

Testimony of Tanya L. Goldman

U.S. House of Representatives Education and Labor Committee

Workforce Protections Subcommittee

Hearing on The Healthy Families Act (H.R. 1784): Examining a Plan to Secure Paid Sick Leave for U.S. Workers

March 11, 2020

Thank you, Chairwoman Adams, Ranking Member Byrne, and members of the Workforce Protections Subcommittee of the Education and Labor Committee. My name is Tanya Goldman. I am a Senior Policy Attorney at the Center for Law and Social Policy (CLASP), an anti-poverty organization that promotes effective federal, state and local policies for lowincome families and individuals. I am truly honored to come before this subcommittee to speak to the central importance of paid sick and safe days for all workers, and especially for low-income workers, parents, children, and people of color.

CLASP, which has an anti-poverty and racial justice mission, is dedicated to ensuring that laws passed in the name of improving the economic stability of low-income communities actually do that. Since 2016, CLASP has been convening state and local enforcement agency representatives, advocates, worker organizations and national advocates to share successes, lessons, and innovations in implementing and enforcing paid sick days policies. There has been tremendous momentum in the enactment of local and state paid sick days laws—there are now 12 states, including D.C., and 22 cities and counties that have enacted laws,¹ thanks to the tireless efforts of local grassroots leaders and advocates who comprise the Family Values at Work and MomsRising networks, and due to the legal and research support provided by A Better Balance, the National Partnership for Women and Families, and the Institute for Women's Policy Research (IWPR). We are proud to partner with these organizations and other national advocates to press for the passage of these important laws and then to work to ensure they are fully implemented and enforced through partnerships between local advocates and enforcement agencies. Information and lessons shared at CLASP's paid sick days convenings reveal that paid sick days are working and improving the economic security and lives of all workers.

It's time for national policy to catch up, especially as we deal with the public health emergency created by the coronavirus. To create lasting change for workers, reduce income inequality, and protect public health, federal policymakers must create a national minimum standard as envisioned by the Healthy Families Act, which would guarantee employees job-protected short-term sick time without losing wages or their job.

I make five key points in my testimony. First, there is an urgent need for a national paid sick days standard. Second, there is broad public support for paid sick days. Third, we have learned a great deal from state and local paid sick days laws, and the Healthy Families Act incorporates and builds on the evidence of beneficial impacts of those laws. Fourth, the Healthy Families Act provides critical protections for workers. Finally, I conclude by discussing why alternative approaches will not benefit working people and their families.

I. The Urgent, Evidence-based Need for a Federal Paid Sick Days Standard

As we face a major global pandemic, it is sobering to remember that over 32 million workers in our country don't have <u>any</u> paid sick days.² If they get the flu—or coronavirus—need to visit the doctor, have to care for a sick child or an ailing loved one, or obtain treatment or assistance related to domestic violence, sexual assault, or stalking, they face impossible choices between health and employment. Reaching all workers—with adequate paid sick days that benefit workers, children, mothers, people with health challenges, and people of color—demands national action. While state and local paid sick day laws have been enormously important in covering workers and modeling successful approaches, a jurisdiction-by-jurisdiction strategy leaves out far too many workers, families, and communities who need help the most. We cannot achieve the health, developmental, and poverty-reduction benefits of paid sick days without a national program and standard.

a. Access to paid sick days is insufficient and inequitable

Low-wage workers and part-time workers are the least likely to have jobs with paid sick days. Only 30 percent of the workers in the bottom decile of wage earners — who can least afford to take unpaid leave — have access to paid sick leave.³ The situation is especially problematic in particular low-wage occupations and sectors. More than 40 percent of workers in low-wage jobs, such as service workers, and more than 50 percent of workers in the leisure and hospitality sector, including food service workers, have no access to paid sick days.⁴ Additionally, less than half (43 percent) of part-time workers have paid sick days, compared to 83 percent of full-time workers.⁵ This is becoming a serious issue as more than 4 million workers are working fewer hours than they would like and must often work multiple part-time jobs to make ends meet.⁶

Many workers who lack paid sick days are parents, meaning the lack of access could harm not just their own health, but also that of their children. Twenty-nine percent of parents with children under the age of 18 have no access to paid leave, which means they are more likely to send their child to school or child care when they are sick or risk potential income or job loss.⁷

Furthermore, many workers of color are less likely to have access to any kind of paid leave, including paid sick days. Thirty-six percent of Black workers and 48 percent of Latinx workers lack access to paid leave.⁸ For many of these workers, taking unpaid sick time can lead to economic instability, forgone wages, and even job loss. The following story about Wanda Campbell from Hartford, Connecticut highlights why paid sick days can make all the difference:

Wanda drives a school bus to support her family of four. A few years ago, her son and daughter both contracted the H1N1 virus. Because they also both have diabetes, Wanda was particularly concerned. Her son ended up in the hospital and Wanda lost a week of work—and the wages she would have earned. As soon as they got better, Wanda caught the virus. "I am the sole provider," says Wanda, "so losing that one week of income was horrible." She had to drive the bus sick, constantly wiping down the seats and taking other precautions. It took a long time to catch up on bills. Wanda became involved in the fight for Connecticut to become the first state with a paid sick days law. "Having paid sick days now is great for us," Wanda says.⁹

b. Lack of paid sick days can exacerbate poverty

Lacking paid sick days can exacerbate poverty, particularly by undermining the economic stability of female workers and caregivers. Workers without paid sick days are 3 times more likely to experience poverty, 1.4 times more likely to need state or local income supports, and 1.3 times more likely to receive SNAP (Supplemental Nutrition Assistance Program, formerly known as Food Stamps).¹⁰ For many workers, even a day of lost wages can impact their ability to pay bills or afford groceries. Workers who have to take an unpaid sick day also risk retaliation or losing their job.

Additionally, according to one study, one in five low-wage working mothers reported losing a job because of illness or the need to care for a family member.¹¹ Furthermore, the lack of access to leave contributes to gender-based inequities; according to the most recent American Time Use survey, women are still more likely than men to experience times when they need to take leave, usually to deal with their own health needs or illness, and do not.¹²

c. Personal, family, and public health consequences stem from not having a national paid sick days standard

Without a national paid sick days law, we are paying the price with personal, family, and public health consequences. Lacking paid sick days increases "presenteeism"—workers going to work despite being ill or needing medical attention. This creates a significant risk for workers by prolonging their illness and for the general public because it can hasten the spread of contagion. Estimates are that presenteeism costs the national economy hundreds of billions of dollars in lost productivity.¹³ Additionally, over-the-counter medications that mask symptoms but do little to cure the illness are widely available and allow for the easy transmission of disease.¹⁴ One survey conducted by the National Opinion Research Center found that workers without paid sick days were 1.5 times more likely than those with paid sick days to go to work with a contagious illness.¹⁵ This can wreak havoc on the health of coworkers and the general public. For example, during the H1N1 influenza pandemic of 2009, infected workers were estimated to have infected an additional 7 million co-workers.¹⁶

Presenteeism is a well-documented problem for workers in food service. The Centers for Disease Control and Prevention report that an estimated 48 million people get sick every year from a foodborne illness.¹⁷ A study of food workers found that almost 60 percent of workers interviewed had worked while ill and many (43 percent) did so because they did

not have paid sick days. Of those workers, 20 percent said that they had worked one or more shifts in the previous year while ill with diarrhea or vomiting.¹⁸ Another study of norovirus outbreaks, a prevalent foodborne illness, found that food handlers were responsible for just over half (53 percent) of the norovirus outbreaks between 2001-2008.¹⁹

Parents who lack paid sick days may be forced to make the painful decision to send their young children to child care even when they are too sick to go, affecting the health of their own child, the caregivers, and other children. One survey revealed that a third of parents with young children were concerned about losing pay because of missing work to care for a sick child.²⁰ This problem is pervasive, with nearly two-thirds of parents reporting their children couldn't go to child care because of illness in the past year.²¹ One focus group study found that parents were giving their sick children Motrin and sending them to child care with the hope that the medication's effects would last the day.²²

One of the many benefits of paid sick time is the ability to use the leave for medical appointments. Without paid sick days, workers are also less likely to get critical preventative health screens and interventions (such as a flu shot) and timely treatment, which can lead to long-term personal and public costs. One study of health screenings since the Affordable Care Act was implemented found that those without paid sick days were 30 percent less likely to have had their blood pressure checked, 40 percent less likely to have had a cholesterol screening, and 24 percent less likely to have had a fasting blood sugar check in the last 12 months.²³ These workers were also 61 percent less likely to have received their annual flu shot and 19 percent less likely to have spoken with a health care professional at all in the past year.²⁴ The same study found that women without paid sick days were 23 percent less likely to have had a pap smear in the last 12 months.²⁵ Earlier research found that nearly 72 percent of women with paid sick days received annual clinical breast exams, while only 60 percent of those without accessed this testing.²⁶ Additionally, more than 17 percent of mothers, especially women of color and young mothers, report delaying prenatal care without paid sick days.²⁷ Another study has found that workers who lack paid sick days report a statistically significant level of psychological distress and are 1.45 times more likely to report that these symptoms interfere "a lot" with their life activities compared to workers who have access to paid sick days.²⁸

d. The critical benefits of paid sick days

Numerous studies reveal that access to paid sick days leads to higher rates of treatment for medical conditions, needed rehabilitation, and use of critical preventative services, which can potentially save lives and money. For example, one study estimated that because people with access to paid sick days are more likely to receive flu shots, a national paid sick days law could potentially prevent enough cases of the flu to eliminate 18,200 health care visits, saving over \$4 million annually.²⁹ Paid sick leave could also help reduce the instances of on-the-job injuries by 28 percent across all industries.³⁰

Parents with access to paid sick days are five times more likely to care for their own sick children, and it also allows them to get timely treatment for their children.³¹ A 2017 study found that children whose parents had access to paid sick days were 12.5 percent more likely to have gotten a flu shot and 13.2 percent more likely to have received an annual medical

check-up.³² Regularly attending well-child check-ups cuts children's risk of hospitalization in half.³³ Finally, since workers with paid sick days can get timely preventative services, it can help reduce the use of expensive emergency department visits by \$1.1 billion annually.³⁴ This story from MomsRising member McKyndree Rogers, a mother of two children, ages 10 and 7, who lives in Spokane Valley, Washington, illustrates the benefits of having paid sick days:

McKyndree worked in the restaurant industry for many years and didn't have the ability to earn even a single paid sick day. At the same time, she had two young children and interacted with many people each day as part of her job, increasing her risk of becoming ill and spreading contagion. Knowing she wouldn't get paid if she or one of her children became ill was a constant, major source of stress for her family. Missing just one day of pay threatened her ability to make ends meet.

Today, McKyndree works in early childhood education and finally has access to paid sick days. She says it has made an enormous difference. Just last week, she was able to take time off work to go to the doctor. She says it is incredibly important to her to be able to proactively take care of her health and her children's health, as well as stay home when she and/or her children are sick, without risking her paycheck.³⁵

II. The Public Expresses Significant Support for Paid Sick Days

There is broad, overwhelming support across demographic groups and party affiliations for a law guaranteeing paid sick days to employees. A national poll conducted by the National Opinion Research Center at the University of Chicago (NORC) found that 86 percent of people favor a law providing 7 paid sick days annually for full-time employees.³⁶ About 90 percent of Democrats, three-quarters of independents, and a majority of Republicans support a law requiring a minimum number of paid sick days. More broadly, NORC found that three-quarters of respondents agree that paid sick days is a basic worker's right, like being paid a livable wage.³⁷

Aside from national support, there is also overwhelming support for comprehensive paid sick days laws in states and cities that are looking to enact legislation or have already implemented it. In poll of 600 voters in Austin, Texas, for example, 63 percent of respondents supported requiring private employers in Austin to "offer employees the opportunity to earn paid sick time."³⁸ In cities that have already implemented a paid sick days law, employers also express wide support. According to a survey conducted by researchers in New York City, 86 percent of employers supported the paid sick leave bill after New York City's Earned Sick Time Act was passed.³⁹ Both employers and employees from various backgrounds agree paid sick days are necessary, and the support is only growing.

III. The Healthy Families Act Builds on the Experiences, Lessons Learned, and Beneficial Impacts of Paid Sick Days Policies at the State and Local Level

State advocates and grassroots coalitions, with support from national advocacy organizations, have helped rally and drive the momentum to enact laws to provide workers access to paid sick days in 11 states, the District of Columbia, and 22 localities.⁴⁰ In addition, Maine, Nevada, and Bernalillo County, New Mexico, have passed paid time off laws that workers can use for sick time.⁴¹ The jurisdictions with paid sick days laws include:

States (and D.C.)	Local Laws
Arizona	California:
California	Berkeley, CA
Camornia	Emeryville, CALos Angeles, CA
Connecticut	 Oakland, CA
District of Columbia	• San Diego, CA
District of Columbia	San Francisco, CA Santa Maniaa CA
Massachusetts	Santa Monica, CA
M]]	Washington:
Maryland	• Seattle, WA
Michigan	Tacoma, WA Illinois:
X Y Y	Cook County, IL
New Jersey	Chicago, IL
Oregon	Mawdandi
NI I I I	Maryland:Montgomery County, MD
Rhode Island	
Vermont	Minnesota:
	Duluth, MNMinneapolis, MN
Washington	 Saint Paul, MN
	New York:
	New York City, NYWestchester County, NY
	· Westellester doulity, III
	Pennsylvania:
	Philadelphia, PA Dittahurah, PA
	Pittsburgh, PA
	Texas:
	• Austin, TX ⁴²
	 Dallas, TX San Antonio TX43
	San Antonio, TX ⁴³

On the federal level, the U.S. Department of Labor published a final rule in 2016 implementing Executive Order 13706, Establishing Paid Sick Leave for Federal Contractors, requiring certain federal contractors to provide up to seven paid sick days a year.⁴⁴ The Department estimated that the Final Rule would provide paid sick leave to over 1 million employees of Federal contractors, which would improve their health and performance, in addition to leading to other efficiencies and public health benefits. In turn, this would make Federal contractors more competitive with model employers in recruiting and retaining talented employees. By relying on implementation lessons and evaluations at the state and local level, the Rule reflects the blueprint of the Healthy Families Act. It does so by providing the same amount of leave, accrual rate, available uses, and choices for employers in how best to adapt the requirement to their business and by offering employers flexibility to integrate it with their existing policies.⁴⁵

San Francisco first passed a paid sick days law in 2006, and the law took effect in early 2007.⁴⁶ This provides over 13 years of experience in implementation and enforcement of paid sick days, thanks to all the jurisdictions with such laws. Evidence shows that the laws are working well for workers, businesses, and the economy. The Healthy Families Act of 2019 has incorporated many of the evidence-based lessons from the state and local level. Much like at least seven jurisdictions with paid sick days laws, the Healthy Families Act has the most inclusive definition of family to better reflect the diversity of families in the United States.⁴⁷ The legislation's (or bill's) accrual rate requirement of one hour for every 30 hours worked, which is similar to 11 jurisdictions, ensures that workers have an adequate amount of leave to deal with their health or the health of a loved one. Additionally, like 28 states and localities, the Healthy Families Act offers paid safe time in addition to paid sick leave. Safe days allow for time off for treatment or assistance (including taking legal action) in cases of domestic violence, sexual assault, or stalking. Similar to 11 jurisdictions, it also explicitly bars employers from counting sick leave under absence control or no-fault attendance policies. Without this provision low-wage workers may be wrongly penalized for taking needed sick leave. Furthermore, the Healthy Families Act includes prohibitions on retaliation and discrimination, recognizing that workers' legitimate fears of retaliation may prevent them from exercising their rights.

a. Economic benefits

Paid sick days laws have beneficial economic impacts on employees and employers. Numerous studies have countered erroneous business concerns that paid sick days will lead to higher unemployment or negative wage effects, with no such effects having been found to date.⁴⁸ According to analysis by the Institute for Women's Policy Research (IWPR), after the introduction of paid sick days, San Francisco's percentage growth in civilian employment was strong and exceeded the average growth of surrounding counties.⁴⁹ The City of Seattle auditor did not find any negative economic impacts 10 months after implementation of Seattle's Paid Sick and Safe Time Ordinance, including on the total number of jobs in Seattle. Furthermore, many more employers in Seattle began to offer leave to their part-time employees (with paid sick time coverage growing from one-third to three-fourths) after passage of the ordinance. The largest increase in the provision of sick leave benefits was in the food and accommodations sector, where paid sick time coverage grew from 14 percent to 78 percent after passage of the ordinance.⁵⁰ Similarly, the District of Columbia audit of its Accrued Sick and Safe Leave Act found "that the Act did not discourage owners from basing businesses in the District," nor did it encourage them to do so.⁵¹

IWPR has studied the economic impacts of paid sick days for other jurisdictions. For example, in Massachusetts they weighed the benefits to employers against their costs to implement the law and expect employers to save close to \$50 million annually.⁵² These savings result from reduced turnover, presenteeism, and spread of flu from sick employees coming to work. They also found larger public health savings, including on health care expenses relating to nursing home stays and emergency room use. In Austin, Texas, IWPR estimates that the ordinance could provide employers a net savings of \$4.5 million per year, on top of a net community savings of \$3.8 million annually.⁵³ Furthermore, a recent study of Washington state's 2018 paid sick days law estimates that the law increased access to paid sick days by 28 percent and has helped reduce the share of workers who report to work sick by 8 percent.⁵⁴ Finally, research into the benefits of paid sick time has found that it decreased emergency department use, which can lead to significant cost-savings.⁵⁵

b. Positive health impacts

In addition to positive economic impacts, paid sick time has demonstrated, beneficial health impacts, including significant reductions in flu-like infection rates (about 10 percent).⁵⁶ A 2016 study found that flu rates in jurisdictions with paid sick days laws have fallen approximately 5.5 to 6.5 percent since the laws were implemented.⁵⁷ IWPR's San Francisco survey found that a quarter of employees reported that paid sick days improved their ability to care for their and their families' health needs. This study also found that Black, Latinx, and low-wage workers benefitted the most from the San Francisco ordinance. It also found parents with access to paid sick days were less likely to send a sick child to school than a parent without paid sick days.⁵⁸ After passage of Connecticut's paid sick days law, the largest increase in coverage was in public-facing sectors such as health, education, social services, hospitality and retail—occupations where sick workers can expose many others to their illnesses.⁵⁹ A national standard could be critical in preventing and responding to future epidemics.

c. Lessons from implementation

With so much experience at the state and local level, we have also learned how to best implement and enforce these laws. Employers in San Francisco, Seattle, and Connecticut have reported that it was <u>not</u> challenging to implement paid sick days laws.⁶⁰ Some Connecticut employers reported improved employee morale, motivation, and productivity.⁶¹

Our research, similar to other studies and evaluation, has identified education and outreach to be critical factors in the success of a paid sick days law. CLASP has documented effective outreach strategies that ensure employers are aware of their responsibilities and employees know their rights. Partnerships with unions, worker centers, community-based organizations, other government agencies, and employer groups play a central role in ensuring outreach and education is provided with cultural competency and easily accessible information by trusted messengers.⁶² An effective outreach plan must be accompanied by technical assistance to maximize compliance. Plans must also include deliberate efforts to address workers' fears of retaliation and job loss as a result of exercising their rights. The Healthy Families Act includes explicit appropriations for education and outreach and can tap into the wealth of promising practices for effective outreach innovated on the state and local level. Ongoing evaluations are also critical. In Seattle, the law required (and provided funding for) a post-implementation assessment 18 months after the law's effective date. The city also conducted an audit of the law's enforcement. Washington, D.C.'s law also requires an annual audit, though it has only been conducted once since the law passed in 2008.⁶³ In San Francisco, IWPR conducted a post-implementation study examining worker and employer experiences with the law.

The Healthy Families Act wisely requires the Government Accountability Office to conduct a study no more than five years after the law's enactment to evaluate its implementation and report the results of the study to Congress. This will ensure ongoing effective implementation and improve policies and practices for employer outreach and reaching workers most in need of the laws' protections.

d. Workers are appropriately using paid sick days laws when they need them

Despite misconceptions, we have little evidence that workers are abusing access to paid sick days. In fact, evidence reflects employees are not using all of their leave. Results from the IWPR San Francisco survey indicates that workers were using less than half of their available paid sick days.⁶⁴ Eighty-six percent of Connecticut employers surveyed by the Center for Economic and Policy Research reported no known cases of abuse of paid sick days.⁶⁵ Looking at national data, IWPR found that most workers with access to paid sick days do not use them all in a given year.⁶⁶ Thus, while paid sick days provide critical benefits to workers at specific moments, they are not a source of abuse. Additionally, most policies have safeguards against this through such provisions as allowing employers to request medical certification after 3 or more days of absences.⁶⁷

However, having a standard of at least 7 days of leave is critical because the evidence shows some workers will need all of their available sick days in a given year. In the first year of life alone, the American Academy of Pediatrics recommends that babies have eight visits to the pediatrician, just for well-child check-ups.⁶⁸ Infants and toddlers catch colds and other minor illnesses easily and often require additional doctors' visits and increased parental supervision at home. Children whose parents have paid sick leave have greater ability to access preventive health care services, such as immunizations and well-child visits, and are less likely to delay needed medical care.⁶⁹ In fact, many workers benefit from simply knowing they have an emergency reserve available should they need it.⁷⁰

IV. The Healthy Families Act Provides Critical Protections for Workers

The Healthy Families Act would benefit millions of working people without imposing an undue burden on businesses. Covered employees will be able to earn up to 56 hours, or approximately 7 days, of sick time per year. Employees gradually accrue the time, receiving 1 hour of sick time for every 30 hours they work. Accrued time carries over to the next calendar year, though employers have the option to limit the carry-over to 56 hours.

a. Uses for paid sick time support critical health and wellness needs

Employees can use sick time for a number of critical health and wellness needs, specific school appointments, and safe days:

- To care for their own physical or mental illness, injury, or medical condition;
- To obtain professional medical diagnosis or care, including preventive medical care;
- To care for a family member, including a child, parent, spouse, domestic partner, or any other individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship;
- To attend a school meeting or professional appointment related to a child's health condition or disability; or
- To obtain treatment or assistance (including taking legal action) for themselves or a family member in cases of domestic violence, sexual assault, or stalking, also known as safe days. This could include seeking medical attention, counseling, or recovery; seeking relocation, and taking legal action, including preparing for or participating in any civil or criminal legal proceeding related to or resulting from domestic violence, sexual assault, or stalking.

Sick time is intended to be used for short-term needs, such as attending a doctor's appointment or staying home for one's own health and to reduce the spread of contagious illness, like the coronavirus, to co-workers and the public. This is different from paid family and medical leave, which can be for longer periods of time for purposes such as a serious personal medical condition, family caregiving, and bonding with a new child.

b. The Healthy Families Act includes time off for paid "safe days" to help employees maintain their financial stability

As noted, the Healthy Families Act also allows employees to take paid safe days. This is critical because nearly one in three women will experience physical violence by an intimate partner in their lifetimes.⁷¹ These rates are even higher for women of color. Paid sick and safe days allow survivors of sexual assault and domestic violence to use paid leave to seek help while maintaining the critical financial stability that comes with keeping a job.⁷² Too many people, and especially women, are forced to risk losing their jobs or income when they need to take time away from work to address domestic-violence-related issues, such as obtaining a restraining order or finding housing, to avoid or prevent physical or sexual abuse.

The National Network to End Domestic Violence reports that victims' fears about providing for themselves and their children are a significant reason for staying in or returning to an abusive relationship.⁷³ These economic fears are warranted.⁷⁴ According to the U.S. Government Accountability Office, between 24 and 52 percent of domestic violence survivors reported that they lost a job, at least in part, due to domestic violence.⁷⁵ For example, here's the experience of Kaila, who survived an abusive marriage:

It was hard for me to concentrate at work because my mind was more on my daughter's condition and our situation. Having to go back and forth wore on me mentally and physically. It affected my performance at work, and I ended up being fired from my job because I was making mistakes under the stress.⁷⁶

Keeping a job and having the ability to take care of immediate needs without forgoing a paycheck allows survivors to obtain medical care and counseling, attend court appearances, meet with lawyers or the police, or take care of activities like moving to a safe location. This is particularly important for workers earning low wages, who often lack time and resources to access medical care, contact authorities, or obtain a protective order.⁷⁷

c. The Healthy Families Act protects workers' rights

In addition to providing a critical labor standard, the legislation also includes important provisions to educate workers about their rights and robust prohibitions on interference with employees' rights, including prohibiting discrimination and/or retaliation for exercising one's rights. Some employers silence victims and witnesses by strategically retaliating, which undermines law enforcement and obstructs justice. When employers operate with a culture and expectation of retaliation, workers are reluctant to speak up and workplace violations go unreported and unaddressed.⁷⁸ The Healthy Families Act recognizes and makes it unlawful for employers to interfere with workers exercising their rights under the law.

d. The Healthy Families Act sets a national floor while allowing for state innovation

Finally, as a national law, the Healthy Families Act will set a critical floor while still allowing for continued innovation at the state and local level. The bill does not preempt more generous state and local paid sick time laws that provide greater benefits and protections for low-wage workers.

V. Why Alternative Approaches Don't Work for Working People and their Families

The Working Families Flexibility Act (H.R. 5656) was reintroduced this Congress and would purportedly help alleviate some of the challenges facing working families. However, the bill would only further erode critical labor protections working families need by allowing employers to offer compensatory time (comp time) in lieu of overtime when an employee is asked to work more than 40 hours in a week. And since employers have discretion over when

the worker can use the comp time, workers wouldn't have a guarantee they can use this comp time when the need arises—such as due to illness or to care for a sick loved one. This means that a single mother earning low wages who may rely on overtime to make ends meet may need to forego much-needed income and lose any additional flexibility if she can't use the comp time when she actually needs it.

Furthermore, Congress should reject any legislation that would preempt existing or future state and local paid sick day policies that meet or exceed the federal proposal. These innovations are critical to ensuring more workers, especially low-wage workers, are able to benefit from these laws.

VI. Conclusion

We shouldn't need a global pandemic to remind us about the critical importance of paid sick days. The lived experience and challenges faced by workers earning low wages already provide enough harrowing evidence that too many workers and their families suffer health and economic consequences without a national paid sick days law. Furthermore, the lack of a national paid sick days law negatively effects our public health infrastructure and economy. Reaching all workers—with adequate paid sick days that benefit workers, children, mothers, people with health challenges, and people of color—demands national action. While state and local paid sick day laws have been enormously important in covering workers and modeling successful approaches, a jurisdiction-by-jurisdiction strategy leaves out far too many workers, families, and communities who need help the most. We cannot achieve the health, developmental, and poverty-reduction benefits of paid sick days without a national program and standard. We know exactly what would work for our nation. The Healthy Families Act modeled on the successful lessons from states and localities across the country would create such a national standard. No worker should have to make such an impossible choice between a paycheck and their health or their loved one's health. We cannot afford as a nation to delay these solutions. Thank you again for the opportunity to testify today. I look forward to answering your questions.

¹ There are other local laws that have passed and helped pave the way for state laws but are not currently in effect. The city of Spokane, Washington amended its sick time law to sunset after Washington State passed its law. 13 New Jersey localities' paid sick days laws are now preempted by the statewide law.

² Number of workers in private industry and state and local government with access to paid sick leave calculated using data from the U.S. Bureau of Labor Statistics, National Compensation Survey: Employee Benefits in the United States – March 2019," (Table 6. "Selected paid leave benefits: Access, March 2019," using private industry data), https://www.bls.gov/news.release/pdf/ebs2.pdf.

³ "Table 31. Leave benefits: Access, private industry workers, March 2019," U.S. Bureau of Labor Statistics, National Compensation Survey: Employee Benefits in the United States – March 2019, https://www.bls.gov/ncs/ebs/benefits/2019/employee-benefits-in-the-united-states-march-2019.pdf.

⁴ Ibid.

⁵ Ibid.

⁶ "Table A-8. Employed Persons by Class of Worker and Part-Time Status," U.S. Bureau of Labor Statistics,

December 2019, <u>http://www.bls.gov/news.release/empsit.t08.htm</u> (using December 2019 seasonally adjusted data for persons working part time for economic reasons).

⁷ U.S. Bureau of Labor Statistics, Economic News Release, "Table 1. Workers with access to paid leave by selected characteristics, averages for the periods 2011 and 2017-2018,"

https://www.bls.gov/news.release/leave.t01.htm.

⁸ Ibid.

⁹ Wanda's Story," Family Values at Work. Personal Interview. 20 July 2012. https://familyvaluesatwork.org/story/wandas-story

¹⁰ Patricia Stoddard-Dare, LeaAnne DeRigne, Linda Quinn, and Christopher Mallett (2018, February). Paid Sick Leave Status in Relation to Government Sponsored Welfare Utilization. American Journal of Orthopsychiatry, <u>http://dx.doi.org/10.1037/ort0000318.</u>

¹¹ Zoe Ziliak Michel and Liz Ben-Ishai, *Good Jobs for All: Racial Inequities in Job Quality.* Center for Law and Social Policy, 2016, <u>https://www.clasp.org/publications/report/brief/good-jobs-all-racial-inequities-job-</u> <u>quality</u> (CLASP's report cites: Oxfam America, "Hard Work, Hard Lives: Survey Exposes Harsh Reality Faced By Low-Wage Workers in the U.S.," 2013, <u>http://www.oxfamamerica.org/static/media/files/low-wage-</u> <u>worker-report-oxfam-america.pdf</u>. The study didn't ask respondents about a specific length of illness, so it could have been lack of either paid sick days or paid family and medical leave that contributed to this job loss.)

¹² American Time Use Survey, U.S. Bureau of Labor Statistics, June 2019,

https://www.bls.gov/news.release/archives/atus_06192019.htm

¹³ Fact Sheet: "Paid Sick Days are Good for Business," National Partnership for Women and Families, 2020, <u>https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/paid-sick-days-good-for-business-and-workers.pdf</u>.

¹⁴ Pichler, Stefan and Ziebarth, Nicolas R., *The Pros and Cons of Sick Pay Schemes: Testing for Contagious Presenteeism and Shirking Behavior*, 2015, Upjohn Institute Working Paper No. 15-239, available at SSRN: https://ssrn.com/abstract=2689852 or http://dx.doi.org/10.2139/ssrn.2689852

¹⁵ Cited in Jessica Milli, Jenny Xia, and Jisun Min. *Paid Sick Days Benefit Employers, Workers, and the Economy*. Institute for Women's Policy Research, 2016, <u>https://iwpr.org/publications/paid-sick-days-benefit-employers-workers-and-the-economy/</u>.

¹⁶ Robert Drago and Kevin Miller, *Sick at Work: Infected Employees in the Workplace During the H1N1 Pandemic,* Institute for Women's Policy Research, 2010, <u>https://iwpr.org/publications/sick-at-work-infected-employees-in-the-workplace-during-the-h1n1-pandemic/</u>.

¹⁷ Centers for Disease Control and Prevention, "Foodborne Germs and Illnesses," 2019, https://www.cdc.gov/foodsafety/foodborne-germs.html.

¹⁸ Centers for Disease Control and Prevention, "Food Workers' Reasons for Working When Sick," 2019, <u>https://www.cdc.gov/nceh/ehs/ehsnet/plain language/food-workers-reasons-for-working-sick.htm.</u>

¹⁹ Aron J. Hall, Valerie G. Eisenbart, Amy Lehman Etingüe, L. Hannah Gould, Ben A. Lopman, and Umesh D. Parashar, *Epidemiology of Foodborne Norovirus Outbreaks, United States, 2001–2008*, Vol. 18, No. 10, October 2012, <u>https://wwwnc.cdc.gov/eid/article/18/10/12-0833_article</u>.

²⁰ C.S. Mott Children's Hospital, University of Michigan Department of Pediatrics and Communicable Diseases, and University of Michigan Child Health Evaluation and Research Unit, "Sick Kids, Struggling Parents" (2012), https://mottpoll.org/reports-surveys/sick-kids-struggling-parents.

²¹ Tanya Goldman and Pronita Gupta, *Why Low-Wage Workers Need the Healthy Families Act*, Center for Law and Social Policy, March 2020,

https://www.clasp.org/publications/fact-sheet/why-low-wage-workers-need-healthy-families-act. ²² A Health Impact Assessment of the Healthy Families Act of 2009: Maine Addendum – A Health Impact Assessment of Paid Sick Days in Maine, Human Impact Partners, 2009, <u>https://humanimpact.org/wp-content/uploads/2017/09/ME-Paid-Sick-Days-Addendum.pdf</u>.

²³ Liz Ben-Ishai, *Paid Leave Necessary for an Ounce of Prevention: Paid Leave Access to Preventative Health Care*. Center for Law and Social Policy, 2017, <u>https://www.clasp.org/publications/report/brief/paid-leave-necessary-ounce-prevention-paid-leave-and-access-preventive</u> (citing LeaAnne DeRigne, Patricia Stoddard-Dare, Cyleste Collins, and Linda Quinn, "Paid Sick Leave and Preventive Health Care Service Use among U.S. Working Adults," Preventive Medicine 99 (2017)).

²⁴ Ibid.

²⁵ Ibid.

²⁶ Ibid. (citing Fernando A. Wilson, Yang Wang, and Jim P. Stimpson, "The Role of Sick Leave in Increasing Breast Cancer Screening Among Female Employees in the U.S." Journal of Cancer Policy 2 (2014)).
 ²⁷ Ben-Ishai, *Paid Leave Necessary for an Ounce of Prevention*.

²⁸ Stoddard-Dare, P., DeRigne, L., Collins, C. C., Quinn, L. M., & Fuller, K. (2018). Paid sick leave and psychological distress: An analysis of U.S. workers. *American Journal of Orthopsychiatry, 88*(1), 1–9. <u>https://doi.org/10.1037/ort0000293</u>.

²⁹ Ben-Ishai, *Paid Leave Necessary for an Ounce of Prevention* (citing Fernando A. Wilson, Yang Wang, and Jim P. Stimpson, "Universal Paid Leave Increases Influenza Vaccinations Among Employees in the U.S.," *Vaccine* 32 (2014)).

³⁰ Paid Sick Days are Essential for Public Health, A Better Balance, Feb 2020,

https://www.abetterbalance.org/resources/fact-sheet-paid-sick-days-are-essential-for-public-health/.

³¹ Heymann, Jody. S., Toomey, Sara; Furstenberg, Frank. 1999. "Working parents. What factors are involved in their ability to take time off from work when their children are sick?", in Archives of Pediatrics and Adolescent Medicine, Vol. 153, No. 8, pp. 870–874.

³²Abay Asfaw and Maria Colopy, "Association between Parental Access to Paid Sick Leave and Children's Access to and Use of Healthcare Services," American Journal of Industrial Medicine 60 (2017).

 ³³ Jeffrey O. Tom, Rita Mangione-Smith, David C. Grossman, et al., "Well-Child Care Visits and Risk of Ambulatory Care-Sensitive Hospitalizations," Archives of Pediatric and Adolescent Medicine 164 (2010).
 ³⁴ A Better Balance, Paid Sick Days are Essential for Public Health

³⁵ Momsrising member interview, March 6, 2020. Notes of e-mail on file with author.

³⁶ National Partnership for Women and Families, "The Time for Paid Sick Days Is Now: Survey Shows Overwhelming Public Support for a Paid Sick Days Workplace Standard," available at https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/the-time-for-

paid-sick-days.pdf.

³⁷ Ibid.

³⁸ Jack Craver, "Poll shows support for paid sick leave ordinance," Austin Monitor, Jan. 11, 2018, <u>https://www.austinmonitor.com/stories/2018/01/poll-shows-support-paid-sick-leave-ordinance/</u>.

³⁹ Eileen Appelbaum and Ruth Milkman, *No Big Deal: The Impact of New York City's Paid Sick Days Law on Employers*, Center for Economic and Policy Research, 2016, <u>https://cepr.net/report/no-big-deal-the-impact-of-new-york-city-s-paid-sick-days-law-on-employers/</u>.

⁴⁰ Some of these jurisdictions' laws are subject to ongoing litigation. For more information on state and local paid sick days laws, see <u>www.enforcingsickdays.org</u> and "Overview of Paid Sick Time Laws in the United States," A Better Balance, 2019, <u>https://www.abetterbalance.org/paid-sick-time-laws/?export</u> and "Paid Sick Days – State and District Statutes," National Partnership for Women and Families, 2019,

https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/paid-sick-daysstatutes.pdf.

⁴¹ There are other local laws that were passed and helped pave the way for state laws but are not currently in effect. The city of Spokane, Washington amended its sick time law to sunset after Washington State passed its law. 13 New Jersey localities' paid sick days laws are now preempted by the statewide law.

⁴² Austin's law is currently stayed pending litigation.

⁴³ San Antonio's law is currently enjoined

 ⁴⁴ U.S. Dep't of Labor Wage and Hour Division, Website on Executive Order 13706, Establishing Paid Sick Leave for Federal Contractors, <u>https://www.dol.gov/agencies/whd/government-contracts/sick-leave.</u>
 ⁴⁵ U.S. Dep't of Labor Wage and Hour Division Fact Sheet: Final Rule to Implement Executive Order 13706, Establishing Paid Sick Leave for Federal Contractors," available at

https://www.dol.gov/sites/dolgov/files/WHD/legacy/files/PaidLeaveFS.pdf.

⁴⁶ "Paid Sick Day Wins," Family Values @ Work, <u>http://familyvaluesatwork.org/graphics/fvaw-psd-wins.pdf.</u>

⁴⁷ These policies specifically include language, like the Healthy Families Act, about individuals related by blood or affinity whose close association with the employee is the equivalent of a family relationship. New York City's language is similarly inclusive and includes any other individual whose close association with the worker is the equivalent of a family relationship.

⁴⁸ Alison Earle, Jeff Hayes, S. Jody Heymann, and Anke Schliwen, *The administration and financing of paid sick leave*, Int'l Labour Review, 2011, available at <u>https://doi.org/10.1111/j.1564-913X.2011.00104.x</u>; Stefan Pichler and Nicolas R. Ziebarth, *Labor Market Effects of U.S. Sick Pay Mandates*, Journal of Human Resources, 2018, working paper available at <u>https://research.upjohn.org/up_workingpapers/293/</u>.

⁴⁹ Kevin Miller and Sarah Towne, *San Francisco Employment Growth Remains Stronger with Paid Sick Days Law Than Surrounding Counties*, 2011, <u>https://iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/C385.pdf</u>.

⁵⁰ Jennifer Romich with Wes Bignell, Tracy Brazg, Chantel Johnson, Cori Mar, Jennifer Morton, and Chiho Song, "Implementation and Early Outcomes of the City of Seattle Paid Sick and Safe Time Ordinance," 2014, <u>http://www.seattle.gov/Documents/Departments/CityAuditor/auditreports/PSSTOUWReportwAppendices.</u> <u>pdf</u>.

⁵¹ Yolanda Branche, *Audit of the Accrued Sick and Safe Leave Act of 2008*, Office of the District of Columbia Auditor, 2013, <u>http://zd4l62ki6k620lqb52h9ldm1.wpengine.netdna-cdn.com/wp-content/uploads/2019/02/DCA092013.pdf</u>.

⁵² Kimberly McKee and Jessica Milli, *Valuing Good Health in Massachusetts: The Costs and Benefits of Earned Sick Days*, IWPR, 2019, <u>https://iwpr.org/publications/paid-sick-days-massachusetts/</u>

⁵³ Jessica Milli, *Valuing Good Health in Austin, Texas: The Costs and Benefits of Earned Sick Days*, IWPR, 2018, <u>https://iwpr.org/publications/value-earned-sick-time-public-health-austin-texas/.</u>

⁵⁴ Daniel Schneider, *Paid Sick Leave in Washington State: Evidence on Employee Outcomes, 2016–2018*, Am. J. of Public Health, online publication available at

https://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.2019.305481.

⁵⁵ John Marotta and Solomon Greene. *Paid Sick Days: What Does Research Tell Us about the Effectiveness of Local Action?*. Urban Institute, January 2019,

https://www.urban.org/sites/default/files/publication/99648/paid_sick_days. what does the research_tell_us_about the effectiveness of local action 0.pdf.

⁵⁶ Stefan Pichler and Nicolas R. Ziebarth, "The Pros and Cons of Sick Pay Schemes," DIW Berlin (2015), https://www.diw.de/documents/publikationen/73/diw_01.c.514633.de/dp1509.pdf.

⁵⁷ Ben-Ishai, *Paid Leave Necessary for an Ounce of Prevention* (citing Stefan Pichler and Nicolas R. Ziebarth, "The Pros and Cons of Sick Pay Schemes: Testing for Contagious Presenteeism and Noncontagious

Absenteeism Behavior," National Bureau of Economic Research Working Papers Series (2016)). ⁵⁸ Robert Drago and Vicky Lovell, *San Francisco's Paid Sick Leave Ordinance: Outcomes for Employers and Employees*, Institute for Women's Policy Research, 2011, <u>https://iwpr.org/publications/san-franciscos-paid-sick-leave-ordinance-outcomes-for-employers-and-employees</u>/.

⁵⁹ Eileen Appelbaum and Ruth Milkman, "Good for Business? Connecticut's Paid Sick Leave Law," Center for Economic and Policy Research, 2014, <u>http://www.cepr.net/documents/good-for-buisness-2014-02-21.pdf</u> ⁶⁰ Drago and Lovell, *San Francisco's Paid Sick Leave Ordinance*; Romich et al., "Implementation and Early Outcomes of the City of Seattle Paid Sick and Safe Time Ordinance"; Appelbaum and Milkman, "Good for Business?"

⁶¹ Appelbaum and Milkman, "Good for Business?"

⁶² Liz Ben-Ishai, *Implementing Earned Sick Days Laws: Top Tips from Connecticut, San Francisco, Seattle and New York City*, CLASP, 2014, <u>https://www.clasp.org/publications/report/brief/implementing-earned-sick-days-laws-top-tips-connecticut-san-francisco</u>.

⁶³ Yolanda Branche, *Audit of the Accrued Sick and Safe Leave Act of 2008*, Office of the District of Columbia Auditor, 2013, <u>http://zd4l62ki6k620lqb52h9ldm1.wpengine.netdna-cdn.com/wp-</u>

content/uploads/2019/02/DCA092013.pdf

⁶⁴ Drago and Lovell, San Francisco's Paid Sick Leave Ordinance.

65 Appelbaum and Milkman, "Good for Business?"

⁶⁶ Jenny Xia, Jeffrey Hayes, Barbara Gault, and Hailey Nguyen, "Paid Sick Days Access and Usage Rates Vary by Race/Ethnicity, Occupation, and Earnings," Institute for Women's Policy Research, 2016,

https://iwpr.org/publications/paid-sick-days-access-and-usage-rates-vary-by-raceethnicity-occupation-andearnings/.

⁶⁷ Alison Earle, Jeff Hayes, S. Jody Heymann, and Anke Schliwen, *The administration and financing of paid sick leave*, Int'l Labour Review, 2011, <u>https://doi.org/10.1111/j.1564-913X.2011.00104.x</u>.

⁶⁸ Rebecca Ullrich, Patricia Cole, Barbara Gebhard, and Stephanie Schmit, *Paid Leave: A Critical Support for Infants, Toddlers, and Families*, CLASP and Zero to Three, 2017,

https://www.clasp.org/sites/default/files/publications/2017/10/Paid%20Leave%20FINAL%2010-17-17%20%282%29.pdf (citing American Academy of Pediatrics and Bright Futures, Recommendations for Preventive Pediatric Health Care, 2016 https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf.) ⁶⁹ Ullrich et al, *Paid Leave: A Critical Support*. ⁷⁰ Jennifer Romich with Wes Bignell, Tracy Brazg, Chantel Johnson, Cori Mar, Jennifer Morton, and Chiho Song, "Implementation and Early Outcomes of the City of Seattle Paid Sick and Safe Time Ordinance," 2014,

http://www.seattle.gov/Documents/Departments/CityAuditor/auditreports/PSSTOUWReportwAppendices.pdf

⁷¹ World Health Organization, "Violence Against Women, Key Facts," 2017, <u>https://www.who.int/en/news-room/fact-sheets/detail/violence-against-women</u>

⁷² "Fact Sheet: Survivors of Intimate Partner Violence Need Paid Safe Days," National Partnership for Women and Families and National Resource Center on Domestic Violence, 2019,

https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/survivors-ofdomestic-and-sexual-violence-need-paid-safe-days.pdf

⁷³ "Domestic Violence and Sexual Assault Factsheet," National Network to End Domestic Violence, <u>https://nnedv.org/mdocs-posts/domestic-violence-and-sexual-assault-factsheet/</u>

⁷³ https://thinkprogress.org/woman-says-she-was-fired-for-getting-beat-up-by-her-boyfriend-shes-notalone-89aa78b8f28/

⁷⁴ Bryce Covert, "Woman Says She Was Fired for Getting Beat Up By Her Boyfriend. She's Not Alone," ThinkProgress, Oct. 24, 2015, <u>https://thinkprogress.org/woman-says-she-was-fired-for-getting-beat-up-by-her-boyfriend-shes-not-alone-89aa78b8f28/</u>.

⁷⁵ U.S. GAO, "Domestic Violence: Prevalence and Implications for Employment Among Welfare Recipients," 1998, <u>https://www.gao.gov/assets/230/226642.pdf</u>

⁷⁶ FV@W Storybank -- <u>https://familyvaluesatwork.org/story/kaila-time-for-healing-from-domestic-violence</u>
 ⁷⁷ "Fact Sheet: Survivors of Intimate Partner Violence Need Paid Safe Days."

⁷⁸ Tanya Goldman, Addressing and Preventing Retaliation and Immigration-Based Threats to Workers, CLASP and Rutgers, 2019,

https://www.clasp.org/sites/default/files/publications/2019/04/2019 addressingandpreventingretaliation. pdf.