February 10, 2020

The Honorable Alma S. Adams
Chair
Workforce Protections Subcommittee
Committee on Education and Labor
U.S. House of Representatives
Washington, DC 20515

The Honorable Bradley Byrne
Ranking Member
Workforce Protections Subcommittee
Committee on Education and Labor
U.S. House of Representatives
Washington, DC 20515

RE: Hearing on “Balancing Work, Health, and Family: The Case for Expanding the Family and Medical Leave Act”

Dear Chair Adams and Ranking Member Byrne:

On behalf of The Leadership Conference on Civil and Human Rights, a coalition charged by its diverse membership of more than 220 national organizations to promote and protect the rights of all persons in the United States, we thank you for the opportunity to submit our views regarding family and medical leave and ask that this statement be entered into the record of the Subcommittee hearing entitled, “Balancing Work, Health, and Family: The Case for Expanding the Family and Medical Leave Act,” scheduled for Tuesday, February 11, 2020.

Twenty-seven years ago, this country took its first step toward helping individuals meet the dual demands of work and family with the enactment of the Family and Medical Leave Act (FMLA), which provides eligible workers with up to 12 weeks of job-protected, unpaid leave in a year to care for themselves, a new child, or a seriously ill family member. While an important first step, the FMLA left behind more than six in ten working people, either because of eligibility restrictions or because they cannot afford to take unpaid leave.¹

Working people across the country deserve a family and medical leave policy that protects the well-being and economic security of all families. **We urge this Subcommittee consider expanding the FMLA by supporting the Family and**

Medical Insurance Leave (FAMILY) Act (H.R. 1185) and the Family Medical Leave Modernization Act (H.R. 5456).

Everyone needs dedicated time off to welcome a new child or to care for themselves or a loved one with a serious illness, but too many families across this country are forced to make an impossible choice between providing for their families’ well-being and making ends meet. More than 80 percent of working people do not have paid family leave through their jobs, and 60 percent lack access to paid personal medical leave through their employer. Working people in the low-wage workforce, those who are the most economically vulnerable, have the least access to paid leave benefits, and people of color have limited access to any meaningful leave benefits, paid or unpaid. 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.

Lack of paid leave makes it difficult, if not impossible, for many people to care for themselves or to provide care to family members at crucial moments in their lives. The FAMILY Act would create a national family and medical leave insurance program to help ensure that working people can afford to take the time they need to address serious health and caregiving needs.

The FAMILY Act would:

- Provide workers with up to 12 weeks of paid time off 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;
- Enable workers to earn two-thirds of their monthly wages, up to a cap, while on leave;
- Cover workers in all companies, no matter their size, and make part-time, low-wage, contingent, and self-employed workers eligible for benefits; and
- Be funded through payroll contributions of two-tenths of one percent each (two cents per $10 in wages) from employee, employer, and self-employed workers, which would fund both insurance benefits and the administrative costs of a new Office of Paid Family and Medical Leave.

The health benefits of paid family and medical leave for new parents are clear. New mothers who take paid leave are more likely to breastfeed, and their children are more likely to receive

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4 Joshi et al., supra note 1.
medical check-ups and recommended immunizations. Families, however, need paid family and medical leave for a wide range of caregiving in addition to parental leave.

More than 75 percent of people who take unpaid FMLA leave each year do so for reasons other than maternity or paternity care. The most common reason workers use FMLA benefits is to care for themselves during their own illness (55 percent), and almost one-fifth of employees take leave to care for a spouse, parent, or child. Changing demographics also suggest that in the coming years, more adults will need elder care even as the number of potential family caregivers will shrink. Most caregivers are also employed at full-time jobs outside of the home and rely on that income to make ends meet. Paid leave allows people to support themselves and their families financially while also allowing them to support family members with serious health conditions, helping them fulfill treatment plans, manage their care, and avoid complications; and for children who are seriously ill, parental involvement in a child’s hospital care may speed recovery, prevent future health problems, and reduce costs. Given the reality of caregiving, it is imperative that Congress support the FAMILY Act, which provides a comprehensive paid leave plan that is inclusive of all forms of caregiving.

The FAMILY Act also provides meaningful, real-time wage replacement for individuals who need to take time away from their jobs. Working families lose an estimated $20.6 billion in wages each year due to a lack of access to paid family and medical leave. Families need a paid leave system that will provide replacement wages, not a system that offers a Child Tax Credit (CTC) loan followed by reduced CTC payments. This plan, the Advancing Support for Working Families Act (H.R. 5296), which would only be available to new parents, would leave out millions of people who need paid time off to care for themselves or a family member, would not guarantee job-protected leave for workers who are ineligible for FMLA, and would result in a $500 CTC penalty for families every year for ten years.

Similarly, a paid leave plan like the New Parents Act (H.R. 1940), which forces new parents to accept lifetime cuts in Social Security benefits in exchange for paid time off, does not meet the economic and caregiving needs of families. Social security cuts would also harm low-wage

7 Id.
11 Id.
workers, women, and people of color who are most likely to need paid leave and most likely to rely on Social Security benefits during retirement. By contrast, the FAMILY Act would cut by nearly 75 percent the share of families who fall into poverty after taking unpaid FMLA leave, promoting long-term economic security.

Not only must a plan include all forms of caregiving—not just parental leave—it must also cover all families. Currently, FMLA is only available to individuals providing care to a spouse, parent, minor child, or child with a disability. This narrow definition of family fails to recognize the family bonds of around 85 million people who live in either multigenerational households (defined as including two or more adult generations or including grandparents and grandchildren) or in extended families (defined to include multigenerational families as well as individuals living with their own adult siblings or other relatives of the same generation). In 2016, about 20 percent of the U.S. population lived with multiple generations, and though multigenerational living is growing across racial groups, Asian, Hispanic, and Black families are more likely than whites to live in multigenerational households. For these communities, and especially for women of color who provide the lion’s share of caregiving, access to paid leave to care for a broader range of family members is critical.

Women of color still experience pernicious wage gaps that threaten their economic security. Black women, for example, are paid just 62 cents for every dollar paid to a white man. Latina women are paid only 55 cents, and some Asian American and Pacific Islander women are paid as low as 50 cents for every dollar paid to a white man. These inequities together with structural racism in voting, housing, employment, health care, education, and access to capital, have resulted in racial wealth gaps that make it more difficult for women of color to financially withstand a serious family or medical event. Paid leave does not resolve these underlying issues, but it will help women of color make ends meet when they must address serious health and caregiving needs and potentially mitigate the particular harm women of color face as a result of compounded racial and gender inequities.

The Family Medical Leave Modernization Act would honor all types of families while promoting racial and gender equity. This bill would expand the definition of “family” under the FMLA to include: domestic partners, grandchildren, grandparents, nephews, nieces, parents-in-law, siblings, sons- and daughters-in-law, uncles, aunts, adult children, children of a domestic partner, and any other individual related by blood or affinity, a designation that is especially

12 Id.
important for LGBT individuals and people with disabilities who are more likely to take time off to care for “chosen family.” This change would also apply to the definition of “family” in the FAMILY Act.

Caregiving trends also support the need for the Family Medical Leave Modernization Act to meet the current and future needs of working families. Millennial family caregivers, those ages 18-34, are more racially and ethnically diverse than older generations of caregivers. More than half are Hispanic/Latino, African-American/Black, or Asian American/Pacific Islander. Millennial family caregivers are also more likely to identify as LGBT. Unsurprisingly, given the rise of extended family households within these communities, millennial family caregivers are providing care to a wide range of family members, including grandparents (22 percent of caregiving), siblings, parents-in-law, and other relatives. These caregivers are also the most likely of any generation to be employed—and more than half work full-time—but around one in three millennial family caregivers has an annual income of less than $30,000. With an expanded definition of “family,” and access to paid leave, this group of young caregivers would have increased opportunity to maintain or achieve economic security while maintaining the dignity and well-being of their families.

All working people in America deserve the opportunity to care for themselves and their families without jeopardizing their economic security. The FAMILY Act, together with the Family Medical Leave Modernization Act, would create a national family and medical insurance program that recognizes within a diversity of families the range of family caregiving responsibilities that people face and provides the support families need to be able to meet those responsibilities. Please contact Gaylynn Burroughs, Senior Policy Counsel, at burroughs@civilrights.org or (202) 466-3311, with any questions.

Sincerely,

Vanita Gupta
President & CEO

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18 Id.

19 Id.

20 Id.