



**Testimony Before the Senate Commerce and Consumer Protection Committee
In Support of Paid Family & Medical Leave (SF2)
Submitted by Paurvi Bhatt, MPH
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My name is Paurvi Bhatt. I live in Plymouth, Minnesota; was raised in Minnesota, and am here to share my experience as an only child, a working daughter, family caregiver, and as a second-generation Indian American immigrant, who cared for her aging parents until they died. This testimony is dedicated to my parents – Harshad and Rekha Bhatt – proud Minnesotans and first generation Indian American immigrants who came to the US in the early 1960s. Based on our family story, my experience as a family caregiver, and as a leader in healthcare, I urge you today to pass the Paid Family and Medical Leave Act.

My 25-year caregiving journey began in 1998, when my father was suddenly diagnosed with early onset dementia. He was 58. I was 28. A few years later, our situation escalated when my mother's cancer re-emerged, and her cardiac and lung conditions worsened. Our Indian community in Minnesota didn't know how to support dementia, advanced cancer and lung issues at home, nor how elder care gets managed. You see, immigrants in my parents' era did not get to see their own parents grow old in real time. So, before I knew it, I became my parents' caregiver, and they became my dependents. I had to reorganize my career priorities to help our family face our new reality.

Years later, after my father died, my mom and I lived together until she passed away last year. I worked remotely for over two years, struggling to care for mom while we sheltered in place due to the pandemic. Finding vaccinated, masked, and paid home health workers to help me was difficult. I finally had no choice but to take a long term leave of absence.

These decisions to prioritize care come with significant tradeoffs. With no siblings or partner, I struggled to protect my own income, health insurance, and retirement savings. I cobbled together limited time and flexibility to keep my career afloat while translating doctor calls, navigating business travel, clearing up family confusion, and making critical financial decisions.

Many of my employers were compassionate, but they did not know how to support me. For years, I managed our situation across cultures and languages, and a rubrics cube of benefit plans and time off policies. Early in my career, when I was pressured to prioritize work over family, I would have to remind my managers that FMLA existed to protect my job. Later in my career, I received greater support from companies who knew caregiving was part of my story. I know this flexibility is not given to many caregivers in the public and private sector who work. That is why I am here today.

I'm sure there is a version of my story happening in your family today. Each of us knows the selfless mother, daughter, sister, niece, or cousin who made the sacrifice to care for a loved one. I am here to remind us that she does it at a cost. Women, particularly women of color, assume family care responsibilities so quickly, and so often, without support. When we step into care, we step out of the workforce, without pay, and deliver care without reimbursement. Family caregivers are the backbone of our care system – a system that cannot continue to rest on each family figuring out care on their own, without help. FMLA alone is not enough to keep families strong while they face these challenges.

Minnesota leads the way with world-class health systems, incredible global companies, and the largest healthcare payers in the world. It's crucial that we join the world and provide paid family and medical leave for public and private sector workers. I urge you to pass Paid Family and Medical Leave. Our diverse tapestry of Minnesotans who care for their loved ones are counting on you.