Big Ideas

Social Determinants of Addiction: Employment

Employment can provide much more than economic stability; for many individuals, it provides identity, life structure, routine, self-efficacy, and social connection. As such, employment can enhance and support sustained recovery from substance use disorder (SUD), and employment support is considered an evidence-based practice by the Substance Abuse and Mental Health Services Administration (SAMHSA; SAMHSA, 2021a). Research shows that gainful employment is considered a priority for individuals with SUD and for individuals in recovery (Dong et al., 2018; Laudet & White, 2010).

In 2020, the National Institute for Occupational Safety and Health (NIOSH) estimated that 27 million employed adults either have SUD or are in recovery from SUD (NIOSH, 2020). However, legal and other policy barriers can make finding and maintaining employment difficult for people with SUD. These barriers include stringent treatment requirements, such as prior authorization and face-to-face daily dosing of methadone at a clinic, as well as collateral consequences associated with criminal records. Collateral consequences may include difficulties obtaining professional licenses or consequences that follow an individual beyond the time of arrest or conviction (Umez & Pirius, 2018).

Legal Protections Afforded to Individuals With SUD and Their Limitations

Although legal protections are afforded to individuals with SUD, these protections are not always a reliable means of protection against employment discrimination. Title I of the Americans with Disabilities Act (ADA) provides protection to qualified employees with a disability, including individuals with a diagnosis of SUD. The ADA does not afford protections to people who use illegal drugs (U.S. Department of Justice [DOJ], Civil Rights Division, 2022). Although cannabis remains an illegal drug under federal law, some states have passed laws prohibiting discrimination against employees or applicants who use cannabis (Hentze, 2021). ADA eligibility may also be lost if a person in recovery experiences a return to use (Aoun & Appelbaum, 2019), which can be part of a person's recovery process (Volkow, 2022). These paradoxical employment protections under the ADA may leave employees with SUD vulnerable to workplace discrimination (Aoun & Appelbaum, 2019) and affect their recovery (SAMHSA, 2021a).

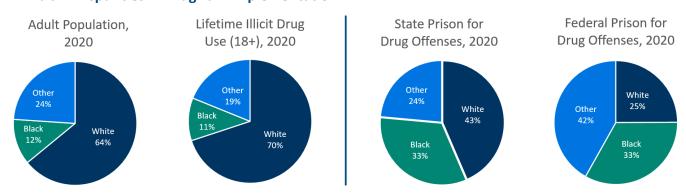
Recently issued guidance from the DOJ clarifies that employees receiving medications for opioid use disorder (MOUD) "may not be denied, or fired from, a job for this legal use of medication" (DOJ, Civil Rights Division, 2022). This new guidance signals the DOJ's intent to clarify that individuals receiving medications to treat their opioid use disorder are protected from discrimination under the ADA.

However, MOUD, the gold standard treatment for opioid use disorder (Leshner & Mancher, 2019), remains out of reach for too many individuals. For instance, Physician Health Programs, state-level initiatives connecting physicians with SUD to treatment and employment support, often deny physicians access to medications to treat opioid use disorder (Beletsky et al., 2019; Merlo et al., 2022) despite a lack of evidence that MOUD negatively impacts functional or occupational outcomes (Maglione et al., 2020). Blanket policies banning healthcare professionals from using medications to treat their opioid use disorder exemplify the stigma that employees seeking SUD treatment may face despite federal protections against discrimination (Beletsky et al., 2019; DOJ, 2022).

Identifying and Eliminating the Collateral Consequences of Punitive Drug Laws That Reduce Employment

National estimates indicate that 22% of people with SUD have a history of incarceration and more than half of those people incarcerated in jails or state prisons meet the criteria for drug dependence or SUD (Bronson et al., 2017; Tsai & Gu, 2019). In 2020, nearly 250,000 people were held in state and federal prisons for drug-related violations (Carson, 2021). Disparities in drug law implementation disproportionately impact Black people who, despite similar rates of drug use (SAMHSA, 2021b), are incarcerated in state and federal prisons for drug offenses at higher rates than are white people (Carson, 2021; Latimore, 2020). Subsequently, their criminal histories create a significant structural barrier to future employment, which in turn can affect their livelihood and prospects for long-term recovery (Dong et al., 2018; Latimore, 2020; Sahker et al., 2019; SAMHSA, 2021a).

Exhibit 1. Disparities in Drug Law Implementation



SAMHSA, 2020; U.S. Census Bureau, 2022; DOJ, Office of Justice Programs, Bureau of Justice Statistics, 2020

Due in part to challenges associated with re-entry following incarceration, more than half of individuals who have been incarcerated remain unemployed 4 years after release from incarceration (Wang & Bertram, 2022). Reducing barriers through education on employee rights (Legal Action Center, 2022)

and expanding legal opportunities to seal and expunge records (Legal Action Center, n.d.) can improve employment outcomes for people with arrest or conviction records (Wang & Bertram, 2022). These policies are especially important for individuals with SUD who also have histories of criminal legal involvement because stigma and other SUD-related challenges may compound employment barriers.

Sustaining Recovery Through Employment and Support Services

The barriers facing people with SUD also extend to maintaining employment. For example, daily trips to an opioid treatment program can interfere with employment for individuals in the early stage of methadone treatment (Richardson et al., 2012).

Workplace policies can be put in place to support employees at any stage of their journey with SUD, to include primary prevention as well as treatment and recovery support (NIOSH, 2020; SAMHSA, 2021a). Of note, not everyone who uses drugs has SUD. Primary prevention policies include recognizing and alleviating physical and psychosocial risk factors in the workplace that can contribute to the development of SUD (Le & Rosen, 2021). For employees with SUD, supportive policies include providing employees with time off for treatment, treatment benefits within employer-sponsored health insurance plans, and employee assistance programs (Boston Medical Center, Grayken Center for Addiction, n.d.; NIOSH, 2020).

Measuring What Matters

Recovery capital is defined as resources to support a person in their recovery (Cloud & Granfield, 2008). These resources can include internal factors such as self-esteem, self-efficacy, and motivation to change. They also include external resources such as safe and stable housing, education, training, employment, and social supports (NIOSH, 2020). Employment has emerged as a predictor of positive outcomes for people with SUD. These outcomes include lower rates of return to drug use, quality of life improvements, and less criminal activity (Sahker et al., 2019; SAMHSA, 2021a). Rather than viewing the negative impact SUD has on employment outcomes, measuring employment as recovery capital is an opportunity to examine the positive impact of employment on SUD outcomes (Sahker et al., 2019).

For people with opioid use disorder, access to MOUD is correlated with high levels of recovery capital (Parlier-Ahmad et al., 2021). In one example, Community Medical Services, an MOUD and outpatient treatment provider, saw a 49% increase in employment among participants in their program after 6 months in treatment (Community Medical Services, 2020).

Strategies for Employment as a Social Determinant of Addiction

Recovery Friendly Workplaces. Workplaces can provide opportunities to support employees who are in recovery. Recovery-oriented workplace policies support employees across the spectrum of prevention, treatment, and recovery (NIOSH, 2020; SAMHSA, 2021a). Elements include support within workplace culture and policies, reasonable accommodations, peer support, second-chance employment, and reduction of employment barriers to treatment (NIOSH, 2020; SAMHSA, 2021a). Recent state-led initiatives support and encourage employers to hire people in recovery and provide employers with the resources necessary to invest in the success of employees in recovery. These initiatives also provide opportunities for sharing best practices with future employers and connecting prospective employees with recovery friendly employers (Kentucky Chamber of Commerce, n.d.; Recovery Friendly Workplace, n.d.; SAMHSA, 2021a). As of 2021, six states have published Recovery Friendly Workplace toolkits that encompass these strategies and offer lessons for practice (Imboden et al., 2021).

Supported Employment. Supported employment programs offer intensive, individualized support for people who have experienced difficulty obtaining and/or maintaining employment because of a disability (Wehman, 2012). Best-practice models, such as individualized placement and support (IPS), connect people with competitive jobs and provide ongoing person-centered support. IPS has shown positive employment and recovery outcomes for individuals with SUD, dual disorders, histories of housing instability, and criminal legal involvement (SAMHSA, 2021a). A national community of practice has facilitated adoption of IPS in more than half the states (Bond et al., 2021). Supported employment services can be covered by Medicaid through home and community based services (Medicaid.gov, n.d.).

Federal and State Incentives. Tax credit incentives are available for employers who hire individuals facing barriers to employment, including people with felony convictions, through the Work Opportunity Tax Credit (WOTC) (U.S. Department of Labor, n.d.). Small businesses that hire individuals with disabilities may also be eligible for the Disabled Access Credit for expenses the businesses incur (Internal Revenue Service, 2021). Federal bonds are also available through the U.S. Department of Labor for individuals who may have difficulty finding employment due to incarceration or SUD (The Federal Bonding Program, n.d.). Many states have similar incentives for employers who hire individuals with disabilities (Employer Assistance and Resource Network on Disability Inclusion, n.d.). An innovative program in New York state extends this tax credit to employers hiring individuals in recovery from SUD (Office of Addiction Services and Supports, n.d.).

Ban the Box Laws. Federal and state "ban the box" initiatives seek to provide fair access to employment to individuals with criminal histories, including individuals with SUD or drug convictions. This initiative removes questions related to conviction and arrest from job applications, as well as delays background checks (Hartman, 2021). Federally, the Fair Chance to Compete for Jobs Act, part of the National Defense Authorization Act of 2020, prohibits federal agencies and contractors from

making criminal history inquiries prior to an employment offer (S. 1790). However, some research suggests that ban the box laws do not address the employer's stigma against people who they suspect may have criminal histories, resulting in hiring discrimination against young Black and Hispanic men (Doleac & Hansen, 2020). Policies should be enacted to combat the stigma of having a criminal record and increase employment opportunities for formerly incarcerated individuals, including people with SUD or drug convictions. Doleac (2016) and Hunt and colleagues (2018) provide further recommendations on how to encourage employers to hire people with criminal records.

Workplace Primary Prevention. Investing in primary prevention workplace policies can reduce the risk of employees developing SUD from work-related psychosocial or physical injuries and may be an effective cost-savings strategy for employers (Le & Rosen, 2021). Primary prevention policies include ergonomic strategies, safe patient handling programs, reform of stringent working conditions (mandatory overtime and non-traditional work shifts), and reduction of workplace violence (Le & Rosen, 2021). A gap exists in research and federal funding toward primary prevention in the workplace (Le & Rosen, 2021). As a result of the COVID-19 pandemic, some states, including New York, have implemented legislative protections for essential workers that serve to mitigate work hazards and address upstream causes of SUD (Le & Rosen, 2021).

Conclusion

Employment can play an important role in an individual's long-term recovery, and employers can provide supportive workplace environments for people with SUD. Tax policies, protections under the ADA, and supportive environments can help both employees and employers create successful workplaces.

References

- Aoun, E. G., & Appelbaum, P. S. (2019). Ten years after the ADA Amendment Act (2008): The relationship between ADA employment discrimination and substance use disorders. Psychiatric Services 70(7), 596–603. https://doi.org/10.1176/appi.ps.201800574
- Beletsky, L., Wakeman, S. E., & Fiscella, K. (2019). Practicing what we Preach—ending physician health program bans on opioid-agonist therapy. The New England Journal of Medicine, 381(9), 796–798. https://doi.org/10.1056/NEJMp1907875
- Bond, G. R., Johnson-Kwochka, A. V., Pogue, J. A., Langfitt Reese, S., Becker, D. R., & Drake, R. E. (2021). A tale of four states: Factors influencing the statewide adoption of IPS. Administration and Policy in Mental Health and Mental Health Services Research, 48(3), 528-538. https://doi.org/10.1007/s10488-020-01087-2
- Boston Medical Center, Grayken Center for Addiction. (n.d.). Developing policies and practices. Accessed April 13, 2022. https://www.bmc.org/addiction/library/developing-policies-practices
- Bronson, J., Stroop, J., Zimmer, S., & Berzofsky, M. (2017, June). Drug use, dependence, and abuse among state prisoners and jail inmates, 2007–2009. U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. https://bjs.ojp.gov/content/pub/pdf/dudaspji0709.pdf
- Carson, A. E. (2021, December). Prisoners in 2020—statistical tables. U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. https://bjs.ojp.gov/library/publications/prisoners-2020-statistical-tables
- Cloud, W., & Granfield, R. (2008). Conceptualizing recovery capital: Expansion of a theoretical construct. Substance Use & Misuse, 43(12-13), 1971-1986. https://doi.org/10.1080/10826080802289762
- Community Medical Services. (2020, May). Community Medical Services quarterly report. Accessed April 14, 2022. https://communitymedicalservices.org/wp-content/uploads/2020/05/CMS-QRTRLY-REPORT.pdf
- Doleac, J. L. (2016). *Increasing employment for individuals with criminal records.* The Hamilton Project. https://www.hamiltonproject.org/assets/files/increasing employment individuals criminal re cords.PDF
- Doleac, J. L., & Hansen, B. (2020). The unintended consequences of "ban the box": Statistical discrimination and employment outcomes when criminal histories are hidden. Journal of Labor Economics, 38(2), 321–374. https://doi.org/10.1086/705880
- Dong, K. R., Must, A., Tang, A. M., Beckwith, C. G., & Stopka, T. J. (2018). Competing priorities that rival health in adults on probation in Rhode Island: Substance use recovery, employment, housing, and food intake. BMC Public Health, 18(1), 289. https://doi.org/10.1186/s12889-018-5201-7
- Employer Assistance and Resource Network on Disability Inclusion. (n.d.). Employer financial incentives. Accessed April 13, 2022. https://askearn.org/page/employer-financial-incentives

- The Federal Bonding Program. (n.d.). The Federal Bonding Program. https://bonds4jobs.com/
- Hartman, M. (2021, June). Ban the box. National Conference of State Legislatures. https://www.ncsl.org/research/civil-and-criminal-justice/ban-the-box.aspx
- Hentze, I. (2021, November 1). Cannabis & employment laws. National Conference of State Legislatures. https://www.ncsl.org/research/labor-and-employment/cannabis-employment-laws.aspx
- Hunt, P., Smart, R., Jonsson, L., & & Tsang, F. (2018). Breaking down barriers: Experiments into policies that might incentivize employers to hire ex-offenders. RAND Corporation. https://www.rand.org/content/dam/rand/pubs/research_reports/RR2100/RR2142/RAND_RR2 142.pdf
- Imboden, R., Frey, J. J., Bazell, A. T., Mosby, A., Ware, O. D., Mitchell, C. S., & Cloeren, M. (2021). Workplace support for employees in recovery from opioid use: Stakeholder perspectives. NEW SOLUTIONS: A Journal of Environmental and Occupational Health Policy, 31(3), 340–349. https://doi.org/10.1177/10482911211043522
- Internal Revenue Service. (2021, June 26). Tax benefits for businesses who have employees with disabilities. https://www.irs.gov/businesses/small-businesses-self-employed/tax-benefits-forbusinesses-who-have-employees-with-disabilities
- Kentucky Chamber of Commerce. (n.d.). Workforce recovery program. Accessed April 13, 2022. https://www.kychamber.com/workforcerecovery
- Laudet, A. B., & White, W. (2010). What are your priorities right now? Identifying service needs across recovery stages to inform service development. Journal of Substance Abuse Treatment, 38(1), 51–59. https://doi.org/10.1016/j.jsat.2009.06.003
- Latimore, A., (2020, September 10). Ending the war on drugs. American Scientist. https://www.americanscientist.org/blog/macroscope/ending-the-war-on-drugs
- Le, A. B., & Rosen, J. D. (2021). It is time to implement primary prevention in the workplace to ameliorate the ongoing U.S. opioid epidemic. NEW SOLUTIONS: A Journal of Environmental and Occupational Health Policy, 31(3), 210–218. https://doi.org/10.1177/10482911211039880
- Legal Action Center. (n.d.). Records sealing and expungement. Accessed April 13, 2022. https://www.lac.org/work/priorities/restoring-opportunities/records-sealing-and-expungement
- Legal Action Center. (2022, February). Lowering barriers for jobseekers with arrest or conviction records. https://www.lac.org/resource/lowering-barriers
- Leshner, A. I., & Mancher, M. (Eds.). (2019). Medications for opioid use disorder save lives. National Academies of Sciences, Engineering, and Medicine; The National Academies Press. https://doi.org/10.17226/25310
- Maglione, M. A., Laura, R., Christine, C., Azhar, G. S., Nima, S., Mimi, S., Hernandez, E., Shanman, R. M., & Susanne, H. (2020). Effects of medication-assisted treatment (MAT) for opioid use disorder on functional outcomes: A systematic review. Rand Health Quarterly, 8(4), RR-2108-OSD.

- Medicaid.gov. (n.d.). Employment & HCBS. Accessed April 13, 2022. https://www.medicaid.gov/medicaid/long-term-services-supports/employmentinitiatives/employment-hcbs/index.html
- Merlo, L. J., Campbell, M. D., Shea, C., White, W., Skipper, G. E., Sutton, J. A., & DuPont, R. L. (2022). Essential components of physician health program monitoring for substance use disorder: A survey of participants 5 years post successful program completion. The American Journal on Addictions, 31(2), 115–122. https://doi.org/10.1111/ajad.13257
- The National Institute for Occupational Safety and Health. (2020, July 27). Workplace Supported Recovery Program. Centers for Disease Control and Prevention. https://www.cdc.gov/niosh/topics/opioids/wsrp/default.html
- Office of Addiction Services and Supports. (n.d.). Recovery Friendly Workplace Tax Credit. https://oasas.ny.gov/recovery-friendly-workplace-tax-credit
- Parlier-Ahmad, A. B., Terplan, M., Svikis, D. S., Ellis, L., & Martin, C. E. (2021). Recovery capital among people receiving treatment for opioid use disorder with buprenorphine. Harm Reduction Journal, 18(1), 1–103. https://doi.org/10.1186/s12954-021-00553-w
- Recovery Friendly Workplace. (n.d.). The Recovery Friendly Workplace Initiative. Accessed April 13, 2022. https://www.recoveryfriendlyworkplace.com/
- Richardson, L., Wood, E., Montaner, J., & Kerr, T. (2012). Addiction treatment-related employment barriers: The impact of methadone maintenance. Journal of Substance Abuse Treatment, 43(3), 276–284. https://doi.org/10.1016/j.jsat.2011.12.008
- S. 1790–116th Congress (2019-2020): National Defense Authorization Act for Fiscal Year 2020. (2019, December). https://docs.house.gov/billsthisweek/20191209/CRPT-116hrpt333.pdf
- Sahker, E., Ali, S. R., & Arndt, S. (2019). Employment recovery capital in the treatment of substance use disorders: Six-month follow-up observations. Drug and Alcohol Dependence, 205, 107624. https://doi.org/10.1016/j.drugalcdep.2019.107624
- Substance Abuse and Mental Health Services Administration. (2020). 2020 NSDUH detailed tables. https://www.samhsa.gov/data/report/2020-nsduh-detailed-tables
- Substance Abuse and Mental Health Services Administration. (2021a, March). Substance use disorders recovery with a focus on employment. https://store.samhsa.gov/product/Substance-Use-Disorders-Recovery-with-a-Focus-on-Employment/PEP21-PL-Guide-6
- Substance Abuse and Mental Health Services Administration. (2021b, October 23). Racial/ethnic differences in substance use, substance use disorders, and substance use treatment utilization among people aged 12 or older (2015-2019). https://www.samhsa.gov/data/report/racialethnic-differences-substance-use
- Tsai, J., & Gu, X. (2019). Utilization of addiction treatment among U.S. adults with history of incarceration and substance use disorders. Addiction Science & Clinical Practice, 14(1), 9. https://doi.org/10.1186/s13722-019-0138-4

- Umez, C., & Pirius, R. (2018, July 17). Barriers to work: Improving employment in licensed occupation for individuals with criminal records. National Conference of State Legislatures.

 https://www.ncsl.org/research/labor-and-employment/barriers-to-work-individuals-with-criminal-records.aspx
- U.S. Census Bureau. (2022, March 10). *National demographic analysis tables: 2020*. https://www.census.gov/data/tables/2020/demo/popest/2020-demographic-analysis-tables.html
- U.S. Department of Justice. (2022, March 25). *Justice Department finds that Indiana State Nursing Board discriminates against people with opioid use disorder.* U.S. Attorney's Office Southern District of Indiana. https://www.justice.gov/usao-sdin/pr/justice-department-finds-indiana-state-nursing-board-discriminates-against-people
- U.S. Department of Justice, Civil Rights Division. (2022, April 5). *The Americans with Disabilities Act and the opioid crisis: Combating discrimination against people in treatment or recovery.*https://www.ada.gov/opioid guidance.pdf
- U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. (2021). *Prisoners in 2020—statistical tables*. https://bjs.ojp.gov/content/pub/pdf/p20st.pdf
- U.S. Department of Labor. (n.d.). *Tax incentives for employers*. https://www.dol.gov/agencies/odep/program-areas/employers/tax-incentives-for-employers
- Volkow, N. (2022, January 4). *Making addiction treatment more realistic and pragmatic: The perfect should not be the enemy of the good.* National Institute on Drug Abuse.

 https://nida.nih.gov/about-nida/noras-blog/2022/01/making-addiction-treatment-more-realistic-pragmatic-perfect-should-not-be-enemy-good
- Wang, L., & Bertram, W. (2022, February 8). *New data on formerly incarcerated people's employment reveal labor marker injustices*. Prison Policy Initiative. https://www.prisonpolicy.org/blog/2022/02/08/employment/
- Wehman, P. (2012). Supported employment: What is it? *Journal of Vocational Rehabilitation, 37*(3), 139–142. https://content.iospress.com/articles/journal-of-vocational-rehabilitation/jvr607

Acknowledgement: This brief was developed in collaboration with the O'Neil Institute for National and Global Health Law.



American Institutes for Research® 1400 Crystal Drive, 10th Floor Arlington, VA 22202-3289 +1.202.403.5000 | https://www.air.org/centers/air-cares