

## Article 47

### **Supports and Barriers to Employment Among Disabled and Nondisabled Rural Residents**

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#### **Abstract**

There has been increasing recognition of the complex nature of career across the lifespan and the multiple supports and barriers that an individual can encounter during their unique career development. This understanding has allowed counselors, particularly in rehabilitation settings, to help clients optimize their supports and overcome their multiple barriers to achieve gainful employment. Disability programs and spending are growing at a much faster rate than the population, and there is concern about the impact that disability compensation may have on an individual's return to work. An important topic for discussion is the supports and barriers to employment unique to rural areas and how these variables differ between disabled and non-disabled residents.

*Keywords:* employment, supports, barriers, disability, rural

Beginning over a century ago, theorists such as Frank Parsons and E. G. Williamson worked to better understand the career development process of individuals with successful employment as the ultimate outcome (Herr, 2001). Since that time, there has been increasing recognition of the complex nature of career across the lifespan (Zunker, 2012) and the multiple supports and barriers that an individual can encounter

during their unique career development (Lent, Brown, & Hackett, 2000). This understanding has allowed counselors, particularly in rehabilitation settings, to help clients optimize their supports and overcome their multiple barriers to achieve gainful employment. Counselors should also understand that certain populations may have different supports and face different barriers to employment.

### **Rural Areas**

The U.S. Census Bureau (2010) identifies rural areas as those with a population less than 2,500. According to the U.S. Department of Transportation (2011), 20.78% of the U.S. population lives in rural areas. Rural families can find themselves isolated from metropolitan areas, goods, and services. Studies have been conducted that disavow the notion that, generally speaking, all people are the same; tentative support has been provided that shows differences in rural versus urban residents (Smock, McWey, & Ward, 2006). Rural residents can be very different from those in urban areas, so it is very important to understand those differences.

#### **Economic Uncertainties Unique to Rural Life**

There are economic uncertainties unique to rural life that create special concerns for the individuals and families in these environments (Wilhelm & Ridley, 1988). While rural areas are commonly seen as remote places to have a family and raise children, with their roots in a history of farmers and the industrious working class, the reality is that rural areas are characterized largely by poor individuals (Burton, Lichter, Baker, & Eason, 2013). There is also an abundance of persons with minority status/es living in rural communities (Burton et al., 2013). Inequalities in power, prestige, income, money, knowledge, education, and social connections are just a few conditions that put rural areas at a disadvantage (Burton et al., 2013). Unemployment creates reduced income, which contributes to the stress experienced by rural residents (Wilhelm & Ridley, 1988).

Research has indicated the problem of poverty that exists among rural families and how this increases additionally among rural female-headed families with children (Snyder & McLaughlin, 2004). The poverty rate among rural Americans was found to be 16.5% in 2010, exceeding the overall poverty rate of the entire United States and comprising about 17% of America's total poor population (Burton et al., 2013). Swaminathan and Findeis (2004) discussed how changes in policy under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 increased employment rates in America; however, not everyone benefited to the same rising employment rates. For rural areas, with greater barriers existing, there was not much increase in employment following the Act.

One reason may be due to the weak job prospects that exist in these areas and the complex relationships between employment, their continuation in poverty, and receipt of public assistance (Swaminathan & Findeis, 2004). Summers (2004) discussed a systemic poverty that exists in rural America and the much needed efforts to reduce this persistent poverty by implementing policy changes and increasing recognition that the entire community is in need of reformation, not just the "poor individuals" in the community.

### **Disability Among Rural Residents**

Rural residents are more likely to be disabled and/or to have higher levels of poverty (Klobuchar, 2014). While some rural areas may not exhibit these traits, many do. One study compared urban residents to rural residents and found that in rural areas, residents are more likely to be uninsured and have higher rates of disability (Goode, Freburger, & Carey, 2012). Disability encompasses both physical and cognitive limitations. Research regarding those with mental disabilities has shown the need for day treatment and other outpatient services in rural areas (Husted & Wentler, 2000). Studies have even shown that assisted living programs are different in rural areas versus urban areas; there is a large undersupply of these services offered in rural areas and even when they are offered, rural residents face the obstacles of lack of affordability of the services, long waiting lists, little privacy, lack of nurses on staff, insensitive accommodations, and overall lower quality of services than offered in urban areas (Hawes, Phillips, Holan, Sherman, & Hutchison, 2006). Rural residents have not only been found to have higher physical limitations but higher disease-specific functional limitations as well, which puts them in need of advanced medical care (Goode et al., 2012).

### **Lack of Access to Medical Care in Rural Areas**

The higher rates of disability in rural areas call for more advanced medical care; however, such care is generally unavailable. Worldwide, rural areas encounter numerous barriers to accessing medical and health services (Huaynate et al., 2015). In the United States, roughly 15% of the population lives in rural areas; however, only 10% of physicians practice in rural areas, leaving a serious shortage of rural health care providers (Klobuchar, 2014). Lack of transportation to medical care due to the remoteness of areas is a struggle associated with accessing medical care. Also, the hospitals that are available in rural areas may have outdated or inadequate medical equipment. Rural hospitals are also more likely to be under economic stress than are urban hospitals (Klobuchar, 2014). Rural hospitals are less likely to provide advanced medical care in specialty areas that may be needed by the rural residents.

### **Employment in Rural Areas**

While ability level is a salient person variable (i.e., presence or severity of disability), one of the most relevant environmental influences is the availability of opportunity (Hudson & Broadnax, 1982). Availability of opportunity includes not only the job market but also the number and quality of employment opportunities in a given area (Steel & Landon, 2010). For many, opportunity is limited because of geographic location (Joassart-Marcelli & Giordano, 2006). Welfare recipients that are looking for work most often find marginal jobs (not earning enough income to make a decent living), thus continuing the cycle of poverty; also, rural workers who are employed in these marginal jobs have a decreased chance, when compared with urban workers, to find decent employment in the future (Findeis & Jensen, 1999). There is more opportunity for employment in urban versus rural areas of the United States (Findeis & Jensen, 1999).

## **Legislation and Government Programs**

For many individuals, supports and barriers to employment can be training (e.g., education, job training) or opportunity related (e.g., geography, job market; Kalil, Schweingruber, & Seefeldt, 2001; Unger, 1999), but others can experience an impairment or disability that can negatively impact employment either in the short-term or permanently (B. J. Taylor, McGilloway, & Donnelly, 2004). In each case, the U.S. government's Social Security Administration supplements income for these individuals to assist with overcoming the barriers sometimes associated with disability (U.S. Social Security Administration, n.d.-a). Unfortunately, many of these individuals, particularly those on long-term disability, struggle to find sustainable employment. Research has shown that subjective well-being is positively correlated with having and maintaining employment (Duarte, Escario, & Molina, 2007). As such, it is important to better understand the supports and barriers to re-employment for this population (Mamun, O'Leary, Wittenburg, & Gregory, 2011) and how this group compares with non-disabled individuals.

The Americans with Disabilities Act (ADA) was signed into law in 1990. This landmark legislation recognized that all Americans, regardless of ability level, have the right to be included in all aspects of community life, including employment (Szymanski & Parker, 2010). The ADA guarantees equal opportunities for individuals with disabilities in employment, public service, public accommodations, telecommunications, and other miscellaneous provisions (ADA National Network, n.d.). This law was designed to increase the employment opportunities for individuals experiencing a disability by reducing the barriers and optimizing supports for training and employment (U.S. Department of Justice Civil Rights Division, 2014; U.S. Department of Labor, 2015).

The Social Security Administration also recognizes that some individuals with disabilities need financial assistance. Two disability compensation programs were created to assist with this: the Social Security Disability Insurance (SSDI) and the Supplemental Security Income (SSI) program (G. A. Livermore, 2011). These programs provide financial assistance to those with a documented disability until they are able to work again (U.S. Social Security Administration, n.d.-c). To qualify, an individual must prove that he or she is unable to work because of an impairment that the government determines substantially limits one or more major life activities.

Whereas both programs are contingent on limited work ability, SSDI is based on employment earnings in the past; also, there is more freedom regarding level of employment without losing benefits with SSDI as compared to SSI (G. A. Livermore, 2011). SSDI's source of payment comes from a disability trust fund while SSI's source of payment comes from tax revenues (U.S. Social Security Administration, 2016). Other differences between the two disability programs are: (a) SSDI requires past contributions made to FICA based on personal earnings or those of a spouse or parents; SSI requires the recipient to have limited income and resources; (b) SSDI authorizes Medicare coverage; SSI authorizes Medicaid coverage; (c) SSDI monthly payment is based on average lifetime earnings of the worker; SSI monthly payment is based on the individuals Federal Benefit rate and other deductions; and (d) there is no supplemental payment with

SSDI, but many states do pay SSI recipients a state supplement (U.S. Social Security Administration, 2016).

While these programs provide work incentives for re-employment, the number of individuals who qualify and remain in these two programs has expanded exponentially (Mamun et al., 2011). In fact, literature in the 1970s was already discussing the long-term financial problems associated with the Social Security system (Cox & Wooten, 1978). Research has shown that less than 1% of people with disabilities who receive benefits leave the programs for reasons other than aging out or death (Drake, Skinner, Bond, & Goldman, 2009). As a result, Social Security Administration disability programs are spending at a much faster rate than the programs can feasibly support (Drake et al., 2009).

The Social Security Administration has been criticized for creating disincentives to employment among many individuals receiving compensation; a partial disability benefit system has been proposed by some researchers to allow individuals to claim partial disability while also combining work earnings with disability benefits to improve the welfare systems (Yin, 2014). Likewise, other researchers have suggested that while these financial benefits allow time for retraining and vocational rehabilitation, this funding may also negatively impact incentive to work (M. M. Livermore & Powers, 2006; Mamun et al., 2011; Olney & Lyle, 2011). In fact, perhaps in partial recognition of this, the Social Security Administration has included many work incentives in their programming to better assist beneficiaries making the transition back to employment.

One study found that the barriers to employment that are often associated with disability payments can be decreased through benefits counseling (Rosen et al., 2014). Benefits counseling refers to expert staff of the Division of Vocational Rehabilitation providing benefits screening, advisement, and management for social security beneficiaries regarding employment. Specialized benefits counseling has been found to be an important intervention in correcting the misconceived fear and misunderstanding about the impact of employment on benefits (Tremblay, Smith, Xie, & Drake, 2004). One study investigated the effects of benefits counseling among SSA beneficiaries with psychiatric disabilities and found that benefits counseling was an important employment support among the population, with those receiving the service to have increased average earnings (Tremblay, Smith, Xie, & Drake, 2006). Another work incentive is the Plan to Achieve Self Support or PASS program; this was designed to help beneficiaries return to work by letting persons with disabilities set aside money for purchases, installment payments, and down payments for things needed to reach their work goal/s (U.S. Social Security Administration, n.d.-b)

With the passage of the Ticket to Work and Work Incentive Improvement Act (TWWIA), people with disabilities receiving disability compensation will be able to work, while not losing their Medicare or Medicaid coverage (Golden, O'Mara, & Sheldon, 2000). Particularly, this act allows individuals to receive Medicaid when their jobs do not provide private insurance; allows individuals with disabilities to retain Medicaid coverage even though their medical condition has improved; provides Medicaid coverage to those whose conditions have not yet deteriorated enough to prevent work; extends Medicare Part A coverage for people who return to work for four and a half years; and provides a ticket that will enable disability recipients to obtain vocational rehabilitation services from providers of their choice (Golden et al., 2000).

Supported employment is another incentive to assist individuals with disabilities with employment. Providing supported employment and other employment-related services has been an important part of federal policy in recent years beginning with the passage of the Developmental Disabilities Assistance and Bill of Rights Act in 1984, which designed programs to help those with disabilities find employment in the community; by the year 2006, all states had supported employment programs (McInnes, Ozturk, McDermot, & Mann, 2010). Supported employment refers to community-based employment that serves large numbers of individuals with disabilities who may have previously been excluded from work opportunities by providing individualized, community-based support services and consumer empowerment (Kregel, 2007). Evidence-based supported employment has been shown to improve vocational and mental health recovery for individuals receiving SSDI for schizophrenia or major depression by assisting these individuals with return to work and providing counseling, thus improving their mental health and quality of life (Drake et al., 2009). Supported employment may be one of the most effective approaches for securing employment for people with disabilities; however, it must be kept in mind that in order to ensure the effectiveness of supported employment, it is vital to employ staff who adhere to evidence-based models (Marshall, Rapp, Becker, & Bond, 2008).

It is important to fully understand an individual's unique career process and in order to do this, professionals must acknowledge any social security disincentives, stipulations benefits recipients receive, and the range of employment barriers that may be present. Motivation on behalf of the individual can be a problem that can be improved by also improving capacity, opportunity, and social context that is required to become employed (Skivington, Benzeval, & Bond, 2014). There are numerous career theories that exist that seek to describe the broad field of career development. One such theory is the Social Cognitive Career Theory (SCCT).

### **Theoretical Perspective**

Social Cognitive Career Theory was developed by Robert W. Lent, Steven D. Brown, and Gail Hackett in 1994, and is based on Albert Bandura's Social Learning Theory (Zunker, 2012). Although there are several kinds of social learning theory, the most influential is that which was created by American psychologist Albert Bandura in 1986 (Berk, 2010). It is important to first understand Bandura's theory, being it is the theory that the Social Cognitive Career Theory is based upon.

Bandura's Social Learning Theory proposes that modeling, imitation, and observation increase learning; his theory also stresses the important role of cognition in that these cognitions guide responses in particular situations (Berk, 2010). Social Cognitive Theory has an agentic perspective, which emphasizes perceived self-efficacy (regarding its effects on learning) and also the intentional influence over one's own functioning and following events (Bandura, 2012). Bandura (2012) emphasized that belief in one's own capabilities is self-debilitating and also proposes that human behavior is conditionally manifested and that "no factor in the social sciences has invariant effects" (p. 10). By this, Bandura is proposing that all social factors condition human capabilities in some way. According to his theory, human functioning is determined by an interplay of certain factors: a) the behavior individuals engage in, b) intrapersonal influences, and

c) environmental factors that are forced upon us (Bandura, 1986). Bandura described that sources of performance hindrance can include faulty assessment of performance (misjudgment) and situational constraints.

Lent, Brown, and Hackett's Social Cognitive Career Theory utilizes basic proponents of Bandura's Social Cognitive Theory to apply to career development (Zunker, 2012). The theory takes into consideration the issues of culture, gender, genetic endowment, social context, and unexpected life events and how these variables may interact with a person's career development (Lent et al., 1994). Social Cognitive Career Theory proposes that an individual's career choice is influenced by vicarious learning, personal accomplishments and successes (thus resulting in high self-efficacy), social influence, and physiological rates and reactions (Lent et al., 1994).

As an individual develops an ability for something, the individual's self-efficacy is increased, which then increases their perception of increased success in the future. As a result of increased self-efficacy regarding a particular task, an individual may narrow their attention or focus more on these successful tasks, which can form their career choice (Zunker, 2012). The role of the environment is also vital. If a person perceives a great number of barriers to their success, this may in turn demote their interests; on the other hand, if a person perceives few barriers, this may promote them to continue because of the likelihood of perceived future success (Lent et al., 2000).

The theory explores how career interests grow and mature, how they are developed, and then how these choices are turned into action; this exploration is achieved through a focus on self-efficacy, outcome expectations, and personal goals (the "Big Three"; Zunker, 2012, p. 42). These building blocks are all part of a triad that influences and even determines the course of career development (Lent et al., 2000). A person with low self-efficacy may avoid careers or work associated with their areas of perceived weaknesses. Explaining self-efficacy further, Social Cognitive Career Theory also suggests that both social beliefs and expectations affect an individual's self-efficacy (Lent et al., 2000). Self-efficacy is strengthened when success is experienced, outcome expectations (or personal beliefs) are shaped by learning experiences, and personal goals guide and sustain behavior; personal agency also interacts with the Big Three or this triad by shaping self-directed behavior (Zunker, 2012).

The Social Cognitive Career Theory contains general goals: a) to identify factors that shape learning experience and, thus, influence career behaviors, b) to explain how interests, abilities, and values interrelate, c) to understand how variables influence individual growth, and d) to identify the contextual factors that influence career development (Zunker, 2012). Social Cognitive Career Theory emphasizes assessing self-efficacy and overcoming barriers; this theory can be used by counselors to help clients conceptualize how various barriers to employment for persons with disability/ies can influence career outcome (Smith & Milson, 2011). Research has supported the relevance of Social Cognitive Career Theory for rehabilitation counselors in helping to better understand the career maturity and development of individuals with disabilities (Oches & Roessler, 2004).

Social Cognitive Career Theory is a useful theoretical approach to utilize when seeking to understand the role of perceived barriers on career development (Albert & Luzzo, 1999). Career barriers are, in fact, a construct that is conceptually related to Social Cognitive Career Theory and in recent years, career barriers have received more attention

(Lent et al., 2000). According to the Social Cognitive Career Theory, career barriers can include intrapersonal and environmental influences; the theory also specifically accounts for an individual's interpretation of these barriers ("perceived barriers"; Lent et al., 2000). Research has shown that an individual's perception of barriers is vital in that when an individual has high self-efficacy and beliefs, they can surmount or overcome their barriers and their perception of barriers is less likely to disrupt their occupational or career development (Luzzo & Hutcheson, 1996).

One missing piece of the puzzle in the literature to date is that of career supports. This topic is far less studied; however, Social Cognitive Career Theory does suggest that career supports are variables that facilitate the pursuit of careers. According to the theory, environmental conditions are recognized as having the possibility of being supportive or enabling to career development (Lent et al., 2000). Social Cognitive Career Theory traces how an individual may be affected by variables, which can ultimately become a support or barrier to employment. Thus, because of these important components of Social Cognitive Career Theory, research can utilize the theory as an overarching theoretical perspective to explore supports and barriers to employment in rural areas.

There are numerous studies using Social Cognitive Career Theory documenting how the career development process is impacted by supports and barriers for various populations ranging from battered women (Chronister & McWhirter, 2003; Morris, Shoffner, & Newsome, 2009), Chinese farmers (Zhao, 2011), African American women (Hackett & Byars, 1996), and Mexican American adolescent women (Flores & O'Brien, 2002). These studies, however, do not focus on supports and barriers in rural areas. The research that does exist surrounding Social Cognitive Career Theory in rural areas is limited in that it focuses on rural Latino adolescents (Ali & Menke, 2014) and rural Appalachian college students (Ali & Saunders, 2006). These studies looked at barriers individuals face in their career development and self-efficacy.

As can be seen, little research exists examining Social Cognitive Career Theory factors for those living in rural areas, and little to no research exists regarding those living in rural areas that are also impacted by disability. More research is needed that focuses upon Social Cognitive Career Theory factors in rural areas and how these differ among those with disability and those who do not have a disability. The literature review begins by examining supports and barriers to employment in general and then moves on to supports and barriers to employment specific to rural areas.

### **Supports to Employment**

To be included in American society means to have equal rights and opportunities as all others; one way that inclusion can be promoted is through meaningful work, which forwards individual independence (Lewis, Lee, & Altenbernd, 2006). The importance of meaningful work is well known. Studies have even shown a positive correlation between unemployment and suicide attempts (Ostamo, Lahelma, & Lonnqvist, 2001). In order for higher employment rates, meaningful work, and independence to occur, specific supports relative to the population at hand should be emphasized. Many internal and external supports and barriers exist for those diagnosed with mental illness; these individuals would benefit from an approach that considers their unique circumstances by evaluating their specific supports and barriers as well as evaluating the existing internal and external resources that may impact employment entry and re-entry (Schindler & Kientz, 2012).

### **Individual Supports**

Individual supports are an important buffer to career barriers. Higher self-efficacy has been linked to fewer reported career barriers (Wright, Perrone-McGovern, Boo, & White, 2012). Self-efficacy has also been linked to increased job satisfaction (Bradley & Roberts, 2004). Research has found both self-efficacy and autonomy to be associated positively with career decision-making activities (Guay, Ratelle, Senecal, Larose, & Deschenes, 2006). Also, individual supports, such as increased education and job training, are both important predictors of leaving welfare and escaping poverty through career obtainment (M. G. Brooks & Buckner, 1996; Gault, Hartmann, & Yi, 2008).

Family of origin variables (e.g., increased parental education) and positive health characteristics have also been associated with higher levels of employment (Edin & Lein, 2007). While Gault et al. (2008) found that the presence of young children strongly reduces the probability of low income single mother's employment, Sonfield, Hasstedt, Kavanaugh, and Anderson (2013) discussed the link between granting birth control and higher attainment of postsecondary education and employment among women.

Managed stress and psychiatric stability have also been found to be a support to employment (Schindler & Kientz, 2012). In fact, an individual's personal level of stress can be a large influential factor on psychiatric stability. While all of these individual supports are vital in obtaining and maintaining employment, there are also important community and contextual supports to consider.

### **Community and Contextual Supports**

Community and contextual supports also play a significant role in employability. Supports from community resources assist in helping families move from welfare to work (DeBord, Canu, & Kerpelman, 2000; Gault et al., 2008). Research has found specific supports to employment to include: reasonable number of hours, right choice of job, right time of day, possessed level of skill needed, and accommodation (Schindler & Kientz, 2012). Contextual supports such as these, which are specific to an individual's job or career, can influence employment. One study found that "facilitators" or supports to employment among a sample of persons with serious mental illness included quality consumer-provided relationships and individualized employment services (Henry & Lucca, 2004). Lent et al. (2000) also wrote about the importance of contextual supports to career choice. Factors such as these can be most effective in helping the consumers achieve their goals of employment.

### **Social and Family Support**

Perceived and received social supports have been shown to influence employment outcomes (Radey, 2008). Research has shown the importance of social support to well-being, with emotional support being a strong predictor of affective well-being, which is then positively correlated with re-employment (Seiger & Wiese, 2011). Stated differently, emotional support increases an individual's experiences of happiness and quality of life, and this subjective well-being is positively related to an individual's chances of returning to work. Therefore, feeling emotionally and socially supported by friends and family is an important factor in employment success.

Other research has also shown social support to be positively correlated with employment (M. M. Livermore & Powers, 2006) with those that perceive higher levels of

social support also reporting fewer career barriers (Kenny et al., 2007; Wright et al., 2012). Schindler and Kientz (2012) provided additional evidence suggesting that family and social support were important employment factors for individuals with mental illness. Research in the past has discussed the importance of family supports for welfare recipients (Gault et al., 2008; Parish, Lingxin, & Hogan, 1991). Drawing upon family and friends for both physical and emotional support, if needed, has been associated with less reliance on welfare (Harknett, 2006). Perceived social support reduces the likelihood of living in poverty and is associated with more positive coping; this type of aid is vital for low-income families in their everyday survival (M. G. Brooks & Buckner, 1996; Henly, Danziger, & Offer, 2005).

Social resources have been found to limit the negative effects of socioeconomic hardships (Parks-Yancy, DiTomaso, & Post, 2007). For individuals in rural areas, where family is known to be important (Blusi, Asplund, & Jong, 2013), this factor could be even more relevant. Individual, social/family, and community/contextual supports to employment are important to consider among all populations. While understanding supports to employment is vital, understanding the barriers to employment faced by individuals is another important piece to the puzzle. Unemployment cuts a person off from social roles that may affect a subjective sense of self (Henry & Lucca, 2004); therefore, understanding circumstances surrounding disincentive to work is imperative.

### **Barriers to Employment**

In 1996, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) fundamentally changed the “safety net for poor families”; the goal of the welfare reform was to move people away from government dependence and more toward independence from government programs (Lewis et al., 2006, p. 416). The intention of the PRWORA was and is to assist local offices in addressing the needs of unique individual clients as they assisted them in transitioning from welfare to work; research has since shown that many offices obligated under the PRWORA are now using innovative, more helpful behaviors that they were not previously using (Larrison, Nackerud, Lane-Crea, & Robinson-Dooley, 2005). Through movements such as these, it was and currently is hoped that increased independence is accomplished through employment for those who currently rely on government assistance. Barriers to employment must be addressed for increased employment and re-employment to occur.

Social Cognitive Career Theory considers barriers to be related to the prevention of certain career developmental tasks such as career choice formulation, choice implementation, or career advancement (Lent et al., 2000). Swanson and Woitke (1997) defined barriers as “events or conditions, either within the person or in his or her environment, that make career progress difficult” (p. 434). Low education, limited work experience, lack of child care, transportation problems, having a disability or functional limitation, the health of children or other family members, psychological distress, and attitudes toward work and welfare (including perceptions of the risks associated with leaving welfare) are all considered to be potential barriers to employment (Kalil et al., 2001). Different categories of barriers to employment exist. It is crucial to understand an individual’s specific circumstance/s and consider all barriers that can impact employment.

### **Demographic and Contextual Factors**

Age, race, sex, economic status, level of education, labor costs, and other factors related to the specific environment can be classified as demographic and/or contextual factors. These factors can also contribute to the obtainment or sustainment of employment. Lack of transportation, as well as limited supply of childcare options, both have been reported to hinder employability (R. A. Brooks, Martin, Ortiz, & Veniegas, 2004). Other factors significantly associated with contemplating returning to work included: availability of health insurance, personal health and physical ability, health concerns related to working and the work environment, and current job skills (R. A. Brooks et al., 2004). Many economic variables exist that influence employment. R. A. Brooks et al. (2004) conducted a study among unemployed persons living with HIV/AIDS in a large urban city in the United States and perceived barriers existed that prevented many of these people from returning to work; loss of disability benefits, loss of publicly-funded health insurance, and workplace discrimination were barriers endorsed by the sample. These results make clear that many of those who receive disability benefits, in fact, contemplate returning to work; however, there are numerous barriers that prevent these individuals from seeking employment.

Welfare may also be such a variable. While welfare exists to assist those in need temporarily, some may have more long-term needs for such assistance and cannot seem to eliminate the need for public assistance due to various barriers that impede finding adequate employment. Blank (2007) wrote about the failure of the Temporary Assistance to Needy Families program, which serves to address employment of single mothers; the number of single mothers who are unemployed and on welfare has grown in the past 10 years, and almost 4 million children are from unemployed single mother households. Although many individuals may want to become more independent, some may not see that as a viable option. These mothers report many serious barriers to employment including history of domestic violence, history of substance abuse, health problems, learning disabilities, and low education (Blank, 2007).

For those who have been unemployed for long periods of time, even this can negatively impact employment obtainment. One study found that number of years of unemployment was negatively associated with full-time employment status (Caputo & Cianni, 2001). Past unemployment can be a monumentous factor to consider when contemplating barriers to employment for individuals, especially with the extremely high levels of unemployment occurring in recent years. Other categories of barriers also exist to employment. While some request public assistance to help through hard times related specifically to demographic variables and/or economic down turns, others may need welfare for physical or psychological factors that can affect their income.

### **Physical and Psychological Factors**

The ADA defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life activities (ADA National Network, n.d.). Medical diagnoses can also be considered a disability when they are substantially limiting. Having a disability is a serious barrier to both seeking, securing, and maintaining employment; in addition to adults with disabilities encountering barriers to employment, teens and young adults with disabilities also encounter barriers to seeking employment (Lindsay, 2011). Not only is the disability a

barrier to employment, the corollaries that sometimes follow disability/ies can create obstacles surrounding employability. Legislation exists to assist teens with disabilities with the transition from school to the workforce. The School to Work Opportunities Act (STWOA) was created in 1994 in order to assist students in making the transition from school to the workforce (U.S. Department of Labor, 1999). The legislation calls for business and education collaboration, with increasing career opportunities ensuing from this collaboration (Davis & Pollack, 1995). Certain barriers reported by a sample of adolescents with disabilities included: families/friends discouragement, information about jobs not adapted, worry about isolation by other workers, victims of discrimination, inadequate training, inaccessible transportation, lose some or all of income supports, lose supports or housing, and no jobs available (Lindsay, 2011).

Hall and Fox (2004) examined different reported barriers to employment among people with disabilities; three identified barriers included doctors, therapists, and case workers, all of whom had discouraged the individuals from going to work; and lack of access to medical care and medications also prevented these individuals from employment opportunities. It can be seen from this study that not only are demographic and contextual factors (e.g., lack of access to medical care and employment opportunities) potential barriers to employment, but physical and psychological factors (e.g., disability status and discouragement) can negatively impact employment. Schindler and Kientz (2012) reported specific barriers to employment among individuals diagnosed with psychiatric disability including: fear and anxiety, psychiatric symptoms, unmanaged stress, lost motivation, inability to concentrate, symptoms of mental illness, and academic learning challenges.

Psychological diagnoses and symptoms can negatively impact employment. Findings by Lewis et al. (2006) suggested that among welfare recipients with mental illness, having moderate to severe depression symptoms was negatively associated with employment. Henry and Lucca (2004) wrote that barriers to employment among a sample of individuals with serious mental illness included issues related to service systems (e.g., irrelevant interventions and disrupted relationships), entitlement programs (e.g., SSI/SSDI disincentives, social security systems complexity, misinformation, lack of easy access to information, and discourteous SSA workers), and social stigma (e.g., family members fear the stress of work, family members fear giving up benefits, negative attitudes of providers, negative images in the media, and internalized stigma). Just as disability and the sequelae that often accompany disability can be a barrier to employment, compensation received for disability/ies may act as a barrier to employment among some individuals.

### **Disability Compensation as a Barrier to Employment**

For disability recipients, receiving benefits may have a negative effect on employment. In fact, disability benefits can sometimes be considered a barrier to employment when looking at the negative relationships often associated with receipt of benefits and employment status. Disability compensation may inadvertently reduce employment because income has been linked to work incentives (Nagi & Hadley, 1972). Multiple research studies have documented a negative relationship between disability benefits and workforce entry (Autor, Duggan, & Lyle, 2011; Drew et al., 2001; G. A. Livermore, 2011; Mamun et al., 2011; Nagi & Hadley, 1972; Olney & Lyle, 2011;

Roessler, Fitzgerald, Rumrill, & Koch, 2001; Rosenheck, Frisman, & Sindelar, 1995; Schindler & Kientz, 2012; Skivington et al., 2014; L. C. Taylor, 2001). Olney and Lyle (2011) conducted research regarding barriers to employment experienced by SSA beneficiaries and concluded that some SSA beneficiaries view SSA as restrictive and punitive, therefore fearing that gaining employment would result in losing their benefits. Thus, through careful calculations, these beneficiaries kept their earnings low in order to maintain monthly checks and medical benefits. This study shows an important barrier to employment among disability beneficiaries may be this “benefit trap.”

As can be seen from the above literature, there are numerous research articles that have documented supports and barriers to employment. Research is needed to address specific supports and barriers to employment among rural areas, specifically distinguishing between Social Cognitive Career Theory factors for those who have a disability and those who do not. Rural areas are a population with unique needs; therefore, such specific needs may impact employment differently.

### **Supports and Barriers to Employment in Rural Areas**

Research by Cochran et al. (2002) reported, through focused group interviews with rural residents, various supports that are characteristic of such populations, having close neighbors who look out for others in the community, close relationships with family, and local support for families in need through organizations and churches were listed as supports relative to rural living. Such supports specific to rural populations may positively influence employment for various reasons. Having close neighbors and a “know everyone” mentality may help with networking when looking for available employment. Having such close relationships with families may help assist the employed with much needed support systems and childcare through family members. Local organizations and churches may help support rural residents during times of need when unemployed, when searching for employment, and to act as social support, which, according to Seiger and Wiese (2011), is vital in terms of affective well-being as it relates to employment. Although such supports are existent in rural areas, specific barriers to employment also exist.

As mentioned above, higher rates of disability and lack of access to medical care, all unique to rural living, put rural residents at a disadvantage. Rural areas oftentimes lack sufficient jobs to pay a decent living wage. Potential barriers to employment rural residents may face include: poor health, functioning that limits ability to work, inadequate education, insufficient experience, lack of specific work enabling supports, lack of reliable transportation, inaccessible workplace, inflexible employment situations, discrimination and employer misconceptions of disability, and/or insufficient wages or benefits offered with employment (G. A. Livermore, 2011). L. C. Taylor (2001) examined the experiences of rural families receiving welfare; barriers to employment among this rural sample included lack of available jobs, inadequate or lack of child care, difficulty accessing transportation, and inconvenient office hours. Perceived social support was an important support to self-efficacy and self-esteem, both predictors of employment. Cochran et al. (2002) also noted need for employment opportunities (specifically opportunities that provide a sustainable and livable wage) and lack of high quality or affordable child care as common barriers to employment among rural areas.

It is important to understand how employment differs according to geographic location. Generally, northern states have higher employment rates, especially in comparison to southern states (Mamun et al., 2011), while states in the Appalachian Mountains (including West Virginia, Kentucky, Tennessee, Alabama, Mississippi, and Arkansas) had the lowest employment rates (Mamun et al., 2011). Rural areas are more likely to have blue-collar jobs, which are more reliant on physical capabilities and health, more so than white-collar work (Klobuchar, 2014). White-collar jobs are normally salaried or professional jobs that do not require physical labor but do require more formal education and training (Groshen, Williams, & Donald, 1992). These jobs are not normally accessible to rural residents due to a variety of factors. Blue-collar jobs are characterized by hourly wages and usually involve physical tasks, while any skills required are usually acquired through on-the-job training (Groshen et al., 1992). In general, healthier workers are more productive; therefore, those with health disparities may be more likely to be let go from their blue collar jobs if not performing proficiently. Rural residents may also lack the motivation for re-entry into blue-collar jobs.

### **Lack of Incentive for Employment in Rural Areas**

With limited job options, many rural residents may lack the incentive for employment or re-employment. Incentive for employment not only involves an individual's desire to work but also available opportunity, individual capacity, specific social circumstances, work-role centrality, and the existence of alternative options (Skivington et al., 2014). Opportunities for employment in remote areas may be limited, and there may not be many alternatives. Options for employment among rural residents may also be limited due to individuals' lack of education, skills, and social conditions unique to rural areas.

Bryson (2004) suggested that in rural areas the challenges are great and the services available for people with disabilities are not the same as those offered in urban areas; while many urban areas have providers and support systems available for those with disabilities, rural areas most often suffer from lack of transportation, lack of support, and inaccessibility. Many rural residents have a complex combination of health disparities and social issues that have compiled throughout their lives and that have affected their incentive for employment (Skivington et al., 2014) and also their eligibility for disability. Drew et al. (2001) found that receiving social security benefits (a program with high disincentives for earned income) was related to lower rates of participation in vocational rehabilitation and compensated work therapy, as well as related to poor outcomes with acquiring jobs.

### **Disability Compensation as a Barrier to Employment Among Special Populations**

It has been suggested that receipt of disability payments among special populations, specifically veterans, is associated with reduced employment; meaning, receiving disability benefits may reduce incentives for re-entry into the labor force (Rosen et al., 2014). Drew et. al. (2001) found that individuals who received disability benefits were less likely to participate in vocational rehabilitation and less likely to be employed at discharge. A study by Leonard (1979) found that payments of social security benefits promoted withdrawal from the labor force among men. Slade (1984) found that

there are fairly strong work disincentive effects of disability compensation for men close to retirement age. Another study found a small association among veterans receiving disability compensation and low employment (Rosenheck et al., 1995). Autor et al. (2011) stated that some veterans may apply for disability instead of having to work. As a result “concerns have been raised about the potential, long-term negative impact of disability compensation on return to work” (Drew et al., 2001, p. 1478). The studies mentioned listed the effects of disability compensation and how this can act as a barrier to employment for veterans and men. Research is still needed to address the effects of disability compensation on other special populations.

Several barriers to obtaining primary care have been reported among rural residents living with disabilities, including: incompetent service, long distance to travel for specialty care, lack of insurance or just having Medicaid, transportation issues, inaccessible offices for those with disabilities (Iezzoni, Killeen, & O’Day, 2006). Rural areas are many times “less sensitive to disability access issues than urban areas” (Iezzoni et al., 2006, p. 1258). This leaves the question of whether these results are generalizable in that other rural areas have these severe barriers to employment among those with disabilities.

This review of the literature highlights the importance of evaluation of both supports and barriers specific to the population in order for mental health professionals to provide efficacious services. These implications show that individuals would benefit from an approach that is customized to individual needs, including the evaluation of both supports and barriers to employment as well as internal and external resources to address these barriers (Schindler & Kientz, 2012). Through individualized needs assessments, circumstances that limit a person’s motivation for employment can be addressed. Also, potential concerns have been raised regarding rural areas having severe barriers for disabled residents. An important topic for discussion is that of supports and barriers to employment in rural areas and the differences in these supports and barriers to employment between rural disabled and non-disabled residents.

Fragar et al. (2010) found high levels of distress and functional impairment among rural residents in Australia among those who were unemployed and also those who reported permanency in inability to work; links between mental health and employment are especially applicable to rural areas. Employment may provide not only economic benefits but also provide social benefits that are detrimental to mental health. Individuals may benefit from employment in several ways, including the suggestion that employment provides meaningful structure, added income, and opportunities to interact with many people (Olney & Lyle, 2011). This underlines why it is important to understand differing supports and barriers to employment among rural residents and its implications for mental health professionals.

### **Future Research**

While it is known that employment options are limited and disparities are profound for rural populations, less is known about the specific supports and barriers to employment and how they differ among rural disabled and non-disabled residents. Research is needed to systematically examine if living in a rural area is a support or barrier to seeking employment. Factors such as health disparities, educational limitations,

and economic barriers may influence employment among all rural residents, not just those who indicate they receive disability compensation.

It is important to understand supports and barriers to employment and their uniqueness among different populations. Wright et al. (2012) suggested that as people perceive increased social support and decreased career barriers, this will in turn increase their self-efficacy in career decision making. Rehabilitation counselors and other professionals working with this underserved population will benefit from the extended knowledge they have regarding this clientele, which will in return benefit this type of clientele in that specific problems can be addressed and interventions can be made to meet specific needs.

This research is beneficial for rehabilitation counselors and mental health professionals working with rural residents. Findings regarding employment and disability underscore the importance of early needs assessment, adherence to medical requirements and recommendations, mental and physical therapies, and accommodation planning if people with severe disabilities are to obtain and maintain employment (Roessler et al., 2001). Understanding the specific supports and barriers to employment among both the rural disabled and nondisabled is a part of an early needs assessment.

Evidence-based supported employment, along with providing mental health services, could help reduce the rates of disability and enable those who are already disabled to begin working again (Drake et. al., 2009). Future research could look at how evidence-based supportive employment could assist rural residents. Also, the task of promoting employment is still left unresolved, leaving room for future research to explore how to get people back to work. Future research could also look at different rural populations when researching motivation for employment. By understanding specific supports and barriers to employment among this specific population, effective strategies of promoting employment are more likely to be understood.

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