

1 **OHIO STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES**

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3 **Resolution No. 15 – 2024**

4
5 **Introduced by:** Medical Student Section

6
7 **Subject:** Support for Parental Leave

8
9 **Referred to:** Resolutions Committee No. 1

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12
13 **WHEREAS**, parental leave is defined as an employment policy allowing time off
14 to new parents for the birth, adoption, or foster placement of a new child¹; and

15
16 **WHEREAS**, pregnancy loss is defined as a pregnancy ending before 20 weeks
17 of gestation, including miscarriage and abortion²; and

18
19 **WHEREAS**, the Family and Medical Leave Act (FMLA) allows guaranteed unpaid
20 leave for 12 weeks following the birth of a child and placement of an adoptee or foster
21 care child for eligible employees³; and

22
23 **WHEREAS**, in 2022, 47% of Ohioans were ineligible for FMLA⁴; and

24
25 **WHEREAS**, In 2022, only 27-28% of private, civilian, and local and state
26 government workers had access to paid family leave⁵; and

27
28 **WHEREAS**, in 2020, 13.2% of US companies provided unpaid leave after
29 pregnancy loss, and 8.7% provided paid leave after pregnancy loss⁶; and

30
31 **WHEREAS**, Ohio provides eligible state government employees with 12 weeks
32 of paid parental leave to use within one year of the birth, stillbirth, or adoption of a
33 child⁷; and

34
35 **WHEREAS**, Ohio defines stillbirth as loss of pregnancy after 20 weeks of
36 gestation⁷; and

37
38 **WHEREAS**, only 13.8% of Ohio's working population is employed by the
39 government as of November 2023⁸; and

40
41 **WHEREAS**, Ohio has no state legislation providing paid parental leave to non-
42 government employees⁹; and

43
44 **WHEREAS**, paid maternity leave has been associated with decreased rates of
45 infant and maternal hospitalization compared to women without paid maternity leave¹⁰;
46 and

47
48 **WHEREAS**, paid maternity leave has also been associated with better language
49 outcomes for infants compared to those women without paid maternity leave¹¹; and
50

51 **WHEREAS**, the introduction of paid maternity leave in California, Hawaii, New
52 Jersey, New York, and Rhode Island led to a 3% reduction in low birthweight and 7%
53 reduction in preterm births, especially for Black mothers¹²; and
54

55 **WHEREAS**, implementation of California’s Paid Family Leave program led to a
56 10-20% increase in rates of breastfeeding at 3, 6, and 9 months of age¹³; and
57

58 **WHEREAS**, opposite-sex couples where the father took paternity leave were
59 more likely to have higher quality co-parenting and relationships¹⁴; and
60

61 **WHEREAS**, same-sex couples are 2.5 times more likely to foster a child than
62 opposite-sex couples and over 2 times more likely to adopt a child¹⁵; and
63

64 **WHEREAS**, only 48% of employers provide LGBTQIA+-inclusive parental leave
65 policies¹⁶; and
66

67 **WHEREAS**, adoption costs range from \$20,000 to \$60,000 on average, resulting
68 in a high financial burden on new parents¹⁷; and
69

70 **WHEREAS**, working families in the United States experience \$20.6 billion in lost
71 wages due to not having access to paid family or medical leave¹⁸; and
72

73 **WHEREAS**, pregnancy loss is associated with a \$2,500 loss in annual income¹⁹;
74 and
75

76 **WHEREAS**, an analysis of California’s Paid Family Leave program found that
77 mothers that took paid parental leave were more likely to return to their original
78 employer, with the effect increasing as leave pay increases²⁰; and
79

80 **WHEREAS**, after implementation of California’s Paid Family Leave program, the
81 average business has seen lower rates of employee turnover than before
82 implementation²¹; and
83

84 **WHEREAS**, as of 2023, 13 states and D.C., not including Ohio, have laws
85 providing state-wide paid parental leave for the birth, adoption, or foster placement of a
86 new child, ranging from 6 to 18 weeks of paid leave²²; and
87

88 **WHEREAS**, D.C.’s Paid Family and Medical Leave Program covers miscarriage
89 in addition to stillbirth for their government employees, a step beyond what Ohio
90 provides²³; and
91

92 **WHEREAS**, California mandates that all employees are provided with
93 reproductive loss leave, covering pregnancy loss and failed adoption, although it does
94 not specify whether employers must provide paid reproductive loss leave²⁴; and
95 therefore

96
97 **BE IT RESOLVED**, that our OSMA supports paid parental leave following the
98 birth, adoption, or foster placement of a new child and following an abortion,
99 miscarriage, or stillbirth.

100
101 **Fiscal Note:** \$ (Sponsor)
102 \$ 500 (Staff)

103
104 **References:**

- 105
106 1. Office of Federal Contract Compliance Programs. Parental Leave Frequently
107 Asked Questions. U.S. Department of Labor. Last updated August 13, 2020.
108 Accessed January 11, 2024. [https://www.dol.gov/agencies/ofccp/faqs/parental-](https://www.dol.gov/agencies/ofccp/faqs/parental-leave)
109 leave
- 110 2. Prager, S., Micks, E., Dalton, V.K. Pregnancy loss (miscarriage): Terminology,
111 risk factors, and etiology. UpToDate. Last updated January 2, 2024. Accessed
112 January 11, 2024. [https://www.uptodate.com/contents/pregnancy-loss-](https://www.uptodate.com/contents/pregnancy-loss-miscarriage-terminology-risk-factors-and-etiology)
113 miscarriage-terminology-risk-factors-and-etiology
- 114 3. Wage and Hour Division. Fact Sheet #28: The Family and Medical Leave Act.
115 U.S. Department of Labor. Last updated February 2023. Accessed January 10,
116 2023. <https://www.dol.gov/agencies/whd/fact-sheets/28-fmla>
- 117 4. Working adults' eligibility and affordability for FMLA unpaid leave (percent) by
118 race/ethnicity. diversitydatakids.org. Last updated March 10, 2023. Accessed
119 January 10, 2023. [https://data.diversitydatakids.org/dataset/working-adults-](https://data.diversitydatakids.org/dataset/working-adults-eligibility-and-affordability-for-fmla-unpaid-leave-percent-by-race-ethnicity)
120 eligibility-and-affordability-for-fmla-unpaid-leave-percent-by-race-ethnicity
- 121 5. Employee Benefits. U.S. Bureau of Labor Statistics. Published September 21,
122 2023. Accessed November 30, 2023. [https://www.bls.gov/ebs/factsheets/family-](https://www.bls.gov/ebs/factsheets/family-leave-benefits-fact-sheet.htm)
123 leave-benefits-fact-sheet.htm
- 124 6. Wilke, A. Miscarriage and other pregnancy loss leave. International Foundation
125 of Employee Benefit Plans Word on Benefits. Published June 1, 2022. Accessed
126 November 30, 2023. [https://blog.ifebp.org/miscarriage-and-other-pregnancy-loss-](https://blog.ifebp.org/miscarriage-and-other-pregnancy-loss-leave/)
127 leave/
- 128 7. Parental leave and benefits, Ohio Revised Code § 124.136 (2023).
- 129 8. Ohio Economy at a Glance. U.S. Bureau of Labor Statistics. Last updated
130 January 11, 2024. Accessed January 11, 2024.
131 https://www.bls.gov/eag/eag.oh.htm#eag_oh.f.p
- 132 9. Trau, M. Bill to expand paid parental leave in Ohio would impact virtually no
133 families. Published October 6, 2022. Accessed January 11, 2024.

134 [https://www.news5cleveland.com/news/politics/ohio-politics/bill-to-expand-paid-](https://www.news5cleveland.com/news/politics/ohio-politics/bill-to-expand-paid-parental-leave-in-ohio-would-impact-virtually-no-families)
135 [parental-leave-in-ohio-would-impact-virtually-no-families](https://www.news5cleveland.com/news/politics/ohio-politics/bill-to-expand-paid-parental-leave-in-ohio-would-impact-virtually-no-families)

136 10. Jou, J., et al. Paid maternity leave in the United States: Associations with
137 maternal and infant health. *Maternal and child health journal*. 2017;22:216-225.
138 doi:10.1007/s10995-017-2393-x

139 11. Kozak, K., et al. Paid maternity leave is associated with better language and
140 socioemotional outcomes during toddlerhood. *Infancy*. 2021;26(4):536-550.
141 doi:10.1111/infa.12399

142 12. Rossin-Slater, M., Stearns, J. Time on with baby and time off from work. *The*
143 *Future of Children*. 2020;30(2):35-52. <https://www.jstor.org/stable/27075014>

144 13. Huang, R., Yang, M. Paid maternity leave and breastfeeding practice before and
145 after California's implementation of the nation's first paid family leave program.
146 *Economics & Human Biology*. 2015;16:45-59. doi:10.1016/j.ehb.2013.12.009

147 14. Petts, R.J., Knoester, C. Are parental relationships improved if father take time
148 off of work after the birth of a child? *Social Forces*. 2020;98(3):1223-1256.
149 doi:10.1093/sf/soz014

150 15. Taylor D. Same-Sex Couples Are More Likely to Adopt or Foster Children. United
151 States Census Bureau. Published September 17, 2020. Accessed January 11,
152 2023. [https://www.census.gov/library/stories/2020/09/fifteen-percent-of-same-](https://www.census.gov/library/stories/2020/09/fifteen-percent-of-same-sex-couples-have-children-in-their-household.html)
153 [sex-couples-have-children-in-their-household.html](https://www.census.gov/library/stories/2020/09/fifteen-percent-of-same-sex-couples-have-children-in-their-household.html)

154 16. Maxwell, M.B., Johnson, A., Lee, M., Miranda, L. 2018 U.S. LGBTQ Paid Leave
155 Survey. Human Rights Campaign Foundation Public Education and Research.
156 Published 2018. Accessed January 11, 2023.
157 [https://assets2.hrc.org/files/assets/resources/2018-HRC-LGBTQ-Paid-Leave-](https://assets2.hrc.org/files/assets/resources/2018-HRC-LGBTQ-Paid-Leave-Survey.pdf)
158 [Survey.pdf](https://assets2.hrc.org/files/assets/resources/2018-HRC-LGBTQ-Paid-Leave-Survey.pdf)

159 17. Children's Bureau. Planning for adoption: Knowing the costs and resources.
160 Published June 2022. Accessed January 11, 2024. [https://cwig-prod-prod-drupal-](https://cwig-prod-prod-drupal-s3fs-us-east-1.s3.amazonaws.com/public/documents/s_costs.pdf)
161 [s3fs-us-east-1.s3.amazonaws.com/public/documents/s_costs.pdf](https://cwig-prod-prod-drupal-s3fs-us-east-1.s3.amazonaws.com/public/documents/s_costs.pdf)

162 18. Glynn, S.J., Corley, D. The cost of work-family policy inaction. The Center for
163 American Progress. Published September 22, 2016. Accessed January 11, 2024.
164 <https://www.americanprogress.org/article/the-cost-of-inaction/>

165 19. Kalsi, P., Liu, M.Y. Pregnancy loss and female labor outcomes. *Economics:*
166 *Faculty publications*, Smith College, Northampton, MA. Published April 19, 2021.
167 https://scholarworks.smith.edu/eco_facpubs/57

168 20. Bana, S.H., Bedard, K., Rossin-Slater, M. The impacts of paid family leave
169 benefits: Regression kink evidence from California administrative data. *Journal of*
170 *Policy Analysis and Management*. 2020;39(4):888-929. doi:10.1002/pam.22242

171 21. Bedard, K., Rossin-Slater, M. The Economic and Social Impacts of Paid Family
172 Leave in California: Report for the California Employment Development
173 Department. California Employment Development Department. Published 2016.

- 174 Accessed January 11, 2024.
175 [https://edd.ca.gov/siteassets/files/disability/pdf/PFL_economic_and_social_impac](https://edd.ca.gov/siteassets/files/disability/pdf/PFL_economic_and_social_impact_study.pdf)
176 [t_study.pdf](https://edd.ca.gov/siteassets/files/disability/pdf/PFL_economic_and_social_impact_study.pdf)
177 22. National Partnership for Women and Families. State Paid Family & Medical
178 Leave Insurance Laws. Published October 2023. Accessed January 11, 2024.
179 [https://nationalpartnership.org/wp-content/uploads/2023/02/state-paid-family-](https://nationalpartnership.org/wp-content/uploads/2023/02/state-paid-family-leave-laws.pdf)
180 [leave-laws.pdf](https://nationalpartnership.org/wp-content/uploads/2023/02/state-paid-family-leave-laws.pdf)
181 23. Maxwell, E.L. Paid Family and Medical Leave Program. District of Columbia
182 Department of Human Resources. Published February 3, 2023. Accessed
183 January 11, 2024. <https://edpm.dc.gov/issuances/paid-family-leave/>
184 24. California Government Code § 12945.6 (2024).
185 25. Relevant AMA and AMA-MSS Policy
186 a. AMA Statement on Family, Medical, and Safe Leave H-420.979
187 b. Residents and Fellows' Bill of Rights H-310.912
188
189

190 OSMA Policy:

191
192 **Policy 15 – 2023 -- Strengthening the OSMA Stance on Abortion Policy in Ohio**

- 193 1. The OSMA amend OSMA Policy 10-1990- Policy on Abortion by addition and
194 deletion as follows:

195 Policy 10 – 1990 – Policy on Abortion

196 ~~1. It is the position of the OSMA that the issue of support of or opposition~~
197 ~~to abortion is a matter for members of the OSMA to decide individually,~~
198 ~~based on personal values or beliefs.~~

199 12. The OSMA shall take no action which may be construed as an attempt
200 to alter or influence the personal views of individual physicians regarding
201 abortion procedures.

202 ~~23. Items 1 and 2 notwithstanding, the OSMA shall take a position of~~
203 ~~opposition to any proposed OSMA Ohio legislation or rule that would:~~

- 204 • Require or compel Ohio physicians to perform treatment actions,
205 investigative tests, or questioning and OR education of a patient
206 which are not consistent with the medical standard of care; or,
- 207 • Require or compel Ohio physicians to discuss treatment options
208 that are not within the standard of care and/or omit discussion of
209 treatment options that are within the standard of care; and be it
210 further

- 211 2. The OSMA supports an individual's right to decide whether to have children, the
212 number and spacing of children, as well as the right to have the information,
213 education, and access to evidence-based reproductive health care services to
214 make these decisions.

- 215 3. The OSMA opposes non-evidence based limitations on access to evidence-
216 based reproductive health care services, including fertility treatments,
217 contraception, and abortion.
- 218 4. The OSMA opposes the imposition of criminal and civil penalties or other
219 retaliatory efforts against patients, patient advocates, physicians, other
220 healthcare workers, and health systems for receiving, assisting in, referring
221 patients to, or providing evidencebased reproductive health care services within
222 the medical standard of care.
- 223 5. The OSMA collaborates with relevant stakeholders to educate legislators and
224 amend existing state laws so that the term “fetal heartbeat” is not used to
225 inaccurately represent physiological electrical activity.
226

227 **Policy 09-2022 – Access to Standard Care for Nonviable Pregnancy**

- 228 1. The Ohio State Medical Association (OSMA) supports patients’ timely access to
229 standard treatment of nonviable pregnancy, including but not limited to
230 miscarriage, molar pregnancy, and ectopic pregnancy, in both emergent and
231 non-emergent circumstances.
- 232 2. The OSMA opposes any hospital directive, policy, or legislation that may hinder
233 patients’ timely access to the accepted standard of care in both emergent and
234 non-emergent cases of nonviable pregnancy.
235
236