November 1, 2017

Dear Members of Congress:

We, the undersigned 113 researchers of aging, work and family issues from multiple disciplinary perspectives and institutions across the country, write this letter in support of making paid family and medical leave available to all working families.^{*} After a careful review of the evidence, we strongly urge the adoption of a United States national paid family and medical leave policy, specifically, the elements of the FAMILY Act (S.337 / H.R. 947) and similar legislative proposals. We ask that you cosponsor the bill in your respective legislative body.

Only 15 percent of the U.S. workforce has access to paid family leave through employers, and less than 40 percent has access to personal medical leave through employer-provided short-term disability insurance.¹ While the Family and Medical Leave Act (FMLA) of 1993 (Public Law 103-3) provides important job protection for workers taking *unpaid* time to address a serious personal medical issue or care for an ill family member, less than 60 percent of the workforce is eligible for its protections, and many eligible workers who need FMLA leave cannot afford to take it.²

Millions of working people are serving as family caregivers to aging parents and other family members – sometimes while still caring for children at home. Many of these family caregivers are struggling to manage both their caregiving responsibilities and their jobs because workplace policies do not address this growing reality. Moreover, as our workforce and population continues to age, family caregivers and older workers will likely need paid leave to care for their own personal medical conditions as well. It is imperative that the U.S. updates its workplace policies to enable working people to care for their families and themselves and maintain their jobs, while also contributing to the economy and saving for retirement.

Paid Family and Medical Leave Would Ease the Burdens of Working Caregivers Currently, 43.5 million Americans provide care to family members³. More than half of them work full time while another 16 percent work more than 30 hours per week.⁴ Among workers 45 to 64 years old (who comprise 36 percent of the labor force), 22 percent provide care for an aging parent.⁵ More than four-fifths of *all* family caregivers are of traditional working age (18 to 64 years old).⁶ The majority provide care for family members who have disabilities, are chronically ill, very old, isolated, or in need of end-of-life care.

The need to provide caregiving can cause significant financial strains and conflict. Nearly 80 percent of these caregivers report having out-of-pocket caregiving costs averaging nearly \$7,000, or 20 percent of their income.⁷ These costs are particularly onerous for caregivers who do not have paid leave or who must exit the workforce to care for a family member. Nearly half (48 percent) of caregivers who take time away from work to fulfill their eldercare responsibilities report losing income.⁸ Of this group, more than half (52 percent)

^{*}Signatories to this letter are expressing their personal views and make no representations about the views of the institutions with which they are affiliated.

said they had to leave their jobs because their employers did not allow the flexibility needed to work and provide elder care.⁹ Their economic losses are astounding. The average caregiver over age 50 who leaves the workforce to care for a parent loses more than \$300,000 in wages and retirement income.¹⁰

Caregivers also can experience physical and emotional problems, especially high levels of stress and depression.¹¹ Informal caregivers have a weaker relationship with the labor force and are more likely to live in poverty in later life than non-caregivers.¹²

The Need for Paid Family and Medical Leave Will Only Continue to Grow The population of adults age 65 and older will nearly double within the next few decades.

caring for children and loved ones with serious health conditions. California's program, in place for more than a decade, is the most studied. California workers have filed approximately 2.1 million leave claims since the state implemented its family leave insurance program in 2004.²⁰ Those workers and their families have experienced positive economic and health effects.²¹ Importantly, the vast majority of California employers report positive impacts on employee productivity, profitability and performance, or at least no negative effects.²² Even the Society for Human Resource Management, one of the chief opponents of paid family leave in California, issued a report finding that the law had created "relatively few" new burdens for employers and that employers' concerns about the program "have so far not been realized."²³ Similarly, a survey of New Jersey employers found that a majority did not experience negative effects on profitability or increased paperwork, and no employer was aware of a single instance of the program being abused.²⁴

The United States Needs a National Paid Leave Standard

The need for workplace supports to help family caregivers and older adults manage their care responsibilities and their own health in order to live meaningful and productive lives is pressing. It is past time to ensure that all working people have access to paid family and medical leave. The nation must adopt a policy built for the populations and workforces of today and tomorrow, one that recognizes that American workers have family caregiving responsibilities, and that as the standard retirement age increases people will increasingly need time away from work to address their own serious health conditions.

Thus, we urge you to support the proposed Family and Medical Insurance Leave Act (the FAMILY Act, S.337 / H.R.947). The FAMILY Act builds on the lessons of California, New Jersey and Rhode Island and the lessons from international examples to create a national program that would set a basic paid leave standard for all workers, no matter where they live or work. The FAMILY Act employs a familiar, tested insurance pool framework that yields increased productivity, economic wellbeing, and health among employees, while also mitigating negative effects among employers

For the sake of family caregivers, older workers, their employers, and all Americans with care needs, it is time for a national paid leave policy. People of all ages and health needs deserve to live productive lives and contribute to society with dignity and economic security. The FAMILY Act would help people to care for themselves and their loved ones while promoting workplace climates that are supportive and respectfB1.8w 6(t a)117.6 (.3 -4.1 (e)-2 (0.00)2.96 To

Elaine L. Alden, PhD Associate Professor and Program Chair Sociology Ashford University San Diego, CA

Toni C. Antonucci, PhD Russell Sage Foundation Fellow, 2016-2017 Douvan Collegiate Professor of Psychology Research Professor, Institute for Social Research University of Michigan Ann Arbor, MI

Louanne Bakk, PhD Assistant Professor Director, Institute on Innovative Aging Policy and Practice School of Social Work The University of Buffalo Buffalo, NY

Boris Baltes, PhD Department Chair of Psychology Wayne State University Detroit, MI

Janet L. Barnes-Farrell, PhD Professor of Psychological Sciences University of Connecticut Storrs, CT

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Sandra Butler, PhD Professor and MSW Coordinator School of Social Work University of Maine Orono, ME

John G. Cagle, PhD

Ruth E. Dunkle, PhD Wilbur J. Cohen Collegiate Professor Associate Dean for Faculty Affairs School of Social Work University of Michigan Ann Arbor, MI

Vanessa D. Fabbre, PhD, LCSW Assistant Professor Brown School of Social Work Washington University in St. Louis St. Louis, MO

Ruth Finkelstein, ScD Associate Director Robert N. Butler Columbia Aging Center Assistant Professor of Health Policy and Management Mailman School of Public Health Columbia University New York, NY

Gwenith Fisher, PhD Associate Professor of Psychology Colorado State University Fort Collins, CO

Ellen G. Frank-Miller PhD, MSW Postdoctoral Research Associate and Adjunct Professor George Warren Brown School of Social Work Washington University in St. Louis St. Louis, MO

Stewart D. Friedman, PhD Practice Professor of Management Director, Wharton Work/Life Integration Project Bob Harootyan, MS, MA Manager of Research Senior Service America, Inc. Silver Spring, Mn

Brad Harrington, n0.6 (E)2.6 (d)6.8.3A

Brian W. Lindberg, MMHS Executive Director Consumer Coalition for Quality Health Care Washington, DC

M. Brinton Lykes, PhD Professor, Community-Cultural Psychology Co-Director, Center for Human Rights & International Justice Boston College Chestnut Hill, MA

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Virginia E. Richardson, PhD Professor Emeritus College of Social Work The Ohio State University Columbus, OH

Sara E. Rix, PhD Workforce Development Consultant Washington, DC

Karen A. Roberto, PhD

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Harvey L. Sterns, PhD Professor of Psychology Immediate Past President, Division 20, Adult Development & Aging for American Psychological Association Director and Senior Fellow, Institute Life-Span Development and Gerontology The University of Akron Research Professor 1 U.S. Bureau of Labor Statistics. (2017, September). National Compensation Survey: Employee Benefits in the United States, March 2017 (Tables 16 and 32). Retrieved 24 October 2017, from https://www.bls.gov/ncs/ebs/benefits/2017/ebbl0061.pdf

2 diversitydatakids.org. (2015). Working Adults Who Are Eligible For and Can Afford FMLA Unpaid Leave (Share). Brandeis University, The Heller School, Institute for Child, Youth and Family Policy Publication. Retrieved 9 February 2017, from http://www.diversitydatakids.org/data/ranking/510/working-parents-who-are-eligible-for-and-can-afford-fmla-unpaid-leave-share/#loct=2&tf=17

3 National Alliance for Caregiving, & AARP Public Policy Institute. (2015, June). Caregiving in the U.S. Retrieved 9 February 2017, from http://www.caregiving.org/wp-content/uploads/2015/05/2015_CaregivingintheUS_Final-Report-June-4_WEB.pdf

4 Ibid.

5 Impaq International & Institute for Women's Policy Research. (2017, January). Family and Medical Leave-Taking among Older Workers. Retrieved 9 February 2017, from https://www.dol.gov/asp/evaluation/completed-studies/IMPAQ-Older-Workers.pdf

6 See note 3.

7 Rainville, C., Skufca, L., & Mehegan, L. (2016, November). Family Caregiving and Out-of-Pocket Costs: 2016 Report. AARP Publication. Retrieved 9 February 2017, from http://www.aarp.org/content/dam/aarp/research/surveys_statistics/ltc/2016/family-cCID 3 (r)6 (EM4Td(I)-3 (b)-1)-22 ((w)4-22 (rk)-11 (e)-tt)EM4Td(3y)26 0 Td(-(i)-7 (y)26 0 TdM0 TdM00 TdM00)10tlb 20 Td()Tj-