

Dear Senator Kushner, Representative Porter, and Members of Labor and Public Employees Committee:

My name is Patrick Comerford. I am from New Haven and am a lifelong resident of CT. I am here testifying in support of S.B. 1: An Act Concerning Paid Family and Medical Leave and H.B. 5003: An Act Implementing a Paid Family and Medical Leave Program.

S.B. 1 will create and implement a comprehensive, statewide system of paid family and medical leave for workers who need to take time off to care for themselves or a loved one, or welcome a new child.

The majority of workers in CT are either ineligible or cannot afford to take unpaid leave provided by the federal Family and Medical Leave Act (FMLA) and only 17% workers - including just 6% of low-wage workers - have access to paid leave through their employer. Without access to paid leave, those workers are likely to fall behind on bills and medical expenses, and are more likely to file for bankruptcy, negatively impacting the economy, and most importantly the lives of those workers and their families.

Lack of access to a paid family leave system leaves many marginalized communities in particular without access to the support and safety network they rely on. When I came out as queer, I was unsure of how my biological family would react. For a long time I felt I wasn't able to rely on my biological family and many of my primary relationships were strained or broken because I was queer. My chosen family became crucial to my wellbeing and I relied on them for emotional and sometimes financial support. While over time I came to be supported and am able to rely deeply on my biological family, the necessity of creating a chosen family and relying on them for care is common in the LGBTQ+ community. Family conflict is one of the most common reasons for all youth homelessness, and LGBTQ youth are disproportionately represented among youth experiencing homelessness - because of who they are.¹

Paid Family Medical Leave is undeniably a queer issue. According to CAP, 42 percent of LGBTQ people say they've needed to take time off work to care for a chosen family member -- compared to 31 percent of non-LGBTQ people. LGBTQ couples raising children are also twice as likely to have household incomes near the poverty line compared to their non-LGBTQ peers -- and single LGBTQ people are three times more likely to live near the poverty threshold as their non-LGBTQ peers.²

Today, at the age of 37, I am not married and I do not have children. Research shows that I am not alone in this and that LGBTQ adults are significantly more likely to be childless and living without a partner than non-LGBTQ older adults. So many in our community come to depend on the strong relationships we make with chosen family, particularly later in life and the reality is that we will need care - and need to rely on one another when the time comes. Without inclusive paid family and

¹<https://www.americanprogress.org/issues/lgbt/reports/2016/12/01/292886/making-paid-leave-work-for-every-family/>

² <https://www.hrc.org/blog/paid-leave-an-lgbtq-issue>

medical leave, many in our communities already living on the margins will continue to be forced to choose between their jobs, and caring for their families - biological *or* chosen.

In the past five years, more than 35 local and state paid sick time laws have been passed in the United States and CT has the chance to join our neighbors like Rhode Island, New York, New Jersey, and Massachusetts in passing paid family medical leave. I urge the Committee and Connecticut lawmakers to support S.B. 1 and H.B. 5003 this session to help Connecticut remain economically competitive and give *all* workers in our state the support they deserve.

Thank you for your time,
Patrick Comerford