

# Called to Care: A Racially Just Recovery Demands Paid Family and Medical Leave

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Too often in our country's history, the ability to take time to care for yourself and others while maintaining your economic security has been predominantly reserved for the white and wealthy few. Yet, it is through providing care for one another that we knit together the bonds of our families and communities.

As the late Representative John Lewis said, "Our humanity calls us to help those we love." But in the United States, our public policies have been shaped by racism and sexism, depriving tens of millions of working people a meaningful right to care for themselves and their loved ones without risking their livelihoods. Nearly eight in ten civilian workers do not have paid family leave at their jobs, meaning that when the need to care arises, they are forced to choose between their health or the health of their loved ones and their income. The coronavirus pandemic has brought into stark relief the fact that Black, Native American, Latinx and Asian American and Pacific Islander workers have been especially likely to face this hard choice. This has resulted in greater economic insecurity, worse health outcomes and lost time with family when it was needed most.

**Thanks to generations of intense, committed and innovative work by racial justice organizers, community activists, scholars and leaders, the necessity of addressing white supremacy and its legacies is finally becoming a priority for policymakers in the United States.** The terrible toll of the pandemic and the resulting economic crisis, which have disproportionately wreaked devastation on communities of color and tribal nations, has made that priority even more urgent.

In 2018, the National Partnership released a research brief, [Paid Family and Medical Leave: A Racial Justice Issue – and Opportunity](#), to help draw attention to one facet of this larger problem: the particular harms that the United States' paid leave crisis imposes

on Black, Indigenous and people of color (BIPOC) workers – especially women – and their families.

**This updated brief shows how the lack of national paid leave has exacerbated harms to the health and economic lives of people of color, particularly women, before and during the pandemic.** It details how the pandemic further widened the divide between the two halves of our economy: one where more-advantaged workers – most often white – had the benefits and resources to quarantine safely at home, and one where workers of color in essential jobs faced daily risks of infection. And it demonstrates that an equitable national paid family and medical leave program for all workers is an essential step toward addressing and repairing the damage done to Black and brown families, and toward preventing further harm. In the sections below, the brief explains how:

- I. [People of color have been hardest hit by both the pandemic and its economic effects.](#)
- II. [Gaps in access to job-protected paid family and medical leave mean people of color face greater hardships when health and family care needs arise.](#)
- III. [The United States' segregated economy and reliance on employers to provide basic health and family supports, including paid leave, have created greater economic insecurity for people of color.](#)
- IV. [People of color have been shut out of wealth-building opportunities, leaving them fewer assets to rely on during economic and health shocks.](#)
- V. [A well-designed national paid family and medical leave program would address longstanding inequities in health outcomes and economic security.](#)

Finally, the brief [outlines how a strong, inclusive paid leave program should be designed](#) to support an equitable national recovery from the pandemic.

## **I. People of Color Have Been Hardest Hit by the Public Health and Financial Disaster of the Pandemic**

BIPOC people and their families and communities have suffered acutely and in intersecting ways from the coronavirus pandemic. Workers of color and women make up large shares of those employed in frontline jobs that carry greater risk of exposure (see Table 1.1).<sup>1</sup> Increased exposure, compounded by adverse social determinants of health, including lack of access to health care to medical discrimination and racism in health care to cramped living conditions caused by unaffordable housing, means many

of the same communities that faced preexisting health inequities have now borne the highest caseloads and worst mortality from COVID-19.<sup>2</sup> An early analysis from California

### COVID-19 MORTALITY

As of March 2021,

**1 in 390 Native people**

**1 in 555 Black people**

**1 in 665 white people**

**1 in 680 Latinx people**

**1 in 1,040 Asian American people**

had died from COVID-19

found that during the first wave of the pandemic, mortality increased overall by 36 percent for Latinx workers, 28 percent for Black workers and 18 percent for Asian American workers (and as high as 40 percent for those in health care), compared to just 6 percent for white workers.<sup>3</sup> Mortality data also indicates that BIPOC people are dying at higher rates at relatively younger ages compared to white people.<sup>4</sup> Adjusted for age, Black people have been 2 times as likely, Native people 2.2 times as likely, Latinx people 2.4 times as likely and Pacific Islanders 2.6 times as likely as white people to die from COVID-19.<sup>5</sup> And in addition to high risks of coronavirus exposure in

frontline occupations including health care, Asian Americans are also facing a spike in hate crimes, racist harassment and scapegoating, experiences that also take a toll on mental and physical health.<sup>6</sup>

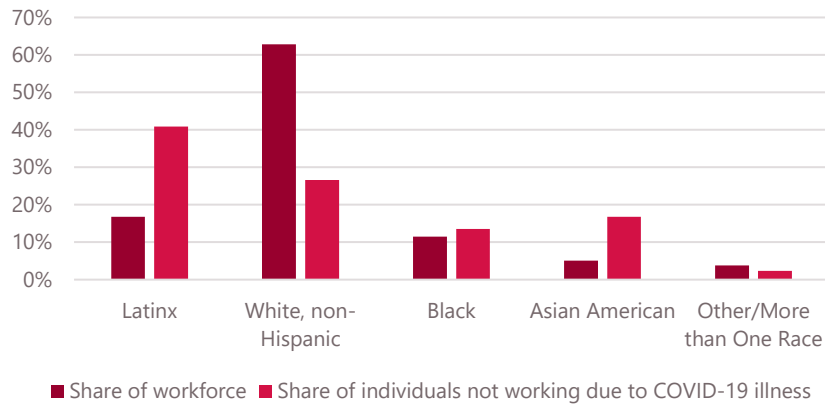
**Table 1.1: Occupational Exposure and COVID-19 Risk**

Occupation	Share Employed in Occupation				Mortality risk
	Women	Black	Asian	Latinx	
All occupations	46.8	12.1	6.4	17.6	
1 Cooks	42.1	16	5.4	36	160%
2 Packaging and filling machine operators	45.8	20.8	4.1	41.2	159%
3 Miscellaneous agricultural workers	24.4	4.2	1	47.2	155%
4 Bakers	64.1	11.8	6.7	26.9	150%
5 Construction laborers	3.8	8	1.4	46	149%
6 Other production workers	27.6	15.3	6.2	27.2	146%
7 Sewing machine operators	66.7	12.6	10.8	36.9	144%
8 Shipping, receiving, and inventory clerks	33.6	19.1	4	26.8	144%
9 Landscaping and groundskeeping workers	6.5	9	1	44.5	140%
10 Customer service representatives	63.8	17.7	4.9	19.6	137%

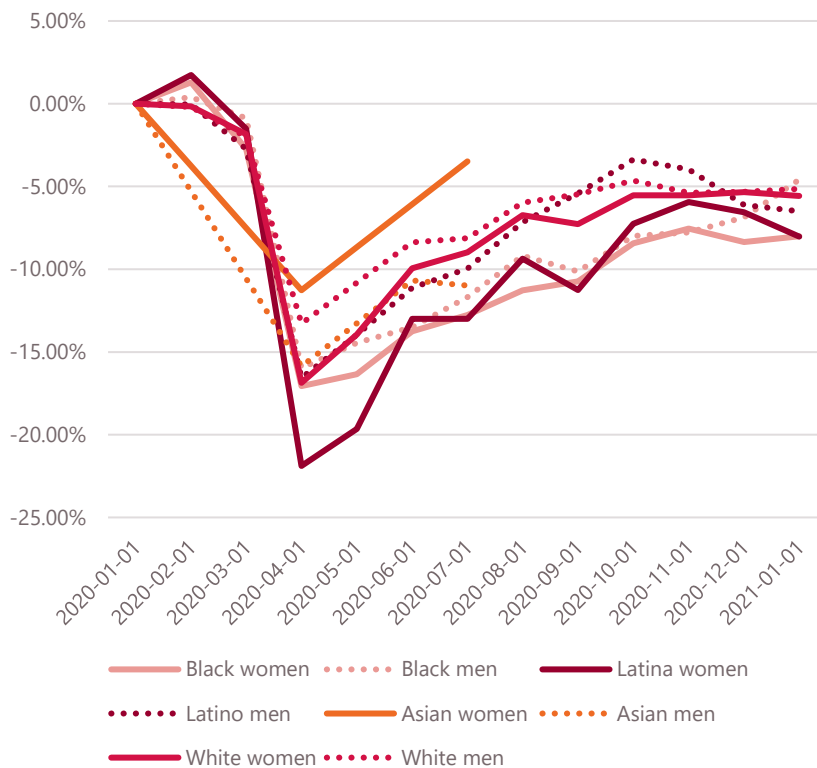
Decades of disinvestment in public health, particularly in communities of color, coupled with the lack of strong workplace safety standards, continue to put people of color in a health and financial bind. By April 2020, Latinx, Black and Asian American people made up disproportionately large shares of those who took time away from work due to coronavirus symptoms (see chart 1.2).<sup>7</sup> Workers who were exposed to the virus but were

forced to go to work due to lack of paid sick leave almost certainly contributed to greater spread of the virus at in-person workplaces, as has been documented for other infectious and airborne diseases.<sup>8</sup> In fact, in the month after Congress enacted two weeks of emergency paid sick leave to at most half the workforce, the spread of the virus was reduced by an estimated 15,000 cases per day. A policy covering all workers and providing sufficient time for those with COVID-19 to quarantine would surely have had an even greater effect.<sup>9</sup> A lack of universal paid family and medical leave meant workers with longer-lasting illnesses, disabilities or child and family caregiving needs had little choice but to continue working at a high cost to their health and their family's well-being, or to leave their jobs and face financial disaster.

**Chart 1.2: People of Color Disproportionately Likely to Be Unable to Work Due to COVID-19, April 2020**



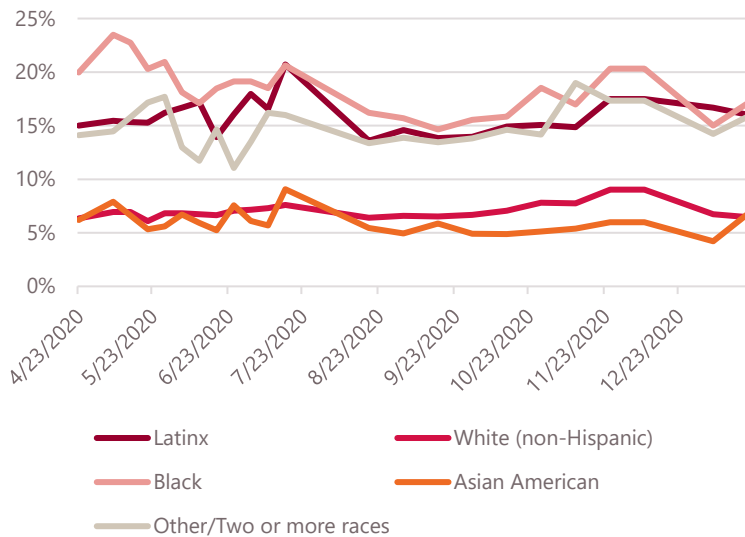
**Chart 1.3: Change in Employment Since January 2020**



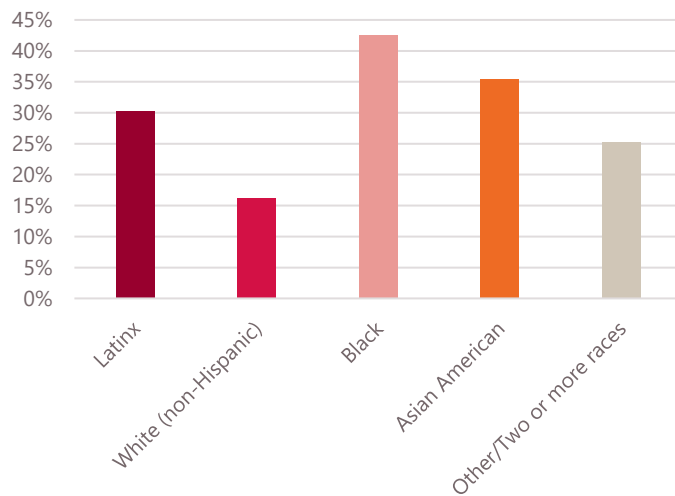
The economic fallout of the pandemic was concentrated in the same communities that were most exposed to the virus itself. People of color, particularly women, were

disproportionately employed in industries hit by pandemic-related closures, layoffs and reduced hours. At the same time, they also faced increased demands for family caregiving. These factors, combined with longstanding economic vulnerabilities, combined to push millions of women of color out of jobs and out of the workforce. In essence, those who had the least were made to give up the most. The results are clear and devastating. Black and Latina women experienced the sharpest drops in employment in spring of 2020, and while most men experienced a steady, if slow, return to jobs later in the year, women actually saw a second round of job losses in late 2020 (see Chart 1.3).<sup>10</sup> In fact, between November 2020 and January 2021, 46,000 Black women, 244,000 Latina women, and 26,000 white women lost or left their jobs, while 144,000 white men gained jobs (comparable data for this period was not yet available for Asian American women). Asian American workers have been hit the hardest by long-term unemployment, with nearly half (46 percent) of unemployed Asian Americans having been unemployed for 15 weeks or more as of January 2021, compared to 43 of Black workers and 39 percent of Latinx and white, non-Hispanic workers.<sup>11</sup> Asian Americans have experienced a sharp drop in the share of their overall population who are employed, which still had not fully recovered after the Great Recession in 2008.<sup>12</sup>

**Chart 1.4: Share of Households That Sometimes or Often Lack Food**



**Chart 1.5: Households Behind on Rent or Mortgage, January 2021**

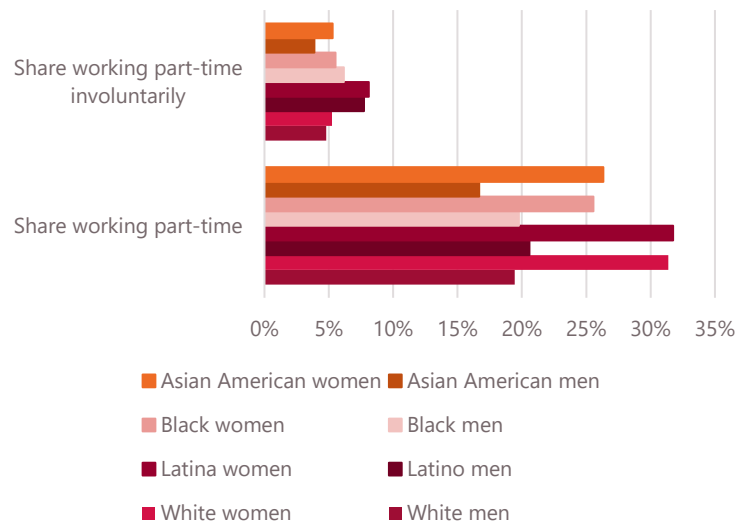


A shocking number of Black and brown families reported food insecurity and falling behind on housing payments by the end of the year (see Charts 1.4 and 1.5).<sup>13</sup> Economic insecurity in turn puts families further at risk of coronavirus exposure; for example, if those unable to pay rent were to lose their homes. The lack of safe living conditions has caused an estimated 430,000 coronavirus cases and more than 10,000 deaths in states where eviction moratoriums expired early.<sup>14</sup>

## II. Workers of Color Are Most Affected by Gaps in the Family and Medical Leave Act

The United States is one of the few countries in the world with no permanent, national law providing paid leave of any kind, and the laws that have extended partial or temporary protections have failed to fully include workers of color. The Family and Medical Leave Act (FMLA), which offers a right to unpaid, job protected leave to just over half of workers,<sup>15</sup> provides a key example of how lack of pay and strict eligibility rules disproportionately affect workers of color. To be eligible, an individual must work for an employer with 50 or more employees, and must have worked at the same employer for at least 12 months and for at least 1,250 hours. Compared to white men, women of color, white women and Black and Latino men are more likely to be working part-time, as well as more likely to be given only part-time hours despite wanting to work full-time (see Chart 2.1).<sup>16</sup>

Chart 2.1: Inequities Among Part-Time Workers

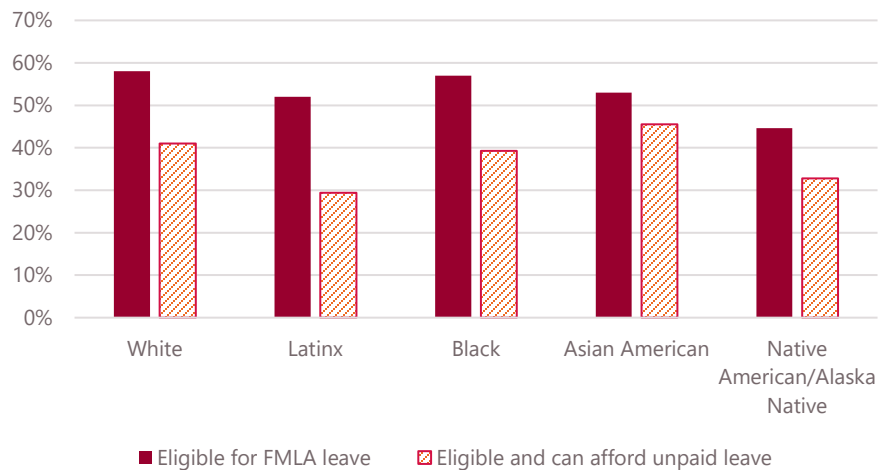


Workers of color face substantial discrimination in the labor market and in workplaces. They are more likely to experience racist and sexual harassment as well as other forms of retaliation, trends that have persisted or worsened during the pandemic. For example, in the fall of 2020, about one in three Black workers and one in four Latinx workers reported fearing that their employer would retaliate against them for speaking up about unsafe work conditions, compared to one in five white workers.<sup>17</sup> Workers of color are typically laid off first during economic downturns and tend to experience longer periods of unemployment due to discrimination in hiring.<sup>18</sup> In the 2008 recession, for example,

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Black and Latinx workers faced much higher unemployment rates and a slower recovery, including being more likely to be hired for part-time work despite wanting to work full time.<sup>19</sup>

**Chart 2.2: Eligibility and Affordability of FMLA Leave**



The longer resume gaps and shorter job tenure caused by

racism in the economy mean that Black and Latinx workers, along with Native American and Alaska Native workers, are less likely to meet key FMLA eligibility rules (see Chart 2.2, solid red bars).<sup>20</sup> For example, a one-year job tenure requirement excludes about one in five white men, but one in four Black and Latinx workers.<sup>21</sup>

When taking FMLA leave, workers must cobble together any benefits their employer might offer, rely on savings or other assets – if they have any – in order to maintain their economic security. More than one-third of workers who take leave for FMLA reasons each year receive no pay. Data suggest that when workers do have pay during a leave, they are most often using up sick or vacation leave, which tends to run out quickly – if they even have access to this leave, which is unavailable to many workers. While about two-thirds of very short leaves (10 days or less) are fully paid, one-third or less of longer leaves receive full pay. Even for shorter leaves, more than one-third of Black workers and fully one half of Latinx workers have no form of paid time off they might use to fill the gap.<sup>22</sup>

The combination of lack of pay and gaps in access to job protection for leave raises serious equity concerns with the FMLA. Workers of color typically have lower pay, fewer employer-provided leave benefits, and face other forms of economic insecurity, and so are more likely to be unable to afford unpaid leave (see Chart 2.2, orange striped bars).

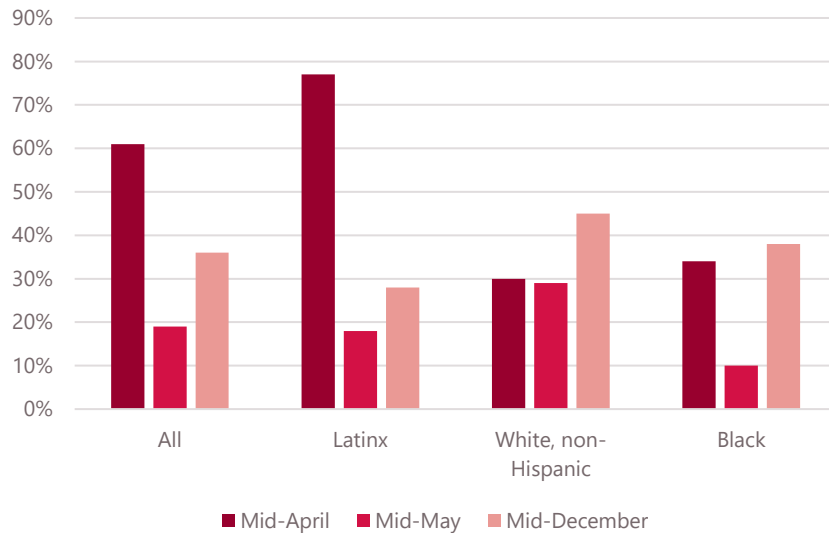
Compared to white workers, Latinx workers are 66 percent more likely, Black workers 83 percent more likely and Native American, Pacific Islander and multiracial workers 100 percent more likely to be unable to take leave when needed.<sup>23</sup> Inability to afford unpaid leave is the most common reason for needing leave but not being able to take it, followed by fear of losing a job.<sup>24</sup>

## Emergency Paid Sick Leave May Have Helped Address Inequities Early in the Pandemic, But Comprehensive, Universal Coverage Was Needed

Starting April 1, 2020, as many as half of private sector workers in the United States had a right to up to two weeks of paid sick leave for their own coronavirus-related illness, as well as pandemic-related family and child care needs. Data specifically tracking workers' use of emergency leave is limited, but U.S. Census survey data\* suggests that among adults who

were unable to work due to coronavirus symptoms, a higher-than-usual and seemingly more equitable share were receiving full or partial pay in the weeks shortly after emergency sick leave was available, compared to later in the year (see Chart 2.3).<sup>25</sup>

**Chart 2.3: Estimated Share of Those Not Working Due to COVID-19 Illness Who Received Some Pay**



**28% OF BLACK WORKERS REPORTED HAVING REQUESTS FOR LEAVE DENIED, COMPARED TO 9% OF WHITE WORKERS.**

Longstanding inequities then returned in later months, with workers of color especially likely to report lacking access to paid leave. In a June 2020 survey of essential workers, only 36 percent of Latinx workers and 29 percent of Black workers were confident they would receive at least some pay for a sick day. About one in seven Black and Latinx workers said they would be likely to still go into work

if they woke up with a fever – even though these groups were also most likely to report fear of infection.<sup>26</sup>

Both lack of coverage and employers' ability to deny leave requests pose challenges. In a nationally representative survey from September to October 2020, 28 percent of Black workers reported having requests for leave denied, compared to 9 percent of white

\* The U.S. Census Bureau Household Pulse Survey, an experimental program, ran from April 23, 2020 through March 1, 2021. Sample sizes for other subpopulations were too small to be reliable. These data, while limited, align with other research indicating that emergency sick leave measurably reduced coronavirus in April 2020.



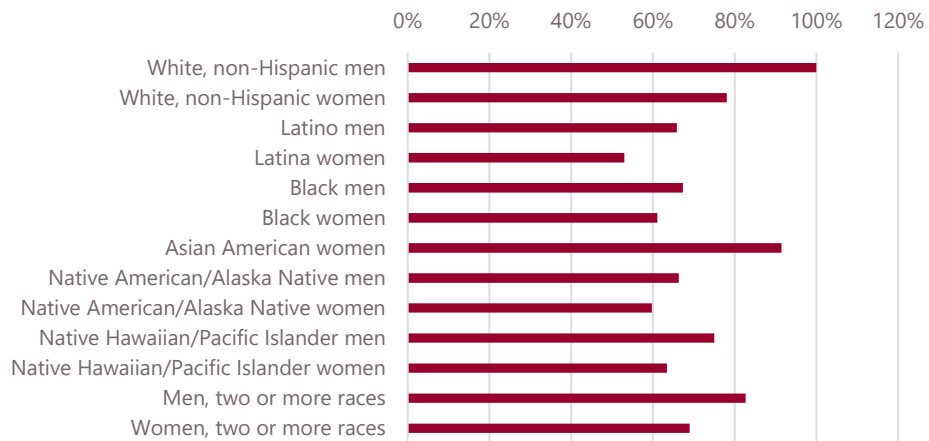
workers. In the same survey, 28 percent of Latina women and 27 percent of Black women, versus 12 percent of white women and 12 percent of men overall, said they had taken unpaid time off of work or given up a job to provide child or elder care.<sup>27</sup>

Employer discretion over work conditions, from job safety to access to leave, puts Black and Latinx workers at a serious disadvantage. Experiences during the pandemic drive home just how much their health and economic security is at risk when basic protections, such as the right to sick leave, are not guaranteed.

### III. Without National Standards, Workers of Color Suffer Inequities in Jobs, Pay and Benefits

During the pandemic, loss of work hours and jobs and discrimination in employment have been a driver of poor health outcomes and economic insecurity, in large part because U.S. public policy has been designed

**Chart 3.1: Median Income as a Share of White, Non-Hispanic Men's**



around employer-sponsored economic supports for most individuals and their families – a tendency that is linked to the legacies of slavery and Jim Crow. For example, during negotiations over New Deal legislation in the 1930s, benefits in programs like Social Security, Unemployment Insurance, and Aid to Dependent Children were kept low, and the administration of these programs was left up to state governments' discretion, in part to help Southern states preserve labor pools of disempowered Black workers who were reliant on employers.<sup>28</sup>

Today, employers continue to have broad discretion over their employees' income, work hours and work location, access to and type of health insurance and retirement accounts, and even whether they are permitted to stay home from work while ill, or to welcome a new child or care for a loved one. While some employers opt to provide generous pay and benefits – most often to full-time employees in professional positions

– many do little more than the law requires. In the private sector, one in three workers does not have access to a retirement plan at work, one in four is not provided paid sick days, three in ten are not offered health insurance, nearly six in ten do not have paid medical leave through an employer’s temporary disability insurance and eight in ten do not have paid family leave.<sup>29</sup>

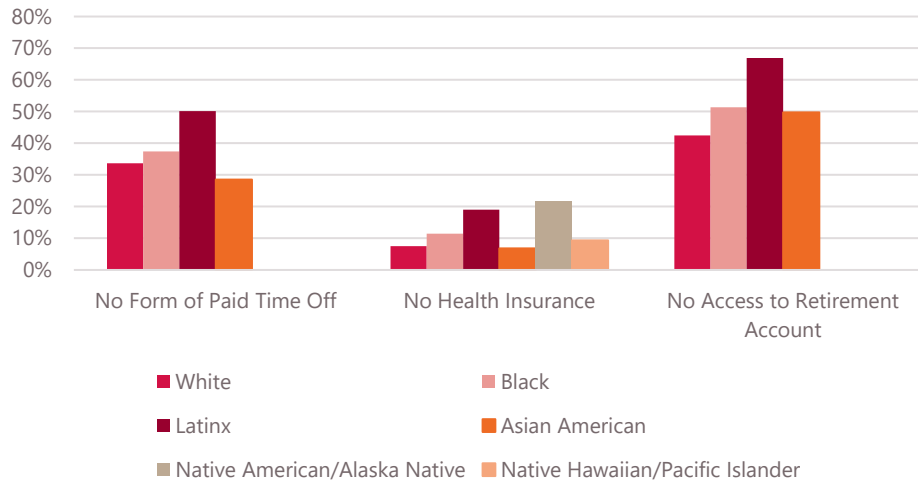
Not all workers are equally affected. Workers tend to be segregated into particular industries and occupations by race and gender due to how different groups of people became part of the United States and its economy.

Enslavement, colonization, voluntary immigration, refugee asylum and variations in how supportive or punitive U.S. policies have been toward immigrants and Indigenous peoples have all affected which occupations various groups are more likely to be concentrated in. Labor conditions

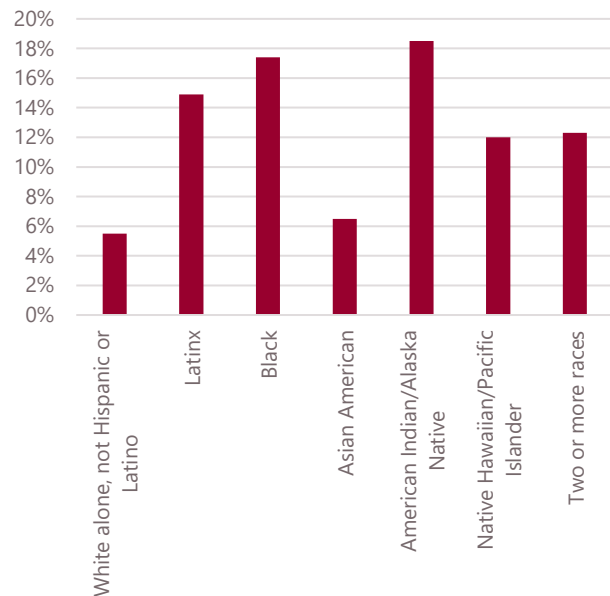
including racial and gender-based discrimination and harassment further shape access to jobs and advancement within them. Together, these dynamics mean that workers of color, especially women, tend to be in occupations with lower pay and fewer benefits, and less likely to move out of lower-level jobs.

Occupational segregation and discrimination result in significant wage gaps between people of color and white men (see Chart 3.1).<sup>30</sup> Compared to white people, people of

**Chart 3.2: Share Lacking Basic Employment Benefits**



**Chart 3.3: Share of Households Below Federal Poverty Line**



color also tend to have less access to supports (including paid leave and health insurance) that keep incomes stable through health and family crises (see Chart 3.2).<sup>31</sup> [As detailed in Section IV](#), they are less likely to be provided tools to build wealth that would guard against financial challenges. Before the pandemic, families of color were already more likely to experience poverty and financial hardship (see Chart 3.3),<sup>32</sup> and the situation has only worsened in the past year, [as Section I describes](#).

#### **IV. Racial Wealth Gaps Prevent Workers of Color from Building a Safety Net for Emergencies**

Everyone should have the resources to weather an income shock – a major illness, a lost job, a few missed paychecks – without losing their housing, running behind on bills or having to skip needed medical treatments. Yet the same workers who are least likely to have employment protections that would prevent these income shocks are also least likely to have other resources to fall back on.

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**52% OF BLACK ADULTS AND 45% OF LATINX ADULTS REPORTED THEY WOULD HAVE DIFFICULTY COVERING AN UNEXPECTED \$400 EXPENSE, COMPARED TO 29% OF WHITE ADULTS.**

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For centuries, law and policy in the United States not only prevented most Black, Indigenous, and other families of color from accumulating wealth, but in fact extracted labor and property from those groups, often by force, to create wealth largely for white families. The roots of racial wealth gaps reach back to the enslavement of African and Native American people, genocide of Native American tribes, thefts of land and exploitation of immigrants' labor. In recent generations, policymakers excluded families of color from accessing public programs that helped build the

middle class, such as higher education assistance and financial aid, affordable mortgages to build home equity, low-cost consumer banking, and capital to start businesses.<sup>33</sup> For example, the Federal Housing Administration refused to insure mortgages in and near Black communities until 1968, and today, Latinx and Black people are still more likely to be denied conventional mortgage loans than white people with similar qualifications.<sup>34</sup>

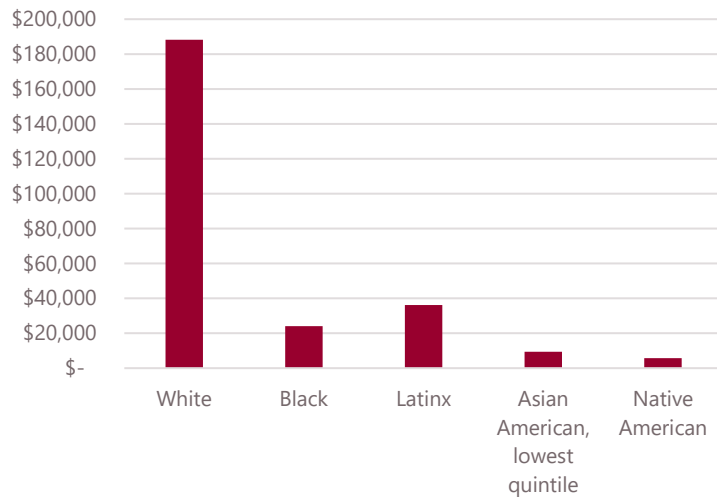
Structural inequities in who receives support and investment at critical moments, and who does not, persisted in the pandemic. For example, small businesses in majority-Black and majority-Latinx neighborhoods had to wait longer and were less likely to get Paycheck Protection Program loans and Black and Latinx adults were less likely to report receiving \$1,200 economic impact payments provided under the Coronavirus Aid, Relief,

and Economic Security Act.<sup>35</sup> As of July 2020, more than half of Black adults (52 percent), and nearly half of Latinx adults (45 percent), reported they would have difficulty covering an unexpected \$400 expense, compared to about three in ten white adults (29 percent).<sup>36</sup> These challenges are particularly acute for women of color, who are especially likely to be key breadwinners for their families: 79 percent of Black mothers, 64 percent of Native American mothers, 49 percent of Latina mothers and 43 percent of AAPI mothers are key breadwinners for their families.<sup>37</sup>

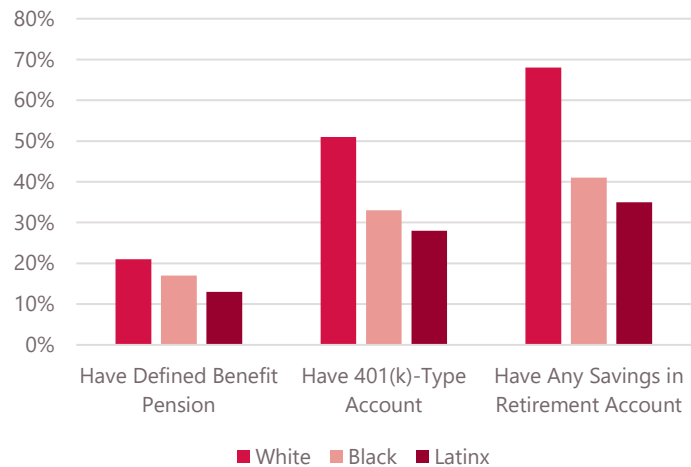
To draw attention to how white supremacy has undermined the long-term and intergenerational economic stability of Black and brown families, economists and advocates have increasingly looked to measures of gaps in wealth (typically defined as all assets minus all debts, or net

worth) between families or individuals in different racial categories.<sup>38</sup> As of 2019, the median white family<sup>39</sup> had a net worth of \$188,200, compared to just \$36,100 for the median Latinx family and \$24,100 for the median Black family (see Chart 4.1 and Chart 4.2).<sup>40</sup> Recent and disaggregated data for other groups is limited, but what exists points to significant challenges faced by Native American households and by many Asian Americans. As of 2013, median wealth for the bottom fifth of Asian American households was just \$9,319, and close to one in ten held no assets or was in debt.<sup>41</sup> Data for Native Americans is even more limited, with median wealth estimated at \$5,700 in 2000,<sup>42</sup> a single number that does not begin to reflect the diversity of experiences

**Chart 4.1: Median Family Wealth**



**Chart 4.2: Share with Any Retirement Savings, 2016**



among members of the 574 federally recognized tribes as well as members of non-recognized tribes.

The pandemic likely worsened these wealth gaps. One early indication is racial disparities in how households used their December economic impact payments. Among those whose households received payments, roughly similar shares of white, Black and Latinx people spent the funds (30, 26 and 25 percent respectively). But Latinx and Black people were more than one-third more likely than white people to use the payment to pay down debt, such as credit card balances or student loans (64 and 65 percent, compared to 46 percent). Meanwhile, while only a minority of recipients saved the payment (whether to spend later or put into savings), the share of white people who saved their payment was about twice that of Latinx people and nearly three times that of Black people (24 percent, compared to 12 and 9 percent).<sup>43</sup>

The lack of assets among so many families of color means that they are less likely to be able to plan for or absorb the costs of a serious personal or family health issue or caregiving need. As the pandemic has brought into sharp focus, without paid leave, and without wealth to draw on, people of color are often forced to forgo needed time away from work, putting their health or their families' health at risk. Otherwise, they face income and job losses that can quickly result in food and housing insecurity. A secure and inclusive paid leave program would provide essential financial support at these moments, providing a bridge to greater stability and wealth-building over time.

## **V. Workers of Color Need Paid Leave to Address Racism in Public Health and the Economy**

Across the long history of white supremacy in the United States, a through line connects the political suppression of people of color and their economic and bodily exploitation. Since the Civil War, that line also points to the power of federal programs and laws to disrupt political and economic discrimination, which are intertwined. In fact, recent research has found that the Voting Rights Act of 1965 shrank the wage gap between white and Black men.<sup>44</sup> While the Social Security program initially excluded occupations employing the majority of Black workers, after its expansion it became the cornerstone of economic security for older Black people, especially critical in light of the racial wealth gaps discussed earlier.<sup>45</sup> Federal minimum wage increases were critical in partially closing that wage gap in the late 1960s.<sup>46</sup> The Affordable Care Act significantly narrowed racial gaps in health insurance coverage by enrolling millions more in public health insurance through Medicaid and helping others purchase health insurance independent of their relationship to an employer.<sup>47</sup>

Ten states, including the District of Columbia, have passed paid family and medical leave programs. Designed as social insurance programs and largely publicly run, these systems ensure that workers are no longer dependent on employers to receive wage replacement when they have a major health or caregiving need. Most also go beyond the federal FMLA to provide job protection to more workers.

Evidence from these programs shows the promise that equitably-designed paid family and medical leave has for helping the country address not only economic inequities, but also the racial inequities in health that have been brought to the fore during the pandemic.

Systemic racism, often in combination with sexism, ableism and other forms of discrimination, harms the health of Black people, Native Americans, Latinx people and AAPI people in the United States in many ways, from increased exposure to toxic or infectious environments to the accumulated stress of discrimination to inequitable treatment by health care providers.<sup>48</sup> These structural inequities manifest in worse health outcomes, including chronic conditions like diabetes and asthma<sup>49</sup> and increased complications from pregnancy and childbirth and high rates of maternal mortality,<sup>50</sup> as well as the inequitable and dire consequences of major public health crises like the coronavirus pandemic. These health inequities, in addition to the [economic inequities outlined in Section III](#), make it particularly important to ensure that workers of color have paid leave to get the care they and their families need without undermining their finances.

Research shows that paid family and medical leave programs can help address these inequities. Paid leave helps people with health conditions maintain their incomes and jobs while enabling them to seek timely treatment and rest.<sup>51</sup> Paid leave supports elder care<sup>52</sup> and keeps family caregivers in the labor force,<sup>53</sup> including after a health shock.<sup>54</sup> Paid leave also reduces nursing home utilization<sup>55</sup> – a vital need given that nearly 40 percent of COVID-19 deaths have been connected to nursing homes and long-term care facilities,<sup>56</sup> and deaths have been higher in facilities with a higher percentage of residents of color.<sup>57</sup> Paid leave will also help address the maternal health crisis among BIPOC 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, the rates of preterm births and low birthweights fell, particularly among Black women.<sup>58</sup> State paid family leave programs increased parity in the duration of maternity leave taken between white women and women of color, as well as in rates of initiation of breastfeeding,<sup>59</sup> reduced rates of food insecurity in the year following a birth, especially for households with very low food security, which are disproportionately likely to be Black or Latinx,<sup>60</sup> and improved rates of on-time

vaccinations, with the strongest impact on families below the poverty line.<sup>61</sup> 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.<sup>62</sup>

### **Paid Family and Medical Leave for an Equitable Recovery**

Establishing paid family and medical leave programs at the federal or state levels can combat the health and economic inequities experienced by people of color in the United States – but the details matter. If paid family and medical leave programs are not crafted with the needs of people and women of color at the forefront, they can disproportionately exclude these families, thereby perpetuating inequitable access to leave while exacerbating the economic and health challenges associated with lack of paid leave. Fortunately, based on lessons learned from state paid family leave programs,<sup>63</sup> key aspects of an equitable program are already well-established.

**National, Inclusive Coverage:** Workers of color, particularly those in states where voter suppression has denied them a fair voice in policymaking, need a national paid leave program that covers all workers no matter where they live or work. Eligibility criteria should include all workers and should be based on all work and earnings history rather than employer size or other factors related to the current employer, so that inequities in the labor market resulting in part-time employment or shorter job do not become barriers to accessing paid leave.

**Public Administration:** For workers of color, who are more likely to experience an employer denying a leave request as well as violations of basic rights such as wage theft, the ability to access wage replacement through a public program is important for equity. Public administration also allows more timely and regular reporting about program utilization, enabling greater oversight.

**Job Protection:** Paid leave programs should include job protection so that workers of color can take paid leave without fear of being laid off. Research from current state paid leave programs finds that workers of color – particularly low-income workers of color – are less likely to take paid leave if they do not have job protection.

**Anti-Discrimination Protections:** Federal law prohibits discrimination on the basis of race, color and national origin and protects a worker who reports discrimination from retaliation, but workers of color continue to experience disproportionately high rates of discrimination and retaliation. Strong anti-discrimination and anti-retaliation language and enforcement are needed to make paid leave fully accessible to people of color.

**Meaningful Wage Replacement:** State paid leave insurance programs provide workers with a percentage of their wages, similar to other social and private insurance programs, such as short-term disability and unemployment insurance. To make paid leave accessible to workers of color, who so often face wage discrimination and barriers to career advancement, the wage replacement rate should be as close to 100 percent as possible, particularly for people with lower incomes.

**Portability and Coverage Across Multiple Jobs:** Paid leave should be portable so that it is attached to the worker rather than the employer, which would help workers of color in particular because they would not be penalized for changing jobs or holding multiple jobs. A national paid leave program should include contingent workers, independent contractors and self-employed people, including small business owners. This inclusive coverage is important not only for entrepreneurs of color and true independent workers, but also to ensure that workers of color are not unjustly excluded from paid leave as a result of misclassification.

**Meaningful and Comprehensive Leave:** For paid leave to be adequate, it must provide a meaningful duration of leave – at least 12 weeks for parental, family care and medical leave. It must have a broad and inclusive definition of “family” to reflect the diversity of forms that family takes. Any paid leave program that does not provide meaningful and gender-neutral leave for all purposes will not meet the full needs of people of color.

**Dedicated Funding for Outreach, Education and Enforcement:** Paid leave programs should include a plan for equitably designed implementation. Research on current state paid leave programs finds that workers of color are less likely to be aware of the programs, the benefits they provide, how to qualify and how to apply. This makes dedicated funding for outreach, education and enforcement to ensure equitable program usage and treatment by employers critical.

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<sup>1</sup> Chen, Y. H., Glymour, M., Riley, A., Balmes, J. et al. (2021, January 22). “Excess Mortality Associated with the COVID-19 Pandemic among Californians 18–65 Years of Age, by Occupational Sector and Occupation: March through October 2020.” *MedRxiv*. doi:10.1101/2021.01.21.21250266; U.S. Bureau of Labor Statistics. (2021, January 22). *Current Population Survey, Household Data, Annual Averages (Table 11. Employed persons by detailed occupation, sex, race, and Hispanic or Latino ethnicity)*. Retrieved 11 February 2021, from <https://www.bls.gov/cps/cpsaat11.htm>

<sup>2</sup> APM Research Lab. (2021, March 2). *The Color of Coronavirus: COVID-19 Deaths by Race and Ethnicity in the U.S.* Retrieved 8 March 2021, from <https://www.apmresearchlab.org/covid/deaths-by-race>. The white population in the United States skews older than other groups, and so would be expected to make up a large share of COVID-19 deaths on that numerical basis. The high relative mortality



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rates for most BIPOC groups, after adjusting for age, reveal that Pacific Islanders, Latinx people, Native people and Black people are dying at higher rates at comparatively younger ages.

<sup>3</sup> See note 1.

<sup>4</sup> Centers for Disease Control and Prevention, National Center for Health Statistics. (2020, February 10). *Health Disparities: Race and Hispanic Origin*. Retrieved 10 March 2021, from [https://www.cdc.gov/nchs/nvss/vsrr/covid19/health\\_disparities.htm](https://www.cdc.gov/nchs/nvss/vsrr/covid19/health_disparities.htm)

<sup>5</sup> See note 2.

<sup>6</sup> Ruiz, N. G., Menasce Horowitz, J., & Tamir, C. (2020, July). *Many Black and Asian Americans Say They Have Experienced Discrimination Amid the COVID-19 Outbreak*. Retrieved 10 March 2021, from Pew Research Center website: <https://www.pewresearch.org/social-trends/2020/07/01/many-black-and-asian-americans-say-they-have-experienced-discrimination-amid-the-covid-19-outbreak/>; Lee, S., & Waters, S. F. (2020). Asians and Asian Americans' experiences of racial discrimination during the COVID-19 pandemic: Impacts on health outcomes and the buffering role of social support. *Stigma and Health*. Advance online publication. doi:10.1037/sah0000275

<sup>7</sup> National Partnership analysis of U.S. Census Bureau. (2021). *Household Pulse Survey Public Use Files*. Retrieved 8 March 2021, from <https://www.census.gov/programs-surveys/household-pulse-survey/datasets.html>. National Partnership analysis by race and ethnicity of respondents reporting not working in the previous seven days because they were sick with coronavirus symptoms. Due to small sample size, data for Asian Americans and those reporting another or more than race were not available for all weeks.

<sup>8</sup> See for example Kumar, S., Crouse Quinn, S., Kim, K. H., Daniel, L. H., & Freimuth, V. S. (2012, January). The Impact of Workplace Policies and Other Social Factors on Self-Reported Influenza-Like Illness Incidence During the 2009 H1N1 Pandemic. *American Journal of Public Health, 102*(1), 134-140. doi:10.2105/AJPH.2011.300482

<sup>9</sup> Pichler, S., Wen, K., & Ziebarth, N. R. (2020, October). COVID-19 Emergency Sick Leave Has Helped Flatten The Curve In The United States. *Health Affairs, 39*(12), doi:10.1377/hlthaff.2020.00863. While large employers are somewhat more likely to offer paid family leave and paid sick leave, many do not or fail to cover all their employees. An analysis of shift workers at 91 large employers, not covered by the law, indicates more than half lacked access to paid leave, and at fast food companies, three quarters or more. See Schneider, D., & Harknett, K. (2020). *Estimates of Workers Who Lack Access to Paid Sick Leave at 91 Large Service Sector Employers*. The Shift Project at Harvard University. Retrieved 10 March 2021, from <https://shift.hks.harvard.edu/paid-sick-leave-brief/>

<sup>10</sup> Federal Reserve Board of St. Louis. (2021, February). *Federal Reserve Economic Data, Series LNS12000032, LNU02000035, LEU0254468300Q, LEU0264468300Q, LNS12000029, LNS12000028, LNU02000034, LNS12000031, LEU0254468200Q and LEU0264468200Q, January 2020–December 2020*. Retrieved 10 March 2021, from <https://fred.stlouisfed.org/>. Analysis of employment levels for White, African American and Hispanic men and women 20 years and older, and estimates of employed part time: wage and salary workers for Asian men and women 16 years and over; data for Asian workers reported quarterly and only available through Q3 2020 as of February 10, 2021.

<sup>11</sup> Contractor, H. J. (2021, February). Analysis of Current Population Survey data. Personal correspondence from the author, Former Economic Policy Advisor to Secretary of Labor Tom Perez. Available on request at the National Partnership for Women & Families.

<sup>12</sup> Federal Reserve Bank of St. Louis. (n.d.) Employment Population Ratio – Asian (LNU02332183). Retrieved 10 March 2021, from <https://fred.stlouisfed.org/series/LNU02332183>; See also U.S. Department of Labor. (2019). *The Economic Status of Asian Americans and Pacific Islanders in the Wake of the Great Recession*. Retrieved 25 February 2021, from <http://asianchamberphila.org/wp-content/uploads/2019/05/20140828-AAPI.pdf>

<sup>13</sup> U.S. Census Bureau. (2021). *Household Pulse Survey, Weeks 1-23, April 23, 2020 - February 1, 2021. (Table 2 or 2b. Food Sufficiency for Households, in the Last 7 Days, by Select Characteristics: United States, Table 1a., Last Month's Payment Status for Owner-Occupied Housing Units, by Select Characteristics: United States and Table 1b., Last Month's Payment Status for Renter-Occupied Housing Units, by Select Characteristics: United States)*. Retrieved 10 March 2021, from <https://www.census.gov/programs-surveys/household-pulse-survey/data.html>. Share behind on mortgage includes individuals in owner-occupied housing reporting being not currently caught up on mortgage payments and, for April through July 2020, those reporting deferred payments. Share behind on rent includes renters reporting being not currently caught up on rent and, for April through July 2020, those reporting deferred rent.

<sup>14</sup> Leifheit, K. M., Linton, S. L., Raifman, J., Schwartz, G., et al. (2020, November). Expiring Eviction Moratoriums and COVID-19 Incidence and Mortality. Preprint available at SSRN. doi:10.2139/ssrn.3739576

<sup>15</sup> Brown, S., Herr, J., Roy, R., & Klerman, J. A. (2020, July). *Employee and Worksite Perspectives of the Family and Medical Leave Act: Results from the 2018 Surveys*. Retrieved 10 March 2021, from U.S. Department of Labor website: [https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDFMLA2018SurveyResults\\_FinalReport\\_Aug2020.pdf](https://www.dol.gov/sites/dolgov/files/OASP/evaluation/pdf/WHDFMLA2018SurveyResults_FinalReport_Aug2020.pdf)

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<sup>16</sup> U.S. Bureau of Labor Statistics. (2020). *Current Population Survey, Household Data Annual Averages (Table 22, Persons at work in nonagricultural industries by age, sex, race, Hispanic or Latino ethnicity, marital status, and usual full- or part-time status)*. Retrieved 10 March 2021, from <https://www.bls.gov/cps/cpsaat22.htm>

<sup>17</sup> Color of Change, National Employment Law Project, TIME'S UP Foundation, & ILR Worker Institute. (2021). *Foundations for a Just Recovery: Economic Security, Health and Safety, and Agency and Voice in the COVID-19 Era*. Retrieved 10 March 2021, from <https://www.nelp.org/wp-content/uploads/Foundations-for-Just-Inclusive-Recovery-Report.pdf>

<sup>18</sup> Quillian, L., Pager, D., Hexel, O., & Midtboen, A. H. (2017, September 12). *Meta-analysis of field experiments shows no change in racial discrimination in hiring over time*. PNAS Publication. Retrieved 10 March 2021, from <http://www.pnas.org/content/114/41/10870>;

<sup>19</sup> Cunningham, E. (2018, April). Great Recession, great recovery? Trends from the Current Population Survey. *Monthly Labor Review*. Retrieved 10 March 2021, from U.S. Bureau of Labor Statistics website: <https://www.bls.gov/opub/mlr/2018/article/great-recession-great-recovery.htm>

<sup>20</sup> See note 15; Joshi, P., Baldiga, M. & Huber, R. (2020, January 16). Unequal access to FMLA leave persists. Retrieved 10 March 2021 from DiversityDataKids website: <https://www.diversitydatakids.org/research-library/data-visualization/unequal-access-fmla-leave-persists>

<sup>21</sup> U.S. Bureau of Labor Statistics. (2020). *Employee Tenure News Release (Table 3. Distribution of employed wage and salary workers by tenure with current employer, age, sex, race, and Hispanic or Latino ethnicity, January 2020)*. Retrieved 10 March 2021, from <https://www.bls.gov/news.release/tenure.htm>

<sup>22</sup> U.S. Bureau of Labor Statistics. (2019). *American Time Use Survey, Access to and Use of Leave (Table 2. Workers with access to paid or unpaid leave by selected characteristics, averages for the period 2017-2018)*. Retrieved 10 March 2021, from <https://www.bls.gov/news.release/leave.t02.htm>

<sup>23</sup> See note 15, Brown et al. (2020). In the analysis, "Other" includes respondents identifying as Native American, Pacific Islander and more than one race.

<sup>24</sup> Ibid, Exhibit 6-3.

<sup>25</sup> U.S. Census Bureau. (2021). *Household Pulse Survey, Public Use Files, for weeks 1, 2, and 21*. Retrieved 8 March 2021, from <https://www.census.gov/programs-surveys/household-pulse-survey/datasets.html>. National Partnership analysis by race and ethnicity of respondents reporting not working in the previous seven days because they were sick with coronavirus symptoms. Due to small sample size, data for Asian Americans and those reporting another or more than race were not available for all weeks.

<sup>26</sup> Hertel-Fernandez, A., Naidu, S., Reich, A., & Youngblood, P. (2020, June). *Understanding the COVID-19 Workplace: Evidence from a Survey of Essential Workers*. Roosevelt Institute Publication. Retrieved 10 March 2021, from [https://rooseveltinstitute.org/wp-content/uploads/2020/07/RI\\_SurveyofEssentialWorkers\\_IssueBrief\\_202006-1.pdf](https://rooseveltinstitute.org/wp-content/uploads/2020/07/RI_SurveyofEssentialWorkers_IssueBrief_202006-1.pdf)

<sup>27</sup> See note 17.

<sup>28</sup> Katznelson, I. (2005). *When Affirmative Action Was White: An Untold History of Racial Inequality in Twentieth-Century America*. New York: W. W. Norton. Several historians identify this dynamic particularly in relation to the regional setting of relief payments and unemployment insurance benefit levels. Katznelson cites Works Progress Administration records showing that in cotton-growing regions, Black workers received lower work relief payments than whites and were less likely to be offered relief at all, writing "Relief payments were calibrated not to undercut the labor market. Recipients were not to receive more money on the dole than they would be earning if they had a job."

<sup>29</sup> U.S. Bureau of Labor Statistics. (2020, September). *National Compensation Survey: Employee Benefits in the United States, March 2020 (Tables 2, 9, 16 and 31, private industry)*. Retrieved 10 March 2021, from <https://www.bls.gov/ncs/ebs/benefits/2020/employee-benefits-in-the-united-states-march-2020.pdf>

<sup>30</sup> U.S. Census Bureau. (2020, September). *American Community Survey 1-Year Estimates 2019. Tables B20017B, B20017C, B20017D, B20017E, B20017G, B20017H, B20017I: Median Earnings in the Past 12 Months (in 2019 Inflation-Adjusted Dollars) by Sex by Work Experience in the Past 12 Months for the Population 16 Years and Over with Earnings in the Past 12 Months*. Retrieved 10 March 2021, from <https://data.census.gov>. Median earnings of men and women working full time, year-round.

<sup>31</sup> U.S. Bureau of Labor Statistics. (2019). *American Time Use Survey, Access to and Use of Leave (Table 2. Workers with access to paid or unpaid leave by selected characteristics, averages for the period 2017-2018)*. Retrieved 10 March 2021, from

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<sup>32</sup> U.S. Census Bureau. (2020, September). *American Community Survey 1-Year Estimates 2019. Table S1702: Poverty Status in the Past 12 Months of Families*. Retrieved 10 March 2021, from <https://data.census.gov>

<sup>33</sup> Asante-Muhammed, D., et al. (2017, September). *The Road to Zero Wealth: How the Racial Wealth Divide is Hollowing Out America's Middle Class*. Prosperity Now and Institute for Policy Studies Publication. Retrieved 10 March 2021, from [https://prosperitynow.org/sites/default/files/PDFs/road\\_to\\_zero\\_wealth.pdf](https://prosperitynow.org/sites/default/files/PDFs/road_to_zero_wealth.pdf)

<sup>34</sup> Rothstein, R. (2017). *The Color of Law: A Forgotten History of How Our Government Segregated America*. New York: Liveright Publishing; see also Glantz, A., & Martinez, E. (2018, February 15). "For people of color, banks are shutting the door to homeownership." *Reveal*, from *The Center for Investigative Reporting*. Retrieved 10 March 2021, from <https://www.revealnews.org/article/for-people-of-color-banks-are-shutting-the-door-to-homeownership/>

<sup>35</sup> Liu, S., & Parilla, J. (2020, September 17). *New data shows small businesses in communities of color had unequal access to federal COVID-19 relief*. Retrieved 10 March 2021, from Brookings Institution website: <https://www.brookings.edu/research/new-data-shows-small-businesses-in-communities-of-color-had-unequal-access-to-federal-covid-19-relief/>; Grotto, J., Mider, Z. R., & Sam, C. (2020, July 30). "White America Got a Head Start on Small-Business Virus Relief." *Bloomberg News*. Retrieved 10 February 2020, from <https://www.bloomberg.com/graphics/2020-ppp-racial-disparity/>; Holtzblatt, J. & Karpman, M. (2020, July). Who Did Not Get the Economic Impact Payments by Mid-to-Late May, and Why? Retrieved 10 March 2021, from Tax Policy Center website: <https://www.taxpolicycenter.org/publications/who-did-not-get-economic-impact-payments-mid-late-may-and-why/full>

<sup>36</sup> Board of Governors of the Federal Reserve System. (2020, September). *Update on the Economic Well-Being of U.S. Households: July 2020 Results (Table 4. Would cover a \$400 emergency expense completely using cash or its equivalent (by year))*. Retrieved 10 March 2021, from U.S. Federal Reserve Board website: <https://www.federalreserve.gov/publications/files/2019-report-economic-well-being-us-households-update-202009.pdf>. Notably, this survey was conducted after the distribution of \$1200 Economic Impact Payments and before the expiration of \$600 weekly supplemental UI benefits, both of which dramatically bolstered economic security for eligible households.

<sup>37</sup> 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 10 March, 2021, from Institute for Women's Policy Research website: <https://iwpr.org/wp-content/uploads/2020/07/Holding-Up-Half-the-Sky-Mothers-as-Breadwinners.pdf>. Key breadwinners are defined as individuals who contribute at least 40 percent of the household's earnings.

<sup>38</sup> See for example Darity Jr., W., Hamilton, D., Paul, M., Aja, A. et al. (2018, April). *What We Get Wrong about Closing the Racial Wealth Gap*. Samuel DuBois Cook Center on Social Equity Publication. Retrieved 10 March 2021, from [https://socialequity.duke.edu/sites/socialequity.duke.edu/files/site-images/FINAL%20COMPLETE%20REPORT\\_.pdf](https://socialequity.duke.edu/sites/socialequity.duke.edu/files/site-images/FINAL%20COMPLETE%20REPORT_.pdf)

<sup>39</sup> In the Federal Reserve Board analysis, "family" refers to a person and any others within the household who are economically interdependent with them, does not indicate any legal relationship or particular family structure, and includes units of a single person. The racial category and other attributes of each family for the analysis is based on those of a reference person in each unit. See Appendix, *Changes in U.S. Family Finances from 2016 to 2019: Evidence from the Survey of Consumer Finances*, <https://www.federalreserve.gov/publications/files/scf20.pdf>. While it is beyond the scope of this brief, it is important to note that wealth gaps are intersectional. They are not only a matter of differences between white families and families of color, but also between working and lower middle classes that are disproportionately BIPOC, a much whiter upper middle class, and an almost exclusively white top one percent. At the same time, families of color tend to have lower wealth than white families even at the same income levels.

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- <sup>47</sup> See note 31, Artiga, S., Orgera, K., & Damico, A. (2020, March 5).
- <sup>48</sup> See Krieger, N. (2020, April). Measures of Racism, Sexism, Heterosexism, and Gender Binarism for Health Equity Research: From Structural Injustice to Embodied Harm—An Ecosocial Analysis. *Annual Review of Public Health*, 41, 37-62. doi:10.1146/annurev-publhealth-040119-094017
- <sup>49</sup> Price, J. H., Khubchanda, J., McKinney, M., & Braun, R. (2013, September). Racial/Ethnic Disparities in Chronic Diseases of Youths and Access to Health Care in the United States. *BioMed Research International*, doi:10.1155/2013/787616
- <sup>50</sup> National Partnership for Women & Families. (2018, April). *Black Women's Maternal Health: A Multifaceted Approach to Addressing Persistent and Dire Health Disparities*. Retrieved 10 March 2021, from <https://www.nationalpartnership.org/our-work/resources/health-care/maternity/black-womens-maternal-health-issue-brief.pdf>; National Partnership for Women & Families. (2019, October). *American Indian and Alaska Native Women's Maternal Health: Addressing the Crisis*. Retrieved 10 March 2021, from <https://www.nationalpartnership.org/our-work/resources/health-care/maternity/american-indian-and-alaska.pdf>
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The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at [NationalPartnership.org](http://NationalPartnership.org).

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