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# The Great Recession and Serving Dislocated Workers with Disabilities: Perspectives from One-Stop Career Centers and Rapid Response Coordinators

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## Introduction

According to the U.S. Bureau of Labor Statistics (BLS), between 2007 and 2009 (the period now known as the Great Recession), nearly seven million workers who had worked for the same employer for at least three years lost their jobs, almost twice as many workers who were displaced between 2005 and 2007. Not only had the number of displaced workers grown significantly during this period, these workers also experienced greater difficulty returning to work. By January 2010, only half the workers who had been displaced in the three previous years had become reemployed, compared with two-thirds in January 2008 (BLS, 2010a). Today, with 14.5 million Americans currently unemployed, many job seekers continue to face formidable hurdles in reconnecting to the labor market (BLS, 2011).

While the recession has been widespread, affecting a wide variety of individuals, one group has been hit particularly hard — people with disabilities. Kaye (2010) found that from 2007 until 2009, the number of people with disabilities as a percentage of all employed workers had declined by 9%. For workers with disabilities who have lost their jobs, unemployment presents a special challenge because they often have greater difficulty reconnecting to the labor market. Fogg, Harrington, and McMahan (2010) found that between June 2008 and September 2009, nearly one-third of people with disabilities were unemployed for at least six months — known as long-term unemployed — compared to a quarter of people without disabilities.

In an effort to shrink the amount of time that workers spend unemployed, the federal Workforce Investment Act requires states to provide “Rapid Response” activities to help workers affected by a layoff or plant closing get quickly connected — even before leaving their jobs — to the public workforce (One-Stop Career Center) system and to services such as Unemployment Insurance, career counseling, job search, and training.<sup>1</sup> Workers downsized from companies where they have worked for many years are at greater risk of joining the ranks of the long-term unemployed. As envisioned by the Workforce Investment Act, one of the primary rationales for dedicated Rapid Response activities is that early intervention may reduce the likelihood of individuals becoming long-term unemployed. Because Rapid Response officials have the most experience working with people at great risk of long-term unemployment, these individuals often have knowledge of practices that are considered most effective at curtailing long-term unemployment of dislocated workers that may be applied to reducing long-term unemployment among workers with disabilities.

Shortening the duration of unemployment is critical for many reasons. Researchers from the John J. Heldrich Center for Workforce Development at Rutgers University examined the effects of the recession on unemployed workers in detail through several national random sample surveys of unemployed workers. In August 2009, the Heldrich Center interviewed a national random sample of 1,202 people who reported that they had lost a job at some point during the 12 months between September 2008 and August 2009. In March 2010, 908 of these respondents were interviewed again, and 764 respondents were interviewed once more in November 2010. Of those re-interviewed in November, only a quarter (26%) had found full-time employment, and 8% were working part time and not looking for full-time work. Eleven percent were working part time and continuing to look for full-time work. Forty-three percent were still unemployed and looking for work, and 13% were still unemployed but had stopped looking for work. The financial consequences of job loss have been dire. Of the reemployed workers, roughly half (48%) were forced to take a pay cut, with nearly 60% earning at least 20% less than they had been earning previously. Sixty-one percent of those re-interviewed said they believe they will never get back to their prior economic station in life. Eighty-one percent rated their personal financial situation as either only fair or poor. A majority (57%) said their family's financial situation was worse than two years ago, and 58% said they have a lot less in savings and income than at the start of the recession (Godofsky, Van Horn, & Zukin, 2010). In addition to the heavy toll unemployment has exacted on these individuals economically, it is not surprising to learn that they reported high levels of stress, depression, and anxiety. Fully half of the unemployed respondents reported avoiding social contact with family, friends, and acquaintances; 43% reported being "quick to anger"; and 13% reported substance dependency (Borie-Holtz, Van Horn, & Zukin, 2010).

Recognizing the scope of the problem of long-term unemployment and the consequences it exerts, NTAR Leadership Center researchers sought to gain a better understanding of the extent to which people with disabilities who had lost their jobs were seeking services from the public workforce system, and to identify strategies, if any, being used at the state and local levels to help these workers reconnect with the labor market. To inform this broad research objective, the NTAR Leadership Center sought to answer the following research questions:

1. How has the population of unemployed workers served by One-Stop Career Centers changed during the recession? Has it included people with disabilities?
2. To what extent are vocational rehabilitation counselors and others knowledgeable about people with disabilities involved in reemployment/Rapid Response efforts?
3. What targeted strategies, if any, have state and local governments used to provide reemployment services to dislocated workers with self-reported disabilities?
4. Have these efforts included strategies to increase the self-disclosure rate of people with disabilities?

In the pages that follow, the first section describes the methodology that NTAR Leadership Center researchers used to study these research questions. The second section reviews the empirical literature on strategies that have been tried to return dislocated workers to work. The third section discusses the findings obtained from interviews with state and local workforce professionals. The final section offers the researchers' conclusions.

## Study Methodology

In order to answer the research questions above, the NTAR Leadership Center conducted structured telephone interviews with or received written responses from 19 local One-Stop Career Center officials, most notably Disability Program Navigators (DPNs), and state Rapid Response Coordinators from 16 states to collect information on:

1. The population of dislocated workers with disabilities being seen by the One-Stop system, and whether it appears to have changed during the recession;
2. How the workforce system is working to identify job seekers with disabilities seeking reemployment services; and
3. How the public workforce system is providing reemployment services to job seekers with disabilities.

In conducting these interviews, NTAR Leadership Center interviewers sought to learn more about practices being implemented to help job seekers with disabilities return to work.

NTAR Leadership Center researchers identified One-Stop Career Center officials (DPNs) and Rapid Response officials from states that reflected the diversity of all the states in the nation. The 16 states represent a wide range of diversity on the following three key variables:

1. Unemployment rate,
2. Employment rate of people with disabilities, and
3. Region.

The researchers also interviewed officials from states that were recommended by national Rapid Response and disability employment experts as having reputations for strong Rapid Response and disability employment initiatives.

To learn about the services that general job seekers with disabilities received and the services that dislocated job seekers with disabilities received from One-Stops, NTAR Leadership Center researchers interviewed a mix of DPNs and Rapid Response Coordinators.

Table 1 shows the cross-state variation in the key variables as well as the types of frontline workforce system workers who were interviewed in each state.

Table 1. Variation in Key Attributes of Respondent States

State	Unemployment Rate (August 2009)	Employment Rate of People with Disabilities (2009)	Geography	DPN	Rapid Response Coordinator
Alabama	9.2%	29%	South	x	
Alaska	7.7%	48%	West		x
California	12.4%	34%	West		x
Florida	11.7%	32%	South	x	
Georgia	10.0%	33%	South	x	x
Iowa	6.8%	47%	Midwest	x	
Maine	8.0%	37%	Northeast		x
Maryland	7.3%	42%	Mid-Atlantic	x	
Michigan	13.1%	30%	Midwest	x	
Minnesota	7.0%	45%	Midwest		x
New Jersey	9.6%	39%	Mid-Atlantic	x	
Ohio	10.1%	34%	Midwest	x	
Pennsylvania	9.2%	35%	Mid-Atlantic		x
Texas	8.3%	39%	Southwest	x	
Vermont	6.0%	40%	Northeast	x	
Wisconsin	7.9%	41%	Midwest	x	

Sources: Bureau of Labor Statistics, Current Employment Statistics; U.S. Census, American Community Survey

The method of data collection that the researchers used was a structured telephone interview with DPNs and Rapid Response Coordinators at One-Stop Career Centers. Because these individuals are on the front lines of either providing services to people with disabilities or to supporting the staff who directly serve them, they are uniquely positioned to provide information on the characteristics of the population of workers with disabilities who are being served in their states as well as on the strategies that are being used to connect these individuals with the job market. During August and September 2010, researchers from the NTAR Leadership Center conducted structured telephone interviews with 16 DPNs to collect information on dislocated workers and long-term unemployed job seekers during the recession.

In addition to the telephone interviews, the NTAR Leadership Center also received written responses from six Rapid Response Coordinators regarding Rapid Response services provided to dislocated workers, and whether the coordinators perceived an increase in the number of dislocated workers with disabilities. Evidence on the actual changes in the composition of disabled, dislocated workers was not available.

## Selected Research on Strategies to Assist Dislocated Workers and the Long-Term Unemployed with Disabilities

For this project, the NTAR Leadership Center conducted an extensive review of studies on the effectiveness of policies aimed at helping displaced workers return to work, in an effort to identify practices that are regarded as helpful in assisting dislocated workers. These approaches might in turn be used to develop specific strategies to help unemployed workers with disabilities obtain employment. The primary finding from the literature review is that although researchers have conducted a number of studies, very little research has focused specifically on strategies for helping dislocated workers with disabilities return to work. This section summarizes the findings from the existing literature, with an eye toward identifying practices that might be used to help people with disabilities reconnect with the job market.

In general, larger-scale quantitative studies have sought to examine the effectiveness of traditional strategies for assisting displaced workers (e.g., occupational training, job search). Several smaller, qualitative studies have sought to uncover practices that might help dislocated workers return to work. Whereas the former group typically presents stronger evidence about the effectiveness of traditional strategies, the latter describes more innovative, but untested, practices for assisting dislocated workers.

Many studies have yielded mixed results on the effectiveness of various practices. Two of the earliest studies examined the effect of job placement assistance in Texas (Bloom, 1990) and New Jersey (Corson & Haimson, 1996). These studies used an experimental design to test the effect of one treatment that involved job search assistance to all participants as well as another treatment that combined job search assistance with the offer of classroom training or on-the-job training. Both demonstrations found that job search-only subjects were reemployed sooner and earned more, but follow-up studies found the impacts were short-lived, and that the job search and training group caught up with the job search-only group. The alternative treatment including the opportunity for training did not substantially improve outcomes over job search-only treatments, though it was relatively more expensive (LaLonde, 1995; Kodrzycki, 1997).

A follow-up analysis of the New Jersey demonstration, however, found that trainees who participated in classroom-based occupational skills training had relatively low earnings initially, but had relatively high earnings in later periods, compared to base period earnings and similar claimants not offered training (Corson & Haimson, 1996). Gains for claimants who participated in on-the-job training were “substantially” higher during the six-year follow-up period (Corson & Haimson, 1996).

Jacobson, LaLonde, and Sullivan (2005) examined the effects of community college training on the earnings of a sample of older displaced workers in Washington State. The study generated estimates that one academic year of community college retraining raised earnings of men age 35 or older by 7%, and those of women age 35 or older by 10%; the authors also found larger effects when subjects concentrated community college training on quantitative courses. Jacobson, LaLonde, and Sullivan (2005) noted that subjects who took quantitative courses, and had higher returns, had earnings histories that indicated they were more productive before any training.

Looking at a more finely grained tactical level, the North Carolina Rural Economic Development Center and the Corporation for Enterprise Development (Schweke & Lambe, 2006) studied 16 programs that have had success in assisting displaced workers. Some key features that the study found to be related to success included: creating first-source hiring agreements where business incentives from state and local projects are tied to considering

referrals from employment centers; providing fast, intensive training for jobs with openings; providing long-term job training based on employer needs and growing fields; and linking training with business and management advice for entrepreneurs.

Whereas most studies of dislocated workers did not address dislocated workers with disabilities, Berkley Policy Associates (2001) evaluated 15 programs designed to provide innovative employment and training services to people with severe disabilities and to displaced workers with disabilities, with an emphasis on the quality of employment outcomes. The study found the following practices to be the most effective: making systematic and ongoing efforts to understand local market conditions, tailoring programs to individual participant skills and needs, allowing participants to pace themselves, collaborating with formal and informal partners in the workforce development system, and creating business advisory councils with the employer community (Berkley Policy Associates, 2001).

## Study Findings

Based on interviews conducted and questionnaires received, NTAR Leadership Center researchers developed several important findings.

### Has the population of unemployed workers being served by One-Stop Career Centers changed during the recession? Has it included people with disabilities?

#### *Finding #1. Disability Program Navigators Report that One-Stop Staff are Serving Greater Numbers of Older Workers and Older Workers with Disabilities*

Respondents from a number of states, including Alabama, Georgia, Michigan, Ohio, Texas, and Vermont, reported seeing a greater number of older workers with disabilities than they did previously. Among those, most said many of these workers were disabled as a result of the kind of work — often characterized as physical and “hard labor jobs” — they did for most, if not all, of their professional lives. While the share of older workers who say they have a physically demanding job has declined overall in recent years (Johnson, 2004), a recent study by the Center for Economic and Policy Research concluded that one in three workers over the age of 58 has a job that is physically demanding (Rho, 2010). Doing demanding work for decades has taken a physical toll on many people’s bodies, making them unable to do the kind of work they once did and complicating their reemployment.

According to several respondents, including staff from New Jersey and Texas, people are working far longer than in the past. One respondent from Texas said he recently had an 83-year-old man come into his office looking for another job. Many of these older workers are being forced back into the workforce after losing not only their job but also a significant amount of their retirement savings (Heidkamp & Van Horn, 2008; Abraham & Houseman, 2008). Many respondents, including one from Ohio, noted that older dislocated workers are having a more difficult time finding a job than younger job seekers and are usually unemployed far longer, if they find a job at all. This is consistent with findings from several recent national research reports (Johnson & Mommaerts, 2011; Heidkamp, Corre, & Van Horn, 2010). And, some respondents also noted that helping older workers is more time consuming than helping younger job seekers because they require additional guidance to determine what their next career move should be and usually need additional training. Many also have low levels of education and have difficulty reading and doing activities that involve math.

Several respondents noted that older job seekers are suffering from more chronic health conditions than younger workers, such as cardiac or respiratory disease, arthritis, and diabetes. Chronic health issues prevent the individuals from returning to work. Among the age-related disabilities, one respondent said he has seen an increase in the number of job seekers who are deaf or hard of hearing.

*Finding #2. Disability Program Navigators Report that One-Stop Staff are Serving Greater Numbers of People with Hidden Disabilities, Many of Whom are Reluctant to Disclose their Disability*

A common feeling among a number of the respondents was that many of the people who had lost their jobs after working for a long time in the same field and, in some cases, even for the same company, have hidden disabilities that they had either never disclosed or did not know that they had. Several respondents reported an increase in the number of job seekers with poor reading, math, and computer skills. Many of these people began working in construction or at a mill because they did not do well in school or may not have finished high school. Respondents said that, in certain cases, they believed some of these job seekers might have an undiagnosed learning disability. "It is amazing how many construction workers I have come in here who can't read or write," said one Florida official. Yet, now that jobs in those industries are scarce, these job seekers face a particularly tough time.

A Rapid Response Coordinator in Pennsylvania mentioned that among dislocated worker clients, many members of the Baby Boom generation, who essentially had "inherited" their factory jobs, could do what was expected of them. However, many jobs in this "technologic age" require higher-level skills. Thus, workforce staff are encountering more people with learning disabilities and literacy issues that affect this population's chances for reemployment.

Many of the respondents mentioned that job seekers are often reluctant to disclose that they have a disability because they are embarrassed about their disability. In other cases, the person might not realize that the reason he/she did not do well in school and has had difficulty learning a new skill is because they have a learning disability. As one respondent from Maine explained, "A lot of these people were working for a long, long time. They didn't see themselves as disabled until it came time to thinking about a new career field." Often, these people, many of whom have worked in the same field for decades, are apprehensive about applying for a job that requires them to use a computer. Perception of oneself and one's abilities was specifically mentioned several times. One respondent, a DPN, said, "I have a nephew who clearly has a disability but when you ask him whether he is disabled, he says 'no' because he works every day. He has been with his company for 20 years, and doesn't consider himself disabled."

*Finding #3. One-Stop Staff are Seeing Greater Numbers of People with Mental and Behavioral Health Problems*

Many of the respondents, including ones from Alabama, Florida, Maine, New Jersey, Texas, and Wisconsin, reported seeing a greater number of customers with mental health issues, including drug addiction and the abuse of prescription drugs, such as pain, anti-depression, and anti-anxiety medications. Many said they believe that some of these people developed mental health problems as a result of being unemployed and the difficulty and stress of the job search process. Respondents also reported seeing more customers with alcoholism, depression, anxiety, and child and domestic abuse issues. One respondent from Vermont said he is seeing an increase in the number of job seekers who are homeless. Perhaps exacerbating the situation, one respondent from Florida noted that the recession caused the closure of several of the mental health facilities and social service organizations where they traditionally referred customers.

Table 2. Incidence of Cognitive Difficulties in Respondent States, 2008-2009

State	Number of People with Cognitive Difficulty, 2009	Number of People with Cognitive Difficulty, 2008	Change
Alabama	174,356	172,024	2,332
Alaska	18,170	18,329	-159
California	786,987	788,021	-1,034
Florida	437,306	421,629	15,677
Georgia	240,153	227,752	12,401
Iowa	68,661	70,678	-2,017
Maine	50,815	50,814	1
Maryland	114,065	118,341	-4,276
Michigan	320,770	301,741	19,029
Minnesota	125,052	115,128	9,924
New Jersey	171,948	153,182	18,766
Ohio	368,694	333,500	35,194
Pennsylvania	359,769	341,022	18,747
Texas	577,569	569,471	8,098
Vermont	21,701	21,599	102
Wisconsin	125,901	127,423	-1,522

Source: American Community Survey, Detailed Tables, 2008 and 2009

The reported increase in the number of people with mental health issues is consistent with data on the growing number of people with “cognitive difficulties” reported to the U.S. Census through the American Community Survey.<sup>2</sup> Table 2 shows the comparison of the number of people with cognitive difficulties in 2008 and 2009.

## How are the respondent states serving people with disabilities?

### *Finding #4. Rapid Response Staff Typically Seek to Identify Workers with Disabilities at Downsizing Firms*

Effective Rapid Response services generally include proactive strategies to generate information about impending layoffs to allow the maximum amount of time for providing early intervention, pre-layoff transition assistance to workers facing job loss. Once Rapid Response staff are aware of an upcoming layoff, they may explore whether there are opportunities for layoff aversion. If the layoff cannot be averted, Rapid Response activities often begin with staff seeking as much information as possible about the affected workforce from the employer and employee representatives. This information typically includes the demographic make-up, education levels, and occupations of the workers, and it is at this junction that Rapid Response staff might first learn whether there are workers with disabilities among those targeted for layoff. For example, Rapid Response staff may ask the employer whether there are workers with ADA (Americans with Disabilities Act) or other special needs among those facing layoff. Early in the process, the Rapid Response team typically arranges an

orientation for the dislocated workers. At this point, Rapid Response staff may collect more detailed information directly from the affected individuals. For example, a survey used in Minnesota includes questions about education and skill levels, special needs, language and limited English proficiency, family issues, chemical dependency, mental health conditions, and physical limitations. This information helps the Rapid Response staff begin to tailor services designed to meet the needs of the individual workers.

States are using a variety of methods by which they provide dislocated workers with information about services from the One-Stop and vocational rehabilitation agencies for workers with disabilities, as well as information about other community services that provide advocacy or support to dislocated workers. The most common method used by the states interviewed for this project is to include information on workforce system and other services for people with disabilities in Rapid Response team presentations to employees who are about to be downsized.

Rapid Response staff who responded to the NTAR Leadership Center's questions generally ask the employer if there are people with disabilities among the employees facing layoff. If so, the Rapid Response team may include presenters from vocational rehabilitation and/or DPNs, where they exist, at employee orientation meetings. For example, in Alaska, the Rapid Response Coordinator noted that each Rapid Response is tailored to individual needs. In preparation for orientation and other meetings, Rapid Response staff gather details regarding employee needs, such as whether there are workers with disabilities, from the employer and then respond to that information. This may include highlighting the assistive technology resources available at the Alaska Job Centers, for example, as well as providing information about vocational rehabilitation services. In one local area in California, the business liaison, who has responsibility for Rapid Response, said she provides the dislocated workers with a general overview of services that are available, highlighting that they have a DPN on staff. In Minnesota, the director of Dislocated Worker Programs and Trade Adjustment Assistance, who oversees the state's Rapid Response Coordinators, said that vocational rehabilitation services are mentioned during Rapid Response meetings, although they generally do not include vocational rehabilitation presenters at the meetings. He added that every certified provider of dislocated worker services in the state must be able to serve or appropriately refer potentially eligible vocational rehabilitation recipients. He also added that vocational rehabilitation and dislocated worker staff are both partners at Minnesota's WorkForce Centers (the state's One-Stop Centers) statewide, making it easier to ensure customers who fit both sets of eligibility criteria will get what they need.

Some state Rapid Response Coordinators ask employers that are about to have a layoff whether they have any employees with other potential challenges to employment as well as disabilities. In Maine, for example, the Rapid Response Coordinator noted that employers are asked if the workers have language assistance needs or low reading skills as part of determining whether there are workers with disabilities, in which case they set up special assistance and take advantage of assistive technology as needed to address these issues. In some cases, Maine establishes Community Transition Teams as part of the layoff response. These teams can complement the services available from the state and may include representatives from the Departments of Labor, Economic and Community Development, and Health and Human Services; community action programs; adult education providers; local Workforce Investment Boards; town and city officials; local business officials; labor organizations; chambers of commerce; food pantries; faith-based entities; and others. The teams may prepare information on social services available in the region, as well as organize educational workshops on topics such as access to low-cost or no-cost health and mental health care.

Another way that state Rapid Response teams are attempting to reach out to workers with disabilities is by including information on services in the informational packets that they distribute to employees at the initial Rapid Response meeting. In some cases, including in Alameda County, California, the Rapid Response staff said the information packets they share at orientation meetings always include information about services available to job seekers with disabilities through the Workforce Investment Board and One-Stop Career Center partners, including vocational rehabilitation. Respondents in this area also pointed out that these partner agencies are invited as members of the Rapid Response team when companies identify a need for their services, and that some of the One-Stops have Memoranda of Understanding with agencies to provide services to dislocated workers with disabilities. In Pennsylvania, a Rapid Response Coordinator said that he/she both includes information about the Office of Vocational Rehabilitation in the information packets distributed to dislocated workers and also include the Office of Vocational Rehabilitation as part of the teams that are invited to each orientation session.

*Finding #5. Disability Program Navigators and Vocational Rehabilitation Staff Occasionally Participate in Rapid Response Activities*

Among the states studied, DPNs are generally not routine members of state or local Rapid Response teams but often participate in Rapid Response activities. In several states, including Iowa, Pennsylvania, Texas, and Wisconsin, vocational rehabilitation staff are typically members of the Rapid Response teams, but in most cases it appears they are not.

DPNs from a number of the states studied (including Alabama, Iowa, Maine, Maryland, Texas, Vermont, and Wisconsin) indicated that they had participated in Rapid Response events. Most DPNs interviewed said that they usually became involved after a specific need had been identified, and not as a routine matter. In several smaller states, such as Maine and Vermont, respondents said the Rapid Response process tends to be less formal in general, with teams being put together based on each event. In some cases, the DPNs may play a more general customer service role rather than being directly responsible for assisting customers with a disability. For example, several respondents, including one from Maryland, noted that they are often asked to participate in Rapid Response events not because of their job as a DPN but because they have done various jobs at the One-Stop and therefore understand the wide array of programs and services available to job seekers. In these instances, the DPNs generally do not provide information about disability-related services unless individuals self-disclose their disability.

In contrast to smaller layoffs with informal processes, the Rapid Response program in Georgia often establishes transition centers to deal with layoffs of 100 or more employees from a single company. DPNs and other local career center staff are brought in to help operate these “mini Departments of Labor,” providing services to all customers, not just individuals with disabilities. Also in Georgia, respondents noted that vocational rehabilitation staff sometimes participate in “Lunch and Learn” workshops in which dislocated workers and other job seekers attend sessions featuring speakers who specialize in employment-related topics such as career counseling and various training opportunities.

*Finding #6. States have Adopted a Variety of Strategies to Determine whether their Customers have a Disability*

Several respondents said their states are working to encourage more job seekers to disclose their disabilities so that they can better serve them. Most respondents said job seekers are more likely to discuss their disability if they know that by doing so, they may be eligible for additional services and a range of job accommodations.

Respondents in the states studied described the following strategies they have used to learn whether their clients have a disability:

*Prominent Display of Information about DPNs.* To ensure that people know about the services available to job seekers with a disability, several respondents, including ones from Alabama and Maine, said information advertising the services of the DPN is prominently displayed in their local offices.

*Targeted Outreach to People with Disabilities at Job Fairs.* In Maine, the DPNs have partnered with the state's Medicaid Infrastructure Grant to do targeted outreach to job seekers with a disability at job fairs.

*Directly Asking Job Seekers whether they have a Disability.* In Iowa, One-Stop staff, who had traditionally been discouraged from asking job seekers if they had a disability, are now encouraged to do so. The two questions they ask of all clients during enrollment in IowaWORKs programs are: 1) Do you have a disability that is a barrier to employment?, and 2) Are you currently receiving Social Security Disability Benefits? As a result, the disclosure rate in the state's integrated centers has increased from 2% to 11%. This has been accomplished as a result of the Iowa Workforce Innovation Plan, a law that has helped change the way job seekers both with and without disabilities are treated by requiring One-Stops to better integrate all services. Under the new system, there is a common, integrated One-Stop customer pool, with job seekers being referred for career development, career advancement, or employment services. The goal is to serve all customers who come in the door, co-enrolling them in as many programs as possible, and not simply refer them to another program.

*Rewriting Intake Forms to Encourage Disclosure.* In Maryland, officials changed the state workforce intake form to encourage disclosure. Now, instead of simply asking a question such as "do you have a disability?", the form informs people that if they have a disability, they will be entitled to additional services. The change has helped increase the state's disclosure rate.

Despite these efforts, respondents from several states (Florida, Ohio, Vermont, and Wisconsin) noted that privacy concerns were especially prevalent among job seekers with disabilities who live in small towns, and among older job seekers. One respondent noted that for some job seekers, having a disability is irrelevant to them; their only interest is in finding a job.

## Observations and Conclusions

### *Observation #1. Disability Resource Experts Can Help One-Stop Staff Serve Dislocated Workers with Disabilities*

Serving all dislocated workers requires the coordination of a range of services, including Rapid Response, Unemployment Insurance, Wagner-Peyser employment services, training, adult education, and others. Serving dislocated workers with disabilities, which is likely to be a growing cohort especially in light of the aging of the workforce, often requires additional levels of coordination, both with other One-Stop partners such as vocational rehabilitation, as well as with other community resources. Based on the interviews for this report, the DPNs (some of whom have since become state Disability Resource Coordinators for the One-Stops under the recently launched U.S. Department of Labor's Disability Employment Initiative) seem to be playing useful roles in providing guidance to those state and local One-Stop staff serving dislocated workers with disabilities. In some cases, these navigators make resources available to frontline staff that should contribute to the staff's

ability to better serve those job seekers with disabilities, including those with hidden or undiagnosed disabilities. The presence of these individuals, especially when advertised to customers, may also encourage more dislocated workers to voluntarily disclose disabilities.

Rapid Response, sometimes referred to as the “gateway to the One-Stop system” for dislocated workers, can also play an important role in identifying whether there are dislocated workers with disabilities affected by a given layoff, and if so, in arranging for appropriate services to be provided. Based on this research, however, is it unclear how much information Rapid Response Coordinators have about serving dislocated workers with disabilities. DPNs or other designated disability resource experts could play an important role in training Rapid Response staff in strategies to better serve dislocated workers with disabilities. Such training may help more dislocated workers with disabilities to benefit as much as possible from early intervention strategies by allowing them access to the full range of return-to-work services from the outset.

All and all, it would be advantageous for the federal labor department to consider 1) recommending to state workforce agencies that state and local Rapid Response staff be knowledgeable about resources available to job seekers with disabilities; 2) that Rapid Response teams should routinely include an individual who is knowledgeable about disability resources; and 3) that Rapid Response coordinators should routinely include information about resources available to job seekers with disabilities in preliminary discussions with employers expecting a layoff, as well as in orientation materials presented to dislocated workers.

*Observation #2. More Research is Needed on Strategies to Encourage One-Stop Customers to Disclose their Disabilities without Feeling Stigmatized*

One intent of the Workforce Investment Act in establishing One-Stop Career Centers was to streamline services for all customers, including ones with disabilities, by providing access to a wide range of assistance from various partners. Yet reporting of a disability by those who visit a One-Stop is voluntary, making it difficult to determine how many job seekers with disabilities are using the system, as well as whether those who use the system but do not disclose their disabilities are accessing the full range of services they may be entitled to or need. Livermore and Colman (2010) found, for example, that only a small percentage of One-Stop customers were current or former Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) recipients.

Previous research, as well as the interviews conducted for this project, have identified some potentially promising strategies for encouraging disclosure, though there is not yet sufficient evidence to determine the effectiveness of any particular strategy. In their study, Livermore and Colman (2010) speculated that DPNs may have a positive role to play in this regard. They observed that the percentage of SSI/SSDI beneficiaries who were One-Stop users who disclosed their disabilities when they registered for Workforce Investment Act or Wagner-Peyser services increased significantly over the course of the study’s five-year period (program years 2002 to 2007). They suggest that this trend may be a function of the DPN initiative maturing and raising awareness of disability issues among the staff, improving administrative procedures, and creating an environment more supportive to disclosure. The study also noted, however, that it is possible that the One-Stops were serving more individuals with disabilities than the program data accounted for, and that it is possible that part of the gain may be due to previous underreporting of disability status (Livermore & Colman, 2010).

As described earlier in this report, some states, including Iowa and Maryland, have taken concrete steps to encourage disclosure and have reported seeing higher disclosure rates as a result. At the same time, however, One-Stops have an obligation to help job seekers with disabilities connect to current systems regardless of

whether they disclose or not. Most of those interviewed for this study said they believe that knowing services were available for individuals with disabilities increased the likelihood of those individuals disclosing their status. Thus, clearly describing the employment support services to which people with disabilities are entitled may increase the disclosure rate. More research is needed to determine which of the aforementioned strategies, if any, to encourage higher disclosure rates are associated with better outcomes for job seekers with disabilities.

Additional research is also warranted to investigate why people with disabilities who chose to disclose their disability status chose to do so. Interviews with people with disabilities who disclose a non-visible disability could provide valuable insights into the reasons why these individuals chose to disclose. With this knowledge, One-Stops could develop more effective strategies to better serve job seekers with disabilities using existing disability-specific employment resources such as Ticket to Work or the vocational rehabilitation system.

### *Observation #3: The One-Stop System Needs to Build Stronger Connections with the Mental Health/Behavioral Health System*

Losing a job can significantly affect a person's mental health. The Heldrich Center has conducted a number of studies documenting the high levels of stress, anxiety, depression, sleeplessness, anger, substance abuse, and other symptoms of emotional turmoil among dislocated workers and long-term unemployed job seekers (Borie-Holtz, Van Horn, & Zukin, 2010; John J. Heldrich Center for Workforce Development, 2005). Many respondents interviewed for this report thought that the stress of being unemployed and looking for work had either created or added to the mental health problems of dislocated workers and long-term unemployed job seekers.

The most prominent evidence-based practice in the employment of people with mental health issues — supported employment — has as one of its guiding principles the importance of integrating a person's mental health treatment with his or her efforts to return to work. In fact, the supported employment model for persons with mental health problems explicitly calls for the mental health treatment professionals and employment specialists to work together in helping to map out the client's vocational path (Bond et al., 2007).

Recognizing the importance of connecting One-Stops to mental health services, the states interviewed for this report indicated that they had initiated a number of efforts to strengthen the linkages between the workforce and mental health systems. Some gave examples of efforts to connect their One-Stop services to mental and behavioral health systems. Michigan's Rapid Response, for example, includes representatives from local human services agencies in dislocated worker briefings whenever possible. Maryland offers dislocated workers and other job seekers workshops on coping with the stress of unemployment. As part of Rapid Response services and in transition guides distributed to dislocated workers, Maine provides information on the state's 2-1-1 hotline that connects to over 8,000 health and human services. The Maine transition guide (*Transitions: Resource Guide to Restarting Career and Community*, available at <http://www.mainecareercenter.com/docs/transitionsguide.pdf>) begins with information on the emotional side of job loss, which can include feelings of anger, worry, sadness, fear, rejection, and frustration. In many layoff situations involving over 50 employees, Maine also involves peer counselors who are trained to provide connections to a range of workforce and other local service providers, including social service and mental health services, when needed.

Research on assisting Temporary Assistance for Needy Families (TANF) recipients with disabilities to obtain and maintain employment may offer some lessons for the public workforce system in terms of assisting job seekers with mental health issues. One study found that specialized programs for TANF recipients with disabilities differed from traditional employment programs in various ways, including offering more intensive

case management, connections to specialized treatment (including mental health therapy and substance abuse treatment), and an array of post-employment supports (Kauff, 2008).

Stronger collaborations and partnerships between the workforce and mental health systems might improve outcomes for dislocated workers and long-term unemployed job seekers with mental health challenges. More research is recommended, perhaps in the form of a pilot or demonstration project to study whether there are tools that could be offered through One-Stops for assessment, screening, and referral to mental and behavioral health services in an effort to improve employment outcomes for job seekers with mental health issues.

One-Stops can strengthen their relationships with the mental health system in a number of ways. First, One-Stops can refer clients who are consumers of mental health services to Individual Placement and Support (IPS) supported employment programs. Research (e.g., Kukla & Bond, 2009; Bond et al., 2007) has found that the IPS model of supported employment for people with severe and persistent mental illness has achieved better employment outcomes for people with mental health issues than other approaches. Researchers consider IPS to be an evidence-based practice.

One Stop staff should be encouraged to improve their awareness of mental health issues among their clients as well as how to interact with clients who have mental health issues in a way that makes those clients comfortable and makes them want to keep receiving employment services. Training like the one that the Center on Mental Health Services Research and Policy at the University of Illinois at Chicago developed for the Office of Disability Employment Policy is one example that could benefit One-Stop staff (Peterson, Razzano, & Cook, n.d.).

#### *Observation #4: Dislocated Workers with Literacy Deficiencies Face Significant Challenges in Upgrading their Skills*

The Great Recession and its aftermath have revealed serious literacy deficiencies among unemployed workers, and in some cases undiagnosed learning disabilities in many recently dislocated workers. These deficiencies present difficult challenges to One-Stops that are trying to help job seekers “re-skill,” especially where doing so requires math and reading remediation. Several respondents gave examples of job seekers who have difficulty reading and writing, which, even if they have not disclosed a learning or other disability, becomes obvious during the job search process.

Officials from Maine, for example, described a partnership that they developed between the One-Stop and a basic education provider. When a seafood processing plant shut down in the spring of 2010 and the Rapid Response Coordinator recognized that firm had many employees who needed GED assistance and basic skills upgrading, the coordinator reached out to an adult education provider and with funding from the U.S. Department of Labor offered the basic education the employees needed to upgrade their skills before enrolling in occupational training. One-Stop Career Centers could benefit from more dedicated training, technical assistance, and guidance about how to better serve individuals with skill deficiencies such as one developed by the Heldrich Center in 2004 entitled *Helping Job Seekers who have Limited Basic Skills: A Guide for Workforce Development Professionals*. Additional research is recommended on the outcomes for dislocated workers with disabilities of these partnerships between adult education and workforce development.

*Observation #5. Older Workers Make Up a Disproportionate Share of Dislocated Workers; there is a Significant Need for Dedicated Resources to Serve Older Dislocated Workers*

As noted by the Bureau of Labor Statistics (2010b), an increasing number of today's dislocated workers are older individuals who have held their job for many years. As might be expected, the proportion of older workers — those age 55 and over — among dislocated workers is greater than the proportion of older workers in the labor force. Whereas 18.7% of the labor force is age 55 or over, 25% of dislocated workers are age 55 and over (Bureau of Labor Statistics, 2010b; U.S. Census Bureau, 2011).

Moreover, because age is correlated with disability status — as a person ages, he or she becomes more prone to acquiring a disability — it is likely that over time more and more dislocated workers will have disabilities. Yet despite the demographic shifts that have increased the proportion of older workers in the labor force, the public workforce system offers them only limited targeted resources. Older workers have not traditionally been considered a vulnerable group, and few public services have been specifically targeted to meet their needs (O'Leary & Eberts, 2007).

As the only federal employment and training program dedicated exclusively to serving older job seekers, the Senior Community Service Employment Program (SCSEP) serves a limited number of very low-income older adults, providing training and opportunities for subsidized, part-time employment in community service jobs in government and nonprofit settings. It has been estimated that due to resource limitations, SCSEP serves roughly 1% of those eligible for services (Government Accountability Office, 2006). In terms of the public workforce system, there is evidence that federally mandated performance measures for Workforce Investment Act programs contribute to the under-serving of older job seekers, who may have less favorable outcomes than younger workers.

In 2009, the U.S. Department of Labor launched an Aging Worker Initiative to develop new models and expand the public workforce system's capacity to serve older workers. An evaluation of this initiative is under way. At the same time, some states and nonprofit organizations have begun to address the challenge of how to assist older job seekers. Fourteen states have participated in a policy academy under the National Governors Association to encourage the development of state policies and programs to improve opportunities for civic engagement for older adults, and a range of nonprofit and advocacy groups have developed examples of promising practices to serve older job seekers (Heidkamp & Van Horn, 2008). Given that the aging workforce is a certainty, and that it is likely to be increasingly a workforce with more disabilities, there is a need for ensuring that the public workforce system develops the resources and greater capacity to better serve these individuals. Additional research on promising practices for assisting older workers in returning to work is recommended.

## Endnotes

1. State Rapid Response officials are typically direct providers of some reemployment services, and a broker or facilitator for others. The myriad services typically include: working with employers who have announced layoffs to determine whether the layoff can be averted; collecting information about the demographic and skill makeup of the affected workforce in order to tailor appropriate services; in some cases, especially for larger layoffs, establishing a venue for the dislocated workers that may be in addition to the local One-Stop Career Centers; arranging workshops for résumé writing and career counseling and other services; and striving to find other employers in the area who might hire the affected workers based on their skill sets, ideally before the individuals become unemployed. Some states encourage the use of labor-management committees and peer counselors to provide additional support and counseling to the dislocated workers. States have tremendous flexibility in how they provide Rapid Response services, and not surprisingly, there is a wide range of models in use, with varying degrees of effectiveness. In an effort to improve the capacity and consistency of state and local Rapid Response efforts, the Employment and Training Administration announced a National Rapid Response Initiative in August 2010 (<http://wdr.doleta.gov/directives/attach/TEN/ten2010/TEN03-10.pdf>).

2. According to the American Community Survey (ACS): “Cognitive difficulty was derived from question 18a, which asked respondents if due to physical, mental, or emotional condition, they had ‘serious difficulty concentrating, remembering, or making decisions.’ Prior to the 2008 ACS, the question on cognitive functioning asked about difficulty ‘learning, remembering, or concentrating’ under the label ‘Mental disability.’”

## References

- Abraham, K.G., & Houseman, S.N. (2008). Removing barriers to work for older Americans. In T.J. Bartik & S.N. Houseman, eds., *A Future of Good Jobs?: America's Challenge in the Global Economy* (pp. 161-202). Kalamazoo, MI: W.E. Upjohn Institute.
- Berkley Policy Associates. (2001). *Evaluation of DOL Disability Employment Grants: Revised Final Report, Volume 1*. Oakland, CA: Author.
- Bloom, H. (1990). *Back to work: Testing reemployment services for dislocated workers*. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research.
- Bond, G.R., Salyers, M.P., Dincin, J., Drake, R.E., Becker, D.R. Fraser, V.V., & Haines, M. (2007). Randomized controlled trial comparing two vocational models for persons with severe mental illness. *Journal of Consulting and Clinical Psychology, 75*, 968-982.
- Borie-Holtz, D., Van Horn, C., & Zukin, C. (2010). *No End in Sight: The Agony of Prolonged Unemployment*. New Brunswick, NJ: John J. Heldrich Center for Workforce Development, Rutgers University.
- Bureau of Labor Statistics. (2010a). *Summary 10-04. Issues in Labor Statistics* (March). Washington, D.C.: U.S. Department of Labor.

Bureau of Labor Statistics. (2010b). *Economic News Release*. Table 1. Long-tenured displaced workers (1) by age, sex, race, Hispanic or Latino ethnicity, and employment status in January 2010. Retrieved from: <http://www.bls.gov/news.release/disp.t01.htm>. Washington, D.C.: U.S. Department of Labor.

Bureau of Labor Statistics. (2011). *The Employment Situation: December 2010*. Washington, D.C.: U.S. Department of Labor.

Corson, W., & Haimson, J. (1996). *The New Jersey Unemployment Insurance Reemployment Demonstration Project: Six-Year Follow-Up and Summary Report*. (Unemployment Insurance Occasional Paper 96-2). Washington, D.C.: U.S. Department of Labor.

Fogg, N.P., Harrington, P.E., & McMahon, B.T. (2010). The impact of the great recession upon the unemployment of Americans with disabilities. *Journal of Vocational Rehabilitation*, 33, 193-202.

Godofsky, J., Van Horn, C., & Zukin, C. (2010). *The Shattered American Dream: Unemployed Workers Lose Ground, Hope and Faith in their Futures*. New Brunswick, NJ: John J. Heldrich Center for Workforce Development, Rutgers University.

Government Accountability Office. (2006). *Senior Community Service Employment Program: Labor has Made Progress Implementing Older Americans Act Amendments of 2000, but Challenges Remain*. Testimony before the Special Committee on Aging, U.S. Senate. GAO-06-549T. Washington, D.C.: Author.

Heidkamp, M., Corre, N., & Van Horn, C. (2010). *The "New Unemployables:" Older Jobseekers Struggle to Find Work During the Great Recession*. Boston: Sloan Center on Work and Aging, Boston College.

Heidkamp, M., & Van Horn, C. (2008). *Older and Out of Work: Employer, Government and Nonprofit Assistance*. Boston: Sloan Center on Work and Aging, Boston College.

Jacobson, L., LaLonde, R.J. & Sullivan, D. (2005). The impact of community college retraining on older displaced workers: Should we teach old dogs new tricks? *Industrial and Labor Relations Review*, 58(3), 398-415.

John J. Heldrich Center for Workforce Development. (2005). *Getting Back to Work: New Public/Private Strategies for Laid-Off American Workers*. New Brunswick, NJ: John J. Heldrich Center for Workforce Development, Rutgers University.

Johnson, R.W. (2004). Trends in job demands among older workers, 1992-2002. *Monthly Labor Review*. Washington, D.C.: U.S. Department of Labor.

Johnson, R.W., & Mommaerts, C. (2011). *Age Differences in Job Loss, Job Search, and Reemployment*. Washington, D.C.: The Urban Institute.

- Kauff, J. (2008). *Assisting TANF Recipients Living with Disabilities to Obtain and Maintain Employment Final Report*. Washington, DC: Mathematica Policy Research, Inc.
- Kaye, H.S. (2010). The impact of the 2007-09 recession on workers with disabilities. *Monthly Labor Review*. Washington, D.C.: U.S. Department of Labor.
- Kodrzycki, Y.K. (1997). Training programs for displaced workers: What do they accomplish? *New England Economic Review*, 3, 39-59.
- Kukla, M., & Bond, G.R. (2009). The Working Alliance and employment outcomes for people with severe mental illness enrolled in vocational programs. *Rehabilitation Psychology*, 54(2), 157-163.
- LaLonde, R.J. (1995). The promise of public sector-sponsored training programs. *The Journal of Economics Perspectives*, 9(2), 149-168.
- Livermore, G., & Colman, S. (2010). *Use of One-Stops by Social Security Disability Beneficiaries in Four States Implementing the Disability Program Navigator Initiative*. Princeton, NJ: Mathematica, for U.S. Department of Labor, Employment and Training Administration.
- O'Leary, C., & Eberts, R. (2007). *Reemployment and Earnings Recovery among Older Unemployment Insurance Claimants*. Kalamazoo, MI: Upjohn Institute.
- Peterson, C., Razzano, L., & Cook, J. (n.d.). *Identifying and Assisting One Stop Center Customers with Mental Health Difficulties*. Chicago: Center on Mental Health Services Research and Policy, University of Illinois at Chicago, for the U.S. Department of Labor, Office of Disability Employment Policy.
- Rho, H.J. (2010). *Hard Work? Patterns in Physically Demanding Labor Among Older Workers*. Washington, D.C.: Center for Economic Policy Research. Retrieved from: <http://www.cepr.net/documents/publications/older-workers-2010-08.pdf>.
- Schweke, B., & Lambe, W. (2006). *Back on Track: 16 Promising Practices to Help Dislocated Workers, Businesses and Communities*. Raleigh, NC: North Carolina Rural Economic Development Center.
- U.S. Census Bureau. (2011). *U.S. Census Bureau, Statistical Abstract of the United States: 2011*. Table 591. "Civilian Labor Force—Percent Distribution by Sex and Age: 1980 to 2009." Washington, D.C.: Author.

## About ODEP

The Office of Disability Employment Policy (ODEP) provides national leadership on disability employment policy by developing and influencing the use of evidence-based disability employment policies and practices, building collaborative partnerships, and delivering authoritative and credible data on employment of people with disabilities.

## About the NTAR Leadership Center

Founded in 2007 under a grant/contract with the Office of Disability Employment Policy at the U.S. Department of Labor, the NTAR Leadership Center's mission is to build capacity and leadership at the federal, state, and local levels to enable change across workforce development and disability-specific systems that will increase employment and economic self-sufficiency for adults with disabilities.

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