

Exploring the Differential Impacts of the COVID-19 Pandemic on Employees with Disabilities: A Call for Organizational Action

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Abstract

Across the United States, attention has focused on the differential impact the COVID-19 pandemic is having on caregivers, women, and people of color in organizations, especially in higher education institutions. Yet there has been little attention paid to the impact of the pandemic on individuals with disabilities, even though disability and health have never been more salient. The current study aims to address this gap by discussing the impacts of the pandemic on individuals with disabilities in a university setting. In particular, the results indicated that individuals with disabilities experienced a greater increase in the hours they worked, as well as a greater reduction in time spent sleeping and for personal/social time relative to their colleagues without disabilities. Finally, the paper makes recommendations for supporting these individuals throughout the remainder of the pandemic and into the future.

Keywords: COVID-19, Employees with disabilities, Diversity and inclusion, Organizational action

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Introduction

The COVID-19 pandemic, and the indirect effects of the essential strategies utilized to contain the virus (e.g., lockdowns, mask mandates), have had a tremendous impact on people and organizations throughout the world, including institutions of higher education. Although the pandemic has impacted all people, the situation has exposed and exacerbated the longstanding inequities and vulnerabilities of systemically marginalized groups, such as women, people of color, and individuals with disabilities.

Recent studies have demonstrated the differential impact the pandemic has had on women and people of color, especially those simultaneously juggling work responsibilities alongside caregiving for children or dependent adults, without normal or safe societal support structures (e.g., schools, childcare, etc. long-term care facilities). For example, the gendered effects

of the pandemic in university settings are apparent; it is now well documented that there has been a profound decrease in time for research and journal submissions, an essential measure of performance, by women academics and especially for women with caregiving responsibilities (e.g., Deryugina, Shurchkov and Stearns 2021; Myers et al. 2020; Pinho-Gomes et al. 2020; Staniscuaski et al. 2020; Viglione 2020). Indeed, many studies have shown that unpaid household and care work, such as childcare, at-home school supervision, emotional support, health maintenance, and domestic tasks, have increased more for women than for men during the pandemic (Deryugina et al. 2021). Research has also found that women faculty are more likely than men to have reduced their work hours or taken leave from work, fewer hours of uninterrupted work time, or left their

paid employment completely (e.g., Alon et al. 2020). Similarly, Staniscuaski and colleagues (2021) also explored the impacts of the pandemic on academic performance. They found that White mothers and Black women, regardless of whether they were mothers, were affected more negatively during COVID than men in terms of research productivity.

The effects of the pandemic on women and people of color are essential to highlight. Yet, equal attention needs to be given to the impact of the pandemic on individuals with disabilities, another historically marginalized group, and include the compounding of this marginalization when there is an intersection of race, sex, and disability. Yet, this has not been the case to date. Disparities in health outcomes and access and economic and social outcomes for individuals with disabilities have been long-documented but largely unrecognized until recently (Krahn et al. 2015). In university settings, the existing research focuses almost exclusively on students with disabilities, with little research on the experience of employees with disabilities in this context. Traditionally across job categories and industries, individuals with disabilities have lower employment rates and earn lower wages than individuals without disabilities (BLS, 2020; Chan et al. 2010; Kuper and Heydt 2019; Potts 2005). When employed, individuals with disabilities report higher dissatisfaction (e.g., Uppal 2005) and perceive discrimination, biased attitudes, and mistreatment towards them at work (e.g., Hall 2007; Koch et al. 2021). Yet, research indicates that employees with disabilities are productive, reliable, committed, loyal, satisfied, motivated, and professional (e.g., Bricout and Bentley 2000; Hashim and Wok 2014) and value a sense of belongingness at work (Koch et al. 2021).

Unfortunately, the pandemic exacerbates adverse outcomes and reduces some of the positive outcomes on employees with disabilities. For example, a silver lining of the pandemic for employees with disabilities is an increase in remote work. Still, the access to remote work does not reduce the wage gap, nor the employment gap, that historically existed between them and employees without disabilities (Schur, Ameri, and Kruse 2020). Current data indicates that many employees with disabilities may not have been able to work from home and experienced lay-offs and furloughs instead. Those who maintained employment worked fewer hours per month than they had before the pandemic, and this consequence may be exacerbated for women and people of color. Schur and colleagues (2021) found that White women and Black women with disabilities experienced more significant employment losses during the pandemic than White men without disabilities. Black men also experienced larger employment losses, but the difference did not reach significance ($p=.067$). For employed employees,

having a functional limitation was still positively related to job loss, even after controlling for age, race, and gender (Umucu 2021).

When looked at through a lens of intersectionality, there is a compounding of disability with other dimensions of marginalization, such as race, class, and gender. For example, according to the U.S. Bureau of Labor Statistics (2020), individuals with disabilities have been disproportionately affected by job loss during the COVID-19 pandemic, with 20 percent of people with disabilities, who had been working in January 2020, out of work in May of that same year. For BIPOC Americans with disabilities, this number increased to 35 percent. In addition, before the pandemic, poverty rates were highest for Black. Indigenous individuals with disabilities (Bureau of Labor Statistics, 2019) and women of color with disabilities were found to experience greater disadvantage in nearly every aspect of life, including access to education, housing, employment, social services, and healthcare, than White women or White men with a disability (DiPrete and Eirich 2006; Maroto, Pettinicchio and Patterson 2019; Warner and Brown 2011). The pandemic has only exacerbated these disparities.

Despite the tremendous impact COVID-19 has had on individuals with disabilities in their work and personal lives, little research exists yet on their attitudes and experiences. One recent paper by Jesus et al. (2021) explored this topic and identified a multitude of lockdown-related disparities experienced by individuals with disabilities, such as disrupted access to healthcare, reduced physical activity leading to health and functional decline, social isolation and loneliness, disruption of personal assistance and community support networks, psychological consequences of disrupted routines and support, caregiver burden and stress, risks of maltreatment, reduced employment and/or income, and digital divide in access to services.

Such disparities in the experiences of individuals with disabilities and those without are not surprising based on the longstanding history of marginalization and mistreatment in society and places of work, which makes it even more essential to make salient, and not keep silent, the experiences of employees with disabilities and impairments during the pandemic. Even before the pandemic, the emotional toll of workplace mistreatment was a prominent theme in the experiences of employees with disabilities, despite a strong desire for employees with disabilities to feel a sense of belongingness in the workplace and to be treated like their peers without disabilities (Koch et al. 2021). Thus, more research is needed to understand the differential effects of the pandemic on this group so that organizations can create and implement

supportive policies and practices that are inclusive and provide a sense of safety and belongingness to employees with disabilities and impairments.

The current study aims to shed light on the experiences and perceptions of persons with disabilities working in a university setting during the COVID-19 pandemic. Thus, the guiding research question for this study (and the survey results to follow) is: how has the COVID-19 pandemic impacted individuals with disabilities in their higher education work environment, home life, and the intersection of the two? An organization-wide survey was used to voice employees' opinions, and analysis of the survey data explored the differential impact on work and life for employees with disabilities. Specifically, we examined differences in employee stress, satisfaction and connection to the organization, and time allocation for work/life activities.

Methods and Data

In January 2021, all faculty and staff at a mid-sized comprehensive university in the Midwestern United States were invited to complete an online survey better to understand employees' experiences during the COVID-19 pandemic. The survey, created by members of a university task force, examined how employees had been impacted by COVID-19 personally and in relation to their work. For the current study, we examined the portion of the survey dealing with employees' experiences with the COVID-19 virus and the impact that it, and the efforts to control it (e.g., lockdowns), had on employees' work and personal time, as well as organizational actions and strategies that employees reported would be helpful to support their success at work amidst the pandemic.

Participants

Approximately 40% of employees (N=521) completed the survey, with 458 employees responding to the item on disabilities and impairments. Among the participants, most (64%) were women, White (88%), and married (70.5%). In addition, approximately 48% of the sample were faculty, 46.5% were university staff, 5% were in an administrative role, and the majority (65%) had been with the organization for ten years or fewer.

Regarding disability, respondents were asked if they identified as having any of the following disabilities or impairments: a sensory impairment (vision or hearing), a mobility impairment, a learning disability (e.g., ADHD, dyslexia), a mental health disorder, a disability or impairment not listed, none of these, or prefer not to answer. Approximately 75% of respondents indicated none (N=390), while 13%

(N=67) of respondents indicated at least one disability or impairment, and another 10% (N=43) of respondents indicated they prefer not to answer. We excluded the respondents who chose "prefer not to answer" from our analyses but noted that there were few significant differences in key outcome variables between those respondents and the group who identified as having a disability or impairment. This is consistent with a large body of research documenting the difficulties individuals with disabilities have regarding decisions to disclose their disability status (e.g., Dalgin and Gilbride 2003; Goldberg et al. 2005). Individuals with disabilities continue to report experiencing stigma, discrimination, microaggression, and even denial of accommodation requests, in response to disclosure (Koch et al. 2021; Menendez 2018). The anxiety and fear that individuals with disability experience regarding disclosure of their disability status are influential among individuals with invisible disabilities – approximately 40-70% of all individuals with disabilities (Menendez 2018).

Outcome Variables

Experiences with COVID-19. To better understand employees' experiences with COVID-19, we asked employees to check the impacts of the COVID-19 virus on themselves and/or family members and close friends. They could check all that applied from a list that included items relating to testing positive, quarantine status, hospitalization, mental and physical health, and death from the virus.

Time allocation for work and life. To capture how employees' time allocation may have been affected by the COVID-19 pandemic, the survey asked employees to provide categorical estimates of the time spent in Fall 2019 (before the pandemic) to that spent in Fall 2020 (during the pandemic) on a range of work/life activities, including hours worked, hours of reliable and uninterrupted work, hours of sleep, and hours spent in personal/social activities. Specifically, we asked the following:

- On average, approximately how many HOURS PER WEEK did you work on anything related to your job? Responses were given on a scale with 10-hour increments: 1 (0-9 hours), 2 (10-19), 3 (20-29), 4 (30-39), 5 (40-49), 6 (50-59), 7 (60-69) and 8 (70+ hours).
- On average, how many of your reliable, uninterrupted work hours each DAY fell during "normal business hours" (weekdays; 8 am - 5 pm)? Categorical responses ranged from 1 (zero reliable hours) to 8 (9+ dedicated hours).

- About how many hours of sleep did you get per night, on average? Responses ranged from 1 (less than 4 hours) to 4 (6 hours) to 9 (11+ hours).
- About how many hours per DAY did you devote to your care (e.g., hobby, exercise, social time), on average across the week? Responses ranged from 1 (zero hours) to 9 (7+ hours).

Organizational Accommodations and Actions to Support Employees

To inform organizational decision-making related to supporting faculty and staff for the duration of the COVID-19 and beyond, the survey prompted employees to indicate how helpful a range of specific accommodations and actions would be for their work specifically. These items included options specific to teaching faculty (e.g., course release), leadership or managerial interventions (e.g., better communication or supervisor training), flexible work arrangements (e.g., remote work options), and reduced workload or performance expectations. Responses to these items were provided on a scale of 1 (not at all helpful) to 5 (extremely helpful).

Results

Experiences with COVID-19. A series of chi-square tests were performed to examine whether differences showed in the proportions of employees with and without disabilities who had experienced various outcomes from the COVID-19 virus. Results (summarized in Table 1) indicate that employees with disabilities were statistically significantly less likely to live with someone who has had to quarantine due to potential exposure to COVID-19, $\chi^2(1) = 4.35, p < .05$. This finding may reflect the more cautious approach to COVID-19 prevention that individuals with disabilities often need to protect their health and wellbeing. It might also be due, in part, to the fact that, according to our results, individuals with disabilities were statistically more likely to know someone who has suffered long-term adverse health effects from COVID-19, $\chi^2(1) = 13.94, p < .000$, and to have had someone they are close to dying from COVID-19, $\chi^2(1) = 4.25, p < .05$. Thus, even though individuals with disabilities did not themselves test positive for the COVID-19 virus more often than individuals without disabilities, they experienced more often the indirect effects of having someone close to them die from or

suffer other long-term, negative health effects from the virus.

Time Allocation for Work and Life. The results of a two-way mixed factor MANOVA showed a statistically significant main effect for time, $F(4, 430) = 35.58, p < .000$ and a marginally significant main effect for disability status, $F(4, 430) = 2.35, p = .054$, which were qualified by a significant interaction, $F(4, 430) = 4.21, p < .01$ on the combined dependent variables (see Table 2). The univariate results for the interaction can be found in Table 3 and indicate that the magnitude of change was significantly different (more negative effects) for employees with and without disabilities. In particular, employees with disabilities had a greater increase in hours worked while also having a larger decrease in hours spent sleeping or on personal care than employees without disabilities. This suggests that the pandemic than their colleagues more negatively impacted them without disabilities regarding time allocation for work and life.

Organizational Accommodations and Actions to Support Employees

A series of independent samples t-tests, using a Bonferroni correction for multiple tests, were performed to examine whether there were differences between employees with and without disabilities in how helpful they felt specific accommodations and actions might be in balancing work and personal obligations due to disruptions by COVID-19. The results indicated that no differences existed between the two groups, and the means for the various strategies can be found in Table 4. In addition, employees with and without disabilities identified a range of supportive organizational actions as helpful, including future course release time to reallocate for research, remote and flexible work options, training for supervisors on how to support employees during COVID, offering a sick leave bank and adjustments to performance expectations. Taken together, these results indicate that, despite experiencing differential impacts from the pandemic, the strategies that individuals with disabilities would find helpful are the same strategies identified by individuals without disabilities. Although it's crucial to ensure sufficient support for the unique needs of individuals with disabilities, these results suggest that organizations can implement a variety of supports that will serve all of their employees.

Table 1. Employees' Experience with COVID-19 by Disability Category: Counts and Percentages

	Employees with Disabilities		Employees without Disabilities	
	Count	Percent	Count	Percent
<i>I have tested positive for COVID-19</i>	1	1.5%	28	7.2%
<i>Someone I live with has tested positive for COVID-19</i>	3	4.4	27	6.9
<i>A family member and/or close friend has tested positive for COVID-19</i>	38	55.9	180	46.4
<i>I have had to quarantine due to potential exposure to COVID-19</i>	21	30.9	109	27.9
<i>Someone I live with has had to quarantine due to potential exposure to COVID-19*</i>	10	14.7	103	26.4
<i>Someone I am close to (family or friend) has been hospitalized due to COVID-19</i>	17	25	74	19
<i>Someone I am close to has suffered long-term negative health effects from COVID-19***</i>	14	20.6	26	6.7
<i>Someone I am close to (family or friend) has died from COVID-19*</i>	10	14.7	28	7.2
<i>None</i>	12	17.6	107	27.4

* $p < .05$; ** $p < .01$; *** $p < .001$

Table 2. MANOVA Summary Table for Combined Dependent Variables

Source	df	MS	F	p	Effect Size
Disability Status	4	430.0	2.35	.054	.021
Time (Within)	4	430.0	35.77	<.001	.25
Time x Disability Interaction	4	430.0	4.21	.002	.038
Interaction					

Note.—MS = Mean squares, effect size = partial η^2 .

Table 3. Time Allocation for Work and Life by Disability Category: Univariate Results

Variable ^a	Employees with Disabilities Mean (SD) N= 67			Employees without Disabilities Mean (SD) N=368			F-value for difference in change ^b
	Pre-COVID (Fall 2019)	During COVID (Fall 2020)	Change in Time Spent	Pre-COVID (Fall 2019)	During COVID (F 2020)	Change in Time Spent	
Average hours worked	3.90 (1.09)	4.60 (1.62)	0.70	3.70 (1.09)	4.06 (1.49)	0.36	4.85*
Reliable, uninterrupted working hours	5.48 (1.12)	5.00 (1.18)	-0.48	5.59(1.21)	5.24 (1.26)	-0.35	0.61
Sleep hours	5.31 (.94)	4.34 (1.36)	-0.97	5.20 (.90)	4.80 (1.0)	-0.40	14.31**
Personal care or social hours	4.55 (1.84)	3.37 (1.5)	-1.18	4.43 (1.73)	3.72 (1.84)	-0.71	5.29*

^a Responses are in ordinal categories

^b Degrees of freedom for the univariate tests are 1, 433.

Table 4. Helpfulness of Organizational Accommodations and Actions by Disability Status: Means and Standard Deviations

Variable ^{ab}	Employees with Disabilities Mean (SD)	Employees without Disabilities Mean (SD)
Minimize time spent in meetings	3.01 (1.31)	2.90 (1.29)
Flexible meeting times	2.15 (1.28)	1.98 (1.17)
Virtual meeting options	3.30 (1.31)	3.31 (1.34)
Alternatives to meetings (e.g., email)	3.07 (1.45)	3.13 (1.29)
Flexible work option(s)	3.64 (1.40)	3.52 (1.33)
Remote work option(s)	3.70 (1.40)	3.69 (1.37)
Communication on leave policies related to COVID-19	3.25 (1.33)	3.23 (1.22)
Temporary leave options due to impacts from COVID-19	3.09 (1.34)	3.23 (1.29)
Reduced workload expectations	3.43 (1.54)	3.14 (1.40)
Reduced supervision expectations	2.82 (1.60)	2.59 (1.37)
Reduced time serving students and other stakeholders in person	2.96 (1.62)	2.49 (1.41)
Reduced advising/mentoring expectations	2.51 (1.45)	2.25 (1.38)
Flexible deadlines for work completion	3.09 (1.51)	2.92 (1.97)
Communication to create awareness about the challenges some people face due to COVID	3.03 (1.45)	2.92 (1.76)
Training for department chairs and supervisors on how to support employees during COVID	3.35 (1.44)	2.97 (1.37)
Adjustments to annual performance review process and expectations	3.63 (1.45)	3.32 (1.36)
Offer sick leave bank where employees can donate or use communal sick leave due to impacts from COVID-19	3.13 (1.46)	2.84 (1.36)
Provide financial support for COVID-related impacts (e.g., emergency grants, subsidized childcare)	3.19 (1.49)	2.91 (1.43)
Reduced teaching load/expectations	3.59 (1.31)	3.56 (1.36)
Reduced research expectations	3.90 (1.45)	3.87 (1.33)
Tenure-clock stoppage option	3.63 (1.77)	3.18 (1.47)
Future course release to support time for research that was impacted by the pandemic	4.17 (1.29)	4.05 (1.26)

^a All responses provided on scale of 1(not at all helpful) to 5 (extremely helpful).

^b No significant differences were found at the $p < .05$ following a Bonferroni adjustment.

Conclusion and Discussion

The COVID-19 pandemic has had a devastating impact on people globally, and particular attention has been given to its differential effect on marginalized groups. Most of this research has focused on women and people of color, but far less attention has focused on another marginalized group throughout the world – individuals with disabilities. Furthermore, even less attention has been focused on the intersection of race, gender, and disability. This current paper addresses that first gap by comparing experiences and perceptions related to the pandemic for university employees with and without disabilities. Future research is needed to understand the intersectionality of these dimensions on outcomes related to impacts from the COVID-19 pandemic.

Differential Experiences with the Pandemic

Similar to other studies exploring the differential impacts of the COVID-19 pandemic on marginalized groups, the results of this project suggest that individuals with disabilities in this setting experienced more pronounced changes to their work and personal life than their colleagues without disabilities, despite no differences in themselves or their family and close friends testing positive for the virus. More specifically, employees with disabilities were more likely to have friends or family members go under quarantine, experience long-term health consequences of the virus, and even die from COVID-19. Regarding the pandemic's impact on time allocation, results indicated that all employees at this university (on average) worked more hours than before the pandemic. The results also suggested that this increase in time spent working was more pronounced for employees with disabilities than for employees without disabilities, despite the two groups having comparable amounts of reliable, uninterrupted time to complete their work. Additionally, people with disabilities suffered from a greater decrease in their sleep hours and time dedicated to personal/self-care during the pandemic than employees without disabilities.

Although both groups were affected, these findings suggest that working throughout the pandemic was different for individuals with and without disabilities. Therefore, organizations need to be aware of the differential impact on employees with disabilities and respond to their unique experiences and needs. That said, our findings also indicate that there were no differences between employees with and without disabilities in how helpful specific policies and actions would be to support their work and personal demands during the pandemic.

The lack of differences between groups suggests that specific support strategies are helpful to all employees, regardless of disability status. For example, implementing policies and actions that are helpful to both groups would allow people with disabilities to receive necessary support without requiring them to request ADA accommodations to receive that support formally. This is important because individuals with disabilities are often reluctant to ask for accommodations (Baldrige and Swift 2013; Kulkarni and Valk 2010) and consider the 'risks' associated with the ask. For example, whether the request is in line with the norms of the organization (Baldrige and Swift 2016), whether coworkers will be accepting of the accommodation, whether the accommodation draws unwanted attention (Schur et al. 2014), and whether the accommodation might be too costly (Baldrige and Viega 2006). Requesting accommodations is also influenced by individual differences such as age and gender (Baldrige and Swift 2014); thus, we might infer that the intersection of disability, race, and gender means that these individuals are less likely to ask.

The COVID-19 pandemic highlights that employees can work from home and be productive. Based on our findings, we recommend that organizations provide all employees access to a subset of accommodations, such as flexible work schedules or remote work. Such accommodations should be made through a simple/informal request process, unfettered by red tape (i.e., documentation, medical exams, formal reviews), so employees would have the ability to tap into resources without formal disclosure. Individuals with disabilities would retain their rights to the standard processes required for more individualized accommodation requests outlined by the ADA. An informal request process would further support an inclusive culture by normalizing the need for accommodation so employees can be safe to make such requests. Indeed, studies have demonstrated employee reactions to informal accommodations are favorable (Florey and Harrison 2000). That satisfaction with accommodations was more significant when the organization sought input from individuals with disabilities regarding their needs (Balser and Harris 2008). Inclusive cultures that operate within a system of mutual trust create an environment in which individuals with a disability are more willing to ask for accommodations (Balser and Viega 2001).

Inclusive Strategies for Support

Respondents in this study called for flexible and remote work options that allow them to work by increasing flexibility and/or reducing workloads and

expectations. Schur and colleagues (2020) contend that remote and telework could improve employment opportunities after COVID for workers with disabilities because the pandemic caused employers to rethink how job tasks are done and broadened their views of workplace accommodations. For example, Price-Waterhouse Coopers announced that 40,000 workers would be allowed to work from home (semi) permanently (Maruf 2021). Moreover, organizations could promote a more inclusive work environment by allowing employees to choose their work location to perform their best, without needing to disclose their situation and without fear of discrimination or retaliation. This is especially important to creating an inclusive work environment for individuals with disabilities as they experience more discrimination and mistreatment in the workplace than employees without disabilities (Koch et al. 2021; Ren et al. 2008; Schur et al. 2017).

Respondents also indicated that it would be helpful if there were adjustments to performance reviews and expectations to account for the impacts that the pandemic had on work and work goals. Additionally, they called for increased communication across the university to promote awareness of the challenges individuals faced during the COVID-19 pandemic. Respondents also asked that supervisors receive additional training to support employees facing challenges due to the pandemic. Such activity, if it also includes a discussion of helping employees with disabilities, is important because research has found that having knowledge and experience of job accommodation and workplace supports, as well as disability inclusion training, is important to the inclusion of individuals with disabilities (Gilbride et al. 2003; Iwanaga et al. 2018). Training can also work to dispel the perception that accommodations are always costly; instead of sharing that there is evidence that many accommodations are not cost-prohibitive and many individuals with disabilities provide their accommodations (e.g., Colella et al. 1998; Domzal et al. 2008; Lengnick-Hall et al. 2008; Schur et al. 2014). Moreover, Chan and colleagues (2010) found that the most significant predictors of inclusion for individuals with disabilities included disability in the organization's diversity and inclusion policy and knowledge of the ADA and job accommodations.

Taken together, these results suggest that employees with disabilities would find the same strategies helpful to their ability to balance work and home during the pandemic. If those policies explicitly address people with disabilities but do not burden the person with disabilities with the task of disclosing their disability, then all of these steps would rightly put the locus of change at an organizational level while supporting more open and informed conversations

across the campus community regarding accommodation needs and offerings. Moreover, additional or enhanced accommodations would still exist to support the unique needs of employees with disabilities, creating a more equitable, open, and inclusive work environment.

Limitations

The cross-sectional survey research design, the context and timing of the survey, and the university sample of participants offer important limitations to the interpretation and extrapolation of these results. First, the survey was administered at a one-time point (January of 2021), amid the COVID-19 pandemic, and at the midpoint of the academic year. Some of the survey items asked respondents to estimate time spent on activities (e.g., sleep) a full year prior (Fall 2019) and estimate the average time allocated during the Fall 2020 semester. This retrospective, self-report method of assessing individual time allocation is likely less accurate than methods such as a daily log, and it is possible that participants' estimates were biased by their current experiences or current levels of stress. For example, it seems plausible that individuals who felt stressed or tired in January 2021 (at the time of survey completion) overestimated the number of hours they slept in Fall of 2019 and underestimated the number of hours they slept in the Fall of 2020. While such a consistent pattern of bias is unlikely to impact the group level differences found in the current study, additional research utilizing a range of methods to assess the target variables of this study would add clarity and confidence to the current results.

A second significant limitation of this research is the narrow scope of focusing exclusively on employees within one higher education institution. While the participants of this research did represent a range of employee characteristics and work roles (e.g., instructors, administrators, and support staff), additional research on the impact of COVID-19 on employees with disabilities working in a broader range of organizational settings is needed. Further, given the importance of the geographic and sociopolitical context of the pandemic, a replication of these results from across regional contexts helps make a case for reliability. It amplifies the call for more organizational actions.

Conclusion

This study extends the research on the differential impacts of COVID-19 on marginalized groups to examine its effects on individuals with disabilities working in higher education. Similar to research on women, caregivers, and people of color, this research

finds that individuals with disabilities also experienced greater and more negative changes in their work and personal lives than those without disabilities. Future research should explore the intersectionality of these marginalized groups and their unique experiences and needs. As organizations move forward with their pandemic and post-pandemic policies, they should be cognizant of developing policies that create an inclusive workplace for all of their employees AND develop policies that explicitly and openly are supportive of and inclusive to individuals with disabilities. Doing so will create a more equitable, not just more equal, work environment and provide support to individuals with disabilities, so they have the best opportunity to perform their best at work and also feel satisfied, engaged, and supported at their organization. Future research should continue to explore the impact of the pandemic on individuals with disabilities, and different types of disabilities and impairments, to create a better, more inclusive working environment for all people.

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