Moms and families speak out about the importance of maternal mental health
Dear Leaders,

At MomsRising / MamásConPoder, we have been hearing from families across the country about the critical need for improvements and supports for maternal mental health like mental health services, paid family and medical leave, affordable child care, an extension of Medicaid coverage, and better mental health diagnosis and treatment for new moms.

Moms like Kristin who shared her experience with MomsRising:

“I wasn’t diagnosed with postpartum depression until my daughter was 4 or 5 months old and by that point my Medicaid had already expired. Without diagnosis and treatment of my postpartum depression I don’t know what would have happened – I was losing the ability to take care of my daughter and was struggling with suicidal thoughts. I was fortunate enough to find a clinic and mental health program in my county where the fees were on a sliding scale and to have a mom who could help me out somewhat; not everyone has that.”

In the following pages, you will read the real-life experiences of moms and families that demonstrate how we, as a nation, are failing to provide the supports needed to shore up maternal mental health. Mental health is a common pregnancy-related struggle affecting up to a quarter of people who have recently given birth, with a higher instance among low-income people, who are more likely to be covered by Medicaid or CHIP. Medicaid plays a critical role in making sure pregnant people have health care coverage, covering nearly half of all births in the United States. This health insurance program is especially important for people of color, covering two-thirds of Black, American Indian or Alaska Native, and Native Hawaiian or other Pacific Islander births. However, for many people, coverage ends just 60 days after giving birth.

Access to mental health services is critically important for the well-being of the birthing person, their children, and family. Research has found that postpartum depression can last years after giving birth and having insurance increases a person’s ability to access mental health care. However, far too many new parents find themselves without health care coverage for many reasons.

In addition to a lack of health care access, not having paid family and medical leave or affordable child care options contribute a great deal to stress, anxiety, and depression for new parents. A nationwide survey recently found that 70% of moms are feeling overwhelmed and stressed, about half of parents are feeling depressed and hopeless, and that fewer than 15% of moms are getting enough sleep.
Racial disparities in maternal mental health are also of great concern. Black women experience both higher rates of prenatal depressive symptoms and significantly lower use of postpartum counseling and medications than their white counterparts. There should be universal screening and culturally competent treatment for every person who births a child.

We must do better. Families are the backbone of our communities, our economy, and our nation. Our policies should reflect that.

Sincerely,

Kristin Rowe-Finkbeiner, Executive Director and Co-Founder
Donna Norton, Executive Vice President
Monifa Bandele, Chief Equity & Strategy Officer
Tina Sherman, Senior Director
Felicia Burnett, National Director

5. Racial inequities in the course of treating perinatal mental health challenges: Results from listening to mothers in California, https://pubmed.ncbi.nlm.nih.gov/34459012/
I am a mother of 7 children. I married into a mixed family. My husband had 2 girls and I had a girl and a boy. We met while we were in the military. We both got out of the military at the same time in 2013-2014. I was out just slightly earlier than my husband. We moved our family from Killeen, TX to Sierra Vista, AZ.

I have been in and out of work, working slightly over 2 years since 2013. In between I was going to school. I finally achieved my Associates degree in the fall of 2017. Just months after I gave birth to my last son. I decided to continue to pursue my education with my GI bill and found myself with my nephew from CPS. We ended up adopting him in 2019.

In 2020 I was paying $1,800 a month for childcare. It was more than my mortgage. In my job I made slightly over $1,800 a month. I was basically working for free. I also got diagnosed with fibromyalgia at the beginning of 2019. This caused major issues. My depression at the end of 2020 was at its peak. I cried every day that I was working and I was working from home with 5 children and the older children were homeschooling. I lost it.

I ended up resigning from a job I loved, because it was not worth my mental health and stress and the cost of childcare. There was no paid family leave. I got 40 hours of sick leave for my children, but it was really the same 40 hours I was afforded of sick leave. I ended up with FMLA for several issues, which caused problems as I was not getting paid and I was sick a lot.

Affordable childcare would have made a huge difference for my family if I was actually able to keep more of the money I was making. But instead I was losing my entire paycheck to daycare. My husband now is the main breadwinner as I just try to make it raising my 5 children and choosing to ultimately homeschool them due to being disgruntled with the school system and not willing to risk my kid’s health and ultimately mine.

The child tax credit has ultimately helped replace some of my income lost, but it is still not enough. Mothers and Fathers and caregivers alike are what holds society together and produces the future of this country.

– Victoria

Arkansas

I am a mother to three beautiful children ages 5, 2, and 1 month. I recently had to go back to work before I was even released from the doctor because my bills were piling up and I felt like I was going to lose everything. My husband didn’t make as much money as I do at my job so he quit to take care of the kids.

If we were able to have access to paid family/maternity leave and free child care I could have spent more time with my infant instead of rushing back to work and my husband would also be able to find a good job.

It would also relieve some stress off of me to know that if my kids or husband get sick I could take off work to take care of them and not have to worry about missing a paycheck.

– Kayli
California

Maternal mental health is having the resources to help navigate the emotional and psychological struggles (that can often become physical struggles) of being a mom. One of the biggest struggles for me is feeling guilty for wanting to take time for myself. With my first kid it was the feeling of low-key abandoning my baby and now with two kids it's the guilt of not being there to help my partner.

In the back of my mind I know that I’ll be a better parent if I can have a few hours to myself for resting and recharging, but I've struggled with “allowing” myself this much needed reprieve.

– Tiffany

Our healthcare coverage doesn’t really work and isn’t accepted locally in our area and the sad part is, it’s Medcali for Medicaid in California. It requires you to travel over an hour just to see a dentist, doctor or eye exam. And the mental health coverage isn’t covered at all. So I can only imagine the mothers who have smaller kids and babies at home right now during this trying time and my thoughts and motivational inspiration of keep pressing on and never give up will help them pull through their mental exhaustion.

– Crystal

My daughter had suffered from postpartum depression with all three of her children. She has never been able to get any form of medical help for this at any time. She has a fifteen month old, a five year old and an eight year old. She completed nursing school as an RN while pregnant with the baby, and right after giving birth.

– Lori

I am a single mother of two. I have limited help and I have to return to work soon. I can barely afford to put one child in daycare, and I’m trying to figure out how to make it work with two. I don’t want to have to take out another loan just to cover childcare expenses. I don’t qualify for subsidized childcare at this time and I can be at risk of losing my job if I don’t return back to work soon. Other countries are given up to a year of maternity leave and get universal healthcare, and that should be the same for mothers in the United States as well. I am in desperate need of some help.

– Alyson

I’m a high school teacher with insurance through my work. I pay for half the monthly cost. I gave birth early (36 weeks). We get 4 weeks of leave for a vaginal birth and 6 weeks for a C-section, but are not paid for it. First, they apply all of our accumulated sick days to cover the absence. Then, we get part of our salary if we have previously signed up and paid for income protection. After a set time, that ends and we are not paid. That forces women to return early regardless of whether they need extra leave.

I had complications after the birth of my 1st child that required extra time off due to surgery and limits on being allowed to drive. My second child was born with heart murmurs and needed to see a specialist regularly, so that delayed my return. Finding childcare was another challenge. We need better prenatal and postnatal care in this country.

– Lauren

Colorado

Currently pregnant with my second child, my husband and I waited 6 years to have our second child because of the struggle to find quality, affordable childcare, and the need to work, pay student loans and other bills, not to mention the high cost of housing in Colorado. Now that we are pregnant again we are finding that we cannot find openings for our infant at a daycare for after she is born in November. Additionally, not having guaranteed paid leave, we will have to be financially dependent on savings to get us through the time I will need for maternity leave. And with our son, we struggled to find quality childcare from when we were then living in rural/mountain Colorado.

Being a parent this day and age in the US is a great financial struggle and balancing act and not even attainable for many.

Source: https://inthesetimes.com/article/the-real-war-on-families

ENSURING ACCESS TO PAID FAMILY & MEDICAL LEAVE HAS BEEN ASSOCIATED WITH IMPROVED MENTAL HEALTH OUTCOMES
people because of the high costs (or lack of) childcare, the realities of unpaid leave, and the overall high cost of living. The reality is, two incomes are very much needed. But how do you balance two working parents with the demands of child-rearing and the desire to have a close bond with your children? Paid leave (as well as medicare for all) are desperately needed in our country.

– Emily

I wasn’t diagnosed with postpartum depression until my daughter was 4 or 5 months old and by that point my Medicaid had already expired. Without diagnosis and treatment of my postpartum depression I don’t know what would have happened – I was losing the ability to take care of my daughter and was struggling with suicidal thoughts. I was fortunate enough to find a clinic and mental health program in my county where the fees were on a sliding scale and to have a mom who could help me out somewhat; not everyone has that.

– Kristin

I have a 6-month-old daughter. I would have loved to take a full year to stay home caring for her, but by the time she reached 3 months, we had exhausted the credit cards and put off debt for too long so I needed to work to provide for my family. (That issue might have been solved if we had a national parental leave program but alas).

There are a few daycares around us that we looked into. Nearly every one of them had a year-long waitlist. Luckily, we found one that could take us. We pay $414 a week for 3 days. That’s well over $21,000/year which is roughly half of my husband’s income. We’ve thought about having him be a stay-at-home dad, but what income he does bring in, we do really need to help pay off medical debt from my daughter’s birth and our student loan debt.

I don’t have rich ambitions. I want to live in a comfortable environment and raise the child we waited so long for. I want her to grow in a safe learning environment. I would like to stop stressing about money for just one minute. What do less fortunate families do?! We are far from destitute, and yet, the cost for childcare is devastating us. We had dreamed about our little girl for years and tried to wait and plan as best as possible, and I honestly don’t fault the people who decide not to have children because of the expense. If America doesn’t start supporting its families, it will soon see a childless future.

– Heather

I worked for a company that offered no maternity leave. When my son was 8 weeks old, I went back to work part time. At 14 weeks old, I went back full time. I was supposed to go back when he was 12 weeks old, but we couldn’t get childcare. At 7 months old, I lost my job. The first year of your child’s life is supposed to be magical. Instead, it was filled with worry and stress. It was not only unhealthy for my mental health but made everything extra difficult. Mothers should get at least a year off to spend with their baby. If they had this, breastfeeding would be easier, their mental health would be better and as a result, the baby would be healthier and happier. The cost of that first year of paid time off would result in reduced costs over that child’s lifetime. Please help new mothers. It shouldn’t be this way.

– Chandni

I have experienced issues with paid family and medical leave twice - for both of my children and at two separate employers.

With my first child, my employer did not meet “FMLA requirements” by just a few people so I was totally denied any FMLA. Our company offered disability so I took “advantage” of that for 6 weeks. Between my disability and paid time off, I was able to take only 7 and a half weeks off before returning to work. My employer let me work from home until my baby was 3 months but it was still a traumatic, anxiety-producing struggle to return to work so soon. I felt constantly bullied and was reminded that I was “lucky” to work from home for this time. No one checked in on me and some people referred to me working at home as “maternity leave” or a “vacation.” I missed out on so much with my son because I was forced back to work before I was ready, mentally, physically or emotionally. Before I went out my boss screamed at me that “no one else should be expected to do my job” while on maternity leave.
To add to an already-stressful situation, I had an incredibly traumatic birth. I almost bled to death and died and my son ended up in the NICU due to breathing issues.

What’s worse, I was made to feel as if my employer was doing me a favor by allowing me to take any time off at all. My coworker was pregnant and had her child a few months before me - she felt so intimidated by our employer that she worked full time (from home ... but still!) from the day after her c-section.

When I returned to the office, I requested a few work from home days, which I thought might be met seeing as I had just successfully worked for a few months from home. I was denied and made to pump in a closet. It locked but people still kept trying to get in. It was awful. Needless to say, I left that job within a few months.

This was my second brush with maternity leave: Luckily, I work for an employer that meets FMLA requirements - but it has still been a struggle to take the time off I need to heal and bond with my baby and still be able to pay the bills.

With my current employer, I worked the SAME DAY I delivered because I needed to save up paid time off in order to get paid for at least part of my FMLA. I went without taking time off for about a year (and keep in mind this was 2020/2021 so I was working from home pregnant while watching my toddler alone since my husband is an essential worker ...) to save up for my unpaid leave.

I have mitigated this unpaid leave with a combination of using hard-earned vacation days, disability, and I have also borrowed days off which I will have to repay to my employer. I am also asking for PTO donations from coworkers, which is demeaning and makes me feel awful. HR has also been less than helpful about this.

Before I went out, my employer tried to pressure me to return earlier than 12 weeks. Some things said to me:

Did I really want to waste all that vacation? (No, but I had no choice.)

Didn’t I need the money? (Yes, but what about bonding with my baby?)

But the worst part of this leave is that Cigna insurance is refusing to pay me one day of disability since I delivered and worked on the same day. In other words, I am being punished for working hard and for working the same day I delivered my son. And in other words, a huge insurance corporation is refusing to pay a hard-working mother even though it definitely has the means to do so.

I am so sick of this. I am sick of women sitting down and shutting up because they are afraid of endangering their jobs, careers, and reputations. I am sick of employers, insurance companies, state governments, and the federal government playing hot potato with paid family leave and, in turn, each passing the responsibility and blame to someone else.

-- Caitlin

Delaware

I have had a hard time finding childcare for my son and both kids on weekends and summers. Therefore, any full-time job I have I have to quit or get fired because I will not leave a 2 and 5 year old home alone. So, I’m stuck working part time and struggling. Both pregnancies I never received a paid maternity leave which is insane. Other countries offer months of paid leave. Why are we so far behind?

-- Megan

Florida

Due to lack of good quality and affordable childcare I have simultaneously worked 40 hours a week while also taking care of my 1-year-old daughter. This is not sustainable and it’s affecting my mental health. The childcare places around me are overcrowded and understaffed. They often get closed due to COVID outbreaks and there is no mask wearing or vaccination requirements among the staff. I do not qualify for tuition vouchers to help with the costs of childcare due to my income but my income is not enough to cover my bills and also quality childcare.

-- Magdamar

Paid family leave affects so much. It affects physical healing. It affects mental and emotional healing. It allows families to pay their bills - both their regular bills and the crazy-high bills they receive from insurance after welcoming a new child into their home. Most importantly, by denying paid family leave, you are denying a child’s chance to adequately bond with their caregivers. And that is absolutely inexcusable.

-- Caitlin

Due to racism, women of color are at a higher risk of experiencing postpartum depression than white women and they are less likely to receive the care they need.

Source: https://pubmed.ncbi.nlm.nih.gov/15932842/
A few years ago, I was very sick during my pregnancy and I was forced to work, so I wouldn’t lose my health care coverage. I believe this contributed to the preterm delivery of my daughter due to preeclampsia at 36 weeks pregnant.

– Amie, Florida

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If there had been paid family medical leave back in 2017/2018; maybe I would have had a healthier pregnancy. I’m still very angry to this day that the USA is one of the few countries with unpaid family or maternity leave. It should be the law and mandated because it would save mothers/babies lives.

– Amie

On October 20, 2020, I found out that I was pregnant and getting laid off. The two events happened within hours of each other. Talk about a bittersweet rollercoaster. The joy of becoming a mother again was all but eclipsed by fear and worry about how we would be able to afford our life and be able to take care of a baby again. I was the breadwinner for my family. My son was in virtual school and my husband was still working from home at that point. They witnessed me melt down. The job market was in tatters. Across my entire industry, full-time jobs were akin to endangered species. After I picked myself up off the couch, I looked into my resources.

Unemployment. The unemployment policies and website here in Florida are beyond broken. I submitted a claim the first day I was eligible, and my claim was pending for six weeks before I received communication for the department. When I did, it was an email to verify my identity. I jumped through all of those hoops, only to find that my original claim had disappeared and the website was so incomprehensible that I was unable to determine whether I could retrieve the claim somehow or what the next steps might be. This is still unresolved. I have received $0 to date.

Healthcare. I did receive a few months of paid COBRA coverage as part of my severance, but when that expires, the premium for family coverage for medical and dental is a wildly unsustainable $3100 per month. The average cost for comparable plans in the marketplace is on average $1200 a month, typically with much higher deductibles. One plan estimates that having a baby under this plan is a mere $12,700, and that’s a “Gold” level plan. If I want to pay the monthly premium I had while employed, which was $384 per month, suddenly the annual deductible rises to approximately $15,000. Why should Americans have to gamble on their health? Is it truly protecting children and families if staying healthy means going broke in the process?

Parental leave. That there is still no paid federal maternity or paternity leave in the United States of America is unconscionable. Furthermore, Florida provides nothing at a state level. For a start, a paid option for the Family Medical Leave Act would make that law more humane and practical. How many can go without income for 12 weeks? It is simply not enough. However, 12 weeks is also not enough for there to be a net neutral effect on the health and wellbeing of a mother and newborn, and it is important to include all parents because new moms need support.

In UNICEF’s 2019 report on family-friendly policies, they recommend “at least six months of leave for all parents; safe and comfortable public and work-based places for women to breastfeed; and universal access to quality, affordable childcare from birth to children’s entry into the first grade of school.” What a different world that would be.

– Jennifer
Years ago, we were expecting our first child and were stone broke. Our gynecologist said he'd give us time to pay his bill, but they would not let me into the hospital without giving them a $350 check (or cash). Yes, that was many years ago. My husband was only making $400 a month and I’d been forced to quit working because I was pregnant.

Many companies fired pregnant women when they began getting close to their due date. Some even fired women as soon as they began to show.

We had planned to give birth in the hospital and leave immediately, but our daughter started breathing before she was born and was born bright blue. ICU for her, hospital overnight for me, and all the time frantic about how we would pay to get out. So instead of enjoying my new baby, I was worried about the bills. No one should have to go through that.

– Nancy

At 21 years of age, I gave birth to my son 44 years ago. At the time I was working in the restaurant business and was given only 3 weeks stay at home with my child. It broke my heart to leave such a small little vulnerable and innocent child in the care of strangers. Although the care that was given to him was somewhat adequate, I knew he wasn’t given the attention and the love that a child should be given at that age. Some days I picked him up and I knew he had been crying. You could see it in his face, and of course when you inquired what was wrong with your child nobody had any answers for you. To me that’s abuse but you couldn’t expect any more from minimum wage employees taking care of a stranger’s child.

To this day I have deep regrets. Now my son is all grown up. He has two very young little girls of his own. He and his wife had to make a decision about childcare. They made the decision for one of them to stop working. So here we are so many years later and nothing has changed. If we don’t raise strong confident children, we will only become a weaker nation.

– Kim

Georgia

I worked my entire pregnancy. Ironically, my baby was born on my last day of work. My water had broke while I was clocking out and I haven’t been able to go back to work because I have no one to watch my baby. With this pandemic going on and not knowing who to trust, I’m a little ashamed to say that I need help from the government. I only get food stamps, Medicaid and WIC but it’s helped me a lot.

Of course, I had some money saved up in my bank account but diapers are not cheap. Damn near $40 for a box plus babies also need wipes to clean their little booties, snacks as they get older, clothes because they’re growing every second of every day. The list goes on...after all they are human just like us grown folks.

I can’t really ask my family for help financially because we are all going through it. We all have our own stuff going on, our own lives, own families to care for, etc. Not to mention, I don’t live in the same state as them anymore. I’m on the opposite side of the U.S. as them and it’s no one’s fault but it’s just tragic.

– V

Hawaii

I am single and have a full time decent paying job thankfully, but I am nearing the end of my pregnancy and have no family close by to take care of my newborn while I go to work. Maternity leave is unpaid so I will not be able to afford rent during those months. Childcare will be more than half my paycheck.

– Natalie

Idaho

The birth of my first child in 2019, despite months and months of careful insurance planning, budgeting and scheduling with my husband, did not prepare me for the harsh realities of new motherhood in a country with no guaranteed paid family leave. I felt forced to return to my job and place our infant in daycare months before she could even roll over. I took no personal breaks at work for months on end, and stressed each day over trying to pump enough milk at my desk in under fifteen minutes at a time. I spent countless work nights up with a sick baby, because our
$14.2 BILLION
THE NATIONAL ECONOMIC COST OF PERINATAL MOOD & AND ANXIETY DISORDERS FOR MOTHERS & CHILDREN AFFECTED BUT NOT TREATED*

*In 2017

infant was catching every possible virus and germ at her daycare.

I thought the physical demands of birth would be my biggest challenge, but it was the physical and emotional exhaustion imposed on me for living in a developed country that doesn’t adequately support families. This experience made me realize that families and babies like mine were not a priority to American policy makers, and the familiar rhetoric of ‘family values’ was a joke. I demand real care infrastructure, and real support for families.

– Britt

Illinois

I had to use all of my sick days as a teacher! My boys both struggled with nursing and my recovery was difficult. My husband was only able to take off 2 weeks and the first week was mostly in the hospital for our 1st son. I was induced for two days and we had one night at home before we had to go back for two days because the baby was sick. I was terrified to not have my husband home with me and our newborn. I had to pump for a month before anyone realized the baby had tongue tie. I had to hope he would sleep long enough for me to pump, because I was alone! My family never helped, and people didn’t really visit to help me.

After baby two I now have been diagnosed with fibromyalgia. I wish to God I still had all of those sick days.

It’s completely unfair that had I been a man I wouldn’t have used up all my paid sick days, and wouldn’t get to be with my baby. It’s not fair as a woman I had to use paid sick days or take unpaid leave or work too early after giving birth and rush to find daycare! That as a woman I had to be alone with my newborn when I’ve had decades of depression, body pain I didn’t know was fibromyalgia, and tons of shame for feeling like I couldn’t properly nurse my baby.

– Michelle

My birthing experience turned out to be pretty traumatic and after 12+ hours of labor I required an emergency C-section. Recovery was challenging. I developed a crazy rash that covered most of my body and caused terrible itching. I got multiple infections and had trouble breastfeeding. I felt so stressed out when I thought I was supposed to feel all wonderful. All this combined with erratic sleep. Thankfully baby was fine. My body started to heal but nothing felt right, I found myself crying every night. My son wouldn’t sleep well and it fell to me to soothe him every night. I would feel profound sadness in those dark hours of the night even as I was loving him so much. Tears would just overtake me.

In the day I would try to do certain things but couldn’t think clearly and wouldn’t be able to work up the courage to go out even to run an errand. I had several instances of being paralyzed with anxiety and having to abandon my plan of going somewhere. I had to go back to work at 3 months and I have a demanding job where I manage a team of people. I wasn’t sleeping, up off and on all night with my son, profoundly sad, crying most nights, and still anxious but pushing on and showing up for my team and my family, sucking it up, smiling through it all. My son wouldn’t sleep through the night ever. I was burning the candle at both ends.

At 6 months my body only started feeling somewhat back to normal after the C-section surgery. At about 12 months my body was rebelling. I had lost perhaps too much weight. Mom brain (forgetfulness) was in full effect. Breastfeeding had literally sucked me dry. Life was sucking me dry. My immune system tanked and I got very sick.

At the doctor’s office I broke down. She could tell I was under a lot of pressure, asked me some questions and said, you seem to have postpartum anxiety and depression. That was the first time a healthcare provider realized what I was going through. Even though I had seen my OBGYN - she dismissed my feelings as Baby Blues – that caused me to dismiss it as well - not helpful. At 12 months postpartum, it was the first time I realized what I was going through – what it was called. I had no idea. I didn’t recognize it for what it was. I was eventually able to connect with a therapist and get help to manage the depression and anxiety. I was able to do that because I have good insurance. Without that help I was headed for a nervous breakdown.
Postpartum healthcare for all parents is SO important and I cannot emphasize it enough. I think more resources should be put into postpartum support for parents so people can get the help they need early on and when they need it.

– Lauren

**Indiana**

I was 36 when I had my last child and my kids are 13yrs apart from my 1st. I gained 76lbs and got a ugly dull dirty black color. I felt ugly inside and out. Unfortunately it’s not any baby’s fault but you think it. We carry a child and change our lives to have a healthy child no matter what the cost for damn near a year.

We have an entire child inside that changes our minds, bodies, and eventually our relations because we don’t feel like having sex or glamourizing or staying in shape or care about relations for the moment, and well any negative we as women create will be directed towards a child that deserves LOVE not mental stress. We need to stay convinced we the MOTHER is still herself after being possessed by a growing human expanding and living inside our anatomy for 9 months. That’s devastating and a man would never get that so if you are born and living today “keep women mental and safe to give birth” and keep babies alive and safe to be raised!

– Danetta

**Iowa**

When I had my first child, I worked full time for a major auto insurance company. They had no short-term disability coverage so my whole maternity leave was unpaid. Being a single mother, I was scared. I didn’t know how I was going to keep a roof over our head. Thankfully my mother pulled money from her 401k to make sure we were good until I returned to work.

– Ashley

**Kansas**

Our daughter is a single mother and she is also an ESL elementary school teacher. She had a c-section with her baby and she only had 8 weeks off, if it would have been a regular delivery she would have only gotten six weeks paid leave. We need to give new moms more time with their newborns. We are the only civilized nation that gives their new moms so little time with their babies. Some European countries give their new moms an entire year off!

– Nancy

I want to share the story of my colleague and his wife. They were both in their early 30’s and had a fairly normal well monitored pregnancy. However, my colleague lost his wife two days after giving birth while they were still in the hospital related to complications from pregnancy. If all medical information had been available to her team, she’d still be alive today.

– Shawn

“**When I had a miscarriage, I had no access to specific paid time off and felt pressured to return to work quickly even though I was still suffering physically and mentally. My boss at the time told me to “smile” on my return to work because I looked too sad.”**

– Jennifer, Kansas

wife two days after giving birth while they were still in the hospital related to complications from pregnancy. If all medical information had been available to her team, she’d still be alive today.

– Shawn

**Kansas**

When I lived in a big east coast city, our childcare for one child was more than our rent for our apartment. When I started working for the federal government, I did not have access to paid maternity leave (which is now in place). I had to string together unpaid leave along with all of my vacation and sick time in order to have time to recover from childbirth and take care of my newborn.

When the pandemic started, my daycare shut down. I was pregnant and working full time and suddenly also responsible for a 1-year-old and a 5-year-old all day long. Without workplace flexibility, I would have had to quit my job - and many workplaces did not offer flexibility. When I returned to work after the birth of my second child, I almost lost my salaried job because my boss assumed I would be too busy taking care of my children to hold a full-time job. He wanted to move me to a part-time contract position instead, which would not have even covered daycare tuition.

When I had a miscarriage, I had no access to specific paid time off and felt pressured to return to work quickly even though I was still suffering physically and mentally. My boss at the time told me to “smile” on my return to work because I looked too sad.

– Jennifer
I have two children ages 9 and 5. I also gave birth to a surrogate baby in July of 2021. I had state insurance with both of my children because neither my job nor my husband’s job offered insurance. KanCare ended right at 6 weeks. One postpartum checkup covered and any care needed after that was not covered. Multiple rounds of mastitis treatment were out of pocket and only as a last resort after trying every possible at home method.

With my surrogacy birth, I had an emergency c-section and serious blood loss. With a wonderful support system taking care of me and making sure I had everything I needed to heal, that is still one of the hardest things I’ve ever experienced. I cannot fathom how other people do it with a newborn in their house. It seems cruel to hand someone a delicate creature right after major surgery and say “okay you’re on your own now, good luck, bye!”

The surrogacy agency we worked with made sure everything I needed for a full recovery was available to me, and that should be available to every person after bringing another human into this world.

– Skylar

Kentucky

Due to the current federal guidelines when it comes to medical leave for employees, I was forced to make a decision on whether or not to use my Family Medical Leave Act to cover my physician appointments, which cut into the time I would have been able to bond with my infant. I made the decision to not utilize my FMLA to cover my physician appointments, antenatal testing, and necessary medical treatments prior to delivery. Due to this decision, my employer gave me a verbal warning about my attendance before I even had my child.

I had a traumatic cesarean delivery and was glad I had a full 12 weeks to recover from the delivery. My blood iron levels were extremely low, almost low enough that I needed a blood transfusion. This led to extreme fatigue combined with sleep deprivation and I suffered greatly from postpartum depression. I went back to work before I felt I was fully ready. Of course the nature of having an infant is well child care for them and occasional illness in their first year.

Again, due to absences from providing care to my child, my employer rewarded me with a written warning on attendance. The real kicker is, I’m a professional health care provider myself. It’s clear that our federal regulations protect employers and not employees who chose to become parents and try to provide quality care for their children. The system is broken and it needs to be fixed. I pray my daughter never knows the anxiety that having to choose between caring for her children and reporting for a job has caused me.

– Amanda

My first child was born by emergency C-section after 24 hours of fruitless labor. My cervix refused to dilate, my baby was getting stressed, and my blood pressure was getting very high. I was on Medicaid, and the night shift doctor was extremely rude and dismissive. She told me to go home and to come back once my cervix had dilated.

Fortunately, shift change came and the far more experienced daytime doctor brought me back in to be admitted. If he hadn’t done that, I would have gone home, had a stroke, and both my baby and I could have died. Even so, the stress from the long labor made my baby aspirate his meconium, and when he was delivered, he stopped breathing. He had to be intubated and was taken to the NICU.

Eight years later, I was pregnant with twins. One of the babies wasn’t getting enough nutrition because her cord wasn’t functioning properly. This time, I had excellent private insurance and received excellent care. I was admitted and kept in the hospital for a month on bed rest before my twins were finally delivered prematurely by another emergency C-section. They then spent nearly 2 months in the NICU before they could come home.

I am a part-owner of the business where I now work. That gave me the flexibility to take the necessary time to care for myself and my twins before returning to work. It also meant I was in no danger of losing my job and therefore my health insurance. I can’t even begin to imagine what I would have done if I didn’t have either the insurance or the freedom to take time off without fear of losing my job. So few women have that luxury, and it angers me that we even consider it to be a luxury. Decent health care and maternity/paternity leave should be guaranteed for all!

– Rachel

“Due to absences from providing care to my child, my employer rewarded me with a written warning on attendance... The system is broken and it needs to be fixed. I pray my daughter never knows the anxiety that having to choose between caring for her children and reporting for a job has caused me.”

– Amanda, Kentucky
Louisiana

We have lost income; paid leave was only for 2 weeks. 6 people in a home. How are we supposed to make it with 2 babies on the way any day now. We don’t know how we will eat or survive in weeks to come. How will we be able to pay bills if they build up?

– Courtnie

My wife and I were blessed to have four sons. Paid Family Leave would have made a major difference for my wife and I when our boys were born. Our first child had serious medical problems from birth and for his first three years. My wife had no paid leave so she was unable to work.

– Russell

Maine

My story is now almost 15 years old. We adopted my daughter from birth, I induced lactation, a rigorous process. At the time, my Catholic employer would only grant me unpaid FMLA and I could access my accrued time off bank. That was already depleted by the time we brought our daughter home. In this country, adoption is expensive. I know we made the choice to spend our money on becoming parents. But with a newborn at home it would have been beneficial to have at least a few weeks of paid leave with her.

My husband’s employer gave him 8 weeks paid. So, I took what we could afford, unpaid. And it took us years to recover financially from the hit. And we are reasonably comfortable. I cannot even imagine the struggles with a family that has less than we do. What happened to families first? Or is that only for those who are financially stable? A child is precious and we need to give them the best start possible, and that start needs to be without the stress of life falling apart around the family.

– Elizabeth

Maryland

I had to go back to work early to pay for my health insurance. I had to choose between my health and mental health care or staying home with my newborn. If I had had health care covered, I would have stayed home another two weeks and I expect that extra time would have meant more successful breastfeeding and more productive work when I got back. Support for parents is an investment and preventative medicine saves money. Simple as that.

– Colleen

I was very ill, had almost died from pregnancy and birth and my partner’s job was threatened when he called to come in late because I had fainted and lost consciousness, falling forward on my 6-month pregnant belly. He had to call an ambulance and go to work because we couldn’t afford to lose his new income.

When I have birth, I had to beg him to take a few days more off work when we got home because I was physically and medically unable to care for a newborn yet alone and we couldn’t afford care help for my medical needs let alone a child care helper especially because he didn’t get a single day of paid leave for the birth of our child.

When my friends from other countries hear about lack of medical/ paternity leave and protection or horrific childcare etc. They’re always so stunned and disgusted.

– Melinda

Massachusetts

When my daughter was born 2 months premature and weighing less than 3 lbs, I was so grateful to be able to take paid leave to be with her, to supply her with the best possible nutrition by expressing breastmilk, and to care for both of us at the very beginning of her life. It was heartbreaking to learn that many of the moms I met at the NICU where my daughter was treated couldn’t do the same! They couldn’t be with their little ones at the time when their presence could do them the most good -- parental presence, like breastmilk, has been shown to improve health outcomes for premature infants.

– Sophia
I gave birth to my first child last year, after undergoing two rounds of IVF at the age of 42. I was fortunate in that the state of Massachusetts allowed insurance to cover my IVF treatment up to the age of 42. After a double episiotomy, I needed to recover from the surgery after delivery. Again I was fortunate to have 6 weeks of FMLA at 60% pay. I then had to use my own benefit time which I had saved up, to cover another 6 weeks of full time paid leave. After 3 months at home I returned to work at 30 hours/week, and by 6 months I was back to 40 hours full time in the office, pumping twice a day at work.

My employer was supportive of me, but I know this is far from the norm, and many women do not have what I think of was the minimum time to heal from delivery, bond with my baby, and adjust through the most challenging first months of looking after a newborn. I believe a woman’s body really needs 6 months to recover from childbirth. The US does not recognize this, and quite frankly most women and men don’t know this. I am originally from the U.K. and am aware that new mothers (and fathers) are provided far more support and paid leave than here in the States. I am of subcontinental Indian origin.

– Aterah

INFANTS OF CLINICALLY DEPRESSED MOTHERS OFTEN WITHDRAW FROM DAILY ACTIVITIES & AVOID INTERACTION WITH CAREGIVERS

Babies depend on the emotional nurturance, protection, and stimulation that depressed mothers may not consistently provide.

Source: Zero to Three

I’m one of the lucky ones. My employer provides 12 weeks of paid maternity leave, with full benefits. After the birth of my beautiful daughter in March 2016, I received full pay for twelve weeks, there was no disruption whatsoever to my health insurance, and I continued to accrue sick, vacation, and personal time while I was out on leave. Not only did I not have to use my sick, vacation, and personal time, I continued to accrue it as if I was still working full-time.

I’m one of the lucky ones. After my daughter was born, I developed postpartum depression and anxiety. My employer-sponsored health insurance covered all the care I needed: follow-up care with my obstetrician, regular appointments with a therapist, visits with a psychiatric nurse practitioner for medication management, and prescription coverage with a small co-pay. In addition, my employer has been tremendously supportive and flexible since my return to work. Where I work, the entire management team understands that families come first: while they expect high-quality work from their employees, they also understand that morale stays high and employees work harder when they’re supported in their personal lives.

I’m one of the lucky ones. My husband is unfailingly supportive. Throughout my journey with postpartum depression and anxiety, he has been my rock. A source of unconditional love and shelter from the storm. He was able to provide this type of support, at least in part, because his employer was also very understanding. He took more time off than he had initially planned and his employer made that work.

I’m so grateful that I was able to take 12 weeks of paid leave, and that both my employer and my husband’s employer have been supportive and understanding. Quite frankly, I’m not sure how I would have survived my battle with postpartum depression otherwise.

My heart breaks for new moms that aren’t so lucky. Moms that aren’t offered paid leave. Moms that have to get by on six weeks of short-term disability payments, at 60% of their normal weekly paycheck. Moms who have to use their vacation and sick days to supplement that income, so when they return to work, they aren’t able to take time off to care for their sick baby, or to take care of themselves. Moms whose employer isn’t supportive and flexible when they do return to work. Moms who endure postpartum depression and anxiety without access to the medical care and behavioral health services they need. Moms who face any or all of the above without support from family or friends.

Years ago, I was a young woman in my twenties pregnant with insurance but it didn’t cover pregnancy. I had to travel over 2 hours to the only clinic that would see me for care. My baby died due to the inadequate care I received at that clinic. Now I am a woman in her 50s, a single mother with two wonderful children. They both have pre-existing conditions, asthma and depression. Thankfully at the moment we have good health insurance that provides for their care. Still there have been times when I’ve had to weigh the cost of going to the doctor’s or getting food that week and I have a fairly good job.

– Lisa

INFANTS OF CLINICALLY DEPRESSED MOTHERS OFTEN WITHDRAW FROM DAILY ACTIVITIES & AVOID INTERACTION WITH CAREGIVERS

THIS JEOPARDIZES

INFANT LANGUAGE, PHYSICAL, INTELLECTUAL, AND EMOTIONAL DEVELOPMENT

Source: Zero to Three
Paid leave was vital to my recovery from postpartum depression. I believe it’s necessary for all new moms to ensure they and their babies get the best start possible.

– Elisabeth

I am a mother of twin 15-month-old boys. I have a pre-existing medical condition, which is anxiety/depression. I manage very well on my medication and working with a therapist. Due to being so stable, I am able to work full time and manage my home life! My future fear is that if the affordable care act is repealed, I will not qualify for affordable insurance. If this is the case my mental health will decline and my kiddos will suffer.

– Sarah

**Michigan**

I didn’t have PPD with my first child at almost 25 y/o age, however 15 years later two weeks prior to age 40, I did. My daughter was in foster care for nine days & I was in the hospital just before she was six months old. I also found out five years after she died, less than a month before her 7th birthday in Oct of 2000, that I was living with MS. I actually had subtle symptoms all the short time she was in my life. But I didn’t know it was MS. That in itself caused us difficulties!

– Linda

I’m a full-time working mom of three children. With all three, I have not had access to paid family leave. When my first was born, I was an assistant principal at a public high school in a large city. I had access to unpaid FMLA and pieced together some sick time and personal days to get at least some pay during my time off. It was stressful to go back to work when my daughter was only 3 months old, and then not have any sick time or personal time left for the rest of the year in order to care for her or spend time with her. It’s also very challenging to take care of myself as a postpartum mom with no paid leave.

When my second child was born, I left the workforce for two years and moved closer to family because I did not have any time saved up for a paid leave and could not afford to be unpaid for several months and then pay for childcare. Now I am returning from unpaid leave 10 weeks after having my third child. I would love to spend more time with her but can’t afford taking more unpaid time.

I live in Michigan, a state with no paid leave provisions, but I work for a company based in New York, which grants parents 16 weeks of paid leave at 2/3 pay. I am not eligible for this benefit as a Michigan resident. If I could have 16 weeks of paid leave, and my husband could as well, it would be a completely different postpartum experience and lead to a better adjustment to life as a family of five. New parents – both men and women – should have the ability to bond with their newborns for a longer time without forgoing pay and experiencing the pressure to return to work so quickly.

– Annalise, Michigan

For me, it was really finding a balance between identifying as a mom and identifying as Julie. I struggled bad with postpartum depression and I didn’t know many moms when [my son] was first born. As I’ve found mom-friends I find I’m not alone in my overthinking, worry if I’m doing it right, finding the balance, letting go of the guilt, etc. however, the one area I still struggle with and project a lot is my son’s eating habits.

– Julie

Like most moms in the USA, I didn’t have the guaranteed legal protection of paid time off after the birth of my children. Most other countries in the world do require paid maternity leave, but not here!

I had all of my children in my 30s, married with both parents with steady jobs. My first pregnancy started healthy but I was told to go on bedrest for the last month, because of low amniotic fluid. They said it was high risk and I was so worried. I tried to work as many hours as I could from home lying down, but I know the stress contributed to the overall well-being of myself and my first baby. I used all my sick and saved vacation time for maternity leave, but it was a financial burden.

When I became pregnant with my second child, they told
me I have a special medical condition that makes all my pregnancies high risk, and then I would need to have very frequent medical appointments in the third trimester to check the well-being. I needed to self-inject blood thinner every day into my abdomen, and I was again so very worried. Again, because of all the hours I was out at appointments away from work, I didn’t have much maternity leave, and I didn’t have enough breastmilk for my child. He got very thin in his first three months of life until I got donations of breastmilk.

My third pregnancy was a surprise, and of course also high risk requiring the blood thinners and the frequent medical checks. At this point I had no saved sick time and it was a challenge to go back to work so quickly with a young baby at home. At this point I had three kids in daycare which was so very expensive, more than we were paying for our monthly mortgage.

I kept working because of the health insurance provided by my employer, but my job certainly wasn’t paying enough to make sense financially or emotionally. These are the kind of decisions we make as parents when there isn’t a nationalized healthcare plan and when there isn’t a federal policy to protect for family leave. Americans are at a significant disadvantage because of these shortcomings of our government.

– T

Mississippi

I planned a home birth for my son in May of 2018. At 10 cm, my midwife determined I was losing too much blood and we transferred to the hospital. Upon arriving we were automatically labeled as a “failed home birth”. No ultrasound was performed to determine the cause of the bleeding and I was forced to deliver my son vaginally with (what we later discovered) a ruptured uterus.

After his arrival, the OBGYN on call was attempting to perform internal uterine compressions when she caused the tear in my uterus to worsen. She ended up ripping me all the way down my cervix. I was then rushed to the OR to repair the ruptures. I ended up losing 12 L of blood.

I am currently 27 weeks pregnant with our miracle child (we were told we wouldn’t be able to have any more because of the risk of my uterus and cervix rupturing again). So far, I have not found a single doctor to take my case seriously. They will agree I’m high risk because I ended up having to be cut classically to repair the tears. However, none of them will respect my wishes to do a c-section before my body has an opportunity to go into labor, thus upping the chance of rupture. My family is currently in limbo praying I survive this birth, but also preparing for the worst. In a country like the U.S., this should not be a worry for my family.

– Kim

“... I think the U.S. does an abhorrent job supporting families. Babies require so much more from parents—moms and dads—than we acknowledge. Babies and new parents are treated as an inconvenience by employers, when babies and families are literally the ONLY WAY to continue the species.”

– Gretchen, Missouri

Missouri

I was fortunate enough to be able to take 3 months of maternity leave after my first daughter was born. But I still wasn’t ready to return to work at 3 months. My daughter—like MOST babies at 3 months—was not sleeping through the night. I was still experiencing intense postpartum hormones, and because of that was experiencing intense, irrational worry and fear over being separated from my daughter by work. In addition, I was breastfeeding—irregularly but OFTEN—throughout the day and night. My daughter was nowhere near on a breastfeeding schedule, which I believe is 100% normal for that age, AND I believe is essential for maintaining a strong milk supply for the baby. Though my employer was exceptional at providing space and time for pumping at work, it still made a huge impact on my milk production once I returned to work. (For those who haven’t experienced it, a woman’s body produces significantly more milk, easily, for her nursing baby, but considerably less milk for a mechanical pump. This is one of the biggest reasons why it is exceedingly difficult for women to breastfeed through the first year of a baby’s life.)

Around my daughter’s first birthday, I started to experience even stronger postpartum depression and near-crippling anxiety. But no one had told me to watch out for PPD/PPA beyond the first few months postpartum. This continued for the next year. I look back on those months now, and I am heartbroken for myself because I was terrified ALL THE TIME that something was going to happen to me or my daughter. I see how irrational it was now, but at the time, I couldn’t see it. I had multiple healthcare providers who didn’t push...
the issue or didn’t ask the right questions, and I was so mentally ill, I wasn’t capable of advocating for myself, and so I struggled through for the better part of a year.

I continued to work part time until my daughter was around 15 months and then quit to be a full-time stay at home parent. We had a second daughter, and I am still a stay-home parent. I don’t regret being a stay-at-home mom to my girls at all, but I have often thought that I would have been ready to return to a part-time position much sooner if: a) I’d been able to spend the first year at home with my daughter, and b) I’d had a job I could go back to.

I think the U.S. does an abhorrent job supporting families. Babies require so much more from parents—moms and dads—than we acknowledge. Babies and new parents are treated as an inconvenience by employers, when babies and families are literally the ONLY WAY to continue the species.

– Gretchen

Montana

My first child was born in 1992, and I had to use all my vacation and sick days because there was no maternity leave available. It added up to 4 weeks - my dear bundle of joy wasn’t even sleeping all night yet, and I was exhausted, but as our primary breadwinner, my going to work wasn’t an option for my family.

What a difference it was with my following children when I was able to use maternity leave. Paid family leave is a matter of safety, effectiveness, and productivity. Every company should know that both men and women need time off to adjust to the demands of adding children to a home.

It makes a personal difference, but it makes a bottom-line difference as well. All companies should offer paid family leave, and it should be an American value.

– Susan

More U.S. women are dying from pregnancy or childbirth complications than in recent history with the U.S. having one of the worst maternal and infant mortality rates of any developed nation. There are also scary racial disparities. Black women have consistently experienced an almost 4-times greater risk of death from pregnancy complications than White women, independent of age, parity, or education. These statistics are unacceptable, we can and must do better to ensure that births are as safe and healthy as possible for all mothers.

– Shahriar

As a mom to be who is having twins this summer, learning about how expensive childcare is, and limited resources are, it has been so stressful. It feels very wrong that as someone with a master’s and “good job” and a partner with the same that we are very worried about how we will afford the cost of childcare. It seems very wrong that being pregnant and growing a family should be tainted by the expense and lack of access to good childcare.

– Cameron

Nebraska

My daughter had an excruciating experience after her emergency c-section! The nurses would not give her pain medication, I had to practically beg them to give it to her! She was writhing in horrible pain!

– Marcia

My daughter was born at 29 weeks, I had been hospitalized at 23 weeks due to preeclampsia. I’ve always been a bigger girl, but always had low blood pressure (lower end of normal for my weight and age). My BP started increasing immediately with pregnancy, but because it was within normal limits no one worried about it. At 22 weeks, my ultrasound showed my daughter was IUGR, and my urine test showed high protein. My doctor and I made a deal. She would allow me to work mornings and be on bedrest after lunch, if I promised to see a high-risk OB. I was scheduled the next day with the high-risk doctor, my BP was fluctuating during the visit, and my temp was up, she did a quick ultrasound in her office and turned to me and said I had 2 choices, I could terminate the pregnancy today or be admitted to the hospital. So, I was admitted to the hospital. She would allow me to work mornings and be on bedrest after lunch, if I promised to see a high-risk OB. I was scheduled the next day with the high-risk doctor, my BP was fluctuating during the visit, and my temp was up, she did a quick ultrasound in her office and turned to me and said I had 2 choices, I could terminate the pregnancy today or be admitted to the hospital. So, I was admitted to the hospital. This started my FMLA which I had been saving my vacation and sick days up so that I would have enough built up to cover my maternity leave, instead it covered my hospitalization and then 6 weeks after delivery. I am, and was then too, a single mom, I ran out of vacation/sick pay during my hospital stay, and ended up homeless. I stayed with a friend after I was released. My daughter spent 14
weeks in NICU care. I brought her home the weekend of July 4th. I got a 3-day weekend to “bond” with her without nurses and machine noises surrounding us. She came home on a heart monitor, feeding tube and tons of meds.

I would have loved to have had the opportunity to spend even just a week with my baby before going back to work. Had my doctors came out and told me at the beginning that I wouldn’t be able to go home until after I delivered, I could have handled my lease better and planned ahead. But as it turns out I had to renew my lease shortly after being hospitalized and then a few weeks later break my lease... having to pay extra to break it.

Our medical care was excellent, I worked within a disability realm back then, so we were hooked up with PT/OT/SP, nutrition and WIC as soon as we left the hospital, mainly because I knew what to do. The hospital social worker was able to get us lined up with SSI as my premature daughter automatically qualified due to birth weight.

– Shanna

My first birth was a C-section due to a transverse baby. She is a healthy young woman today and the light of our lives. Four years after her birth we had a vaginal delivery as the 2nd baby turned head down 2 weeks before her due date. Tragically, she was stillborn. I don’t know if she would have had a much better chance if she was delivered the week before via a repeat C-section, but that decision should not be up to insurance companies trying to save money. My family has been devastated all the years since. We go on because of our first child, but you never “get over” the loss of a child.

– Susan

I had a C-section because, near the end of my pregnancy, I realized the baby was no longer moving. I called my doctor, went in for an ultrasound and we discovered that the cord was looped around my son’s neck 3 times and his heart rate was slowing. Unfortunately, I had been encouraged to eat a big breakfast before the ultrasound to get the baby moving which was about the worst thing I could have done. Spent a long day in the hospital, waiting to digest enough for the surgery to be safe for me, while listening to my son’s heartbeat slow to life threatening levels.

Finally, it came down to taking the chance or losing him. I’m happy to say the surgery went well and he’s a thriving 25-year-old man. Now ask me about my 2nd pregnancy, when they wouldn’t do another c-section, forced me to do a natural birth and I ended up ripping horrifically (years later I had an emergency room doctor question whether I had ever been attacked) and hemorrhaged. I still have issues in that area to this day.

– Erin

Both of my children were born via c-section. During the first one I had a high-level spinal which impacted my breathing during the delivery, which my surgical team dealt with in a very detached way. Afterwards, I had several days of nausea and vomiting due to sensitivity to anesthesia medications. For my second delivery I attempted a VBAC but met with the anesthesiologist to request an epidural v spinal if

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-- Cynthia, New Hampshire

the c-section would be necessary. He was dismissive and somewhat patronizing about my concerns, even addressing my husband more directly than me. My two healthy babies were worth it, but the first delivery was traumatic and possibly contributed to my postpartum depression.

-- Lori

About a year ago I had my son Xander and I worked for a hospital who had paid leave, if I had earned enough hours to get paid while I was on maternity leave. This was a huge problem because I had started in a new position and hadn’t earned enough hours to pay for me being out of work for the months I needed. This in turn made my anxiety and depression worse and put stress on me as a new mom coping with providing for my son and making sure he had everything he needed and so that bills were paid. Since I didn’t have hours earned to pay me on my leave, I had to deplete my savings account to make it by and this to me should never happen in this day and age. Paid maternity leave should be a basic human right.

-- Alisa

I gave birth in late 2019 three months later we entered a pandemic. The day I was due to return to the office from maternity leave, schools were closed due to the pandemic. Life turned into a literal nightmare. Last year when this started the schools were very disorganized. We had no idea what we were doing. In addition to my older child and his school issues I now was unable to get child care for the baby in order for me to return to work. Fortunately, I was allowed to work from home. The down side to this was that between helping my older child get school work done I was having to constantly bounce my baby on my hip all while trying to get work done and meet deadlines. It was extremely difficult. Initially our offices were going to be opening in July.

I obviously was too nervous to even consider sending my older child to day camp or sending the baby to daycare at this point so I attempted to take the leave that was offered in the cares act, especially since at this point, I was starting to get burnt out. HR approved it but my supervisor begged me not to take it because essentially if I was out, she would have to do my job. I was being allowed to work from home until school opened in September. Because I am a people pleaser and don’t know how to say no, I agreed and juggled and pushed through.

By the end of the summer, we realized school wasn’t going to open so the company said they didn’t plan to open offices until possibly January. The winter months were brutal. At this point I started to get very depressed and started suffering with anxiety. Work was the #1 trigger. But also, I have not gotten a minute of a break since the beginning of this. My partner works two jobs so if he’s not at one job he’s at the other. Because we are in a pandemic, I was afraid to lean on friends or family who all live in NYC. There were many days that I have no idea how I got through them but by this time my older child was a pro at logging in and out of his classes so this helped a lot.

Due to my depression, I’ve gained over 30 lbs over the course of this pandemic. There have been many days where I’ve called my supervisor in tears ready to resign from my job because it’s all too much. I have no idea how I’m expected to operate at 100% in all areas of life. Motherhood, being a “homeschooler” a homemaker and an employee. Fast forward to today, I’m still working from home but I’m sure at this point I’ll be expected back in the office sometime soon.

-- Cynthia

New Jersey

What was the happiest time of my life came to a crashing halt when I saw myself not working and wanting to be the only one taking care of my newborn. Long story short, thank God I breastfed for over a year because the two and a half days I spent at social services asking for help, to ultimately be denied. I wound up losing everything and finally got Medicaid for my severe depression 4 years too late.

-- Vivian

When I gave birth to my daughter, I wanted to take paid family medical leave. However, because the preschool I worked at as a teacher was considered a small business, I was not eligible to take it. I then found it difficult to go back to work due to the fact that childcare wasn’t affordable and the preschool I work at didn’t take children 0 to 2.5 years old. I eventually got lucky and found a church member
to watch my daughter until I was able to find a more permanent babysitter but I feel that she missed out on early learning and development that she could have had if I could have afforded to enroll her in an actual daycare facility. She now is in a special needs preschool due to learning and speech delays and as an educator I know the importance of an early childhood education. I can’t help but wonder if I could have put her in daycare would she have been able to hit her milestones on time.

– April

**New Mexico**

We need paid paternity leave and access to childcare to have a more supportive environment and mentality in the workforce for families.

For four and a half years, I had to work a full time job with opposite hours to my spouse so we could have a double income household but not have to pay for childcare since it is so expensive and inaccessible for quality; as such my spouse and I would spend more waking hours at work than together. At times our jobs would have a few hours of overlap requiring us to have a friend or sitter come to mind the children, but when a sitter falls through, that means we are either arriving late to or leaving early from work.

For both of my children’s births, I took less than 6 weeks off from work because I had to go back to work to start earning money. With our first I only took 4 and a half weeks off unpaid and with our second I took about 5 weeks off, but used all of my PTO (2 weeks) for that time (still 3 weeks were unpaid). That was so rough financially, emotionally, and physically to go through: I’m trying to heal myself, bond and adjust to life with my new child, but still make ends meet with the added burden of medical bills.

As a breastfeeding parent, I suffered breastfeeding ailments (thrush, mastitis, cracked nipples) because I had to rush pumping in order to go back to work (not recommended to do before 6 weeks). Had there been financial support to stay home 12 weeks postpartum, I could have been a stronger parent and contributor for my work.

– Zoe

**New York**

I’m a married mother to two children ages 4 and under. I’ve been a stay-at-home parent since becoming a mother due to the high costs of childcare. The waiting lists are extensive anywhere I’ve looked into, and the cost would leave me broke even after being paid by any job I can find. I’ve struggled with manic episodes of anxiety, depression and rage all while being the sole care provider to my children. I crave the ability to be my own person and join the workforce to feel fulfilled and earn an income of my own to help keep my family unit afloat and functional, but the lack of access to available and affordable childcare really is getting in the way of so much.

– V

Almost every country in the world has some form of paid family leave. Because our country does not, when my spouse and I had our first child, it was financially and emotionally very challenging. Fortunately, the nonprofit organization I worked for allowed me to use short-term disability leave and offered a few more weeks of leave so that in total I was able to be with my infant for 8 weeks. Giving birth should not be seen as a disability and 8 weeks barely allowed my body to adjust and to bond with my child. My spouse’s company on the other hand had no parental leave policy so he had to save up all vacation days to be home for two weeks. It meant that the burden of care was placed on me as a woman, because I had some form of leave, but my spouse had to return back to work. Because of the lack of paid family leave, my spouse had less time to bond and take on additional caregiving responsibilities.

Paid family leave can help address broader gender inequities so that men can take on a greater share of caregiving responsibilities. When I returned to work, because we could not afford childcare, my parents and in-laws had to step in. Many of my friends did not have family nearby so they had to reduce their hours or leave their professions entirely.

– Elizabeth

Four kids. My oldest was born when I was 18 and my youngest when I was 40. Both were born at home and the middle two were born in hospitals. I recommend home birth
very highly. Both hospital births were traumatic in different ways. And both were due to a lack of medical insurance which covered home birth.

With my youngest we had to induce because my company went bankrupt and I would have had no insurance after the end of the month (he was due the first week of March). After he was born, despite being postpartum, there was a “waiting period” which meant I had no insurance (the baby was immediately covered by Medicaid). Luckily, I had no complications. Health care and outcomes shouldn’t rely on luck.

– B.C.

I had a stillbirth long ago due to stress during pregnancy.

– Caiphia

North Carolina

After the loss of our first pregnancy, my now husband and I were nervous and excited to find that we were pregnant again with our now 7-year-old son. He was poised to be a happy addition to the family that already included my husband’s oldest son. After he was born, our son was promptly rushed to the NICU for respiratory distress. After a week in the hospital, he came home and began to thrive. A few months later, we found out we were pregnant again. With our family expanding to 5 members, we sought more space and a better environment for our family. We relocated from Philadelphia to my mother’s hometown of Smithfield, NC. Our baby girl was soon born after that and was also promptly rushed to the NICU in Chapel Hill for respiratory distress. She too recovered, but came home with on-going respiratory issues that, at 5 years old, she continues to battle.

In November 2015, I was unemployed with a newborn, a toddler and a middle schooler to care for while my husband went to work and to school on his GI bill. Medicaid made sure my infant had breathing treatments, my toddler received speech therapy and our growing teenager got the mental health care he needed. As our family has matured, Medicaid has made sure that we have had the health care we need to thrive. I have been able to receive primary care and mental health benefits as I navigated postpartum depression and pre-diabetes.

Now that the children are older, I can look back and see how Medicaid benefits were there when we needed them. The oldest has successfully graduated from H.S. and the two younger ones are racing to school age and all the joys that come with growing up. Our children have grown up healthy because of Medicaid. I want every family to have the same opportunity to thrive and grow.

– Allison

“I think very deeply about the fact that as a mother, a new mom that had tons of complications after the birth of my first and my second child that I didn’t have the space to be out of work. I had to come back to work sore, unhealed but needing to pay the bills.”

– Bethany, North Carolina

I’m a teacher and we just had our second baby a week ago. I am taking the rest of the year off because we don’t have family here and our son’s daycare is full in the infant room until next school year. Not to mention paying for 2 kids would be literally my entire paycheck – and I have a M.Ed.! I barely have sick days from draining my maternity leave with our first son. I still have yet to hear from HR to know exactly what I’m getting paid. I’ll get hospitalization and disability because I pay for it but I’ll eventually lose my health insurance which is ridiculous, too. I have Hashimotos so I definitely need to be able to get my medication. It’s very stressful and sad that working moms can’t even take care of their families.

– Bethany

Being a mom for the past almost 13 years and able to reflect on how important care infrastructure would’ve looked like when my children were very young and even now. I think very deeply about the fact that as a mother, a new mom that had tons of complications after the birth of my first and my second child that I didn’t have the space to be out of work. I had to come back to work sore, unhealed but needing to pay the bills.

There was a point that I felt like I was working just to pay for childcare which at the time was 45% of my budget. I spent most of my time working and my children had to be in childcare which meant that we also had to scrimp and cut corners on food, on the type of housing that we thought would be most beneficial for our children because we didn’t have the money to pay exorbitant rents.

Care economy and care infrastructure would’ve looked like childcare that was at a sliding scale that we could afford. It
would have looked like my partner being able to stay home with our children for an amount of time and me being able to stay at home with our children for an amount of time in the early years. So many of us as parents spend our days working and working just to survive and hoping that our children thrive in our absence. That is not how we build abundant communities. That is not how we build families that thrive; that are healthy, that have what they need and are able to nurture their children to be beautiful members of our society and democracy.

– Latrina

My husband had lung cancer at the same time that my dad had multiple medical problems including needing open heart surgery. My dad was the main caretaker of my mom who suffered with dementia. I needed to keep working as a Behavioral Health nurse to have insurance to pay for my husband’s care. He was not old enough to receive Medicare and even though he was deemed qualified for Disability, he actually only received 3 months of checks. He died on August 16th of the month. A few days after his death, I received notice that they were taking the August check back. He had spent 16 days in the hospital that month (some in ICU) and was helicoptered to that hospital. That was a cruel blow!

My peers at work gave us Visa Gift cards and donated some of their vacation time when I ran out of paid leave. I had been with that hospital for years at the time. My siblings and my husband’s sibling also helped me in caring for my husband and parents. Some helped financially. I happen to have a large family. I do not know what other people do if they do not have family support. Both my husband and I have worked very hard and long hours all our lives. When my husband died, I owed 4 hospitals money. After 8 years, I am finally out of debt. A month and a half after my husband died, I had a terrific nosebleed and had to go to the ER. My blood pressure was at stroke level. I had neglected my own health while taking care of my family members and my patients at the hospital. At times, I only got 3 hours of sleep a night. I was experiencing tremendous stress. My health suffered!

A month and a half after my husband died, my only daughter had an emergency C-section in another part of the country and delivered a healthy grandson! This event was more stressful but with a happy ending! Once again, my coworkers donated their vacation time so I could care for my daughter and newborn grandson! I would have lost my home without the support I received. Did I mention that I had platinum level health insurance through all of this? I survived by having a great support system. It is a rare thing to have the support that I did. I worry about all those that do not have it. The top 1% of this country are stepping all over the rest of us. No civilized country should be this way!

– Joan

Ohio

I suffered from terrible postpartum depression. My doctor didn’t discuss it with me, and I didn’t know what was happening to me. Women need to be educated and supported emotionally and financially when it comes to postpartum depression. Healthy moms, healthy babies.

– Lois

I returned to work as planned at 8 weeks postpartum. I had taken as much unpaid time off as my family could afford. What was not planned was the postpartum urinary retention that required me to return to work with a catheter and bag of urine attached to me. It was embarrassing.

My employer doesn’t offer short term disability because they don’t have to, they don’t pay mothers time off after delivery because they don’t have to. I’m constantly begging for the USA to show that we value families, recovery, and infant health by providing 12 weeks of PAID time off after the birth of a child.

At 12 weeks I was off my catheter, on my way to recovery, and finally out of postpartum diapers. Please give mothers dignity to heal in peace and understand that postpartum complications like mine are NOT uncommon. The reality is that without any protections from the government employers won’t provide any protection to mothers simply because they don’t have to.

– Audrey

My daughter gave birth during the pandemic in February 2021. She has been coping with a new baby with several medical issues, working, daycare issues for the baby and her 3-year-old son and virtual school for her 7 year old.

She had a supportive husband who is working but they are
constantly juggling childcare issues, sick children along with Covid exposures at daycare. Her husband has Type 1 diabetes which is also a constant concern. Their story is not unique but she is exhausted. She works in healthcare and sees the many challenges and failures. Let’s catch up to other developed countries in taking care of and supporting families.

- Krista

Oklahoma

So right before my birthday in April I found out I was pregnant. All happy and fun. Although I know now that I am considered part of the virus boom hahaha. But I found out that I got pregnant before the lock down started. It’s been good but scary. I’m apparently a part of the essential employees. But the worst part is I am a manager at a dairy queen in Oklahoma and honestly, it’s been worrying for me. I’m not only scared to catch it but since I’m still in the first trimester. I’m terrified that I will have a miscarriage. Because they say oh don’t stress so much, how do I not stress when I’m in the bathroom crying from some a-hole yelling at me, like seriously people. I’m human too here. But so far overall I’m 2 months along and it’s been great other than the worries and once in a while sickness.

- Emilee

My third pregnancy was uneventful. I use Indian Healthcare Services. I had a c-section planned due to two previous c-sections.

One Sunday early morning I started having contractions. It was 3 weeks till my due date. We rushed to W.W Hastings Indian Hospital. I was hooked up to monitoring. I was in labor so they rushed me to a c-section. I got the doctor on call, not my doctor. This doctor decided to do a vertical cut instead of the bikini. I had 2 very successful bikini cuts with my prior pregnancies. Surgery went fine and my son was super healthy.

Recovery was a nightmare. They took my staples out after a week. Days later my entire incision came open while I was at home. Rushed back to Hastings and stapled closed in the ER. Saw my doctor the next Monday and he had to remove the staples and pack my wound. I endured wound packing twice daily for about two months with a Nurse in my home. Frequent doctor visits, poorly managed pain, the physical limitations and everything else made it extremely hard to care for my children.

Now I am 3 years later left with PTSD from the incident, lack of trust in doctors and a horrible ugly scar from belly button to public bone. Later I found out this same doctor did the exact same thing to other women. He is still practicing too.

- Jade

“We also need better parental leave for people of all genders and for longer periods of time. We cannot expect mothers or those who birthed a child to go back to work mere weeks later.”

- Kelly, Pennsylvania

Oregon

I felt I should kill myself because I felt I was an inadequate mother. Having already raised two other children (then 7 and 9 yrs old). This was clearly (in retrospect) an illogical crazy opinion. But that’s how I saw it then. There was no one I could talk to, no one to support me. I was and still am married to the father of these children. But he had no skills in dealing with a crazy wife. Somehow, we got through this period. But professional help would have been so helpful! We need to make health care for postpartum mothers for 12 months permanent!

- Mary

Pennsylvania

The biggest struggle I have is feeling like a horrible mom because of some of the thoughts/feelings I have.

- Bobbi

Please prioritize affordable childcare and paid leave in support of families. As a teacher, I have seen countless families have to make decisions that revolve around work schedules, not what is best for children or their families. We also need better parental leave for people of all genders and for longer periods of time. We cannot expect mothers or those who birthed a child to go back to work mere weeks later.

No other advanced democracy in the world has such limited leave. Additionally, there needs to be leave for people who lose a child during pregnancy. Not only is that traumatic, but it is also physical and bodies need time to recover. There are many other benefits of increased childcare and family leave, so please listen to your constituents who are reaching out. We NEED to care for all people during life.

- Kelly
Rhode Island

I was delivering my youngest child and his heart slowed dangerously low. He was in fetal distress. Apparently when I had a contraction it pulled him back in the birth canal. This was due to the cord. It was around his neck. This of course was making his heartbeat lower. My husband was told to leave because they may have to take me to surgery. They told me to do exactly what they say because they had to get him out fast. Boy, was I scared. I lost a baby 2 years ago and I won’t lose this one. I pushed so hard I was sitting up. He came out silent and not breathing after what seemed like forever, they gave him CO2 and he was alive and beautiful today.

– Victoria

After two completely uncomplicated pregnancies and births, I was caught off-guard when I started seeing blood at 19 weeks with my third pregnancy. I had a complete posterior placenta previa, and was put on pelvic rest and restricted from exercise- anything more than the walk to the bus stop to get me to work was off limits. Some women with placenta previa experience no symptoms or complications, others have large bleeds during pregnancy and/or childbirth.

I was incredibly fortunate to have this complication resolved before the end of the pregnancy, and I credit my wonderful OB-GYN practice with helping me through the mental stress by being available to answer questions and provide additional ultrasounds and monitoring. I also joined a placenta previa and accreta support group during this time, and many of my fellow group members openly shared their stories.

Some stories were similar to mine, with healthy, happy endings. Others faced hemorrhages, infant loss, and one woman with previa, accreta, and percreta died. Some women fell into higher-risk categories for these complications- older moms with many prior pregnancies, with prior C-sections, a history of smoking; for some, this was their first experience

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South Carolina

I had a difficult pregnancy in the sense that I was sick all the time – I lost 40 lbs from the sheer lack of appetite and frequent vomiting, though the baby was always healthy and on track with her growth. I was 35 weeks pregnant and that Friday, I realized that I hadn’t felt her kick or move as much as she normally did.

I initially chalked it up to my own fatigue but throughout a restless night, I did what I could to try and get her to move.

I ate/drank something, switched sides, etc. She still hadn’t moved so I called the on-call doctor who told me to go to the hospital and they would put me on a monitor. I’m a single mom and I drove myself there, trying not to panic and hoping I was just being paranoid. I got to the hospital and up to L&D – my sisters arrived for support and thankfully the doctor found a heartbeat, though they noticed decels.

They kept me in triage, as it happened more than once and then said they were going to admit me for observation. My sisters had to run out so it was just me, and the monitor showed some minor contractions as well as decels. Shortly after my younger sister returned, the on-call doctor came in and told me I needed a c-section ASAP as my daughter’s heartbeat was showing distress and she wasn’t tolerating the minor contractions I was having.

Within 30 minutes I was prepped and on the table – scared out of my mind as she was early. Her APGAR was 3 initially but went up to 8. She is a fairly healthy almost 2-year-old now but has had some motor delays and feeding issues so has received PT and OT. The thing I always come back to is: a couple of months before my daughter was born, a friend of mine from school had posted in FB about her daughter who was stillborn at 38 weeks. She hadn’t felt her move in a while but thought she was just being anxious. Her story would not get out of my head and I probably called my doctor earlier than I might have if I hadn’t heard about the terrible loss this friend had experienced.

Also, as a single parent, the lack of paid leave was a huge source of stress for me. Though I was fortunate to have FMLA, all but about 3 weeks of the 10 I took were unpaid. The extra expenses of my daughter’s therapies, foot braces, and general costs worry me constantly and I have to use significant leave when she is sick as there is more often no one else who can watch her. I am very privileged in many ways, with a good job and family nearby, but it is always on my mind.

– Sarah

I was on bedrest for 10 weeks prior to the birth of my identical twins, who were born 10 weeks early. Thankfully I left my place of employment prior to the bedrest, or when they were born, I would have had to return to work within 2 weeks. And that’s only an option for people who are actually covered by FMLA.

But my story gets worse. The babies were born very ill. One of them passed away after 2 days and the other was critically ill. She spent 12 weeks in the NICU and then required many services and hospital visits afterward. I don’t know what we would have done if I’d had to go back to work during all of this time, or if we hadn’t been able to afford for me to not be working. It would have been a nightmare.

There were many other mamas in the NICU who were not so lucky. They either chose to go back to work shortly after
birth so that they could save their FMLA time off (usually unpaid) or what small amount of paid time off for when the baby came home, or they had to go back to work almost immediately because they just didn’t have the time to take.

I can’t imagine having to go back to work so soon after having a traumatic c section delivery, experiencing the death of an infant, and having another baby fighting to survive. And we should never be in a position to even have to make that decision.

Our paid leave and medical time off and maternity leave policies in this country are pathetic and shocking. All other developed countries have paid maternity leave of some level, and most of them are significant. 52 Weeks in Canada and the UK! FIFTY TWO WEEKS of PAID TIME OFF after having a baby. Plus a protected status so as to not lose the job. Some women in our country don’t even get 52 paid HOURS of time off after delivering a baby. Doesn’t that seem unacceptable to you? It does to me!

It’s not just about time to be home with a baby. Mothers need recovery time. They need rest. Study after study will show you how negative the consequences are because of the lack of paid medical time off and maternity time off.

– Alexa

I was pregnant with my son last year and everything had been relatively normal, although I had hypertension that went untreated and an abnormal GTT (my 3-hour GTT was normal). I had not gone into labor by my due date but was told we would “keep going” to avoid a possible c-section with an induction.

The next week I went in for my 41 week appointment. My OB was at a delivery so they sent me to ultrasound first. The ultrasound tech didn’t tell us anything was wrong, but I could see her writing something down and she seemed distracted when talking to me and my husband. We went in to see the OB and he checked my cervix then told me that the ultrasound showed that our son’s heart was enlarged so we would be going immediately to see the pediatric cardiologist. We went to see him, and he told us that his heart was indeed enlarged, but it looked like it was because his ductus arterious closed early, and it should “be okay” after he was delivered. He recommended a c-section, but my OB said he would rather start inducing the next morning (this was around 5pm. I assume he made this decision because he was getting off for the week after my appointment). We were admitted that night and my OB came in to start a Foley catheter induction with plans of pitocin starting the next morning. Everything was going fine but within a few hours my baby was having late decels in his heart rate. They called in ultrasound to do a biophysical profile on my baby (I thought it was just a routine ultrasound or something to do with his heart). He scored extremely low (something I didn’t find out until after discharge), and I was informed that I would be going in for an immediate c-section because my baby wasn’t “breathing or moving.” I was prepped for my c-section and taken in. I have never been so terrified in my life, and I had no time to process anything that was happening. I was shaking so badly that I couldn’t speak clearly. Thankfully I calmed down some after my husband was allowed in.

My son was born through meconium, and had an APGAR score of 2 at birth. He was limp, purple, and had to be resuscitated. I was told later that he aspirated meconium. He was then rushed to the NICU before I could see him. It was 48 more hours before I held him for the first time. He was on CPAP due to his meconium aspiration syndrome, and it was another two weeks before he was fully weaned off of oxygen and able to come home. The whole experience was traumatic for us, and coming home without him was miserable. We were so thankful that we did get to bring him home, since many mothers don’t, and other NICU moms have to wait much longer. We were also thankful for Medicaid; since I was in nursing school at the time, I could not work very much at all, much less afford health insurance. Medicaid covered my delivery and my son’s NICU stay, which was the biggest relief.

– Lauren

I’m 21 weeks pregnant and a first-time mom and for the most part my pregnancy itself has been going great. But I have a lot of anxiety around letting family members visit once the baby arrives. Currently, where I live most people aren’t practicing social distancing, and that includes my fiancé’s family. I don’t know how to let them be involved and also protect myself and baby, or how to make them understand when they don’t think COVID-19 is serious.

– Christen

“I can’t imagine having to go back to work so soon after having a traumatic C-section delivery, experiencing the death of an infant, and having another baby fighting to survive.”

– Alexa, South Carolina

South Dakota

Tennessee
When our daughter was born in 1988, I was working for the Memphis firm National Safety Associates, who offered NO paid maternity leave. I had a difficult delivery, but I had to return to work anyway, a non-choice that still impacts my health today. My husband took a few days off to help me, & he was fired from his music retail position for doing so.

Childcare expenses were crippling. We had to keep working, but we were never able to accrue any savings at all. Our jobs paid very little. Neither my husband nor I had any retirement or 401(k) packages. Now we are disabled seniors existing only on Social Security. We cannot survive. We cannot afford a mortgage and utilities. We literally cannot afford to feed ourselves.

In the 1990s, I returned to college and wound up with advanced degrees, for which I took out student loans in order to teach on the college level. I had a stellar curriculum vitae, but age discrimination forced me to work as an adjunct professor until I was hired at Rust College. Only the last two years of my teaching career did I make as much as my state’s median salary, which was the lowest in the nation, & I could never afford Rust’s “calamity” health insurance. I have no access to healthcare or dental care, and today I still have no hope of any dental care under Medicare and Medicaid.

Had childcare not been so devastatingly expensive, had my husband not lost his job for taking a few days off to help me after a difficult birth, had I been paid a living wage, had student loans not destroyed my life with collection demands and created debts that I could not earn enough money to pay, & had I been hired in a position I more than deserved instead of shut out because I was over 40? We might not be in so brutal & impossible a financial fix today.

– Alice

“I am a first-time mom and also a single mom...I am moderately depressed but also can't afford to have the therapy that I need. I've worked hard my whole life to provide for myself and others and the one time I could use some help, I'm shut down.”
– Chinonyelum, Texas

Texas

I’m a single mom of 4 and permanently disabled... We know parents are struggling to make ends meet and many are unable to return to work full-time because they don’t have dependable childcare or access to paid family and medical leave. The end of the child tax credit means family finances are tighter this month. And right now, up to 1 in 5 women suffer from maternal mental health disorders like depression or anxiety in the U.S., a number which research shows has more than doubled during the pandemic.

– Stacie

I am a first-time mom and also a single mom. I am 4 months postpartum. I had to return to work one month after she was born due to not being provided paid leave. I also live far from family so now I’m currently trying to find adequate daycare and it’s almost impossible because it’s so expensive. I am moderately depressed but also can’t afford

to have the therapy that I need. I've worked hard my whole life to provide for myself and others and the one time I could use some help, I’m shut down. Please help.

– Chinonyelum

I am a third-year medical student and I just recently had a baby in March 2021. My fiancé lost his job towards the end of 2020 due to the pandemic. After applying to numerous places he had to accept a much lower paying job but this job would not pay enough to afford child care which to my surprise would cost a minimum of $600 per WEEK. That is approximately $2400 per month. More than twice my rent. My fiancé would have to make at least $15 per hour in a 40-hour work week just to pay for child care.

Additionally, we are still in a pandemic with many antivaxxers and no vaccine approved for my son’s age group and I worry about sending my young son to daycare. More so, being able to find a quality daycare with properly trained staff is difficult on its own. So paying for child care just did not make sense and he decided to quit his job to stay home with our son and try gig apps such as Waitr and Shipt during the few hours I am home during the week to make at least a little money.

Luckily during my pregnancy, we were able to get SNAP benefits to help pay for food because the benefits had been expanded during the pandemic. However, when it came to reapplying after I gave birth, we were no longer eligible. We are just barely getting by on my student loans and feeling abandoned by our state in our time of need. If there were affordable, quality child care options my fiancé would happily go back to work.

– Shayla
Right now, I have my grandson in the hospital and both my daughter and son-in-law are not working so they can be with him in the hospital. He had to have surgery and blood transfusion. It’s not easy to have to be worrying about the bills and to have a newborn ill.

– Amelia

Utah

Even with flexible work options during the pandemic, having a baby absolutely requires at least 6 weeks at home. I work for a small supply chain company that was only able to offer me 20% of my salary for the 12 weeks of maternity leave that I took.

I had complications from labor and delivery that required significant follow-up care, as well as needed assistance with an IBCLC lactation consultant in the months after birth. I had to depend on private disability insurance, which only paid for 6 weeks, and spent significant time trying to get extended coverage due to my complications. I was also paying for state disability insurance, but didn’t receive anything from the state of Utah because coverage wouldn’t kick in until after I returned to work.

It is absolutely unconscionable that the United States does not prioritize paid family leave - it is the smart thing to do to support a healthy economy, a healthy labor market, healthy children, and healthy families. New parents without paid leave cannot recover their health, care for and bond with newborns, and get essential breastfeeding support.

– Christina

Vermont

I was lucky enough to have financial support from both my workplace AND my parents to be able to care for my children when they were born, for the first years! Without that support, I would NOT have been able to succeed in breastfeeding them for at least 1 year, which is recommended for their best health for the rest of their and MY life (reduces risk of illness and cost associated with illness). I would have been sleep deprived if I would have had to return to work while still caring for my newborns who woke up frequently during the night to eat, made mistakes at work as a nurse, perhaps even lost my job if my children were sick so often and I had to call in frequently.

When I broke my leg, I was able to stay in my home, afford food, because I was continuing to be paid for the 3 months that I could not work because I DID have medical paid leave.

For those families without it, life is extremely hard. Every developed country in the world provides this. What is wrong with the U.S., that this is such a struggle. What are our values that we allow billionaires to forego contributing to the society, the country they live in at the cost to the

– Patrice

Virginia

As mothers we must be healthy all around it to support our children. Sometimes, we think we have to figure it all out by ourselves and that can definitely take a toll on our mental health. This can lead to so many issues with parenting and our relationships.

– Ivonne

My third pregnancy was much different than the first two. My third pregnancy was high risk and I spent the entire pregnancy working hard to isolate myself and my family in order to be safe as I had gestational diabetes (diagnosed early) and was placed on insulin. I worked full time so I did have some outside contact which was good for my mental health but it was still stressful. We made it from the onset of the pandemic until the birth of my daughter at 37 weeks in February 2021 without any known COVID exposures.

But unfortunately, our run of no exposures quickly ended there. Two days after discharge from the hospital, my older 2 children (aged 4 and 5 at the time) began to have COVID
This year has shown me the importance of paid leave for caring for both a new baby and a sick family member. On August 5 of this year, I gave birth to my 1st child. My husband and I were so excited to welcome him into our family and since I work for a public school system as a teacher, I am eligible for 12 weeks of unpaid leave under FMLA which I am currently using. Like many other families, not working for 12 weeks (plus the additional 1 month of no pay during summer vacation during my 9th month of pregnancy) is very challenging. We saved for roughly a year, including the COVID stimulus checks to make sure I could have this bonding period with our son. Although I am grateful to have this time, the lack of guaranteed paid leave for new parents is woefully inadequate and simply not enough to ensure healthy outcomes for baby and mom.

For the first 2 weeks, I could barely walk and for the following 6 weeks, I had anxiety, a recurring nightmare, and became mentally overwhelmed when I was physically active (such as during every day errands or doing housework). At nearly 9 weeks postpartum, I still feel like I am physically recovering. I experienced all of these feelings despite a healthy pregnancy and birth, a supportive partner, a planned pregnancy, and no history of clinical depression or anxiety.

Because paid leave is not an option, my husband returned to work when our son was 11 days old, leaving me to care for our son, the household, and my recovery alone during the day and most of the night. When I return to work, we will switch roles and he will use his paid personal leave to stay with our son for a few additional weeks before we have to enter him into public childcare. Since he is using his personal time, he will have to ensure that he still has time left over in the case of illness, doctor’s appointments for our son, and other events when he returns. Had we

“Although I am grateful to have this time, the lack of guaranteed paid leave for new parents is woefully inadequate and simply not enough to ensure healthy outcomes for baby and mom.”

– Christina, Virginia

gone through this process together, I very likely would have recovered faster and the stress levels in our household would be much lower than they are now.

Originally, my mom had planned to help me with the baby for a few weeks when my husband returned to work but when I was 9 months pregnant, we found out that she had stage-4 lung cancer. The same day my husband returned to work, I found out that she was given 6-9 months to live. This diagnosis was a huge shock considering she had never smoked and did not have friends who smoked. Given her age, the progression of her cancer, and her lack of quality health insurance, she has decided to see it through to the end rather than seek treatment. (She has Medicaid but even with this coverage, care is very expensive. One doctor recommended a PET scan to see how far her cancer had spread but her insurance told her it would cost $8,000 out-of-pocket so she declined. This is just the tip of the iceberg in terms of the cost of procedures, tests, and medicine).

Since her diagnosis, she has deteriorated so rapidly that she enrolled in hospice care and requires someone to live with her full-time. We live roughly 4 hours apart so we communicate over the phone almost every day and I have taken my son to visit her twice. However, traveling with my son is extremely challenging as is leaving him home since my husband needs to save his personal leave for his own bonding period. If we weren’t forced to constantly calculate how much leave is left, then he would be able to take off work so that I could visit my mom more often while she is still alive.

My sister-in-law quit her job and now lives with my mom full-time while my brother - her husband - makes the 4-hour drive from Maryland to Virginia Beach nearly every weekend. Because he does not have access to paid medical leave, my brother must continue to work full-time during the week, help her over the weekend, and continue to raise their 3 teenagers.

Our other brother in California is in a similar bind. He has access to FMLA, however, it is unpaid so he can’t afford to
take the time. Instead, he is using what little remains of his personal leave to visit her when he can. He was able to spend roughly 3 days in August and will spend another 3 days in October. Whenever he uses his personal time to visit his dying mother, he takes away leave that he will still need for when he or his own 3 children get sick, emergencies, and other life events that arise. I was the one who told him how much time our mother has to live and I will never forget the sadness in his voice when he told me that the FMLA leave provided is unpaid so he can’t accept it and I will never forget the silence that fell between us over and over again because we both know that our options are not real options. It hurts all of us knowing that none of my mom’s children can be with her for an extended period of time in order to give her the end-of-life comfort and family connection that she desires and deserves.

At this point, my time of unpaid leave is coming to an end and it is not me I am writing this for. By the time any bill passes that could have helped my family, my son will be in childcare and my mom will have died. I am advocating for the parents who have no other choice but to leave their newborn baby and return to work at just 1, 2, 3, or 4 weeks and give up that bonding period. I am advocating for the moms who stay awake overnight to feed and soothe their baby and return to work the next day despite their anxiety, depression or exhaustion.

I cannot imagine how I would have returned to work after a few short weeks like so many women do out of pure financial necessity and still managed my mental and physical recovery while tending to the needs of my newborn, preparing myself for work each day, performing at work, completing chores, staying in contact with my mom, and addressing other life challenges. Our country has so much to offer its citizens but in the case of paid family and medical leave, we are too far behind and our citizens are paying the wrong price.

– Christina

My caregiving struggles started years ago, as a new mom and a working mom. Fighting my company to acknowledge and follow my states’ 6-month family leave option without retribution. I had major retribution from my management team upon my return. However, that’s only part of the story.

I searched far and wide to find quality childcare that didn’t break the bank. What we settled on is an in-house nanny so that my baby (at the time) could actually have one-on-one care and regular naps and nourishing food instead of what we found at care centers.

I also traveled for work so we needed flexibility, which many care centers didn’t offer. What we discovered was that the director of the care centers may have their masters, but the folks doing the actual work did not….and they were paid horribly and had terrible working conditions, even though I would have been paying top dollar. There were no real federal or state standards. There were no real education requirements and certainly no compensation requirements of these care facilities. So we decided to pay ‘top dollar’ to a nanny – who in the end had a 4th grade education but had a heart of gold. What we discovered was that the first $90,000 of my after tax income went to pay for our nanny.

In comparison to my counterparts in France, in the Nordic States, in Australia and New Zealand (to name just a few), who had a full year off after giving birth with full compensation and a job that was fully protected, also had anywhere from 30-80% of their childcare costs covered, depending on the country. That their childcare facilities were well staffed so that there weren’t twenty infants to one staffer. They were all highly educated, well compensated. The food was nourishing (with no junk)... just look at France’s Creche program.

On top of that, here in America, companies have gotten greedy. Managers are cruel. They don’t care if you have a family or a baby waiting to be picked up. They expect 80-90 hours a week minimum. They expect 10pm conference calls. They expect you to work over the weekends.

So, it’s not JUST about a Care Economy. It is about overhauling our attitude toward families and putting the needs of our children (this country’s future) before the needs of corporate profit or politics. In fact, we should ground our policies and our economy (overall) in the needs of our children and what they require to thrive.

– Katherine

Washington

Maternal mental health is a silent killer if you do not have the right support, essentials, environment, and healthy body/mind.

– Clara
When I gave birth to my kids, I had no paid leave despite working for a children’s hospital. My hours put me just under FMLA and my work had no paid leave policy. I chose to take unpaid time off, a privilege not everyone can afford, and it was still insufficient time to adjust to the demands of parenthood.

My babies did not sleep for more than 3 hours at a time when I returned to work exhausted and depressed. I had been breastfeeding but returning to work disrupted my schedule with my child and even pumping breaks were not enough for me to continue nursing. Once my babies used bottles they didn’t want to breastfeed anymore. As a pediatric dietitian who also experienced postpartum mood disorder this was devastating.

Meanwhile I had to provide care to other families facing child feeding concerns while I was feeling exhausted, depleted and depressed. Eventually I left my job to spend more time with my children and it was the best decision I ever made because soon after COVID hit and we would have had no support with childcare. As a society we know that supporting families bolsters our workforce and economy and it is just the right thing to do. We need to build the infrastructure that places these structural supports like affordable child care and paid family leave for all families universally, especially to lower income communities.

– Rebecca

I wish more women would talk about it – it would’ve helped me so much as I was going through my own struggles with postpartum disorders. I think the biggest struggle is shame. There is so much pressure and emotional labor and mental load we take on that we don’t have to. Partners taking on these loads should be normalized. It’s so, so hard and we shouldn’t have to go through it alone!

– Patty

I’m a Registered Nurse, married to a disabled Combat Marine veteran, and mom to 3 girls. I worked as a pregnant nurse at a Level 1 Trauma Center through the pandemic and luckily delivered a healthy baby girl in the middle of the second pandemic wave. In my area quality childcare is not only hard to find with years long waitlists but it’s also astronomically expensive. On top of it all my mental health was already suffering from burnout prior to the pandemic, it worsened and I am still seeking treatment.

As a nurse my wage has not risen enough to keep up with rising costs, let alone childcare. I recently tried to return to full-time work this spring, but had to drop from full-time work to per diem this summer because of the lack of available affordable childcare for my baby and my family has suffered from the lost wages. At a time when nurses are direly needed, this Mom needs help. Where’s the village?

– Katherine

“I, like most women these days, had a job that provided half my family’s income and all of our medical insurance – a job we absolutely needed to make ends meet. Now, imagine if I did not have access to paid leave, and had to leave my baby in the hospital alone while her father and I worked.”

– Kristin, Washington

I gave birth 4 and 7 years ago and qualified for Medicaid both times during my pregnancy. However, because my coverage ended at six weeks I had very little time to get the physical therapy I needed to help my pelvic floor. I tried to squeeze in a few appointments but it was not enough time between appointments for the exercises to be effective. My pelvic floor muscles still contribute to incontinence at times.

When my first child was born, I, like all expectant parents, envisioned giving birth to a healthy newborn and spending time bonding with her. Unfortunately, and entirely unexpectedly, my baby almost died at birth, and needed to be in the hospital for 5 weeks to recover from her birth injuries. Even after we finally brought her home, she could not eat on her own and needed to be fed with a feeding tube until she was 5 months old.

I, like most women these days, had a job that provided half my family’s income and all of our medical insurance—a job we absolutely needed to make ends meet. Now, imagine if I did not have access to paid leave, and had to leave my baby in the hospital alone while her father and I worked. Imagine if I had to find childcare qualified to tube feed and manage my medically fragile baby who had doctors’ appointments 1-3 times per week.

Fortunately, my job did provide paid leave, and my coworkers donated additional leave so that I was able to be with my baby caring for her through the duration of her medical troubles, without losing our insurance or bankrupting my family. I want every American baby to be that fortunate. Our children absolutely deserve that from their country. They are our future.

– Kristin
West Virginia

My husband’s business was affected by covid 19, he’s had to close the physical location of his store and get another job. I was only able to take 6 weeks maternity leave when I had originally planned on 12, but any money we had saved for my time off was used for our bills and rent.

Wisconsin

My husband and I welcomed our first daughter into the world this April. I hadn’t been at my job for a year yet and he didn’t have any paid leave with his job. We were at least able to use PTO to earn a little in the couple months we were off, but that meant not getting paid when she or one of us was sick since we had used it all on maternity leave. That is just about the pay, after 8 weeks I was nowhere near mentally ready to return to work and leave my 2-month-old in the hands of strangers.

We are barely able to afford daycare with both of us working and are scared to think of what will happen when we decide to give her a brother or sister. This country needs to have better maternity leave, wages, and daycare rates. If I were able to stay home and raise my daughter, it would be a dream come true, but there’s no way we could ever afford to live with just one income. Please try to quell these issues as SO many people have them.

– Brianna
MomsRising.org is an online and on-the-ground grassroots organization of more than a million people who are working to achieve economic security for all families in the United States.

MomsRising is working for paid family leave, flexible work options, affordable childcare, and for an end to the wage and hiring discrimination which penalizes so many others. MomsRising also advocates for better childhood nutrition, health care for all, toxic-free environments, and breastfeeding rights so that all children can have a healthy start.

Established in 2006, MomsRising and its members are organizing and speaking out to improve public policy and to change the national dialogue on issues that are critically important to America’s families. In 2013, Forbes.com named MomsRising's web site as one of the Top 100 Websites For Women for the fourth year in a row and Working Mother magazine included MomsRising on its “Best of the Net” list.