

Chapter 10 Disclosure of Mental Health Disabilities in the Workplace*

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Introduction

There are a number of barriers that contribute to the low employment rates of people with mental health disabilities; these barriers exist at the individual level, the programs and services level, and the systems, policy, and societal level (Anthony et al. 2002). One issue that intersects with all three is disclosure of psychiatric disability in the workplace. Individuals with mental health disabilities must weigh the personal benefits and risks of disclosing their psychiatric disability and make a number of decisions about disclosure given their particular employment circumstances. In addition, employment programs and services, and especially supported employment practitioners, must determine how to represent their services to employers, decide how to inform employers that they work with people with mental health disabilities, and plan with the individual to handle disclosure. Employers must be aware of state and federal policies regarding disability-related employment issues in the face of societal stereotypes, personal experiences with, and misunderstandings about people with mental health disabilities. And while legislation such as the Americans with Disabilities Act (ADA 1990) is in place to protect rightful access to employment, people with mental health difficulties may have little knowledge or understanding of these policies or how disclosure of disability and reasonable accommodations may allow them to enjoy full access to employment opportunities.

***Note about language:** Throughout this paper, the term "people with mental health disabilities" is used to refer also to individuals with psychiatric disabilities or conditions. This term is meant to describe individuals who have significant mental health impairments that interfere with functioning and employment in particular and where reasonable accommodation or protection under the ADA may be indicated.

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Disclosure of disability may be a more straightforward experience for individuals with apparent disabilities, such as mobility, sensory, or physical health conditions that are visible. Such disabilities tend to be more acceptable to employers and to society in general than disabilities due to mental health conditions, substance use disorders, or cognitive disabilities (Diksa and Rogers 1996; Hernandez et al. 2000; Popovich et al. 2003; Scheid 1999). However, people with nonapparent disabilities have the option of sharing personal information about their disability. They must decide whether to disclose to an employer, and either explain experiences such as gaps in work history or work performance difficulties without referring to their disability, or choose what to say, when, how, and to whom to disclose.

Many people diagnosed with mental health conditions experience stigma, both internalized and public, and have been discriminated against in employment and other life roles based on their label (Wahl 1999). This stigma creates significant risks to disclosing in the workplace. This chapter reviews the variety of ways that disclosure of mental health disabilities in the workplace can occur and the factors involved in making disclosure decisions. Recommendations for and guidance about facilitating disclosure in the workplace is also provided.

What is Disclosure?

Disclosure is defined as the act or process of disclosing, uncovering, or revealing; bringing to light; exposure (Webster's Revised Unabridged Dictionary 1996). Disclosure, also referred to as self-disclosure, may refer to sharing information with friends, family members, doctors, insurance organizations, or employers. In this chapter, disclosure refers to revealing information about one's diagnostic label, mental health condition, or psychiatric disability to someone within the workplace (MacDonald-Wilson 2005).

While often viewed as a simple dichotomous choice (either you disclose or you do not), in practice disclosure of psychiatric disability is not a simple or straightforward process. A description of different types of disclosure that vary based on what is shared, to whom, when, and for what purposes disclosure is undertaken follows.

Full Disclosure

Full disclosure occurs when people with mental health disabilities reveal their mental health background to everyone in the workplace (Corrigan 2005; Herman 1993). Such individuals make no efforts to conceal their psychiatric disability but rather view it as part of their identity. They may share their label

or diagnosis, information about their medications or other treatments, accommodations used, or the limitations they have at work due to their disability. Full disclosure may happen all at once, or may develop gradually over time on the job. As a strategy, full disclosure may be used by a job applicant to identify accepting, inclusive employers.

Selective Disclosure

Selective disclosure involves sharing information with specific or a limited number of people, or sharing specific or limited information with others. A person may choose to tell a coworker or someone in human resources about his disability, but not his supervisor, or tell his supervisor but no one else (Corrigan 2005; Ellison et al. 2003; Herman 1993). An employee may also opt to share only the more "acceptable" part of his or her disability, such as "I have a health condition" or "I take medication," instead of what might be perceived as more stigmatizing, such as a "I have schizophrenia" (Goldberg et al. 2005). Selective disclosure may be used to access protections under the ADA while minimizing risks related to stigma.

Strategically Timed Disclosure

Strategically timed disclosure is one type of selective disclosure in which employees disclose in the workplace after a period of time in which they have the opportunity to develop good working relationships and demonstrate their competence in the job (Goldberg et al. 2005). Since the ADA allows people with disabilities to disclose at any time, this strategy affords the opportunity to become known to the employer and coworkers before sharing information which might be potentially stigmatizing, particularly if the disability is not apparent and more immediate disclosure is not required. (Timing of disclosure is a dimension that will be discussed later in the chapter in the section under WHEN to disclose.)

Targeted Disclosure

With shifts in many mental health systems to a focus on recovery, many states and agencies now have jobs specifically targeted for individuals with a "lived experience" in recovery, such as peer specialists or other consumer-designated positions. Disclosure may therefore become a condition of employment or a strategy to obtain a job; in these situations individuals feel more open to disclosing their disability (Goldberg et al. 2005).

Non-Disclosure

Non-disclosure, or secrecy, reflects a choice made by individuals to keep private any information about one's psychiatric disability or treatment. Not disclosing may result in additional stress and lower self-esteem because one is hiding an aspect of one's life, but it also protects the individual from potential stigma and discrimination, and allows the person the option to "blend in" or "pass for normal" (Corrigan 2005; Goldberg et al. 2005; Herman 1993). This was evident in a recent research study (Rusinova et al. unpublished manuscript) in which individuals identified fear of stigma as the predominant reason for non-disclosure in the workplace. Individuals with a mental health history chose not to disclose because of their fear of being perceived as less competent, being overlooked for a job, being fired, or having their coworker or supervisor relations adversely affected.

While non-disclosure may protect one from the negative consequences associated with stigma, it also denies the person the opportunity to gain needed accommodations and mutual support. Non-disclosure may be advisable in situations where no accommodations are anticipated, in situations where the individual has had intensely negative experiences with disclosure, or where disclosure could jeopardize work in highly sensitive positions, such as in the military, child care, or defense work. Non-disclosure may be preferred for individuals further along in their recovery who do not feel that disclosing their mental health background is necessary or relevant to their work (Goldberg et al. 2005; Rusinova et al. unpublished manuscript).

Inadvertent Disclosure

While the types of disclosure described above involve the individual intentionally and actively making a choice to reveal a psychiatric disability, there are situations in which disclosure of this information is beyond the person's control. Inadvertent disclosure occurs when people who do not disclose believe that their employers or coworkers know about their disability (Goldberg et al. 2005). Inadvertent disclosure undermines the ability of employees to control the conditions of disclosure (Goldberg et al. 2005).

Forced Disclosure

Forced disclosure occurs when an individual is required by circumstances to tell an employer about the existence of a psychiatric disability or the need for accommodation.

In a survey of 350 professionals and managers with mental health conditions, about half felt forced to disclose, while only 38% disclosed when they felt ready. Disclosure occurred in response to hospitalizations, experiencing symptoms on the job they needed to explain, or upon diagnosis (Ellison et al. 2003).

Factors Influencing Disclosure Decisions

There are a variety of factors one must consider in deciding whether to disclose to an employer. The unique characteristics of individuals who have mental health disabilities, other people employed in the workplace, and the relationships between them may impact the conditions and outcomes of disclosure. Furthermore, characteristics of the job, legislation, and the work and social environment all may influence disclosure and subsequent requests for accommodations. This section of the chapter examines the research on disclosure processes and outcomes, and factors related to it.

People Factors

People factors involve characteristics of individual applicants or employees with mental health disabilities (demographic, disability-related, and past experience with disclosure), characteristics of individuals in the employment situation (supervisors, coworkers), and the interpersonal relationships between them.

Demographic characteristics. Characteristics of individuals with disabilities are described in most studies on disclosure, but few report any relationship between demographic characteristics and disclosure. Two studies have found that in supported employment programs, women are less likely to disclose than men (Banks et al. 2007; Fesko 2001b). In one other study, people with lower income levels were more likely to disclose during the application process compared to people with higher income levels (Ellison et al. 2003). No other demographic characteristics (age, race/ethnicity, or living arrangements) appeared to influence disclosure rates or status.

Disability-related characteristics. Factors such as severity, type, and visibility of disability have been found to affect disclosure. In general, the more severe the disability or the more it interferes with work performance, the more likely an individual will disclose (Conyers and Boomer 2005). An immediate medical crisis or other adverse event may necessitate disclosure (Conyers and Boomer 2005; Ellison et al. 2003; Fesko 1998). In Banks et al.'s (2007) study of people with significant mental health conditions, people with mood disorders, or individuals experiencing no symptoms at work were less likely to disclose. Similarly, professionals and managers with

schizophrenia (considered a more disabling mental health condition) were more likely to disclose compared to people with other diagnoses (Ellison et al. 2003). Goldberg et al. (2005) concluded that one's stage of recovery had an impact on the job search strategy chosen (i.e., with or without assistance), which influenced the decision to disclose, at least during the early phases of the employment process. People more stabilized in their recovery, working long-term in low-wage jobs, or in competitive professional positions, tended to search for their jobs independently without the assistance of vocational rehabilitation professionals, and did not disclose in the job search process except when applying for mental health peer positions.

In general, people with more severe or disabling conditions, or those less stabilized in recovery, may have a greater need to disclose to either explain their behavior or work performance, or to request reasonable accommodations to address limitations that interfere with work. People with less severe or less apparent disabilities, or who are in later phases of recovery and who may not need accommodations, may choose not to disclose until it is needed.

Past experience with disclosure. If an individual has had negative experiences in disclosing or has perceived job discrimination, he or she may be less likely to disclose in the future, especially during the hiring process (Goldberg et al. 2005; Wahl 1999). When people with disabilities believe that disclosure will result in negative reactions from supervisors or coworkers, they are less likely to disclose (Ellison et al. 2003; Goldberg et al. 2005; Dalgin and Bellini 2008). Baldrige (2005) found that an employee's perception of work group supportiveness is an important factor in reasonable accommodation requests, such that when employees perceive the work group as more supportive, they are less likely to withhold accommodation requests.

On the other hand, higher confidence in maintaining one's professional status and a better capacity to regulate mental health symptoms at work is associated with choosing to disclose when comfortable doing so (Ellison et al. 2003). Rumrill (1999) found, in an experimental study of individuals with visual impairments, that individuals trained in disclosure were more knowledgeable, confident, and active in the disclosure and accommodation request process, thus suggesting that such training interventions might lead to more positive disclosure outcomes for individuals with mental health disabilities. Feeling that one has a choice about disclosure, optimism about the outcomes of the disclosure, and confidence and skill in how to disclose may all influence the decision to disclose.

Employer and relationship characteristics. The characteristic of employers (i.e., supervisors) most frequently associated with disclosure is supportiveness. Disclosure is more likely to occur when supervisors and coworkers are perceived as supportive (Ellison et al. 2003; Shaw et al. 2003), and is less likely to occur when supervisors are thought to be insensitive or unsupportive (Fesko 1998).

To summarize, research suggests that visibility of the disability, phase of recovery, past experiences with stigma and disclosure, confidence in disclosing, independence of the person in acquiring and maintaining a job, and supportiveness of the work environment should all be taken into account when deciding whether and when to disclose.

Job/Accommodation Factors

Nature of the job. Conflicting data exist about the effect of job level on the likelihood of disclosure. For example, Ellison et al. (2003) found that 87% of professionals and managers diagnosed with mental health conditions disclosed in the workplace, although less than a third did so during the hiring process, and more than half did so under unfavorable circumstances. Goldberg and colleagues (2005) found that people with mental health disabilities (former or current SSI or SSDI recipients) employed in professional positions tended not to disclose, except when the position was in the mental health system. People with HIV/AIDS who used accommodations at work were eight times more likely to disclose if they were in professional or managerial positions. In addition, people with visual impairments who worked part-time were less likely to disclose and request accommodations compared to full-time workers. While in general someone in a higher level and/or permanent position may be more likely to disclose, if the individual feels less secure in their position or has more concerns about the severity of their disability, they may be hesitant to disclose even when working in a professional or managerial position.

Nature of accommodations. Characteristics of needed accommodations may also be factors affecting disclosure. Individuals may be able to obtain needed accommodations without disclosing their disability status, using "natural" or "self-accommodations" (Conyers and Boomer 2005; Dalgin and Gilbride 2003). Employees who perceive that an accommodation is inexpensive or easy to provide, or that the accommodation may also help other employees, are more likely to disclose and request accommodations (Baldrige 2002). As might be expected, people who disclose are more likely to receive needed accommodations than those who do not (Banks et al. 2007).

Examination of the job tasks, level of the job, length of time in the job, and perception of job security should be explored when deciding about disclosure. Practitioners should explore the need for accommodation with the individual and determine if accommodations naturally occur in the workplace or can be easily obtained without disclosure, or if disclosure makes one eligible for a targeted position.

Work and Social Environment Factors

Knowledge of the ADA and related legislation regarding disclosure, the culture of the workplace, and prevailing societal attitudes toward people diagnosed with mental health conditions often influence disclosure of mental health disabilities in the workplace.

Knowledge and use of the Americans with Disabilities Act (ADA). People with disabilities are often unfamiliar with the ADA and related legislation that governs disclosure in the workplace. Under the ADA, an individual has the right

to decide whether and when to disclose a disability to employers (EEOC 1997). If accommodations are requested, the employer has a right to request limited documentation of the disability and the need for accommodation. In Canada, there is no one federal law that governs employment of people with disabilities, but generally, the employee has the responsibility to provide information about their disability and accommodations to the employer or union (Campolieti 2004). (For additional detail on legislation related to accommodations and disclosure, see Chap. 1)

Many people with mental health disabilities are not aware of the ADA and other legislation, including guidelines about disclosure of disability in the workplace (Gioia and Brekke 2003; Granger 2000; Goldberg et al. 2005), resulting in confusion about how and when to disclose (Granger 2000). People who are more familiar with the ADA are more likely to disclose (Ellison et al. 2003). However, many people do not know about the ADA and its protections, and do not refer to it when disclosing, but still obtain accommodations requested after disclosure (Goldberg et al. 2005). In vocational rehabilitation, professionals may not address the ADA with employers when working with people with disabilities. Ironically, Granger et al. (1997) found that over half of job coaches and job developers in a national survey indicated that they never (15%) or seldom (42%) referred to the ADA when arranging job accommodations.

Workplace culture factors. The nature of the workplace is believed to influence disclosure, but limited information is available on the impact of such factors. Literature suggests that explicit organizational values and policies related to disability or diversity, and organizational flexibility are positively related to employing and accommodating employees with disabilities (Florey and Harrison 2000; Gilbride et al. 2003). Positive attitudes toward the ADA are associated with employer experience in hiring people with disabilities (Gilbride et al. 2003). In addition, employers who have a history of hiring people with disabilities have fewer concerns about the work performance of people with mental health disabilities (Diksa and Rogers 1996).

Working in certain job environments may facilitate the disclosure of a mental health disability. For example, professionals and managers who work in the mental health system have the highest rates of disclosure compared to people working in health/social services or business/technical services industries, although it is unclear whether the mental health positions were targeted for peers or consumers (Ellison et al. 2003). Peer specialist positions are reserved for people with mental health disabilities and require disclosure to be eligible for the position – in one study, every employee in the mental health system disclosed (Goldberg et al. 2005). While it is possible that employers in the mental health field are more open and supportive of disclosure, it may also be that more frequent disclosure is due to the use of disclosure for targeted positions, rather than to the openness of employers.

Attitudes toward people with disabilities. As mentioned previously, many people who have a mental health condition have felt stigmatized or report being discriminated

against by employers and coworkers, which affects their willingness to disclose (Wahl 1999). These negative attitudes and experiences result in lower self-esteem or self-confidence, more likelihood of avoiding social contact, less likelihood of disclosing to others, and less likelihood of applying for a job (Wahl 1999). Furthermore, employers are less likely to interview job seekers with disabilities. The least preferred disability is a psychiatric disability, when compared to hearing impairment or mobility disabilities (Pearson et al. 2003). Employers rate people with mental health disabilities as less employable than people with physical disabilities when the disability is known (Dalgin and Bellini 2008). One interesting finding was that disclosure had no effect on actual hiring decisions or on employability ratings when comparing those who disclosed versus those who did not (Dalgin and Bellini 2008).

It is important for professionals and advocates to familiarize themselves with ADA and/or other legislation related to job accommodations and disclosure and to educate employees with mental health disabilities. Professionals can provide information about the ADA and teach individuals the interpersonal skills needed to disclose their mental health disability and request accommodations in a way that is most likely to lead to positive outcomes. It is important to explore the culture of the workplace in terms of its policies related to diversity and disability, and to determine whether it appears to be a flexible organization. It may be useful to examine attitudes and the past experiences of employers in hiring and retaining workers with mental health disabilities, and consider providing support to the employer (provided the professional has obtained the permission of the employee to get involved).

Components of Disclosure Decisions

The following section describes various components of decisions regarding disclosure, including WHY an individual may disclose, WHO discloses and TO WHOM, WHAT to say, and WHEN to say it, as well as the results or OUTCOMES of disclosing.

WHY

An individual considering disclosing a mental health disability in the workplace must consider the benefits and risks of sharing information about their mental health condition, limitations, or needed accommodations. As described above, one of the reasons cited most often by professionals and advocates for disclosure is to request job accommodations which may be used in the hiring process, on the job, or in obtaining the benefits and privileges of employment (ADA 1990; EEOC 1997, 2002). People who use vocational rehabilitation or supported employment services

may be willing to have their disability disclosed so that rehabilitation professionals can assist them in developing employer contacts and job leads and/or in providing on-the-job training and support to maintain employment (Conyers and Ahrens 2003; Granger 2000; Granger et al. 1997).

Disclosure by an applicant in the job search process is helpful when the individual might otherwise not be considered for the position, for example when there is a gap in their work history or absences in previous positions (Allen and Carlson 2003; Fesko 2001a, b; Goldberg et al. 2005). As described above, disclosure may be a distinct advantage for positions which are designated in the mental health system for "consumers," or "peer specialists" (Ellison et al. 2003; Goldberg et al. 2005). Once on the job, disclosure may explain issues in productivity and other areas of work performance, or may explain the appearance of symptoms, unusual behavior, or psychiatric hospitalization (Allen and Carlson 2003; Banks et al. 2007; Ellison et al. 2003; Madaus et al. 2002) and allow the provision of supports on the job by an employment specialist or other professional (Gioia and Brekke 2003; Goldberg et al. 2005).

Other individuals may find that it is important to be honest with their employer, educate coworkers, and/or address stigma so that coworkers and supervisors have accurate information about the condition or need for accommodations, rather than fueling speculation (Allen and Carlson 2003; Ralph 2002). In addition to these practical reasons, there are some psychological benefits to disclosing. Disclosure relieves the stress of hiding information about oneself, can enhance self-esteem, and may represent emotional wellness and acceptance of one's experience (Corrigan and Matthews 2003; MacDonald-Wilson and Whitman 1995; Ralph 2002; Roberts and Macan 2006). The act of disclosing to others may also reduce a sense of isolation and facilitate interpersonal relationships by sharing personal information (Ralph 2002), and employees may gain needed support and understanding (Banks et al. 2007; Gioia and Brekke 2003; Goldberg et al. 2005; Rollins et al. 2002). See Table 10.1 for a list of reasons to disclose or not disclose.

Of course, there are also a number of reasons one might not disclose information about mental health disability in the workplace. Many people who choose not to disclose have fears that they will not be offered a job, will have an offer of employment withdrawn, will not be promoted, will be denied reasonable accommodations, will be monitored more closely on the job, or will be fired or laid off once their status is known (Dalgin and Gilbride 2003; Ellison et al. 2003; Granger 2000; Granger et al. 1997). Employees with mental health disabilities may also be afraid of negative reactions from coworkers, including being excluded from social activities, being treated differently, or being isolated and set apart from the workgroup (Allen and Carlson 2003; Dalgin and Gilbride 2003; Ellison et al. 2003; Fesko 2001a, b; Granger 2000; Madaus et al. 2002; Wahl 1999). These beliefs about stigma and discrimination are major factors that affect decisions about disclosure (Goldberg et al. 2005), and should be explored with anyone considering disclosure.

Table 10.1 Reasons for choosing to disclose or not disclose

Reasons to disclose	Reasons to not disclose
To gain the protections of the ADA	To protect my privacy
To request accommodations, access technology	To be "normal," to fit in
To explain gaps in work history, past accommodations received	To preserve self-esteem by not identifying as "disabled"
To address or explain symptoms, sudden hospitalization, or crisis issues in the workplace	Because I do not see myself as disabled, or because my condition is manageable, not disabling
To explain problems in work performance	Because there is no need for accommodation
To enlist the support of the employer	Because my job is naturally accommodating, a good job match
To increase understanding of supervisors and coworkers	Do not feel I should ask, deserve it, am eligible for accommodations – if part-time, I should not ask for accommodations
To have someone to turn to if problems arise	Do not want to be seen as asking for special treatment
To reduce fear or anxiety of coworkers	Did not know I could ask for accommodations
To make sure coworkers have accurate information instead of speculating	Fear of negative employer attitudes
To allow the involvement of a VR professional or advocate to access or maintain employment	Fear of a change in supervision
To become employed in targeted positions in the Mental Health system for "consumers" or "peers"	Fear that disclosure would lead to biased work evaluations
To serve as a role model, combat stigma, educate others	Because it is the cultural norm not to complain
To relieve the stress of keeping secrets, remembering explanations or cover stories	Fears of isolation from coworkers
To continue the process of recovery, acceptance of disability	Because of past negative experiences with disclosure in the workplace or personally
To enhance self-esteem because of choosing not to hide what others may see as a negative fact about oneself	To avoid emotionally hurtful responses
To improve psychological well-being	To avoid being more closely monitored by supervisor
To be honest, to myself and others	To avoid rejection/negative attitudes/being treated differently by coworkers or supervisors
To reduce isolation, connect with others, share personal information	To avoid harassment, gossip, social disapproval
To confirm health insurance coverage prior to accepting job	To avoid all my behavior being interpreted as due to mental illness
	To avoid discrimination, to reduce chances of not being hired, promoted, or terminated because of disability
	To avoid being thought of as less competent
	Because you need to work harder to prove your worth if they know you have a mental illness

Many people with disabilities, especially mental health disabilities, have in fact experienced discrimination in the workplace and have had negative experiences with disclosure, such as being monitored more closely, or denied a work opportunity, so that these fears may be based on past experiences, not merely future concerns (Dalgin and Gilbride 2003; Goldberg et al. 2005; Wahl 1999). Once disclosure occurs, the behavior of the employee may be interpreted through the lens of "mental illness," so that it is difficult to have a bad day, or even to have characteristics of oneself considered by others, such as accomplishments or other strengths (Gioia and Brekke 2003; Ralph 2002). Many people choose not to disclose because their coworkers or supervisors are not perceived as supportive (Allen and Carlson 2003; Baldrige 2005; Wahl 1999). Recent evidence on the impact of disclosure on employers suggests that when employers are provided with information about mental health disabilities at some point in the hiring process, they are less likely to offer interviews (Pearson et al. 2003), and rate applicants lower in employability compared to people with physical disabilities or no disability (Dalgin and Bellini 2008), a finding consistent with previous research (Berven and Driscoll 1981; Farina and Felner 1973; Diksa and Rogers 1996; Scheid 1999). Thus, the anticipation of negative outcomes from disclosure has some factual basis in the attitudes and actions of employers toward people known to have mental health conditions.

Aside from negative past experiences or anticipation of negative outcomes, many people with mental health disabilities choose not to disclose because they do not have a need for accommodations, especially if the job naturally provides the conditions that would be supportive (Conyers and Boomer 2005; Dalgin and Gilbride 2003; Granger 2000), and they otherwise wish to preserve their privacy and their self-esteem (Allen and Carlson 2003; Madaus et al. 2002; Ralph 2002). Some individuals do not view themselves as disabled even if they have a diagnostic label. If their condition can be managed at work then they would not need to disclose to an employer, nor use reasonable accommodations at work. This seems to be one of the reasons that people with mental health disabilities do not disclose (Dalgin and Gilbride 2003). Exploration of the beliefs, experiences, and reasons to disclose or not disclose psychiatric disability in the workplace is therefore needed before proceeding to decisions about how to disclose. Table 10.1 may be used as a guide to initiate exploration of decisions about whether to disclose.

WHO

A number of people may be involved in the disclosure of mental health disabilities in the workplace, including the person or persons who disclose, and the person or persons to whom disclosure is made. Under the ADA, anyone can disclose a disability or a need for an accommodation to an employer, including a rehabilitation counselor, a physician, psychiatrist, psychologist, social worker, other health professional, or even a family member or friend (EEOC 1997, 2002). A number of studies indicate that when vocational rehabilitation (VR) services are used to search

for a job, implicit or explicit disclosure occurs (Goldberg et al. 2005). In focus groups with 137 people with mental health disabilities, nearly all who used VR services or job coaches had their disability disclosed (Granger 2000).

Rehabilitation or mental health professionals may share information regarding the person's mental health condition explicitly with an employer, or in other cases the employer may presume the person has a mental health condition if the employer is familiar with the agency's clientele (Banks et al. 2007). In supported employment (SE) programs, more than 80% of employees had their disability disclosed, typically by the SE staff (Banks et al. 2007). Survey and focus group data from several studies found that when individuals with mental health disabilities were working with job coaches, the applicant or employee had little role in the disclosure process, either because the job coach generally handled disclosure or the employer presumed a disability due to the employer's familiarity with the agency (Granger 2000; Granger et al. 1997). However, when individuals were not involved with VR services, the applicant or employee handled the disclosure themselves (Banks et al. 2007; Ellison et al. 2003). People not involved with VR services may be more hesitant to disclose, especially in the hiring process, and may opt to disclose only once they have been on the job for some time and are known to the employer (Ellison et al. 2003; Granger 2000).

TO WHOM

Under the ADA, applicants or employees who are disclosing disability have the option to tell only those who need to know, such as the supervisor who has the authority to adjust the job or provide other accommodations, medical personnel conducting fitness exams, first aid and safety personnel if emergency treatment may be needed, and government officials investigating compliance with the ADA (EEOC 1997). One could inform only the human resource person overseeing the hiring process and not the supervisor if no accommodation is needed once the employee is on the job. The employer is required to keep this information confidential; related documentation must be maintained separately from personnel files (EEOC 1997).

Research on disclosure suggests that most often, it is the supervisor who is told about the disability or need for accommodation (Ellison et al. 2003; Goldberg et al. 2005; Madaus et al. 2002). Professionals and managers mostly frequently informed a supervisor (80%), a coworker (73%), or both (62%), and less frequently informed human resource personnel or subordinates (Ellison et al. 2003). When interviewed in focus groups, people with mental health disabilities suggested informing the supervisor, and only rarely a trusted colleague (Granger 2000). When VR service providers are involved with the employer, the person told may be a human resource specialist, a manager or executive, or other person with whom the VR staff has contact in developing the job. Once someone is on the job, an Employee Assistance Specialist or other health professional in the workplace may be informed.

With whom the information is shared depends in part on the reasons the employee is choosing to disclose – to gain support or understanding, to explain behavior, or to request accommodations. Coworkers may learn of the disability either indirectly when observing a job coach on-site, or directly from the employee. Supervisors are often told in order to gain access to accommodations, explain work performance, or obtain other tangible supports.

Gates (2000) has developed a structured social process to facilitate the employee's return to the job after a period of absence or disability leave for mental health reasons. This process involves planning disclosure and needed accommodations, and sharing information with all important individuals in the workplace, including managers, supervisors, coworkers, and subordinates, with the intention of improving the chances for a successful return to work. She and her colleagues report success with the approach of accommodation as a social process (see Chap. 20).

WHAT

People with mental health disabilities and their advocates are often unsure about what information should be shared with an employer. Under the ADA, disclosure is required only when someone is requesting accommodations in the workplace or otherwise desires protection from discrimination under the law. Guidelines prepared by the Equal Employment Opportunity Commission (EEOC) indicate that an applicant or employee can use plain language to disclose their disability, and is not required to use any special language or technical jargon. The terms "ADA" or "reasonable accommodation" are not required, nor does the law demand that the employee submit the disclosure or accommodation request in writing (EEOC 1997, 2002). However, an employer may ask for additional, but limited documentation (EEOC 1997, 2002) to verify coverage under the ADA and the need for accommodation. Information required when documenting the disability must be specific, emphasizing the nature of the disability, the resulting functional limitations due to the disability or treatments, and any needed accommodations. Examples of such documentation are available on the Job Accommodation Network (JAN) website, a free technical assistance service (see JAN in Appendix A for a list of resources). However, for many employers, verbal disclosure may be sufficient and further documentation may not be required.

Little clear guidance exists in the literature about what to say to employers when disclosing or about the potential impact of differing approaches. In a survey of professionals and managers with mental health conditions, of those who disclosed, 64% revealed their diagnosis, 59% stated that they had a mental illness or psychiatric disability, and 51% mentioned the nature of their symptoms. Only 2% described their medications. Less often mentioned were the accommodations or job adjustments needed (31%), the difficulties in keeping the job (19%), or steps required to take care of themselves on the job (1%) (Ellison et al. 2003).

If vocational rehabilitation staff are involved in the disclosure, frequently no explicit discussion of psychiatric disability, mental health condition, or diagnoses occurs with the employer, and rarely is the ADA mentioned (Granger 2000; Granger et al. 1997). Employees with mental health disabilities report that they prefer to share information about a physical disability or limitation, and not a mental health one, if it can be avoided (Dalgin and Gilbride 2003). Gates (2000), in a qualitative analysis of case records of 12 employees with mental health conditions returning to work after disability leave, found that involvement in developing a disclosure plan and using a social and educational process in the workplace resulted in more positive return-to-work outcomes. This communication process included providing information about the impact of the disability on work, in particular the gaps in functional capacity that interfered with job requirements (Akabas and Gates 1993).

In an experimental study examining the impact of disclosure of invisible disability on employers' ratings of employability and decisions on intentions to hire job applicants, disclosure of a disability (physical, psychiatric, or none) had no significant effect on employability ratings or hiring decisions. In addition, the amount of the information shared (brief vs. detailed) made no difference in ratings or decisions. However, applicants who shared a physical disability (diabetes) were rated more highly than applicants with a mental health disability (bipolar disorder; Dalgin and Bellini 2008). Although the information that was shared included diagnosis, functional limitations, and accommodations needed, it is not clear whether different ways of presenting the information might have influenced employers differently.

WHEN

People with mental health disabilities are often unsure about the best time to disclose on the job (Granger 2000). An individual may choose to disclose a disability at any time during the application process or during any period of employment, but is not required to do so under the ADA, unless an accommodation is being requested (EEOC 2002). EEOC guidance (1997) for people with disabilities suggests that it is in an employee's best interest to disclose their disability prior to the employee's job performance decline or before problems arise on the job.

In general, when employment or vocational rehabilitation specialists are involved in the job search phase, disclosure tends to happen early in the employment process, often before or during the interview stage (Goldberg et al. 2005; Granger 2000; Granger et al. 1997). For over three-fourths of people with mental health disabilities in supported employment, disclosure occurred during the job development phase (Banks et al. 2007). People in lower-paying jobs tended to disclose earlier than those in higher-paying jobs, indicating a possible relationship between the level and status of the job and the timing of disclosure (Ellison et al. 2003).

Severity of the psychiatric disability also appears to be related to the timing of disclosure. Professionals and managers with diagnoses of schizophrenia (considered a more disabling mental health condition), part-time workers, and former SSI/SSDI recipients (receiving disability benefits due to difficulty working) tended to disclose earlier in the employment process, suggesting a need for accommodation earlier in the process and/or more difficulty concealing the impact of the mental health condition (Ellison et al. 2003). In a group of 20 young adults with schizophrenia, only 20% disclosed their disability and requested accommodations at work. Those who decided to disclose tended to be males who were using supported employment services; they tended to have the highest level of negative symptoms and the most enduring positive symptoms (Gioia and Brekke 2003), suggesting that visibility of the disability was a critical factor in disclosure.

People who are searching for jobs independently, if they choose to disclose at all, tend to disclose later in employment, and generally not in the interview stage. For example, although a large number of professionals and managers reported disclosing their mental health condition to someone on the job (87%), only one-third did so in the application process, another 16% within a year, and another 24% more than a year later (Ellison et al. 2003). Of those disclosing (87%), about half did so under unfavorable circumstances, such as the presence of symptoms or hospitalization once on the job. This forced or inadvertent disclosure tended to happen after an average of 6 months on the job. In addition, later disclosure was associated with reported difficulty in accepting one's mental health condition. Goldberg and colleagues (2005) reported that beliefs about stigma and discrimination, as well as how someone sought work (with VR assistance or not) most affected disclosure decisions.

Professionals and managers disclosing under more favorable circumstances (38%), when they actively chose to do so, tended to disclose when they felt comfortable, or after about a month on the job. Circumstances that led to comfort around disclosure included feeling that their employment was secure (32%), that disclosure would not lead to negative consequences (29%), feeling appreciated by the boss (20%), or respected by colleagues (15%).

Overall, the timing of disclosure appears to be related to the involvement of rehabilitation professionals, severity and/or visibility of the mental health condition, level of the job, and acceptance of one's condition, as well as comfort in the work environment. Exploration of these issues with individuals can facilitate informed decisions about when to disclose.

Outcomes of Disclosure

Disclosure of psychiatric disability in the workplace results in positive emotional outcomes for some employees. In a study of supported employees with mental health disabilities, employers were more likely to be supportive of employees who had disclosed than employees who had not (Banks et al. 2007). Disclosure was

associated with higher levels of emotional support from coworkers and supervisors, although employees reported feeling somewhat more stress when they disclosed (Rollins et al. 2002). Perceptions of safety and support have helped some employees with schizophrenia avoid quitting their jobs (Gioia and Brekke 2003). In addition, some employees with mental health disabilities report that one of the positive effects of disclosing disability in the workplace is earning the respect and admiration of colleagues (Ralph 2002). As mentioned earlier, some practical outcomes of disclosure include receiving job accommodations (Banks et al. 2007), facilitating the hiring process (Granger 2000), having more positive return to work outcomes (Gates 2000), keeping the job, and having companies provide training in disability awareness (Banks et al. 2007).

However, disclosure may not necessarily be related to how well someone adjusts to a job (Banks et al. 2007). Some people who have disclosed at work report that their supervisor had higher expectations of them, although there is currently no evidence from employers that this actually happens (Goldberg et al. 2005). Individuals who choose not to disclose may also need support handling the stresses associated with not sharing information or accessing accommodations (Goldberg et al. 2005). About one-third of the professionals and managers report having regrets about disclosing their mental health condition in the workplace (Ellison et al. 2003). There is evidence that during the hiring process employers also rate applicants who disclose mental health disabilities lower than those who disclose physical disabilities or no disabilities (Berven and Driscoll 1981; Dalgin and Bellini 2008; Farina and Felner 1973; Jones et al. 1991). However, little is known about employer reactions toward employees who disclose mental health disabilities once on the job.

Evidence on the results of disclosure is not unequivocal. Such mixed evidence suggests that people with mental health disabilities need a structured process to weigh the potential benefits and risks of disclosure. In fact, many people describe a need for a process to assess what would be gained by disclosure before deciding what to do (Dalgin and Gilbride 2003). Others report feeling confused about how to decide the best time to disclose (Granger 2000). The next section details recommendations for practice that professionals and individuals with mental health disabilities can use to prepare for and manage disclosure in the workplace.

Recommendations for Practices on Disclosure

Findings from the literature on factors involved in decisions about disclosure and components of disclosure in the workplace suggest a number of strategies that professionals and individuals with mental health disabilities can use. There are essentially two main phases involved in disclosing: a preparation stage or "readiness to disclose" phase (Ralph 2002); and, once the decision is made, an implementation stage. The professional and the individual considering disclosure should explore these issues prior to the job search process (if in the job search phase of employment), or once the employee experiences a need to disclose on the job.

Preparing for Disclosure

Appendix A contains *Tasks for Preparing to Disclose*. These tasks have been modified from procedures originally proposed by MacDonald-Wilson (2005) and refinements from training sessions by MacDonald-Wilson (2008) and MacDonald-Wilson and Rea (2008), as well as new research findings about factors important in disclosure decisions. In summary, the professional and the individual with a mental health condition should review past experiences with and feelings about disclosing, explore the need and reasons for disclosure, examine the people factors, job/accommodation factors, and workplace culture factors that are relevant to the individual's situation, gather information about the ADA and other rights, identify any need for professional support and employer-provided accommodations, and then weigh the benefits and risks of disclosure. They should also consider the depth and timing of any disclosure.

Implementing Disclosure

Once the individual has made a decision to disclose, the next steps involve managing the disclosure, planning how to disclose (WHO should do it, WHAT to say, WHEN to say it, and TO WHOM), and then take steps to implement the planned activities related to disclosing disability. See Appendix B for the *Tasks for Disclosing*.

These tasks may vary for each person, depending on whether the purpose of disclosure is for practical reasons (e.g., to involve a professional with the employer, to gain access to a job, to request accommodations, to explain behavior), or for more personal reasons (e.g., to relieve stress, to be open and honest, to reduce isolation or connect with others, to gain support). What is disclosed may vary as well, depending on to whom one discloses – a trusted coworker, direct supervisor or manager, customer, human resources personnel, or employee assistance personnel. The tasks are not necessarily to be performed in a linear fashion. Decisions about disclosure may be recycled – within a job over time, as circumstances change, or when the individual changes jobs. Some choices about when or whether to disclose may not be available, such as when forced or inadvertent disclosure occurs, but the individual may still be able to decide what further information to share and with whom.

Professionals, employers, and individuals with mental health conditions should consider consulting the free information and technical assistance available from the Job Accommodation Network (JAN) and the ADA Disability and Business Technical Assistance Centers (see Appendix C *Resources*) at any point in the disclosure process to both prepare for disclosure and to implement disclosure. Finally, it is important for the person disclosing, whether it is the professional or individual themselves, to practice and develop the skills and confidence in communicating with the employer and in disclosing in a positive way to improve the chances for a beneficial experience with disclosure.

Conclusion

Disclosing a mental health condition in the workplace is complex and challenging, especially for people with nonapparent, but potentially stigmatized disabilities. Decisions to disclose or not require a highly individualized assessment and a weighing of the multiple factors associated with a disclosure process that will enhance the person's vocational success and overall recovery. Although many professionals and people with mental health disabilities have concerns about how best to disclose, research does not yet provide clear-cut guidelines for disclosure. However, there is a growing body of research on a number of factors related to disclosure and requesting accommodations. This chapter describes the literature on disclosure, and recommends guidelines for professionals and people who experience mental health conditions to use in disclosure of mental health disabilities to employers. The hope is that workplace disclosure will become an accepted and beneficial practice in the near future.

Appendix A

Tasks for Preparing to Disclose

1. Clarify knowledge about the ADA, accommodations, and disclosure of disability guidelines
2. Explore experiences and feelings about:
 - (a) Past experiences with disclosure and/or stigma
 - (b) Phase in recovery, severity and/or visibility of disability, identifying as a person with a mental health diagnosis, label, or disability, implications of recovery for disclosure
 - (c) Sharing diagnosis or disability information with others, especially employers.
3. Review expectations of and needs for disclosure
 - (a) Confidence and skill in disclosing and/or requesting accommodations
 - (b) Confidence and skill in regulating impact of mental health condition on work
 - (c) Practical and personal reasons to disclose or not disclose
 - (d) Anticipated reactions of coworkers, supervisors, or others
 - (e) Expected outcomes of disclosure and requests for accommodations.
4. Determine support needs for:
 - (a) Involvement of VR or employment professional in hiring or once on the job
 - (b) Support or connection wanted or needed from coworkers, supervisors
 - (c) Explaining gaps in work history, visible signs of disability, recent hospitalization, or other unforeseen circumstances or behavior
 - (d) Potential interference of disability on functioning or other issues in meeting job expectations due to disability or needed treatments.

5. Identify any potential accommodations needed and their timing
 - (a) Assess job search skills and needed accommodations in hiring process:
 - Initiating contact or arranging an interview with an employer
 - Interviewing
 - Describing the disability, functional limitations, or needed accommodations
 - Providing documentation, if requested
 - Negotiating accommodations
 - (b) Examine any functional limitations or issues related to meeting job expectations experienced due to the disability
 - Identify accommodations or supports
 - Determine whether accommodations/supports occur naturally in the job environment
 - (c) Evaluate urgency – when accommodation is needed in employment process (in hiring, as soon as job starts, once on the job after awhile)
 - (d) Explore whether accommodation will help others, if it is essential to work tasks or meeting customer needs, and other benefits to the employer and employee
6. Analyze the employer and job environment to determine potential reactions/support
 - (a) Workplace culture
 - Sensitivity to mental health issues, such as information on disabilities in newsletters, posted notices, employee education or training programs
 - Policies such as flex time, mentoring programs, telecommuting, flexible benefit plans, employee awards, or other incentives for contributing to diversity efforts.
 - Type of job that precludes disclosure of mental health disabilities, such as in child care, government high security positions, police work, etc.
 - (b) Employer/supervisor knowledge of ADA and experience with people with mental health disabilities
 - (c) Employee's perceptions about:
 - supportiveness of the coworkers, supervisors, customers
 - characteristics of relationships with coworkers, supervisors, and other personnel
 - likelihood of a positive reaction to disclosure or accommodation request
 - (d) Employee's level of job, status in the organization, industry type, recent job performance, perception of job security, nature of job

7. Weigh the benefits and risks of disclosure. Consider:
 - (a) Past experiences, and confidence and skill in disclosing
 - (b) Position or status in the organization, length of time in job, job security
 - (c) The need for involvement of a professional with the employer in the job search process or once on the job (i.e., visibility of condition, symptoms, or medication side effects, limited job search skills)
 - (d) Urgency and need for accommodation
 - (e) Personal reasons, such as:
 - identifying as a person with a disability
 - concerns about legal rights
 - need to screen out unsupportive or inflexible employers or job situations
 - relief of stress in not hiding information about self
 - interest in being a role model for other people with disabilities
 - skills in handling the experience of stigma or discrimination with coworkers, supervisors
 - (f) Relationships with supervisor, coworkers, and/or customers in the workplace
 - (g) Likelihood of employer and/or coworker support
8. If the decision is made NOT to disclose, prepare the following:
 - (a) Decide what to say about potential issues that might lead an employer to suspect a disability, such as gaps in employment, frequent job changes, poor references, or other potentially visible signs of disability.
 - (b) Plan the behind-the-scenes support that will be needed in hiring or on the job.
 - (c) Research employers and jobs that provide the supports naturally, or identify self-accommodations that could be made without disclosure.
 - (d) Develop alternative skills and supports to address potential functional limitations.
9. If the decision is made to disclose, plan how the disclosure will be handled – WHO, WHAT, WHEN, and TO WHOM

Adapted from: MacDonald-Wilson (2005, 2008) and MacDonald-Wilson and Rea (2008)

Appendix B

Tasks for Disclosing

1. Clarify the purpose (*Why*) of the disclosure – practical and/or personal reasons (see *Tasks for Preparing to Disclose*)
2. Choose *Who* will be handling the disclosure
 - (a) Professional, if involved with employer (implicit or explicit disclosure)
 - (b) Applicant/employee
 - (c) Other
3. Decide *To Whom* you will disclose
 - (a) Interviewer, trusted coworker, supervisor, human resources
 - (b) Choose whether educating coworkers would be useful, and if so, what information would be best
4. Select *What* is best to say to whom you will disclose in describing:
 - (a) Strengths and/or qualifications related to the job
 - (b) Services provided to employer and/or employee (if available), benefits of disclosure and/or accommodations
 - (c) Functioning in job performance affected by mental health condition or treatments
 - (d) The mental health condition
 - A disability, a medical condition, an illness that is managed
 - A biochemical imbalance, neurological problem, a brain disorder
 - A mental health condition, psychiatric disorder, emotional condition
 - Recovered (In recovery) from a _____ (use preferred term)
 - Difficulty with stress, personal problems, "get a little blue"
 - Other creative expression, or not mentioned at all
 - (e) Solutions to the functional issues – accommodations or other supports (presented positively)
5. Determine *When* is the best time to disclose
 - (a) Before the interview (especially if accommodation needed in the interview, or if professional is involved with the employer)
 - (b) During the interview (to explain gaps in work history, unusual circumstances, or visible signs of disability)
 - (c) After the interview but before starting the job (when accommodations needed immediately upon starting the job)
 - (d) Once on the job, before problems arise (when comfortable)
 - (e) Later on the job, once the need for explanation of behavior or accommodations becomes known (last resort, may result in negative reactions of employer, potentially seen as an excuse if performance problems have arisen)

6. Research a list of the resources available to the employer if additional information about accommodations, documentation, or functional limitations is needed, such as:
 - (a) Rehabilitation Counselor, Employment Specialist, Job Coach
 - (b) Physician, Psychiatrist, Therapist, Counselor, Social Worker
 - (c) Job Accommodation Network (JAN): 1-800-526-7234 or www.jan.wvu.edu
 - (d) ADA Disability and Business Technical Assistance Centers (DBTAC): 1-800-949-4232 or www.adata.org
 - (e) Other resources (see *Resources on Disclosure and Accommodations*)
7. Prepare professionals to provide documentation if requested (see *Resources*, JAN)
 - (a) Nature of disability or mental health condition
 - (b) Impact of disability on functioning, especially in extent of impact on major life activities (refer to *Resources*, list of functional limitations, Bazelon Center for Mental Health Law)
 - (c) Specific accommodations needed for limitations in functioning
8. Prepare and practice skills of disclosing and/or requesting accommodations
 - (a) Prepare a script using comfortable language
 - (b) Anticipate potential questions
 - (c) Prepare responses to questions using positive terms, focusing on strengths and solutions
9. Practice with trusted significant others so it feels comfortable and makes a positive impression, communicating strength, competence, and ability to handle disabilities so they will not interfere with job performance.

Example of disclosure: I am recovering from a medical condition that has been successfully treated. Currently, I am skilled in using Microsoft Office programs, answering phones, and scheduling appointments, but sometimes the medications that I take to maintain good health require using the restroom facilities every few hours. It would be helpful to have a 10-min break every 2 h, so I can manage this and do well in this job.

Adapted from: MacDonald-Wilson (2005, 2008) and MacDonald-Wilson and Rea (2008)

Appendix C

Resources on Disclosure and Accommodations

ADA Disability and Business Technical Assistance Centers (DBTACs): 800-949-4232 www.adata.org/. Ten regional centers provide information, technical assistance, and training on ADA and accommodations issues. The 800 number connects you directly to the DBTAC in your region.

Bazon Center for Mental Health Law: www.bazon.org. A legal advocacy organization for protection of the rights of people with mental illnesses and developmental disabilities. In addition to a variety of resources, information, and links, this site updates court decisions on the ADA and other laws.

- Civil Rights and ADA protections for people with mental disabilities: www.bazon.org/issues/disabilityrights/index.htm
- Title I of the ADA – Prohibiting discrimination in the workplace: www.bazon.org/issues/disabilityrights/resources/title1.htm#definition
- How the ADA Applies to people with mental health/psychiatric disabilities: www.bazon.org/issues/disabilityrights/resources/eeocguide.htm
- List of limitations on major life activities: www.bazon.org/issues/disabilityrights/resources/99scotus.htm#limitations
- The Supreme Court's 1999 ADA decisions: www.bazon.org/issues/disabilityrights/resources/99scotus.htm
- Other ADA Court decisions: www.bazon.org/issues/disabilityrights/incourt/index.htm

Equal Employment Opportunity Commission (EEOC): www.eeoc.gov or 800-669-3362. The government agency overseeing and interpreting the ADA. Materials and fact sheets available.

- Enforcement guidance: Pre-employment disability-related questions and medical exams (Oct 1995): www.eeoc.gov/policy/docs/preemp.html
- Enforcement guidance on disability-related inquiries and medical examinations (July 2000): www.eeoc.gov/policy/docs/guidance-inquiries.html
- Enforcement guidance: The ADA and psychiatric disabilities (March 1997): www.eeoc.gov/policy/docs/psych.html
- Revised enforcement guidance: Reasonable accommodations and undue hardship under the ADA (Oct 2002): www.eeoc.gov/policy/docs/accommodation.html

Frequently asked questions about employees with psychiatric disabilities: Tips and resources on the ADA, job accommodations, and supervision: Booklet for employers of people with psychiatric disabilities. Kim MacDonald-Wilson, Center for Psychiatric Rehabilitation, Boston University. Free download available from www.bu.edu/cpr/resources/articles/1997/macdonald-wilson1997.pdf.

Hyman I (2008) *Self-disclosure and its impact on individuals who receive mental health services*. HHS Pub. No. (SMA)-08-4337 Rockville, MD. Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2008. Electronic access at www.samhsa.gov. Free copies available at SAMHSA's Health Information Network at 1-877-726-4727.

Job Accommodation Network (JAN): www.jan.wvu.edu or 1-800-526-7234. A free consulting service for employers, educators, and people with disabilities, which provides individualized worksite accommodations solutions and technical assistance on the ADA and other disability legislation. Additional specific resources on the web include SOAR (Searchable Online Accommodation Resource), fact

sheets and examples, and forms such as Writing an Accommodation Request Letter and Sample Medical Inquiry Form.

- Disability disclosure and interviewing techniques for persons with disabilities: www.jan.wvu.edu/corner/vol01iss13.htm
- Job accommodation process: www.jan.wvu.edu/media/JobAccommodationProcess.html
- Making a written accommodation request: www.jan.wvu.edu/media/accommrequestltr.html
- Medical inquiry in response to accommodation request and sample medical inquiry form: www.jan.wvu.edu/media/medical.htm
- Requesting and negotiating a reasonable accommodation: www.jan.wvu.edu/corner/vol03iss04.htm
- Searchable Online Accommodation Resource (SOAR): Accommodation examples: psychiatric impairments www.jan.wvu.edu/soar/psych/psychex.html
- Reasonable accommodations for people with mental health disabilities: An online resource for employers and educators: www.bu.edu/cpr/reasaccom. Website targeted to employers and educators on accommodations and handling disclosure

Living Well with a Psychiatric Disability in Work and School – Center for Psychiatric Rehabilitation, Boston University – A website for employees and students with mental health disabilities with practical information and resources on the ADA, disclosure, and accommodations, including an interactive discussion board: www.bu.edu/cpr/jobschool. There is a related site for employers and educators at www.bu.edu/cpr/reasaccom/.

- Disclosing your disability to an employer: www.bu.edu/cpr/jobschool/disclosing.htm
- Handling disclosure: www.bu.edu/cpr/reasaccom/employ-faq.html
- Requesting documentation: www.bu.edu/cpr/reasaccom/employ-tips.html#request

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