
HOUSE CONCURRENT RESOLUTION

REQUESTING THE SENATE STANDING COMMITTEE ON LABOR AND TECHNOLOGY
AND HOUSE OF REPRESENTATIVES STANDING COMMITTEE ON LABOR TO
CONVENE A LEGISLATIVE WORKING GROUP TO DEVELOP
RECOMMENDATIONS FOR ESTABLISHING AND IMPLEMENTING A PAID
FAMILY AND MEDICAL LEAVE PROGRAM FOR THE STATE.

1 WHEREAS, the United States is the only remaining
2 industrialized nation without mandated access to paid family and
3 medical leave benefits for the private sector employees under
4 federal law; and

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6 WHEREAS, paid family and medical leave programs have been
7 enacted in thirteen states and Washington, D.C. as of January
8 2024; and

9
10 WHEREAS, existing Hawaii law does not require employers to
11 provide paid family and medical leave to employees; and

12
13 WHEREAS, the federal Family and Medical Leave Act of 1993
14 (FMLA) requires employers with fifty or more employees to
15 provide unpaid family and medical leave to their employees and
16 existing Hawaii law requires employers with one hundred or more
17 employees to provide unpaid family leave to their employees; and

18
19 WHEREAS, ninety-six percent of private employers in the
20 State however, have fewer than fifty employees, and are
21 therefore not statutorily required to provide unpaid family and
22 medical leave under the FMLA or family leave under existing
23 state law; and

24
25 WHEREAS, as a result, only one in four private sector
26 workers in the State have access to paid family and medical
27 leave, voluntarily provided by their employers; and
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1 WHEREAS, according to a May 2020 report published by the
2 AARP and National Alliance for Caregiving, there are nearly
3 forty-eight million family caregivers in the United States, of
4 which sixty-one percent are working while juggling caregiving
5 responsibilities; and
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7 WHEREAS, a family caregiver is a relative, partner, friend,
8 or neighbor who has a significant personal relationship with,
9 and who provides a broad range of assistance for, an older
10 person or an adult with a chronic, disabling, or serious health
11 condition; and
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13 WHEREAS, family caregivers are the backbone of the long-
14 term care system in the State, especially in the context of the
15 ongoing health care workforce shortage; and
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17 WHEREAS, according to the Valuing the Invaluable: 2023
18 Update report published by AARP in March 2023, there are 154,000
19 family caregivers in the State, contributing 144 million hours
20 of unpaid services, worth an estimated \$2.6 billion; and
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22 WHEREAS, family caregivers face many physical, emotional,
23 and financial challenges, especially because they are often
24 required to balance unpaid caregiving duties with employment and
25 other personal responsibilities; and
26

27 WHEREAS, a survey conducted in 2023 by AARP and S&P Global
28 showed that sixty-seven percent of family caregivers are having
29 difficulty balancing their jobs with caregiving duties; twenty-
30 seven percent of working caregivers have shifted from full-time
31 to part-time work or have reduced work hours and sixteen percent
32 have turned down a promotion; sixteen percent have stopped
33 working entirely for a period of time; and thirteen percent have
34 changed employers to meet caregiving responsibilities; and
35

36 WHEREAS, during the past two decades, heightened attention
37 has been given to the dual responsibilities of "sandwich
38 generation" caregivers, who are family caregivers sandwiched
39 between a younger generation--children or grandchildren they
40 care for--and an older one--an older family member or friend for
41 whom they also provide care; and
42

43 WHEREAS, in 2019, thirty percent of family caregivers in
44 the United States were sandwich generation caregivers, who



1 generally span ages thirty-five to sixty-four and are more
2 likely than other caregivers to be working while performing
3 their caregiving responsibilities; and
4

5 WHEREAS, as a result of the dual-generation care demands,
6 sandwich generation caregivers report higher levels of emotional
7 and financial strain; and
8

9 WHEREAS, inequity in the existing socio-economic structure
10 and support infrastructure are also subjecting working women and
11 people of color to be unequally burdened by caregiving duties
12 and economic hardships due to caregiving; and
13

14 WHEREAS, a paid family and medical leave program would
15 enable family caregivers to take a limited period of time off
16 from work to care of loved ones without fear of losing their
17 jobs or income; and
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19 WHEREAS, paid family and medical leave programs are
20 associated with improved outcomes in the earliest years of life
21 for individuals, including higher rates of breastfeeding and
22 immunization and lower rates of child abuse, domestic violence,
23 and financial instability; and
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25 WHEREAS, in the face of the current workforce shortage, a
26 paid family and medical leave programs would incentivize
27 individuals to join the labor market and improve employee
28 retention, filling gaps and saving employers long-term
29 recruitment and training costs; and
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31 WHEREAS, most small businesses in the State however, cannot
32 finance a privately-funded paid family and medical leave
33 insurance program that can provide benefits for all of their
34 employees; and
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36 WHEREAS, a state-administered paid family and medical leave
37 program would benefit the State's workforce while reducing the
38 financial burden for employers compared to a privately funded
39 alternative; now, therefore,
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41 BE IT RESOLVED by the House of Representatives of the
42 Thirty-third Legislature of the State of Hawaii, Regular Session
43 of 2025, the Senate concurring, that the Senate Standing
44 Committee on Labor and Technology and House of Representatives



1 Standing Committee on Labor are requested to convene a
2 legislative working group to develop recommendations for
3 establishing and implementing a paid family and medical leave
4 program for the State; and

5
6 BE IT FURTHER RESOLVED that the working group is requested
7 to:

- 8
9 (1) Recommend parameters for a statewide paid family and
10 medical leave program that benefits both public and
11 private sector workers;
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13 (2) Review the impact of federal and state regulations on
14 the establishment of a paid family and medical leave
15 program;
16
17 (3) Develop an implementation plan that outlines an
18 administrative framework for paid family and medical
19 leave, including departmental oversight, projected
20 costs, employer and employee contribution rates,
21 staffing needs, outreach to employers and employees,
22 and potential timelines for program enactment and the
23 initiation of benefits distribution; and
24
25 (4) Examine and address how the State's Temporary
26 Disability Insurance (TDI) program may interface with
27 or complement the paid family and medical leave
28 program, including the feasibility, cost-benefit
29 analysis, and a general roadmap for transitioning the
30 existing private TDI program to an expanded public
31 program that includes or complements paid family and
32 medical leave benefits; and
33

34 BE IT FURTHER RESOLVED that the working group is requested
35 to be composed of the following members:

- 36
37 (1) The Director of Labor and Industrial Relations, or the
38 Director's designee, to serve as chairperson of the
39 working group;
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41 (2) The Chair of the House of Representatives Standing
42 Committee on Labor, or the Chair's designee;
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- 1 (3) The Chair of the Senate Standing Committee on Labor
2 and Technology, or the Chair's designee;
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- 4 (4) The Director of Human Resources Development, the
5 directors of the central personnel agencies of the
6 State, the City and County of Honolulu, the County of
7 Hawaii, the County of Maui, the County of Kauai, the
8 Judiciary, the Department of Education, the University
9 of Hawaii, and the Hawaii Health Systems Corporation,
10 or their designees;
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- 12 (5) A representative from the Hawaii State Teachers
13 Association, to be invited by the chairperson of the
14 working group;
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- 16 (6) A representative from the United Public Workers,
17 AFSCME Local 646, AFL-CIO, to be invited by the
18 chairperson of the working group;
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- 20 (7) A representative from the Hawaii Government Employees
21 Association, to be invited by the chairperson of the
22 working group;
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- 24 (8) A representative from Aloha United Way, to be invited
25 by the chairperson of the working group;
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- 27 (9) A representative from the American Association of
28 University Women of Hawaii, to be invited by the
29 chairperson of the working group;
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- 31 (10) A representative from an organization representing the
32 interests of businesses with fewer than fifty
33 employees, to be selected and invited by the Senate
34 President;
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- 36 (11) A representative from an organization representing the
37 interests of businesses with fewer than fifty
38 employees, to be selected and invited by the Speaker
39 of the House of Representatives;
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- 41 (12) A representative from AARP Hawaii, to be invited by
42 the chairperson of the working group;
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1 (13) A representative from Hawaii Children's Action Network
2 Speaks!, to be invited by the chairperson of the
3 working group; and
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5 (14) A representative from a private insurance company
6 offering Temporary Disability Insurance benefits in
7 the State or an association of insurers, to be
8 selected and invited by the Governor; and
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10 BE IT FURTHER RESOLVED that the working group is requested
11 to identify parameters for a paid family and medical leave
12 program, including:
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14 (1) A minimum duration of leave that meets the needs of
15 the State's workers;
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17 (2) A system of wage replacement;
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19 (3) Coverage for a worker's serious illness, caring for a
20 loved one with a serious illness, bonding with a new
21 child, and needs arising from military deployment and
22 the effects of domestic violence, stalking, and sexual
23 assault;
24

25 (4) Coverage for all employees of employers who employ
26 one or more employees, and a mechanism for the
27 participation of the self-employed;
28

29 (5) A definition of "family" or "family member" for whom
30 an individual may take leave for purposes of providing
31 care that is at least as broad as the definition in
32 chapter 398, Hawaii Revised Statutes, the existing
33 Hawaii Family Leave Law; and
34

35 (6) Employment protections to ensure use of paid family
36 and medical leave does not adversely impact
37 employment; and
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39 BE IT FURTHER RESOLVED that the working group is requested
40 to review independent studies, research, and other information
41 regarding paid family and medical leave; and
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43 BE IT FURTHER RESOLVED that the working group is requested
44 to utilize independent consultants and administrative



1 facilitators, including the Legislative Reference Bureau, as
2 needed to assist in the performance of its duties, including but
3 not limited to the preparation of the report to the Legislature;
4 and
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6 BE IT FURTHER RESOLVED that the working group is requested
7 to submit a report of its findings and recommendations,
8 including any proposed legislation, to the Legislature no later
9 than twenty days prior to the convening of the Regular Session
10 of 2026; and
11

12 BE IT FURTHER RESOLVED that certified copies of this
13 Concurrent Resolution be transmitted to the Governor, President
14 of the Senate, Speaker of the House of Representatives, Chair of
15 the Senate Standing Committee on Labor and Technology, Chair of
16 the House of Representatives Standing Committee on Labor,
17 Director of the Legislative Reference Bureau, Director of Labor
18 and Industrial Relations, and Director of Human Resources
19 Development.
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