RISKING STIGMATIZATION TO GAIN
ACCOMMODATION

Stacy A. Hickox* and Keenan Case**

ABSTRACT

Employees and applicants with hidden disabilities often require accommodations to perform the duties of a position safely and effectively. If their disability is not readily apparent to an employer, employees must decide whether to reveal their disability to enable them to access reasonable accommodations available under the Americans with Disabilities Act (ADA). Revelation carries the real or at least the perceived risk of stigmatization, a negative reaction from both supervisors and coworkers, because of the negative characteristics and stereotypes attached to these disabilities. Given this conundrum, this article explores the ADA’s requirement that an individual with a disability inform an employer that a requested accommodation is needed because of her disability, often before the employer is even required to engage in an interactive process to determine whether the accommodation would be reasonable. Even more information can be required to make that reasonableness determination. Effective strategies for employers to support requests for accommodation while avoiding potential stigmatization of employees with hidden disabilities will be explored in light of social science research on both the need for accommodations and the potential for stigmatization, as well a review of Fortune 100 Companies and an original survey of additional employers regarding their policies related to the accommodation process.

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* Associate Professor, Michigan State University, School of Human Resources & Labor Relations; J.D. University of Pennsylvania Law School
** B.A. 2019, Michigan State University
INTRODUCTION

“Accessible organizations are ones in which opportunity is available for all those who want to participate and add value to the organization.”1 Hidden disabilities, such as a psychiatric disability or cognitive impairment, can interfere significantly with a person’s ability to work.2 To reduce that interference, the Americans with Disabilities Act (ADA) requires that employers provide reasonable accommodations that do not impose an undue hardship on the employer.3 At the same time, the ADA recognizes that applicants should not be required to reveal their disability during the hiring process, to protect them against discrimination.4 In contrast, for an applicant or employee to take advantage of the ADA’s guarantee of reasonable accommodation, he or she must reveal her disability and its accompanying limitations to the employer.5 Such a revelation exposes that employee to all of the stigma and stereotypes associated with her disability.6 This paper explores both ADA’s stringent

5. See infra notes 191–316 and accompanying text.
6. See infra notes 111–161 and accompanying text.
requirements to reveal one’s disability and employer policies surrounding the accommodation process to explain the difficult choices faced by people with hidden disabilities. A review of employer policies provides guidance on solutions to this significant deterrent to taking advantage of the rights provided by the ADA.

Accommodations in the workplace can play an important role in reducing the high levels of unemployment among people with disabilities. People with psychiatric and developmental disabilities face significant barriers to employment, including the stigma and stereotypes associated with their impairment. Because such disabilities typically are hidden, or unknown to supervisors and coworkers, those employees must decide whether, how, when, where and to whom they should conceal, reveal or signal their disabilities. The ADA was adopted in large part to combat the stigma associated with people with disabilities. However, the process for seeking an accommodation puts the person with a disability in the position of being forced to reveal their disability to their employer to be eligible for necessary accommodations.

The potential for stigmatization may contribute to the “long-standing challenges” in ensuring that employees and applicants with disabilities are provided with the reasonable accommodations they need to succeed in the workplace. Stringent requirements on people seeking accommodations


8. See Persons with a Disability: Labor Force Characteristics Summary, U.S. BUREAU LAB. STAT. (Feb. 26, 2020, 10:00 AM), https://www.bls.gov/news.release/disabl.nr0.htm [https://perma.cc/JQD6-8D3F] (illustrating the proportion of people with disabilities employed in 2018 was 19.1% (11.1% for those without a high school diploma), compared to a rate of 65.9% for people without disabilities).


may have been an intentional compromise when the ADA was adopted.\textsuperscript{13} Others have argued that because workplaces are designed for the able-bodied employees, employers should automatically be required to change the work environment to enable the employee with a disability to be successful.\textsuperscript{14} Regardless of one’s opinion on those two outlooks, there is no doubt of the need for policies and practices that minimize discrimination to enhance the accessibility of the workplace for people with both physical and mental disabilities.\textsuperscript{15}

To promote such access, experts continue to focus on disability awareness training and fostering a climate of disability inclusion,\textsuperscript{16} even though research shows that discriminatory attitudes and practices are hard to change.\textsuperscript{17} Employers have characterized their accommodation-related policies and practices as lacking effectiveness,\textsuperscript{18} particularly with respect to “disability-friendly” practices related to accommodation.\textsuperscript{19} While these factors may have some influence on employees’ confidence in seeking accommodation without suffering the effects of stigmatization, many employees and applicants with disabilities are still reluctant to reveal their disability, even if it means foregoing their right to reasonable

\textsuperscript{13} Michael Ashley Stein et al., Accommodating Every Body, 81 U. Chi. L. Rev. 689, 715 (2014).

\textsuperscript{14} Michael Oliver, Understanding Disability 33 (1st ed. 1996); see also Bradley A. Areheart, Disability Trouble, 29 Yale L. & Pol’y Rev. 347, 373–74 (2011) (demonstrating that disability is socially constructed).


\textsuperscript{16} Sarah Von Schrader, Valerie Malzer & Susanne Bruyère, Perspectives on Disability Disclosure: The Importance of Employer Practices and Workplace Climate, 26 Emp. Responsibilities & Rts. J. 237, 253 (2014); see Terry Krupa, Employment and Serious Mental Health Disabilities, in Work Accommodation and Retention in Mental Health 224 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (highlighting employer education to decrease the stigma related to mental illness); see also Peter Linkow et al., Leveling the Playing Field: Attracting, Engaging and Advancing People with Disabilities 42 (2013) (providing guidelines to create a workplace where employees with disabilities feel safe to disclose their grievances); see also Izabela Z. Schultz et al., Employer Attitudes Towards Accommodations in Mental Health Disability, in Work Accommodation and Retention in Mental Health 326, 337–38 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (displaying the importance of having employers promote anti-discriminatory attitudes and practices and training to improve attitudes about workers with mental health disorders).

\textsuperscript{17} Lisa Schur et al., Is Disability Disabling in All Workplaces? Workplace Disparities and Corporate Culture, 48 Indus. Rel. 381, 386 (2009).


\textsuperscript{19} Id. at 205.
accommodations.20

In contrast to these approaches to expand workplace opportunities for people with disabilities, this paper focuses on the process of obtaining accommodations which are so essential to the success of persons with disabilities in the workplace. An emphasis on process flows from the maxim that the effectiveness of the law in achieving positive outcomes can only be improved “by the study of the process through which the outcomes are achieved, including how it influences the knowledge, attitudes, and beliefs of people with disabilities and their employers.”21 Because people with hidden disabilities risk stigmatization if they reveal their disability to obtain accommodation, the current process of obtaining accommodations presents a significant bottleneck to the inclusion and success of people with disabilities in the workforce.

The paper begins with an explanation of the conflict between the need to reveal one’s disability to obtain an accommodation and the potential for stigmatization after such a revelation. Accommodations are so important to people with disabilities to be more effective in the workplace, but people with hidden disabilities often decide not to request an accommodation to avoid suffering from the effects of stigma and stereotypes associated with their disabilities.

The second part of this paper explains how the ADA’s interactive process requires employees with hidden disabilities to disclose both their disability diagnosis and the related impairments to obtain any reasonable accommodations. Without a revelation of that information, the employer typically will not be required to interact about, much less provide, any reasonable accommodation. While this sharing of information is important to develop appropriate accommodations and for employers to verify that an accommodation is truly necessary, the ADA offers limited protections against the potential for stigmatization after it is shared.

The third part of the paper summarizes original data from a review of the accommodation practices of Fortune 100 companies and employers responding to an original opportunity survey of 75 employers. Many Fortune 100 companies fail to provide adequate information and assurances of privacy on their websites, which could discourage people with hidden disabilities from even initiating the accommodation process. Both Fortune 100 companies’ online information and employer responses to our survey demonstrate that some employers require medical information from

employees early in the accommodation process, and yet many employers do not adequately limit access to that information. In contrast, some employers use innovative strategies to address the potential stigmatization of employees seeking accommodation, such as assuring that supervisors do not see employees’ medical information, while other responding employers acknowledge that they are “not sure” how to do so.

The final part of the paper proposes some solutions for this conflict between the stigma attached to many hidden disabilities and the ADA’s requirement to reveal that information to receive reasonable accommodation. One might advocate for limiting the amount of information that is required to be shared, but such a limitation could lead to more stereotyping of the person with a hidden disability who is seeking an accommodation. To ensure that employers can verify the need for accommodation but discourage their reliance on stereotypes, the ADA’s requisite interactive process should be reformed to require only the revelation of objective, relevant private information about the person seeking an accommodation. That information should only be shared with those who have a need to know, which would still provide employers with assurance that a requested accommodation is truly needed. A revised process of accommodation approval should ensure that direct supervisors and managers do not have access to private medical information about an applicant or employee, even if that person is seeking an accommodation. Reliance on a neutral third party to verify the person’s need for accommodation provides additional protection against stigmatization. By adopting such a process, employees with disabilities should feel more comfortable in initiating the accommodation process without fear that employers will succumb to the all too common tendency of stigmatizing or stereotyping them based on their disabilities.

I. THE REVELATION CONFLICT

An inherent conflict arises for an employee or applicant seeking accommodation. An employer is only required to interact with an employee or applicant seeking accommodation who reveals both her disability and the accompanying limitations or impairments. Even more detailed medical information may be required to show that an

accommodation is reasonable, based on a connection between the disability and the requested change. Admittedly, revelation of this information can be important to finding appropriate accommodations. Employers also seek verification that an accommodation is truly necessary. But this revelation requirement fails to acknowledge the risk taken by people with disabilities by disclosing a disability that carries a significantly negative stigma. As described below, both managers and coworkers may treat a person with a hidden disability very differently once that disability is revealed. Even if that stigmatization will not actually occur in a particular workplace, people with hidden disabilities often fear such a reaction. Consequently, applicants and employees may choose to forego their right to reasonable accommodations so as to avoid stigmatization.

Resistance to disclosing one’s disability because of the associated stigma can create a “considerable barrier” to accommodation. The disclosure decision can even be “wrenching” for people with psychiatric disabilities, because they must “weigh the personal benefits and risks of [disclosing their psychiatric disability]” in their workplace. In reality, individuals considering revelation of their disability need to trust that the information will not be used against them and that the organization will support them.

A failure to disclose one’s disability limits access to accommodations, thereby negatively affecting the performance of employees diagnosed with hidden disabilities. For example, Canadian research showed that

23. See infra notes 275–316 and accompanying text.
25. See infra notes 191–318 and accompanying text for a discussion of the verification process under the ADA.
28. Schultz et al., supra note 16, at 358; Jason Peer & Wendy Tenhula, Employment Interventions for Persons with Mood and Anxiety Disorders, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 255 (Izabela Z. Schultz & E. Sally Rogers eds., 2011); LINKOW ET AL., supra note 16, at 43–44; see also Follmer & Jones, supra note 2, at 344 (explaining that disclosure to obtain accommodation exposes employees with mental illnesses “to the risk of stigmatization and discriminatory treatment”).
employees with a psychiatric disability “may choose not to disclose for fear of stigmatization and its negative consequences,” including discharge. 33 Similarly, in Hong Kong research showed that applicants with a psychiatric disability were “unwilling to disclose their medical history” to avoid discrimination in hiring. 34

Despite the potential benefits of obtaining accommodations, a significant proportion of employees have opted to avoid revelation, thereby forgoing their right to be accommodated. 35 These employees have determined that the benefits of revealing one’s disability are “far outweighed by the fear that this expression only turns them into a target for devaluation by others in the workplace.” 36 One expert explained that “[t]he fear of resentment, embarrassment, and the potential loss of self-esteem that might be caused by revealing the mental health condition mask the benefits of an accommodation that disclosure might provide.” 37

Employees are more likely to disclose their disabilities if they need accommodations to perform their jobs, 38 and those who disclosed were more likely to receive needed accommodations. 39 Experts have recommended that employees with hidden disabilities get help from counselors or job coaches to identify a “trustworthy workplace ally” to reveal one’s disability. 40 Employees with psychiatric disabilities may delay the revelation of their disabilities until their need for accommodations forces them to do so. 41 Some may even quit a job or seek a job for which they do not require accommodation to avoid revealing a disability. 42

33. Id. at 735, 740.
35. Goldberg, Killeen & O’Day, supra note 22, at 481, 483, 487, 490; see, e.g., Jian Li Wang et al., Perceived Needs for and Use of Workplace Accommodations by Individuals with a Depressive and/or Anxiety Disorder, 53 J. OCCUPATIONAL & ENVTL. MED. 1268, 1271 (2011) (explaining that during an economic recession, employees with mental health problems might be less likely to request accommodations, due to fear of losing their job).
37. Gates & Akabas, supra note 7, at 383; see also Goldberg, Killeen & O’Day, supra note 22, at 490–91 (explaining that beliefs about prejudice and discrimination appeared to influence their disclosure decisions).
38. Toth & Dewa, supra note 32, at 739; Von Schrader, Malzer & Bruyère, supra note 16, at 246.
40. Johnson & Joshi, supra note 36, at 445.
42. Gates & Akabas, supra note 7, at 383; Rebecca S. Dalgin & Dennis Gilbride,
Research literature has failed to address adequately the potential negative effects of disclosing a hidden disability for applicants or employees. One of the few studies addressing this question tests the hypothesis that employers will respond more favorably to job candidates who disclose “with clear, concise information about the disability and related impacts on employment (i.e., detailed disclosure) than to a candidate who discloses with limited information (i.e., brief disclosure).” The results indicated that employer reactions to revelation of a psychiatric disability were negative regardless of the level of detail disclosed.

In general, employees with hidden disabilities are more likely to reveal if they expect to be accepted by others and perceive positive organizational and supervisor support, as well as a need for organizational resources dependent on revelation. Employees with disabilities have higher job satisfaction, loyalty and lower turnover rates in organizations with corporate cultures, i.e., embedded values, attitudes and norms, that are responsive to the needs of all employees. In line with these findings, experts have recommended assessment of the organizational climate, encouraging people with disabilities to find work cultures which emphasize “cooperation, helpfulness and social justice.” An employee might look for institutional support for disclosure that is part of the “culture, climate, practices, and policies” of an organization, including both symbolic and instrumental support, which can be enhanced by the presence of others with a similar stigmatized characteristic.

Revelation can be supported by clear diversity and inclusion statements, allowance of flexible work

45. Id. at 12–13.
47. Schur et al., supra note 17, at 386, 398–400.
48. Bonnie Kirsh & Rebecca Gewurtz, Organizational Culture and Work Issues for Individuals with Mental Health Disabilities, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 393, 398 (Izabela Z. Schultz & E. Sally Rogers eds., 2011); MacDonald-Wilson et al., supra note 30, at 210. See also Lisa Schur, Douglas Kruse & Peter Blanck, Corporate Culture and the Employment of Persons with Disabilities, 23 BEHAV. SCI. & L. 3, 16 (2005) (explaining that corporate culture affecting employees with disabilities can be improved by management commitment, training programs, and working with unions).
arrangements, and focus groups for employees with disabilities, as well as training on disability awareness and inclusion of people with disabilities, including the provision of accommodations.\(^50\)

These experts put the burden on job-seekers with disabilities to discover workplaces with less potential for the negative effects of stigma and stereotyping. Similarly, vocational rehabilitation experts have focused on helping people with a hidden disability, such as a psychiatric impairment, in deciding “what, to whom, and when to disclose a psychiatric disability,”\(^51\) and that “an honest, direct approach and an emphasis on factual, situation-specific information have been found to be most useful.”\(^52\)

One group of surveyed employees with disabilities explained that having a “disability friendly workplace” and “knowing that the employer was actively recruiting and hiring people with disabilities” were important considerations in deciding whether to disclose their disabilities at work.\(^53\) Thus, these experts suggest that employees who would benefit from an accommodation must find a workplace culture where disclosure will not result in the negative consequences of stigma and stereotypes attached to their disability.\(^54\)

This advice assumes that there are workplaces that have effectively addressed the potential for biases against people with hidden disabilities. In reality, experts recognize that “few organizations have formal plans to address mental health and employment equity.”\(^55\) “Reduction of stigma is challenging because it is often a result of deep-level attitudes.”\(^56\) Diversity training is common, but may be ineffective because increased knowledge about mental illness “does not necessarily translate to changes in negative attitudes or stigmatizing or discriminating responses.”\(^57\) Despite the fact that two-thirds of employers in the U.S. already provide this training,\(^58\)

\(^{50}\) Linkow et al., supra note 16, at 41, 44–46.
\(^{51}\) Dalgin & Gilbride, supra note 42, at 307.
\(^{52}\) Liza M. Conyers & Christine Ahrens, Using the Americans with Disabilities Act to the Advantage of Persons with Severe and Persistent Mental Illness: What Rehabilitation Counselors Need to Know, 21 WORK 57, 62 (2003).
\(^{54}\) Von Schrader, Malzer & Bruyère, supra note 16, at 240–41; see also MacDonald-Wilson et al., supra note 30, at 206 (explaining how employees must weigh the benefits and risks to disclosing).
\(^{55}\) Kirsh & Gewurtz, supra note 48, at 401.
\(^{56}\) Toth & Dewa, supra note 32, at 744.
\(^{57}\) Toth & Dewa, supra note 32, at 744.
\(^{58}\) Susanne M. Bruyère, William A. Erickson & Sara VanLooy, Comparative Study of Workplace Policy and Practices Contributing to Disability Nondiscrimination, 49
doubt persists that such efforts are effective in reducing the existence or the effects of such stigma.\textsuperscript{59} Moreover, educational approaches to address the stigma and stereotypes about hidden disabilities can promote “psychological reactance,” e.g., “do not tell me what to think,” and actually worsen attitudes of coworkers and managers.\textsuperscript{60}

A strategy of avoiding those who display stigmatizing attitudes and behaviors in the workplace will not positively affect the self-esteem of employees with various psychiatric disabilities, and can negatively affect the availability of social supports in the workplace.\textsuperscript{61} Consequently, “attitudes and the behaviors of colleagues and supervisors can have a profound impact on employees’ ability to succeed and advance and on their willingness to disclose their disability.”\textsuperscript{62}

\textbf{A. Importance of Accommodations}

Accommodations, described as various alterations of the work or the environment, often are essential for people with disabilities’ performance of job tasks.\textsuperscript{63} Without accommodation, discharge often results because the employee cannot effectively perform the essential job duties of his or her

\textsuperscript{59} Compare Jian Li Wang, Mental Health Literacy and Stigma Associated with Depression in the Working Population, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 341, 344 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (explaining that stigma-reducing strategies are not always effective), and Patricia G. Devine et al., Long-Term Reduction in Implicit Race Bias: A Prejudice Habit-Breaking Intervention, 48 J. EXPERIMENTAL SOC. PSYCHOL. 1267 (2012) (stating that the effects of short-term educational interventions on stigma may be limited), and Cindy Malachowski & Bonnie Kirsh, Workplace Antistigma Initiatives: A Scoping Study, 64 PSYCHIATRIC SERVICES 694, 696–700 (2013) (noting very few positive results in reducing stigma from workplace intervention methods), with Johannes Hamann et al., A “Mental-Health-at-the-Workplace” Educational Workshop Reduces Managers’ Stigma Toward Depression, 204 J. NERVOUS & MENTAL DISEASE 61, 62 (2016) (training reduced stigma related to depression).


\textsuperscript{61} Id. at 180–81; Marie Ilic et al., Protecting Self-Esteem from Stigma: A Test of Different Strategies for Coping with the Stigma of Mental Illness, 58 INT’L J. SOC. PSYCHIATRY 246, 252, 254 (2012); see also Bruce G. Link et al., Stigma as a Barrier to Recovery: The Consequences of Stigma for the Self-Esteem of People with Mental Illnesses, 52 PSYCHIATRIC SERVICES 1621, 1624 (2001) (showing that the stigma associated with people with mental illnesses can be harmful to their self-esteem).

\textsuperscript{62} LINKOW ET AL., supra note 16, at 42.

position without it. The ADA was designed to enable people with disabilities to “enjoy equal benefits and privileges of employment as are enjoyed by its other similarly situated employees without disabilities.” The ADA’s right to reasonable accommodations can “offset the injustices that continue because of structural discrimination against people with mental illness.” Reasonable accommodations can provide greater flexibility and tolerance in workplaces that are traditionally designed for the able-bodied.

Despite the importance of accommodations for employees with hidden disabilities, those with mental health disabilities have been about half as likely to receive accommodations, compared to employees with other disabilities. Service providers for people with disabilities often concentrate on vocational preparation and job search strategies, with less attention on accommodations necessary for getting hired or job maintenance.

Workplace accommodations are particularly important for employees with psychiatric disabilities to continue working during or following an episode. For example, “the availability of ongoing, non-time-limited work supports is considered critical to achieving positive employment outcomes.”

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65. 29 C.F.R. § 1630.2(o)(1)(iii) (2011); see also U.S. Equal Emp’t Opportunity Comm’n, Enforcement Guidance: Reasonable Accommodation and Undue Hardship Under the Americans with Disabilities Act (2002) (“[A] reasonable accommodation allows an employee with a disability an equal opportunity to enjoy the benefits and privileges of employment that employees without disabilities enjoy.”).


68. See Craig Zwerling et al., Workplace Accommodations for People with Disabilities: National Health Interview Survey Disability Supplement, 1994–1995, 45 J. OCCUPATIONAL & ENVTL. MED. 517, 523 (2003) (“We also found that those with mental health conditions were about 50% less likely to receive accommodations than those with other disabilities.”).

69. Mak & Tsang, supra note 64, at 240 (“Current SE programs put emphasis essentially on vocational preparation and job search. Job maintenance has yet to be strengthened.”).

70. Wang et al., supra note 35, at 1268 (“Workplace accommodations may allow employees to continue working during or following an episode of illness. This may diminish the extent of career disruption associated with an episode of mental illness and avoid difficulties likely to be encountered with reintegration.”).
Overall, vocational rehabilitation services for people with psychiatric disabilities, including targeted job development and supported employment services, can triple employment outcomes for that group. The interpersonal difficulties and a lack of social competence among some people with psychiatric disabilities can be addressed through accommodations, including follow-along support in the workplace. Employees with mood and anxiety disorders even benefit from simple accommodations such as the provision of concrete work expectations or frequent breaks, as well as more costly programs such as provision of mental health treatment at work. The success of such accommodations is well-documented, often resulting in a net cost savings for the employer based on a quicker return to work.

Employees with psychiatric disabilities can benefit from low cost accommodation such as interpersonal supports, including job coaching or job support and stress management interventions as well as the

71. Krupa, supra note 16, at 220; see also Schultz et al., supra note 16, at 358 (noting that for employees returning to work, accommodation may continue to be needed to facilitate optimal work performance).
72. See E. Sally Rogers & Kim L. MacDonald-Wilson, Vocational Capacity Among Individuals with Mental Health Disorders, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 73, 74 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (describing how even after tripling employment outcomes, the majority of those with mental health disabilities will be unemployed); see also Debra Lerner et al., Depression and Work Performance: The Work and Health Initiative Study, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 103, 108 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (discussing how performance of employees with serious depression can be improved through modification, coaching, and EAP services).
73. Tsang et al., supra note 34, at 293 (describing how “interpersonal difficulties have been found to be the most frequently reported job problem leading to unwanted job terminations” and how these difficulties may be addressed through social skills training).
74. Peer & Tenhula, supra note 28, at 256 (offering a list accommodations, varying in aim and level of support); see also Jay Wald, Anxiety Disorders and Work Performance, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 121, 129, 134 (Izabela Z. Schultz & E. Sally Rogers eds., 2011) (suggesting job accommodations for various functional limitations).
76. Peer & Tenhula, supra note 28, at 246–48, 250 (discussing how accommodations lead to faster return to work, earlier return to partial work, and increased hours worked). See, e.g., Judith A. Cook et al., Effectiveness of Supported Employment for Individuals with Schizophrenia: Results of a Multi-Site, Randomized Trial, 2 CLINICAL SCHIZOPHRENIA & RELATED PSYCHOSES 37, 44 (2008) (discussing how performance of employees with schizophrenia improved in supported employment).
utilization of natural peer supports and feedback-giving by the supervisor, a flexible schedule or job-sharing, and a modified work environment to decrease stressors and triggers. For example, two studies of Canadian employees with psychiatric disabilities found that the most useful accommodations included 1) “open communication, positive reinforcement and praise, written instructions, and . . . additional time to learn job responsibilities,” and 2) weekly meetings with their supervisors, exchanging minor work tasks with others, and attending courses that are individualized, as well as reduced hours or work demands. Likewise, employees with depression have benefitted from organizational supports including supportive colleagues and peer support networks after returning to work, as well as increased communication with employees while on leave. In addition, the performance of employees with psychiatric disabilities may improve from a transfer to a different position or a change in job duties, as evidenced by the decrease in both presenteeism and absenteeism among employees with severe depression, by providing them with more control and duties requiring less judgment and decision-making or interpersonal interaction.

Accommodations also address deficits associated with a person’s non-psychiatric hidden disability. For example, employment support...
specialists can assist employees with cognitive impairments in applying problem solving and other skills to stressful situations at work, and help employees practice skills needed when experiencing interpersonal difficulties at work. Various accommodations can improve the workplace success of employees with mild cognitive disorders which affect functions such as memory and organizational skills. Similarly, improved employment outcomes have been associated with the introduction of interventions aimed at remediation and compensation for impairments in cognitive functioning and social skills training to address difficulties with interpersonal relationships which can accompany serious mental illness.

Accommodations can be especially important for employees returning to work after an absence related to a disability, who face barriers to reentering the workforce and may even experience more frequent disciplinary action. For example, one study found that a group of employees with severe mental illnesses believed that workplace accommodations, such as a better work environment, would lengthen their job tenure. Likewise, workplace interventions (including lowering workload and job demands, increasing decision latitude) have been shown to reduce time out of work for employees experiencing workplace-related psychological complaints. Workplace accommodations are important to reducing lost time and other costs, even for employees with a mental health issue who have access to service coordination and adequate health services.

Because of the various positive effects on employee performance, employers also benefit from providing accommodations to persons with disabilities. Emphasis on lean production and work intensification may
lead managers to resist the provision of workplace accommodations.\textsuperscript{94} This reluctance fails to recognize that accommodations can address employer concerns that people with hidden disabilities lack the ability to perform the duties of a job they seek.\textsuperscript{95} For example, absenteeism and presenteeism accounts for the majority of costs associated with employees with depression,\textsuperscript{96} the effects of which can be reduced by enhanced health care offered by employers.\textsuperscript{97}

Accommodations also benefit employers by reducing presenteeism, increasing work retention, and facilitating work reentry by employees who have missed work due to illness or injury.\textsuperscript{98} Employers have reported significant direct benefits from providing accommodations, including reduced absenteeism and increased productivity.\textsuperscript{99} In addition, the provision of accommodations can increase job tenure, thereby avoiding turnover costs such as job search and training costs.\textsuperscript{100} Employers have reported numerous direct benefits from providing accommodations, including retention of qualified employees (86%), increased productivity
(72%), avoidance of costs to train new employees (55%), savings on insurance costs (47%) and increased attendance (39%). In line with these direct benefits, among employers who contacted the Job Accommodation Network (JAN) before accommodating their employees, 34% reported saving up to $5,000, 16% saved $5,000 to $10,000, 19% saved $10,000 to $20,000 and 25% saved between $20,000 and $100,000.

In addition to these direct savings, employers derive indirect benefits from the provision of accommodations, including improved employee interaction, as well as increased overall morale and productivity. For example, one group of employers reported indirect benefits including improved interactions with co-workers (69.3%), increased overall company morale (60.7%), and increased overall company productivity (57.0%), with a median monetary benefit of $1,000. Similarly, another employer survey noted that accommodations led to increases in overall company morale (61%), overall company productivity (59%), workplace safety (47%), interactions with customers (37%), overall company attendance (27%), and increased profitability (24%). Accommodations may also provide “third-party benefits” to employees without disabilities, by improving working conditions for everyone. Compared to the relatively insignificant costs, more than half of all employers in one study reported a net benefit, and employers who could calculate the monetary benefit reported net benefits from providing accommodations of over $11,000 on average.

Despite these reported savings, “[a] disconnect continues to exist between the benefits and effectiveness of accommodations and the employment rates of individuals with disabilities.” Some employers focus on potential indirect costs, such as increased supervisory time, even though one group of employers reported that only 15.1% of

103. Solovieva, Dowler & Walls, supra note 99, at 43–44.
104. Schartz, Hendricks & Blanck, supra note 100, at 349.
105. LOY & BATISTE, supra note 101, at 11.
107. Schartz, Hendricks & Blanck, supra note 100, at 350.
108. Schartz, Hendricks & Blanck, supra note 100, at 352.
accommodations they provided resulted in increased indirect costs.109 Even with some increase in costs, employers benefit from accommodations that help to retain engaged, productive employees.110 Employers who have hiring goals for hiring people with disability, including federal contractors, will also benefit from removing barriers or attendant stigma to disclosure of applicants’ or employees’ disabilities.111 Resistance to providing accommodations may be more about resisting challenges to organizational culture and preserving the status quo, rather than direct or indirect costs.112 Requests for such long-term, process-oriented accommodations threaten established workplace norms and could lead to broader employee demands.113

Clearly, accommodations can be essential for the success of people with disabilities in the workforce, as well as providing tangible benefits for employers.114 Even so, at least some employers are resistant to providing the reasonable accommodations required by the ADA, even if it is not clear that those accommodations would impose an undue hardship.115 The stigmatization that can result from revealing one’s disability to obtain an accommodation presents yet another barrier to the provision of accommodations for people with disabilities.116

B. Stigma’s Impact on People with Hidden Disabilities

Stigma characterizes people with hidden disabilities as “defective, damaged, debilitated, deformed, distressed, afflicted, anomalous, [and/or] helpless.”117 People with psychiatric and developmental disabilities are well aware of the stigma and stereotypes attached to their impairments, which has often resulted in employers’ unwillingness to hire them.118

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109. Schartz, Hendricks & Blanck, supra note 100, at 346, 348.
110. Ron Z. Goetzel et al., The Long-Term Impact of Johnson & Johnson’s Health & Wellness Program on Employee Health Risks, 44 JOEM 417, 418 (2002), thehealthproject.com/wp-content/uploads/2015/02/johnson_johnson_long_term_impact.pdf [https://perma.cc/RM7J-C5AD] (showing that management support with scientifically based resources and a business plan promotes a multidisciplinary approach with a focus on good “corporate health”).
111. Von Schrader et al., supra note 53, at 237.
112. Kirsh & Gewurtz, supra note 48, at 402.
113. Kirsh & Gewurtz, supra note 48, at 403.
114. See supra notes 61–104 and accompanying text for a discussion of benefits.
115. Harris, supra note 75, at 3–4.
116. See supra notes 113–121 and accompanying text for discussion of stigmatization.
Despite the attention given to stigma in general, few have given attention to issues of perceived stigma and concerns regarding disclosure of one’s disability as “return-to-work barriers.”119 The potential barrier to requesting accommodations created by this potential “backlash” makes it important to understand the influence of stigma and stereotypes on employees and applicants with disabilities.

Mental health issues and developmental disabilities can result in both self-stigma and public stigma, which includes stereotypes, prejudice and discrimination.120 Both psychiatric and developmental disabilities, including cognitive impairments and autism spectrum disorder, are concealable identities which are often devalued and subject to stigmatization,121 meaning that individuals are seen as having “undesirable, deviant, or repulsive characteristics that reflect their character, physical body, or group membership.”122 Stigmatization occurs when people treat certain differences as “socially meaningful” and consequently label members of an “out-group.”123 Resulting stereotypes about members of an out group result in assumptions about skills and abilities for work, costs and needs as employees, and “low levels of emotional adjustment.”124 For example, revelation of a mental health diagnosis can impose stigmatization even when the person’s behavior is considered “normal.”125

Stigmatization of people with psychiatric disabilities may be more profound because negative attitudes about this group may be more socially acceptable, based on a perception that psychiatric disabilities “are more amorphous and culturally constructed than other kinds of impairments.”126 Employers may rely on stigma and associated stereotypes due to the lack of validated measures of either characteristics or skills that could be could be

119. Wald, supra note 74, at 133.
121. Follmer & Jones, supra note 2, at 328–30, 336; Johnson & Joshi, supra note 36, at 430.
lacking in people with hidden disabilities.\textsuperscript{127} Reliance on such stereotypes continues despite consensus that a disability diagnosis alone, or even its symptoms, “should not be used to judge who is likely to (or unlikely to) work.”\textsuperscript{128} Negative consequences may be compounded if an employee with a disability receives an accommodation which coworkers believe is undeserved.\textsuperscript{129}

Unfavorable stereotypes and their related concerns about employing stigmatized individuals lead to discrimination and other negative outcomes.\textsuperscript{130} Employers’ reluctance to hire or retain people with such hidden disabilities arises at least in part from employers’ general negative perceptions about employing people with these disabilities\textsuperscript{131} and the stigma attached to certain impairments.\textsuperscript{132} Compared to physical disabilities, hidden disabilities such as mental health impairments consistently generate “some of the strongest negative attitudes.”\textsuperscript{133} Some have characterized the stigma as “more disabling than the primary condition,”\textsuperscript{134} with the stigma of mental illness called “perhaps the most profound societal barrier to full participation in employment.”\textsuperscript{135} This

\begin{footnotes}
\footnotetext[127]{Rogers & MacDonald-Wilson, supra note 72, at 79–83.}
\footnotetext[128]{Krupa, supra note 16, at 95.}
\footnotetext[129]{Ramona L. Paetzold et al., Perceptions of People with Disabilities: When is Accommodation Fair?, 30 BASIC & APPLIED SOC. PSYCHOL. 27, 28, 32–33 (2008).}
\footnotetext[130]{Bruce G. Link & Jo C. Phelan, Conceptualizing Stigma, 27 ANN. REV. SOC. 363, 368–69 (2001).}
\footnotetext[131]{Mark L. Lengnick-Hall, Philip M. Gaunt & Mukta Kulkarni, Overlooked and Underutilized: People with Disabilities Are an Untapped Human Resource, 47 HUM. RESOURCE MGMT. REV. 255, 263 (2008); Lily Run Ren, Ramona L. Paetzold & Adrienne Colella, A Meta-Analysis of Experimental Studies on the Effects of Disability on Human Resource Judgments, 18 HUM. RESOURCE MGMT. REV. 191, 199–200 (2008). See also David C. Baldridge & Michele L. Swift, Withholding Requests for Disability Accommodation: The Role of Individual Differences and Disability Attributes, 39 J. MGMT. 743, 746–47 (2013) (explaining that individuals with developmental disabilities may experience ostracism, discrimination, marginalization and isolation after revelation); Schur et al., supra note 17, at 386 (stating that negative attitudes toward people with disabilities may be an important barrier to their job satisfaction and career experiences).}
\footnotetext[132]{See Ramona L. Paetzold, How Courts, Employers, and the ADA Disable Persons with Bipolar Disorder, 9 EMP. RTS. & EMP. POL’Y J. 293, 325 (2005) (explaining that stereotypes and stigmas prevent entry and retention of persons with psychiatric disabilities in the workplace).}
\footnotetext[133]{Marjorie L. Baldwin & Steven C. Marcus, Stigma, Discrimination, and Employment Outcomes Among Persons with Mental Health Disabilities, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 53–56 (Izabela Z. Schultz & E. Sally Rogers eds., 2011).}
\footnotetext[134]{Schultz et al., supra note 16, at 326.}
\footnotetext[135]{Krupa, supra note 16, at 97; Izabela Z. Schultz et al., Systemic Barriers and Facilitators to Job Accommodations in Mental Health: Experts’ Consensus, in WORK ACCOMMODATION AND RETENTION IN MENTAL HEALTH 366 (Izabela Z. Schultz & E. Sally
stigma affects supervisors’ and managers’ decisions by influencing how individuals process and recall information about other people.\textsuperscript{136} The impact of this stigma can be explained by attribution theory, under which people make assumptions about the cause and controllability of an individual’s psychiatric or intellectual disability that lead to inferences about responsibility, and fear that people with at least some disabilities are dangerous.\textsuperscript{137}

Stigma and stereotypes can lead employers to exclude people with psychiatric and developmental disabilities from the workplace based on an assumed lack of ability.\textsuperscript{138} Negative attitudes of coworkers can inhibit the success of people with disabilities in the workplace, including the effectiveness of accommodations.\textsuperscript{139} In addition, employers may be reluctant to hire people with disabilities based on actual or perceived unwillingness of other employees to work with or be assisted by someone with a psychiatric or developmental disability,\textsuperscript{140} particularly when employees and customers are assumed to share the decision-maker’s preferences about members of certain groups.\textsuperscript{141}

Employers also tend to be “apprehensive and fearful” about hiring or


\textsuperscript{139} Schultz et al., supra note 135, at 357.

\textsuperscript{140} Bernice A. Pescosolido et al., “\textit{A Disease like Any Other”? A Decade of Change in Public Reactions to Schizophrenia, Depression, and Alcohol Dependence}, 167 AM. J. PSYCHIATRY 1321, 1324 (2010) (finding 62% of the general public unwilling to work closely with people diagnosed with schizophrenia, and 47% unwilling for those with depression).

retaining individuals with psychiatric disabilities.\textsuperscript{142} Stigmatization can result from questions about the legitimacy of a hidden disability such as a psychiatric disability, as well as fluctuations in the impact of a hidden disability at work.\textsuperscript{143} Stigma has a persistent impact because psychiatric conditions are expected to continue over time.\textsuperscript{144} In addition, the episodic nature of psychiatric disabilities creates suspicion that periods of being symptom-free do not guarantee future behavior,\textsuperscript{145} despite a “solid work history and impressive credentials.”\textsuperscript{146}

In addition to these assumed negative traits, perceptions of controllability and fault also play a role in employers’ unwillingness to tolerate and accommodate employees with psychiatric disabilities in particular.\textsuperscript{147} Society has often viewed psychiatric disabilities as “internally generated” and resulting from poor character and/or an unwillingness to conform.\textsuperscript{148} Such assumptions may explain the relatively stronger negativity associated with psychiatric disabilities as compared to people with physical impairments.\textsuperscript{149} This notion of fault may also explain the unwillingness of both employers and courts to require broader accommodations for people with psychiatric disabilities.

This stigma is one of the most common reasons for applicants and employees to conceal a disability.\textsuperscript{150} Their fears are well-justified, because those who have revealed a hidden disability have experienced significant negative consequences following disclosure.\textsuperscript{151} Overall, for people with hidden disabilities the decision to disclose their disability “entails

\begin{itemize}
\item \textsuperscript{142} Schultz et al., \emph{supra} note 135, at 357.
\item \textsuperscript{143} Follmer & Jones, \emph{supra} note 2, at 330.
\item \textsuperscript{144} Baldwin & Marcus, \emph{supra} note 133, at 57.
\item \textsuperscript{145} Debbie N. Kaminer, \emph{Mentally Ill Employees in the Workplace: Does the ADA Amendments Act Provide Adequate Protection?}, 26 HEALTH MATRIX 205, 214–15 (2016).
\item \textsuperscript{146} Ami C. Janda, \emph{Keeping a Productive Labor Market: Crafting Recognition and Rights for Mentally Ill Workers}, 30 Hamline J. Pub. L. & Pol’y 403, 426 (2008).
\item \textsuperscript{147} Baldwin & Marcus, \emph{supra} note 133, at 56–57; Anna T. Florey & David A. Harrison, \emph{Responses to Informal Accommodation Requests from Employees with Disabilities: Multistudy Evidence on Willingness to Comply}, 43 ACAD. MGMT. J. 224, 230 (2000).
\item \textsuperscript{148} Hensel & Jones, \emph{supra} note 138, at 54–55.
\item \textsuperscript{149} Jane Byeff Korn, \emph{Crazy (Mental Illness Under the ADA)}, 36 U. Mich. J.L. Reform 602 (2003).
\item \textsuperscript{150} MacDonald-Wilson et al., \emph{supra} note 30, at 215–17, 22; Toth & Dewa, \emph{supra} note 32, at 733.
\item \textsuperscript{151} Von Schrader, Malzer & Bruyère, \emph{supra} note 16, at 249, 251–52; see also Wendy Wilkinson & Lex Frieden, \emph{Glass-Ceiling Issues in Employment of People with Disabilities, in Employment, Disability, and the Americans with Disabilities Act} 71 (Peter D. Blanck ed., 2000) (arguing that people with disabilities may be reluctant to request accommodations due to the fear of being “singled out” or because of the fear of disclosing the disability).
substantial risk to their careers.”\textsuperscript{152} In the hiring process, significant research shows that employers are more likely to consider nondisabled applicants, with even greater discrimination occurring against people with psychiatric and developmental disabilities.\textsuperscript{153} After hire, disclosure of a hidden disability can lead to rejection by coworkers and discrimination by supervisors, resulting in negative consequences for both social interactions and the overall careers of stigmatized employees.\textsuperscript{154} Multiple studies have found that more than half of employees who disclosed their psychiatric disabilities experienced at least one unfavorable circumstance following disclosure, and more than one third of them expressed regrets about disclosing.\textsuperscript{155} Interestingly, those who were compelled to disclose generally felt more regrets about the disclosure than those who exercised their choice to disclose.\textsuperscript{156} Similarly, twenty-three percent of one group of surveyed employers admitted that attitudes or stereotypes presented

\textsuperscript{152} Harlan & Robert, supra note 67, at 411.


\textsuperscript{154} Kristen P. Jones & Eden B. King, Managing Concealable Stigmas at Work: A Review and Multilevel Model, 40 J. MGMT. 1466, 1481 (2014); see also Harlan & Robert, supra note 67, at 411 (explaining that employees with hidden disabilities realize that claiming right to reasonable accommodation entails substantial risks to their careers).

\textsuperscript{155} Marsha L. Ellison et al., Patterns and Correlates of Workplace Disclosure Among Professionals and Managers with Psychiatric Conditions, 18 J. VOCATIONAL REHABILITATION 3, 8–9 (2003); see also Otto F. Wahl, Mental Health Consumers’ Experience of Stigma, 25 SCHIZOPHRENIA BULL. 467, 473, 476 (1999) (reporting rejection or reluctance to apply for jobs, effect on interactions with coworkers); Von Schrader et al., supra note 53, at 19–20 (stating that employees who disclosed their disabilities experienced harsher treatment by supervisors and stigmatization by coworkers); Marjorie L. Baldwin & Steven C. Marcus, Perceived and Measured Stigma Among Workers with Serious Mental Illness, 57 PSYCHIATRIC SERVICES 388, 389–90 (2006) (reporting that people with mental illness cited experiences such as refusal of employment, promotion or transfer, lower wages, and discharge).

\textsuperscript{156} Ellison et al., supra note 155, at 8–9.
barriers to employment or advancement for persons with disabilities.157

Stigma has affected employees who revealed their disabilities in the form of “harsher treatment by supervisors; others felt stigmatized by coworkers or supervisors; some reported receiving uncomfortable attention from others.”158 Thus, negative behaviors or attributes of a person with a psychiatric or developmental disability may be attributed to that impairment, rather than other situational factors.159 Because employers assume that both psychiatric and developmental disabilities are “virtually untreatable,”160 or that such a condition has a “downward deteriorating course” that is inconsistent with employment,161 an applicant or employee will find it difficult to overcome this attribution.162 An example of such treatment is provided in the claim of an employee who was suspended shortly after she told her managers about her depression.163 Stigma attached to disability is compounded for people with psychiatric disabilities, due to “sanism,” an irrational prejudice against anyone diagnosed with a psychiatric disability.164 One psychologist observed that the behaviors of people with psychiatric disabilities “are commonly disapproved of in our society, and they should be held morally responsible for them.”165

People with psychiatric disabilities suffer the effects of stereotypes, which are knowledge structures learned by most members of a social group, including dangerousness, incompetence, and character weakness.166 Like the impact of stigma, stereotyping is negatively correlated with the target group’s representation in the larger group, perception of fit with their occupations, the ambiguity of evaluation criteria, and the fluidity and team-oriented approach in the workplace.167 Thus, both stigma and stereotypes can lead employers to make negative decisions about both applicants and employees when a psychiatric disability becomes known to a decision

157. Bruyère, Erickson & VanLooy, supra note 58, at 34.
160. Korn, supra note 149, at 605.
164. Waterstone & Stein, supra note 138, at 1365.
maker. In addition to the very real possibility of suffering from the effects of both stigma and stereotypes associated with a hidden disability, people with such disabilities experience self-stigma that leads to anxiety and concern about the revelation of their disability.\textsuperscript{168} In one study, employees with psychiatric disabilities described significant concerns that their revelation of their disabilities would result in changes in supervision, isolation from coworkers, denials of promotion or even discharge.\textsuperscript{169} Similarly, employees on the autism spectrum tried to avoid disclosure to avoid the impact of stereotypes about their condition.\textsuperscript{170} While revealing a concealable stigma may reduce fear, anxiety, and stress, it can also lead to stereotyping, discrimination, social rejection, and economic disadvantages.\textsuperscript{171} Stigma can also negatively affect self-esteem and one’s ability to integrate into the community, thereby supporting fears of disclosure.\textsuperscript{172}

The impact of expected stigmatization against psychiatric and developmental disabilities is well-documented,\textsuperscript{173} even where the stigma results in more subtle forms of discrimination.\textsuperscript{174} Mental illness stigma and stereotypes negatively influence self-esteem and the mental health of people with psychiatric disabilities.\textsuperscript{175} These potential effects can be overcome with employers’ use of certain identification management strategies, including positive in-group stereotyping, humor, and community

\textsuperscript{168} See Brohan et al., supra note 137, at 294 (showing anticipation of discrimination described); Hinshaw & Stier, supra note 125, at 375 (explaining that fears about revelation can lead to vigilance, preoccupation, and suspiciousness, which can aggravate original symptoms).

\textsuperscript{169} Dalgin & Gilbride, supra note 42, at 308–09; see also Debbie Peterson, Nandika Currey & Sunny Collings, “You Don’t Look like One of Them”: Disclosure of Mental Illness in the Workplace as an Ongoing Dilemma, 35 PSYCHOL. REHABILITATION J. 145, 145 (2011) (stating that the most common reason for not revealing psychiatric disability was fear of discrimination).

\textsuperscript{170} Johnson & Joshi, supra note 36, at 436.

\textsuperscript{171} Goldberg, Killeen & O’Day, supra note 22, at 491.


\textsuperscript{174} Illic et al., supra note 61, at 251–52; Corrigan, Kerr & Knudsen, supra note 60, at 180–81.
involvement. In such an environment, revelation can be expected to lead to “enhancing performance, job attitudes, and well-being and fostering more positive and supportive interpersonal relationships.”

The negative decisions made based on such stigma can best be addressed by targeting the attitudes behind those actions. Stigma and stereotypes leading to decreased employment opportunities decreases the opportunity for interpersonal contact between people with hidden disabilities and supervisors or coworkers with prejudices against them. This lack of opportunity unfortunately contributes to the persistence of stigma, where contact with people with psychiatric disabilities has been shown to be the most effective means of reducing intergroup prejudice, especially when the stigmatized person disconfirms the prevailing stereotypes.

Without challenging this reliance on stereotypes, courts have deferred to an employer’s decisions that make certain assumptions about employees with hidden disabilities. Courts’ interpretations of the ADA can be influenced by the stigma against certain disabilities, such as psychiatric disabilities. For example, courts regularly defer to employers’ conclusions that an employee with a psychiatric disability poses a direct threat and can be disciplined or discharged even for misconduct arising because of the person’s disability, without an opportunity to challenge the job-relatedness or necessity of the conduct standard. Courts have long been deferential to employer assumptions regarding an employee’s potential to pose a threat. As one expert noted, “the scientific approach to risk advanced by the ADA has frequently been subordinated to a less rigorous approach characterized by overgeneralization, stereotyping, and other forms of heuristic thinking.” Because of the potential

176. Ilic et al., supra note 61, at 252–54.
181. Wilkinson & Frieden, supra note 151, at 77.
184. Vicki A. Laden & Gregory Schwartz, Psychiatric Disabilities, the Americans with Disabilities Act, and the New Workplace Violence Account, 21 BERKELEY J. EMP. & LAB. L.
stigmatization documented by research and sometime allowed by the courts, it is important to understand how the ADA forces a person with a disability to reveal their hidden disability to start the interactive process and obtain reasonable accommodations.

II. REVELATION REQUIRED TO TRIGGER DUTY TO ACCOMMODATE

As part of the ADA’s requirement that employers provide any employee with a disability with “reasonable accommodations,” an employer must engage in an interactive process. This process should involve communication between the employer and the employee or applicant needing an accommodation regarding what changes are needed in the work environment or the work itself to enable the person with a disability to perform the essential job duties of her position. Once that interaction occurs, an employer still can require that an employee with a disability establish the reasonableness of her request for accommodation through “inquiries into the ability of an employee to perform job-related functions.” The goal of the process should be to determine “the extent of the disability and what accommodations are appropriate and available.” The employer is required to engage in the interactive process in good faith, the absence of which could support a discrimination claim. The interactive process should be flexible and truly interactive so as to allow the employer and the employee to determine the appropriate reasonable accommodation.

246, 264 (2000).
185. 42 U.S.C. § 12112(b)(5)(A) (2009); see, e.g., Williams v. Phila. Hous. Auth. Police Dep’t, 380 F.3d 751, 761 (3d Cir. 2004) (stating that an employer discriminates against qualified individuals with disabilities when they fail to provide reasonable accommodations for known disabilities).
190. Taylor, 184 F.3d at 318.
191. Rehling v. City of Chi., 207 F.3d 1009, 1015–16 (7th Cir. 2000).
A. Revelation to Trigger Employer’s Duty to Interact

The duty to interact is triggered by a specific request for accommodation or an employer’s knowledge that the employee is in need of an accommodation.\textsuperscript{192} The employer only has a duty to interact if it has knowledge of an employee’s need for accommodation,\textsuperscript{193} which can require the disclosure of both the employee’s disability and the accompanying limitations which require accommodation.\textsuperscript{194}

In contrast, an employer need not interact with an employee with a disability of which the employer is unaware.\textsuperscript{195} If, for example, the employer lacks that knowledge, the employer can make a decision to discharge an employee who may subsequently request an accommodation as an alternative to that discipline.\textsuperscript{196} Thus, unless the disability is obvious or otherwise known to the employer, the person with a disability must “inform the employer that an accommodation is needed."\textsuperscript{197}

The employer’s duty to interact in good faith requires a “flexible, interactive process that involves both the employer and the [employee] with a disability."\textsuperscript{198} A good faith effort involves “communication and good-faith exploration,”\textsuperscript{199} designed to “determine the appropriate accommodation under the circumstances.”\textsuperscript{200} The interactive process can be used to identify the employee’s precise limitations and which, if any, accommodations will allow continuation of that employee’s employment.\textsuperscript{201} Thus, an employer may violate the ADA if its failure to

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192. Stanciel v. Donahoe, 570 F. App’x 578, 583 (6th Cir. 2014).
193. Dewitt v. Sw. Bell Tel. Co., 845 F.3d 1299, 1315–16 (10th Cir. 2017); see also Feist v. L. Dep’t of Justice, Office of the Attorney Gen., 730 F.3d 450, 452 (5th Cir. 2013) (stating that employee must establish that “the disability and its consequential limitations were ‘known’ by the covered employer”).
194. See infra notes 206–274 and accompanying text.
197. Waggoner v. Carlex Glass Am., LLC, 682 F. App’x 412, 416 (6th Cir. 2017); see also Jovanovic v. In-Sink-Erator Div. of Emerson Elec. Co., 201 F.3d 894, 899 (7th Cir. 2000) (stating that it is the responsibility of individual with disability to inform employer that accommodation is needed).
199. Kleiber v. Honda of Am. Mfg., Inc., 485 F.3d 862, 871 (6th Cir. 2007); Beck v. Univ. of Wis. Bd. of Regents, 75 F.3d 1130, 1135 (7th Cir. 1996).
201. Gile v. United Airlines, Inc., 213 F.3d 365, 373 (7th Cir. 2000); Jackson v. City of Chi., 414 F.3d 806, 813 (7th Cir. 2005); see also Smith v. Midland Brake, Inc., 180 F.3d 1154, 1172 (10th Cir. 1999) (noting the procedure by which an employer might define the needs associated with an employee’s disability).
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participate in the interactive process “prevented the identification of an accommodation that was reasonable and available.” In the words of one court, the ADA “does not require that the employer know that an accommodation is possible before making reasonable efforts to identify an accommodation.”

At least some courts have recognized that if the employer has some reason to know that the person needs an accommodation, the employer should “meet the employee half-way,” if the employee makes it “clear enough that the employer can infer that the purpose of a request for a particular benefit is to accommodate ‘medical restrictions.’” Thus, the duty to interact could arise even if the employee does not know how to ask for an accommodation. Some courts do not require a request for a specific reasonable accommodation to trigger the employer’s duty to interact, because good faith interaction can reveal accommodations that might enable the person to work. An employer is required to interact so that “together,” the employer and the employee “can determine what reasonable accommodations might be available.” For example, a school district was required to engage in the interactive process to determine whether a teacher could work under the influence of her pain medication. Consistent with this reasoning, an employer was required to fulfill its duty to interact with an employee with dyslexia and memory issues, after the employee asked for continuation of a mentoring relationship, because an employee is “not required to come up with the solution on his own.” Thus, the duty to interact can require that an employer gather information about the specific limitations of the employee who needs an

204. Leeds v. Potter, 249 F. App’x 442, 449 (6th Cir. 2007).
205. See id. (implying that some employees may require special assistance in discerning their need for accommodations).
accommodation.

The interactive process requirement raises several questions related to the risks associated with revealing one’s disability in the workplace. The ADA prohibits employers from asking about an applicant’s disability during the selection process, to protect people with disabilities from the stigma associated with their impairment. At the same time, the ADA allows employers to request medical information related to a request for accommodation. It is this revelation that could expose the requestor of an accommodation to the negative consequences associated with the stigma and stereotypes surrounding psychiatric and developmental disabilities, raising several concerns.

First, certain revelations are required to even trigger the employer’s duty to interact with the applicant or employee seeking an accommodation, including putting the employer on notice that an accommodation is needed and linking that need to one’s disability. Concerns about the impact of stigma and stereotypes also arise from the ability of an employer to request certain medical information to show that an accommodation is related to or necessitated by the person’s disability. Lastly, the duty to interact includes the request for specific medical information that justifies the request for the accommodation sought.

Typically the employer’s duty to interact arises when an applicant or employee requests an accommodation to compensate for her disability. To trigger the duty to interact under the ADA, it must be “clear that the employee wants assistance for his or her disability.” For example, a victim of harassment triggered the duty to interact by requesting accommodations to allow for a “medically safe return to work.” This requirement to interact once the employer is aware of the person’s limitations fulfills the ADA’s prohibition against disqualifying applicants and employees based on stereotypes or generalizations about a disability;

212. Beck v. Univ. of Wis. Bd. of Regents, 75 F.3d 1130, 1137 (7th Cir. 1996).
213. Jones v. United Parcel Serv., 214 F.3d 402, 408 (3d Cir. 2000); see also Conneen v. MBNA Am. Bank, N.A., 334 F.3d 318, 330–31 (3d Cir. 2003) (noting that the employee must have “requested accommodations or assistance for his or her disability”).
instead, the employer should interact to gain information to make decisions “based on the actual disability and the effect that disability has on the particular individual’s ability to perform the job.”

Less specific revelation may be allowed for an employee under special circumstances, such as employees with severe cognitive disability or mental illness, who may be unaware of their limitations or unable to effectively communicate their needs to an employer. For an employee with a mental illness, for example, the employer should both initiate the interactive process and “help the [employee] determine what specific accommodations are necessary.” One court explained that an employer did not fulfill its duty to interact with an employee suffering from bipolar disorder, where it failed to ask for more information about her diagnosis or consult with her doctor about necessary accommodations.

Even if an employee’s disability is hidden, the employer has a duty to interact with that employee if circumstances suggest the employer’s knowledge of the employee’s limitations, e.g., if it “can be fairly said to know of both the disability and desire for an accommodation.” For example, after coaching an employee about his interactions with others, the employer could not claim later that it was unaware that his ability to interact with others was impaired. Similarly, if the employer should have known about the disability, the employer has a duty to engage in the interactive process regarding potentially reasonable accommodations.

Some notice of an employee’s disability puts the onus on the employer to “ask follow-up questions.” Thus, an employer’s awareness

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216. See Cloe v. City of Indianapolis, 712 F.3d 1171, 1179 (7th Cir. 2013) (detailing how an employee was unable to proofread her own work).
218. Bultemeyer v. Fort Wayne Cmty. Sch., 100 F.3d 1281, 1285–86 (7th Cir. 1996); see also Taylor v. Phoenixville Sch. Dist., 184 F.3d 296, 313 (3d Cir. 1999) (clarifying that both parties have a duty to assist in the search for appropriate reasonable accommodation and to act in good faith); Barnett v. U.S. Air, Inc., 228 F.3d 1105, 1113 (9th Cir. 2000) (emphasizing that the interactive process is the “primary vehicle for identifying and achieving effective adjustments which allow disabled employees to continue working” and is essential to accomplishing the goals of the ADA).
221. Taylor, 184 F.3d at 313.
223. Brady, 531 F.3d at 135–36; see also Mosby-Meachem v. Memphis Light, Gas & Water Div., 883 F.3d 595, 603 (6th Cir. 2018) (highlighting that the duty arises if employer had reason to know about disability).
that the employee seeking an accommodation is suffering from a mental illness can trigger its duty to interact.225 Similarly, the duty to interact may be triggered by a request for an exception or adjustment to an employer’s practices that is sufficiently linked to the employee’s disability.226 For example, the duty to interact could be triggered by an employee telling the employer about her general diagnosis, even without revelation of her treatment plan or restrictions.227

In contrast, vague or conclusory statements revealing an employee’s unspecified incapacity may be insufficient to trigger an employer’s duty to interact.228 Claims are commonly dismissed because an employer is not required to speculate “as to the extent of the employee’s disability or the employee’s need or desire for an accommodation.”229 For example, when a manager with bipolar disorder requested a shortened work schedule but failed to disclose his condition, his employer had no duty to interact with him because it would be too demanding for the employer to make an inference of disability.230 Courts have explained, in fact, that employers should not speculate, because employers should not assume that an employee is disabled or needs accommodation.231

Knowledge of an employee’s limitations alone will not trigger the duty to interact.232 For example, an employer was not required to interact with an employee known to have a reading problem who had mentioned a potential learning disability, because the employer lacked actual knowledge

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225. Taylor, 184 F.3d at 314.
228. See, e.g., Morisky v. Broward Cty., 80 F.3d 445, 448 (11th Cir. 1996) (referencing employee’s inability to read and take special education courses did not put employer on notice that applicant had a disability requiring interaction regarding any accommodation).
230. Taylor v. Principal Fin. Grp., 93 F.3d 155, 165 (5th Cir. 1996). See also Jones v. Blue Cross Blue Shield of La., No. 16-340-JWD-RLB, 2018 U.S. Dist. LEXIS 13544, at *23–24 (M.D. La. Jan. 29, 2018) (informing employer of symptoms was insufficient to constitute a request for accommodation linked to a specific disability); Reifer v. Colonial Intermediate Unit 20, 462 F. Supp. 2d 621, 635–36 (M.D. Pa. 2006) (finding doctor’s note saying employee would not return to work was insufficient to trigger duty to interact).
231. Waggoner, 682 F. App’x at 416.
232. Morisky, 80 F.3d at 448.
of her disability. The dismissal of this claim was based on precedence that “[v]ague or conclusory statements revealing an unspecified incapacity are not sufficient to put an employer on notice of its obligations under the ADA.” In addition, an employee’s aberrant behavior alone will not place the employer on notice of a mental impairment, unless the behavior is “sufficiently drastic to send a message that the employee needs help.”

Conduct unrelated to a specific disability, such as calling in sick or using family and medical leave for an unspecific medical condition, is insufficient to trigger the employer’s duty to consider that time off as an accommodation. In contrast, an employee who requested to telecommute triggered that employer’s duty to engage in the interactive process, where the employer admitted that it had notice of his disability. Even sharing information about one’s limitations without referencing a specific disability may be insufficient to trigger the duty to interact, because the employee must show that her limitations are the result of her disability. For example, a pilot failed to establish knowledge sufficient to trigger an airline’s duty to accommodate his anxiety disorder, despite his admission regarding his loss of confidence, because he never linked that limitation to his disability. Just as an employer should not assume that an employee has an impairment, an “employer is not required to speculate as to the extent of the employee’s disability or the employee’s need or desire for an accommodation.”

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234. Morisky, 80 F.3d at 448.
238. Taylor v. Principal Fin. Grp., 93 F.3d 155, 164 (5th Cir. 1996); Hammon v. DHL Airways, Inc., 165 F.3d 441, 450 (6th Cir. 1999).
240. Hammon, 165 F.3d at 449–50. See also Van Compernolle v. City of Zeeland, No. 1:05-CV-133, 2006 U.S. Dist. LEXIS 32963, at *40 (W.D. Mich. May 24, 2006) (finding employer not required to retain plaintiff “on the chance that his . . . errors were caused by a disability” when diagnosis occurred after discharge); Patton v. Jacobs Eng’g Grp., Inc., 874
A person seeking to trigger the duty to interact must provide fairly specific information about her disability. For example, an employer’s duty to interact was not triggered by an employee’s reference to a panic attack two year’s prior, in addition to doctor’s notes lacking reasons for the employee’s absences, and a statement to her supervisor that she was “stressed.” That court reasoned that “without a diagnosis from a doctor or more specific information” about the employee’s disability, the employer “could not have been expected to determine that stress, even severe stress, amounts to clinical anxiety.” Likewise, an employer was not required to interact about accommodating an employee’s PTSD despite its manager’s knowledge that he had problems sleeping, noise at work made him “uncomfortable and uptight,” and he took two different weeks off due to stress after negative events at work, the second of which he submitted a doctor’s note with a diagnosis of “acute stress adjustment reaction.” Similarly, requiring EAP counseling or psychiatric treatment, or even placing an employee on short term disability, did not establish that their employers should have known they had a disability.

While this requirement to reveal specific medical information to
trigger the employer’s duty to interact may prevent inappropriate or burdensome speculation by an employer, it also creates a dilemma for people with hidden disabilities who need accommodations but fear stigmatization based on their disability. These decisions demonstrate, at a minimum, that employees seeking accommodation must ensure that their employer is aware that they have a disability that requires accommodation. Simply making an employer aware of one’s limitations, for example, will not even trigger the employer’s duty to interact. The next section discusses how some courts go much farther, requiring more detailed information or even medical documentation about the extent of the employee’s impairment.

1. Revelation of Medical Information

To trigger the employer’s duty to interact, a person with a disability may be required to reveal specific medical information to “identify the precise limitations resulting from the disability and potential reasonable accommodations that could overcome those limitations.” This revelation of detailed medical information has been justified by the ADA’s emphasis on accommodating limitations, not disabilities. This requirement may be logical because the limitations associated with a disability vary among individuals, and even common limitations may only impact the employee’s ability to perform certain jobs. Therefore, employees seeking accommodations have been required to provide “the reason that [her] disability requires an accommodation,” if that reason is not obvious, to enable the employer to “identify potential effective accommodations.”

Requiring detailed medical information to trigger a duty to interact regarding a potential accommodation raises concerns about stigma. As one court explained, an employee may have good reason to resist revealing detailed medical information which “could be embarrassing, and might actually exacerbate workplace prejudice.” Following this reasoning, some courts have held that an employer does not need to know the intimate details of an employee’s personal life to identify or justify

an accommodation in the workplace. Likewise, some experts have argued that sharing information about one’s disability alone should be sufficient to trigger the duty to interact; that process can then be used to explore the extent of the employee’s limitations and how those limitations can be accommodated.

Despite these concerns about the effects of revealing one’s disability, some courts will not force an employer to interact if the employee or applicant fails to provide “relevant details” about the impairments connected to their disability. For example, an employee who informed his employer about his bipolar and anxiety disorders failed to trigger his employer’s duty to interact because he did not inform his employer of the specific limitations caused by his disability, even though the employer knew that his disability affected his productivity. Similarly, two different employers were not required to interact about possible accommodations for employees who submitted doctors’ notes stating that the employees had dyslexia and major depression, respectively, without information regarding the employees’ specific limitations requiring accommodation.

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249. Id. at 315.
251. 29 C.F.R. pt. 1630, app. (2016); Convergys, 491 F.3d at 795. See, e.g., Gammage v. W. Jasper Sch. Bd. of Educ., 179 F.3d 952, 954–55 (5th Cir. 1999) (finding physician’s letter stating that teacher with kidney failure had to undergo dialysis without mentioning any work restrictions did not trigger school district’s duty to accommodate); Chapman v. UPMC Health Sys., 516 F. Supp. 2d 506, 532 (W.D. Pa. 2007) (determining employer’s knowledge of employee’s “physical ailments” in connection with her request for part time work was insufficient to trigger duty to interact); Feist v. La. Dep’t of Justice, Office of the Attorney Gen., 730 F.3d 155, 164 (5th Cir. 1996) (finding no duty to interact where employee mentioned that he suffered from mental illnesses, yet never stated that this prevented him from doing his job); Hill v. Kansas City Area Transp. Auth., 181 F.3d 891, 894 (8th Cir. 1999) (stating public transportation authority did not fail to accommodate bus driver with high blood pressure by failing to identify medications that would not cause drowsiness).
In stark contrast to this approach, other courts have been less stringent in their revelation requirements to trigger the interactive process. Once the employer has some information about the employee’s disability, some courts have placed the burden on the employer to request additional information regarding an employee’s need for accommodation.\textsuperscript{254} If an employer is aware of an employee’s impairments it could “initiate a conversation with her about how to support her” as part of its duty to interact in good faith.\textsuperscript{255} Going one step farther, an employer could contact the employee’s doctor to gain more information regarding the need for a potential accommodation.\textsuperscript{256} The employer may have a greater obligation to seek out medical information where the person seeking the accommodation suffers from a psychiatric disability,\textsuperscript{257} or arguably any other impairment that limits her ability to communicate with her employer.

Under this line of reasoning, notice of an employee’s disability without specific medical information could trigger the interactive process, during which the employer can seek additional information.\textsuperscript{258} In fact, one purpose of the interactive process is to allow the employer “to identify the precise limitations resulting from a disability and potential reasonable accommodations that could overcome those limitations.”\textsuperscript{259} Under this requirement, one employer had the duty to interact with an employee who made his supervisor aware of his anxiety disorder, which had affected his past interactions with his supervisor.\textsuperscript{260} However, it should be noted that an employer cannot require medical information if, for example, the employer was creating “artificial hoops” for the employee to jump through “to avoid an actual discussion of reasonable accommodations.”\textsuperscript{261}

\textsuperscript{254} Armstrong v. Burdette Tomlin Mem’l Hosp., 438 F.3d 240, 247 (3d Cir. 2006).


\textsuperscript{256} Id.

\textsuperscript{257} Sam Silverman, The ADA Interactive Process: The Employer and Employee’s Duty to Work Together to Identify a Reasonable Accommodation Is More than a Game of Five Card Stud, 77 NEB. L. REV. 281, 298 (1998). See, e.g., Bultemeyer v. Fort Wayne Cmty. Sch., 100 F.3d 1281, 1285 (7th Cir. 1996) (holding employer had duty to continue interactive process with employee with psychiatric disability by inquiring about conditions at work that were stressful, what changes were needed).

\textsuperscript{258} Taylor v. Phoenixville Sch. Dist., 184 F.3d 296, 314–17 (3d Cir. 1999).

\textsuperscript{259} Mosby-Meachem v. Memphis Light, Gas & Water Div., 883 F.3d 595, 605–06 (6th Cir. 2018); Rorrer v. City of Stow, 743 F.3d 1025, 1040 (6th Cir. 2014).


These decisions demonstrate the level of detail that an employee may be required in some jurisdictions to provide regarding both her disability and the accompanying limitations before her employer is even required to interact regarding the reasonableness of the accommodation she seeks. Requiring such detailed information may enhance a person’s fears that requesting an accommodation will result in their stigmatization in the workplace.\footnote{See supra notes 50–52 and accompanying text.}

2. Revelation of Connection between Accommodation & Disability

In addition to detailed medical information, an employer need only interact about an accommodation that is connected with or because of the requestor’s disability,\footnote{Waggoner v. Carlex Glass Am., LLC, 682 F. App’x 412, 416 (6th Cir. 2017); Tennial v. United Parcel Serv., Inc., 840 F.3d 292, 307 (6th Cir. 2016). See also Nunez v. Lifetime Prods., Inc., 725 F. App’x 628, 632 (10th Cir. 2018) (stating that an employee’s notice or request for accommodation must specify that the employee wants assistance for his or her disability); Judge v. Landscape Forms, Inc., 592 F. App’x 403, 407 (6th Cir. 2014) (“[The employee] must make it clear that the request is being made because of the employee’s disability.”) (citation omitted).} i.e., “for a medical condition-related reason.”\footnote{Equal Emp. Opportunity Comm’n v. Chevron Phillips Chem. Co., 570 F.3d 606, 621 (5th Cir. 2009).} Establishing a connection between the employee’s limitations and a disability has been deemed “particularly important” for people with a psychiatric disability,\footnote{Patton v. Jacobs Eng’g Grp., Inc., 874 F.3d 437, 445 (5th Cir. 2017). See also Taylor v. Principal Fin. Grp., 93 F.3d 155, 165 (5th Cir. 1996) (“Where the disability, resulting limitations, and necessary reasonable accommodations, are not open, obvious, and apparent to the employer, as is often the case when mental disabilities are involved, the initial burden rests primarily upon the employee . . . to specifically identify the disability and resulting limitations.”).} the symptoms of which can be confused with aberrant behavior not tied to a disability. For example, an employee’s rudeness was not a clear indication of bi-polar disorder that may have triggered the duty to interact.\footnote{Crandall v. Paralyzed Veterans of Am., 146 F.3d 894, 898 (D.C. Cir. 1998). See also Grunberg v. Quest Diagnostics, Inc., No. 3:05-cv-1201(VLB), 2008 U.S. Dist. LEXIS 8205, at *13 (D. Conn. Feb. 5, 2008) (holding that an employee’s appearing “stressed” was insufficient to put her employer on notice that she suffered from depression); Brown v. Pension Bds., 488 F. Supp. 2d 395, 406 (S.D.N.Y. 2007) (“[Employee’s] mother’s comment that [he] was in a ‘breakdown condition,’ without any reference to hospitalization or any medical attention he was receiving, did not put [his employer] on notice that [he] had a diagnosed mental condition constituting a disability.”); Santiago v. N.Y.C. Police Dep’t, No. 05 Civ. 3035(PAC)(MHD), 2007 U.S. Dist. LEXIS 91880, at *20 (S.D.N.Y. Dec. 14, 2007) (holding that an employee’s aberrant behavior and self-diagnosis without a formal medical evaluation, without any attempt at self-improvement, and without seeking professional help for his condition, did not establish that the employee’s condition was a disability).}

Relying on this same reasoning, an
employer had no duty to accommodate an employee with known PTSD and known performance issues, even though his supervisor was aware that he suffered from anxiety, which prevented him from performing some of his duties.\textsuperscript{267} That employer had no duty to interact because these facts would not allow a jury to infer the supervisor’s knowledge of the “limitations experienced by the employee as a result of [his] disability.”\textsuperscript{268}

Without sufficient information connecting a request for accommodation with an impairment, the employer can avoid the interaction requirement.\textsuperscript{269} For example, an employer was not required to interact with an employee with bipolar disorder because he applied to work on a particular job where the employee did not indicate that the request was to avoid triggering his symptoms, and other reasons could have explained that request.\textsuperscript{270} Likewise, a court expressed doubt that a Ford employee provided sufficiently specific information to constitute a request for accommodation when he told a manager and a supervisor that he was diagnosed with PTSD, he “had to take a medical leave because of it,” and the workplace “could cause [him] anxiety or flashbacks.”\textsuperscript{271} This court relied heavily on the employee’s failure to establish that the requested presence of a support dog would alleviate his stress in the workplace, even though the employer had refused to allow him to bring the dog to work.\textsuperscript{272}

Similarly, the employee who notified her supervisor about her anxiety failed to make a sufficient connection between her disability and her request for leave as an accommodation when she told her supervisor that she needed time off because she was being evicted.\textsuperscript{273} The employer’s diagnosis were insufficient to put his employer on notice that he was suffering from depression).}


\textsuperscript{268} Id. at *33.


\textsuperscript{270} Waggoner v. Carlex Glass Am., LLC, 682 F. App’x 412, 416 (6th Cir. 2017).


\textsuperscript{273} Parker v. Comcast Cable Commc’ns Mgmt., LLC, No. 15-cv-05673-THE, 2017 U.S. Dist. LEXIS 80637, at *13 (N.D. Cal. May 25, 2017). See also Nunez v. Lifetime Prods., Inc., 725 F. App’x 628, 632 (10th Cir. 2018) (holding that a request to sit to improve
knowledge that the employee was “stressed” and had absences excused by a doctor for “unspecified reasons” was insufficient to put the employer on notice that the employee had a disability or was in need of an accommodation, because “observations of stress” and doctors’ notes without any reason for the time off of work did not provide the employer with knowledge of a disability. These decisions demonstrate that without revelation of significant details about the employee’s limitations associated with her disability and the requested accommodation, the employer can refuse to interact, and instead assume that the requested accommodation is not required by the ADA.

An employee’s failure to provide clarifying medical information, even out of fear of stigmatization, can end the employer’s duty to interact. For example, an employer was not obligated to accommodate or even continue with the interactive process after an employee’s physician refused to respond to the employer’s request for clarification of the employee’s medical restrictions. Similarly, an employee at a chemical plant failed to continue the interactive process, and thereby lost her right to be accommodated, when she failed to provide sufficient information from her health care provider to clarify an earlier statement that she could not be efficient with only vague reference to a back impairment was an insufficient request for accommodation); Dantzler v. Ga. Ports Auth., No. CV417-062, 2018 U.S. Dist. LEXIS 219030, at *13–14 (S.D. Ga. Nov. 29, 2018), rep. adopted, 2019 U.S. Dist. LEXIS 4897, at *4–5 (S.D. Ga. Jan. 10, 2019) (finding that an employee’s request for a private work space and additional training was not connected to her ADHD diagnosis); Joyce v. Cleveland Clinic Found., No. 1:13CV011224, 2014 U.S. Dist. LEXIS 137477, at *27–29 (N.D. Ohio Sept. 29, 2014) (stating that an employee’s anxiety and PTSD was not sufficiently linked to her request to work separately from a coworker who had stalked her).

274. Parker, 2017 U.S. Dist. LEXIS 80637, at *11–12. See also Morisky v. Broward Cty., 80 F.3d 445, 448 (11th Cir. 1996) (determining that information revealing an employee’s illiteracy and history of special education classes was insufficient to put her employer on notice of her developmental disability); Bellerose v. SAU #39, No. 13-cv-404-PB, 2014 U.S. Dist. LEXIS 177718, at *13 (D.N.H. Dec. 29, 2014) (holding that an employee failed to link his Asberger’s Disorder to discipline he received for communication issues associated with his disability); Stanciel v. Donahoe, No. 11-11512, 2013 U.S. Dist. LEXIS 65251, at *17–18 (E.D. Mich. May 8, 2013) (finding no connection between an employee’s tardiness and absences and a disability where the employee told his employer that they were caused by transportation issues).

275. See generally Steffes v. Stepan Co., 144 F.3d 1070, 1073 (7th Cir. 1998) (stating that an employee who submitted an incomplete doctor’s note was obligated “to explain the nature of the job to her doctor and to obtain a more comprehensive release letter”).

exposed to chemicals. The employee had an obligation “to update or further clarify the kinds of work she could do and the level of chemical exposure, if any, she could tolerate.”

Without sufficient documentation that substantiates the employee’s need for an accommodation, an employer is not required to provide that accommodation or even continue its interaction with the employee or applicant. An employee’s failure to provide requested medical information is commonly used to justify either an employer’s termination of the interactive process and/or the employee’s discharge. An employee may be responsible for the breakdown of the interactive process if she fails to provide information “of the type that can only be provided by one of the parties.” Such a breakdown of the interactive process prevents an employer from determining whether a reasonable accommodation could be provided.

In contrast to these strict requirements, some courts have required an employer to interact based on knowledge of at least some relationship between the employee’s impairment and the requested accommodation. For example, an employer had a duty to interact with an employee who told her supervisor that her work performance would improve “if it were not for the stress” caused by the conditions in a performance improvement plan.

277. Steffes, 144 F.3d at 1072–73.
278. Id. at 1072. See also Brown v. Milwaukee Bd. of Sch. Dirs., 855 F.3d 818, 824 (7th Cir. 2017) (holding that a school was not liable for failing to accommodate a transfer request where an assistant principal did not provide requested clarification as to why she could not be near “unruly students”); Youngman v. Kouri, No. 16-cv-1005, 2018 U.S. Dist. LEXIS 108027, at *40–43 (C.D. Ill. June 28, 2018) (finding that an employee was responsible for a breakdown in the interactive process by failing to provide clarification of his doctor’s restrictions); Salmon v. W. Clark Cnty. Sch., 64 F. Supp. 2d 850, 863 (S.D. Ind. 1999) (maintaining that an employer was not responsible for obstructing the interactive process based on the employee’s refusal to provide a copy of her medical charts).
280. See, e.g., Steffes, 144 F.3d at 1073 (noting that where an employee “fails to hold up her end of the interactive process by clarifying the extent of her medical restrictions, [her employer] cannot be held liable for failing to provide reasonable accommodations”); Equal Emp’t Opportunity Comm’n v. Prevo’s Family Mkt., Inc., 135 F.3d 1089, 1096 (6th Cir. 1998) (finding that no discrimination occurred where an employee failed to provide medical information from his personal physician and refused to submit to a company-paid examination).
281. Beck v. Univ. of Wis. Bd. of Regents, 75 F.3d 1130, 1136 (7th Cir. 1996). See also Templeton v. Neodata Servs., Inc., 162 F.3d 617, 619 (10th Cir. 1998) (holding that an employee’s failure to provide a requested physician’s certification defeated her claim that her employer failed to reasonably accommodate her disability).
282. Templeton, 162 F.3d at 619.
Similarly, a victim of harassment triggered the duty to engage in the interactive process by providing a request for “a medically safe return to work” based on her “physical and emotional anguish.”

Likewise, an employee with a compromised immune system, susceptible to stress and anxiety, triggered his employer’s duty to interact by making his symptoms known and requesting certain accommodations to reduce his stress.

Similarly, a school was required to interact regarding an accommodation request for a transfer for a teacher whose doctor had made it clear that a transfer was warranted because of her PTSD, and where her decline in performance put the district “on notice” that the accommodation was needed.

This court also noted that if there was any question about whether a transfer was still desired as an accommodation, the employer should have requested a clarification from the employee.

These employees all provided some detailed information about their impairment to establish its connection to the requested accommodation so as to trigger the employer’s duty to interact.

These decisions demonstrate that to even trigger an employer’s duty to interact, the employee seeking an accommodation must reveal not only her disability, but information connecting that disability to the accommodation she seeks. This places a heavy burden on the employee or applicant to reveal detailed information about her impairment and to establish the connection between that impairment and the accommodation she seeks.

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5, 2007) (finding that an employer had a duty to interact with a diabetic employee who asked for a shift change and handicapped parking spot).


285. Hutcherson v. Siemens Indus., No. 3:17CV907TSL-RHW, 2018 U.S. Dist. LEXIS 162873, at *21–22 (S.D. Miss. Sept. 24, 2018). See also Kowitz v. Trinity Health, 839 F.3d 742, 745, 747 (8th Cir. 2016) (requiring an employer to interact with an employee returning from surgery who listed her limitations on her Return to Work Form and informed her employer that she would not be able to complete the requisite certification until after physical therapy); Smith v. Henderson, 376 F.3d 529, 535 (6th Cir. 2004) (maintaining that an employer’s duty to interact was triggered where the employer knew about the employee’s disability and prior need to work restricted hours).

286. Lawler v. Peoria Sch. Dist. No. 150, 837 F.3d 779, 783, 786–87 (7th Cir. 2016).

287. Id. at 787–88. See also Spurling v. C&M Fine Pack, Inc., 739 F.3d 1055, 1061–62 (7th Cir. 2014) (holding that an employer had a duty to collaborate with an employee or her physician to find a reasonable accommodation once the employer received notice of the employee’s disability in her submitted medical evaluation).
B. Revelation to Justify the Accommodation

Even if the employee or applicant reveals enough information about her disability and its connection to her need for accommodation to trigger the employer’s duty to interact, an employer can require that an employee with a disability submit even more extensive information to support the reasonableness of her request for accommodation. The ADA allows employers to “make inquiries into the ability of an employee to perform job-related functions.” Moreover, courts have suggested that seeking information about the employee’s condition and her limitations is part of the duty to interact in good faith. In fact, an employer may fail to fulfill that duty to interact by “choosing not to follow up on an employee’s requests for assistance, or by intentionally remaining in the dark.” An opportunity to provide objective evidence of the need for accommodation may be beneficial to employees or applicants who would otherwise be assumed to be unqualified, with or without accommodation.

The ADA restricts requests for medical information during the application process, and an employer cannot require current employees to undergo a medical examination, or otherwise inquire as to the nature or severity of an employee’s disability “unless such examination or inquiry is shown to be job-related and consistent with business necessity.” Likewise, in response to a request for accommodation, an employer should only seek documentation that is needed to establish that a person has an ADA disability, and that the disability necessitates a reasonable accommodation. A request for medical information typically will be appropriate where the employee can limit the information disclosed by type

289. See Taylor v. Phoenixville Sch. Dist., 184 F.3d 296, 317 (3d Cir. 1999) (“Employers can show their good faith in a number of ways, such as... request[ing] information about the condition and what limitations the employee has.”). See also Booth v. Nissan N. Am., Inc., No. 3:17-cv-00755, 2018 U.S. Dist. LEXIS 139882, at *10–11 (M.D. Tenn. Aug. 17, 2018) (noting that employers’ ability to request medical information related to an employee’s qualifying condition is consistent with their requirement to engage in an “interactive process”); Williamson v. Bon Secours Richmond Health Sys., 34 F. Supp. 3d 607, 613 (E.D. Va. 2014) (holding that an employer’s demand for a doctor’s note supporting an employee’s request for a schedule change accommodation fell in line with the ADA’s expectations for employers).
292. Id.
of condition and time period,\textsuperscript{294} and information which relates to the person’s ability to perform the job.\textsuperscript{295}

The need for the employee to establish a need for accommodation raises the question of how much information the employee must reveal. An employer can request “enough information” “to know of both the disability and desire for an accommodation.”\textsuperscript{296} Even so, a health care provider can confirm the existence of a disability and the employee’s need for accommodation “without revealing intimate or potentially embarrassing psychiatric traits or symptoms.”\textsuperscript{297} Medical inquiries can exceed the scope of their business necessity justification when the inquiry is based on curiosity as to the underlying medical cause of an employee’s behavior.\textsuperscript{298}

If an employer questions the medical evidence provided by the employee seeking an accommodation, the employer should give the employee an “opportunity to address the employer’s concerns about the employee’s supported medical diagnoses” as part of the duty to interact in good faith.\textsuperscript{299} An employer should not discount information from an employee’s health professional regarding the existence of a disability or the need for accommodation “without giving the employee the opportunity to address the employer’s concerns” about that information.\textsuperscript{300} In fact, the interactive process could include the employer paying for the employee’s health care provider to complete a thorough medical assessment of her abilities to perform the work duties of her position.\textsuperscript{301} Similarly, when an employer receives medical information calling into question the employee’s ability to perform the essential job duties of the position in question, the employer should still contact the employee to continue the interactive process to discuss the impact of the medical information and to ascertain whether the employee still seeks an accommodation.\textsuperscript{302}


\textsuperscript{296} Kowitz v. Trinity Health, 839 F.3d 742, 745, 748 (8th Cir. 2016). \textit{See also} Proctor, \textit{supra} note 235, at 71 (stating that an employer can require enough information to allow understanding of the employee’s needs and limitations).

\textsuperscript{297} Center, \textit{supra} note 22, at 12.


\textsuperscript{300} \textit{Id.} at *46.

\textsuperscript{301} Silverman, \textit{supra} note 257, at 299.

\textsuperscript{302} Kottke v. Petsmart, Inc., No. 16C8849, 2018 U.S. Dist. LEXIS 112433, at * 7 (N.D.
Requirements to disclose medical information during the accommodation process should be guided by the ADA’s privacy protections for current employees. An employer’s requirement that current employees disclose medical information must “genuinely serve[] the asserted business necessity” and be “no broader or more intrusive than necessary.” Such a business necessity can be based on an employer’s “genuine reason to doubt” that the employee requesting an accommodation can perform job-related functions, or some evidence of a lack of characteristics related to the position.

Because the request for medical information about current employees relies on the job-relatedness and business necessity standard, judicial review of such requests provides guidance for the scope of information an employer should seek to justify an accommodation. Employers typically have been able to establish job-relatedness of a medical examination of a current employee based on some “level of medical and psychological fitness commensurate with the essential functions of their positions.” For example, a medical examination can be justified under the job-relatedness standard based on an employee’s erratic or unusual behavior or the use ofleave related to diagnoses of some impairment. However, not all unusual behavior by a current employee has been sufficient to establish the job-relatedness and business necessity of the examination.


305. See Pesterfield v. Tenn. Valley Auth., 941 F.2d 437, 441–42 (6th Cir. 1991) (explaining that an exam is warranted based on signs of continuing anxiety after leave); Weigert v. Georgetown Univ., 120 F. Supp. 2d 1, 14 (D.D.C. 2000) (stating that an exam can be required to measure stability and ability to interact with co-workers).
308. Mickens v. Polk Cty. Sch. Bd., 430 F. Supp. 2d 1265, 1279 (M.D. Fla. 2006). See also Brownfield v. City of Yakima, 612 F.3d 1140, 1145–46 (9th Cir. 2010) (highlighting that an officer’s highly emotional responses showed need for fitness for duty examination); Wisbey v. City of Lincoln, 612 F.3d 667, 673–74 (8th Cir. 2010) (finding that it is a valid suspicion that depression prevented emergency dispatcher from performing duties when the job required alertness at all times); Coursey v. Univ. of Md. E. Shore, 577 F. App’x 167, 173 (4th Cir. 2014) (holding that a health examination was justified when a college professor made inappropriate comments and exhibited other erratic and unprofessional behavior, based on a duty to instruct, supervise, and interact with students and faculty in a professional and non-threatening manner); Thomas v. Corwin, 483 F.3d 516, 527 (8th Cir. 2007) (holding that anxiety shown by juvenile facility employee justified psychological examination).
309. See, e.g., Harris v. Harris & Hart, Inc., 206 F.3d 838, 844 (9th Cir. 2000) (finding that a leave for physical impairment combined with a request for an accommodation prior to the leave justified medical examination before the employee was permitted to return to work).
relatedness of a medical examination. 310 For example, a medical examination was not necessarily justified for a professor who yelled at students. 311

In addition to being job related, requests for medical information must fulfill a business necessity. 312 To avoid basing requests for medical information on stereotypical assumptions about applicants with disabilities, 313 the ADA requires “objective evidence” to support an employer’s request for medical information. 314 An employer can show a business necessity for requiring a medical examination based on “good reason to be doubtful of [the employee’s] abilities,” 315 or “significant evidence that could cause a reasonable person to inquire as to whether an employee is still capable of performing his job.” 316 This same justification should be applied to requests for information to justify a request for accommodation, because the same privacy interests are at stake.

In addition to requiring some justification for a request, an employee seeking accommodation should not be required to disclose medical information to “more persons than those necessarily involved in the evaluation of the application.” 317 The EEOC’s Enforcement Guidance recognizes that employers may need medical information to make decisions about reasonable accommodations for the individual, but the information must be kept confidential. 318 To that point, the EEOC suggests that such

310. See, e.g., Kroll v. White Lake Ambulance Auth., 763 F.3d 619, 621–22 (6th Cir. 2014) (holding that an affair with a coworker did not justify the need for a medical examination of a current employee).


316. Sullivan v. River Valley Sch. Dist., 197 F.3d 804, 811 (6th Cir. 1999). See also Terry v. City of Greensboro, No. 1:02CV00221, 2003 U.S. Dist. LEXIS 869, at *4 (M.D. N.C. Jan. 17, 2003) (stating that mental and physical examinations relate to essential functions of the job and are preconditions to returning to work if supported by reasonable belief about plaintiff’s capabilities); Nichols v. City of Mitchell, 914 F. Supp. 2d 1052, 1061–62 (D.S.D. 2012) (holding that the city needed to show that a reasonable person would have cause to require more extensive medical examination of bus drivers).


medical information should only be shared with “individuals involved in the hiring process . . . who need to know the information.” Thus, an employer should not require release of medical information to “any affiliate or representative of [the employer] or persons performing business or legal services on its behalf” unless the employer can show that such a broad disclosure constitutes a business necessity. Instead, medical information should only be released to those persons “necessarily involved in the evaluation” of the information related to the business purpose for requesting it.

An employer can avoid ADA liability by limiting an inquiry to an independent health professional to the question of whether the employee being tested could perform the duties of her position. Similarly, an employer should only require that a doctor certify that an employee who has used sick leave “was incapable, due to illness, of performing his duties during a specific period, and that the employee is now fit to resume his duties;” the employer should not have required the doctor to describe the specific nature of the illness or treatment. Likewise, the limitation of a medical background to a specific, relevant period of time helps to establish its business necessity in determining whether an employee can perform his job duties.

In contrast to these decisions limiting the requisite disclosure of medical information, other courts have refused to find a violation of the ADA based on policies requiring some disclosure. Courts have allowed employer policies that employees provide a note explaining the nature of their illness from their attending physician to their immediate supervisor, reasoning that the ADA permits any agent of the employer, including a supervisor, to make medical inquiries and receive medical information, at least where those supervisors were prohibited from sharing or disseminating any of that confidential information.

321. Id. at *6.
324. Id. at 451–52.
These ADA decisions place a heavy burden on the employee seeking accommodation to reveal both the existence of her disability, even if it is otherwise hidden, as well as the limitations associated with that disability that affect her ability to work. Without such a revelation, the employer has no duty to even interact about possible accommodations. In addition, the employee must demonstrate, through additional details about her disability, that the requested accommodation is connected or related to the limitations of her disability. To verify that the employee truly needs the requested accommodation, the employer can then require medical information from the employee’s health care provider. Despite the ADA’s requirement that requests for medical information be job-related and a business necessity, courts reviewing requests for accommodation have paid little attention to the employee’s interest in limiting how much medical and other personal information is required and with whom it is shared.

III. EMPLOYERS’ PRACTICES AFFECTING STIGMATIZATION

Well-meaning employers sometimes adopt practices or policies that aggravate the conflict between the potential stigmatization if an employee or applicant reveals a hidden disability and the ADA’s requirement that people seeking accommodations reveal extensive information about their disability. Our review of the publicly-available accommodation policies of the Fortune 100 companies in the United States and an opportunity survey of a varied group of seventy-five employers reveals some such policies and practices. First, many employers fail to encourage requests for accommodations by applicants and employees because of the process adopted to initiate the request for accommodations. Secondly, employers sometimes fail to control the sharing of the medical information of people with disabilities during the accommodation process or fail to assure people with disabilities that such controls are in place. These findings present opportunities to both encourage requests for accommodation and reduce the potential stigmatization of people seeking accommodations for hidden disabilities.

Our review of Fortune 100 companies in the United States was conducted by searching the websites of those companies for any information about the accommodation process for applicants, employees, or both. We recognize that additional information may be provided to employees with disabilities after their hire, but would encourage employers to medical information from employee entrance examinations when relevant to employee’s failure to reveal prior injury).
to make that information available to any potential applicant to encourage applications from people with disabilities who may need accommodations to succeed.

Our survey was sent to employers from across the United States with some prior affiliation with Michigan State University, including alumni and participants in human resources continuing education. While recognizing that this survey may not be representative of all employers in the United States, the responses from seventy-five employers provides some insight into the accommodation policies and practices of those employers.

A. Encouraging Requests for Accommodation

We conducted a thorough search for the accommodation-related notifications and policies of Fortune 100 companies in the U.S by reviewing their websites which are accessible to the public. We considered the process of initiating the accommodation with respect to guidance provided to applicants or employees, the point of contact for the person with a disability, and the amount of information required. We also considered the request for medical information as part of the accommodation process, including who has access to that information and whether employees are provided with any assurances as to its confidentiality.

1. Initiating the Accommodation Process

Of the 100 publicly available sites of Fortune 100 companies, twenty-two did not provide any information on how to begin requesting or obtaining an accommodation with that employer, and an additional twenty-seven employers provided online information on accommodations for the application process only. While more detailed information may be available to current employees, the employers’ failure to include such information on the employer site available to applicants could easily deter people with disabilities from applying.

With respect to initiation of the accommodation process, we analyzed in more depth the Fortune 100 companies which provided some information on how to initiate the process. Of those seventy-eight employers, eight employers provided only an email address and three provided only a telephone number to use to request an accommodation. Twelve employers provided both means of contact; three of those employers also provided an online form. Nine employers required people seeking an accommodation to complete an online form to initiate their
request, without indicating the identity of the recipient of that form, and five of those nine forms required identification of the person’s diagnosis and/or other medical information. Some Fortune 100 employers use other processes to initiate the accommodation process. Two employers required initial contact with human resources; three allowed the person to contact human resources or a supervisor/manager, whereas three employers required a direct request for accommodation to a supervisor or manager.

Next steps to obtain an accommodation, after the initial contact described above, also varied across the fifteen employers which provided that information. Four of the employers providing an email and/or phone contact and three employers providing an online form indicated that the next step would be contact from the employer’s human resources department. Contact with a supervisor or manager was the next step for one employer, and one employer that required initial contact with one’s supervisor or manager or human resources indicated that the next step would be contact by human resources with the person seeking accommodation. The remainder of the sixty-seven employers who identified a first step gave no indication of the next step to obtain an accommodation after the indicated first step was taken.

Our survey responses from seventy-five employers provide a somewhat different picture of the initiation of the accommodation process, in response to the question “How does an employee initiate your accommodation process?” Seven of the seventy-five employers require initiation of the accommodation process through human resources during the hiring process, whereas three indicated that initiation should take place during employees’ onboarding process. Of the seventy-five employer respondents, thirty-one indicated that their policies called for beginning the accommodation process through an employee’s contact with a supervisor or manager. Given the significant amount of information required to trigger the interaction process, as described above, these employees face the choice of revealing that information to their supervisor or going without accommodation. Eleven employers indicated that an applicant or employee can initiate the accommodation process by communicating with human resources or a supervisor/manager, with two of them indicating that the employee can also contact a third party absence company with a request, and another providing the option of requesting an on-site medical center staff member. One employer directs requests to their compliance manager. Thirteen of the seventy-five responding employers indicated that their organizations had no specific policy.

We asked employers in our survey to indicate what medical information (if any) they require before initiating an accommodation
process. Other than the seven employers which indicated “none,” nineteen employers indicated that they require a recommendation from physician, nine require proof of only the impairment requiring accommodation, and nine require only the employee’s medical history including diagnosis and limitations.

Among Fortune 100 employers, most did not provide specific information about the provision of medical information in support of a request for accommodation. With respect to the seven employers providing guidance regarding the timing of requests for the medical information from people seeking accommodations, five employers indicated that the information would be required after the interaction process began, whereas two indicated that the information would be required prior to the interactive process. The other ninety-three employers did not indicate when or if they would require the person’s medical information.

This review of policies and survey results indicate a wide variety of policies and practices, or a significant lack thereof, regarding the initiation of the accommodation process. Beyond a general lack of guidance, these policies sometimes require submission of personal information to an unknown recipient or to a supervisor or manager. Such requirements raise serious concerns about the prevention of stigmatization for employees or applicants seeking accommodations, as well as potential discouragement of people with disabilities from even applying.

2. The Accommodation Approval Process

Both the review of Fortune 100 policies and the survey results also provided information about what information must be revealed once the accommodation process has been initiated. Regarding the determination as to whether a requested accommodation is reasonable, eighty-four of the Fortune 100 employers gave no indication of how that determination would be made. Fifteen employers stated that the reasonableness of the accommodation request would be made on a case-by-case basis, with four of those employers also providing specific examples of reasonable accommodations on their web site; one employer indicated that the determination would be based on the person’s job duties.

The employer survey also asked about the process of determining whether a requested accommodation is reasonable. Two responding employers consider the employee’s limitations only, seventeen consider only the duties of the position, and sixteen consider both. Only two consider only the recommendation of a manager or supervisor, but twenty-one consider that recommendation along with the limitations and duties.
Three consider a list of accommodations deemed reasonable along with those other factors. Two employers mentioned consideration of costs along with other factors.

The survey asked employers to identify their resources for employees with disabilities. Twenty-four employers indicated adoption of inclusive policies as well as the availability of support groups and a diversity and inclusion coordinator. Nineteen indicated that the employer had inclusive policies, and three indicated inclusive policies and support groups. Nine employers indicated that their employees had access to a diversity and inclusion coordinator, with one of them also having inclusive policies, and one also having a support group. Two employers indicated that EAP was available as a resource.

3. Preventing Stigmatization

To gain greater insight into employer practices and policies, the survey completed by seventy-five employers asked an open-ended question asking how their organization ensures that information gathered in connection with requests for accommodation does not negatively affect the employee with a disability. Responses fell into two broad categories: limits on the sharing of information about the people seeking accommodations, and broader training, coaching and policies.

Ten of the survey respondents indicated that they prevent the sharing of medical information with a supervisor or manager, while one employer mentioned limiting the medical information obtained from medical professionals to that which is job-related. An additional three employers mentioned confidentiality more generally, including one employer stating that “information is kept on a need to know basis.” One employer explained that the employee seeking an accommodation works with a medical professional to complete the required forms related to a request for accommodation, which are only shared with HR; only the subsequent notice of the requested accommodation is sent to the supervisor or manager, and “no medical information is ever shared.” In contrast, one employer responded by saying that the information “is limited to HR and the supervisor,” failing to recognize the potential damage from sharing medical information with a supervisor. Two employers noted that they use a third party to house medical information, with one explaining that “data is housed with a vendor, and only HR has access to the full medical data,” and the other explaining that “the third party company is extremely important for maintaining those records, filtering it through a medical professional for validity and establishing a boundary between the decision
makers in our company and the medical records in an effort to eliminate current or future bias.”

Training and coaching were also mentioned by ten employers. One employer explained that in cases where the manager needs to have knowledge of a disability, “we coach managers on what they can/can’t do.” Two employers noted providing “training to our HR professionals & managers on ADA,” and trying to educate supervisors “on their responsibilities under ADA.” The HR representative for a small company similarly noted that she provides “coaching to leadership to ensure that the request doesn’t negatively impact the employee.” Along the same lines, one employer mentioned that supervisors are informed of “federal, state and employer policy requirements.” More broadly, one employer stated that its manager training includes diversity sensitivity, which touches on disability.

The role of human resources (HR) and policy also appears to be important among surveyed employers. Four employers specifically noted that HR acts as advocate for the employee in dealing with her supervisor, including one employer that assures the employee that “HR is a resource for them if they have questions or concerns,” and another that stated that “HR ensures all laws are followed and retaliation is avoided at all times.” Two employers also pointed out that an employee could file a complaint with its ADA coordinator or employee relations/HR regarding discrimination due to a disability, and a third employer mentioned their processes/procedures to raise concerns. Ten different employers mentioned their policies, including “strong compliance with HIPAA,” “Zero tolerance retaliation and discrimination/ harassment policies,” a “non-retaliation policy,” and “anti-harassment and anti-discrimination policies,” as protections for the employee with a disability. One employer pointed out more specifically that under its anti-retaliation policy, the “supervisor does not have final say – each case reviewed by multiple parties, union environment/protection.” Three employers specifically mentioned their diversity policies, with one explaining that its priority of diversity and inclusion “holds everyone accountable both in terms of what and how they perform their duties.”

Among the Fortune 100 policies reviewed, very few outlined policies to protect people with disabilities against stigmatization during the accommodation process, and few provided any assurance that such stigmatization would occur. Some rare best practices are highlighted in the recommendations section to follow.
B. Protecting Privacy of Medical Information

The Fortune 100 Companies’ online information regarding requesting accommodations was reviewed to determine how well employers assure people with disabilities that their medical information will be kept confidential. Of the Fortune 100 sites review, only four referenced any policy regarding maintaining the privacy of the request for accommodation, and only one provided that policy on the website. Three of those required initiation of the process by phone and/or email, and one required an initial request to one’s supervisor or manager. Similarly, only four employers provided assurance that the medical information of the person seeking accommodation would be kept confidential. Three of those four employers required revelation of one’s medical information after the interaction process begins.

Exemplifying best practice to protect privacy and encourage requests for accommodation, CVS Health makes clear in its accommodation policy that “information provided by the colleague . . . in connection with an accommodation request is often very sensitive, and the company will treat all information received with appropriate discretion and care in accordance with company policy and applicable privacy laws.”327 Limiting the access of supervisor and managers to individual health information can further protect employees with disabilities against stigmatization. For example, Michigan State University’s Resources Center for Persons with Disabilities verifies the disability and an employee’s need for accommodation.328 That determination is shared with the employee’s direct supervisor without any specific information regarding the employee’s disability.

Five of the Fortune 100 companies (Chevron, Pfizer, Freddie Mac, Costco, and Merck) indicated the use of a third party in the accommodation process.329 If established appropriately, keeping medical information in the

hands of a third party could provide additional protection against the disclosure of medical information within the workplace of a person seeking an accommodation. Four of those employers indicated that the third party collects the medical information and determines both the person’s eligibility and the reasonableness of the accommodation request.

Of the employers surveyed, we asked about access to the medical information gathered in connection with a request for accommodation. Of the seventy-five responding employers, twenty-nine employers indicated that a human resources professional has access, with twenty additional employers indicating that both HR and the employee’s supervisor or manager had access to medical information related to an accommodation request. Six employers indicated that internal medical staff had access to medical information, and one employer indicated that its leave of absence vendor also had access to medical information, along with HR. Responding employers indicated challenges in maintaining confidentiality of medical information, as with one small employer that indicated that although a manager is only given information about the accommodation needed, in its small plant, “Many times, information about the employees disability is shared very openly by the employee or his/her relatives.”

IV. RESOLVING THE REVELATION CONFLICT

Employees must reveal their disability to trigger their employer’s duty under the ADA to interact and provide an accommodation. In fact, employers would like applicants to disclose any mental health problem during the application stage. 330 Similarly, many professionals in the public mental health and vocational rehabilitation fields promote disclosure by their clients with hidden disabilities, 331 with some treating revelation of one’s disability as part of a “strengths-based approach.” 332 Others theorize that revelation will lead to targeted support for the member of a stigmatized group, at least in some organizations, 333 and suggest that coworkers will be less likely to discriminate against those who received accommodation if they know about that person’s reduced capabilities that justify the

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330. Brohan et al., supra note 137, at 289.
333. Johnson & Joshi, supra note 36, at 431; Ragins, supra note 49, at 200–01.
accommodation.\textsuperscript{334}

Our survey reveals that some employers have attempted to address this conflict by training employees to appreciate the skills and potential contribution of people with disabilities. The effectiveness of this approach is unproven.\textsuperscript{335} Some success has been shown by designating a specific person or office for accommodation and a grievance procedure for reasonable accommodation as part of a formalized decision-making process for individual decisions regarding accommodations, as well as a centralized accommodation fund.\textsuperscript{336} Even with these supports, the employee or applicant with a disability must still reveal their impairment to obtain an accommodation.

The expectation of revelation from the courts, employers, and counselors puts the burden on people with disabilities to find stigma-free workplaces, which may not exist or be available to them. Instead, the process of obtaining accommodations can be reformulated to reduce the potential for the harmful effects of stigma and stereotypes arising from the revelation of one’s hidden disability. Both the courts and individual employers can help to resolve the conflict between the potential stigma of revelation and the need to reveal one’s disability to obtain an accommodation. By controlling the amount of information that must be revealed and who receives that information, the potential for negative consequences can be reduced.

Courts should not allow employers to require full disclosure of an employee’s entire medical record to obtain an accommodation. Likewise, employers should be sensitive to an employee’s reluctance to reveal a disability, especially one carrying a heavy stigma. Instead, both courts and employers should apply the ADA guidance requiring job-relatedness and business necessity to the interactive process that precedes accommodation of employees with disabilities. That standard would ensure that employees are only required to share information that is directly relevant to their request for a reasonable accommodation,\textsuperscript{337} meaning information that is necessary to establish the legitimacy of the employee’s request and its connection to an actual impairment. That relevant medical information should only be shared with the employer representatives who are directly involved in the interactive process.

While only relevant information should be requested, an employer should not be allowed to make negative assumptions about an employee

\textsuperscript{334} Durand, supra note 24, at 583.
\textsuperscript{335} Von Schrader, Malzer & Bruyère, supra note 16, at 253.
\textsuperscript{336} Erickson et al., supra note 7, at 205.
\textsuperscript{337} Schultz et al., supra note 77, at 458.
based on a diagnosis alone to decide whether a reasonable accommodation would render the employee qualified to perform her essential job duties. Instead, the employer should be required to engage in an individualized process to determine the extent of the employee’s limitations.\textsuperscript{338} Thus, the employer should not assume that all people with psychiatric disabilities exhibit the limitations associated with their diagnoses,\textsuperscript{339} particularly where treatment or accommodations can address those limitations.\textsuperscript{340} To make a reasoned determination as to whether the employee can perform the essential job duties or work without posing a direct threat in the workplace,\textsuperscript{341} the employer should request and evaluate objective, relevant evidence from both the employee and her health care provider.\textsuperscript{342} Because stigmatization is more prevalent among smaller employers,\textsuperscript{343} it is particularly important for them to adopt practices that include such an individualized process, even if it imposes a greater burden on them.

In gathering and considering such objective evidence, employers should be sure to maintain its confidentiality, because control of such information is important to limiting stigmatization.\textsuperscript{344} Line supervisors are important to the process of providing accommodations, given their knowledge of work processes and workers’ abilities.\textsuperscript{345} However, those supervisors need not have access to detailed medical information supporting the need for an accommodation to determine which accommodations are reasonable, as long as the supervisor understands the extent of the employee’s limitations. Allowing direct supervisors to have access to sensitive medical information, as observed in Walmart’s

\begin{itemize}
\item \textsuperscript{338} 42 U.S.C. § 12111(8) (2018) and 29 C.F.R. § 1630.2(m) (2012) define a qualified individual as a person with a disability who “with or without reasonable accommodation, can perform the essential functions” of the position. See, e.g., Marble v. Tennessee, No. 18-5697, 2019 U.S. App. LEXIS 9306, at *7 (6th Cir. Mar. 29, 2019) (stating that the ADA requires individualized inquiry in response to a request for accommodation).
\item \textsuperscript{339} Sheila H. Akabas & Lauren B. Gates, \textit{A Social Work Role: Promoting Employment Equity for People with Serious and Persistent Mental Illness}, 23 ADMIN. SOC. WORK 163, 174 (2000).
\item \textsuperscript{340} \textit{Mental Health Medications}, NAMI, https://www.nami.org/Learn-More/Treatment/Mental-Health-Medications [https://perma.cc/LM98-JWMQ]. See also Lerner et al., supra note 72, at 105 (finding that studies show subgroups of adults with depression who receive high quality diagnosis and treatment have better employment outcomes).
\item \textsuperscript{341} 42 U.S.C. §§ 12111(3); 12113(b) (2018).
\item \textsuperscript{342} See Silverman, supra note 257, at 299 (stating employers can ask employee’s health care provider to conduct thorough medical assessment of her abilities to perform work duties).
\item \textsuperscript{343} Mason Ameri et al., \textit{The Disability Employment Puzzle: A Field Experiment on Employer Hiring Behavior}, 71 INDUS. & LAB. REL. REV. 329, 338–39 (2018).
\item \textsuperscript{344} Brohan et al., supra note 137, at 296.
\item \textsuperscript{345} Cunningham, James & Dibben, supra note 94, at 275.
\end{itemize}
accommodation process, opens the door for supervisors to act based on negative biases. By preventing supervisors’ direct access to such sensitive information, the potential for stigmatization among both direct supervisors and coworkers can be avoided. Instead, using a neutral third party (e.g., a university or consultant) to gather the information can greatly enhance the potential for confidentiality.

Employers should only access information that is related and necessary to a determination of whether a person with a disability needs and would be enabled by an accommodation to perform the essential duties of a particular job. At the same time, employers should still engage in an individualized analysis of that employee, relying on that objective information, rather than making assumptions based on the stigma and stereotypes associated with her diagnosis. Moreover, that private information should only be available to those employer representatives who are directly involved in the interactive process, preferably excluding supervisors and managers who could be negatively influenced in their perceptions about that employee by that information. With these controls in place, people with disabilities will no longer be in the position of searching for the perfect workplace where stigma and stereotypes do not exist. Maybe then they will no longer face the difficult choice of either revealing a disability to obtain an accommodation or going without.


347. LINKOW ET AL., supra note 16, at 40.