



TESTIMONY IN SUPPORT OF HB 8: THE TIME TO CARE ACT OF 2022

Submitted to the House Economic Matters Committee
February 15, 2022

FAVORABLE

Dear House Economic Matters Committee Members:

We are pleased to provide this testimony in support of HB 8 and to discuss the importance of paid family and medical leave insurance for Marylanders. Now, more than ever, it is imperative that Maryland create a robust paid leave program to benefit its working people, businesses, economy, and the public health.

We are the National Partnership for Women & Families, a nonprofit, nonpartisan advocacy organization striving to improve the lives of women and families by achieving equity for all women. We promote 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 their jobs and families. We work toward creating a society that is free, fair and just, where nobody has to experience discrimination, all workplaces are family friendly, and every family has access to quality, affordable health care and real economic security. In our organization's fifty-first year, we continue to fight for equity, building a more just world for women and families of color.

At the center of our work is addressing the paid leave crisis, which the National Partnership has been working to solve for decades. Almost all Marylanders will, during their working lives, need to take time away from work to care for themselves or a loved one. But nationwide, only 23 percent of workers have access to paid family leave through their employers, and only 40 percent have access to personal medical leave through employer-provided short-term disability insurance.¹ Without the ability to receive income, many workers must forgo taking leave or put their economic stability in jeopardy to care for a family member, a new child or their own health.

We are pleased the Committee is considering HB 8, a solution that would provide Maryland workers with access to paid family and medical leave. Our support for paid leave is based on our understanding of the problems that workers, families, businesses and communities face when people do not have access to paid leave; the experiences of other states that have adopted paid leave programs; and a growing body of evidence showing the benefits of paid leave. It is time to adopt a statewide solution: a paid family and medical leave insurance program.

I. The People of Maryland Have an Urgent Need for Paid Leave

The need for time to care is universal, and the cost of inaction is high. Nearly every worker in Maryland will someday welcome a new child, deal with their own serious health issue or need to provide care to a seriously ill, injured or disabled loved one. Yet, the vast majority of people still do not have the security they need to take time away from their jobs.² In Maryland, even unpaid leave under the federal Family and Medical Leave Act is inaccessible for 56 percent of working people.³ The lack of paid leave costs the United States \$22.6 billion each year in lost wages alone.⁴ Our economy loses an estimated more than \$650 billion in GDP each year because women's labor force participation is depressed by a lack of family-supportive policies.⁵

The coronavirus pandemic has only exacerbated this issue, particularly in its long-term consequences on Marylanders' health, caregiving needs and economic stability. Women, especially women of color, were hit hardest by pandemic closures of schools and workplaces because they work in many of the most-affected industries and bear the brunt of caregiving responsibilities.⁶ More than 600,000 Marylanders (a disproportionate 42 percent of whom are Black) work in frontline industries, facing heightened risks of exposure and challenges managing family caregiving needs.⁷ Nearly a million Marylanders have contracted COVID-19,⁸ up to one-quarter of whom experienced or will experience long-term symptoms, often requiring care from a loved one or preventing them from being able to work for an extended period.⁹

Even without a pandemic, Marylanders have a real, pressing and measurable need for a state paid leave program. Each year, Maryland welcomes around 70,000 newborns.¹⁰ In 77 percent of households with children in Maryland, all parents are working paying jobs.¹¹ Largely, these households depend on women's wages: In Maryland, 76 percent of Black mothers, 48 percent of white mothers, 45 percent of Latina mothers and 47 percent of AAPI mothers are key family breadwinners.¹² Without paid leave, many new parents – most often women – exit the workforce and lose their much-needed incomes. This not only deprives families of income at a time when they need it most; it increases turnover for employers, hurts the economy, and contributes to the 12-percentage point gap in labor force participation between men and women.¹³

Despite dramatic increases in women's workforce participation and contributions as family breadwinners, women are still typically the primary caregivers for children from birth through childhood – as well as for adult family members requiring care or assistance.¹⁴ And although men are increasingly interested in, and taking on, more family caregiving¹⁵ – whether it be for young children or aging parents – too many workplaces have failed to adjust their policies to reflect this reality.¹⁶ Those men who want to play a larger role in caring for their children are held back by unsupportive policies and stigma.¹⁷

Looking towards the future, Maryland families are facing an increasing crisis in care needs. Right now, a quarter of Maryland workers are age 55 or older while the share of the population age 65 and older will grow by more than ten percent over the next 20 years.¹⁸ These older and aging workers are more likely to face serious medical

conditions or elder caregiving responsibilities than other workers.¹⁹ As the state's caregiving needs continue to grow, a paid family and medical leave insurance program becomes only a more-urgent solution.

Right now, whether a worker has access to paid leave is largely a function of where they work and what kind of job they have. Such voluntary benefits leave out the most economically vulnerable workers, whose personal and family care needs are no less urgent than anyone else's.²⁰ Reliance on the private sector has not been enough to help families meet the dual demands of work and family. In addition, without a statewide program, small businesses are at a considerable disadvantage as compared to larger, national corporations with the resources to support their own paid leave policies. A universal paid leave program in Maryland would help small businesses compete, an experience highlighted by employer surveys in California.²¹ Furthermore, surveys of small employers in California and New Jersey found that their support for those states' paid leave programs increased during the pandemic – especially among employers who had had an employee take leave.²²

Maryland's economic recovery will continue to lag, especially for women, as long as workers do not have the protections they need for their health and family caregiving needs. A statewide paid family and medical leave insurance program covering all working people is essential to help women, people of color, and people with serious health conditions and disabilities (including long-haul COVID) return to the workforce and to create a more equitable economy in which all people can thrive. It is also the solution that will let Maryland's families, businesses, economy and public health thrive into the future.

II. Other State Programs Demonstrate the Success of Paid Leave Laws

To date, ten states, including D.C., have enacted comprehensive paid family and medical leave insurance programs.²³ Eight state programs are currently up and running.²⁴ Evidence shows these programs have tremendous benefits for workers, small businesses, families and public health.²⁵ They can also respond quickly and nimbly to adjust benefits during a public health emergency or adverse economic conditions.²⁶ Valuable information on the efficacy of state paid leave programs comes largely from the three oldest, in California (2004), New Jersey (2009) and Rhode Island (2014).

In California, the vast majority of employers report seeing a positive effect or no effect at all on employee productivity, profitability and performance²⁷ – and smaller businesses were less likely than larger businesses to report negative effects.²⁸ Even the Society for Human Resource Management, one of the chief opponents of paid family leave before it was passed in California, issued a report finding that the law had created “relatively few” new burdens for employers and that employers' concerns “have so far not been realized.”²⁹ In October 2015, *Bloomberg News* reported on the business impacts of paid leave in an article entitled, *California Shows How Paid-Leave Law Affects Businesses: Not Much*, and noted that “California's employment growth outpaced the U.S. average by 2 percentage points” over the previous decade.³⁰ California lawmakers have expanded the program to broaden the range of family members for whom caregiving leave can be taken,³¹ to increase

benefit levels for lower- and middle-wage workers,³² to increase the duration of leave³³ and eliminate a waiting period for benefits.³⁴

In New Jersey, three out of four voters viewed the program favorably several years after implementation.³⁵ In a report prepared on behalf of the New Jersey Business and Industry Association, the majority of both small and large businesses said they adjusted easily to the law and experienced no effects on business profitability, performance or employee productivity.³⁶ After witnessing the success of the program, New Jersey's legislature increased benefit payments, doubled the duration of family leave, expanded access to job protection, defined "family" to be more inclusive, created a sliding scale for wage replacement to ensure individuals with low incomes can afford to take leave, and provided safe leave coverage for survivors of domestic and sexual violence.³⁷

In Rhode Island, business supporters were critically important in passing the law, and early research found that businesses in key industries had adjusted easily. A study of small- and medium-sized food service and manufacturing employers in Rhode Island by researchers at Columbia Business School found no negative effects on employee workflow, productivity or attendance.³⁸ Sixty-one percent of employers supported the law.³⁹ Trying to grow this success, Rhode Island lawmakers recently began extending the duration of paid leave.

Other states have followed suit: Connecticut, D.C., Massachusetts, New York and Washington have all implemented their paid leave programs, while Colorado and Oregon will begin providing benefits in 2023 and 2024, respectively.⁴⁰ Perhaps the clearest sign of how well these programs work is that none of the states have eliminated or even cut back on their programs. On the contrary, state after state has seen the success of their program and then doubled down by expanding access, increasing benefits and extending the duration of leave.⁴¹

III. Paid Family and Medical Leave Offers Clear Benefits for Families and Businesses

Available research, including analyses of the state paid family leave programs in California, New Jersey and Rhode Island; data about the experiences of people who work for employers that offer paid leave; and analyses of paid leave in other countries, demonstrates the clear benefits of paid leave for families, businesses and government.

A. Paid Leave Creates Greater Economic Security and Financial Independence for Working Families

Guaranteeing workers access to paid leave improves families' economic security and supports financial independence in the face of major life events. Paid leave promotes workforce attachment: Mothers who take paid leave are more likely than mothers who do not to be working nine to 12 months after a child's birth.⁴² They are also more likely to receive higher wages over time. In the year after the birth of a child, mothers who take paid leave are 54 percent more likely to report wage increases than mothers who take no leave, and are nearly 40 percent less likely to participate in public assistance, taking into account other socioeconomic and workplace factors

that might explain these differences.⁴³ When fathers take paid leave, they too are significantly less likely to participate in public assistance than fathers who do not.⁴⁴ Paid leave has also been shown to reduce household food insecurity⁴⁵ and the likelihood of new mothers being in poverty after a birth.⁴⁶

Family caregivers of older adults also need paid leave to continue working: Of elder caregivers who leave the workforce, half (52 percent) said they did so because their jobs did not allow the flexibility they needed to work and provide care.⁴⁷ Paid leave increases the labor force participation of family caregivers.⁴⁸ And helping older workers stay employed has real implications for their retirement security: A woman who is 50 years of age or older who leaves the workforce to care for a parent will lose more than \$400,000 in wages and retirement income.⁴⁹ For men, the figure is substantial as well – close to \$375,000 in lost wages and retirement income.⁵⁰

State paid leave programs also help address the maternal health crisis, which particularly affects Black and Native American women. The rates of preterm births and low birthweights fell, particularly among Black women, when Temporary Disability Insurance programs in California, New Jersey, New York and Rhode Island began providing benefits for pregnancy-related disability and childbirth recovery in 1978.⁵¹ Paid leave programs have increased parity in the duration of maternity leave taken between white women and women of color.⁵² Paid leave programs improve the physical and mental health of new mothers, with the strongest effects for single mothers and mothers with low incomes, who are disproportionately women of color.⁵³

B. Paid Leave Promotes Better Health and Well-Being for Working Families

When people have time to care for themselves and their loved ones without jeopardizing their ability to make ends meet, their health and well-being improve. For example, paid leave significantly increases the benefits to new parents and babies, giving them the needed time to breastfeed, which improves babies' immune systems and reduces risk of breast and ovarian cancer, diabetes, and obesity for the mother. Newborns whose mothers take at least 12 weeks of paid leave are more likely to be breastfed and to receive medical checkups and critical immunizations.⁵⁴ Less than eight weeks of paid leave is linked to a reduction in overall health status and increased depression.⁵⁵ Every additional week of paid leave a mother takes reduces the likelihood of reporting poor mental well-being by 2 percent.⁵⁶ Compared with mothers who were only able to take unpaid leave or no leave at all, mothers who took paid leave had their chances of being re-hospitalized reduced by more than half (51 percent); had the likelihood of their infants being re-hospitalized in the first year reduced by almost half (47 percent); and were almost twice as likely to have more success in managing stress and engaging in regular exercise.⁵⁷ For low-income families in New Jersey, new mothers who use the paid leave program breastfeed, on average, one month longer than new mothers who do not use the program.⁵⁸ Additionally, neonatal mortality is reduced when parents have access to paid leave.⁵⁹ A review of international research concludes that there are also benefits for maternal health when fathers take paid leave, including a reduction in maternal illness and depression and an increase in well-being.⁶⁰ Finally, enabling working parents to care for and bond with a new baby also lays the foundation for healthy

child development. Children who form strong emotional bonds or “attachment” with their parents are more likely to do well in school and have positive relationships with others.⁶¹

The benefits go beyond parental leave: State paid leave programs have allowed people with health conditions to maintain their incomes and jobs while enabling them to seek timely treatment and rest.⁶² They support elder care⁶³ and keep family caregivers in the labor force⁶⁴, including after a health shock.⁶⁵ State paid leave programs also reduce nursing home utilization⁶⁶ – a vital need given that a high share of COVID-19 deaths have been connected to nursing homes and long-term care facilities,⁶⁷ and deaths have been higher in facilities with a higher percentage of residents of color.⁶⁸

The health benefits of paid leave not only contribute to the well-being of workers and their families, but also accrue to our health care system. In fact, a national paid leave program would save an estimated \$62.4 billion related to reduced low-birthweight births, infant hospitalizations, child ear infections and ADHD prevention, postpartum depression, food insecurity and elder nursing home use.⁶⁹

State paid leave programs provide workers with time to better equip themselves to care for their families and to find outside child care. Eighty-seven percent of Californians in lower-quality jobs who took paid leave through the state program reported a positive effect on their ability to care for their child or ill family member, compared with 72 percent who did not use it. In addition, 70 percent of California parents in lower-quality jobs who used state paid leave reported a positive effect on their ability to arrange child care, compared to just 58 percent of those who did not use it.⁷⁰ In Rhode Island, a study also found that parents who use the state paid leave program are much more likely than those who do not to report that leave has a positive effect on their ability to care for their new children and arrange child care.⁷¹

State paid leave programs also have important benefits when family members are sick. When infants and children are critically ill, the presence of a parent shortens a child’s hospital stay by 31 percent.⁷² Active parental involvement in a child’s hospital care may help avoid future health care needs and reduce costs.⁷³ Similarly, family caregivers with paid leave who care for an elderly loved one are better able to help loved ones recover from illness, fulfill treatment plans, and avoid complications and hospital readmissions, which can help lower health care costs and improve health outcomes.⁷⁴ Family caregivers themselves are also better able to care for themselves when workplace policies anticipate and are responsive to their needs.⁷⁵

C. Paid Leave Benefits Businesses

Businesses experience cost savings as well as enhanced employee engagement, productivity and morale when workers can take paid leave to address family and medical needs. First-time mothers who take paid maternity leave are more likely than mothers who do not to return to work – and to return to work for the same employer – after taking time to recover and care for their children.⁷⁶ Workers who are dealing with personal health issues or caring for a loved one are better able to stay employed when they have paid leave and other family friendly policies.⁷⁷

One key benefit of paid leave is that it helps businesses retain workers and avoid the high costs of employee turnover. Across all occupations, median turnover costs are estimated to be 21 percent of workers' annual wages, and even in middle- and lower-wage jobs, turnover costs are estimated to be 16 to 20 percent of workers' annual wages.⁷⁸ For high-wage, high-skilled workers in fields including technology, accounting and law, turnover costs can amount to 213 percent of workers' salaries.⁷⁹ Direct costs associated with turnover include separation costs, higher unemployment insurance, costs associated with temporary staffing, costs associated with searching for and interviewing new workers and training costs for new workers;⁸⁰ indirect costs can arise from lost productivity leading up to and after employee separations, diminished output as new workers ramp up, reduced morale and lost institutional knowledge.⁸¹

Paid leave's effect on retention is borne out in data collected from state paid leave programs. Surveys conducted with California employers and employees several years after the state paid leave program was implemented show that nearly 89 percent of workers in "low-quality" jobs (those that paid less than \$20 per hour or did not provide health insurance) reported returning to their employers after taking paid family leave, an eight-point improvement in retention compared to workers in low-quality jobs who did not take it.⁸² Similarly, low-income workers in New Jersey found who use the paid leave program report returning to the same employer at a higher rate than workers who do not use the program.⁸³

State paid leave programs seem to offer few downsides to employers. As mentioned previously, nearly 89 percent or more of California employers that were surveyed either reported positive effects or no effects at all on profitability, performance and morale.⁸⁴ New Jersey employers interviewed as part of a study about that state's paid family leave insurance program noted that paid leave helped reduce stress and improve morale among workers taking leave, as well as among their co-workers.⁸⁵ The majority of both small and large businesses in New Jersey say they have adjusted easily to the law and experienced no effects on business profitability, performance or employee productivity.⁸⁶ Small and mid-size employers in New York reported greater ease managing worker absences after the paid family leave program was implemented, and no negative impact on employee performance.⁸⁷

Prominent businesses are recognizing the benefits of paid leave. In a study by the Boston Consulting Group of 250 employer paid leave policies, researchers found that paid leave policies helped companies increase employee retention, reduce turnover costs, and facilitate diversity in leadership. For example, Google, Accenture, and Aetna reported that after they expanded their paid leave policies their attrition rate of female employees after the birth or adoption of new child declined significantly. Google experienced a decrease in turnover of female employees by 50 percent; at Accenture, female attrition decreased by 40 percent; and Aetna reported that the percentage of women who returned to work increased from 77 percent to 91 percent.⁸⁸

D. Paid Leave Impacts Government Revenues and Spending

Paid leave is a wise public investment. When people with caregiving responsibilities are able to remain in the workforce and earn higher wages, they can better support themselves and their families, save for the future and contribute to their local economy by paying for goods and services, which helps stimulate the economy and broaden the tax base. Guaranteeing paid leave to more workers would also likely lead to reductions in government spending. As noted earlier, an analysis of states with paid leave programs found that women and men in those states with paid leave programs are less likely to receive public assistance following a child's birth, particularly when they use their state paid leave program.⁸⁹

IV. Best Practices for an Inclusive, Equitable Maryland Paid Leave Program

Decades of research on state paid leave programs and the Family and Medical Leave Act (FMLA) show that a paid leave program must meet certain basic standards to be workable, affordable and meet its potential to advance gender and racial equity, support public health, and improve the economy.

Comprehensive coverage. Paid leave must cover the range of common health and caregiving needs that people experience, such as those identified in the FMLA. More than half (52 percent) of the individuals who take leave under the FMLA do so for personal medical care, with 21 percent taking leave to care for a new child and 23 percent taking leave to care for a family member, including for military exigency leave.⁹⁰ A Maryland program should cover all workers, including those working part-time, holding multiple jobs or working in the gig economy, and provide an inclusive eligibility standard so that recent entrants to the workforce or those who recently experienced unemployment are not disadvantaged.

Adequate duration. A Maryland program should provide adequate leave – at least 12 weeks – for all purposes, aligning with public health recommendations for child bonding and birth recovery and a meaningful amount for most workers' health needs.⁹¹ Data from state programs show that the majority of leaves (about three-quarters) are 12 weeks or less, although some state programs cover much longer leaves for workers' own health conditions – up to 26 weeks in New Jersey, New York and Massachusetts; 30 weeks in Rhode Island; and as many as 52 weeks in California – while remaining affordable for employers and employees and manageable for businesses.⁹² For comparison, among 38 Organization for Economic Co-operation and Development (OECD) countries, the median amount of fully-paid leave available to mothers is over five months. Longer paid leave is associated with a range of positive physical and mental health effects for families and children, as well as improved early child development.

Progressive wage replacement rate. Evidence from state programs shows that a too-low wage replacement rate is not adequate for the lowest income workers to be able to afford to take leave, disproportionately affecting workers of color,⁹³ and may prevent the program from fulfilling its potential to advance gender equity.⁹⁴ New and updated state laws have adopted progressive rates, replacing between 80 and 100 percent of wages up to a certain threshold to ensure low-income workers can take

leave, and a smaller share of wages above that point and a high enough weekly cap that leave remains accessible to middle-income workers as well.

Inclusive family definition. A Maryland program should define “family” inclusively to reflect the reality of this diverse state. More than 80 percent of households do not fit the so-called nuclear family model (a married couple living together with minor children).⁹⁵ For example, one in five people live in a multigenerational household, and people of color are especially likely to do so.⁹⁶ And, whether due to small family size, living a great distance from relatives, or even divorce or estrangement from a birth family, many adults – in fact, nearly one-third of people in the United States – report having needed to care for a friend, neighbor or other person who do not have a legal tie.⁹⁷ Coverage for these “chosen family” members – included in Colorado, Connecticut, New Jersey, Oregon and Washington – is particularly important for LGBTQ people, people with disabilities,⁹⁸ and servicemembers and veterans: around 15 percent of caregivers for pre-9/11 veterans and nearly one-quarter of post-9/11 servicemembers and veterans are friends or neighbors.⁹⁹

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The National Partnership for Women & Families applauds the Committee’s consideration of a paid family and medical leave insurance program. Maryland needs paid leave to promote gender and racial equity, help working families achieve financial security, and strengthen small and large businesses and the economy. A state paid leave program will provide families financial security and peace of mind at some of the most challenging moments in life, making the largest impacts on the families currently struggling the most. It will enable more women to remain in the workforce, allow parents to invest more time and care in their children, and help older Marylanders to age with dignity and support from their loved ones. Working Marylanders cannot afford to wait.

Thank you for your consideration, and we look forward to continuing to work with you to assure all Maryland workers have access to paid family and medical leave. If you have any questions regarding this testimony, please contact Jacob McDonald, Policy Counsel (jmcdonald@nationalpartnership.org) at the National Partnership for Women & Families at 202-238-4861.

1 U.S. Bureau of Labor Statistics. (2021, September). *National Compensation Survey: Employee Benefits in the United States, March 2021* (Tables 17 and 33). Retrieved 26 January 2022, from <https://www.bls.gov/ncs/ebs/benefits/2021/employee-benefits-in-the-united-states-march-2021.pdf>

2 Ibid.

3 diversitydatakids.org. (2020). *Working adults who are eligible and can afford FMLA unpaid leave (percent) by race/ethnicity*. Retrieved 26 January 2022 from Brandeis University, The Heller School, Institute for Child, Youth and Family Policy website https://data.diversitydatakids.org/dataset/fmla_a_eligaff_re_p-working-adults-who-are-eligible-and-can-afford-fmla-unpaid-leave-percent-by-ra; Workers are considered unable to take unpaid FMLA leave because they are either ineligible based on employer size or job tenure requirements or because 32.3 days of lost wages from unpaid leave, the average length of an FMLA leave, would result in their family income dropping to or below 200 percent of the federal poverty level.

4 Glynn, S. J. (2020, January 21). *The Rising Cost of Inaction on Work-Family Policies*. Retrieved 26 January 2022, from Center for American Progress website: <https://www.americanprogress.org/issues/women/news/2020/01/21/479555/rising-cost-inaction-work-family-policies/>

5 Novello, A. (2021, July). The Cost of Inaction: How a Lack of Family Care Policies Burdens the U.S. Economy and Families. Retrieved 22 January 2022, from National Partnership for Women & Families website: <https://www.nationalpartnership.org/our-work/resources/economic-justice/other/cost-of-inaction-lack-of-family-care-burdens-families.pdf>

6 Mason, C. N., Flynn, A., & Sun, S. (2020). *Build(ing) the Future: Bold Policies for a Gender Equitable Recovery*. Retrieved 26 January 2022, from Institute for Women's Policy Research website: <https://iwpr.org/iwpr-issues/esme/building-the-future-bold-policies-for-a-gender-equitable-recovery/>; Mason, J. & Molina Acosta, P. (2021 March). *Called to Care*. Retrieved 26 January 2022 from <https://www.nationalpartnership.org/our-work/economic-justice/reports/called-to-care-a-racially-just-demands-paid-family-and-medical-leave.html>

7 Rho, H. J., Brown, H., & Fremstad, S. (2020, April). *A Basic Demographic Profile of Workers in Frontline Industries*. Retrieved 26 January 2022, from Center for Economic and Policy Research website: <https://cepr.net/a-basic-demographic-profile-of-workers-in-frontline-industries/>

8 Washington Post. (n.d.) *Coronavirus: Case and death counts by place*. Retrieved 20 January 2022, from https://www.washingtonpost.com/graphics/2020/national/coronavirus-us-cases-deaths/?itid=sn_coronavirus_2/. Data reflects cumulative reported cases by state through January 26, 2022.

9 Scientific understanding of this new disease is still developing and estimates vary of the incidence of lasting health effects of COVID-19. Recent estimates indicate as many as one in four people with COVID-19 have symptoms more than two months after the onset of illness, including those whose COVID-19 was initially mild. Longue, J. K., Ranko, N. M., McCulloch, D. J., et al. (2021, February). Sequelae in Adults at 6 Months After COVID-19 Infection. *JAMA Network Open*, 4(2): e210830. doi:10.1001/jamanetworkopen.2021.0830; Huang, Y., Pinto, M. D., Borelli, J. L., et al. (2021, March). COVID Symptoms, Symptom Clusters, and Predictors for Becoming a Long-Hauler: Looking for Clarity in the Haze of the Pandemic. medRxiv (preprint). doi:10.1101/2021.03.03.21252086

10 Hamilton, B. E., Martin, J. A., & Osterman, M. J. K. (2021, May). *Births: Provisional Data for 2020*. Vital Statistics Rapid Release, 12. Retrieved 22 January 2022, from Centers for Disease Control and Prevention website: <https://www.cdc.gov/nchs/data/vsrr/vsrr012-508.pdf>

11 U.S. Census Bureau. (2020). *American Community Survey 1-Year Estimates 2019*, Geographies: All States within United States and Puerto Rico, Table DP03: Selected Economic Characteristics. Retrieved 26 January 2022, from <https://data.census.gov/cedsci/table?q=dp03&tid=ACSDP1Y2019.DP03&hidePreview=false>

12 Shaw, E., Mason, C. N., Lacarte, V., & Jauregui, E. (2020, May). *Holding Up Half the Sky: Mothers as Workers, Primary Caregivers, & Breadwinners During COVID-19*. Retrieved 26 January 2022, from Institute for Women's Policy Research website: <https://iwpr.org/iwpr-issues/esme/holding-up-half-the-sky-mothers-as-workers-primary-caregivers-breadwinners-during-covid-19-2/>; "Key breadwinner" means a single mother who heads a household or a married mother who contributes 40 percent or more of the couple's joint earnings. Nationally, 79 percent of Black mothers are key breadwinners; 64 percent of Native American mothers are key breadwinners; 60 percent of mothers identifying as multiracial or "other" race are key breadwinners; 49 percent of Latina mothers are key breadwinners; 48 percent of white mothers are key breadwinners; and 43 percent of Asian/Pacific Islander mothers are key breadwinners.

13 U.S. Bureau of Labor Statistics. (2021, July 14). Expanded State Employment Status Demographic Data, 2020 Annual Averages (Employment status of the civilian noninstitutional population in states by sex, race, Hispanic or Latino ethnicity, and intermediate age). Retrieved 26 January 2022, from <https://www.bls.gov/lau/ex14tables.htm>

14 Eisler, R., & Otis, K. (2014). Unpaid and Undervalued Care Work Keeps Women on the Brink. In O. Morgan, & K. Skelton (Eds.), *The Shriver Report: A Woman's Nation Pushes Back from the Brink*. New York, NY: Palgrave Macmillan Trade; Bianchi, S. M. (2011). Changing families, changing workplaces. *The Future of Children*, 21(2), 15-36; National Alliance for Caregiving and AARP. (2020, May). *Caregiving in the U.S.: 2020 Report*. Retrieved 26 January 2022, from <https://www.caregiving.org/wp-content/uploads/2021/01/full-report-caregiving-in-the-united-states-01-21.pdf>

15 MenCare Advocacy. (2016, June 12). *State of America's Fathers 2016*. Retrieved 22 January 2022, from <http://menengage.org/state-of-americas-fathers-2016-report/>

16 The Council of Economic Advisers. (2014, June 9). *The Economics of Fatherhood and Work*. Executive Office of the President of the United States Publication. Retrieved 26 January 2022, from https://obamawhitehouse.archives.gov/sites/default/files/docs/working_fathers_presentation.pdf; see also The Council of Economic Advisers. (2014, June). *Nine Facts About American Families and Work*. Executive Office of the President of the United States Publication. Retrieved 26 January 2022, from https://obamawhitehouse.archives.gov/sites/default/files/docs/nine_facts_about_family_and_work_real_final.pdf.

17 Lenhart, A., Swenson, H., & Schulte, B. (2019, December). *Lifting the Barriers to Paid Family and Medical Leave for Men in the United States*. Retrieved 26 January 2022 from New America website: <https://www.newamerica.org/better-life-lab/reports/lifting-barriers-paid-family-and-medical-leave-men-united-states/>; Livingston, G. (2018, January 8). *Most dads say they spend too little time with their children; about a quarter live apart from them*. Pew Research Center Publication. Retrieved 26 January 2022, from <https://www.pewresearch.org/fact-tank/2018/01/08/most-dads-say-they-spend-too-little-time-with-their-children-about-a-quarter-live-apart-from-them/>; U.S. Department of Labor. (2015, September 4). *The Cost of Doing Nothing: The Price We All Pay Without Paid Leave Policies to Support America's 21st Century Working Families*. Retrieved 26 January 2022, from Cornell University Library website: <https://ecommons.cornell.edu/handle/1813/78447>

18 U.S. Bureau of Labor Statistics. (2020, August). *Expanded State Employment Status Demographic Data*, Employment status of the civilian noninstitutional population in states by sex, race, Hispanic or Latino ethnicity, and intermediate age, 2019 annual averages. Retrieved 26 January 2022, from <https://www.bls.gov/lau/ex14tables.htm> (Unpublished calculation by the National Partnership for Women & Families); U.S. Census Bureau. (2020). *American Community Survey, 1-Year Estimates 2019*, Geographies: All States within United States and Puerto Rico, Table S0101: Age and Sex. Retrieved 26 January 2022, from <https://data.census.gov/cedsci/table?q=s0101&tid=ACSST1Y2019.S0101&hidePreview=false>; University of Virginia Demographics Research Group. (2018). *National Population Projections: Projections for the 50 States and D.C. (Age and Sex)*. Retrieved 26 January 2022, from <http://demographics.coopercenter.org/national-population-projections/?q=demographics/national-population-projections> (Unpublished calculation based on projected rate of growth of older adult population from 2019 to 2040)

19 Atkinson, I. (2021, September). *Our Aging, Caring Nation: Why a U.S. Paid Leave Plan Must Provide More Than Time to Care for New Children*. Retrieved 26 January 2022, from National Partnership for Women & Families website: <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/our-aging-caring-nation-why-a-us-paid-leave-plan-must-provide-more-than-time-to-care-for-new-children.pdf>

20 : Only 12 percent of private sector workers in the bottom wage quartile have access to employer-provided paid family leave, and 19 percent have access to employer-provided short-term disability insurance; U.S. Bureau of Labor Statistics. (2021, September). *National Compensation Survey: Employee Benefits in the United States, March 2021* (Tables 17 and 33). Retrieved 22 January 2022, from <https://www.bls.gov/nchs/ebs/benefits/2021/employee-benefits-in-the-united-states-march-2021.pdf>

21 Appelbaum, E., & Milkman, R. (2011, January 19). Paid Family Leave Pays Off in California. *Harvard Business Review*, HBR Blog Network. Retrieved 26 January 2022, from <http://blogs.hbr.org/2011/01/paid-family-leave-pays-off-in/>

22 Bartel, A. P., Rossin-Slater, M., Ruhm, C. J., Slopen, M., & Waldfogel, J. (2021, December). *Support for Paid Family Leave among Small Employers Increases during the COVID-19 Pandemic*. National Bureau of Economic Research Working Paper. Retrieved 26 January 2022, from <https://www.nber.org/papers/w29486>

23 National Partnership for Women & Families. (2021, November). *State Paid Family & Medical Leave Insurance Laws*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/state-paid-family-leave-laws.pdf>

24 Ibid.

25 National Partnership for Women & Families. (2019, September). *Paid Leave Works: Evidence from State Programs*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-leave-works-evidence-from-state-programs.pdf>

26 Boyens, C. (2020, June 2). *State Paid Family and Medical Leave Programs Helped a Surge of Workers Affected by the COVID-19 Pandemic*. Retrieved 26 January 2022 from Urban Institute website: <https://www.urban.org/research/publication/state-paid-family-and-medical-leave-programs-helped-surge-workers-affected-covid-19-pandemic>

27 Milkman, R., & Appelbaum, E. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy* (pp. 67-68). Ithaca, NY: Cornell University Press.

28 Bartel, A., Baum, C., Rossin-Slater, M., Ruhm, C., Waldfogel, J. (2014, June 23). *California's Paid Family Leave Law: Lessons from the First Decade*. U.S. Department of Labor Publication. Retrieved 26 January 2022, from <http://www.dol.gov/asp/evaluation/reports/paidleavedeliverable.pdf>

29 Redmond, J., & Fkias, E. (2010, January). *Legal Report: California's Paid Family Leave Act Is Less Onerous than Predicted*. Society for Human Resource Management Publication. Retrieved 26 January 2022, from https://www.sheppardmullin.com/media/article/809_CA%20Paid%20Family%20Leave%20Act%20Is%20Less%20Onerous%20Than%20Predicted.pdf

30 Deprez, E. (2015, October 22). *California Shows How Paid-Low Law Affects Businesses: Not Much*. Bloomberg Politics. Retrieved 26 January 2022, from <https://www.bloomberg.com/politics/articles/2015-10-22/california-shows-how-paid-leave-law-affects-businesses-not-much>

31 2013 Cal. Legis. Serv. Ch. 350 (amending Cal. Unemp. Ins. Code §§ 3302(f)-(j)).

32 A.B. 908, 2015-2016 Leg., Reg. Sess. (Cal. 2016).

33 Cal. Unemp. Ins. Code § 3301(c); S.B. 83, 2019-2020 Leg., Reg. Sess. (Cal. 2019) (enacted)

34 Cal. Unemp. Ins. Code §§ 2627(b), 3303 (as amended by A.B. 908)

- 35 Houser, L., & White, K. (2012, October). *Awareness of New Jersey's Family Leave Insurance Program is Low, Even as Public Support Remains High and Need Persists*. Rutgers University, The State University of New Jersey Center for Women and Work Publication. Retrieved 26 January 2022, from https://smr.rutgers.edu/sites/default/files/Documents/Centers/CWW/Publications/FLI_Issue_Brief_Final_with_Appendix.pdf
- 36 Ramirez, M. (2012). *The Impact of Paid Family Leave on New Jersey Businesses*. New Jersey Business and Industry Association and Rutgers University, The State University of New Jersey Presentation. Retrieved 26 January 2022, from <http://bloustein.rutgers.edu/wp-content/uploads/2012/03/Ramirez.pdf>
- 37 A. 3975, 218th Leg., Reg. Sess. (N.J. 2019)
- 38 Bartel, A., Rossin-Slater, M., Ruhm, C., & Waldfogel, J. (2016, January). *Assessing Rhode Island's Temporary Caregiver Insurance Act: Insights from a Survey of Employers*. U.S. Department of Labor Publication. Retrieved 26 January 2022, from http://www.dol.gov/asp/evaluation/completed-studies/AssessingRhodeIslandTemporaryCaregiverInsuranceAct_InsightsFromSurveyOfEmployers.pdf
- 39 Ibid.
- 40 National Partnership for Women & Families. (2021, November). *State Paid Family & Medical Leave Insurance Laws*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/state-paid-family-leave-laws.pdf>
- 41 Ibid.
- 42 Houser, L., & Vartanian, T. (2012, January). *Pay Matters: The Positive Economic Impact of Paid Family Leave for Families, Businesses and the Public*. Center for Women and Work at Rutgers, The State University of New Jersey Publication. Retrieved 26 January 2022, from <http://www.nationalpartnership.org/research-library/work-family/other/pay-matters.pdf>
- 43 Ibid.
- 44 Ibid.
- 45 Lenhart, O. (2021). The effects of paid family leave on food insecurity—evidence from California. *Review of Economics of the Household*, 19, 615–639. doi:10.1007/s11150-020-09537-4
- 46 Stanczyk, A. (2019). Does Paid Family Leave Improve Household Economic Security Following a Birth? Evidence from California. *Social Service Review*, 93(2), 262–304. doi: 10.1086/703138
- 47 Matos, K. (2014). *Highlights from the 2014 Older Adult Caregiver Study*. Families and Work Institute Publication. Retrieved 26 January 2022, from <https://cdn.sanity.io/files/ow8usu72/production/9bb8f86d2ea8f0fb0cfe5296760aa68756678191.pdf>
- 48 Saad-Lessler, J. and Bahn, K. (2017). *The Importance of Paid Leave for Caregivers*. Retrieved 26 January 2022, from Center for American Progress website: <https://www.americanprogress.org/issues/women/reports/2017/09/27/439684/importance-paideleave-caregivers/>
- 49 MetLife Mature Market Institute. (2011, June). *The MetLife Study of Caregiving Costs to Working Caregivers: Double Jeopardy for Baby Boomers Caring for Their Parents*. Retrieved 26 January 2022, from <https://www.caregiving.org/wp-content/uploads/2011/06/mmi-caregiving-costs-working-caregivers.pdf>. June 2011 estimate of wages and retirement income adjusted for inflation as of December 2021 using Bureau of Labor Statistics CPI calculator: <https://data.bls.gov/cgi-bin/cpi/calc.pl>
- 50 Ibid.
- 51 Stearns, J. (2015, September). The effects of paid maternity leave: Evidence from Temporary Disability Insurance. *Journal of Health Economics*, 43: 85–102. doi:10.1016/j.jhealeco.2015.04.005
- 52 Appelbaum, E., & Milkman, R. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy*. Ithaca, NY: Cornell University Press; Rossin-Slater, M., Ruhm, C., & Waldfogel, J. (2013, July 4) The Effects of California's Paid Family Leave Program on Mothers' Leave-Taking and Subsequent Labor Market Outcomes. *Journal of Policy Analysis and Management*. 32(2), 224–245. doi:10.1002/pam.21676
- 53 Pal, I. (2018, January). *Effect of New Jersey's Paid Family Leave Policy of 2009 on Maternal Health and Well-Being*. Paper presented at the American Economic Association annual meeting, 12 January 2018. Retrieved 26 January 2022, from <https://www.aeaweb.org/conference/2018/preliminary/paper/B7zZz43a>
- 54 Berger, L., Hill, J., & Waldfogel, J. (2005). Maternity Leave, Early Maternal Employment and Child Health and Development in the US. *The Economic Journal*, 115(501), F44.
- 55 Chatterji, P. and Markowitz, S. (2012) Family Leave After Childbirth and the Mental Health of New Mothers. *The Journal of Mental Health Policy and Economics*, 15(2): 61–75. See <https://pubmed.ncbi.nlm.nih.gov/22813939/>
- 56 Ibid.
- 57 Jou, J., Kozhimannil, K.B., Abraham, J.M., Blewett, L.A., and McGovern, P.M. (2018, February) Paid Maternity Leave in the United States: Associations with Maternal and Infant Health. *Maternal and Child Health Journal*, February 2018, doi:10.1007/s10995-017-2393-x
- 58 Setty, S., Skinner, C., & Wilson-Simmons, R. (2016, March). *Protecting Workers, Nurturing Families: Building an Inclusive Family Leave Insurance Program, Findings and Recommendations from the New Jersey Parenting Project*. Columbia University, Mailman School of Public Health, National Center for Children in Poverty Publication. Retrieved 26 January 2022, from http://www.nccp.org/publications/pub_1152.html
- 59 Ruhm, C. J. (2000). Parental leave and child health. *Journal of Health Economics*, 19(6), 931–960.
- 60 Harrington, B., et al. (2014). *The New Dad: Take Your Leave. Perspectives on paternity leave from fathers, leading organizations, and global policies*. Boston College Center for Work and Family Publication. Retrieved 26 January 2022, from https://www.bc.edu/content/dam/files/centers/cwf/research/publications/3/researchreports/The%20New%20Dad%202014_Take%20Your%20Leave
- 61 National Scientific Council on the Developing Child. (2007). *The Timing and Quality of Early Experiences Combine to Shape Brain Architecture: Working Paper No. 5*. Retrieved 26 January 2022, from <https://developingchild.harvard.edu/resources/leave-the-timing-and-quality-of-early-experiences-combine-to-shape-brain-architecture/>; Zigler, E., Muenchow, S., & Ruhm, C. J. (2012). *Time Off With Baby: The Case for Paid Care Leave*. Washington, DC: ZERO TO THREE
- 62 Brown, S., Herr, J., Roy, R., & Klerman, J. A.. (2020, July) *Employee and Worksite Perspectives of the Family and Medical Leave Act: Supplemental Results from the 2018 Surveys* (p. 23). Retrieved 26 January 2022, from https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHF_FMLA2018SurveyResults_Appendices_Aug2020.pdf
- 63 Kim, S. (2021, February). Access to employer-provided paid leave and eldercare provision for older workers. *Community, Work & Family*. Online first. doi:10.1080/13668803.2021.1885346
- 64 Saad-Lessler, J. (2020, October). How does paid family leave affect unpaid care providers? *Journal of the Economics of Ageing*, 17(C). doi:10.1016/j.jeoa.2020.100265
- 65 Anand, P., Dague, L., & Wagner, K. L. (2020, June). *The Role of Paid Family Leave in Spousal Labor Supply Responses to a Disability or Health Shock*. Paper presented at the Annual Conference of the American Society of Health Economists, 10 June 2020. Abstract available at <https://ashecon.confex.com/ashecon/2020/meetingapp.cgi/Paper/9604>
- 66 Arora, K., & Wolf, D. A. (2018). Does Paid Family Leave Reduce Nursing Home Use? The California Experience. *Journal of Policy Analysis and Management*, 37(1), 38–62. doi:10.1002/pam.22038
- 67 AARP Public Policy Institute. (2021, January 20). *AARP Nursing Home COVID-19 Dashboard*. Retrieved 26 January 2022, from <https://www.aarp.org/ppi/issues/caregiving/info-2020/nursing-home-covid-dashboard.html>
- 68 Gorges, R. J., & Konezka, R. T. (2021, February). Factors Associated With Racial Differences in Deaths Among Nursing Home Residents With COVID-19 Infection in the US. *JAMA Network Open*, 4(2), e2037431. doi:10.1001/jamanetworkopen.2020.37431
- 69 Mason, J. (2021, October). *Paid Leave Would Cut Healthcare Costs*. Retrieved 26 January 2022, from National Partnership for Women & Families website: <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/paid-leave-would-cut-health-care-costs.pdf>
- 70 Milkman, R., & Appelbaum, E. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy* (pp. 102–103). Ithaca, NY: Cornell University Press.
- 71 Silver, B., Mederer, H., & Djurdjevic, E. (2015, November 16). *Launching the Rhode Island Temporary Caregiver Insurance Program (TCI): Employee Experiences One Year Later*. Rhode Island Department of Labor and Training and University of Rhode Island Publication. Retrieved 26 January 2022, from <https://web.uri.edu/ssirep/files/RI-Paid-Leave-Final-Report-April-2016.pdf>
- 72 Heymann, J. (2001, October 15). *The Widening Gap: Why America's Working Families Are in Jeopardy—and What Can Be Done About It*. New York, NY: Basic Books.
- 73 Schuster, M. A., & Chung, P. J. (2014, August). Time Off to Care for a Sick Child—Why Family-Leave Policies Matter. *New England Journal of Medicine*, 371(6), 493–495.
- 74 See e.g., Institute of Medicine. (2008, April 11). *Retooling for an Aging America: Building the Health Care Workforce* (p. 254). Retrieved 26 January 2022, from <http://www.nationalacademies.org/hmd/reports/2008/retooling-for-an-aging-america-building-the-health-care-workforce.aspx>; Arbaje, A., et al. (2008). Postdischarge Environmental and Socioeconomic Factors and the Likelihood of Early Hospital Readmission Among Community-Dwelling Medicare Beneficiaries. *The Gerontologist*, 48(4), 495–504.

- 75 MetLife Mature Market Institute. (2010). *MetLife Study of Working Caregivers and Employer Health Care Costs: New Insights and Innovations for Reducing Health Care Costs for Employers*. Retrieved 26 January 2022, from <https://www.caregiving.org/wp-content/uploads/2011/06/mmi-caregiving-costs-working-caregivers.pdf>
- 76 Laughlin, L. (2011, December 7). *Presentation to the National Partnership for Women & Families' Work-Life Lunch Group*, Washington, D.C. Calculations based on U.S. Census Bureau Survey of Income and Program Participation, 2008 Panel, Wave 2. Data on file with the National Partnership for Women & Families
- 77 MetLife Mature Market Institute. (2010). *MetLife Study of Working Caregivers and Employer Health Care Costs: New Insights and Innovations for Reducing Health Care Costs for Employers*. Retrieved 26 January 2022, from <https://www.caregiving.org/wp-content/uploads/2011/06/mmi-caregiving-costs-working-caregivers.pdf>
- 78 Boushey, H., & Glynn, S. (2012, November 16). *There Are Significant Business Costs to Replacing Employees*. Center for American Progress Publication. Retrieved 26 January 2022, from <http://www.americanprogress.org/wp-content/uploads/2012/11/CostofTurnover.pdf>
- 79 Ibid.
- 80 Allen, D. G., Bryant, P. C., & Vardaman, J. M. (2010). Retaining talent: Replacing misconceptions with evidence-based strategies. *The Academy of Management Perspectives*, 24(2), 48-64
- 81 Hausknecht, J. P., & Holwerda, J. A. (2013). When does employee turnover matter? Dynamic member configurations, productive capacity, and collective performance. *Organization Science*, 24(1), 210-225
- 82 Milkman, R., & Appelbaum, E. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy* (pp. 101-102). Ithaca, NY: Cornell University Press.
- 83 Setty, S., Skinner, C., & Wilson-Simmons, R. (2016, March). *Protecting Workers, Nurturing Families: Building an Inclusive Family Leave Insurance Program, Findings and Recommendations from the New Jersey Parenting Project*. Columbia University, Mailman School of Public Health, National Center for Children in Poverty Publication. Retrieved 26 January 2022, from http://www.nccp.org/publications/pub_1152.html
- 84 Milkman, R., & Appelbaum, E. (2013). *Unfinished Business: Paid Family Leave in California and the Future of U.S. Work-Family Policy* (pp. 67-68). Ithaca, NY: Cornell University Press.
- 85 Lerner, S., & Appelbaum, E. (2014, June). *Business As Usual: New Jersey Employers' Experiences with Family Leave Insurance*. Center for Economic and Policy Research Publication. Retrieved 26 January 2022, from <http://www.cepr.net/documents/nj-fl-2014-06.pdf>
- 86 Ramirez, M. (2012). *The Impact of Paid Family Leave on New Jersey Businesses*. New Jersey Business and Industry Association and Rutgers University, The State University of New Jersey Presentation. Retrieved 26 January 2022, from <http://bloustein.rutgers.edu/wp-content/uploads/2012/03/Ramirez.pdf>
- 87 Bartel, A., Rossin-Slater, M., Ruhm, C., Slopen, M., & Waldfogel, J. (2021, April 12). *The impact of paid family leave on employers: Evidence from New York*. Retrieved 26 January 2022, from <https://www.nber.org/papers/w28672>
- 88 Stroman, C., Woods, W., Fitzgerald, G., Unnikrishnan, S., & Bird, L. (2017, February). *Why Paid Family Leave is Good Business*. The Boston Consulting Group Publication. Retrieved 26 January 2022, from <http://media-publications.bcg.com/BCG-Why-Paid-Family-Leave-Is-Good-Business-Feb-2017.pdf>
- 89 Houser, L., & Vartanian, T. (2012, April). *Policy Matters: Public Policy, Paid Leave for New Parents, and Economic Security for U.S. Workers*. Center for Women and Work at Rutgers, The State University of New Jersey Publication. Retrieved 26 January 2022, from http://go.nationalpartnership.org/site/DocServer/RutgersCWW_Policy_Matters_April2012.pdf
- 90 Brown, S., Herr, J., Roy, R., & Klerman, J. A. (2020, July) *Employee and Worksite Perspectives of the Family and Medical Leave Act: Supplemental Results from the 2018 Surveys* (p. 23). Retrieved 26 January 2022, from https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDFMLA2018SurveyResults_Appendices_Aug2020.pdf
- 91 National Partnership for Women & Families and ZERO TO THREE. (2018, December). *The Child Development Case for a National Paid Family and Medical Leave Program*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/the-child-development-case-for-a-national-paid-family-and-medical-leave-insurance-program.pdf>
- 92 National Partnership for Women & Families. (2021, November). *State Paid Family & Medical Leave Insurance Laws*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/state-paid-family-leave-laws.pdf>; National Partnership for Women & Families. (2019, August). *Meeting the Promise of Paid Leave: A Research Brief*. Retrieved 26 January 2022, from <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/meeting-the-promise-of-paid-leave-a-research-brief.pdf>
- 93 Andrew Chang & Co. (2015, December). *Paid Family Leave Market Research*. Retrieved 26 January 2022, from State of California Employment Development Department website: https://www.edd.ca.gov/Disability/pdf/Paid_Family_Leave_Market_Research_Report_2015.pdf
- 94 Evidence from the United States as well as OECD countries with established programs documents that men's leave utilization is highly sensitive to wage replacement rates. See e.g. Organization for Economic Co-Operation and Development. (2016, March). *Parental leave: Where are the fathers?* Retrieved 26 January 2022, from OECD website: <https://www.oecd.org/policy-briefs/parental-leave-where-are-the-fathers.pdf>; Lenhart, A., Swenson, H., & Schulte, B. (2019, December 4). *Lifting the Barriers to Paid Family and Medical Leave for Men in the United States*. Retrieved 26 January 2022, from New America website: <https://www.newamerica.org/better-life-lab/reports/lifting-barriers-paid-family-and-medical-leave-men-united-states/>; Dow, W. H., Goodman, J. M., & Stewart, H. (2017, November). *San Francisco's Paid Parental Leave Ordinance: The First Six Months*. Retrieved 26 January 2022, from Population Sciences, University of California, Berkeley website: <https://www.populationsciences.berkeley.edu/sites/default/files/SF%20Paid%20Parental%20Leave%20-%20UC%20Berkeley%20issue%20brief%201.pdf>
- 95 Bowman, M., Durso, L. E., Gruber, S., Kocolatos, M., Krishnamurthy, K., Make, J., McGovern, A., Gallagher Robbins, K. (2016, December). *Making Paid Leave Work for Every Family* (p.1). Retrieved 26 January 2022, from Forward Together website: <https://forwardtogether.org/wp-content/uploads/2017/12/lgbtpaidleave-report.pdf>
- 96 Cohn, D., & Passel, J. S. (2018, April 5). *A record 64 million Americans live in multigenerational households*. Retrieved 26 January 2022, from Pew Research Center website: <https://www.pewresearch.org/fact-tank/2018/04/05/a-record-64-million-americans-live-in-multigenerational-households/>
- 97 Gallagher Robbins, K., Durso, L. E., Bewkes, F. J., & Schultz, E. (2017, October 30). *People Need Paid Leave Policies That Cover Chosen Family*. Retrieved 26 January 2022, from Center for American Progress website: <https://www.americanprogress.org/issues/poverty/reports/2017/10/30/441392/people-need-paid-leave-policies-that-cover-chosen-family/>
- 98 Ibid.
- 99 Ramchand, R., Tanielian, T., Fisher, M. P., Vaughan, C. A., Trail, T. E., Batka, C., Ghosh-Dastidar, B. (2014). *Hidden Heroes: America's Military Caregivers*. Retrieved 26 January 2022, from RAND Corporation website: https://www.rand.org/pubs/research_reports/RR499.html

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