
Foreword

By the Department of Labor

The sharp increases in the number of women and single parents in the labor force in the final quarter of the 20th century set the stage for a national debate on how to balance the competing interests of work and family. A labor force comprising large numbers of family care givers inevitably demanded greater flexibility in balancing dual responsibilities. At the same time, employers worried about the increasing costs of employee benefits. Public policy makers struggled to find a middle ground that accommodated the needs of workers and employers.

In 1993, President Clinton and the Congress took a significant step towards a balanced approach with the passage of the Family and Medical Leave Act (FMLA). The Act provides covered and eligible workers with up to 12 weeks of job-protected, unpaid leave so they can care for a seriously ill child, spouse or parent; stay home to care for their newborn, newly adopted or newly placed child; or take time off when they are seriously ill. The law's signature features of guaranteed job protection upon return from leave and maintenance of health benefits address the most urgent needs of covered family care givers. Additionally, the law includes a variety of provisions to minimize the potential burdens on employers.

The law also established the bipartisan Commission on Family and Medical Leave to study legally required and voluntary family and medical leave policies and their impact on both workers and employers. The Commission, through its 1995 surveys of employers and employees, found that the Act was helping workers balance work and family, at least for those who were covered and eligible and could afford to take leave. The Commission also found that the FMLA had not been a burden to most businesses. For most employers, the costs or negative effects were non-existent or small.

This past year, the Department of Labor commissioned an update to the 1995 employee and employer surveys. The report that follows offers a first look at these survey data, offering researchers and policymakers a wealth of new information on workers' use of family and medical leave, the policies and practices of employers, and what impact such leave has on both

employers and workers.¹ The report presents the important findings, compares them to the previous surveys, and points out a number of areas for additional exploration.

This foreword highlights what the Department of Labor believes are some of the most interesting findings.² Overall the legislation has been a great success. Millions of workers are taking family and medical leave. The number of workers who were unable to take leave has decreased. Establishments not covered by the Act are offering an array of family and medical leave benefits. Workers overwhelmingly support the provisions of the Act, while most employers report no adverse effects, including effects from intermittent leave. However, the lack of paid leave continues to be a barrier to leave-taking, and awareness of the law is still far from universal.

Millions of Workers Are Taking Leave for FMLA Reasons

The total number of workers who took leave for FMLA reasons³ increased since the 1995 survey to 23.8 million, or 16.5 percent of all workers. Nevertheless, the rate of leave taking was stable due to the growing labor force. The leave-taking rate for those who were covered and eligible also did not change significantly since the 1995 survey.

**Estimated Number of Family and Medical “Leave-Takers” and “Leave-Needers”
(numbers in millions)⁴**

2000 Survey	All Employees	Leave Takers	Leave Needers
All Employees	144.0	23.8	3.5
Employees in covered worksites	110.4	18.1	2.9
Eligible employees in covered worksites	88.9	15.5	2.4

Source: Survey of Employees

¹ While the term “employer” is used in the Act and foreword, the survey sample was actually drawn and based on establishments. Some data presented in the foreword are from the survey of employees; other data are from the survey of establishments (employers). The report identifies which survey is the source of data.

² The authors (Westat) provide their own interpretation in the body of the report.

³ FMLA qualifying reasons are: leave for the birth of a child and the care of a newborn; for the placement with the employee of a child for adoption or foster care and to care for the newly placed child; to care for a child, spouse, parent with a serious health condition; and to care for themselves when they are unable to work because of a serious health condition.

⁴ These point estimates are based upon survey data and therefore may over or underestimate their true values. See Appendix C for more details.

On average, workers who took family and medical leave did so infrequently and for relatively short periods of time. These patterns of usage were basically unchanged since the 1995 survey. The 2000 survey found that most leave-takers (75%) took leave only once over the 18-month survey period. A relatively small proportion, 14 percent, took two leaves, and these second leaves were fairly short in duration. Looking at longest leaves, about one-half were for 10 days or less. The median length of leave, 10 days, did not change since the 1995 survey. Second longest leaves tended to be of even shorter duration. In fact, 43 percent lasted only 1 to 3 days.

Since the 1995 survey, the distribution of reasons for taking leave shifted, with fewer leave-takers reporting taking leave for their own serious health condition. For the longest leave, the percent of leave-takers who took it for their own serious health condition dropped from 61 percent to 47 percent. This same shift is evident for covered and eligible leave-takers.

The Number of Workers Unable to Take Needed Leave Declines

A concern for many policy makers is that many workers still need to take time off from work for family and medical emergencies but cannot do so. While leave-needers as a percent of the workforce dropped since the last survey (from 3.1% to 2.4%), about 3.5 million people still needed family or medical leave during the current survey period but did not take it.

As was true in 1995, almost half of the workers who needed leave and did not take it, needed leave for their own health condition. The next most common reason workers needed leave was to care for an ill parent (20% in 1995 and 23% in the 2000 survey).

The major reason these workers did not take needed leave was the same as in the 1995 survey—they could not afford to take unpaid leave. In fact, in the 2000 survey, even more leave-needers cited this as one of the reasons they did not take leave. (The proportion citing “lack of money” as a reason rose from 66% to 78%.) Almost 88 percent of these leave-needers said they would have taken leave if they had received some or additional pay.

Awareness of the Family and Medical Leave Act is Unchanged

In general, employers’ and employees’ awareness of whether they are covered by the Act has not changed since 1995. For those employers classified as covered,⁵ 84 percent said they

⁵ The survey questions used to determine coverage differed somewhat from coverage under the Act. This was done to ensure that the questions could be understood by the respondents. See the report for a further discussion of the differences.

knew they were covered. For employees in covered establishments, just 38 percent reported that the FMLA applied to them and about one-half did not know if it did. Less than two-thirds of covered employees and non-covered employees had heard of the FMLA (59% and 58%, respectively).

Under the Act, covered employers are required to take certain steps to notify employees of their rights and responsibilities. Yet, according to the employee survey, only 56 percent of employees at covered worksites reported that their employer posted the required notice explaining the FMLA. About 20 percent did not know if there was a notice.

Non-covered Establishments Increase Their Family and Medical Leave Benefits⁶

A larger proportion of non-covered employers provides family and medical leave than did so in the 1995 survey period. There are a number of possible reasons why more non-covered employers are offering family and medical leave benefits, for example, competition for new workers with other employers who offer these benefits, or because they found family friendly policies are good for their bottom line.

Although more non-covered establishments are offering “FMLA-type” leave than before, only one-third offer the full range of FMLA-qualifying leave and not all of them provide the other protections of the Act, such as restoration to the same or an equivalent job upon return from leave. Many employers grant family and medical leave “depending on the circumstances” and such leave may not be available all of the time or to all employees.

Workers Offer Support for Family and Medical Leave Policies

Generally, employees view family and medical leave policies favorably. The survey found that 81 percent of employees believed every worker should be able to have up to 12 weeks of unpaid leave in a year for family and medical reasons and two-thirds believed such leave was not an unfair burden on co-workers. Both of these findings were more positive in the 2000 survey than for the 1995 survey. In the 2000 survey, 85 percent of employees reported that the taking of leave by co-workers had a positive or neutral impact on them.

⁶ Note that 80 percent of non-covered establishments have 10 or less employees.

A Majority of Employers Report No Effect from FMLA

Two-thirds of covered employers reported that, overall, complying with the Act was very or somewhat easy, yet more covered employers reported that complying with the FMLA was very or somewhat difficult than did so in the 1995 survey. Nevertheless, the new survey data show that for the majority of covered employers, the Act still had a positive effect or no noticeable effect on productivity, profitability and growth.

Intermittent Leave Causes Minimal Business Effects

According to the 2000 survey, only slightly over one-quarter of leave-takers took intermittent leave (27.8%). In fact, almost 80 percent of longest leaves were uninterrupted leaves (i.e., not for intermittent leave). The findings for covered and eligible employees were very similar. Thus the availability of FMLA protected leave does not seem to significantly influence the use of intermittent leave.

About one-third of intermittent leaves were taken for the worker's own serious health condition, compared to half of the continuous leaves. The survey found that intermittent leave was about twice as likely as continuous leave to be used while caring for an ill child or parent.

The survey found that for most employers, intermittent leave had no impact on their business. Slightly more than 81 percent of employers said the use of intermittent leave had no impact on productivity and 94 percent said it had no impact on their profitability. However, large employers, those with more than 250 employees, did report more negative impact than did smaller employers (32% versus 17%).

Availability of Paid Leave is Unchanged

The availability of paid leave is very important, as is confirmed by the number of workers who needed leave but did not take it because they could not afford to do so. Even among those who took leave, their number one worry was having enough money to pay bills—54 percent of leave-takers cited it as a worry and one third of leave-takers received no pay during their longest leave. This percentage is unchanged since the 1995 survey. The survey also found that 37 percent of workers had to cut their leave short due to lost pay.

Conclusion

The data from the 2000 surveys show that the Family and Medical Leave Act is still a balanced approach to meeting the needs of workers and employers. It remains a very important tool for workers trying to balance work and family. And, for a large majority of employers, it has no noticeable effect on their overall productivity, profitability or growth.

The following report by Westat covers these findings and more. The authors do an excellent job of presenting the findings from two data-rich surveys. The Department gratefully acknowledges their efforts and those of Departmental staff, especially Lisa Stuart, Corman Franklin, and Barbara Bingham.