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Paid family leave linked to fewer kids' hospital admissions for abusive head injury

*California introduced parental leave policy in 2004 in bid to curb rates*

Paid parental leave is linked to a lower rate of kids' admission to hospital for head injury, finds research published in the journal *Injury Prevention*.

Deliberately inflicted head trauma is a leading cause of fatal child abuse in the US, with most of the victims aged between 9 and 20 weeks -- a developmental period that usually coincides with prolonged bouts of crying.

Prevention has primarily focused on providing parents of newborns with information about infant crying and the dangers of shaking, but this approach has failed to make a real dent in the rate of new childhood head trauma cases, say the researchers.

In a bid to find out if paid family leave, which allows new mums to delay going back to work, the researchers assessed the impact of this policy in California on the number of hospital admissions among children for deliberately inflicted head injury.

California introduced paid family leave (PFL) in 2004, so the researchers compared data from California with that from seven states without this policy for the years 1995 to 2011 inclusive.

The comparison states included Arizona, Colorado, Florida, Iowa, Maryland, Massachusetts and Wisconsin.

The comparative analysis showed that California's 2004 PFL policy was associated with lower rates of admissions for abusive head injury among children under 1 and under 2 years old.

After taking account of influential factors, such as the unemployment rate and percentage of adults with low educational attainment, the policy was associated with a fall of 5.1 admissions per 100 000 children under the age of 1 in the population.

Similarly, the policy was associated with a fall of 2.8/100,000 among under 2s, after taking account of influential factors.

In states without a PFL policy, admissions rates actually rose from 2007 through 2009 -- a period known as the Great Recession -- while the rates in California remained stable over the same period.

Furthermore, these differences were apparent despite low uptake of the policy in California, which reached only 38% in 2014.

The researchers suggest that the impact could be even greater if more 'at risk' parents were aware of the policy, could afford to take advantage of it, and used the full 12 week allocation.

This is an observational study, so no firm conclusions can be drawn about cause and effect, but the researchers conclude that their findings point to "positive evidence" of the impact of the policy on abusive head trauma admissions.

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