

## Professional Leave Report Cover Sheet

Name: Alicia Becton

Department: Counselor Education &  
Rehabilitation

College: Kremen School of Education & Human Development

Leave taken: ☒ Sabbatical      ☐ Difference in Pay      ☐ Professional Leave without Pay

Time Period: ☒ Fall  
☐ Spring  
☐ Academic Year  
☐ Other

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## **SABBATICAL REPORT**

<b>Name</b>	Dr. Alicia B. Becton
<b>Department</b>	Counselor Education and Rehabilitation (CER)
<b>School</b>	Kremen School of Education and Human Development (KSOEHD)
<b>Sabbatical Term</b>	Fall 2020
<b>Date Submitted</b>	February 18, 2021

Sustained excellence across areas of teaching, research, and service have marked the last six years at various levels including the department, school, university, community, and the counseling profession at large. I was appointed as faculty at Fresno State in August 2014 and received Tenure and Promotion to Associate Professor, Fall 2019. During those years, I led the charge for the Council for Accreditation of Counseling and Related Educational Programs (CACREP) national accreditation, worked as a Program Coordinator of the Master of Science in Clinical Rehabilitation and Mental Health Counseling (CRMHC), served as Kremen's Graduate Programs Coordinator, and participated as an active member on multiple committees among several other administrative roles and responsibilities. I was fortunate to receive a sabbatical leave for the Fall 2020 semester and continue trajectory in engaging in research to fulfill requirements for promotion and the rank of Full Professor. Below, I have summarized my accomplishments of the leave in relation to the goals proposed and the anticipated outcomes for the near future.

## **Section I: The Accomplishments of the Leave**

While on sabbatical I was afforded the opportunity to saturate my knowledge base by engaging in reading and writing centered on perceptions of individuals to hire people in addiction recovery. To further inform my research and existing knowledge, I focused not only on vivid descriptions identified through open-ended questions, but also on the extent in which personal and professional related characteristics may be predictive of hiring decisions. Recommendations and resources were developed which could be used by community-based agencies, treatment facilities, and institutions to work with this particular population and train professionals by taking a broad-based approach to this investigation. The research will hopefully maximize existing programs and strategies for supporting individuals in addiction recovery.

Not only was the manuscript accepted for publication (*Appendix A*), I was also privileged to formulate another manuscript as a solo piece (*Appendix B*). Using the data to analyze determinants effecting employer perspectives to hire individuals in recovery and to determine through statistical comparisons whether there are significant differences in employer perspectives to hire based on business related characteristics and organizational structure will contribute to the body of knowledge and treatment modalities for this population. The leave allowed further development of my scholarly research agenda, expertise in an advanced area which directly impacts teaching, research and service while also specifically adding rich content to graduate level curriculums and potential program grant funding.

During the sabbatical, I focused on redefining my research agenda specifically without daily administrative and leadership responsibilities. In addition, as a faculty member who values research, it was imperative to stay current in the field. These experiences deepened my expertise regarding the specific area outlined and lead to greater command of subject matter.

I accomplished the goal of spending more time on researching how perspectives of individuals impact hiring practices and potential recovery outcomes. Networking with colleagues from Fresno State and other universities in order to achieve the tasks set forth was also a reward.

Overall, the sabbatical leave during Fall 2020 was a culminating experience to (a) research and examine culturally responsive counseling strategies in the rehabilitation and addictions counseling field and (b) explore ways program faculty can continue to collaborate and expand existing services, particularly offering evidenced based treatment modalities which include employment as a key component. The program of activities and objectives listed below in Table 1 were achieved and to some degree exceeded. At present, I have identified funding opportunities and seek to apply for grant funding during the Summer/Fall 2021.

Table 1. Overview of Schedule

Task		Aug.	Sept.	Oct.	Nov.	Dec.	Spring 2021
	Visit local agencies	X					
	IRB Approval	X					
	Review of Literature		X				
	Data Collection and Analysis		X	X			
	Discussion and Implications				X	X	
	Publish Work					X	
Outreach	Local community based agencies and grant collaboration						X
Implementation in teaching	REHAB 238 Practicum (Spr. 2021)						X
	REHAB 265- Substance Use Disorders (Fall 2021)						

## Section II: Modifications to the Original Proposal

There were no modifications to the original proposal.

### **Section III: Objectives of Original Proposal, Not Accomplished**

All objectives were met during the leave period. Besides the work conducted during the leave, I plan to identify a grant by May 2021. Meetings are currently underway with the Office of Research and Sponsored Activities.

### **Section IV: Anticipated Future Outcomes**

The sabbatical leave provided benefits at multiple levels. Most importantly, conference proposals and publications generated from this research are pertinent to the field. I plan to submit a proposal to the National Association of Multicultural and Rehabilitation Concerns Annual Conference (*held in July*) by March 15, 2021. Community partners and the broader rehabilitation counseling community will become aware of the emphasis Fresno State is placing on applying and promoting holistic treatment modalities for individuals in recovery/community members. As such, the findings generated from the research will be shared beyond the Department of Counselor Education and Rehabilitation, and the university.

In summary, I plan to continue my career with Fresno State which includes being promoted to Full Professor. It is imperative that I continue to be intentional with publishing and demonstrating sustained progress in the chosen research area. Based on prior experiences of colleagues who have undergone at least a one-semester sabbatical, all have highlighted the personal and professional benefits related to engaging in work tied to one's passion without distractions, which served as a source of renewal and impetus for innovative ideas. I would expect the results of my efforts could also be linked to other scholarly works via grants, multiple journal manuscript submissions to various outlets, and relative calls for proposals examining similar issues. The increased scholarly activities over and beyond the development of manuscripts and potential grant funding would reflect positively on the CER Department,

Kremen School of Education and Human Development, and the university. I also see my contributions serving as a benefit to other disciplines and industries that are exploring similar issues. The sabbatical facilitated a transformed sense of professional commitment that will be leveraged in the classroom, committee work, and in other university and community capacities.

Moreover, the sabbatical allowed further exploration in other areas of academic emphasis such as the impact of race and gender on faculty member perceptions of black students with disabilities (*Appendix C*). I am pleased to have accomplished my proposed goal for sabbatical but also have two other manuscripts which will be ready for submission within the next 60-90 days. The sabbatical leave helped further align my research, service and teaching goals. I improved my pedagogical approaches and have begun applying these innovative processes to courses, specifically field experience (REHAB 238-Practicum in Clinical Rehabilitation and Mental Health Counseling). The insight and knowledge I gained has assisted in helping students understand various populations in rehabilitation and behavioral/mental health counseling. Lastly, following the Fall 2020 sabbatical, I am better equipped to design and execute research proposals in particular areas. I would also be able to leverage this enhanced knowledge base across committees, community, and other professional-based assignments.

# **APPENDIX A**

## **PDF OF ACCEPTED MANUSCRIPT**

**“Hiring Individuals in Addiction Recovery: Characteristics, Levels of Concern and Willingness”**

# Hiring Individuals in Addiction Recovery: Characteristics, Levels of Concern and Willingness

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*Background: Research suggests employment is a key factor in an individual's recovery and employer's views have historically limited opportunities for highly marginalized groups. Objectives: This study provides an analysis of views among employers regarding the hiring of individuals in addiction recovery. Methods: A convenience sample of 382 employers affiliated with the chambers of commerce was recruited to participate in this study. The authors used descriptive and inferential statistical methods to analyze data received through an online questionnaire. Results: The results suggest gender influences the views of employers to hire individuals in recovery. Additionally, levels of concern among employers vary across industries displaying a likelihood of employers to hire individuals in recovery dependent on the extent of needs. Women are more likely to hire individuals in recovery than men. Conclusion: The findings help illuminate the employability of this unique population and also develop a better understanding of the characteristics of prospective employers who are willing to hire individuals in addiction recovery.*

**Keywords:** employability, addiction, recovery, employer, views.

**A**lcoholism, illicit drug use, drug abuse, and addiction have been of great concern in society over several decades, representing a serious and persistent public health problem in the US. In the 1980s, it was estimated that about two-thirds of the people entering the workplace had used illegal drugs (Tyson & Vaughn, 1987). In following decades, substance-related disorders (SRDs) continued to be well documented as an urgent public health matter (Murch, 2015; Substance Abuse and Mental Health Services Administration [SAMHSA], 2008; 2012). More recently, in a survey of drug use and health, SAMHSA (2017) reported approximately 20.1 million people aged 12 years or older had SRDs, meeting DSM-IV criteria for dependence or abuse of alcohol or illicit drugs in the past year. Yet only 10.6% of those who need-

ed treatment received it at a facility that specialized in substance use disorders. Furthermore, it is estimated that individuals with SRDs account for 8.6% of the workforce (National Safety Council [NSC], 2019a). As a result, SRDs are now recognized as a major health concern with various causes and implications affecting men, women, and teenagers of diverse racial and ethnic groups, with African Americans being affected disproportionately (Holzer, Rapheal, & Stoll, 2003). In recent years, mental health professionals have focused on helping clients obtain and maintain sobriety, while keeping their current employment, finding another job, or coping with unemployment. According to SAMHSA (2013b), employment is no longer considered the mere goal of rehabilitation when it comes to substance abuse; it now serves as a rehabilitation measure itself.

## Substance-Related Disorders and Rehabilitation

The DSM-5 defines SRDs as "a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance despite substance related issues"

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(American Psychiatric Association, 2013, p. 481). While SRDs cannot be cured, there are evidence-based methods for rehabilitation, which should be readily available, holistic, individualized, and maintained long-term to prevent relapse (National Institute on Drug Abuse [NIDA], 2018). The National Academies of Science, Engineering, and Medicine (2016) refer to recovery as "an individually defined and nonlinear journey toward living a purposeful and satisfying life" (p. 16). According to NIDA (2018), components of effective treatment and recovery include an adequate period of time (at least three months); therapies, especially behaviorally-based, to address SRDs and any underlying psychological, social, vocational, medical, or legal issues; and continuous evaluation to monitor treatment, related outcomes, possible relapse, and any appropriate changes. Cost-benefit analyses of treatment for individuals with SRDs demonstrate greatly reduced healthcare, social, and societal costs, such as fewer drug-related accidents and greater workplace productivity (NIDA, 2018).

Employment has a large influence on a person's quality of life and sense of worth. According to Blustein (2008), work provides a means by which individuals survive, derive power, connect socially with others, and attain self-determination and well-being. Integrating employment and recovery models for individuals with SRDs has proven to be beneficial, with employment significantly related to completing substance abuse treatment (Melvin, Koch, & Davis, 2012; SAMHSA, 2013b). Additionally, research showed that those who are unemployed have a higher chance of heavy alcohol use, illicit drug use, and substance abuse than individuals who work part-time or full-time (Compton, Gfroerer, Conway, & Finger, 2014; Larson, Eyerman, Foster, & Gfroerer, 2007).

### Barriers to Employment

Despite the evidence that employment serves as a supportive measure, individuals with SRDs may have difficulty receiving treatment within the context of employment. Additionally, those who have received treatment and are in recovery experience several barriers to employment, notably discrimination, stigma, and employer-related concerns (Dixon, Kruse, & Van Horn, 2003; Lee et al., 2015; Sigurdsson, Ring, O'Reilly, & Silverman, 2012).

**Discrimination and stigma.** Misuse and abuse of substances is highly stigmatized, as the public has negative attitudes toward these issues, often assigns blame and responsibility to individuals with SRDs, and is less willing to be inclusive (Barry, McGinty, Pescosolido, & Goldman, 2014; National Academies of Science, Engineering, and Medicine, 2016). As a result, individuals with SRDs and/or those who are in recovery often experience discrimination in the workplace, especially in the hiring process. This is well documented for job applicants and employees from various backgrounds (i.e., gender, SES, education, race) (Barry et al., 2014; Graffam, Shinkfield, Lavelle, & Harcastle, 2004; Hogue, Dauber, Dasaro, & Morgenstern, 2010; Join Together, 2003; SAMHSA, 2013a), and employers' perspectives for other stigmatized groups, including those who were previously incarcerated for drug-related offenses (Graffam et al., 2004; Holzer, Raphael, & Stoll, 2003; Miller, 2019). For example, Graffam et al. (2004) found employers rated the employability of those with drug-related convictions significantly lower than other groups, such as people with chronic illnesses or disabilities.

When examining employers' concerns and possible biases, it is important to understand how their backgrounds may impact their views of people in recovery. Yet, there is limited research in this area. Millington et al. (1994) contended that in the domain of likelihood to hire, employer's educational level would impact their decisions in the hiring process. While there were no significant effects for highest level of education, Graffam and colleagues (2004) found employers who completed certificate programs had more positive perspectives on employability of individuals with criminal convictions than those who completed secondary education. Yet, they did not find any significant differences related to gender, nor did they investigate demographics related to race/ethnicity. Additionally, few studies have explored employers' perspectives of hiring individuals with SRDs without overlapping criminal convictions.

Research related specifically to individuals with SRDs demonstrates the connection between types of experiences with this population and willingness to hire those in recovery. Employers with personal or direct experiences, especially those in recovery themselves, expressed greater willingness to hire individuals with SRDs (Becton, Chen & Paul, 2017; Lutman, Lynch, & Monk-Turner, 2015). These employers often believed in giving others a second chance and supporting the community. Yet, Becton and colleagues (2017) also found employers with limited or challenging experiences were less willing to hire individuals in recovery, often being influenced by societal and personal biases, such as what they had seen in the media. These studies are consistent with previous findings related to other stigmatized groups (Graffam et al., 2004; Holzer et al., 2003; National Academies of Science, Engineering, and Medicine, 2016; Schwochau & Blanck, 2000).

**Employer-related concerns.** In addition to discrimination and stigma, barriers to employment of people with SRDs stem from employer-related concerns, such as job performance (e.g., absenteeism and productivity) and providing supports (e.g., assistance programs and accommodations).

**Job performance.** According to the NSC (2019b), employees with SRDs, especially those who misuse pain medication, are absent from work almost 50% more days than their peers and have a higher turnover rate, which ultimately affects productivity and raises costs for employers. However, individuals who receive treatment and are in recovery for 12 months or more miss the least days of work and have lower turnover rates, even when compared to those without SRDs (NSC, 2019b). Despite data to support that individuals in recovery are productive and reliable workers, employers continue to hold negative views toward their job performance, credibility, and trustworthiness (Sigurdsson et al., 2012). Employers are reluctant to hire individuals in recovery due to potential costs or risks to businesses, especially when employers can consider applicants without a history of SRDs (Becton et al., 2017).

**Supports and accommodations.** Employee Assistance Programs (EAPs) and accommodations, such as providing short-term counseling and linking employees to local resources or support groups, can be a cost-effective way to support people with SRDs in the workplace (NIDA, 2018). Indeed, supportive work environ-

ments “have been shown not only to promote a continued drug-free lifestyle but also to improve job skills, punctuality, and other behaviors necessary for active employment” (p. 20). Furthermore, retaining and supporting employees with SRDs prevents the high costs associated with job turnover, especially related to recruitment and training (NSC, 2019b). Despite evidence of the effectiveness of treatment programs, expanded insurance coverage for SRDs through federal laws, and protections for patients’ privacy (NIDA, 2019), employees with SRDs may be hesitant to pursue these supports and disclose the need for treatment for fear of discrimination, losing opportunities for promotion, or being fired from their jobs (Join Together, 2003).

Little research exists related to employers’ perspectives of providing accommodations in the workplace for individuals with SRDs. However, employers with positive interactions with people in recovery acknowledged the need for supports and services, while also expressing the desire to provide these resources when necessary (Becton et al., 2017; Lutman et al., 2015). On the contrary, employers who reported challenging and limited or nonexistent interactions, especially in their personal lives, indicated an “unwillingness to help due to relapse potential and probable absenteeism” (p. 9). In studies of providing accommodations for people with disabilities, another stigmatized group, employers were concerned with the cost of providing reasonable accommodations among pertinent (Acemoglu & Angrist, 2001; Unger, 2002)

Becton and colleagues (2017) suggested compassion for individuals in recovery could influence employers’ hiring practices and willingness to provide accommodations. To this end, it is important to understand whether characteristics of employers (e.g., demographic, industry type) might correlate with such openness toward those in recovery. Unger (2002) reported employers in larger businesses had favorable attitudes toward employees with disabilities than smaller businesses, and finance and business industries are more reluctant to hire stigmatized groups, including individuals in recovery. Moreover, Acemoglu and Angrist (2001) suggested there was a decline in the employment of people with disabilities in smaller companies, which could be attributed to the speculation of larger businesses being able to easily absorb associated costs of reasonable accommodations. Overall, Graffam et al. (2004) suggested employability of stigmatized groups cannot be understood as being simplistic, but as a complicated feat which requires preparation and community support.

Although employment has been cited as a key factor to improve quality of life among individuals with a history of substance abuse, challenges continue to limit employment opportunities among this group (Lee et al., 2015). The purpose of the present study was to examine the levels of concern among employers regarding the hiring of individuals in addiction recovery. Specifically, three research questions guided our study:

1. To what extent do employer levels of concern regarding individuals in addiction recovery differ based on gender, ethnicity, and educational level?
2. To what degree are there significant differences in employer levels of concern regarding individuals in addiction recovery among industry types?
3. To what degree is there a relationship between employ-

er’s level of concern to hire individuals in addiction recovery and their willingness to provide accommodations?

## Method

### Participants

The sample consisted of 382 employers and percentages are representative of the total sample instead of the number who responded to each question. Of these, 196 (51%) were males and 186 (49%) were females. The study included 239 (62.4%) Hispanic-Americans, 92 (24.0%) European-Americans, 31 (8.09%) African-Americans, 8 (2.09%) Asian-Americans, 5 (1.31%) Native-Americans, and three (0.08%) reported as multiracial. Additionally, there were four (1.31%) individuals who chose not to disclose their ethnicity. Mean age of the participants was 41.11 years ( $SD = 11.54$ ), ranged from 19 to 71. All non-Hispanic participants were collapsed into one ethnicity category due to small numbers in each group. In terms of education, 136 (35.6%) participants had a bachelor’s degree, 84 (21.9%) participants had a master’s degree, 5 (1.31%) participants had a doctoral degree, 12 (3.13%) participants had completed high school education, 69 (18.1%) participants had some college/university credits, and 76 (19.9%) had an associate’s degree. For the present study, education was categorized into two groups: less than four years of college education ( $n = 157$ , 41%) and four years or more of college education ( $n = 225$ , 59%).

### Instruments

There were two sets of dependent variables, employer levels of concern in hiring individuals in recovery, as measured by the Employer’s Attitudes Questionnaire (EAQ), and employer willingness to accommodate individuals in recovery, as measured by the Willingness to Accommodate Scale (WAS).

**Employer’s Attitudes Questionnaire (EAQ).** The EAQ is a 38-item instrument that measures employers’ attitudes toward hiring individuals with psychiatric disabilities (Diksa & Rogers, 1996). The EAQ examines four issues that might influence the hiring decision: (1) work personality, (2) work performance, (3) symptomatology, and (4) administrative concerns. Each item is rated on 5-point Likert-type responses ranging from 1 = *Not a concern* to 5 = *Great concern*, which was used to measure the dependent variable of “level of concern.” For the present study, the terminology of individuals with psychiatric disabilities in the original EAQ was modified to individuals in addiction recovery. The authors sought feedback from a group of rehabilitation counseling faculty members to ensure the content of the modified instrument was not skewed. Afterwards, a pilot study with a small group of employers to improve the scale’s readability was conducted. The Cronbach’s alpha coefficient computed for the present study was 0.97.

**Willingness to Accommodate Scale (WAS).** Because there are no existing suitable instrumentations that can specifically evaluate the levels of employers’ disposition to provide accommodations in the workplace to individuals in addiction recovery, the authors developed the WAS to address this need after conducting an extensive literature review. An expert panel comprising of rehabilitation counseling professors, who were familiar with substance depen-

dency issues and work accommodations for PWDs, was consulted to provide feedback on the initial WAS. The final version of the WAS is a 16-item instrument that measures the willingness of employers to provide accommodations using a 5-point Likert type scale ranging from 1 = *Very unlikely*, 2 = *Unlikely*, 3 = *Undecided*, 4 = *Likely*, to 5 = *Very likely*. Example statements include "Divide large assignments into smaller tasks and steps." and "Allow use of unpaid leave for inpatient medical treatment." The Cronbach's alpha coefficient computed for the present study was 0.91.

Other descriptors were identified by the demographic questionnaire including personal characteristics (e.g., identification of personal experience with recovery), and business related characteristics (e.g., industry affiliation, approximate number of employees, trainings attended).

The categorical variable "industry types" was classified in the following groups, (a) Arts and Entertainment, (b) Business and Finance, (c) Information and Support, (d) Production and manufacturing, (e) Sales and Retail, (f) Service, and (g) Other. Once data was gathered, the authors recoded and grouped industry type variables into two categories, (a) Business/manufacturing (i.e., business and finance, information and support, and production and manufacturing, and (b) Service/sale (i.e., arts and entertainment, sales and retail, service, and other).

The online questionnaire sent to participants entitled Employer Viewpoints and Willingness Questionnaire (EPWQ) consisted of an informed consent followed by three sections: (a) demographics (e.g., personal characteristics, business characteristics), (b) experience with recovery and willingness to accommodate, and (c) the modified EAQ.

### Procedure

Upon approval of the present study by the institutional review board, the research team contacted local chambers of commerce in two counties of South Texas to invite their affiliated members to participate in research. The two counties were chosen due to their close proximity to the research team. The chambers of commerce were forwarded an introductory email on the research team's behalf. The email contained a recruitment document explaining the nature of the study with an invitation to complete the online questionnaire. Two reminder emails were sent two weeks apart until the questionnaire closed. Interested members were instructed to click on a web link that would direct them to the Qualtrics survey site. The amount of time needed to complete the questionnaire was estimated between 15 and 20 minutes. No incentives were given to the participants. Out of the 956 deliverable addresses, 436 participants began the survey and 382 participants completed the questionnaire which yielded in a response rate of 46%.

### Data Analysis

We used descriptive and inferential statistical methods to analyze data received through the online questionnaire. The literature suggested there was a relationship between employer level of concerns, gender, ethnicity, and educational level. In Research Question 1, we were interested in determining if there was a relationship between employer gender, ethnicity, and educational level on employer's level of concern and to check for existence of any

synergistic effects using factorial ANOVA. A three-way factorial ANOVA was selected to answer the first research question.

Research Question 2 was included to determine if there was a difference in employer levels of concern regarding individuals in recovery among different industry types. To test this hypothesis, a one-way ANOVA was used to determine differences between six industries and employer's perspectives regarding individuals in recovery. The six industry groups were (1) arts and entertainment, (2) business, finance, and administration, (3) information and support, (4) production/manufacturing, (5) sales/retail, and (6) service. Additionally, after collapsing the six industry groups into two categories (service/sale and business/manufacturing), we used an independent samples case t-test to determine differences between two groups of industries and employer's levels of concerns regarding individuals in recovery. There were no outliers in the data as assessed by inspection of a boxplot for values greater than 1.5 box lengths from the edge of the box. There was homogeneity of variances, as assessed by Levene's test for equality of variances ( $p = .368$ ). Lastly, in order to test Research Question 3, Pearson product-moment correlation coefficients were used to index the strength and direction of the relationships between the employer's level of concern and the accommodations scale. An alpha level of .05 was used as a significance criterion for all statistical tests conducted.

## Results

### Research Question 1

A three-way factorial ANOVA (gender x ethnicity x education) was conducted to test this hypothesis. Gender [ $F(1, 368) = .000, p = .989$ ] and education [ $F(1, 368) = .219, p = .640$ ] did not display a statistical significance in reference to employer levels of. There was a main effect for race,  $F(1, 368) = 4.17, p = .04$ . There were no statistically significant two-way interactions. Table 1 shows the mean square,  $F$ -value, and significance for each interaction. The results do not support the alternative hypothesis by identifying the existence

### Research Question 2

A one-way ANOVA was used to determine differences between six industries and employer's level of concern regarding

Between Subjects					
Source	df	Mean Square	F	p	Partial $\eta^2$
Intercept	1	4169.571	5153.277	.000	.933
Ethnicity	1	3.377	4.174	.042	.011
Within Subjects					
Source	df	Mean Square	F	p	Partial $\eta^2$
Gender	1	.000	.000	.989	.000
Gender*Ethnicity	1	2.360	2.917	.088	.008
Education	1	.177	.219	.640	.001
Education*Ethnicity	1	.437	.540	.463	.001
Gender*Education	1	.051	.063	.802	.000
Gender*Education*Ethnicity	1	.823	1.017	.314	.003
Error	368	.809			

Note.  $R^2 = .027$ ; Adjusted  $R^2 = .008$

individuals in recovery. The findings show employer's level of concern as similar between industries according to means and standard deviations ranging from arts and entertainment ( $3.5 \pm .9$ ), to business and finance ( $3.9 \pm .8$ ), to information and support ( $3.5 \pm .7$ ), to production and manufacturing ( $3.4 \pm 1.0$ ), to sales and retail ( $3.5 \pm .9$ ) to service groups, in that order. Results show data from variables of interest did not violate this assumption ( $p > .05$ ), with a reported  $p$  value of .099.

There was a statistically significant difference between means ( $p < .05$ ); therefore, the researchers rejected the null hypothesis and concluded that not all group means are equal in the population. Employer's level of concern was significantly different between industries  $F(5, 372) = 3.396, p = .005$ . Tukey post-hoc analysis revealed that the differences between service, business and finance groups ( $0.50, 95\% \text{ CI } [0.13 \text{ to } 0.87]$ ) were statistically significant ( $p = .002$ ), but no other group differences were statistically significant. Table 2 shows the results of the ANOVA.

Additionally, after collapsing the six industry groups into two categories (service/sale and business/manufacturing) the researchers found significant results. There was homogeneity of variances, as assessed by Levene's test for equality of variances ( $p = .368$ ). Participants included 157 (41.3%) from business and manufacturing industries, and 221 (58.7%) from sales and service industries. Employer concerns were higher among the business and manufacturing participants ( $3.68 \pm 0.86$ ) than the sales and service ( $3.44 \pm 0.93$ ). Table 3 presents the findings.

Median employer concern scores were statistically significant with differences between business (3.82) and service (3.55),  $U = 14,588.50, z = -2.637, p = .008$ . The business industry employer concern score was .24 (95% CI, 0.06 to 0.43) higher than the service industry employer concern score. There was a statistically significant difference in mean level of concern score between business/manufacturing and service/sales,  $t(376) = 2.567, p = .011$ . There was a statistically significant difference between means ( $p < .05$ ) and, therefore, the null hypothesis was rejected. In addition, an effect size of  $d = .47$  was computed. Put simply, the magnitude of difference between the groups is considered to be in the medium range (Cohen, 1988; Sullivan & Feinn, 2012).

### Research Question 3

An alpha level of .05 was used as a significant criterion for all statistical tests conducted. There was a small, negative correlation,

$r(380) = -.120, p < .05$  between the level of concern by employers and the willingness to hire.

## Discussion

The purpose of the present study was to examine the levels of concern among employers regarding the hiring of individuals in addiction recovery. Employer attitudes have been associated with significant long-term negative effects for generations of hiring practices. The results of this study are consistent with the findings of previous research on employer characteristics, practices, and level of concerns toward many stigmatized groups (Acemoglu & Angrist, 2001; Unger, 2002).

### Research Question 1

There were no significant relationships found between gender and educational status in relation to employer levels of concern, which is consistent with Graffam et al.'s (2004) findings. There was no interaction between gender, education, and ethnicity related to employer levels of concern; however, the findings indicate these variables are independent of one another. The literature supported the relationship between gender and likelihood to hire with women being more likely to hire individuals in recovery rather than men (Holzer et al., 2003). The results of this study suggest gender and education of the employer do not necessarily affect hiring practices. Contrary to Millington et al. (1994), education did not have an effect on employer levels of concern. The lack of significant differences across education levels could indicate there are other mitigating factors affecting employer levels of concerns which may not have been considered.

Additionally, the findings are contradictory to the work of Schwochau and Blanck (2000), who suggested demographic variables, specifically ethnicity, are predictive of employer's attitudes to hire marginalized groups. It is interesting that individuals of Hispanic descent showed the least difference in mean scores related to employers' level of concerns. These findings may be due to the geographical location of the sample. Drug prevalence and experience with recovery are more prevalent in South Texas when compared to the rest of Texas (Texas Health and Human Services, 2017).

### Research Question 2

By examining the data according to industry, participants demonstrated significant differences in level of concern toward individuals in recovery. According to Petersilia (2005), a negative

Table 2

#### Significant Differences between Groups by Industry

Variable	(Group 1)	(Group 2)	(Group 3)	(Group 4)	(Group 5)	(Group 6)
	Arts and	Business	Information	Production &	Sales &	Service
	Entertain-	& Finance	and Support	Manufacturing	Retail	
	ment					
	<i>M(SD)</i>	<i>M(SD)</i>	<i>M(SD)</i>	<i>M(SD)</i>	<i>M(SD)</i>	<i>M(SD)</i>
Employers' Level of Concern Score	3.50 (.89)	3.87 (.78)	3.53 (.71)	3.40 (1.02)	3.50 (.88)	3.38 (.97)

Note. Significant at the .01 level, Tukey post-hoc tests

Table 3

#### Significant Differences by Industry

Variable	Group 1		Group 2		Sig (2-tailed)
	Business		Service		
	<i>n</i>	<i>M(SD)</i>	<i>n</i>	<i>M(SD)</i>	
Employers' Level of Concern Score	157	3.68 (.86)	221	3.44 (.93)	.011

Note. Significant at the .05 level

perception of unemployed people in recovery is one contributor to higher rates of recidivism among drug addicts and ex-prisoners. This particular concept cannot be addressed without a better understanding of what employer concerns of individuals in recovery truly involve (Larson et al., 2007). The research of shared perspectives across employment sectors in this study suggest employers hold different views across industries. The ideal job readiness skills that nearly all employers, in almost every industry seek, are personal qualities including reliability and honesty, daily punctuality, and carry positive attitudes toward work (French, Roebuck, & Alexandre, 2001). Many employers in the business and finance industry prefer to avoid problems associated with poor work performance or high absenteeism, including drug abuse and individuals with physical and/or mental disabilities (DeSimone, 2002; French et al., 2001).

Besides the aforementioned concepts, majority of careers in most industries require the fundamental use of a computer, and basic cognitive skills such as reading and writing. Many of these skills are not directly observable in job applicants; therefore, employers use the receipt of a high school diploma, work experience, and references to acquire such information which is oftentimes minimal among individuals in recovery. Background checks and drug tests are other common ways for employers to verify job applicants' skills and authenticate character (Petersilia, 2005). A less used means of checking aptitude is a skills test, but these are rarely used today. The problem is many employers make assumptions regarding an applicant's skills based on the interview, and often the quality of writing on the job application, without realizing these judgments are unpredictable. Another reason for the differences between sectors has to do with the nature of the service field being committed to helping others in comparison to finance being dedicated to making money (Larson et al., 2007). Although there were differences reported between industries in this study, the truth remains there are several similarities across industries and business sectors related to hiring individuals in recovery. The resemblance may stem from when an employer's major priority is to maintain a functioning work environment, not necessarily to hire individuals of stigmatized groups for moral or social desirability (Becton et al., 2017; Lutman et al., 2015). Despite the evidence that individuals in long-term recovery may be more productive than those without SRDs (NSC, 2019b), the results of this study indicate more work is needed to reduce and prevent discrimination and stigma against this population.

### **Research Question 3**

The final research question led to the conclusion that the less concern employers have about hiring individuals in recovery, the more likely they are to provide reasonable accommodations. There are several explanations for this finding. First, the relationship between likelihood to accommodate and employer level of concerns may be accommodation specific. For example, timing (e.g., paid leave) may have more of an impact on employers' level of concerns than providing praise and reinforcement. Livermore et al. (2000) researched attitudes toward specific accommodations and the effects on individuals with disabilities. This is an area of research which has not been formerly explored in relation to individuals in recovery. Therefore, understanding the relationship between em-

ployer level of concerns to hire and provide accommodations for individuals in recovery is an area for further research.

Secondly, the research shows there are other factors besides employer levels of concern to hire not included in the scope of this study, which may influence employer dispositions to accommodate, such as economic incentives, compliance with the ADA, and the fear of lawsuits (Allbright, 2002; Lee, 2001). In addition, it may be that employers willing to provide accommodations depend on the severity of need expressed by the individual employee. The connection between an employer's willingness to provide accommodations and their level of concern on hiring individuals in recovery can be difficult to quantify due to the subjectivity. It is very possible that an employer's willingness to accommodate and his or her level of concern are tainted due to previous experiences.

### **Limitations**

There are a few limitations associated with study. First, the generalizability of findings may not be applicable to employers in other parts of the nation. Participants were recruited in South Texas where residents are generally more aware of addiction issues and the negative impact of drug cartels because of their proximity to the U.S.-Mexico border. Mexico is the largest supplier of illicit drugs to the U.S. (Ajzenman, Galiani, & Seira, 2015; Rios, 2013). Second, an overwhelming majority of the participants were Hispanic business owners. It is plausible that non-Hispanic employers may have held different perceptions toward individuals in recovery. The decision to conduct routine drug testing among employees has been influenced, to some extent by employers' cultural interpretations of substance and alcohol use (French, Roebuck, & Alexandre, 2004; Room, 2005). Third, the online data collection method might inadvertently exclude business owners who were not members of the local chambers of commerce or did not have internet access to take part in the survey. Fourth, as with most conventional survey studies, the results of this research were derived from the self-reported views of the participants. It is also likely that some participants furnished socially desirable answers to project favorable impressions to the researchers. Lastly, the questionnaire was available only in English which might have discouraged business owners whose first language was Spanish from responding to the questions. Despite the presence of the abovementioned weaknesses, the present study offers a pioneering exploration of factors that might influence the willingness of employers to hire individuals in recovery.

### **Implications for Practice and Future Research**

The results of this study are indicative of the challenges and barriers individuals in recovery face in their transition to the workforce. Embedded beliefs and company policies accepting consideration of individuals in recovery contribute to an unsuccessful transition into the community while creating hindrance even among the most well intended and dedicated individuals seeking a second chance. Future research could focus on which types of accommodations employers offer and have previously offered to individuals in recovery in order to provide clarification for the third Research Question.

There has been constant discussion on the empirical research and improvement of treatment for individuals in recovery, ironical-

ly treatment has been replaced with unemployment and homelessness. Rehabilitation counselors can work closely with other professionals to strengthen job readiness skills and abilities in order to combat this concern. By addressing employer's levels of concerns, this study provides a foundation for research to build upon. Graffam et al. (2004) determined employers have a high level of opposition about hiring various marginalized groups. The primary concern stems from trust. Research has proven that, during the recovery process, individuals face many barriers to finding gainful employment, among them employer discrimination, issues with poverty, lack of work experience, low self-esteem, and insecure living accommodations. Additional research on the role of stigma in hiring individuals with behavior driven health conditions and the impact of employment outcomes would be essential.

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## **APPENDIX B**

**DRAFT OF SECOND MANUSCRIPT (PREPARING FOR SUBMISSION)**



DRAFT (SOLO PIECE)

1

Compassion and Levels of Concern: Examining Factors Impacting Employment among  
Individuals in Addiction Recovery

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California State University, Fresno

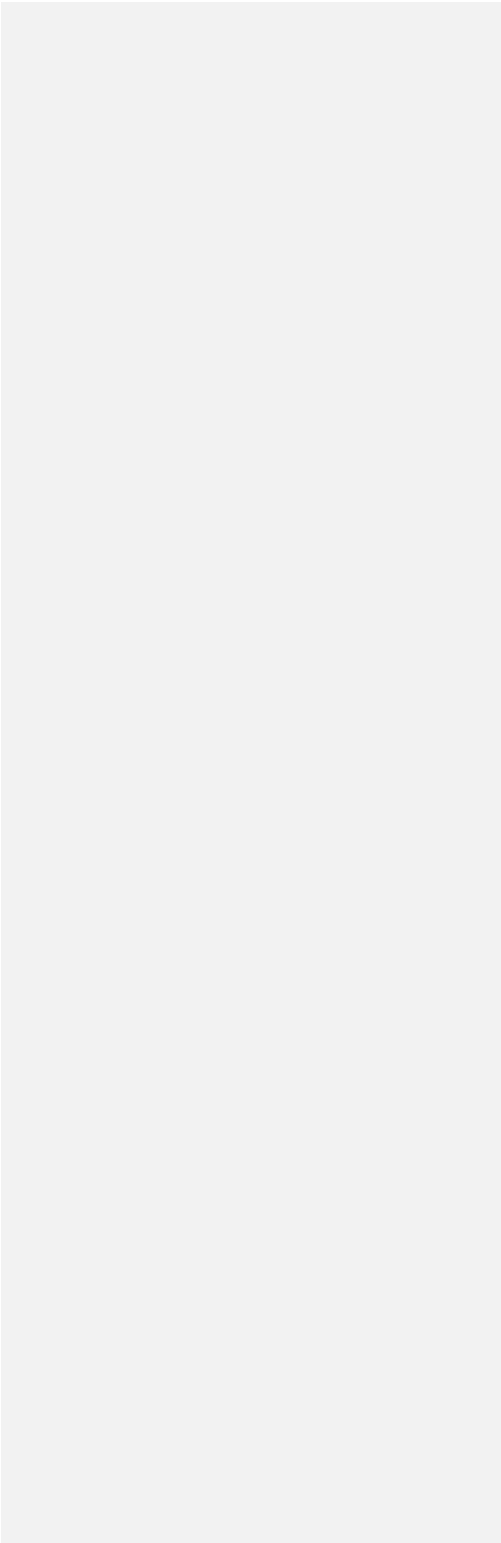
1. Disability and Rehabilitation Journal
2. Journal of Workplace Behaviors
3. Journal of Occupational Rehabilitation
4. Rehab, research, policy and education
5. Journal of Applied Rehab Counseling
6. Journal of Disability Studies

COMPASSION, PERCEPTION AND WILLINGNESS

2

Abstract

A convenience sampling was employed in this study



### Compassion, Perceptions and Willingness: Examining Factors Impacting Employment among Individuals in Recovery

Substance use disorders (SUD) have been defined as the recurrent use of alcohol or other drugs (AOD) which cause health issues, decrease level of functioning, and may lead to other disabilities (Substance Abuse and Mental Health Services Administration [SAMHSA], 2015). In the year of 2014 there were over 20.2 million individuals diagnosed with a substance use disorder (SUD). According to SAMHSA (2015), many individuals who have a history of SUD develop a mental health disorder at some point in their lives as well. Specifically, people with co-occurring disorders are individuals who have a SUD and a mental health diagnosis. In 2018, SAMHSA reported 9.2 million adults were diagnosed with co-occurring disorders (SAMHSA, 2019). For the purpose of this study, individuals in addiction recovery will refer to individuals who have a history of SUDs/AODs.

Individuals in addiction recovery and co-occurring psychiatric disorders struggle with maintaining recovery with relapse occurring frequently. One of the best predictors for treatment retention and success following treatment is employment (NEED CITATION). However, individuals with SUDs and those with co-occurring psychiatric disorders have lower rates of employment than other groups with disabilities (NEED CITATION). Employment is a stated goal of many individuals in recovery (Laudet & White, 2010; McIntosh, Bloor, & Robertson, 2008). Despite employment leading to be better treatment outcomes for individuals with SUDs (FIND CITATION), employment rates among individuals with SUDs are estimated at less than 10% (Shaheen & Williams, 2003) **FIND MORE RECENT CITATIONS**. This employment disparity is likely a result of numerous employment barriers including employer stigma.

#### **Barriers to Work for Individuals in Recovery**

Employment is a desired outcome for most individuals in recovery and it is also a core component of the recovery process (Laudet & White, 2010; McIntosh, Bloor, & Robertson, 2008). According to SAMHSA (2015), 70% of those in recovery for mental health disorders express a desire to find employment. In some cases, this is an important motivator for their recovery. Employment has also been shown to reduce drug use, improve treatment retention, and increase quality of life for individuals with psychiatric and substance use disorders (Magura, 2003; O'Connell, Enev, & Inciardi, 2007; Schur, 2003). Despite evidence that employment benefits the recovery process, there remains a disparity in employment rates for people with mental health conditions including SUDs (Copeland, Chan, Bezyak, & Fraser, 2009).

The disproportionate rates of unemployment among individuals with mental health disorders, including SUDs has been explained by barriers facing these individuals as a result of symptom relapse, educational limitations, work history and history of criminal records (Shaheen & Williams, 2003). Another explanation for the disproportionate rates of unemployment among individuals with SUDs and other psychiatric disorders, is that employers' perceptions about hiring individuals with these conditions are influenced by stigma, lack of contact, and lack of knowledge of this population (Copeland, Chan, Bezyak, & Fraser, 2009). Employer stigma toward people with disabilities (PWDs) has been established (**CITATION**). However, studies investigating employer concerns toward individuals with SUDs are often limited, focusing primarily on SUDs as compared to other psychiatric conditions (**CORRIGAN and others**).

### **Employer Stigma**

One of the greatest barriers to employment for individuals with psychiatric disorders including substance use disorders are the stigmatizing beliefs held by employers and coworkers in the employment setting. Erving Goffman (1963) as one of the first to study the concept, noted that stigma refers to a distinguishing characteristic of an individual which presents as a way to discredit the individual or separate them from other groups. Corrigan (2004) further clarifies stigma as “elements of labeling, stereotyping, separating, status loss, or discrimination occur within a power situation” (p. 377). Stigma manifests in two distinct ways: (a) public stigma, which speaks to societies outlook on people with mental illness, substance use, or those who have committed criminal activities, and (b) self-stigma, which occurs due to the individual's outlook on himself or herself (Corrigan, 2004 and Corrigan and Shapiro, 2010). Public stigma refers to the type of stigma employers may hold toward employees with mental health conditions, such as SUDs.

Individuals who are in recovery or have previous substance abuse history are generally stigmatized, often leading to employer discrimination (Khalema & Shankar, 2014). Khalema and Shankar (2014) explained that surveys done in America show that about 70% of employers are hesitant to hire someone that has a history of substance use disorder or someone that is actively taking antipsychotic medication. Alternatively, 25% would discount someone who chose not to disclose their mental illness. This stigma becomes a barrier for these individuals, in many cases, affecting their recovery process. This stigma tends to be worse when the disability of the individual is believed to be behaviorally driven, or brought on by the actions of the individual themselves (Corrigan, Horton, Tsang, & Shi, 2010).

In a study conducted by Corrigan et al. (2010), 300 Employers in the city of Chicago and Hong Kong were surveyed to assess whether they discriminated against individuals with 5 major health conditions, determine their level, and investigate their reasoning for any stigmatizing views they may have towards each condition. The five health conditions included the following: (a) HIV/AIDS, (b) alcohol abuse, (c) drug abuse, (d) Cancer and lastly, (e) psychological disorders. Findings revealed drug and alcohol abuse were the highest stigmatized condition than the other with reports indicating employers felt individuals were primarily responsible for having a substance abuse condition. The employers' belief that a person's “responsibility” for acquiring their disability also determined employers' belief that the individual was “dangerous” due to their disability (Corrigan, Larson, & Kuwabara, 2007). This stereotype of individuals with disabilities being dangerous becomes another barrier in itself when considering the attitudes of employers towards individuals with disabilities, specifically substance use disorder and mental illness.

### **Employer Factors Influencing Hiring Decisions**

The decision to hire people with disabilities is often determined by a complex interaction of an employer's intrapersonal experiences and the characteristics of the organization as a whole. From an intrapersonal perspective, employers' decisions to hire PWDs are often influenced by previous experiences with disabilities, lack of knowledge regarding the disabling conditions and their resulting limitations, and concerns about how other employees will perceive the individual with a disability (Domzal, Houtenville & Sharma, 2008; Kay, Jan & Jones, 2011; Ren, Paeztold, Colella, 2008). From an organization perspective, company size and industry seem to correlate with willingness to hire individuals with disabilities (Fraser et al 2010; Houtenville & Kalygrou, 2015). While numerous studies have investigated how employer perspective and organization

characteristics have impacted PWDs as a whole, limited research has investigated these conditions specific to people with substance use disorders.

### **Employer Experience**

As noted, employers who have had previous experience and more knowledge about disabilities are more likely to state a willingness to hire individuals with a disability (Hernandez et al, 2008). Previous experiences with a person in recovery is a key determining factor towards the likelihood of whether a person with a disability will be hired. Hernandez, Keys, & Balcazar, (2000) found a positive correlation between prior experiences with individuals with disabilities and the attitude employers have towards that population. Employers that have worked with employment support agencies reported having a positive experience with individuals with disabilities and were more likely to hire someone with a disability (Hernandez et al., 2000). Drake, Bond (2004/FIND) indicated that people with schizophrenia, for instance, are perceived more positively when engaged in supported employment services than when they were not. Likewise, Khalema and Shankar (2014), noted that those employers who had a previous history of employing individuals with a mental health disorder were more likely to hire others with those conditions. Hand and Tryssenaar (2006) with a study of 143 employers in Canada noted that employers that had previous contact with people with mental health conditions were more likely to express a willingness to hire. Copeland, Chan, Bezyak, & Fraser, (2009) research also supports the idea that employers are more likely to hire individuals with disabilities if they have a positive prior personal or professional experience with someone who has a disability. Copeland, Chan, Bezyak, & Fraser, (2009) focused on the attitudes of 142 employers when considering hiring an individual with a disability. The results from their study suggested that employer's attitudes towards working or hiring individuals with disabilities was based on the level of their prior experience working with employees with disabilities (Copeland, Chan, Bezyak, & Fraser, 2009).

Prior research on employer interaction and experiences with individuals with disabilities substance use disorders is limited. However, previous literature on perspectives of employers working with individuals with substance use disorders have not...

### **Employer Structure**

Larger companies are more likely to express a willingness to hire individuals with mental health conditions (Khalema and Shankar, 2014). Those that reported negative experiences were often smaller companies with fewer means to provide that same support and supervision. Smaller employers were not as likely to hire individuals with disabilities, offer accommodations, and did not have as much knowledge in regards to the ADA regulations (Khalema and Shankar, 2014). Hand and Tryssenaar (2006) however, found that employer size did not influence willingness to hire individuals with mental health conditions.

The perspectives of the business community toward individuals with disabilities, HIV/AIDS, minorities, and ex-offenders in the workforce have been investigated through a variety of research methodologies. Moreover, researchers have studied employer attitudes towards PWDs (Diksa & Rogers, 1996; Thakker, 1997). Stigma, negative perceptions, and lack of knowledge often affect individuals in recovery in regards to employment along with other marginalized groups. Researchers have conducted studies, which included samples of employers drawn from regional and local geographical areas as well as nationally (Petty & Fussell, 1997). Although most studies focus on ex-offenders, PWD, or individuals with HIV/AIDS, few consider individuals in recovery.

The perspectives of the business community toward individuals with disabilities, HIV/AIDS, minorities, and ex-offenders in the workforce have been investigated through a variety of research methodologies. Moreover, researchers have studied employer attitudes towards PWDs (Diksa & Rogers, 1996; Thakker, 1997). Stigma, negative perceptions, and lack of knowledge often affect individuals in recovery in regards to employment along with other marginalized groups. Researchers have conducted studies, which included samples of employers drawn from regional and local geographical areas as well as nationally (Petty & Fussell, 1997). Although most studies focus on ex-offenders, PWD, or individuals with HIV/AIDS, few consider individuals in recovery.

The myriad of factors expected to increase employment for individuals in recovery, such as the Americans with Disabilities Act, emergence of strong advocacy, and the desire and ability of individuals to work productively, have not had the anticipated impact (Schur et al., 2005), increasing employment for individuals in recovery. The purpose of the following research study is to analyze determinants effecting employer perspectives to hire individuals in recovery and to determine through statistical comparisons whether there are significant differences in employer perspectives to hire, based on business related characteristics and organizational structure (e.g., type of business, size of business, previous hires). The following overarching research questions were examined:

1. To what extent are personal and business-related characteristics predictive of employers' levels of concern when hiring individuals with a history of SUD?

**Methodology**

**Population**

The sample consisted of 196 (51%) males and 186 (49%) females of the total sample. The participant's ages in the study ranged from 19 to 71 ( $M = 41.11$ ,  $SD = 11.54$ ). Of the 382 employers, 31 (8.09%) were African American, eight (2.09%) were Asian American, 92 (24.0%) European American, 239 (62.4%) Hispanic American, five (1.31%) Native American, and three (0.08%) reported other. Additionally, there were four (1.31%) individuals who chose not to disclose their ethnicity. Due to small numbers in each group, the researcher collapsed the ethnicity category into non-Hispanic ( $n = 139$ , 37%) and Hispanic ( $n = 239$ , 63%).

In addition, participants of the study were highly educated, with 35.6% ( $n = 136$ ) having a bachelor's degree, 22% ( $n = 84$ ) possessing a masters level degree, and 1.3% ( $n = 5$ ) held a doctorate degree. Other categories included participants who completed high school ( $n = 12$ , 3.1%), some college/university ( $n = 69$ , 18.1%), and associate level ( $n = 76$ , 19.9%) degrees. The researcher also collapsed and categorized education by less than four years of college education ( $n = 157$ , 41%), and more than four years of college education ( $n = 225$ , 59%). Other demographic information of the sample and response rates that identify approximate number of employees, industry type, business structure, and the employer's position are listed in Table XXX.

*Insert Table XXX*

Furthermore, the following information personal use of AOD, family or friend in recovery, and receipt of training related to addiction recovery can be found in Table 2.

Participant response rates, which identified having a formal company policy for hiring individuals in recovery, prior employment of individuals in recovery, contact in the workplace with individuals in recovery, and contact outside the workplace were also presented in Table 2.

*Insert Table XXX*

### Data Collection

Subsequent IRB approval, an invitation to participate in the study was sent via email to members of the chambers of commerce. The email included a URL link to the informed consent and online questionnaire in Qualtrics. Qualtrics is a website used to create electronic versions of questionnaires. After the initial email invitation was sent, the authors expected to receive a response rate of 25%. After two weeks, a second email invitation was sent to encourage completion of the online questionnaire, with the intention of increasing response rate to between 35-45%.

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### Instrumentation

An initial search of available instruments measuring employers' perspectives in hiring individuals in addiction recovery resulted in identifying the Employer's Attitudes Questionnaire (EAQ). The EAQ consists of 38 items measuring employers' concerns toward individuals with psychiatric disorders in four subscales, including symptomology, work personality, work performance, and administrative. Items are rated on a 5-point Likert-type scale ranging from Not a Concern (1), Minimal Concern (2), Moderate Concern (3), Considerable Concern (4), to Great Concern (5). Questionnaire items from the EAQ were modified to meet standards of the research pertaining to individuals in addiction recovery (referred to as modified-EAQ). The total number of items in the instrument remained unchanged.

The five items used to measure compassion were adopted from the Santa Clara Brief Compassion Scale (Hwang, Plante, & Lackey, 2008), which is an abbreviation of Sprecher and Fehr's (2005) 21-item Compassionate Love Scale. The scale measures compassion and the relation to prosocial behaviors, on a seven-point Likert scale ranging from "Not at all true for me" to "Very true for me." Other descriptors were identified by the demographic questionnaire including personal characteristics and business-related characteristics.

### Research Variables

Based on the research collected during the review of literature, four sets of variables were measured for this study, (a) perspectives of employers toward hiring individuals in recovery, (b) level of compassion among employers, and (c) demographic variables. The dependent variable, employer perspectives as measured by level of concern in hiring individuals with a history of SUD/AOD. Additionally, there were three sets of independent variables utilized for this study, employers' personal characteristics, business related characteristics, and level of compassion. Personal characteristics were measured by (a) personal drug use, (b) level of recovery awareness, (c) family/friend in recovery, and (d) level of compassion. While business related characteristics were measured by (a) industry type, (b) business structure, (c) training, (d) previous hired and (d) contact within the workplace.

**Validity and Reliability.** A pilot study of eight employers was conducted to increase readability and comprehension of the survey before final construction. Once the pilot study was completed, eleven questions were modified to improve readability, eliminate replication, and improve consistency. Members of an expert panel were identified as content validators for the instrument and were asked to review the items, give recommendations and gain evidence of content validity. Each expert has served as an educator for over ten years. The experts' reviews resulted in retention of all items except three with additional minor changes related to word selection and sentence structure. Upon completion of the survey, a Flesch-Kincaid score of 9.9 was calculated to validate the level of readability of the modified EAQ items. Internal consistency for the questionnaire was computed using Cronbach's Alpha and yielded a coefficient of  $r = .97$ . Reliability coefficients were also examined for each of the four subscales. The alpha level for the symptomatology scale was  $r = .93$ , the work personality subscale was  $r = .93$ , the work performance subscale was  $r = .91$ , and the administrative scale was  $r = .92$ .

### Data Analysis

A combination of descriptive analysis, Pearson correlation, and multiple regressions were used to analyze the survey questionnaire data. Descriptive statistics were collected for dependent and independent variables. The descriptive statistics reported were mean, standard deviation, and frequency of responses for each variable. Moreover, hierarchical multiple regression analyses were used to assess the level of predictive relationships between personal and business-related characteristics, and the dependent variables. The potential confounders (personal characteristics) were entered first in the regression equation, then the independent variables of interest (business characteristics) next. This procedure allowed the researchers to assess the importance of the independent variables after all covariates were controlled for (Bommer, Rubin, & Baldwin, 2004; Creswell, 2007).

### Results

The research question indicated there was a relationship between employer's levels of concern regarding individuals in recovery, personal characteristics (e.g., personal drug use, level of recovery awareness, family/friend in recovery, and level of compassion), and business-related characteristics (e.g., industry, business structure, training, previous hires, contact in the workplace). Table 3 presents descriptive statistics for the individual items on the modified Employer Attitudes checklists, as well as the mean and standard deviation.

#### *Insert Table XXX*

A hierarchical regression analysis was employed to identify the effects of personal and business characteristics on participants' levels of concern. An alpha level of .05 was used as a significance criterion for all statistical tests conducted. The  $F$ -ratio showed the personal characteristics and business characteristics statistically significantly predicted the dependent variable in both models, respectively  $F(4, 329) = 7.436, p < .0005$  and  $F(9, 324) = 4.321, p < .0005$ . Four of the nine variables added statistical significance to the prediction,  $p < .05$ . A multiple regression was run to predict employer's level of concern from personal drug use, level of recovery awareness, family/friend in recovery, and level of compassion, and type of industry, business structure, previous training, previous hires in recovery, and contact in the workplace with individuals in



recovery ( $R^2 = .11$ ). The effect size for the analysis, given an  $R^2$  value for a set of independent variables A, and a  $R^2$  value for the sum of A plus an additional set of independent variables B was  $d = .26$ . Regression coefficients and standard errors can be found in Table XXX.

*Insert Table XXX*

A Pearson Product correlation (Table XXX and XXX) was also conducted. The  $F$ -ratio showed that both personal and business related characteristics statistically significantly predicted the dependent variable in both models, respectively  $F(4, 328) = 4.184, p < .005$  and  $F(9, 323) = 5.315, p < .0005$ . Three of the nine variables added statistical significance to the prediction,  $p < .05$ .

### Discussion

The present study investigated the relationship between employer characteristics and perspectives in hiring individuals in recovery. The results of this study are in considerable agreement with the findings of previous research on employer characteristics, practices, and perspectives towards stigmatized groups (Acemoglu & Angrist, 2001; Unger, 2002). Similar variables were used in previous research as were used in this study while a unique variable, level of compassion, was included in this study. The level of compassion is seen in theory and not cited in the current literature. It was anticipated that employers in South Texas may be more sensitive and well-informed about the nature and attributes of employees in recovery due to geographical reasoning.

The research question identified there is a relationship between employer's perspectives when hiring individuals in recovery, personal related characteristics (e.g., personal drug use, level of recovery awareness, family/friend in recovery, and level of compassion) and business-related characteristics (e.g., industry, structure, training, previous hired, contact in the workplace). In the current study, there was a relationship between employer's perspectives when hiring individuals in recovery and various personal and business-related characteristics. Previous studies targeting different stigmatized groups have documented correlations between prior contact, experience, business structure, and industry type. Similar to Hernandez, Keys, and Balcazar (2000), the findings from the present study suggest there is correlation between prior contacts and experiences with stigmatized groups, and the level of awareness. The results propose the less contact with individuals in recovery an employer experienced, the higher the employer's level of concern. Also, if the employer previously used AOD, they reported a lower level of concern, although this result is mixed when compared to other hypotheses.

Other significant relationships affecting employer's perspectives centered on the level of compassion of employers, a variable that was included in this study based on previous theories. Researchers have not studied the level of compassion to hire marginalized groups, which was a major factor contributing to employer's perspectives to hire individuals in recovery in this study. This is the first study that the level of compassion has actually been studied instead of theorized in relation to employer perspectives when hiring stigmatized groups. The less compassion employers reported the higher their level of concern to hire individuals in recovery.

Theoretically, compassion and empathy, although not the same, have been studied in various capacities pertaining to stigmatized populations. These factors are useful in examining possible explanations that support the evidence given for the negative trends in employment of

individuals in recovery (Sprecher & Fehr, 2005). Compassion has been discussed as an attitude towards others pertaining to feelings, cognitions, and behaviors that tend to focus on caring, and concern. In addition, compassion is seen as an orientation toward helping, supporting, and understanding other individuals. This definition is congruent with other research suggesting compassion is when an individual is touched by another individual's distress and wants to help (Sprecher & Fehr, 2005). Theoretically, employers with a higher level of compassion should be more likely to hire individuals in recovery, due to the nature of compassion.

**Business characteristics.** Further results revealed the more training employers had the less concern they reported in hiring individuals in recovery, consistent with previous literature (Millington et al., 2000). Small, mid-size, and large companies showed concern about hiring individuals in recovery. Previous research has found the greatest decline in the employment of PWDs in small size companies, which can be attributed to the speculation that larger businesses can more easily absorb the costs associated with complying with the ADA (Acemoglu & Angrist, 2001). Unger (2002) reported employers in larger businesses had favorable attitudes toward employees with disabilities than smaller businesses. These results may explain why majority of employers in the current study had a higher level of concern when hiring individuals in recovery due to the size of the company. Additionally, a number of employers from smaller than larger companies reported more favorable attitudes towards hiring but as a group had higher levels of concerns. Although this finding seems contradictory, it may be due to the possibility that participants of smaller companies have more direct contact with employees, and therefore more specific knowledge of, both negative and positive aspects of employment of individuals in recovery.

Employer concern varies across the sector of business or industries. Findings for this study and others have suggested business and finance industries are more reluctant to hire stigmatized groups, including individuals in recovery. Additional research by Unger (2002), identified service industries had fewer concerns about hiring PWDs in comparison to employers in other industries. One reason for this finding may be that many employers in the service industry are oriented toward helping others through various entities including education and experience. Furthermore, due to the nature of the service industry, employers are more likely to be exposed to individuals in recovery and other highly stigmatized groups. Another key component pertains to the compassion and munificence often identified in the service industry. Beyond the specific industries, the sociopolitical environment in the US makes it more difficult for people with substance use to have the education, resources, and connections to enter the workforce and specific businesses. The researchers postulate that the business industry tends to request a higher level of functioning of employees, when compared to the service industry. In the current study, a direct correlation was identified between business structures, industry and employer's perspectives but causation was not.

Over 50% of employers in the current study stated they had not previously hired an individual in recovery, resulting in a higher level of concern when considering hiring. In addition, a weak correlation between previous hiring on individuals in recovery and employer perspectives were found. On the other hand, businesses that employed persons in recovery conveyed more favorable perspectives than did businesses that had not. Similar to the results identified above, if employers had family or friends in recovery, these factors point to the likelihood that experience with recovery or individuals in recovery gives employers a positive outlook of work performance and other job-related attributes. These findings support the results of Unger (2002) that participants with previous experience with employees with disabilities have

more favorable attitudes towards hiring.

Evidence that a combination of personal and business-related factors are influential in employer's perspectives in hiring stigmatized groups or individuals in recovery is contradictory and inconclusive. Therefore, only specific, direct correlations can be made between the variables and the explanations posed in this study. However, the nine factors (independent variables) accounted for a small amount of the variance (11%) in the dependent variable suggesting these variables are not a good fit in predicting employer perspectives as it relates to individuals in recovery.

### **Limitations**

There were a few limitations that applied to this study. One is the data was collected through a web-based survey link. Participants who were invited to participate needed to access the survey online. Furthermore, it was impossible to know the nature of the respondents' motivation, and capability of completing the survey. Most importantly, there was no way to identify if respondents would answer honestly to all the survey items. The sample population was limited to a manageable range and relevant points, which allowed the survey to be completed. Accordingly, the developed conclusions based on the sample of participants was not representative of the entire population in the United States which the results from the study seek to address. The above limitations were not significant enough to substantially affect the outcome of the study. To reduce limitations in future research, the population should be expanded to various populations nationwide.

### **Implications**

The results of this study are indicative of the challenges and barriers individuals in recovery face in their transition to the workforce. Embedded beliefs and company policies accepting consideration of individuals in recovery contribute to an unsuccessful transition into the community while creating hindrance even among the most well intended and dedicated individuals seeking a second chance. The results from the present study align with several areas of literature while contradicting others, which all have implications for practice and research.

There has been constant discussion on the empirical research and improvement of treatment and rehabilitation of individuals in recovery; ironically treatment has been replaced with unemployment and rehabilitation with housing. The general consensus along the federal government and individuals is to address and obtain economic responsibility. Therefore, many believe there is an ethical and moral responsibility of elected officials to address this particular area of policy. With individuals in recovery and ex-prisoners having a one and five chance for successful reintegration (Reentry Policy Council, 2009), many assume that something with the current plan is not working. Furthermore, there is an ethical demand of researchers to conduct studies about the effects of re-entry into society, specifically the workplace of individuals in addiction recovery. By addressing employer's perspectives, this study provides a foundation for research to build upon.

Additionally, the idea of placing drug addicts in jail to decrease crime, while releasing them back into society increases crime, is an outdated hypothesis. Due to the nature of this paradigm, much of the literature related to drug use and recovery overlaps with the archaic practice of confinement, which has proven to be financially impossible to maintain. On the contrary, employment, education, and rehabilitation seem to be effective means for increasing societal productivity while assisting individuals in recovery.

One of the major problems of integration into the workplace specifically employment for individuals in recovery is employer attitude as documented by several studies centered on stigmatized groups (Livermore et al., 2000; Unger, 2002). In particular, Graffam et al. (2002) concluded that employers often stigmatize individuals with disabilities. The role of knowledge, information sources and meaning, underlying principles of many advocacy initiatives, suggests by increasing knowledge, and most importantly reducing misconceptions, stigma related to individuals in recovery will decrease. However, this suggests that fear and ignorance are positively related, which is contradicting between studies (Martin et al., 2003).

Moreover, Graffam et al. (2004) determined employers have a high level of opposition about hiring various marginalized groups. The primary concern stems from trust, for example that the individual in recovery or ex-offender will not relapse or reoffend. Research has proven that, during the recovery process, individuals in recovery and ex-offenders face many barriers to finding gainful employment, among them employer discrimination, issues with poverty, lack of work experience, low self-esteem, and insecure living accommodations. The role of attributions is important to the notion of stigma, given that attributions involve explanations about underlying causes, actions, or conditions. Additionally, researchers (Corrigan et al., 2004) view attribution as a mediator, which essentially leads to affective response and behavioral reactions. It is important for individuals in recovery to realize that their reputation as “addicts,” and the stigma that follows, makes it difficult to gain the trust of others, which in turn makes it difficult to find employment.

#### **Recommendations for Future Research**

Several recommendations for future research regarding this area can be suggested. In particular, the scope of the study was limited only to the perspective of employers towards the hiring of individuals in recovery. More research is needed in this area, particularly in light of the findings that perspectives towards individuals in recovery vary based on experiences and business characteristics. Furthermore, research will determine the role of gender, age, ethnicity, and education towards the perspectives of employers. Additional research should be conducted on employer comprehension understanding the difference between drug abuse and addiction recovery. A review of the literature has indicated the tendency of employers to hire other applicants who they do not expect of substance abuse over individuals in recovery (Luoma et al., 2007). Additional research in this area may offer insight into the question of whether to provide training, job search, or job placement through all efforts to improve the work force connection.

Also, the results from the study may also assist in various policy changes, effecting individuals in recovery. The study may assist policymakers in identifying desirable policy measures previously underutilized or unrecognized in the process of solving the productivity issues among individuals in recovery as well as other highly stigmatized groups. Additionally, research on the role of stigma in hiring individuals with behavior driven health conditions and the impact on employment outcomes would be essential to increase productivity among these particular groups. Furthermore, the current study may help in various research studies pertaining to individuals in recovery including reintegration into society, related barriers, and employment being used as a treatment intervention.

#### **Recommendations for Employers**

The ADA permits employers to take employment actions against individuals who are using AOD and pose a direct threat to the health or safety of other employees. However, individuals who are in recovery (not currently using) are entitled to receive reasonable

accommodations as outlined by the ADA. There is growing recognition and acceptance of the fact that addiction is an illness and public and private policies should be modified accordingly in order to allow individuals in recovery to receive recovery support and treatment while maintaining a substantial quality of life. Although, AOD use has been documented to begin voluntarily, years of research have shown continued use causes psychological, biological, and or behavioral changes. Due to the severity in recovery issues, employees who voluntarily seek treatment or support for AOD use from employers should not be subject to discriminatory action or termination.

Researchers have estimated that when an individual in recovery reveals to a prospective employer that he or she is in recovery, 75% will not obtain the job (Marks, 2002). Educating employers is essential in order for employers to make reasonable accommodations for individuals in recovery, by providing EAPs and insurance coverage equally with other illnesses. Furthermore, when approached with current or prospective employees' past AOD use, employers should make decisions on whether the individual is appropriate for employment based on the individual's skills and the requested job requirements.

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## **APPENDIX C**

### **DRAFT OF FACULTY PERCEPTION MANUSCRIPT**

*Draft Titles*

1. Untangling Race and Gender
2. The influence of Race and Gender on Educators perceptions of Black SWD
3. Race and Gender as Determinants of Educators' Perceptions regarding Black College Students with Disabilities


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### Abstract

It has become evident that the effects of race and gender can have an effect on...

Several studies investigating the effects of disability on individuals in postsecondary education...

**Bold Title Once Selected (APA 7<sup>th</sup> Edition; *Major Edit*)**

Postsecondary education represents an opportunity for individuals with disabilities to potentially have access to fulfilling careers in the American society. According to a study conducted by Raue and Lewis (2011) for the National Center for Education Statistics, students with disabilities (SWD) representation has increased in numbers during last 30 years but SWDs are less likely to enroll in college than students without disabilities. In fact, a National Longitudinal Transition Study (NLTS-2; Wagner et al., 2005), reported only 9% of SWD attended a 4-year college in comparison to 70% of their counterparts without disabilities. When considering racial background among first year students with disabilities in college, the majority (72%) were White while only 9% identified as African American (Banks, 2014). Therefore, there is still variances in education opportunities post high school graduation for students with disabilities.

**Legislation and Policies**

Even though there is disparity in educational access for SWD, various legislation has aimed to increase the participation of SWD in postsecondary education. For instance, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA), the Americans with Disabilities Act Amendments Act of 2008 (ADA), and Section 504 of the Rehabilitation Act of 1973 each contain policy ensuring equal access to postsecondary education for individuals with disabilities (Banks, 2014). The IDEA act requires students by the age of 16 to have an established course of study with an organized set of activities to support transition services which promote success for post school employment and education (Individuals with Disabilities Education Improvement Act, 2004). Furthermore, Section 504 of the Rehabilitation Act of 1973 and ADA contain several requirements outlining the obligation of institutions receiving federal

funds to provide reasonable accommodations to SWD. Although these laws and regulations have afforded SWD more educational opportunity in postsecondary education, the graduation rates for SWD matriculated at four-year institutions are substantially lower than their counterparts and peers without disabilities (Wagner et al., 2005).

### **Impact of Gender on Postsecondary Opportunities**

From a social perspective, there are multiple factors that impact social and educational opportunities for individuals. Peterson (2009) reported a person's gender can play a role in the educational opportunities and eventual career advancement of individuals. Moreover, perceived gender bias in employment opportunities between male and females has been found to affect career choices and opportunities (Gilbert et al., 2010). In fact, research has suggested some women may prefer specific positions that are traditionally perceived as a feminine career such as teaching, secretarial fields, and nursing. Additionally, research has also shown that women, who entered "men's work", experienced a smaller gender wage gap than women who worked in female careers (Black & Spitz-Oener, 2010). However, other research has demonstrated that gender wage differences remain the same after controlling for industry effect (Carrington, & Troske, 1998). Therefore, a potential gender gap in career choice still plays a role in career opportunities for individuals.

### **Intersectionality of Gender and Race**

Goff and Kahn (2013) argue that experimental psychology has often not been invested in the intersection of race and gender in thinking through the construction of social identities, therefore undertheorizing the lived experience of individuals. To the extent that commonly used measures are less attentive to intersecting identities, observational studies may also leave critical gaps in our understanding of the experience of racism...

Men and women of color also experience discrimination in different societal settings. Men of color have reported more criminal profiling while women of color reported more interpersonal incivilities (Kwate & Goodman, 2015). Moreover, Black educated men reported to receive more respect while Black women explained that they received a penalty for being educated. Data from the U.S Department of Health and Human Services questionnaire showed highest prevalence of any disability and greater health disparities among individuals with racial minority background (Okoro, Hollis, Cyrus, & Griffin-Blake, 2018). For individuals with a disability from a racial minoritized background, intersecting identities can negatively affect their personal and educational experiences at a community level (Mpofu & Harley, 2006).

### **Educational Experience of Students with Disabilities**

Even since the ADA passage, many institutions have made little or no progress in improved accessibility for students with physical and mental disabilities (David, 2011). Furthermore, students with disabilities experience financial, pedagogical and social barriers in their education (Collinson et al., (2011); Farrar, (2007) & Tinklin et al, 2004). Students with disabilities have also reported struggling with organization management and time management in college (Van Hees, et al., 2014) as well as feeling overwhelmed, lonely, and tired (Sayman, 2015). Unquestionably, these multiple barriers influence the quality of education for students with disabilities in higher education.

Students with disabilities have reported experiencing fewer choices for post-secondary education in comparison to their counterparts due to their physical needs (Redpath, et al., 2013 ). On the other hand, SWD have also reported that having a diagnosis created a feeling of empowerment as a way to legitimize need for services and support (Francis, Duke, Fujita & Sutton, 2019). Similarly, SWD explained that quality transition planning from high school to

college increased their self-advocacy skills, perceptions of faculty, and decreased negative feelings related to stigma of disability diagnosis (Ramsdell, 2014). Therefore, SWD could benefit from services to improve their college experience and success in education.

From a system perspective, special education has been described as a contributor to segregation for African Americans due to the impact of disproportionately labeling these students with a disability (Sullivan & Bal, 2003). Once African American students become part of a special education program, they are more likely to stay in restrictive educational settings resulting in fewer academic achievements (Pederson, 2009). Additionally, schools have been described as using academic and behavioral standards based on White, English-speaking, middle class populations (Blanchett, Klingner, & Harry, 2009). However, other findings have suggested that there is a minority under-representation in special education due to socio-economic, linguistic and cultural impediments (Morgan et al., 2015). Socio-cultural factors may represent barriers to access services for minoritized students with disabilities.

### **Attitudes towards Students with Disabilities among Educators**

College professors also can influence the educational experience of students with disabilities. In previous research, college faculty has been found to be willing to provide minor accommodation rather than major ones to SWDs (Murray, Wren, & Keys, 2008). Similarly, previous research has reported that university faculty members had positive attitudes towards accommodations for students with disabilities and provided support about resources, personal assistance, and emotional support (Khouri, Lipka, & Shecter-Lerner, 2019).

Previous research has also suggested that postsecondary professors have limited knowledge about the legal requirement to provide accommodations to students with disabilities (Zang et al, 2010). In this study, professors expressed that accommodations were unfair to

students without disability or encumbered SWD's educational experience. This inadequate knowledge shapes professors attitudes in providing proper accommodations for SWD. Although faculty members might not overtly voice their opinions, they could be seemed as reluctant to provide accommodations to SWD or suspicious of their disability (Frymeir & Wanzer, 2003).

As knowledge about disability legislation could influence attitudes towards disability, other potential personal factors have been identified in previous studies. Faculty member's age and previous experience working with individuals with disabilities have been found to influence attitudes towards SWD. Specifically, Vogel, Leyser, Wyland, and Brulle (1999) explained that younger faculty were more willing to accommodate SWD than older professors as well as faculty with previous experience with SWD were more accommodating to students' needs due to their disability. Several students (Benhan, 1997; Rao, 2004) have found that female faculty showed more empathy toward student with disabilities than male faculty.

Moreover, previous studies have identified faculty characteristic as relevant in the development of attitude towards students with disabilities. Specific academic fields and faculty training could influence faculty's perception of students with disabilities (Lombardi, Murray, & Wren, 2011; Rao, 2004). When comparing multiple faculty traits, Lombardi and Murray (2011) found that faculty who are female, non-tenure, from the College of Education with disability training expressed the most positive attitudes toward classroom accommodations. Additionally, faculty members who had a friend or a student with a disability had more positive perceptions of SWD than faculty who had neither of these experiences (Brockelman, Chadsey, & Loeb, 2006). Lastly, faculty knowledge of disability and perception of institutional support influence attitudes and level of comfort in interacting with students with disabilities (Zhang, Landmark, Reber, Hsu, Kwok, & Benz, 2010).

Previous studies have found that cultural biases and stereotypes could influence instructors' decision to refer students to special education services (Cartledge & Dukes, 2009; Fletcher, 2014). In a historically Black university, Banks (2019) found that faculty demonstrated positive willingness to personally devote time and energy to support students with disabilities. Similarly, instructors often stereotype African American male students as being unmotivated and defiant regardless of whether or not the teacher shares the student's ethnic background (Lynn et al., 2010). In another study, Becton, Foster, and Chen (2016) found that disability related issues, personal wellness, and faculty involvement might influence college educators' awareness of the challenges African American SWD encounter in higher education settings.

Due to multiple challenges, barriers, and the impact of negative preconceived ideas on the college experience of SWD, this study aims to examine variables influencing the views of college educators toward the success of African American students with disabilities in higher education settings. Four research questions guided the investigation. The purpose of this study was to examine variables influencing the views of college educators toward the success of African American students with disabilities in higher education settings. Four research questions guided the investigation.

Research Question 1: Do male and female educators report differential perceptions regarding (a) disability related issues, (b) personal wellness, and (c) faculty involvement?

Research Question 2: Is there a difference in overall attitudes toward the success of African American students with disabilities between male and female educators?

Research Question 3: Is there a difference in overall attitudes toward the success of African American students with disabilities between African American and non-African American educators?

Research Question 4: Are selected demographic characteristics (i.e., gender, age, race, and years of teaching), prior training in teaching students with disabilities, prior training focused on African American culture, and interest in receiving diversity training collectively related to the perceptions toward the success of African American students with disabilities in higher education setting among college educators.

## **Method**

### **Participants**

Participants in this study were recruited from institutions of higher education throughout the United States. A total of 166 educators took part in the study. The final sample size was 154 after removing respondents with substantial missing data from analysis. Thirty-nine percent ( $n = 60$ ) of the participants were male. The average age of the participants was 48.9 years old ( $sd = 11.66$ ) with a range from 24 to 77. The majority of the participants was African American ( $n = 80, 51.9\%$ ), followed by European American ( $n = 50, 32.5\%$ ), Multiracial ( $n = 10, 6.5\%$ ), Asian American ( $n = 9, 5.8\%$ ), Hispanic American ( $n = 3, 1.9\%$ ) and Native American ( $n = 2, 1.3\%$ ). The educational attainment of the sample was very high as evidenced by 72.7% ( $n = 112$ ) doctorate holders and 26.0% ( $n = 40$ ) master's degree holders. In terms of faculty rank, assistant professors made up the largest group ( $n = 55, 35.7\%$ ), followed by associate professors ( $n = 22.1\%$ ), full professors ( $n = 34, 22.1\%$ ), and lecturers / clinical instructors ( $n = 27, 17.5\%$ ). The average years of teaching experience at college level was 14.7 ( $sd = 11.03$ ) with a range from 1 to 56.

### **Instrument**

*The Culture and Disability Awareness Scale for Postsecondary Educators (CDAPE;* Becton, Foster, & Chen, 2016) was used to measure the awareness of cultural and disability



issues African American college students with disabilities face in higher education setting.

CDAPE consists of 28 items and is measured on a six-point Likert-type scale, ranging from 1 = *Strongly Disagree*, 2 = *Disagree*, 3 = *Somewhat Disagree*, 4 = *Somewhat Agree*, 5 = *Agree*, to 6 = *Strongly Agree*. A higher total score indicates a higher level of awareness. Example statements include: “African American SWD have fewer societal expectations to succeed than non-minority SWD.” and “African American SWD are less academically prepared for higher education than non-minority SWD.” The internal consistency Cronbach’s  $\alpha$  for the CDAPE was computed at .91.

*Interest in Diversity Training* (Becton, Foster, & Chen, 2016). Faculty members’ interest in training on the needs of African American students with disabilities was measured by three items: “Are you interested in training on disability issues?”, “Are you interested in training on African American experiences in higher education?”, and “Are you interested in training on disability support services?” Each item is scored a five-point Liket-type scale, ranging from 1 = *Not interested*, 2 = *Rarely interested*, 3 = *Somewhat interested*, 4 = *Often interested*, to 5 = *Very interested*. A higher total score indicates more interest in receiving training. The internal consistency Cronbach’s  $\alpha$  for the scale was computed at .85.

## **Procedure**

After obtaining approval from the Institutional Review Board, a convenience sample of participants for the study was employed by using the snowball technique. The researchers used networks, primarily national associations and Historically Black Colleges and Universities (HBCU), to contact educators through electronic listservs. After potential participants were identified, an informed consent including a brief description of the study with a hyperlink was distributed through electronic correspondence. The participants were encouraged to invite other

prospective participants who met the criteria set by the researchers. To ensure confidentiality and privacy of each participant, and to uphold ethical guidelines and considerations, the participants acknowledged their informed consent to take part in the study by selecting the “Agree” button to activate the online survey.

### **Data Analysis Plan**

Descriptive statistics were used to describe the sample and dependent variables (perceptions of disability-related issues, personal wellness and faculty involvement). Differences on the three dependent variables were examined using a 2 x 3 x 4 (Gender X Perceptions X...) multivariate analysis of variance (MANOVA). The alpha level for the analysis of the overall model (the omnibus F) was set at .05. For subsequent univariate analysis of single variables, the alpha level was set accordingly based on the Bonferroni procedure for guarding against a chance of error from using numerous univariate analyses (test wise error). (REVISIT)

T-test : Independent-samples *t*-test was conducted to address Research Questions 2 and 3 in order to explore any differences in overall attitudes toward the success of African American students with disabilities between two different groups like (sex, and race).

Hierarchical regression analysis (HRA): The HRA was performed to test the incremental variance accounted for in educators' Culture and Disability Awareness Scale for Postsecondary Educators by the selected demographic characteristics (gender, age, race - African American versus other races, and years of teaching), Received Training Teaching SWD, and Received training focused on African American culture, Understanding of disability, service and culture.

### **Results**

All statistical analyses were conducted using an alpha of .05 to determine significance. Research Question 1 addressed differences in perception between male and female educators

with respect to attitudes toward the success of African American students with disabilities. For the purpose of this analysis, the 28 items of the culture and disabilities awareness scale for postsecondary educators were clustered into three groups labeled (a) Disabilities related issues, (b) Personal wellness, and (c) Faculty involvement (Becton et al., 2016).

Results were analyzed using a one-way multivariate analysis of variance (MANOVA) between-groups design. This analysis revealed a significant multivariate effect for gender, Wilks's Lambda = .91,  $F(3, 118) = 3.88, p = .01$ . Univariate results indicated that the factor Personal Wellness  $F(1, 120) = 6.03, p = .02$ , adjust  $R^2 = .04$ , was statistically significant; the factor Faculty Involvement  $F(1, 120) = 6.95, p = .01$ , adjust  $R^2 = .05$ , was statistically significant. The factor Disabilities related issues  $F(1, 120) = .01, p = .93$ , adjust  $R^2 = .00$ , was not statistically significant.

Research Question 2 addressed any differences in overall attitudes toward the success of African American students with disabilities between male and female educators. Independent-samples *t*-test was conducted to compare the overall attitudes toward the success of African American students with disabilities between male and female educators. Table 1 shows there was a significant difference in the attitudes for male educators ( $M = 109.45, SD = 21.15$ ) and female educators ( $M = 102.53, SD = 18.37$ );  $t(151) = 2.14, p < .05, d = .35$ . The results suggest that the male educators have more positive attitudes than female educators.

### INSERT TABLE

Table 1

Results of *t*-test and Descriptive Statistics for CDAPE by Gender

	Male			Female			95% CI	<i>t</i>	<i>d</i>
	M	SD	n	M	SD	n			
CDAPE	109.45	21.15	60	102.53	18.37	93	.54, 13.30	2.14*	.35

Note: CDAPE: Culture and Disability Awareness Scale for Postsecondary Educators

\* $p < .05$ , *d* : Cohen's effect size *d*.

Research Question 3 explored the difference in overall attitudes toward the success of African American students with disabilities between African American and non-African American educators. Independent-samples *t*-test was conducted to compare the overall attitudes toward the success of African American students with disabilities between African-American and non-African-American educators. There was a no statistically significant difference in the attitudes for African-American educators ( $M = 106.59$ ,  $SD = 18.13$ ) and non-African-American educators ( $M = 103.55$ ,  $SD = 21.32$ );  $t(152) = .95$ ,  $p = .34$ ,  $d = .15$ .

### INSERT TABLE

Table 2

#### Results of *t*-test and Descriptive Statistics for CDAPE by Race

	African-American educators			Non-African-American educators			95% CI	<i>t</i>	<i>d</i>
	M	SD	n	M	SD	n			
CDAPE	106.59	18.13	80	103.55	21.32	74	-9.31, 3.25	.95	.15

*Note:* CDAPE: Culture and Disability Awareness Scale for Postsecondary Educators

*d* : Cohen's effect size *d*.

Research Question 4 explored if selected demographic characteristics (i.e., gender, age, race, and years of teaching), prior training in teaching students with disabilities, prior training focused on African American culture, and interest in receiving diversity training collectively related to the perceptions toward the success of African American students with disabilities in higher education settings among college educators. The hierarchical regression analysis was performed with the selected demographic characteristics (gender, age, race - African American versus other races, and years of teaching), Received Training Teaching SWD, and Received training focused on African American culture, Understanding of disability, service and culture and criterion

variable of educators' Culture and Disability Awareness Scale for Postsecondary Educators. The full model for indicated  $R^2 = .08$ ,  $F(7, 138) = 1.63$ ,  $p = .13$ .

In the first step of the regression analysis, selected demographic characteristics (gender, age, race, and years of teaching) was entered, but did not contribute significantly to the variance in the educator's CDAPE,  $R^2 = .05$ ,  $F(4, 141) = 1.74$ ,  $p = .15$ . In the second step of the regression analysis, Received Training Teaching SWD was entered, but did not contribute significantly to the variance in the educator's CDAPE,  $R^2 = .05$ ,  $\Delta R^2 = .00$ ,  $F(5, 140) = 1.41$ ,  $p = .23$ . In the third step of the regression analysis, Received training focused on African American culture was entered, but did not contribute significantly to the variance in the educator's CDAPE,  $R^2 = .05$ ,  $\Delta R^2 = .00$ ,  $F(6, 139) = 1.17$ ,  $p = .32$ .

The fourth step of the regression analysis, in which Understanding of disability, service and culture was entered, indicated that a significant change in the variance in educators' CDAPE scores was explained by Understanding of disability, service and culture,  $R^2 = .08$ ,  $\Delta R^2 = 0.03$ ,  $F(7, 138) = 1.63$ ,  $p = .13$ . The standardized partial regression coefficient,  $\beta = .18$ ,  $t(138) = 2.05$ ,  $p < .05$ , suggested Understanding of disability, service and culture was associated with educators' CDAPE.

### Discussion

The educators in the present study...

The present study has a few limitations that curtail the generalizability of the findings...

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Table XXX

Results of *t*-test and Descriptive Statistics for CDAPE by Gender

	Male			Female			95% CI	<i>t</i>	<i>d</i>
	M	SD	n	M	SD	n			
CDAPE	109.45	21.15	60	102.53	18.37	93	.54, 13.30	2.14*	.35

*Note:* CDAPE: Culture and Disability Awareness Scale for Postsecondary Educators\**p* < .05, *d*: Cohen's effect size *d*.

Table XXX

Results of *t*-test and Descriptive Statistics for CDAPE by Race

	African-American educators			Non-African-American educators			95% CI	<i>t</i>	<i>d</i>
	M	SD	n	M	SD	n			
CDAPE	106.59	18.13	80	103.55	21.32	74	-9.31, 3.25	.95	.15

*Note:* CDAPE: Culture and Disability Awareness Scale for Postsecondary Educators*d* : Cohen's effect size *d*.

Table XXX

*Summary of Stepwise Regression Analysis Predicting Faculty Awareness*

Variable	<i>B</i>	<i>SE B</i>	$\beta$	$R^2$	$\Delta R^2$	<i>t</i>
Step 1				.047		
Sex	5.625	3.369	.142			1.669
Age	-.346	.204	-.205			-1.698
Race	3.325	3.266	.086			1.018
Years of college teaching experience	.283	.220	.158			1.285
Adjusted $R^2 = .020$						
Step 2				.048	.001	
Sex	5.571	3.383	.140			1.647
Age	-.339	.206	-.200			-1.647
Race	3.393	3.282	.088			1.034
Years of college teaching experience	.280	.221	.157			1.264
Prior training in disability issues	1.136	3.266	.029			.348
Adjusted $R^2 = .014$						
Step 3				.048	.000	
Sex	5.434	3.439	.137			1.580
Age	-.334	.207	-.197			-1.612
Race	3.378	3.293	.087			1.026
Years of college teaching experience	.278	.222	.156			1.252
Prior training in disability issues	1.013	3.315	.026			.305
Prior training in African American culture	.851	3.419	.021			.249
Adjusted $R^2 = .007$						
Step 4				.076	.028	
Sex	5.099	3.404	.128			1.498
Age	-.360	.205	-.213			-1.752

Race	2.056	3.319	.053	.620
Years of college teaching experience	.366	.224	.205	1.636
Prior training in disability issues	1.103	3.277	.028	.337
Prior training in African American culture	1.979	3.424	.049	.578
Interest in diversity training	1.229	.599	.179	2.053*
Adjusted $R^2 = .030$				

\*  $p < .05$