SUMMARY

Called to Care: A Racially Just Recovery Demands Paid Family and Medical Leave

MARCH 2021

Summary

The pandemic has magnified the longstanding systemic racial and gender inequities that unduly impact women and people of color in our country. The National Partnership recently released a brief, which finds that the lack of national paid leave has exacerbated harms to the health and economic lives of people of color, particularly women, before and during the pandemic.

The key findings from the brief include:

People of color have been hardest hit by both the pandemic and its economic effects. By April 2020, Latinx, Black and Asian American people made up disproportionately large shares of those who took time away from work due to coronavirus symptoms.

Gaps in access to job-protected paid family and medical leave mean people of color face greater hardships when health and family care needs arise. Workers of color typically have lower pay, fewer employer-provided benefits, and face other forms of economic insecurity, and so are more likely to be unable to afford unpaid leave.

Compared to white workers, Latinx workers are 66 percent more likely, Black workers 83 percent more likely and Native American, Pacific Islander and multiracial workers 100 percent more likely to be unable to take leave when needed. In fact, 28 percent of Black workers reported having requests for paid leave denied during the pandemic, compared to 9 percent of white workers.

The United States’ segregated economy and reliance on employers to provide basic health and family supports, including paid leave, have created greater economic insecurity for people of color. Fifty percent of Latinx workers report not having access to paid time off and 37 percent of Black workers lack access, compared to 34 percent of white workers.
People of color have been shut out of wealth-building opportunities, leaving them fewer assets to rely on during economic and health shocks. As of July 2020, more than half of Black adults (52 percent), and nearly half of Latinx adults (45 percent), reported they would have difficulty covering an unexpected $400 expense, compared to about three in 10 white adults (29 percent).

The Policy Solution: Nationwide, Comprehensive and Inclusive Paid Family and Medical Leave

A well-designed national paid family and medical leave program would address longstanding inequities in health outcomes and economic security. Ten states, including the District of Columbia, have passed paid family and medical leave programs. Evidence from these programs shows the promise that equitably-designed paid family and medical leave has for helping the country address not only economic inequities, but also the racial inequities in health that have been brought to the fore during the pandemic.

Research shows that paid family and medical leave programs can help address these inequities. Paid leave helps people with health conditions maintain their incomes and jobs while enabling them to seek timely treatment and rest. Paid leave supports elder care and keeps family caregivers in the labor force, including after a health shock. Paid leave also reduces nursing home utilization – a vital need given that nearly 40 percent of COVID-19 deaths have been connected to nursing homes and long-term care facilities, and deaths have been higher in facilities with a higher percentage of residents of color. Paid leave will also help address the maternal health crisis among BIPOC women.

Key aspects of an equitable program are: national and inclusive coverage; public administration; job protection; anti-discrimination practices; wage replacement; portability and coverage across multiple jobs; comprehensive; funding for outreach; and, education and enforcement.