

PAID FAMILY AND MEDICAL LEAVE INSURANCE

The Problem

Every day in America, an estimated 1.2 million same-sex couples are raising between 1.3 and 2.2 million children -- forming our families through adoption, birth, and surrogacy. Despite nationwide marriage equality, LGBTQ people still fight every day to have our families recognized, and thousands of LGBTQ families live in states without explicit protection from discrimination. Often facing discriminatory adoption laws, many LGBTQ people become parents just by parenting – accepting the responsibilities and the joy that comes from being a parent, without the security that come from legal recognition. In states with the highest proportion of same-sex parents raising children including Mississippi, Wyoming, and Idaho LGBTQ families have no explicit protections from discrimination in employment and housing, and can be turned away from a store or restaurant just because of who they are. This daily, systemic discrimination not only degrades individual dignity, but threatens the financial bottom line for many families. Same-sex couples raising children are twice as likely to be living near the poverty line. For single LGBTQ parents the risk is even higher.

In the absence of federal paid leave some LGBTQ parents are able to cobble together a complex web of leave relying on sick and vacation days, disability leave if they're the birth parent, and sometimes even parental leave. When these borrowed days or savings accounts are exhausted time is up. The majority of working families, including those who are LGBTQ, however enter parenthood without even this imperfect safety net.

Also, although the HIV/AIDS epidemic in the U.S. impacts individuals from all walks of life, the epidemic continues to disproportionately impact gay and bisexual men, and transgender women. In recent years, there has been a marked and steady increase in new HIV diagnoses among youth ages 13-24 and in communities of color, particularly in the southern United States. While tremendous medical advances have helped HIV-positive individuals live longer, healthier lives, there remains no cure and tens of thousands of new infections occur every year. Individuals living with HIV/AIDS and those who care for them, including spouses, children, and grandchildren, are often forced to navigate an incomplete safety net— choosing between receiving or giving critical care and work obligations.

Finally, although transition related care is covered under the Family and Medical Leave Act, utilizing this leave unpaid is a luxury that is often out of reach for many transgender workers and their caregivers. As a result of systemic economic discrimination, transgender people face devastatingly high rates of poverty – almost double that of the general population. Transgender people are also far less likely to report owning a home and nearly a third have experienced homelessness. In the absence of paid leave many transgender people are forced to forgo lifesaving gender affirming care and treatment. Similarly, many parents and spouses of transgender individuals seeking transition related care are unable to provide the care their family member requires without financial support.

What is the solution?

The United States is currently the only industrialized nation that provides no paid family or medical leave for working adults. Congress should take steps to enact federal paid family leave legislation that would provide workers with up to 12 weeks of financial support during a family or medical leave from work. This should cover time taken following the birth or adoption of a child including time to recover from pregnancy and childbirth, as well as leave taken to care for a sick child, parent, spouse or domestic partner, recover from illness personally, or time taken for military caregiving and leave purposes.