This Is Us: Exploring Invisible Disabilities in Our HR Community

A Toward New Destinations HR Diversity Council Project
Cast (in order of appearance):

- Aubrey Lang
- Patti Riddle
- Maria Timberlake
- Reginald White
- Ruth Katz

Please plan to join us after the program for a lunchtime guided conversation. Flu shots at EHOB have been extended until 1:15, so you have time to enjoy lunch AND protect yourself from the flu!
Next Speaker:

Patti Riddle, LMSW

Associate Director for Medical Leaves Administration (MLA) at Cornell. She has been employed with Cornell since 1995 and has spent her entire professional career in medical leaves and disability accommodations. MLA is responsible for handling workers’ compensation, short term and long term disability, FMLA and NY Paid Family Leaves, the ergonomics program, and ADA employment related requests.
Medical Leaves Administration

INVISIBLE DISABILITIES
JUST HOW COMMON ARE THEY?
Prevalence and Frequency

What does the data show us on a national level?
7.6% of Americans aged 12 and over had depression symptoms in the past 2 weeks.
CDC: Leading Causes of Death 2015

Adults 25-44 years old

1. Unintentional Injuries
2. Cancer
3. Heart Disease
4. Suicide
CDC: Leading Causes of Death 2015

Adults 25-44 years old

6 times more likely to die from suicide than diabetes
CDC: Nationwide Incidence 2015

Asthma – 8.3% of adults

Epilepsy – 1% of entire population
Learning Disabilities
Nationwide Incidence

1 in 5 children
learning/attention issues
What does our Cornell data show us?
Cornell Endowed Health Plan

Office Visits Paid for Calendar Year 2017:

122,195
What percentage of visits were for Mental Health or Substance Abuse?
Of 122,195 Visits in CY 2017

25%

30,621 visits

Coded as Mental Health or Substance Abuse related
Rank the following therapeutic classes in order of frequency:

Oral Contraceptives
Cholesterol (Antihyperlipidemics)
Antidepressants
Most Common Endowed Rx’s
CY 2017

1 - Antidepressants  (16,558 scripts)

2 - Cholesterol  (8266 scripts)

3 - Oral Contraceptives  (6866 scripts)
Short Term Disability Absences

Medically-disabled from working for more than 7 consecutive calendar days to qualify
Short Term Disability
Leading Conditions

1. Pregnancy/Maternity
2. Musculoskeletal
3. Mental Health: Depression, Anxiety, Substance Abuse
What is the ONE THING we want people to know?
Just because you can’t see it, doesn’t mean it’s not real!
Next Speaker:

Maria T. Timberlake, PhD

Associate Professor at SUNY Cortland whose research focuses on the impact of disability policies and the unintended consequences of good intentions. She studies the perspectives of those expected to implement policy, and those impacted by it, especially individuals whose communication, sensory needs, and perceived ability make them vulnerable to being misunderstood and underestimated.
“This Is Us”

Maria
Timberlake, PhD

Maria.Timberlake@Cortland.edu
Objectives for this next segment:

- Establish a shared vocabulary for talking about invisible disabilities.
- Discuss the range and types of invisible disabilities.
- Analyze options for thinking about and responding to invisible disabilities.
Please write a few adjectives on post its. I will not ask you to share but we will use them later.
✓ A hard worker is: ________________.

✓ I like working with colleagues who are: ________________.

✓ A “good fit for us” means someone who will ________________.
Vocabulary #1 ACCESS

- **Access**
  - Santiago – staying home
  - Grad student – attendance policy
  - MT

- What do you need to “access” your job or to do your best work?
- Where might some barriers exist in your work area? In other words, might your colleagues have any difficulty with access?
Vocabulary #2 NORMAL

- What do normal people do?
- That’s just not normal!

Normal is an overarching, culturally ingrained, ubiquitous concept within which we all live. When we introduce the word disability or diversity of difference....no matter how respectful and well intentioned, they represent a comparison – from something called “normal”.
“Teach children to be ‘extra’ nice: open the door, run to press the elevator button, ask if they need any help crossing the street...”

“Everyone can hear me, right?”
What is ableism?

Please discuss at your table and write your definition on the whiteboard.
Ableism is a form of discrimination or prejudice. Ableism can take the form of ideas and assumptions, stereotypes, attitudes and practices, physical barriers in the environment, or larger scale oppression. It is oftentimes unintentional and most people are completely unaware of the impact of their words or actions.

(Urban dictionary)
What do access, normality & ableism have to do with invisible disabilities?
Disability in Everyday Vernacular

1. **Reflecting on language**

2. Table talk:
   What do you notice from your experience?

   Noticing, naming .....and deciding.

   “*Opportunities for dialog begin when we define invisible disability*”
"The paradox of education is precisely this - that as one begins to become conscious, one begins to examine the society in which he is being educated."

James Baldwin
Disability vs. Impairment

• **Impairment**: An injury, illness, or congenital condition that causes or is likely to cause a loss or difference of physiological or psychological function.

• **Disability**: The restrictions caused by the organization of society, which does not take into account individuals with physiological or psychological impairments.
Medical Model of Disability

The “scientific expert” (psychologist, physician) performs an “examination” (psycho-educational assessment) in order to confirm or rule out a “diagnosis” (disability).

Once a “diagnosis” (disability) is identified, a “prescription” (medication, therapeutic interventions) is written with recommendations for “treatment” intended to “cure” the “patient”.
“Otherness” of people who are fundamentally “different”,

Educational or workplace needs, described in scientific and psychological terms, sound alien to others leading them to believe that they do not possess the knowledge to accommodate such seemingly complex issues.

Getting employed at Cornell in the first place: Higher dropout rates, limited employment, poverty, school-to-prison pipeline, fewer college opportunities.
Social Model of Disability

- Disability as variation.
- Disability is dependent upon context.
- Disability is not a tragedy, but a result of interaction with a disabling environment.
- Systems (schooling, health care, employment) marginalize individuals with disabilities.
Returning to our post-its

• Given what we’ve talked about, so far, would you add to or change your post its?

• Or would you say what my students say
What are some ways to think about an invisible disability?

• Can look like
  1. need for ritual and routine, spontaneous changes are difficult and/or stressful.
  2. Absences, unanswered emails, unreturned phone calls, avoidance.
  3. Overdoing things, very energetic over confident.

• Possible Impairment
  Anxiety, Autism spectrum, OCD.
  Anxiety, depression, chronic pain.
  Hypomanic phase of bipolar 2
What are some ways to think about an invisible disability?

• Can look like

  5. Leaving meetings early, “slacking”,

  6. Declining social invitations, not stopping to chat, seemingly abrupt or unfriendly.

• Possible Impairment
  Learning disability.

  PTSD.

  Chronic pain, fatigue.
What are some ways to think about an invisible disability?

• Can look like
7. Forgetting details, not following through.
8. Sitting near the door during a workshop or meeting, leaving and returning.
9. Texting or scrolling phone during meetings.

• Possible Impairment
Learning disability, hard of hearing.
Chronic illness, i.e. Crohns, MS.

Haven’t figured this out yet, still judging people.
Impairments or Disabilities?

• As colleagues, we cannot change the impairment but we can change the impact of the disability.

• Your table has been assigned one impairment or “invisible disability” that any of us may experience.

• Please discuss and add any knowledge you bring to this area.

• Keeping in mind the definition of disability, how can we reduce the impact of disability on individuals with this impairment?
Pass the Paper...

• Fill in a few ideas on your sheet and when the timer goes off, pass the paper to the next table.
• Now take a look at your new paper and what ideas have been generated.
• Discuss and add any additional ideas.
• Pass one more time, then we’ll post to look at over lunch.
Closing

• What are some reasons to share and not to share our disability status at work?

• Do you think the benefits outweigh the risks?
THANK YOU
Stretch Break!

Please be back at your table in 10 minutes, because we have a lot more to share with you!
Medical Leaves Administration

FINDING EFFECTIVE ACCOMMODATIONS
“An employee just told me about a disability.”

What now?
“An employee just told me about a disability.”

1. Listen to the employee’s perspective

What are they telling you?
“An employee just told me about a disability.”

2. Focus on the work, not the medical condition
“An employee just told me about a disability.”

When is this an accommodation request?
“An employee just told me about a disability.”

This is an accommodation request if:

1. Health condition will last longer than a few weeks

AND
“An employee just told me about a disability.”

This is an accommodation request if:

1. Health condition will last longer than a few weeks

AND

2. It is impacting their job
Accommodation Requests

Disability disclosure is when an employee tells you they have a health condition that impacts their job.
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Do not deny any request related to medical issues without consulting with MLA.
Accommodation Requests

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1. Saying “yes” to a simple request is fine.
Accommodation Requests

Do not deny any requests related to medical issues without consulting with MLA.

1. Saying “yes” to a simple request is fine.
2. Before saying “no” to anything connected to a medical or disability issue, involve MLA.
Accommodation Requests

Do not deny any request related to medical issues without consulting with MLA.

Why?

Have you considered all the MLA implications?
Accommodation Requests

Have you considered all the MLA implications?

Is paid leave a reasonable accommodation?
If no paid leave exists/remains, is unpaid leave a reasonable accommodation?
Can we require updated medical information at this time?
   If so – who has to pay for it?
Have any “leave clocks” expired?
   If so – when do they reset?
   Are there staggered resets?
What are NOT accommodations?

Providing travel to/from work
What are NOT accommodations?

Providing personal care equipment or items

(wheelchairs, hearing aids, etc.)
What are NOT accommodations?

Creating new job roles or new job vacancies.
What are NOT accommodations?

Eliminating essential functions
What are NOT accommodations?

Compromising codes of conduct
What are NOT accommodations?

Reducing productivity standards
What ARE typical accommodations?

Making existing facilities accessible
Modifying or purchasing equipment, tools, and workstations
Assistive technologies
Part time or modified work schedules
Eliminating non-essential functions
What is the accommodation of last resort?
What is the accommodation of last resort?

Reassignment to a vacant position
What is the accommodation of last resort?

Reassignment MUST be provided if, due to a covered medical condition, the employee can’t perform the essential functions of their current position, with or without reasonable accommodations.
What is the accommodation of last resort?

Employee must meet minimum qualifications

BUT

does not need to be best qualified in order to be reassigned.
Performance Management Tips
brought to you by:

Cornell’s Just-in-Time Toolkit for Managers!

http://disabilitytoolkit.edi.cornell.edu/

Tips, checklists, and resources to help managers lead a disability inclusive workforce.

This site is designed by the K. Lisa Yang and Hock E. Tan Institute on Employment and Disability at Cornell University in collaboration with Cornell University.
Performance Management Tips

You know your employee is struggling:

Keep an open mind – the performance issue may or may not be related to a disability.
You know your employee is struggling:

Performance issues should always be addressed, whether or not the manager suspects it is related to a disability.
Performance Management Tips

Performance Coaching is needed, just like any other situation.

1. Discuss events that illustrate the performance issue.
Performance Management Tips

Performance Coaching is needed, just like any other situation.

2. Do not discuss your own beliefs about a possible disability.
Performance Coaching is needed, just like any other situation.

3. Be clear about performance expectations.
Performance Coaching is needed, just like any other situation.

4. Discuss the impact of the problem on team or business goals.
Let the employee tell you about the cause of the problem.

Ask the employee about anything they can tell you to help you understand the issue and provide support.

Sit back and listen!
Performance Management Tips

If you hear about a disability or medical issue, you have entered into a different conversation.

This is now an accommodation request, even if the employee doesn’t explicitly say so.

Contact MLA and begin the accommodation process.
Reasonable accommodations are prospective.  
* Employers are not required to excuse past misconduct.

However, any performance review should still be put on hold pending the accommodation review and outcome.
Performance Management Tips

If the employee **does not** tell you about a disability, continue with performance coaching.
Performance Management Tips

Employees with disabilities perform as well as any other employee.

Don’t automatically assume that disability is a performance problem.
POP QUIZ TIME!

Does an employer have to change a person’s supervisor as a reasonable accommodation?
NO

Not required to change supervisors

Need to consider whether supervisory methods should be altered
POP QUIZ TIME!

May an employer force an employee to accept a reasonable accommodation?
However, if the employee needs a reasonable accommodation to perform an essential function or eliminate a direct threat, and refuses to accept an accommodation, they may not be qualified to remain in the job.
PO P QUIZ TIME!

May an employer tell other coworkers that an individual is receiving a reasonable accommodation?
“We have a policy of assisting any employee who encounters difficulties in the workplace. We also respect our employees privacy”

The employee may choose to disclose
POP QUIZ TIME!

May an employer require an employee to take their medication as prescribed?
Monitoring treatment and/or medications does not involve modifying workplace barriers
Next Speaker:

Reginald H. White, MBA

Sr. Director, HR Strategy at Cornell University. Most of his career has been focused on helping individuals and organizations set and achieve their goals. He has specialized in Leadership Development and Diversity and Inclusion. His current focus is on how to create a culture and structure that supports university goals and allows individuals to thrive.
Growth Mindset

Generosity of Spirit
Lunchtime Guided Conversation:

- What did you learn this morning?
- What can you do differently?
Thank you....and next steps!

Thank you for taking the time to be here today!

Thank you to the marvelous members of the HR Diversity Council Disability Inclusion Subcommittee: Aubrey Lang, Mark Schmitz, Dane Cruz, Linda Croll Howell, and Amy Layton

Thank you to Cornell Woodson and Sue Brightly for the communications campaign, and to Sherron Brown for setting up the registration in CU Learn

Next Steps:

Be on the lookout for follow-up conversations about this topic
Share ideas for conversations on the index cards on your table
Join us on the HR Diversity Council and/or any of its subcommittees