

INSIDER

Paid Leave's Ripple Effects: A Lifeline for New Parents

In the wake of Virginia's recent paid leave win, the National Partnership has been celebrating a series of quiet yet powerful victories for working women and families. State-implemented paid family leave programs are providing a new generation of dads with the chance to show up fully for their newborns.

As detailed in [a recent National Partnership blog](#), dads today are taking parental leave at rates unimaginable a generation ago. Before 1994, [nearly 80%](#) of fathers took next to no time off after having a child. Now, in states like Connecticut and Washington, leave-taking among eligible new fathers has climbed significantly within just a few years of program roll-

out, with a third of fathers in Connecticut taking leave and more than half of dads doing so in Washington. This increase matters not just for the child but the parents themselves—the research proves that when dads take paid leave, they become [more confident](#)

and [more involved caregivers](#), [mothers see better mental health outcomes](#), and the [quality of the couples' relationship improves](#).

Despite all these benefits, gaps remain for lower-wage men who may not know their rights or fear workplace retaliation—emphasizing the need

for paid leave champions to continue building on this progress until every new dad has an equal opportunity to be present for their child. A National Partnership state-by-state analysis finds [73 %](#) of workers still lack paid family leave from employers. For these parents as well as working families everywhere, the National Partnership will fight until a comprehensive national paid leave program is passed. Our strategy for

doing so took shape in May, when the National Partnership convened advocates from 25 states at a summit in Washington D.C. Together we developed a coordinated strategy to build on state paid

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[Left to right] State Delegate Luke Torian, State Delegate Briana Sewell, and NPWF President Jocelyn Frye at the signing of Virginia paid leave bill (May 2026)

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leave victories, using that momentum to engage congressional delegations and advance a national paid leave program. At a press conference during the convening, we brought together 8 members of Congress, including nearly the entire Virginia delegation, to highlight the victory in Virginia and help make the case why federal action is so critical.

This past June, as a part of that strategic push, the National Partnership co-hosted a discussion, reception, and screening of the new documentary *Lifelines* on Capitol Hill. Produced by Olympic athlete Allyson Felix, *Lifelines* captures the human stakes of the fight for paid family and medical leave. The film highlights the maternal health crisis

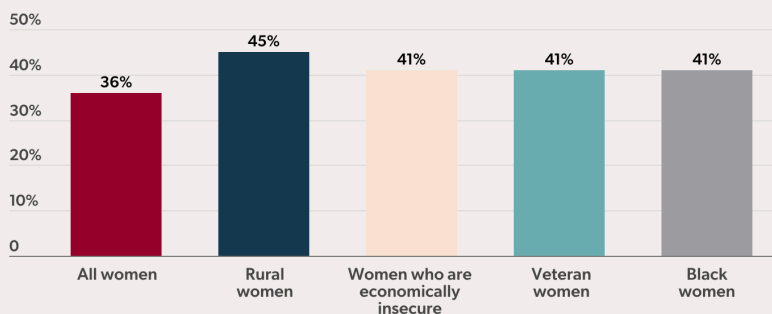
in America, following two real-life families who navigated unexpected medical emergencies during childbirth. The event—organized in collaboration with Paid Leave for All, A Better Balance, Black Women’s Roundtable, Caring Across Generations, CLASP, and Family Values @ Work—was hosted by Representative Analilia Mejia (NJ-11) and moderated by Symone Sanders-Townsend of MS NOW’s The Weeknight. The National Partnership will keep bringing these stories to the people with the power to act, allowing policymakers and advocates to reflect on the possibilities for workers with paid leave—and the harsh realities at stake for those without them. •

The New Front Line in the Battle for Abortion Access

Four years after the *Dobbs v. Jackson Women’s Health Organization* decision, the anti-abortion movement has surpassed mere state bans—it’s coming for the infrastructure of abortion access itself in states where abortion is legal and protected. A new [National Partnership report](#) finds that more than 47 million women now live in states that have attacked access to medication abortion or have faced clinic closures due to (OBBA), Trump’s awful budget bill. This means 62% of women of reproductive age in the

U.S. now live in these states with less access. Women of color are bearing the brunt, with nearly 23 million or two out of three women of color of reproductive age living in these states. Rural women, Black women, economically insecure women, and female veterans are especially likely to live in states attacking medication abortion access, a lifeline for those who can’t easily travel to a clinic. These increasing anti-abortion laws intentionally make reproductive health care inaccessible, and the consequences include chaos for patients and providers, rising maternal health risks, and preventable deaths. Everyone deserves the freedom to make their own health decisions, and the overturning of *Roe v. Wade* marked not just a singular setback, but a catalyst for an ongoing campaign to strip people of reproductive health care options. The National Partnership will continue to track these attacks and push back against efforts to dismantle abortion access, because no one’s health or life should be impacted by political interference in their reproductive care. •

Women who are especially likely to live in states that have attacked medication abortion access



Source: National Partnership analysis of American Community Survey, 2020-2024. Racial groups include Latina women. Figures are for women 15 to 49 years old. See methods note for additional detail

After a Decade, Data Confirms What Moms Already Knew

New data from our latest *Listening to Mothers* survey confirms the concerns mothers have been raising for years—the maternal health care system is failing them, and failing women of color the most directly. On June 9th, the National Partnership released our initial report on the fourth national *Listening to Mothers* survey, collaborating with MomsRising and the Black Mamas Matter Alliance to produce the most comprehensive look at maternal health experiences and views in more than a decade. Drawing on responses from over 3,800 mothers of infants and toddlers who gave birth in 2023-2025, the report found that over 40% of respondents expressed that their providers failed to respond to their requests for help in a timely manner, while 17% reported having been ignored or neglected outright. Rates of untreated anxiety and depression were high before, during, and following pregnancy and more than half received no treatment, often due to cost or provider shortages. High-quality, low-intervention care remains largely out of reach, as the National Partnership found only 5% of respondents gave birth without a major medical intervention and just 8% had midwife support.

Women of color, those covered by Medicaid, young mothers, and women with disabilities reported steeper barriers and worse outcomes—disparities the National Partnership warns are being compounded by Medicaid cuts and reproductive health restrictions already straining the maternal health workforce. The survey points to concrete opportunities for change, including expanding access to midwifery care, doula support, and supporting physiologic childbirth and earlier prenatal contact. However, a comprehensive solution must confront more than just the challenges directly related to pregnancy. Respondents identified several unresolved social needs, including food insecurity and lack of affordable childcare, that too often persist well into the postpartum period.



NPWF Senior Director of Maternal Health Nan Strauss (right) leads a panel discussion at the *Listening to Mothers* launch event in Washington, D.C. (June 2026)

The National Partnership celebrated the report's release with an event at the Kaiser Family Foundation's Barbara Jordan Conference Center, bringing together maternal health leaders and advocates to push for policy change. The launch included a special USA TODAY health awareness campaign featuring actress and advocate Tatyana Ali, spotlighting maternal mental health and informed decision-making. The National Partnership's campaign went live digitally on June 9th and reached national print audiences the following day. Following the launch event, members of the Listening to Mothers Advisory Council and National Partnership President Jocelyn Frye traveled to Capitol Hill to meet with lawmakers including Senator Ben Ray Lujan (D-NM) and Representatives Melanie Stansbury (D-NM) and Summer Lee (D-PA) to discuss the report's findings and the National Partnership's subsequent calls to action. This was the first of a series of research reports that will be released over the next year, which will include targeted insights and recommendations about BIPOC birthing people, as well as insights about postpartum experiences. •

A Seat at the Table for Maternal Health

To celebrate this past Mother's Day, the National Partnership gathered a group of cross-sector leaders to discuss the impact of the maternal health crisis on the workforce. The conversation brought together Congressional maternal health champion Rep. Lauren Underwood (D-IL), senior executives from companies including Microsoft, Salesforce, Levi's and Volkswagen, and leaders from the Institute for Women's Policy Research and Reproductive & Maternal Health Compass. Over the course of the evening, the National Partnership guided reflections on one of the country's most urgent and preventable emergencies, driving the discussion with sobering and very real numbers. The U.S. has the highest maternal mortality rate among developed nations. Black women are over 3 times as likely, and American Indian/Alaska Native women more than twice as likely, to die of

complications of pregnancy and childbirth as white women. Yet the CDC finds 86% of these deaths are preventable, a reminder that this crisis stems not from an absence of knowledge, but a lack of political will. The leaders at the dinner also weighed the financial toll, noting that maternal morbidity costs the country \$32.3 billion annually, of which maternal mental health conditions account for \$18.1 billion. Further, a third of new parents leave their jobs within 18 months of having a child—and yet only 4% leave the workforce entirely, pointing to a need for retention tools and manager training that allows employers to support their employees back to the workplace. Together, the group identified several tangible steps forward, from expanding coverage for doulas and midwives to engaging Employee Resource Groups to identify the specific support employees actually need.

Ultimately, the table came to the shared conclusion that stories and data can work as powerful catalysts. By continuing to foster these influential conversations, the National Partnership works to close the gap between knowledge and action to empower the necessary and well-overdue change for mothers. •



NPWF Vice President of Health Justice Nima Sheth and cross-sector leaders discuss the impact of the maternal health crisis on our nation's workforce (May 2026)

Rural Hospital Closures Begin and Trump's Voters Pay the Price: A New Analysis From the National Partnership Action Fund

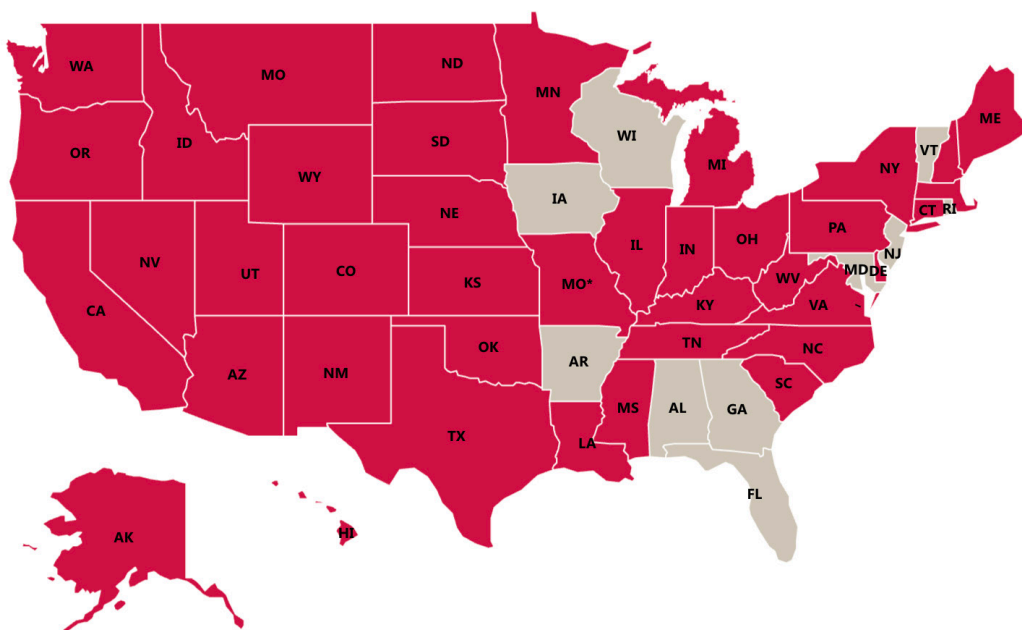
Just over a year after the Trump administration passed his inhumane budget bill, (OBBBA) into law, the expected damage to rural maternal health care is now taking shape. The National Partnership has served as a leading voice in sounding the alarm about decreasing maternal healthcare access; now, our predictions are becoming a reality. Of the 131 rural labor and delivery units that the National Partnership formerly warned were at risk, 14 have already closed—including 10 units not predicted to close in the initial analysis. These extensive threats leave nearly 900,000 reproductive-age women in rural communities in danger of losing their own source of hospital-based obstetric care and facing drives of over an hour to reach the nearest maternity ward.

Strikingly, new analysis from the National Partnership Action Fund, the 501(c)4 advocacy arm of the National Partnership for Women & Families, found that President Trump won 91% of the rural counties now at risk of losing their maternal health care, meaning his own voters are bearing the brunt of these cuts. Even still, the administration touts a smaller rural health investment while simultaneously moving to slash \$137 billion

in Medicaid funding from rural communities.

Crucially, these cuts aren't what Trump voters asked for. Three in four rural residents attest Medicaid is very important to their community, including 66% of Trump's own 2024 voters, and more than 75% oppose Medicaid cuts altogether. The National Partnership Action Fund calls on policymakers to protect postpartum coverage, close the Medicaid coverage gap, invest in midwifery and doula care, and pass legislation like the Keep Obstetrics Local Act (KOLA)—because rural mothers deserve better than being left behind by the very administration they helped elect. •

States Where Rural Labor and Delivery Wards are at Risk Due to Medicaid Cuts



Source: National Partnership analysis of UNC Cecil G. Sheps Center for Health Services Research study.

Truth's Legacy Guides Today's Battle

In a year full of milestones for America, National Partnership President Jocelyn Frye pointed to an anniversary worth remembering. 2026 marked the 175th year since Sojourner Truth's landmark speech at the Women's Convention in Akron, Ohio.

In a piece originally published in *The Fulcrum*, Frye reflects on the ways Truth's challenge to the racial and gender biases

of her time still speak to the barriers that women, and Black women in particular, continue to face today. She draws a direct line from Truth's era to now, pointing to Trump administration officials

questioning of military women's qualifications and their dismantling of civil rights offices meant to enforce equal protection under the law. Frye argues that honoring Truth's legacy means rejecting the false narratives still used to justify unequal

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treatment, from attacks on women's competence to the stereotypes used to defend cuts to programs like Medicaid. Although

today's fights are slightly different, Frye writes, Truth's words remain a guide for confronting the places where our democracy has fallen short and building a more inclusive path forward. •



Reading Between the Rulings: **More Power, Less Oversight**

As the Supreme Court closed out their term in early July, the National Partnership penned a comprehensive wrap-up examining the most consequential rulings for women, workers, and marginalized communities. Chief among the recent influential decisions is the outcome of *Trump v. Slaughter*, in which the Court ruled presidents may fire the heads of independent regulatory agencies without cause—a decision the National Partnership warned in a press release erodes vital federal oversight and weakens the independent status of agencies. The 6–3 ruling overturned nearly a century of precedent, leaving independent agencies to answer to the President rather than their mission. The justices also left reproductive health care in a precarious state, as the Court preserved telehealth access to mifepristone while litigation continues in *Louisiana v. FDA*, leaving patients and providers facing chaos and continued uncertainty. The Court also gutted a key tool for fighting racial discrimination

within voting in *Louisiana v. Callais*, striking down a majority-Black congressional district and imposing new hurdles that make it far harder to challenge discriminatory maps and weakening representation for women of color in particular. In *Little v. Hecox* and *West Virginia v. B.P.J.*, the justices upheld state bans on transgender student-athletes and decreased safeguards against “conversion therapy” for minors, further eroding the safety of LGBTQ+ youth. Taken together, these rulings reflect a broader pattern from this term of decisions expanding executive power at the expense of protections for workers and marginalized groups.

As we have already seen in the EEOC’s attacks on transgender workers under its current leadership following *Slaughter* and *Trump v. Cook*, these consequences will extend well beyond the courtroom and make clear that the fight over accountability is far from over. Looking ahead to the next term, the Court has agreed to hear *Department of Labor v. Sun Valley*

Orchards, a case that could weaken agencies’ ability to penalize wage theft. As the stakes of this case and many others continue to heighten, the National Partnership will keep pushing back against the Court’s problematic decisions. We will keep fighting in the courts, in statehouses, and in Congress to defend the rights, health, and safety of women, workers, and marginalized communities, no matter how this Court rules. •



Our 2026 Annual Event: **The Partnership Turns 55!**



The National Partnership celebrated 55 years of advancing gender equity on June 23rd at the Conrad in Washington, D.C., holding our annual event themed “Persistence & Progress.” The evening honored four changemakers advancing policies for women and families: Representative Nancy Pelosi (CA-11), 52nd Speaker of the U.S.



House of Representatives; Representative Teresa Leger Fernández (NM-03), chair of the Democratic Women’s Caucus; Ai-jen Poo, president of the National Domestic Workers Alliance and executive director of Caring Across Generations; and Delegate Briana Sewell, who led the effort to establish Virginia’s first paid family and medical leave program.



To mark the milestone, the National Partnership released a 55th anniversary video and an interactive timeline spotlighting five decades of wins for women and families. Relive the evening or get a glimpse at the highlights by watching our celebration recap video! Thank you to everyone who joined us to celebrate this milestone—your presence and support made the evening truly special.

The 2027 annual event is already on the horizon! Save the date for our next yearly celebration on June 29, 2027. •



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