

Royal College of Nursing (RCN) Response to the Women and Equalities Select Committee Inquiry on Shared Parental Leave and Statutory Paternity Rights

About the Royal College of Nursing

With a membership of over half a million registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

The Royal College of Nursing (RCN) welcomes the opportunity to contribute to the inquiry into the reform of statutory shared parental leave (SPL) and statutory paternity rights. As a professional body and trade union representing over 500,000 registered nurses, midwives, and nursing support workers across the UK, we strongly advocate for policies that support gender equality, work-life balance, and the well-being of working families.

We recognise that access to fair and flexible parental leave is essential not only for individual families but also for workforce retention, staff well-being, and long-term gender equality in the workplace. Nursing is a profession dominated by women, many of whom take on the primary caregiving role, and we are particularly concerned with how current parental leave policies impact career progression, financial security, and the gender pay gap in the health and care sectors.

Ensuring that fathers and partners can take meaningful leave is a crucial part of this, as equitable parental leave policies help to distribute caring responsibilities more fairly, reduce career penalties for women, and promote a more inclusive workplace culture. However, low take-up of SPL, financial barriers, and rigid eligibility criteria continue to undermine its effectiveness. In this response, we set out the key reforms needed to make SPL and statutory paternity leave more accessible, equitable, and beneficial for working families, including those in health and care professions.

Key Issues and Recommendations

1. Low Uptake of Shared Parental Leave

The current SPL system remains underutilized due to its complexity and the financial constraints it imposes on families. Research indicates that many fathers and partners are unable to afford taking shared parental leave due to the low statutory rate of pay. The RCN recommends increasing statutory SPL pay to at least 90% of earnings for an initial period to encourage higher uptake.

2. Disparities in Take-Up Across Demographics

Evidence indicates that the take-up of SPL is not only low overall but particularly uneven across different demographic groups. A 2023 government evaluation found that parents who took SPL were more likely to be older, white, highly qualified, and in higher-income brackets, while take-up among lower-income households, younger parents, and Black and minoritised ethnic communities was especially low.¹ Research by Maternity Action further highlighted that financial barriers, lack of awareness, and workplace culture disproportionately prevent these groups from accessing SPL.²

3. Cultural and Employer Barriers

Workplace cultures often discourage fathers and partners from taking leave due to fears of career repercussions or lack of managerial support. The government should implement awareness campaigns and employer incentives to foster a more supportive environment for parents sharing childcare responsibilities.

4. Extension of Statutory Paternity Leave

2023 OECD data suggests that the UK has the least generous statutory paternity leave entitlement in Europe.³ OECD data suggests that the EU average paid weeks entitlement for paternity leave is 13.3 weeks, compared to just two weeks in the UK.⁴ The Centre for Progressive Policy analysis of OECD countries found that paid paternity leave of a minimum of six weeks is associated with an improved gender pay gap and labour force participation gap.⁵

The UK's statutory provision for paternity leave is limited to two weeks, which does not provide sufficient time for fathers to support their partners and bond with their children. The RCN supports extending statutory paternity leave to at least six weeks, paid at an enhanced rate, to align with international best practices.

5. Maintaining Shared Parental Leave Alongside Additional Leave for Fathers and Partners

While the introduction of additional dedicated leave for fathers and partners is a welcome step towards improving parental leave rights, it should not come at the expense of SPL. No standalone entitlement will realistically provide for truly equal parenting in the first year, particularly for couples who wish to share childcare responsibilities more flexibly. Retaining SPL alongside new provisions would ensure that parents have the broadest possible choices in structuring their leave,

¹ UK Government. *Shared Parental Leave Evaluation Report 2023*. Department for Business and Trade. Available at: <https://assets.publishing.service.gov.uk/media/649d54be45b6a2000c3d4539/shared-parental-leave-evaluation-report-2023.pdf>

² Maternity Action. *Shared Parental Leave: Evaluation Parental Survey Briefing (July 2023)*. Available at: <https://maternityaction.org.uk/wp-content/uploads/ShPLEvalParentalSurveyBriefing-July2022-FINAL.pdf>

³ [CPP Parental-Leave-report_June-2023.pdf](#)

⁴ [OECD family data base 2023](#)

⁵ [CPP Parental-Leave-report_June-2023.pdf](#)

supporting a more equal division of care and enabling families to decide what works best for them.

6. Inclusion of NHS, Health and Care Workers

Many health and social care professionals, particularly those in shift-based roles, struggle to access flexible parental leave options. The government should ensure that any reforms to SPL and paternity leave accommodate the needs of frontline workers, including clearer guidance for NHS Trusts on implementing these policies effectively.

7. Complexity and Unintended Financial Consequences in Shared Parental Leave

The complexity of the SPL system can create unintended financial consequences for families, particularly when partners seek to use SPL to support a mother recovering from a C-section or other medical complications. A common misconception is that the birthing parent must start SPL for their partner to access leave and pay. In some cases, this leads to mothers curtailing their maternity leave earlier than necessary, inadvertently forfeiting their entitlement to Statutory Maternity Pay at 90% of earnings for the first six weeks. This can result in significant financial loss and may force a return to work sooner than planned.

In reality, partners can take SPL from birth or after paternity leave while the mother remains on maternity leave, provided she has submitted the necessary curtailment notice.⁶ However, many families are unaware that one partner can be on SPL and receiving Shared Parental Pay while the other remains on maternity leave and in receipt of maternity pay. This lack of clarity can deter parents from using SPL effectively, or at all. This reinforces the need for both better guidance and a dedicated, non-transferable leave entitlement for partners. Ensuring that partners have their own period of leave independent of SPL would simplify access, remove the risk of financial penalties due to misunderstanding, and better support parents in the immediate postnatal period.

8. Employer Restrictions on Enhanced SPL Pay and the Impact on Parental Choices

Some employers may offer enhanced SPL pay but only if the leave is taken within the first six months after birth. While this may be intended to encourage take-up, it can create unintended consequences for families, influencing their decisions based on financial necessity rather than what best supports recovery, infant care, and long-term caregiving arrangements.

The financial considerations created by employer-specific policies on SPL enhancement can influence when parents choose to take leave, and in some cases, restrictions on enhanced SPL pay within the first six months may push mothers to return to work earlier than planned, particularly if they are recovering

⁶ Working Families. *Shared Parental Leave: Sharing Leave with a Partner or Splitting Up Leave*. Available at: <https://workingfamilies.org.uk/articles/shared-parental-leave-sharing-leave-with-a-partner-or-splitting-up-leave/>

from a C-section, breastfeeding, or experiencing postnatal anxiety.⁷ It may also mean that both parents take SPL simultaneously, leaving them without a phased transition to childcare when their leave ends.

To support greater flexibility and gender equality, employers should consider allowing enhanced SPL pay to be taken at any point within the first year. This would enable fathers and partners to take leave when the mother returns to work, allowing them to develop as independent caregivers while ensuring families are not financially penalised for structuring their leave in a way that best meets their needs.

9. Gender Equality and Reducing the Gender Pay Gap

Strengthening paternity and shared parental leave provisions will contribute to a more equal division of childcare, helping to address the gender pay gap in the health and care sectors and beyond. Encouraging fathers and partners to take leave will reduce the burden on mothers, leading to greater workforce participation and career progression for women.

Conclusion

The RCN urges the committee to consider these recommendations in its reform efforts. By addressing financial barriers, cultural stigmas, and structural constraints, the government can create a fairer, more accessible parental leave system that benefits families, employers, and society as a whole. We welcome further dialogue on these issues and are happy to provide additional evidence or participate in future discussions.

⁷ Institute of Labor Economics (IZA). *Shared Parental Leave and Gender Equality: Policy Design and Uptake Patterns*. Available at: <https://docs.iza.org/dp17076.pdf>