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The Impact of State Paid Sick Leave Policies on Weekday Workplace Mobility During the COVID-19 Pandemic

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The Impact of State Paid Sick Leave Policies on Weekday Workplace Mobility During the COVID-19 Pandemic

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1 **Abstract:**

2 **Objectives.** To evaluate whether the Families First Coronavirus Response Act (FFCRA)
3 modified the association between pre-existing state paid sick leave (PSL) and weekday
4 workplace mobility between February 15 and July 7, 2020.

5
6 **Study Design:** Longitudinal, observational study.

7
8 **Methods.** The 50 U.S. states and Washington, D.C. were divided into exposure groups based on
9 the presence or absence of pre-existing state PSL policies. Derived from Google COVID-19
10 Community Mobility Reports, the outcome was measured as the daily percent change in
11 weekday workplace mobility. Mixed-effects, interrupted time series regression was performed to
12 evaluate weekday workplace mobility after the implementation of the FFCRA on April 1st, 2020.

13
14 **Results.** States with pre-existing PSL policies exhibited a greater drop in mobility following the
15 passage of the FFCRA ($\beta=-8.86, 95\% \text{ CI}:-11.6,-6.10, P< 001$). This remained significant after
16 adjusting for state-level health, economic, and sociodemographic indicators ($\beta=-3.13, 95\% \text{ CI}:-$
17 $5.92,-0.34, P=.039$).

18
19 **Conclusions.** Pre-existing PSL policies **were associated with** a significant decline in weekday
20 workplace mobility after the FFCRA, which may have influenced local health outcomes. The
21 presence of pre-existing state policies may differentially influence the impact of federal
22 legislation enacted during emergencies.

23
24 **Keywords:** COVID-19; Paid Sick Leave; Physical Distancing; Workplace Mobility; Health
25 Policy

26

27 INTRODUCTION

28 The COVID-19 pandemic necessitates systemic policies to reduce its spread. Despite the
29 deployment of COVID-19 vaccines, the ability to quarantine after exposure remains critical to
30 minimize the potential for “breakthrough cases” and risk of infection for those who are
31 unvaccinated¹. One policy to facilitate self-quarantine is paid sick leave (PSL), which allows
32 employees to take compensated time off from work to recover from illness or injury. PSL has
33 previously been associated with a three-fold increase in protection of workers’ jobs, income, and
34 health while recovering from illness². PSL is especially crucial during outbreaks of
35 communicable diseases as it can help mitigate “presenteeism,” whereby employees go to work
36 even if they are sick³. This is particularly important for COVID-19 since individuals can present
37 a range of symptoms.

38 **While previous studies have shown the efficacy of PSL in reducing absenteeism,**
39 **these studies have focused on European countries with robust PSL schemes⁴.** The United
40 States (U.S.) is one of only two Organisation for Economic Co-operation and Development
41 countries that does not have a nationwide PSL policy, resulting in a patchwork system that varies
42 between states^{2,5}. **Additionally, previous studies on PSL and absenteeism in the U.S. have**
43 **focused on specific states or localities rather than taking a national approach^{6,7}.** Within
44 each state, access to PSL is associated with many factors, including industry type, race, ethnicity,
45 gender, sexual orientation, income level, immigration status, company size, full-or-part time
46 status, and experience level. As a result, up to 40% of American private sector workers,
47 including 69% of the lowest quartile of wage earners, are not afforded PSL⁸. This was partially
48 rectified with the Families First Coronavirus Response (FFCRA) and Coronavirus Aid, Relief
49 and Economic Security Acts, which provided emergency, two-week PSL on April 1st, 2020⁹.

50 This federally-legislated PSL played an important role in slowing the spread of COVID-19 in the
51 workplace by allowing for self-quarantine from work environments⁹⁻¹¹. However, exemptions
52 for certain employee categories (e.g., health care workers and emergency responders) and
53 businesses with more than 500 employees blunted its coverage to potentially as few as 47% of
54 private-sector workers¹⁰. Thus, the presence of pre-existing state PSL may have influenced how
55 this emergency federal legislation impacted key outcomes such as travel to-and-from the
56 workplace (i.e., weekday workplace mobility), which could be considered a proxy for workplace
57 presenteeism and absenteeism^{11,12}. As a result, it is critical to identify the differential impacts of
58 the FFCRA on states that had pre-existing state PSL to elucidate what fundamental level of local
59 preparedness is required to maximize the impact of federal legislation. The purpose of this study
60 was to explore the impact of pre-existing state PSL on weekday workplace mobility surrounding
61 the passage of the FFCRA (i.e., February through July 2020). It was hypothesized that states that
62 had pre-existing state PSL would experience a greater drop in weekday workplace mobility
63 compared to states that did not.

64 **METHODS**

65 **Data collection**

66 Four data sets were integrated for each of the 50 states and Washington, DC. The primary
67 exposure of interest (i.e., presence or absence of pre-existing state PSL) was coded as either
68 “yes” or “no” based on data from the Kaiser Family Foundation⁵. The primary outcome of
69 interest (i.e., weekday workplace mobility) was collected from Google COVID-19 Community
70 Mobility Reports¹³. Within these reports, weekday workplace mobility was calculated as the
71 percent change in mobility between the date of interest and a pre-pandemic baseline. This
72 baseline was computed as the median mobility between January 3 and February 6, 2020 on the

73 same day of the week (e.g., Monday, Tuesday) as the date of interest. Economic covariates (e.g.,
74 wage policies, worker protection policies, right-to-organize policies) and epidemiological
75 metrics (e.g., COVID-19 cases and deaths per state) were from the Oxfam Index and the *New*
76 *York Times* COVID-19 database, respectively. Other sociodemographic factors (e.g., median
77 household income, state gross domestic product [GDP], commuting patterns, presidential
78 election results between 2004 and 2016) were from the American Community Survey and the
79 Federal Election Commission¹⁴⁻¹⁷.

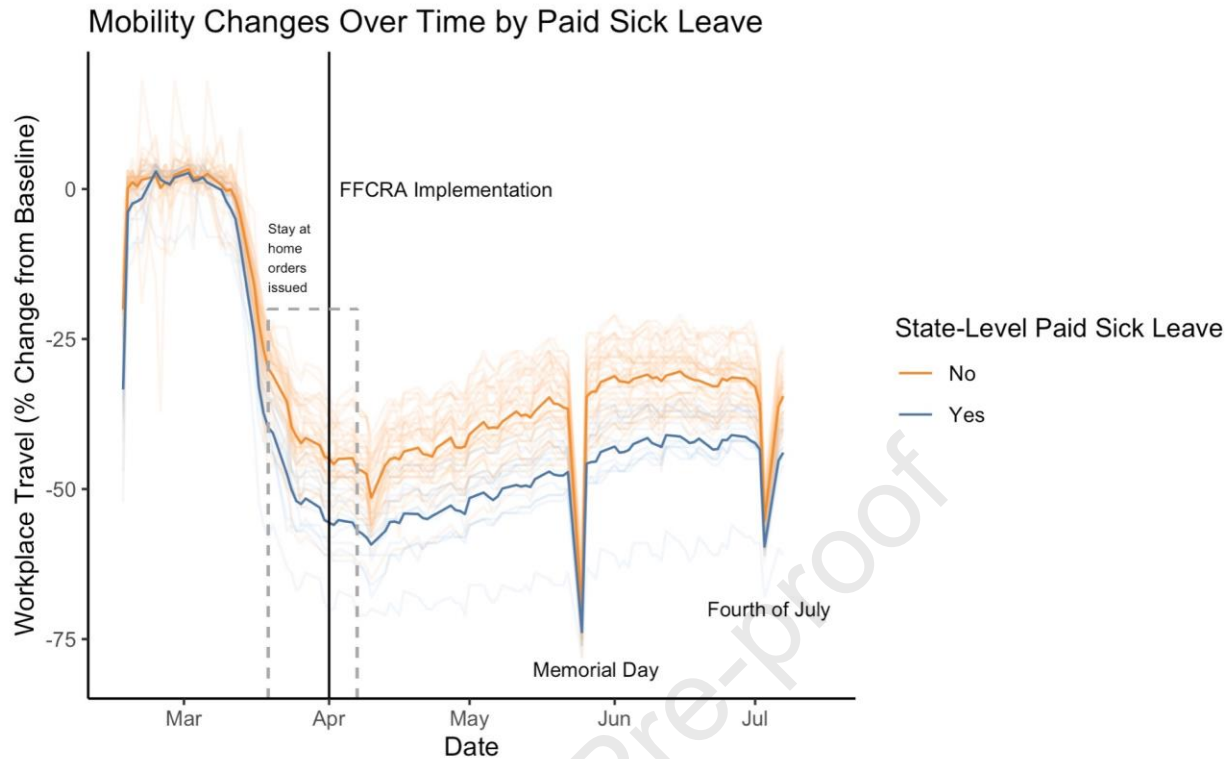
80 **Statistical analysis**

81 A mixed-effects, interrupted time series regression model with nested random effects for state
82 and month characterized the relationship between the presence of pre-existing state PSL and
83 daily percent change in weekday workplace mobility. The initial model only adjusted for
84 temporality relative to the implementation of the FFCRA on April 1st, 2020 (i.e., days pre-
85 FFCRA, instantaneous FFCRA, and days post-FFCRA). Additional bivariate analyses were
86 performed to identify which covariates were significantly associated with weekday workplace
87 mobility. Highly correlated terms were evaluated by investigators to determine which should be
88 retained for further analysis. A multivariable model was subsequently constructed with the same
89 structure as the unadjusted model and all significant terms from the bivariate analysis. Data were
90 aggregated with Python (version 3.8) and analyzed in R (version 4.0.3) using the RStudio
91 Integrated Development Environment (version 1.3.1093).

92 **RESULTS**

93 Immediately after FFCRA implementation on April 1st, 2020, Washington DC and the 12
94 states with pre-existing state PSL experienced an 8.86 percentage point greater decrease in
95 weekday workplace mobility ($\beta = -8.86$, 95% CI: -11.6, -6.10, $P < .001$) compared to the 39 states

96 that do not have pre-existing state PSL (Fig. 1). **The substantial drop in weekday workplace**
97 **mobility prior to the FFCRA coincided with state-mandated stay-at-home orders.** Health
98 indicators associated with a greater decrease in mobility included new cases per 100,000 ($\beta = -$
99 0.03 , 95% CI: $-0.04, -0.03$, $P < .001$) and new deaths per 100,000 ($\beta = -0.43$, 95% CI: $-0.51, -$
100 0.35 , $P < .001$). Many travel metrics were associated with weekday workplace mobility, although
101 directionality varied. For example, while average commute time was inversely associated with
102 weekday workplace mobility (β per minute = -1.04 , 95% CI: $-1.22, -0.86$, $P < .001$), percent
103 commuting via carpool was associated with an increase in weekday workplace mobility ($\beta =$
104 1.73 , 95% CI: $0.63, 2.83$, $P = .003$). The bulk of economic indicators were also associated with
105 weekday workplace mobility, including 2017 median household income (β per \$10,000 USD =
106 2.47 , 95% CI: $-3.64, -1.29$, $P < .001$) and unemployment rate ($\beta = -0.31$, 95% CI: $-0.40, -0.20$,
107 $P < .001$). In addition, states with a dominant labor sector in “education and health services” had a
108 greater drop in weekday workplace mobility compared to states with a dominant labor sector in
109 “trade, transportation, and utilities” ($\beta = -4.90$, 95% CI: $-9.39, -0.42$, $P = .044$). Several
110 demographic indicators were also associated with weekday workplace mobility, albeit in various
111 directions. For example, while a higher percentage of men was associated with an increase in
112 weekday workplace mobility ($\beta = 2.83$, 95% CI: $1.11, 4.55$, $P = .002$), a higher percentage of
113 Asian individuals was associated with a greater decrease in weekday workplace mobility ($\beta = -$
114 0.31 , 95% CI: $-0.58, -0.05$, $P = .024$). In terms of policies, states that provided paid *family* leave
115 had a greater drop in weekday workplace mobility compared to states that did not ($\beta = -10.6$,
116 95% CI: $-14.8, -7.02$, $P < .001$). Finally, a higher state population per square mile was associated
117 with a greater drop in weekday workplace mobility (β per 1,000 persons = -2.04 , 95% CI: $-2.84,$
118 -1.23 , $P < .001$). See Supplementary Table 1 for a comprehensive list of covariates.



119

120 Fig 1. Changes in workplace travel over time by state-level paid sick leave. The black line on April 1, 2020 denotes the
 121 implementation of the Families First Coronavirus Response Act (FFCRA). **The gray dashed lines signify the period in which**
 122 **stay-at-home orders were enacted by states.** Twelve states (Arizona, California, Connecticut, the District of Columbia,
 123 Massachusetts, Maryland, New Jersey, New York, Oregon, Rhode Island, Vermont, and Washington) had pre-existing paid sick
 124 leave policies mandated by the state, whereas the remaining 39 did not. **The prominent blue and orange lines denote group-**
 125 **level daily averages, while the lighter lines are for each individual state.** The most substantial drops occurred on two federal
 126 U.S. holidays: Memorial Day (May 25th, 2020) and Independence Day (July 4th, 2020)

127 After adjustment, the association between pre-existing state PSL and weekday workplace

128 mobility remained statistically significant ($\beta = -3.13$, 95% CI: -5.92, -0.34, $P=.039$; Table 1).

129 Other variables that retained their significance and associated with a decrease in weekday

130 workplace mobility included new cases per 100,000 ($\beta = -0.03$, 95% CI: -0.04, -0.03, $P<.001$),

131 average commute time (β per minute = -0.59, 95% CI: -0.94, -0.24, $P=.004$), unemployment rate

132 ($\beta = -0.35$, 95% CI: -0.45, -0.26 $P<.001$), and state population per square mile (β per 1,000

133 persons = -1.12, 95% CI: -2.04, -0.20, $P=.027$). Variables that retained their significance and

134 were associated with an increase in weekday workplace mobility included poverty rate ($\beta = 0.50$,

135 95% CI: 0.07, 0.94, $P=.035$) and “manufacturing” as a dominator labor sector relative to “trade,
 136 transportation, and utilities” ($\beta = 7.34$, 95% CI: 0.59, 14.1, $P=.045$).

Table 1. Multivariable Mixed Effects Model: Paid Sick Leave vs. Weekday Workplace Mobility

Coefficient	β (95% CI)	P-Value ^a
Paid Sick Leave (Reference: No)		
Yes	-3.13 (-5.92, -0.34)	.039
Temporal Components		
Pre-Policy Effect	-1.87 (-1.91, -1.82)	< .001
Instantaneous Effect	21.0 (5.64, 36.3)	.053
Post-Policy Effect	1.94 (1.89, 1.99)	< .001
Health Metrics		
New Cases per 100,000	-0.03 (-0.04, -0.03)	< .001
Travel Metrics		
Average Commute Time (Minutes)	-0.59 (-0.94, -0.24)	.004
Average Commute Time on Public Transit (Minutes)	-0.03 (-0.15, 0.09)	.630
Economic Metrics		
Unemployment Rate (%)	-0.35 (-0.45, -0.26)	< .001
2017 Median Household Income (\$10,000 USD)	0.19 (-0.91, 1.28)	.742
Labour Overall Index Score	-0.03 (-0.08, 0.03)	.339
MIT Living Wage (%)	0.36 (-0.75, 1.47)	.534
Annual State GDP for 2019 (Trillion USD)	-1.39 (-4.15, 1.37)	.334
Poverty Rate (%)	0.50 (0.07, 0.94)	.035
Dominator Labor Sector (Reference: Trade, Transportation, and Utilities)		
Education and Health Services	1.38 (-2.01, 4.77)	.433
Government	0.14 (-1.80, 2.07)	.891
Leisure and Hospitality	2.20 (-3.68, 8.08)	.471
Manufacturing	7.34 (0.59, 14.1)	.045
Professional and Business Services	1.01 (-4.47, 6.48)	.722
Demographic Metrics		
Black (%)	0.02 (-0.11, 0.14)	.784
Hispanic (%)	-0.01 (-0.11, 0.10)	.879
Asian (%)	0.01 (-0.30, 0.32)	.933
Politics and Policy		
Paid Family Leave (Reference: No)		
Yes	3.49 (-1.83, 8.81)	.212
Required Pay Reporting (Reference: No)		
Yes	0.22 (-4.93, 5.37)	.934
Split Shift Pay 2019 (Reference: No)		
Yes	-4.85 (-12.4, 2.74)	.224
Advanced Shift Notice 2019 (Reference: No)		
Yes	6.62 (-2.54, 15.8)	.171
Job Protected Leave for Non-FMLA Workers 1 Year on Job (Reference: No)		
Pregnant Workers Only		
Yes	-1.20 (-4.37, 1.97)	.466
Job Protected Leave Longer than Federal FMLA (Reference: No)		
Pregnant Workers Only		
Yes	2.35 (-3.43, 8.13)	.434
Election Results Coding (Reference: Split)		
All Democrat	-1.28 (-4.63, 2.07)	.462
Mostly Democrat	-5.64 (-9.12, -2.17)	.004
Mostly Republican	-1.06 (-4.52, 2.41)	.556
All Republican	-0.81 (-3.40, 1.78)	.545
Other		
State Population (1,000 Square Miles)	-1.12 (-2.04, -0.20)	.027

^a Values derived from a mixed-effects model with a nested random effect for state and date. The outcome of interest is percent change in weekday workplace mobility as determined from Google COVID-19 Community Mobility Reports.

137

138 **DISCUSSION**

139 This study is the first to comprehensively evaluate the impact of pre-existing state PSL on
140 weekday workplace mobility in the U.S. during the COVID-19 pandemic. The presence of pre-
141 existing state PSL was significantly associated with a drop in weekday workplace mobility in the
142 early phase of the pandemic in both unadjusted and adjusted models. These results suggest a
143 complex interplay between pre-existing labor workforce protections and emergency public health
144 interventions targeted for the workforce.

145 Increasingly, states are held responsible for managing and administering social services,
146 leading to highly variable policies¹⁸. The presence of pre-existing state PSL acted as a
147 “classifier” that could differentiate how the FFCRA impacted state weekday workplace mobility.
148 **As one of the first major nationwide COVID-19 policies, the impact of any single part of**
149 **the FFCRA was unprecedented, and the time period between the announcement of the**
150 **legislation and its implementation was relatively short. Coupled with the diverse array of**
151 **state-level policies that were enacted during this time, it is likely that anticipatory behavior**
152 **did not substantially influence the observed association between pre-existing state PSL and**
153 **weekday workplace mobility.**

154 Given the ubiquity of COVID-19, this nationwide, ecological evaluation may suggest
155 that federal emergency aid packages have a stronger impact in localities with the pre-existing
156 infrastructure to support such policies. This study also contributes to the literature characterizing
157 the impact of the FFCRA and its emergency PSL on various health and behavioral outcomes. A
158 prior study, which relied on cellular data in place of Google COVID-19 Community Mobility
159 Reports, also found that the FFCRA significantly decreased the time spent away from home.
160 However, the FFCRA’s impact on *workplace* mobility—as is the focus of this study— could not
161 be determined¹².

162 As COVID-19 variants of concern continue to emerge, the lack of consistent PSL policies
163 across the U.S. leaves employees vulnerable, especially those considered “essential workers” or
164 in positions that require in-person work ¹⁹. This disproportionately impacts Black, Indigenous,
165 People of Color as well as the socioeconomically disadvantaged—the same groups that are both
166 at higher risk for COVID-19 and disenfranchised by current labor laws ²⁰. To protect such
167 individuals, there is a need for permanent structural changes in labor protection laws at the
168 federal level, which could leverage pre-existing state policies to identify best practices and
169 potential pitfalls ²¹. **Our work also supports similar conclusions regarding PSL schemes in**
170 **Europe: different levels of labor protection laws correspond to different levels of PSL-**
171 **supported work absences, underscoring the need for strong, long-term policy support for**
172 **PSL in both the U.S. and Europe** ²². Furthermore, systematic changes to labor protection laws
173 could contribute in the long-term to improving preparedness in emergency situations, as well as
174 overall social and health equity.

175 As a social determinant of health, PSL has ramifications for one’s health, well-being, and
176 quality of life ^{23,24}. PSL makes an employee 60% more likely to receive an influenza vaccination
177 and engage with medical and cancer screenings without forfeiting their income or jobs ³. An
178 additional study found that people without PSL were three times as likely to delay needed
179 treatment due to concerns about the immediate costs of the treatment and related costs of wage
180 loss. This relationship does not change when controlling for health status, education level, and
181 income level ²⁵. The impact of PSL also applies to immediate family members, as parents who
182 had PSL were more likely to take time off to care for children when needed. Furthermore, low-
183 income children were less likely to have parents who had PSL ²⁶. The effects of this social
184 determinant for an individual also extend to the community at large; one study estimated that,

185 due to a lack of PSL, 7 million people were additionally infected as a result of “presenteeism” in
186 the workplace during the H1N1 pandemic ²⁷. A separate study estimated that Connecticut’s PSL
187 law resulted in a 14.8% reduction in the spread of illness in 2013 ⁶. Taken together, these
188 findings suggest that PSL plays a pivotal role in the well-being of both the individual with PSL,
189 as well as their immediate colleagues and family.

190 While the present study is the first to examine the impact of pre-existing state PSL on
191 weekday workplace mobility during the COVID-19 pandemic, it has some limitations. First,
192 publicly available covariate data were compiled across multiple sources and was measured at
193 different points in time. Future work should attempt to standardize the time frame of analysis **so**
194 **that steps can be made towards establishing causality**. Second, analysis was limited to the
195 early stages of the COVID-19 pandemic, presenting future opportunities to examine the long-
196 term impacts of pre-existing state PSL on workplace mobility. **However, given the substantial**
197 **drop in mobility that occurred in March 2020, it may be valuable for future work to**
198 **explore this time period in-depth. The substantial drop that occurs within this time period**
199 **is likely not associated with paid sick leave; rather, it corresponds to the mandatory stay-**
200 **at-home orders, nonessential business closures, and declarations of emergencies that**
201 **occurred within states during this time period. We chose the date of FFCRA**
202 **implementation (April 1st) as our point of interest in part because it occurred after a**
203 **majority of these state-level announcements took place, and we hypothesize that this may**
204 **have biased our findings towards the null. Further quantification of the impact of stay-at-**
205 **home orders and nonessential business closures on weekday workplace mobility is outside**
206 **the scope of the present work.**

207 Third, given the ecological nature of the study, future work is necessary to quantify the
208 direct, person-level impact of pre-existing state PSL on workplace mobility. Fourth, Google
209 COVID-19 Community Mobility Reports may not be representative of all populations (e.g.,
210 those without access to a cellular device). **One limitation of these data is that they are not**
211 **nationally representative, as there are discrepancies across age, income bracket, and**
212 **urban/rural divides for who owns a smartphone**²⁸. However, given that in recent decades,
213 **U.S. public health policy has tilted towards states and that states have been at the forefront**
214 **of the implementation of the American COVID-19 response, a state-by-state comparison of**
215 **Google Mobility data allows for insight into each state's pandemic response and how it**
216 **compares with others**^{18,29,30}. **Due to the overwhelming heterogeneity of the U.S., state-by-**
217 **state observations are crucial to understanding the larger national picture.** Fifth, the
218 calculation of daily changes relative to a baseline in January and February 2020 (as opposed to a
219 full year) may result in some seasonal biases. This may bias results away from the null, as
220 individuals may be less likely to take off work during January and February compared to the
221 following months. **It should also be noted that states with and without pre-existing state PSL**
222 **policies are spread across the U.S. Per U.S. Census Region, of the states without PSL, 31%**
223 **are in the Midwest, 8% are in the Northeast, 38% are in the South, and 23% are in the**
224 **West**^{5,31}. **Of the states with PSL, 50% are in the Northeast, 17% are in the South, and 33%**
225 **are in the West**^{5,31}. **The geographic heterogeneity likely counteracts seasonal effects that**
226 **may come from clusters of adjacent states. It is also important to note that the Google**
227 **Mobility data analyzed were specifically with respect to how much time people spent in**
228 **their workplace settings; depending on the type of work, this movement is expected to be**
229 **less prone to seasonal influence than other types of movement (i.e., for recreation).** Finally,

230 this study is limited to PSL, and evaluation of additional economic policies—such as medical
 231 leave for family members, flexible work hours, remote work policies, and flexibility in shift
 232 work—could offer more nuanced perspectives.

233 PSL is fundamental to preserving the health of the workforce, particularly during times of
 234 crisis. The results presented here suggest that pre-existing state policies may enhance the
 235 effectiveness of emergency legislation, although long-term, systemic labor protection laws
 236 remain crucial. Successful implementation of such laws requires an equity-based approach that
 237 considers addressing disparities in access to labor benefits, thoughtful outreach strategies through
 238 clear and consistent communication to all labor force members, and rigorous oversight and
 239 enforcement from state and federal labor departments and boards to both ensure compliance by
 240 employers and maximize the potential for success²¹.

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 247 Policy

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