

## **Appendix H**

### **Case Study: Employee with a Disability Interview Protocol**

## **Case Study Interview for Employees**

Thank you for participating in this interview. My name is [NAME] and this is my colleague [NAME]. We work for Westat, a research organization based in Rockville, MD. The Department of Labor (DOL) contracted with Westat to research how employers put into practice their policies on disability employment. We are also interested in the experiences of employees with disabilities in the work force.

Before we get started, there are a few things I should mention. This is a research project. Your participation in this interview is voluntary. There is no penalty if you decide not to participate. You may end the interview at any time. If you choose to participate, you can skip questions that make you uncomfortable. We have planned for this interview to last about 30 minutes.

Your responses in this interview are private to the extent allowed by law.. They will not be shared with others at your place of employment. We are speaking with employees with a disability as part of case studies we are conducting with 6 firms. Firms were chosen based on their self-report of experience with disability employment. We selected firms across all industry sectors. We will submit a final report to DOL at the conclusion of the study that describes processes involved in disability employment. We may use quotes from you or other interviewees in our reports; however, interviewees' names, their places of employment, and other information that could be used to identify interviewees or their employers, will not be linked to responses.

Do you have any questions? [Answer all questions.]

Finally, with your permission, we would like to record this interview. The recording will be used to help us recall exactly what was said when we go to summarize our findings. The recordings and any notes we have will be stored securely on Westat's computer and will be protected.. They will only be

available to the Westat project team. We will destroy the recordings after the study is complete in 2019. Are you okay with us recording?

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email [DOL\\_PRA\\_PUBLIC@dol.gov](mailto:DOL_PRA_PUBLIC@dol.gov) and reference the OMB Control Number 1230-0NEW. Note: Please do not return the completed survey to this address.

[IF PERMISSION IS GIVEN TO RECORD, ASK AGAIN IF THERE ARE ANY QUESTIONS. ANSWER ALL QUESTIONS. IF PERMISSION IS NOT GRANTED, RESCHEDULE FOR A TIME WHEN A SCRIBE IS AVAILABLE TO TAKE NOTES.]

If there are no further questions or concerns, I'd like to start the audio recording now.

[TURN ON THE RECORDER.] I need to ask you again: Are you willing to participate in the interview?

Are you willing to have the interview audio-recorded?

## I. INTRODUCTION

I'd like to start by asking you to describe your background and your job title at [NAME OF EMPLOYER]. Please tell me how long you have worked here, what your responsibilities are, and what accommodations—if any—you receive.

## II. EXPERIENCE SEEKING EMPLOYMENT

A. Did you experience any problems making an application or interviewing?

[IF YES]: What were they?

B. Accommodations

1. Did you need an accommodation to submit a job application?

[IF YES] What was the accommodation? Were there any challenges obtaining the accommodation?

2. For the interview process? [IF YES] What was the accommodation? Were there any challenges obtaining the accommodation?

A. How did you learn about this job opening?

B. How did you know this was a job that matches your skills and interests?

### III. CURRENT EMPLOYMENT

A. Do you like your job? Please explain

B. Do you think you will stay in this job? Why or why not?

C. What kinds of skills do you need to do your job?

[PROBE]: physical, emotional, and intellectual requirements of the job

D. How, if at all, does your disability affect your work?

### IV. SUPPORT

A. General

1. How are the people you work with supportive?

2. In what ways do you feel unsupported?

B. Supervisor

1. How is your supervisor supportive? Please provide specific examples.

2. How could your supervisor be more supportive?

### V. DISCLOSURE

A. When did you disclose to your employer that you have a disability?

1. What was that like?

2. Why did you decide to disclose at that time?

B. To what extent did you feel secure disclosing that you have a disability and would like an accommodation? [PROBE]: very

secure, secure, uncertain, insecure, very insecure [PROBE:] Why do you think you felt that way?

## VI. FAIRNESS

### A. Equality

Do you think you are treated differently than other employees because of your disability?

1. Why or why not?
2. How do you feel about this?

### B. Promotion

1. What has your experience been with promotion within this firm?
2. As compared to other employees, how likely do you think an employee with a disability will be promoted?  
[PROBE IF "NOT AS LIKELY"]: Why?

## VII. ACCOMMODATIONS

### A. Do you receive any accommodations?

[IF YES]: 1. What are your accommodations?

2. What were the steps you took to get your accommodations?

3. Were there any obstacles to receiving accommodations?

[IF NO]: 1. Do you need accommodations?

2. [IF YES]: What is keeping you from receiving the accommodations that you need?

B. What are examples of other accommodations your firm has provided for employees with disabilities?

## VIII. CULTURE

### A. Stereotypes and Misconceptions

1. How does your company address and overcome stereotypes and misconceptions about employees with disabilities?
2. Do you think what they do [to address and overcome stereotypes and misconceptions] works? Why or why not?
3. What do you think they could do better to address stereotypes and misconceptions about persons with disabilities?
4. Are there other stereotypes and misconceptions that you have encountered at work?

B. Inclusiveness

Do you think your company makes employees with disabilities feel welcome and included? Why or why not?

[IF YES]: How do they make employees with disabilities feel welcome?

[IF NO]: What makes this company less than inclusive of people with disabilities?

IX. CLOSING

- A. If you could change one thing for employees with disabilities at your company, what would it be?
- B. Is there anything you think might be important for me to know about your experience as an employee with a disability at your company? [IF YES:] Please describe.

Thank you for your time!