Moving Beyond Misperceptions: The Provision of Workplace Accommodations

BRIGIDA HERNANDEZ
YAI Network, New York, New York, USA

KATHERINE MCDONALD
Portland State University, Portland, Oregon, USA

NICOLE LEPERA, MONNA SHAHNA, T. ARTHUR WANG, and JOEL M. LEVY
YAI Network, New York, New York, USA

This mixed-methods study examined the provision of workplace accommodations in the health care, hospitality, and retail sectors. First, focus groups with administrators from each sector revealed that accommodations costs were viewed as minimal (although frontline managers were perceived as having misperceptions). Second, the provision of accommodations as documented through human resources records for health care and hospitality indicated that accommodations were infrequent, not costly, and provided to employees with disabilities. Finally, retail employees (irrespective of disability status) reported many more accommodations than health care and hospitality workers. To dispel misperceptions related to accommodations, education is critical and social workers are well-positioned for this role.

KEYWORDS accommodations, Americans with Disabilities Act, disability, employment, mixed methods

Poor employment outcomes among members of the disability community have been well documented (Rehabilitation Research and Training Center on Disability Demographics and Statistics, 2007; Taylor, 2000). Factors contributing to the unemployment of adults with disabilities are often varied.

Address correspondence to Brigida Hernandez, Director of Research, YAI Network, 460 West 34th Street, New York, NY 10001. E-mail: brigida.hernandez@yai.org
and interrelated—job readiness, academic attainment, reliance on cash and medical benefits, transportation, community accessibility, and negative employer attitudes (Hernandez et al., 2007; Levy, Jones Jessop, Rimmelman, & Levy, 1992; Loprest & Maag, 2001; National Council on Disability, 2007). For the purpose of this study, particular attention is paid to the provision of workplace accommodations to individuals with and without disabilities. Accommodations are a critical aspect of successful employment for many during the preemployment phase as well as when employed and performing essential job functions.

Under the employment provisions (Title I) of the Americans with Disabilities Act (ADA, 1990), a reasonable accommodation is a modification to a job or adjustment to the work environment that enables qualified individuals with disabilities to participate in the application process or enables employees with disabilities to perform the essential functions of their jobs. Reasonable accommodations also include modifications that ensure that qualified individuals with disabilities have rights and privileges in employment equal to those of employees without disabilities (e.g., insurance coverage, cafeteria usage).

There are many examples of reasonable accommodations, including making facilities readily accessible and usable; job restructuring; work schedule modifications; job reassignment; equipment or device acquisition; modification of examinations, training materials, or policies; and provision of qualified readers or interpreters. Under the ADA, employers are not required to provide an accommodation if it poses an undue hardship to the employer. An undue hardship occurs when the accommodation is difficult, expensive, disruptive, or will fundamentally change the nature of the position. It is also important to note that only employers with 15 or more employees are required to provide reasonable accommodations to qualified individuals with disabilities (U.S. Equal Employment Opportunity Commission, 2008).

Ultimately, the ADA is a powerful piece of legislation that requires many employers to provide reasonable accommodations to decrease workplace discrimination. Not surprisingly, increased attention is being paid to employers’ perceptions of and experiences with this law. Specifically, two areas have received considerable attention: cost of accommodations and request for and provision of accommodations.

**COST OF ACCOMMODATIONS**

In a literature review, Hernandez, Keys, and Balcazar (2000) found that employers were concerned about the cost and complexity of accommodations and their ultimate impact on the businesses’ bottom line. Even when the cost of accommodating employees with disabilities was less than $100,
employers were still likely to express concern about the cost or difficulty of providing reasonable accommodations (Unger, 1999). In a recent report issued by the U.S. Department of Labor (Domzal, Houtenville, & Sharma, 2008), 3,797 senior executives were interviewed about their perspectives on workers with disabilities. For participants representing small (5-14 workers) and midsize (15-249 workers) companies, the cost of employing people with disabilities was a frequently cited concern. In particular, not knowing the cost of accommodations was a major concern associated with hiring individuals with disabilities. Moreover, irrespective of company size, the cost of accommodations was noted as a significant challenge to advancing workers with disabilities (surpassing attitudes of customers, coworkers, and supervisors).

Despite reported concerns related to the cost of accommodations, such concerns might not be fully warranted. According to the Job Accommodation Network (JAN), 1,182 employers reported that nearly half (46%) of the accommodations implemented were no-cost, with 45% experiencing a one-time median cost of $500 (Office of Disability Employment Policy [ODEP], 2009). In a telephone survey of 502 randomly selected private sector employers, Dixon, Kruse, and Van Horn (2003) found that only 14% reported that accommodations were more costly than anticipated, whereas 50% viewed the modifications as less costly or about what they expected. Almost two thirds (61%) of respondents indicated that the average cost of the accommodation was $500 or less, with 29% reporting the cost as less than $100. Similarly, Sears, Roebuck, and Company reported that nearly all of the 436 accommodations reported from 1978 to 1996 required little to no cost, with the average direct cost of an accommodation between 1993 and 1996 being $45 (Blanck, 1996). The company also reported that accommodations that cost more than $1,000 were uncommon and benefited employees with and without disabilities by providing state-of-the-art technology to perform jobs productively, cost-effectively, and safely.

REQUEST FOR AND PROVISION OF ACCOMMODATIONS

Examining requests for accommodations, Price, Gerber, and Mulligan (2003) interviewed 25 individuals with learning disabilities and found that no such requests were made during their preemployment or employment phases. When asked to speculate whether accommodation requests should have been made, 22 participants reported that they were hesitant to request such assistance. Of note, more than two thirds of the participants had never heard of the ADA. In a qualitative study of 20 workers with visual impairments (Frank & Bellini, 2005), participants felt that the ADA was ineffective in helping them obtain alternate formats (e.g., Braille, readers, audio and digit recordings) of printed materials from their employers. When requests for
accommodations were made, frustrations were experienced by participants for a variety of reasons (i.e., timeliness with granting the request, lack of employer knowledge with regard to obtaining equipment).

Loprest and Maag (2001) examined the need for accommodations among people with disabilities, utilizing data from the 1994 and 1995 National Health Interview Survey—Disability Supplement. The most common accommodation need for both workers and nonworkers with disabilities was special work site features (e.g., accessible parking or transportation stops, elevators, specially designed work stations) and special work arrangements (e.g., reduced work hours for more breaks, job redesign). Among those employed, approximately three fourths reported that their needs were met, although special work site features were the most frequently cited unmet need.

From the employer perspective, the JAN conducted a survey of 778 employers and found that 273 reported implementing an accommodation after contacting JAN (Hendricks, Batiste, Hirsch, Schartz, & Blanck, 2005). The most common accommodation was changes to the work schedule (29.3%), followed by purchasing a product or piece of equipment (16.3%). Among 502 private sector employers, Dixon et al. (2003) found that modifications to the physical work environment were the most common request.

**BENEFITS OF ACCOMMODATIONS**

Typically, it is the employee with a disability who is considered the beneficiary of accommodations. However, employers stand to benefit as well (ODEP, 2009). Among 1,182 employers, JAN found that the most frequently cited direct benefits were retaining valued employees (86%), increasing employees’ productivity (71%), and eliminating costs associated with training new employees (55%). The most widely cited indirect benefits included improving colleague interaction (67%), increasing overall company morale (58%), and increasing overall company productivity (56%). Considering the monetary value of these benefits, Blanck (1996) reviewed workplace accommodations made by Sears, Roebuck, and Company and found the average administrative cost of hiring and training a new Sears employee ranged between $1,800 to $2,400, as compared to an average cost of $45 for accommodating an existing employee.

**PURPOSES OF THE STUDY**

The purposes of this study were threefold. First, we explored employers’ perceptions of accommodating workers with disabilities in the health care, hospitality, and retail sectors. Second, we examined the provision of accommodations to employees with and without disabilities from the health
care and hospitality sectors as documented through human resources (HR) records. Third, we examined the extent to which accommodations were reported by employees with and without disabilities from the retail sector. Of note, we used a mixed-methods approach (Creswell & Plano Clark, 2007). This design allowed us to improve on prior research (which typically has relied on one method) and examine the extent to which employer perceptions were in line with documented accommodations. Moreover, we were interested in gathering accommodations data on the entire workforce as too often this body of research has focused exclusively on those with disabilities. Finally, we were able to expand on this literature by including accommodations information as reported by employees from the retail sector (rather than focusing on employer-reported data).

METHOD

A participatory action research approach was used for this study, which involved collaborating with numerous stakeholders throughout the project (Balcacar et al., 2004) including disabilityworks, Chicagoland Chamber of Commerce, Chicago's Mayor's Office for People with Disabilities, and Chicago's Mayor's Office of Workforce Development. These four organizations were part of a larger initiative to improve employment opportunities for Chicagoans with disabilities; from this initiative, this study was commissioned.

For this study, three sectors were recommended by our collaborators because they were considered growth industries with viable employment opportunities for people with disabilities: health care, hospitality, and retail. Our collaborators helped us form an advisory group for each sector, which consisted of 11 company representatives who provided feedback on the design of the study and recruited companies to participate. Our collaborators were also responsible for the initial recruitment of companies. Data reported herein were extracted from a larger study examining the economic costs and benefits of workers with disabilities within the Chicago, Illinois area (Hernandez & McDonald, in press). For this study, two phases of research related to accommodations are reported: a focus group phase and a survey phase.

Focus Group Phase

Participants

The focus group phase gathered qualitative data on providing accommodations to applicants and workers with disabilities known to the employer. One focus group was held per sector (health care, hospitality, and retail), for a total of three focus groups. Participants were 21 employers from 16
companies within the health care \( (n=7) \), hospitality \( (n=5) \), and retail \( (n=4) \) sectors. Participants held upper management positions and had direct experiences with hiring processes: directors and managers of human resources \( (n=13) \), employment directors and specialists \( (n=5) \), president and CEO \( (n=1) \), vice president \( (n=1) \), and district store manager \( (n=1) \).

**Focus Group Guide and Procedures**

Developed by the researchers and collaborating organizations, the focus group guide included open-ended questions and probes. Relevant to this study, we asked administrators to consider this question: What has it been like providing accommodations to workers with disabilities? The focus groups were facilitated by the first two authors who had relevant training and experience (Morgan, 1997). Each group lasted approximately 90 minutes, was audiotaped, transcribed verbatim, and analyzed using content analysis (Miles & Huberman, 1994). Four researchers independently coded the transcriptions to identify core concepts and relationships among them. The researchers met to discuss coding agreements and disagreements and build consensus.

**Survey Phase**

**Participating Companies and Employees**

The survey phase gathered quantitative data on accommodations provided to workers with and without disabilities. Twenty-two companies were recruited initially; however, 9 withdrew their participation for the following reasons: no employees with disabilities agreed to participate, turnover with company representatives, corporate buyouts, or a lack of organizational resources to dedicate to data collection. As a result, 13 companies from three sectors (health care, hospitality, and retail) participated. Nine of these companies had also participated in the focus group phase. Ten of the 13 companies provided descriptive information about their establishments. Out of these 10 companies, the three sectors were represented as follows: health care \( (n=6) \), hospitality \( (n=2) \), and retail \( (n=2) \); see Table 1. Overall, participating companies were

<table>
<thead>
<tr>
<th>Sector</th>
<th>Number of companies</th>
<th>Mean number of employees</th>
<th>Mean years in operation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health care</td>
<td>6</td>
<td>2,255</td>
<td>94</td>
</tr>
<tr>
<td>Hospitality</td>
<td>2</td>
<td>1,144</td>
<td>53</td>
</tr>
<tr>
<td>Retail</td>
<td>2</td>
<td>1,624</td>
<td>36</td>
</tr>
<tr>
<td>Total</td>
<td>10</td>
<td>2,057</td>
<td>79</td>
</tr>
</tbody>
</table>
operating for at least 35 years, with an average of 79 years. Company size ranged from 800 to 8,000 employees, with an average of 2,037 employees.

With the exception of one site, all employees from the health care and hospitality sectors were invited to participate. For one hospital, we surveyed five large departments. For the retail sector, we recruited all employees from select regional stores. Across the three sectors, approximately 14,000 employees with and without disabilities were invited to participate and more than 1,000 responded to the recruitment efforts. Of those who responded, 82% agreed to participate in the research.

For the larger study, employees with disabilities were matched (based on job title and company) with “comparable” employees without disabilities (Hernandez & McDonald, in press). As a result of the matching process, 362 employees with and without disabilities were eligible to participate. However, 48 employees were withdrawn because of insufficient employer data, resulting in 314 participating employees (95 with and 219 without disabilities). Although we used matched data for the larger study, because of the individualized nature of accommodations, we did not examine this variable by matched employees. Instead, data were examined for each of the 95 participants with and 219 participants without disabilities.

Table 2 provides a breakdown of participating employees and disability status (overall and by sector). For the total sample, 53% worked part time and 40% worked full time. Of the 95 employees with disabilities, 38% held positions as service workers, 16% as administrative support workers, 15% as professionals, and 10% as officials and managers. Table 3 provides the list of job categories of participants with disabilities (overall and by sector).

INSTRUMENTS

Three surveys were used to collect information from participating businesses and employees: a business survey, an employee survey, and a cost-benefit survey. All three were created by the first two authors who used Cimera’s (2002, 2006) framework for gathering cost-benefit data, as well as feedback from collaborating organizations and the advisory group members.

TABLE 2  Number of Participating Employees and Disability Status
(Survey Phase)

<table>
<thead>
<tr>
<th>Sector</th>
<th>Employees without disabilities (n)</th>
<th>Employees with disabilities (n)</th>
<th>All employees (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health care</td>
<td>81</td>
<td>45</td>
<td>126</td>
</tr>
<tr>
<td>Hospitality</td>
<td>10</td>
<td>4</td>
<td>14</td>
</tr>
<tr>
<td>Retail</td>
<td>128</td>
<td>46</td>
<td>174</td>
</tr>
<tr>
<td>Total</td>
<td>219</td>
<td>95</td>
<td>314</td>
</tr>
</tbody>
</table>
The business survey gathered information from participating companies related to years of operation, number of employees, and makeup of the workforce.

The employee survey collected information from participating employees regarding their job title, department, and disability status. Employees self-reported whether they had a disability in response to the first prong of the ADA definition of a disability: a [permanent] physical or mental impairment that substantially limits one or more major life activities (e.g., walking, breathing, seeing, etc.). The word permanent was added to exclude those with temporary conditions (e.g., conjunctivitis). Additionally, numerous disabilities were provided as examples (e.g., hearing loss, cognitive impairment, physical disability, and chronic illness). Employees were not asked to specify their type of disability.

From the retail sector advisory group, we learned that accommodations information was not routinely collected for their employees. Therefore, for this sector only, the employee survey also asked participants whether they were provided with accommodations (specifically, "Has your employer made changes or provided modifications to help you perform your job?"). In addition, examples were provided (e.g., flexible work schedule, changes to the work site), with participants instructed to specify the change or modification received. Costs related to employee-reported accommodations were not collected.

The cost-benefit survey gathered accommodations information from the health care and hospitality sectors, which routinely collected such data on their employees. Specifically, the HR departments of these participating companies were provided with a list of accommodations (e.g., changes to job duties, changes in work schedule, physical alterations, provision of materials in alternate format, provision of adaptive equipment or assistive technology, job reassignment, personal assistance, provision of sign language interpreters) and asked to indicate whether participating employees...

---

**TABLE 3** Job Categories of Participants With Disabilities (Survey Phase)

<table>
<thead>
<tr>
<th>Job categories</th>
<th>Health care n (%)</th>
<th>Hospitality n (%)</th>
<th>Retail n (%)</th>
<th>Overall n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officials and managers</td>
<td>5 (11%)</td>
<td>—</td>
<td>4 (9%)</td>
<td>9 (10%)</td>
</tr>
<tr>
<td>Professionals</td>
<td>13 (23%)</td>
<td>1 (25%)</td>
<td>—</td>
<td>14 (15%)</td>
</tr>
<tr>
<td>Technicians</td>
<td>5 (11%)</td>
<td>—</td>
<td>—</td>
<td>5 (5%)</td>
</tr>
<tr>
<td>Sales workers</td>
<td>—</td>
<td>—</td>
<td>8 (17%)</td>
<td>8 (8%)</td>
</tr>
<tr>
<td>Administrative support workers</td>
<td>15 (33%)</td>
<td>—</td>
<td>—</td>
<td>15 (16%)</td>
</tr>
<tr>
<td>Laborers and helpers</td>
<td>—</td>
<td>—</td>
<td>5 (11%)</td>
<td>5 (5%)</td>
</tr>
<tr>
<td>Service workers</td>
<td>5 (11%)</td>
<td>3 (75%)</td>
<td>28 (61%)</td>
<td>36 (38%)</td>
</tr>
<tr>
<td>Other</td>
<td>2 (4%)</td>
<td>—</td>
<td>1 (2%)</td>
<td>3 (2%)</td>
</tr>
<tr>
<td>Total</td>
<td>45 (100%)</td>
<td>4 (100%)</td>
<td>46 (100%)</td>
<td>95 (100%)</td>
</tr>
</tbody>
</table>

*Note: Due to rounding, percentages might not add up to 100.*
were provided with any accommodation. The HR departments also provided the approximate cost of each accommodation. Because employers were not informed of participants' disability status, the accommodations information could have been provided for workers with or without disabilities.

PROCEDURES

We worked closely with the HR departments of participating companies to establish employee recruitment plans. With the exception of one company, employees were contacted twice using a number of approaches (e.g., mailing recruitment materials to their homes, including recruitment materials with their paychecks, having managers or supervisors distribute recruitment materials to their departments, and providing recruitment materials onsite). Recruitment materials included a description of the study, letters of support from the mayor and company CEO or director, a consent form, the employee survey, and a stamped envelope (addressed to the researchers) in which to return the consent form and employee survey. For the health care and hospitality sectors, respective HR departments were contacted to collect the accommodations data from the cost–benefit survey. For the retail sector, accommodations data from the employee survey were coded by two research assistants based on their content and then were categorized by the type of accommodation.

RESULTS

Results from the focus group and survey phases are presented here. The focus group findings provide an overview of employers' perceptions related to accommodating workers with disabilities, whereas the survey data highlight the provision of accommodations to those with and without disabilities as reported by employers (health care and hospitality sectors) and employees (retail sector).

Focus Group Phase: Employers' Perceptions of Providing Accommodations

Five main themes emerged from our focus groups and they were largely consistent across the three sectors. First, participants acknowledged that many companies were indeed concerned about expenses associated with accommodations and their impact on the bottom line. These concerns were especially strong when the ADA was initially passed, with some worrying that reasonable accommodations would involve expensive remodeling. "That's what people were thinking...that they are going to have to reconstruct an area" (Hospitality participant).
Second, when accommodations were provided, employers noted that they had not experienced much hardship. In some cases, accommodations were not costly (e.g., amending job responsibilities and subsequent pay, changing the floor an employee works on). Other accommodations involved minimal costs, such as stools for checkout lanes and computer software to enlarge type. One health care participant estimated the average accommodation cost to be less than $500.

Third, when costs were incurred, many participants felt that they were worth the expense. Specifically, valued employees were recruited and retained: “My experience is that we make up the costs...employees with disabilities are much more loyal” (Health care participant). Furthermore, implemented accommodations were viewed as having potential benefits for the overall workforce as in the case of special lighting.

Fourth, although participants reported minimal costs associated with providing accommodations, they did share that some frontline managers were concerned about their impact on departmental budgets. Such concerns seemed to hinder the hiring of people with disabilities: “[Managers] recognize it’s the right thing to do...[they] may not necessarily have the skills or resources to be able to approach [accommodations] the right way” (Retail participant). To help address managerial concerns, some participants would have expenses related to accommodations covered by nondepartmental budget lines. Other participants would carefully think through the application and interview processes to highlight the skills and talents of applicants with disabilities. For example, once, a hospitality participant arranged a phone interview between a qualified applicant who was blind and a potentially hesitant manager.

Finally, participants reported that the reluctance of managers to hire individuals with disabilities seemed related to a lack of knowledge related to disability issues: “I think our biggest problem is people just aren’t comfortable with the whole process. If we educated them better, then they would be more relaxed about it” (Retail participant). However, even with disability training and education, some participants felt that some managers would still have reservations about hiring people with disabilities because of concerns with costs. During the focus groups, participants highlighted the need to gather quantitative data on actual costs to dispel such concerns.

Survey Phase: Provision of Workplace Accommodations

Data collected from the HR departments for health care and hospitality indicated that a total of 16 accommodations were documented for 7 employees with disabilities (representing just 14% of health care and hospitality participants with disabilities). Although not strikingly large in number, the most frequent accommodation was physical alterations to the work environment, followed by adaptive equipment or assistive technology, modifications
### TABLE 4 Accommodations Reported by Employers for Health Care and Hospitality Employees With and Without Disabilities (Survey Phase)

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Health care</th>
<th>Hospitality</th>
<th>Average cost (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Employees with disabilities&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Employees with disabilities&lt;sup&gt;b&lt;/sup&gt;</td>
<td>Employees with disabilities&lt;sup&gt;c&lt;/sup&gt;</td>
</tr>
<tr>
<td>Physical alterations</td>
<td>5</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Adaptive equipment</td>
<td>3</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Modification to job duties</td>
<td>1</td>
<td>—</td>
<td>1</td>
</tr>
<tr>
<td>Changes to work schedule</td>
<td>2</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Job reassignment</td>
<td>1</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Personal assistant</td>
<td>1</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Sign language interpreter</td>
<td>1</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>1</td>
<td>—</td>
</tr>
</tbody>
</table>

Note. — indicates not applicable.
<sup>a</sup>n = 45; <sup>b</sup>n = 81; <sup>c</sup>n = 4; <sup>d</sup>n = 30.

to job duties, and changes to work schedule. Of the 16 accommodations, employers provided the monetary cost for 9. The average cost for accommodations was $521, with one third of the accommodations being made at no cost. The most costly accommodation was adaptive equipment or assistive technology (which averaged $1,512). Of note, no accommodations were reported for employees without disabilities (see Table 4).

When employees from the retail sector were asked about the provision of accommodations to help them perform the essential functions of their jobs, many more accommodations were reported (see Table 5). Interestingly,

### TABLE 5 Accommodations Reported by Retail Employees With and Without Disabilities (Survey Phase)

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Retail employees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With disabilities&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Physical alterations</td>
<td>—</td>
</tr>
<tr>
<td>Adaptive equipment</td>
<td>2</td>
</tr>
<tr>
<td>Modifications to job duties</td>
<td>4</td>
</tr>
<tr>
<td>Changes to schedule</td>
<td>21</td>
</tr>
<tr>
<td>Materials in alternate format</td>
<td>1</td>
</tr>
<tr>
<td>Job reassignment</td>
<td>1</td>
</tr>
<tr>
<td>Personal assistant</td>
<td>—</td>
</tr>
<tr>
<td>Sign language interpreter</td>
<td>—</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
</tr>
</tbody>
</table>

Note. — indicates not applicable.
<sup>a</sup>n = 46; <sup>b</sup>n = 128.
both employees with (54%) and without (25%) disabilities were provided with accommodations by their employers. The most frequent accommodation was changes to the work schedule; the remaining accommodations were cited with much less frequency (e.g., adaptive equipment or assistive technology and modifications to job duties). Information related to the cost of these accommodations was not collected.

DISCUSSION

From an economic perspective, it is understandable that employers are concerned with expenses that impact the bottom line. However, from a legal standpoint, they are required to provide reasonable accommodations to applicants and workers with disabilities. This study examined three areas related to accommodations. First, we explored the perceptions of accommodating workers with disabilities from three business sectors (health care, hospitality, and retail). Second, we examined the provision of accommodations as documented through HR records for both employees with and without disabilities from the health care and hospitality sectors. Third, we examined the provision of accommodations as reported by both employees with and without disabilities from the retail sector. Overall findings suggest that there remains a great need to educate employers (and in particular frontline managers) about the myths and realities of providing accommodations. Social workers addressing the employment needs of individuals with disabilities also stand to benefit from accommodations knowledge (Levy, 1993).

First, the quantitative evidence from both this study and prior research has been clear. The costs associated with the provision of accommodations are for the most part minimal (Blanch, 1996; ODEP, 2009). From this study, we also learned that many employees with disabilities do not request workplace accommodations. This finding has important implications for social workers who assist people with disabilities with employment goals. In such roles, social workers are uniquely positioned at the nexus of direct services and systems change. Namely, informed social workers are able to provide accurate information about accommodations, emphasizing to employers that accommodation requests are not a frequent occurrence and, when provided, often do not pose a significant financial burden.

Second, the sharing of accurate information with regards to accommodations might be particularly relevant for frontline managers, who were noted to be more concerned about accommodations costs when compared to administrators. Frontline managers might be viewing accommodations less favorably because they are often responsible for daily operations, new hires, departmental expenses, and budgets. In light of these differential perceptions toward accommodations, social workers within the disabilities field might
consider directing their educational and intervention efforts where they are most needed. Furthermore, future research examining the perceptions of accommodations should focus on all levels within an organization to determine where and how to effectively intervene.

Third, if accommodations pose an undue financial hardship, employers and managers might be unaware of alternate low-cost solutions. For instance, perhaps converting all written materials into Braille poses an extreme expense on a midsize employer. Alternate low-cost solutions include use of a reader or audiotape recordings. Such information can prove invaluable when assisting job applicants and employees with disabilities, and social workers can play a significant role in both educating employers and strengthening implementation of the ADA. Specifically, social workers can connect employers to useful resources such as the JAN (http://www.jan.wvu.edu), regional disability and business technical assistance centers (http://www.adata.org), the U.S. Business Leadership Network (http://www.usbln.org), and the ODEP (http://www.dol.gov/odep).

Fourth, data from the retail sector were compelling in that many more accommodations were reported by participants (irrespective of their disability status) when compared to the HR-documented accommodations of the health care and hospitality participants. Within the retail sector, it was noteworthy that changes to the work schedule ranked highly for both groups of employees, indicating that retailers might be offering a critical accommodation that benefits the entire workforce. Moreover, these findings suggest a different framework for thinking about workplace accommodations. Often, when accommodations are considered, disability is the focus. However, accommodations might be essential for all workers—not just those with disabilities. Supporting this broadened framework, Galinsky and Bond (1998) found that more than two thirds of businesses (with 100 or more employees) offered flexible work schedules. Findings from the retail sector bear important implications for social workers and other stakeholders seeking systems change. Rather than casting accommodations as a disability issue, consideration should be given to framing them as a workplace flexibility issue relevant for all employees. By broadening the construct of accommodations beyond disability, concerns surrounding their provision might decrease; it is an area worth exploring in greater depth.

Limitations

Although findings from this research are informative, there are a number of limitations to consider. First, there were challenges with recruiting companies and employees to participate, given the sensitive and complex nature of this study. Results might have differed if nonresponding companies and employees had chosen to participate. Second, because implementation of this study occurred sequentially with the three sectors (with health care
participating first, hospitality second, and retail last), we were unable to collect accommodations information from employees of the first two sectors. In retrospect, it would have been valuable to have gathered this information to aid our understanding of the retail findings. Third, our participating companies were quite large in size, which limited our ability to examine concerns that might be relevant for small and midsize companies. Fourth, when defining disability, employees self-reported their disability status in response to the first prong of the ADA's definition; we acknowledge that there is much debate in the field in terms of how disability is defined (Stapleton, Burkhauser, & Houtenville, 2004). Finally, information on disability type was not collected for three reasons. First, our collaborators and advisory group members felt strongly that the larger study should focus on the abilities of workers with disabilities and not their type of disability. Second, there were concerns that our response rate would have decreased further if such information were collected. Third, there were concerns about what categories to use to classify disability type. With all these challenges in mind, generalizations beyond the scope of this study should be made with caution.

CONCLUSION

As disability policies are enacted to promote civil rights, it is critical to attend to how policies are implemented and experienced on the ground. Social workers are uniquely involved in both supporting those who implement and benefit from ensuing policies and affecting policy change. The ADA’s policy on reasonable accommodations was intended to reduce workplace discrimination against individuals with disabilities. Although many employees with disabilities do not request accommodations (and when requested they are not costly), employers might not always have accurate information about their frequency and cost. Furthermore, employers might not readily see that both workers with and without disabilities benefit from accommodations. To achieve the aims of the ADA and increase employment among the disability community, social workers can arm job seekers, employment specialists, and employers with important information about accommodation implementation.

ACKNOWLEDGMENTS

This project would not have been possible without the support of disabilityworks, Chicagoland Chamber of Commerce, Chicago’s Mayor’s Office for People With Disabilities (MOPD), and Chicago’s Mayor’s Office of Workforce Development. We also wish to extend our gratitude to the participating businesses and employees, Robert Cimera, Elizabeth Horin, Jessica Velcoff, Oscar Donoso, YAI/National Institute for People With Disabilities, and
Portland State University. The Illinois Department of Commerce and Economic Opportunity and MOPD provided funding for this project. The opinions expressed here are those of the authors and do not necessarily reflect the opinions of our partners or funding organizations.

REFERENCES


