

LD 1964: An Act to Implement the Recommendations of the Commission to Develop a Paid Family and Medical Leave Benefits Program

Senator Tipping, Representative Roeder, and esteemed members of the Labor and Housing Committee, my name is Annika Hikade and I live in South Portland. I am a physician testifying, along with several of my physician colleagues (Katherine Davis, Courtney Hargreaves, and Laura Knapick) who have collaborated on this statement in support of LD 1964 and a Paid Family & Medical Leave program.

As obstetrician-gynecologists in training, we want to offer our perspective on the importance of paid family leave, which is a policy that the American College of Obstetricians and Gynecologists endorses as essential for new parents and one we recognize as essential for all.

The 12 weeks following childbirth lays the foundation for the future health and well-being of mothers, infants, and families. Yet the lack of paid family leave impedes many people—especially those with limited resources—from getting the comprehensive postpartum care they need and deserve. Without postpartum care, these folks are at increased risk of postpartum depression, suboptimally managed chronic diseases, and lactation difficulties. Mothers who return to work without adequate time to heal and bond report worse health outcomes for themselves and their babies.

The United States is the only high-income country in the world that does not guarantee paid maternity leave, let alone all-encompassing paid family leave. The health benefits of paid family leave are well documented and include increased initiation and duration of breastfeeding. Breast milk contains essential nutrients, contributes to a healthy immune system, and the act of breastfeeding enhances the relationship between the parent and child. When new mothers are forced to return to work in order to make ends meet, this makes breastfeeding untenable. This has become such a concern that The Surgeon General has put forth a Call to Action to Support Breastfeeding, in which they identify the lack of paid leave as a significant barrier to breastfeeding, particularly for parents with lower incomes.

Paid family leave would also foster a stronger, more satisfied labor force by providing an attractive incentive for young people to live and work in Maine and protecting against women exiting the workforce altogether. It is common for women to leave their jobs around the time of having children, and paid family leave has been shown to significantly reduce maternal labor force detachment in the year of birth and for up to five years afterward.

Paid family medical leave is a critical policy that would sustain those living, working, and raising children in Maine. Passing LD 1964 would ultimately lead to happier, healthier, and more equitable communities statewide. I urge you to pass this bill. Thank you.

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