## AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 214

(A-24)

Introduced by: Medical Student Section

Subject: Support for Paid Sick Leave

Referred to: Reference Committee B

Whereas, sick leave can be used by employees to recover from illness, attend medical appointments, care for sick relatives, and seek assistance for domestic violence, and access disproportionately impacts women who take on caregiver responsibilities<sup>1-4</sup>; and

Whereas, all but 10 countries feasibly fund paid sick leave via governments and/or employers, but the US' Family and Medical Leave Act (FMLA) only ensures unpaid leave<sup>5-7</sup>; and

Whereas, 75% of voters support a national paid leave policy, but currently 25% of private sector workers do not receive paid sick leave, including 62% of those in the lowest income decile, 45% of those in the lowest income quartile, 54% of Latine workers, 47% of Indigenous workers, and 38% of Black workers<sup>8-11</sup>; and

Whereas, multiple studies demonstrate that paid sick leave increases primary care use and reduces occupational injuries and infectious spread, with one estimating over \$1 billion in annual savings from over 1 million prevented ED visits<sup>12-22</sup>; and

Whereas, paid sick leave is guaranteed in 15 states including DC, 4 counties, and 17 cities, with early adopters showing sustainable success for over a decade<sup>2,23-24</sup>; and

Whereas, the Healthy Families Act would guarantee paid sick leave and is currently being considered in both the House and Senate<sup>25</sup>; therefore be it

RESOLVED, that our American Medical Association amend Policy H-440.823, "Paid Sick Leave." as follows:

 Paid Sick Leave H-440.823

Our AMA: (1) recognizes the public health benefits of paid sick leave and other discretionary paid time off; (2) supports employer policies that allow employees to accrue paid time off and to use such time to care for themselves or a family member; and (3) supports employer policies that provide employees with paidsick days to use to care for themselves or a family member where providing paid leave is overly burdensome; and (4) advocates for federal and state policies that guarantee employee access to protected paid sick leave. (Modify Current HOD Policy)

Fiscal Note: Minimal - less than \$1,000

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## **RELEVANT AMA POLICY**

## H-420.979 AMA Statement on Family, Medical, and Safe Leave

Our AMA supports policies that provide employees with reasonable job security and continued availability of health plan benefits in the event leave by an employee becomes necessary due to documented medical conditions. Such policies should provide for reasonable periods of paid or unpaid:

1) Medical leave for the employee, including pregnancy, abortion, and stillbirth; 2) Maternity leave for the employee-mother; 3) Leave if medically appropriate to care for a member of the employee's immediate family, i.e., a spouse or children; 4) Leave for adoption or for foster care leading to adoption; and 5) Safe leave provisions for those experiencing any instances of violence, including but not limited to intimate partner violence, sexual violence or coercion, and stalking.

Such periods of leave may differ with respect to each of the foregoing classifications and may vary with reasonable categories of employers. Such policies should encourage voluntary programs by employers and may provide for appropriate legislation (with or without financial assistance from government). Any legislative proposals will be reviewed through the Association's normal legislative process for appropriateness, taking into consideration all elements therein, including classifications of employees and employers, reasons for the leave, periods of leave recognized (whether paid or unpaid), obligations on return from leave, and other factors involved in order to achieve reasonable objectives recognizing the legitimate needs of employees and employers.

Our AMA recognizes the positive impact of paid safe leave on public health outcomes and supports legislation that offers safe leave.

