

DISABILITY DISCLOSURE IN THE WORKPLACE

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INTRODUCTION

In a recent *Just Labour* paper, Hatfield (2005) examines employers and unions' duty to accommodate workers on the basis of disability, religion, sex, race and family status. His is a useful paper that provides an overview of existing case law, concluding that unions can do more to facilitate appropriate accommodation. Building on Hatfield's discussion, the present paper focuses on accommodation of workers with disabilities. The aim of this paper is to examine some of the complexities associated with accommodation in practice. In particular, the paper is concerned with the extent to which workers feel able to disclose their disabilities in the work environment. The process of accommodation cannot proceed unless individual workers feel comfortable disclosing specific impairments to supervisors and managers. Where this is not the case - for example, where workers are concerned that disclosure may result in dismissal or stigmatization in the workplace - requirements for appropriate accommodation are ineffective.

Existing work on disability disclosure provides a number of insights. Studies have focused on disclosure among people with psychiatric conditions (Honey 2003; Goldberg et al 2005), Arthritis (Gignac et al 2004), Cystic Fibrosis (Lowton 2004), Multiple Sclerosis (Dyck and Jongbloed 2000), Learning disabilities (Madaus et al 2002), and Epilepsy (Bishop 2002). A number of common themes emerge. Disclosure is frequently cited as a concern, and anxiety about the potential for discrimination and dismissal coupled with concerns about loss or renegotiation of identity lead people to conceal conditions where possible. People may believe that their impairment immediately places them at a disadvantage relative to non-disabled applicants (Lowton 2004), and this belief is substantiated by experiences where attempts at disclosure have produced negative outcomes (Bishop 2002). At the same time, there is a need to understand more about the complexity of disclosure at work (Allaire 2004; Goldberg et al 2005). Few studies have focused attention on the importance of the work environment and the employment relation as influences on people's

ability to disclose safely. Moreover, a review of the English-language literature found few Canadian studies on disclosure. With the exception of Dyck and Jongbloed (2000), much of the research was based in the U.S., the U.K., Australia and New Zealand. This paper uses data drawn from in-depth interviews with a diverse sample of people with disabilities in Hamilton, Ontario to explore how the disclosure process unfolds. Respondents were employed in a variety of 'peripheral' low-wage service sector, clerical and labouring occupations, and were asked about their experience of disclosure as part of a larger project examining labour market participation. Analysis provides insight into the ways in which people with different impairments negotiate the disclosure process, as well as the ways in which these work environments constitute more or less supportive sites for disclosure.

DISABILITY, DISCLOSURE AND ONTARIO'S HUMAN RIGHTS CODE

In Ontario's human rights code, disability is considered to include: (1) a wide variety of physical conditions caused by 'bodily injury, birth defect or illness', as well as (2) 'mental retardation' (or developmental disability), (3) learning disabilities, (4) 'mental disorders' (or psychiatric conditions) and (5) any injury or disability 'for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.' In contrast, recent social science scholarship has drawn an important conceptual distinction between impairment and disability. While physical, mental, developmental or learning *impairments* may result in particular functional limitations, *disability* can be characterized as a loss or limitation of opportunity to participate in social life due to physical and social barriers (Oliver 1990). Initial formulations of this 'social model of disability' were critiqued for their tendency to diminish the embodied experience of impairment. However, the model's strength lies in its conceptualization of disablement as a dynamic process driven by the interaction of body/mind and social context (Imrie 1996). In the context of paid work, the distinction between impairment and disability can be used to illustrate how barriers to full and open disclosure literally disable workers with impairments. For example, a woman with a non-evident chronic physical illness may be *disabled* by a workplace/job where she feels unable to disclose the condition to request modified duties or time off; a fact that forces her to leave the job. Her experience may be fundamentally different in a workplace where she perceives it is safe to disclose, and where accommodations make it possible to continue working.

In principle, employers and unions have a responsibility to provide appropriate accommodation to a point of undue hardship for workers with impairments who are qualified to perform the essential duties of specific jobs (Hatfield 2005). According to Ontario's human rights code, the most appropriate

accommodation: “is one that most respects the dignity of the individual with a disability, meets individual needs, best promotes integration and full participation, and ensures confidentiality” (2000, 18). Given the diversity of impairments, the code recognizes that the nature of accommodations is likely to vary widely and should be tailored to the specific needs of the individual in question. While many employers associate accommodation with costly modifications to the built environment, in reality most changes are relatively inexpensive and many cost nothing. However, accommodation may require employers to be flexible with regard to the scheduling, training, and assignment of work tasks for workers with impairments (Wilton 2004).

The issue of disclosure is of central concern in legislation covering accommodation. In an immediate sense, workers are responsible for bringing their needs to the attention of the accommodation provider. This does not mean that they have to disclose the specifics of their impairment to an employer, as the latter “does not generally have the right to know what the disability is” (OHRC 2000, 23). Workers may present documentation indicating a need for a specific accommodation (e.g., a doctor’s letter) without identifying the nature of their impairment. Where a condition is visible or otherwise evident, employers may be immediately aware of a worker’s impairment, although this does not necessarily mean they know what it is. Where a condition is non-evident, the issue of disclosure can be more complex. This is particularly the case for conditions that are stigmatized in society. The commission makes specific reference to stigma associated with mental illness and HIV/AIDS. It argues that an employer’s duty to accommodate generally exists only *for needs that are known*, but it also states that because some people may have difficulty disclosing, employers should attempt to assist a person who is “clearly unwell or perceived to have a disability”. Crucially, “even if an employer has not been formally advised of a mental disability, the perception of such a disability will engage the protection of the code” (2000, 25).

The intent of the code, then, is to ensure employers provide accommodation where possible to facilitate the inclusion of people with impairments into the labour force. However, using and enforcing the code in practice can be difficult. As with other rights-based approaches to accommodation, Ontario’s legislation places considerable responsibility for enforcement on the individual worker (Lunt and Thornton 1994). A person who believes he/she has been unfairly treated must pursue a complaint against an employer. The complaints process can be long and arduous, all the more so because of reductions in the budget of the Human Rights Commission (Chouinard 2000).¹

At the same time, the protection of the human rights code is typically not available to individuals if they are unable or unwilling to disclose their

impairment to an employer. Thus, the extent to which individuals feel secure to disclose may ultimately determine their ability to access accommodations.

There is some evidence that the type of work environment and employment relation facilitates/constrains people's ability to disclose an impairment. Ellison et al (2003) found that 86 percent of respondents in a sample of 350 managerial and professional workers had disclosed their psychiatric diagnoses at work. Of those who had disclosed, roughly 60 percent did not regret disclosure, while 35 percent expressed regret and a small number were uncertain. Managerial and professional workers may have more control over their jobs, and feel better able to disclose as a result. By contrast, Dyck and Jongbloed (2000) found that women with MS in non-unionized service jobs faced particular difficulties because they were least able to control their jobs and most vulnerable to negative outcomes if they failed to meet employer expectations.

These findings can be directly related to research on the changing nature of employment. Labour market segmentation theorists distinguished between employers in the core or primary sector of the economy and those that exist in the periphery, with the former providing 'better jobs' - those that offer more security of tenure, greater opportunities for upward mobility, and better wages and benefits (Krahn and Lowe 2002). By contrast, firms in the periphery are characterized by high turnover, and poor wages and benefits. More recent work contends that economic restructuring has blurred the boundary between core and periphery. The growth of part-time, temporary and contract work as well as the downgrading of some forms of permanent, full-time employment has meant that employment for some workers in the core sector is now increasingly 'precarious' (Vosko 2000). The concept of precariousness can thus be used to capture the degree to which workers, in both core *and* periphery, face job insecurity, less control over work, less regulatory protection (particularly through union representation), and lower wages (Rodgers 1989; Cranford et al 2003).

Research on core/periphery and precariousness is important to an understanding of the process of accommodation as it suggests that workers with disabilities who obtain better jobs in core firms stand a better chance of securing accommodation. At the same time, studies indicate that workers with disabilities are disproportionately concentrated in peripheral and increasingly precarious jobs as a result of enduring barriers in the educational system and the labour market (Barnes 1999). In these jobs, then, individuals may confront a fundamental contradiction between the need for disclosure to access accommodation, and the knowledge that disclosure may mark them as problem workers in an already precarious environment. For this reason, it is important to understand more about how people negotiate disclosure when applying for, and working in, such contexts.

RESEARCH DESIGN AND DATA COLLECTION

This paper uses qualitative data collected in Hamilton, Ontario to explore the negotiation of disclosure from the perspective of people with impairments. Research was undertaken in partnership with a non-profit employment service for disabled people, and consisted of a quantitative analysis of agency clients' work experience (N=617), followed by semi-structured interviews with a sample of fifty-nine people drawn from the client population. As Table 1 reveals, many of the women and men who used the employment service found work in sales and service, retail sales and unskilled labour. For the semi-structured interviews, a diverse sample of women and men with learning, physical, psychiatric and sensory impairments was recruited (Table 2), reflecting the overall occupational concentration of the client population. Few of these respondents had jobs with union representation, and many had had multiple jobs in recent years for reasons including the temporary nature of some employment as well as dismissal on 'performance' grounds. In this sense, respondents' experiences reflect both the growth of precarious employment, and the enduring barriers that confront people with impairments in the labour market.

Qualitative methods were appropriate to explore the complexity of clients' experiences of disclosure. In-depth interviews offered a flexible format in which to explore when or if a person disclosed, their reasoning for so doing, the tactics they used to manage their impairment at work, to whom they disclosed, and how much information they provided at any given time. The interviews were taped and transcribed, and then entered into the QSR N6 coding program. Analysis involved coding all references to practices of disclosure and/or non-disclosure, the strategies workers used in each case, and the outcomes associated with these practices. The diversity of impairments among respondents made possible some comparison across impairment type. Particular attention was given to the ways in which work environments made possible and/or prevented disclosure.

ANALYSIS: DISCLOSURE IN PRACTICE

Analysis revealed that the vast majority of respondents experienced disclosure as a problematic issue, albeit in different ways. For some, disclosure was essential because of the evident nature of an impairment and/or because specific accommodations were essential for their work. In these instances, people used a range of tactics to broach the issue with employers during interviews or at work. For others with non-evident impairments, the choice to disclose was complex and often centered on their perception of employers' likely reactions to the information. Analysis of respondents' experiences revealed

distinct variations in the negotiation of disclosure on the basis of impairment type. The remainder of this section examines the nature of this variation.

Without exception, respondents with sensory impairments (12) practiced upfront disclosure, in large part because they needed specific accommodations in order to function in the workplace. Respondents argued that the aggravation associated with non-disclosure – for example, problems with communication – meant this strategy was not worthwhile. However, upfront disclosure sometimes made it difficult to secure employment. Kathy, who was in her early fifties, had a visual impairment as a result of macular degeneration that meant she needed the use of a magnifying device at work. She had worked part-time as a receptionist for a real estate company for five years, following several years of contract work at another company. She was laid off in the late nineties:

I was working in a real estate and I had to have the [Canadian National Institute for the Blind] come in, um, they talked to my boss and they introduced him to the equipment... He was great, he was, but they downsized the company and I lost my job. And ever since that I've never been able to work. I've had a hard time... The biggest thing is, as soon as I told them that I had equipment, they weren't interested. I actually applied to a couple of real estate agents and um, and of course I have to be truthful. I can't lie to them, um, and when they found out that I had this equipment, they didn't seem to be very interested.

Kathy's experience points both to the risks associated with upfront disclosure and the additional problems encountered by people seeking work with pre-existing impairments compared to individuals who develop impairments while employed. Employers may be more willing to support the accommodation of a worker they already know.² Kathy's layoff can also be related to the growth of precarious work as a barrier to finding employers willing to accommodate. To the extent that work becomes more precarious, even people with impairments who do find supportive employers have less chance that the job will last.

A majority of people with physical impairments also disclosed upfront (11 of 17). Like individuals with sensory impairments, this approach was adopted by some people because of a need for specific accommodations in order to function in the workplace. While respondents recognized that this often reduced the likelihood of employment, they were faced with little choice. Chris, for example, was in his mid-thirties, and used a wheelchair as a result of a spinal cord injury. He had worked in a variety of occupations, most recently as a trucking dispatcher. At the time of the interview, he was working two part-time jobs. He explained his approach when he applied for work:

When they ask for the interview... at that time I need to be right up front and say it has to be wheelchair accessible and everything like that. And they would say

it's not or whatever and that's it. There was one in [place]. Sent the resume Friday afternoon. They called me back for an interview Monday. I asked the lady there and she explained it would be fine. It would be accessible. Then on Monday, before I was walking out the door with a tie and everything, they said not accessible, washrooms weren't really accessible and they needed to fill the position immediately.

Alongside the need for accommodation, some physical impairments were immediately evident to employers so the choice of non-disclosure was not possible. However, one approach adopted by workers was to comment on impairment without revealing its full extent. Roger was in his mid-forties. He had worked for a non-union steel processing company until his hand was crushed at work and he was let go by the company. Since then he had had a number of short-term positions and was working for a temporary employment agency at the time of the interview. He explained his approach in interviews:

I don't tell them, "gee I can't do that, or I don't want to do that"... If they ask me I tell them what happened. I say, "Well, I was let go because of my hand injury and the medication I was on". I have to tell them, I don't to want to make myself feel bad by lying to them, but I'm only gonna answer the questions that I'm asked... and I'd let them make up their own mind.

Some respondents used this approach to negotiate visible physical difference in interviews or to explain gaps in their resumes. In this sense, partial disclosure offered respondents an opportunity to confront employer concerns (also Lowton 2004).

Six people with non-evident physical impairments practiced non-disclosure in some or all of their previous/current jobs. Motives here varied. Two people commented that they wanted to focus on their qualifications and experience, rather than their impairments. Others practiced non-disclosure because they felt their impairments would make it more difficult to secure employment. Regardless of motive, non-disclosure often required considerable effort in interviews and at work. Anna was in her early fifties and had been diagnosed with Crohn's disease in her twenties. She had worked in a variety of jobs, including factory assembly line, food service and clerical work and had rarely disclosed. She talked about concealing her illness:

I tried not to eat at work so I wouldn't have to go to the bathroom! That was the major thing. I could take whatever medication in the privacy of the bathroom, but it was the frequency of my visits that piqued their curiosity, I guess.... Other than not eating while I was there or before I went, I'd taken Imodium but years

ago it wasn't quite as good as it is now and I ended up having severe cramps and severe constipation.

As this statement makes clear, the use of such strategies can come at a significant cost. Not disclosing – and subsequently not asking for accommodation – may be perceived by workers as a successful strategy in that they are able to secure or retain jobs in settings where they believe an employer would be reluctant to hire or retain someone with a disability. Over time, however, costs such as physical pain, exhaustion and anxiety about being discovered can take their toll. The situation can be exacerbated if workers are asked to take on additional tasks that impact directly upon their impairments. Nicole, who was in her fifties and had Polio as a child, worked in retail sales. She talked about a recent experience when she was asked to switch to a shipping/receiving position that required moving boxes of merchandise in the stockroom:

These last two weeks, our shipper and receiver was on holiday, so they asked me if I would do it. Oh, I'll tell you, last night was my last night and I couldn't wait. I was coming in one night and my daughter said, "Mum, it's too heavy." I said, "I know, but I don't want to tell them it's too heavy" because then that will let them know, and it's awkward because I've never, nobody's ever really known.

The expectation that workers will be able to switch between work tasks reflects the ongoing restructuring of work in retail and other sectors (Leslie and Butz 1998), and the extension of demands for 'functional flexibility' from managerial and professional occupations to other workers with considerably less control over their work tasks. These demands may be particularly problematic for people with impairments.

People with learning impairments were mixed in their approach to disclosure. Nine of sixteen respondents said that they generally did not disclose their impairments to employers. Again, motivations included both a desire to be hired without special consideration as a 'disabled person', and a concern that disclosure would result in few offers of employment and/or dismissal from an existing position. Caitlin, who had had a series of retail jobs, was convinced that any mention of her learning impairment to a potential employer would be disastrous:

I would never say that because you know what that would mean? "Don't choose me; I am no good for you". You don't dare say that because that's just like saying: I don't want the job; don't you see I am the worst one! So you play up like: oh, yeah, I can do it fine.

Some people argued that the learning impairment had no impact on their work and therefore was not relevant to employers. Megan, for example, worked as a nurse's aide at a long-term care home. She argued:

I didn't think about telling them since I'm not in the, like they're not putting me into a case that I can't manage. You know, they're not putting me to the test, but if they should, then I would tell them. [Int: Like paperwork or something you didn't feel comfortable doing?] Yeah, I would tell them. If, like, if there is something I can't do.

While Megan found non-disclosure to be a viable strategy, other respondents experienced considerable anxiety and distress at work, due in part to uncertainty about whether they would be asked to do something by an employer that would necessitate disclosure. Wendy, for example, was in her late twenties and had had several jobs working in retail where she had not disclosed her difficulties working with numbers. She talked about the anxiety she felt:

Some of them I kind of lied about it. Like, half of you when you get a job with a learning disability (.) you want the job but then when you get it, you are like, my God! ...What's going to happen if he asks me or he wants me to be on cash and he's going to leave? It's all these fears. What happens if he gets me to do something that I don't know how to do?

Wendy's anxiety was exacerbated by employer expectations that workers will move between tasks to suit employer needs. Recently, she decided to disclose her impairment when she found a part-time permanent clerical job in a small business. Her employer, who also had an impairment, agreed to bring in a job coach from a service organization to provide additional training. Wendy found the job coach reduced her anxiety, but she worried that the part-time hours would not provide sufficient income.

Respondents with psychiatric diagnoses were least likely to disclose to employers. Among fourteen respondents, eleven did not disclose, and all fourteen identified the stigma and the lack of understanding about mental illness as a primary concern with regard to disclosure. Several people believed earlier efforts at disclosure had resulted directly in dismissal. Again, non-disclosure required people to use a variety of tactics to prevent employers and co-workers from finding out. Andrew, who lived with manic depression, talked about his efforts to avoid awkward questions at work:

I used to put cotton wool in my pill box so they wouldn't rattle because someone's bound to say, "What's that rattling?" It sounds ridiculous but you know, and if you were going to see a doctor you say you are going to the dentist.

So you, it's awful to say it, but you have to use strategies because of the way people view it.

From the perspective of respondents these strategies made sense in that they guarded against the stigmatization and dismissal people feared they would face if employers knew. However, the benefits of non-disclosure have to be set alongside the costs, which include both the extra work of hiding an impairment and the worker's inability to request needed accommodations. Kate, who was in her forties and had bipolar disorder, made the following comment about concealing her condition while working as a sales representative:

I guess it's a different kind of stress, keeping it hidden instead of just feeling like you're free to say, you know, 'I struggle with depression and I need some time off.' Like, employers don't like hearing that so, you try to plough through but you're not kind of working with all cylinders working and it's hard.

Significantly, many respondents with psychiatric conditions did not conceive of requests for time off or flexible scheduling as legitimate accommodations until prompted by the interviewer. Taylor, for example, was in his mid-thirties and had Schizophrenia. He did not disclose to employers and believed it would be difficult to negotiate accommodations such as time off work with an employer because "you don't have a cast on your arm or bandage wrapped around your head." Asked if he had needed such an accommodation in the past, he replied:

Oh, for sure, but I ended up quitting, right, and that relieved the stress for me. Okay. I don't have to work here anymore so I can relax now. Don't worry about it, just relax and ah, pay the rent, pay the bills and then look for another job I guess.

The fact that workers themselves did not conceive of their needs in terms of reasonable accommodations is one indication of the broader challenge of effectively applying existing legislation to psychiatric illness in the workplace (see Ellison et al 2003).

Of the three people who disclosed psychiatric diagnoses to employers, one did so as a result of being enrolled in provincial wage subsidy programs for persons with disabilities. Aware of the stigma associated with the term 'Schizophrenia', the respondent initially told his employer he was dealing with a 'chemical imbalance', and disclosed the name of his condition only when he felt more secure. The two remaining respondents had begun to practice disclosure because they were concerned that aspects of their impairment were evident in interviews.

As was suggested above, the majority of respondents were employed in peripheral occupations characterized by poor job security, lower wages and an absence of regulatory protection. In these settings, people perceived disclosure and the pursuit of accommodation as a risky endeavour. By contrast, the experiences of a minority of respondents in unionized environments and in the non-profit sector offered some encouraging alternatives. Sarah, for example, was in her forties and was living with rheumatoid arthritis. She described the situation she had negotiated working as an administrator for a non-profit organization:

They know I have rheumatoid arthritis. I don't take too much time off but occasionally I may phone in and say, "You know, I'm not moving very well today". They're understanding in that respect...

Gordon, who was in his fifties, had a brain injury that affected his balance and cognitive ability. He had been a machine operator at a unionized steel processing plant and was reassigned to assemble shipping crates after the injury. He talked about the role of the union:

A lot of times they [supervisors] were watching me a bit tighter than they were watching somebody else. Like if I had slightest little cut on my fingers, they come rushing up and they say: "well, we want to know from your neurologist that you're okay." You know, waiting for me to make a mistake, anything they could to get rid of me. They tried for years but the union protected me and they said: "you can't touch this guy unless you have something really legitimate."

The fundamental difference between these experiences - produced by the organizational culture of the non-profit organization and the protection afforded by union representation - and those described by respondents in peripheral occupations draws attention to the ways in which workplaces can actively disable or enable workers. Taken together, respondents' experiences help to demonstrate the complexity of disclosure in the workplace. When and how disclosure occurs, as well as the strategies used by workers to conceal or reveal impairments, is shaped by a number of factors including the individual's impairment and the nature of the work environment.

CONCLUSION

This paper has been concerned with understanding the problems associated with the disclosure of impairments in the workplace. While provincial human rights legislation requires employers to offer appropriate accommodation to the point of undue hardship, a significant number of

respondents in this research did not receive the assistance they needed. In part, this was because more than forty percent of interview respondents regularly did not disclose to employers. Motives for non-disclosure varied, but the principal reason was a belief and/or previous experience that knowledge of impairment would substantially reduce the worker's chance of being hired or retaining an existing position. While provincial legislation states that workers are responsible for making their needs known to employers, a significant minority of respondents in this study did not perceive their workplaces as environments in which they could safely disclose. Strategies used to conceal impairments were perceived to have an immediate benefit in the sense that they permitted respondents to be hired and/or to retain employment. However, they also had a number of long-term costs. An ongoing lack of accommodation means individuals may be identified as problem workers and subsequently dismissed. Other costs include the impact on people's health and well-being, both in terms of potential physical harm and the stress and anxiety associated with non-disclosure.

A key question arising from this analysis is how to foster workplaces that are supportive of disclosure and accommodation. One approach involves educating and empowering workers with impairments so that they feel able to use existing legislation. In this study, few respondents talked about the provincial human rights code, and a workshop held with the partner agency revealed a limited understanding of its provisions. In the US, Ellison et al (2003) found that people who knew more about the provisions of the Americans with Disabilities Act were more likely to disclose, suggesting that further educating workers with impairments about their rights may be beneficial.

At the same time, a focus on individual workers needs to be supplemented by attention to the context of paid work, and the collective agency of workers to create supportive environments for disclosure. The labour movement can play an important role here. Although a majority of respondents in this study worked in non-union jobs, those who did have union representation often recounted more favourable outcomes when it came to disclosure and accommodation. Hatfield (2005, 32) concludes that unions can do more to educate their members about accommodation. He suggests that the knowledge that: "a misfortune which has visited a colleague might one day visit them" may be a useful starting point for developing a proactive position on accommodation among union members. While I concur with Hatfield on the need for a proactive stance toward accommodation, his starting point is problematic for three reasons.

First, it begins from the position that disablement is an individual misfortune rather than the result of an intersection between the individual and social context. As the experiences of respondents in this paper demonstrate, the nature of the work environment has considerable influence over whether people

feel able to disclose impairments and seek accommodation. In other words, it is important to recognize the capacity of the work environment to *enable* or *disable* workers with different impairments. Second, Hatfield appears to focus most attention on previously non-disabled workers who have been injured or fallen ill. This focus needs to be replaced with recognition of the diverse population of people with impairments who face enduring barriers to getting and keeping paid employment. As was suggested at the outset of the paper, research indicates that because of these barriers, people with impairments are disproportionately located in precarious jobs. They have a vested interest in the upgrading of those jobs, and the creation of accommodating workplaces. This leads to a third and final concern. The principal focus of unions is on the interests and issues facing existing members. While in some ways this focus is understandable, one consequence is that unions have traditionally had little time for workers excluded from existing bargaining units, including those dealing with pre-existing impairments. In recent years, declining memberships have prompted calls for union renewal through campaigns to 'organize the unorganized' (Yates 2004). Recognizing people with impairments as an important constituency in this renewal process is essential. Part of demonstrating a commitment to this population comes from unions conceptualizing accommodation not as something to be sensitive about in relation to personal misfortune, but as an integral part of the right of all workers to dignity and respect on the job. The creation of 'accommodating workplaces' – work environments which *enable* people by making them feel safe to disclose their needs and obtain accommodation – is ultimately part of a broader struggle to exert a measure of worker control over the workplace.

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NOTES

¹ It can take up to four years for a complaint to be resolved. At present, the provincial government is proposing significant change to the commission. Under Bill 107, the commission would shift its focus from evaluating and handling complaints to education, advocacy and preventing discrimination. The government argues that this change would strengthen the commission, but disability groups have expressed considerable concern that the new mandate would further disadvantage individuals seeking to bring complaints to the human rights tribunal (Livingston 2006).

² In response to the barriers facing people with pre-existing impairments, service organizations such as the agency that participated in this study attempt to match workers with supportive employers, thereby removing or at least reducing the uncertainty confronting job seekers.

Table 1: Occupations most commonly occupied by women clients by disability (%)

Occupation	All women	Physical	Psychiatric	Cognitive/ Learning	Sensory
<i>Sales & Service Occupations</i>	23.4	29.6	21.4	31	13.8
<i>Retail Salespersons and Sales Clerks</i>	17.5	16.3	9.2	20.7	27.6
<i>Clerical Occupations</i>	10.5	10.7	11.2	13.8	6.9
<i>Occupations in Food and Beverage Services</i>	5.9	–	10.2	10.3	10.3
<i>Secretaries</i>	5.1	4.6	–	–	–
<i>Trades Helpers, Construction, Transportation Labourers</i>	–	5.1	8.2	–	–
<i>Assisting Occupations in Support of Health Services</i>	–	–	–	6.9	–
<i>Machine Operators in Manufacturing</i>	–	–	–	–	6.9
Occupation	All men	Physical	Psychiatric	Cognitive/ Learning	Sensory
<i>Sales & Service Occupations</i>	25.6	25.3	24.1	28.6	35.8
<i>Trades Helpers, Construction, Transportation Labourers</i>	22.3	21.3	22.8	26.8	22.6
<i>Retail Salespersons and Sales Clerks</i>	7.8	8.6	10.1	5.4	–
<i>Occupations in Protective Services</i>	5.8	–	6.3	5.4	–
<i>Occupations in Food and Beverage Services</i>	4.3	–	–	5.4	3.8
<i>Clerical Occupations</i>	–	5.7	3.8	–	5.7
<i>Transportation Equipment Operators & Related</i>	–	5.7	–	–	–
<i>Paralegals, Social Services workers</i>	–	–	–	–	3.8
Source: Client Database (1997-2001), N=617					

Table 2: Interview respondents by gender and impairment

	Leaning/ cognitive	Physical	Psychiatric	Sensory	Total
<i>Women</i>	8	9	6	6	29
<i>Men</i>	8	8	8	6	30
<i>Total</i>	16	17	14	12	59

REFERENCES

- Allaire, S. (2004) What work changes do people with arthritis make to preserve employment, and are such changes effective? *Arthritis and Rheumatism* 51, 871-873.
- Barnes, C., Mercer, G. and Shakespeare, T. (1999) *Exploring disability: A sociological introduction*. Cambridge: Policy Press.
- Bishop, M. (2002) Barriers to employment among people with epilepsy: report of a focus group. *Journal of Vocational Rehabilitation* 17, 281-286.
- Chouinard, V. (2001) Legal peripheries: struggles over disabled Canadians' places in law, society and space. *Canadian Geographer* 45, 187-192.
- Cranford, C., Vosko, L. and Zukewich, N. (2003) Precarious employment in the Canadian labour market: A statistical portrait. *Just Labour* 3, 6-22.
- Dyck, I. and Jongbloed, L. (2000) Women with Multiple Sclerosis and employment issues: A focus on social and institutional environments. *Canadian Journal of Occupational Therapy* 67, 337-346.
- Ellison, M., Russinova, Z., Macdonald-Wilson, K., and Lyass, A. (2003) Patterns and correlates of workplace disclosure among professionals and managers with psychiatric conditions. *Journal of Vocational Rehabilitation* 18, 3-13.
- Gignac, M., Badley, E, Lacaille, D., Cott, C., Adam, P. and Anis, A. (2004) Managing arthritis and employment: making arthritis-related work changes as a means of adaptation. *Arthritis & Rheumatism* 51 (6), 909-916.
- Goldberg, S., Killeen, M. and O'Day, B. (2005) The disclosure conundrum: How people with psychiatric disabilities navigate employment. *Psychology, public policy and law* 11, 463-500.
- Hatfield, R. (2005) Duty to Accommodate. *Just Labour* 5, 23-33.
- Honey, A. (2003) The impact of mental illness on employment: Consumers' perspectives. *Work* 20, 267-276.
- Imrie R. (1996) *Disability and the city: International perspectives*. London: Paul Chapman.
- Krahn, H. and Lowe, G. (2002) *Work, Industry, and Canadian Society*. Toronto: Thomson Nelson.

-
- Leslie, D. and Butz, D. (1998) 'GM Suicide': flexibility, space and the injured body. *Economic Geography* 360-78
- Livingston, G. (2006) Ontario introduces contentious rights bill. *Toronto Star*, April 26 (<http://www.thestar.com/> article id 1146088213631)
- Lowton, K. (2004) Only when I cough? Adults' disclosure of Cystic Fibrosis. *Qualitative health research* 14, 167-186.
- Lunt, N. and Thornton, P. (1994) Disability and employment: Towards and understanding of discourse and policy. *Disability and Society* 9, 223.
- Madaus, J., Foley, T., McGuire, J., Ruban, J. and Lilia, M. (2002) Employment self-disclosure of postsecondary graduates with learning disabilities. *Journal of Learning Disabilities* 35, 364-369.
- Ontario Human Rights Commission (1999) *Human rights at work* The Commission, Toronto
- Ontario Human Rights Commission (2000) *Policy and guidelines on disability and the duty to accommodate*. The Commission, Toronto.
- Vosko, L. (2000) *Temporary Work: The Gendered Rise of a Precarious Employment Relationship*. Toronto: University of Toronto Press.
- Wilton R. (2004) From Flexibility to Accommodation? Disabled People and the Reinvention of Paid Work. *Transactions, Institute of British Geographers* NS 29, 420-432.
- Yates, C. (2004) Rebuilding the Labour Movement by Organizing the Unorganized: Strategic Considerations. *Studies in Political Economy* 74, 171-180.