TITLE: Paid Parental Leave Policy

Introduced by: Rossan Chen, MD MSc; Tessa Stecker, MD

Endorsements: Napa-Solano Chapters

WHEREAS, the US Family and Medical Leave Act (FMLA), which guarantees 12 weeks of job-projected time off is unpaid and does not apply to about half of the American work force\textsuperscript{1,2}, and

WHEREAS, the first few months of a child’s life is the most important time for bonding and development, and

WHEREAS, paid parental leave lowers rates of infant mortality and maternal depression, enhances rates of exclusive and overall breastfeeding, encourages preventive care such as immunizations and well checks,\textsuperscript{3} and improves early childhood development\textsuperscript{4}, and

WHEREAS, paid maternity leave improves women’s participation in the labor force, safeguards women’s incomes and career advancement, and is associated with increased wages\textsuperscript{5} and work hours\textsuperscript{6}, and

WHEREAS, paid paternity leave enhances bonding and promotes gender equality by encouraging new fathers to participate in child-rearing and household work, and by facilitating mothers’ participation in or return to the labor market\textsuperscript{7}, and

WHEREAS, paid parental leave prevents intimate partner violence and decreases the incidence of abusive head trauma by reducing financial stress, increasing egalitarian parenting practices, and promoting child/parent bonding\textsuperscript{8}, and

\textsuperscript{3} Nandi A, Jahagirdar D, Dimitris MC, et al. The Impact of Parental and Medical Leave Policies on Socioeconomic and Health Outcomes in OECD Countries: A Systematic Review of the Empirical Literature. Milbank Q. 2018 Sep;96(3):434-471
\textsuperscript{4} Maternity and paternity at work. International Labour Organization. 2014.
\textsuperscript{5} Nandi A, Jahagirdar D, Dimitris MC, et al. The Impact of Parental and Medical Leave Policies on Socioeconomic and Health Outcomes in OECD Countries: A Systematic Review of the Empirical Literature. Milbank Q. 2018 Sep;96(3):434-471
\textsuperscript{7} Nandi A, Jahagirdar D, Dimitris MC, et al. The Impact of Parental and Medical Leave Policies on Socioeconomic and Health Outcomes in OECD Countries: A Systematic Review of the Empirical Literature. Milbank Q. 2018 Sep;96(3):434-471
WHEREAS, currently among US employers, 35% offer paid maternity leave, 29% provide paid paternity leave, 28% offer paid adoption leave, 21% provide paid foster child leave, and 12% offer paid surrogacy leave because the policies promote wellness, recruitment, and retention⁹, and

WHEREAS, the absence of a paid parental leave policy might bias employers against hiring women of childbearing age, which could concentrate women in lower-paying or part-time positions and contribute to gaps in wages and benefits compared to men and non-mothers¹⁰, and

WHEREAS, unpaid leave provided through FMLA may increase disparities among low-income and minority parents because FMLA only benefits parents who can afford to take the time off¹¹,¹², and

WHEREAS, five million prime-age workers in the US could be added to the labor force through policies like paid parental leave, which would boost economic growth¹³, and

WHEREAS, there is little evidence that the duration of paid leave had negative employment or economic consequences; in fact, increasing the duration and benefit level provided by paid leave policies increased rates of women’s labor force participation¹⁴,¹⁵, and

WHEREAS, all Organization for Economic Co-operation and Development (OECD) countries other than the United States offers some form of national paid parental leave policy¹⁶, usually financed through social security or public funds¹⁷, and

WHEREAS, there has been a global shift towards the International Labour Organization’s recommendation of at least 14 weeks of paid leave and a wage replacement of at least two-thirds of previous wages¹⁸, and


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⁹ Society for Human Resource Management
¹⁷ Maternity and paternity at work. International Labour Organization. 2014.
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(2018), Massachusetts (2018), Hawaii, and Puerto Rico\textsuperscript{19}, and three more US states are preparing similar legislation (Oregon, Colorado, and Connecticut)\textsuperscript{20}, and

\textbf{WHEREAS}, in competitive races in the 2018 midterm elections, nearly 30\% of candidates for Congress and governor included paid leave in their platforms\textsuperscript{21}, and

\textbf{WHEREAS}, around 80\% of Americans support paid parental leave\textsuperscript{22}, and be it further

\textbf{RESOLVED}: That CAFP support a requirement on employers to provide at least 12 weeks of paid parental leave with job protection and wage replacement of at least two-thirds of previous earnings, up to a cap, for each new infant born or adopted, financed through an insurance-based pool, and that the paid leave may be taken by any family member caring for the child at any time in the first year of a child’s birth or adoption in parts or as a block; and be it further

\textbf{RESOLVED}: That CAFP refer this to AAFP for national action.

\textbf{Speaker’s Note:}

This resolution addresses a gap in existing CAFP and AAFP policy. It is complementary and enhances existing policy.

This resolution may have a financial effect on CAFP members who own and run clinical practices or other businesses.

\textbf{Fiscal Note:}

The resource implications of this resolution becoming CAFP policy are minimal, as is the referral to AAFP for national action. The requirements set out by this resolution are covered by CAFP and AAFP operations related to legislative advocacy.

\begin{itemize}
\item \textsuperscript{19} Nandi A, Jahagirdar D, Dimitris MC, et al. The Impact of Parental and Medical Leave Policies on Socioeconomic and Health Outcomes in OECD Countries: A Systematic Review of the Empirical Literature. \textit{Milbank Q.} 2018 Sep;96(3):434-471.
\item \textsuperscript{22} Horowitz JM, Parker K, Graf N, and Livingston G. Americans widely support paid family and medical leave, but differ over specific policies. Pew Research Center. March 23, 2017.
\end{itemize}
1. **PROBLEM STATEMENT:** What specific practice problem does this resolution seek to solve, or, if this resolution pertains to a proposed new CAFP policy or change of policy, what issue does it seek to address?

The United States is the only developed nation to lack a paid parental leave policy. This has led to significantly less time that parents can afford to spend bonding with their newborn or newly adopted child. The lack of a parental leave policy also unfairly penalizes families financially for having a child or adopting a child. A paid parental leave policy allows employees to take full advantage of job-protected leave through FMLA, reducing disparities among low income and minority parents who might not be able to afford to take the entire 12 weeks off.

2. **PROBLEM UNIVERSE:** Approximately how many CAFP members or members’ patients are affected by this problem or proposed policy?

All CAFP members and members’ patients who deliver or adopt a child are affected by this proposed policy.

3. **WHAT SPECIFIC SOLUTION ARE YOU PROPOSING TO RESOLVE THE PROBLEM OR POLICY, i.e., what action do you wish CAFP to take?**

We propose that CAFP encourage the AAFP to advocate for a national policy for paid parental leave with job protection for all part-time and full-time employees in this country that rivals other developed nations. Unlike FMLA, this policy should apply to all workers regardless of their company’s size. There should be a cap to the payments, which have ranged from 50-90% of regular wages in the state-run programs. Workers would need to pay a small percentage (approximately 1% in California) payroll tax that funds an insurance-based pool run through a federal agency. When workers need paid parental leave, they can apply to the federal agency for wage replacement.

4. **WHAT EVIDENCE EXISTS TO: 1) INDICATE THAT A PROBLEM EXISTS; OR 2) THAT THERE IS NEED FOR A NEW OR REVISED POLICY?**

Infant mortality rates are on the rise. One in nine women suffer from symptoms of postpartum depression. Also, labor force participation among US men and women ages 25-54 has been declining over the past 20 years. A key factor is the lack of support for paid parental leave and subsidized child care.

5. **PLEASE PROVIDE CITATIONS to support the existence of the problem and your proposed solution.**

See footnotes.