



# Research-in-Brief

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*Key Findings from 25 Years of IWPR Research*

## **Balancing Work and Family: How Analyzing the Costs and Benefits of Work-Family Legislation Supports Policy Change**

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From its inception, research on work and family has been a core component of IWPR's work. IWPR has examined important policies in allowing workers, particularly women who do the majority of family care, to balance employment with care giving responsibilities, including: family and medical leave and paid sick days, child care, and workplace flexibility. By identifying and estimating the costs and benefits of a wide range of workplace policies to both workers and their families, as well as to employers and society as a whole, IWPR has provided strong evidence against claims that these policies harm businesses and the economy. IWPR research has informed legislation at the local, state, and national levels. IWPR's work has been highly influential in the passage of most of the nation's leave policies, including the federal Family and Medical Leave Act of 1993, New Jersey's Family Leave Insurance Program, California's Paid Family Leave (PFL), and paid sick days legislation in San Francisco, the District of Columbia, Milwaukee (subsequently overturned by the state government), Connecticut, Seattle, and New York City. IWPR's research on work and family issues has been covered by major media outlets, including the *The New York Times*, *The Washington Post*, the *Los Angeles Times*, *The Wall Street Journal*, the *London Times*, and CNN.

### **Family and Medical Leave**

With the support of the Ford Foundation, IWPR initiated its first research project in 1987, the findings of which were published in one of its first reports, *Unnecessary Losses: Costs to Americans of the Lack of Family and Medical Leave* (#1; 1990). By estimating the costs of the lack of a federal parental and medical leave policy to workers and society, this research changed the terms of the policy debate, which at the time was focused almost exclusively on the costs of family and medical leave legislation to businesses. Using data from the Panel Study of Income Dynamics, the study found that the costs to workers and society of lack of leave, in the form of lost earnings and publicly provided income assistance, totaled more than \$715 million annually, far exceeding the potential costs to businesses.

The project also uncovered the disparate impact that the absence of a family leave policy has on women, especially low-income women and minorities. Women without family leave lost 86 percent of their pre-birth earnings, compared with 51 percent for women with employer-provided family leave measured over the course of three years – from the pre-birth year through the second year after birth. Black women and men who spent time out of the workforce due to illness had higher earnings losses than similar white women and men due to longer periods out of the labor market or looking for work (#2). These findings were included in oral and written testimony to the U.S. Senate in October 1987 (#3) and reported in *The Wall Street Journal*. IWPR followed this national estimate with state level estimates in *Unnecessary Losses: Costs to Americans in the States of*

*the Lack of Family and Medical Leave* (#4; 1989), contributing to the passage of the Family and Medical Leave Act (FMLA) in February 1993. This Act requires all public agencies and private firms with 50 or more employees to offer unpaid leave for up to 12 weeks and continue group health benefits to all employees who have worked at least one year (1,250 hours). Eligible employees are able to take leave if they are unable to work due to illness, recently gave birth or are bonding with a newborn or newly adopted child, or if they are caring for an immediate family member, including elderly parents with a serious health problem.

Not discriminating against pregnant women could be viewed as the first step in accommodating the needs of parents in the workforce. The Pregnancy Discrimination Act (PDA) passed in 1978, clarifies that Title VII of the Civil Rights Act should protect pregnant women (the law “corrected” a Supreme Court decision that held that discrimination against pregnant women did not constitute sex discrimination). The legislation requires employers who provide sick leave or temporary disability benefits for other conditions to extend those benefits to female employees affected by pregnancy and childbirth. *Improving Employment Opportunities for Women Workers: An Assessment of the Ten Year Economic and Legal Impact of the Pregnancy Discrimination Act of 1978* (#5; 1990), shows that the PDA did not significantly increase costs for businesses but—to the contrary—likely benefitted employers by reducing employee turnover rates, and consequently, hiring and retraining costs. The study also finds that costs were not transferred to women through decreased employment, and the PDA did not cause employers to hire women into part-time positions (which are less likely to provide sick leave or disability benefits), as some observers had feared. Women with disability coverage were found to earn more than comparable women without coverage, and the benefits of the PDA to working-women far exceeded any costs borne by businesses.

While the FMLA is important in providing workers with job protection when they have their own illness or care-giving needs, it applies to only about 60 percent of all workers and does not require any wage replacement. The limitations of the FMLA and the positive impact of the PDA led IWPR, once again with the support of the Ford Foundation, to examine the economic feasibility of providing paid family leave by extending and enhancing Temporary Disability Insurance (TDI) in the United States. A report presented at

the Annual Meetings of the American Economic Association, *Temporary Disability Insurance: A Model to Provide Income Security for Women Over the Life Cycle* (#6; 1995), discusses the failure of the American social welfare system to adapt to the needs of the modern American worker with family responsibilities. The authors concluded that TDI, which was already mandatory for all employers in five states (California, Hawaii, New Jersey, New York, and Rhode Island), provides an excellent model for the delivery of paid family leave because it addresses the unique needs of women (who use TDI for pregnancy and childbirth), and that expanding the program to include a component for family leave would be economically feasible. By providing paid medical and family leave, if replicated in the remaining states or replaced by a national system, the program would benefit women, their families, and society by increasing women’s lifetime earnings, family income, and retirement benefits while reducing their use of other social programs, such as welfare and unemployment.

In 1995 IWPR produced the Research-in-Brief, “Using Temporary Disability Insurance to Provide Paid Family Leave: A Comparison with the Family and Medical Leave Act” (#7), which estimated the costs of implementing TDI in five states without the program (Georgia, Maryland, New Mexico, Washington, and Wisconsin) and presented TDI program models with several different eligibility requirements and benefit levels. The Research-in-Brief also calculated the costs of expanding TDI to include paid family care leave in these states, as well as in the five states that already had TDI programs. The study, as summarized in the Research-in-Brief, finds that the costs of adding a paid family leave component to TDI would be relatively modest; in most states, this element of the program would cost less than any other social program, such as Unemployment Insurance or Food Stamps. In 1995, Stephanie Aaronson, an IWPR research associate, testified at a hearing of the California Paid Family Leave Commission held in San Francisco (#8). California extended its TDI system to include up to six weeks of paid family leave in 2002. IWPR’s cost estimates were used to inform the analysis of a bill introduced in New Jersey several years later that would have expanded its TDI program to include paid family care leave. A variation of this bill eventually passed in 2008, making New Jersey the second state in the nation to implement a paid family leave policy.

In conjunction with the Labor Resource Center at the University of Massachusetts–Boston, IWPR refined its cost-benefit analysis by developing a flexible econometric model for estimating the costs and benefits of paid family and medical leave insurance proposals. The IWPR/LRC Family and Medical Leave Cost Simulation Model uses data from the U.S. Department of Labor’s 2000 FMLA survey and the March Current Population Survey, and incorporates the unique features of various proposed programs, from differences in waiting periods to eligibility criteria. This model was first used in 2006 to estimate the costs and benefits of proposed paid family leave legislation in Massachusetts and has been used to analyze the costs and benefits of proposals in New Mexico, Maine, Maryland, Illinois, Minnesota, and Washington. By making the full range of costs and benefits of paid family and medical leave visible, IWPR has assisted advocates and policymakers with new information with which they can develop and support new legislation.

*The Need for Paid Parental Leave for Federal Employees: Adapting to a Changing Workforce* (#9; 2009), produced with support from the Rockefeller Family Fund, argues that the federal government should offer a paid family leave benefit in order to compete with the private sector for highly skilled workers, particularly as large numbers of baby boomers retire from the federal service in the next few years. The study presents evidence that younger workers value work-family balance more highly than previous cohorts, and that women are more likely to return to the same employer, and return to work sooner, after giving birth when they have paid leave. Furthermore, the study shows that paid family leave benefits are more generous in the private sector, and that younger federal workers are especially unsatisfied with the work-life and paid leave benefits offered by the federal government. Using data from the Office of Personnel Management, the authors estimate that women of childbearing age are 31 percent more likely to leave federal government employment than comparable men, but that if the government offered a paid leave benefit, it could prevent 2,650 departures and save \$50 million per year in turnover costs. The proposed Federal Employee Paid Parental Leave Act (FEPPLA) would provide federal workers a paid leave benefit. Its introduction in Congress in 2008 was informed by IWPR’s cost and benefit estimates, which help to make an economic case for paid federal leave.

In addition to developing its own analyses of the costs and benefits of paid family and medical leave, IWPR has played a key role in bringing together researchers and advocates to strengthen research efforts to inform discussions of paid leave legislation at the local, state, and national levels. In 2002, with support from the David and Lucile Packard Foundation, the Annie E. Casey Foundation, and the Ford Foundation, IWPR co-hosted a colloquium of advocates and researchers with the Institute of Industrial Relations at the University of California–Berkeley to discuss the need to quantify the benefits that paid family and medical leave policies would have for workers, businesses, and society. In its meeting report, *Estimating the Benefits of Paid Family and Medical Leave: A Colloquium Report* (#10; 2003), IWPR noted that while cost estimates of potential programs are increasingly available, there are few estimates of their benefits, which could be used to paint a more comprehensive picture of the value of paid leave programs.

## **Paid Sick Days**

Over the past decade, IWPR has provided technical assistance to policymakers, government agencies, and paid sick days advocates across the country, in the form of cost-benefit analyses, targeted publications, testimony requested by policymakers, responses to requests for information, and participation in press briefings. In a 2000 meeting with Senator Edward Kennedy’s staff, IWPR suggested the idea of a new labor standard requiring a minimum number of paid sick days for all workers. Subsequently, Senator Kennedy and his staff developed the Healthy Families Act, which was first introduced in 2004, but died in committee that year. IWPR released the report, *Valuing Good Health: An Estimate of Costs and Savings for the Healthy Families Act* (#11) at a press conference announcing the introduction of the Healthy Families Act (HFA) in Congress in 2005. The report compares the costs and benefits of the HFA and concludes that the net savings to employers, workers and their families, and taxpayers would be positive—almost \$8.2 billion per year. The costs include wages and payroll taxes and administrative expenses, while the benefits include savings realized from reduced turnover, decreased spread of the flu, and shorter nursing home stays, as well as from the wages paid to unhealthy workers who would remain on the job but work with low productivity. While all

of the costs would be borne by employers, the report finds that they would also reap 99 percent of the benefits. Furthermore, the report notes that the analysis likely understates the benefits of the legislation because it does not include estimates of benefits for which there are no data. For example, the HFA could be expected to reduce public assistance and unemployment insurance because workers would no longer be terminated for taking time off for illness

The methodology developed in the *Valuing Good Health* (#11) report has served as a model for cost-benefit analyses done by IWPR for proposed paid sick leave ordinances in 17 states and 14 cities (and counties). IWPR has provided extensive technical assistance to paid sick days advocates and policymakers in these states and cities, providing information and analyses in debates that led to successful outcomes in San Francisco; Washington, DC; Milwaukee (where paid sick days was initially passed by referendum, but then overturned by the state legislature); Connecticut; and, most recently, Seattle and New York City. IWPR is currently assisting advocates and policymakers in Philadelphia, Maryland, Oregon, and Vermont, by providing information and continues to be an active participant in the Work-Family Strategy Council, which brings together work-family policymakers, advocates, and researchers. In the fall of 2012, IWPR partnered with the Council to convene a meeting of more than 50 scholars, policy researchers, advocates, and government policymakers to network, share information, and address gaps in the research on paid sick days.

In addition to contributing to the passage of new paid sick days ordinances through providing research, IWPR has also played a key role in evaluating the impact of these laws. For example, IWPR evaluated the effects of San Francisco's ordinance, which allows all workers in the city to earn five to nine paid sick days (depending upon firm size) per year after three months of work to care for themselves or their family members, and which was the first paid sick leave policy passed in the United States. In 2008, IWPR produced a fact sheet, "Job Growth Strong with Paid Sick Days" (#12), which found that San Francisco's paid sick days ordinance did not adversely affect job growth, as opponents suggested it would. Rather, job growth in the city was either comparable to, or exceeded that of, nearby counties without paid sick days laws, and was particularly notable in the restaurant industry, where

employment grew despite the fact that 78 percent of workers did not have access to paid sick days prior to the passage of the legislation. In 2011, IWPR released a report on its comprehensive analysis of the city's paid sick days law, *San Francisco's Paid Sick Leave Ordinance: Outcomes for Employers and Employees* (#13), based on surveys of 727 employers and almost 1,200 employees. IWPR consulted with representatives of the research community, the staff of San Francisco's Office of Labor Standards Enforcement, members of the San Francisco advocacy coalition, and potential users of the impact study's findings to produce the report. The report finds that 50 percent of employees in San Francisco had benefitted from the city's paid sick days ordinance, with the greatest benefit realized by Black, Latino and low-wage workers. While many workers benefitted from the law, the average worker used just three paid sick days per year and 25 percent used no paid sick days at all. Six of seven employers reported no negative effect on profitability after the law's implementation. The report was quoted in several major news outlets across the country, including the *Los Angeles Times*, *The Christian Science Monitor*, *The Philadelphia Inquirer*, *The Huffington Post*, and *National Public Radio*. The report remains one of the most widely-cited statements of employer and employee views of, and responses to, a paid sick days law.

IWPR's research on paid sick days has also included exploring access to leave and evaluating the full economic costs of the lack of paid sick leave. In 2004, with the support of the Ford and the Annie E. Casey Foundations, IWPR completed *No Time to Be Sick: Why Everyone Suffers When Workers Don't Have Paid Sick Leave* (#14), a report that examines existing evidence on the costs of the lack of paid sick leave to workers, their families, employers, and society. Using data provided by the Bureau of Labor Statistics, the report also explores the job characteristics that are associated with having paid sick leave and finds that access to paid sick days is far greater among full-time, public sector and white collar workers, workers covered by collective bargaining agreements, and those in the top three wage quartiles. Paid sick days are least likely to be found in the construction and accommodation and food service industries. The report highlights that just 30 percent of all workers with access to paid sick leave are allowed to use their leave to care for sick children. To remedy the uneven distribution

of paid sick leave coverage among workers, the report recommends that, among other options, policies should be expanded to cover more workers and include caregiving activities among the list of acceptable uses of leave.

IWPR has recently begun to explore the health costs of lack of paid sick days. In a briefing paper, “Sick at Work: Infected Employees in the Workplace During the H1N1 Pandemic” (#15; 2010), IWPR staff found that, while 90 percent of infected public sector employees took some leave during this period, just 66 percent of private sector employees did so. Eight million workers infected with H1N1 imposed costs on their employers by spreading the flu to their colleagues and working at less than their full productivity levels. Expanding paid sick days would help employers recover these costs. IWPR’s 2011 study, *Paid Sick Days and Health: Cost Savings from Reduced Emergency Department Visits* (#16), evaluates selected costs to the healthcare system of a lack of paid sick leave. The authors find that access to paid sick days improves self-reported health status, reduces delays in obtaining medical care, and reduces preventable emergency department visits by 1.3 million visits per year (see the companion IWPR literature review: “Health, Safety, Violence, and Disaster: How Economic Analysis Improves Outcomes for Women and Families”).

## Child Care and Healthcare

IWPR’s research on job stability has found that work supports, particularly access to reliable child care and employer-provided healthcare, increase job retention among lower income women, leading to the accumulation of work experience and skills, career advancement, and—ultimately—higher earnings and retirement benefits. Child care is a key component in the work-family infrastructure.

A 1997 Research-In-Brief, “Child Rearing and Employment Turnover: Child Care Availability Increases Mothers’ Job Stability” (#17), highlights research showing that child care characteristics are an important predictor of job stability. For example, mothers using center-based care were twice as likely to have a job as those who relied on parental or self-care. *Keeping Moms on the Job: The Impacts of Health Insurance and Child Care on Job Retention and Mobility Among Low-Income Mothers* (#18; 2007), funded by the Joyce Foundation, analyzes panel data to examine the impact of child care and access to health

insurance on women’s advancement. The report shows that low-income working mothers are much less likely than their higher income peers to have employer-provided health insurance in their own name (34 percent compared with 52 percent), and that mothers with employer-provided health insurance are almost three times more likely to stay on the job than other mothers. As a telling indictment of the lack of support for child care, the number of women receiving child care subsidies was too small to estimate the impact of subsidies on job retention.

Because good quality child care is such a key component of family infrastructure and brings benefits to children as well as working parents, IWPR has maintained focus on the quality of child care and the importance of public funding across its 25 years. In one of its first reports, *High Skill and Low Pay: The Economics of Child Care Work* (#19), the authors make the case for the importance of public subsidies in improving child care quality. The percentage of eligible low income children receiving child care subsidies was tracked in IWPR’s *Status of Women in the States* reports (#20-#24; 1996-2004). IWPR worked with Early Childhood Policy Research to take these insights further by supporting efforts to expand child care and preschool education through providing detailed estimates of the costs and benefits for states and localities considering investing in quality pre-Kindergarten programs. In 2004, IWPR produced reports for New Mexico (#25), Wisconsin (#26), and the nation (#27) on the *Status of Early Care and Education* showing state-by-state progress or its lack. (For more information on IWPR’s work on child care, see the companion IWPR literature review, “Child Care, Education and Job Training: How Investing In Quality Programs Improves Outcomes for Children, Girls, and Women.”)

In 1994, with support from the Kaiser Family Foundation, IWPR published a report documenting access to health insurance among women (#28). In testimony given before the United States Senate Committee on Finance “Women’s Access to Health Insurance” (#29), Dr. Heidi Hartmann noted that women are much less likely to have employer-provided health insurance in their own name than men (37 percent compared to 55 percent). This is at least partially due to the concentration of women in part-time and low-wage jobs, which are less likely to offer employer-provided benefits. Even in full-time, high-wage jobs in large firms, however, women are less likely

to have health insurance directly from their employer. Health care coverage is also a key component of IWPR's Status of Women in the States reports; the rankings show differences between states and additionally highlight the importance of race and ethnicity as determinants of whether a woman has access to basic health care coverage. As noted above, health coverage through employment helps to keep women on the job and increases their lifetime earnings (see the IWPR companion literature review, "Health, Safety, Violence, and Disaster: How Economic Analysis Improves Outcomes for Women and Families").

## Workplace Flexibility

Apart from quality child care, access to health insurance, leave benefits, and other work supports, employees—particularly those with care giving responsibilities—need access to quality flexible work options. In an early study sponsored by the Women's Bureau at the U.S. Department of Labor, *Exploring the Characteristics of Self-Employment and Part-Time Work Among Women* (#30; 1993), IWPR staff analyzed the availability of jobs with different work schedules and employment statuses to understand the degree to which alternative employment options meet women's financial and caregiving needs. The authors found that women are less likely than men to work in conventional jobs (full-time, full-year, with a single employer) or to be self-employed full-time, full-year, and are more likely than men to work in part-time, full-year positions with a single employer or to hold multiple wage and salary jobs. These findings are concerning given that conventional jobs promise greater economic well-being (as measured by median hourly wages, the availability of employer-provided health benefits, and median annual earnings) than part-time or part-year work. Yet part-time work and multiple jobs may, for some women, allow them to combine paid work with family care needs.

In the late 1990s, with support from the Sloan Foundation, IWPR undertook a three-year research project evaluating flexible work opportunities for professionals and managers. This project culminated in the 2000 report, *Part-Time Opportunities for Professionals and Managers: Where Are They, Who Uses Them and Why?* (#31). The authors investigated the demographic composition of professionals and managers employed part time, examined the distribution of these workers by occupational category

and the quality of compensation in those categories, and discussed the policy implications of their findings. For the 12 percent of professionals and managers employed part-time, most of whom are women, the vast majority have poor pay and few, if any, have employer-provided benefits. The study finds that compensation (in terms of both hourly earnings and health care benefits and pensions) is comparable to, or better than, that of full-time employees in just three occupational categories: nurses (public sector or large, private firms), scientists (including engineers, mathematicians, and computer and natural scientists) in large, private firms, and special education teachers. These jobs account for just 13 percent of all professional and managerial jobs, and the people in these jobs tend to be more highly educated and have greater income from family assets. The authors concluded that in most occupations, part-time work requires a huge sacrifice in terms of pay and benefits. Any movement toward equitable pay for part-time work will either require the federal government to implement new labor standards requiring equal pay and pro-rated benefits for part-time work, and/or a change in employer attitudes and policies towards part-time workers.

IWPR continued its work on job quality through an examination of statutory employment laws on workplace flexibility in twenty high-income countries and the United States through a partnership with the Luxembourg Income Study. The findings of this 2008 study, *Statutory Routes to Workplace Flexibility in Cross-National Perspective* (#32), and a set of related web resources summarizing working time and workplace flexibility regulations in high income countries, funded by the Alfred P. Sloan Foundation, were released at an IWPR-cosponsored event, "Scheduling Flexibility: What Can Government Do?" as part of a conference hosted by the Sloan Center on Aging and Work/Workplace Flexibility at Boston College. The study shows that statutes providing access to workplace flexibility for parents, family care-givers, employees pursuing vocational training or education, and employees seeking gradual retirement, are common place across high-income nations, and cause few costs to employers while generating broad economic benefits. The authors conclude that the United States would benefit from flexible work standards, but caution that alternative work arrangements, especially part-time work, will not be helpful if part-time workers do not receive equal treatment and pro-rated pay and benefits

that are comparable to those received by full-time workers. Furthermore, flexible work options should be pursued as one element in a broader package of work supports, including paid maternity and care-giving leave, paid sick days, paid vacation, and affordable, quality child care. A separate study focusing specifically on the Right to Request Flexible Working Law in the United Kingdom, conducted for the U.K. Equality and Human Rights Commission, shows that broader framing of flexible working rights has increased men's requests for flexible work arrangements, suggesting progress toward gender equality, and that the law has benefited women across a spectrum of jobs, including women already working in lower quality, part-time jobs (#33).

Another research review, conducted for the World Bank,

on "The Impact of 'Family-Friendly Policies' on Women's Employment Outcomes and on the Costs and Benefits of Doing Business" (#34; forthcoming), reviewed research globally to highlight the features of work-family policies that are most likely to help women succeed in the labor market. IWPR has recently worked as a consultant on a project for the International Finance Corporation to document the business case for employers to place women in quality jobs in emerging and developing countries.

Throughout the past twenty-five years, IWPR's research has shown the benefits to women, families, employers, and the economy from having a reliable work-family infrastructure.

**This Research-in-Brief is one in a series of publications highlighting IWPR's most significant research contributions to policy issues affecting women across IWPR's twenty-five year history.**

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