the last 20 years, there has been significant increase in support for parental leave (Gauthier 2002). However, this increase has manifested in a variety of different ways such as through the introduction of new policies (e.g., United Kingdom), adjusting current policies to be more supportive (e.g., Japan), or broadening parental leave to include fathers or offering subsidized preschool and crèche spots (e.g., Germany; Norway). So, although there is a tendency towards increasing support, there is little evidence for convergence of policies as there remains marked diversity in the type and level of support for parental leave (Gauthier 2002).

Similarly, many trends can be seen (see Table 1) in the types of benefits offered. For example, most industrialized countries, particularly those within the European Union, offer some form of maternal leave (Brunin and Plantenga 1999). However, while several countries may offer a particular benefit (e.g., paid leave), the qualifications for these benefits (e.g., length of employment prior to birth of child) and the specific details of the policy (e.g., paid leave is for only 18 of the possible 40 weeks in the UK) remain highly variable across countries. In addition, there remains a gap in our understanding of the availability and impact of policies and benefits for mothers in non-Western and developing nations. For instance, while some developing nations legally endorse maternity benefits, large percentages of the economy are informal and hence not easily governed by legal frameworks. Similarly, the enforcement of policies and legal frameworks is relatively limited in most countries, reducing the degree to which an employer can be held accountable for compliance. To build a comprehensive global perspective on motherhood and the workplace, this is an area that will need to be addressed in future research.

Global Differences in Benefits/Policies Across Countries

How do maternity benefits and policies vary across countries? Overall, there is a high degree of cross-national variance, which can be observed both in specific policy components (e.g., leave flexibility) and in general trends (e.g., offering cash support). While the scope of this chapter prevents detailed analysis of global policy divergence, the differences in general trends (see Table 1) are helpful in developing an initial understanding of where differences between countries exist. Summarily,

Table 1 Comparison of maternity policies across countries

Country	Cash support	Length of maternal leave	Universal coverage	Paid leave	Job guarantee	Right to reduced hours	State sponsored child care
Finland	Medium	Long	Yes	Yes	Yes	No	Yes
Norway	Medium	Long	No	Yes	Yes	Yes	Yes
Sweden	Medium	Long	No	Yes	Yes	Yes	Yes
Germany	Medium	Long	No	Yes	Yes	Yes	Limited
France	Medium	Long	Yes	Yes	Yes	Yes	Limited
Netherlands	Medium	Long	Yes	Yes	Yes	Yes	Limited
Greece	Low	Short	No	Yes	Yes	Yes	No
Italy	Low	Short	No	Yes	Yes	No	No
Portugal	Low	Short	No	Yes	Yes	Yes	No
Spain	Low	Short	No	Yes	Yes	Yes	No
U.K.	Low	Short	No	Yes	Yes	No	No
Switzerland	Low	Short	No	Yes	Yes	Yes	No
Canada	Low	Short	No	Yes	Yes	No	No
U.S.	Low	Short	No	No	Yes	No	No
Australia	Low	Short	No	Yes			No
New Zealand	Low	Short	No	Yes	Yes	Yes	No
Japan	Low	Short	No	No	Yes	No	No

Note Many of the benefits described above require a qualifying period of employment to be eligible for the benefits. To be qualified as providing “long” length of maternal leave, the policy allows the mother who gives birth to a child to take maternal leave and extend leave for 42 weeks or longer. To be qualified as providing “medium” cash support, the wage replacement rate is above or equal to 80 %. Bradshaw and Finch (2002), Gornick et al. (1997), Ray (2008), Rønsen and Sundström (2002)

there is variation between countries in the provision of financial support, length of maternity leave, provision of paid maternity leave, guaranteed job after returning to work, right to reduced hours after returning to work, and federal provision of child care support. For example, while both Norway and Sweden offer paid maternity leave, Norway only offers maternal leave if the mother was employed 6 of the last 10 months before giving birth, while Sweden requires that the mother had earnings for at least 240 days prior to childbirth (Rønsen and Sundström 2002).

The Benefits and Costs of Maternity Leave

The provision of significant amounts of maternity leave creates significant costs for governments and employers who pay salaries and benefits during leave. Hence, a thorough and empirically grounded understanding of the immediate and long-term benefits of such policies is needed to guide further decision making on maternity

leave and the best ways to design parental leave systems. Most work-supportive legislation, regulations, and research focus on leave policies, such as maternity leave and parental leave. We will follow these lines of research by devoting the majority of our discussion on maternity leave and its effects. Maternity leave is employment leave put aside for the mother; it is a short-term absence from paid work resulting from pregnancy, delivery, or birth. Conversely, parental leave is employment leave which can be taken by either parent to take care of a newborn, sick, or adopted child (Joesch 1997).

In examining outcomes of maternity leave and related policies, it is relevant to delineate the myriad of possible outcomes and stakeholders that can potentially be affected. Criteria that can be, and to some degree have been, integrated in research on outcomes of maternity leave and related policies can pertain to the mother, the child, the family system, employers, and society as a whole as stakeholders. For each stakeholder group, outcomes can include health outcomes, subjective well-being and attitudinal outcomes, as well as economic costs and benefits. For mothers, satisfaction with being a new parent, parental self-efficacy, degree of post-partum depression, adjustment to maternal role demands, within-family conflict, and economic stability (e.g. whether the mother will experience reduced retirement savings because of longer parental leave times) are among the relevant outcomes that need to be understood for a comprehensive picture on the benefits and costs of maternity leave to emerge. For infants, outcomes that can be included in further research include health benefits from extended breastfeeding, cognitive development, social adjustment later in life, and the emergence of healthy parent-child attachment patterns. The stability and health of family systems are also relevant outcomes. Fathers represent another stakeholder group, and further research needs to delineate whether and how maternity benefits can ensure fathers adjust to their parental role.

From the perspective of society as a whole, research-based quantification of the economic benefits of health and well-being improvements that can be derived from maternity benefits need to be conducted in more detail. It is also necessary for research on maternity benefits to include multiple outcomes, and not necessarily expect that maternity benefits affect all outcomes equally and positively. For instance, longer maternity leave may lead to increased likelihood of women encountering challenges as they return to work. These challenges may include issues around re-entering the workforce, as a woman's old position may have been filled, and navigating spousal expectations for a woman's contribution to household and childcare that may be based on the mother's schedule during the leave period. In the following sections we review research on the impact of maternity policies on a host of outcomes, but emphasize the dearth of research that comprehensively investigates how benefits affect various stakeholders' outcomes.

By using data from the U.S. Food and Drug Administration's Infant Feeding Practices Study, Roe et al. (1999) tested the simultaneous-equation model of the relationship between maternal employment and breastfeeding and found that paid maternity leave policies support higher breastfeeding rates and longer breastfeeding duration, but the effects of breastfeeding on work leave is insignificant. Breastfed

babies are likely to suffer from fewer infections than babies who are not breastfed; therefore, mothers who breastfeed often need less time off to attend to sick babies. As a consequence, this can result in increases in employee performance and decreases in healthcare costs. At the same time, ovarian and breast cancer rates among women who breastfeed are substantially lower than among women who never breastfed, lending further support to the notion that maternity leave relates to substantial and sustained health benefits for families and societies.

Moreover, by using a dataset from 17 OECD countries across four time periods, Winegarden and Bracy (1995) found that paid maternity leave increases the labor-force participation of young women. Similarly, in comparing Norwegian and Swedish women's after-birth activities, Rønsen and Sundström (1996) found that the entitlement to paid maternity leave is associated with increased work-force participation for mothers and young women. Moreover, maternity leaves can also distally increase human capital by providing positive developmental opportunities for children. Various studies (e.g., Tanaka 2005) suggest that longer maternity leave is positively related to child development. It is hence likely that maternity leave can function as an early support system for children, which in the long run may contribute to child adjustment and learning.

Even though some countries have leave policies implemented, the leave is not always paid. While maternity leave in general provides a time to recover from childbirth and care for the infant, unpaid leave may limit the positive effects listed above due to financial strain. For instance, although certain employees are qualified to take up to 12 weeks of unpaid sick leave according to FMLA in the United States, most employees (78 %) do not utilize FMLA because of financial concerns (Brady-Smith et al. 2001). In addition, among employees who did take days off, 37 % reported they cut their leave short because they could not afford a longer unpaid leave (Kelly 2005). Thus the magnitude of benefits of these maternal leave policies reported above tends to be conservative given the limited usage. Future research about the actual usage of these policies can shed more light on our understanding of the actual benefits.

Even though maternity policies are beneficial, they are not without cost. Maternal leave, which allows women to leave the organization for a long period of time and retain their prior position, may cause several problems for the employer. First, the employer may find a substitute or rearrange duties for remaining employees to cover the responsibilities of the mother on leave based on the duration of her leave. For instance, in France, 86 % of employees on leave were substituted during their leave (OECD 1995: 190). Furthermore, some countries mandate provision of paid maternal leave with the responsibility for payment shared with the employer. For instance, in Germany, employers bear around 35 % of the financial burden of maternal leave payments (Alewell and Pull 2011).

In addition, the uncertainty of maternal leave of how long women take maternal leave is problematic for employers to plan for. Similarly, after taking leave, mothers may decide not to come back which can create additional challenges for employers who are mandated to retain and offer a position to the returning parent, while also striving to meet organizational demands and schedules. The severity of this issue

varies across countries depending on the policies adopted. For instance, in Germany, an employer faced with a pregnant employee may also have to accommodate her decision to take a 3-year-leave period and still risk permanently losing the employee afterwards (Alewell and Pull 2011). Comparatively, the uncertainty is lower for US employer because of the relatively short length of leave provided through the Family Medical Leave Act (12 weeks).

The Effect of Maternity Policies on Mothers' Work Choices

Researchers have demonstrated and documented that mother friendly policies allow more women to take a job, especially women with young kids (Gornick and Meyers 2005; Queneau and Marmo 2001). However, there are other concerns with regard to an increase in the wage gap between women and men and other inequalities that may appear after more family-supportive practices are introduced. In this section, we will focus on the effects various policies (i.e., employment leave, childcare facilitates, and part-time employment) have on women's work related experiences.

Maternity Leave

When provided with maternity leave, women are more likely to join the work force before having children, and will also return to work sooner after giving birth to a child (Hofferth and Curtin 2006; Summers 1989). Maternity leave of a moderate length is positively related to overall female employment, especially when it is paid, and the effects are stronger for women of childbearing age (Kelly 2005; Ruhm 1998). Moreover, it has been shown that women who have access to leave are more likely to return to their previous employers after childbirth (Waldfogel 1998).

With regard to the possible cost of maternity leave on mother's work, employers who bear the costs of mandated benefits appear likely to pay the relevant employees lower wages (Hofferth and Curtin 2006; Mitchell 1990). These effects may be less influential in some countries, such as Sweden, where the adverse effects are more predictable, and in other countries where the maternal leave is short and unpaid (Galtry and Callister 2005). For instance, Ruhm (1998) found that only "lengthier leave is associated with substantial (2–3 %) reductions in relative wages." (p. 287).

Other Maternal Benefits

It has been shown that childcare availability, cost, and quality matters with regard to mother going back to work after giving birth to a child (Galtry and Callister 2005). For instance, in Canada, Lefebvre and Merrigan (2008) found that the childcare

policy, coupled with the transformation of public kindergarten from part-time to full-time, significantly increased the likelihood of mothers' continued paid employment. Moreover, it was found that higher childcare costs reduced women's employment rates (Anderson and Levine 2000).

How Different Policies Affect Mothers' Psychological/Mental Health

Maternity benefits are provided in many countries across the globe, but what empirical evidence do we have in evaluating their impact on mothers' psychological health? Although the economic and labor force impacts of maternal policies are often the focus of organizational research on maternal benefits, it is critical to also understand the impact these policies have on maternal psychological and mental health. Within many countries, maternal leave policies and maternal benefits were initially implemented to promote mother and infant health. However, while there are an increasing number of studies assessing child health and economic impacts of maternal benefits (Brady-Smith et al. 2001; Brooks-Gunn et al. 2002; Waldfogel 2001), there are relatively few studies that assess the impact on maternal mental health. Therefore, this section is dedicated to the discussion of the current research that has been done on the effects of maternal policies from the perspective of maternal mental health.

While there are a variety of different maternity benefits that can impact maternal psychological health, research in this area consistently finds that the benefit of these policies depends on additional factors such as the fit with the mother's role preferences, infant and mother health, social support, and the quality of the benefits. Thus, while much of the research discussed below regarding different policies and maternity benefits generally suggests that these benefits are associated with positive mental health outcomes, the strength of these benefits is influenced, and may even depend, on these additional factors (e.g., individual and organizational factors). Simply having a policy in place does not lead to positive maternal mental health. Most importantly, to capitalize on the advantages of such policies, the policies must be in alignment with the mother's preferred role and the mother must choose to participate in the benefits provided. Moreover, even in the countries with generous benefits by international standards, such as, Norway and Sweden, utilization and access to benefits are still not universal (e.g. contingent upon time of service before starting maternity leave).

Maternity leave is a common benefit available to mothers that has received considerable research attention due to its common inclusion in national maternity policies. For new mothers, the period of time after the birth of a child is a complex phase that is characterized by time-intensive infant care, changes in role identities, and recovery from potential infant and maternal health problems (e.g., Gjerdingen et al. 1991). Maternity leave not only provides mothers with the time to care for

their new infant but also has other multifaceted functions such as provision of physical and psychological recovery from childbirth and early infant care, time for breastfeeding, and maternal-infant bonding. While many studies assess maternity leave in general, it is important to keep in mind that the benefits of maternity leave can occur through a complex set of processes. We will briefly discuss some of these ways through which maternity leave can influence maternal health before discussing the overall findings on the effects of maternal leave.

Recovery, bonding, and breastfeeding are three ways that maternity leave can impact maternal psychological health. Aside from spending time with and caring for the new infant, maternal leave also provides mothers with time to recover strength and energy drained from both the childbirth process and early infant care (Tulman and Fawcett 1991). In addition, maternal leave supports the establishment of regular biological rhythms for the mother and child that aide in the promotion of attachment and maternal self-confidence (Weinraub and Jaeger 1991). Maternal leave also indirectly promotes positive psychological outcomes for mothers by providing mothers with better opportunities for breastfeeding due to the decrease in hindrances to breastfeeding brought about by the workplace (e.g., time and space restraints).

As discussed elsewhere in other chapters, breastfeeding has been documented to help mothers' mental health by promoting positive psychological outcomes such as emotional well-being, self-esteem, and bonding with their child (Labbok 2001). Returning to work is a common reason for ceasing breastfeeding (Fein et al. 2008; Mandal et al. 2010); however, supportive and flexible work environments may provide an environment that is conducive to continuing breastfeeding (Lindberg 1996). Overall, maternity leave influences maternal health through a variety of mechanisms and while most studies (and policies) discuss leave in general, it is always helpful to remain aware of the different ways through which leave can impact health.

In general, most studies support the positive effects of maternity leave on the mother's mental health; however, there is some disagreement around these effects and there continues to be discrepancies about the optimal length of leave. For example, Chatterji and Markowitz (2004) found that early return to work after childbirth was associated with increased risk of depression symptoms but not related to meeting the threshold of symptoms required for clinical depression diagnoses. They further claim that increases in the length of maternal leave, holding other factors constant, can notably decrease depressive symptoms (Chatterji and Markowitz 2004). Longitudinal studies have also shown that mothers who return to work after only a short period of maternity leave—with short leave typically defined as returning to work within six to twelve weeks postpartum and long leave defined as returning to work beyond six months postpartum—have increased risk of experiencing decreased mental health (e.g., depressive symptoms; Gjerdingen and Chaloner 1994). Furthermore, this risk increases when the short maternity leave is in combination with other risk factors for decreased mental health such as poor social support, fatigue, poor general health, or low partner support (Gjerdingen and Chaloner 1994; Hyde et al. 1995). These studies indicate that while short maternal

leave can negatively impact mental health, the effects of brief maternity leave are exacerbated by poor environmental and physical health factors.

However, not all research supports the negative effects of returning to work. For example, Hock and DeMeis (1990) did not find any significant difference in maternal anxiety, depression, or self-esteem between women who were not employed, employed part-time, and employed full-time one year after the child's birth. In these studies, the length of leave—including both paid and unpaid leave—was not directly associated with mental health (Hock and DeMeis 1990; Hyde et al. 1995; McKim et al. 1999).

As research in this area has accumulated, it is becoming clearer that rather than simply the length of maternity leave, the determining factor in predicting maternal mental health is the role quality (e.g., fit, satisfaction, and support) and alignment of leave with the mother's preferences and needs (Klein et al. 1998; Lero 2003). Research suggests that discrepancy between the actual and preferred role (e.g., involvement in employment or staying at home) can lead to negative psychological health outcomes for the mother such as increased risk of depression (Hock and DeMeis 1990; Hyde et al. 1995; McKim et al. 1999). Further supporting the important influence of role quality on maternal health, Klein et al. (1998), found increased psychosocial distress both for mothers who had returned to work but were experiencing low flexibility and demand overload as well as mothers who had stayed home but were experiencing role restriction.

In addition, financial factors including whether or not the leave is paid can influence the relationships between length of leave and maternal health outcomes such that increased financial stress can lessen some of the positive effects of leave. Therefore, it is possible that long maternity leaves could be associated with negative outcomes if the length of the leave does not fit with the mother's preferences or financial needs. Based on results such as these, it seems that the focus on leave or benefits independent of other factors such as maternal preferences or role quality is misguided: the impact of maternal benefits on maternal psychological health is greatly impacted by fit between the policies and maternal needs.

Outside of maternity leave, there are many other organizational policies and benefits that can influence maternal psychological health. These most often utilized and discussed in the literature include flexible scheduling and dependent care benefits.

Formal flexibility policies such as telecommuting provide alternative ways for individuals to meet the needs of both their work and family roles. The benefits of flexibility within the workplace are founded on the principles of boundary theory, which focuses on both the salience of each role (work and family) and the permeability of the boundaries between the roles (i.e., how easy it is to transition between roles; Ashforth et al. 2000). Within this theory, flexibility policies can facilitate integration between the work and family domains. As there are individual differences in the preferences for the level of permeability between the work and family roles, the benefits of these policies on employees will depend on the alignment between the level of flexibility offered by the policy and the degree of the mother's preference for integration (Ashforth et al. 2000; Clark 2000).

Overall, the use of flexibility policies has been associated with decreased depression in working mothers (Thomas and Ganster 1995). Unfortunately, flexibility policies are not always the full solution for maternal stress as they are often claimed to be. Hammer et al. (2005) found that the provision of flexible workplace policies were not always conducive to better mental health for mothers. They found that in some cases, conflict and stress between the work and family domains can increase when policies are in place because it encourages the mother to take on a larger family responsibility—often at the expense of her personal health needs (Hammer et al. 2005). However, the results around the negative effects of flexibility are not conclusive. Although some women may take on more family responsibilities than they should when provided with flexible workplace policies, Kossek et al. (2006) still found that on average, depressive symptoms were lower for women who took advantage of flexibility policies such as telecommuting.

Another family supportive initiative commonly offered through countries' maternal policies or through organizations is the provision of dependent care or financial assistance with dependent care. However, the impact of these policies on maternal mental health is currently understudied. Provision of childcare or child care financial assistance helps alleviate the financial burden of childcare which can help to decrease maternal stress. Unfortunately though, the research in the area of psychological health and childcare provision is inconclusive and controversial. Even with the decreased financial burden of paying for childcare, participation in care for their infant by a non-parent has been shown to be associated with negative psychological health of the mother (Baker et al. 2005). Due to the economic stressors and changing workforce, however, outside childcare is often needed to balance work demands. It seems that as with other benefits, the impact of childcare, is not based solely on the provision of these benefits but, is highly dependent on additional factors such as quality of care (Ratnasingam et al. 2012).

In response to concerns about parental stress from balancing work and their caretaker responsibilities, many countries and organizations have implemented family-friendly practices such as maternity leave, flexible scheduling, and childcare. As we have seen, there are a variety of different policies and benefits that can positively impact maternal psychological health. Many of these policies have been shown to have short- and long-term impacts on women's mental health. However, provision of policies does not automatically mean positive outcomes. There are a variety of additional factors that influence the effect policies have on mental health such as use of policies, supervisor support, fit with the mother's preferences, social support, and quality. Policies in and of themselves do not determine mental health, rather there is a complex set of personal, interpersonal, and contextual factors that interact to influence maternal health outcomes. It will be important, as research continues to explore the impacts of maternity benefits on mothers, to expand the current literature by moving beyond benefit type and focusing on the interaction between type and context.

While there are a variety of different maternity benefits that can impact maternal psychological health, research in this area consistently finds that the benefit of these policies depends on additional factors such as the fit with the mother's role

preferences, infant and mother health, social support, and the quality of the benefits. Thus, while much of the research discussed below regarding different policies and maternity benefits generally suggests that these benefits are associated with positive mental health outcomes, the strength of these benefits is influenced, and may even depend, on these additional factors (e.g., individual and organizational factors). Simply having a policy in place does not lead to positive maternal mental health. Most importantly, to capitalize on the advantages of such policies, the policies must be in alignment with the mother's preferred role and the mother must choose to participate in the benefits provided. Moreover, even in the countries with generous benefits by international standards, such as, Norway and Sweden, utilization and access to benefits are still not universal (e.g. contingent upon time of service before starting maternity leave).

Child Health Outcomes and Maternity Leave

Do maternity leave policies improve the health of employees' children? Probably the most convincing evidence that it does improve child health is that certain maternity leave policies are linked to fewer infant deaths. When combining data from 16 countries, Tanaka (2005) found that more weeks of job-protected paid leave were linked to a decrease in infant mortality rates. Unfortunately, unpaid leave is not as effective, because often mothers return to work more quickly when leave is unpaid or experience increased stress due to the financial burden of taking off from work. In addition, there may be many mediating factors between maternity leave policies and infant deaths. For instance, child care provided by the parent may lead to more regular checkups and immunizations (Berger et al. 2005), which may explain the relationship with infant mortality. Throughout the following paragraphs we will discuss a multitude of child health benefits, including lower infant mortality when maternity leave is longer.

Could small amounts of leave lead to improved child health? Berger et al. (2005) used data from the National Longitudinal Survey of Youth (NLSY) to investigate links between mothers' return to work within 12 weeks of giving birth and their children's health. When controlling for important factors, such as family income and demographic factors, women who returned to work within 12 weeks were less likely to take their children for regular medical checkups, have their child immunized for DPT/Oral Polio, and breastfeed for 4–5 fewer weeks than mothers that returned to work after 12 weeks, yet there was no difference in behavioral problems (Berger et al. 2005). Baum (2002), controlling for mother's social economic status and other variables, also using the NLSY data, found that children's cognitive ability was related to the amount of maternity leave taken by their mother. Thus it does, in fact, seem that a short amount (i.e. 12 weeks) of maternal leave can impact child health outcomes.

Baker and Milligan (2008) provide a unique quasi-experimental study conducted in Canada. They studied mothers giving birth before and after December 31st,

2000, a date when a major change in public policy on maternity leave was made. Mothers giving birth before this date were given a maximum of 6 months of job-protected paid maternity leave. For mothers giving birth after this date, the amount of job-protected paid maternity leave was extended to a year in most provinces. While the study is not a purely experimental study, the design is arguably better than correlational studies.

Results from this study found that the policy reform was associated with a shift in attitudes towards taking maternity leave and use of childcare programs. The proportion of mothers who remained on leave at 3, 6, 9, 12 months postpartum increased after the policy reform (Baker and Milligan 2008). In addition, although paid maternity leave was offered to mothers through three months both pre- and post-reform, this study found that more women were on leave at 3 months postpartum after the policy reform than before the reform. This change in use of maternity leave without a change in benefits for this time period postpartum suggests that the mothers are not only taking longer maternity leaves because the new policy offers them longer paid leave but, also that these policies may be shifting attitudes towards taking maternity leave.

Children were healthier after the policy change than before. At 9 months, the mothers post-reform were more likely to be still breastfeeding than mothers pre-reform (Baker and Milligan 2008). At 7–12 months, children born post-reform had lower rates of child asthma, allergies, and chronic health conditions than children pre-reform (Baker and Milligan 2008). Similar results were found when the children were 13–24 months for child ear infections rates (lower rates post reform).

Methodological Barriers and Future Directions

Two of the greatest barriers to the study of maternity benefits are that (1) a common conceptualization and definition of maternity policy does not exist and (2) general conceptual framework that includes different types of support offered by different countries is also lacking. Without a consistent definition and comprehensive understanding of the benefits offered by each country, the study of maternity policy and benefits remains disjointed and makes it challenging to disentangle the impacts and effects of these policies. The various contexts of each country make it harder to compare the effects of these policies on employees, organizations, and society. To begin to remedy this, future studies should identify work-family policy design objectives and goals, and link these to systematic measurement.

This lack of comprehensive and comparable basic statistics—such as the actual usage of policies and the proportion of parents who are not eligible—limits the ability to generate specific conclusions about usage. Also, as we have seen, the research about differences based on countries and user demographics (e.g., religion or ethnicity) are sparse. Given the limited information about user demographics, we are not able to test the interactive effects of user's status on policies' usage.

For instance, women in higher status jobs may have easier access to maternity benefits; however, they are also more likely to have easier access to a host of other benefits. In contrast, women in lower status jobs, with more limited access to maternity related benefits, who actually have access to any maternity benefit may actually benefit more from less. This further confines our understanding of the diversity in usage and the experience of using maternity policies. Thus, we were unable to draw conclusions about the experience of parents who do not use eligible leave and parents who are unable to use leave because they are not eligible (Moss and Deven 2006).

In addition, although much of the research discussed earlier supports the provision of maternal policies, less is known about how the implementation of these policies influences societal, organizational, and maternal policies. Therefore, to help understand how policy change and the implementation of maternity policies influences attitudes, behavior, and other outcomes, research conducted during the periods before, during, and after a major policy change in maternal policy is necessary. To provide the most benefit to our understanding of maternal policy, this research should strive to be longitudinal and track opinions of employees and employers, as well as how the policy change affects gender equality and the health of employees and their families. A full examination of the cost of benefits of the new policies is needed to determine the success of such policy reform.

We argue that one important element of future research on maternity benefits should focus on maternity policies in non-Western and developing countries. The majority of the research conducted in the realm of maternity policies is conducted in Western/developed countries; however, the experiences of mothers and organizations in these countries may be different from mothers in non-western or developing countries. For instance, legally mandated parental leave may be unrealistic in some countries due to a governments' limited capacity to provide basic infrastructure and services to citizens or in countries where most jobs are part of the informal economy. Even in situations such as these, further research should investigate what types of comparatively low cost solutions (e.g. the provision of flextime to new mothers) can serve as preliminary benefits that employers and governments in developing countries may be able to provide without requiring significant nation and employer-based resource expenditures. In addition, the gender role expectations in non-western countries may be different and pose unique challenges to mothers in these countries. Thus, it is important that the influence of these challenges on maternity policies and outcomes be understood to best develop maternity policies that will maximize benefits to parents, children, organizations, and society.

In order to advance our understanding of the benefits and drawbacks of the different leave policies, further attention to the tenets of identity and role theory are likely to be useful. Whether women, children, families, and societies reap the intended benefits of maternity policies is likely contingent upon women's identification with maternal and career roles. Women who base their identity strongly on their careers may not be as positively affected by generous maternity policies as women whose primary focus is on their role as mothers. We would argue that these relationships would hold particularly in organizations that employees do not

perceive as family supportive. In fact, mothers with a career-oriented identity may view the utilization of maternity benefits as accepting help that their employer only grudgingly provides, potentially resulting in fear of career-related repercussions.

We also recommend that research on the outcomes of maternity benefits be of interdisciplinary nature, ideally containing methodological design aspects derived in economics for the measurement and costs of benefits, and research from organizational behavior, development psychology, and education to further examine the impact of policies on mothers, children, families and society.

General Suggestions for Policy Making and Organization

In order to better support employment and family life, policy makers should take a holistic approach in considering maternity policies (Deven and Moss 2002). Tijdens (2002) regards parental leave as one of four pillars to reconcile employment and family alongside equality plans in legislation, collective bargaining, and enterprises. Maternity policies should be considered as an integrated package of supports to avoid “gaps” in support, for example, when the parental leave ends, a good-quality, affordable childcare should be available (Adema 2012).

Policy makers need to define their objectives for maternal policies and, as changes in legislation take place, implement rigorous evaluation efforts to understand whether policies fulfill previously defined objectives (Moss and Deven 2006). For instance, creating large-scale national and world wide data collection efforts can shed light on eligibility for, usage and impact of maternal policies among diverse groups. Currently, only a limited number of organizations sponsor international and comparative cross-cultural research on maternity benefits and similar phenomena. A stronger emphasis on the possible benefits of cross-cultural research in this area is likely to benefit our understanding of the types of benefits that will most systematically affect family, individual and organizational well-being.

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