



As Foreign-Born Worker Population Grows, Many Lack Paid Sick Days

July 2014 | Alex Wang, Jeffrey Hayes, and Liz Ben-Ishai

Introduction

Access to paid sick days is a key labor standard that improves public health, businesses' bottom lines, worker safety, and economic security. More than 45 million private sector workers in the United States, however, lack access to this safeguard.¹ Unequal access to sick days is a part of a larger trend toward the economic and social inequality that increasingly characterizes the U.S. labor market. While there is growing concern among the public and policymakers about inequality, the debate often focuses on wages without taking into account other key aspects of compensation, including paid family and medical leave and paid sick days.²

Research demonstrates that low-wage workers and people of color are least likely to have access to paid sick days.³ This brief builds on previous research to provide an analysis of immigrant⁴ access to sick days using data from the 2013 National Health Interview Survey (NHIS). With the number of immigrant workers growing, particularly in the low-wage workforce, it is critical to gain a clear picture of their economic circumstances.

The results show that immigrants are less likely than other workers to have access to paid sick days, with certain groups of immigrants significantly trailing their native-born counterparts. These findings underscore the need for federal, state, and local paid sick days laws to create a more equitable society that lives up to American ideals of inclusion and fairness.

Immigrant Workers' Economic Status and Job Quality

Between 2005 and 2010, immigrants accounted for 42 percent of growth in the labor force.⁵ The U.S. Department of Labor's Bureau of Labor Statistics (BLS) projects that Hispanics will make up 18.6 percent of the labor force in 2020.⁶

Immigrants are significantly more likely than their native-born counterparts to live in poverty and work in low-wage jobs, which puts them among workers *least* able to afford losing a day's wages – or their jobs – simply because they are sick or must care for a loved one. According to the Center for Immigration Studies, approximately 20 percent of immigrants—as compared to 13.5 percent of native-born individuals—were in poverty in 2010.⁷ Among low-income individuals slightly above the poverty line, the difference is even more pronounced. Nearly 44

percent of immigrants live below 200 percent of the poverty line, compared to 31 percent of natives.⁸ Research also shows that, compared to native-born individuals, low-income immigrants are less likely to use or be eligible for certain public benefits, such as Temporary Assistance for Needy Families (TANF), which may contribute to the higher incidence of poverty among immigrants (along with their concentration in low-wage and low-quality jobs).⁹

A recent study analyzing job characteristics of immigrant working parents finds that immigrant parents have lower hourly wages than native-born parents (earning 22 percent less than native-born parents), less access to pension plans (only 32 percent have pensions, compared with 49 percent of native-born parents), and less access to employment-based health insurance (42 percent have access, compared with 55 percent of native-born parents).¹⁰ Black and Hispanic immigrants are most likely to have poor-quality jobs, with Hispanic immigrants earning the lowest average wages, and least likely to have access to pensions and health insurance.

The status of immigrant workers has a significant bearing on the well-being of children and families. Nearly twice as many immigrant parents have poor-quality jobs compared to their native-born counterparts.¹¹ As a result, their children have less access to critical childcare and educational resources.¹² Lack of access to high-quality early childhood programs can have lifelong repercussions for these children.¹³

Immigrant Workers' Access to Sick Days

Analysis of the most recent data on immigrant access to paid sick days reveals the following:¹⁴

- **Immigrant workers have less access to sick days than their native-born counterparts.** Only 54 percent of immigrants have access to sick days, compared to approximately 63 percent of their native-born counterparts (Figure 1). This difference is particularly pronounced among women—54 percent of female immigrants have access to sick days, compared with 64 percent of native-born females (Figure 2).
- **Hispanic immigrants have the least access to sick days relative to all other racial/ethnic groups.** On average, only 41 percent of Hispanic immigrants have access to sick days (Figure 3). This percentage is even lower (40 percent) for Hispanic immigrant men (Figure 4) than for Hispanic immigrant women (44 percent, Figure 5).
- **Asian immigrant women have much lower access to sick days than native-born Asian women.** Approximately 70 percent of all non-Hispanic Asian immigrant workers have access to sick days, compared to 72 percent of their native counterpart. However, only 64 percent of non-Hispanic Asian immigrant women have access to sick days, compared to 75 percent of native-born women.
- **Lower-income immigrant workers who are working full time are less likely to have paid sick days than native-born counterparts at similar income levels.** Immigrants with incomes of less than \$65,000 per year have less access to sick days than their native-born counterparts (Figure 6). Around 26 percent of immigrant workers making less than \$15,000 per year have access to sick days, compared with almost 36 percent of native-born workers. Of those earning between \$15,000 and \$34,999 per year, 47 percent of immigrant workers have paid sick days, compared with 64 percent of native-born workers.

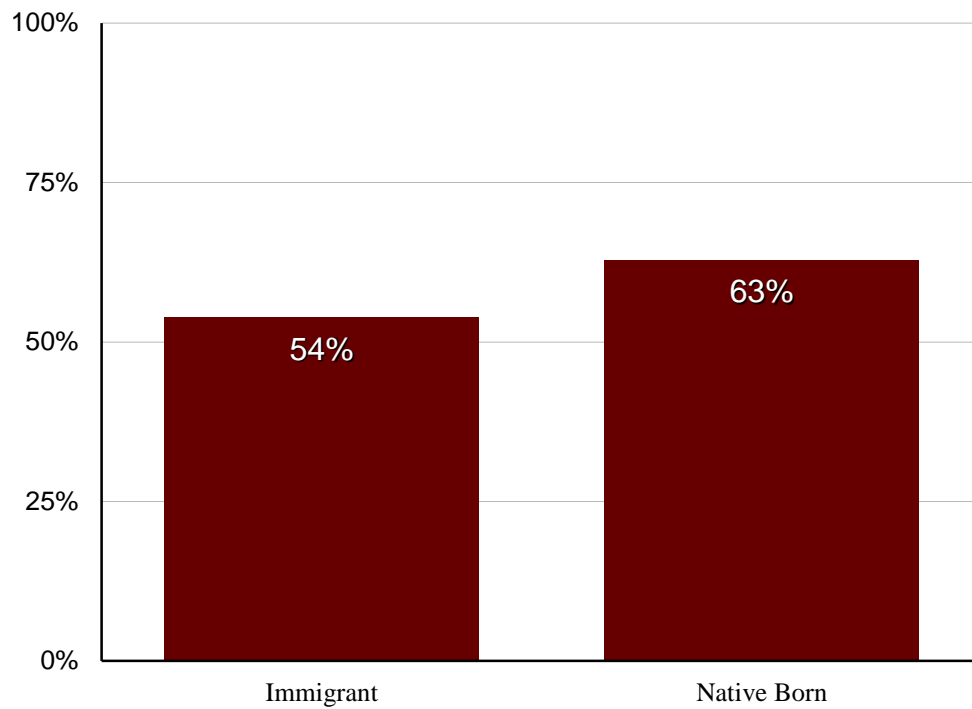
Figure 1. Immigrant and Native-Born Access to Sick Days

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Source: IWPR/CLASP analysis of 2013 National Health Interview Survey microdata.

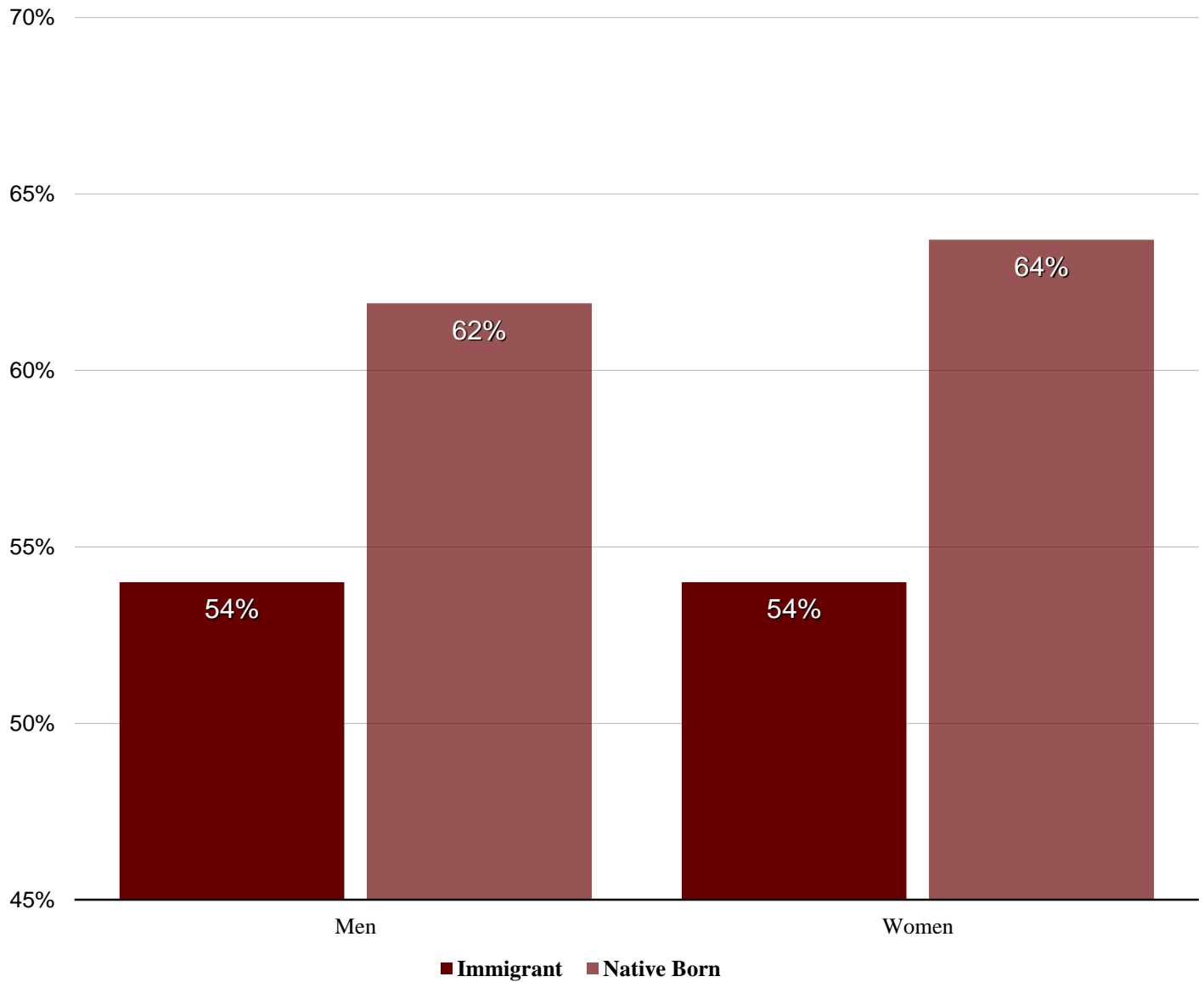
Figure 2. Immigrant and Native-Born Access to Sick Days by Gender

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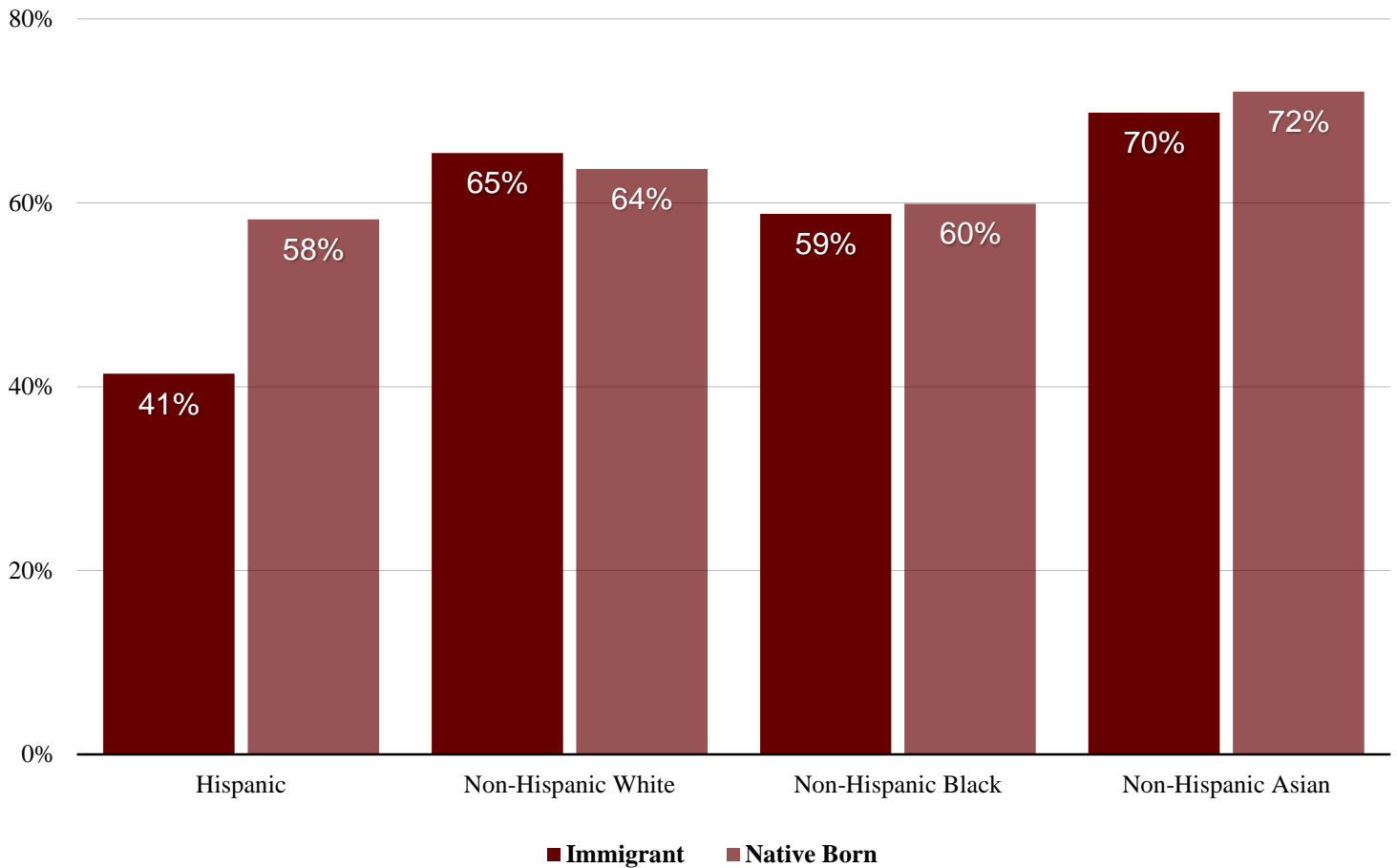
Figure 3. Immigrant and Native-Born Access to Sick Days by Race and Ethnicity

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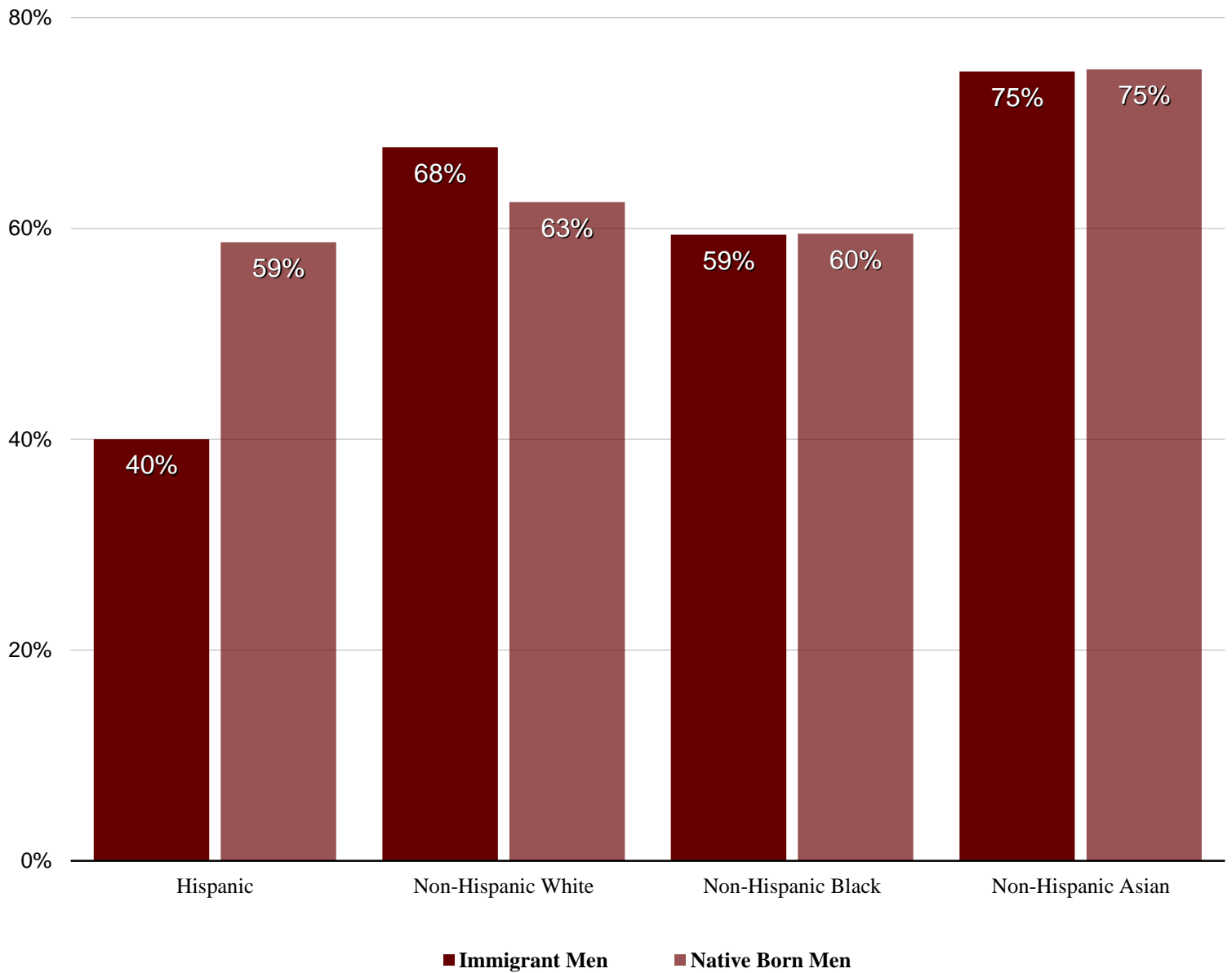
Figure 4. Male Immigrant and Native-Born Access to Sick Days by Race and Ethnicity

Figure 4: Male Immigrant and Native-Born Access to Sick Days by Ethnicity. Access rates were calculated by measuring the percentage of respondents who were over 18 years old, employed, and said “yes” out of respondents answering “yes” or “no” to the question: Do you have paid sick leave on your main job or business? Immigrant refers to individuals who were born outside of the US and its territories. Native-born refers to individuals who were born within the US and its territories.

Source: IWPR/CLASP analysis of 2013 National Health Interview Survey microdata.

Figure 5. Female Immigrant and Native-Born Access to Sick Days by Race and Ethnicity

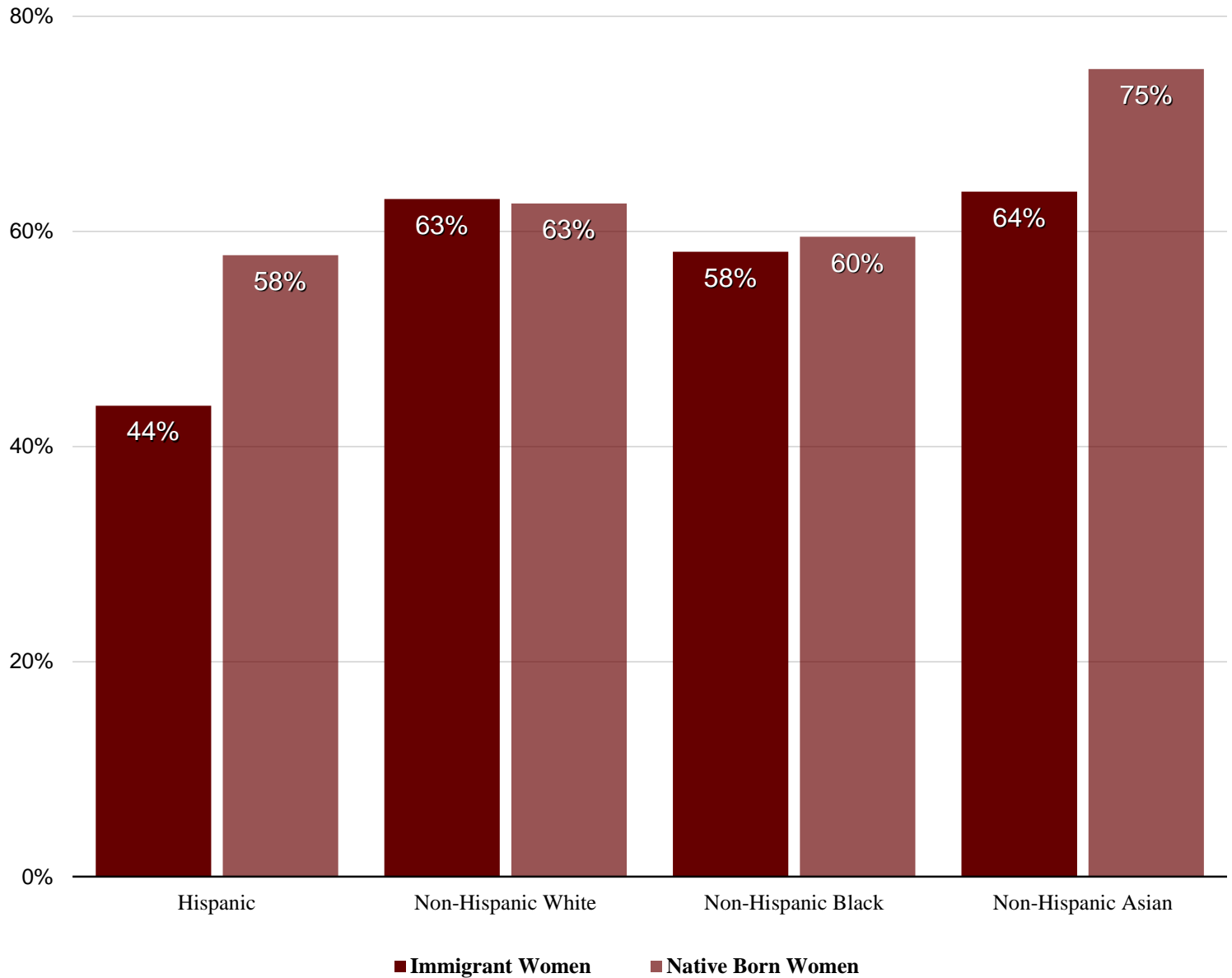


Figure 5: Female Immigrant and Native-Born Access to Sick Days by Ethnicity. Access rates were calculated by measuring the percentage of respondents who were over 18 years old, employed, and said “yes” out of respondents answering “yes” or “no” to the question: Do you have paid sick leave on your main job or business? Immigrant refers to individuals who were born outside of the US and its territories. Native-born refers to individuals who were born within the US and its territories.

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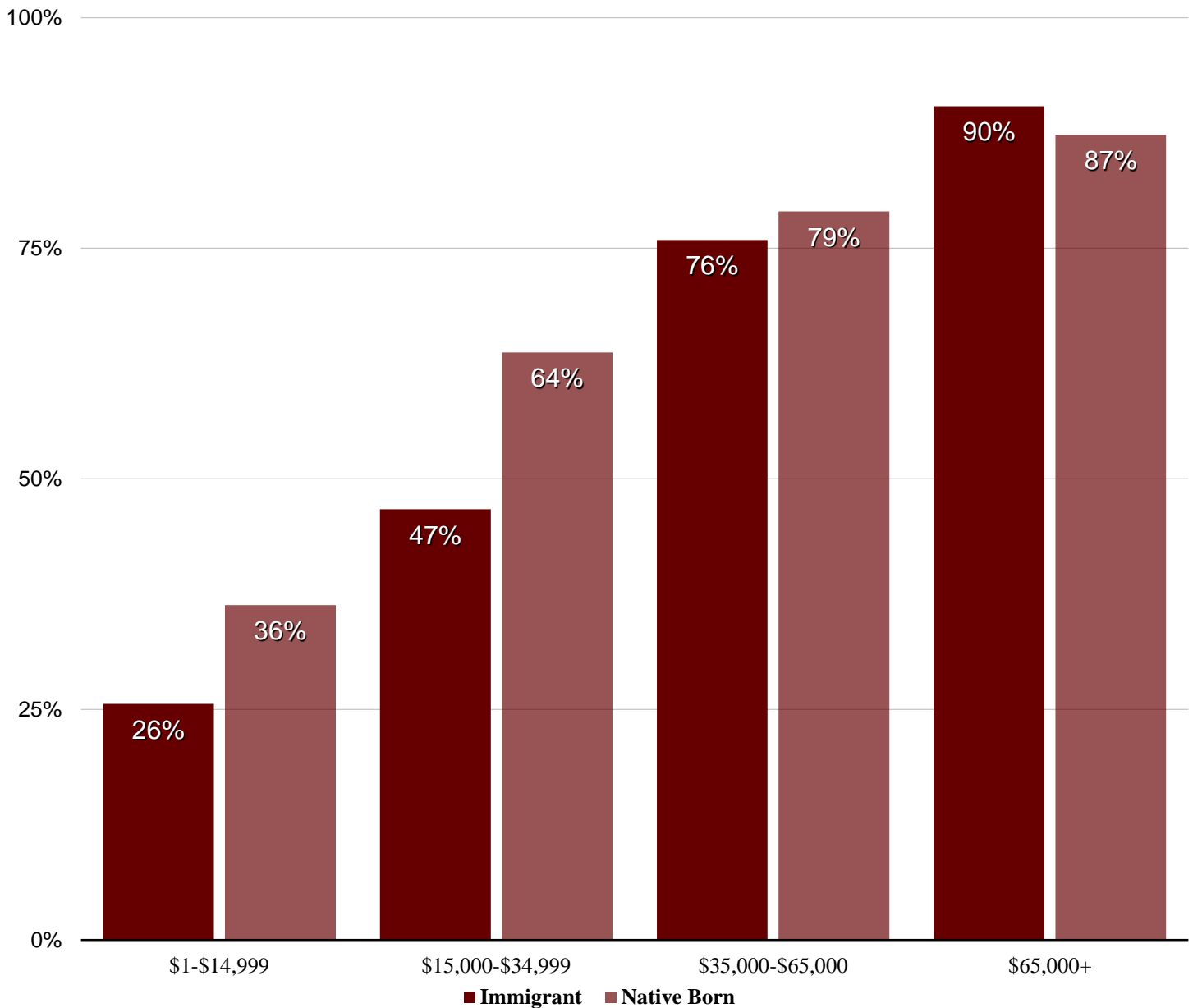
Figure 6. Immigrant and Native-Born Access to Sick Leave by Personal Earnings for Full Time Workers

Figure 6: Immigrant and Native-Born Access to Sick Days by Personal Earnings for Full Time Workers. Access rates were calculated by measuring the percentage of respondents who were over 18 years old, employed full time, and said “yes” out of respondents answering “yes” or “no” to the question: Do you have paid sick leave on your main job or business? Immigrant refers to individuals who were born outside of the US and its territories. Native-born refers to individuals who were born within the US and its territories. Earnings are annual earnings last year reported by full-time workers.

Source: IWPR/CLASP analysis of 2013 National Health Interview Survey microdata.

The Movement to Pass Paid Sick Days Laws is Gaining Momentum

To address inequality, including unequal access to paid sick days, we need public policies guaranteeing all workers access to paid sick time. As more and more Americans recognize the urgency of this need, a growing number of jurisdictions are passing paid sick days laws. San Francisco, Seattle, Portland, Washington D.C., New York City, Jersey City, and Newark, NJ—along with the state of Connecticut—have all passed such laws in recent years. Federal legislation to create a national paid sick days standard has been introduced in Congress. The Healthy Families Act, being considered at the federal level, would allow workers to accrue up to seven paid sick days per year to address their own medical needs, care for an ill family member, or tend to issues related to domestic violence, sexual assault, or stalking.

Popular support for these policies is very high. Majorities in all demographic groups support paid sick days. A national poll found that 75 percent of all participants support paid sick days, including strong majorities of Whites, African Americans, and Hispanics.¹⁵ Support is also bipartisan: 86 percent of Democrats and 65 percent of Republicans support a law guaranteeing a minimum number of paid sick days.¹⁶ As the demographics in the United States continue to shift to include a growing number of non-native-born workers, support for these policies may grow stronger.

Workers, including those who have moved to the United States and who help fuel its economic engine, shouldn't have to choose between their health (or their families' health) and their jobs.

Endnotes:

- ¹ Number of private sector workers with access to paid sick leave calculated using data from the National Health Interview Survey (NHIS) from 2013. The NHIS is a survey of 32,965 individuals, and can be analyzed by gender, race, and ethnicity.
- ² Ben-Ishai, Liz. *Access to Paid Leave: An Overlooked Aspect of Economic and Social Inequality*. CLASP, 2014. http://www.clasp.org/resources-and-publications/publication-1/2014-04-09-Inequities-and-Paid-Leave-Brief_FINAL.pdf
- ³ Claudia Williams and Barbara Gault. *Paid Sick Days Access in the United States: Differences by Race/Ethnicity, Occupation, Earnings, and Work Schedule*. Institute for Women's Policy Research. http://www.iwpr.org/publications/pubs/paid-sick-days-access-in-the-united-states-differences-by-race-ethnicity-occupation-earnings-and-work-schedule/at_download/file
- ⁴ The data distinguish between native-born and non-native-born workers. Therefore, a small number of workers included among non-native-born workers may not be immigrants, i.e. those born to U.S. citizen parents. However, for ease of identification, we refer to non-native-born workers as "immigrants" in this brief.
- ⁵ Audrey Singer, *Immigrant workers in the U.S. labor force*. Brookings Institution, 2012. <http://www.brookings.edu/research/papers/2012/03/15-immigrant-workers-singer>.
- ⁶ Toossi, Mitra. "Table 1. Civilian labor force, by age, gender, race, and ethnicity, 1990, 2000, 2010, and projected 2020" in *Labor force projections to 2020: a more slowly growing workforce*. Bureau of Labor Statistics Monthly Labor Review, 2012. <http://www.bls.gov/opub/mlr/2012/01/art3full.pdf>
- ⁷ Camarota, Steven A. "Table 10. Poverty and Near Poverty" in *Immigrants in the United States, 2010: A Profile America's Foreign-Born Population*. Center for Immigration Studies, 2012. <http://cis.org/node/3876>
- ⁸ Ibid.
- ⁹ Leighton Ku and Brian Bruen. *Poor Immigrants Use Public Benefits at a Lower Rate than Native-Born Citizens*. Cato Institute, 2013. <http://www.cato.org/publications/economic-development-bulletin/poor-immigrants-use-public-benefits-lower-rate-poor>; See also, "Summary of Immigrant Eligibility Restrictions Under Current Law, Assistant Secretary for Planning and Evaluation Department of Health and Human Services, 2009. <http://aspe.hhs.gov/hsp/immigration/restrictions-sum.shtml>
- ¹⁰ Alison Earle, Pamela Joshi, Kimberly Geronimo, and Dolores Acevedo-Garcia. *Job characteristics among working parents: differences by race, ethnicity, and nativity*. Bureau of Labor Statistics Monthly Labor Review, 2014. <http://www.bls.gov/opub/mlr/2014/article/job-characteristics-among-working-parents.htm>.
- ¹¹ Ibid
- ¹² The Annie E. Casey Foundation notes that the majority of the 18 million children in immigrant families in the U.S. are children of color. For data on obstacles children of color face in accessing opportunity and achieving milestones, see Annie E. Casey Foundation. "Race for Results.", 2014. <http://www.aecf.org/m/resourcedoc/AECF-RaceforResults-2014.pdf>
- ¹³ Phillips, Deborah A., and Jack P. Shonkoff, eds. *From Neurons to Neighborhoods:: The Science of Early Childhood Development*. National Academies Press, 2000.; See also, Liz Ben-Ishai and Christina Walker. "Coming to America: Immigrant Parents' Investments in Children". CLASP, 2014. <http://www.clasp.org/issues/child-care-and-early-education/in-focus/coming-to-america-immigrant-parents-jobs-dont-allow-for-investments-in-children>
- ¹⁴ This analysis replicates a similar analysis conducted by the IWPR, which used the NHIS from 2012 to analyze access to paid sick days for all workers over 18 years of age in the private sector. However, this analysis focuses on non-native born, or immigrant workers, and uses NHIS data from 2013. http://www.iwpr.org/publications/pubs/paid-sick-days-access-in-the-united-states-differences-by-race-ethnicity-occupation-earnings-and-work-schedule/at_download/file
- ¹⁵ Tom W. Smith and Jibum Kim. *Paid Sick Days: Attitudes and Experiences*. Public Welfare Foundation, 2010. <http://www.publicwelfare.org/resources/DocFiles/psd2010final.pdf>; A 2014 national poll found the same overall support for sick days, with 75 percent supporting sick days, 13 percent opposing, and 11 percent unsure. Center for American Progress, Public Policy Polling. "National Survey Results," 2014, http://cdn.americanprogress.org/wp-content/uploads/2014/06/CAPPollResults_RELEASE.pdf.
- ¹⁶ Ingalls, Dustin. "Americans united in bipartisan support for public policy solutions to workplace problems" Center for American Progress Public Policy Polling, 2014. http://cdn.americanprogress.org/wp-content/uploads/2014/06/CAPWorkplaceMemo_FINAL.pdf