The health of all Californians would significantly benefit if workers earned paid sick days and used them when ill or when a family member needs care. However, almost 40% of the California workforce—5.4 million workers—do not have the right to take paid time off from work when they are sick.

The California Healthy Families, Healthy Workplaces Act of 2008 (AB 2716) would guarantee that all workers in the state accrue at least one hour of paid sick time for every 30 hours worked. In the spring of 2008, Human Impact Partners and researchers at the San Francisco Department of Public Health conducted a Health Impact Assessment of the bill, evaluating how it could protect and improve public health. This report provides a summary of the findings of that assessment.

The best available public health evidence demonstrates that the California Healthy Families, Healthy Workplaces Act of 2008 would have significant positive public health impacts. Guaranteed paid sick days would help reduce the spread of flu; protect the public from diseases carried by sick workers in restaurants and in long-term care facilities; prevent hunger and homelessness among sick low-income workers; and enable workers to stay home when they are sick or when they need to care for a sick dependent. We would all be better off if this commonsense workplace practice were to become law.

Figures 1 and 2 show examples of potential negative health outcomes associated with a worker without paid sick days becoming ill and either choosing to go to work or take time off. In both scenarios, there are potential negative health outcomes for the worker, coworkers, and customers, including additional people becoming sick, longer recovery times, hospitalization, need for additional medical care, and the health effects associated with lost wages and unemployment.
Vulnerable populations have less access to paid sick days:

- 79% of the lowest-paid workers do not have paid sick days.
- In a study of mothers, 40% whose children had asthma and 36% whose children had other chronic diseases did not have paid sick days.
- 45% of workers who rate their health as fair or poor do not have any paid sick days, while only 25% of workers who rate their health as excellent, very good, or good lack the benefit.

A requirement for paid sick days, such as that proposed in the California Healthy Families, Healthy Workplaces Act of 2008, would have the following impacts:

- Paid sick days would enable more people to comply with public health advice such as the CDC's recommendation to “stay home from work, school, and errands when you are sick.” This will help to control seasonal influenza (“the flu”) and the large-scale spread of a new influenza strain (flu pandemic).
  - More than a third of flu cases are transmitted in schools and workplaces.
  - Staying at home when infected could reduce the number of people impacted by pandemic influenza by 15%–34%.

Californians are being forced to choose between their loved ones and their paychecks or even their jobs when ill. Even a small loss of income on a monthly basis may lead to trade-offs between housing, food, and health care.

“Then you find yourself eating more cheaply . . . maybe not taking the time to nourish yourself the way you should because you’re really strained on money. I go on the mac and cheese diet or the ramen noodle diet. You go into survival mode . . . because it’s about making the money that you need at the end of the month.”

—Focus group participant
With paid sick days, sick restaurant workers would be less likely to spread foodborne disease in restaurants.

- 70% of California food service workers do not have paid sick days.
- In one restaurant in Michigan where workers did not have paid sick days, a worker infected over 500 customers with norovirus (a stomach flu responsible for half of all foodborne illness) in 2006.

Paid sick days would reduce the likelihood of outbreaks of gastrointestinal disease (“stomach flu”) in nursing homes.

- A study in New York State found that the risk of respiratory and gastrointestinal disease outbreaks is significantly lower in nursing homes with paid sick day policies.
- Between 30 and 45 fewer nursing homes in California would experience norovirus outbreaks each year under a policy of paid sick days.

Paid sick days would reduce income loss and the threat of job loss for low-income workers during periods of illness. This effect would be sizable enough to prevent hunger and housing insecurity.

- 52% of workers without paid sick days state that they find it somewhat difficult, difficult, or extremely difficult to live on their household income.

In California, thousands of hospital admissions for chronic diseases such as asthma, hypertension, and diabetes are entirely preventable. Paid sick days could allow workers and their dependents easier access to preventative and early care and help avoid unnecessary hospitalizations.

- Parents who had paid time off are over 5 times more likely to care for their children when they are sick.
- In families with paid sick days, 44% of workers are likely to take time off to care for family members whereas only 26% of workers in families without sick days are likely to do so.
- According to a recent survey, 42% of employed adults who do not have paid sick days do not take time off when sick, while only 28% of those with the benefit do not take time off when sick.

For the full report and references see www.humanimpact.org/PSD.
This assessment has examined evidence regarding the potential health impacts of a requirement for paid sick days as proposed by the California Healthy Families, Healthy Workplaces Act of 2008. Substantial evidence indicates that the law would have significant positive public health impacts for workers and for all Californians.

### AB 2716 Health Impact Assessment—Summary of Health Outcomes and Impacts

<table>
<thead>
<tr>
<th>Health Outcome</th>
<th>Judgment of Magnitude of Impact</th>
<th>Quality of Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Impacts on Community Transmission of Communicable Diseases</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influenza, seasonal or pandemic</td>
<td>★★★</td>
<td>High</td>
</tr>
<tr>
<td>Foodborne disease in restaurants</td>
<td>★★</td>
<td>High</td>
</tr>
<tr>
<td>Gastrointestinal infections in health care facility disease transmission</td>
<td>★★</td>
<td>Medium</td>
</tr>
<tr>
<td>Communicable diseases in child care facilities</td>
<td>★</td>
<td>Low</td>
</tr>
<tr>
<td><strong>Worker Economic Impacts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of income</td>
<td>★★★</td>
<td>High</td>
</tr>
<tr>
<td>Job loss</td>
<td>★</td>
<td>Medium</td>
</tr>
<tr>
<td><strong>Impacts on Worker or Dependent Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taking time off for medical need</td>
<td>★★★</td>
<td>Medium</td>
</tr>
<tr>
<td>Taking time off to care for ill dependents</td>
<td>★★★</td>
<td>Medium</td>
</tr>
<tr>
<td>Appropriate and timely utilization of primary care</td>
<td>★</td>
<td>Medium</td>
</tr>
<tr>
<td>Avoidable hospitalization</td>
<td>★</td>
<td>Low</td>
</tr>
</tbody>
</table>

1. This column provides a scale of significance ranging from 1–3, where 1 = low impact and 3 = a significant impact. An effect is considered significant if it would affect a large number of people in California and has the potential to create a serious adverse or potentially life-threatening health outcome.

### RESEARCH AND ASSESSMENT METHODS

This assessment was based on the following sources of information:

- Review of available peer-reviewed and empirical research.
- Analysis of statistics on the availability and utilization of paid sick days and on the burden of illness in California that may be modified by paid sick day legislation.
- Analysis of data from the California Work and Health Survey.
- Focus groups and survey of workers in California.
- Interviews with public health officials and other experts.

For the full report and references see [www.humanimpact.org/PSD](http://www.humanimpact.org/PSD).