

Statement in Support of SB25-144
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April 16, 2025

My name is Dr. Honora Quinn Burnett, and I am a community pediatrician and testifying today on behalf of the Colorado Chapter of the American Academy of Pediatrics. On behalf of my nearly 800 colleagues from across the state, we ask for your support for SB25-144.

Studies show that mothers and children benefit enormously from paid family leave (PFL). For example, a recent 2023 systematic review found that ≤ 12 weeks of parental leave may contribute additional risk for postpartum depressive symptoms.¹ Additionally, a large cross-sectional study found postpartum depression symptoms increased from 11.7% in the most generous PFL states to 13.3% in the least PFL generous states.

This study also investigated breastfeeding and found breastfeeding at 6-weeks postpartum was 32% more likely in states with the strongest PFL coverage among Medicaid recipients.² Prolonged breastfeeding duration reduces the risk of breast and ovarian cancer for mothers.³ Infants benefit from PFL bonding time. Infants with parents with PFL have less respiratory viral infections⁴ and are more likely to receive a routine schedule of life-saving vaccinations.^{2,5-7} Their mothers are more likely to breastfeed for longer, which leads to less risk of asthma, obesity, type 1 diabetes, acute otitis media, gastrointestinal disorders, sudden infant death syndrome in infants.

Specifically, PFL increases the health outcomes of premature infants.⁸ As a pediatrician who has worked in the NICU, I've seen parents of infants be forced to make an impossible choice between using PFL during their child's NICU time, or when their child returned home. This is a choice no family should have to make.

On behalf of the children and families of Colorado, I support SB25-144 and think it is critical to increase the duration of eligibility for FAMLI for an additional 12 weeks of PFL for those caring for NICU infants.

Thank you to the sponsors of this bill. Please vote yes on SB25-144.

References:

1. Hidalgo-Padilla L, Toyama M, Zafra-Tanaka JH, Vives A, Diez-Canseco F. Association between maternity leave policies and postpartum depression: a systematic review. *Arch Womens Ment Health*. 2023;26(5):571-580. doi:10.1007/s00737-023-01350-z
2. Perry MF, Bui L, Yee LM, Feinglass J. Association Between State Paid Family and Medical Leave and Breastfeeding, Depression, and Postpartum Visits. *Obstet Gynecol*. 2024;143(1):14-22. doi:10.1097/AOG.0000000000005428
3. Westerfield KL, Koenig K, Oh R. Breastfeeding: Common Questions and Answers. *Am Fam Physician*. 2018;98(6):368-373.
4. Ahrens KA, Janevic T, Strumpf EC, Nandi A, Ortiz JR, Hutcheon JA. Paid Family Leave and Prevention of Acute Respiratory Infections in Young Infants. *JAMA Pediatr*. Published online August 26, 2024. doi:10.1001/jamapediatrics.2024.3184
5. Roy Choudhury A, Polachek SW. The impact of paid family leave on the timely vaccination of infants. *Vaccine*. 2021;39(21):2886-2893. doi:10.1016/j.vaccine.2021.03.087
6. Pac J, Bartel A, Ruhm C, Waldfogel J. Paid family leave and parental investments in infant health: Evidence from California. *Economics & Human Biology*. 2023;51:101308. doi:10.1016/j.ehb.2023.101308
7. Dammann CEL, Montez K, Mathur M, et al. Paid Family and Medical Leave: Policy Statement. *Pediatrics*. 2024;154(5):e2024068958. doi:10.1542/peds.2024-068958
8. Weber A, Harrison TM, Steward D, Ludington-Hoe S. Paid Family Leave to Enhance the Health Outcomes of Preterm Infants. *Policy Polit Nurs Pract*. 2018;19(1-2):11-28. doi:10.1177/1527154418791821

House Business Affairs & Labor

04/16/2025 Upon Adjournment

SB25-144 Change Paid Family Med Leave Ins Prog

Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Dawn Fritz For Colorado PTA	<p>Colorado PTA supports SB 144. PTA believes that health is based on the quality of life of the whole child – emotional, intellectual, physical, and social. All elements must be considered before optimum health can exist. Therefore, PTA supports legislation for access to quality, affordable care for all.</p> <p>In fact, one of the earliest issues that PTA resolved to advocate about – in 1910 – was endorsing the instruction and care of mothers before as well as after the birth of a child. We believe it is essential that parents are available to care for their newborns during the first few weeks of life. This helps children get off to a good start, and it is essential for their long-term physical and psychological health and well-being.</p> <p>Paid family and medical leave is an essential aspect of health care for mothers and babies, especially those babies receiving inpatient care in a neonatal intensive care unit, who are the most vulnerable when they are able to go home. This kind of care is both preventive and primary in nature, and that is why PTA has made the passage of SB 144 a high priority.</p>