

## Paid Sick Days: A Health Policy for Everyone

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When the H1N1 pandemic broke out, the Centers for Disease Control and Prevention urged sick people to stay home. Unfortunately, for many Americans, staying home meant losing income, losing a good shift, or worse, losing their job.

*I could not imagine the situation I faced compounded by parents who would have to say, "I'm sorry, I can't leave my work, I can't lose my job." It would have been disastrous.*

– Mary Pappas, a school nurse who first spotted H1N1 at a parochial school in New York City, sent home 182 students (Family Values at Work 2009)

### A SURPRISING NUMBER OF WORKERS DO NOT HAVE PAID SICK DAYS

Thirty-nine percent of private sector workers in America do not have paid sick days (Human Impact Partners 2009). Paid sick days provide workers with a limited number of paid days off to take care of their own or their dependents' medical needs. Low-wage workers are 2.5 times less likely than high-

wage workers to have a single paid day off when sick. Workers least likely to have paid sick days are most likely to come into contact with customers, the elderly, and children. Between 50 and 85 percent of home health care, child care, and food service workers lack paid sick days.

### WHY PAID SICK DAYS MATTER TO HEALTH FUNDERS

Ensuring workers have paid sick days improves public health by reducing communicable disease transmission – in restaurants, daycares, schools, nursing homes, and the workplace. Studies found that people working while ill with H1N1 may have infected seven million additional people (Drago 2010).

Parents with paid sick days are more likely to stay home and care for sick children. Yet low-income parents often have to decide between caring for their children and paying the bills, exacerbating socioeconomic health disparities. Eighty percent of low-income people, 50 percent of Hispanics, and 40 percent of working mothers whose children have asthma and other chronic diseases do not have paid sick days (Human Impact Partners 2009). Lack of paid sick days is also a barrier to low-income women of color accessing prenatal care, potentially contributing to their higher maternal mortality rates (Amnesty International 2010).

*[T]his... is an issue of health equity. People should be able to stay home and take care of themselves and their children when they are sick regardless of their race or their socioeconomic status. They should not have to pump their children full of Tylenol, and send them to daycare or school against medical advice.*

– Barbara Ferrer, Boston Public Health Commission (Family Values at Work 2009)

### PAID FAMILY AND MEDICAL LEAVE

The federal Family and Medical Leave Act (FMLA) provides 12 weeks of *unpaid* job-protected leave, effectively excluding millions of workers who cannot afford to take leave without pay. Paid sick days and paid family and medical leave are complementary – the former covers short-term illness and preventative care, while the latter covers health and care giving needs for longer durations. Paid leave benefits the health of mothers by allowing them time to recover after childbirth, of children by encouraging breast feeding and parental bonding, and of people of all ages with serious health conditions who need family members to care for them. Three states have such policies (California, New Jersey, and Washington), there are active campaigns in other states, and the Obama Administration's proposed budget includes a \$50-million fund to help states establish family and medical leave insurance pools (Office of Management and Budget 2010).

Paid sick days are a key to successful health care reform. Universal health coverage is less meaningful if people cannot take time off from work to go to the doctor. Guaranteeing paid sick days can contribute to cost containment. Research suggests paid sick days reduce emergency room visits by allowing time for people to see doctors during business hours, increase use of preventative care, and allow for better and less costly management of chronic conditions. The cost of non-urgent emergency room use is estimated at \$20 to \$32 billion annually (Miller 2010).

## THE HEALTHY FAMILIES ACT AND OTHER POLICY SOLUTIONS

Paid sick days legislation has passed in San Francisco; Washington, DC; and Milwaukee (Center for Law and Social Policy 2009). There are active campaigns in 13 states, four cities, and at the federal level. The Healthy Families Act of 2009, supported by President Obama and 86 percent of Americans, would guarantee up to seven days paid time off a year (NORC 2008).

*No one wants to work sick or send contagious children to school. And no one wants sick workers to serve them food, cough in the next cubicle, grab onto their subway pole, or drive with medications that impair their abilities.*

– (Reiss et al. 2009)

Paid sick days do not have a negative impact on business or the economy. Of the world's 15 most competitive countries, only the United States does not provide paid sick leave (Heymann 2010).

## FOUNDATIONS CAN PROMOTE PAID SICK DAYS

Foundations have a crucial role to play in increasing access to paid sick days. The Ford Foundation comes to this through its longstanding commitment to improving the jobs and living standards of low-wage workers. With its focus on vulnerable children and families, The Annie E. Casey Foundation recognizes that too many working parents lose wages, career advancement opportunities, and job security when they stay home to recover or care for a sick child or parent. The Blue Cross Blue Shield of Massachusetts Foundation supports the Massachusetts paid sick day campaign from its interest in expanding access to health care.

- **Coalition Building, Public Education, and Outreach** – Increased foundation support for coalitions that include health organizations and practitioners – school nurse associations, pediatricians, public health officials, and minority health and eldercare organizations – increases the efficacy of paid sick day campaigns. Once laws are enacted, health organizations also need funding to inform the public – especially low-income and communities of color – about this new workplace standard.
- **Health Impact Assessments (HIAs)** – HIAs use a variety of tools to make the health impacts of social policies and programs more transparent. Foundations have supported several HIAs demonstrating the public and individual health impacts of paid sick days, and more are needed in additional states.
- **Other Research** – Research is needed on interactions among paid sick days, health access and cost containment, and the affordability of care.

## NATIONAL ORGANIZATIONS

- A Better Balance – [www.abetterbalance.org](http://www.abetterbalance.org)
- Center for American Progress – [www.americanprogress.org](http://www.americanprogress.org)
- Center for Law and Social Policy – [www.clasp.org](http://www.clasp.org)
- Family Values @ Work – [www.familyvaluesatwork.org](http://www.familyvaluesatwork.org)
- Institute for Women's Policy Research – [www.iwpr.org](http://www.iwpr.org)
- National Partnership for Women and Families – [www.nationalpartnership.org](http://www.nationalpartnership.org) & [www.paidicksdays.org](http://www.paidicksdays.org)
- Restaurant Opportunities Centers – [www.rocunited.com](http://www.rocunited.com)

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