

## Postpartum Paid Family Leave in New York City, 2016 to 2022

Paid Family Leave (PFL) enables employed individuals to take job-protected paid leave from work to bond with a newly born, adopted, or foster child or to care for a sick family member. In studies throughout the United States, postpartum PFL is associated with improvements in breastfeeding, postpartum depression, and postpartum health care use.<sup>1</sup> However, inequities exist with Latina and Black mothers and birthing people being less likely to have access to paid parental leave than their white counterparts.<sup>2</sup> These inequities may be rooted in systemic issues such as occupational segregation, in which mothers and birthing people of color are less likely to have jobs that provide postpartum PFL benefits, and differential access to information about benefit eligibility.<sup>3</sup>

### New York State Paid Family Leave Rollout Schedule

Year	Maximum Duration	% of Wages	Maximum Weekly Benefit
2018	8 weeks	50%	\$653
2019	10 weeks	55%	\$746
2020	10 weeks	60%	\$841
2021	12 weeks	67%	\$972
2022	12 weeks	67%	\$1,068

The New York State Paid Family Leave (NYSPFL) policy was first implemented in 2018 and incrementally rolled out through 2021. The policy provides up to 12 weeks of PFL

for most private sector employees, public employees whose employers opt-in to the program, and self-employed individuals who opt-in to the program. Immigration status and citizenship are not factors in determining eligibility.<sup>a</sup> A state-wide evaluation of NYSPFL demonstrated an increase in equitable use of PFL and improvement in breastfeeding outcomes,<sup>3</sup> however there have been no evaluations of this policy specifically for New York City (NYC). This data brief describes the work and leave status of NYC residents who gave birth between 2016 and 2022, broken out into three time periods: pre-NYSPFL (2016-2017), NYSPFL rollout (2018-2020), and post-NYSPFL rollout (2021-2022).

### Definitions:

**Paid family leave (PFL):** Leave from work that has any amount of pay, which may include one or a combination of the following: New York State Paid Family Leave (NYSPFL) benefits, accrued vacation or sick time, New York State Temporary Disability Insurance benefits, and/or paid parental leave offered by an employer.

**Exclusively paid family leave for 12 or more weeks:** Individuals who reported taking exclusively paid family leave for at least 12 weeks after giving birth; note that individuals who had any amount of unpaid leave are not included in this category, as we were unable to determine how many weeks of their leave time was paid.

**Birthing people:** Any individual who has given birth, regardless of their gender identity.

<sup>a</sup> More information on NYSPFL eligibility, employer responsibilities, and access can be found at [paidfamilyleave.ny.gov](https://paidfamilyleave.ny.gov).

## Over half of New York City mothers and birthing people worked at a job for pay during their pregnancy, and most returned or planned to return to their job after giving birth

- Prior to NYSPFL policy implementation (2016-2017), 60% of NYC mothers and birthing people worked during pregnancy. This remained consistent in 2018-2020 and 2021-2022, during and after NYSPFL rollout (62% worked in both periods).
- Prior to NYSPFL (2016-2017), 80% of mothers and birthing people who worked during pregnancy had returned or planned to return to the same job postpartum. This increased to 84% after full implementation of NYSPFL (2021-2022).

After NYSPFL,<sup>^</sup> the percentage of mothers and birthing people in New York City who **worked during pregnancy** remained similar, while those who **returned to work postpartum<sup>‡</sup>** increased

	Worked during pregnancy	Returned to work postpartum <sup>‡</sup>
Pre-NYSPFL (2016-2017)	60%	80%
NYSPFL rollout (2018-2020)	62%	81%
Post-NYSPFL (2021-2022)	62%	84%

<sup>^</sup>NYSPFL: New York State Paid Family Leave policy

<sup>‡</sup>Individuals who had already returned or planned to return to the same job postpartum, among those who reported that they worked for pay during pregnancy

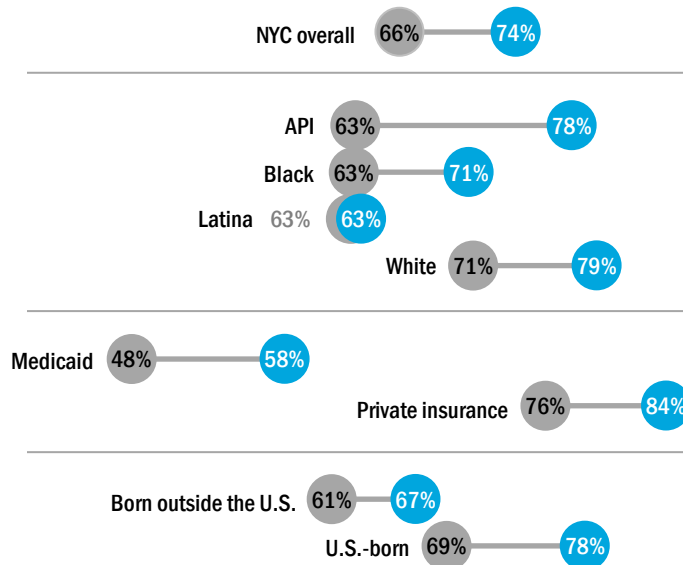
Source: NYC PRAMS, 2016-2022.

## After implementation of New York State Paid Family Leave, New York City mothers and birthing people were more likely to take any paid family leave, however inequities persisted

- After NYS PFL rollout, the prevalence of taking any PFL increased among NYC residents who worked during pregnancy and planned to return to work (66% in 2016-2017 vs. 74% in 2021-2022). The prevalence of taking PFL increased among those who: identified as Asian or Pacific Islander (API) or white; had Medicaid or private insurance; or were born in the U.S.
- After NYS PFL implementation (2021-2022), inequities in taking any PFL still existed, with the lowest rates of any PFL among Latina (63%) and Black (71%) mothers and birthing people compared with their white counterparts (79%), those with Medicaid (58%) compared with those with private insurance (84%), and mothers and birthing people born outside the U.S. (67%) compared with those who were U.S.-born (78%).

From before to after implementation of NYS PFL,<sup>^</sup> there was an increase in any paid leave among most but not all groups

Prevalence of any paid family leave, New York City, pre-NYS PFL (2016-2017) and post-NYS PFL (2021-2022)



<sup>^</sup>NYS PFL: New York State Paid Family Leave policy  
Among NYC residents who worked during pregnancy and planned to return to work  
Source: NYC PRAMS, 2016-2022

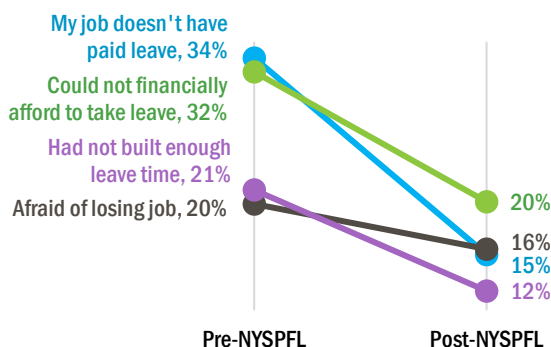
*“Having paid leave for myself AND my husband was HUGE. My recovery and our adjustment to life with a baby was made possible [and] easier.”*

NYC PRAMS respondent, 2022

## After New York State Paid Family Leave rollout, barriers affecting leave from work decreased

Several barriers to postpartum leave from work decreased after implementation of NYS PFL<sup>^</sup>

Prevalence of factors influencing postpartum leave from work, New York City, pre-NYS PFL (2016-2017) and post-NYS PFL (2021-2022)



<sup>^</sup>NYS PFL: New York State Paid Family Leave policy  
Among NYC residents who worked during pregnancy and planned to return to work  
Source: NYC PRAMS, 2016-2022

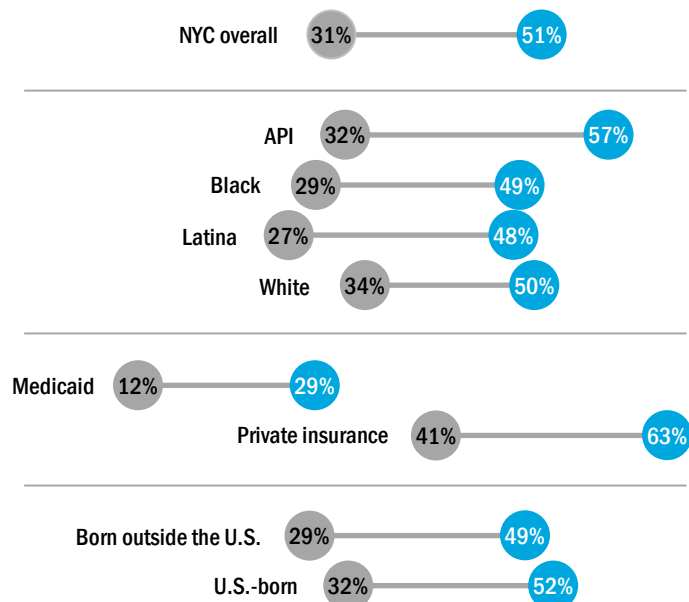
- Several barriers influencing mothers’ and birthing peoples’ decision to take any type of postpartum leave decreased after NYS PFL rollout (2021-2022). Among those who worked during pregnancy and planned to return to work, a lower proportion reported that their decision was impacted by their job not offering paid leave (34% in 2016-2017 vs. 15% in 2021-2022), not being able to financially afford to take leave (32% vs. 20%), not having built up enough leave time (21% vs. 12%), and fear of losing their job (20% vs. 16%).
- In the post-NYS PFL period (2021-2022), mothers and birthing people with Medicaid were more likely than those with private insurance to report that their decision was impacted by not being able to financially afford to take leave (26% vs. 17%) or their job not providing paid leave (19% vs. 13%).

**Definitions: Race and ethnicity:** Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian or Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

**Insurance type:** Self-reported health insurance at the time of survey completion (between 2-6 months postpartum). Most respondents had private health insurance or Medicaid. Very few had other types or no health insurance, and consequently, these groups are not included in the figures. It should be noted that income eligibility requirements for Medicaid are higher for pregnant New Yorkers, which may contribute to low uninsurance rates among this population through 12 months postpartum.

## After implementation of New York State Paid Family Leave, more New York City mothers and birthing people were able to take exclusively paid family leave for 12 or more weeks

From before to after implementation of NYSPFL,<sup>^</sup> there was an increase in exclusively paid family leave for 12 or more weeks  
Prevalence of exclusively paid family leave for 12 or more weeks, New York City, pre-NYSPFL (2016-2017) and post-NYSPFL (2021-2022)



<sup>^</sup>NYSPFL: New York State Paid Family Leave policy  
Among NYC residents who worked during pregnancy and planned to return to work  
Source: NYC PRAMS, 2016-2022

- After NYSPFL implementation (2021-2022), 51% of NYC mothers and birthing people who worked during pregnancy and planned to return to work took exclusively paid leave for 12 or more weeks, compared with 31% before NYSPFL was introduced (2016-2017).
- Use of exclusively paid leave for 12 or more weeks increased between the pre- and post-NYSPFL periods across all groups by race and ethnicity, insurance type, and nativity.
- After NYSPFL implementation (2021-2022), those with Medicaid insurance still had substantially lower rates of exclusively paid leave for 12 or more weeks, compared with those with private insurance (29% vs. 63%, respectively).

*“The rules and guidelines around [New York State] Paid Family Leave are not very clear. It was a challenge to understand how it worked, how many days we get, and how much we get paid.”*

NYC PRAMS respondent, 2021

## New York City mothers and birthing people who took exclusively paid leave for 12 or more weeks were more likely to experience beneficial health outcomes

- Compared with mothers and birthing people who did not take exclusively paid leave for 12 or more weeks, those who did were:
  - Less likely to experience postpartum depressive symptoms at two to six months postpartum (13% vs. 10%, respectively);
  - More likely to breastfeed at eight weeks postpartum (77% vs. 81%, respectively) and to exclusively breastfeed at eight weeks postpartum (32% vs. 38%, respectively); and
  - More likely to attend a health care checkup at four to six weeks postpartum (91% vs. 95%, respectively).

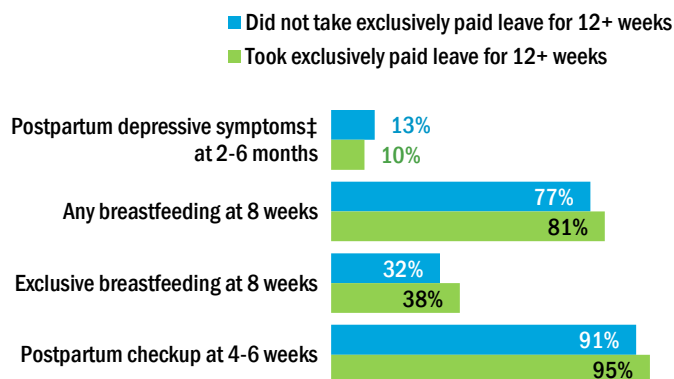
*“[New York state] has made so much great progress in taking care of families, but so much more is needed!”*

*“Paid family leave needs to be longer and more [accessible] to everyone.”*

NYC PRAMS respondents, 2022

### Mothers and birthing people who took exclusively paid family leave for 12+ weeks experienced improved maternal health outcomes compared with those who did not take this leave<sup>^</sup>

Postpartum maternal health outcomes by leave status, New York City, 2016-2022



Among NYC residents who worked during pregnancy and planned to return to work  
<sup>^</sup>These associations cannot be interpreted as causal

<sup>‡</sup>Postpartum depressive symptoms measured using Patient Health Questionnaire-2 (PHQ-2)

Source: NYC PRAMS, 2016-2022

## Implications

Between 2016 and 2020, over 66% of pregnancy-associated deaths in NYC occurred between 7 and 365 days after the end of pregnancy,<sup>5</sup> highlighting how critical the postpartum period is for maternal health. Mental health conditions (suicide and overdose) were the leading cause of these deaths, while lack of continuity of care was the second top contributor to preventable deaths.<sup>5</sup> NYSPFL is a system-level policy that has the potential to improve maternal health outcomes through financial support and job stability during a physically and mentally vulnerable time. Despite increased use of PFL after the implementation of NYSPFL, disparities in use and access barriers persist. Mothers and birthing people who identify as Latina or Black, those with Medicaid, and those born outside the U.S. are least likely to take PFL. Those who identify as Latina or Black and those with Medicaid experience the highest burden of maternal mortality due to structural racism and discrimination,<sup>5</sup> and PFL policies must prioritize them to address the maternal health crisis. It should be noted that the COVID-19 pandemic, which began in 2020, may have impacted the work and leave landscape in ways that we cannot account for in this study.

As employers have significant responsibilities with respect to implementing NYSPFL, employer education, support, and external oversight may be warranted to ensure employers comply with the policy and educate their employees. Benefit amounts could also contribute to lower utilization among certain groups, as payments may be unsustainable for NYC residents with lower salaries. Consequently, increasing benefits for low-income individuals could increase NYSPFL use.<sup>6</sup> Lastly, providing the public with accurate and accessible information on NYSPFL eligibility and support with enrollment is essential, and collaboration with trusted community partners is important to reach communities who are currently least likely to take PFL. Given the current federal threats to Medicaid and other resources for families, supporting equitable access to NYSPFL is now more important than ever.

**Health equity** is attainment of the highest level of health and well-being for all people. Not all New Yorkers have the same opportunities to live a healthy life. Achieving health equity requires focused and ongoing societal efforts to address historical and contemporary injustices such as discrimination based on race/ethnicity, and other identities. For more information, visit the World Health Organization's [Health Equity](#) webpage.

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**Data Source:** [NYC Pregnancy Risk Assessment Monitoring System \(PRAMS\) 2016-2022](#). NYC PRAMS is an ongoing population-based survey of NYC residents who recently gave birth in NYC, administered in coordination with the Centers for Disease Control and Prevention (CDC). PRAMS asks questions about experiences before, during, and shortly after pregnancy, and is administered between 2-6 months postpartum via mail and phone. Data are weighted to be representative of the entire population of NYC residents who give birth each year. This analysis contains responses from 9,337 NYC residents who gave birth between 2016 and 2022. All differences described in the report narrative are statistically significant at  $p < 0.05$ .

**Suggested citation:** Birnie L, Oknayan G, Gouse I, Friedman R. Postpartum Paid Family Leave in New York City, 2016 to 2022. New York City Department of Health and Mental Hygiene: Epi Data Brief (157); April 2026.

### References:

- <sup>1</sup> Perry MF, Bui L, Yee LM, Feinglass J. Association Between State Paid Family and Medical Leave and Breastfeeding, Depression, and Postpartum Visits. *Obstet Gynecol*. 2024 Jan 1;143(1):14-22. Epub 2023 Nov 2. PMID: 37917931.
- <sup>2</sup> Bartel A, Kim S, Nam J, Rossin-Slater M, Ruhm C, Waldfogel J. 2019. Racial and ethnic disparities in access to and use of paid family and medical leave: Evidence from four nationally representative datasets. *Monthly Labor Review*.
- <sup>3</sup> Goodman JM, Williams C, Dow WH. Racial/Ethnic Inequities in Paid Parental Leave Access. *Health Equity*. 2021 Oct 13;5(1):738-749. doi: 10.1089/heap.2021.0001. PMID: 34909544; PMCID: PMC8665807.
- <sup>4</sup> Dennison BA, FitzPatrick E, Zhang W, Nguyen T. New York State Paid Family Leave Law Associated with Increased Breastfeeding Among Black Women. *Breastfeed Med*. 2022 Jul;17(7):618-626. doi: 10.1089/bfm.2022.0015. Epub 2022 Apr 26. PMID: 35475735.
- <sup>5</sup> Maternal Mortality Review Committee, New York City Department of Health and Mental Hygiene. *Pregnancy-Associated Mortality in New York City, 2016-2020*. September 2024.
- <sup>6</sup> Koutavas A, Wang B, Slopen M, Garfinkel I, Ananat E, Collyer S, Hartley RP, Wimer C. 2024. "The Benefits and Costs of Expanding Paid Parental Leave in New York State." *Poverty and Social Policy Brief*, vol. 8, no. 1. Center on Poverty and Social Policy, Columbia University.

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# Epi Data Tables

April 2026, No. 157

## Postpartum Paid Family Leave in New York City, 2016 to 2022

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**Table 1.** Percentage of mothers and birthing people who worked for pay during pregnancy among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics

**Table 2.** Percentage of mothers and birthing people who plan to return to work postpartum among New York City residents who gave birth 2016-2022, stratified by NYS PFL rollout period and maternal characteristics

**Table 3a.** Percentage of mothers and birthing people who took any paid family leave among New York City residents who gave birth 2016-2022, stratified by NYS PFL rollout period and maternal characteristics

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**Table 5c.** Percentage of mothers and birthing people whose family leave decision was affected by fear of losing their job among New York City residents who gave birth 2016-2022, stratified by NYS PFL rollout period and maternal characteristics

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**Table 6.** Association between taking exclusively paid family leave for 12 or more weeks and select maternal health outcomes among New York City residents who gave birth 2016-2022

### Data Sources

**NYC Pregnancy Risk Assessment Monitoring System (PRAMS), 2016-2022.** NYC PRAMS is an ongoing population-based survey of NYC residents who recently gave birth in NYC, administered in coordination with the Centers for Disease Control and Prevention (CDC). PRAMS asks questions about experiences before, during, and shortly after pregnancy, and is administered between 2-6 months postpartum via mail and phone. Data are weighted to be representative of the entire population of NYC residents who give birth each year. This analysis contains responses from 9,337 NYC residents who gave birth between 2016 and 2022. All differences described in the report narrative are statistically significant at  $p < 0.05$ .

**Table 1. Percentage of mothers and birthing people who worked for pay during pregnancy among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYSPFL Rollout (2018-2020)						Post-NYSPFL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	2,611	59.6	57.5	61.6		Ref	3,854	62.3	60.5	64.1		<b>0.0464</b>	2,506	61.8	59.6	64.0		0.1455
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	444	48.5	43.5	53.5	<b>0.0000</b>	Ref	661	48.4	44.0	52.7	<b>0.0000</b>	0.9748	442	59.4	53.9	64.7	<b>0.0000</b>	<b>0.0041</b>
Black non-Latina	521	70.0	65.4	74.2	0.6260	Ref	862	67.6	63.1	71.7	<b>0.0017</b>	0.4399	506	61.3	55.8	66.4	<b>0.0000</b>	<b>0.0130</b>
Latina	768	46.1	42.3	49.9	<b>0.0000</b>	Ref	1,066	52.8	49.4	56.1	<b>0.0000</b>	<b>0.0101</b>	771	47.4	43.4	51.4	<b>0.0000</b>	0.6465
White non-Latina	832	71.3	67.9	74.5	Ref	Ref	1,177	75.6	72.7	78.3	Ref	0.0523	738	77.5	73.9	80.7	Ref	<b>0.0118</b>
Multi-racial or another race non-Latina	44	55.3 *	39.2	70.4	<b>0.0417</b>	Ref	79	71.2 *	57.7	81.8	0.4727	0.1246	40	58.1 *	40.6	73.7	<b>0.0150</b>	0.8159
<b>Postpartum health insurance</b>																		
Medicaid insurance	957	52.1	48.7	55.5	<b>0.0000</b>	Ref	1,342	53.6	50.5	56.8	<b>0.0000</b>	0.5168	1,054	49.6	46.1	53.1	<b>0.0000</b>	0.3244
Private insurance	1,198	75.5	72.7	78.0	Ref	Ref	1,912	78.1	75.8	80.2	Ref	0.1346	1,178	78.8	75.9	81.4	Ref	0.0913
Other insurance	249	39.6	33.3	46.3	<b>0.0000</b>	Ref	305	39.7	33.5	46.2	<b>0.0000</b>	0.9883	168	45.4	36.8	54.3	<b>0.0000</b>	0.3012
No insurance	159	29.9	23.0	38.0	<b>0.0000</b>	Ref	197	29.8	22.8	37.8	<b>0.0000</b>	0.9751	63	27.4 *	17.0	41.1	<b>0.0000</b>	0.7319
<b>Nativity</b>																		
Born outside the U.S.	1,392	48.5	45.7	51.3	<b>0.0000</b>	Ref	2,024	48.6	46.0	51.1	<b>0.0000</b>	0.9694	1,299	49.8	46.7	52.9	<b>0.0000</b>	0.5312
U.S.-born	1,216	72.4	69.6	75.1	Ref	Ref	1,828	77.7	75.4	79.9	Ref	<b>0.0033</b>	1,205	75.1	72.2	77.9	Ref	0.1828

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

† Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: At any time during your most recent pregnancy, did you work at a job for pay? Response option: Yes

**Table 2. Percentage of mothers and birthing people who plan to return to work postpartum among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYS PFL (2016-2017)						NYS PFL Rollout (2018-2020)						Post-NYS PFL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,560	79.8	77.6	81.8		Ref	2,483	81.1	79.2	82.9		0.3505	1,552	84.2	82.0	86.2		0.0045
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	213	84.2	78.3	88.8	0.3651	Ref	342	79.8	74.3	84.4	0.0010	0.2373	259	82.6	76.3	87.5	0.0139	0.6666
Black non-Latina	351	78.8	73.8	83.1	0.3843	Ref	583	76.8	71.8	81.1	0.0000	0.5423	314	83.2	77.3	87.8	0.0204	0.2254
Latina	364	75.5	70.4	80.0	0.0480	Ref	586	74.0	69.8	77.8	0.0000	0.6291	371	76.1	70.8	80.7	0.0000	0.8681
White non-Latina	607	81.3	77.8	84.4	Ref	Ref	909	88.3	85.7	90.4	Ref	0.0005	580	89.7	86.6	92.2	Ref	0.0002
Multi-racial or another race non-Latina	24	^	^	^	^	^	58	83.2 *	68.0	92.0	0.3492	^	24	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	484	70.4	65.8	74.5	0.0000	Ref	722	72.9	69.0	76.5	0.0000	0.3818	509	74.9	70.3	78.9	0.0000	0.1530
Private insurance	908	87.0	84.5	89.1	Ref	Ref	1,527	88.3	86.3	90.1	Ref	0.3616	934	92.5	90.3	94.2	Ref	0.0005
Other insurance	98	70.5	59.6	79.4	0.0001	Ref	125	64.1 *	53.4	73.5	0.0000	0.3801	73	63.8 *	50.3	75.5	0.0000	0.4223
No insurance	49	70.1 *	55.3	81.7	0.0024	Ref	59	64.3 *	48.2	77.7	0.0000	0.5690	18	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	668	78.2	74.6	81.3	0.1975	Ref	1,055	76.9	73.7	79.8	0.0002	0.5927	658	81.1	77.4	84.3	0.0126	0.2418
U.S.-born	892	81.0	78.1	83.7	Ref	Ref	1,427	84.1	81.7	86.2	Ref	0.0928	894	86.5	83.7	88.9	Ref	0.0058

Restricted to NYC mothers and birthing people who worked for pay during pregnancy.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: Have you returned to the job you had during your most recent pregnancy? Response options: Yes; No, but I will be returning

**Table 3a. Percentage of mothers and birthing people who took any paid family leave among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYSPFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYSPFL Rollout (2018-2020)						Post-NYSPFL (2021-2022)						
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022	
<b>NYC overall</b>	1,202	65.8	62.8	68.6		Ref	1,966	69.8	67.3	72.1		<b>0.0351</b>	1,267	73.7	70.8	76.4		<b>0.0001</b>	
<b>Race and ethnicity<sup>†</sup></b>																			
Asian/Pacific Islander non-Latina	175	62.8	54.8	70.1	0.0679	Ref	273	68.8	62.3	74.7	0.2568	0.2295	215	77.5	70.2	83.4	0.6616	<b>0.0054</b>	
Black non-Latina	259	62.7	56.1	68.9	<b>0.0374</b>	Ref	447	66.8	60.6	72.4	0.0756	0.3665	258	70.5	63.2	76.9	<b>0.0273</b>	0.1078	
Latina	267	62.5	56.0	68.5	<b>0.0287</b>	Ref	417	65.0	59.7	70.1	<b>0.0129</b>	0.5314	269	63.2	56.3	69.5	<b>0.0000</b>	0.8805	
White non-Latina	480	70.8	66.3	74.9	Ref	Ref	776	72.9	69.2	76.3	Ref	0.4604	502	79.2	74.9	82.9	Ref	<b>0.0060</b>	
Multi-racial or another race non-Latina	20	^	^	^	^	^	49	89.4 *	73.5	96.3	<b>0.0463</b>	^	19	^	^	^	^	^	
<b>Postpartum health insurance</b>																			
Medicaid insurance	321	47.6	41.8	53.4	<b>0.0000</b>	Ref	489	55.0	49.8	60.0	<b>0.0000</b>	0.0646	346	58.0	52.0	63.8	<b>0.0000</b>	<b>0.0150</b>	
Private insurance	776	75.7	72.3	78.8	Ref	Ref	1,323	79.4	76.8	81.9	Ref	0.0710	850	83.9	80.8	86.6	Ref	<b>0.0003</b>	
Other insurance	62	59.5 *	46.3	71.6	<b>0.0092</b>	Ref	77	45.3 *	32.7	58.5	<b>0.0000</b>	0.1360	46	37.6 *	23.2	54.6	<b>0.0000</b>	<b>0.0453</b>	
No insurance	26	^	^	^	^	^	43	25.2 *	13.0	43.1	<b>0.0000</b>	^	12	^	^	^	^	^	
<b>Nativity</b>																			
Born outside the U.S.	497	61.2	56.6	65.7	<b>0.0092</b>	Ref	807	61.9	57.8	65.8	<b>0.0000</b>	0.8408	514	66.9	62.0	71.4	<b>0.0001</b>	0.0928	
U.S.-born	705	69.0	65.2	72.6	Ref	Ref	1,158	74.9	71.9	77.7	Ref	<b>0.0136</b>	753	78.4	74.8	81.6	Ref	<b>0.0003</b>	

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: *Did you take leave from work after your new baby was born?* Response options (multi-select): *I took paid leave from my job; I took leave and used Temporary Disability Insurance*

**Table 3b. Percentage of mothers and birthing people who took only unpaid family leave among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYS PFL Rollout (2018-2020)						Post-NYSPFL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,202	29.0	26.4	31.9		Ref	1,966	24.5	22.3	26.8		<b>0.0113</b>	1,267	17.5	15.2	20.0		<b>0.0000</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	175	31.3	24.4	39.2	0.2307	Ref	273	27.3	21.7	33.8	0.1662	0.4099	215	15.0	10.2	21.7	0.8949	<b>0.0010</b>
Black non-Latina	259	30.4	24.7	36.7	0.2645	Ref	447	25.3	20.2	31.1	0.4117	0.2176	258	18.4	13.3	24.9	0.2472	<b>0.0069</b>
Latina	267	30.5	24.9	36.7	0.2495	Ref	417	27.7	23.0	32.8	0.0915	0.4712	269	24.5	19.1	30.8	<b>0.0028</b>	0.1613
White non-Latina	480	26.3	22.3	30.7	Ref	Ref	776	22.6	19.4	26.1	Ref	0.1805	502	14.6	11.5	18.3	Ref	<b>0.0000</b>
Multi-racial or another race non-Latina	20	^	^	^	^	^	49	3.3 *	0.7	13.6	<b>0.0064</b>	^	19	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	321	43.4	37.7	49.2	<b>0.0000</b>	Ref	489	34.9	30.2	40.0	<b>0.0000</b>	<b>0.0299</b>	346	27.4	22.4	33.1	<b>0.0000</b>	<b>0.0001</b>
Private insurance	776	21.3	18.4	24.6	Ref	Ref	1,323	17.3	15.0	19.8	Ref	<b>0.0393</b>	850	11.4	9.2	14.1	Ref	<b>0.0000</b>
Other insurance	62	32.3 *	21.4	45.6	0.0608	Ref	77	45.2 *	32.5	58.6	<b>0.0000</b>	0.1684	46	32.0 *	18.9	48.8	<b>0.0006</b>	0.9764
No insurance	26	^	^	^	^	^	43	61.8 *	43.0	77.7	<b>0.0000</b>	^	12	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	497	32.0	27.8	36.6	0.0734	Ref	807	29.8	26.1	33.7	<b>0.0002</b>	0.4424	514	20.7	17.0	25.0	<b>0.0302</b>	<b>0.0003</b>
U.S.-born	705	26.9	23.5	30.6	Ref	Ref	1,158	21.1	18.4	24.0	Ref	<b>0.0098</b>	753	15.3	12.5	18.5	Ref	<b>0.0000</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: *Did you take leave from work after your new baby was born?* Response option (multi-select): *I took unpaid leave from my job*

**Table 3c. Percentage of mothers and birthing people who took no family leave among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYS PFL Rollout (2018-2020)						Post-NYSPFL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,202	5.2	4.0	6.7		Ref	1,966	5.7	4.6	7.1		0.5481	1,267	8.8	7.1	10.8		<b>0.0021</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	175	5.9	3.0	11.2	0.1023	Ref	273	3.8	2.0	7.4	0.6763	0.3631	215	7.5	4.4	12.6	0.5913	0.5757
Black non-Latina	259	6.9	4.1	11.3	<b>0.0217</b>	Ref	447	8.0	5.1	12.3	<b>0.0484</b>	0.6644	258	11.1	7.1	16.9	0.0594	0.1653
Latina	267	7.1	4.4	11.2	<b>0.0134</b>	Ref	417	7.3	5.0	10.5	0.0631	0.9129	269	12.4	8.3	18.0	<b>0.0156</b>	0.0688
White non-Latina	480	2.9	1.7	4.9	Ref	Ref	776	4.5	3.1	6.4	Ref	0.1825	502	6.3	4.2	9.2	Ref	<b>0.0220</b>
Multi-racial or another race non-Latina	20	^	^	^	^	^	49	7.3 *	1.9	24.6	0.4963	^	19	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	321	9.1	6.2	13.1	<b>0.0002</b>	Ref	489	10.1	7.4	13.6	<b>0.0000</b>	0.6567	346	14.5	10.8	19.3	<b>0.0000</b>	0.0506
Private insurance	776	3.0	1.9	4.6	Ref	Ref	1,323	3.3	2.4	4.6	Ref	0.7231	850	4.7	3.2	6.7	Ref	0.1216
Other insurance	62	8.1	3.5	17.9	<b>0.0397</b>	Ref	77	9.5	4.3	19.7	<b>0.0167</b>	0.7925	46	30.4 *	17.3	47.6	<b>0.0000</b>	<b>0.0071</b>
No insurance	26	^	^	^	^	^	43	13.0 *	4.5	32.3	<b>0.0165</b>	^	12	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	497	6.7	4.7	9.5	0.0615	Ref	807	8.4	6.4	10.9	<b>0.0007</b>	0.3322	514	12.4	9.4	16.2	<b>0.0020</b>	<b>0.0074</b>
U.S.-born	705	4.1	2.7	6.0	Ref	Ref	1,158	4.0	2.9	5.6	Ref	0.9800	753	6.3	4.6	8.7	Ref	0.0886

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: *Did you take leave from work after your new baby was born?* Response option (multi-select): *I did not take any leave*

**Table 4. Percentage of mothers and birthing people who took exclusively paid family leave for 12 or more weeks\*\* among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYSPL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPL (2016-2017)						NYSPL Rollout (2018-2020)						Post-NYSPL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,192	30.8	28.1	33.7		Ref	1,940	39.3	36.9	41.9		<b>0.0000</b>	1,254	50.9	47.7	54.1		<b>0.0000</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	175	32.1	25.2	39.8	0.6582	Ref	269	36.9	30.7	43.5	0.2187	0.3346	215	57.3	49.4	64.9	0.1347	<b>0.0000</b>
Black non-Latina	254	29.3	23.6	35.7	0.2244	Ref	439	38.1	32.1	44.3	0.3306	<b>0.0486</b>	253	48.8	41.2	56.4	0.7536	<b>0.0001</b>
Latina	265	26.7	21.5	32.7	0.0506	Ref	407	35.4	30.4	40.7	0.0595	<b>0.0292</b>	267	48.2	41.4	55.0	0.6326	<b>0.0000</b>
White non-Latina	477	34.0	29.7	38.6	Ref	Ref	772	41.7	37.9	45.5	Ref	<b>0.0113</b>	496	50.2	45.3	55.2	Ref	<b>0.0000</b>
Multi-racial or another race non-Latina	20	^	^	^	^	^	49	61.9 *	45.4	76.0	<b>0.0190</b>	^	19	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	316	12.3	9.0	16.8	<b>0.0000</b>	Ref	482	18.4	14.7	22.7	<b>0.0000</b>	<b>0.0388</b>	341	29.2	23.9	35.0	<b>0.0000</b>	<b>0.0000</b>
Private insurance	772	40.8	37.2	44.5	Ref	Ref	1,307	51.2	48.0	54.3	Ref	<b>0.0000</b>	844	62.9	59.0	66.6	Ref	<b>0.0000</b>
Other insurance	61	13.6	6.6	25.9	<b>0.0004</b>	Ref	74	20.1 *	11.1	33.4	<b>0.0001</b>	0.3904	45	25.8 *	13.5	43.6	<b>0.0001</b>	0.1702
No insurance	26	^	^	^	^	^	43	10.8 *	4.4	24.1	<b>0.0000</b>	^	12	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	493	28.7	24.6	33.1	0.2015	Ref	796	33.8	30.0	37.7	<b>0.0005</b>	0.0860	511	49.3	44.3	54.2	0.4159	<b>0.0000</b>
U.S.-born	699	32.4	28.8	36.1	Ref	Ref	1,143	42.9	39.7	46.2	Ref	<b>0.0000</b>	743	52.0	47.8	56.1	Ref	<b>0.0000</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

† Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

\*\* Individuals who reported taking exclusively paid family leave for at least 12 weeks after giving birth. Individuals who had any amount of unpaid leave are not included in this category, even if they had 12 weeks of paid family leave, as data only indicates total length of leave and type of leave taken (i.e., all paid, all unpaid, combination of paid and unpaid). Consequently, if an individual took a combination of paid and unpaid leave, we are unable to determine how many weeks of paid leave they took.

Question: *How many weeks or months of leave, in total, did you take or will you take?* Response option: write-in for weeks or months

**Table 5a. Percentage of mothers and birthing people whose family leave decision was affected by their job not having paid leave among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYSPFL Rollout (2018-2020)					Post-NYSPFL (2021-2022)						
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,127	33.5	30.6	36.5		Ref	1,837	24.6	22.4	27.0		<b>0.0000</b>	1,195	15.2	13.0	17.7		<b>0.0000</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	165	43.0	35.1	51.3	<b>0.0009</b>	Ref	256	29.9	23.9	36.6	0.0912	<b>0.0130</b>	206	16.7	11.4	23.8	0.5913	<b>0.0000</b>
Black non-Latina	241	31.1	25.2	37.7	0.3831	Ref	409	26.8	21.3	33.1	0.3911	0.3232	247	15.6	10.8	21.9	0.8132	<b>0.0006</b>
Latina	251	39.5	33.2	46.1	<b>0.0029</b>	Ref	383	22.7	18.3	27.8	0.7052	<b>0.0000</b>	252	14.3	10.1	19.9	0.8783	<b>0.0000</b>
White non-Latina	451	27.7	23.6	32.3	Ref	Ref	738	23.8	20.5	27.4	Ref	0.1622	466	14.8	11.5	18.8	Ref	<b>0.0000</b>
Multi-racial or another race non-Latina	18	^	^	^	^	^	47	10.8 *	4.4	24.3	0.0609	^	20	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	294	43.3	37.3	49.4	<b>0.0001</b>	Ref	444	30.6	25.8	35.9	<b>0.0007</b>	<b>0.0018</b>	316	18.7	14.2	24.2	<b>0.0342</b>	<b>0.0000</b>
Private insurance	730	29.6	26.2	33.2	Ref	Ref	1,253	21.3	18.8	24.0	Ref	<b>0.0002</b>	813	12.9	10.5	15.8	Ref	<b>0.0000</b>
Other insurance	59	36.9 *	25.1	50.7	0.2659	Ref	70	34.5 *	22.3	49.1	<b>0.0373</b>	0.7971	42	28.6 *	15.9	45.9	<b>0.0136</b>	0.4251
No insurance	28	^	^	^	^	^	40	49.6 *	31.2	68.2	<b>0.0014</b>	^	11	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	461	39.4	34.7	44.3	<b>0.0012</b>	Ref	735	27.1	23.4	31.1	0.1007	<b>0.0001</b>	477	16.6	13.1	20.8	0.3386	<b>0.0000</b>
U.S.-born	666	29.4	25.8	33.2	Ref	Ref	1,101	23.1	20.3	26.1	Ref	<b>0.0079</b>	718	14.3	11.6	17.5	Ref	<b>0.0000</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: Did any of the things listed below affect your decision about taking leave from work after your new baby was born? Response option (multi-select): My job does not offer paid leave

**Table 5b. Percentage of mothers and birthing people whose family leave decision was affected by not being able to financially afford to take leave among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYS PFL (2016-2017)						NYS PFL Rollout (2018-2020)					Post-NYS PFL (2021-2022)						
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,126	32.2	29.4	35.2		Ref	1,841	23.2	21.1	25.6		<b>0.0000</b>	1,205	20.1	17.6	22.9		<b>0.0000</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	167	36.5	28.9	44.7	<b>0.0322</b>	Ref	256	24.4	19.0	30.8	0.2068	<b>0.0165</b>	207	21.1	15.4	28.2	0.9895	<b>0.0037</b>
Black non-Latina	240	32.2	26.2	38.8	0.1675	Ref	414	26.1	20.7	32.3	0.0753	0.1624	248	19.3	14.0	26.0	0.6470	<b>0.0054</b>
Latina	247	38.0	31.8	44.7	<b>0.0045</b>	Ref	377	26.3	21.5	31.7	<b>0.0427</b>	<b>0.0052</b>	254	17.8	13.2	23.7	0.3613	<b>0.0000</b>
White non-Latina	453	26.9	22.8	31.4	Ref	Ref	742	20.2	17.2	23.6	Ref	<b>0.0144</b>	471	21.0	17.0	25.7	Ref	0.0649
Multi-racial or another race non-Latina	18	^	^	^	^	^	48	19.3 *	9.5	35.1	0.8867	^	21	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	290	36.9	31.1	43.0	<b>0.0406</b>	Ref	441	28.8	24.1	34.0	<b>0.0008</b>	<b>0.0404</b>	327	25.8	20.7	31.7	<b>0.0027</b>	<b>0.0085</b>
Private insurance	738	29.8	26.4	33.4	Ref	Ref	1,264	19.8	17.4	22.4	Ref	<b>0.0000</b>	813	16.7	13.9	19.9	Ref	<b>0.0000</b>
Other insurance	58	31.2 *	20.1	44.9	0.8328	Ref	68	28.6 *	17.5	43.1	0.1499	0.7793	41	35.6 *	20.7	53.9	<b>0.0109</b>	0.6819
No insurance	26	^	^	^	^	^	38	42.6 *	24.4	63.0	<b>0.0110</b>	^	12	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	456	33.4	28.9	38.2	0.5110	Ref	730	26.0	22.4	30.0	0.0655	<b>0.0150</b>	483	24.3	20.2	29.0	<b>0.0119</b>	<b>0.0058</b>
U.S.-born	670	31.4	27.8	35.3	Ref	Ref	1,110	21.6	18.9	24.5	Ref	<b>0.0000</b>	722	17.3	14.3	20.9	Ref	<b>0.0000</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: Did any of the things listed below affect your decision about taking leave from work after your new baby was born? Response option (multi-select): I could not financially afford to take leave

**Table 5c. Percentage of mothers and birthing people whose family leave decision was affected by fear of losing their job among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYSPFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYSPFL (2016-2017)						NYSPFL Rollout (2018-2020)					Post-NYSPFL (2021-2022)						
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,125	19.9	17.5	22.6		Ref	1,847	18.0	16.0	20.2		0.2485	1,199	15.7	13.4	18.3		<b>0.0183</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	168	30.0	23.0	38.0	<b>0.0027</b>	Ref	256	24.1	18.7	30.4	<b>0.0007</b>	0.2248	205	21.8	15.9	29.1	0.2069	0.1131
Black non-Latina	240	17.9	13.3	23.7	0.9844	Ref	416	18.7	14.1	24.4	0.0873	0.8350	249	12.1	7.8	18.2	0.1583	0.1305
Latina	253	18.1	13.5	23.9	0.9354	Ref	383	22.0	17.5	27.3	<b>0.0027</b>	0.2917	253	12.4	8.6	17.5	0.1400	0.1038
White non-Latina	444	17.8	14.4	21.9	Ref	Ref	741	13.8	11.3	16.8	Ref	0.0877	468	17.0	13.5	21.3	Ref	0.7684
Multi-racial or another race non-Latina	19	^	^	^	^	^	47	16.8 *	8.1	31.6	0.5989	^	20	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	291	20.9	16.3	26.3	0.6302	Ref	444	18.3	14.4	23.0	0.6775	0.4456	320	14.0	10.2	19.0	0.4923	<b>0.0455</b>
Private insurance	735	19.4	16.6	22.7	Ref	Ref	1,267	17.3	15.0	19.8	Ref	0.2771	816	15.9	13.2	19.0	Ref	0.1018
Other insurance	58	17.9 *	9.7	30.9	0.7943	Ref	68	12.8	6.3	24.0	0.3742	0.4526	39	24.0 *	11.5	43.4	0.2726	0.5296
No insurance	27	^	^	^	^	^	39	31.8 *	16.2	53.0	0.0800	^	11	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	456	24.8	20.8	29.3	<b>0.0017</b>	Ref	737	22.7	19.3	26.6	<b>0.0005</b>	0.4745	474	17.1	13.6	21.4	0.3383	<b>0.0106</b>
U.S.-born	669	16.5	13.7	19.8	Ref	Ref	1,109	15.1	12.8	17.7	Ref	0.4743	725	14.8	12.0	18.1	Ref	0.4177

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

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Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (< 60) or wide confidence interval (> 20%).

^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: *Did any of the things listed below affect your decision about taking leave from work after your new baby was born?* Response option (multi-select): *I was afraid I'd lose my job if I took leave or stayed out longer*

**Table 5d. Percentage of mothers and birthing people whose family leave decision was affected by not having built up enough leave time among New York City residents who gave birth 2016-2022, stratified by New York State Paid Family Leave (NYS PFL) rollout period and maternal characteristics**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Pre-NYS PFL (2016-2017)						NYS PFL Rollout (2018-2020)						Post-NYS PFL (2021-2022)					
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, between time periods	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2018-2020	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-value, between groups	p-value, 2016-2017 vs. 2021-2022
<b>NYC overall</b>	1,103	21.2	18.7	23.9		Ref	1,816	16.0	14.2	18.1		<b>0.0017</b>	1,193	11.8	9.8	14.1		<b>0.0000</b>
<b>Race and ethnicity<sup>†</sup></b>																		
Asian/Pacific Islander non-Latina	164	25.6	19.1	33.5	<b>0.0030</b>	Ref	252	25.8	20.0	32.4	<b>0.0000</b>	0.9750	202	11.2	7.1	17.3	0.3900	<b>0.0018</b>
Black non-Latina	237	31.0	25.0	37.7	<b>0.0000</b>	Ref	411	22.6	17.6	28.5	<b>0.0000</b>	0.0505	250	20.6	14.9	27.7	<b>0.0003</b>	<b>0.0288</b>
Latina	245	20.4	15.5	26.3	0.0581	Ref	375	14.9	11.3	19.5	0.0963	0.1099	254	10.7	7.2	15.7	0.4389	<b>0.0073</b>
White non-Latina	438	14.4	11.2	18.2	Ref	Ref	726	11.0	8.8	13.8	Ref	0.1182	463	8.7	6.2	12.3	Ref	<b>0.0198</b>
Multi-racial or another race non-Latina	18	^	^	^	^	^	48	9.7 *	3.9	22.0	0.7715	^	20	^	^	^	^	^
<b>Postpartum health insurance</b>																		
Medicaid insurance	283	19.8	15.3	25.3	0.5718	Ref	437	18.6	14.7	23.1	0.0632	0.7005	316	12.7	9.0	17.6	0.5144	<b>0.0364</b>
Private insurance	723	21.6	18.5	25.0	Ref	Ref	1,246	14.3	12.2	16.6	Ref	<b>0.0002</b>	816	11.1	8.8	13.8	Ref	<b>0.0000</b>
Other insurance	57	17.1 *	8.9	30.3	0.4645	Ref	67	20.6 *	11.8	33.4	0.2017	0.6508	38	12.4 *	4.1	32.1	0.8393	0.6032
No insurance	27	^	^	^	^	^	38	35.6 *	19.4	56.0	<b>0.0057</b>	^	10	^	^	^	^	^
<b>Nativity</b>																		
Born outside the U.S.	439	21.9	18.0	26.3	0.6786	Ref	723	20.0	16.7	23.7	<b>0.0021</b>	0.4992	473	14.9	11.5	19.1	<b>0.0248</b>	<b>0.0168</b>
U.S.-born	664	20.7	17.6	24.3	Ref	Ref	1,092	13.6	11.5	16.1	Ref	<b>0.0004</b>	720	9.8	7.5	12.6	Ref	<b>0.0000</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

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Bold p-values are significant at the 0.05 level; calculated using logistic regression.

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^ Data are suppressed due to unreliable estimates resulting from small sample size (< 30).

<sup>†</sup> Latina includes people of Hispanic or Latino origin, as self-identified on birth certificate records from their most recent birth. Asian/Pacific Islander (API), Black, and white race categories exclude those who identified as Latina.

Question: Did any of the things listed below affect your decision about taking leave from work after your new baby was born? Response option (multi-select): I had not built up enough leave time to take any or more time off

**Table 6. Association between taking exclusively paid family leave for 12 or more weeks\*\* and select maternal health outcomes among New York City residents who gave birth 2016-2022**

Source: NYC PRAMS, 2016-2022

Estimates are weighted to be representative of all live births in NYC to NYC residents during the specified time period

	Did not take exclusively paid leave for 12+ weeks				Took exclusively paid leave for 12+ weeks				p-value, crude	p-value, adjusted***
	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval	Sample Size	Prevalence (%)	Lower 95% Confidence Interval	Upper 95% Confidence Interval		
<b>Mental health</b>										
Postpartum depressive symptoms at 2-6 months postpartum	2,482	12.9	11.5	14.4	1,835	9.9	8.5	11.6	<b>0.0076</b>	<b>0.0187</b>
<b>Breastfeeding</b>										
Any breastfeeding at 8 weeks postpartum	2,452	76.9	75.0	78.7	1,827	81.2	79.0	83.2	<b>0.0031</b>	0.0538
Exclusive breastfeeding at 8 weeks postpartum	2,322	32.3	30.2	34.5	1,743	38.2	35.6	40.8	<b>0.0006</b>	<b>0.0173</b>
<b>Health care utilization</b>										
Postpartum checkup at 4-6 weeks postpartum	2,503	90.5	89.1	91.8	1,839	94.6	93.2	95.7	<b>0.0000</b>	<b>0.0012</b>

Restricted to NYC mothers and birthing people who worked for pay during pregnancy and plan to return to the same job postpartum.

95% Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

Bold p-values are significant at the 0.05 level; calculated using logistic regression.

\* Estimates should be interpreted with caution, potentially unreliable due to small sample size (&lt; 60) or wide confidence interval (&gt; 20%).

\*\* Individuals who reported taking exclusively paid family leave for at least 12 weeks after giving birth. Individuals who had any amount of unpaid leave are not included in this category, even if they had 12 weeks of paid family leave, as data only indicates total length of leave and type of leave taken (i.e., all paid, all unpaid, combination of paid and unpaid). Consequently, if an individual took a combination of paid and unpaid leave, we are unable to determine how many weeks of paid leave they took.

\*\*\*Adjusted for race and ethnicity, postpartum insurance type, and nativity.

**Questions:**

Postpartum depressive symptoms calculated using modified Patient Health Questionnaire-2 (PHQ-2):

Questions:

*Since your new baby was born, how often have you felt down, depressed, or hopeless?**Since your new baby was born, how often have you had little interest or pleasure in doing things you usually enjoy?*Response options: *Always* or *Often* to either question

Breastfeeding duration and exclusivity:

Questions:

*How many weeks or months did you breastfeed or pump milk to feed your baby?**How old was your new baby the first time he or she drank liquids other than breast milk (such as formula, water, juice, or cow's milk)?**How old was your new baby the first time he or she ate food (such as baby cereal, baby food, or any other food)?*

Response option: write-in for weeks or months

Postpartum checkup:

Question: *Since your new baby was born, have you had a postpartum checkup for yourself? A postpartum checkup is the regular checkup a woman has about 4-6 weeks after she gives birth.*

Response option: Yes