



Testimony in Support of HB 3087

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Chair Lively and Members of the Committee:

My name is Diane Solomon. I'm a Nurse researcher, Nurse-Midwife and Psychiatric Nurse Practitioner representing the Oregon Nurses Association. I'm privileged to testify today, as I'm a passionate advocate for the effects of paid family leave.

As you know, America is the only first world country without paid maternity leave. Women in France enjoy 16 weeks paid, in Canada, 15 weeks; in Germany, both parents receive a year of paid leave, and in Japan, 15 weeks paid at 66 percent.

It is beyond time for Oregon and the U.S. to join the rest of the civilized world. I can attest that our current family leave system—forcing new mothers, for instance, to choose between a paycheck or leaving their infant—predisposes women to postpartum depression. I see the downstream effects in my practice, devoted largely to pregnant and postpartum mothers. Children of depressed mothers are prone to catastrophic outcomes. These children suffer higher rates of psychiatric illness; impaired cognitive, social, and academic functioning; and lifelong sequelae—including entry into the criminal justice system.

Research robustly bears out the single best health investment we could possibly make in our communities, with greatest long-term payoffs of any health issue, physical or mental, would be treating maternal depression. Children of successfully treated mothers are put on a much more positive life trajectory than those who aren't. Studies show when mothers (and fathers as well) spend time with children, everyone benefits—and when mothers are well-supported, families thrive.

On the opposite end of the spectrum, at any given time over 42 million Americans care for an adult family member. I've listened first-hand to adult children, distressed, anxious, and guilty that they can't spend time caring for ailing parents as they can't afford to leave work. These caregivers suffer PTSD, depression, anxiety, and complicated grief; intense downstream costs to an already burdened healthcare system.

HB 3087 is crucial to help families care for each other at the beginning and end of life, as well as for the disabled, injured, or ill. Investing now will save immeasurably later, and do much towards creating civil society.

Thank you for your compassionate stewardship to impacting the lives of present and future Oregonians, and therefore, all of us.

I urge your support for HB 3087.