Senator Tipping, Representative Roeder, and honorable members of the Joint Standing Committee on Labor and Housing, my name is Mareisa Weil, I am the Vice President for Development & Community Engagement at Maine Family Planning, and I am here today to testify on behalf of Maine Family Planning in support of LD 1964, An Act to Implement the Recommendations of the Commission to Develop a Paid Family and Medical Leave Benefits Program.

Maine Family Planning is an organization that strives to ground our services, programs, and advocacy within the framework of Reproductive Justice, a framework that was named and built by Black women to bring an intersectional lens to the reproductive rights movement. The fundamental tenets of Reproductive Justice as defined by the SisterSong Women of Color Reproductive Justice Collective are:

The human right to own our bodies and control our future

The human right to have children

The human right to not have children, and

The human right to parent the children we have in safe and sustainable communities.

One of Maine Family Planning's co-founders, former Republican state Senator David Huber, used to say, "If you don't like abortion, you better like family planning." The same could be said of paid family and medical leave – if you don't like abortion, you better like paid family and medical leave. People decide to terminate pregnancies for all kinds of personal reasons – all of which are valid – but consistently high among people's reasons are economic hardship factors¹ that make pregnancy and parenting feel like untenable choices or, to be honest, like there is no real choice at all. That is not reproductive justice.

The United States is among only seven countries in the world that do not guarantee any paid family leave. The other six are Papua New Guinea and five small island nations in the Pacific Ocean: Micronesia, the Marshall Islands, Nauru, Palau and Tonga. We are exceptional in this regard, but not in the way that we like to talk about American exceptionalism.

While Maine Family Planning supports all the reasons that people need paid family and medical leave, our focus today is on maternal and infant health outcomes. There is an overwhelming body of research demonstrating the economic, psychological, and physical health benefits of access to paid leave for new parents, their children, and their families.^{2 3 4} Paid family and medical leave is a powerful tool for advancing health, gender, economic, and racial equity.^{5 6 7} Finally, as a Maine-based nonprofit employer, we welcome a PFML program that we can participate in to better support our employees and their families. We strongly encourage the committee to vote unanimously Ought to Pass on LD 1964.

¹ Low-wage workers bear financial burden of denied abortions | PBS NewsHour

² Paid Leave Is Essential for Healthy Moms and Babies - National Partnership for Women & Families

³ Paid family leave and children health outcomes in OECD countries - PMC (nih.gov)

⁴ The urgent necessity for paid parental leave (apa.org)

⁵ <u>Racial and ethnic disparities in access to and use of paid family and medical leave: evidence from four nationally</u> <u>representative datasets : Monthly Labor Review: U.S. Bureau of Labor Statistics (bls.gov)</u>

⁶ <u>Racial/Ethnic Inequities in Paid Parental Leave Access - PMC (nih.gov)</u>

⁷ <u>Paid Family and Medical Leave: A Racial Justice Issue</u> — and Opportunity - National Partnership for Women & <u>Families</u>