Dear Senator Hickman, Representative Sylvester, and Members of the Joint Standing Committee on Labor and Housing,

Only 15% of American workers have access to any sort of paid leave,¹ and fewer than 60% of the workforce has access to unpaid leave under the Family Medical Leave Act. Among those, many don't take leave, because they can't afford unpaid time off of work.² This leads to disruption in the workforce, negative public health outcomes, and struggling families, communities, and employers.

LD 1559 is an opportunity for working Mainers, businesses, experts, and the Maine government to work together to identify how to implement a system of paid family and medical leave for Maine. This bill will create a commission to take public feedback, to learn from what works in states with established systems of leave, to hear from workers, employers, caregivers, and experts, and to propose a system to support all workers, families, and employers in Maine.

PFML is COVID response.

COVID-19 has led to unprecedented levels of job loss. When employees have to quarantine or care for young children because COVID-19 has closed a school or daycare, everyone struggles. Workers need paid leave to deal with the numerous challenges of the pandemic without risking unemployment or financial insecurity.

PFML is racial justice.

Black workers are only 1.3 percent of the workforce in Maine, but they are 31 percent more likely than white workers to be on the frontlines.³ Comprehensive paid leave would reduce the racial disparity in access to workplace benefits, and would support Maine's frontline workers who are disproportionately non-white.

PFML supports gender equity.

Women are more likely to need time for postpartum recovery, to provide family caregiving, and are more than two-thirds (roughly 68 percent) of Maine's frontline workers.⁴ Women are also more likely than men to leave the workforce due to essential caregiving responsibilities. COVID-19 has widened this gap, and women have been disproportionately impacted by COVID-era job losses. Paid family and medical leave supports gender equity.

¹ U.S. Department of Labor, Bureau of Labor Statistics. (2017, September). Employee Benefits in the United States National Compensation Survey: Employee Benefits in the United States, March 2017 (Tables 16 and 32). Retrieved 16 October 2017, from https://www.bls.gov/ncs/ebs/benefits/2017/ebbl0061.pdf

² Klerman, J., Daley, K., & Pozniak, A. (2012, September 7). Family and Medical Leave in 2012: Technical Report (p. 21). Abt Associates Publication. Retrieved 4 March 2015, from http://www.dol.gov/asp/evaluation/fmla/FMLA-2012-Technical-Report.pdf

³ MECEP analysis of US Census Bureau, American Community Survey, 2014-2018 5-Year Estimates for Maine, retrieved by Sarah Austin (2020).

⁴ MECEP analysis of US Census Bureau, American Community Survey, 2014-2018 5-Year Estimates for Maine, retrieved by Sarah Austin (2020).

PFML supports aging adults.

At least 80% of older adults have at least one chronic condition⁵ and Maine has the highest median age of any state in the country.⁶ Aging workers need access to paid leave in order to care for their own health, and their family members need paid leave to provide family care.

PFML helps infants thrive.

Paid leave gives new parents time to bond, increases breastfeeding success, increases likelihood of immunizations and check-ups, and increases the likelihood of both parents returning to work.⁷

PFML aids recovery.

Treatment for substance use disorder reduces long-term health impacts and increases worker productivity for affected populations.⁸ 75% of people living with substance use disorder are employed⁹ and working Mainers in need of recovery assistance should be able to take the time they need to become healthy without losing their job and income.

PFML supports small businesses.

By providing paid leave to all Maine businesses, smaller businesses would be able to attract workers, reduce turnover costs, and retain their employees even when they have to take time away. For example, new mothers who have access to paid leave are more likely to be back at work within 9-12 months than those who do not.¹⁰

PFML works.

5 National Contar for Chronic Dis

fromhttp://www.cdc.gov/chronicdisease/resources/publications/aag/pdf/2011/Healthy_Aging_AAG_508.pd f

2017,https://aspe.hhs.gov/system/files/pdf/255486/PFL.pdf.

⁵ National Center for Chronic Disease Prevention and Health Promotion. (2011). Healthy Aging: Helping People to Live Long and Productive Lives and Enjoy a Good Quality of Life. U.S. Center for Disease Control and Prevention Publication. Retrieved 4 November 2015,

⁶ Pamela Winston, Ariel Pihl, Lincoln Groves, Colin Campbell, Elizabeth Coombs, and Sharon Wolf, Exploring the Relationship Between Paid Family Leave and Well-being of Low-Income Families: Lessons from California, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation Office of Human Services Policy,

⁷ U.S. Department of Health and Human Services (HHS), O ce of the Surgeon General, Facing Addiction in America: e Surgeon General's Spotlight on Opioids. Washington, DC: HHS, September 2018.

⁸ National Center for Chronic Disease Prevention and Health Promotion. (2011). Healthy Aging: Helping People to Live Long and Productive Lives and Enjoy a Good Quality of Life. U.S. Center for Disease Control and Prevention Publication. Retrieved 4 November 2015,

fromhttp://www.cdc.gov/chronicdisease/resources/publications/aag/pdf/2011/Healthy_Aging_AAG_508.pd f

⁹ Goplerud, E., Hodge, S., & Benham, T. (2017). A Substance Use Cost Calculator for US Employers With an Emphasis on Prescription Pain Medication Misuse. Journal of occupational and environmental medicine, 59(11), 1063–1071. https://doi.org/10.1097/JOM.00000000001157

¹⁰ MECEP analysis of US Census Bureau, American Community Survey, 2014-2018 5-Year Estimates for Maine, retrieved by Sarah Austin (2020).

Paid Leave programs in other states have shown a substantial benefit to middle and low-income workers while having few negative impacts on businesses. Small businesses are less likely to report any negative impacts of statewide paid leave programs than larger ones.¹¹

Mainers Are Ready for PFML.

A nonpartisan independent statewide poll in October 2020 showed that 75.5% of Mainers support the creation of a Paid Family and Medical Leave program in our state (72% in Congressional District 1; 79% in CD2). Support is bipartisan: 87.9% of Democrats, 73.7% of Independents, 66.3% of Republicans would "support" or "very strongly support" a system of paid leave in Maine.¹²

The Paid Family & Medical Leave Commission will ensure that we don't go back to systems that weren't working before the global pandemic. It will help us identify how to rebuild new systems that work for all Mainers, so Maine can thrive.

Sincerely,

Jeannette Eaton, Alna Nickole Wesley, Portland Kelli Whitlock Burton, Waldoboro Kara Kaikini, Freeport Kathryn Harnish, Houlton Tracey FAlla, Cumberland Emilie Swenson, Portland Lyn Grotke, Unity Nicole Pineau, Portland Ashley Zipp, Biddeford Danielle McKee, Standish Sandra Haggard, Dixmont Leah Deragon, Portland Gretchen Johnson, Cape Elizabeth Jody Harris, Augusta Sharon Vandermay, New Gloucester Jean Hardy, Belfast Carolyn MacRae, Waterville Catherine Fisher, Freeport Christina Rusnov, Winslow Andrea Berry, North Yarmouth Amy Blackstone, Bangor Aura Russell-Bedder, Portland Linda Rose, Union Cheryl Robertson, Orono Silver Shea, Falmouth

¹¹ AppleBaum, E. A., & Milkman, R. M. (2011). Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California. https://cepr.net/documents/publications/paid-family-leave-1-2011.pdf

¹² Pan-Atlantic Research (2020). 2020 Omnibus Survey.

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