



INSTITUTE FOR WOMEN'S POLICY RESEARCH

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**PUBLIC HEALTH AND PAID SICK DAYS:
POLICY ACTION TO LIMIT THE SPREAD OF DISEASE
AND IMPROVE HEALTH IN MASSACHUSETTS**

Testimony of

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The Commonwealth of Massachusetts**

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Chairman Torrisi, Chairman McGee, and Members of the Committee: Thank you for the opportunity to testify regarding the public health aspects of Senate 1073 and House 1803, establishing paid sick days for Massachusetts' workers.

I am Dr. Vicky Lovell, Director of Employment and Work/Life Programs at the Institute for Women's Policy Research (IWPR). I hold a Ph.D. in Public Policy and Administration from Portland State University and have been employed at the Institute for eight years. In that time, I have completed a number of studies on the topic of paid sick days. The data and policy analysis in these studies provides the foundation for current work on paid sick days across the country. My work in this area includes a report on the number of workers lacking paid sick days, based on data collected by the U.S. Bureau of Labor Statistics; a cost-benefit analysis of a federal proposal for a paid sick days standard, the Healthy Families Act, and a cost-benefit analysis of the Massachusetts paid sick days proposal; and a Fact Sheet on the public health aspects of paid sick days. (My 2005 Massachusetts cost-benefit analysis, *Valuing Good Health in Massachusetts: An Estimate of Costs and Savings for the Paid Sick Days Act*, is attached to this testimony.)

As an expert on women's employment, the majority of my work now focuses on paid sick days, because the issue is so important for women's ability to sustain employment while caring for their families, and because low-wage workers are at such an enormous disadvantage, with only one in five having paid sick days. My research demonstrates that paid sick days standards are feasible and affordable and bring measurable benefits to employers as well as to workers, their families, and the general public. And yet, 1.5 million Massachusetts workers—47 percent—lack paid sick days.

Limiting the spread of infectious diseases is an important public health goal

The public health aspect of paid sick days policies is extremely compelling. There is no question as to the public's interest in limiting the spread of common diseases such as the flu, which cause tens of thousands of deaths every year. This interest is reflected in the U.S. Centers for Disease Control and Prevention's recommendation that individuals with the flu stay home to avoid contaminating co-workers, schoolmates, and the general public: "You will help prevent others from catching your illness." A worker without paid sick days, choosing between going to work sick and staying home without pay, may have no rational choice but to ignore the CDC's advice by taking their germs to work.

Employers share this interest in keeping sick workers out of the workplace. Epidemiologists estimate the probability of catching the flu from an infected member of the general public at 16 percent. Among closer contacts, such as with members of one's household, the contagion rate is 26 percent. In an office setting, then, a worker with the flu may infect one of every four co-workers. Because it is so contagious, the flu accounts for 10 to 12 percent of all illness-related workplace absences. One sick worker can start a chain of infectious contacts that can ultimately be much more expensive for an employer than the cost of paid sick days for that first worker.

Paid sick days are also an important part of planning for a possible flu pandemic—an event that medical experts consider to be "highly likely, if not inevitable." A study of the 1918-1919 influenza pandemic in the U.S. found that cities that initiated measures such as school closings, altered work hours, and quarantine the soonest after the outbreak started suffered fewer deaths than those delaying their responses. Paid sick days policies should be in effect before the outbreak of such a pandemic, so that workers and employers are certain of the procedures available to help keep infected workers at home.

Another key to limiting the spread of contagious diseases is to be sure that sick children can stay home when they are contagious. With only 32 percent of all children having a parent at home full-time, childhood illness typically requires that a parent miss work to care for their child. But only 30 percent of workers are covered by a paid sick days policy that they can use when their children are sick. The National Association for Sick Child Daycare estimates that, on any given day, more than 350,000 children under 14 years of age are too sick to go to school or child-care but do not have a parent at home full-time. More than 7,000 of those children are in Massachusetts. This is an even greater public health risk than adults being on the job when sick, because children are more efficient disease vectors than adults and may spread illnesses to their playmates and, ultimately, to their playmates' families. Research on records from emergency rooms and ambulatory care centers in Massachusetts found that preschool-age children are the first to show signs of the seasonal flu and appear to speed contamination in their community. Thus, keeping preschool children home when they are infected is a primary public health objective for limiting the spread of the flu. Families can only do this if parents are authorized to take time off work, with pay, when their children are sick.

The flu is not the only communicable disease that is relevant for public health and paid sick days policy development. Noroviruses that cause stomach flu are contracted by eating contaminated food. The Centers for Disease Control and Prevention suspect that food service workers are responsible for many norovirus outbreaks. Hepatitis A is also spread by contaminated food, and typically a food handler is the source of the contamination. Because employers can help prevent the spread of this kind of disease by ensuring that only healthy workers have contact with food, employers put themselves at risk by not having appropriate paid sick days policies. For example, a Nevada jury concluded that a norovirus outbreak that sickened hundreds at a Las Vegas hotel could have been prevented by an appropriate sick leave policy, and imposed \$25 million in damages on the affected hotel. The expense of the public health community's response to such an incident can also be significant—\$800,000 in the case of a Hepatitis A infection in Colorado.

Many states or municipalities have laws against food-service workers handling food while sick with Hepatitis A or norovirus. But if workers are not covered by a paid sick days policy, they will have an incentive to hide their illness and work anyway so they don't miss their wages or suffer other penalties for staying home without authorization. (Food-service workers have the lowest paid sick days coverage of any job: Only 15 percent are covered.)

Family caregivers need workhours flexibility

With our aging population and increasing employment of women, workers caring for ill or disabled adult family members need support too. More than 16 million Americans who work full-time also provide care for an elderly relative; another 5 million full-time workers are caring for a disabled adult. They desperately need the work-hours flexibility of paid sick days so that they can handle health emergencies, take their aging parents or spouses to routine medical appointments, and provide ongoing oversight and management of health problems experienced by their spouses, parents, and other loved ones. We all share an interest in being sure these workers can handle their family care tasks responsibly while maintaining their jobs.

Employers will save under a Massachusetts paid sick days policy

Two years ago, I presented an estimate of the costs and savings of a paid sick days policy in Massachusetts to this Committee. The estimate is based on data from the U.S. Bureau of Labor Statistics, the U.S. Census Bureau, and the Massachusetts Department of Labor, as well as research from the medical and economics fields. Because of gaps in research about the impact of having paid sick days, I believe that my calculation of the

savings afforded by paid sick days significantly underestimates the impacts that such a policy would actually provide. Even so, my very conservative analysis suggests that savings generated by a paid sick days policy will nearly equal the wage, tax, and administrative costs to employers. I estimate that per-worker per-week costs will average \$8.39 for each worker with new or expanded coverage under such a policy, while employers' savings will be roughly \$6.29 per affected worker per week. Additional savings will accrue to the general public from enhanced health and reduced costs of short-term nursing home stays. And there are certainly many other positive impacts of paid sick days on health and health-care expenditures that have yet to be evaluated.

Healthy workers are essential to a strong economy and to business success. A paid sick days policy will allow Massachusetts workers to take short breaks from their jobs when their health, or that of their families, demands, and then return to work when they are ready to be fully productive again. Such a policy will also support good public health by permitting ill workers and children to avoid contact with others when they have a contagious disease, thereby limiting the spread of infectious illnesses such as the flu and food-borne diseases. This basic employment standard is feasible, affordable, and good public policy.