IN THE EYE OF THE STORM: PAID FAMILY LEAVE AS A SOURCE OF CHILD CARE FOR ESSENTIAL WORKERS AND VULNERABLE FAMILIES

Peggy Daly Pizzo, M.Ed., Ed.M.
Stanford Graduate School of Education

Philip A. Pizzo, MD, FAAP
Stanford University School of Medicine

Richard Fiene, Ph.D
Research Institute for Key Indicators & Penn State University

March 24, 2020

BACKGROUND

Painful decisions confront our leaders (including early care and education) leaders, about closures of child care during this pandemic. Working overtime to find the best Center for Disease Control (CDC), American Academy of Pediatrics, and expert child care ideas and knowledge to guide these decisions, many of our leaders should be honored as the heroic public servants that they are.

All policymakers struggle with safe plans to address a crucial question: who will care for the children (and elders) of the heroic health care and public safety workforce, who are courageously walking into the pandemic on our behalf—as the rest of us, sometimes under public order, safely “shelter at home.”

Every governor, county commissioner and mayor needs to make two family-supportive decisions immediately:

1. Compensate the entire early care and education workforce during the pandemic: this is the workforce that makes it possible for our heroic doctors, nurses and firefighters to keep us safe;

2. Empower as many extended family members as possible with job-protected Paid Family Leave (PFL) to provide 1:1 or 1:2 care, at home, to our nation’s children—especially our youngest children—and our vulnerable elders.
RECOMMENDATION TO ALL LEADERS: INCREASE THE POOL OF IMMEDIATE CAREGIVERS THROUGH PAID FAMILY LEAVE (PFL)

California has already led the way—as it has, historically, on paid family leave (PFL). Since 2004, California has provided PFL for children newly entering the home through birth, adoption or foster care placement and seriously ill family members. Eligible employees, self-employed individuals and business owners may take this leave, typically with wages replaced at 60 to 70% of their value.

In recent days, Governor Newsom has extended eligibility for PFL to family members caring for individuals quarantined by the COVID-19 virus, no matter the severity of the symptoms. PFL is no longer confined to families bonding with a new child or caring for a seriously ill child. This covers children and elders diagnosed with or exhibiting symptoms of COVID-19, as certified by a medical professional or public health official. It empowers an (adult) child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner to care for those quarantined by the COVID-19 virus.

RECOMMENDATIONS TO OTHER STATES

States should continue to share resources and ideas with one another, which the National Governors Association is competently facilitating.

States should strongly consider adopting California’s approach, which has history, positive outcomes, popular support and a record of economic viability behind it. These resources document the evidence base for Paid Family Leave (PFL), nationally and in California.

The national organizations, Zero to Three, the American Academy of Pediatrics and The National Women’s Law Center are three excellent sources of resources on paid family leave.
ADVANTAGES OF PAID FAMILY LEAVE (PFL) POLICY PROPOSALS DURING THE COVID-19 PANDEMIC

Paid family leave (PFL) policies have 9 advantages right now. They help:

1. limit the spread of the pandemic, by promoting care, especially for babies and the youngest children, persons already seriously ill with any disease or injury and our highly vulnerable elders, on a 1:1 or 1:2 basis, in their own homes or the homes of relatives, during weekends and nights as well as weekdays, when essential workers will be on duty. This is consistent with recommended social distancing;

2. respect family values and traditional, cultural patterns of extended family caregiving, especially, although not exclusively, prevalent in low-and moderate-income families;

3. free nonessential working parents and other extended family members to temporarily leave the workforce to care for their loved ones;

4. recognize that, to especially vulnerable children and elders, dedicated family members are essential. Trusted family members can provide some peace of mind to children worried by the increased absence of their essential workforce parents who will be spending more hours away from them. Essential workers will have more peace of mind as well—which benefits all of us;

5. free essential workers from the time pressures and stress of having to rapidly find temporary emergency child care as child care facilities close—while they are also trying to report to work to protect and take care of us;

6. respond to the coming COVID 19-related implosion within the current child-caregiver grandparent workforce, as grandparents over 60 are either pre-emptively forbidden to continue caregiving by their medical advisors (or by concerned family members). Part- and full-time caregiving grandparents, a huge and largely unacknowledged part of our early care and education support system to families, will become unavailable when they contract the illness—or, possibly even when they are exposed to it;

7. respond to the coming COVID 19-related implosion within the current home health care agency workforce, as those agencies are flooded with demand for the care of the non-hospitalized sick, by freeing up a pool of trusted family members who could care for the mildly to moderately ill members of their family networks;

8. shore up the economy for all of us, as the dollars generated by paid family leave circulate within the economy; and
9. rely, in the California system, on a worker-financed social insurance scheme that currently requires quite modest contributions from workers.

**THREE RECOMMENDATIONS TO CALIFORNIA AND OTHER STATES WITH A HISTORY OF LEADERSHIP ON PAID FAMILY LEAVE (PFL)**

California’s enlightened governor, Gavin Newsom; Chief of Staff Ann O’Leary; and many others, all working hard and to whom we owe much gratitude, could consider, as an essential support to our brave essential workforce, leading the way again in three areas. We should temporarily:

1. Extend job-protected PFL to cover individuals with known family or workplace exposure to PFL, whose resident children and other family members, including vulnerable resident children and elders, will now have likely exposure to COVID-19. Many courageous health care and public safety workers -- and some early childhood educators--will be exposed to COVID-19 during the pandemic—and will consequently expose their children and other family members resident within their homes.

2. Expand the wage replacement to 100%, from the current 60 to 70%, so that low-and moderate-income workers could use this leave, as a matter of equity. This decision is also as a public safety measure, since hospitals and clinics will also need medical assistants, nursing assistants, janitors, food service workers and others who support the nurses and doctors. Many will want to turn to trusted family members to care for their children.

3. Expand the pool of trusted family members qualified to take PFL, to adult aunts, uncles, cousins in the family networks of both the currently employed essential worker but also those of their spouses and domestic partners.

**CONSIDERATIONS FOR THE EARLY CHILDHOOD WORKFORCE AND FOR EMERGENCY CHILD CARE**

These proposals are intended to be adjuncts to ongoing proposals to provide safe emergency early care and education services to families in desperate need of such support.

working hard, in these challenging times, to advise our equally heroic early care and education workforce.

The entire early care and education workforce, including family child care educators, should continue to be compensated during the pandemic. This frees them as a potential source of home-centered telecommunications-based educators providing early child development (not health) advice to stressed parents and family members trying to care for children now at home full time.

This would help liberate the pediatric practitioners currently overburdened by stressed parents, freeing them to focus on the health advice that only they can give.

Please see the following paper for additional details regarding the ECE workforce: Honor the Early Childhood Education Workforce

Paid family leave expansion demonstrates how responsible governors, mayors and county leaders authentically Put Families First.

***************************************************************************

Peggy Daly Pizzo, M.Ed., Ed.M. is the director of the Early Learning Project at the Stanford Graduate School of Education. She is a former White House advisor on early care and education policy. Her current policy research focuses on systems-building between health, mental health and early care and education services.

Philip A. Pizzo, MD, FAAP, is a pediatrician and the David and Susan Heckerman Professor of Microbiology and Immunology at Stanford University,

Richard (Rick) Fiene, Ph.D is a research psychologist at the Research Institute for Key Indicators & Penn State University; and senior research consultant with the National Association for Regulatory Administration.

***************************************************************************

Nothing that is said here should be attributed to either the Stanford Graduate School of Education or Stanford University.