

March 1, 2021

Dear Member of Congress,

On behalf of the undersigned organizations and the tens of millions of working families we represent, we **urge you to co-sponsor and advocate for swift and thorough consideration of the Family And Medical Insurance Leave (FAMILY) Act.** The FAMILY Act would create a national family and medical leave insurance program to help ensure that people who work can take the time they need to address serious health and caregiving needs. It would help support working families' economic security, promote racial and gender equity, create a more level playing field for businesses of all sizes and strengthen our economy. The FAMILY Act is the national paid family and medical leave plan voters want and our country needs.

The coronavirus pandemic has highlighted the consequences faced by working people when they lack access to paid leave. As of November 2020, 4.1 million adults in the United States were not working because they were sick with coronavirus symptoms and 2.6 million because they were caring for an ill or older loved one.¹ And even as the promise of vaccination offers hope that the pandemic will end sometime in 2021, the long-term health and caregiving consequences of COVID-19 are just beginning to surface. The United States had more than 20 million confirmed cases of COVID-19 by late 2020; an estimated 10 to 15 percent – 1.7 to 3.4 million people – will experience persistent or relapsing symptoms, which can interfere with the ability to work or require care from a loved one.² As child care centers closed and schools were forced into remote learning, hundreds of thousands of parents, especially women, have been forced to choose between caring for their children and staying in the workforce. As of July 2020, nearly one in three mothers age 25-44, and one in eight fathers of the same age, were not working due to child care issues.³ Workers in low-paid “frontline” and essential jobs, disproportionately women of color,⁴ are doubly impacted, facing higher rates of infection and death in part due to workplace exposure,⁵ and typically less likely to have paid leave or the ability to work remotely.⁶ Paid leave would provide for working parents and other caregivers, support public health, and bolster American families' economic security as the pandemic rages on.

The benefits of paid family and medical leave are well documented, yet the vast majority of working people in the United States do not have access to this basic protection. More than 100 million people – or 79 percent of workers – do not have paid family leave through their jobs, and 60 percent lack access to paid personal medical leave through their employer.⁷ Access rates for workers in lower-wage jobs are even lower, and most recent private sector advances have been disproportionately concentrated in higher-skill industries and among higher-paid employees, creating even greater disparities between lower- and higher-paid workers.⁸ Even unpaid leave through the Family and Medical Leave Act (FMLA) is inaccessible to nearly half of working people because of eligibility restrictions, and many who are eligible cannot afford to take unpaid leave.⁹ This means that when serious personal or family health needs inevitably arise, people face impossible choices between their families' well-being, their financial security and their jobs.

Women of color are especially harmed by the lack of paid leave. Racial disparities are stark in meaningful access to leave: about 71 percent of Latinx workers, 67 percent of American Indian and Alaska Native workers, 61 percent of Black workers and 54 percent of Asian American and Pacific Islander workers are either not eligible for or cannot afford to take unpaid FMLA leave.¹⁰ And even while women of color are so often key breadwinners for their families,¹¹ they continue to face punishing wage gaps: Asian American women are typically paid just 87 cents for every dollar paid to white, non-Hispanic men, Black women 63 cents, Native women 60 cents and Latinas just 55 cents.¹² The combination of inequities, including the racial wealth gap, and discrimination also means that families of color may be less able to withstand the financial hardship associated with a serious family or medical event and struggle more to recover their stability afterward.¹³

The FAMILY Act would create a strong, inclusive national paid family and medical leave insurance program and set a nationwide paid leave baseline. Employees would earn two-thirds of their wages, up to a cap, for a limited period of time (up to 60 workdays, or 12 workweeks in a year) to address their own serious health issue, including pregnancy or childbirth; to deal with the serious health issue of a family member; to care for a new child; and for certain military caregiving and leave purposes. Employees, employers and self-employed workers would fund both the benefits and the administrative costs of the program by contributing a small amount in each pay period to a self-sustaining fund, administered through a new Office of Paid Family and Medical Leave. Eligibility rules would allow younger, part-time, low-wage and contingent workers to contribute and benefit, regardless of their employer's size or their length of time on the job.

The FAMILY Act builds on successful state programs. In fact, nearly all state programs now go beyond the FAMILY Act in several important ways, providing data and lessons that Congress should consider. California has had a paid family and medical leave insurance program in place since 2004, New Jersey since 2009, Rhode Island since 2014, New York since 2018, Washington since January 2020 and the District of Columbia since July 2020. A strong new program will take effect in Massachusetts in 2021. And momentum continues to grow: Connecticut and Oregon passed paid leave laws in 2019, and voters in Colorado passed a paid leave program by ballot initiative in November 2020. Evidence from the existing state programs shows their value and affordability; all are financially sound and self-sustaining, and each state that has paid leave in place has or is exploring ways to make it even more accessible to people who need family leave.¹⁴ Analyses of California's law show that both employers and employees benefit from the program.¹⁵ In New Jersey, the program's costs have been lower than expected and public attitudes toward the program are favorable.¹⁶ Early research on Rhode Island's program found positive effects for new parents, and a majority of small- and medium-sized employers were in favor of the program one year after it took effect.¹⁷ Paid leave programs also helped states quickly address health and caregiving needs in the early stages of the pandemic.¹⁸

The FAMILY Act would address the range of care needs people face, including the growing need to provide elder care. Changing demographics mean more adults will need elder care and the number of potential family caregivers is shrinking: For every person age 80 and older, the number of potential family caregivers will fall from about seven in 2010 to four by 2030, and then to less than three by 2050.¹⁹ It is also important to note that about three-quarters of people who take family or medical leave each year do so for reasons other than

maternity or paternity care. They take leave to care for family members with serious illnesses, injuries or disabilities or for their own serious health issue.²⁰ The majority of parents, adult children and spouses who provide care for ill family members or family members with disabilities also have paying jobs, and on average work more than 30 hours per week while also managing their caregiving responsibilities.²¹ The majority of military caregivers – and more than three-quarters of caregivers for post-9/11 wounded warriors – are also in the labor force.²²

The FAMILY Act would support improved health outcomes and could lower health care costs. New mothers who take paid leave are more likely to take the amount of time away from work recommended by doctors,²³ and their children are more likely to be breastfed, receive medical check-ups and get critical immunizations.²⁴ When children are seriously ill, the presence of a parent shortens a child’s hospital stay by 31 percent;²⁵ active parental involvement in a child’s hospital care may head off future health problems, especially for children with chronic health conditions,²⁶ and thus reduce costs. Paid leave also lets people support older family members with serious health conditions, helping them fulfill treatment plans, manage their care, and avoid complications and hospital readmissions.²⁷ Early research has found that California’s paid leave program reduced nursing home utilization.²⁸ And, for the millions of families in communities that are struggling with opioid and other substance use disorders, paid leave supports family caregivers, who play a key role in care and recovery by helping loved ones with health care arrangements and treatment.²⁹

The FAMILY Act also would strengthen large and small businesses and support entrepreneurs. Paid leave reduces turnover costs – typically about one-fifth of an employee’s salary³⁰ – and increases employee loyalty. In California, nine out of 10 businesses surveyed reported positive effects or no impacts on profitability and productivity after the state’s paid leave program went into effect.³¹ Small businesses reported even more positive or neutral outcomes than larger businesses.³² Small business owners from across the nation expect that the FAMILY Act model would help level the playing field with large corporations, improve worker retention, productivity and morale, and help protect their economic security if an accident or medical emergency occurs.³³ This is part of the reason that 70 percent of small businesses surveyed nationwide support the FAMILY Act approach of shared payroll deductions.³⁴ By including self-employed people, the FAMILY Act would also help entrepreneurs balance the risks of starting a new business with the need to ensure their families’ health and security.

National paid family and medical leave has broad support from voters across party lines. Nearly eight in ten 2020 voters support a permanent paid family and medical leave policy, including 67 percent of Republicans, 77 percent of independents and 93 percent of Democrats.³⁵ In a survey about voters’ preferences for a national paid leave program, participants ranked the FAMILY Act model as their top choice, across party lines. And when asked how much they would be willing to contribute toward a paid leave fund, seven in 10 voters said they would be willing to contribute one percent of their wages, or one cent for every dollar earned, which is more than the FAMILY Act is projected to cost.³⁶ Additional qualitative research shows voters prefer a national plan that covers all family relationships and includes employment protections.³⁷

Working families need a nationwide paid family and medical leave standard that is comprehensive, inclusive, and sustainable.

The FAMILY Act is the only national paid family and medical leave proposal that reflects what most people in the United States need. We urge you to co-sponsor this essential legislation today, to push for swift and thorough consideration that surfaces the best practices and lessons learned from state policies, and to reject inadequate proposals that would fail to meet the needs of the nation's workforce, families or businesses – and that would do more harm than good.

Sincerely,

National

1,000 Days

Abriendo Puertas/Opening Doors

ADAP Advocacy Association

All Our Kin

American Academy of Pediatrics

American Association of University Women (AAUW)

American Civil Liberties Union

American Psychiatric Association, Women's Caucus

American Public Health Association

American Society on Aging

Association of Flight Attendants-CWA

Association of University Centers on Disabilities (AUCD)

Association of Women's Health, Obstetric and Neonatal Nurses

Autistic Self Advocacy Network

Autism Society of America

Baby Cafe USA

Bread for the World

Caring Across Generations

Catholics for Choice

Center for Economic and Policy Research

Center for Law and Social Policy (CLASP)

Child Care Aware® of America

Church World Service

Coalition on Human Needs

Community Access National Network (CANN)

Congregation of Our Lady of Charity of the Good Shepherd, U.S. Provinces

Demos

Family Equality

Family Values @ Work

First Focus Campaign for Children

Forum for Youth Investment

Friends Committee on National Legislation

Futures Without Violence

HealthConnect One

HEAR US Inc.

Hispanic Federation

ICNA Council for Social Justice
Justice for Migrant Women
Lactation Education Resources
Legal Momentum, The Women's Legal Defense and Education Fund
Main Street Alliance
March of Dimes
Muslim Public Affairs Council (MPAC)
NAACP
NARAL Pro-Choice America
National Advocacy Center of the Sisters of the Good Shepherd
National Association for Children's Behavioral Health
National Association for Rural Mental Health (NARMH)
National Association of Councils on Developmental Disabilities
National Association of County Behavioral Health & Developmental Disability Directors
National Association of Social Workers
National Association of State Head Injury Administrators
National Center for Lesbian Rights
National Center for Transgender Equality
National Coalition for the Homeless
National Council of Jewish Women
National Education Association
National Organization for Women
National Employment Law Project
National Employment Lawyers Association
National Health Law Program
National Multiple Sclerosis Society
National Network to End Domestic Violence
National Partnership for Women & Families
National Rural Social Work Caucus
National WIC Association
National Women's Law Center
NETWORK Lobby for Catholic Social Justice
Paid Leave for All
Parents as Teachers
Partnership for America's Children
People For the American Way
PL+US: Paid Leave for the United States
Religious Coalition for Reproductive Choice
RESULTS
Service Employees International Union
Shriver Center on Poverty Law
SisterSong: National Women of Color Reproductive Justice Collective
SPLC Action Fund
Start Early
The Coalition of Labor Union Women
The Gerontological Society of America
The National Domestic Violence Hotline
The United Methodist Church - General Board of Church and Society
TIME'S UP

Union for Reform Judaism
United Church of Christ; Justice and Witness Ministries
United for Respect
U.S. Breastfeeding Committee
U.S. Women's Chamber of Commerce
Voices for Progress
We All Rise
Women of Reform Judaism
Women's Media Center
YWCA USA
ZERO TO THREE

Alabama

AIDS Alabama
Alabama Breastfeeding Committee
Greater Birmingham Chapter of the National Organization of Women

Arizona

Poder Latinx Arizona
United Food and Commercial Workers Local 99

Arkansas

Arkansas Advocates for Children and Families

California

All-Options
AnitaB.org
Association of California Caregiver Resource Centers
Breastfeed L.A.
California Breastfeeding Coalition
California Child Care Resource & Referral Network
California National Organization for Women
California Partnership to End Domestic Violence
California Work & Family Coalition
Child Care Law Center
Consumer Action
Contra Costa NOW
Disability Rights Legal Center
Food Empowerment Project
Friends Committee on Legislation of California
HelpR
Human Impact Partners
Jewish Center for Justice
Legal Aid at Work
Los Angeles Valley College
Mutual Housing California
National Association of Social Workers, California Chapter
National Council of Jewish Women LA
Orange County Equity Coalition

Public Counsel
Restaurant Opportunities Center of the Bay
San Diego Volunteer Lawyer Program, Inc.
SaverLife
Teen Success, Inc.
Women for Orange County
Working Partnerships USA
YWCA Berkeley/Oakland

Colorado

Colorado Lactation Consultant Association
Colorado Organization for Latina Opportunity and Reproductive Rights (COLOR)
YWCA Boulder County

Connecticut

Connecticut Women's Education and Legal Fund (CWEALF)
Fairfield County's Community Foundation
YWCA Greenwich
YWCA-New Britain

District of Columbia

Church World Service
Jews United for Justice
Public Advocacy for Kids (PAK)
Redstone Center for Prevention and Wellness
Trust for America's Health
YWCA National Capital Area

Florida

Central Florida Behavioral Health Network
Florida Alliance of CDCs, Inc.
Florida Black Women's Roundtable
Florida National Organization for Women Education Fund
Florida Rising
Pinellas County NOW (National Organization for Women)
Poder Latinx
Progress Florida
YWCA South Florida

Georgia

9to5 Georgia

Hawai'i

Hawaii Children's Action Network
YWCA Oahu
YWCA of Kauai

Illinois

Beyond Hunger

Community Organizing and Family Issues (COFI) / POWER-PAC IL
Illinois NOW
New Moms
Provincial Council Clerics of St. Viator
Women Employed
YWCA Elgin
YWCA Evanston North Shore
YWCA Evanston North Shore
YWCA Kankakee
YWCA McLean County
YWCA Metropolitan Chicago
YWCA Northwestern Illinois
YWCA of the Metro East
YWCA of the University of Illinois
YWCA Southwestern Illinois

Indiana

American Association of University Women Indianapolis (AAUW Indianapolis)
Indiana Association of Area Agencies on Aging
Indiana Institute for Working Families
Indiana National Organization for Women
LifeTime Resources, Inc.
MCCOY (Marion County Commission on Youth)
Monroe County NOW
Women4Change Indiana
YWCA Central Indiana
YWCA of Northwest Indiana

Iowa

Iowa National Organization for Women

Kansas

Dominican Sisters Ministry of Presence
Kansas Action for Children
Kansas Breastfeeding Coalition
YWCA Northeast Kansas

Kentucky

National Association of Social Workers - Kentucky Chapter.

Louisiana

National Association of Social Workers - Louisiana Chapter

Maine

Alzheimer's Association, Maine Chapter
Maine Coalition to End Domestic Violence
Maine Council on Aging
Maine Women's Lobby Education Fund
National Association of Social Workers, Maine Chapter

Paid Leave for ME
Planned Parenthood of Northern New England

Maryland

Public Justice Center

Massachusetts

Jewish Alliance for Law and Social Action
Southeastern Massachusetts
Unitarian Universalist Association
YWCA Cambridge
YWCA Cambridge
YWCA Southeastern Massachusetts

Michigan

Detroit Disability Power
Michigan League for Public Policy
Michigan Unitarian Universalist Social Justice Network (MUUSJN)
Mothering Justice
National Council of Gray Panthers Networks
Oakland Forward

Minnesota

ISALAH (MN)
TakeAction Minnesota
YWCA Mankato
YWCA Minneapolis
YWCA St. Paul

Mississippi

Every Mother, Inc.
National Organization for Women of Mississippi

Missouri

Healthy Nourishment, LLC
National Organization for Women, Columbia Area

Montana

Montana Women Vote

Nebraska

ACLU of Nebraska
Voices for Children in Nebraska
YWCA Lincoln
YWCA of Grand Island

Nevada

Progressive Leadership Alliance of Nevada

New Hampshire

Campaign for a Family Friendly Economy, NH
YWCA New Hampshire

New Jersey

Family Voices NJ
New Jersey Citizen Action
NJ State Industrial Union Council
NJ Time to Care Coalition
Office of Peace, Justice, and Ecological Integrity, Sisters of Charity of Saint Elizabeth
SPAN Parent Advocacy Network
YWCA Northern New Jersey

New Mexico

Native Women Lead
Southwest Women's Law Center

New York

Claire Heureuse Community Center, Inc.
ideas42
National Equality Action Team (NEAT)
SparkAction
The New York Women's Foundation
YWCA Binghamton and Broome County
YWCA Mohawk Valley
YWCA White Plains & Central Westchester

North Carolina

Breastfeeding Family Friendly Communities
Breastfeed Orange NC
Child Care Services Association
Children First/Communities In Schools of Buncombe
Equality North Carolina
National Association of Social Workers North Carolina
NC Early Education Coalition
NC Justice Center
North Carolina Council of Churches
RESULTS Raleigh
Think Babies™ NC Alliance
TriadNOW
YWCA Central Carolinas
YWCA of the Lower Cape Fear

Ohio

Children's Defense Fund-Ohio
National Coalition of 100 Black Women, Inc., Central Ohio Chapter
National Council of Jewish Women Cleveland
Ohio Domestic Violence Network
Ohio Federation of Teachers

The Ohio Women's Public Policy Network
The Women's Fund of Central Ohio
Universal Health Care Action Network of Ohio
Women's Fund of the Greater Cincinnati Foundation
YWCA Canton
YWCA Dayton
YWCA Greater Cincinnati
YWCA Greater Cleveland
YWCA Mahoning Valley
YWCA of Northwest Ohio

Oregon

Cascade AIDS Project
National Organization for Women, Oregon
Our Children Oregon
ROSE Community Development

Pennsylvania

Coalition for Low Income Pennsylvanians
First Up; Champions for Early Education
Just Harvest
Pennsylvania Council of Churches
Sisters of Saint Joseph
Unitarian Universalist Justice PA
United Steelworkers Local 3657
Women and Girls Foundation of Southwest PA
Women's Law Project
YWCA Allentown
YWCA Butler
YWCA Hanover
YWCA Lancaster
YWCA Tri-County Area

Rhode Island

Economic Progress Institute
Rhode Island Chapter of the National Organization for Women
Rhode Island Coalition for the Homeless
Rhode Island KIDS COUNT
The Womxn Project
Women's Fund of Rhode Island

South Carolina

Women's Rights and Empowerment Network
YWCA Greater Charleston

Tennessee

SocioEnergetics Foundation

Texas

Children's Defense Fund - Texas
Every Texan
Texas State National Organization for Women (NOW)
YWCA Greater Austin

Vermont

Main Street Alliance of Vermont

Virginia

Blue Star Families
Church World Service
Maternal Mental Health Leadership alliance
National Military Family Association
National Respite Coalition
Social Action Linking Together (SALT)
Virginia Chapter, National Organization for Women
Virginia Organizing
YWCA of Central Virginia
YWCA South Hampton Roads

Washington

Economic Opportunity Institute
Northwest Harvest
YWCA Kitsap County
YWCA Pierce County
YWCA Yakima

West Virginia

National Association of Social Workers West Virginia Chapter
Rise Up WV
West Virginians for Affordable Health Care
WV Citizen Action
WV FREE

Wisconsin

9to5
Mid-Day Women's Alliance

1 U.S. Census Bureau. (2020). *Week 19 Household Pulse Survey: November 11 – November 23* (Employment Table 3. Educational Attainment for Adults Not Working at Time of Survey, by Main Reason for Not Working and Paycheck Status While Not Working). Retrieved 15 December 2020, from <https://www.census.gov/data/tables/2020/demo/hhp/hhp19.html>

2 Scientific understanding of this new disease is still developing and estimates vary of the incidence of lasting health effects of COVID-19; currently 10 to 15 percent is a conservative estimate for symptoms lasting longer than 90 days, particularly among patients with severe illness. See Cirulli, E. T., Schiabor Barrett, K. M., Riffle, S., Bolze, A., et al. (2020, December 1). Long-term COVID-19 symptoms in a large unselected population. *medRxiv*. Preprint. doi: 10.1101/2020.10.07.20208702; del Rio, C., Collins, L. F., & Malani, P. (2020, October 5). Long-term Health Consequences of COVID-19. *Journal of the American Medical Association*. 324(17): 1723-1724. doi: 10.1001/jama.2020.19719; Yelin, D., Wirtheim, E., Vetter, P., Kalil, A. C., et al. (2020, September 1). Long-term consequences of COVID-19: research needs. *The Lancet: Infectious Diseases*. 20(10): P1115-1117. doi: 10.1016/S1473-3099(20)30701-5

3 Heggeness, M.L., & Fields, J.M. (2020, August 18). *Working Moms Bear Brunt of Home Schooling While Working During COVID-19*. U.S. Census Bureau Publication. Retrieved 15 December 2020, from <https://www.census.gov/library/stories/2020/08/parents-juggle-work-and-child-care-during-pandemic.html>

4 Rho, H. J., Brown, H., & Fremstad, S. (2020, April). *A Basic Demographic Profile of Workers in Frontline Industries*. Center for Economic and Policy Research Publication. Retrieved 15 December, 2020, from <https://cepr.net/a-basic-demographic-profile-of-workers-in-frontline-industries/>

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- 5 Zelner, J., Trangucci, R., Narahariseti, R., Cao, A. et al. (2020, November). Racial disparities in COVID-19 mortality are driven by unequal infection risks. *Clinical Infectious Diseases*, ciaa1723. doi: 10.1093/cid/ciaa1723
- 6 Maye, A., & Williamson, E. (2020, October). *In Their Own Voices: How Workers Earning Low Wages Struggle with COVID-19*. Center for Law and Social Policy Publication. Retrieved 15 December 2020, from https://www.clasp.org/sites/default/files/publications/2020/10/2020_Uplifting%20Low-Wage%20Workers%27%20Voices%20and%20Struggles%20Amid%20the%20COVID-19%20Pandemic-2.pdf; U.S. Bureau of Labor Statistics. (2020, September). *National Compensation Survey: Employee Benefits in the United States, March 2020* (Tables 16 and 31). Retrieved 15 December 2020, from <https://www.bls.gov/ncs/ebs/benefits/2020/employee-benefits-in-the-united-states-march-2020.pdf>; U.S. Census Bureau. (2020). *Week 19 Household Pulse Survey: November 11 – November 23* (Transportation Table 1. Teleworking during the Coronavirus Pandemic, by Select Characteristics: United States). Retrieved 15 December 2020, from <https://www.census.gov/data/tables/2020/demo/hhp/hhp19.html>
- 7 See note 6, U.S. Bureau of Labor Statistics, *National Compensation Survey*.
- 8 Ibid; National Partnership for Women & Families. (2019, September). *New Data Show Slow Progress on Increasing Access to Paid Leave and Paid Sick Days* [Press release]. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-impact/news-room/press-statements/new-data-show-slow-progress-on-access-to-paid-leave-paid-sick-days.html>
- 9 Brown, S., Herr, J., Roy, R., & Klerman, J. A. (2020, July). Employee and Worksite Perspectives of the Family and Medical Leave Act: Results from the 2018 Surveys. Abt Associates Publication prepared for the U.S. Department of Labor. Retrieved 15 December 2020, from https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDFMLA2018SurveyResults_FinalReport_Aug2020.pdf
- 10 Joshi, P., Baldiga, M., & Huber, R. (2020). *Unequal access to FMLA leave persists*. Retrieved 23 November 2020 from Brandeis University, The Heller School, Institute for Child, Youth and Family Policy website: <http://new.diversitydatakids.org/research-library/data-visualization/unequal-access-fmla-leave-persists>
- 11 Glynn, S. J. (2019, May 10). *Breadwinning Mothers Continue To Be the U.S. Norm*. Retrieved 15 December 2020, from Center for American Progress website: <https://www.americanprogress.org/issues/women/reports/2019/05/10/469739/breadwinning-mothers-continue-u-s-norm/>
- 12 National Partnership for Women & Families. (2020, September). *America's Women and the Wage Gap*. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/fair-pay/americas-women-and-the-wage-gap.pdf>; National Partnership for Women & Families. (2020, September). *Quantifying America's Gender Wage Gap by Race/Ethnicity*. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/fair-pay/quantifying-americas-gender-wage-gap.pdf>
- 13 National Partnership for Women & Families. (2018, August). *Paid Family and Medical Leave: A Racial Justice Issue - and Opportunity*. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-family-and-medical-leave-racial-justice-issue-and-opportunity.pdf>
- 14 National Partnership for Women & Families. (2019, September). *Paid Leave Works: Evidence from State Programs*. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-leave-works-evidence-from-state-programs.pdf>
- 15 Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press
- 16 Press of Atlantic City. (2010, November 15). *Paid Family Leave / Working well*. Retrieved 15 December 2020, from http://www.pressofatlanticcity.com/opinion/editorials/article_0d6ba980-3a1d-56f7-9101-258999b5d9d0.html; Houser, L., & White, K. (2012, October). *Awareness of New Jersey's Family Leave Insurance Program is Low, Even as Public Support Remains High and Need Persists*. Rutgers University, The State University of New Jersey Center for Women and Work Publication. Retrieved 15 December 2020, from http://njtimetocare.com/sites/default/files/03_New%20Jersey%20Family%20Leave%20Insurance-%20A%20CWW%20Issue%20Brief.pdf
- 17 National Partnership for Women & Families. (2015, February). *First Impressions: Comparing State Paid Family Leave Programs in Their First Years*. Retrieved 15 December 2020, from <http://www.nationalpartnership.org/research-library/work-family/paid-leave/first-impressions-comparing-state-paid-family-leave-programs-in-their-first-years.pdf>; Bartel, A., Rossin-Slater, M., Ruhm, C., & Waldfogel, J. (2016, January). *Assessing Rhode Island's Temporary Caregiver Insurance Act: Insights from a Survey of Employers*. Retrieved 15 December 2020, from U.S. Department of Labor website: https://www.dol.gov/asp/evaluation/completed-studies/AssessingRhodeIslandTemporaryCaregiverInsuranceAct_InsightsFromSurveyOfEmployers.pdf
- 18 Boyens, C. (2020, June). *State Paid Family and Medical Leave Programs Helped a Surge of Workers Affected by the COVID-19 Pandemic*. Urban Institute Publication. Retrieved 15 December 2020, from <https://www.urban.org/research/publication/state-paid-family-and-medical-leave-programs-helped-surge-workers-affected-covid-19-pandemic>
- 19 Redfoot, D., Feinberg, L., & Houser, A. (2013, August). *The Aging of the Baby Boom and the Growing Care Gap: A Look at Future Declines in the Availability of Family Caregivers*. AARP Public Policy Institute Publication. Retrieved 15 December 2020, from http://www.aarp.org/content/dam/aarp/research/public_policy_institute/lrc/2013/baby-boom-and-the-growing-care-gap-insight-AARP-ppi-lrc.pdf
- 20 See note 9, Exhibit 4-4.
- 21 National Alliance for Caregiving. (2020, May). *Caregiving in the U.S.: 2020 Repor..* National Alliance for Caregiving and AARP Public Policy Institute Publication. Retrieved 15 December 2020, from <https://www.caregiving.org/wp-content/uploads/2020/05/Full-Report-Caregiving-in-the-United-States-2020.pdf>
- 22 Ramchand, R., Tanielian, T., Fisher, M. P., Vaughan, C. A. et al. (2014). *Hidden Heroes: America's Military Caregivers* (Figure 3.8). Retrieved 15 December 2020 from RAND Corporation website: <http://www.rand.org/health/projects/military-caregivers.html>
- 23 Gomby, D. S., & Pei, D. (2009). *Newborn Family Leave: Effects on Children, Parents, and Business*. David and Lucile Packard Foundation Publication. Retrieved 15 December 2020, from <http://paidfamilyleave.org/pdf/NebwornFamilyLeave.pdf>
- 24 Heymann, J., Sprague, A. R., Nandi, A., Earle, A., et al. (2017). Paid parental leave and family wellbeing in the sustainable development era. *Public Health Reviews*, 38(21). doi: 10.1186/s40985-017-0067-2
- 25 Heymann, J. (2001, October 15). *The Widening Gap: Why America's Working Families Are in Jeopardy—and What Can Be Done About It*. New York, NY: Basic Books.
- 26 Heymann, J., & Earle, A. (2010). *Raising the global floor: dismantling the myth that we can't afford good working conditions for everyone*. Stanford, CA.: Stanford Politics and Policy.
- 27 See e.g., Institute of Medicine. (2008, April 11). *Retooling for an Aging America: Building the Health Care Workforce*, 254. Retrieved 15 December 2020, from <http://www.nationalacademies.org/hmd/reports/2008/retooling-for-an-aging-america-building-the-health-care-workforce.aspx>; Arbaje, A. I., Wolff, J. L., Yu, Q., Powe, N. R., et al. (2008, August). Postdischarge Environmental and Socioeconomic Factors and the Likelihood of Early Hospital Readmission Among Community-Dwelling Medicare Beneficiaries. *The Gerontologist*, 48(4), 495-504. doi: 10.1093/geront/48.4.495
- 28 Arora, K., & Wolf, D. A. (2017, November 3). Does Paid Family Leave Reduce Nursing Home Use? The California Experience. *Journal of Policy Analysis and Management*, 37(1), 38-62. doi: 10.1002/pam.22038

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- 29 Biegel, D.E., Katz-Saltzman, S., Meeks, D., Brown, S., & Tracy, E.M. (2010). Predictors of Depressive Symptomatology in Family Caregivers of Women With Substance Use Disorders or Co-Occurring Substance Use and Mental Disorders. *Journal of Family Social Work, 13*(2), 25–44. doi: 10.1080/10522150903437458
- 30 Boushey, H., & Glynn, S. J. (2012, November 16). *There Are Significant Business Costs to Replacing Employees*. Retrieved 15 December 2020 from Center for American Progress website: <http://www.americanprogress.org/wp-content/uploads/2012/11/CostofTurnover.pdf>
- 31 See note 15.
- 32 Ibid.
- 33 Main Street Alliance. (2018). The View from Main Street: Paid Family and Medical Leave, 2018 Report. Retrieved 15 December 2020, from https://d3n8a8pro7vhmx.cloudfront.net/mainstreetalliance/pages/886/attachments/original/1567526912/MSA_PFML_Report_-_Phase_1_v3.pdf?1567526912
- 34 Lake Research Partners. (2017, February). Polling commissioned by Small Business Majority and Center for American Progress. Retrieved 15 December 2020, from <http://www.smallbusinessmajority.org/sites/default/files/research-reports/033017-paid-leave-poll.pdf>
- 35 National Partnership for Women & Families (2020, November). *Voters Show Bipartisan Support for Permanent Paid Sick Days and Paid Family and Medical Leave*. Retrieved 15 December 2020, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/voters-show-bipartisan-support-for-permanent-paid-sick-days-and-paid-family-and-medical-leave.pdf>
- 36 Perry Udem Research and Bellwether Consulting. (2018, October). *Voters' Views on Paid Family + Medical Leave*. Retrieved 15 December 2020, from <http://www.nationalpartnership.org/our-work/resources/workplace/paid-leave/voters-views-on-paid-family-medical-leave-survey-findings-august-2018.pdf>
- 37 Lake Research Partners and MomsRising.org (2018, February). Interested Parties Memo on Key Findings from Recent Qualitative Research. Retrieved 15 December 2020, from https://s3.amazonaws.com/s3.momsrising.org/images/MomsRising_LPR_Interested_Parties_memo_on_paid_leave.pdf