Welcome, everybody. My name is John Dineen. We are at the Northwest ADA Center at the University of Washington. We are looking at “baby boomers”. We are going to be looking at accommodating employees. We are going to take a look at baby boomers as customers in businesses.

Slide 1: “Accommodating Older Employees Who Would Never Admit to Having a Disability”
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On the first slide, you see a 33-cent stamp if you can remember back then. It has a Norman Rockwell painting. A proud nurse is holding up a brand-new baby outside of the window. The grandparents are looking on. They just had a baby, after the war. Where are we going to go?

Slide 2: And just who is a Baby Boomer?
Can you answer “YES” to the following questions?
1. Were you born between 1946 – 1964?
2. Are you now 50 - 68 years old?
3. Do the Boomers’ own 78% of America’s financial assets?
4. Do you have a 1 in 10 chance of declaring that you will NEVER retire?
5. Do you know exactly who sang, “Will you still need me, will you still feed me, When I’m sixty-four?"

So when -- there we go. Moving to slide two, I would like to help you identify whether you are a baby boomer or know things about baby boomers with a short quiz. Let’s see how many questions you can answer or guess. Were you born between 1946 and 1964? Are you now somewhere between 50 and 68 years old? Do the boomers own 78% of America’s financial assets? Do you have a 1 in 10 chance of declaring that
you will never retire? And then the fifth, do you know exactly who sang these words: “Will you still need me, will you still feed me, when I'm 64?” If the answers to the first four questions for you are ‘yes’ and you know that the Beatles wrote that song, chances are you are a baby boomer or more knowledgeable than you ever realized about the Beatles.

Slide 3:

**Older Americans are growing in numbers**

The number of Americans aged 65 and more has grown from 40 million in 2000 to 60 million by 2020.

By 2030 there are expected to be 80 million.

In slide three, I'm going to begin this webinar by taking you through some ways of looking at the American population and how it's changing because that change is very important in terms of employment and the business community. So on the chart on slide 3, look at population of Americans who are 65 years old and over an 80-year period.

In this one, it starts in 1950, jets all the way out to 2030. What we see back in 1950 after World War II, some of you are the over 11, 12 million Americans that were 65 and over by the time we get to 2000, that number has quadrupled to nearly 30 million...
people. By 2020, it's going to grow to 60 million. It's begun to rapidly increase so that by 2030 there will be perhaps 80 million people that are 65 years and over -- 2030. Changing over eight times over the time period.

Slide 4: American’s Population Growth Reflects the Baby Boomer Bulge
The number of Americans aged 65 and more has grown from 40 million in 2000 to 60 million by 2020. By 2030 there are expected to be 80 million.

In slide four, wanted to spend a little bit of time helping people understand what that term “baby boomer bulge” could mean. We are looking at American's population at two points in time. On the left side, looking at the population in America in the year 2000. On the right side of the chart, we are looking at that population in 2020.

If we go over to the left side and try to understand what this funny looking figure looks like, starting at the bottom to youngest. From birth, 1, 2, 3, 4, 5, 6, 7, years old. As we move up to the chart, we get into people in their 20s, 30s and 50s. We get to the top of the chart, we are looking at Americans that are 85 years and older. This is the population of people, they grow older, they move up to the chart. The chart is divided into males on the right and females on the left side. When we look at the population, it's 10 million very young people between birth and maybe 10 or so years old. And there's
a light green band across it that represents the offspring or the babies of the baby boomers.

That's a little bit bigger. As we move up the chart up in age, the notice that there's a not quite so many people that get to a wider strip that's rose colored. And this represents the baby boomers in the year 2000. They were 36 to 54 years old. Middle aged. There's no more than 10 million of all of those baby boomers in that 18 year age range. As we look at older Americans, there are many. As we move up towards 60-year-old, 70-year-olds and babies in their 80s, there's fewer Americans.

As you all know, women tend to live longer than men. You have more women in society. You are more women in their 70s and the 80s. Let's take a look 20 years later on the right side-the year 2020. You will see that this doesn't change the shape. It looks like a fireplug.

If you look at people that are birth to 20 years old, around less than 10 million. When you look at the offspring and the baby boomers, there's a few more of them. It constricts again after the 10 million, and then -- baby boomers and there's a whole bunch of them. In 2020, the boomers are going to be 56 to 74 years old.

As we look at the people that are 75 years older, many of them are living longer. We have an aging society. America was a younger society in 2,000, but an older society in 2020.

**Slide 5: the GDP Workforce Gap**

In the decade from 2002 – 2012, the percentage growth of older workers has outpaced the gross domestic product growth. The percentage growth of younger workers is much slower.
Moving on to slide 5, I want to help you start thinking about how the workforce population has changed. This looks between 2002 and 2012, we take a look at the relative change in workforce for older workers and younger workers -- compared to the GNP. The GNP increasing in terms of percentage with each of those years in the decade. But above it there are series of green squares connected by a green light represent older workers. And then we have the percentage of older work that are growing faster than the domestic product. By contrast, when you look at younger workers, that's the line at the bottom of this graph. And over the ten-year period, the blue line indicates about a cumulative growth in younger workers.

Our society continues to use. We're producing items at a significant rate. Younger workers along could not produce this.

I wanted to look at the trends over a period of time. It's significant. This is a nice change in society.

**Slide 6: Older Workers now outnumber teens in the workforce**
So in this particular slide, we are looking at six decades from after the war in 1948 all the way out to 2008. It looks at two groups of workers. Teenagers 16 to 19 years old in the work force which is the gray line we will be talking about. Sixty-five years and older which is represented by the red line. In the period after World War II from 1948 into the 1950s or 1960 or so, there are slightly more teenagers than older workers in our workforce. Then starting about 1960 and through the 60s and into the 70s and almost through the end of the 70s, the number of teenagers grew like topsy.

That's the baby boomer population that are coming into the work force in their first jobs. It's a dramatic spate of people by contrast, it's the workers that are 65 years old and older, they are about the same, none of them changed. As you move through the 80s, that huge swell of teenage workers, not quite so many. By the time we get to the mid 1990s we saw an interesting trend, now workers that were 65 years old began increasing. As they move into the turn of the century, near 2000 and out near 2008, we have a loss of growth in workers and decline in the number of teenagers.

It is interesting that in the year 2008, the first time in that 60 year period, we have more workers that are 65 and older than we have teenagers.

I wanted to try to give you a clear picture of how things are changing. We are going to take a look at how our work force changes in terms of the projected percentage change -- right now in 2006 to 2016.

Slide 7: Older Workers Provide Labor Market Growth
When you look at workers that are 16 to 24, they seem to be lost. They are going to have fewer workers over that 10-year period. Look at workers that are 25 to 54, have hardly any growth in about the same number. We begin looking at workers that are 55 years old. 55 to 64 years old, we see a 37% growth in their numbers in the labor force. And when we look at the 65 to 74-year-old workers, we see an 80% change in that grouping that are 75 and more. 75 years and more are looking at an 80% change.

**Slide 8: More Older workers are NOW full time employees**

*The majority of workers 65+ years always worked part time until 2002. After then, more worked full time.*
In slide eight, I wanted to now begin teasing out some of the information we know about the older workers. I think it's helpful to get a feel for how things are different than they were. So this particular chart takes a look at the three decades between 1977 and the year 2007, and takes a look at workers at 65 and older. They were working full time and those workers that were working part time. As we begin the chart, the green squares connected with the blue line which is the top line as we look from left to right on the top. We have more part-time workers that are of that age and slightly fewer workers that are full time, which is the red diamonds that are connected by red lines. It's about a 3 or 4% difference between the number of workers working full time and working part time. As we move through the 80s, that remains stable. Get into the 1990s and there's a significant change. The mid 90s, there's a whole lot more workers that worked part time and corresponding fewer that are working full time. It's about a 15 point gap or so. Pretty big gap. And things dramatically reverse themselves so that by the turn of the century and just after 2001, we see a very significant increase the older workers that are working full time and fewer workers that are working part time. By the time we get to 2007, it's a big difference. A lot more workers working full time. Goodness gracious.

Slide 9:
Many Boomers want to work full time & stay working longer
• “The best insurance during a recession is a full-time job. Guys my age or older are sticking around.”
• AARP survey found 7 in 10 Americans plan to continue working past 65 yrs. Nearly half expect to work well into their 70’s and 80’s.
• In 2014, 41% of Americans 55 or older (Baby Boomers) are employed, making up over 21% of the nation’s total labor

Let’s talk about this. What does this mean? How does this work? On slide 9, we hear from the baby boomer generation which isn't really all past 65 right now. Just to remind you, as of today, baby boomers are in the range of 50 years old to 68 years old. Just the first bit of baby boomers that are going to hit retirement. I have a quote that I loved from a worker. “The best insurance during this session is a full-time job. My age, we are sticking around.” And when the AARP did some surveys of Americans asking them, how long do you plan to work? How long do you plan to stay at your job? 70% of them said -- we are going to stay in work and continue to be employed into our 70s and past. That’s a different expectation.

When you look at today, 41% of all Americans that are 55 and older which includes baby boomers, 21% of those Americans are employed.

Slide 10: Why are workers staying longer??
• Social Security retirement age gradually increasing.
• Economic downturn wiping out investment income; can’t afford to retire.
• More Boomers work in positions requiring knowledge rather than strength (this is a good predictor of retirement).
• Many love their jobs and want to continue.

Slide 10, why is this happening? What’s the explanation? There's a number of possible factors. Older worker here. “Why are you staying?” The social security retirement age is gradually increasing. It's 66 right now. We know that it's going to move up to 67. And then our country debates what that age might be, the data, the trends we are seeing in the presentation help you understand why there's a discussion. Maybe it should be 68 or 69. That comment makes more sense now when we look at how long people are staying at work.

Another factor that we cannot deny is that many people of the retirement age today don't have good retirement plans. They have individual investment retirement plans. For many of those, the recession literally took a bite into their earning power, their plans and all of those things that are getting better now.
Not yet. The third factor is that boomers work in positions that require knowledge, more so today than physical strengths and physical labor. It's the change in the way our country has made from a manufacturing society to a knowledge-based society. When you see boomers working, they are going to consider staying longer. Many of them love their jobs, which is why they continue. They are not ready to go back. Slide 11 illustrates the second big factor in our discussion. We are talking about people growing older and continuing to work. Look at disability and the prevalence by age.

Slide 11: Disability Prevalence by Age

Up to age 44, only 10% of people have a disability. By age 69 it jumps to 35%. By age 79, over 50% have a disability. Those 80+ years have a 70% chance of having a disability.

In the charge on slide 11, we are looking at the presence of any disabilities. This could be from the mild to a significant impairment. The chart looks at different
age ranges. If you look at people in America from age 15 to about age 44, what we see is about 10% chance of having the disabilities. One out of ten people have disabilities in that age range. And you look at the decade of 35-year-olds to 54-year-olds and it jumps up to 20%. Those people may have some type of disability. As you look at 65 to 69, it jumped up. It increases. You look at 65 to 69 year olds, that comes up to 34% or so. Look at 70 to 74-year-old, up to 45%. And you look at people that are 80 years old or older, they will have a 70% chance of having a disability.

Slide 12: 47 Million American Citizens have a disability
Top 10 Causes of Disability

On slide 12, I wanted to take a look at disability. The (Center for Disease Control) CDC's point of view. What are the top causes of disability in America?

I have to qualify this data. This is CDC data. They have not updated it. I don't think it's changed in a period of time. You look at the ten top causes of disability. And look at how the CDC describes them. Arthritis or rheumatism. Followed by back or spine problems. And then dropping off significantly to heart problems. Talk about those
in a moment. Mental or emotional problems. Lung or respiratory problems. Diabetes is growing in America. That may change over time. It may go from where it is now to a more frequent cause of disability. It's followed by deafness or hearing problems. And then something the CDC calls stiffness of extremities or limbs. This is followed by blindness or vision problems and stroke.

Slide 13: Are these impairments much of a problem to the business community?

- “The brain-drain” is real. Many Boomers have valuable knowledge, experience, talent that will be missed when lost.
- SHRM/AARP poll of human resource managers found 70% of businesses say Boomer retirements are “a problem”.
- Half of the Boomers retired “earlier than expected” due to “health”.
- Workers pay Social Security; Retirees accept it.

On slide 13, I think there's a fair question. Do these impairments present much of the problem to the business community? Americans always had presence of arthritis and rheumatism. Always been there. Well, as it turns out, the fact that we have a lot of older workers who are baby boomers that have positions that have jobs requiring great knowledge that has value to their companies. They have experience. It's useful, pretty good talent and when they leave, everyone notices. Everyone notices. The term “brain drain” applies. The graphic is of a brain holding a couple of suitcases and walking on the side of the street. The society of human resource managers or SHRM are sure paired up with the AARP to talk to human resource managers about people retiring. What they have seen is a change of attitude over the last seven or eight years. And most recently, 70% percent of businesses say that retirements in their company are not a problem. But later it will be a bigger problem. When you look at workers who have retired earlier than expected-the reason they do is for health reasons. To be crass, when people are employed and obtain social security, they become accepting of social security.

Slide 14: How does the ADA view “aging”?

Aging by itself is not a disability. Some age-related impairments will meet the ADA definition of disability,
others will not.

What makes a physical or mental impairment a disability under the ADA is that it:

• Substantially limits one or more major life activities, or
• There is a record of such an impairment, or
• The individual is regarded as having an impairment.

In slide 14, how does ADA view aging? Some of the age related impairments that people develop will fit the definition of disability. Others may not. What makes a physical impairment is one of three possibilities. One is that it's substantially limits one or more major life activities. That's like seeing, hearing, eating, sleeping, walking, standing, speaking, concentrating and communicating and so forth.

With the ADA amendments, we added on a couple of more major life activities that included functions like -- normal cell growth, digestive, bowel, blood or neurological and other functions.

The second leg of the definition is that there's a record that someone may have had an impairment. They don't have it now. But continue to be treated as if they have it. And the third is the individual is regarded as having an impairment. You think of someone who was disfigured in a terrible fire. Plastic surgery. They are doing well now. They don't really have a disability, but they are treated as if they do. There are protections for that.

No questions at this point? Well, I'm following the Harry Truman mold. If you cannot convince them, confuse them. I'll keep moving along.

Slide 15: Let's look at age-related disabilities Arthritis

• Osteoarthritis, a deterioration of the cartilage tissue that cushions our joints, is most common.
• The risk factors are age, obesity, genetics and the overuse of joints from work or sports.
• Women older than 45 are at a higher risk than men.
• It can occur in any joint, but hands, knees and hips are among the most common.

We are going to look at the age related disabilities. On this page, we have two drawings. One is of a woman. She has a little bit of gray hair and when going down the stairs she needs a crutch to do so. Be very careful. They have someone holding their hands. It's inflamed or hurts a lot. It's red.

Once again looking at arthritis. Osteoarthritis is the most common form of arthritis.

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It takes deterioration of tissue that cushions the joints. There are a lot of risk factors. One is age and another is obesity. And then those people who -- activity in sports really result in overuse of the joint may become arthritic. Or things we know about women with arthritis, women at 45 are higher risk than men to have arthritis. It tends to show up in disabling ways and hands, knees and hips. Those are the most common type locations for arthritis.

**Slide 16: Arthritis, continued**

Rheumatism (Rheumatoid Arthritis)
- Disease of the immune system that can occur at any age.
- Symptoms include pain, swelling, fatigue, weakness, and stiffness (most common in morning).
- RA is three times more likely to affect women than men, and often occurs later in life in men.
- There is usually progressive joint damage in RA. Fortunately, treatment can help slow joint damage.

Moving on to slide 16, there's a little photograph of an older gray haired man getting up off of the chair. His expression is he's hurting a bit. We are going to talk about rheumatism or rheumatoid arthritis. It's a problem with the immune system. It can show up at any age. Pain, swelling fatigue, weakness and stiffness. And after people are getting up from their seat, really are stiff and not limber for a period of time. RA is three times to more likely to affect women than men. And often occurs later in life in men. The good news is that treatment can slow that better.

**Slide 17: Heart Disease**

Cardiovascular Disease
- Encompasses variety of heart conditions, including high blood pressure & stroke, rhythm disorder, congestive heart failure.
- Individuals with it more likely to experience depression.
- Symptoms include chest pain, shortness of breath, weakness, dizziness.
- Work limitations for 22% ; pushes toward retirement.

On slide 17, we will not cover all top ten of the diseases. But going to touch on significant ones. Heart disease is a common issue in Americans. It's third. It includes
high blood pressure. Includes having had a stroke. Heart rhythm disorders and congestive heart failure. These people are also more likely to experience depression. People feel symptoms that include shortness of breath, chest pain, weakness, dizziness. Cardiovascular disease tends to cause limitations that show up pretty early in work. And for about 22% of all people with cardiovascular disease that are working, there are limitations on what they can and cannot do. This tends to push them out of business and tends to push them towards retirement.

Slide 18: Heart Disease, continued

Hypertension (high blood pressure)

- At age 65, both men & women have 30% likelihood.
- Gap widens after that, with women having increased
- Most easily controlled. Factors include overweight, high cholesterol, too little exercise.
- Symptoms? Usually none.
- Leads to heart disease, stroke, cognitive impairment.

Slide 18, shows a photograph of a physician taking blood pressure of an older man. At age 65 which is close to where I am, both men and women have a likelihood of high blood pressure. The gap widens after that. Slightly increased chance of having high blood pressure compared to [unintelligible]. This is one of the most readily controlled of the impairments we are talking about. People who have hypertension usually have high of cholesterol and too little exercise. What are the symptoms? This is the silent killer. People will not feel like they have high blood pressure. It tends to lead to heart disease and stroke.

Slide 19: Mental Health Illness

- Perhaps 1 of 5 boomers will have a mental health issue. Depression is often a side effect of other disabling conditions, such as vision deterioration.
- Mental health medications can interact with those for high blood pressure, diabetes, and others.
- Health care workforce is not prepared for so many Boomers. Mental health issues often mixed with other, more obvious disabilities.
- Impacts social relationships, energy, sleeping, etc.

Move on to slide 19, mental health issues. Perhaps one in five boomers will have a
mental health issue. One of the things we know is that depression tends to occur with some of the other disabling conditions. Frequently, people who struggle with vision issues often have depression with that impairment. And one of the difficulties about controlling mental health impairments is that patients using mental health medications are at risk of diabetes. Pretty careful medication management is required for those folks.

This is something that surprised me; I hadn't thought about it. It struck me. When we look at the mental needs that are going to be showing up. We have a healthcare work force working with that population of individuals. They are not now prepared to have so many baby boomers that are going to have mental health issues that are going to need support and attention and assistance. Again, because of a tendency of mental health issues. You could go over -- there's going to be a bunch of people. When we look at those impairments, they can affect how people interact, their social relationships, how well they stay healthy. You want to pay attention to that.

Slide 20: Diabetes

Diabetes characteristics

- Age 65 years or older: 10.9 million, or 26.9% of all people in this age group, have diabetes.
- Type II develops at middle age or older adults.
- Most likely? Older people, women, people of color.
- Hearing loss is about twice as common in adults with diabetes as those who do not have diabetes.
- Workers with diabetes are more than twice as likely to miss one day or more of work in a two-week period.

Diabetes is slide 20. Diabetes is a disability that is on the rise in America. If you look at today at people that are 65 years and older, there are almost 11 million of those people that have diabetes. At age 65 almost 27% of these people have diabetes. It's relatively common. Type two, which develops middle age is going to be the more likely culprit. It's not a very even disability. The trend to affect older people -- [unintelligible] than those that are light. People who have diabetes have issues. It [unintelligible] than those that have disability. Workers that have disability miss one or two days of work. Slide 21:

Diabetes, continued
- While often managed well, potential effects: vision

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problems, loss of feeling in feet, kidney, nerve damage.
- In 2005–2008, 4.2 million (28.5%) people with diabetes aged 40 years or older had diabetic retinopathy.
- Twice as likely to experience depression.
- Adults with diabetes have heart disease death rates about 2 to 4 times higher than adults without diabetes, and the risk for stroke is 2 to 4 times higher among people with diabetes.
- Often a factor in early retirement.

Condition on diabetes on slide 21. Many people manage diabetes quite well, thank you. Potential effects if it gets out of control are visual issues, loss of feeling in their feet, kidney damage and nerve damage. We look at period of 2005 to 2008, 4.2 million people with diabetes aged 40 years -- they are likely to have heart disease. There are people who don't have diabetes. They are two to four times as likely to have a stroke compared to people who don't have diabetes. Diabetes can be a significant issue everyone though so many people work well in controlling that, tell you a factor and really retire.

**Slide 22:**

**Hearing Loss**

Me? I'm not disabled. I just can't hear so well.
- Presbycusis is the gradual age-related reduction in ability to hear high-pitched sounds.
- Noise-induced hearing loss is result of exposure to loud sound.
- About 70% of Boomers who need hearing aids don't have them.
- Impact is emotional, physical, socially isolating.

Here is one of my favorites. Hearing loss. “I'm not disabled. I just can't hear so well.” We went to dinner for our esteemed colleagues. We sat at a busy restaurant across from one another. A bunch of us that are in our 60s. And as people talked about the event the next day, it was great. I couldn't hear what people were saying. It was fun, but I couldn't hear what people were saying. Let's talk about that. I would like to distinguish this from the further down the spectrum. We know a lot of people that are hard of hearing or deaf. This is sort of the other end of that spectrum. It’s impactful. Presbycusis is the gradual age related reduction ability to hear high-pitched sounds. Because it sneaks up on people, they don't notice it until it moves quite forward.
Noise-induced hearing loss is a result of exposure to loud sound. Those that did or do not hear anymore. Here is a statistic that I think is interesting: 70% of Baby boomers who need hearing aids don’t have them. As you look at hearing loss, it's not quite a significant level, the impact tends to be emotional and isolates people.

Slide 23: Hearing Loss
As people age, the likelihood of developing a hearing loss increases dramatically. Workers aged 65+ years represent 43% of all people with hearing loss. And men have 61% while women represent only 39% of those with hearing loss.

Moving on to slide 23, who has hearing loss. We have two pie charts. One of them asks who has a hearing loss. We are going to have the people from zero to 17 years old. 5% of those people are represented in all of the folks that have the hearing loss. You look at the 18 to 44-year-olds, they represent 23% of the total of people that have a
hearing loss. When we look at the 45 to 64-year-olds. They represent 29% and then
65 and older, oh, my goodness, they get the good piece of the pie at 43%. So you can
really see that progression in this pi chart, the likelihood of having hearing loss goes up
with age. Looking at men versus women.

Men are about 61% -- 61% of all of those that have a hearing loss and women
represent only about 39%. That's an interesting issue. A lot of us who feel that we
don't listen -- we know that we can't actually hear.

**Slide 24: Visual Impairments**

Eye disease Includes: cataracts, diabetic retinopathy, glaucoma, and age-
related macular degeneration.

- By age 70, workers have 1 in 6 chance of visual impairment. Only half will have
corrected vision.
- Equal issue for men & women.
- Impedes reading, driving, socialization.

Moving on to slide 24, visual impairments. Visual impairments represent kind of a
family and includes cataracts, diabetic retinopathy, glaucoma and age-related macular
degeneration. Something that astounded me when half of those people will have vision
accurately corrected. Although, the other half could have it corrected. Think about
people at work using the computer and cell phones.

**Slide 25: Balance Impairments**

**Symptom of several conditions**

- For Boomers age 70+, three out of four experience
  balance impairments.
- Contributing? Muscle mass loss, arthritis, inner ear
  issues, heart disease, nerve damage, loss of sensation
  in feet.
- Balance-related accidents can blossom into major
  problems for older people.

Moving on to slide 25, balance impairments. That wasn't listed as one of the big
ten. They are a number of conditions that we are talking about. We have two
photographs. One of a worker who is climbing a ladder. He's fallen down to the floor.
His helmet is knocked off. And materials he was carrying are down on the floor. He
looked like he might be still unconscious. This is an older woman. She's on a stairway. Pretty steep. She clearly doesn't feel well. Something hurts. And she had problem with catching her heel and taking a short tumble on the stairs.

When we look at people that grow older, there are about 75% who have an impairment. 70-year-olds -- what contributes to that? Muscle mass loss. Arthritis. Inner ear issue. Heart disease. Rib damage. Loss of sensation in feet. And balance is significant problem for people. At age 64, I always felt like I was thick on my feet. Had pretty good balance. Just in my early 60s and especially the last couple of years, my balance has dropped off. I don't like it.

Slide 26: Which leads us to a couple important principles
“... Society's accumulated myths and fears about disability and disease are as handicapping as are the physical limitations that flow from actual impairment.”
-- William J. Brennan, Jr.

"Let's stop "tolerating" or "accepting" difference, as if we’re so much better for not being different in the first place. Instead, let's celebrate difference, because in this world it takes a lot of guts to be different."
- Kate Bornstein

Slide 26. What I would like to do here is to give you quotes to help us think about some important things that are coming out of all of this information. The first one is from a Supreme Court justice. It's part of a larger quote. “Societies accumulated myths and fears about disability and disease are as handicapping as are the physical limitations that flow from actual impairment.”

That quote speaks loudly to the fact that people have impairments, but the way they react to them, what we consider possible for them to do is hugely big factor in how disabled they really are. We could react to these impairments in ways that are facilitating and supportive. Or we can react to them as, wait, you are not doing it the way we used to do it.

Let's stop tolerating and accepting difference as if we are so much better for not being different in the first place. Instead, let's celebrate difference because in this world it takes a lot of guts to be different.

This quote may mean different things. For me, it talks about there are a lot of ways that people are able to be contributors. Everyone brings a slightly different thing to the plate. We could have businesses that have ways to contribute to the company in slightly
different approaches and companies that work well with the boomers.

Slide 27: Where do you start? Employees don’t want to discuss this.
Some impairments will be obvious. What about the less or non-apparent ones?
Remember that many Boomers are not yet ready to admit to themselves that they have an impairment. Example?
Hearing loss.
Older employees tell us that they are hesitant to ask for help, to disclose their impairment for fear of losing their job. They sometimes wait too long before asking for help.

And slide 27. Perhaps that’s you wearing a tie looking up at a worker.
This is the discussion that I want to pose at this point. Where do you start?
Employees who are baby boomers, again, as of today, they don’t necessarily want to discuss issues. Think about hearing loss. People don’t want to talk about this stuff. As people grow older, they can become very fearful of asking for help or ask for any type of accommodation. They think that their job is at risk. Waiting too long could be a no win situation. Let me just tell you a story about that.

On our technical assistance line, I took a call from a state worker. A woman -- pretty good job of managing her M.S. And she had been close to the supervisor of the department if she needed any help. She was able to manage and figure out the accommodations. She kept had a low profile. She was calling because her supervisor had asked her to cover some tasks for her coworker. She couldn’t do it. She couldn’t do it. Now she's between a rock and a hard place. On one side, if she disclosed -- the reason that she wouldn't be able to help or do that coworkers task-- the disability would be made apparent. On the other hand, if she tried to cover it and it didn't work, she could very easily run into a lot of trouble. She was in a tough spot.

Slide 28: Creating a “safe” environment for addressing impairments
How can a business create an environment that allows employees to feel “safe” in admitting they need help handling some aspect of their work?
One approach is educational: Spend part of a staff meeting sharing information about some of the disabilities discussed in this webinar.

Ask, “What would make an employee hesitant to admit to themselves and to their supervisor that they need help?”

“What should we do to change that here?”

Slide 28. Let’s talk about environments. I would suggest that one of the things we at least look at is how a business might create an environment that allows employees to feel safe in admitting that they need help in handling some aspect of their work. There’s a number of ways to do that. One approach is educational. Spend part of the time in a staff meeting sharing information about some of the disabilities. At least brings up the topic. A question you might ask is this. The way you follow a discussion like that is ask this question, what would make an employee hesitant to admit to themselves and to their supervisor that they need help? What should we do to change that here?

Slide 29: Managers need to pay attention to changes in boomer employee work/social performance. But . . . the boss cannot just ask an employee if they’ve become disabled, right? Disability-related inquiries must be “job-related and consistent with business necessity” An observable decline in performance opens the door to asking if productivity -- or whatever -- might be discussed? Avoid “disability” language and instead talk about productivity enhancement. Keep the focus on improvement, which feels safer.

Slide 29. One of the suggestions is that managers need to pay attention to changes in the boomer employee work/social performance. You cannot ask an employee about a disability unless the inquiry is job related and consistent with business necessity. When you are watching an employee have a decline in performance, it opens the door to asking if productivity might be discussed. Talking about the activity enhancement or what they need to be productive.
Slide 30: Employees are observant
Workers watch how managers deal with others who have an impairment, and adjust their behavior accordingly.

Employees are observant

Workers watch how managers deal with others who have an impairment, and adjust their behavior accordingly.

Slide 30. We know that employees are very observant. They watch -- observe. They watch their manager deal with other people that have issues and adjust their behavior accordingly. We have a woman and a manager that are in the manager’s office. There’s a window beyond them. Will you keep this private? He says, yeah, I will keep it quiet. People watch this stuff and see how it works.

Slide 31: More on creating safe environments Knowledge goes a long way
Employees are more likely to ask for an accommodation when:
- They know how to ask for help.
- They have the expectation that their job will not be in jeopardy.
They believe their private information will remain private.
They are assured other workers will not retaliate against them for getting the accommodation.

A bit more on creating safe environments. If employees have a sense of how things will be handled, they may be more likely to feel comfortable and safe in disclosing information. The more likely to ask when they know how to ask for help. What do you say? How do you say it? You have the expectation that the job will not be immediately in Jeopardy because they admitted to a difficulty. They believe that their private information will remain private. This is a huge issue. I've gotten call after call from people who say, I didn't say anything and then I did. The next thing I know, people were talking about what was going on with me. That was my information. We have to be assured that other workers are not going to retaliate against them for getting that accommodation. I heard of the term special treatment for workers. It was what coworkers talked about when they heard of workers that get special accommodation. People gang up on them. Some protection there!

Slide 32: Creating Safe Environments, continued
Another approach to creating inclusive environment in larger companies comes from Ernst & Young.
Abilities Champion Network – Area and department leaders who work to ensure that impairment-awareness messages and educational material are woven into local communications, meetings, and events.

Even much smaller companies can bring “disability” in the conversation for planning events and activities and set a tone of acceptance and willingness to work out issues.

Slide 32. One of the companies in America that does this stuff real well is Ernst & Young. Every large company, these are department directors and area managers and so forth at a take it upon themselves to make sure there’s impairment awareness messages and information and there's consideration woven into anything that they do nice communications and meetings and events. Organizing a meeting, the abilities champion network will ask a question, what about anyone who has -- who is hard of hearing? Even if you got a large company like Ernst & Young, smaller companies can get into the conversation. Set a term of acceptance. This is part of the condition and it
just creates environments that help people say things.

Slide 33: Resources for accommodation ideas
The ADA National Network -- including NW ADA Center -- provides technical assistance and guidance on these issues.
1-800-949-4232

The Job Accommodation Network (JAN) can help a business think through specific issues with a Boomer employee. Call:
1-800-526-7234

Before I begin to talk about active support of general workers, want to open up once again to see if we have any questions.

[comment] There was a comment earlier and a question embedded in that. In 2002, there was an increase of time that people spent at work. And then the American asked, is it accurate to assume the inequality of the economic wealth is the result of people working longer or we are living longer? I assume there are other possibilities.

[answer] That's a broad question. I have a real discrepancy in looking at change during that one short period. I don't have a good explanation. Looking at workers that were 65 and older and dramatic increase in working part time and a decrease in full time and then that changing that rapidly right after. I'm guessing economic conditions were the force that drove that -- those economic forces clearly reverse that.

I think your comment is that the people working longer, 65 and plus is more of a result of economic conditions versus a cause of getting paid less.

We're going to be looking at strategies. Baby boomers are as of today, 58 to 60 years old. We have a lot of people that are in the work force. Taking a looking at the changes to prepare for the workers that stay on.

Slide 34: Active Support for Older Workers: Part One
Mobility accommodations

- Reserved parking spaces close to building entryways.
- Barrier-free pathways, once in the building. Eliminate
stairs.

- Task accommodations
- Lengthen response time
- Provide more frequent rest periods
- Less multi-tasking

First illustration looks at accommodation strategies. I wanted to get a view of accommodation strategies and indicate what some of those could be.

You go back and think about the top ten disabilities. Arthritis and rheumatism are top of the heap. These are issues that are very common in people as they age. There's straightforward things that can be done to take a look at that in terms of employees. A business has a parking lot that employees use, even though it doesn't generally reserve parking places for people, it reserves them for employees who have specific mobility problems. This is a different system than creating parking spots that have accessible parking. Reserved spot with the name on it is related to use by that person. It's more of the guaranteed parking spot. The walking distance into the job is something that's something to take a look at. Taking a look into the business. Someone whose gait is impaired. Are they forced to climb a bunch of steps and so forth? And then once in the building, let's take a look at the work day and how do they spend their time. It took too long to wait for the elevator. Nobody thinks about it if you are 22 years old. If you are rheumatoid arthritis, that might be a significant issue. Looking at that person's birthday and see if you can minimize or eliminate any possibility. Another area. Takes a look at the task accommodation. Lengthening the response time because we know that as people grow older, slower to respond. Body more frequent, less periods and less multitasking. This could be a huge loss. The payoff is retaining workers that have great value.

**Slide 35: Active Support for Older Workers: Part One**

**Visual accommodations:**

Changes in vision that occur with age can make it more difficult to read a computer screen. These include reductions in the amount of light that reaches the retina, loss of contrast sensitivity, and loss of the ability to detect fine details.

Continuing on with accommodations discussion, here we have a photograph of an older man looking down at his laptop and he's drowning in glasses. Let's talk about vision for people as they grow older. People's vision in a very sneaky, often slow way makes them difficult to use the computer screen. There is the reduction in the amount
of light that reaches the retina.

They see less and less. They lose their ability to detect more subtle contrast differences. And pupils don't detect detail. They need to be made larger and more accessible.

Slide 36: Active Support for Older Workers: Part One
Workstation improvements

- Improved lighting, reaching, ergonomics.
- Speech recognition software, mouse & keyboard adaptions.
- Standing workstation.
- Reducing distractions in area
- Magnification equipment, screen software

Continuing on slide 36. I have a diagram of an ergonomic workstation with the gigantic big old monitors and lamps; back support and so on and so forth. Workstations. They go along with the ergonomics. Anything you can do to improve the lighting and make it easier, the development of speech recognition software to take care of some of the typing that's needed. And the keyboards are larger. Movements to find a more comfortable way to working a mouse. Standing workstations. People with back problems. Second leading cause of disability in America, standing workstations or high sitting workstations are all possibilities in reducing the distractions, navigation and soft navigation equipment. Think about the accommodations as that. It's pretty big and dated. A lot of quality there. Certainly, all of our ADA -- job accommodation as well.

Slide 37: example BMW assembly line changes
Looking ahead to 2017, BMW in Germany anticipated an older employee mix. Average worker is age: 47 years. This group differed markedly from the 2007 production line, with younger workers. Average worker age: 39 years.
Example BMW assembly line changes


Looking ahead to 2017, BMW in Germany anticipated an older employee mix.

Average worker age: 47 years.

This group differed markedly from the 2007 production line, with younger workers.

Average worker age: 39 years.

Slide 37, I wanted to take you through an example of industry making changes for an older workers. In this case, it's BMW, based in Germany. This information is taken from Harvard business review 2010.

Here is the situation. Back in 2007 -- looking ahead, they said, let's look ahead ten years out towards 2017 and get a feel for what we are going to have and who we are going to have on a production line. Let's see if we can design a production line that works just as well. For comparison, we talk about the two production lines. The chart on the right side of the page has a couple of bar graphs. These represent the workers on the various production lines.

In 2007, the average age for a worker on this production line was 39 years old. They looked at who those workers were. Little less than 20% of them were younger than 30 years old about 25, maybe 70% for 30 or 40 years old. Slightly larger or about the same, 41 to 50 years old. 20% of them were older than 50.

On the right side of that chart, we have the predicted age for production line in 2017. Looks different. Same number of younger workers. A whole lot less of workers 31 to 40. A lot of more workers that are older than 50 years old. This is the line they decided to assume would be typical. And a design assembly line.
Slide 38:
Assembly Line Changes for Boomers, continued
Assumed two issues with older workers
  • Wanted to continue to earn worker loyalty.
  • Knew that older workers had to work harder to be productive.
Rejiggered assembly line
  • Small ergonomic changes (wooded floors)
  • Special orthopedic shoes
  • Barbershop-type chairs to allow work while sitting
  • Magnifying lenses to distinguish small parts
  • Stretching exercises for workers daily while on job

On slide 38, the -- BMW had made a couple of assumptions. One was, they felt like they had good worker loyalty in a company. They didn't want to do something that distance or push this person away. They also knew from the experience to date that older workers have to work harder in order to keep up. There's an up and down. So they got pretty smart people together and they made about 70 changes.

This is the transmission of assembly line and jiggered a whole bunch of things. Some of the changes they made. First, they gave everyone orthopedic shoes absolutely protect their feet as much as possible.

They have also installed barbershop type of chairs to allow them to sit while working. And they had magnifying lenses to distinguish small parts and they do stretch exercises for workers daily while on the job.

Slide 39: Example Assembly Line Changes for Boomers
BMW made 70 changes in assembly line altogether
  • Cost only $50,000 to implement
  • Termed by younger workers, the “pensioners’ line”
  • Lots of resistance: Younger & Older workers initially feared changes
  • Production increased by 7% in one year; no loss in production when compared to younger worker lines.
The company also provided assistance in managing health care.
  • Changed corporate thinking about firing or
forcing older workers into retirement.

On slide 39, it's interesting that the changes actually relatively speaking for assembly line, it's expensive. It's $50,000 to implement it. People did not like the idea of the assembly line. The younger workers called it the pensioners' line. There was a lot of resistance. The younger workers, they thought if they worked there they would end up being a traumatic failure and lose their job. For the older workers, they felt this was the company's way of getting rid of them. They were not for the changes. After a year, the production was up 7%. There was no difference in this line or that line. It worked. The company did something that was not highlighted. They provided assistance in managing corporate healthcare. You can do this.

Slide 40: Example mid-manager with hearing loss
• John is 64 years old and thinks the recent change in his hearing isn't really that bad. He doesn't see his hearing loss as a problem and in fact believes saying anything will undermine his reputation in the company.
• In his position he attends many meetings in various offices with groups from 6 to 60 people. And he often walks with customers through the warehouse, which can be problematic. He cranks up the volume control on his office phone and avoids using his cell phone in some environments.

On slide 40, I'm going to introduce a case today with a mid-manager who is working in a company and who has a hearing loss. I made him 64 years old. That's not me- The picture of a guy with silver hair. He's looking at his computer and taking a look at data. Busy mid-manager. He thinks that the recent change in his hearing is not that bad. He doesn't think that's a problem. It says it may undermine his position with the company. He has meetings with from six to 60 people and goes to a house of his customers. That's hard. It's a loud house. He cranked up the volume control. When he's in a loud environment, he's afraid of missing something.

Slide 41: John, cont.
• He didn't realize that he walked past people who had called out his name, or didn't respond to jokes or stories when others were socializing. It was simply because he didn't hear them and or they didn't get his attention first before speaking.
• John seem reluctant to present projects at some of the meetings. It seemed that his performance was slipping. John didn't purposely hide his loss and honestly felt he was managing well.

Slide 41. He has walked past people who had called his name and didn't respond to jokes or stories while others were socializing. He didn't quite hear enough to follow the story. John seemed reluctant to present projects at some of the meetings. It seemed that his performance was slipping. He felt he was managing it pretty well but John's supervisor worried about John's performance and suggested that they seek help from a vocational rehabilitation counselor. What makes it good for the supervisor to get into it with this point. It's "job related."

Slide 42: John, cont.
• John’s supervisor worried about John’s performance, and suggested they seek help from a vocational rehabilitation counselor.
• John needed to learn how his hearing loss was affecting his job and that he was not managing a significant hearing loss as well as he thought.
• While he felt that hearing aids would alert everyone that he had hearing loss, he soon realized that everyone knew he did.

The performance was changing. Things he had done well in the past he wasn’t doing now. John needed to learn that his hearing loss would affect his job. He thought hearing aids would make him strange. Everyone knew he had a hearing loss.

Slide 43: Solutions – John
• John has a moderate hearing loss and his audiologist recommended hearing aids. They are effective in almost every listening situation except in larger meetings.
• John finds that simple communication rules help as well. He often reminds people to get his attention before talking to him. He is now using “meeting rules”.

He went to the audiologist who recommended hearing aids. They work quite well
for John and almost business situation except the larger meetings. John is working with
the colleagues and coworkers and others with the communication rules.

“Would you please get my attention before you start talking to me.” In a meeting, if
you can make sure that you know who is getting read to speak, it will really help a lot.

**Slide 44: Solutions for John, cont.**

- John can hear people next to him during meetings but he has
trouble hearing people from the far end of the table. An FM
system is used for the situation with a conference microphone
placed at the other end of the table. John hears more clearly
because the microphone placement amplifies voices more fully.
- John is successful in using hearing aids communication
strategies and an FM system to meet most of his
communication needs. If his hearing loss had been more
severe, John would use the FM system more often.

He had trouble hearing the people at the far end of the table. They purchased an
FM system that was used with the microphone placed at the other end of the table.
John hears more clearly, this microphone placement amplifies voices. The combination
of the hearing aids and the FM system meet most of his communication needs. If the
hearing loss progresses and gets worse, he's going to need the FM system more often.

**Slide 45: Assistive Technology – John**

- FM system with transmitter/microphone and a receiver with a
listening option that gets the sound to the hearing aid or to the
ear, and a conference microphone
- Inline phone amplifier or strapon amplifier
- Alerting system for travel for alarm, door lock, telephone

On slide 45, you have the assistance technology that he has. He has an FM
system with a transmitter and microphone. It gets it to his ear. His phone now has an
amplifier that makes it easier for him to use the phone. If you travel, you can bring an
alerting system that let's you know you have a call. Here are several accommodations
for someone who felt like they didn't have an issue.
Slide 46: Active Support for Older Workers: Part Two

Don’t forget Assistive Technology!

Each state has an assistive technology center that provides:
  • Accessible IT and website design
  • Workplace evaluations for computer access and ergonomic workstation design
  • Devices demonstrations and lending

Slide 46. This is part two of active support for older workers. On this page, we have a photograph of that famous television star Maxwell Smart from the series “Get Smart”. That’s a shoe used as a telephone. But it’s assistive technology also. Every state has assistive technology center. They provide a lot of services that are available. They can look at accessible IT and show an accessible workstation. They do ergonomic assessments. They will bring in devices to demonstrate or go to the workstation and take a look.

Slide 47: Active Support: Part Two, continued

Assistive Technology Resources Nationally, the RESNA Catalyst Project offers excellent resources, including a link to each state AT Program.

http://resnaprojects.org/index.html

State AT programs, such as the Washington State AT Program, provide both technical knowhow and many offer onsite evaluation activities.

http://watap.org/

Cool resources. Assistive technology is exactly what we saw just now with John. If you want to get access to assistive technology resources. The RESNA catalyst project offers excellent resources. The state AT programs, in every state provide knowhow and offer the on-site activities. We were down last week in the one in Oregon. They are doing a bunch of helpful things. Do they talk to businesses very much? Yeah, we do. We get called up pretty much.

Slide 48: Active Support for Older Workers: Part Three

Flexible Work Options Consistently identified as most effective in attracting and maintaining older workers.
  • Flex in scheduling full time work
• Flex in amount of work time, e.g., job sharing, phased retirement
• Career flexibility with multiple points of exit and return

Slide 48. In this picture, I have a very flexible worker who is leaning over backwards to look at his laptop. That's not a picture of me. One of the things you look at when hiring older workers is to create flexible work options. They are effective in helping maintain the employment of workers as they age. And if you want to get the ways to look at flexibility with scheduling is one. You know, even times the issue with what time of day the job starts.

Maybe coming in at 9:00 because my R.A. makes me stiff when I get up. Looking at the amount of time that people are working. Job-sharing, phased retirement. Part time and so forth. Interesting options. Career flexibility. We are seeing some of that here with our organization with what appears to be multiple solutions. People retire and then come back with contractual basis or part-time basis. So forth.

Slide 49: Flexible Work Options
Flex as an incentive
• 25% of older workers said they continue to work because their company offered flexible work options.
• 45% said that more flexibility would prevent them from retiring.

They fall into two interesting camps:
• A significant group wants to develop new competences;
• Another group wants positions with less responsibilities

Slide 49, if you look at the flexible work options, in older workers we're told about these flexibility -- 25% said they would continue to work because their companies offered flexible work options and a full 45% said that more flexibility options within a company that would prevent them from retiring. Interestingly, they fall into two channels. The people who are really interested as they grow older in developing new competencies. Another group wants to positions less than that.

Slide 50: Re-working Job Descriptions “Customized
Employment”

Long ago, social service agencies serving individuals with significant intellectual disabilities found that “carving” out new job descriptions worked well.

- Strengths-based approach
- Often involves job restructuring
- Question is – how can we take advantage of individual’s experience, knowledge, judgment, while minimizing deficits?

On the far end of flexibility is the idea of re-working job descriptions. There’s a term from -- and in the part of the rehab world called “customized employment”. It’s interesting. Here is the story. Social service agencies -- individuals with significant intellectual disabilities. Some of those people were not going to be able to move into a regular job description. They had mixed capabilities and did quite well at certain tasks. However, the could not be flexible or wouldn't be able to do an entire job description. They ended up with customized job descriptions that matched the strengths and the capabilities and interest of that individual and so they are able to employ them.

This requires a new job description. A straight based approach. Involves pretty serious tinkering with what their tasks are. We have an employee whose knowledge and capabilities are good but limited. How can we balance that with how we can keep him contributing to the company. When it works out, it worked out well for both sides. Both the employee who is now doing the things that he or she loves to do and do very well and for those who do the other parts of the job.

Slide 51: Active Support For Older Workers: Part Four

Building “Health Literacy”

To what degree does the employee obtain, process, and understand basic health information? 2003 study: only 3% of adults age 65+ were proficient in health topics

On slide 51, this is the type of active support for older workers. This is going to change a lot five years from now. We have a cartoon on this slide of a man standing outside a building that’s clearly labeled “Health Literacy” He’s talking to a man that is walking with a suitcase about where “Health Literacy” is located. Find out how illiterate many of us are in health issues. Do we understand how to obtain good, honest,
informative health information. Do we understand how to work within the health system.

Only about 3% of the adults were proficient in accessing and using the health system.

Slide 52: Health Literacy
HR guidance in navigating health issues may be a good investment. Limited health literacy can affect the worker's ability to:
• Fill out complex forms
• Locate providers and services
• Share personal information such as a health history
• Take care of oneself
• Manage a chronic disease/disability
• Understand how to take medicines

An HR department in a company can provide guidance and help them navigate health issues. That might be something worthwhile. But if you think about literacy-- It can affect them filling out the complex forms and locating the providers and sharing health histories and taking care of themselves and managing the disease and managing medications and so forth. The corner cartoon on this page has a physician looking at an older man sitting on the examination table. The doctor says the “heart is in great shape, but I recommend transplanting all your other body parts.”

Slide 53: Health Literacy Resources
US Department of Health & Human Services:
Quick Guide to Health Literacy curriculum series
http://www.health.gov/communication/literacy/quickguide/defa ult.htm
Great information, nicely packaged. Aimed at health professionals but should be adaptable by business.
Medline Plus (National Institute of Health):
Health Literacy webpage
Nice site with lots of material that could be used to help employees become more knowledgeable.
The U.S. department of health and human resources has the quick guide to health literacy curriculum series. It’s nicely done with good information and things that help so any business should be able to use it. Another resource is Medline Plus. The health literacy web page. Good resource for information.

Slide 54: AARP Workforce Assessment Tool
Free, individualized assessment of your company
based on 80-question form:
• Assess impact of aging workforce on your organization
• Identify areas for potential improvement of current employer practices
• Offer recommendations on maximizing experience of older workers
• Develop an inventory of workplace strengths

And the final slide that I have is something that I found at the AARP website. The organization used to be called the American Association of Retired Persons. They now just use the Acronym as the name for the organization. If you Google it, you will find it. It’s free. It’s an assessment of your company that’s based on your filling out 80 questions. It looks at issues of what impact an aging workforce will have in organization. It identifies areas of improvement. And recommendations on maximizing experience of older workers. It’s a heck of a deal. And I would recommend to you to look at it. Use your search engine for the workforce as a tool.

Slide 55: Here is our information
Contact Northwest ADA Center
ADA Hotline: 800-949-4232
Email: nwadactr@uw.edu
Website: www.nwadacenter.org
Mail: 6912 220th SW, Suite 105
Mountlake Terrace, WA 98043
John Dineen: dineej@uw.edu

Brings us to the final slide. We are the ADA center. We are available at the ADA hotline. My name is there. I’m glad that you are able to join us.

[Question] At what point during a job seeking pros should a potential employee disclose the needs for accommodations due to disability. In the resume, first interview, after being offered the job or before accepting?
That's a great question. I think it's dependent on the type of disability a person has. One of the safe places is at the point where a job is offered. Once it's offered, an employer has obligations to that individual. They can't just send them off without regard. Once the job is offered, there are protections for asking for accommodation prior to the time the job begins.

It does allow that room for negotiations to get the accommodations before the position starts. When you talk to people that have psychiatric disabilities that are not necessarily that are going to show up as a bright and shiny issues, many of those people tell us that they tend to wait until they start feeling comfortable at the company and feel they are doing well and having success. It depends whether you have the need for accommodation.

Yeah, so if the disability was apparent during the interview, you might want to address it there?

You could. I think probably the conversation during a job interview is one in which someone might say, it's clear that I have one leg let me tell you how I'm able to do this job. Let me assure you how I can do it.

I think it's really a case of adjusting fears on the shoulders of the hiring manager to consider if they have considering quite seriously. I'm not sure I would want to tell them much in the accommodation conversation. “I know you can do this. Let me give you ideas of how.”