Oral Testimony by Jane Waldfogel to
U.S. House of Representatives Committee on Ways and Means
Subcommittee on Worker and Family Support

March 7, 2019

Chairman Davis, Ranking Member Walorski, and other Members,

Good afternoon and thank you for inviting me to speak with you today.

I’ve spent the past 25 years studying policies to support working families and promote child health and development. These policies are a pressing concern because in the majority of American families, unlike in the past, it is no longer commonplace for there to be a stay-at-home caregiver who can take care of a newborn baby, an ill child, a disabled spouse, an elderly relative, or a family member being deployed or returning from the military.1 This trend is not going to change – most two parent families need to have both parents in the labor market, and of course difficulties in balancing the competing needs of work and family are even more acute among low income and single parent families.2

Yet our public policies have not kept pace with this new demographic reality. The Family and Medical Leave Act provides only unpaid leave, and to only about 60% of the workforce.3 Federal child care subsidies reach only about 15% of eligible low-income families who need them.4

Employer policies address some of the gap but mostly for more advantaged employees. While 40% of employees have access to some paid leave they can use for maternity, paternity, or to care for a seriously ill family member, those who are low-income, part-time, or Hispanic are much less likely to be covered.5


Only a tiny share of employees – about 10% - receive any help from their employers in paying for child care.\(^6\)

Yet we know from a large body of research that these policies matter for the well-being of employees and their families.\(^7\) While much of the early research came from other countries like the UK and Canada, we also now have more than a decade of evidence from California whose first-in-the-nation paid family leave law came into effect in 2004.\(^8\) When employees have access to paid family leave, they are more likely to take leave to care for a family member or for themselves, and they are more likely to be employed and have higher earnings afterwards.\(^9\) Mothers who have access to paid leave are less likely to be depressed after a birth and also breastfeed for longer.\(^10\) Fathers who take longer leaves are more likely to be engaged in caring for their children months later.\(^11\) When more paid leave is available, rates of infant mortality and hospitalizations fall.\(^12\) At the other end of the lifecycle, so too do nursing home admissions.\(^13\)


The evidence on child care is also extensive and clear. Research from the landmark National Institute of Child Health and Human Development Study of Early Child Care, and many subsequent studies, have shown that high-quality child care improves children’s health, cognitive development, and social development, with especially beneficial effects for disadvantaged children. Yet too few Americans can afford quality child care, especially in early childhood when care is most expensive. When more child care subsidies are available, parents are more likely to be employed, reducing poverty and promoting family economic stability, and more children receive child care and are in care of higher quality. High quality care can play a crucial role in helping improve school readiness and in narrowing gaps in readiness.

Opinion surveys consistently show that Americans favor paid family and medical leave. They understand that the need is widespread and they appreciate the benefits. This is why 6 states to date – CA, RI, NJ, NY, WA, and MA – and the District of Columbia have enacted paid family and medical leave laws that provide a period of paid leave – to care for a newborn or a seriously ill child or family


member, or when a family member is deployed or returning from in the military – with many more considering such legislation.

These policies are also endorsed by employers. My colleagues and I have been surveying employers in states with paid family and medical leave laws – focusing especially on small employers who are often missing from such surveys. In three states with paid leave laws – RI, NJ, and NY – we found that two-thirds of employers were supportive of the laws; another 15-20 percent were neutral.19

In summary, paid family and medical leave and quality affordable child care are not just vital supports for family economic well-being. They are also essential for the health and development of our children and for the health and well-being of our spouses, elderly relatives, and those serving in the military. We also know that we cannot leave these essential supports to employers to provide – the record is clear that they will supply little coverage, particularly for the workers with the greatest need for it. That’s why the American public and employers are looking to government to help.