

POSITION STATEMENT:

Support Paid Family and Medical Leave to Reduce Financial Toxicity of Cancer for Survivors and Caregivers

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SUMMARY STATEMENT

The Society of Behavioral Medicine strongly urges Congress to pass The Family and Medical Insurance Leave (FAMILY) Act (H.R. 1185/S. 463) in order to expand access to paid medical leave and reduce the financial toxicity of cancer.

THE PROBLEM

The number of cancer survivors in the U.S. is expected to grow exponentially over the next decade. The National Cancer Institute defines cancer survivorship from the time of diagnosis until the end of life. A cancer diagnosis and cancer treatments can have a significant impact on the physical and psychosocial well-being and overall quality of life of both cancer survivors and their caregivers. For this reason, the definition of survivor often includes family, friends, and caregivers, in recognition of the effect of a cancer diagnosis beyond the individual diagnosed with cancer.

Reliable employment can provide financial stability and health insurance for cancer survivors and caregivers, but workplace challenges often have a significant impact on employment following a cancer diagnosis¹⁻³. Cancer survivors experience higher rates of unemployment compared to individuals without a cancer history and an overall decline in household income after a cancer diagnosis⁴. Challenges for cancer survivors include, but are not limited to:

- Stigma of a cancer diagnosis
- Changes in physical appearance
- Workplace discrimination
- Changes in cognitive function and psychological status

Cancer caregivers experience fatigue and stress from juggling the competing demands of work and caretaking. Challenges for caregivers include but are not limited to:

- Reduced productivity
- Absenteeism
- Reduced income and benefits
- Changes in employment status



CURRENT POLICIES

The Family and Medical Leave Act of 1993 (FMLA) addresses some of these challenges, offering job protected leave with continuous health insurance for cancer survivors and their caregivers. However, the scope of the law is limited. It leaves many survivors and caregivers without access to medical leave required for cancer treatment and recovery. Employees who have a serious health condition and are unable to perform the essential functions of their job or who are caring for a spouse, child, or parent who has a serious health condition may be eligible for FMLA, however they must meet strict criteria, which often limits access. Criteria include:

- Work in organizations with more than 50 employees
- Worked in the same organization for at least 12 months
- Worked at least 1250 hours in the past year

More than 40 percent of US workers are not eligible for FMLA because they do not meet these criteria⁵. Moreover, there is a disproportionate impact on those with seasonal jobs or multiple part-time jobs. Survivors who are young adults, elderly, or immigrants often rely on caregivers outside of their immediately family, who do not meet

eligibility criteria for FMLA. Workers who meet eligibility criteria still face additional barriers: FMLA is unpaid and limited to 12 weeks per year. Approximately one-half to one-third of eligible workers cannot afford to take unpaid leave⁵⁻⁷, with the greatest impact on

- Low-wage workers, primarily women
- Racial/ethnic minorities
- Lower educated workers
- Blue collar workers

A 2017 study⁸ found that 78 percent of workers who took leave for cancer-related reasons in the previous year received no pay. Finally, the length of leave is inadequate for many cancer treatment protocols that last longer than the 12 weeks allowed under FMLA. While the 12 weeks of leave can be distributed over a longer period of time (i.e., 1 day per week for 60 weeks), this introduces additional practical challenges, such as scheduling or arranging work coverage, creating further barriers to using FMLA.

POLICY RECOMMENDATIONS

- The Society of Behavioral Medicine (SBM) recommends Congress reduce a barrier to FMLA by passing the The Family and Medical Insurance Leave (FAMILY) Act (H.R. 1185/S. 463) which provides 12 weeks of paid medical leave insurance for all, funded through payroll contributions administered by the federal government and based on the evidence of successful paid leave programs in California, New Jersey, New York, and Rhode Island⁹⁻¹⁴.
- SBM recommends Congress expand eligibility criteria for FMLA by reducing work setting size from 50 to 25 employees, reducing restrictions on length of employment and number of hours worked, and expanding the definition of caregivers to ensure support for all cancer caregivers and to recognize all types of families.

Both recommendations should be passed to have the greatest impact on reducing the financial toxicity of cancer for cancer survivors and caregivers.

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ENDORSEMENTS

