

January 28, 2020

**Testimony in Support of SB580, from Heather Arnet, CEO Women and Girls Foundation
Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28, 2020**

Thank you to the committee, for your consideration of this important legislation, SB580, which has the capacity to improve the health and well-being of millions of Pennsylvania families and business owners. I humbly submit this testimony on behalf of the board of directors and members of Women & Girls Foundation (WGF), a non-profit organization based in Pittsburgh, Pennsylvania, serving over 10,000 members throughout the Commonwealth. Our organization's mission is to achieve equality for women and girls, now and for generations to come. In pursuit of this mission, WGF breaks down barriers so that every girl can rise and every woman can soar. Key initiatives include: *GirlGov*, a civics program for high school girls which brings 150 young women to the PA Capitol each year to shadow their legislators; and *Femisphere* an initiative focused on increasing the economic security of single mothers.

The Women and Girls Foundation is grateful to Committee Chair Senator Bartolotta for her leadership in prioritizing this important legislation for committee review, and to minority Chair Tartaglione for her continued support of this issue, as well as to the bill's sponsors and champions, Senator Dan Laughlin and Senator Maria Collett. This issue is one that has attracted broad bi-partisan support from throughout our state because it is an issue that impacts so many families throughout the commonwealth. We strongly urge the committee to vote YES to approve this critical piece of legislation. Increasing access to paid family and medical leave, through the model outlined in the Family Care Act, is a tangible way we can work together as a community to decrease infant and maternal mortality; provide necessary care for our elders; support small business owners; and ensure families can weather a cancer diagnosis or mental health crisis without being forced out of their jobs, homes, or our working economy.

In a state with one of the oldest populations in the country, and which is experiencing increasingly high cancer and diabetes rates, workers need access to paid leave in order to remain economically stable while taking care of themselves, a child, spouse, or elder when medical crisis occurs. Families should not have to manage the stress of illness and medical bills while also worrying about whether they might lose their jobs, because they needed to take a few weeks off of work to provide critical rehabilitative or palliative care to a family member. Because of the current lack of paid leave, on average, most women return to work within two-weeks of giving birth. Sadly, the U.S. is the only nation without paid family and medical leave, and the only developed nation in the world with increasing infant and maternal mortality rates. Children are needlessly dying. But it does not have to be this way.

The Family Care Act provides a business-friendly solution to ensure nearly all workers in our state will have access to paid family and medical leave. This model is designed after successful programs already in place in nine other states. A recent study, conducted by the Institute for Women's Policy Research, underscores the long-term effects of paid family leave on women's participation in the workforce. In states that have implemented paid leave policies, the researchers found a 20 percent reduction in the number of women leaving their jobs in the first year after welcoming a child, and up to a 50 percent reduction after five years. For women who do not have access to paid leave (such as those in Pennsylvania), the study found nearly 30 percent will drop out of the workforce within a year after welcoming a child, and one in five who lacked access to paid leave will not return for over a decade.



Women in states without paid leave are 2.5 times more likely than non-caregivers to live in poverty and five times more likely to receive Supplemental Security Income (SSI). When women are able to take paid leave, they are 39% less likely to be on public assistance the year following their child's birth. Imagine the cost savings to the state if we were able to decrease the number of individuals on public assistance in PA by helping families remain economically self-sustaining and help employers retain workers during these temporary leaves.

Pennsylvania citizens overwhelmingly report bipartisan support for a state paid family and medical leave policy. Research conducted by the PA Department of Labor in 2018, and Osage Research in 2019 found:

- Majority of employers (56%) reported being in favor of the development of a state program to provide paid family and medical leave to employees.ⁱ
- A strong majority of Pennsylvania adults favor (78% favor; 64% strongly favor) the development of such a state program. (Across gender, age, party, educational attainment, household income level, marital status, parental status, multigenerational households, and employment status.)ⁱⁱ
- Reflecting the importance of elder care in our state, there is a spike of support amongst voters (from 71% to 81%) when they learn that the policy would include coverage to provide critical care and rehab services to elderly loved ones at home without risking their jobs and financial security.ⁱⁱⁱ

We have conducted town halls and listening sessions throughout the state, and wherever we go, the same phrases come up time and again. People talk about how developing a state paid family and medical leave program is “the right thing to do” and how it is “important” for “family to be able to take care of family.” In Pennsylvania, it is clear that family comes first. The Women and Girls Foundation supports SB580 the Family Care Act. We encourage you to approve this legislation and work with the PA Department of Labor to develop a Paid Family and Medical Leave Insurance Fund for the State of Pennsylvania.



Heather S. Arnet, CEO, Women and Girls Foundation

ⁱ Paid Family and Medical Leave in Pennsylvania. Pennsylvania Department of Labor. November 2017. https://www.dol.gov/wb/media/Pennsylvania_Final_Report.pdf

ⁱⁱ Paid Family and Medical Leave in Pennsylvania. Pennsylvania Department of Labor. November 2017. https://www.dol.gov/wb/media/Pennsylvania_Final_Report.pdf

ⁱⁱⁱ Study conducted by *Osage Research* in 2019. *A public opinion survey to 400 likely voters across Pennsylvania.*



Strong Businesses, Strong Families:

Paid Family and Medical Leave Leads to an Economy That Works for All

Written testimony on SB 580 for the Pennsylvania Senate Committee on Labor and Industry

Marianne Bellesorte

Vice President of Advocacy, PathWays PA

January 28, 2020

PathWays PA would like to commend the Senate Committee on Labor and Industry for holding hearings to discuss the need for paid family and medical leave under SB 580, the Family Care Act (FCA). We strongly support this bill and look forward to seeing it pass out of committee and move on to the full Senate.

This bill proposes a policy that would benefit all Pennsylvanians, employers and employees alike. Through our work, we have seen many families struggle towards self-sufficiency, and observed firsthand how state policies affect their success. What we have learned is that finding a job is only one step on the path to self-sufficiency. In order for families to avoid returning to poverty and public benefits, they need to be able to find and keep good jobs – especially while facing illness at home.

Everyone should be able to care for themselves or their loved ones without risking their income or their jobs

At some point in their lives, virtually everyone will need time to care for themselves or a loved one. Whether it is a happy event (like adopting a child) or a sad one (such as a cancer diagnosis or a car accident), no one is immune.

However, without access to leave, workers are giving up more than their time. In many cases, employees who take care of themselves or others must also sacrifice their income, their savings, and even their homes. In 2009, half of working caregivers reported spending all or most of their savings on caregiving expenses. That same year, 1 in 5 family caregivers had to move in with a loved one due to the financial crisis – the same number, incidentally, that have needed to take a leave of absence from their work.¹

Even when families don't lose their jobs for taking unpaid time off, the income lost quickly adds up. On average, a family who loses just 3.5 days of pay due to illness loses the monetary equivalent of a month of groceries.² When workers need even more time to care for themselves or their families, such as in the case of a serious medical issue, the costs compound quickly. Over 1 in 5 Pennsylvanians do not have the resources to survive up to three months of sustained loss of income.³

At the same time, when it comes to taking leave, families often can't afford not to care for their loved ones. When parents participate in the care of sick children, studies show these children recover more rapidly from illnesses and injuries and have better health outcomes. Just having a parent present can reduce the length of a child's time in the hospital by 31 percent.⁴ For elders, caregiving plays a critical role in helping them stay in their homes.⁵ Taking care of family is the right thing to do, and the Family Care Act allows Pennsylvania workers to do so.

The Family Care Act helps Pennsylvanians in ways the FMLA cannot

When workers need to take weeks of leave for medical reasons (as opposed to taking several paid sick days for the flu or a doctor's appointment), they are often told to turn to the Family and Medical Leave Act (FMLA) for help. This federal program allows some workers to care for themselves or certain loved ones – without pay – while holding on to their jobs.

To qualify for the FMLA, employees must work at a company of 50 people or more and must be there for at least a year. While there are a few exceptions, workers can only use the FMLA to care for themselves, their spouse, their parents, or their children under 18. Nearly half of all workers in the United States can't use the FMLA due to these restrictions.⁶

Here in Pennsylvania, only 41% of workers both qualify for and can afford to use FMLA.⁷ Employees with less education are less likely to have access to FMLA, and two out of every five women do not have access to family and medical leave under the program.⁸ And when it is an adult child, a sibling, a grandparent, or a grandchild that falls ill or is injured, workers do not have FMLA protections, and must choose between caring for a loved one and potentially losing their jobs. Nationally, more than $\frac{1}{3}$ rd of family caregivers tend to family members who do not fall under FMLA guidelines, including siblings (5 percent of caregivers) and grandparents (8 percent).⁹

That Family Care Act gives workers who can't afford to take leave a way to care for their families. This paid family and medical leave program allows workers to take up to 20 weeks to care for themselves or 12 weeks to care for a loved one when there is a serious medical need, a new birth, and/or the adoption or fostering of a child. Everyone who works in Pennsylvania would be able to care for their loved ones. The cost to workers is literally fractions of a penny – around 0.6 cents per dollar earned, or \$0.58 per every \$100 dollars.

Paid family and medical leave boosts productivity, reduces turnover, and increases consumer spending

Family caregivers already play a vital role in saving money for Pennsylvania's businesses and healthcare systems, with over 1.3 million "informal" caregivers tending to others in the Commonwealth. If we put a monetary value on their services – ignoring the intangible benefits of having a supportive family member participate in care during illness, such as faster recovery time – it would add up to over \$14 million worth of care per year.¹⁰

Without a family member to provide care, these individuals may spend more time in a hospital, nursing facility, or hospice. While these facilities are designed to care for those who are sick, they cannot replace the presence and care of a family member during serious illnesses, and they certainly cannot provide care at such a low cost. Nursing home and hospital costs have continued to rise in recent years, while the cost of in-home care has remained steady.¹¹ In-home care also remains the preferred method of care for many patients and their caretakers.

Meanwhile, without a state or federal paid leave plan, employers and workers have to find a way to finance leave on their own. Medical emergencies, by their very nature, don't wait for a convenient time of year for a worker to be out. In 2016, only 14% of workers in the United States had access to paid family leave through their employers, and only 38% had disability leave (which would not allow them to care for other family members).¹² Workers without paid leave end up struggling financially while caregiving, or they try to work and provide care at the same time, which greatly affects their productivity.¹³

Meanwhile, since many small and mid-size companies can't afford to offer a paid family and medical leave plan of their own, main street businesses are left at a competitive disadvantage. A lack of paid leave means they can't afford to keep the workers they know and have trained. But when workers have access to paid leave, they are more likely to stay in their jobs. Women with access to paid leave, for instance, are 93% more likely to be working 9-12 months postpartum than those who did not take leave.¹⁴ Paid family leave strengthens attachment to the workforce, which in turn supports families, employers, and the state economy.

The Family Care Act ensures that small businesses, who otherwise could not afford paid family and medical leave, can retain the employees they've trained. If an employee needs to take leave, their employer can hold on to the salary or wages they would have paid their worker and use it to pay overtime, give another worker some extra hours, hire a temporary replacement, or perhaps spend it on something else entirely. Their employee, meanwhile, will get a portion of their income from the state paid leave fund to help them through their illness of caring for someone they love.

Experience with paid family and medical leave in other states shows strong outcomes

Since 2002, eight states and Washington D.C. have passed similar paid family and medical leave laws. The three states with the most experience, California, Rhode Island, and New Jersey, all have positive experiences to share. Six years after implementing their law, most employers in California reported that the program had either a positive effect or no noticeable effect on productivity, profitability/performance, turnover, and employee morale.¹⁵ In Rhode Island, 76% of employers had either positive or neutral feelings about the law one year after it passed.¹⁶ In both New Jersey and California, the law worked so well that the state government recently expanded the program, and Rhode Island is looking to do the same.

Meanwhile, state paid family leave programs also show improvements in public health, including increased breastfeeding, increased involvement of fathers in care, and reduced probabilities of ADHD,

hearing problems and recurring ear infections. In California, the state saw an 11% “relative decline” in elderly nursing home usage.¹⁷

The Family Care Act is the right thing to do

In Pennsylvania, we know that families come first. We are proud to be pro-family, and to live in a world where family takes care of family. That’s why the Family Care Act is so important – by allowing workers to care for their family, and employers to retain their workers, we can strengthen families and our economy. We hope that you will support this legislation so that Pennsylvania can get to work at keeping our economy working.

About PathWays PA:

PathWays PA was founded in 1978 as the Women’s Association for Women’s Alternatives. It served as one of Pennsylvania’s first residential programs to keep low-income, vulnerable women together with their children and has grown to become one of the Greater Philadelphia Region’s foremost providers of residential and community-based services for women, children and families. Each year nearly 4,300 women, children and families benefit from our full complement of residential and community-based services; job training and employment assistance; as well as self-sufficiency services as they work to break the cycle of poverty, homelessness, and abuse. With offices throughout Southeastern Pennsylvania and advocacy initiatives on behalf of low-wage workers statewide, PathWays PA provides programs committed to the development of client self-sufficiency which leads to the fulfillment of our mission:

To help women, teens, children and families achieve economic independence and family well-being.

More information is available at www.pathwayspa.org.

¹ <http://caregiveraction.org/statistics/#Economics of Caregiving>

² <http://www.phila.gov/mayor/pdfs/Paid%20Sick%20Leave%20Task%20Force%20Report.pdf>

³ https://www.dol.gov/wb/media/Pennsylvania_Final_Report.pdf

⁴ http://paysickdays.nationalpartnership.org/site/DocServer/Fact_Sheet__Paid_sick_days_are_good_for_childrens_health.pdf?docID=4182

⁵ http://paysickdays.nationalpartnership.org/site/DocServer/PSD_FactSheet_OlderPeople_0809226.pdf?docID=4186

⁶ <http://cepr.net/documents/fmla-eligibility-2014-01.pdf>

⁷ https://www.dol.gov/wb/media/Pennsylvania_Final_Report.pdf

⁸ <http://cepr.net/documents/fmla-eligibility-2014-01.pdf>

⁹ <http://www.nationalpartnership.org/research-library/work-family/fmla/updating-the-fmla.pdf>

¹⁰ http://www.caregiver.org/caregiver/jsp/content/pdfs/state_profile_pa.pdf

¹¹ <http://money.usnews.com/money/blogs/the-best-life/2013/04/09/long-term-care-costs-favor-home-based-treatment>

¹² https://www.bls.gov/ncs/ebs/benefits/2016/ownership_civilian.htm

¹³ <https://www.aarp.org/caregiving/life-balance/info-2019/caregiving-demands-workplace.html>

¹⁴ https://smlr.rutgers.edu/sites/default/files/images/CWW_Paid_Leave_Brief_Jan_2012_0.pdf

¹⁵ <http://cepr.net/documents/publications/paid-family-leave-1-2011.pdf>

¹⁶ https://www.dol.gov/sites/dolgov/files/OASP/legacy/files/AssessingRhodelslandTemporaryCaregiverInsuranceAct_InsightsFromSurveyOfEmployers.pdf

¹⁷ <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-leave-works-evidence-from-state-programs.pdf>

TESTIMONY FROM ROBERT CICCIO, MD IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

Good morning and thank you for the opportunity to testify in support SB 580. My name is Robert Cicco and I am a retired pediatrician and neonatologist from Pittsburgh, PA. I am a past president of the PA Chapter of the American Academy of Pediatrics and the Allegheny County Medical Society. I also serve on the Pennsylvania Department of Health Child Death Review Advisory Committee. My comments today come as a result of my experience in caring for babies and families in the Neonatal Intensive Care Unit at West Penn Hospital in Pittsburgh for 35 years. During my career, I have continually advocated for families to be actively involved with the care of their babies in the NICU and have given numerous presentations on this subject across the county. Although now retired from clinical medicine, I have continued these advocacy efforts in order to assure that all families are optimally prepared to care for their children after discharge. In addition, I have been actively involved with efforts to identify factors that lead to poor pregnancy outcomes, including preterm birth, and reduce the number of families requiring neonatal intensive care.

Now you may ask why this work is so important. The fact is that, despite having the most advanced neonatal medical care in the world, the United States, which 50 years ago had the one of the lowest infant mortality rates in the world, now ranks behind 23 other countries. Even worse, racial disparities in pregnancy outcomes continue to exist and have been largely unaddressed. In my county, black babies are 5 times more likely to die as a result of a preterm birth than white babies. We simply MUST rethink the way in which we promote healthy pregnancy outcomes and develop innovative strategies to reduce our dependency on high tech medical interventions. A large part of this innovation has to be recognizing the vital role parents play in promoting the health of their children and enhancing their brain development and neurologic outcomes.

I don't need to tell any of you that having a baby is both a joyful and stressful event, even if your baby is perfectly healthy. All new parents balance the joy of their new addition with concerns about how they will handle the challenges of parenting. However, when a baby requires neonatal intensive care, there is little joy since the concerns and stresses are multiplied a thousandfold. Every day there is an ongoing fear that their baby may not survive the day. This is true regardless of how critically ill their child may be. Part of my job over the years has been to help parents deal with those fears and recognize the vital role they play in helping their baby over any hurdles during the hospital stay. We've learned that it is critical for health care professionals to do everything possible to help parents gain the confidence they need to care for their baby after discharge. Over the years, parents have taught me a number of things. One is that there were two critical days that were most frightening to them. The first of these is the day a mother is discharged from the hospital without her baby. I would routinely say to mothers of the day of their discharge, "I know this must be a hard day for you." That was all it usually took for a

mother to break down crying, telling me how she should not be abandoning her baby in the hospital. This opened the door for us to discuss ways in which she would always be there for her baby and emphasize how her presence, even after her discharge, would help provide her baby strength to recover. But make no mistake that a parent's feeling of abandonment is very powerful emotion and requires a great deal of effort to combat.

The second most difficult day for a parent, strangely enough, is the day of discharge. It has taken years for NICU staff to recognize this fact. Certainly there is joy that their baby is coming home. But that joy is often completely overshadowed by the fear of leaving the safety and security of the NICU that saved their baby's life. This fear may have a great impact on the interaction between a baby and his or her parents, interfering with the parent-infant communication that is so essential for normal development. Again, the best way to minimize this fear and to enhance parental confidence at the time of discharge is to completely engage parents during the hospital stay so that they are allowed to learn their baby's individual ways of communicating their needs. So that a parent can know how their baby is saying, "I need to be fed, or I need my diaper changed, or I need to learn so come play with me, or I need to process what I've learned so put me down, or I'm sick and need to see the doctor". Parents are good at learning this from their baby if we give them the opportunity. But if we don't, it can be a frightening experience. I have no doubt that the stresses caused by a NICU stay and discharge of a fragile infant contribute greatly to the high incidence of both anxiety and depression in parents of NICU patients. As I've stated, the key to reducing these risks is to maximize opportunities for parents to be with their babies and to get to know their babies. Providing excellent medical care to a sick baby is not enough. As a society, we must ensure that all parents have an equal opportunity to develop a relationship with their babies, to love them, nurture them, teach them, and help them thrive.

All of the above brings us to SB 580. In today's world, the ability of many families to participate in their newborn's care during the NICU stay is compromised by restrictions placed on them by their work situations. Most working parents have no available family leave. Sometimes there is family leave but a parent has to choose whether to take it while their baby is in the hospital or wait until the time of discharge. Regardless of what they choose, they are adding to the the significant stress outlined above by trying to balance work and a critical time in their baby's life. Sometimes family leave is available but a family's financial situation does not allow them to use it since the leave is unpaid. This obviously impacts lower wage earners much more than others. All of these situations contribute to a feeling helplessness, lack of control and a sense that they are not doing everything they can for their newborn. SB 580 will be a great assistance in assuring that a parent can focus all of their attention on their child. Reducing that feeling of helplessness can go a long way towards enhancing a parent's confidence and thereby increasing a baby's chances of not just surviving, but having normal emotional and behavioral development. I mentioned earlier that we all must start thinking of innovative ways to improve the health and well being of our youngest population. This legislation is a great way to assure that all babies, especially the most fragile of babies, get the best start in life possible.

I urge to you, on behalf of all the families I have had the honor of caring for over the years, to rapidly pass SB 580.

Thank you very much for your attention.

A handwritten signature in black ink, appearing to read "R. Cicco MD". The signature is fluid and cursive, with a horizontal line extending from the end of the name.

Robert Cicco, MD
rcicco@aap.net
412-498-9528



January 20, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

Dear Committee Members,

As a small business owner, I am writing in support of SB 580: THE FAMILY CARE ACT. I have owned and operated businesses for nearly 40 years. In that time, my businesses have been successful because of the people that work with me in these companies. In a small business, you get to know the people working with you as well as their families. You hear the stories of graduations, soccer tournaments and birthday parties. You also hear the stories of a baby on the way. A spouse that needs emergency heart bypass surgery. A daughter that has been injured in a domestic violence act. These are stories of people working with me in the last 9 months. I have countless similar stories of people working with me.

As a small company, we cannot afford to offer time off with pay under the current system. Currently, we would need to shoulder that financial burden all on our own. A state paid family and medical leave insurance fund, like the one presented in SB 580, supported by employee payroll investments, and would provide our small company a way to provide these critical benefits to our workforce without putting all the costs onto the employer. This model would be a big help to small business owners like myself. I have always offered unpaid leave, similar to the FMLA model even when my worker population did not warrant it. It would have been wonderful to have been able to provide paid leave, if we could have. Why? Because my companies have been successful because of workers like Missy, who is our receptionist and accounts receivable clerk. Missy also jumps in to help make sales calls to customers when needed and Missy always is willing to fill in driving one of our trucks for deliveries when we need it. Missy does this all with a smile and can-do attitude. In a small company, these are the kind of people you rely on. Watching Missy, a single mom, struggle to be at work because she had recently bought her first house, while at the same time caring for her son who injured his back and was bound to a bed was painful. Having a state insurance support system for people like Missy would take some of her pain away in difficult times. Having another employee, again a single mom struggling between needing to be a work after her high school daughter was injured by a boyfriend or staying home to care for her daughter was troubling. These workers are the ones that cannot afford to miss work, yet, as you would expect, their families comes first and I expect them not to come to work for these issues. Yet, they are conflicted because these are the people that do not have the financial resources to miss work in an emergency. They need this safety net.

As a small business owner, I was thrilled to understand how the creators of this bill worked to make this bill not a burden on our company, take care of our workers and have the backstop to prevent fraud. Please, move this bill to the floor of the Senate and work to pass it. Thanks.

Sincerely for Uncle Charley's Sausage Company,

Len Caric
President & CEO

1135 Industrial Park Road
Vandergrift, PA 15690

Tel: 724-845-3302

Fax: 724-845-3174

info@unclecharleys.com



TESTIMONY FROM WHITETHORN DIGITAL

IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee

January 28th, 2020

By

Dr. Matthew M. White

Managing Director, Whitethorn Digital

About Whitethorn Digital:

Whitethorn Digital is an indie game publisher located in Erie, Pennsylvania, with a hard focus on approachable games that can be played in pieces, that require no special skills or knowledge, and that anyone can pick up and play. We're fierce defenders of accessibility, inclusion, and widening the audience that can play games. We like to consider ourselves the defenders of easy games. Whitethorn Digital also promotes diversity and inclusion in both the games we produce and the developers we employ, focusing on people of color, women, and the LGBTQ+ community.

To the esteemed members of the Pennsylvania Senate Labor & Industry Committee:

My name is Dr. Matthew White. I am the Managing Director of Whitethorn Digital in Erie, Pennsylvania. I am an employer in a very working-class and family-oriented part of Pennsylvania. I am a husband and a father with a second child due in August. I am a son with an aging mother who requires frequent medical visits, and I am a supporter of the Family Care Act.

As the owner of a small business, this is a vital piece of legislation. I cannot afford-- literally-- to pay for my employees to be absent, as much as I value their physical and mental well-being. By passing this legislation, you will allow small business owners like me to give employees extended leave for themselves and their loved ones while also giving them peace of mind knowing that they will be provided for.

Beyond my professional perspective, I have a personal stake in this legislation. As I stated, I am a husband and a father. My wife and I are currently expecting our second child in August 2020, and our son McClain was born in September 2018. My wife is a high school teacher in Harborcreek, Pennsylvania. While the Family Medical Leave Act (FMLA) did guarantee that she would not lose her job during her maternity leave, it also did not provide us with that sorely missing income. Fortunately, my wife had accrued enough sick days to allow her to spend six paid weeks at home with our son before returning to work; and fortunately, she had an easy pregnancy and labor. I worry about what would have happened had there been any complications and wonder what will happen with the birth of our second child.

We have friends who have had Caesarean sections which require eight weeks of recovery time. We have friends who have had premature babies requiring stays in the neonatal intensive care unit (NICU). We have friends who have had children diagnosed with life-threatening diseases requiring hospital stays. We have been lucky, but luck is **all** that separates us from days, weeks, even months of missed work, missed paychecks, and missed bills.

While this is a personal and emotional appeal, there are also economic implications. Research from the National Partnership for Women and Families has shown that support systems like SB 580 reduce the burden on social assistance programs by reducing the likelihood of lost jobs among vulnerable populations, reducing overall budgetary load on local, state, and federal governments.¹

Please for the sake of my employees, for the sake of my family, and for the sake of Pennsylvanians everywhere, pass the Family Care Act.

1

<https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/paid-sick-days-good-for-business-and-workers.pdf>



Executive Office

960A Harvest Drive, Suite 100

Blue Bell, PA 19422

610-825-9360 fax 610-825-4127

January 21, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

Dear Senators:

I am writing to express KenCrest's support for the Family Care Act (HB 1739/SB 580), a statewide paid family leave program for people with disabilities, parents of new children, and families. Thank you for holding a hearing to discuss this important piece of legislation.

KenCrest is a human services non-profit organization that provides supports and services to adults with intellectual or developmental disabilities, and early intervention services, early education and child care to children. KenCrest provides services to over 12,500 individuals annually with a dedicated staff of 2,500 employees. KenCrest's mission is to support community development by exploring possibilities, mobilizing resources, and empowering dreams.

The Family Care Act establishes a paid family medical leave insurance fund for eligible employees. The fund establishes paid leave for employees only in the event of:

- A serious personal health condition
- Caring for a close family member with a serious health condition
- Caring for a new child
- A qualifying exigent circumstance involving a member of the military

The Family Care Act will support the thousands of families that KenCrest serves by allowing them to take paid leave to care for themselves, a new child, or a loved one with a disability. It will also support KenCrest employees and the agency's advocacy goal to target and strengthen families.

KenCrest looks forward to working with you on passage of this critical legislation. If you have any questions or would like to discuss further, please feel free to contact Maureen Quinn Yamamoto, Government Relations Strategist, by email at Maureen.Quinn.Yamamoto@KenCrest.org or by phone at (610) 825 9360 ext. 1020.

Thank you again for holding a hearing on the Family Care Act.

Sincerely,

Marian Baldini
President and CEO
KenCrest

TESTIMONY FROM JILL LAUFENBERG IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

My name is Jill Laufenberg, and I reside in West Chester Pennsylvania.

When our 16-year-old adoptive daughter was hospitalized for an eating disorder just months after bringing her into our home, our son was also going through treatments for an inoperable growth behind his eye. Everything was at CHOP. We would alternate driving into the city on a daily basis but neither one of us could afford to take time off of work. My husband's job was 100% commission and while he had the most flexible schedule of the two of us, we couldn't afford any break in finances for family medical leave. At the time, we had nearly depleted our savings and if we went without pay, we would be in an even worse/dangerous position. We thought our new daughter understood the circumstances, but she ended up with deep resentment toward us. She would see other parents stay at the hospital with their children and we were the ones leaving. She interpreted our absence as we didn't love her and didn't care. Our not being able to be present, coupled with her Reactive Attachment Disorder that was later diagnosed, caused her to leave our family when she turned 18.

Although I can't predict the outcome if we were able to take a paid family medical leave because the Family Leave Act was in place when I needed it, I can say with certainty that we would have had better chances in connecting with our newly adopted daughter. It is possible, that if we had the time to give, we would still have her in our family today.

I am asking the committee members to support the legislation and to advance the bill through the Labor & Industry committee.

TESTIMONY FROM Monica Albert Still, RN, BSN
IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

My name is Monica Albert Still, RN, BSN I am a retired home healthcare administrator and RN currently living in New Brighton, PA. I have worked in community health for the past 30 years and continue to be involved as a consultant and advocate. I have seen families scramble to try to piece together care for their loved ones because they cannot afford to forgo an income or their employment is not covered by FMLA. These families are forced to choose between providing safe care for a loved one or paying for basic necessities. Sometimes the choice is between safe care and their job. I have seen this impossible decision having to be made more and more, in recent years, as people live longer, have children later, and caregivers are responsible for both their parents and children. This is a community health crisis in the making. What happens when people cannot afford or are able to care for their loved ones? It then becomes the burden of the Commonwealth to provide resources via protection agencies and ultimately provide care. It is far more costly to provide those services than it is to administer the Family Care Act.

I am also disabled (Spina Bifida and Amputee) and have been since birth. I was the sole provider for my family of 4. My husband had just been laid off, Unemployment was barely enough for groceries. I had developed a wound on my remaining leg. I kept working despite the wound because I needed to care for my family financially. Delaying care had its consequences and I was hospitalized with an antibiotic-resistant infection. I had only been working for my current employer for 3 months. I was not covered by FMLA and had not accrued any sick time. I was fortunate that my job could be done remotely. It was a hard sell and I had to agree to prove that I was indeed working but my employer agreed to allow me to work from my hospital bed. Despite my doctor telling me that this was contraindicated and would likely impede my healing. I made the near-impossible choice to risk losing my remaining leg in order to be able to provide the necessities for my then 10 and 16-year-old girls. Had the Family Care Act existed when this incident occurred I would have been able to concentrate on my healing without worrying about finances. Ultimately, I likely wouldn't have the same wound on my leg that remains to this day and led to my retirement on disability.

There is also a community healthcare crisis in the disability community. Personal care aides that allow disabled people to live in the community independently are in short supply. This shortage is true if the personal care aide is hired by an agency or privately by an individual. People are not choosing to do this work because they are low wage nor covered by FMLA. If they need to care for a family member they will likely lose their job. The disabled person will go without needed care and be placed in a facility. Facility placement would be an additional cost to the Commonwealth. The Family Care Act would alleviate one factor leading to the shortage. If

needed a PCA would be able to care for their family member, collect a salary, and be able to return to their job. The agency or disabled person would be able to pay the salary of a temporary replacement caregiver. The disabled person would remain safely in their home and not in need of placement.

I urge you to pass this bill through the Labor & Industry Committee. This bill not only helps our businesses, but also helps the families of Pennsylvania, which are the backbone of our Commonwealth. The job of the government is to improve the lives of the people that it governs. The Family Care Act does this.

Thank you for your time and consideration.

FRANKLIN & MARSHALL COLLEGE

January 21, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

Dear Committee Members:

As a mother, I know the beauty and bewilderment of new parenthood. Having fostered, I know the wonderful and hard period of welcoming a child into an established family. And as a developmental psychologist, I understand the science behind a truth we all already know: Strong caregiving bonds between parents and children mean healthier kids and more resilient families. The paid family medical insurance leave fund established by the Family Care Act (SB 580) is positioned to strengthen these bonds for Pennsylvania's parents and children.

I am an Associate Professor of Psychology and the Department Chair of Psychology at Franklin & Marshall College in Lancaster. I also direct the Child Development Lab, part of the Development and Experience Center, where I conduct research on children's cognition. I teach courses related to child development, cognitive development, and research methods in developmental psychology.

Under current law, [over half of working adults in Pennsylvania](#) are unable to take paid leave from work in the weeks or months following the birth of a child or to care for an aging family member. [FMLA](#) only applies to a restricted group of employees — and even if you are among the lucky eligible, pay isn't guaranteed. This makes it a non-starter for many working Pennsylvanians. In contrast, paid family leave provides crucial stability and safety for families—particularly those in financially difficult circumstances.

The child development benefits of family leave start before birth. Babies born to chronically stressed women, including those who are financially stressed, fare less well.^{1,2,3} Women who are chronically stressed tend to have more pregnancy complications and give birth to babies with lower birth weights, higher infant mortality, and longer hospital stays.^{4,5,6,7} There are many factors at play in these outcomes. However, it's not hard to imagine the grim strain of anticipating the arrival of a new baby knowing that in order to give birth, you'll miss work, lose necessary paychecks, and possibly lose the job. In contrast, knowledge of guaranteed pay and job protection reduces key areas of stress during pregnancy.^{8,9} Paid family leave is linked to health positive outcomes *before the leave has even begun*.

After birth, benefits continue to accrue: Paid family leave helps parents make good medical choices for their young children. The [CDC says, unequivocally](#), that to learn and grow optimally, a baby's brain has to be healthy and protected from early diseases and other risks. Mothers with leave are more likely to bring their infants to all early pediatric appointments and screenings. Their children's vaccination rates are higher^{10,11} and rates of infant illness and mortality are lower.¹² New babies who can stay at home are better protected from infection. Breastfeeding rates and duration go up among women with leave,^{13,14,15} which is a good and protective choice for moms and babies alike when possible. Additionally, mothers

with access to leave are more likely to physically heal well and psychologically adjust better immediately after childbirth, with their health directly impacting their infants' quality of care.^{16,17} All of these easy-to-measure health metrics point to the value of paid family leave. There are other, harder-to-measure metrics that may be the most important of all.

To be a healthy human requires healthy relationships. For an infant, this means a steady diet of warmth, responsiveness, and caring.¹⁸ One way of thinking about a brain, especially a very young brain, is that it has two simple goals: survival and development. Unfortunately, development goes by the wayside when survival feels threatened — and what constitutes a threat to an infant can be subtle. We are not born capable of regulating our nervous systems. A baby who is distressed, crying, arms pumping, face red, needs a caregiver to help bring its aroused physical system back to calm.^{19,20} When a caregiver cradles that distressed infant, stress-calming physiological processes are triggered in the baby's brain and body. What's more, repeated caregiver *co*-regulation of this type moves children closer to healthy *self*-regulation later in development.^{21,22,23} These day-to-day interactions are the stuff that long-term, durable social bonds are made of.^{24,25} It's a beautiful process. However, the all-consuming early stages often look less like beauty for parents and more like overwhelm and exhaustion. Paid family leave promotes a parent's ability to adjust to and provide this demanding but foundational care in infancy.²⁶

It's worth noting that almost everything written above applies to fathers too. Recent studies show that fathers who take family leave — especially to be the primary caregiver for a time when the mother has returned to work — tend to become more competent, involved, loving, and equitable caregivers for years onward.^{27,28,29,30} An involved, close father nearly always means greater wellbeing and stability for children.^{31,32}

From my vantage point, the story is simple: Paid family leave is good for children. It has been shown to reduce stress in mothers and infants, improve pregnancy outcomes, promote healthy medical choices, and allow for the consistent attentiveness, warmth, and security that are crucial to bonding and early thriving.^{33,34} Together, these benefits predict social, academic, and economic competence for children years later.³⁵ This is not to say that first experiences are destiny, either for good or ill. And paid family leave will not solve all problems facing families in Pennsylvania. But time for infant care should not be a privilege for a few; it should be a practice supporting all children. Research across disciplines and methods makes it clear that paid family leave can be part of the solution. As both a mom and child development scholar, it is clear to me that providing new parents with paid family leave, one aspect of the Family Care Act, is good for children and families.

Sincerely,



Krista M. Casler, Ph.D.
Chair, Department of Psychology
Director, Child Development Lab
Franklin & Marshall College
kcasler@fandm.edu

Endnotes

1. Mulder et al., 2002, Prenatal maternal stress: Effects on pregnancy and the (unborn) child
2. Polsanka et al., 2017, Maternal stress during pregnancy and neurodevelopmental outcomes of children during the first 2 years of life
3. Davis et al., 2019, Prenatal maternal stress, child cortical thickness, and adolescent depressive symptoms
4. Dunkel-Schetter & Lobel, 2012, Pregnancy and birth outcomes: A multilevel analysis of prenatal maternal stress and birth weight
5. Lobel et al., 2008, Pregnancy-specific stress, prenatal health behaviors, and birth outcomes
6. Gillespie et al., 2017, Childhood stress and birth timing among African American women: Cortisol as biological mediator
7. Bryant-Borders, 2007, Chronic stress and low birth weight neonates in a low-income population of women
8. Stearns, 2015, The effects of paid maternity leave: Evidence from temporary disability insurance
9. Rossin, 2011, The effects of maternity leave on children's birth and infant health outcomes in the United States
10. Daku et al., 2012, Maternal leave policies and vaccination coverage: a global analysis
11. Hajizadeh, 2015, Paid maternity leave and childhood vaccination uptake: Longitudinal evidence from 20 low-and-middle-income countries
12. Patton et al., 2017, Paid parental leave policies and infant mortality rates in OECD countries
13. Steurer, 2017, Maternity leave length and workplace policies' impact on the sustainment of breastfeeding: Global perspectives
14. Ogbuanu et al., 2011, The effect of maternity leave length and time of return to work on breastfeeding
15. Mirkovic et al., 2016, Paid maternity leave and breastfeeding outcomes
16. Jou et al., 2018, Paid maternity leave in the United States: Associations with maternal and infant health
17. Aitken, 2015, The maternal health outcomes of paid maternity leave: a systematic review
18. National Scientific Council on the Developing Child (2004). Young Children Develop in an Environment of Relationships: Working Paper No. 1. Retrieved from www.developingchild.harvard.edu
19. Welch & Ludwig, 2017, Calming cycle theory and the co-regulation of oxytocin
20. McKay et al., 2019, Maternal positive responses to a distressed infant simulator predict subsequent negative affect in infants
21. Ostlund et al., 2017, Shaping emotion regulation: Attunement, symptomatology, and stress recovery within mother–infant dyads
22. Thomas et al., 2017, Developmental origins of infant emotion regulation: Mediation by temperamental negativity and moderation by maternal sensitivity
23. Rosanbalm & Murray, 2017, Caregiver co-regulation across development: A practice brief. OPRE Brief #2017-80
24. Diener et al., 2009, Infants' behavioral strategies for emotion regulation with fathers and mothers: Associations with emotional expressions and attachment quality
25. Cooke et al., 2019, Parent-child attachment and children's experience and regulation of emotion: A meta-analytic review
26. Clark et al., 1997, Length of maternity leave and quality of mother-infant interactions
27. Knoester, Petts, & Pragg, 2019, Paternity leave-taking and father involvement among socioeconomically disadvantaged U.S. fathers

28. Petts & Knoester, 2018, Paternity leave-taking and father engagement
29. Kramer, Bae, Huh, & Pak, 2019, The positive spillover and crossover of paternity leave use: A dyadic longitudinal analysis
30. O'Brien, 2018, Transforming infancy through paternity and parental leave
31. Cabrera, Shannon, & Tamis LeMonda, 2007, Fathers' influence on their children's cognitive and emotional development: From toddlers to pre-K
32. Lamb, 2010, *The role of the father in child development* (5th ed.)
33. Heymann, 2017, Paid parental leave and family wellbeing in the sustainable development era
34. Unicef, 2019, Paid parental leave and family-friendly policies: An evidence brief
35. Carniero et al., 2010, A flying start? Long-term consequences of maternal time investments in children during their first year of life



**Get Active.
Be Connected.
Create Change.**

January 28, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

Dear Members of the Senate Labor & Industry Committee,

On behalf of the Board of Directors, staff, and constituents of PUMP, I am writing to voice our strong support for Senate Bill 580, also known as the Family Care Act. PUMP is a nonprofit whose mission is to make the Greater Pittsburgh Region the most dynamic and diverse place by engaging, educating, and mobilizing all young people to create change in our community. Each year, we serve nearly 30,000 individuals, primarily under the age of 40, through our advocacy, social, and recreational programming.

As an equity-focused advocacy network of young people in Southwestern Pennsylvania, PUMP is fully supportive of the Family Care Act, which would establish a Paid Family and Medical Leave Insurance Fund for Pennsylvania employees. We believe that all Pennsylvanians should have access to paid leave options that allow them to care for themselves and for their loved ones in times of need. No one should have to make difficult choices that compromise and threaten one's health, well-being, and economic security. Unfortunately, this is an all too frequent reality here in Southwestern Pennsylvania and the Commonwealth at large for many individuals and families.

Many millennials and young adults like those we serve at PUMP support paid leave programs specifically to [help them care for aging parents](#)ⁱ – a need that is especially relevant in our state given that the median age in Pennsylvania of 40.8 is nearly 3 years higher than the median age for the United States of 38.1. Not only is paid family and medical leave popular among younger adults, but it also enjoys broad support among Pennsylvanians of all ages and political parties with 78% of Pennsylvania adults in favor of establishing a statewide paid leave program. This is a growing bi-partisan issue that unifies rather than divides us due to the enormous positive impact that it will make in the lives of people of all ages from everywhere in the state.

We also support a state fund for paid family and medical leave because it is good for business and economic growth. A majority of young professionals and millennials throughout the U.S. cite benefits packages as very important in choosing a job, with paid leave among the top benefits cited.ⁱⁱ Pennsylvania is currently at a significant competitive disadvantage for attraction and retention of top tier talent when compared to Washington D.C., New Jersey, New York, and other states in the region that already have paid leave laws and programs in place. Such a program would provide a much-needed and immediate boost to businesses to help them attract and retain talented employees, especially small

businesses that cannot afford to offer paid leave of any kind and therefore often lose talent to their larger counterparts and competitors.

A study from [America's Small Business Development Centers](#) shows 62% of millennials have a dream business they would love to start and 49% say they intend to start their own businesses in the next 3 years.ⁱⁱⁱ These are hopes and dreams that we should nurture and support with good public policy. With a paid family and medical leave program in place, these young entrepreneurs (and entrepreneurs of all ages) will be able to launch their businesses on firmer ground by providing a critical and much desired employee benefit to all.

As each day passes, the chorus of voices across our state grows larger and louder in support of this program given the increasing economic challenges that we all face and the demonstrated positive difference and benefits that a paid leave program would bring to people and communities. Indeed, the Family Care Act is a solid plan for our younger workforce, for small business owners, and for all families across the Commonwealth.

If PUMP can be a further resource to the Committee on this issue, please do not hesitate to contact me at brian@pump.org or (412) 338-2133. To learn more about PUMP, please visit www.pump.org.

We urge you to support Senate Bill 580 and advance it through your committee. Thank you for this opportunity to submit written comments and for your consideration of the Family Care Act.

Sincerely,



Brian Magee
CEO, PUMP

ⁱ Abigail Abrams, "Millennials Struggling to Care for Aging Baby Boomer Parents Call for Better Paid Leave," *Time*, March 23, 2018, <https://time.com/5203203/fmla-paid-leave-millennials-caregiving/>.

ⁱⁱ Bill Gimbel, "Benefits Employees Appreciate Most in 2018," *HR Daily Advisor*, May 11, 2018, <https://hrdailyadvisor.blr.com/2018/05/11/benefits-employees-appreciate-2018/>.
The LaSalle Network. *Hiring Millennial Talent in 2019*. 2019, <https://www.thelasallenetwork.com/wp-content/uploads/2019/01/Hiring-Millennial-Talent-in-2019.pdf>.
MetLife. *Thriving in the New Work-Life World: MetLife's 17th Annual U.S. Employee Benefit Trends Study 2019*. 2019, <https://www.metlife.com/content/dam/metlifecom/us/ebts/pdf/MetLife-Employee-Benefit-Trends-Study-2019.pdf>.

ⁱⁱⁱ America's Small Business Development Centers and The Center for Generational Kinetics. *America's Voice on Small Business: Generational Views of Entrepreneurship and Small Business*. 2017. <https://americassbdc.org/wp-content/uploads/2017/05/White-Paper-GenStudy-6-1-2017.pdf>.

Roselyn Wilkinson
45 Longuevue Drive
Pittsburgh, PA 15228

January 21, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

RE: Testament for Senate Bill 580 – the Family Care Act

Dear Committee Members:

Please register my support for the Family Care Act. This is such important legislation for Pennsylvania citizens. As an employee, there were several times in my working career that my family could have benefited from this legislation. Now, as an employer, I would love to offer my employee this important benefit but can't afford it. That's why the structure of the Act's funding is so great!

No matter the cause, worrying about job security is the last thing anyone needs when concerned about the health and wellness of a family member. Even if working for me is more desirable in every other way, I can understand why someone might choose to work for a big company if paid leave was part of the compensation package. People must make the best financial choices for their families. Passing the Family Care Act improves my competitiveness as a small business owner. In the bigger picture, it would improve our commonwealth's competitiveness relative to our NY and NJ neighbors.

The list of people I know that could be (or could have been) positively impacted by SB 580 is too long to detail here. I can tell you that I see the need becoming more acute with both friends and clients. Everyone seems to have at least one elderly family member suffering from advanced dementia or Alzheimer's. Helping their loved ones navigate these conditions is a terrible emotional strain on the family and it can easily tear siblings apart. Inevitably, one child handles more care than the others. Not only can this build resentment that can be damaging in real time, it can have long-lasting impacts on the future relationship between the siblings. It's awful for everyone involved. This legislation can't solve the dysfunction of long-standing family dynamics, but it can help to alleviate the role of strained finances on your citizens' situations.

I urge you to pass Senate bill 580. The Family Care Act is the right thing to do for all Pennsylvanians.

Sincerely,


Roselyn Wilkinson

The Family Care Act

**Testimony from
Nancy D. Zionts, COO/Chief Program Officer
Jewish Healthcare Foundation
January 2020**

Pennsylvanians need legislation like the Family Care Act. As Chief Operating Officer and Chief Program Officer of the Jewish Healthcare Foundation and its three operating organizations (Pittsburgh Regional Health Initiative, Health Careers Futures and the Women's Health Activist Movement Global (WHAMglobal)), I am pleased to offer testimony in support of The Family Care Act under consideration for our Commonwealth.

As a nearly 30-year-old health foundation in Southwestern PA, the Jewish Healthcare Foundation looks for solutions to health and social issues, recognizing that the solutions to problems may come from other communities, states, or countries.

- In Australia, we saw first-hand how supportive public policy enabled families to have the time post-childbirth for physical healing and appropriate mother/father/baby bonding. Dividends from this policy are seen in dramatically lower incidence of maternal mortality or infant illness.
- Canadian policies protect workers' jobs for up to 28 weeks when they provide authorized caregiving, for immediate and even extended family members in some cases.
- And, in the United Kingdom and many other European countries, it is unthinkable that families would not be able to provide the intimate care for a family member with cancer or other life limiting illnesses.

We know there is a lot to learn by studying the models that have been adopted elsewhere, knowing that some adaptation will be necessary for our circumstances. But we recognize that the status quo does not meet the needs of families or employers.

Some people become family caregivers because they have to: they get the call that mom has suffered a stroke, dad had a heart attack, or their child was diagnosed with cancer. They know that they must be with them to navigate the medical systems and to provide physical care and additional support. For them, the Family Care Act would afford dignity, financial stability, and peace of mind.

Some people become family caregivers not just because they have to, but because they want to: Young mothers and fathers who wish to take the time after

the birth of a baby because they recognize the importance of bonding with their newborns while giving the mom a chance to physically heal; adult children and spouses who interrupt their careers to pay back what they see as a debt to a spouse, or an aging parent or grandparent who has become ill or who is dying.

Regardless of whether it is a choice or a duty thrust upon them, Pennsylvanians would benefit from the Family Care Act in the circumstances outlined below.

Caring for Our Elderly Family Members

The Foundation has advanced an agenda focused on seniors (and women) since its inception. We have always recognized the reality that much of the burden for care falls to family members – most commonly, adult working women, who leave their careers at great professional and financial sacrifice to do what they see as the right thing to do, without much regard for the consequences they will face.

- More than 1 in 6 Americans working full-time or part-time report assisting with the care of an elderly or disabled family member, relative, or friend.
- Single females caring for their elderly parents are 2.5 times more likely than non-caregivers to live in poverty in old age.
- Caregivers suffer loss of wages, health insurance and other job benefits, retirement savings or investment, and Social Security benefits—losses that hold serious consequences for the “career caregiver.”
- Caregivers working at least 15 hours per week indicated that this assistance significantly affected their work life. 69% of working caregivers caring for a family member or friend report having to rearrange their work schedule, decrease their hours, or take an unpaid leave in order to meet their caregiving responsibilities.
- In 2007, 37% of caregivers quit their jobs or reduced their work hours to care for someone aged 50+. 39% of caregivers leave their job to have more time to care for a loved one. 34% leave because their work does not provide flexible hours. And with those departures, employers often lose their most valuable and experienced workforce members.

With a growing aging population in PA, and an increasing percentage of older adults choosing to live in the community, including many doing so with conditions such as dementia, PA is on the front lines of aging caregiving. Our policies need to reflect those realities.

Caring for our Dying Family Members

In addition to the vital roles caregivers play in the care of older adults or persons with disabilities and serious illness, caregivers may assume new and potentially challenging tasks as a family member’s End of Life (EOL) approaches, including symptom management, engaging in difficult decisions about transitioning to long-term care or hospice, serving as a surrogate in medical decisions, and hiring paid caregivers. EOL caregiving demands can be significant, and physically,

emotionally and financially stressful. Adding those duties while trying to work up to your prior standards, can lead to physical and emotional burdens for family members, affecting productivity, mental health and general well-being.

Often the guilt of continuing to work in the last weeks and days of a family members life, takes a toll on how the employee is ultimately able to deal with their loss and grief.

The current system and policies leave so many workers without options to choose to be present to support their dying family member and their family. Many workers express regret for the times they missed by working when they could have or should have been with their loved ones. This can lead to stalled grief and depression. Further, employees who are providing caregiving support while working are often so exhausted as to make their work performance subpar or even dangerous.

The Family Care Act would enable families to choose where and when to be with their families and would enable them to meet their obligations without fear of losing their job, or missing time with their family.

Caring for Moms and Babies

The Women's Health Activist Movement Global (WHAMglobal), is dedicated to improving maternal and child health outcomes. WHAMglobal advocates for practices that support healthy pregnancies and the factors that lead to a **lifetime** of health for families. In the United States, it's considered a success if the baby and mother survive childbirth. This low bar is unacceptable.

- Establishing early connections in the maternal and child dyad has a tremendous impact on their emotional and physical well-being throughout their lifetime. The cornerstone of this begins as simply as having adequate time to connect after birth. Research has proven time and time again that Paid Family Leave policies have both short- and long-term health benefits for children and mothers including a decreased incidence of low birth weight and preterm births, increased breast-feeding, reduced rates of hospitalizations among infants, and overall improved maternal health.
- Visits to other developed countries, including Australia, the United Kingdom, Israel and Canada, have demonstrated to us the importance of enlightened policies that support the growth and stability and families over time, not just episodes of care. WHAMglobal fully supports the proposed legislation establishing the Family Care Act for its focus of affording the mother time to physically heal and rest, while allowing her and the baby's father the time to bond and create the environment for a lifetime of success once the parents have returned to work.
- PA is not the first, nor will it be the last state in our country to address the needs of its workers and citizens through a Family Care Act. Other states,

including California, New York, Minnesota, Washington and Wisconsin (to name but a few) have set standards to expand upon the national Family and Medical Leave Act. The plans differ from each other, but the proposed PA Family Care Act is a responsible direction to pursue. It affords individuals a safety net for maintaining their commitments to their families, while avoiding impoverishment during unavoidable foreseeable and unforeseeable caregiving episodes.

The testimony provided here contains just a few examples of where and how we believe this act could improve the care, costs, and outcomes for residents and families in Pennsylvania. We are prepared to provide additional cases or to answer any questions raised by this written material. While we do not address the mechanics or finances of the Care Act, we stand in support of the impact that could result from providing time for families to care for their loved ones in times of illness, seniors as they age, persons at end of life, and moms and babies.

Nancy D. Zionts
Chief Operating Officer
Chief Program Officer
Jewish Healthcare Foundation
phone: 412-594-2559
email: zionts@jhf.org





**National
Multiple Sclerosis
Society**

January 28, 2020

To: Members of the Senate Labor and Industry Committee
Re: The Family Care Act – Senate Bill 580

The National Multiple Sclerosis Society is grateful for the opportunity to submit comments in support of the Family Care Act (SB580). We thank Chairwoman Bartolotta for holding this important hearing. Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Symptoms range from numbness and tingling to blindness and paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS. Nearly 1 million people are living with MS in the United States, according to a study funded by the National MS Society.

Most people with MS are diagnosed between the ages of 20 and 50—prime working years and people living with MS often continue working long after their diagnosis. At some point in their lives, people living with MS may need time away from work to deal with serious illness—or their family members may need time away from work to care for them. The federal Family and Medical Leave Act (FMLA) provides important unpaid job-protected leave. However, fewer than 40 percent of workers in the U.S. have access to personal paid medical leave through employer-provided short-term disability insurance—which means many people cannot afford to take leave when they need it.

Caregivers face financial challenges and are too often forced to choose between work and caregiving because they lack access to paid leave. An estimated 43.5 million adults in the U.S. provide unpaid caregiving. These family caregivers are the predominant providers of long-term services and supports for people with illnesses or disabilities. Among caregivers who take time off for caregiving, 48% report losing their income.

For those who must take time off without pay, it can be challenging to make ends meet. The average cost of living with MS, including both direct and indirect expenses (e.g. healthcare costs, lost wages), is upwards of \$70,000 per year, per person. Unpaid time off may often lead to financial devastation. Low-wage workers are hit particularly hard, because they are the least likely to have access to any type of leave, even though they are the most in-need of policies that help them prevent financial catastrophe when illness strikes.

The National MS Society urges you to vote in support of the Family Care Act, which would allow workers to continue earning a portion of their pay while they take time away from work to address a serious health condition, care for a family member with a serious health condition, or care for a new child. Individuals living with MS and other chronic illnesses – along with their caregivers would greatly benefit from this system.

JOIN THE MOVEMENT



**National
Multiple Sclerosis
Society**

Thank you for your time, please let us know if we can be of assistance to you and your work in the future. Please contact me at (267) 765-5104 or mara.brough@nmss.org with any questions.

Sincerely,

Mara Brough
Senior Advocacy Manager
National MS Society

JOIN THE MOVEMENT

TESTIMONY FROM BETH SONDEL IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

Dear Committee Members,

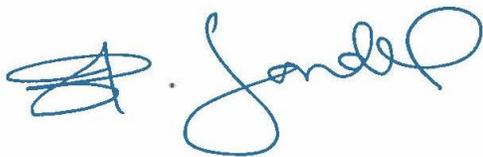
My name is Beth Sondel and I live in Pittsburgh, PA. I am a full-time working mother of a toddler, a tax-payer, and a voter. I am writing to you in support of SB 580 for the well-being of myself, my community, and all people who live in this great state.

Two years ago, I gave birth to the joy and love of my life. Hazel Mirah is now a flourishing and fierce little two-year old girl. But the road to bringing Hazel to this point was not easy. After medical intervention and a difficult pregnancy, Hazel entered the world through a birth that was complicated and traumatic for both her and me. We were lucky that both of us made it, but we were kept in the hospital and NICU for a week. The recovery was long and difficult. Even under the best of circumstances, those first few months as a parent required 100% of my husband and my time and attention. Research echoes this; parents and children are healthier when they have time together at the beginning of life.

Throughout the process of bringing Hazel's life into being, I was working full-time as a professor at the University of Pittsburgh. I was among the privileged in this country to have 12 weeks to take care of and bond with my baby at the beginning of her life. I cannot possibly imagine having to go back to work immediately after bringing my baby home. I want this for all parents. All parents and babies deserve this. All Pennsylvanians deserve time to care for themselves and their children in sickness and in health.

The Family Care Act is pro-family. It is the right thing to do. We all deserve to be taken care of in our greatest need. As a professional, I would be more than happy to pay in to this program knowing that it will benefit my friends, neighbors, and community.

With respect,

A handwritten signature in blue ink, appearing to read "Beth Sondel". The signature is written in a cursive, flowing style with a large loop at the end.

Beth Sondel



TESTIMONY FROM HEALTHY START IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

“Neither of my jobs had benefits or maternity leave...I had to have an emergency c-section with [my son] so I had to return to work quicker than I was supposed to. Me healing from the cesarean and breastfeeding, to not have to worry about “Oh my gosh, I have to work to get my next paycheck” would have been...amazing.” Loreal Edmonds, a Healthy Start, Inc. participant, shared her experience returning to work and the impact that a lack of paid family leave had on her ability to fully heal after her childbirth. Unfortunately, she is not the exception. She is the rule.

The American College of Obstetricians and Gynecologists (ACOG), a professional association of physicians specializing in obstetrics and gynecology, has emphasized the critical nature of the weeks immediately following birth and the influence of that time period on the health and well-being of a woman and her baby. Yet, a 2012 Department of Labor(DOL) study revealed that 23 percent of postpartum women returned to work within 2 weeks of giving birth, with higher rates among low wage workers. Countless more women return to work before they are fully physically and emotionally ready to do so. Worse still, as many as 40% of women do not attend their postpartum appointments, with work cited as one of the primary reasons.

Healthy Start, Inc. Pittsburgh is a maternal and child health and public health organization working to improve the health of moms and babies to reduce poor birth outcomes and infant mortality in Allegheny and Westmoreland Counties. We work with pregnant moms to provide education and support throughout their pregnancy, immediately following birth and until the baby is 18 months.

Through our partnership with families, we have seen the impact that negligible and absent leave policies have on maternal health and birth outcomes. Aside from delaying the physical and mental recovery from the birthing experience, the lack of paid family leave has a negative impact on birth outcomes such as breastfeeding duration. We know that breastfeeding provides a myriad of benefits to both mom and baby. For moms this includes the immediate benefit of increased healing times and long term benefits such as decreased risk of some breast and ovarian cancers. Babies experience benefits such as reduced risk of viruses and infections and a lower risk of Sudden Infant Death Syndrome. Regrettably, both national and local data shows that many moms who know that have to return to work stop breastfeeding in preparation or never begin.

In a recent survey of Healthy Start participants who ever breastfed, conducted in collaboration with the Women and Girls Foundation, some of the impacts of limited access to paid leave on breastfeeding duration were underscored. Of moms surveyed, only 2% of moms listed paid leave as a support offered by their job. 18% listed work as their reason for discontinuing breastfeeding. When asked if they would have breastfed longer with longer maternity leave, 21% of moms said yes.

According to the bureau of labor statistics women make up 57% of the labor industry. Of pregnant women, 56% work full time during their pregnancy. The 2012 DOL report revealed that 1/3 of moms do not return to work after having a baby. Paid leave policy would provide moms with alternatives to



leaving their jobs altogether. When moms and babies are supported to be well, women are able to work and support a vibrant labor industry.

The fourth Trimester, as the immediate post-partum period has come to be known, is a significant period in health and wellness of mothers and infants. During this period, Mothers are adjusting to changes in hormone levels that can influence mood and emotional health, physical strain and discomfort from childbirth, and exhaustion from balancing the demands of having a new addition to their family. Having the appropriate time off from work to tend to these sensitive needs is essential. Currently, only 14% of American workers overall and 5% of low-wage workers have access to paid leave. The Family Care Act would provide equitable access to the time off necessary to optimize mom's postpartum recovery which would undoubtedly influence Pennsylvania's birth outcomes.

Today, on behalf of the families we serve in Allegheny and Westmoreland counties, on behalf of the countless babies we have served and will serve, Healthy Start asks that the committee members take a stand for Healthy Families and Healthy Babies to receive a Healthy Start. We urge you support the Family Care Act legislation and advance the bill through the Labor and Industry Committee.

Demia Horsley, MPH, CLC, CD(DONA)

Director of Strategic Initiatives

Healthy Start, Inc. Pittsburgh



County of Bucks

AREA AGENCY ON AGING

30 E. Oakland Ave., Doylestown, PA 18901

Phone (267) 880-5700 Fax (215) 348-3146

Protective Services 1-800-243-3767

www.buckscounty.org Aging@buckscounty.org

County Commissioners

DIANE M. ELLIS-MARSEGLIA, L.C.S.W., Chair

ROBERT J. HARVIE, Vice-Chair

GENE DIGIROLAMO

KATHY M. BENNETT, M.S.W./L.S.W.

Director

Pennsylvania Senate Labor & Industry Committee

Senate Box 203046

Harrisburg, PA 17120-3046

January 21, 2020

BUCKS COUNTY AREA AGENCY ON AGING SUPPORT OF SB 580: THE FAMILY CARE ACT

Dear Committee Members:

Please accept this letter as a testimony in support of SB 580 The Family Care Act.

The Bucks County Area Agency on Aging provides a variety of services to senior citizens in Bucks County, providing support to over 30,000 seniors and their family members annually. With a total population of over 630,000 in the county, the total number of seniors is well over 150,000. The mission of the Bucks County AAA is to develop, coordinate and promote a continuum of quality services that supports, respects, and advocates for older adults and their families; empowers them to maintain independence and dignity; and enhances their overall well-being.

On behalf of the Bucks County AAA, *I would ask that the Committee members support the legislation and advance the bill through the Labor & Industry committee.* The majority of seniors, as they age, wish to stay in their homes as long as medically possible. Family members of those seniors who need extra support in the home must often choose between keeping their job (or taking a leave of absence from work) and providing the support their elderly relative requires in their home. The options are to stop working and lose their income, or to stay at their job and leave their senior person alone in the home in an unsafe situation. The Family Care Act would provide the option of a paid leave that would benefit the caregiver and the elderly senior, while at the same time being pro-business. Too often workers have to choose to leave their job to take care of an elder relative, and the business must find yet another worker to replace the experienced worker who left. In addition, small businesses who cannot afford to offer paid family leave to their workers can now provide it and compete for talent with companies who already can.

Thank you for your consideration of our support for this critical legislation.

Sincerely,

Kathy Bennett

Director

Pennsylvania Senate Labor & Industry Committee

Senate Box 203046

Harrisburg, PA 17120-3046

January 20, 2020

Dear Committee members.

Thank you for the opportunity to give my testimony concerning, SB580, or the Family Care Act, for paid medical leave. I am Bruce L. Foster, I live in Pittsburgh PA. At the end of 2015, I transitioned from one job into a new position. During this time, I was suffering with a tumor that had to be removed. Leaving my former job in September, it was three months before I would receive medical benefits through my new employer. During those months, I stayed on the former insurance but had to pay out of pocket in order to keep my own doctors. This cost me \$1,500. The operation that December was a success, and I should have been able to celebrate. However, the operation also left me with a stack of medical bills which my deductible didn't cover. On top of that, the six weeks I was out on unpaid medical leave, I had no income. Since I wasn't working my medical insurance was cut off. Because I was unable to afford follow up appointments there was little to no postoperative care. When I returned to work at the end of January, owing on my utilities, insurances, mortgage, car loan and credit cards in addition to well over \$2,000 for anesthesia, surgeon's associates at UPMC, and one night in the hospital. If I could have had a cushion, such as the paid leave outlined in the Family Care Act, it would have made a difference in covering some of my cost of living while I convalesce. My medical bills are with the collection agency where I am still paying faithfully. Unfortunately, they are still collecting interest. I am not complaining. I am a lucky one, my operation was without complications. I was able to return to work fairly soon. Illnesses have the potential to financially wipe anyone out. My hope is that you would consider the Family Care Act as a safeguard for all Pennsylvanians.

Best Regards,

Dr. Bruce L. Foster

Susan A. Maslow, Esquire
Partner
Smaslow@ammlaw.com

January 22, 2020

Pennsylvania Senate Labor & Industry Committee
Senate Box 203046
Harrisburg, PA 17120-3046

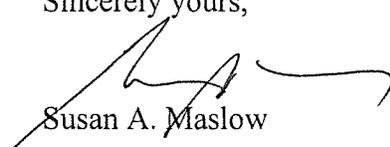
Re: In Support of SB 580: THE FAMILY CARE ACT to be submitted to the
Pennsylvania Senate Labor & Industry Committee, January 28, 2020

Dear Committee Members,

I am a founding Partner of Anheil Maslow & MacMinn LLP, a 28 year old law firm in Doylestown, PA. Since our earliest days, the Partners agreed to give our loyal and hardworking employees who hit upon difficult family times as a result of personal or family illness or temporary disability as much emotional and financial support as possible. Flexible work schedules and periods of absence with as much pay as both parties agreed was fair have always been provided. In addition, once the Firm could afford to do so, part and long term disability insurance was one of the staff benefits provided. The Partners all felt such paid insurance coverage would provide those we came to respect and cherish as co-workers the safety net so many of us need at some point in our lives. To be blind or indifferent to the fact that people have responsibilities outside of the office is neither virtuous nor strategic.

As a small business owner, I support the Family Care Act because a paid family medical insurance fund in Pennsylvania would actually represent a potential savings for my business. Please support the legislation and advance the bill through the Labor & Industry Committee. I note that other small businesses who cannot currently afford to offer paid family leave to their workers could, through the Pennsylvania fund, provide it and compete for talent with companies who already can provide such benefits. I am willing to accept the competition and could, if necessary, use the monies freed up to compensate our workers in some other meaningful way. The Act is good for our workers and good for our economy.

Sincerely yours,



Susan A. Maslow

SAM:cc

TESTIMONY FROM Andrea Fitting IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

I am a resident of Pittsburgh, Allegheny County. In 2012 I was compelled to move my elderly parents to a facility near my home. At that time, they lived in Florida so it was impossible for me to help them at such a distance. I was the primary family caregiver. Both of my parents have since passed away. This is a brief account of the surprising cost in human terms, of serving in that role.

Though I did not have to directly pay for their care, I completely underestimated the real cost measured in amount of absence from work, not to mention the personal hours I would have to devote.

Also impossible to measure were the hours and attention that I would have to pay even while at work, in phone calls, document review, consultation meetings and emergency management.

I finally had to leave my job late in 2013. I could no longer adequately perform my job responsibilities. I experienced extreme stress that took its toll in more ways than I can count.

In retrospect, if I had been able to take a paid leave of absence and given my full attention to being a caregiver, I could have mitigated the stress, consolidated the duties into a shorter amount of time, and maybe most regrettably, spent maximum time with my parents before they died – without guilt.

Had I been able to depend on the Family Care Act, I would have handled things much differently. And I was one of the lucky ones. I did not have to go into debt or go bankrupt to fulfill my family obligations.

Others are not as fortunate as me. I know many people my age who suddenly found themselves with unexpected family caregiver duties who were forced to interrupt their careers or involuntarily lose their jobs. For a person in the last decade of their careers, it's virtually impossible to start again.

I strongly support the Family Care Act because it would assist people like me to lovingly and without remorse, help their family members without negatively affecting their livelihoods or lose their jobs.

Please support the Family Care Act and help Pennsylvania join the other states that provide this benefit to their citizens.

TESTIMONY FROM PITTSBURGH FOR CEDAW IN SUPPORT OF SB 580: THE FAMILY CARE ACT

Submitted to the Pennsylvania Senate Labor & Industry Committee, January 28th, 2020

Pittsburgh for CEDAW is part of the grassroots campaign around the nation, Cities for CEDAW, which works to bring gender equity legislation to local governments. CEDAW is the acronym for the UN *Convention on the Elimination of all forms of Discrimination Against Women*. The United States is the only industrialized nation that has not ratified it. We focus on establishing CEDAW legislation at the city level and protecting the rights of women and girls locally.

Through Pittsburgh for CEDAW's efforts, the City of Pittsburgh passed a CEDAW ordinance establishing a gender equity commission to promote the implementation of CEDAW Articles in Pittsburgh including reducing and eliminating violence against women and girls, improving access to economic development opportunities, and access to quality education opportunities.

Pittsburgh for CEDAW knows that the Family Care Act is important to women in Greater Pittsburgh. A recent Pittsburgh gender analysis shows that in Pittsburgh, working full-time, White women make 78 cents and Black women make only 63 cents for every dollar Pittsburgh's White men make. Women working part-time fare even worse. One result is that in Allegheny County 38% of single mothers live below the poverty level and single women with families account for 77 % of the households living in poverty. These women have little to no rainy-day savings to fall back upon if they, or a close family member, becomes very ill. They must choose between work/income and taking care of those in need.

While the federal Family and Medical Leave Act (FMLA) guarantees unpaid time off to care for an ill family member or new child, most Americans cannot sustain their families for more than two weeks without a paycheck.

Just 6% of the lowest wage earners, those who need it the most, receive paid family leave.

Pittsburgh for CEDAW supports SB 580: The Family Care Act because it is a simple, well-tested mechanism that benefits not only Greater Pittsburgh women and families, but all Pennsylvanians. Similar state insurance funds are already in place in New York, New Jersey, Massachusetts, Rhode Island, California, Washington, and Washington D.C.

The PA Family Care Act recognizes the need for employees to take time to care for their families at critical times and Pittsburgh for CEDAW urges all state senators to pass this important legislation.

Marcia Bandes, Chair
Pittsburgh for CEDAW Coalition
Pgh4cedaw@gmail.com
412-295-8218

TESTIMONY FROM
AMERICAN ASSOCIATION OF UNIVERSITY WOMEN - PENNSYLVANIA
IN SUPPORT OF SB 580: THE FAMILY CARE ACT

*Submitted to the
Pennsylvania Senate Labor & Industry Committee, January 28th, 2020
by Barbara Price, Public Policy Chair*

Since its founding in 1881, the mission of the American Association of University Women (AAUW) has been to advance gender equity for women and girls through research, education, and advocacy. AAUW Pennsylvania (AAUW-PA) is a statewide organization of thirty-six branches, thirty-nine college/university partners, eleven student organizations and 7,600 members and supporters. AAUW has long supported workplace policies to address the health and caregiving needs of employees.

At some point, most workers will need time away from work to deal with a serious personal or family illness, or to care for a new child. Unlike the majority of developed countries worldwide, the United States does not guarantee paid parental leave or paid time off for illness or family care. Without these policies, balancing work and family responsibilities can be problematic for employees, negatively impacting productivity, making recovery from illnesses or injuries difficult, and possibly jeopardizing their job or family income.

Without access to paid leave, workers, especially women, face the continuing economic disadvantage of lost wages and are forced to prematurely return to work. The loss in productivity due to working while sick costs our economy \$218 billion a year.

Women disproportionately bear the economic cost of caregiving, including responsibilities such as providing care at home and/or taking seriously ill children or elderly family members to the doctor. Yet, many women delay seeking health care for themselves because they cannot take time off from work. For a family without paid leave, just three days of lost pay can be the equivalent of their monthly health care or food budget.

A recent poll of the #AAUWAsks campaign on social media asked followers and supporters to share their perspectives about the one benefit they would negotiate for other than higher pay. Paid family leave was cited by 22% of those responding along with other benefits such as help with student debt, onsite child care, and more flexible and less expensive health insurance options.

Why is AAUW so committed to this issue? Because this is a matter of economics not just for women, but for families as well. Paid leave allows both parents time at home with newborns and young children, which has been shown to increase parent's ability to attend medical visits and decrease infant and post-neonatal mortality rates. It also allows adults time to recover from serious illness and care for sick relatives with health problems avoiding complications, hospital readmissions and reducing health costs.

Paid leave helps businesses retain employees and reduces the high costs of turnover. A comprehensive review found that the cost of turnover can range from 16 to 200 percent of an

employee's annual compensation, making turnover very costly for employers. California, a state with a successful family leave insurance program, found workers in low-wage, high-turnover industries are much more likely to return to their jobs after using the state's program.

The Family Care Act would be especially beneficial to small employers who can not afford to offer paid leave. It would allow them to compete with larger employers who do offer paid leave.

AAUW-PA urges members of the Senate Labor and Industry Committee to join the eight other states already offering paid leave – including our neighbors in New York and New Jersey – by supporting hardworking families and advancing the Family Care Act.

Resources

National Partnership for Women and Families, The Child Development Case for a National Paid Family and Medical Leave Program, December 2018, <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/the-child-development-case-for-a-national-paid-family-and-medical-leave-insurance-program.pdf>

Center for American Progress, There Are Significant Business Costs to Replacing Employees, Heather Boushey and Sarah Jane Glynn, November 16, 2012, <https://www.americanprogress.org/wp-content/uploads/2012/11/CostofTurnover.pdf>

Center for Economic and Policy Research CEPR, Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California, Eileen Appelbaum and Ruth Milkman, January 2011, <http://cepr.net/publications/reports/leaves-that-pay>

Bureau of Labor Statics, US Department of Labor, News Release, EMPLOYEE BENEFITS IN THE UNITED STATES – MARCH 2018, https://www.bls.gov/news.release/archives/ebs2_07202018.pdf

Support Paid Sick Days, Quick Facts, <http://www.paidicksdays.org/research-resources/quick-facts.html>

Institute for Women's Policy Research, Briefing Paper, IWPR #B356, February 2016, Paid Sick Days Access and Usage Rates Vary by Race/Ethnicity, Occupation, and Earnings, <https://iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/B356.pdf>

Kaiser Family Foundation, Women, Work, and Family Health: Key Findings from the 2017 Kaiser Women's Health Survey, Mar 13, 2018, <https://www.kff.org/womens-health-policy/issue-brief/women-work-and-family-health-key-findings-from-the-2017-kaiser-womens-health-survey/>