48 PERCENT OF WORKING NEW YORKERS SAY THEY DON’T HAVE PAID SICK LEAVE.

POLICY BRIEF

SICK IN THE CITY: What the Lack of Paid Leave Means for Working New Yorkers

An Analysis of Eight Years of Findings from *The Unheard Third*

October 2009
POLICY BRIEF

SICK IN THE CITY:
What the Lack of Paid Leave Means for Working New Yorkers

By Jeremy Reiss and Nancy Rankin, with Krista Pietrangelo

The Community Service Society of New York (CSS) is an informed, independent, and unwavering voice for positive action on behalf of New York City’s 3.1 million low-income New Yorkers. CSS draws on a 160-year history of excellence in using research, advocacy, litigation, and innovative program models to shape actionable policy solutions that strengthen and benefit all New Yorkers.

A Better Balance is a legal advocacy organization fighting to give American workers the time and flexibility they need to care for their families. We’re leaders in the movement to reshape laws and workplace practices to fit the needs of today’s labor force. www.abetterbalance.org.

About The Unheard Third 2009
The Unheard Third is an annual survey by the Community Service Society. The only survey of its kind nationally, The Unheard Third tracks the concerns and hardships of the city’s low-income residents—who comprise a third of voting-age citizens in New York City—and their views on what programs and policies would help them get ahead. CSS also surveys moderate- and higher-income city residents to see where their concerns converge and diverge from those of low-income New Yorkers. This policy brief uses data from the 2002 through 2009 editions of the survey.

About this Report
CSS partnered with A Better Balance: The Work and Family Legal Center to explore the role of paid sick leave in The Unheard Third 2009. This report is authored by Jeremy Reiss, CSS, and Nancy Rankin, A Better Balance, with Krista Pietrangelo, CSS. Ms. Rankin is also the former Director of Policy Research and Advocacy at CSS, where she oversaw The Unheard Third from 2002–2006. Anita Sharma, Lake Research Partners, provided invaluable research assistance and analysis, and Alia Winters provided editorial support. This report was designed by Damian Voerg. Special thanks to the Annie E. Casey Foundation for supporting the work of A Better Balance.
INTRODUCTION

The battleground in combating poverty has shifted in the last decade from a fight about welfare to a fight about work. Helping people get and retain good jobs is widely seen as the best path to economic security for those able to work. A major obstacle along that path, however, has been access to good jobs, ones that pay decent wages, provide benefits, and offer opportunities for career advancement. In 2002, the Community Service Society (CSS) began tracking job quality, surveying workers about whether or not their jobs provided paid sick leave, paid vacation, health insurance, prescription drug coverage, and more recently, access to education and training. These benefits are not optional frills, but key to enabling workers to hold onto their jobs while meeting their responsibilities to care for their families, maintain their health, save for the future, and enable their families to get ahead.

Our annual survey, The Unheard Third, reveals that a shockingly high percentage of working New Yorkers—now nearly half—do not receive paid sick days, something so basic that most Americans take it for granted. The survey findings have helped fuel a growing movement, nationally and in New York City, to ensure that all workers can earn paid sick time to care for their own health needs and those of their families.

This year, with a bill to require paid sick time pending before the New York City Council, CSS, in collaboration with A Better Balance, undertook an in-depth look at paid sick days. This analysis relies on eight years of data, as well as a new battery of questions added in 2009 to look at the consequences of not having paid sick days and the implications for public policy.

This policy brief examines these questions:

- How widespread is the lack of paid sick days? And what trends do we see? Are more workers gaining or losing paid sick days?
- Which workers are least likely to have paid sick days? How do working mothers, immigrants, and low-wage workers fare? Is lack of paid sick time concentrated in certain sectors or small businesses?
- Proponents of a law requiring employers to provide paid sick days cite risks to public health, arguing that workers without paid sick days are more likely to go to work sick, send sick children to school, and go to the emergency room because they can not afford to take time off during their job hours. This would have consequences not only for workers and their families, but could also put the health of others at risk and drive up health care costs. We asked workers, with and without paid sick time, directly about these matters. What do the survey findings tell us?
- And finally, where does the public stand on this issue? Do New Yorkers favor passage of a paid sick time law?

We estimate that between 1.65 million and 1.85 million working New Yorkers receive no paid sick leave, and between 1.3 and 1.5 million workers have no paid leave whatsoever, for sickness or vacation.
We Estimate That at Least 1.3 Million Working New Yorkers Receive No Paid Leave From Their Jobs—Neither Paid Sick Leave Nor Paid Vacation Leave.¹

Chart 1 shows that nearly half (48 percent) of working New Yorkers in our survey report that they do not have paid sick leave. Nearly 4 in 10 workers report having no paid leave—neither paid sick leave nor paid vacation leave.

Based on our sample, we estimate that between 1.3 million and 1.5 million working New Yorkers have no paid leave for either sickness or vacation.² We further estimate that between 1.65 million and 1.85 million working New Yorkers have no paid sick leave, and between 1.5 million and 1.7 million workers have no paid vacation leave.

Two-Thirds of Low-Income Workers Have No Paid Sick Leave.

Nearly half (48 percent) of working New Yorkers do not have paid sick leave. Low-income workers are twice as likely as higher-income workers to report not having paid sick leave—two-thirds (66 percent) of low-income workers lack this benefit, versus 3 in 10 higher-income workers.³ In addition, more than 4 in 10 moderate-income workers do not have paid sick leave, as Chart 2 shows.
Low-Income Latinos Are Least Likely to Have Paid Sick Leave.

While approximately two-thirds of low-income workers lack paid sick leave, low-income Latinos fare the worst—more than 7 in 10 do not have paid sick leave. We believe this is in part because low-income Latinos are more likely than blacks and whites to be working in sectors where union density is low.4

Lack of sick days is not only a problem facing new immigrant workers, as some might assume. High percentages of both native-born and immigrant workers lack paid sick leave.

Furthermore, although working moms do not disproportionately lack paid sick time compared to other groups of low-income workers, they are likely to disproportionately feel its impact. In addition to needing leave for themselves, working mothers shoulder the majority of responsibilities for caring for sick children.

Chart 3 below shows the proportion of low-income New Yorkers who do not have paid sick leave by race, nativity, and gender.

Working moms without paid sick leave face a double challenge. In addition to needing leave for themselves, they shoulder the majority of responsibilities for caring for sick children.

<table>
<thead>
<tr>
<th>Demographic</th>
<th>No Paid Sick Leave</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Low-Income Workers</td>
<td>66 percent</td>
</tr>
<tr>
<td>Race</td>
<td></td>
</tr>
<tr>
<td>Low-Income Latinos</td>
<td>72 percent</td>
</tr>
<tr>
<td>Low-Income Whites</td>
<td>66 percent</td>
</tr>
<tr>
<td>Low-Income Blacks</td>
<td>58 percent</td>
</tr>
<tr>
<td>Immigrant Status</td>
<td></td>
</tr>
<tr>
<td>Low-Income Foreign-Born</td>
<td>68 percent</td>
</tr>
<tr>
<td>Low-Income Native-Born</td>
<td>64 percent</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Low-Income Men</td>
<td>66 percent</td>
</tr>
<tr>
<td>Low-Income Women</td>
<td>65 percent</td>
</tr>
<tr>
<td>Low-Income Working Moms</td>
<td>60 percent</td>
</tr>
</tbody>
</table>

The working poor—those in the lowest paid jobs—have historically had jobs with the least likelihood of offering employer-sponsored benefits. Chart 4 shows that only approximately one in three poor workers has reported receiving paid sick leave throughout the decade.

It is distressing to see that benefits for workers at the next rung up on the jobs ladder—those in households earning between 101 percent and 200 percent of the federal poverty level (approximately $18,000 to $36,000 for a family of three)—have declined substantially over the last several years. Chart 4 shows that paid sick leave has sharply dropped for these near-poor workers, from 56 percent in 2007 to 33 percent in 2009.

The Unheard Third 2009 shows that the drop in paid sick leave for the near poor is consistent with a drop in other employer-sponsored benefits for this population—health insurance for individuals, health insurance for families, and prescription drug coverage. This drastic scaling back of employer-sponsored benefits for the near poor—who historically were more likely to receive benefits—signifies a trend of decreasing job quality for low-income New Yorkers at the same time that job loss is rampant.
Moderate- and Higher-Income New Yorkers Are Also Experiencing a Decline in Paid Sick Leave.

Paid sick leave has also declined for moderate- and higher-income New Yorkers (those in households earning more than 200 percent of the federal poverty level), from 75 percent in 2002 (and 82 percent in 2004) to 63 percent in 2009, as Chart 5 below shows.


Chart 6 shows that workers in union households are more likely to receive paid sick leave than their non-union counterparts. More than 6 in 10 workers in union households in New York City receive paid sick leave, as opposed to less than half of workers in non-union households.

Likewise, 43 percent of workers in low-income union households (below 200 percent of the federal poverty level) receive paid sick leave, compared to only 33 percent of workers in low-income non-union households.
Workers in Small Businesses Are Least Likely to Receive Paid Sick Leave.

Chart 7 below shows that workers in small businesses are least likely to receive paid sick leave. For instance, nearly two-thirds of workers in businesses with 10 or fewer employees do not receive paid sick leave—as compared to only 18 percent of workers in large businesses with 500 or more employees. In addition, workers in the smallest businesses—those with 10 or fewer employees—represent more than a quarter (26 percent) of all working New Yorkers without paid sick leave, as Chart 8 highlights. Businesses with fewer than 50 employees include nearly half (49 percent) of working New Yorkers without paid sick leave.

Businesses with fewer than 50 employees include nearly half (49 percent) of working New Yorkers without paid sick leave.

Chart 9 shows that more than two-thirds of workers in the leisure, hospitality, and retail and wholesale trade sectors do not have paid sick leave. In addition, more than 6 in 10 workers in manufacturing and construction do not have paid sick leave. On the other hand, fewer than 4 in 10 workers in education services and health services (sectors with high union density) do not receive paid sick leave.

Paid sick leave is a public health issue. Workers who go to work sick can spread germs to their co-workers. The fact that workers in the sectors with the most contact with the public—leisure, hospitality, and retail and wholesale trade—are the least likely to have paid sick leave is especially concerning. As the H1N1 flu and seasonal flu return, it is worrisome that workers in these sectors, which include food service workers, are the least likely to have paid sick leave. Both their co-workers and the general public are placed at risk if they are unable to stay home from work when they are sick.

The workers who are least likely to have paid sick time are those who are handling our food and merchandise in restaurants and retail shops.

![Chart 9](image-url)

**Chart 9**

Percent of Workers NOT Receiving Paid Sick Leave, by Sector*

<table>
<thead>
<tr>
<th>Sector</th>
<th>Percent of Workers NOT Receiving Paid Sick Leave</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leisure, Hospitality, Retail and Wholesale Trade</td>
<td>68%</td>
</tr>
<tr>
<td>Construction*</td>
<td>62%</td>
</tr>
<tr>
<td>Manufacturing*</td>
<td>60%</td>
</tr>
<tr>
<td>Professional and Business Services, Information, and Financial Activities</td>
<td>46%</td>
</tr>
<tr>
<td>Educational Services</td>
<td>38%</td>
</tr>
<tr>
<td>Health Services</td>
<td>37%</td>
</tr>
</tbody>
</table>

*Small n size for Construction and Manufacturing.
Tough Choices for Low-Income Workers Without Paid Sick Leave.

Low-income workers are often forced to make tough choices—choices that none of us should be forced to make—when deciding whether or not to go to work sick, and deciding whether or not to send their kids to school sick. The vast majority (66 percent) of low-income workers do not have paid sick leave. Fifty-five percent of low-income workers have no paid leave whatsoever—not paid sick leave nor paid vacation leave.

Low-Income Workers without Paid Sick Leave Are More Likely to Go to Work Sick

Without paid sick leave, low-income workers are more likely to go to work sick because they fear losing their job or losing pay—more than 7 in 10 low-income workers without paid sick leave reported doing so in the last year.

In fact, for respondents of all incomes, the percentage of workers who report going to work sick for fear of losing their job or losing pay is greater for those without paid sick days (56 percent) than for workers with sick days (42 percent).

Low-Income Workers Without Paid Sick Leave Are More Likely to Report Employer Threats

Low-income workers with no paid sick leave were nearly twice as likely than those with paid sick leave to report that their employer threatened to fire, suspend, write up, or otherwise penalize them for wanting to take time off to recover from an illness or to care for a sick child (17 percent versus 9 percent).

The difference between workers with paid sick leave and without paid sick leave is most pronounced for the near poor—those in households with incomes between 101 percent and 200 percent of the federal poverty level. Only 4 percent of near-poor workers with paid sick leave reported that their employer threatened them for taking time off while they or their children were sick, compared to 17 percent of near-poor workers without paid sick leave.

Low-Income Workers Without Paid Sick Leave Are More Likely to Go to the Emergency Room

Additionally, low-wage workers without paid sick leave were more likely to go to the emergency room because they were unable to take time off from work to get medical care during normal work hours. Nearly one in four low-wage workers without paid sick leave were forced to use the emergency room because they could not get time off.

For respondents of all incomes, nearly one in five workers citywide (19 percent) without paid sick leave were are also forced to make this choice, compared to only 12 percent of workers with paid sick leave.
Lack of paid sick time has a cumulative impact on low-income workers; they are more likely to go to work sick, be threatened with retaliation at work, and rely on the emergency room.

**Low-Income Workers Without Paid Sick Leave Are More Likely to Send a Sick Child to School or Day Care**

In addition to the litany of problems reported by low-income workers without sick days, those who are parents face another dilemma: what to do when one of their children is sick. Thirty percent of low-income working custodial parents without paid sick leave report that in the last year they sent a sick child to school or day care because they could not take time off from work.

Children are particularly vulnerable to the swine flu, or H1N1 virus. In last spring’s outbreak, the highest rate of illness was among school children, ages 5 to 17; 22 percent of children in New York City were infected according to the New York City Department of Health and Mental Hygiene.9 With the likelihood of a resurgence of the H1N1 flu during the 2009–10 school year, New York City has adopted an “open school” policy, in which schools would be closed only as a last resort. The city has focused on preventing the spread of the H1N1 flu through vaccination and containment efforts. The success of this strategy rests on the ability of working parents to keep their sick children home from school so they do not spread the infection to other students.

However, it will be difficult for many low-income public school parents to keep infectious children home from school because they do not have paid sick leave they can use for caring for a sick child. Overall, 65 percent of working low-
income public school parents—nearly two out of three—do not have paid sick leave. For working parents with public school children living in poverty (below 100 percent of the federal poverty level), the figure rises to 69 percent.

In addition, Chart 13 below shows that among low-income public school parents:

- 30 percent reported taking a child or another family member to the emergency room because they were unable to take off from work to get medical care during their normal job hours;
- 27 percent admitted sending a sick child to school; and
- 20 percent reported that their employer threatened to fire, suspend, write up, or otherwise penalize them for wanting to take off to recover from illness or to care for a sick child.

Anecdotal evidence—interviews with school nurses and conversations with parents—suggests that parents face stressful situations when they are called to pick up a child who becomes ill during the school day. In a focus group with parents of children with asthma in Harlem, parents described their situations this way:

“Do what you gotta do...your child comes first, sick time or no sick time.”

“You worry that they will fire you from the job if you take too much time, but what are you going to do?”

“It is very hard when the school calls you to come and get your child because he is having a bad day of it.”

“I was written up once or so because I had to leave to go and take care of my child in an emergency...and after some time you start to blame your child in a way. It is really stressful.”

“Especially when you are a single parent...it is very hard.”

Parents put the health of their children first, but as a result, may jeopardize their jobs, economic security, and health insurance coverage.

Anecdotal accounts also reveal that desperate parents sometimes pull older siblings out of school to take on the adult responsibilities of caring for a sick younger brother or sister or to take them to the doctor. Additional research would be helpful in investigating how frequently this occurs and its impact on the older student’s attendance and performance.
Emergency Room Visits—The Role of Paid Sick Leave and Health Insurance.

For low-income workers with health insurance, those without paid sick leave are more likely than those with paid sick leave to report using the emergency room because they were unable to take off time from work to get medical care during normal job hours. Chart 14 below shows that 22 percent of low-income workers with health insurance but without paid sick leave used the emergency room for this reason in the last year, compared to 13 percent of low-income workers with both health insurance and paid sick leave.

This finding suggests that even with health insurance, lack of paid sick days is a factor driving up expensive emergency room visits and health care costs. In Massachusetts, high rates of emergency room use have persisted despite major strides in achieving near-universal coverage as a result of their 2006 health reform initiative. A recent Urban Institute study investigating the reasons for this found that, consistent with national data, emergency room use is not due to lack of health insurance coverage. The authors report: “A need for care outside of normal business hours was a common reason for making an Emergency Department visit for non-emergency care.” Advocates in Massachusetts have called paid sick days “the missing piece to Massachusetts Health Care Reform.” Commenting on the continued reliance on high-cost emergency rooms and access to primary care, Dr. Judy Ann Bigby, the Massachusetts Secretary of Health and Human Services, said, “the issue...is going to affect lower-income people who are more likely to not be able to take time off in the middle [of the] day without losing pay.”

Even for those who have health insurance, lack of paid sick leave is a factor driving up expensive emergency room visits and health care costs.

<table>
<thead>
<tr>
<th>Chart 14</th>
<th>Low-Income Workers with Health Insurance, Use of Emergency Room</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Paid Sick Leave Differential</strong></td>
<td>The Unheard Third 2009</td>
</tr>
<tr>
<td>Low-Income Working with Health Insurance and WITH Paid Sick Leave</td>
<td>13%</td>
</tr>
<tr>
<td>Low-Income Working with Health Insurance and WITHOUT Paid Sick Leave</td>
<td>22%</td>
</tr>
<tr>
<td>* Small n size.</td>
<td></td>
</tr>
</tbody>
</table>

* * *
New Yorkers at Every Income Level Support Paid Sick Leave.

New Yorkers across income strongly support a paid sick leave law in New York City. In The Unheard Third 2007, New Yorkers were asked which of the following two statements comes closer to their view:15

- Some people say there should be a law that requires employers to give full-time workers at least seven days of paid sick leave annually so workers don’t have to choose between losing their pay or going to work sick, sending sick children to school or leaving them alone.

- Other people say that in this economy, a law that requires employers to give full-time workers at least seven days of paid sick leave will open up the door for abuse by employees and will also be an unfair burden on some businesses, particularly small businesses, forcing them to cut jobs or increase prices.

Chart 15 below shows that approximately three-quarters of all New Yorkers support requiring employers to give full-time workers at least seven days of paid sick leave annually.

Approximately three-quarters of all New Yorkers support requiring employers to give full-time workers at least seven days of paid sick leave annually.

Support for paid sick leave is robust across income. Regardless of their own personal situations, New Yorkers recognize the need for this common-sense policy. In addition, New Yorkers across the political spectrum—including Independents and Republicans—support paid sick leave, as Chart 16 below shows. Nearly 9 in 10 (88 percent) working moms support establishing a paid sick leave law.

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Support for New York City Paid Sick Leave Law</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor (≤100% FPL)</td>
<td>74%</td>
</tr>
<tr>
<td>Near-Poor (101-200% FPL)</td>
<td>77%</td>
</tr>
<tr>
<td>Moderate- to Higher Income (&gt;200% FPL)</td>
<td>76%</td>
</tr>
<tr>
<td>Public School Parents</td>
<td>77%</td>
</tr>
<tr>
<td>Democrats</td>
<td>79%</td>
</tr>
<tr>
<td>Independents</td>
<td>80%</td>
</tr>
<tr>
<td>Republicans</td>
<td>60%</td>
</tr>
<tr>
<td>Working Women</td>
<td>80%</td>
</tr>
<tr>
<td>Working Mothers with Children under 18</td>
<td>88%</td>
</tr>
</tbody>
</table>
Conclusion

Nearly half (48 percent) of working New Yorkers—an estimated 1.65 million wage earners—reported that they did not receive any paid sick time on their jobs, according to The Unheard Third 2009 survey. That number has been rising in recent years, most dramatically for low-income workers in families living just above the federal poverty level. Two out of three workers in lower-income families are now without paid sick days, a labor standard so basic that many of us would have assumed all workers had it. Low-income Latinos in the workforce are especially hard hit, with more than 7 in 10 lacking paid sick days.

The lack of paid sick days is not limited to those at the bottom of the economy: a surprising 44 percent of moderate-income workers and 30 percent of higher-income workers do not report getting paid sick time. Even more troubling, at least 1.3 million workers in New York City do not receive a single day of paid leave for either sickness or vacation.

Jobs without paid sick leave are concentrated in small businesses, the service sector, and non-union jobs. A quarter of working New Yorkers without paid sick days are in firms with 10 or fewer employees where only about a third of the workers have paid sick days. Nearly half of the workers without paid sick days are in firms with fewer than 50 employees. Looking at the likelihood of having sick days by industry, the survey found that workers were least likely to have paid sick time in leisure, hospitality, and retail and wholesale trade, where just 32 percent of workers reported having paid sick time. More than 6 in 10 workers in union households receive paid sick days, in comparison to less than half of workers in non-union households.

These findings have important implications for proposed city legislation that would require employers to provide a minimum amount of paid sick time. Under this legislation, all non-government workers in New York City would earn an hour of paid sick time for every 30 hours worked, for up to nine days of paid sick time a year for businesses with 10 or more employees. Smaller firms would only have to provide up to five days of paid sick time annually. Proponents of the bill have argued against a so-called “carve out” for small businesses or sectors like the restaurant industry. This research supports the need to cover businesses of all sizes. Excluding small firms would defeat the very purpose of the legislation by leaving out so many of the workers who most need paid sick time.

The survey findings also provide strong evidence supporting the economic and public health arguments that have been made for a paid sick time law. For the two thirds of lower-income workers without paid sick leave, taking time off from their jobs to care for their own health needs or to care for a sick child means sacrificing their pay. But it can also mean putting their jobs at risk. Compared to low-income workers with sick days, low-income workers without sick days were nearly twice as likely to report that their employer threatened to fire, suspend, write up, or otherwise penalize them for wanting to take time off to recover from an illness or to care for a sick child (17 percent versus 9 percent).

The survey points to the likely public health consequences—more spread of contagious illnesses and higher health care costs—of lack of paid sick days. The most serious problem is for low-wage working families, living paycheck to paycheck, who cannot afford to lose even a day’s wages. Low-income workers without paid sick days are more likely to go to work sick, send a sick child to school or day care, and go to the emergency room than low-income workers with paid sick days.

Among low-income workers without paid sick days the survey found:

- 71 percent reported going to work sick because they feared losing their pay or their jobs (compared to 60 percent of those with paid sick days);
- 30 percent of working parents admitted to having sent a sick child to school or day care because they could not take off from work (compared to 25 percent of those with paid sick days)—the true number is probably actually higher; and
- 24 percent said they went to hospital emergency rooms because they were unable to take off from work to get medical care during their normal job hours (compared to 17 percent of those with paid sick days).
Because many of those without paid sick days also lack health insurance, some have speculated about whether lack of paid sick days by itself contributes to greater reliance on high-cost hospital emergency rooms. This survey found that it does. Twenty-two percent of low-income workers with health insurance but without paid sick leave reported using hospital emergency rooms in the past year because they were unable to take time off from work, compared to 13 percent of low-income workers with both health insurance and paid sick leave. In other words, controlling for income and health insurance coverage, those without paid sick days were 70 percent more likely to have visited the emergency room.

When workers have no real choice but to go to work sick and send sick children to school, they risk increasing the spread of contagious illnesses to co-workers, customers, classmates, and in turn, their families. This is especially true in a city like New York, where commuters crowd into subways and congested spaces. The problem is also heightened because, as the findings show, those least likely to have paid sick time are handling our food or merchandise in restaurants and retail shops.

If we had any doubts, the risks were brought home by the spring 2009 outbreak of H1N1 flu. The flu infected an estimated 750,000 to 1 million people in New York City, overloaded emergency rooms, and led to the closure of scores of schools. This fall, public officials from the President to the Mayor urged us to stay home from work and keep children home from school if flu symptoms strike. This simple advice is hard to follow for the estimated million and a half working New Yorkers who do not have a single day of paid sick time.

The vast majority of New Yorkers want to change this situation. They favor passing a law to ensure that all workers can earn paid sick time. Even when presented with the opposing arguments, that it could be hard for some businesses or increase prices, three out of four of those polled favor requiring employers to provide at least a minimum number of paid sick days. Support is found across all income groups, demographics, and political affiliations, but is especially high (88 percent) among working moms—a constituency extremely sensitive to balancing work and family responsibilities.

While Congress and the President wrestle with fixing America’s health care system, many workers struggle with the everyday crisis of simply being able to take time off from work to go to the doctor or cool a feverish child’s forehead. Even with insurance coverage, they may not be able to afford the cost of losing a few days pay, which could easily amount to more than their co-pays or even the full cost of a doctor’s visit or prescription. No one wants to work sick or send contagious children to school. And no one wants sick workers to serve them food, cough in the next cubicle, grab onto their subway pole, or drive with medications that impair their abilities. A paid sick time law that allows workers to get better will make life better for all New Yorkers.
Methodology

The methodology for The Unheard Third has remained the same for each of the last eight years. CSS designs the survey in collaboration with Lake Research Partners, and Lake Research Partners administers the survey.

The Unheard Third 2009 surveyed 1,212 New York City residents. The survey was divided into two samples: 809 “low-income” New York City residents (up to 200 percent of the federal poverty level), and 403 “moderate- and higher-income” residents (above 200 percent of the federal poverty level), age 18 or older. The low-income sample includes two populations: 366 “poor” respondents (earning at or below 100 percent of the federal poverty level), and 443 “near-poor” respondents (earning between 101 percent and 200 percent of the federal poverty level). The second sample also includes two populations: 200 “moderate-income” respondents (earning between 201 percent and 400 percent of the federal poverty level), and 203 “higher-income” respondents (earning above 400 percent of the federal poverty level). The survey was conducted from July 7 to August 3, 2009.

Telephone numbers for the low-income samples were drawn using random digit dial (RDD) among exchanges in census tracts with an average annual income of no more than $40,000. Telephone numbers for the higher-income sample were drawn using RDD in exchanges in the remaining census tracts. The data were weighted slightly by gender, age, region, party identification, immigration status, education, and race in order to ensure that it accurately reflects the demographic configuration of these populations. In the combined totals, respondents in the low-income sample were weighted down to reflect their actual proportion among all residents.

In interpreting survey results, all sample surveys are subject to possible sampling error; that is, the results of a survey may differ from those which would be obtained if the entire population were interviewed. The size of the sampling error depends upon both the total number of respondents in the survey and the percentage distribution of responses to a particular question. The margin of error for the 2009 low-income component is +/- 3.5 percent. The margin of error for the 2009 moderate- and higher-income component is +/-4.9 percent. The margin of error for all respondents combined in 2009 is +/-2.8 percent.

This report includes data from past editions of The Unheard Third survey. The chart below describes the survey sample sizes for each of the last eight years.

<table>
<thead>
<tr>
<th>The Unheard Third Sample Size by Year:</th>
<th>Total Sample</th>
<th>Low-Income Sample (≤200% FPL)</th>
<th>Moderate- and Higher-Income Sample (&gt;200% FPL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>1212</td>
<td>809</td>
<td>403</td>
</tr>
<tr>
<td>2008</td>
<td>1523</td>
<td>1015</td>
<td>508</td>
</tr>
<tr>
<td>2007</td>
<td>1551</td>
<td>1036</td>
<td>515</td>
</tr>
<tr>
<td>2006</td>
<td>1888</td>
<td>1388</td>
<td>500</td>
</tr>
<tr>
<td>2005</td>
<td>1500</td>
<td>1000</td>
<td>500</td>
</tr>
<tr>
<td>2004</td>
<td>1300</td>
<td>1000</td>
<td>300</td>
</tr>
<tr>
<td>2003</td>
<td>1000</td>
<td>750</td>
<td>250</td>
</tr>
<tr>
<td>2002</td>
<td>800</td>
<td>600</td>
<td>200</td>
</tr>
</tbody>
</table>
Appendix: The Unheard Third 2009:  
Paid Sick Leave Questions

Now, thinking about the past year, please answer the following questions:

1. How often did you go to work sick because you were worried about losing your pay or losing your job if you missed work to recover or get needed medical care—did you go to work sick frequently, sometimes, a few times, or never?
   - [ ] Frequently
   - [ ] Sometimes
   - [ ] A few times
   - [ ] Never
   - [ ] (don’t know)

2. Has your employer ever threatened to fire, suspend, write up, or otherwise penalize you for wanting to take time off to recover from an illness or to care for a sick child?
   - [ ] Yes
   - [ ] No
   - [ ] (don’t know)

3. Have you ever gone to the hospital emergency room yourself because you were unable to take off from work to get medical care during your normal job hours?
   - [ ] Yes
   - [ ] No
   - [ ] (don’t know)

4. Have you ever taken your child or another family member to the hospital emergency room because you were unable to take off from work to get medical care during your normal job hours?
   - [ ] Yes
   - [ ] No
   - [ ] (don’t know)

5. Sometimes people end up sending a sick child to school or daycare because they have to go to work. Have you ever had to send a sick child to school or daycare because you could not take off from work?
   - [ ] Yes
   - [ ] No
   - [ ] (don’t have children)
   - [ ] (don’t know)
Notes

1. Respondents who were employed were asked if they have paid sick leave and/or paid vacation leave. A total of 61 percent reported that they have paid sick leave and/or paid vacation leave. We assume the other 39 percent of working respondents do not have either form of paid leave because they did not say they do.

2. Estimates are based on June 2009 employment figures—3,647,814 according to the United States Bureau of Labor Statistics’ local area unemployment statistics (LAUS) based on the CPS (http://data.bls.gov/cgi-bin/surveymost). This is the not seasonally-adjusted employment number for June 2009, the month before the survey was fielded. Estimates reflect a +/-2.8 percent margin of error in The Unheard Third 2009.

3. Data represent the percent of workers with no paid sick leave only. Paid vacation leave is not factored into this analysis.


6. Respondents were asked whether they were in a union or non-union household. Respondents were not asked if they themselves were members of a union. If anything, these data likely under-represent the prevalence of paid sick leave among union workers.

7. Small n size for low-income union households.

8. Due to small sample sizes, we are not able to provide rates of paid sick leave for “Transportation and Utilities” and “Government” sectors. Given the high rates of unionization and history of robust benefits in public employment, however, we would expect a high prevalence of paid sick leave for those who work in Government.

9. Press conference at Gracie Mansion by Mayor Michael Bloomberg and New York City Department of Health Commissioner Dr. Thomas Farley, September 1, 2009, broadcast on NY1.

10. Unpublished transcript of focus group discussion with parents of children with asthma in East Harlem, held June 24, 2009 by East and Central Harlem District Public Health Office, New York City Department of Health and Mental Hygiene. At the request of A Better Balance researcher, Nancy Rankin, a series of questions on paid sick days was added to the focus group discussion guide exploring how to improve asthma services to patients being served by the Harlem asthma network.


12. Nearly all (88 percent) of Massachusetts emergency room users had insurance coverage. However, they were less likely to have employer-sponsored plans.


15. Note that in conducting the poll, the order of the two statements was rotated so that the order did not bias the results.

16. The City Council does not have the authority to cover public sector employees, most of whom, however already have paid sick days.

17. Estimate is based on a New York City Department of Health and Mental Hygiene survey, reported by New York City Health Commissioner, Dr. Thomas Farley, in a press briefing, September 1, 2009, as reported in the NY Times, Sewell Chan and Lisa W. Foderaro, “This Time, City Says It’s Ready For Swine Flu,” September 2, 2009.