

Latino New Yorkers Can't Afford to Get Sick





The Community Service Society of New York (CSS) is an informed, independent, and unwavering voice for positive action on behalf of more than 3 million low-income New Yorkers. CSS draws on a 170-year history of excellence in addressing the root causes of economic disparity. We respond to urgent, contemporary challenges through applied research, advocacy, litigation, and innovative program models that strengthen and benefit all New Yorkers.

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About the Authors

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Acknowledgments

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Emilio Palaguachi was fired after missing one day of work when he came down with the flu.

FELIX TRINIDAD

Felix Trinidad, only 34 years of age and a father of two, spent the last twelve years of his life working at the Golden Farm grocery store in Kensington, Brooklyn. He put in 72-hour work weeks, bringing home \$4.86 an hour to support his family. He needed every penny. So when he started to experience intense stomach pains, he was afraid to take off work to see a doctor for fear of falling behind in the bills, or worse, being fired. The day the pain finally got the best of him and he went to the hospital emergency room, his pay was docked. By then it was too late. Felix was diagnosed with stomach cancer that had already spread. Felix continued to work twelve hour days even while undergoing chemotherapy, but died six months later.

EMILIO PALAGUACHI

When the deli he worked at for 11 years closed, Emilio Palaguachi was left looking for work. Through an employment agency that charged him \$150, he found a job at Superior Deli in Lower Manhattan. Four months into his new job, the Ecuadorian immigrant, Elmhurst resident, and father of four came down with the flu. Preparing sandwiches and dealing with food all day, he did not want to risk spreading germs to others. Emilio asked his boss if he could have a day off to visit the doctor, a request his boss granted. But when he came in the next day, he was fired, with no reason given for his dismissal.

THESE ARE NOT ISOLATED STORIES.

Felix and Emilio are just two of over 450,000 Latino workers in New York City who do not get a single day of paid sick leave on their jobs.¹ This report draws on research, including the Community Service Society's annual Unheard Third survey of low-income New Yorkers; public health studies; the University of Wisconsin Population Health Institute's County Health Rankings; and interviews with workers, business owners, and health providers to examine the lack of paid sick days among New York City's Latino community and what it means for their health, the financial security of their families, and the health of the wider public.

For details on how the Unheard Third survey was conducted see page 17.

FINDING ONE

Nearly half (47 percent) of Latinos in New York City are denied paid sick leave, making them the least likely racial or ethnic group to have access to paid time off when illness strikes. They disproportionately work in low-wage occupations and in industries that offer few if any workplace benefits.

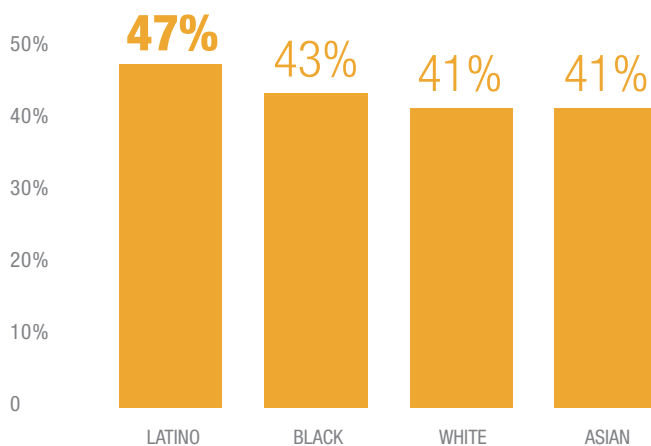
Nationwide, 58 percent of Latino workers are unable to take a single paid day off when they are ill, according to the National Health Interview Survey.² This compares to 44 percent of blacks, 40 percent of whites, and 33 percent of Asian workers who do not receive paid sick days at their jobs. Latinos are disproportionately employed in construction and in accommodation, recreation, and food services³—industries that are among those least likely to provide paid sick days.

We see a similar pattern in New York City, where Latinos are also the least likely group to receive paid sick days. Forty-seven percent of Latino workers, including nearly two-thirds (63 percent) of low-income Latinos, are unable to take a paid day off when they or a family member gets sick. The widespread lack of access to paid sick days among New York City's Latino workers is the result of a combination of factors: their concentration in low-wage jobs, overrepresentation in certain industries, and the higher proportion of foreign-born workers among this population.

The majority of low-income workers—across race and ethnic groups—lack paid sick days to roughly the same extent. So the primary reason Latino workers in New York City do not have paid sick time is because they are disproportionately employed in low-wage occupations, particularly in certain industries. While Latinos make up around 27 percent of all workers in the city, they make up a much larger share of the workforce in the food services, construction, and retail trade industries. Of the city's roughly 250,000 workers in food services, 44 percent are Latino. Over 40 percent of construction workers are Latino, the vast majority of them in the non-unionized, lower-paid sector. Latinos also make up the largest share of retail workers, comprising 36 percent of the city's 340,000 workers in this industry.

The high proportion of immigrants within the Latino community also contributes to the widespread lack of paid sick days. Nearly six out of ten Latino workers in New York City were born outside the United States, compared to just a quarter of all white workers, and fewer than half of black workers. While immigrants are less likely to have paid sick leave in comparison to native-born workers within every racial and ethnic group, the gap is widest for Latinos. Latino immigrants may be less likely to hold quality jobs that offer basic benefits for several reasons, including limited English language skills, lower levels of educational attainment,⁴ and immigration status that leaves them vulnerable to exploitation. But a major factor is that one-quarter of foreign-born Latino workers in New York City are employed in just two industries: construction and food services, both of which rarely provide paid sick days. However, the presence of many immigrants does not account for the whole story. While 68 percent of low-income Latino immigrants lack paid sick days, 58 percent of *low-income, native-born Latinos* also lack access to sick leave.

PERCENTAGE OF NYC WORKERS WHO LACK PAID SICK DAYS BY RACE AND ETHNICITY, 2012

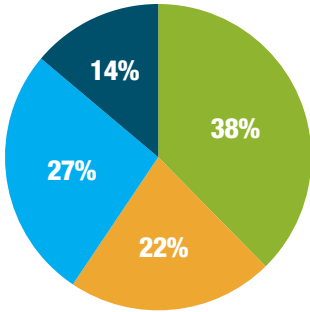


Source: Unheard Third, 2012

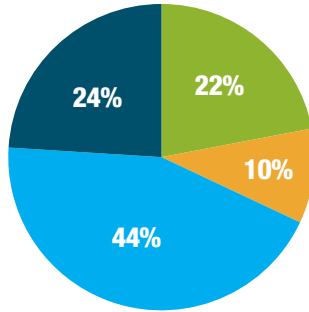
Latinos are overrepresented in industries that tend to lack basic labor standards, like paid sick leave:



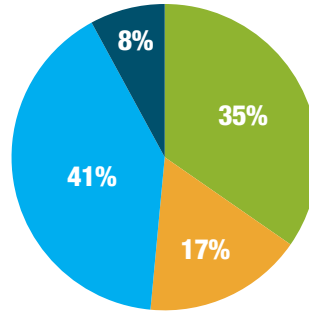
LATINOS MAKE UP 27% OF NYC'S WORKING POPULATION...



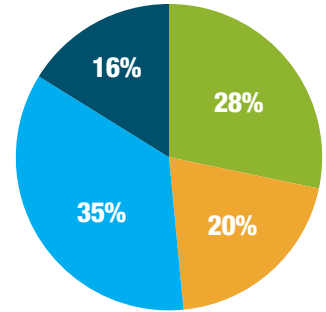
BUT 44% OF RESTAURANT AND FOOD SERVICE WORKERS



41% OF CONSTRUCTION WORKERS



AND 35% OF RETAIL WORKERS



	Overall number of workers, 2011	Share of workers who lack paid sick days, 2012
White	1,371,423	41%
Native Born	75%	39%
Immigrant	25%	50%
All Low Income	177,996 (13%)	N/A*
Black	790,667	43%
Native Born	52%	39%
Immigrant	48%	49%
All Low Income	194,502 (25%)	62%
Latino	983,813	47%
Native Born	41%	38%
Immigrant	59%	61%
All Low Income	378,581 (39%)	63%
Asian	509,667	41%
Native Born	15%	N/A*
Immigrant	85%	34%
All Low Income	148,379 (29%)	58%

*small sample size

Source: Data on workers is from the 2011 American Community Survey and data on lack of paid sick days is from the Unheard Third, 2012.

Latino New Yorkers talk about what lack of paid sick time means for them:

PAULINA CAC LUX

Paulina Cac Lux moved to Brooklyn from Guatemala four years ago. Her first job was at the NSA Supermarket, where she worked as a cashier making \$7.25 an hour. Two years ago, during the flu season, she became sick and needed to take a few days off to recover. She was not paid for the time she missed. When she returned to work, she noticed that her boss's attitude toward her had changed for the worse. A few months later, Paulina again became ill and wanted to take a day off to see the doctor. She was told that she was "always sick" and fired on the spot.

CARLOS*

Since coming to New York over 20 years ago from his native Ecuador, Carlos has worked a string of low-wage jobs—busing tables and washing dishes in restaurants, working in hotels, doing maintenance, painting, and construction. He has put in full days for 30 dollars; he has worked for the minimum wage; he has worked sick; and he has lost wages when he was so ill, he just couldn't drag himself in to work.

Having to choose between his health and much needed wages is "really stressful," recounts Carlos. As a busboy, he tried to work through the flu, but ultimately missed three days, his \$4.65 per hour earnings [the state minimum wage for tipped workers until 2010] docked from his paycheck. When asked how those lost

For three days, he stood on his feet all day and worked his shifts with the flu. As a cashier, Zyad felt he was not only putting his co-workers at risk, but also the hundreds of customers that he took cash and credit cards from, all while coughing and blowing his nose.

wages affected him, Carlos struggled to pinpoint just one thing. "There's no money for food, the rent—it's a big problem for everything." He has seen many people work sick in jobs handling food where they could easily pass along their germs to others. He doesn't understand why a boss would put such demands on their workers when it puts everyone, including the boss, at risk. He has seen workers who were worried about their documentation status exploited and unable to speak up for themselves. "I thought only my country was like that, but in the USA, it's the same thing," he says.

**Carlos asked that his last name not be used.*

IZZY MELENDEZ

For the first seven of his 17 years working as a security officer, Izzy, age 38 and Puerto Rican, held a non-union job. "I have an idea what it's like to struggle making \$9.75 an hour, no health benefits, no job protection, no room for advancement

either," says Izzy. He recounts the time he sprained his ankle. Without either health insurance or paid sick leave, "I lost three days' pay and had a \$600 bill from the emergency room on top of it."

ZYAD HAMMAD

Zyad Hammad is a Syrian-Mexican American working his way through school as a cashier at Urban Outfitters in New York City. This past winter, he was severely ill with the flu, but as a part-time employee, not only does he not get health insurance from his job, he doesn't get a single paid sick day either.

Suffering from a bad cough, congestion, a runny nose, and exhaustion, he called out sick on the first day of his illness, but then worked sick the next three days. He knew that if he didn't go in, there was no way he could make the rent that month. Zyad says that even with a full paycheck, it's a struggle to make ends meet, and that missing pay due to illness only makes



Ilzzy Melendez lost three days' pay when he sprained his ankle.

things more difficult. And, like all of his co-workers who don't have paid sick days, he was scared that if he missed three or four shifts due to an illness, he'd be written up or fired.

For three days, he stood on his feet all day and worked his shifts with the flu. As a cashier, Zyad felt he was not only putting his co-workers at risk, but also the hundreds of customers that he took cash and credit cards from, all while coughing and blowing his nose.

Zyad describes the mentality behind taking days off for illness where he works. "At my store, when workers call to let our managers know we're sick, we aren't taken seriously at first. They ask, 'Are you

sure you really can't come in?' They don't want to deal with it, and ask us to call our co-workers to make sure someone covers our shift. If we can't work and can't find anyone to fill the shift, we're scared we'll get disciplined."

JUAN CAMPIS

Juan Campis was born and lives in the South Bronx, the 20 year-old son of Mexican immigrants. His father died when he was five years old, so he supports his mother and three younger brothers by working at Friendly Car Wash in the Bronx. He makes \$5.50 an hour plus tips and does not get any paid sick days. This past winter, when he came down with the flu and needed to take some time off

to recover, he was surprised to learn he would not be getting paid for any of the time he missed. Even after getting a note from his doctor, Juan could not recover any of his lost wages. As the only member of his family who works, Juan's wages from the car wash are essential. Missing two days of pay meant Juan had to borrow money from friends just to pay the rent.

Juan tells us that his situation at the car wash isn't unique. He recalls a time when a co-worker came in sick because he could not afford to take a day off and lose pay. After the worker vomited, the manager insisted that he go home. Of course, he would not get paid for the hours he missed.

FINDING TWO

Losing even a day's pay is a hardship for many Latino families because their household incomes are so low. Latinos have the lowest median income among racial and ethnic groups in New York City, with 56 percent living below or near poverty.

While the median income for full-time, year-round workers in New York City is \$42,000, for Latinos it is only \$30,000. Latinos often earn significantly less than other workers even within the same industry. As a result, Latinos are the most likely group in New York City to live in low-income households, even for those who are employed full time. Thirty-one percent of Latinos working full time, year round (or nearly 215,000 workers) live in households under 200 percent of the federal poverty level. For comparison, only 7 percent of white full-time workers fall below 200 percent of the federal poverty level.⁵

Latinos in low-wage jobs that do not offer paid sick days face an impossible choice when they or their children get sick. Taking days off to get needed health care means lost wages, or worse, a risk of being fired, that threatens an already precarious financial situation for families struggling paycheck to paycheck. According to a study from the Economic Policy Institute, three and a half days of unpaid time off is equivalent to a family's grocery budget for an entire month.⁶ Findings from the 2012 Unheard Third survey substantiate this reality. Among low-income Latinos without paid sick days:

MEDIAN INCOME FOR FULL-TIME YEAR-ROUND WORKERS, 2011



- ▶ *one-third reported having less than \$100 in savings to fall back on in an emergency,*
- ▶ *46 percent said they worried all or most of the time that their incomes would not be enough to meet basic household expenses, and*
- ▶ *56 percent experienced three or more hardships, including 40 percent who cut back on buying school supplies or clothes, 30 percent who fell behind in their rent or mortgage, and nearly 30 percent who often skipped meals.*

Source: 2011 American Community Survey

FINDING THREE

Research shows that lack of paid sick leave has adverse impacts on health, particularly for Latinos since they are the least likely to earn sick time on their jobs.

An analysis of 2009 Unheard Third survey data found that workers without paid sick days reported being more likely to go to work sick, send sick children to school, and utilize costly emergency rooms.⁷ Latinos, who are much more likely to lack paid sick days, were most likely to report being forced into these bad alternatives:

- ▶ *Fifty-three percent of low-income Latino workers without paid sick days reported going to work sick frequently or sometimes because they were worried about losing their pay or their job.*
- ▶ *Twenty-eight percent of low-income Latino workers without paid sick days reported sending a sick child to school or daycare because they had to go to work.*
- ▶ *Three in ten low-income Latino workers without paid sick days reported going to the hospital emergency room because they were unable to take off from work and get medical care during normal work hours.*

A lack of paid sick days is not just bad for that worker’s health; it puts the health of the wider public at risk. Sick workers riding crowded subways, serving customers in restaurants, handling merchandise in shops, doing tasks with co-workers, and being forced to send sick children to school—all contribute to the spread of infectious diseases. The consequences are exacerbated because Latinos so often work in industries like restaurants, where personal contact makes transmission of germs more likely. The swine flu outbreak in 2009 and, more recently, this winter’s severe flu season, are just two examples underscoring the public health impact of denying workers paid sick days. According to a University of Pittsburgh study, a lack of paid sick days contributed to an additional five million cases of flu, 23,000 hospitalizations, and 1,400 deaths during the H1N1 (swine flu) outbreak in 2009.⁸ The study concluded that “mandates for sick leave could have significant health impacts by reducing morbidity from influenza-like illnesses, especially in Hispanics.”⁹ Other research has shown that lack of paid sick leave is associated with more frequent workplace accidents, lower rates of preventive cancer screenings and increased emergency room use.¹⁰

Percent of New Yorkers surveyed who said they...	ALL INCOMES (WITH AND WITHOUT PAID SICK DAYS)				(WITHOUT PAID SICK DAYS)
	Whites	Asians	Blacks	Latinos	Low-income Latinos
Went to work sick frequently or sometimes because you were worried about losing your pay or losing your job if you missed work	18%	23%	28%	34%	53%
Sent a sick child to school or daycare because you could not take off of work	4%	6%	8%	18%	28%
Went to the hospital emergency room because you were unable to take off from work to get medical care during normal work hours	7%	12%	14%	21%	30%

Source: Unheard Third, 2009



Doctors talk about what lack of paid sick time means for their Latino patients:

Dr. Michelle Espinoza says her patients often postpone medical care because they can't afford to miss work.

DR. BILL JORDAN

Says Dr. Jordan: “As a family doctor in the Bronx, I see patients every week who need paid sick days. Half of my patients are Spanish-speaking. One Latino patient has been struggling with diabetes for years. When I first met him, his diabetes was out of control. But he just did not feel he could leave work to come for regular appointments. When diabetes is poorly controlled, patients are at risk of getting serious infections. He wound up in the ER after work three times in one year with abscesses, any of which could have spread to his blood and killed him. This patient and many others like him have no time to take care of themselves, end up sicker, and use more health care resources. His problems could have been prevented if he had access to paid sick days.”

DR. MICHELLE ESPINOZA

Dr. Michelle Espinoza practices family medicine at the Jamaica Hospital Medical Center in Queens, where the majority of her patients are low-income Latinos. She reports that it is all too common for her patients to ignore symptoms of illness because they are worried about taking unpaid time off of work to see

their doctor. These patients often end up in the emergency room, admitted to the hospital in far worse condition than if they had been able to see their doctor sooner. She recounts some recent patients she's treated:

A 55 year-old Latina woman experiencing asthma symptoms needed to see a doctor. Without her own means of transportation, she depended on her husband to get to the doctor. But he did not have paid sick days and could not take off of work, so the wife decided to “fight it off alone.” Her condition worsened to the point where an ambulance had to be called and she was admitted to the hospital with respiratory complications from pneumonia.

When her two month-old baby developed a cough and a fever, a Latina mother was unable to take time off from her job during the day to take the infant to the doctor. So she waited until she got home, praying that her baby would be doing better by the time she arrived. Instead, she found that the baby was not breathing well, and brought her to the emergency room. The baby was admitted to the hospital for three days with bronchiolitis, a respiratory viral infection.

Having a daughter with special needs put a lot of pressure on one Latina patient to not miss work and lose wages needed to pay for her daughter's care. Even though she and her husband both worked full time, they were barely able to keep up with the bills. The mother developed lupus and began taking medications which left her immune system weak and carried a risk of severe fatigue, dehydration, and increased susceptibility to other bacteria and viruses. When she began feeling the negative effects of her medication, she neglected her own health needs because she could not afford to take time off and lose wages so vital to her daughter's care. By the time she made it in to see her doctor, she had to be rushed to the emergency room.

He wound up in the ER after work three times in one year with abscesses, any of which could have spread to his blood and killed him...His problems could have been prevented if he had access to paid sick days.

FINDING FOUR

While Latinos have the least access to paid sick days, they have a greater need because of the prevalence of asthma and other conditions associated with their high rate of poverty.

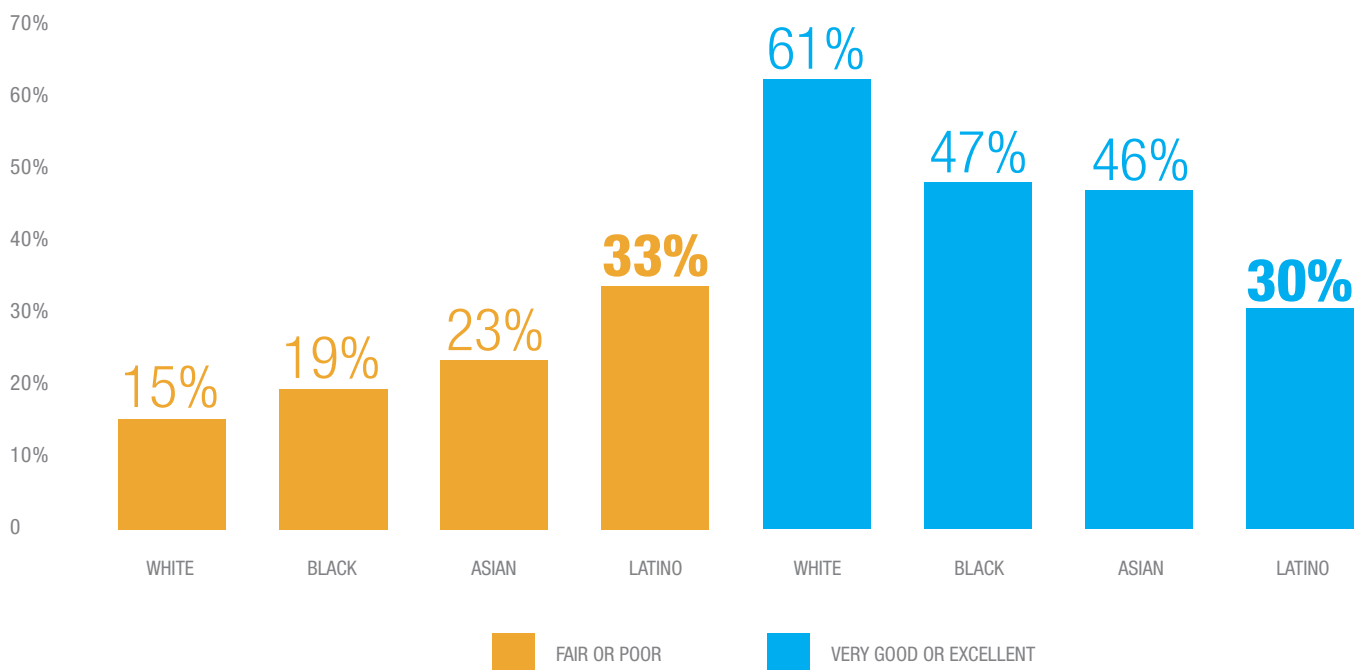
Latinos in New York City are highly concentrated in poor communities with poor health outcomes. Latinos make up over half the population of the Bronx, the borough with the highest poverty rate (31%), and which ranks last in health outcomes among the 62 New York State counties, according to the 2012 County Health Rankings. In East Harlem, where 1 in 4 children have asthma, nearly half of all residents are Latino and over 60 percent of these Latino residents are below 200 percent of the federal poverty level.

Citywide, the asthma rate for Latinos is 14 percent, compared to 11 percent for all city residents, and the highest rate of any racial or ethnic group in the city. The problem is greater among Latino children, one in five of whom has asthma.¹¹ Latinos are also much more likely to

have diabetes. Twelve percent of Latinos in New York City, compared to 9 percent of all city residents, have diabetes. Among Latino men, the number goes up to 14 percent.

When interviewed as part of New York City's Department of Health and Mental Hygiene's Community Health Survey, Latinos are the most likely to rate their own health as "fair or poor" and the least likely to say it is "very good or excellent." One-third of Latinos said their health was "fair or poor" and only 30 percent of Latinos reported that their health was "very good" or "excellent," the lowest of any racial or ethnic group by a wide margin. By comparison, 61 percent of whites, 47 percent of blacks, and 46 percent of Asians reported their health was "very good" or "excellent."¹²

SELF-REPORTED HEALTH STATUS OF NYC RESIDENTS



Source: NYC Department of Health and Mental Hygiene 2010 Community Health Survey

County Health Rankings

Each year, the University of Wisconsin Population Health Institute produces the County Health Rankings for every state in the nation. The rankings look at health outcomes and a variety of health factors so that communities can recognize the health-related problems they face and work to solve them.

Health outcomes are ranked by measuring mortality and morbidity. Mortality is defined by premature death, or the number of years of potential life lost before the age of 75. Morbidity is calculated using three self-reported measures: the percentage of the population reporting fair or poor general health; the average number of physically unhealthy days in the last thirty days; and the average number of mentally unhealthy days reported in the last thirty days. Morbidity also factors in low birth weight, or the percent of live births in which the baby weighed less than approximately 5 pounds, 8 ounces (2,500 grams). Health factors take into account a variety of measures under the following

categories: health behaviors, clinical care, social and economic factors, and physical environment.

The Bronx, where 55 percent of residents are Latino, is home to nearly one-third of the city Latino's population. It ranks 62nd out of 62 counties in the overall health rankings and is at or near the bottom in nearly all of the health factors:

NEW YORK STATE COUNTY HEALTH RANKINGS FOR 2012

RANK	HEALTH OUTCOMES	HEALTH FACTORS	HEALTH BEHAVIORS	CLINICAL CARE	SOCIAL AND ECONOMIC FACTORS	PHYSICAL ENVIRONMENT
1	Putnam	Tompkins	Westchester	Onondaga	Putnam	Greene
2	Tompkins	Nassau	New York	Tompkins	Saratoga	Essex
3	Saratoga	Westchester	Nassau	Warren	Nassau	Warren
4	Columbia	Putnam	Tompkins	Albany	Tompkins	Yates
5	Rockland	Saratoga	Rockland	Schenectady	Suffolk	Schuyler
6	Livingston	Rockland	Queens	Westchester	Ontario	Otsego
7	Nassau	Ontario	Putnam	Nassau	Westchester	Delaware
8	Westchester	Suffolk	Columbia	Monroe	Rockland	Columbia
9	Ontario	Albany	Albany	Saratoga	Hamilton	Chenango
10	Dutchess	Dutchess	Suffolk	New York	Dutchess	Genesee
11	Yates	New York	Kings	Rockland	Tioga	Cattaraugus
12	Schuyler	Hamilton	Dutchess	Erie	Genesee	Allegany
13	Wyoming	Otsego	Ontario	Ontario	Madison	Fulton
14	Schoharie	Columbia	Saratoga	Otsego	Columbia	New York
15	Madison	Onondaga	Livingston	Broome	Livingston	Saratoga
16	Suffolk	Madison	Hamilton	Madison	Albany	Cortland
17	Queens	Warren	Essex	Putnam	Otsego	Tompkins
18	Tioga	Livingston	Yates	Oneida	Orange	Lewis
19	Lewis	Tioga	Richmond	Chautauqua	Ulster	Sullivan
20	New York	Schenectady	Onondaga	Richmond	Warren	Oneida
21	Orange	Genesee	Otsego	Dutchess	Rensselaer	Wyoming

22	Essex	Yates	Schoharie	Hamilton	Wayne	Montgomery
23	Richmond	Monroe	Schenectady	Seneca	Washington	Hamilton
24	Delaware	Essex	Delaware	Yates	Schenectady	Franklin
25	Warren	Ulster	Madison	Tioga	Wyoming	Chemung
26	Genesee	Orange	Franklin	Montgomery	Schuyler	St Lawrence
27	Albany	Broome	Erie	Ulster	Monroe	Dutchess
28	Seneca	Erie	Cortland	Jefferson	Richmond	Steuben
29	Hamilton	Richmond	Wyoming	Rensselaer	Onondaga	Putnam
30	Ulster	Rensselaer	Tioga	Fulton	Essex	Livingston
31	Schenectady	Oneida	Orange	Lewis	Schoharie	Rockland
32	Jefferson	Cortland	Monroe	Suffolk	Yates	Ontario
33	Herkimer	Schoharie	Broome	Steuben	Delaware	Westchester
34	Chenango	Schuyler	Schuyler	Genesee	Seneca	Seneca
35	Cayuga	Delaware	Clinton	Chenango	Niagara	Madison
36	Rensselaer	Wyoming	Chemung	Cortland	Cayuga	Broome
37	Clinton	Chenango	Genesee	Livingston	Oneida	Onondaga
38	Monroe	Seneca	Ulster	Columbia	Broome	Cayuga
39	Oswego	Lewis	Rensselaer	Cayuga	Cortland	Clinton
40	Otsego	Wayne	Oneida	Orange	Erie	Washington
41	Orleans	Greene	Chenango	Oswego	Greene	Nassau
42	Cortland	Cayuga	Warren	Herkimer	Herkimer	Albany
43	Onondaga	Chautauqua	Cattaraugus	Niagara	Lewis	Ulster
44	Franklin	Clinton	Chautauqua	Wayne	Jefferson	Herkimer
45	Washington	Allegany	Greene	Clinton	Allegany	Schenectady
46	Wayne	Washington	Allegany	Washington	Chautauqua	Jefferson
47	Montgomery	Herkimer	Herkimer	Allegany	Chenango	Monroe
48	Allegany	Chemung	Bronx	Sullivan	Steuben	Tioga
49	Chautauqua	Niagara	Cayuga	Schoharie	Chemung	Orange
50	Cattaraugus	Franklin	Wayne	Essex	Clinton	Schoharie
51	Fulton	Queens	Lewis	Chemung	Cattaraugus	Rensselaer
52	Greene	Steuben	Niagara	St Lawrence	Orleans	Oswego
53	Steuben	Cattaraugus	Seneca	Greene	Franklin	Erie
54	Kings	Jefferson	Sullivan	Cattaraugus	New York	Niagara
55	Oneida	Fulton	Orleans	Schuyler	Oswego	Chautauqua
56	Broome	Sullivan	Washington	Wyoming	Queens	Suffolk
57	Erie	St Lawrence	Steuben	Kings	Fulton	Wayne
58	St Lawrence	Montgomery	Fulton	Delaware	St Lawrence	Orleans
59	Niagara	Orleans	St Lawrence	Franklin	Sullivan	Kings
60	Chemung	Oswego	Montgomery	Queens	Montgomery	Queens
61	Sullivan	Kings	Jefferson	Bronx	Kings	Richmond
62	Bronx	Bronx	Oswego	Orleans	Bronx	Bronx

For more information, including the specific items used to measure the health factors, visit the County Health Rankings website at www.countyhealthrankings.org

FINDING FIVE

Eight out of ten Latinos support making the provision of paid sick days a minimum labor standard.

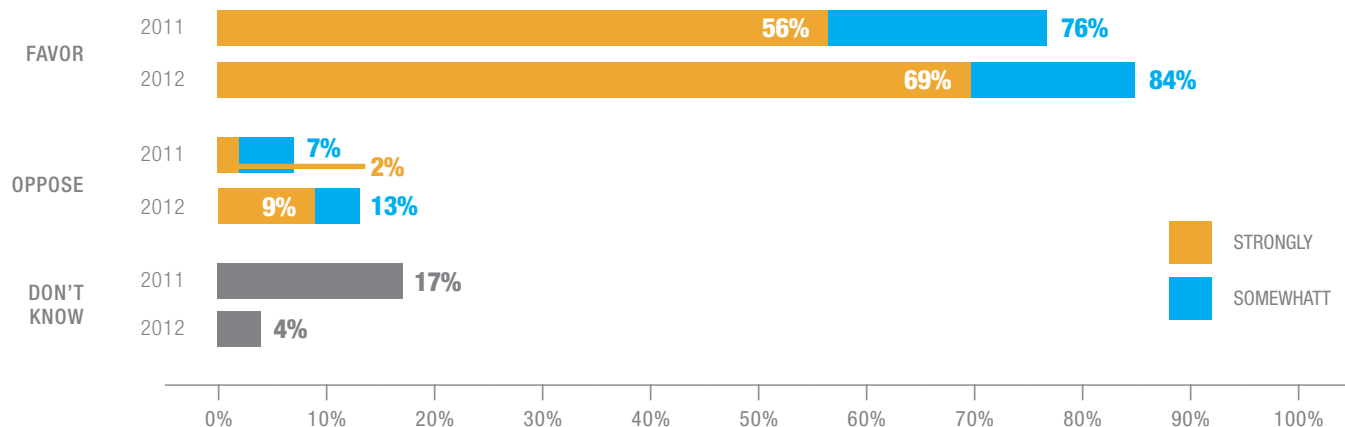
A proposal is being debated in New York City that would require employers with five or more workers to provide at least five paid sick days to their employees. Similar measures have already been adopted in recent years in San Francisco, Washington, DC, the state of Connecticut, Seattle and Portland, Oregon and legislation is advancing through the city council in Philadelphia. Despite widespread support by a veto-proof majority of 38 out of 51 city council members, Council Speaker Christine Quinn has declined to bring the measure to the floor for a vote, citing her concerns that small businesses would be negatively impacted. That argument has been discredited by leading economists who have studied the issue. They have found that passage of standards that impose costs of a similar or greater magnitude, such as minimum wage increases, have not had negative effects on employment.¹³ In addition, there is no evidence from the localities that have already implemented paid sick days policies that businesses have been adversely affected.¹⁴

The bill being debated in New York has been amended significantly since its introduction in response to concerns voiced by opponents of the legislation. The original bill called for nine paid sick days for workers in establishments with more than 19 employees instead of the current proposal of five days for all businesses with five or more

employees. Mom-and-pop shops with fewer than five employees would not have to provide paid time off, but could not fire a worker for taking up to five days of unpaid sick time. That change from the original bill excludes 64 percent of all business establishments in New York City.¹⁵ Other provisions effectively exclude seasonal workers, make clear that Paid Time Off (PTO) policies could satisfy the bill's requirements, and allow workers to swap shifts if they choose, rather than take paid sick time.

We asked New Yorkers whether or not they favored the original paid sick days proposal in our 2011 and 2012 Unheard Third surveys. We found that support among Latinos is high and intensifying, with 84 percent of Latinos favoring the proposal, and nearly 7 in 10 favoring it strongly. This represents an increase from 2011 when 76 percent of Latino respondents favored the proposal and 56 percent favored it strongly. Support for paid sick days among Latinos cuts across income levels and demographic characteristics. It is not only the low-wage worker lacking paid sick days who favors the proposal. More than 8 out of 10 moderate- and higher-income Latinos support it as do more than 8 out of 10 Latinos who already receive paid sick days. These findings echo the broad citywide support and the public's recognition that paid sick days will not only benefit those who currently lack them, but all New Yorkers.

LATINO SUPPORT FOR PAID SICK DAYS





Employers talk about why they provide paid sick time to their employees:

Business owner Freddy Castiblanco speaks out in support of paid sick days.

FREDDY CASTIBLANCO OWNER, TERRAZA 7 TRAIN CAFÉ, QUEENS

"I immigrated to this country 12 years ago. I worked as a doctor in Colombia. I have a live music venue right in the middle of Elmhurst and Jackson Heights. I have been in business for ten years. We try to create a dialogue among cultures through music. It's an amazing place in the middle of the most diverse community of working class immigrants.

Lack of paid sick days has consequences not only for workers but also for business, particularly in my community. Those workers are my customers. We need to protect salaries. If we protect the salaries, if we give jobs stability, we are going to protect the purchasing power of potential customers. If you give me tax cuts, I won't be able to generate any more jobs. What really creates jobs in my community is customers. We need the capacity of purchasing power of our customers, but particularly low-income Latinos who are our customers in Jackson Heights, Elmhurst, and Corona. I just want to let you know that Chambers of Commerce can pay lobbyists; small business owners cannot. So we have to talk for ourselves. We have to start to differentiate who is a small business and who represents big corporations."

JUAN CARLOS RUIZ CO-OWNER, COLORS RESTAURANT, MANHATTAN

"I am the co-owner of Colors restaurant, located on the Lower East Side. We have been in business since 2006. We emerged out of the ashes of 9/11 with a vision of a restaurant that is not business as usual. We put people first, ahead of policies that go against the dignity of a person.

We do provide paid sick days which in the logic of nowadays, with everyone trying to cut corners, might seem counterproductive. I am here to say that such attitudes, such moves on our part, have greater benefits beyond the statistics. It humanizes the work environment. It lends us loyalty of our employees, and in the long run it benefits not only us as business persons but also the community where we are offering our services. We are dealing with food here which is an intimate relationship that we have not only with food but with customers. When we accept one of our employees coming to work sick, most likely they will infect not only co-workers but our clients. I think the value of upholding the dignity of each person has to be primary."

BARBARA SIBLEY OWNER, LA PALAPA, MANHATTAN

Barbara Sibley was born and raised in Mexico City, and is the owner of the authentic Mexican restaurant, La Palapa in the East Village. Barbara, who opened the restaurant in 2000, feels she has a responsibility not only to her diners, but to her workers as well. Workers at La Palapa receive one week of paid vacation, and an informal sick leave policy that is simply, "if you need it, take it, and you'll get paid sick days. Whatever is needed is needed." The benefits of offering sick leave to her workers are that ill employees won't spread communicable diseases, their health will improve faster and that healthier and happier workers are better workers. "What's good for workers is good for business," she says. Barbara notes that La Palapa isn't a big restaurant with big margins, but she is happy to be an example of how you can run a restaurant in a way that takes care of workers while still being successful. "Why shouldn't we aspire to a higher standard?"


SUMMARY

Among New York City's racial and ethnic groups, Latinos are the least likely to have paid sick days, in part because they are disproportionately employed in low-wage occupations and in industries that provide few, if any, basic benefits. These jobs are often not enough to keep many Latinos out of poverty, even for those who work long hours and year round. Latinos also have a greater need for paid sick days because of their high rates of poverty that make losing even a day's pay a hardship and because of the health problems that are more prevalent among the poor.

For over 60 percent of low-income Latino workers, getting sick means making a choice: go to work sick, risk worsening your condition and passing your illness on to others, or take a day off to recover or go to the doctor, and lose desperately needed wages and quite possibly your job. It is a choice that Felix Trinidad, Emilio Palaguachi and countless others have been forced to make.

To learn more about the issue of paid sick days, please visit www.cssny.org/paid-sick-days.





Lack of paid sick days has consequences not only for workers but also for business, particularly in my community. Those workers are my customers. We need to protect salaries.

FREDDY CASTIBLANCO
OWNER, TERRAZA 7 TRAIN CAFÉ, QUEENS

Endnotes

1. This number is calculated using the percentage of Latino workers who do not have paid sick days from the Unheard Third survey and the total number of employed Latinos in New York City from the 2011 American Community Survey.
2. Institute for Women's Policy Research. "Paid Sick Days Access Rates by Gender and Race/Ethnicity, 2010." March 2011.
3. According to an analysis of data from the March 2012 Current Population Survey Economic Supplement, nearly a quarter of Latinos are employed in construction or the accommodation, recreation, and food services industry, compared to 14 percent of whites, 12 percent of blacks, and 14 percent of Asians.
4. According to analysis of the 2011 American Community survey, 35 percent of immigrant Latino workers lack a high school diploma, compared to 8 percent of white immigrants, 14 percent of black immigrants, and 21 percent of Asian immigrants.
5. CSS analysis of 2011 American Community Survey data
6. Elise Gould, Kai Filion, and Andrew Green. "The Need for Paid Sick Days: The Lack of Federal Policy Further Erodes Family Economic Security." Economic Policy Institute. June 2011.
7. Jeremy Reiss and Nancy Rankin, with Krista Pietrangelo. "Sick in the City: What the Lack of Paid Leave Means for Working New Yorkers." A Better Balance and Community Service Society. October 2009.
8. Supriya Kumar et al. "The Impact of Workplace Policies and Other Social Factors on Self-Reported Influenza-Like Illness During the 2009 H1N1 Pandemic." American Journal of Public Health. Volume 102, Issue 1. January 2012.
9. Ibid.
10. See Asfaw, et. al., "Paid Sick Leave and Nonfatal Occupational Injuries," Am J of Public Health, Sept. 2012; Peipins, et. al., "The Lack of Paid Sick Leave as a Barrier to Cancer Screening and Medical Care-Seeking: Results from the National Health Interview Survey," BMC Public Health, July 2012; and "Paid Sick Days in New York City Would Lower Health Care Costs by Reducing Unnecessary Emergency Department Visits," Institute for Women's Policy Research Fact Sheet, Feb. 2012.
11. Preventing and Treating Childhood Asthma in NYC," New York City Department of Health and Mental Hygiene, Volume 11, No. 4, July 2012.
12. Asthma rates, diabetes rates, and self-reported health status for groups in New York City were ascertained using the 2010 Epiquery, an interactive data tool that is part of the New York City Department of Health and Mental Hygiene's annual Community Health Survey.
13. "The Impact of Paid Sick Days on Jobs: What's the Real Story?" Highlights from a policy roundtable hosted by the Community Service Society, September 2012.
14. See "The Impact of Paid Sick Days on Jobs," pp. 11-12. Also, in Connecticut, where a paid sick days law has been in effect since January 2012, *The New York Times* reports that, "Governor Dannel Malloy said recently that the law has not led to more small business failures and that the state had gained jobs since it took effect." Editorial, Sunday, August 5, 2012.
15. Source: 2010 County Business Patterns survey.

Related Publications

AVAILABLE AT WWW.CSSNY.ORG

Paid Sick Days: Support Grows for a Work Standard Most Low-Wage Earners Still Lack in New York City

by Nancy Rankin, CSS Policy Brief, October 2012

The Impact of Paid Sick Days on Jobs: What's the Real Story? Highlights from a policy roundtable hosted by the Community Service Society of New York

edited by Nancy Rankin, September 2012

Still Sick in the City: What the Lack of Paid Leave Means for Working New Yorkers

by Nancy Rankin, CSS Policy Update, January 2012

Sick in the City: What the Lack of Paid Leave Means for Working New Yorkers

by Nancy Rankin, Jeremy Reiss, and Krista Pietrangelo, Community Service Society and A Better Balance Policy Brief, October 2009.

How the Unheard Third Survey Was Conducted

The Community Service Society designed this survey in collaboration with Lake Research Partners, who administered the survey by phone using professional interviewers. The survey was conducted from July 8th to July 25th, 2012. The survey reached a total of 1,468 New York City residents (including 441 Latino respondents), age 18 or older, divided into two samples:

- 935 low-income residents (up to 200% of federal poverty standards, or FPL) comprise the first sample:
 - ▶ 499 poor respondents, from households earning at or below 100% FPL
 - ▶ 436 near-poor respondents, from households earning 101% - 200% FPL
- 533 moderate- and higher-income residents (above 200% FPL) comprise the second sample:
 - ▶ 328 moderate-income respondents, from households earning 201% - 400% FPL
 - ▶ 205 higher-income respondents, from households earning above 400% FPL.
- This year's survey also included an oversample of 250 cell phone interviews among adult residents at up to 400% FPL.

Telephone numbers for the low-income sample 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, 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. Also, in the combined totals, the sample is weighted by telephone status. Interviews were conducted in English, Spanish and Chinese.

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 low-income component is +/- 3.2%. The margin of error for the higher-income component is +/-4.2%. The margin of error for the entire survey is +/- 3.7%.

Surveys from previous years were also included in the findings of this report. The 2009 Unheard Third survey was conducted from July 7 to August 3, 2009 and reached 1,212 New York City residents. The 2011 survey was conducted from July 5 to July 31, 2011 and reached 1,419 New York City residents.

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