

Paid Sick Days Improve Public Health

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Everyone gets sick, but not everyone has time to get better. Millions of working people in the United States face an impossible choice when they are sick: stay home and risk their economic stability or go to work and risk their health and the public's health. A national paid sick days standard would give workers the time they need to recover from illness or care for an ill family member in ways that would help improve public health.

Too many people must go to work sick because they cannot earn paid sick time.

- One-fifth of private sector workers – and about six in 10 of the lowest-income workers – don't have access to even a single paid sick day.¹ In total, 25 million U.S. workers don't have access to this basic protection.²
- Disparities in access to paid sick days disproportionately expose Hispanic and Black workers to increased risk of illness.³ Almost half of part-time workers, the majority of whom are women, don't have paid sick days.⁴
- Many people go to work sick because they fear workplace discipline or losing their jobs. Nearly one in four workers has reported either losing a job or being threatened with job loss for needing to take a sick day.⁵
- People with paid sick days are less likely than those without to report going to work while ill, including with a contagious illness like the flu or a viral infection.⁶

"PAID SICK LEAVE KEEPS OUR HOMES, OFFICES AND COMMUNITIES HEALTHIER WHILE ENSURING THE FAMILY'S ECONOMIC SECURITY."

— Dr. Barbara L. McAneny, Former Board Chair, American Medical Association

Lack of access to paid sick days leads to an increased risk of community contagion and workplace injury.

- Workers who interact the most with the public are often the least likely to have paid sick days. More than one-third of service workers lack access to paid sick days, and

access is even worse in occupations such as food service and child care.⁷ Workers in these occupations are also more likely to be exposed to contagious illnesses and then spread illnesses to their families and the public when they must go to work sick.

- Implementing emergency paid sick leave through the Families First Coronavirus Response Act prevented 15,000 COVID-19 cases per day nationwide – but this program expired in 2020 and did not cover other infectious illnesses.⁸
- Service workers who have certain illnesses, including the flu or norovirus, are required by the Food and Drug Administration to work on a restricted basis until 24 hours after symptoms subside.⁹ But nearly half of accommodation and food service workers don't have paid sick days,¹⁰ making them more likely to go to work sick.¹¹ Nearly half (46 percent) of restaurant-associated illness outbreaks involve an infected food service worker.¹²
- Lack of paid sick days increases workers' likelihood of being injured on the job, most likely because illness reduces workers' functional capacity, such as physical capability and ability to focus, making worksites less safe.¹³ Impacts are greater in more dangerous occupations: a construction worker without paid sick days is 21 percent more likely to experience a non-fatal occupational injury than one with paid sick days.¹⁴ When states pass paid sick days laws, the amount of workers' compensation benefits paid out decreases.¹⁵

People without paid sick days are less likely to access medical care, resulting in delayed and often costlier treatments.

- Workers without paid sick days are more likely to delay needed medical care, including working cancer patients.¹⁶ Delayed care can lead to prolonged illnesses and turn minor health problems into major, more costly ones.¹⁷ Workers who do not have paid sick days are three times more likely than those with paid sick days to neglect medical care for themselves, and they are nearly two times more likely to forgo medical care for their families.¹⁸ And workers who lack paid sick days are less likely to be able to afford health care goods and services, more likely to incur high medical expenses and more likely to have a family income below the poverty threshold than those who have paid sick days.¹⁹
- Not having sick days remains a significant barrier to health care access. Workers without paid sick days are less likely to go to the doctor or access preventive care, including cancer screenings, annual physicals, Pap smears, flu vaccines²⁰ and dental care.²¹
- Workers without paid sick days are also more likely to resort to costly emergency room visits.²² Meanwhile, paid sick days laws are linked to a 5.6 percent reduction in emergency department visits, with the greatest reduction among Medicaid patients.²³

- It is estimated that preventable emergency room visits among workers without paid sick days cost the United States more than \$1.1 billion per year, with nearly half of the costs coming from taxpayer-funded programs like Medicaid, Medicare and the State Children’s Health Insurance Program.²⁴

Children whose parents don’t have paid sick days face negative health consequences.

- Working parents without paid sick days are nearly twice as likely as those with paid sick days to send a sick child to school or day care,²⁵ putting the health of their children and their children’s classmates and teachers at risk.
- Working parents without paid sick days are 2.5 times more likely than those with paid sick days to report taking a child or family member to the emergency room because they were unable to take time off during their normal job hours.²⁶
- Children whose parents have paid sick days are more likely to receive preventive health care – specifically, they are 13 percent more likely to receive a flu vaccine and 13 percent more likely to have an annual checkup, compared to children whose parents do not have paid sick days.²⁷ On the other hand, children whose mothers lack paid sick days are less likely to receive routine well-child checkups, dental care and flu shots.²⁸
- Paid sick days laws increase the amount of time parents spend caring for their children,²⁹ and are also linked to a reduction in reports of child maltreatment, likely thanks to improved family economic security, health care access, parent and child health and other benefits.³⁰

“[P]AID SICK DAY LEGISLATION WOULD BE A PRACTICAL AND EVIDENCE-BASED PUBLIC HEALTH POLICY TO PREVENT COMMUNICABLE DISEASE AND TO ENABLE TIMELY, PREVENTATIVE CARE FOR OURSELVES, OUR CHILDREN AND OUR ELDERS.... [A] PAID SICK DAY LAW HAS POTENTIAL TO REDUCE HEALTH DISPARITIES AND CONTROL HEALTH CARE COSTS.”

**— Dr. Rajiv Bhatia, Director,
Occupational & Environmental Health,
San Francisco Department of Public Health**

Paid Sick Days for All Would Promote Healthier Workers, Families and Communities

- Eighteen states, including the District of Columbia, and 21 cities and counties have enacted policies that guarantee workers can earn paid sick days to recover from an illness or care for a sick family member without compromising their financial stability.³¹ And they benefit public health:

multiple studies have found that paid sick days reduce mortality among working-age adults.³²

- The general flu rate in jurisdictions with paid sick days laws decreased by 5.5 to 6.5 percent after the laws took effect.³³ Connecticut's paid sick days law led to a faster decline in occupational injuries and illnesses in jobs covered by the law compared to rates for those same occupations in New York and nationally.³⁴ In Washington state, a paid sick days law cut the share of retail and food service workers who reported working while sick by eight percentage points.³⁵
- The **Healthy Families Act** would allow workers to earn seven paid sick days to use to recover from illness, access preventive care, care for a sick family member or recover or seek assistance related to domestic violence, stalking or sexual assault, setting a strong standard to protect the health of workers, their families and the country.

The evidence is clear: When workers have access to paid sick days, everyone benefits.

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² Ibid.

³ Kumar, S., Crouse Quinn, S., Kim, K. H., Daniel, L. H., & Freimuth, V. S. (2012, January). The Impact of Workplace Policies and Other Social Factors on Self-Reported Influenza-Like Illness Incidence During the 2009 H1N1 Pandemic. *American Journal of Public Health*, 102(1), 134-140. doi: 10.2105/AJPH.2011.300482; Hawkins, D. (2023, January). Disparities in access to paid sick leave during the first year of the COVID-19 pandemic. *Journal of Occupational and Environmental Medicine*, 65(5), 370-377. doi: 10.1097/JOM.0000000000002784

⁴ Sixty-three percent of part time workers are women. U.S. Bureau of Labor Statistics. (2025, January.) *Labor Force Statistics from the Current Population Survey, Household Data, Annual Averages (Table 8. Employed and unemployed full- and part-time workers by age, sex, race, and Hispanic or Latino ethnicity)*. Retrieved 8 October 2025, from <https://www.bls.gov/cps/cpsaat08.htm>; See note 1.

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⁷ See note 1; Xia, J., Hayes, J., Gault, B., & Nguyen, H. (2016, February). *Paid Sick Days Access and Usage Rates Vary by Race/Ethnicity, Occupation, and Earnings*. Retrieved 8 October 2025 from Institute for Women's Policy Research website: <https://iwpr.org/wp-content/uploads/2020/08/B356-paid-sick-days.pdf>

⁸ Pichler, S., Wen, K., & Ziebarth, N. R. (2020, October 15). COVID-19 Emergency Sick Leave Has Helped Flatten The Curve In The United States. *Health Affairs*. 39(12): 2197-2204. doi: 10.1377/hlthaff.2020.00863

⁹ U.S. Department of Health and Human Services, U.S. Food and Drug Administration. (2013). *FDA Food Code 2013 (Chapter 2.2, Employee Health)*. Retrieved 8 October 2025, from <https://www.fda.gov/media/87140/download>

¹⁰ See note 1.

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The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at NationalPartnership.org.

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