









Indiana Commission for Women

Findings from a Survey of 600 Indiana adults ages 18 to 64 statewide, with an oversample of 100 adults at or below 200% of the federal poverty level

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Methodology

Survey Methodology

- Lake Research Partners designed and administered this survey which
 was conducted over the phone between November 13 26, 2017. The
 survey reached a total of 600 Indiana adults ages 18-64 and an
 oversample of 100 low income residents (at or below 200% of the
 federal poverty level) statewide.
- The sample were drawn from a list of adults and low-income residents in the state of Indiana. The data were weighed slightly by age, education, party identification, and race to reflect attributes of the actual population. Oversamples were weighted down into the base.
- The margin of error for the sample is +/-4.0%. 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.



Regional Definitions

- Northwest: residents of Benton, Carroll, Cass, Fulton, Jasper, Lake, LaPorte, Marshall, Newton, Porter, Pulaski, St. Joseph, Starke, or White counties.
- Northeast: residents of Adams, Allen, Blackford, DeKalb, Elkhart, Grant, Howard, Huntington, Jay, Kosciusko, LaGrange, Miami, Noble, Steuben, Wabash, Wells, or Whitley counties.
- Indianapolis: residents of Marion county.
- Central: residents of Boone, Clay, Clinton, Decatur, Delaware, Fayette, Fountain, Franklin, Hamilton, Hancock, Hendricks, Henry, Johnson, Madison, Montgomery, Morgan, Owen, Parke, Putnam, Randolph, Rush, Shelby, Tippecanoe, Tipton, Union, Vermillion, Vigo, Warren, or Wayne counties.
- South: residents of Bartholomew, Brown, Clark, Crawford, Daviess, Dearborn, Dubois, Floyd, Gibson, Greene, Harrison, Jackson, Jefferson, Jennings, Knox, Lawrence, Martin, Monroe, Ohio, Orange, Perry, Pike, Posey, Ripley, Scott, Spencer, Sullivan, Switzerland, Vanderburgh, Warrick, or Washington counties.





Key Findings – General Attitudes toward Paid Family and Medical Leave

- When given a choice between the status quo or a statewide program, half feel there should be a state program.
 - Women, younger adults, those earning at or below 200% of the FPL, non-college educated adults, unmarried adults, parents, caregivers of an aging relative, part-time employees, and African Americans are more likely to believe that the state should provide a program that is available to everyone.
 - Those older than 50 are more likely than others to side with the status quo.



Key Findings – General Attitudes toward Paid Family and Medical Leave

- Respondents believe it is important to guarantee access to paid family and medical leave, and there is little difference between providing context about FMLA or not providing context.
- Three-quarters favor a statewide program to guarantee access to paid family and medical leave. Intensity is higher when information is given about the type of care included in a program, but overall support is strong whether or not the type of care is described.



Key Findings – Specific Policies

- A solid majority strongly favor every specific policy that could be considered for a paid family and medical leave program.
- In rank order:
 - Mothers when they have a baby or adopt a child
 - A serious illness, health condition, or injury of the employee
 - Providing care for a child with disabilities
 - Providing care for a sick child
 - A serious illness, health condition, or injury of an immediate family member of the employee
 - Providing care for an elderly family member
 - Providing care for a service member's needs
 - Fathers when they have a baby or adopt a child
- Over half of respondents favored every policy, and three-quarters favor including both maternity and paternity leave.



Key Findings – Components of a Program

- Half or more strongly favor:
 - automatic enrollment with an opt-out option
 - requiring employees to opt-in
 - setting eligibility at 680 hours in the past year
- While a majority favor including employers of all sizes, giving employers the ability to opt-in their employees, and requiring at least 13 hours per week, intense favorability is lower.
- Adults prefer employees having the option to opt-in rather than leaving it to the employer to opt-in their employees.
- When talking about eligibility, adults respond better to 680 hours in the past year versus at least 13 hours per week for the past year.



Key Findings – Funding a Program

- The top way to fund a statewide program is employeefunded with the option for an employer to match. The least favorable is employees paying \$312 per year.
- All demographic groups net favor all of the tested financing mechanisms.
- It is stronger to talk about employees paying up to \$6 per week than paying up to \$312 year.
- Over half of respondents are likely to contribute to a state tax-free savings account to pay for leave, but less than a quarter are very likely to do so.
- Among those who are likely to contribute to a savings account, the median contribution is \$20 per week.



Key Findings – Key Supporters

- Throughout the data, the following subgroups are more supportive of paid family and medical leave:
 - Adults younger than 30
 - Younger women
 - Residents of Indianapolis
 - Non-college educated women
 - Those at or below 200% FPL
 - Democrats
 - African Americans
 - Caregivers for an aging relative
- There is little difference between parents of minors and childfree respondents.



Indiana adults ages 18 to 64 are majority female, white, and non-college educated.

	GENDER AGE		EDUCATION				REGIOI	N	
48%	52%	Under 30 30-39 40-49 50-64	25% 21% 20% 33%	High School or Less Post-H.S. / Non-College College Graduate Post-Graduate		29% 32% 28% 11%	39% College Grad or Post Grad	Northwest Northeast Indianapolis Central	19% 18% 15% 28%
		RACE			PARTY ID			South	20%
	White	77%		Democrat	Independent	Repub	lican		
	Black	9%		30%	25%	349	%		
	Latino	6%							
	Asian	1%		***			**		
	Native Am	nerican 1%		114	r		_		



A majority are employed, married, and do not have a child under the age of 18 or an aging relative living at home.

MARITAL		PARENTAL		EMPLOYMENT			
Married	62%	Fathers	18%		Employed Full Time	58%	
All unmarried	37%	Mothers	21%		Employed Part Time	13%	<u></u>
Single	23%	Childless man	30%		Unemployed	3%]
Separated/Divorced	5%	Childless woman	31%		Homemaker	6%	-20
Widowed	3%				Student	3%	_20
Unmarried with Partner	5%	INCOME			Retired	9% -	
AGING RELATIVE					% FEDERAL POV	ERTY LE	VEL
LIVING AT HOME					Under 200% FPL		30%
Yes 11%		Below \$49,200	47%		Over 200% FPL		54%
No 88%		Above \$49,200	48%		Don't know/refuse	d	15%



Benefits Offered



Respondents are most likely to have vacation time and sick days. They are more likely to not have paternity leave or parental leave than to have these benefits offered, and over a quarter are not sure about these benefits.





A plurality of women in Indianapolis, collegeeducated men, and post-graduates have paid family and medical leave.

The subgroups who are most likely to have <u>paid</u> family and medical leave include:

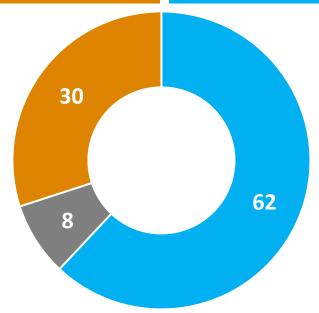
- Indianapolis women* 48%
- College-educated men 47%
- Post-graduates 47%
- Fathers 43%
- African Americans 41%
- Full-time employees 41%
- Those in their thirties 40%
- Republican men 38%
- Northeast men* 38%



Nearly two-thirds of adults have some form of paid or unpaid leave to care for family, whether that is maternity leave, paternity leave, parental leave, or family and medical leave. Younger adults, parents, and full-time employees are more likely than other to have these benefits.

Do not have paid or unpaid:
 Maternity leave
 Paternity leave
 Parental leave
Family and medical leave

Have either paid or unpaid:
Maternity leave
Paternity leave
Parental leave
Family and medical leave



	Have, paid or unpaid	Do not have
Men	64	29
Women	61	31
Under 50	(69)	25
50 and older	49	41
Below 200% FPL	53	35
Above 200% FPL	68	26
Noncollege	57	34
College	71	24
Married	66	27
Unmarried	58	34
Parents	(69)	27
No Children	58	32
Older relative in HH	63	36
No older relative in HH	63	30
Employed FT	(80)	16
Employed PT	61	34
White	63	29
African American	59	36
Northwest	63	30
Northeast	60	30
Indianapolis	64	28
Central	64	29
South	60	32

I am going to read a list of benefits that your workplace may offer. For each, please tell me if you have that benefit and it is unpaid, have that benefit and it is paid, you do not have that benefit, or if you are unsure.



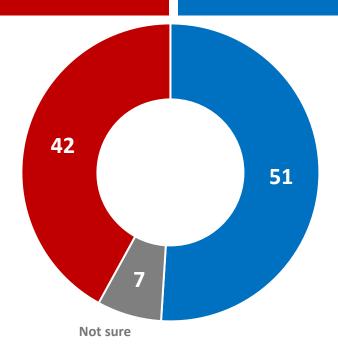


Reactions to Paid Family and Medical Leave



Given a choice between the status quo or a statewide program, about half of adults agree that the state of Indiana should have a statewide paid family and medical leave program. Most groups favor a state program for everyone. Older adults are slightly more likely than others to believe things should remain the same while men, those earning more than 200% FPL, college-educated, married, child-free, white adults and full-time employees split.

Leave things the way they are now with some employers choosing whether to provide their employees paid leave. The state of Indiana should provide a statewide paid family and medical leave program that is available to everyone.

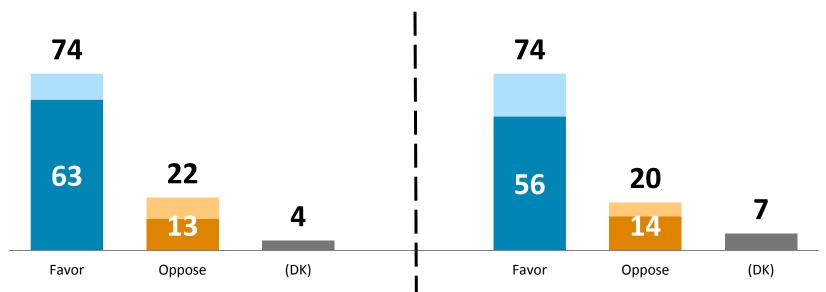


	Employers	State program for
	provide at will	everyone
Men	48	46
Women	37	55
Under 50	38	56
50 and older	51	40
Below 200% FPL	29	61
Above 200% FPL	45	50
Noncollege	40	54
College	45	46
Married	45	47
Unmarried	36	58
Parents	39	54
No Children	44	49
Older relative in HH	35	56
No older relative in HH	42	51
Employed FT	45	49
Employed PT	26	62
White	46	46
African American	16	77
Northwest	42	50
Northeast	46	46
Indianapolis	41	57
Central	47	45
South	32	59
	_	



By wide margins, respondents favor a statewide program to guarantee access to paid family and medical leave. There is an increase in intense favorability when the types of care are described, but overall support is strong whether or not the description is included.





Would you favor or oppose a statewide program to guarantee access to PAID family and medical leave to care for a newborn or newly adopted child, a seriously ill family member, or for their own serious health condition?

Would you favor or oppose a statewide program to guarantee access to PAID family and medical leave?

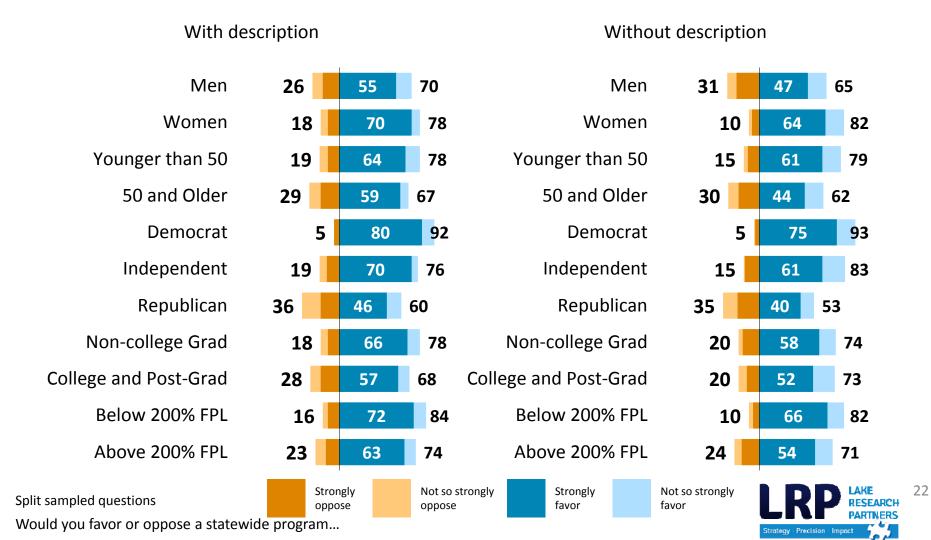


Combining those who heard a description and those who did not, the strongest supporters for a statewide paid family and medical leave program include African Americans, Democrats, and unmarried women.

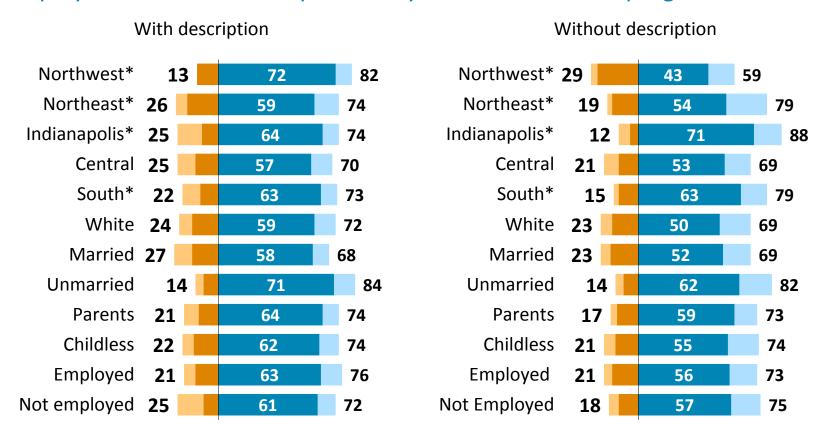
- Subgroups who are most likely to strongly favor a statewide program to guarantee access to paid family and medical leave (with and without description combined):
- African Americans 83% strongly favor
- Democrats 78%
- Unmarried women 78%
- Caregiver for an aging relative 75%
- Independent women 74%
- Women younger than 50 72%
- Non-college women 71%
- Those at or below 200% FPL 69%
- Adults younger than 30 68%
- Indianapolis residents 67%

- While all subgroups net favor a statewide program to guarantee access to PAID family and medical leave, the following groups are more likely to strongly <u>oppose</u> it:
- Northwest men* 32% strongly oppose
- Northeast men* 27%
- Republican men 26%
- Men ages 50 or older 25%
- Older Republicans 24%

No demographic or political group opposes these paid leave programs. Across gender, age, party identification, educational attainment level, and household income level adults favor a paid family and medical leave program.



Similarly, adults across region, race, marital status, parental status, and employment status favor a paid family and medical leave program.



Among African Americans, support is nearly universal: 96% favor, 83% strongly favor a statewide program.



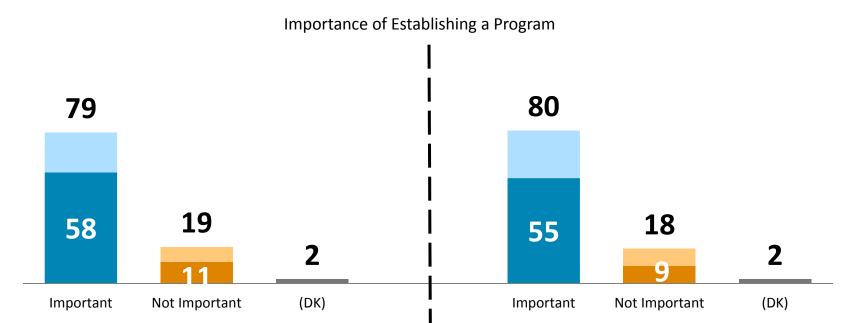


For most subgroups, there is virtually no difference between providing a description of the paid family and medical leave program or not. Adults in the Northwest are far more favorable with a description, and adults in Indianapolis are more favorable without one.

	Favor with	Favor without	
	Description	description	Difference
Northwest*	82	59	+23
Republican	60	53	+7
Men	70	65	+5
50 and Older	67	62	+5
Non-college Grad	78	74	+4
Above 200% FPL	74	71	+3
White	72	69	+3
Employed	76	73	+3
Income Below 200% FPL	84	82	+2
Unmarried	84	82	+2
Central	70	69	+1
Parents	74	73	+1
Childless	74	74	0
Younger than 50	78	79	-1
Democrat	92	93	-1
Married	68	69	-1
Not Employed	72	75	-3
Women	78	82	-4
College and Post-Grad	68	73	-5
Northeast*	74	79	-5
South*	73	79	-6
Independent	76	83	-7
Indianapolis*	74	88	-14



With or without information about unpaid FMLA, a majority say it is very important for Indiana to establish a statewide program to guarantee access to paid family and medical leave.



Current state and federal law allows many workers to take 12 weeks of UNPAID leave to care for a newborn or newly adopted child, a seriously ill family member, or for their own serious health condition. How important is it for Indiana to establish a statewide program to guarantee access to PAID family and medical leave to care for a newborn or newly adopted child, a seriously ill family member, or for their own serious health condition -- very important, somewhat important, a little important, or not important at all?

How important is it for Indiana to establish a statewide program to guarantee access to PAID family and medical leave to care for a newborn or newly adopted child, a seriously ill family member, or for their own serious health condition -- very important, somewhat important, a little important, or not important at all?



A solid majority of every demographic and political group believes it is important to establish paid family and medical leave. African Americans, women in the South, Democrats, and unmarried women are among the subgroups who are most likely to believe it is very important.

Whether or not they heard the contextual information about FMLA, those who are more likely to believe it is **very important** for Indiana to establish a statewide program to guarantee access to PAID family and medical leave include:

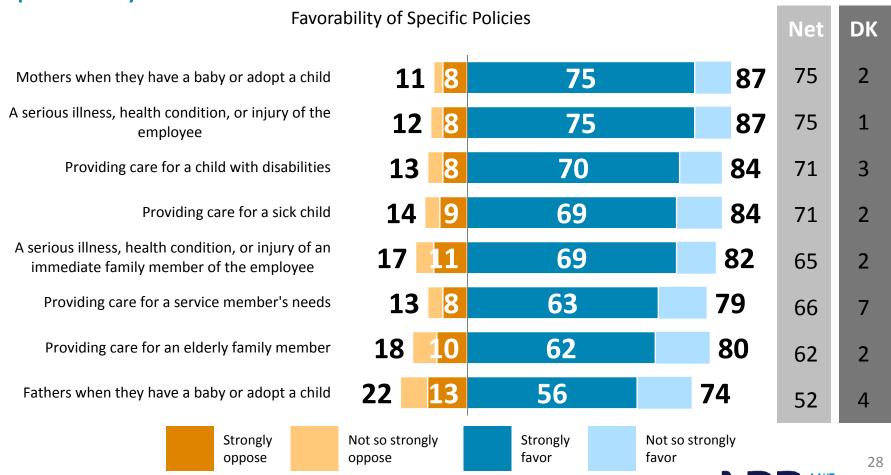
- African Americans 85%, especially African American women* – 93%
- South women* 76%
- Democrats 76%
- Unmarried women 75%
- Retirees* 73%
- Independent women 72%

- Younger women 71%
- Indianapolis women* 71%
- Non-college women 71%
- Caregivers for an aging relative* –
 68%
- Childless women 68%
- Those at or below 200% FPL 67%
- Younger Independents 67%





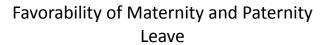
A majority strongly favor all of the policy iterations. The best testing are maternity leave and the employees' own serious illness, followed by care for a disabled or sick child and ill family member. Maternity leave is stronger than paternity leave.

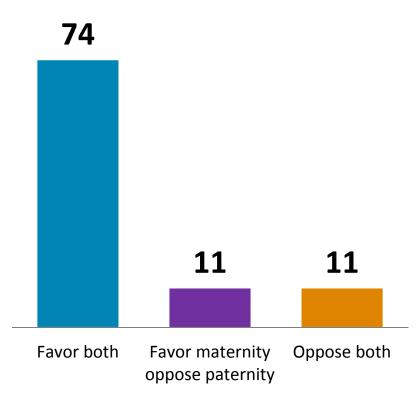


Now I am going to ask you some questions about specific policies that could be considered for a paid family and medical leave program. Would you favor or oppose a proposal that includes paid leave for [read options]? If favor/oppose, Ask: Is that strongly or not so strongly favor/oppose?

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Strategy - Precision - Impact

Three-quarters of adults favor both maternity leave and paternity leave.





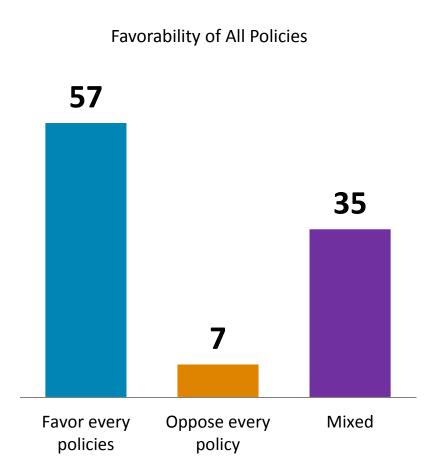
Subgroups who are most likely to favor both maternity and paternity leave include:

- African Americans 91%
- Democrats 89%, especially younger Democrats – 93%
- Indianapolis residents* 86%
- South women* 85%
- Independent women 85%
- Caregiver for an aging relative 85%
- Women younger than 50 84%

*Note small sample size



A solid majority favor every specific policy tested.



Subgroups who are most likely to favor every policy include:

- African Americans 82%
- Democrats 79%
- South women* 73%
- Caregiver for an aging relative 73%
- Women younger than 50 72%
- Independent women 72%
- Non-college women 71%
- Indianapolis residents 70%
- Unmarried women 70%
- Adults younger than 30 64%
- At or below 200% FPL 63%

*Note small sample size



Those who oppose the idea of a statewide program are somewhat open to certain policies being included in a paid family and medical leave program. They lean toward including care for a service member. They split on including maternity leave, personal illness, and care for a child with disabilities or illness. However, they oppose by wide margins including immediate family members' illness, elder care, and paternity leave.

Attitude toward a statewide program guarantee access to PAID family and medical leave	Favor Statewide Program		Oppose Statewide Program		
	Favor Policy	Oppose Policy	Favor Policy	Oppose Policy	
Mothers when they have a baby or adopt a child	98	1	47	49	
A serious illness, health condition, or injury of the employee	98	1	47	50	
Providing care for a child with disabilities	95	3	45	48	
Providing care for a sick child	96	3	44	50	
A serious illness, health condition, or injury of an immediate family member of the employee	95	4	38	59	
Providing care for a service member's needs	87	5	49	44	
Providing care for an elderly family member	92	6	38	59	
Fathers when they have a baby or adopt a child	88	10	31	64	

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Half or more strongly favor automatic enrollment with an opt-out option, requiring employees to opt-in, and setting eligibility at 680 hours in the past year. While a majority overall favor including employers of all sizes, giving employers the ability to opt-in their employees, and requiring at least 13 hours per week, intense favorability drops.

Favorability o	f Individual	Compo	onents		Net	DK
Every employee would automatically be enrolled and they would have to opt-out if they don't want the benefit	21	16	55	72	52	7
Employees would need to opt-in in order to get the benefit	24	16	52	68	44	8
Employees would be eligible who have worked at least 680 hours in the past 12 months, even if they have worked for different employers	27	16	50	67	40	5
Applies to all employers no matter how many employees they have	33	24	45	60	30	7
Employers would have the option to opt-in on behalf of their employees	29	21	41	60	27	11
Employees would be eligible to take leave as long as they have worked at least 13 hours per week for the last year, even if they have worked for different employers	40	24	34	53	13	7
Strongly Not so s	trongly	Stro	ongly	Not so strongly		

favor

favor

Now, I'm going to read you some individual components of the paid family and medical leave proposal I just read you. For each one, please tell me if you favor or oppose it. If you are not sure, please say so. Here is the first one: If favor/oppose, ask: is that strongly or not so strongly favor/oppose?

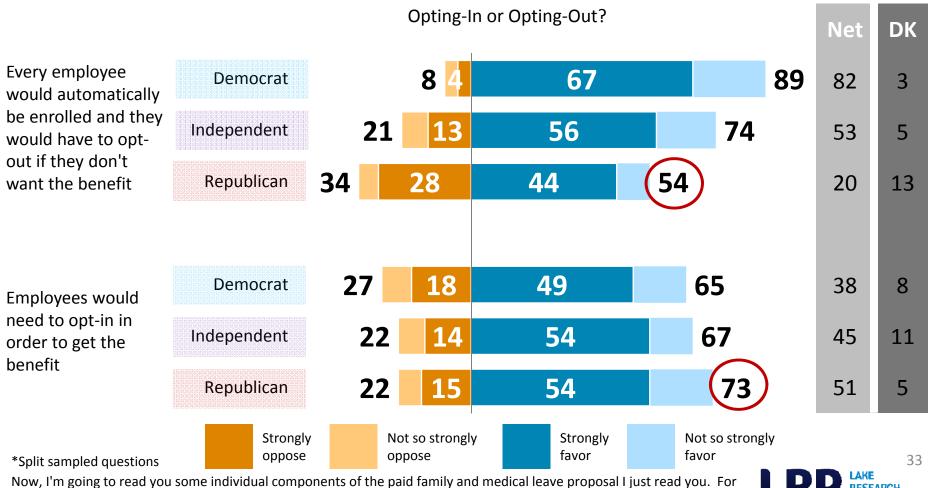
oppose

oppose



^{*}Split sampled questions

While Democrats and Independents are more favorable toward automatically enrolling every employee and allowing them to opt-out, Republicans are more favorable toward requiring employees to opt-in to receive the benefit.



Now, I'm going to read you some individual components of the paid family and medical leave proposal I just read you. For each one, please tell me if you favor or oppose it. If you are not sure, please say so. Here is the first one: If favor/oppose, ask: is that strongly or not so strongly favor/oppose?

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Strategy - Precision - Impact

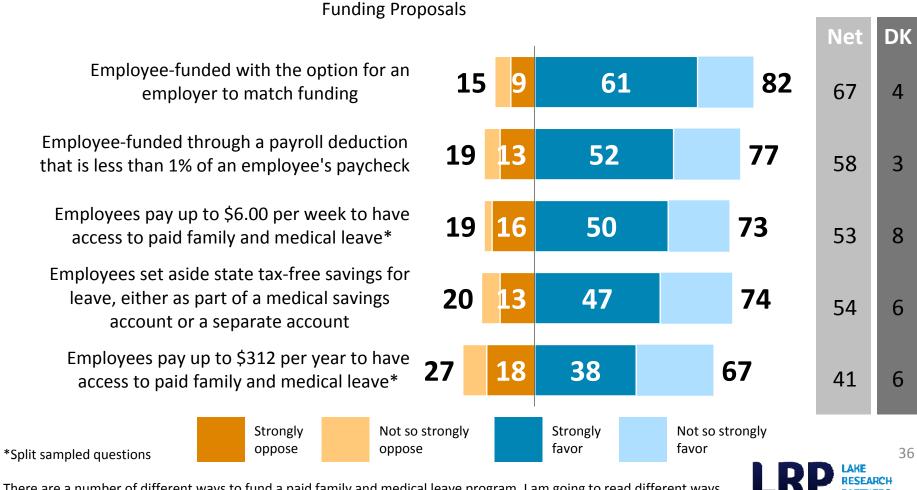
Among those who oppose a statewide program to guarantee access to paid family and medical leave, the only components that are viewed favorably are requiring employees to opt-in and giving employers the option to opt-in on behalf of their employees.

Attitude toward a statewide program guarantee access to PAID family and medical leave	Favor Statewide Program		Oppose Statewide Program	
	Favor	Oppose	Favor	Oppose
	Component	Component	Component	Component
Every employee would automatically be enrolled and they would have to opt-out if they don't want the benefit	84	10	36	56
Employees would need to opt-in in order to get the benefit	69	22	64	33
Employees would be eligible who have worked at least 680 hours in the past 12 months, even if they have worked for different employers	75	19	43	57
Applies to all employers no matter how many employees they have	71	24	29	66
Employers would have the option to opt-in on behalf of their employees	62	26	53	44
Employees would be eligible to take leave as long as they have worked at least 13 hours per week for the last year, even if they have worked for different employers	62	31	25	75





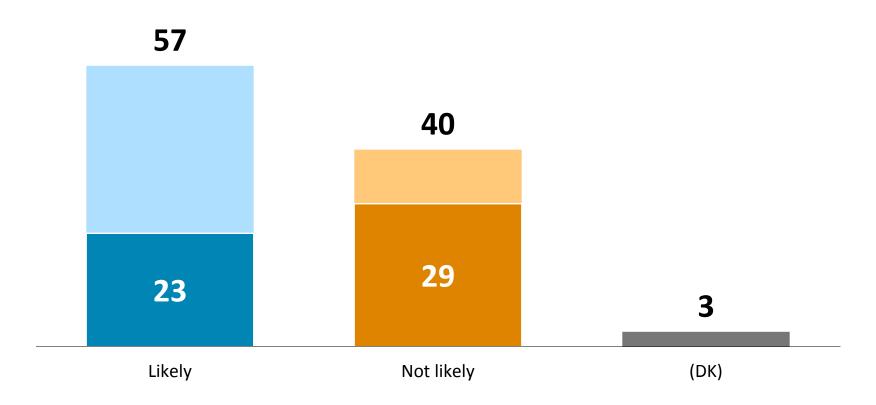
The top way to fund the program is employee-funded with the option for employer matching. Paying up to \$6 per week is better received than paying \$312 per year.



There are a number of different ways to fund a paid family and medical leave program. I am going to read different ways to fund the program. For each, please tell me if you favor or oppose it. [IF CHOICE] And is that strongly or not so strongly?

Over half are likely to contribute to a tax-free savings account to pay for leave, but less than a quarter are very likely to do so.

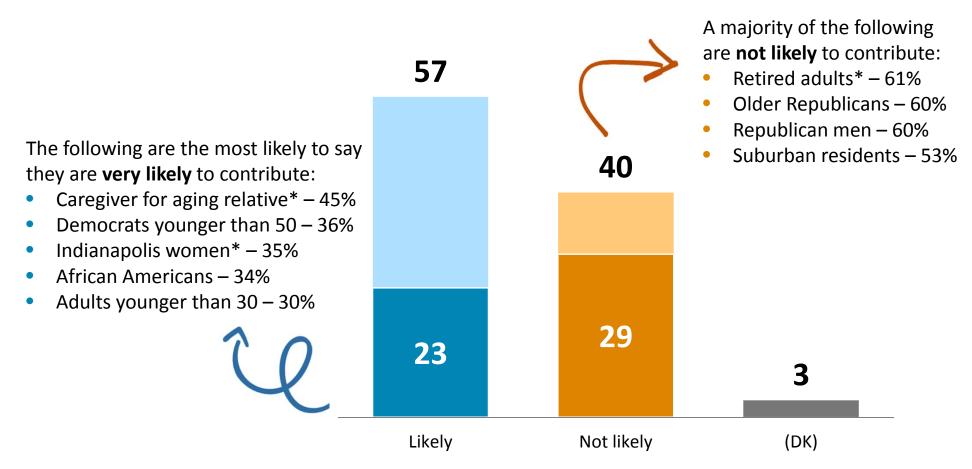
Likelihood to Contribute to Tax-Free Savings Account





Those living with an older relative, younger Democrats, Indianapolis women, African Americans and those in their twenties are the most likely to contribute.

Likelihood to Contribute to Tax-Free Savings Account

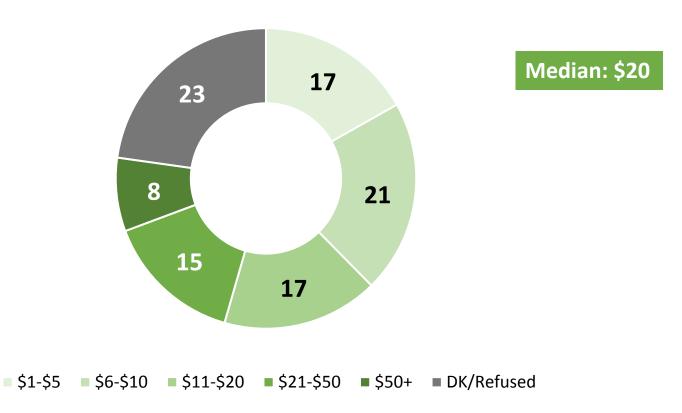


^{*}Note small sample size



The ideal contribution per week that people would be willing to contribute to a tax-free savings account is about \$20.

Ideal Contribution Per Week







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