

March 29, 2021

President Joseph R. Biden
1600 Pennsylvania Avenue
Washington, DC 20006

The Honorable Nancy Pelosi
Speaker
U.S. House
1236 Longworth House Office Building
Washington, DC 20515

The Honorable Charles Schumer
Majority Leader
U.S. Senate
322 Hart Senate Office Building
Washington, DC 20510

The Honorable Kirsten Gillibrand
U.S. Senate
478 Russell Senate Office Building
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House
2468 Rayburn House Office Building
Washington, DC 20515

The Honorable Mitch McConnell
Minority Leader
U.S. Senate
317 Russell Senate Office Building
Washington, DC 20510

The Honorable Rosa DeLauro
U.S. House of Representatives
2413 Rayburn House Office Building
Washington, DC 20515

Dear President Biden, Speaker Pelosi, Minority Leader McCarthy, Majority Leader Schumer, Minority Leader McConnell, Senator Gillibrand, and Representative DeLauro:

On behalf of the undersigned national medical and public health organizations, we are writing to express our endorsement of the *Family and Medical Insurance Leave (FAMILY) Act*. We look forward to supporting your efforts to advance this policy on its own or as part of a larger economic support package. Enacting comprehensive paid leave as soon as possible is an imperative public health issue and an important step toward ensuring all persons have access to paid leave.

The COVID-19 pandemic has illustrated and underscored the public health importance of paid family and medical leave. Paid leave provides workers the flexibility to care for themselves and their families as well as to support efforts to stop viral transmission and reduce morbidity and mortality associated with the pandemic.ⁱ As with other systemic challenges, the pandemic has exacerbated and drawn new attention to the ongoing unmet public health need for comprehensive paid family and medical leave, which predates the pandemic and will continue beyond it without a comprehensive, long-term solution like the FAMILY Act.

The FAMILY Act would provide workers with up to 12 weeks of partial income when they take leave due to pregnancy, the birth of a child, the adoption of a child, or to care for a child with a serious health condition, among other reasons. Modeled after successful paid family leave insurance programs like those in nine states and the District of Columbia, the FAMILY Act builds on a foundation of experience and success to create a comprehensive national paid leave policy. We support this policy because access to paid leave is a pressing public health issue, and enactment of a comprehensive paid leave policy would generate substantial health benefits.

Paid parental leave supports parent-infant attachment, establishing an essential foundation for safe, stable, nurturing relationships and parenting practices that promote optimal infant health and development. These

benefits include improved establishment and maintenance of breastfeedingⁱⁱ and on-time routine childhood vaccinations.ⁱⁱⁱ Paid leave also generates important maternal health outcomes, including association with reduced depressive symptoms^{iv} and other mental and physical health indicators.^v Paid medical leave also ensures that illness or injury won't push families into financial instability and poverty, whether caring for an aging parent, an ill or injured relative, or a child with special health care needs. This certainty is essential to ensuring that families can receive the health services they need when they need them.

Progress on promoting health equity will also necessitate enactment of comprehensive paid leave. While around half of White women have access to paid parental leave, only 41 percent of Black women and 33 percent of Hispanic women do.^{vi} Access to paid leave is also lower among lower income families.^{vii} As our organizations work to address the underlying inequities that generate health disparities, the comprehensive paid leave policies of the FAMILY Act offer a crucial opportunity to promote health equity and improve outcomes for families across the life span.

We are at a critical juncture in which the need for comprehensive federal paid leave policy has never been clearer. We look forward to working with you to advance this critical policy in the 117th Congress.

Sincerely,

1,000 Days

AIDS Alliance for Women, Infants, Children, Youth & Families

American Academy of Pediatrics

American College of Obstetricians and Gynecologists

American College of Physicians

American Medical Student Association

American Public Health Association

Center for Health Progress

Child Welfare League of America

First Focus Campaign for Children

HealthBegins

Hispanic Health Network

Human Impact Partners

Kids And Cars Safety

Latino Commission on AIDS

March of Dimes

Medical Systems Management

National Association for Children's Behavioral Health

National Association of Pediatric Nurse Practitioners

National Health Law Program

National Hispanic Medical Association

National Institute for Reproductive Health

Nurse-Family Partnership

Prevent Child Abuse America

Safe States Alliance

The Praxis Project

WomenHeart: The National Coalition for Women with Heart Disease

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- ⁱ Pichler S, Wen K, Ziebarth NR. COVID-19 Emergency sick leave has helped flatten the curve in the United States. *Health Affairs*. 2020 Dec;39(12):2197-2204. doi: 10.1377/hlthaff.2020.00863.
- ⁱⁱ Guendelman S, Kosa JL, Pearl M, Graham S, Goodman J, Kharrazi M. Juggling work and breastfeeding: Effects of maternity leave and occupational characteristics. *Pediatrics* Jan 2009, 123 (1) e38-e46; DOI: 10.1542/peds.2008-2244.
- ⁱⁱⁱ Binghamton University. Paid family leave improves vaccination rates in infants. *ScienceDaily*. September 9, 2019. www.sciencedaily.com/releases/2019/09/190909131128.htm.
- ^{iv} Chatterji P, Markowitz S. Family leave after childbirth and the mental health of new mothers. *J Ment Health Policy Econ*. 2012 Jun;15(2):61-76. PMID: 22813939.
- ^v Van Niel MS, Bhatia R, Riano NS, de Faria L, Catapano-Friedman L, Ravven S, Weissman B, Nzodom C, Alexander A, Budde K, Mangurian C. The impact of paid maternity leave on the mental and physical health of mothers and children: A review of the literature and policy implications. *Harv Rev Psychiatry*. 2020 Mar/Apr;28(2):113-126. doi: 10.1097/HRP.000000000000246.
- ^{vi} Glynn SJ, Farrell J. Latinos least likely to have paid leave or workplace flexibility. November 20, 2012. Accessed on February 10, 2021. <https://www.americanprogress.org/issues/economy/reports/2012/11/20/45394/latinos-least-likely-to-have-paidleave-or-workplace-flexibility/>.
- ^{vii} Clemans-Cope L, Perry CD, Kenney GM, Pelletier JE, Pantell MS. Access to and use of paid sick leave among low-income families with children. *Pediatrics*. 2008 Aug;122(2):e480-486. doi: 10.1542/peds.2007-3294. PMID: 18676534.