



Workers' Access to Paid Sick Days in the States

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Millions of workers in the United States cannot take paid time away from work to recover or seek preventive care when they are sick. Instead, these people often have to risk their jobs or pay when inevitable short-term health and caregiving needs arise. Estimates of the number of workers lacking paid sick days range from 43 to 48 million.¹

Analysis of 2012-2013 data conducted by the Institute for Women's Policy Research (IWPR), in collaboration with the National Partnership for Women & Families, finds that across the country the percentage of workers without paid sick days varies widely from a high of 49.7 percent in New Mexico to a low of 38.9 percent in New Hampshire.

Some cities and states have adopted laws that give workers the right to earn paid sick days. Since 2006, paid sick days laws have been or will soon be in place in California, Connecticut, Massachusetts and the District of Columbia and in 17 cities across the country (Table 1).

Table 1: State and Local Laws Providing Paid Sick Days, 2015

Location	Effective On
San Francisco, Calif.	February 5, 2007
District of Columbia	May 13, 2008
Connecticut	January 1, 2012
Seattle, Wash.	September 1, 2012
Portland, Ore.	January 1, 2014
Jersey City, N.J.	January 24, 2014
New York City, N.Y.	April 1, 2014
Newark, N.J.	May 29, 2014
Passaic, N.J.	January 1, 2015
East Orange, N.J.	January 7, 2015
Paterson, N.J.	January 8, 2015
Irvington, N.J.	January 28, 2015
Oakland, Calif.	March 2, 2015
Montclair, N.J.	March 4, 2015
Trenton, N.J.	March 4, 2015
Philadelphia, Pa.	May 13, 2015*
Bloomfield, N.J.	June 30, 2015*
Eugene, Ore.	July 1, 2015*
Massachusetts	July 1, 2015*
California	July 1 2015*
Tacoma, Wash.	February 1, 2016*

* Anticipated implementation date.

These laws, however, do not protect every worker in the geographic areas that they cover² and, even with these advances, millions of workers nationwide do not have critical paid sick days protections. Still, those states are not included in the chart below. Table 2 provides estimates of the number and percentage of private sector workers without paid sick days in the 42 states that have not adopted any state or municipal paid sick days laws.

Table 2. Estimated Paid Sick Days Access Among Private Sector Workers in States Without Paid Sick Days Laws (2013, Based on IWPR Modeling)

State	Number of Private Sector Workers	Workers Without Access to Paid Sick Days	Percent of Workers Without Paid Sick Days
Alabama	1,503,549	671,099	44.6%
Alaska	244,138	106,353	43.6%
Arizona	2,077,220	934,133	45.0%
Arkansas	916,768	418,651	45.7%
Colorado	1,914,437	816,067	42.6%
Delaware	327,711	131,128	40.0%
Florida	6,395,740	3,009,437	47.1%
Georgia	3,246,180	1,433,384	44.2%
Hawaii	441,024	184,237	41.8%
Idaho	507,812	250,438	49.3%
Illinois	4,789,945	2,113,696	44.1%
Indiana	2,398,299	1,132,923	47.2%
Iowa	1,171,885	531,389	45.3%
Kansas	1,030,452	471,717	45.8%
Kentucky	1,425,227	642,164	45.1%
Louisiana	1,499,955	676,281	45.1%
Maine	468,832	198,391	42.3%
Maryland	2,073,631	811,254	39.1%
Michigan	3,458,223	1,612,270	46.6%
Minnesota	2,189,756	947,077	43.3%
Mississippi	873,230	409,904	46.9%
Missouri	2,181,522	1,002,116	45.9%
Montana	312,538	153,008	49.0%
Nebraska	720,466	333,851	46.3%
Nevada	996,378	487,869	49.0%
New Hampshire	519,667	202,223	38.9%
New Mexico	576,382	286,309	49.7%
North Carolina	3,275,755	1,462,772	44.7%
North Dakota	276,645	126,678	45.8%
Ohio	4,235,473	1,943,546	45.9%
Oklahoma	1,263,664	561,360	44.4%
Rhode Island	407,412	169,195	41.5%
South Carolina	1,548,236	719,706	46.5%
South Dakota	300,961	144,906	48.1%
Tennessee	2,189,272	979,907	44.8%
Texas	9,166,597	4,117,023	44.9%
Utah	980,071	445,582	45.5%
Vermont	223,887	90,830	40.6%
Virginia	2,831,315	1,171,183	41.4%
West Virginia	552,116	254,270	46.1%
Wisconsin	2,245,436	1,022,089	45.5%
Wyoming	189,327	82,510	43.6%

Notes: Paid sick days access is determined by employee responses to the question “Do you have paid sick leave on this MAIN job or business?” in the National Health Interview Survey (NHIS). Since some employees may not be aware of their workplace policies, estimates in this table may overestimate the number of workers without access. The NHIS data is used to model worker access to paid sick days at the national level based on industry, occupation, gender, race, income, age, hours worked, immigrant status, education, health insurance status, and Census region of residence. This model is then applied to state-level data from the 2013 1-year American Community Survey (ACS) to determine access in each state. Access rates are for individuals, 18 years of age and older, working in the private sector and living in the state of analysis, regardless of their place of work. Percentages and figures may not match totals due to rounding.

Source: Institute for Women’s Policy Research analysis of the 2012-2013 National Health Interview Survey (NHIS) and the 2013 1-year IPUMS American Community Survey (ACS).

The federal Healthy Families Act would set a national paid sick days standard. For businesses with 15 or more employees, the bill would enable workers to earn up to seven paid sick days per year to recover from their own illnesses, access preventive care, provide care to a sick family member, or attend school meetings related to a child's health condition or disability. Workers in businesses with fewer than 15 employees would earn up to seven job-protected *unpaid* sick days each year to be used for the same reasons, unless their employers choose to offer paid sick days. The bill would also allow workers who are victims of domestic violence, stalking or sexual assault to use their paid sick days to recover or seek assistance related to an incident.

Notes

1 The lower-bound estimate of 43 million private sector workers is based on figures reported in the 2013 National Compensation Survey – Benefits by the U.S. Bureau of Labor Statistics (39 percent of 109 million private sector workers lack access to paid sick leave). The upper-bound 48 million estimate is based on statistical modeling conducted by IWPR to determine rates of access by industry, occupation, gender, race, income, etc. from the 2012-2013 National Health Interview Survey, which are then applied to state-level data from the 2013 1-year IPUMS American Community Survey. This estimate is based on employee reports of whether they have paid sick days at their main job and may also reflect workers being unaware of the benefits available to them.

2 For more information on state and municipal laws and their provisions, see "Paid Sick Days Statutes" from the National Partnership for Women & Families at <http://www.nationalpartnership.org/research-library/work-family/psd/paid-sick-days-statutes.pdf> or "Overview of Paid Sick Time Laws in the United States" from A Better Balance at <http://www.abetterbalance.org/web/images/stories/Documents/sickdays/factsheet/PSDchart.pdf>.

This fact sheet was prepared jointly by the Institute for Women's Policy Research and the National Partnership for Women & Families.

*The **Institute for Women's Policy Research (IWPR)** conducts rigorous research and disseminates its findings to address the needs of women, promote public dialogue, and strengthen families, communities, and societies. The Institute's research strives to give voice to the needs of women from diverse ethnic and racial backgrounds across the income spectrum and to ensure that their perspectives enter the public debate on ending discrimination and inequality, improving opportunity, and increasing economic security for women and families. The Institute works with policymakers, scholars, and public interest groups to design, execute, and disseminate research and to build a diverse network of individuals and organizations that conduct and use women-oriented policy research. IWPR's work is supported by foundation grants, government grants and contracts, donations from individuals, and contributions from organizations and corporations. IWPR is a 501(c)(3) tax-exempt organization that also works in affiliation with the women's studies and public policy and public administration programs at The George Washington University. More information is available at www.iwpr.org.*

*The **National Partnership for Women & Families** is a nonprofit, nonpartisan, 501(c)(3) organization dedicated to promoting fairness in the workplace, access to quality health care, and policies that help women and men meet the dual demands of job and family. The National Partnership has fought for every major policy advance that has helped women and families since it was founded in 1971 as the Women's Legal Defense Fund. The organization drafted the Family and Medical Leave Act of 1993 and led the coalition that fought for its enactment. Today, the National Partnership works with advocates, business leaders, researchers and policymakers across the country to win fair and family friendly workplace policies, such as paid sick days, paid family and medical leave, fair pay and protections for pregnant workers. The group convenes broad-based national coalitions pushing for paid sick days and paid leave standards at the federal level. More information is available at www.NationalPartnership.org.*