



**Written Statement of John Auerbach
President and CEO, Trust for America's Health
House Ways and Means Committee: Legislative Proposals for Paid Family and Medical
Leave Hearing
January 28, 2020**

Thank you, Chairman Neal and Ranking Member Brady, and other members of the Ways and Means committee for the opportunity to submit written testimony on Legislative Proposals for Paid Family and Medical Leave. Trust for America's Health (TFAH) is a nonprofit, nonpartisan public health policy, research and advocacy organization that promotes optimal health for every person and community and makes the prevention of illness and injury a national priority. I joined this organization after working in public health for 30 years – as a city health commissioner, a state public health commissioner and as an associate director of the Centers for Disease Control and Prevention (CDC). We view access to paid family and medical leave as an important policy to promote public health.

I am glad the committee hosted this hearing to receive important testimony on paid family and medical leave. Paid family and medical leave are important because of the strong ties between health and income. Economic well-being can be a driver of health, and health can often be a driver of economic well-being. Research shows that even when family and medical leave is available, low-wage workers are less likely to take it when it is unpaid.¹ Increasing economic opportunities by expanding programs that bolster family income, such as paid family and medical leave, can help parents provide for their families while supporting healthy communities.

¹ Simonetta J. Family and Medical Leave in 2012: Technical Report. Washington, DC: U.S. Department of Labor, April 18, 2014. <https://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Technical-Report.pdf>.

TFAH's Promoting Health and Cost Control in States (PHACCS) initiative focuses on state-level policies that can be adopted and implemented to promote health and reduce costs.² TFAH identified access to paid family and medical leave as an evidence-based policy to improve health outcomes and provide economic benefits to workers and employers.

Family Leave

Paid family leave supports workers' ability to take time off for the birth or adoption of a child, take care of a parent or spouse with a serious medical condition or to care for a sick child. Access to paid leave can improve economic security for the family and contribute to better mental health for caregivers.^{3 4} Paid leave for new parents supports their ability to bond with their child, improves maternal and child health, increases breastfeeding initiation, and reduces the risk of birth-related health issues for mothers.^{5 6 7 8} These policies reduce the likelihood of having low-birthweight babies and pre-term births.⁹ In other developed nations where access to paid, job-protected parental leave is available, there is reduced infant mortality and child mortality, with longer durations of leave linked to greater reductions in death among infants and

² Trust for America's Health. Promoting Health and Cost Control in States.

<https://www.tfah.org/initiatives/promoting-health-cost-control-states-phaccs/>

³ Schuster MA, Chung PJ, Elliott MN, et al. "Perceived Effects of Leave From Work and the Role of Paid Leave Among Parents of Children with Special Health Care Needs." *American Journal of Public Health*, 99(4): 698–705, 2009.

⁴ Earle A and Heymann J. "Protecting the Health of Employees Caring for Family Members with Special Health Care Needs." *Social Science & Medicine*, 73(1): 68–78, 2011.

⁵ Huang R and Yang M. "Paid Maternity Leave and Breastfeeding Practice Before and After California's Implementation of the Nation's First Paid Family Leave Program." *Economics & Human Biology*, 16: 45–59, 2015.

⁶ Mirkovic KR, Perrine CG, and Scanlon KS. "Paid Maternity Leave and Breastfeeding Outcomes." *Birth*, 43(3): 233–239, 2016.

⁷ Heymann J, Earle A, and McNeill K. "The Impact of Labor Policies on the Health of Young Children in the Context of Economic Globalization." *Annual Review of Public Health*, 34: 355–72, 2011.

⁸ Isaacs J, Healey O, and Peters HE. *Paid Family Leave in the United States: Time for a New National Policy*.

Washington, DC: Urban Institute, 2017. <https://www.urban.org/research/publication/paid-family-leave-united-states>

⁹ Stearns J. "The Effects of Paid Maternity Leave: Evidence from Temporary Disability Insurance." *Journal of Health Economics*, 43: 85–102, 2015.

young children.^{10 11 12} Given that the United States currently has the highest rate of maternal mortality in the developed world, as cited by Chairman Neal and Ranking Member Brady in May 2019, policies under consideration that create, expand, and protect paid family leave can provide Congress with an opportunity to contribute to the much needed, multifaceted response to reverse the troubling trends in maternal and infant health.

It has been estimated that about two-thirds of women are employed during their first pregnancy, and those without access to paid leave must either take un-paid leave, quit their jobs or return to work shortly after childbirth.¹³ In total only about half of working women received paid leave, including only 3 in 10 working women with less than a high school diploma.¹⁴ A federal family leave policy would support women and other family caretakers, to help their families while giving them some financial security.

Medical Leave

According to the U.S. Bureau of Labor Statistics, about 38% of workers do not have access to paid medical leave.¹⁵ People who lack access to paid medical leave tend to be low-wage workers, working women, racial and ethnic minorities and employees with lower educational attainment.¹⁶ Offering paid medical leave can help decrease health disparities by expanding benefits to vulnerable and low-income populations. Paid medical leave is important so

¹⁰ Heymann J, Raub A, and Earle A. "Creating and Using New Data Sources to Analyze the Relationship Between Social Policy and Global Health: The Case of Maternal Leave." *Public Health Reports*, 126(Suppl 3): 127–134, 2011.

¹¹ Tanaka S. "Parental Leave and Child Health Across OECD Countries." *Economic Journal*, 115(501): F7–F28, 2005.

¹² Ruhm CJ. "Parental Leave and Child Health." *Journal of Health Economics*, 19(6): 931–960, 2000.

¹³ Laughlin L. "Maternity Leave and Employment Patterns of First-Time Mothers: 1961–2008." Washington, DC: U.S. Census Bureau, 2011. <https://www2.census.gov/library/publications/2011/demo/p70-128.pdf>.

¹⁴ *Ibid.*

¹⁵ "Employee Benefits in the United States—March 2018." News Release: U.S. Department of Labor, Bureau of Labor Statistics, March 2018. Available at: <https://www.bls.gov/news.release/pdf/ebs2.pdf>

¹⁶ Chen ML. "The Growing Costs and Burden of Family Caregiving of Older Adults: A Review of Paid Sick Leave and Family Leave Policies." *The Gerontologist*, 56(3): 391–396, 2016. <https://academic.oup.com/gerontologist/article/56/3/391/2605627>

workers have time off to recover from an illness or need to visit a healthcare provider without fear of lost wages or termination. When employees go to work instead of accessing medical care when they are sick, minor illnesses can worsen and become more costly. Research has shown that employees without paid medical leave are less likely to access preventive health services such as flu vaccinations or cancer screenings.¹⁷

This is an issue for all members of the workforce but is even more concerning for employees who work in close quarters with one another or with the public, such as restaurant workers. An estimated 87.7% of restaurant workers reported not having paid medical leave and more than 63% of all restaurant workers reported cooking and serving food while sick.¹⁸ This puts the workers, businesses and customers at risk of becoming ill. Paid sick leave provides workers with the opportunity to recover from an illness or seek medical care, without the fear of lost wages or termination, instead of delaying their own care or exposing others to infectious diseases.

Conclusion

TFAH supports paid family and medical leave proposals that promote economic security for families and support health in our communities. We have joined hundreds of other organizations, including many from the health sector, in endorsing the Family And Medical Insurance Leave (FAMILY) Act, which would create a national family and medical leave insurance program to help ensure that people who work can take the time they need to address serious health and caregiving needs.

¹⁷ DeRigne L, Stoddard-Dare P, Collins C, and Quinn L. "Paid Sick Leave and Preventive Health Care Service Use Among US Working Adults." *Preventive Medicine*, 99: 58–62, 2017. <https://doi.org/10.1016/j.ypmed.2017.01.020>

¹⁸ *Serving While Sick: High Risks and Low Benefits for the Nation's Restaurant Workforce, and Their Impact on the Consumer*. New York: Restaurant Opportunities Centers United, September 30, 2010. <https://rocunited.org/publications/roc-serving-while-sick/>

We thank Chairman Neal, Ranking Member Brady and members and staff of the committee for holding this important hearing.