

Substance Use Disorders and the Impact of Paid Leave by State

OCTOBER 2021

National paid leave would improve the health and economic security of the more than 20 million people in the United States experiencing a substance use disorder (SUD) – three in four of whom are active participants in the labor force.¹ The following charts highlight the impact of substance use disorders and the transformative potential of paid family and medical leave in every state.

View the full issue brief, [Universal Paid Leave: A Pathway to Treating Substance Use Disorder](#), and accompanying [fact sheet](#).

Substance Use Disorders & Paid Leave Access/Impact by State

State	Number of SUD-Induced Causes of Deaths in 2019 ²	Percent growth in SUD-induced deaths over 20 years (1999-2019) ³	Percent of working people for whom even unpaid FMLA leave is inaccessible ⁴	Percent decrease in the number of working families facing economic insecurity when they need to take leave if a national paid family and medical leave program were established. ⁵
Alabama	5,368	629.3%	60%	77%*
Alaska	1,229	380.1%	65%	81%
Arizona	11,888	614%	63%	81%
Arkansas	4,555	952%	63%	79%
California	18,903	68.4%	63%	Excluded [†]
Colorado	9,003	300.5%	62%	83%
Connecticut	4,581	456.6%	59%	83%
Delaware	1,923	718.3%	54%	82%
District of Columbia	785	296.5%	53%	Excluded
Florida	29,880	728.4%	63%	79%
Georgia	10,977	722.9%	59%	79%
Hawai'i	1,616	696.1%	56%	82%
Idaho	3,302	1323.3%	67%	77%

* Ex: In Alabama, the number of working families who face economic insecurity when they need to take leave would decrease by 77 percent through the passage of a national paid family and medical leave program.

[†] Excluded states [already have paid family and medical leave programs](#).

Illinois	15,633	480.7%	59%	83%
Indiana	13,332	1190.6%	62%	82%
Iowa	6,590	1199.8%	61%	81%
Kansas	5,657	1042.8%	62%	78%
Kentucky	11,346	1166.3%	62%	78%
Louisiana	7,929	669.8%	63%	82%
Maine	3,777	764.3%	65%	79%
Maryland	8,343	455.5%	56%	85%
Massachusetts	9,270	671.9%	58%	86%
Michigan	19,621	794.3%	62%	82%
Minnesota	10,266	678.9%	59%	82%
Mississippi	3,174	524.8%	64%	76%
Missouri	12,428	814.5%	60%	78%
Montana	2,538	769.2%	70%	79%
Nebraska	3,215	1381.6%	62%	79%
Nevada	5,009	639.9%	60%	80%
New Hampshire	2,814	725.2%	59%	83%
New Jersey	12,105	592.1%	58%	Excluded
New Mexico	4,071	401.4%	66%	76%
New York	23,550	507.3%	59%	Excluded
North Carolina	17,299	546.2%	61%	80%
North Dakota	1,519	106.9%	64%	78%
Ohio	24,795	903%	61%	82%
Oklahoma	5,611	610.3%	64%	77%
Oregon	9,664	779.3%	66%	82%
Pennsylvania	19,877	712.6%	60%	83%
Rhode Island	1,966	577.9%	59%	Excluded
South Carolina	7,329	566.3%	62%	79%
South Dakota	1,899	883.9%	66%	78%
Tennessee	16,318	1207.5%	63%	79%
Texas	33,068	560.6%	61%	79%
Utah	3,050	563%	63%	79%
Vermont	1,551	812.4%	65%	83%
Virginia	10,102	665.3%	55%	83%
Washington	13,636	623.4%	61%	Excluded
West Virginia	4,506	879.6%	59%	76%
Wisconsin	11,185	756.4%	61%	81%
Wyoming	1,306	677.4%	64%	82%

Frontline Workers Are Disproportionately at Risk

Essential workers are more than twice as likely to start or increase substance use than non-essential workers (25 percent vs 11 percent),⁶ but less likely to have access to paid or unpaid leave when it matters most. This leaves more than 31 million workers in the United States vulnerable to financial hardship.⁷

Frontline Workers by State

State	Number of people in frontline industries in that state ⁸	Percent out of all working people who are in frontline industries in that state ⁹
Alabama	437,033	20%
Alaska	71,289	21%
Arizona	616,303	19%
Arkansas	304,961	23%
California	3,457,447	18%
Colorado	499,474	16%
Connecticut	390,239	21%
Delaware	100,584	22%
District of Columbia	47,354	12%
Florida	1,958,574	20%
Georgia	915,471	18%
Hawai'i	122,936	18%
Idaho	155,976	18%
Illinois	1,320,714	31%
Indiana	648,849	20%
Iowa	352,649	22%
Kansas	295,993	20%
Kentucky	422,108	21%
Louisiana	438,113	21%
Maine	160,503	23%
Maryland	619,013	20%
Massachusetts	796,363	22%
Michigan	960,879	20%
Minnesota	645,727	21%
Mississippi	281,895	23%
Missouri	645,170	22%
Montana	103,557	20%
Nebraska	222,060	22%
Nevada	212,551	14%
New Hampshire	153,691	21%
New Jersey	927,090	21%
New Mexico	179,373	20%
New York	2,183,418	23%
North Carolina	975,372	20%
North Dakota	87,218	21%

Ohio	1,251,448	22%
Oklahoma	344,815	19%
Oregon	395,198	19%
Pennsylvania	1,474,102	23%
Rhode Island	122,341	22%
South Carolina	456,072	19%
South Dakota	97,422	22%
Tennessee	676,879	21%
Texas	2,498,417	18%
Utah	252,600	16%
Vermont	72,635	22%
Virginia	760,114	18%
Washington	686,291	18%
West Virginia	185,810	25%
Wisconsin	633,296	21%
Wyoming	55,711	20%

¹ SAMHSA defines substance use disorder as impairment caused by the recurrent use of alcohol or other drugs (or both), including health problems, disability, and failure to meet major responsibilities at work, school, or home. Substance Abuse and Mental Health Services Administration (2020, September) Key Substance Use and Mental Health Indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (page 35). Retrieved 14 October 2021, from SAMHSA website: <https://www.samhsa.gov/data/sites/default/files/reports/rpt29393/2019NSDUHFRPDFWHTML/2019NSDUHFR1PDFW090120.pdf>; Goplerud, E., Hodge, S., and Benham, T. (2017, November) A Substance Use Cost Calculator for US Employers With an Emphasis on Prescription Pain Medication Misuse. *Journal of Occupational and Environmental Medicine*, 59(11), 1063-1071. doi: 10.1097/JOM.0000000000001157

² Centers for Disease Control and Prevention, National Center for Health Statistics. (2020). Multiple Cause of Death 1999-2019 on CDC WONDER Online Database. Retrieved 14 October 2021 from <http://wonder.cdc.gov/mcd-icd10.html>. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Figure was calculated by querying for deaths by state and then year, and then filtered for drug and alcohol induced deaths as a multiple cause of death.

³ U.S. Centers for Disease Control and Prevention, National Center for Health Statistics. (2020, December). Multiple Cause of Death 1999-2019 on CDC WONDER Online Database. Retrieved 14 October 2021 from the Centers for Disease Control and Prevention website: <http://wonder.cdc.gov/mcd-icd10.html>; Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Derived by grouping results first by MCD Drug/Alcohol Induced Causes and then by year.

⁴ diversitydatakids.org. (2020). Working adults who are eligible and can afford FMLA unpaid leave (percent) by race/ethnicity. Retrieved 14 October 2021 from Brandeis University, The Heller School, Institute for Child, Youth and Family Policy website https://data.diversitydatakids.org/dataset/fmla_a_eligaff_re_p-working-adults-who-are-eligible-and-can-afford-fmla-unpaid-leave--percent--by-ra

⁵ diversitydatakids.org. (2020). Working adults living in families under 200% FPL before and after wage loss due to paid or unpaid FML (percent) by parent status. Retrieved 14 October 2021 from Brandeis University, The Heller School, Institute for Child, Youth and Family Policy website: https://data.diversitydatakids.org/dataset/pfml_pov_par_p-working-adults-living-in-families-under-200--fpl-before-and-after-wage-loss-due-to-pa (Unpublished calculation by the National Partnership for Women & Families)

⁶ Czeister, M.E., Lane, R.I., Petrosky, E. et al. (2020). Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic – United States, survey conducted June 24-30 2020. *Morbidity and Mortality Weekly Report*, 69, 1049-1057. [dx.doi.org/10.15585/mmwr.mm6932a1](https://doi.org/10.15585/mmwr.mm6932a1); Panchal, N., Kamal, R., Cox, C., and Garfield, R. (2021, February) The Implications of COVID-19 for Mental Health and Substance Use. Retrieved 14 October 2021 from the Kaiser Family Foundation website:

https://www.kff.org/health-reform/issue-brief/the-implications-of-covid-19-for-mental-health-and-substanceuse/?utm_campaign=KFF-2019-The-Latest&utm_source=hs_email&utm_medium=email&_hsenc=p2ANqtz8BsALjWqWaa1MX6RHNMMf9qXJLgg5Twlrn5vRRNGJluhHWlxI-SpnRG8bVSP5FZROfq3N

⁷ Rho, H. J., Brown, H., Fremstad, S. (2020, April). A Basic Demographic Profile of Workers in Frontline Industries. Retrieved 14 October 2021 from the Center for Economic Policy Research website: <https://cepr.net/a-basic-demographic-profile-of-workers-infrontline-industries/>

⁸ Ibid

⁹ Ibid; U.S. Census Bureau (2019). *American Community Survey 1-Year Estimates 2019, Table DP03: Selected Economic Characteristics, Civilian employed population 16 years and over*. Retrieved 14 October 2021, from <https://data.census.gov/cedsci/table?q=dp03&g=0100000US%240400000&tid=ACSDP1Y2019.DP03&hidePreview=true&moe=false> (Calculation used 2019 American Community Survey results as 2020 American Community Survey results were not released by the Census Bureau due to the impacts of COVID-19 on collected data)

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at NationalPartnership.org.

© 2021 National Partnership for Women & Families. All rights reserved.