An Enhanced Disability Act: The Social Benefits of Consistent Compliance and Comprehensive Training

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Abstract

In 1990, the most comprehensive and protective policy impacting those with disabilities was enacted. Since then, the Americans with Disabilities Act (ADA) was amended in 2008; therefore, one of the major legislations in place to encourage equity regarding disability has only been formally modified once in over 30 years. Despite ADA's place within legislation, individuals with disabilities have remained the victims of stigmatization, discrimination and mistreatment. It is essential to analyze and enhance this policy in order to truly protect the disabled community.
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Problem Statement

What does 25,607,831 mean to you? This is the combined population of the ten largest cities in the United States (Douglas, 2022). What does 70,000,000 mean to you? This is the number of individuals continuously overlooked, despite relentless persecution on the basis of ability (CDC, 2022; Young & Crankshaw, 2021). Although the latter number is nearly three times the former, this figure represents the unimaginable number of lives that form the disabled community. Their reality consists of physical barriers, non-inclusive social environments, and disparities impacting all aspects of life. Regardless of the dire need to protect a significant portion of our population, there is minimal legislation in place. In order to ensure that basic human needs are met, we must assess and analyze these current policies.

Figure 1

Adults with Disabilities

1 in 4
adults in the United States have some form of disability
(CDC, 2022)
Before analyzing said policies, it is extremely important to acknowledge the complexities of defining ‘disability’. According to The International Classification of Functioning Disability, a framework that has been adopted internationally, ‘disability’ is a term to include bodily impairments, activity limitations, and participation restrictions; disability is a result of “the interaction of having a condition-based limitation and experiencing barriers in the environment” (Krahn et al, 2015). These factors include physical environment, culture, economics, and policies. Disability is a difficult term to conceptualize due to these intersecting factors; there are many different perspectives that impact the definition. For example, the ‘Medical Model of Disability’ is an outdated, yet surprisingly popular model (Grover, 2014). This model views the individual and their disability as the issue, rather than the various forms of oppression they face. Individuals that use this model often focus on the importance of a “cure” for people with disabilities to live a successful and fulfilling life. This very model feeds into a number of negative stereotypes, solely impacting those with disabilities. A model that disputes this harmful way of thinking is the ‘Social Model of Disability’. Rather than blaming the individual with the disability, professionals that utilize this model believe that disabilities are restrictions imposed by a non-inclusive society. This perspective focuses on making changes to the social environment to better the lives of individuals with disabilities.
Along with various theories that perpetuate the maltreatment of the disabled community, an abundance of data shows that disability policies are not adequate when combating and preventing oppression. In a 2017 report analyzing inequalities impacting the disabled community, staggering information was found. More than 1 in 5 adults with a disability have less than a high school diploma. The poverty rate seen within the disabled community is more than
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twice the rate of the nondisabled community. Less than 35% of working-age, disabled adults are employed. Adults with disabilities are more than twice as likely to have difficulty paying their medical bills compared to their nondisabled counterparts (Goodman, Morris, Boston, & Walton, 2017). Those with disabilities face inequalities that impact their educational attainment, economic status, employment status, and access to equitable healthcare.

According to the World Health Organization, those with disabilities often face these barriers due to the attitudes of others (2021). For example, healthcare professionals are not adequately trained on disabilities and their impacts. This often leads to discrimination and the utilization of stereotypes within the healthcare system. Due to this lack of understanding and knowledge of professionals, many services do not have policies in place to accommodate those with disabilities. Disabled individuals are four times more likely than nondisabled individuals to receive poor medical treatment. Another example that supports the idea that those with disabilities face discrimination on an attitudinal basis is portrayed by the employment and wage gap. Statistical discrimination can be defined as beliefs deriving from a group’s average behavior (Maroto & Pettinicchio, 2014). This form of thought process is used by employers and directly impacts the chances of hiring those with disabilities. These statistics are few of many, which is indicative of how deeply rooted ableism continues to be, despite the policies in place to acknowledge it.

This oppression and discrimination impacting the disabled community was seen as early as the Greek and Roman Empires (SAIL On, 2018). Since this time, those with disabilities were perceived as inferior. This idea expanded into the disabled community often facing pity and fear from others due to their disability. These harmful stereotypes, along with ignorance, were a direct result of the rise in institutionalization seen in the 1400-1600s; the conditions of these
institutions were less than ideal and extremely inhumane. Although the rate of disability was becoming more prevalent due to the increased injuries and illnesses during the Industrial Era and war in the 1700-1800s, individuals with disabilities continued to be outcasted and mocked.

Despite the opportunity for those without disabilities to become more aware of the untrue, harmful rhetoric impacting the disabled community, individuals with disabilities continued to face oppression and discrimination well into the twentieth century. The Immigration Act of 1907 was enacted to ban individuals with visible disabilities from entering the country. These discriminatory actions relate to the stereotypes we still see today, often impacting a disabled individual’s opportunity to complete school and work. In turn, this perpetuates the many economic disparities disproportionately affecting the disabled community.

Conditions for the disabled community continued to worsen, reaching its peak in the 1930s. During Hitler’s reign, individuals with disabilities were often used for experimental purposes or were killed due to their disability. Throughout the years, “Ugly Laws” were also used to ban individuals with physical deformities from going out in public. The last Ugly Law was appealed in Chicago in 1974. Finally, legislation came into play in 1975 when the Individuals with Disabilities Act (IDEA) was enacted to integrate children with disabilities into public schools. In 1990, the American with Disabilities Act (ADA) was passed to prohibit discrimination on the basis of ability.
This history represents the harmful and untrue rhetoric that implies those with disabilities should be pitied, ridiculed, rejected, feared, or mocked. Those with disabilities have faced discrimination, prejudice, and exclusion for thousands of years. It is essential to analyze the policies protecting those with disabilities in order to verify that they are sufficient. Do these
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policies adequately protect those with disabilities from discrimination, maltreatment, and oppression? Or are they just a formality?

It is clear that a majority of factors of oppression come from a lack of understanding and knowledge of disability and its impacts. In hopes of truly dismantling the many layers of ableist ideologies, we must acknowledge these true and impactful disparities. With this, it is necessary to be cognizant of the fact that the oppression we do see is directly linked to ignorance and lack of training. Once we acknowledge these inequities, we must analyze the current policies in place. If these policies are not doing their jobs, we must make recommendations in order to influence these policies in doing so.

With this said, there are a few potential solutions in order to enhance the American with Disabilities Act. To begin, the creation of a comprehensive and informative diversity, equity, and inclusion (DEI) training curriculum is essential. A motive of this type of training is to spread awareness and educate individuals regarding the barriers oppressed social groups face, as well as to acknowledge the role of power dynamics within various forms of oppression. However, there is a lack of consistent curriculum that is used. Regardless, one factor that does remain consistent is the fact that all types of DEI curriculum completely overlook the disabled community. As said, this community makes up a large percentage of the population within the United States. Without the use of comprehensive training, this group of individuals will continue to face oppression disproportionately. The DEI curriculum should be a resource used in order to advocate for all marginalized groups. However, the fact that it does not consider the disabled community the way that it should perpetuates harmful stereotypes, lack of awareness, and inequities. Once this issue is rectified, this comprehensive curriculum should be implemented by companies and organizations, especially those that work directly with the disabled community.
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This concept would appeal to various stakeholders, including: individuals with disabilities, family members or loved ones of disabled individuals, organizations that work directly with the community, organizations that are committed to diversity, equity, and inclusion, and local, state, and federal agencies whose motivation is to serve those with disabilities and dismantle ableism at its core.

Literature Review

Ableism, or the biased, prejudiced, and discriminatory actions towards individuals with disabilities, impacts the disabled community in all aspects of their lives. Similarly to the concept of disability, ableism is a complex issue to define. This form of oppression manifests in various spaces and ways; it is seen throughout the healthcare system (Andrews, Ayers, Brown, Dunn, & Pilarski, 2021; Clemency Cordes, 2021), the education system (Hutcheon & Wolbring, 2012), the workforce (Phillips, Deiches, Chan, & Bezyak, 2015), theory (Gill, Kewman, & Brannon, 2003), and language (Runswick-Cole & Goodley, 2013). When referring to disability awareness, it is essential to analyze the impacts of ableism in all sectors of life.

Ableism within the Healthcare System

It is important to note the fact that an individual with a disability is at risk of inequities that directly impact their basic human needs. For example, within the healthcare system, those without disabilities are perceived as the ‘ideal’ and ‘norm’ (Andrews et al. 2021). This ableist approach suggests that the life of a disabled individual is more expendable compared to the life of someone not disabled. With this approach comes the disparities impacting those with disabilities, perpetrated by a number of healthcare professionals. One study found that many
health care providers were considered to be aversive ableists, meaning they had low explicit bias but higher implicit bias, meaning their biases were unconscious and often unintentional. Due to the indirectness of implicit biases, these biases often go unrecognized by the perpetrator, leaving a harmful impact on the targeted individual. Details of the study indicate that most of the healthcare professionals reported no explicit bias, whereas many providers were found to be moderately in favor of non-disabled patients (VanPuymbrouck, Friedman, & Feldner, 2020). Another study touched upon the potential concept that health disparities are highlighted due to the fact that disability and related inequities are not emphasized in graduate studies (Clemency Cordes, 2021). This research found that only 40.7% of primary care physicians reported their confidence in caring for a patient with a disability. The impacts of ableism within the healthcare system is seen in Figure 4. In an environment built to serve and protect all, the lack of disability awareness and prevalence of ableist mindsets seen throughout the healthcare system perpetuates the seemingly never ending cycle of oppression.
Another environment that should be a safe place for all, yet fails to hit the mark, is the education system. This system has consistently overlooked the needs of individuals with disabilities (Pak & Parsons, 2020). This inequitable experience leads to the educational underperformance of the disabled community compared to those without disabilities. There are
many factors that cause the disparities within the school system, one of them being the lack of government funding allocated to special education (Litvinov, 2022). The Individuals with Disabilities Act (IDEA) of 1975 calls for Congress to cover 40% of the costs districts must pay to meet requirements regarding special education. This funding issue puts a huge stressor on the school system, ultimately impacting the students. Lack of educational attainment is another massive issue seen within the disabled community; 65% of individuals with disabilities graduate high school and 7% graduate college (United Way, 2022). According to United Way of the Battle Creek and Kalamazoo Region, “social attitudes toward children with disabilities and a lack of trained teachers, resources, and accessible learning programs are all issues that prevent children with disabilities from receiving an equal education to non-disabled students” (para. 2). Rigid deadlines, the emphasis placed on organizational skills, and ability to regurgitate material are main factors used to grade students on their work, all of which are ableist metrics that further perpetuate unequal education for those with disabilities (Liez, 2022). The sustainability of these norms within schools are a direct result of insufficient disability training within the education system. As said, due to the lack of disability awareness, lower educational attainment rates are seen in the disabled community, which is directly linked to disparities within the workforce.

Ableism within the Workforce

A number of factors are directly related to a lower employment rate impacting the disabled community. Seventy-six percent of those without disabilities are employed, compared to the 34.9% of disabled individuals (Bonaccio, Connelly, Gellatly, Jetha, & Ginis, 2019). Along with these low employment rates, those with disabilities are faced with involuntary part-time employment, lower salaries and wages, and doubt from employers. This doubt and ableist outlook may begin as soon as the pre-employment process; many applications and job postings
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require individuals to have certain abilities that many may not have. These include, but are not limited to, walking or standing for long periods of time, lifting items over 50 pounds, or the ability to maintain a strong attention to detail while multitasking. Although some may justify the use of this ableist approach, this language creates a noninclusive and psychologically unsafe environment for the disabled community, further supporting the already existing low unemployment rates and lack of opportunities for this demographic to excel. Theory and language rooted in ableism are used in multiple facets of life, especially the workforce.

Figure 5

Percentage of Employed Adults with Disabilities

Ableism within Theory and Language

The power of theory and language is far stronger than we may acknowledge. If harmful theory and language are utilized throughout all aspects of life, negative stereotypes, stigmas, and
thoughts will persist. For example, the fact that many professionals continue to use the Medical Model of Disability is indicative of the amount and type of disability training they have received. This theory is rooted in the idea that the individual with the disability is to be held accountable for barriers within the society. A contrasting viewpoint is the Social Model of Disability, which perceives the inaccessible physical and social environment as the issue. For example, if someone who uses a wheelchair were to show up to a building with no ramp, a theorist using the Social Model of Disability might say “this person cannot get into this building because it is not accessible for them”. In comparison, a theorist using the Medical Model of Disability might say “this person cannot get into this building because they are in a wheelchair”. A paradigm shift of theory is necessary in order to combat ableist concepts (Gill, Kewman, & Brannon, 2003). Once this shift occurs, the implementation of policy will be impacted as well. The maltreatment of those with disabilities within various facets are a direct result of stigmas, stereotypes, and generalizations that are seen on a systemic and personal level.

**Impacts of Ableism on Self-esteem**

Through this cycle of oppression comes emotions and feelings that those with disabilities and their loved ones face on a daily basis (Hyseni, Myderrizi, & Blanck, 2022; Krauss, & Olkin, 2020). Through a longitudinal survey, researchers reviewed the willingness to disclose a disability (Hyseni et al., 2022). They found that individuals with disabilities that were considered to be ‘invisible’ were less likely to speak about their disability. Therefore, those with physical disabilities were more likely to disclose this information. They also found that those who experienced their disability earlier in their life were more open about said disability. Many who self-disclose also reported to experience negative consequences and end up regretting it. Individuals with the disability are not the only ones that experience the impacts of ableism; their
loved ones are affected as well. Krauss and Olkin (2020) researched the correlation between self-esteem of a child of an individual with a disability and perceived stigma, resources, and overall socialization. Overall, there were significant findings; higher levels of stigma were correlated to lower levels of self-esteem. The results show how important socialization is for individuals with disabilities as well as family members.

**Americans with Disabilities Act (ADA)**

As highlighted, those with disabilities have been faced with barriers, both physical and social, since the beginning of civilization. In hopes of alleviating the impact of barriers, groups have been advocating for the protection of disability rights since the 1800s (Meldon, n.d.). Once the 1900s hit, the prevalence of groups increased; their efforts focused on employment, education, and decreasing rates of isolation within the disabled community. Advocacy groups acknowledged the grueling history that those with disabilities endured; therefore, through their efforts, many organizations focused on lobbying for the passing of legislation. It was not until the late 1900s for the disabled community to become somewhat protected under the law. By the time 1990 came along, an extensive act, made to truly protect, was still missing. However, after centuries of championing, the Americans with Disabilities Act was enacted. Despite the passing of ADA, the staggering disparities are indicative of the need for further actions in order to create equitable opportunities for those with disabilities.

Although the Americans with Disabilities Act (ADA) was created to prohibit discrimination based on ability, the discrepancies can no longer be ignored. The policies in place to protect the disabled community are not doing as well as they should be. It is said that the unemployment rate within the disabled community has increased since the ADA was enacted.
DespiteADA in place, it is believed that employers will avoid hiring potential employees with disabilities based on the idea that the cost of accommodations will be too high. Based on this same reading, the ADA has provided a catalyst for essential dialogue for both individuals within the disabled community as well as those who are not; however, efforts cannot stop there. The Americans with Disabilities Act must be enhanced in order to truly protect those with disabilities.

A primary weakness of this piece of legislation is the lack of enforcement of regulations. This lack of enforcement enables the prevalence of loopholes and noncompliance to persevere. Without an entity whose sole purpose is to mandate compliance, many institutions, businesses and individuals are able to perpetuate the cycle of oppression through noninclusive physical and social environments.

**Diversity, Equity, and Inclusion**

The maltreatment of the disabled community is further perpetuated by the lack of awareness and education on disability and the inequities that come with living with one. The use of diversity, equity, and inclusion (DEI) training within environments that hold the highest risk of biases is absolutely essential when creating inclusive spaces for all marginalized groups. The purpose of DEI is to better understand the demographics of individuals that have faced systemic oppression, both historically and presently, as well as diverse perspectives (Redstone, 2021). There have been countless benefits of the implementation of DEI within professional settings (Clear Law Institute, 2022; McGuire & Bagher, 2010). Some benefits include but are not limited to, a stronger workforce and environment, better communication within the organization, the opportunity to create sustainable change, and a sense of empowerment (Clear Law Institute,
Despite diversity, equity, and inclusion being an amazing asset and tool for many individuals, there are some gaps within the curriculum. There are many intersectionalities and social groups that are not adequately represented in these efforts, especially the disabled community (Wolbring & Lillywhite, 2021). There is a lack of engagement seen within DEI related to disability studies, so much so that only 7% of corporate DEI training incorporates disability studies (Oesch, 2020). This impacts the ability of all employees to better understand the barriers and obstacles that individuals with disabilities face, therefore preventing the creation of an inclusive work environment. In order to address this shortcoming, researchers suggest that employers actively supervise using a disability-affirmative approach, indicating the importance of the need for disability awareness in the workplace. Once knowledgeable, supervisors should also influence their employees to do the same by passing along similar knowledge and information. With this comes questioning their own and others' ableist beliefs. By valuing this approach, future generations of supervisors and employees will be more willing to advocate for disability rights, especially in the workplace (Lund, Wilbur, & Kuemmel, 2020). Before this is done, supervisors and employers should be trained on disability and the impacts of a non-inclusive society. There should also be a better representation of the experiences, perspectives, and strengths of disabled individuals within professional settings (Lund, Khazem, & DeJesus, 2022).
Although the perception of DEI recognizes this concept as a social factor, the implementation of a DEI approach does impact the financial aspects of an organization. The graphics below are related to the financial aspect of DEI efforts. As highlighted in Figure 7, there are detrimental impacts of the lack of DEI initiatives; there is potential for companies within the United States to lose $64 billion annually due to unfairness and discrimination within the workplace (Burns, 2012). Figure 8 refers to the potential positive impact of embracing diversity within the workplace; companies who do so are 21% more likely to experience above average profitability, 27% more likely to outperform their peers, and 19% more likely to have higher revenues.
Figure 7

Financial Impacts of Minimal DEI

Annual money lost due to lack of DEI efforts:

(Burns, 2012)

Figure 8

DEI’s Return on Investment

(Hunt et al., 2018 & Lorenzo et al., 2023)
Theories

Intersectionality

When referring to diversity, equity, and inclusion (DEI) efforts, one of the main theories conceptualized is intersectionality. Intersectionality was first coined by Kimberlé Crenshaw when the legal system did not acknowledge individuals facing various forms of oppression based on their membership of numerous social groups (SON Council for Diversity, Equity, and Inclusion, 2022). In reaction to this oversight, advocates pushed for a framework to analyze discriminatory actions. This model recognizes the fact that each individual has a unique experience formed by their membership of certain social groups. Their social categorizations determine the discrimination and oppression they have faced. Intersectionality takes into account race, gender, ethnicity, gender identity, sexual orientation, class, and ability. When addressing one form of oppression, it is essential to analyze any others in order to prevent the reinforcement of said oppression (Center for Intersectional Justice, n.d.). With this said, placing an emphasis on acknowledging all forms of oppression, including disability, is essential when strengthening DEI.

Critical Disability Theory

As emphasized, the oppression faced by the disabled community is historic and systemic. It is essential to understand this through the perspective of the community. The use of critical disability theory creates a space for those without disabilities to remain cognizant of the barriers that those with disabilities face. We do so by “viewing disability as both a lived reality in which the experiences of people with disabilities are central to interpreting their place in the world, and
as a social and political definition based on societal power relations” (Reaume, 2014, para. 3). This theory seeks to question the preconceived notions of those with disabilities being pitiful, helpless, and expendable by spreading awareness, advocating, and creating equal experiences for those with disabilities. Within this assessment, critical disability theory will be used with analyzing current policies and offering recommendations in order to remain mindful of the individuals directly impacted by this issue.

Social Model of Disability

The social model of disability is used to recognize the true disparities that those with disabilities face. This ideology was created in reaction to the health model of disability. As noted, these theories drastically differ. The social model of disability perceives the limitations placed on an individual as the issue rather than the person and their disability. It is important to use this approach when referring to societal disparities in order to address the issue at the root cause instead of perpetuating untrue and harmful thought processes. With that being said, this analysis will place an emphasis on the usage of this theory when offering and implementing recommendations to the policies set in place to protect the disabled community.

Recommendations

The evident and continued maltreatment of the disabled community faces calls for accommodations of the current policies in place. The purpose of the Americans with Disabilities Act (ADA) is to prohibit discrimination on the basis of ability, ultimately protecting those with disabilities. However, the clear disparities faced by disabled individuals are indicative of how ineffective ADA is. It is important to note that there are changes that can and
should be made at the federal, state, and local levels in order to adequately protect those with disabilities.

**Recommendations at the Federal Level**

When referring to various acts and bills protecting the rights of individuals, many of them are federally mandated. However, ADA is considered to be a voluntary compliance law; employers are not required to report or track their compliance (Cardillo, 2015). Due to this lack of consistent enforcement of ADA regulations, there is a higher probability of unacknowledged discriminatory actions occurring. With this comes the likelihood of maltreatment increasing. Currently, The Department of Justice holds the responsibility of enforcing the regulations of Title II and Title III of the ADA (U.S. Department of Labor, n.d.). Despite this responsibility, this entity often does not allocate the necessary resources to identify various barriers to fully enforce compliance (Pulrang, 2019). Enforcers rely heavily on the self advocacy of disabled individuals in order to identify said barriers. However, the language used within the contexts of the law itself does not seem to be accessible or understandable to an individual inexperienced in reading and analyzing law; with this comes the potential for higher rates of misunderstandings of an individual’s rights. As a result of this unreliable enforcement comes the prevalence of ADA noncompliance seen within various institutions, organizations, and infrastructure. With high rates of noncompliance comes the disregard or creation of barriers and inaccessible physical environments, ultimately resulting in the perpetuation of oppression. Therefore, a governing entity on all levels is essential in order to enforce compliance of ADA.
Recommendations on the State Level

With the recommendation at the federal level comes the importance of awareness and education. In order to truly protect and include a group of individuals, is it necessary for those without disabilities to better understand ableism and the role they play in conserving the power imbalance. An effective way to enhance one’s knowledge of ableism and their role in this form of oppression is seen within diversity, equity, and inclusion (DEI) efforts. With this said, it is imperative to note that mandating diversity, equity, and inclusion training within various sectors may not be suitable for long-term change. Many companies, organizations, and employers may view DEI efforts and trainings as a box they must check to cover their tracks. However, this mindset will not create true, long lasting impacts. Despite uncertainties in the effectiveness of this approach, the utilization of DEI is one of many steps when referring to understanding forms of oppression. These initiatives and trainings have potential to foster open dialogue between individuals from diverse experiences and backgrounds. However, current DEI trainings often overlook those with disabilities. Therefore, it is highly recommended for individuals with disabilities to play a vital role in the development of curriculum. With this representation comes the opportunity for the enhancement of DEI and its comprehensiveness. Another factor that may encourage longer term change relates to incorporating DEI trainings within frequent professional development, which would influence organizations to naturally approach this concept. It would be beneficial for DEI efforts to be highly encouraged within the language of ADA. This form of professional development should initially be implemented within the healthcare system,
educational institutions, state agencies, and organizations that directly work with those with disabilities.

**Recommendations at the Local Level**

As said, the lack of a formal entity enforcing the regulations of ADA is a critical factor in terms of condoning discrimination. Various bills have been advocated for in hopes of addressing this evident deficit. For example, the ACCESSIBLE Massachusetts Act (H.4425) is a piece of legislation that had potential to expand the authority of the Massachusetts Architectural Access Board in terms of enforcement (Steinberg, 2020). If the legislation had passed, it would have authorized the board to mandate accessibility within the workplace as well as any major construction done on buildings built before 1991. Local inspectors would have had the ability to enforce aspects of ADA. Oftentimes, the use of state and local enforcements are more effective compared to federal lawsuits. With this said, shifting the responsibility of enforcement of ADA should be considered; individuals within certain state and local entities should have the agency to enforce regulations in order to eradicate disparities seen at the local level, especially within their communities.

**Next Steps**

One of the first steps when implementing changes to policy is finding or creating a group that will champion the intentions of the policy change. Creating this group may entail forming a coalition of individuals that are committed to enhancing or enacting legislation related to protecting those with disabilities, speaking with lobbyists who have the power and knowledge necessary to push for legislative change, and constructing clear agendas and timetables. Once
done, the group can advocate for modifications of ADA. These adjustments may include, but are not limited to, a more consistent process of enforcing regulations of the policy, a governing body seen at the federal, state, and local level to advocate for compliance, a more comprehensive and effective form of diversity, equity, and inclusion training, and for legislation to be passed, ultimately encouraging more agency seen at the state and local levels.

**Conclusion**

These changes would touch upon many of the shortcomings of the Americans with Disabilities Act. With more consistent enforcement will come more compliance of regulations; with more compliance of regulations will come a decrease in the disregard of physical and social inaccessibilities. With more effective education and awareness strategies will come less of stereotypes and prejudice; with less of stereotypes and prejudice will come less maltreatment of the disabled community. With more inclusive legislation will come more power at the state and local levels; with more power at the state and local levels will come better protection of those with disabilities. Ultimately, these advancements have the potential to play an essential role in the equitable change the disabled community deserves.
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