

February 13, 2019

**TESTIMONY SUPPORTING**  
**S.B. 1: An Act Concerning Earned Family and Medical Leave**  
**H.B. 5003: An Act Concerning Paid Family and Medical Leave**

Dear Members of the Labor and Public Employees Committee of the Connecticut General Assembly:

My name is Dr. Jordana Frost and I live in Storrs Mansfield, Connecticut. Today I am **testifying in support of S.B. 1 and H.B. 5003.**

At some time in our lives, we all need to give or receive care. Whether it's caring for an aging parent, welcoming a new child to our family, or receiving care ourselves after a serious illness or injury. This is one of the few certainties in life - it is not a question of if we will need time to care for our loved ones, it's when will we need this time? As a working wife, daughter, and mother, I whole heartedly support establishing a Paid Family and Medical Leave program in our state.

As a public health professional and childbirth doula, I have the privilege of directly serving pregnant and parenting families in our state, as well as the opportunity to work closely with many organizations and partners to support, promote, and advance programs and policies that help improve the health and wellbeing of our communities.

Given the documented profound influence that socio-economic factors can have on the health and wellbeing of individuals and their families, [1] I believe that Paid Family and Medical Leave will be an important tool in our efforts to collaboratively build a competitive, prosperous, healthy and equitable Connecticut. In addition to providing documented benefits to employers, such as decreasing worker turnover, increasing productivity, and encouraging the employee to return to work, [2] Paid Family and Medical Leave has also been associated, within the maternal and child health domain, with significant health benefits for the mother-baby dyad. For example, in a statistical analysis that included 131 countries around the world, "An increase of 10 full-time-equivalent weeks of paid maternal leave was associated with a 10% lower neonatal and infant mortality rate ( $p \leq 0.001$ ) and a 9% lower rate of mortality in children younger than 5 years of age ( $p \leq 0.001$ )." [3] Studies have shown Paid Family Leave can also double the duration of breastfeeding for new mothers, which strengthens attachment and bonding, as well as reduces a number of significant health risks for both mother and baby, resulting in healthcare savings tied to reduced preventable illnesses and conditions. [4]

I would like to commend the current Connecticut legislature for favorably considering S.B. 1 and H.B. 5003 and would like to highlight **specific elements that I think are of particular importance when striving to ensure that ALL moms and babies have a strong and healthy start.** These include:

- **Eligibility criteria that make this earned benefit more accessible to workers in our state.**
  - The majority of workers today are either ineligible or cannot afford to take unpaid leave provided by the federal Family and Medical Leave Act (FMLA). [5] By passing the proposed legislation, we would make real paid leave available to most workers, including those with lower wage jobs and workers who may have multiple employers. And, because it is earned and paid for by the employees themselves, this bill would also allow employees to access their earned benefit regardless of potential job changes (portability feature).
  - This is critical to our state's economic vibrancy, as well as to Connecticut's economic, health, and racial justice. In fact, lack of paid leave disproportionately impacts workers of color, who are overrepresented in low-wage jobs that do not provide paid leave and, due to persistent racial inequalities in wealth and wages, have fewer resources to absorb the financial impact of a family or personal medical issue. [6]
  
- **Number of weeks that include an additional two weeks of wage replacement for pregnant people experiencing significant pregnancy complications.**
  - In the proposed legislation, employees may take up to 12 weeks of PFML within a 12 month period. A worker may also take 2 extra weeks if there is a serious health condition with a pregnancy that results in incapacity.
  - With alarming increasing trends in pregnancy-associated deaths in the United States, [7] as well as rising preterm birth rates, [8] I commend the inclusion of this provision that would help reduce financial stressors that could further complicate an already complicated pregnancy and postpartum period.

We are now surrounded by states (RI, NY, MA, and NJ) that have enacted laws offering paid family and medical leave. Similar legislation is also pending in Vermont, New Hampshire, and Maine. It is time to make Connecticut next, to stay competitive in our region and attract and retain workers. The proposed paid family leave would allow Connecticut to take a very tangible step towards closing the unjust racial gap and building a society where every parent can see their child thrive, and where every hard working member of our communities can have the time, security, and peace of mind to recover from an illness or take care of a loved one when it is most needed. **I urge you to SUPPORT SB1 and HB5003.**

Sincerely,

Jordana Frost, DrPH, MPH, CPH, CD(DONA)  
Public health professional  
Childbirth doula  
Resident of Storrs Mansfield, CT