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The Disclosure Conundrum

Outline

- **The environment**
 - **Legal & social context for disclosure**
- **The worker with SMI**
 - **Disclosure as a rational choice**
- **The employer & co-workers**
 - **Workplace culture**
- **The evidence**
 - **Impact of disclosure of a schizophrenia diagnosis**



Legal and social context

THE ENVIRONMENT

Don't Ask, Don't Tell

Scenario:

You have a client with a diagnosis of schizoaffective disorder, whose symptoms are in remission. The client is applying for a competitive job at a private firm. A question on the job application asks:

Have you ever been diagnosed with a chronic physical or mental health condition?

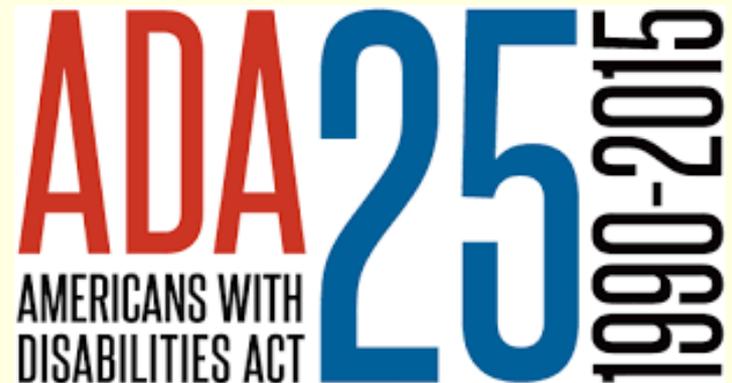
What is the best answer?

- Yes
- No
- It is illegal to ask me that



The legal context

- **Americans with Disabilities Act of 1990 (ADA)**
 - ***Employers* are prohibited from asking about disabling health conditions on job applications**
 - ***Workers* who can perform the **essential functions** of a job have the right to **reasonable accommodations**, so long as the accommodations do not impose **undue hardship** on the employer**
 - In order to receive job accommodations, ***workers*** must disclose their disability to their employer



The social context

- **Mental disabilities differ from physical/sensory disabilities in important ways**
 - **Mental disabilities are generally *less visible* than physical/sensory disabilities → mental disabilities can be *concealed***
 - **Mental disabilities are subject to *greater stigma* than physical/sensory disabilities → disclosure carries *real risks***

Hence, the disclosure conundrum





Disclosure as a Rational Choice

THE WORKER WITH SMI

Rational choice model of disclosure

- **Assumption:**
 - **Persons with SMI who are capable of working in competitive jobs are rational economic agents**

- **Competitive job**
 - **Open to anyone with or without a disability**
 - **Paying at least the minimum wage**
 - **Not associated with supported employment/job coach**

- **Rational economic agent**
 - **Has a set of well-ordered preferences**
 - **Capable of making decisions in his/her own best interest**

Workers' objectives: acceptance

- **What is a worker with SMI seeking in the workplace?**
 - **Wages, benefits, hours, workplace amenities**
 - **Acceptance**
 - **More acceptance is preferred to less**
 - **Up to the point of full acceptance, where the worker is treated just like any other employee**



“I want to work, and I want to fit in, and I want to be normal. I don’t want people staring at me like I’m a zombie or something from the zoo. I don’t want to be stared at like I’m different just because I have bipolar.”

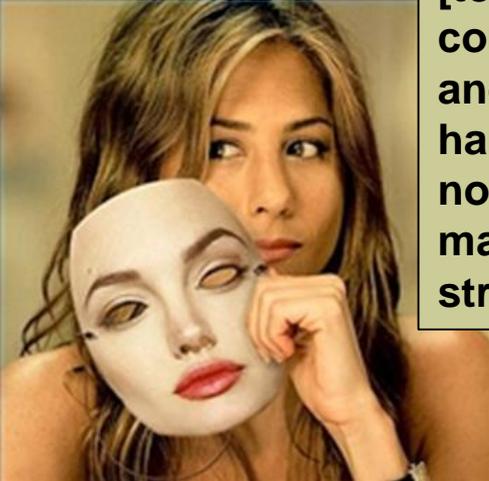
Acceptance continuum

- **Acceptance in the workplace can be viewed as a continuum**
 - **No acceptance** – “I don’t want this person in my work place”
 - **Full acceptance** – the worker with SMI is treated “just like any other worker”



Workers' objectives: disclosure

- **Disclosure can also be a valuable commodity for workers with SMI**
 - To request employer-provided job accommodations
 - To relieve the stress of keeping a secret



“I feel I would be happier [to disclose] because I could really be myself and not have to work so hard to make sure nobody notices that maybe I’m a little bit stressed or tired.”

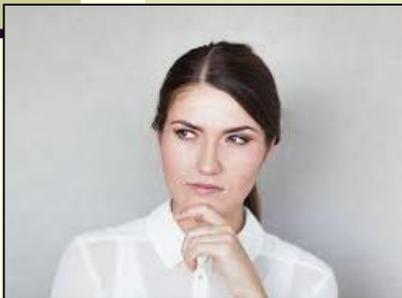
- **But, more disclosure is not always preferred to less –**
 - Most workers with SMI prefer to keep some aspects of their illness private



“[If I feel forced to disclose] I’ll be angry that I had to reveal the most intimate part of myself to people I would not want to do that with.”

Disclosure continuum

- Because SMI is concealable, workers can control
 - *When to disclose*
 - *To whom*
 - *How much to disclose*



Selective disclosure

■ When?

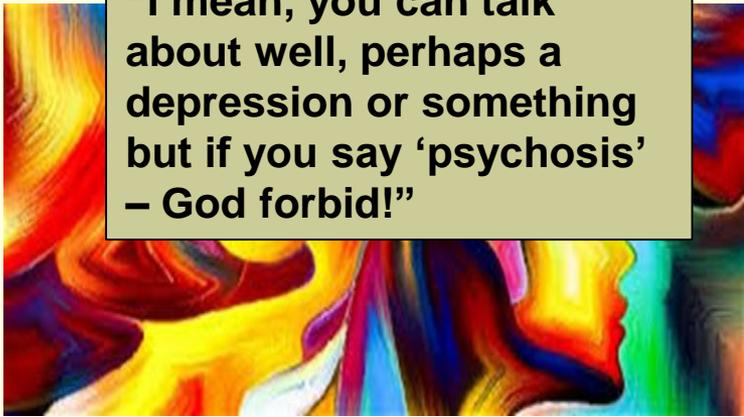
- The general consensus is that disclosing SMI before you are hired is a mistake



“You wouldn’t get taken on in the first place if you told them you had a big mental history [before you were hired].”

■ How much?

- Many workers say they disclose ‘laundered diagnoses’ such as *metabolic disorder* or *exhaustion syndrome*



“I mean, you can talk about well, perhaps a depression or something but if you say ‘psychosis’ – God forbid!”



Workplace culture

THE EMPLOYER AND CO-WORKERS

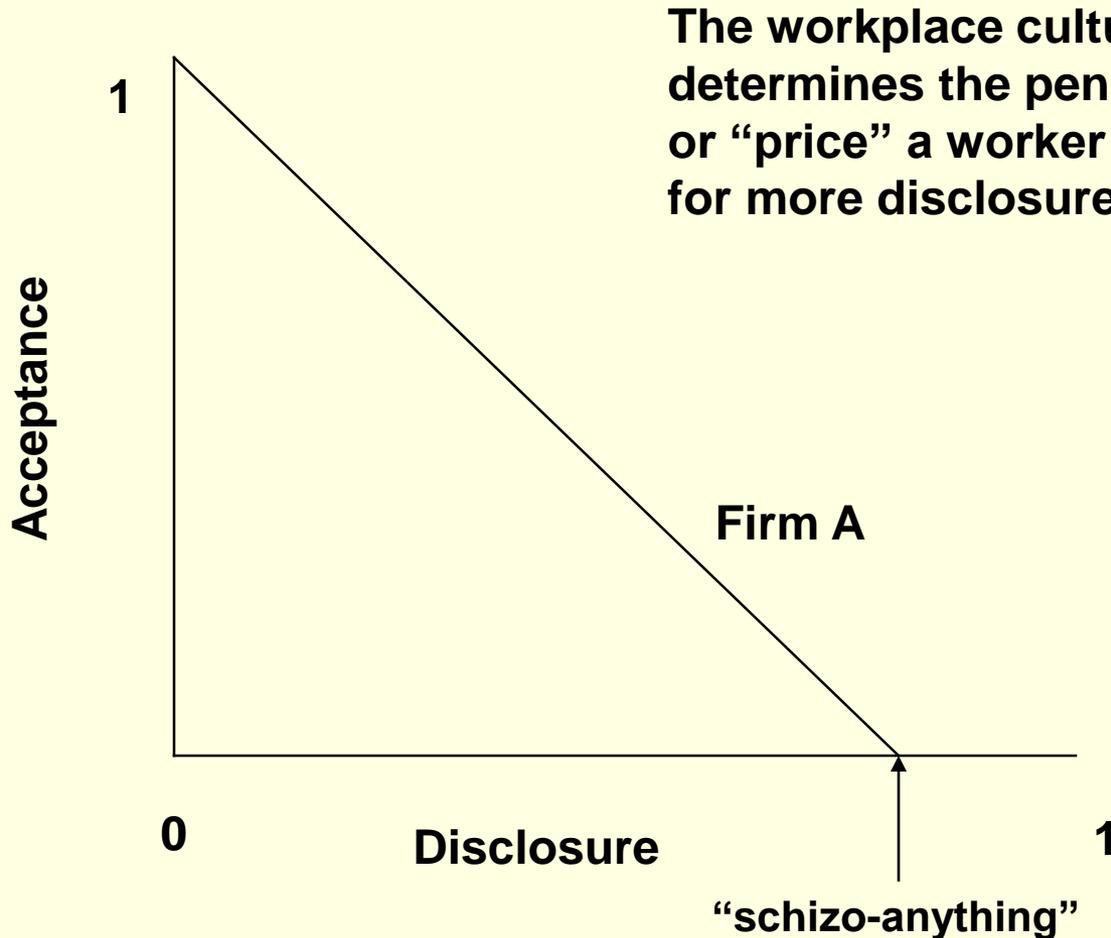
Tradeoff between disclosure and acceptance

- **Workers with SMI can choose how much they reveal about their illness to employers and/or co-workers, because mental disorders are largely concealable**
- **Once the worker chooses a level of disclosure, the degree to which they are accepted depends on the culture of the workplace**



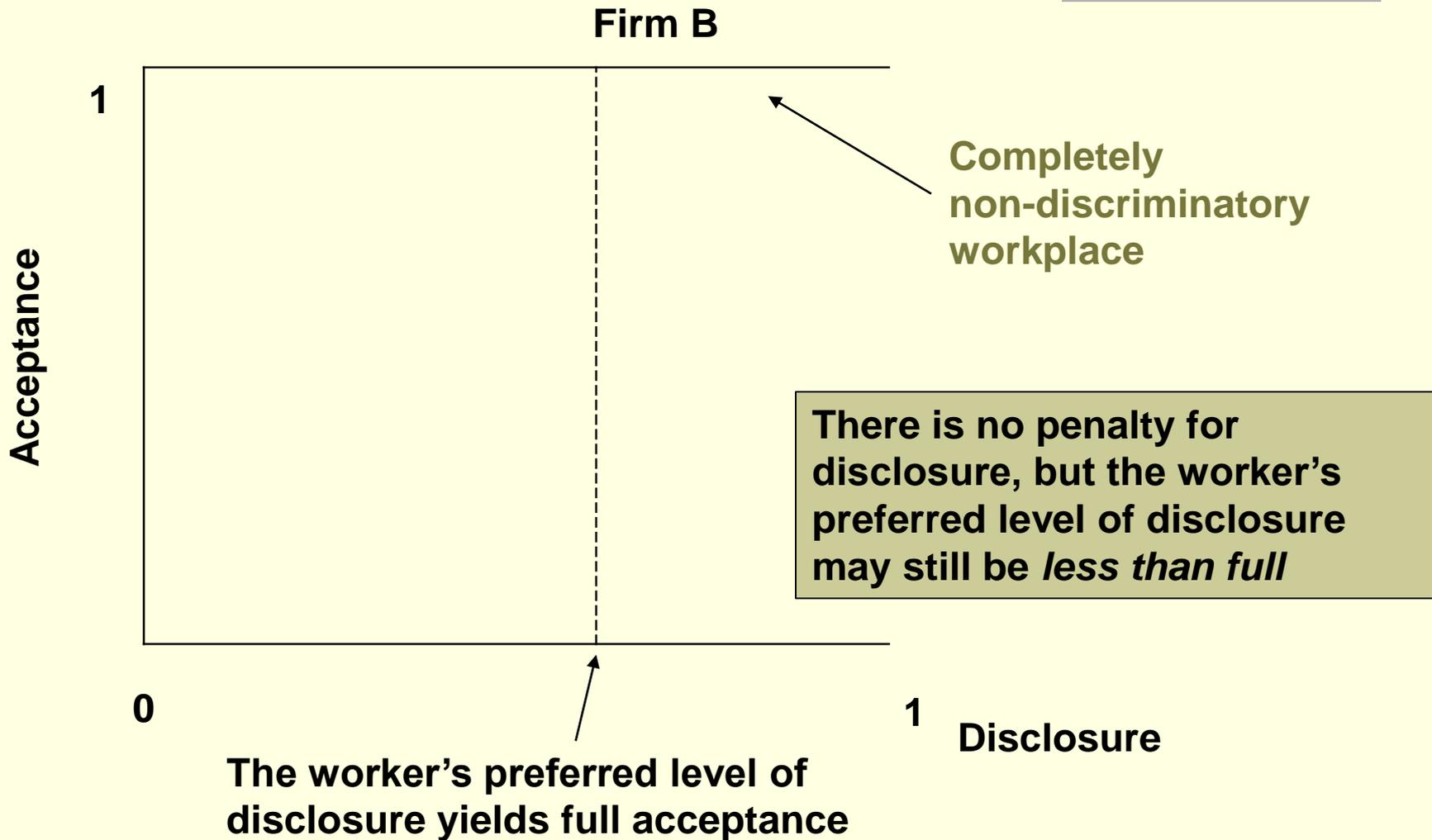
“I don’t want to tell anybody, because people who aren’t ill, they do have a tendency sometimes to treat you different. They’ll start teasing you or they’ll shy away from you.”

Workplace culture I

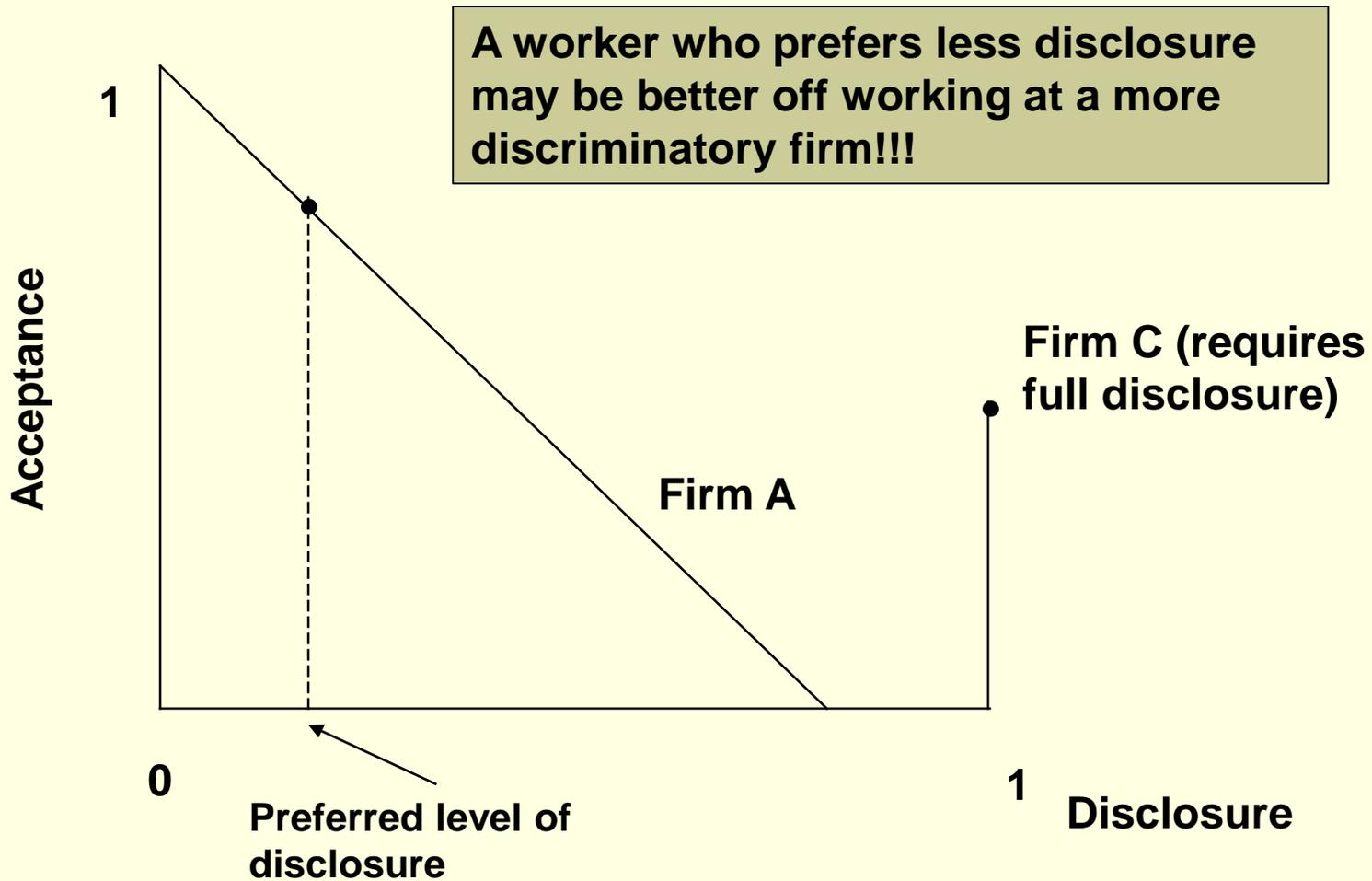


“...if anybody at work or my professional body knew that I’d got schizo-anything. I wouldn’t be allowed to practice.”

Workplace culture II



Workplace culture III





Pandya A, et al. “Perceived Impact of disclosure of a schizophrenia diagnosis.”

***Community Mental Health Journal* 47 (2011): 613–621.**

THE EVIDENCE

Data

- **Survey of 258 people over age 18**
- **With diagnosis of schizophrenia, schizoaffective disorder, other schizophrenia spectrum disorder**
- **Demographics**
 - **38% currently employed**
 - **55% female, 78% Caucasian**
 - **37% college graduates, but 65% have incomes <\$35,000/ year**
- **Survey asked**
 - **To whom participants had disclosed their diagnosis, and how open they had been**
 - **Whether the response was positive, negative, or neutral, and specific consequences of disclosure**

Disclosure

- Participants were asked to rate how open they had been about disclosing their diagnosis of SMI within various relationships
 - 1 – not at all open
 - 2 - somewhat open
 - 3 – quite open
 - 4 – completely open
- Participants were most open with their doctors/spouse
- Only ‘somewhat open’ with employers/co-workers
- Least open with the neighbors



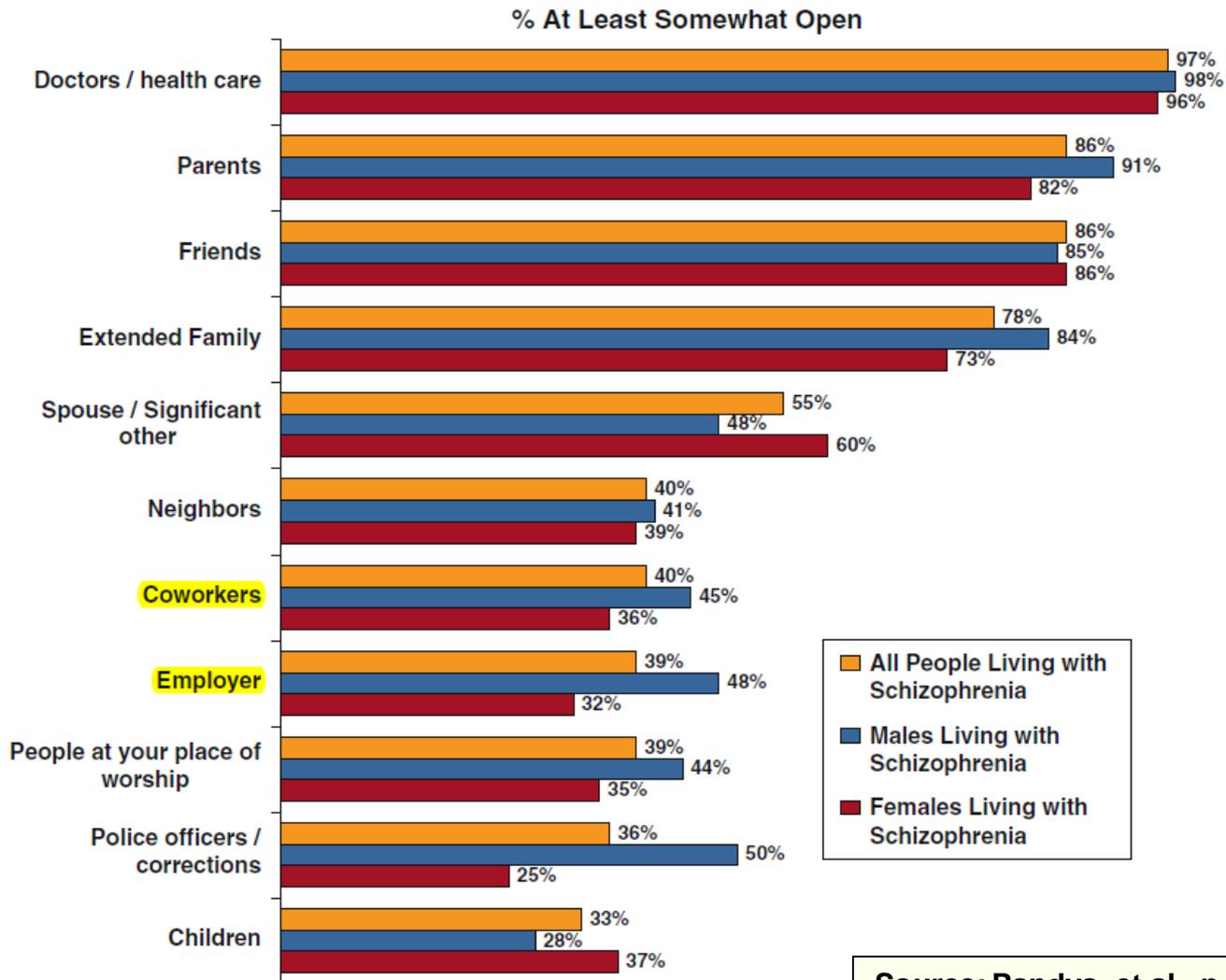
Disclosure

Table 2 Openness scores by type of relationship

	Mean score	SD	Response rate	
			<i>N</i>	%
Parents	3.3	1.0	239	93
Extended family	2.6	1.1	251	97
Spouse/significant other	3.4	1.0	153	59
Children	2.3	1.3	146	57
Friends	2.7	1.0	254	98
Coworkers	2.1	1.1	178	69
Employer	2.2	1.2	177	69
Place of worship	2.0	1.1	177	69
Neighbors	1.7	0.9	248	96
Doctors	3.6	0.7	256	99
Law enforcement	2.0	1.1	183	71
Overall mean score	2.6	0.7	258	–

Source: Pandya, et.al., p. 615.

Disclosure



Source: Pandya, et.al., p. 616.

Responses to disclosure

■ Positive

- Encouraged my recovery (49%)
- Confided in me about their challenges (34%)
- Showed admiration for me (26%)
- Took an interest in my condition (24%)

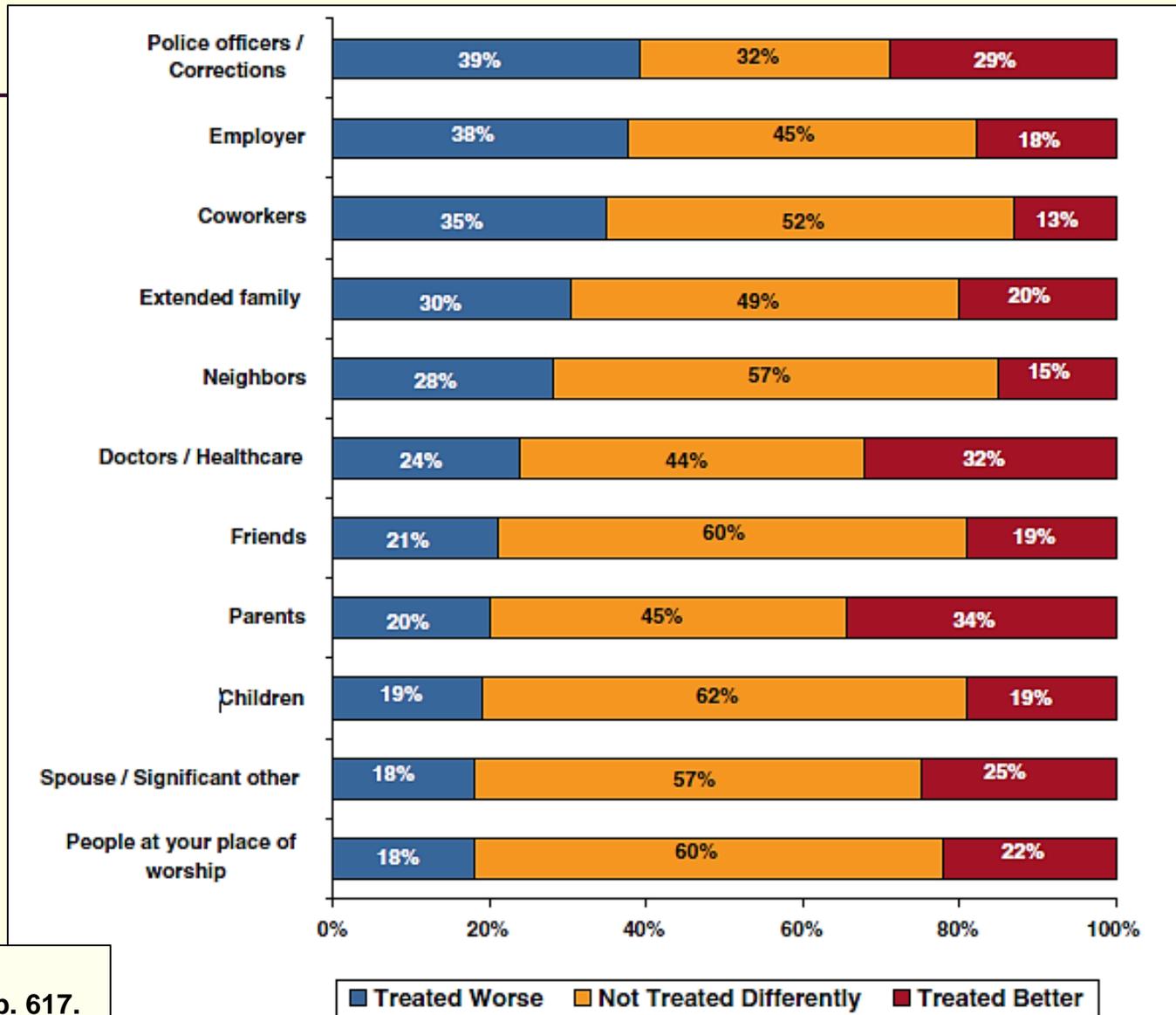
■ Negative

- Avoided the topic of my illness (43%)
- Treated me as though I lack intelligence (34%)
- Made negative comments about schizophrenia (23%)
- Dropped me as a friend (22%)
- Appeared confused/embarrassed (21%)
- Was afraid to be left alone with me (14%)



Note: # in () are percent of participants reporting the response 'always' or 'often'

Responses to disclosure



Source:
Pandya, et.al., p. 617.

What can we learn?

- **Disclosure of SMI in the workplace is influenced by**
 - The need for employer-provided job accommodations
 - The worker's preferences for privacy vs. openness
 - The workplace culture (the tradeoff between disclosure & acceptance)
- **Concerns about negative responses to disclosure are justified**
 - Selective disclosure is possible
 - Workers with SMI differ as to their preferred level of disclosure
 - Some accommodations can be initiated by the worker, without the need for disclosure

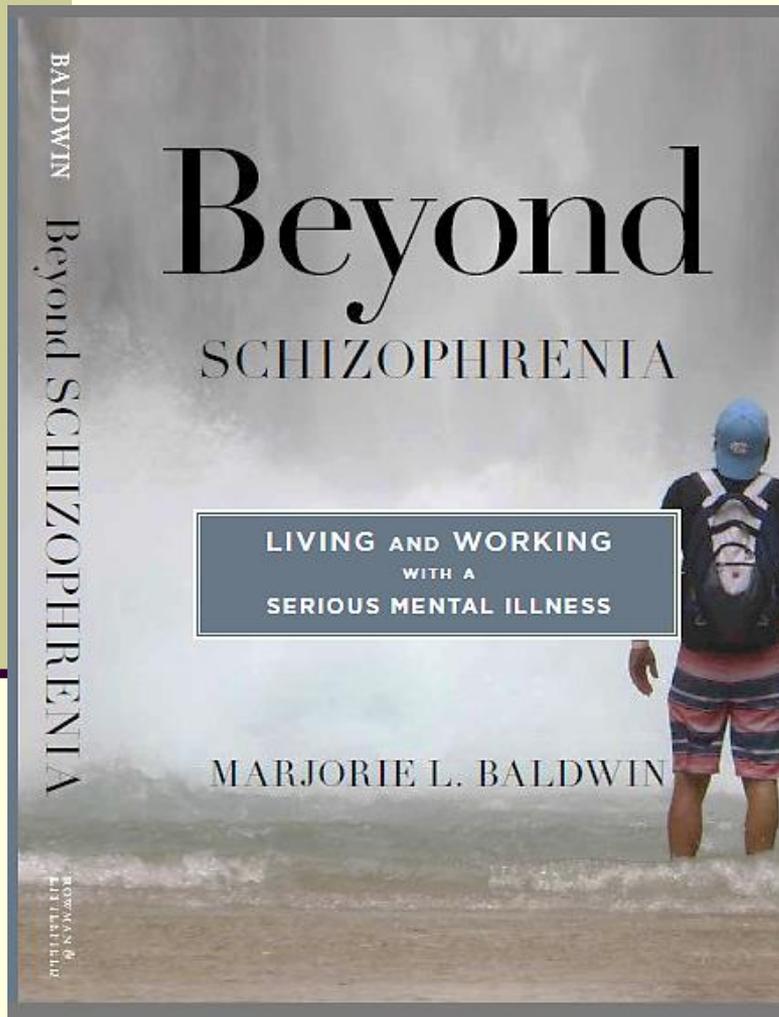
Postscript

- **“Passing” [Erving Goffman *Stigma*]**
 - The choice not to disclose a discreditable stigma, so as to “pass” as normal
 - One who “passes” creates a false identity for themselves, which can lead to both practical and psychological problems
 - Individual is torn between two attachments: their real identity with the stigmatized group vs. the normal group from whom they seek acceptance



[When my co-workers were making disparaging remarks about people with mental illness] ... for a split second I sort of thought well I could roll my sleeves up and say “You mean someone crazy like me?” Because that always shocks people and they say “Oh well you don’t look like one of them.” It’s like, what am I meant to look like?

The book



Each day, millions of mentally ill people face stigma, low expectations, and outdated practices that keep them in menial jobs, demoralized, and dependent on government support—although they are capable of so much more. It doesn't have to be this way.

“I’m not sure what has protected David from stigma and kept his self esteem intact. He tells me he held on to five words that his psychiatrist said to him as he was about to be discharged from the first hospital stay: ‘You can recover from this.’”