

5-2016

Effects of Social Issues on Employment Outcomes for Individuals with Disabilities

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EFFECTS OF SOCIAL ISSUES ON EMPLOYMENT OUTCOMES FOR
INDIVIDUALS WITH DISABILITIES

A Dissertation
Presented to
the Graduate School of
Clemson University

In Partial Fulfillment
of the Requirements for the Degree
Doctor of Philosophy
Industrial-Organizational Psychology

by
Theresa Patricia Atkinson
May 2016

Accepted by:
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ABSTRACT

Past legislation, created with the intention of protecting individuals with disabilities (e.g., National Industrial Recovery Act, Fair Labor Standards Act), has, unfortunately, helped pave the way for discriminatory practices in the workplace. Disabled individuals are often deemed too disabled to work, but not disabled enough to receive unemployment-related benefits. In addition to dealing with discriminatory employment practices, disabled individuals must also overcome everyday hurdles (e.g., negative stereotypes, isolation, secondary health issues, lack of rehabilitation services). The overarching goal of the present study was to further investigate the personal feelings and perceptions of disabled individuals, which has often been overlooked in past literature. Results from the present study revealed that certain resources, such as core self-evaluations (CSE), significantly affected participants' happiness. Interestingly, no differences in number of hours worked, income level, or work satisfaction was found between disability types. The present study also found that overall, disabled individuals did not feel that they were entitled to special privileges in the workplace – this result held for participants with both invisible and visible disabilities. Results from the present study may be used to develop skill-building programs for individuals with disabilities (e.g., programs to help build confidence). Additionally, these results should help to counteract negative societal attitudes concerning the use of specific benefits programs, such as Social Security Disability Insurance (SSDI), as participants were not found to have entitled attitudes concerning special privileges.

DEDICATION

I would like to dedicate this dissertation to my family and friends, all of whom have helped me to become the person I am today. An especial thank you to my mom and dad, who have always supported and encouraged me, and helped me when I was most in need of help. Thank you to Robyn, Lori, Katherine, Trey, Rin, Dayna, Christie, Alice, and Janet for making graduate school more enjoyable and for always being a source of comfort. I'm finally free!

ACKNOWLEDGEMENTS

A big thank you to my advisor, Patrick Rosopa, Dr. Mary Anne Taylor, and Dr. Dewayne Moore for helping me throughout graduate school. I couldn't have done this without you all. Thank you, Patrick, for always being kind and understanding. Thank you, Dr. Taylor, for your continued encouragement and belief in me. And thank you, Dr. Moore, for always being willing to talk to me about statistics and for never making me feel stupid.

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CHAPTER ONE

INTRODUCTION

“Disability limits access to education and employment, and leads to economic and social exclusion.”

- Cramm, Nieboer, Finkenflügel, and Lorenzo (2013, p. 20)

The above quote describes what many individuals with disabilities experience on a daily basis, all over the world. Along with having to contend with discrimination from others, disabled individuals have to surmount countless barriers to employment. These barriers include, among others, a lack of education, poor health (Cramm, Nieboer, Finkenflügel, & Lorenzo, 2013), lack of employment specialists (Rebeiro Gruhl, 2012), low employment expectations (Harris, Matthews, Penrose-Wall, Alam, & Jaworski, 2014), lack of training and educational opportunities, decreased mobility, and increased financial hardship (Rosenthal, Hiatt, Anderson, Brooks, Hartman, Wilson, & Fujikawa, 2012).

Research conducted during the last few decades has highlighted the plights that many individuals with disabilities face. In addition to problems with employment, individuals with disabilities may also face difficulties associated with inclusion in the community (both local and national) and pervasive negative societal attitudes (Cramm et al., 2013). In the present paper, the term ‘disability’ is used broadly in order to accommodate the assortment of definitions used in the literature. For example, Schur, Kruse, and Blanck (2005) describe how ‘disability’ may be referred to as a “work limiting impairment or health condition” and as “work limitations or severe functional limitations” (p. 4). Burkhauser and Stapleton (2004) note that the term ‘disability’ is used

to describe individuals who have “a health problem or disability that prevents them from working or limits the kind or amount of work they can do” (p. 187). According to language used in Dimension I of Title I of the Americans with Disabilities Act (ADA) of 1990, individuals must meet three conditions in order to prove ‘class membership’ (Gutman, Koppes, & Vodanovich, 2011). The three conditions individuals must meet in order to be regarded as disabled under the ADA are: (1) individuals must possess “a current physical or mental impairment that substantially limits a major life activity,” (2) individuals must possess “a record (or history) of such impairment,” and (3) individuals must be “regarded as physically or mentally impaired” (Gutman et al., 2011; p. 385 – 386). Based on the similar, but slightly distinct, definitions used to describe the term ‘disability,’ the present paper will simply define disability as any mental, physical, or emotional impairment that interferes with an individual’s ability to work or obtain work. However, it is important to remember that defining what constitutes a ‘disability’ is extremely difficult, as there have been multiple issues raised over the years concerning the ability to prove that an individual is ‘disabled’ (Lee, 2001). Although the use of the term ‘disability’ is common throughout this paper and in other research studies, we must keep in mind that ‘disability’ is a societal-based construct – in other words, individuals with physical or mental *impairments* are often labeled as being ‘disabled’ by society (Wax, 2014). Being labeled as ‘disabled’ increases the likelihood of experiencing discrimination by others, as well as other negative outcomes (Wax, 2014)

The result of ambiguity surrounding the definition of ‘disability’ has, unfortunately, had more acute consequences than many individuals realize. This problem

can best be summarized by the concept of the “Goldilocks Dilemma” – similar to how Goldilocks has trouble finding a chair, bed, or porridge that is “just right” in the story *Goldilocks and the Three Bears*, disabled individuals often have a difficult time proving that they are disabled “just right” in a court of law (Areheart, 2008, p. 209). This problem stems from the fact that many individuals, including judges, have come to define disability with such a narrow definition that most individuals who are, in fact, actually ‘disabled’ do not meet the prerequisites for having a disability. As will be further discussed in a section below, titled *Bottlenecks*, our (Western) society has come to view disability as an individual problem; this has commonly caused judges (as well as others) to hyper-focus on the question “Is this person really disabled?” when presiding over discrimination cases involving Title I of the ADA (Areheart, 2008). This problem becomes even more difficult when examining “visible” vs. “invisible” disabilities (to be discussed in the *Disabilities and Stigmas* section below; Santuzzi, Waltz, Finkelstein, & Rupp, 2014).

It is truly unfortunate that disabled individuals have such a laborious task of proving that they are disabled in the court of law, as this was not the intention of the ADA (Areheart, 2008). As Areheart (2008) explains, decisions regarding the outcome of cases involving disability discrimination are, more often than not, decided based solely on whether or not the plaintiff is really disabled, “thus creat[ing] the absurd result of a person being disabled enough to be fired from a job, but not disabled enough to challenge the firing” (p. 209). It is interesting that focusing on whether or not an individual is actually disabled often leads judges to overlook employers’ motives in disability

discrimination cases; this is not so for other suits involving discrimination based on characteristics such as race or gender. Thus, many disability discrimination cases are thrown out during “summary judgment” because the plaintiff, or disabled individual, does not meet the definition of a disabled individual (Areheart, 2008).

Employment and Disability

Comparing national employment and unemployment rates for disabled and non-disabled individuals may help us to understand the grim employment situation for disabled individuals. Using data from the Bureau of Labor Statistics for 2013 and 2014 (“Employment Status,” 2015), we are presented with a stark contrast between these two groups. In 2013, the unemployment rate for non-disabled individuals was approximately 7.1%. Disabled individuals, on the other hand, possessed an unemployment rate of 13.2%. The same scenario occurred in 2014 (non-disabled individuals: 5.9%; disabled individuals: 12.5%).

Past research tells the same story. Wewiorski and Fabian (2004) report that, among the estimated 4-5 million adults in the United States who have a “severe or persistent” (p. 9) mental illness, only approximately 10-30% of those individuals are employed. Parker Harris, Renko, and Caldwell (2014) note that only roughly half of the estimated 54 million individuals with disabilities currently residing in the United States are working. More recent estimates in South Africa, by Cramm et al. (2013), indicate that the unemployment rate among individuals with disabilities approached 23% in that country. Cramm et al. (2013) also note that, among countries worldwide, the

unemployment rate for individuals with disabilities is 40-60% higher than the unemployment rate for individuals without disabilities.

The prevalence of disabilities also tends to increase with age, with Anderson, Richardson, Fields, and Harootyan (2013) reporting that, in 2010, among individuals over the age of 65, approximately 50% reported having a current disability (vs. ~ 17% of the 21-64 age group). However, it is important to keep in mind that estimates of disability rates and other statistics regarding employment and disability vary according to how disability is defined – reported estimates, even by credible institutions like the U.S. Census Bureau, are most often underestimates (Santuzzi et al., 2014).

In addition to differences in total employment between individuals with disabilities and individuals without disabilities, there appears to be a disparity in income between these two populations. Burkhauser and Stapleton (2004) estimate that in 2000, men with disabilities earned an average income of \$20,572.00. On the other hand, men without disabilities earned an average income of \$39,401.00 in 2000. The same pattern appears among women included in Burkhauser and Stapleton's (2004) report (Burkhauser and Stapleton gathered information from the March Current Population Survey, 1990 – 2001), with women with disabilities earning an average of \$20,762.00 in 2000 and women without disabilities earning \$36,774.00. Based on this information, it is evident that individuals with disabilities not only have to fight issues concerned with gaining employment, but also experience a lack of equality in other work-related areas.

What's more, although there are laws in place to protect disabled individuals in the workplace, such as the ADA of 1990, employers, for the most part, appear unhurried

to increase inclusion of individuals with disabilities in the workplace (Gold, Oire, Fabian, & Wewiorski, 2012). For example, Gold et al. (2012) note that laws meant to protect individuals with disabilities “have not appreciably increased the labor market participation rates of persons with disabilities” (p. 25). It appears that employers often have difficulties providing reasonable accommodations to employees with disabilities. Gold et al. (2012) state that, among the complaints received by the Equal Employment Opportunities Commission (EEOC), approximately 25% of those complaints relate to reasonable accommodation issues.

Issues with employment and adherence to laws meant to protect individuals with disabilities are not unique to the United States – Fevre, Robinson, Lewis, and Jones (2013) summarize past research concerning employment laws in the United Kingdom. They found that managers often dismissed formal policies and practices meant to protect disabled individuals, such as anti-discrimination legislation and organizational policies regarding sickness. Rather, managers seemed to be more interested in other policies not related to disabled individuals, or were not able to carry out formal practices and policies due to lack of money, training, or support (Fevre et al., 2013). This inability/lack of desire to support and implement policies and practices meant to serve those with disabilities has dire consequences – to quote Fevre et al. (2013),

As a result [of not adhering to policies], the ability of employees with disabilities and long term health problems to conform to work discipline was compromised and beliefs about their lack of productive worth were confirmed. (p. 290)

The Present Study and Its Unique Contributions

The purpose of the present study is to provide a review of the disability literature, as well as investigate the impact that variables such as social skills, social support, and core self-evaluations (CSE) may have on employment outcomes and other experiences for those with a disability. This attempt to gain insight into the experiences of disabled individuals is important because, as Fevre et al. (2013) explain, experiences of disabled individuals have not appeared to be a focus of past research – rather, past research has seemed to center more around the number of disabled individuals who are employed and other statistics related to work and employment.

Past research into the perceptions (e.g., Parchomiuk, 2014; Snyder, Carmichael, Blackwell, Cleveland, & Thornton, 2010) and emotions (e.g., Gonzales, Davidoff, Nadal, & Yanos, 2015; Piazza, Charles, Luong, & Almeida, 2015) of individuals with disabilities does exist, but much more research is needed to better understand the experiences of disabled individuals. The present study seeks to add unique contributions to existing literature by (1) delving more deeply into this area by examining variables previously un/under-studied in the disability literature (e.g., core self-evaluations, feelings of entitlement, job search self-efficacy, social skills, and happiness), (2) simultaneously examining how personal characteristics and the environment affect outcomes for individuals with disabilities, (3) examining the effects of social support and social skills on outcomes for a variety of disabilities (studying social skills and social support together is important in and of itself; Duggan & Linehan, 2013), and (4) investigating differences between invisible and visible disabilities, as this is an understudied area in I-O psychology (Wax, 2014) and (6) using Conservation of

Resources Theory (Hobfoll, 1989) to examine how resources affect outcomes for disabled individuals (not many studies have previously examine Conservation of Resources and disability together; e.g., Li, Shaffer, & Bagger, 2015; Taylor, Jason, Shiraishi, Schoeny, & Keller, 2006).

As stated above, a main contribution of the present study relates to its inclusion of social factors, such as perceived social support from family and perceived social skills. Focusing on social aspects of behavior in the present paper is pertinent due to the fact that the workplace is a social environment, where employees are required to interact with others in a culturally approved, appropriate manner – thus, successful integration into the workplace not only requires work-related skills, but also knowledge of the correct, culturally accepted manner in which to socially interact with others (Riches & Green, 2003). Although research studies have already been conducted that examine social skills and how those skills may enable disabled individuals to function in the workplace (e.g., O’Sullivan, Strauser, & Wong, 2012; Phillips, Kaseroff, Fleming, & Huck, 2014) the present study seeks to add to this literature by investigating social issues and how they affect disabled individuals from a somewhat different perspective – this will be accomplished by investigating social skills and social support in relation to Conservation of Resources Theory.

Being employed has numerous benefits for both disabled and non-disabled individuals. Employment not only allows for individuals to be able to provide for themselves and their families financially, but also helps to increase self-efficacy, independence, skill building, and grow social networks (O’Sullivan et al., 2012; Schur,

Kruse, & Blanck, 2005). Given that disabled individuals may be more susceptible to isolation and financial issues, compared to non-disabled individuals (O’Sullivan et al., 2012), additional research is needed to examine disabled individuals’ experiences, opinions, and feelings related to employment, so that we may improve employment situations for disabled individuals – thus decreasing the likelihood they suffer negative effects, such as isolation and financial hardship, from unemployment.

The literature review of the present paper will be divided into several sections; those sections will cover barriers to employment, stigmas against disabilities, social issues associated with disabilities, as well as potential theories that may be used to advance research of disabilities. But first, we will start with a very brief history of the exploitation of disabled individuals.

History of Exploitation

“Often, good intentions go wrong.”
- Bates-Harris (2012, p.39)

The history of discrimination towards those with disabilities may be traced back to the early 1900s, or even the late 1800s. As Bates-Harris (2012) notes, although the actions taken at the turn of the 20th century were meant to be helpful to individuals with disabilities, these actions actually became the basis for discrimination. Indeed, Lee (2001) notes the long history of discrimination associated with disabled individuals, especially in the workplace.

Efforts to help those with disabilities gain employment, such as the Perkins Institute for the Blind, a sheltered workshop, have existed since roughly about the 1840s – the purpose of these sheltered workshops was to provide “protected” jobs to those who

were considered to have a disability of some kind (Bates-Harris, 2012, p. 39). As Bates-Harris (2012) notes, recent studies have confirmed that individuals employed in sheltered workshops earn wages lower than national, standard minimum wages. During the early 1930s, Franklin Roosevelt helped to form legislation targeting employment for those with disabilities – this was part of the National Industrial Recovery Act. This legislation allowed employers to pay very low wages (below the standard minimum wages for other workers) to those with disabilities. These low wages were meant to generate a demand for those with disabilities – in other words, employers would want to hire disabled individuals because the law allowed the employers to pay those individuals low wages (disabled individuals would be “in demand” in the workplace). Additionally, the Fair Labor Standards Act of 1938 (Bates-Harris, 2012) helped to reinforce language and ideas first presented by Franklin Roosevelt, by explicitly allowing employers to pay disabled individuals wages that were below the set minimum wage for non-disabled workers. Unfortunately, these laws created the basis for employment and wage discrimination against individuals with disabilities.

Bates-Harris (2012) notes that it was not until around 1963 that other legislation started the shift towards equality for disabled individuals, both in the workplace and life. The Developmental Disabilities (DD) Assistance and Bill of Rights Act (DD Act) highlighted the need to help disabled individuals gain employment and independence (Bates-Harris, 2012). Although this legislation was meant to provide support for individuals with disabilities, it actually had the opposite effect. Language used in the DD Act allowed a larger group of individuals to be categorized as ‘disabled’ than before,

resulting in those individuals being paid less than minimum wage (Bates-Harris, 2012). Although legislation has been passed since 1963 to support equality in the workplace and other areas to disabled individuals, such as the Rehabilitation Act of 1973, the ADA of 1990, and ADAA of 2008, employment discrimination against individuals with disabilities continues to persist. As Bates-Harris (2012) explains,

The Department of Labor (DOL) Wage and Hour Division is given the authority to issue certificates to employers allowing them to pay less than the prevailing wage if a disability interferes with the productive or earning capacity of a worker on the job. (p. 40)

It is unfortunate that individuals with disabilities continue to deal with discrimination in the workplace. It appears that other areas, in addition to legislation, may need to advance in order to guarantee equality for those with disabilities. One area that needs improvement involves the public perception and opinions surrounding disabilities. Although recent years may have brought about improvements, there still remains a general stigma attached to the term ‘disability.’ These negative perceptions and stigmas have extensive effects on many aspects of our society, including the creation and interpretation of laws and policies. Even the passage of laws meant to protect disabled individuals may not be enough – we, as a society, must also strive to change the fundamental manner in which we view disability.

Bottlenecks

“Equal opportunity is complicated.”
-Areheart and Stein (2015), p. 877

Bottlenecks, a concept from employment law, can be described as laws or policies that are “narrow spaces through which people must pass to reach greater opportunities” (Areheart & Stein, 2015; p. 878). For example, laws prohibiting employers from engaging in credit checks of job applicants have helped to remove bad credit as an obstacle, or bottleneck, to employment for those individuals who have had credit problems in the past (Areheart & Stein, 2015).

The ultimate purpose of laws designed to protect individuals from discrimination is to remove those bottlenecks, or policies, laws, and other practices, that reduce or eliminate present and future opportunities, thereby increasing an individual’s chances to reach his/her goals (or “opportunity pluralism”) and ability to achieve “a greater degree of human flourishing” (Areheart & Stein, 2015; p. 878). As Areheart and Stein (2015) suggest, policies ought to be evaluated in terms of their arbitrariness as well as their pervasiveness and strictness, in order to help determine if they have become bottlenecks for certain groups of individuals. In this context, arbitrariness refers to the reason for a policy, pervasiveness refers to the number of options for reaching a goal that are reduced by a particular policy, and strictness refers to whether or not a policy is an “absolute bar, a strong preference, or just a mild preference” (p. 880) to obtaining a particular outcome (Areheart & Stein, 2015). Thus, policies (or laws, practices) that are not justified and can prevent many people from reaching certain goals/outcomes, need to be further examined and either remedied or disposed.

Accessibility and discrimination may be thought of as two bottlenecks that prevent or reduce the chances of disabled individuals from obtaining employment

(Areheart & Stein, 2015). For instance, if a disabled individual does not fit into an employer's idea of what a potential employee needs to be like, this serves as a bottleneck by reducing the number of job opportunities that are available for that individual. Although, as discussed in the above section, there have been recent advances in legislation meant to protect those with disabilities, these disability laws and policies often end up creating bottlenecks for disabled individuals by focusing on a strict dichotomy of employability vs. disability (Areheart & Stein, 2015). As Areheart and Stein (2015) explain, the term "disability" has come to be synonymous with an inability to work, while being able to work has become synonymous with "non-disabled" – this dichotomy ultimately results in individuals having to choose between working or receiving disability benefits.

As stated in the above paragraph, laws created with the intention of aiding disabled individuals often end up becoming bottlenecks to gaining employment for disabled individuals. Despite the good intentions that are often behind the creation of these laws and policies, they are still influenced by the prevailing ideas and opinions surrounding disability in our society. This means that oftentimes, although inadvertent, these laws and policies actually make it more difficult for disabled individuals to obtain employment, or to even switch between employment and receiving disability benefits. Two examples of this predicament are Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). According to Areheart and Stein (2015), in order to receive SSDI, disabled individuals must quit their jobs soon after they begin experiencing a problem that interferes with their ability to work – this is because individuals are not

able to receive SSDI unless they are currently unemployed. Consequently, individuals must choose between staying in the workforce and risking later discrimination or receiving disability benefits, which will guarantee that they have a dependable source of income in the future (Areheart & Stein, 2015). This lack of employment, which often results in negative outcomes, such as a loss of work-related skills, then decreases the likelihood that disabled individuals will re-enter the workforce at a later date. Areheart and Stein (2015) note that individuals are highly unlikely to be employed in the future if they leave the workforce for two or more years. Consequently, disabled individuals must face a new struggle, or bottleneck, if they want to reenter the workforce – keeping their work-related skills and abilities up to date. Is it unfortunate that laws meant to protect disabled individuals in the workplace, such as Title I of the ADA, have helped to create this dichotomy between disability and employment, due to the way they have been interpreted by lawyers, judges, employers, and others. After all, as Areheart and Stein (2015) explain,

Indeed, the *raison d'être* for Title I of the ADA is that the vast majority of people *with* disabilities are *both* disabled and able (with or without reasonable accommodation) to work (p. 890-891).

It is regrettable that laws meant to protect disabled individuals from discrimination are failing to serve their true purpose due to the manner in which they are interpreted. Unfortunately, this leads to these laws becoming “bottlenecks” for individuals with disabilities, preventing them from being able to attain work, or by reducing the number of hours they are able to work. Thus, the focus of the first

hypothesis is how barriers affect the number of hours disabled individuals report currently working:

Hypothesis 1: Disabled individuals who report experiencing one or more barriers in their job search (e.g., lack of literacy, ex-offender, lack of transportation) will work fewer hours than disabled individuals who report having no barriers.

The Medical Model of Disability

In our society, disabilities are most often viewed through a medical model lens. Areheart (2008) succinctly and clearly defines the medical model of disability – that is, the medical model views disability as

a personal, medical problem, requiring an individualized medical solution; that people who have disabilities face no ‘group’ problem caused by society or that social policy should be used to ameliorate (p. 186).

This lens, which has become the standard way of thinking about disabilities in our society, may be contrasted with the ways in which issues associated with race and gender in the workplace are judged. As a society, we have gradually come to acknowledge that issues related to race or gender in the workplace are not simply an individual’s personal problem – a woman who is unduly fired or who may be having trouble finding employment is not automatically judged as being lazy, incompetent, or “lesser than,” but rather our society recognizes that there is an inherent problem associated with gender discrimination in the workplace. By examining employment issues related to disabled individuals through a medical model lens, we have come to assume that disability itself is

the cause of the employment issue and that there must be something wrong with a disabled individual if he/she is having employment problems (Areheart, 2008).

If disabilities were viewed through a social model lens, disabilities would be viewed as a “social construct...and distinguished from the physiological notion of impairment” (Areheart, 2008, p. 188). A social model of disability recognizes that society is responsible for many of the barriers that disabled individuals are forced to overcome in order to gain employment – logically, then, we have a duty to help fix problems or barriers that disabled individuals encounter as they try to gain employment. Schur, Kruse, and Blanck (2005) echo this sentiment by explaining that “societal attitudes must change if people with disabilities are to be accepted and incorporated fully into the workplace” (p. 4). The social model does recognize physiological issues, which are the focus of the medical model; however, these physiological issues, or impairments, are distinguished from disabilities (or what the social model views as a social construct; Areheart, 2008).

Unfortunately, the medical model of disability has not only become the standard method of assessing disabled individuals in our society, but has also bled into areas that have enormous impacts on disabled individuals, such as the law. Because the medical model focuses on the individual, disabled individuals who have trouble finding or gaining employment are often viewed as incompetent or lazy (Areheart, 2008). In other words, if disabled individuals only “worked harder” they would not have trouble gaining employment. Areheart (2008) explains how negative perceptions of welfare tend to revolve around the fact that disabled individuals receive “special treatment” they do not deserve because they are “lazy.” After all, if these individuals were industrious, they

would have no difficulty finding employment or remaining employed; this view can be contrasted with the social model, which focuses on how the environment needs to be changed, not the individual. In short, laws and policies meant to aid disabled individuals are commonly seen as “some form of charity for biological losers” (Archeart, 2008; p. 186).

Disabilities and Stigmas

“In short, their disability becomes their master status.”
- Benoit, Jansson, Jansenberger, and Phillips (2013, p. 971)

It is safe to assume that much of the discrimination encountered by those with disabilities is due to stigmas held by those without disabilities. For example, Fevre et al. (2013) note that disabled individuals may be seen as having less to contribute in the workplace. Anderson et al. (2013) reiterate sentiments expressed by Fevre et al. (2013) – in their paper, Anderson et al. bring attention to the fact that discriminatory views may lead both employees and employers to assume that disabled individuals do not have much worth as employees. With these kinds of perceptions abounding, it is no wonder that disabled individuals encounter so many issues related to discrimination in both the workplace and other areas of life.

These negative social attitudes and perceptions may constitute one of the main barriers to employment for individuals with disabilities (Cramm et al., 2013). This is not a problem faced by the United States alone – other countries such as South Africa, Canada, and the United Kingdom have documented stigmas associated with disabilities (Benoit et al., 2013; Cramm et al., 2013; Fevre et al., 2013). Parker Harris et al. (2014) explain that the term ‘disability’ and its associated stigmas have developed on both a

structural and cultural level. More specifically, on a structural level, society has come to associate disabilities with an inability to work; on a cultural level, this supposed inability to work, or to “participate in the workforce” (p. 1277), has been linked to a lack of worth as an individual (as explained in the above section). This is due to the fact that “...society sees employment as the key to social membership...with the assumption that employees with disabilities are of less productive worth...” (Fevre et al., 2013, p. 289). These social views then act as a sort of “self-fulfilling prophecy” (Fevre et al., 2013, p. 289), with disabled individuals earning lower wages and experiencing low unemployment rates. And, if disabled individuals have a hard time finding work and/or do not receive competitive wages, they may risk falling into poverty, if they are not already there. It is saddening that this perception of disabled individuals as being “less than” too often becomes their entire identity. Individuals who hold these negative viewpoints frequently fail to recognize that disabled individuals are people too, and, just like everyone else, they have many interests, abilities, and aspects to their personalities (Benoit et al., 2013).

Mental Illness and Stigmas

Among the myriad of disabilities, mental illness may be one disability that garners the most prejudice. Based on data gathered by the EEOC in the 1990s, mental illness is one of the most commonly listed disabilities associated with discrimination suits (Lee, 2001). Research by Fevre et al. (2013) also illustrates this point – they found that individuals with a psychological disability were 177% more likely than others in the workplace to encounter some form of negative behavior. On the other hand, individuals with a physical disability were only found to be 15% more likely than others to

experience negative or discriminatory behavior. Results from Fevre et al. (2013) also help to demonstrate the different types of mistreatment that individuals with a mental illness (i.e., psychiatric disability) are most likely to be faced with. In their research, Fevre et al. found that the most common forms of mistreatment for individuals with mental illness included “employers not following the proper procedures,” “gossip and rumours being spread about you or having allegations made against you,” “being shouted at or someone losing their temper with you,” “being treated unfairly compared to others in your workplace,” and “people excluding you from their group.” (Fevre et al., 2013, p. 298-299). It should also be noted that individuals with mental illness were much more likely to experience the aforementioned forms of mistreatment than individuals with other types of disability, or even no disability at all.

Individuals with mental illness not only experience more frequent discriminatory behaviors in the workplace, but they must also contend with extremely high unemployment rates, even compared to unemployment rates for individuals with other types of disabilities (Shaw, Jacobs, & Rebeiro Gruhl, 2012). And, if individuals with a mental illness are employed, it is very likely that they are employed at a job where they work long hours for little money, and also have very little job security (Shaw et al., 2012).

Invisible vs. Visible Disabilities

Mental illness may be characterized as an “invisible” disability, in that individuals who have a mental illness do not appear to be disabled at first glance (there are no “visible manifestations;” Santuzzi et al., 2104; p. 204). Other examples of invisible disabilities include hearing loss, low vision, AIDS, ADHD, and fibromyalgia (Santuzzi et

al., 2014). Invisible disabilities are distinct from visible disabilities (e.g., paraplegia) for a number of reasons, including increased difficulty with determining legal definitions, lack of research (despite the fact that invisible disabilities are relatively common), reactions of others, increased negativity of social labels, stigmas, as well as increased likelihood of experiencing certain outcomes (Santuzzi et al., 2014). Wax (2014) notes the deficit of research on invisible disabilities within I-O psychology – thus, the present study seeks to fill that gap by highlighting the relationship between invisible disabilities and other outcomes.

Because of the “invisible” nature of mental illness, individuals with this type of disability have the unique option (usually) of being in control of when and to whom to disclose their disability – this option is not afforded to individuals with a “visible” disability. However, many individuals may be dissuaded from communicating the status of their mental illness to others due to the perceived shame associated with mental illness (Fevre et al., 2013; Santuzzi et al., 2014). Santuzzi et al. (2014) also explain that individuals with “concealable stigmatized identities” and thus, individuals with a “invisible stigmatized condition,” may experience lower quality of life, as well as have a higher chance of experiencing negative work performance (p. 206). This information corroborates information found in other research studies – namely, that individuals with mental illness are much more likely to be unemployed and are subject to more negative experiences in the workplace than non-disabled individuals, or even individuals with other types of disabilities (Fevre et al., 2013; Shaw et al., 2012). Thus, this leads to the

second, third, and fourth hypotheses in the present paper, which are meant to further investigate invisible disabilities, specifically mental illness.

Hypothesis 2: Individuals who identify as having a mental disability (including ADHD/ADD) will be more likely to work a fewer number of hours, as compared to individuals with other types of disabilities (e.g., physical, blindness, developmental).

Hypothesis 3: Individuals who identify as having a mental disability (including ADHD/ADD) will be more likely to earn a lower annual income, as compared to individuals with other types of disabilities (e.g., physical, blindness, developmental).

Hypothesis 4: Individuals who identify as having a mental disability (including ADHD/ADD) will be more likely to have lower levels of work satisfaction.

It is also of interest in the present paper if disabled individuals may feel entitled, in terms of employment. That is, do disabled individuals think that they deserve a job no matter what, and that their employer should understand if they sometimes have issues maintaining personal hygiene or make mistakes while on the job? To date, most research concerning disability and entitlement seems to be focused on entitlement laws and policies (e.g., Gerardi & Tsai, 2014; Pattison & Waldron, 2013). Thus, it is important that we begin to understand disabled individuals' opinions concerning special treatment from employers; it is also of interest in the present paper whether or not disability (visible vs. invisible) affects perceptions of entitlement. Because this is an understudied area in the literature, a research question will be used instead of an actual hypothesis.

Research Question 1: Will visibility of disability affect perceptions of entitlement?

Negative Perceptions of Disabled Individuals are Probably Wrong

Oftentimes, individuals are very assured of their perceptions and opinions of others. How often have we heard hiring managers say that they “know” someone within X seconds or X minutes of the beginning of an interview? However, research has found that our perceptions of others are often inaccurate – in other words, we aren’t as knowledgeable of others as we may think we are (De Neys & Vanderputte, 2011; Gill & Swann, 2004).

More specifically, our impressions of others are prone to routine errors. Research has found that humans often use mental shortcuts, or “heuristics,” to reach conclusions or when forming impressions of others (De Neys & Vanderputte, 2011). De Neys and Vanderputte (2011) explain that heuristics are so common because they allow individuals to reach conclusions quickly and efficiently – in other words, heuristics do not require individuals to spend large amounts of cognitive energy in order to make decisions. While these mental shortcuts may save us time and effort, they also have the propensity to lead to wrong conclusions, such as with stereotypes of certain groups of individuals. A relevant example in this case would be stereotypes of disabled individuals – stereotypes of certain types of disabilities may cause hiring managers to automatically assume that an applicant with a disability will not be reliable or contribute much to the organization. This simplistic way of thinking then results in that disabled applicant not being given due consideration for a position, regardless of their true potential as an employee. As De Neys

and Vanderputte write, "...the analytic operations heavily burden our limited working memory resources..." (p. 432). Research from Bodenhausen (1990) also supports research by De Neys and Vanderputte. Bodenhausen (1990) describes stereotypes as "judgmental heuristics that are sometimes used to simplify the cognitive tasks confronted by the social perceiver" (p. 319) and notes that individuals are likely to use these stereotypes, or mental shortcuts, when forming judgments of others, unless these individuals are driven to engage in deeper mental processes (that often require more energy and time).

Sometimes, Discrimination Can Be Invisible

Although research has found that many individuals with disabilities do face some form of prejudice or discrimination in the workplace (e.g., Cramm et al., 2013; Fevre et al., 2013; Parker Harris et al., 2014), it is still possible that disabled individuals may not feel like they are being outwardly discriminated against. As Fevre et al., (2013) note, many individuals with disabilities may feel that they are protected from discrimination by the law. Therefore, any acts that may seem like discriminatory behavior may be attributed to other circumstances or factors. Furthermore, individuals who are intent on engaging in dubious behaviors against their fellow employees with disabilities may be extra careful that their behavior is not outwardly apparent, or may use certain aspects of the organization and its policies to cover up their negative acts (Fevre et al., 2013). This, then, proves to be one of the more odious factors associated with disabled individuals and their experiences in the workplace; they are not held back from employment, promotions, or other similar workplace experiences due to their lack of knowledge, skills, or abilities,

but rather they are “held back” due to others’ ability to hide questionable behaviors in their surroundings (Fevre et al., 2013).

As Fevre, Grainger, and Brewer (2011) and Fevre et al. (2013) discuss, discrimination in the workplace may be hidden within certain policies or practices. For example, it is possible that discriminatory practices are built into the hiring system – opinions concerning the supposed increased cost of hiring disabled individuals may cause individuals in charge of the hiring process to not give as much attention to disabled applicants (Fevre et al., 2011). The same thing may be said of common practices surrounding promotions in the workplace – although one manager may be inserting his/her own discriminatory beliefs about disabled individuals into the process, a disabled employee may not view the promotion policies to be discriminatory, due to the fact that he/she is not privy to everything that goes on during the process. For example, it might be easy to explain why another employee was promoted (“He has more experience than I do...”), as long as the employee has felt like he/she has thus far been treated similar to other non-disabled employees.

Barriers to Employment

“They continue to battle marginalisation due to the many barriers they must face.”
- Cramm et al., 2013 (p. 20)

It is unfortunate to think that, in addition to the everyday hurdles they must overcome, disabled individuals must deal with countless other problems many of us will be lucky enough to never encounter. Barriers to employment, the focus of the current section, are perhaps among some of the more intricate and difficult issues to manage for disabled individuals. The purpose of the present section is to illuminate what disabled

individuals must face when attempting to gain employment or after successfully gaining employment. It is not possible to enumerate the entirety of what disabled individuals must overcome – doing so would take far too many pages of this dissertation. Therefore, a small selection of barriers to employment will be discussed in the present section of this paper.

Secondary Health Issues

It is not uncommon for disabled individuals to have accompanying health issues, along with their primary disability (Ipsen, Raveslout, Arnold, & Seekins, 2012). As Ipsen et al. (2012) report, disabled individuals are often three times more likely than non-disabled individuals to experience certain physical and mental health problems, including, but not limited to, depression, fatigue, anxiety, and respiratory infections. Individuals who have accompanying health issues are also more likely to be unemployed (Ipsen, Seekins, & Raveslout, 2010; Ipsen et al., 2012). These secondary health issues may be defined as, “health problems that exacerbate or intensify disability caused by a primary impairment” (Ipsen et al., 2010; p. 67). What is especially scary is that secondary health issues have the potential to progress to acute problems (Ipsen et al., 2010).

The good news is that it is relatively easy to manage these secondary health issues, with the aid of health promotion programs (Hammond & Freeman, 2006; Ipsen et al., 2012; Lorig, Ritter, & Plant, 2005). For example, Hammond and Freeman (2006) found that fibromyalgia patients were better able to control pain and had fewer doctor visits, as well as a “greater sense of controlling their condition” (p. 841), after they participated in a community-based intervention that involved education, exercise, and cognitive-

behavioral therapy. Indeed, Ipsen et al. (2012) report that health promotion programs can help disabled individuals become more physically active, reduce the number of visits they make to the doctor, and improve problems associated with any secondary health issues. What's more, these advantageous outcomes associated with health promotion programs appear to hold for a range of different health impairments, such as spinal cord injury and multiple sclerosis.

It is sad, then, that it often proves difficult for disabled individuals to gain access to health programs. Oftentimes, large companies offer health programs as part of their health insurance policies (Ipsen et al., 2012). This poses a problem, though, as disabled individuals tend to have a much lower rate of employment than non-disabled individuals (Cramm et al., 2013; Parker Harris et al. 2014). This, then, leaves the majority of disabled individuals in a predicament – they are stuck in a spiral of needing special health benefits, which are often only available through employers, but not being able to work. Then, because they are unable to work, they become sicker and have more problems associated with their disability, which further decreases their likelihood of gaining employment.

Problems with Rehabilitation Counselors and Services

Luckily, there are services available that attempt to aid disabled individuals with finding and gaining employment, such as vocational rehabilitation. Rosenthal et al. (2012) describe vocational rehabilitation as “the provision of services that enhance the employability of an individual with a disability” (p. 74). Although it is wonderful that vocational rehabilitation, as well as other resources, are available to disabled individuals, numerous problems exist with the present way that vocational rehabilitation is designed

and managed – again, these problems serve to decrease the efficacy of vocational rehabilitation for individuals who need help the most. What’s more, rehabilitation services tend to focus on specific work-related skills, rather than helping improve the social skills and abilities of disabled individuals (O’Sullivan et al., 2012). As will be discussed in the following section, this lack of social-skills training often leads to further employment complications. A short discussion of issues related to the rehabilitation counselors’ training and education will be the focus of the present section.

Rehabilitation counselors serve as an essential support system to disabled individuals, in part by helping them find methods to adapt to their disabilities and, hopefully, gain employment (Frain, Berven, Tschopp, Lee, Tansey, & Chronister, 2007). However, research has found that the education these counselors receive may be lacking, which greatly diminishes the positive impact they are able to make on their clients (e.g., Frain et al., 2007; McCarthy, 2014; Rosenthal et al., 2013). For instance, one major problem associated with vocational rehabilitation is rehabilitation counselors’ level of knowledge surrounding employer needs (Rosenthal et al., 2013). Rosenthal et al. (2013) note that counselors lack knowledge in areas such as business culture, educating employers about disability myths, and building employer networks, as well as being “less responsive to consumer [employer] needs” (p. 77). A direct quotation from Rosenthal et al.’s (2013) focus group describes the lack of employer knowledge predicament succinctly by explaining what information counselors seem to be missing – “A good sense of how to work with employers, read their needs, and help them identify some needs where the two [employer and client] can have the ideal match” (p. 78).

Past research has also found that rehabilitation counselors are not often given opportunities to increase their knowledge base or improve their skills – many counselors do not even have a counseling license or are not certified as a rehabilitation counselor (McCarthy, 2014). It is important that rehabilitation counselors are properly educated for multiple reasons. First and foremost, these counselors need to be able to help clients (obviously) locate available work opportunities that are an appropriate fit for the clients' skills and other needs. Second, the proper education in rehabilitation counseling may then impact counselors' ability to deal with other issues, such as issues related to from clients – and an increased ability to deal with client-related issues has been found to be associated with more “successful client outcomes” (McCarthy, 2014; p. 8), due to counselors' increased ability to get clients to participate in the rehabilitation counseling and services. Sadly, for those individuals enrolled in educational programs, appropriate topics may not even be covered in classes for counselors. Fong, Leahy, Saunders, Tarvydas, Ferrin, and Lee (2003) explain that important areas, including disability management, are commonly excluded from study in rehabilitation counselor programs.

Fong et al. (2003) note that much of past research has been devoted to studying the training and knowledge needs required by counselors, as well as examining areas in which rehabilitation counselors may be lacking as professionals. Fong et al. (2003) observed that researchers have discovered six areas of knowledge to be especially important to rehabilitation counselors – examples of these areas include career counseling, rehabilitation resources, and disability systems (p. 83). Additionally, Fong et al. (2003) used data collected from a previous study that surveyed certified rehabilitation counselors

about areas of knowledge that were the most important to the rehabilitation counselor profession, as well as areas of knowledge in which the counseling profession as a whole needed additional training or education. Interestingly, Fong et al. (2003) distinguished five areas that participants indicated were very important to the counseling profession, but were also simultaneously known for being areas in which counselors did not have the appropriate education. These five areas included (1) career counseling, assessment, and consultation (e.g., “job modification and restructuring techniques”), (2) counseling theories, techniques, and applications (e.g., “multicultural counseling issues”), (3) rehabilitation services and resources (e.g., “rehabilitation services in diverse settings”), (4) case and caseload management (e.g., “negotiation and conflict resolution strategies”), and (5) health care and disability systems (e.g., “appropriate medical intervention resources;” Fong et al., 2003; p. 85). Consequently, it is apparent that rehabilitation counselors are in need of continued growth in several major areas in order to be able to better serve their clients.

As the above research indicates, there is much ground to cover in terms of improving the knowledge and skills counselors are exposed to in an education setting. However, yet another potential obstacle in counselor education is the number of educators who hold degrees in rehabilitation (Maki & Berven, 1994). Research has found that educators who hold degrees in areas other than rehabilitation may not be as equipped to teach courses in rehabilitation programs, and may even view their abilities to teach courses in rehabilitation as lower than individuals who hold graduate degrees in rehabilitation (Maki & Berven, 1994).

Social Skills

Unfortunately, in addition to dealing with the difficulties described above, such as stigmas, secondary health issues, and vocational rehabilitation issues, many disabled individuals do not possess the appropriate social skills that would enable them to successfully function in a working environment. Given the social nature of work (O'Sullivan et al., 2012; Phillips et al., 2014), this presents a problem for disabled individuals who have to overcome an inability (or lack of knowledge) to properly interact with others, in addition to their own disability.

Social skills, or interpersonal skills, are a subset of emotional intelligence (Sheridan, Horgas, Fukunishi, & Wise, 2006). Emotional intelligence may be defined as, “the ability to perceive emotions, integrate emotions to facilitate thought, understand emotions, and to regulate emotions to promote personal growth” (Ghabanchi & Rastegar, 2014; p. 2), and is considered to play a large part in “determining success in life” (Ghabanchi & Rastegar, 2014; p. 2) and the workplace (Elfenbein & Ambady, 2002). Emotional intelligence is a distinct construct from what may be called traditional intelligence, or *g* (Elfenbein & Ambady, 2002).

Being highly intelligent does not immediately dispose someone to function well in society. An individual who is somewhat less intelligent may be more adaptable to his/her environment than another individual who is highly intelligent, thereby finding ways to better interact with others and society as a whole (Block & Kremen, 1996). Similarly, individuals who are better able to read others' emotions and react to facial cues may be more successful in the workplace than individuals who are less able to do so.

Being mindful of how to present negative information to others, or discuss a sensitive topic, are also advantageous skills in the workplace. Phillips et al. (2014) explain that a lack of social skills may help clarify the large gap in employment rates that we tend to see between disabled and non-disabled individuals – they also state that past research has estimated that deficits in social skills may account for up to 90% of the reasons why disabled individuals tend to lose their jobs (p. 386). In other words, social skills are essential for successful functioning in the workplace and other areas of our environment, and it is important to continue studying them, especially in connection with disabilities.

Successful social functioning in the workplace is important for a myriad of reasons. In order to successfully assimilate into a new organization, employees must be able to properly interact with others (Kulkarni & Lengnick-Hall, 2011). To reiterate, “low social awareness” and “low social skills” greatly increase the likelihood that disabled individuals (as well as non-disabled individuals) will be fired or dismissed from their place of employment (O’Sullivan et al., 2011; p. 260). Besides the obvious fact that knowledge of and engagement in proper social interactions is beneficial to disabled individuals, in that this increases their chances of finding and maintaining employment, these social skills also help others in the workplace to become more accepting of disabled individuals (Kulkarni & Lengnick-Hall, 2011). Employees’ proactive social behaviors are an essential part of social integration in a new workplace – thus, if disabled individuals are able to do things, such as seek knowledge and information in a socially acceptable manner, they are more likely to successfully integrate into the workplace, which may then help other employees, as well as supervisors, to build relationships with those

individuals. “Specifically, [proper] socialization allows outsiders to become insiders in an organization” (Kulkarni & Lengnick-Hall, 2011; p. 523). Additionally, knowledge of proper social skills helps disabled individuals not only know how to act in the workplace, but also how to *react* to others, especially if others have unfavorable or ignorant views of an individual’s particular disability (Papakonstantinou & Papadopoulos, 2009).

Individuals with autism are a prime example of this dilemma. (Chiang, Cheung, Li, & Tsai, 2014; Liu, Wong, Chung, Kwok, Lam, Yuen, Arblaster, & Kwan, 2013; Louis & Kumar, 2015). Although autistic individuals may be very high functioning in some areas, they often have to face struggles related to social interactions. As Louis and Kramer (2015) state, “autism is a neurodevelopmental disorder characterized by impairments in social interaction, verbal and non-verbal communication” (p. 106). Autistic individuals often encounter difficulties finding and gaining employment – it is estimated that approximately 42% of autistic individuals were employed in the U.S. between the years 2002-2006, with other countries, such as the U.K. and Canada, exhibiting similar patterns of employment for autistic individuals (Chiang et al., 2014). Liu et al. (2013) even suggest that 90% of autistic individuals are unemployed!

Unfortunately, autistic individuals are subject to similar employment complications that other disabled individuals must face. Liu et al. (2013) note that one of the main reasons for the lack of employment among autistic individuals is that they often do not have the proper communication and socialization skills needed to function in the workplace. Corroborating this information is the fact that solely providing autistic individuals with educational opportunities is not enough to help them attain work – rather,

autistic individuals are often in need of programs to help them learn how to interact with others in the workplace (Liu et al., 2013).

Autistic individuals are not the only disabled individuals to experience trouble with employment due to a lack of proper social skills. Individuals with mental illness or visual impairments (e.g., blindness) also experience issues associated with social skills. As McDonnall (2011) reports, these contextual skills are an understudied factor related to employment outcomes for visually impaired individuals, and thus deserve further research. In their study, O’Sullivan et al. (2012) found that participants who reported having a mental illness were the most likely to score low on a social skills measure, as compared to participants who had a physical or learning disability. O’Sullivan et al. (2012) note that this finding is nothing new – there have been countless other research studies that have found that individuals with mental illness are extremely likely to concurrently have problems related to social skills. (e.g., Bryson, Bell, Lysaker, & Zito, 1997; Williams, 1997) What is especially interesting is the fact that work has been found to result in better psychological health (O’Sullivan et al., 2012; Papakonstantinou & Papadopoulos, 2009) – thus, if individuals with a mental illness are not able to maintain employment because of a lack of social skills (O’Sullivan et al., 2012), then they are likely to suffer the negative psychological effects associated with unemployment, which will, most likely, only continue to perpetuate the cycle of disability.

Along the same line of thought, a meta-analysis by Botsford (2013) has detailed the importance of social skills for those with visual impairments – Botsford explains that an “ability to create and sustain relationships with others positively affects employment

outcomes” (p. 497). Indeed, the results of her meta-analysis revealed that social skills accounted for approximately six percent of employment outcomes; although this number may seem very small, six percent is actually noteworthy, considering the fact that untangling factors related to employment for disabled individuals is relatively difficult. Botsford (2013) also cites other literature (e.g., Golub, 2003; Sacks & Wolffe, 2006) that recognizes social skills as essential for continued employment among individuals with visual impairments. Results from McDonnall (2011) also support the findings of Botsford (2013) – McDonnall found that, among participants who worked 20 or more hours a week, those who had more social skills (measured as how often their peers invited them to social activities) “had 3.5 times greater odds of being employed than did those who were not” (p. 462).

Social Support

Examining the impact of social support is not only important for employment research, but also because researchers have noted that there has been a lack of research investigating how the environment and personal characteristics affect disabled individuals’ overall well-being, as well as a lack of research examining social support and its effects on certain disabilities, such as mental illness (Rogers, Anthony, & Lyass, 2004; Wilson, Catalano, Sung, Phillips, Chih-Chin, Yui Chung Chan, & Fong, 2013). The present paper seeks to address this gap in the literature by examining how social support not only affects work related outcomes, but also individual outcomes unrelated to work.

While social skills are important to obtaining and maintaining employment, social support is also a significant factor that enables disabled individuals to become employed.

Indeed, Romer and Walker (2013) describe how disabled individuals' relationships with personal assistants are an important first step to growing social networks "that everyone needs" (p. 187). Past research also provides support for a relationship between social support and work-related outcomes – Rogers et al. (2004), who studied individuals with mental illness, were able to predict which individuals would be employed nine months after the conclusion of their study, based on prior scores on the social support measure they developed. Roberts, Murphy, Dolce, Spagnolo, Gill, Weili, and LueAnn (2010) report that social support in the workplace has been linked to higher wages and more employment "success" for individuals suffering from mental illness. Social support isn't only important for work-related reasons, but also because it has the potential to affect other areas of disabled individuals' lives (which could then also impact work-related outcomes). For instance, Rogers et al. (2004) report that individuals suffering from mental illness were more likely to be hospitalized as their social support levels decreased; on the other hand, mentally ill individuals were more likely to achieve "residential stability" if they had high(er) levels of social support (p. 439). Wilson et al. (2013) also explain how past literature has drawn an association between social support and positive adjustment among individuals.

The present study seeks to discern the influence of familial social support on both work and non-work related outcomes for disabled individuals. As Wilson et al. (2013) note, support systems are essential for disabled individuals, especially when they are first dealing with the "onset of a disability" (p. 189).

The acceptance and adjustment of family members have been considered as important as that of the individual with the disability in affecting rehabilitation outcomes by some researchers. (Wilson et al., 2013; p. 189)

Social support has been found to affect outcomes for many types of disabilities. In addition to the impact it has on mental illness described in the above section, social support has been linked to outcomes for other disabilities, such as individuals suffering from spinal cord injuries, intellectual disabilities, and vision impairments (Duggan & Linehan, 2013; Kempen, Ranchor, Ambergen, & Zijlstra, 2014; Wilson et al., 2013). For instance, Wilson et al. (2013) found that social support from family, friends, and partners significantly predicted disabled individuals' level of happiness. What is especially interesting is that Wilson et al. (2014) discovered that social support provided by the friends of disabled individuals had the largest effect on later happiness – social support from partners only become a significant predictor after friend social support was removed from the analyses performed by Wilson et al. (2013). Social support also has been shown to decrease depressive symptoms experienced by individuals with vision impairments and has been described as an important resource that may help protect individuals against stressors (Kempen et al., 2014). What's more, it has been suggested that low social skills may lead to low social support, which results in a cycle where disabled individuals who do not have “appropriate” social skills are in danger of being excluded socially, which may lead to worsening of social skills, and so on (Duggan & Linehan, 2013). Based on this information, it is essential to study both social skills AND social support in the context of disability and employment, as they may be inherently related to one another.

Despite the fact that social support has numerous positive impacts on outcomes for disabled individuals, there are situations in which support from family, friends, partners, or others may be unwelcome or seen as stressors by recipients of the support. Family and friends (and others) may have good intentions when they provide support to disabled individuals, but factors such as a lack of understanding or a judgmental attitude may lessen the positive impact of the support. Perera, Short, and Fernbacher (2014) explain how social support provided by family and friends to mothers with mental illness may actually be a source of stress and difficulty to those mothers. Family dynamics can often be complicated and tangled, and this has the potential to impact how family members' support is viewed by mothers attempting to care for their children while simultaneously dealing with a mental illness. Family members who offer support, and who also hold judgmental attitudes about mental illness, do not fully understand the illness, blame the mothers for their illness, or are themselves uncomfortable with the illness (or all four!) may actually cause those mothers additional stress and discomfort. As Perera et al. (2014) explain, this can become "a source of conflict and contribute to low self-esteem, poor parenting experiences, and feelings of disempowerment" (p. 171).

There are a few theories regarding the "mechanisms" through which social support exerts its influence on outcomes such as life satisfaction, depression, and chronic disease (Rogers et al., 2014; p. 438). One theory proposed by researchers is that social support is able to help keep an individual from feeling the effects of certain stressors in his/her life (Rogers et al., 2014; Wilson et al., 2013). In other words, being able to draw on the support of one's social circle acts as a "buffer" against the effects of stressors.

Another theory, the “relationship model,” explains that, regardless of whether or not an individual is experiencing a stressful event, social support may be thought of as a *resource* that influences cognitions, behaviors, and coping behaviors in a positive manner (Rogers et al., 2014; Wilson et al., 2013). Wilson et al. (2014) note that, according to this model, “individuals with supportive relationships have higher levels of well-being, regardless of the level of stress” (p. 189). Wilson et al. (2014) also state that both the “buffering model” and “relationship model” have garnered support from past research. Information regarding different theories involving social support are included in this section because they are necessary for a subsequent section (“Conservation of Resources”).

Core Self-Evaluations

The construct of core self-evaluations (CSE) was first proposed by Judge, Locke, and Durham in 1997. It is composed of four underlying constructs, those of generalized self-efficacy, self-esteem, neuroticism, and locus of control. Very simply put, CSE can be thought of as individuals’ feelings about their self-worth and ability to handle events that may occur in their lives. Past research has found that CSE predict a host of outcome variables, including job satisfaction, life satisfaction, stress (Judge, 2009), and job performance (Judge & Bono, 2001).

Past research has suggested several different processes through which CSE may affect outcomes. Judge et al. (1997) proposed that there were four different manners in which CSE could influence outcomes: (1) directly, through emotional generalization, (2) indirectly, through cognitions and appraisals, (3) indirectly, through actions, and (4) by

interacting with other variables. Although these four methods provide varying ways to investigate CSE in relation to other variables, Chang, Ferris, Johnson, Rosen, and Tan (2012) point out that Judge et al. (1997) do not provide theoretical backing for any of these four processes – that is, these four processes serve more of a descriptive purpose, instead of serving as the basis of a theoretical foundation for CSE. As Chang et al. (2012) describe, the approach/avoidance framework (Elliot, 1999) may be better suited to studying the effects CSE has on other variables. One of the main tenets in approach/avoidance research is that personality traits affect individuals' responsiveness to positive and negative stimuli (Elliot, 1999). Past research has helped to place CSE within that framework – in other words, it has been discovered that higher levels of CSE usually result in individuals being more reactive to positive factors and less responsive to negative factors (Chang et al., 2012). Although the extant literature does seem to support using the approach/avoidance framework as the basis of a theoretical framework for CSE, the present study wishes to extend existing research findings. As will be explained in the Conservation of Resources section below, the present study will highlight CSE as a potential resource disabled individuals use to help them cope with hurdles they may face. It is our belief that using Conservation of Resources theory will provide a valuable alternative to examining how CSE may potentially affect outcomes of interest.

CSE is being included in the present study because we are interested in learning more about how disabled individuals feel about themselves. It is important to study CSE in the context of disability because there appears to be a lack of research investigating the relationship between CSE and disabled individuals. To the authors' knowledge, there are,

unsurprisingly, few studies that simultaneously examine CSE and disability – a search of Psychinfo revealed a total of seven studies (when using the keywords ‘core self-evaluations’ and ‘disability’). However, this does not mean that CSE isn’t relevant to the study of individual experiences with disability – rather, researchers should pay more attention to CSE when they are conducting disability research. As Smedema (2014) explains,

CSE has great potential as a global indicator of well-being, and the development of interventions specifically aimed at targeting and augmenting individuals’ CSE and relevant mediating and moderating variables would be an important step forward in rehabilitation psychology research and practice (p. 412).

It is because of CSE’s great potential to both help others understand disabled individuals *and* ways to improve methods of support provided to disabled individuals that this construct is being included in the present study. More hypotheses including CSE will be presented in the next section, but one hypothesis concerning CSE will be included in the present section. It is thought that having higher levels of CSE will enable individuals to be more confident in their search for jobs – that is, disabled individuals who feel they are better able to handle situations in their lives should feel more optimistic in their ability to find employment.

Hypothesis 5: Among individuals with disabilities, CSE will positively predict levels of job search self-efficacy.

Conservation of Resources

Conservation of Resources Theory (COR), a resource based theory of stress, was first developed in the late 1980's by Stevan Hobfoll in response to the lack of stress theories at the time (Hobfoll, 1989; Hobfoll, 2001). At the time that it was developed, COR offered a new perspective on stress and how individuals behave, both physically and psychologically, in the presence and absence of stress. The study of stress is important for countless reasons. Research has found that stress is a part of every single human being's life, experienced internally, impacts both mental and physical health outcomes, and remains hard to define despite the growing body of research surrounding it (Hobfoll 1989, 2001).

The term *stress* is loosely borrowed from the field of physics. Humans, it is thought, are in some way analogous to physical objects such as metals that resist moderate outside forces but that lose their resiliency at some point of greater pressure (Hobfoll, 1989; p. 513).

Additionally, although initial research in the area of stress conceptualized all individuals' experience with stress as invariable, more recent research has shown that this is, in fact, not true. Rather, Hobfoll (1989) notes that individuals' reactions to stress is a result of their "personality, constitution, perceptions, and the context in which the stressor occurs" (p. 513).

In the years since it was developed, COR has become one of the two main ways in which researchers seek to comprehend stress, in addition to Lazarus and Folkman's (1984) theory of stress (Hobfoll, 2011). The main idea on which COR is founded is that

individuals want to make certain that they keep the resources they currently have, guard against the possibility of resource loss, and attempt to use their current resources to gain additional resources – thus, a major concern for individuals is the loss, or even potential loss, of their resources (Hobfoll, 1989).

This means that people employ key resources in order to conduct the regulation of the self, their operation of social relations, and how they organize, behave, and fit in to the greater context of organizations and culture itself (Hobfoll, 2011; p. 117). One of the principal ways in which COR differs from other stress theories is that it does not solely focus on individuals' own appraisals, or interpretations, of events as stressors (Hobfoll, 2001, 2011). While COR does take into account individuals' internal perceptions of events, it also recognizes that perceptions are affected by the cultures in which we live (Hobfoll, 2001). Thus, it is very likely that we do not all interpret events in the same manner.

In his 1989 paper, Hobfoll posited that psychological stress, or individuals' responses to events, was due to (a) the threat of a net loss of resources, (b) the net loss of resources, or (c) a lack of resource gain following the investment of resources (p. 516). Hobfoll notes that actual resource loss is not the only condition under which stress may occur – stress may also occur when individuals simply perceive that they have lost resources. Thus, we must work to understand the role of resources to advance our knowledge of stress (Hobfoll, 1989). In the present paper, we seek to understand how different resources affect emotions and perceptions of disabled individuals, as past

research (Fevre et al., 2013) has chronicled the lack of literature on disabled individuals' experiences.

COR recognizes many categories of resources. Resources include objects, personal characteristics, conditions, or energies (Hobfoll, 1989). As such, there are countless resources – self-esteem, personal transportation, feeling valuable to others, family stability, stamina/endurance, personal health, personal traits, stable employment, peace, sense of humor, the ability to communicate well, financial stability, support from coworkers, help with tasks at work, medical insurance, help of family/close friends, people to learn from, and companionship all count as resources under COR (Hobfoll, 1989, 2001, 2011). Resources serve two main functions: (1) they are instrumentally important in that they help people to achieve desired outcomes and (2) they help individuals to define themselves (Hobfoll, 1989). It is also possible to experience a resource loss spiral; this occurs when an initial loss of resources prevents individuals from “meet[ing] challenges or acquire[ing] [new] resources,” which then results in a loss of more resources, and so on (Hobfoll, 2011; p. 118).

Because social support is of interest in the present paper, it is important to note where it fits into COR. According to Hobfoll (1989), social support does not neatly fall into any one of the above four mentioned types of resources. Rather, social support can be both considered a resource and not considered a resource (this echoes sentiments expressed by Perera et al. (2014) in the above category on social support). According to Hobfoll (1989),

Social relations are seen as a resource to the extent that they provide or facilitate the preservation of valued resources, but they can also detract from individuals' resources. This notion is consistent with research that finds social support beneficial when it provides for situation needs and harmful or benign when it does not (p. 517-518).

COR in the Present Study

COR has been used to study a variety of topics in the literature. For example, van Woerkom, Bakker, and Nishii (2015) used COR to investigate job absenteeism. They posited that COR, along with the job demand-resources model, could be used to help explain job absenteeism, based on findings from past research. More specifically, when an individual uses his/her resources to deal with an issue, problem, dilemma, or conflict at work, he/she will have less energy and resources to manage additional issues. This loss of resources leads this individual to experience strain, which may then lead to a host of other outcomes, including fatigue, high blood pressure, and increases in cortisol, adrenaline, and noradrenaline (van Woerkom et al., 2015) – these outcomes result in job absenteeism for the individual. Ultimately, van Woerkom et al. (2015) found that facing multiple job demands at the same time resulted in a subsequent increase in absenteeism.

Lin, Chen, and Li (2013) also used COR to investigate stress experienced by individuals caring for their elderly parents. Lin et al. (2013) discovered that the caregivers who had two resources, a good relationship with their parent(s) and feedback from others (considered a form of social support), were better able to navigate the stress associated with providing care to their elderly parents and decrease the caregivers'

chances of becoming depressed. Interestingly, Lin et al. (2013) note that “social support is an important resource that promotes a positive sense of self and effects a belief that one can handle a given stressful situation” (p. 683).

Tying It All Together

The presentation of COR provides the unification of several constructs in the present paper. It is hypothesized that social skills, family social support, CSE, and education will be significant predictors of happiness. This is because these variables are all seen as resources that help disabled individuals to reach desired outcomes (Hobfoll, 1989) – in other words, it is hypothesized that, in the present study, the below mentioned resources will be significant predictors of participants’ happiness levels.

Hypothesis 6: Social skills, family social support, CSE, and education will positively affect participants’ happiness.

Similarly, it is hypothesized the variables in hypothesis 7 will significantly affect work satisfaction among participants who are currently employed. Again, this is because these variables may be thought of as resources used by disabled individuals – for instance, CSE and social skills, should, theoretically, enable disabled individuals to properly engage, and have confidence, in their social interactions with others. Social support should also allow individuals to have a source of support to lean on during stressful times, while greater levels of education should lead to an increased ability to perform the technical aspects on one’s job.

Hypothesis 7: Social skills, family social support, CSE, and education will positively affect participants’ work satisfaction.

CHAPTER TWO

METHOD

Participants

Participants for the present study included individuals who currently identify as having a disability and who are 18 years of age or older. Participants included students at a large university in the southeastern United States, individuals who currently use disability services provided at several organizations in the southeastern United States, as well as other individuals with disabilities who live throughout the United States.

There were a total of 148 participants included in the present study. Of these participants, 48% indicated they were male. The average age of participants was approximately 33 years ($M = 32.86$, $SD = 12.18$). The majority of participants were single (55.5%; refer to Table 1.1 for other relationship status information) and had no financial dependents (50%; Table 1.2). Approximately 34% of participants were unemployed; 21% were employed part-time; 46% were employed full-time (Table 1.3). Approximately 36% of participants indicated they lived with a spouse/romantic partner, while 25% reported they lived alone (Table 1.4). An overwhelming majority (79%) of participants identified as being White/Caucasian (Table 1.5; note that participants were allowed to choose more than one race which applied to them). Approximately 26% of participants earned less than \$10,000 per year, while only 30% of participants earn \$45,000 or more pre year (Table 1.6). Twenty-nine percent of participants earned their Bachelor's degree, while 13% of participants reported their highest education level as being a high school diploma (Table 1.7). Additionally, approximately 82% of participants

were aware of accommodations they may need in their current workplace; 81% knew their employment rights under the Americans with Disabilities Act; 30% had requested accommodations from their current employer (Table 1.8).

Relationship Status	Frequency
Single	80
Married	39
Domestic Partner	11
Separated	1
Divorced	13

Table 1.1: Relationship Status of Participants

Number of Financially Dependent	Frequency
0	51
1	24
2	15
3	8
4	2
5	1
7	1

Table 1.2: Number of Individuals who are Financially Dependent on Participants

What is your current work situation?	Frequency
Unemployed	49
Part-time employed	30
Full-time employed	67

Table 1.3: Participants' Current Work Situation

What is your current living situation?	Frequency
I live alone	35
I live with roommates/friends	25
I live with a spouse/romantic partner	50
I live with family	30

Table 1.4: Participants' Current Living Situation

What is your race & ethnicity?	Frequency
White/Caucasian	117
Black/African American	17
American Indian/Alaska Native	6
Asian	10
Native Hawaiian or other Pacific Islander	2
Hispanic or Latino	4

Table 1.5: Race and Ethnicity of Participants

Income	Frequency
Less than \$10,000	35
\$10,000 to less than \$15,000	18
\$15,000 to less than \$30,000	22
\$30,000 to less than \$45,000	20
\$45,000 to less than \$60,000	20
\$60,000 to less than \$75,000	8
\$75,000 to less than \$90,000	5
More than \$90,000	8

Table 1.6: Participants' Income

Education	Frequency
Some High School	2
GED	3
High School Diploma (General Education)	19
Certificate of Attendance (High School)	2
Trade School	3
Some College	40
Associate's Degree	12
Bachelor's Degree	42
Some Graduate School	6
Master's Degree	15
Ph.D. or Terminal Degree	1
Other	2

Table 1.7: Participants' Highest Level of Education

Employment Knowledge	Yes	No
Are you aware of accommodations you may need in your current workplace?	87	19
Do you know your employment rights under the Americans with Disabilities Act (ADA)?	86	20
Have you requested ADA accommodations from your current employer?	31	75

Table 1.8: Participants' Employment Knowledge

Procedure

Initially, directors at different organizations aiding disabled individuals were contacted to see if they would be interested in participating in the present study. If those directors contacted were interested in being part of the study, they were told the purposes of the study and sent an active link to the survey to send out to their clients. This was done to protect anonymity of participants; in other words, the authors of the present

research study did not have access to any e-mail or other contact information of participants, as the directors were responsible for sending out the survey link to potential participants.

Thus, information about the present study, as well as a link to the survey, was distributed by (a) the director of disability services at a large university located in the southeastern U.S. and (b) directors of two disability services in a southeastern state in the U.S. The directors included a short description of the survey and invited individuals to take part in the study, as well as a link to the survey, in e-mails sent out to potential participants.

If individuals chose to participate in the study, they were directed to open the link to the survey provided in the directors' e-mails. Once they clicked on the link, individuals were taken to the first page of the survey – this page included information about the present study. After reading through this information, individuals were instructed to give their consent to participate by clicking on an 'Agree' or 'Disagree' button at the bottom of the page. If participants chose 'Agree' they were taken to the first page of questions. If participants chose 'Disagree' they were taken to the end of the survey. Participants who agreed completed approximately 8-9 pages of questions regarding their perceptions and opinions about themselves, as well as demographic information.

Due to problems with data collection from the above sources, the survey was also posted online on Amazon Mechanical Turk. These participants were paid \$1.00-\$2.00 (US) for completion of the survey. Participants were instructed to only participate in the

survey if they were over 18 years of age and currently had a disability. These participants received the same version of the survey as all other participants.

Measures

Participants were required to complete several measures, as well as demographic questions, in the present study. Measures were answered on a 1-5 point Likert-type scale (1= *Strongly Agree*, 5= *Strongly Disagree*; 1= *Never*, 5= *Very Often*). Composite reliability from the present study is reported for all scales. Composite reliability was calculated due to the fact that it has less strict assumptions than Cronbach's alpha (e.g., it does not assume tau equivalence; Raykov, 1998). When possible, additional validity and reliability information is provided. Measures are located in Appendices A and B.

Social Skills: Seven items relating to social skills from Ferris, Witt, and Hochwarter's (2001) social skills measure were used. Ferris et al. (2001) found the Cronbach's alpha for this measure to be .70. In the present study, the composite reliability was approximately .75. An example item is, "I am keenly aware of how I am perceived by others." Interestingly, Ferris et al. provide evidence that social skills are unrelated (divergent validity) to general mental ability (GMA), and therefore reflect skills that are not included in GMA, by assessing the relationship between social skills and participants' high school and college GPAs, as well as ACT and SAT scores – correlations between social skills and these other measures were all extremely small (below +/- .15). As will be noted with work satisfaction below, somehow two copies of item #7 from this scale were included in the survey – to solve this problem, participants responses from each item #7 were averaged (the correlation between the items – $r = .55$

– supported this practice).

Emotional Support: Three items relating to family emotional support from Tate's (1996) emotional support measure were used. Tate (1996) found the Cronbach's alpha for this measure to be .76. In the present study, the composite reliability was approximately .76. An example item is, "My family is easy to talk to." This measure was also found to possess adequate internal validity in Japan and Colombia (Tate, 1996).

Work Satisfaction: This three-item scale was generated by authors of the present paper. In the present study, the composite reliability was approximately .67. An example item is, "I was satisfied with my most recent job." An additional note – somehow, two copies of the work satisfaction scale were included in the survey. Thus, there were two sets of answers for each item per participant. To solve this problem, the averages of each item were calculated for each participant. Correlations between each pair of items supports this – item #1: $r = .79$; item #2: $r = .60$; item #3: $r = .64$.

Entitlement: This four-item scale was generated by authors of the present paper. In the present study, the composite reliability was approximately .79. An example item is, "Employers should understand if I show up late for an interview because I have a disability."

Job Search Self-Efficacy: Eight items from Ellis and Taylor's (1983) job search self-esteem scale was used in the present study. According to Ellis and Taylor, past research has found that the original 10-item scale has a Cronbach's alpha of approximately .75, a test-retest reliability of .85, and has shown convergent validity with other constructs such as self-esteem (Ellis & Taylor report that these correlations range

from .56 to .83). Schaffer and Taylor also found that job search self-efficacy predicted active job search behavior – this information lends support to the predictive validity of job search self-efficacy. Eight of the 12 items from Schaffer and Taylor (2012) were used in the present study to assess job search self-efficacy. As will be noted in the results section, there were problems with three of the job search self-efficacy items – thus, only five items were used. In the present study, the composite reliability was approximately .82.

Happiness: Côté, Gyurak, and Levenson's (2010) six-item well-being scale was used to measure happiness in the present study. Côté et al. found the Cronbach's alpha for this measure to be approximately .66. In the present study, the composite reliability was approximately .53. Evidence of convergent validity also exists; according to Côté et al., this scale was highly correlated with the Satisfaction with Life scale (by Diener et al., 1985), $r = .62$, and with a second group of participants who completed their well-being scale, $r = .67$. An example item is, "Most of the time I feel happy."

Core Self-Evaluation (CSE): Twelve items from Judge, Erez, Bono, and Thoresen's (2003) CSE scale were used to assess participants' level of CSE. In the present study, the composite reliability was approximately .80. Judge et al. (2003) report similarly high Cronbach's alpha for this measure – they found the alpha to range from .81 - .87. Judge et al. (2003) also report the test-retest reliability for this measure to be approximately .81, and that it possesses adequate criterion-oriented validity. Past research has also provided support for the four latent factor structure of CSE (self-esteem, generalized self-efficacy, locus of control, and neuroticism) – for example, Judge et al. (2002) found that these four

factors are very highly correlated, and provide evidence of low discriminant and high convergent validity. An example item from this measure is, “When I try to do something, I generally succeed.”

|

CHAPTER THREE

RESULTS

Refer to Table 1.9 for the average variance extracted (AVE) and correlations for selected variables.

Variable	1	2	3	4	5	6	7
1. Core self-evaluation	0.52						
2. Work satisfaction	0.09	0.66					
3. Entitlement	-0.44*	-0.09	0.70				
4. Happiness	0.78*	0.09	-0.33*	0.42			
5. Job search self-efficacy	0.34*	0.25*	-0.35*	0.10	0.70		
6. Social skills	0.11	0.14	0.05	-0.06	0.29*	0.55	
7. Family support	0.24*	-0.08	0.09	0.10	0.08	0.08	0.71

Note: * $p < .05$; Average Variance Extracted (AVE) in diagonals

Table 1.9: Average Variance Extracted (AVE) and Inter-Correlations for Selected Variables

Note Concerning Hypotheses 1, 2, and 3

It is recommended that poisson regression be used for count data that does not follow a normal distribution (Kivimäki, Vahtera, Thompson, Griffiths, Cox, & Pentti, 1997). Thus, two analyses were conducted each for hypotheses 1, 2, and 3 – one analysis was a poisson regression and the other was a *t*-test/analysis of variance (ANOVA). This was done to determine whether or not skewness of the data affected the interpretation of results for each hypothesis. Because these analyses resulted in similar outcomes for each hypothesis, only the results of the *t*-test/ANOVA are reported.

Hypothesis 1

Disabled individuals who report experiencing one or more barriers in their job search will work fewer hours than disabled individuals who report having no barriers.

An independent samples *t*-test was performed to test hypothesis 1. To create a dichotomous independent variable (IV) for this analysis (either experiencing barrier(s) or not experiencing any barrier(s)), a new variable was created. Participants who reported experiencing one or more barriers in their job search (e.g., family, transportation, education, health, criminal background) were assigned a value of '1' for the group membership variable; participants who did not report experiencing any barriers in their job search were assigned a value of '0.' Current work hours, the dependent variable (DV) in this analysis, consisted of participants' self-reported number of hours worked (weekly).

Results revealed that participants who did not experience any job search barriers ($M = 37.08$, $SD = 11.07$) did not work significantly more hours per week than participants who did report experiencing one or more job search barriers ($M = 34.24$, $SD = 11.69$), $t(89) = 1.12$, $p > .05$, $d = .25$. Unfortunately, these results do not support hypothesis 1. This may be due to the low number of participants included in this analysis – as will be discussed in the following section, there were many problems with participants leaving surveys vastly under-completed.

Hypothesis 2

Individuals who identify as having a mental disability will be more likely to work a fewer number of hours, as compared to individuals with other types of disabilities.

A one-way analysis of variance was used to test the second hypothesis. For this hypothesis, disability group membership served as the predictor variable. Disability group

membership was divided into three levels – (1) only mental disability(ies), (2) only physical disability(ies), and (3) mental and physical disabilities. Blindness, Deafness, Physical and Neurological disabilities were categorized as physical disabilities. Developmental, Learning, and Emotional disabilities, as well as ADD/ADHD, were categorized as mental disabilities. Participants who declined to indicate which disability they experienced were not assigned to any of the above three described categories of disability. As with hypothesis 1, the dependent variable for this analysis was number of hours worked per week.

Participants in each of the three categories of disability worked a similar number of hours, with participants with a physical disability working the most number of hours among all participants – physical disability only ($M = 36.13$, $SD = 11.37$), physical and mental disability ($M = 34.47$, $SD = 11.32$), and mental disability only ($M = 32.22$, $SD = 11.06$). However, disability membership did not significantly affect number of hours worked, $F(2, 86) = .96$, $p > .05$, $\eta^2 = .02$. These results do not support hypothesis 2. Again, however, problems with power due to small sample size may be responsible for these outcomes.

Hypothesis 3

Individuals who identify as having a mental disability will be more likely to earn a lower annual income, as compared to individuals with other types of disabilities. A one-way ANOVA was used to analyze data pertaining to the third hypothesis. As with hypothesis 2, this hypothesis used disability group membership as the independent variable. Annual income was the dependent variable of interest for hypothesis 3; income

is divided into eight brackets. Each bracket increased by \$15,000 (except for the first two brackets, which are 'Less than \$10,000' and '\$10,000 to less than \$15,000'). Because of the number of brackets included for this variable, it was treated as a continuous variable. Brackets were assigned a number, with brackets containing higher income receiving larger corresponding numbers (brackets were assigned values 1-8); for example, the bracket containing the interval \$30,000-\$45,000 was assigned the number 4.

Disability membership did not significantly affect annual income among participants, $F(2, 138) = .36, p > .05, \eta^2 = .005$. Participants who only suffered from a mental disability made, on average, approximately \$15,000-\$30,000 ($M = 3.55, SD = 2.50$), as did participants who only suffered from physical disabilities ($M = 3.84, SD = 2.41$). Participants with both physical and mental disabilities earned the largest annual income, \$30,000-\$45,000 ($M = 4.00, SD = 2.54$), although this amount was not significantly larger than income earned from the other two disability membership groups. Thus, hypothesis 3 was not supported.

Problems with Common Method Bias

A mono-method multi-trait analysis was conducted in EQS 6.2 to remove method variance from latent variables (work satisfaction, entitlement, happiness, job search self-efficacy, CSE, social skills, and family support) used in hypotheses 4 – 7 and the research question (Byrne, 2006). Before progressing to a structural model, a measurement model was tested to determine if method effects were present. Imputation was conducted using the EM method (Byrne, 2006).

An initial model that contained only latent factors and their corresponding observed items was first examined. Due to a large Mardia's coefficient (even after removing cases that contributed to the increased value for Mardia's coefficient), robust values were used when reporting fit indices for the measurement model (Byrne, 2006). A latent method factor was then added to the initial model to determine if the method factor resulted in approved fit indices. A scaled Satorra-Bentler chi-square difference test was used to determine if the method factor resulted in improved fit for the model (Satorra & Bentler, 2001). It was found that the method factor resulted in a significant chi-square decrease from the model without the method factor – this provides support for the inclusion of the method factor, and suggests that a method effect is present in the data.

After looking at the loadings for each item to its corresponding factor, three items from job search self-efficacy were deleted due to issues with low reliability. Additionally, in order to address multidimensionality in items, covariances were added to the model. Three of these covariances were within factors (entitlement, CSE, job search self-efficacy) and three were between factors (CSE, social skills, job search self-efficacy, entitlement). These changes resulted in fit indices within recommended ranges (Byrne, 2006). Refer to Table 1.10 for fit indices corresponding to each version of the measurement model. Upon examination of the final measurement model, it was found that CSE and happiness had the most problems with method bias – refer to Table 1.11 for factor loadings of all observed items. One reason that CSE and happiness may have large method effects may be related to self-presentation; that is, individuals may want to appear confident and happy, even if they do not truly feel that way. Another explanation for this

outcome is related to negatively worded items, of which the CSE measure in the present study has many. Marsh, Scalas, and Nagengast (2010) describe how positively and negatively worded items within one scale may not measure the same thing – negatively worded items may add method variance. To quote Schmitt and Allik (2005), as cited in Marsh et al. (2010), “in many cultures the answers to negatively worded items are systematically different from the answers to positively worded items” (p. 369). For example, Marsh et al. (2010) found that the Rosenberg self-esteem scale (which includes negatively worded items) is not a uni-dimensional construct as previously thought, but is composed of one trait factor and a method factor. Hypotheses 4 – 7, as well as research question 1, were tested within EQS while controlling for method variance among all latent factors.

Model	Standardized RMR	CFI	RMSEA	RMSEA CI
Initial Model	0.08	0.81	0.07	(0.06, 0.08)
Method Model	0.07	0.86	0.06	(0.05, 0.07)
Revised Method Model	0.06	0.90	0.05	(0.05, 0.06)

Table 1.10: Measurement Model Fit Indices

Item	Factor 1 (CSE)	Factor 2 (WS)	Factor 3 (E)	Factor 4 (H)	Factor 5 (JSSE)	Factor 6 (SS)	Factor 7 (FS)	Factor 8 (Method)
CSE1	0.360							0.745
CSE2	0.540							0.473
CSE3	0.387							0.647
CSE4	0.640							0.377
CSE5	0.258							0.644
CSE6	0.732							0.247
CSE7	0.264							0.804
CSE8	0.750							0.334
CSE9	0.271							0.551
CSE10	0.651							0.512
CSE11	0.298							0.667
CSE12	0.702							0.500
WS1		0.458						0.369
WS2		0.916						0.401
WS3		0.495						0.281
E1			0.795					0.144
E2			0.603					0.117
E3			0.638					0.038
E4			0.729					0.025
H1				0.471				0.770
H2				0.241				0.778
H3				0.351				0.853
H4				0.356				0.850
H5				0.236				0.783
H6				0.690				0.249
JSSE3					0.510			0.286
JSSE5					0.782			0.471
JSSE6					0.684			0.360
JSSE7					0.924			0.333
JSSE8					0.497			0.428
SS1						0.586		0.358
SS2						0.539		0.158
SS3						0.478		0.363
SS4						0.708		0.298
SS5						0.487		0.407
SS6						0.549		0.468
SS7						0.486		0.252
FS1							0.687	0.507
FS2							0.707	0.532
FS3							0.744	0.501

Note: CSE = core self-evaluation; WS = work satisfaction; E = entitlement; H = happiness; JSSE = job search self-efficacy; SS = social skills; FS = family support

Table 1.11: Factor loadings for selected variables

Hypothesis 4

Individuals who identify as having a mental disability will be more likely to have lower levels of work satisfaction, as compared to individuals with other types of

disabilities. As with hypotheses 2 and 3, the independent variable for this hypothesis was disability group membership (only mental disabilities, only physical disabilities, mental and physical disabilities). The dependent variable was work satisfaction; work satisfaction items were answered on a 1-5 point scale, where 1 = *strongly disagree* and 5 = *strongly agree*.

Disability membership did not significantly affect work satisfaction, $z = .375, p > .05$. Individuals with only physical disabilities reported the highest levels of work satisfaction ($M = 4.35, SD = .67$), followed closely by the mental and physical disability group ($M = 4.33, SD = .67$) and only mental disability group ($M = 4.09, SD = .84$). Unfortunately, these results do not support hypothesis 4.

Research Question 1

Will visibility of disability affect perceptions of entitlement? The IV for this research question was disability visibility (“Is your disability visible to others at first glance?”), which categorizes participants into two groups (yes/no). The DV for this analysis was entitlement, which is a continuous variable that is scored on a 1-5 point scale (1 = *strongly disagree*, 5 = *strongly agree*).

Results of the analysis revealed that the visibility of participants’ disabilities did not significantly affect opinions concerning entitlement, or special treatment, in the workplace, $z = .10, p > .05$. Participants with no visible disabilities had similar entitlement scores ($M = 2.67, SD = .86$) as participants with visible disabilities ($M = 2.67, SD = 1.14$). Once again, results from the current analysis fail to provide support for this research question.

Hypothesis 5

Among individuals with disabilities, CSE will positively predict levels of job search self-efficacy. For this analysis, CSE served as the IV and job search self-efficacy served as the DV of interest. Job search self-efficacy was measured on a 1-5 point scale (1 = *Strongly Disagree*, 5 = *Strongly Agree*). Before the analysis was conducted, three cases (outliers) were filtered out of the data file.

Results of the analysis indicated that CSE significantly affected job search self-efficacy, $z = 3.69$, $p < .05$. Thus, results from this analysis support hypothesis 5.

Hypothesis 6

Social skills, family social support, CSE, and education will positively affect participants' happiness. Only main effects are of interest in this hypothesis; no interaction effects will be examined. Additionally, a new education variable, which contained four different education levels, was created; this was done to help create more equal variances among all levels of education (the original education variable was divided into 12 education levels, which caused some problems with homoscedasticity). The DV for this hypothesis, happiness, was measured on a 1-5 point scale (1 = *Strongly Disagree*, 5 = *Strongly Agree*).

CSE was the only predictor variable found to have a significant main effect on happiness, $z = 5.87$, $p < .05$. Support from family, $z = -.64$, $p > .05$, social skills, $z = -1.66$, $p > .05$, and education, $z = -.32$, $p > .05$, did not significantly affect happiness levels of participants. Mean happiness scores were similar for all four education levels – (1) high school or below ($M = 3.43$, $SD = .69$), (2) some college ($M = 3.35$, $SD = .72$), (3)

Bachelor's degree and/or some graduate school ($M = 3.61$, $SD = .77$), and (4) Master's degree or Ph.D. ($M = 3.75$, $SD = .56$). Hypothesis 6 was only partially supported.

Hypothesis 7

CSE, social skills, family social support, and education will positively affect participants' work satisfaction. This hypothesis included the same IVs as hypothesis 6, but examined work satisfaction as the DV (not happiness). Work satisfaction was measured on a 1-5 point scale (1 = *Strongly Disagree*, 5 = *Strongly Agree*).

None of the IVs were found to significantly predict work satisfaction – CSE, $z = .89$, $p > .05$; social skills, $z = 1.30$, $p > .05$; family support, $z = -1.38$, $p > .05$; education, $z = -.08$, $p > .05$. Mean work satisfaction scores were similar for all four education levels – (1) high school or below ($M = 4.39$, $SD = .58$), (2) some college ($M = 4.12$, $SD = .71$), (3) Bachelor's degree and/or some graduate school ($M = 4.37$, $SD = .64$), and (4) Master's degree or Ph.D. ($M = 4.63$, $SD = .66$). Thus, hypothesis 7 was not supported.

CHAPTER FOUR

DISCUSSION

The present study sought to explore the experiences and feelings of disabled individuals, an area of the disability literature where there is a paucity of research (e.g., Fevre et al., 2013). In order to accomplish this goal, the present study focused on examining how factors such as family social support, social skills, and core self-evaluations affected perceived outcomes of disabled individuals, such as happiness and entitlement. By doing so, we hope to transform insights from the present study into actionable recommendations for disabled individuals – these recommendations will be discussed below in the ‘Theoretical and Practical Implications’ subsection.

As noted in the above literature review, the term ‘disability’ is a societal construct with an extremely negative connotation (Wax, 2014). Individuals with impairments who are ‘marked’ with this label often have to face discrimination associated with work and everyday life (Cramm et al., 2013). Additionally, the lens through which our society views disability (i.e., the medical model of disability; Areheart, 2008) continues to perpetuate the negative stereotypes associated with disability and affects the ways in which laws meant to help those with disabilities are interpreted. In other words, disabled individuals are often forced to choose between working or receiving important disability benefits (Areheart & Stein, 2015). As described in the literature review, our society has come to associate the term ‘disability’ with being unable to work – individuals who are able to work (regardless of if they have a disability or not) are seen as ‘non-disabled’ – this dichotomization perpetuates negative experiences of disabled individuals. Further

research is needed to help non-disabled individuals understand the problems, opinions, perceptions, and experiences of disabled individuals.

The first hypothesis in the present study was meant to assess whether or not barriers experienced during a job search, such as problems with family, transportation, education, health, and criminal background, affected the number of hours participants worked each week. The relationship between job search barriers and number of hours worked was of interest because it is possible that disabled individuals may be less successful at finding and gaining employment (full or part-time) if they must deal with issues that hinder their ability to search for employment. Indeed, past research (e.g., Areheart & Stein, 2015) has documented the numerous bottlenecks, one of which is being labeled as disabled, that prevent disabled individuals from gaining employment.

In the present study, it was found that participants who experienced one or more job search barriers did not work significantly fewer hours than those participants who did not experience any barriers when looking for a job. While this is actually a positive result, these results may be due to the small number of participants included in this analysis. It is also possible that the manner in which job search barriers were categorized affected the outcomes for this hypothesis.

Of note is the fact that the standard deviations were quite large for both individuals who experienced job search barriers as well as individuals who did not experience job search barriers. This suggests that there is a large amount of variability in number of hours worked for all participants, whether or not they experienced job search barriers. It is possible that a moderator or mediator, such as confidence or support from

others, is responsible for the wide range of hours worked among all participants. For example, even if a disabled individual did not experience any barriers to their job search, such as a lack of education or criminal background, it is possible that they may lack the confidence to look for a job – this would then, logically, affect the likelihood of obtaining employment, which would affect number of hours worked. On the other hand, it is possible that prior rejection from jobs may inhibit disabled individuals from looking for employment. If disabled individuals have felt that, in the past, employers rejected them from potential jobs because they had a disability, they may not have much motivation to search for jobs in the future – regardless of if they had available transportation, a good educational background, no criminal background, no serious health issues, were financially sound, and had support from family and friends. Additionally, another variable, amount of job experience, may account for the variability in number of hours worked. During data collection, several participants noted within the survey that felt their lack of experience in their field hampered their ability to find jobs – one participant noted that he/she felt that he/she might be overqualified in their field.

Hypotheses 2, 3, and 4 focused on whether different categories of disabilities affected overall work satisfaction, income, and number of hours worked (weekly). For these hypotheses, participants were divided into one or three groups – those with a mental disability (developmental disability, learning disability, emotional disability, and ADD/ADHD), those with a physical disability (blindness, deafness, physical disability, and neurological disability), and those with both a mental and physical disability (the division of disabilities was arbitrary). Contrary to prior expectations, no differences in

work satisfaction, income, or number of hours worked were found to exist between these three groups. Issues with inadequate power may explain the results of hypothesis 2 (hours worked) – however, hypotheses 3 (income) and 4 (work satisfaction) had enough participants for desired power levels.

In addition to problems with appropriate power levels, there are other potential reasons for why hypotheses 2, 3, and 4 were not significant. One reason relates to an issue that will be discussed in the ‘Limitations’ subsection below; it is possible that participants did not fully trust the purpose of our survey, and thought that their answers may be used against them. For example, participants may have thought that they would lose their benefits if they reported working too many hours – this may cause them to not correctly record how many hours they worked per week. Additionally, as with hypothesis 1, the standard deviations for hypotheses 2 and 3 were quite large – it is possible that some unmeasured variable, such as amount of job training or lack of proper work attire, is needed to account for this variability. It is also plausible that the manner in which disabilities were categorized (mental disability only, physical disability only, mental and physical disability) affected the outcome for each hypothesis. The disabilities were categorized in this manner because many participants listed multiple disabilities, and, of these participants, they had many variations of disabilities. Categorizing participants into three groups used in the present study seemed to be the most feasible and logical approach to take; however, this may not be the best categorization method, and another categorization method may result in different outcomes for hypotheses 2, 3, and 4.

Although results from hypothesis 2 were not significant, the means for each of the disability groups were, generally, trending in expected directions. That is, those with only physical disabilities worked the most number of hours, while those with only mental disabilities worked the fewest number of hours. These results are in line with previous expectations; for example, past research has found that individuals with mental illnesses are very likely to be unemployed and are also very likely to experience discriminatory behaviors in the workplace – even more so than individuals with physical disabilities (Fevre et al., 2013; Shaw et al., 2012). Thus, it makes sense that, in the present study, individuals with physical disabilities work more hours each week than individuals with mental disabilities (even if this difference is not significant).

In the present study, the mean income was between \$15,000-\$45,000 (the mean was 3.76 – the third bracket for income was \$15,000-\$30,000 and the fourth bracket was \$30,000-\$45,000). The income bracket with the highest frequency of responses among participants was the ‘Less than \$10,000’ – a total of 35 participants indicated that this income bracket reflected their current situation. This means that 26% of participants who responded to this question indicated they made less than \$10,000 – an entire 10% more than the bracket with the next largest number of responses – \$15,000 to less than \$30,000 (16%). Furthermore, 55% of participants in the present study indicated that they made less than \$30,000 (the frequencies of the lowest three income brackets were combined for this estimate).

Estimates of national wages earned in the United States for 2014 (“Measures of Central Tendency,” 2014) report that the mean net wage earned was \$44,569.20 and that

the median net wage was \$28,851.21. Estimates of income for disabled individuals from the present study appear to be below the national mean wage, since more than half of participants earned less than \$30,000. On the other hand, it may be more useful to use the median wage for comparison purposes due to skewness present in the Social Security report's data; in that case, it would be necessary to use the \$28,851 estimate. Still, almost 40% of disabled individuals in the present study earned less than \$15,000, which is, again, below national estimates. This information corroborates results found in other studies concerning disparities in income between disabled and non-disabled individuals (e.g., Burkhauser & Stapleton, 2004; Fevre et al., 2013). Additionally, according to the U.S. Census Bureau, 28.5% of disabled individuals (ages 18-64) lived in poverty, while only 12.3% of non-disabled individuals (ages 18-64) lived in poverty during 2014 (DeNavas-Walt & Proctor, 2015).

Further exploration of income revealed that there were income differences between individuals from the various locations at which data was collected (there were a total of four locations). Participants at the southeastern university had the lowest annual income (\$10,000-\$15,000); participants at one of the southeastern disability organizations earned an average of \$15,000-\$30,000 per year; participants at another southeastern disability organization and from Amazon Mechanical Turk reported earning an average \$30,000-\$45,000 per year. Because individuals included in the present study came from such different backgrounds, it is possible that these differences were responsible for some of the outcomes. For example, although participants at the university setting had the lowest income, it is plausible that they were fundamentally different than the other

participants (in terms of financial support from others, resources available to them as students, career center training, etc.). University students with disabilities may have more support from parents and counselors and may be offered job preparation training to which other participants, who are not students, may not have access. Because of these possible differences between participants, it should be noted that any significant findings in the present study are of especial importance – these findings were found to hold true for a very diverse sample.

Also of interest is that among all three categories of disability (physical, mental, physical and mental), participants possessed similar levels of work satisfaction. These results were unexpected, given that mental disabilities (e.g., mental illness) are most often associated with discrimination suits in the workplace (Lee, 2011) and that individuals with mental illness are much, much more likely to encounter negative situations in the workplace (Fevre et al., 2013). In general, it is surprising that work satisfaction was so high among all participants, given the long history of discrimination in workplace for disabled individuals in the United States (Bates-Harris, 2012; Wax, 2014). These results do not appear to be due to method bias (e.g., wanting to make a good self-impression) associated with work satisfaction, either.

Another interesting outcome of the present study concerns entitlement perceptions as they relate to different categories of disabilities; in this case, visible vs. invisible disabilities. On the whole, participants in the present study did not think that they deserved special treatment in the workplace because of their disabilities; there were also no differences in entitlement perceptions between individuals with visible vs. invisible

disabilities. This outcome is especially intriguing; due to the lack of research on this topic, these results are an important first step to deeper examination of disabled individuals' personal feelings and opinions. And, once again, these results are not likely due to method bias (such as wanting to make a positive self-impression).

These results related to entitlement perceptions are interesting for an additional reason – in our society, individuals often think that certain services supported by the government, such as welfare and SSDI, are riddled with fraud. Individuals who use these services are often met with scorn, as they are perceived by others to be “cheating the system.” For example, a United Kingdom article (Baumberg, Bell, & Gaffney, 2012) describes how the media and politics play a major part in perpetuating negative attitudes about receiving benefits – this article found that a large portion of news articles in the United Kingdom centered around perceived fraud in the benefits system. The situation is made no better when politicians, such as Rand Paul, make statements such as, “Over half of the people on disability are either anxious or their back hurts. Everyone in this room knows somebody who’s gaming the system” (Diamond, 2015). However, there is actually very little benefits fraud, both in the United States and the United Kingdom (Baumberg, Bell, & Gaffney, 2012; Schnurer, 2013) – some estimates are that fraud only accounts for approximately 1% of all disability cases (Diamond, 2015). Additionally, the people that actually need government benefits, such as individuals who live in poverty, are very unlikely to be the culprits in fraud cases – it’s usually people who are well-off financially who are responsible (Schnurer, 2013). Results concerning entitlement perceptions from the present study help to counteract negative attitudes about disabled individuals and

disability benefits fraud; that is, the fact that disabled individuals were found to have low levels of entitlement should help others to realize that disabled individuals who use benefits might actually **need** the assistance, and are not just using resources out of greed.

CSE has been found to predict a number of outcomes, such as job satisfaction, life satisfaction, stress, and job performance (Judge, 2009; Judge & Bono, 2001). The present study was no different; CSE significantly predicted job search self-efficacy and happiness among disabled participants. This specific outcome is noteworthy for two reasons: (1) due to the noted lack of literature that simultaneously examines CSE and disabled individuals (see the ‘Core self-evaluations’ section in the above literature review) and (2) these results were found even after method variance was controlled for in the analyses. CSE not only has the potential to help non-disabled individuals understand experiences of disabled individuals, but, as noted by Smedema (2014), developing programs that are aimed at increasing individuals’ CSE may help to improve work and family outcomes for disabled individuals. The results of hypothesis 5 underline the potential usefulness of spotlighting CSE in rehabilitation programs. For example, increasing disabled individuals’ CSE and overall confidence may enable them to pursue jobs they would not have previously pursued, be able to voice their true opinions and feelings to family members, or be able to stand up for themselves in the workplace.

Borrowing ideas set forth in Conservation of Resources theory (Hobfoll, 1989, 2001), we can posit that CSE is a necessary resource for individuals. Results from the present study help to show that individuals who have more confidence in themselves are more likely to be happy and feel that they are capable of looking for new jobs. It is

interesting to observe that social skills and family support did not predict either work satisfaction or happiness – this is most likely due to the fact that these two variables exhibited method bias.

Theoretical and Practical Implications

Results from the present study provide an opportunity to create actionable, practical recommendations. Our recommendations are listed below.

- (1) *Create training programs designed to increase confidence.* This recommendation is based on a variety of findings from the present study. For example, core self-evaluations was found to significantly predict specific outcomes, such as job search self-efficacy and happiness. Increasing confidence levels of disabled individuals may give these individuals the courage to continue searching for jobs (even when there are obstacles in their way) and to even stand up to individuals who may be treating them disrespectfully. Individuals with mental illness may especially benefit from this confidence training, as they were found to work the least number of hours in the present study – becoming more confident may allow them to continue working in the face of adversity.
- (2) *Provide rehabilitation counselors with training to teach them how to help disabled individuals who are experiencing barriers to their job search.* This recommendation is based on results from hypothesis 1 – although there were no significant differences in number of hours worked between individuals who experienced job barriers and those that did not experience job barriers, it is still possible that problems encountered during the job search keep disabled individuals from being able to obtain the jobs

they want or need – especially if they have low confidence! These barriers could affect the number of hours at a job worked through a number of mechanisms, such as confidence or motivation. But, regardless of the mechanism, rehabilitation counselors should be able to help their clients overcome specific issues during the job search.

Limitations

Participants who completed the survey on Amazon Turk provided the most complete data. It was very difficult to gather data from participants at the other locations. Approximately half of all surveys from these other locations had to be omitted due to incomplete data (i.e., participants would just click through to the end of the survey, without filling out any questions). One reason for this lack of data from these locations may be related to trust. Although researchers from the present study had the support of the directors of these disability organizations, and the directors were the individuals who actually distributed the survey to potential participants, it is possible that participants did not trust that their answers would be kept confidential. It is also possible that participants were offended by questions in the survey used. For instance, one director with whom we collaborated shared the survey with her colleagues – one colleague was apparently very offended by one item (“Do you have a caregiver?,” which we had already gotten approval for from other directors).

Because answers to the survey were obtained from a single source (the participants), there were method effects present – this affected unobserved (latent) variables, such as CSE and work satisfaction. The two variables that exhibited the most

method bias were happiness and CSE; as discussed in the results section, this is likely due to some issue related to self-impression. In other words, participants may have wanted to appear happy and confident.

It must be noted that our sample was not only composed of university students. Although university students were a part of our sample, participants also included working individuals throughout the United States – in fact, only a small number of participants were students in the present study. This is important, as problems with sample representativeness is a common limitation seen in many research studies whose participants include university students.

Due to these limitations, we have a few recommendations for future studies. The first recommendation relates to the issue of trust – it may be possible to get richer information if a qualitative study were undertaken. By directly interviewing individuals, researchers may be better able to form relationships with participants, which may result in participants being more willing to discuss their opinions and thoughts concerning issues facing the disabled population. Using semi-structured interviews may also enable researchers to identify variables that are responsible for problems related to gaining employment and handling issues in the workplace – this may then allow the researchers to develop actionable, reasonable recommendations to better help this underserved population.

A second recommendation for future studies would be to further examine different variables that may hinder disabled individuals' ability to search for employment. It is important to study the *severity* of potential job search barriers, in addition to what

variables serve as barriers to the job search – this may be achieved through semi-structured interviews. It is also suggested that researchers develop a more thorough job search barrier classification system than the one used in the present study. Examining which types of barriers have the most negative impact on the job search process (e.g., lack of transportation) may enable organizations to better determine ways in which to help disabled individuals attain employment.

Conclusion

Although there were some limitations associated with the present study, its results still hold merit. The present study attempted to examine disabled individuals' experiences and feelings, which is an understudied area in the literature (Fevre et al., 2013). Understudied variables in the employment and disability literature, such as CSE and invisible/visible disabilities (Wax, 2014), were also examined.

Based on findings from the present study, it appears that CSE help with job-specific confidence when looking for employment, as well as help disabled individuals to be happy, even during tough times. Vocational counselors and other professionals may want to develop services aimed at helping disabled individuals increase and maintain their confidence, such as learning appropriate methods for interacting with others in the workplace.

Future research should examine the mechanisms through which certain variables, such as social skills, affect employment and other outcomes. Additionally, future research should continue investigating the experiences, feelings, and perceptions of disabled individuals, as past literature has noted a dearth of research in this area. As noted in the

literature review, “the vast majority of people *with* disabilities are *both* disabled and able (with or without reasonable accommodation) to work” (Areheart & Stein, 2015; p. 890-891). Individuals with impairments deserve to be treated just like non-impaired individuals – thus, more research is needed to help this under-served population.

APPENDICES

Appendix A

Measures used in the present study

- (A) Social Skills *(Ferris et al., 2001)*
- 1 I find it easy to put myself in the position of others
 - 2 I am keenly aware of how I am perceived by others
 - 3 In social situations, it is always clear to me exactly what to say and do
 - 4 I am particularly good at sensing the motivations and hidden agendas of others
 - 5 I am good at making myself visible with influential people in my place of employment (if currently working)
 - 6 I am good at reading others' body language
 - 7 I am able to adjust my behavior to any situation
- (B) Family Support *(Tate, 1996)*
- 1 My family makes my work – life easier
 - 2 My family is easy to talk to
 - 3 My family can be relied upon
- (C) Work Satisfaction *(Generated by authors in present study)*
- 1 I was satisfied with my most recent job
 - 2 My supervisor treated me the same as my coworkers
 - 3 My coworkers treated me the same as everyone else
- (D) Entitlement *(Generated by authors in present study)*
- 1 Employers should understand if I make mistakes on the job because I have a disability
 - 2 Employers should understand if I cannot meet personal hygiene expectations because of my disability
 - 3 Employers should understand if I show up late for an interview because I have a disability
 - 4 I believe it is fair for employers to give special treatment to people with disabilities
- (E) Job Search Self-Efficacy *(Ellis & Taylor, 1983)*
- 1 I have a good idea of the opportunities in my job market
 - 2 There are a high number of jobs for people like me in today's job market
 - 3 I feel comfortable applying for jobs online (i.e., uploading resumes, filling out applications)
 - 4 I can easily find information on a company or a job that I am interested in
 - 5 Overall, I expect to be successful in my job search
 - 6 I am confident in my ability to make a good impression in job interviews
 - 7 Potential employers view me as well qualified
 - 8 I think I am a highly employable member of my occupational field
- (F) Happiness *(Côté et al., 2010)*
- 1 I think I'm about as happy as others seem to be
 - 2 It often seems my life has meaning
 - 3 Most of the time I feel happy
 - 4 The future seems bright to me
 - 5 My daily life is full of things that keep me interested
 - 6 I feel stressed in my daily life
- (G) Core Self-Evaluations *(Judge et al., 2003)*
- 1 I am confident I get the success I deserve in life
 - 2 Sometimes I feel depressed
 - 3 When I try to do something, I generally succeed
 - 4 Sometimes when I fail I feel worthless
 - 5 I complete tasks successfully
 - 6 Sometimes, I do not feel in control of my work
 - 7 Overall, I am satisfied with myself
 - 8 I am filled with doubts about my ability to do things
 - 9 I determine what will happen in my life
 - 10 I do not feel in control of my success in my career
 - 11 I am capable of coping with most of my problems
 - 12 There are times when things look pretty bleak and hopeless to me

Appendix B

Revised Job search self-efficacy scale

Job Search Self-Efficacy *(Ellis & Taylor, 1983)*

- 1 I feel comfortable applying for jobs online (i.e., uploading resumes, filling out applications)
- 2 Overall, I expect to be successful in my job search
- 3 I am confident in my ability to make a good impression in job interviews
- 4 Potential employers view me as well qualified
- 5 I think I am a highly employable member of my occupational field

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