Negative Events, Positive Outcomes: Improving Labour Force Outcomes via Tertiary Study for Individuals with Disability and Chronic Illness

Shalene Werth*
University of Southern Queensland

Abstract

The economic appraisal often displayed by organisations in the assessment of their staff, at times crosses ethical and legal boundaries and evaluates personal characteristics of workers which are not relevant to their work—such as a disability. Workers report problems in the workplace which have led them to decide to complete a tertiary degree in order to improve their skills, increase their labour market power. They hope this might result in labour market outcomes such as improved job satisfaction, job security, job quality, career opportunities and increased access to flexibility to allow for their circumstances of disability. The decision process undertaken by workers with disability can be a fraught one and might require considerable motivation and commitment to follow through to the end. The students in this project are committed participants who followed this course of action to achieve improved labour market outcomes.

1. Introduction

Disadvantage experienced by disabled workers is a complex and, at times, a socially difficult issue. Understanding of a colleague's disability cannot be taken for granted by individuals who attempt to balance the circumstances of their disability with employment. They are in a position where their personal characteristics may be negatively judged by peers and supervisors, despite their professional abilities. Explanations about variability of symptoms can result in a loss of professional credibility. As employees are assessed according to their knowledge, skills, and abilities when selected for a position, and their performance is reviewed regularly, they are, in more subtle ways, under scrutiny to evaluate their continuing conformity with expected norms at work. The ways in which organisations evaluate their

This is the Submitted Version of Werth, Shalene (2012) *Negative events, positive outcomes: improving labour force outcomes via tertiary study for individuals with disability and chronic illness.* Australian Bulletin of Labour, 38 (4). pp. 345-366. ISSN 0311-6336.

^{*} The author would like to thank David Peetz for his assistance in the development of this article. Funding for this project was received from the University Disability Action Committee and the University Social Justice Committee.

staff, at times, may cross ethical and legal boundaries where they seek to assess personal characteristics which are not relevant to the employees' work.

The number of individuals in the labour force with disability is significant. Australian Bureau of Statistics (ABS) (2009) data show that 18.5 per cent of the population have a disability. Only 54.3 per cent of those with a disability—who are aged between 15 and 64—participate in the labour market (Council of Australian Governments 2011). This group of people encounter more barriers to workforce participation than others with similar characteristics (Nelms and Tsingas 2010). The disadvantage experienced by those with disability is evident from these statistics, and that more needs to be understood about their labour market participation is also clear. This article considers this through looking at the experiences of students with disability. Some had been in the labour market and were studying to improve their labour market power; other students with no labour market experience also participated in the study. Their study-related decisions were linked to accessing work which, ultimately, would accommodate their disability. There are other reasons for carrying out research in this field; compliance with recommendations from the World Report on Disability includes recommendations for academic institutions including, '[to] conduct research on the lives of persons with disabilities and on disabling barriers ...' (World Health Organisation 2011, p. 22). This article provides a unique perspective on the lives of people with disability by examining the experiences and expectations of students regarding the labour market.

This study examines the experiences of students with disability in a regional university. The data show that most participants were studying to improve their labour market outcomes to facilitate their entry or re-entry to the workforce. The research examines the disclosure decision-process and motivations for undertaking study; it also observes how developing human and social capital improves students' expected outcomes at their workplace.

2. Literature

The understanding of disability in society has been contested throughout the second half of the twentieth century. In the 1950s, the *Medical Model* dominated social attitudes and policy. This model couched 'disability as a feature of the person, directly caused by the disease, trauma or other health condition' (World Health Organisation 2002, p. 8). The *Social Model of Disability* came to the fore in the 1960s and 1970s, and was advanced by the Disability Rights Movement. The Social Model viewed 'disability as a socially created problem and not at all an attribute of an individual' (World Health Organisation 2002, p. 9). The World Health Organisation (WHO) has since acknowledged that:

neither model is adequate, although both are partially valid. Disability is a complex phenomena [sic] that is both a problem at the level of a person's body, and a complex and primarily social phenomena [sic]. Disability is always an interaction between features of the person and features of the overall context in which the person lives, but some aspects of disability are almost entirely internal to the person, while another aspect is almost entirely external ... [A] more useful model of disability might be called the Biopsychosocial Model. ICF (International Classification of Functioning, Disability and Health) is based on an integration of medical and social (World Health Organisation 2002, p. 9).

The *Biopsychosocial Model* regards disability as the 'dysfunctioning at one or more of these ... levels: impairments, activity limitations, and participation restrictions' (World Health Organisation 2002, p. 10). Impairments are defined as 'problems in body function or structure such as a significant deviation or loss' (World Health Organisation 2002, p. 10). Therefore, this article uses the term 'impairments' where relevant. In order to provide additional meaning to a context, the term 'illness or chronic illness' is used.

Australian legislation has been enacted to protect the rights of disabled people. Australia is also a member of the collaborating network supporting ICF. Specific legislation includes the *Disability Discrimination Act 1992* (DDA) and the *Fair Work Act 2009* (FWA). The National Disability Strategy vision aims for 'an inclusive Australian society that enables people with disability to fulfil their potential as equal citizens' (Council of Australian Governments 2011, p. 22). The Australian Human Rights Framework

recognises that all Australians are responsible for respecting and protecting human rights and ensuring that our commitment to a 'fair go' becomes a reality for all Australians (Council of Australian Governments 2011, p. 36).

The spirit of the law is that in any sphere, the rights of those with disability need to be protected. This is reflected in the legislation. The DDA 'makes it unlawful to discriminate against a person because of their disability' (Australian Human Rights Commission 2004, p. 1). Disability is defined by the *Act* as the:

- (a) total or partial loss of the person's bodily or mental functions; or
- (b) total or partial loss of a part of the body; or
- (c) the presence in the body of organisms causing disease or illness; or
- (d) the presence in the body of organisms capable of causing disease or illness; or
- (e) the malfunction, malformation, or disfigurement of a part of the person's body; or
- (f) a disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or

(g) a disorder, illness, or disease that affects a person's thought processes, perception of reality, emotions or judgment, or that results in disturbed behaviour.

And it includes a disability that:

- (a) presently exists; or
- (b) previously existed but no longer exists; or
- (c) may exist in the future (including because of a genetic predisposition to that disability); or
- (d) is imputed to a person.

To avoid doubt, a disability that is otherwise covered by this definition includes behaviour that is a symptom or manifestation of the disability (*Disability Discrimination Act 1992*, Part 1, s. 4).

Provided that impairment does not harm a person's ability to perform the inherent requirements of a position, then they are entitled to an equal chance when competing for that position (Australian Human Rights Commission 2004). The Australian Human Rights Commission also notes that 'if a person with a disability is the best person for the job then the employer must make workplace changes or workplace adjustments if that person needs them to perform the essential activities of the job' (Australian Human Rights Commission 2004, p. 2). The Productivity Commission, in relation to DDA, stated that,

its effectiveness has been patchy and there is still a long way to go. Furthermore the nature of the challenge facing the DDA is changing as the focus shifts from addressing physical barriers to attitudinal barriers. The Commission is especially concerned about discrimination in employment (Productivity Commission 2004, p. XLVII).

The Problems with Disability and Work

Workers who have a visible disability may not be able to appear 'normal' to colleagues in their workplace. Others may have disability which is less visible and may have more choice regarding disclosure; both groups face difficulties in the workplace (Vickers 1997). Accessing understanding and accommodations may be difficult where social expectations are at odds with the lived reality of a disability.

Where a disability is not obvious to colleagues, workers have a choice about disclosure until medical treatments or other circumstances dictate that disclosure is required (Myers 2004). The Model of Disclosure (Figure 1) shows a range of risks associated with disclosure and ultimately the disclosure decision (Werth 2010a). Once a worker has disclosed, they will then be subjected to the attitudes of others around them (Werth 2010a). They may be expected to

conform to work or social norms which tend not to accommodate disability. The problems encountered by these employees in the workplace might include: limited career options, disadvantage or discrimination, poor job quality, and lack of accommodations or understanding.

Stigma is experienced when the symptoms of an illness and circumstances surrounding a disability lead others to believe that the employee does not have the capability to continue to work. Where a disability is stigmatised, social expectations might suggest that the worker will be unable to fit into the norms of the organisation, and workers themselves find that they experience undesirable labour force outcomes (Goffman 1976; Myers 2004; Vickers 2010). There is insufficient understanding available for workers with disabilities in many cases; and there is a tendency to believe that their disability is somehow linked to a lack of professional capacity. What these employees often require is flexibility, understanding and some form of accommodation.

Flexibility

Flexibility at their workplace is often sought by workers with disability. Fleetwood (2007) points out that there are two types of flexibility: employee-friendly flexibility and employer-friendly flexibility. Employer-friendly flexibility is 'sought by employers, primarily to pursue profit ...' (Fleetwood 2007, p. 388). Employee-friendly flexibility might be requested in order to balance work and life. In the circumstances of disability, examples might include, flexible working hours to allow time to attend medical appointments, or adjusted working hours for an individual with arthritis who requires regular rest breaks. The type of flexibility referred to in this article is employee-friendly flexibility. This may take the form of contingent flexibilities or general flexibilities. Contingent flexibilities are those which the worker might request specifically for their situation. General flexibilities include existing employee-friendly flexibilities such as rostered days off or sick leave.

Disclosure

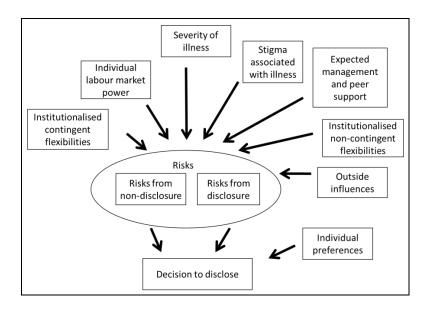
The Model of Disclosure (Figure 1) highlights the decision process which individuals with disability undertake when considering disclosure (Werth 2010a). Individuals with disability whose symptoms are not visible, may have a choice about whether they will disclose (Vickers 1998). There are a number of reasons why individuals may prefer not to disclose and they include: stigma (Goffman 1976); preserving their professional capability (Myers 2004); avoiding suffering disadvantage in their workplace (Vickers 2003); and, avoiding

being labelled a malingerer (Vickers 2001). Disclosure decisions involve a great deal of risk and can have a significant impact on the working lives and career paths of those with disability. These workers may experience significant disadvantage such as an increased likelihood of non-permanent employment, and decreased satisfaction with their career opportunities (Werth 2010b). The effort undertaken to improve their working lives in the future may result in a decision to study, which will provide them with the additional human and social capital needed to offset any disadvantage caused by their disability.

The decision to study at tertiary level is one that has a substantial impact on the lifestyle of the student and their family. A number of the students with disability in this study have previous work experience and have a wide range of personal responsibilities, including managing their disability. Disclosure and support has been shown to be crucial to their success at university (Hammer et al. 2009). Disclosure to the Disability Support Officer provides students with the advocacy and understanding they may need to complete their course of study (Hammer et al. 2011). Disclosure in this supportive environment may be quite a different experience to the difficulties experienced with the disclosure decision in the workplace (Hammer et al. 2009).

Disclosure in the workplace may cause feelings of inferiority in the individual (Millen and Walker 2001), while colleagues and supervisors may adjust previous evaluations of professional capability on the basis of this new information (Goffman 1976; Myers 2004). Workers report significantly negative experiences resulting from the disclosure of information about their disability within their place of work. These might include loss of job security, negative perceptions of their working capacity, and a lack of flexibility to meet their needs. Individuals with disability appear to lack labour market power, as they are at greater risk of falling out of the workforce (Millen and Walker 2001). They suffer from the stigma associated with the 'social construction of illness as spoiled identity, and given that the body and its functions are embedded in the wider social framework' (Millen and Walker 2001, p. 89), they may be judged by social standards which lack understanding or a willingness to explore new and different meanings of professional value.

Figure 1: Model of Disclosure



Decision to Study

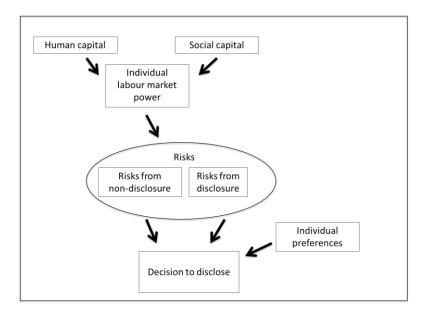
Workplaces often have out-of-date understandings of a capable or normal worker. The problem lies in the labelling of individuals as disabled due perceived impairment (Barnes 2000). Organisations where

the meaning of work has been organised around a particular set of values and principles: namely, the pursuit and maximisation of profit, waged labour and competition between individual workers ... all of which effectively disadvantage or disable people with any form of perceived functional limitation [or] impairment (Barnes 2000, p. 445).

Those with disability—because of these economically driven definitions—may find it difficult to establish a career in their workplace, stay in a job which fits their abilities, or gain the flexibilities that they need to remain in employment. The tendency to sideline these workers has a substantial impact on the labour market (Australian Network on Disability 2011). Outcomes which individuals may seek to improve their working lives by undertaking study include increasing confidence (Vickers 2010), improving their employability and labour market power through increasing their skills and abilities (Roessler et al. 2005), increasing their power in the workplace (Peetz 2005), and achieving career opportunities and job quality (Vickers 2010) as well as flexibility at work (Werth 2010b).

This article looks specifically at a small, extended section of the model of disclosure (Figure 2) as it applies to students who are studying to increase their labour market power. The focus of the Partial Model of Disclosure is on the development of human capital (Gilead 2009) and social capital (Timberlake 2005) in students with disability through tertiary study.

Figure 2: The Influence of Capital on Students: A Partial Model of Disclosure



Human Capital

The concept of human capital was first discussed by Adam Smith (1952) and it included the talents acquired through education. The definition has been updated to include other measures of productivity, such as qualifications and amount of experience (Brown and Jones 2004), education which supplements natural abilities (Bedard 2001), and education which infers a particular ability to employers (Bedard 2001). Garavan et al. (2001) define human capital as 'one of the internal dimensions of intellectual capital and consists of education, competencies, values, attitudes and experience components' (p. 49). It is this definition that we will use to discuss aspects of human capital as they apply to the model of disclosure.

Individuals may experience a decline in their human capital because of disability due to perceptions of loss of competency, or poor attitudes to work due to taking leave because of their disability. Undertaking tertiary study is a way of enhancing human capital and increasing favourable outcomes at work. 'Employees with higher education qualifications are thought to have demonstrated their ability to acquire knowledge and to have gained potentially useful knowledge and skills' (Brown and Jones 2004, p. 2). Organisations tend to take a very narrow view of the skills and abilities which constitute a capable worker. Employees who have the opportunity to build their value through enhancing their human capital will have greater potential for promotion and credibility in the workplace (Brown and Jones 2004; Garavan et al. 2001). Individuals with disability are thought to 'decide on their education by weighing the benefits, which include cultural and other non-monetary gains along with improvement in earnings and occupations' (Gilead 2009, p. 558). These gains can

include the development of skills which will also allow them to maximise their social capital in the workplace.

Social Capital

Social capital is made up of the knowledge and resources that increase the potential of individuals through collective efforts (McElroy, Jorna, and van Engelen 2006). It is also viewed as the social structure that allows people to collaborate to achieve objectives and integrate shared knowledge (McElroy 2002; Timberlake 2005). Social capital is similarly used by disabled people to access the resources they need for smaller and more personal gains, such as the management of their daily lives or the achievement of particular life goals. Managing disability in a workplace is complex (Vickers 2011). Where social networks are available and support is forthcoming, knowledge of the way a disability is best managed is created and resources are readily sourced. The Disability Rights Movement created knowledge and power through the collective efforts of disability rights activists, researchers, and organisations of those with disability (such as UPIAS—Union of the Physically Impaired Against Segregation). The social capital generated within this movement brought about considerable social change. The Social Model of Disability became accepted in regulatory bodies that in turn created policy designed to assist those with disability better (Barnes 2000). The social capital in the form of networks, knowledge, and collective effort was used to advance the cause.

Workers who have the skills to develop social networks will be considered to be of greater value in the workplace for two reasons. First, the workplace may value diversity. Second, the individual with disability has successfully advocated for change. Individuals with disability who study, have opportunities to obtain skills and develop formal and informal networks throughout the course of their studies. Such opportunities for building capability and confidence in students will increase their potential for improving their social capital in the workplace, thus increasing the potential for improved workforce outcomes.

Expected Labour Market Outcomes

The expectations of improved labour market outcomes after course completion can range from access to better-quality positions to improved career opportunities and access to flexibility, or they may be as simple as avoiding the undesirable circumstances they experienced in a previous workplace. These individuals have become accustomed to being valued according to the availability of their labour, their willingness to change work roles or

schedules of work, and to place work above their personal commitments (Burgess, Henderson, and Strachan 2006). Completion of tertiary study can mean that workers are able to access positions where they may not be required to provide additional flexibility for the benefit of the employer, but instead may be able to use their increased forms of capital to access flexibilities to benefit their management of their disability.

Balancing work as well as a disability is difficult to achieve for many of these vulnerable workers, and maintaining an image of capability at work is important for preserving their job and income (Werth 2007). Studying provides a means of avoiding the difficult workplace situations of the past by improving their professional credibility and providing the knowledge and skills to a workplace which will give them the flexibility needed to cope with their disability.

3. Methodology

This research project spanned the three years 2008–10 and applied a combination of quantitative and qualitative research methods. The participants were 19 males and 20 females. They were drawn from students who registered with Disability Services for the first time in 2008. Impairments of participants included medical conditions (15), psychological conditions (11), neurological conditions (8), and physical impairments (5). Students were enrolled in the following faculties: Arts, Business, Education, Engineering and Surveying, and Sciences. They undertook both undergraduate and postgraduate courses, with one student enrolled in study for a Doctor of Philosophy degree.

The data for this article are taken chiefly from open-ended questions in surveys of the 39 students. They were asked about their experiences as students with disability, why they chose to study, and what they hoped to gain from their study. These data were divided into a variety of themes including: the problems experienced in current or previous workplaces, disclosure, influences on the decision to study, human and social capital, and expectations of improved workforce outcomes in the workplace. The study was granted ethical clearance from the Ethics Committee of the university in 2008, prior to the commencement of data collection.

The project was undertaken at a regional Australian university, which has a large cohort of external students. Some of these participants are studying externally because they are also working, while others have resigned from work and are studying full time. It should be acknowledged that the participants in this research do not form a typical cross section of workers with disability. While it is true that they have experienced disadvantage, they have

shown by taking up study that they are capable and motivated to improve their working circumstances in the future; also, their admission to university acknowledges their academic ability. More than half of the respondents are mature-age students who had extensive work experience before commencing their studies. This university offers a significant number of courses by external study, using written study materials, an online study desk and discussion forum, as well as recorded lectures (for most subjects). This means that students with disabilities are able to access standard flexibilities which assist them with their studies.

4. Discussion

Problems in Employment

Problems with their workforce participation for those with disability are issues which are reflected in the comments of these students. For some, the stigma associated with their disability is a concern; for others, it is about their lack of labour market power, inflexibility of working conditions, or difficulties that they have experienced in current or past workplaces. Zane found that his shift work and also factory work were difficult. He decided to undertake study to make a change of career which would better suit his disability.

Zane: I had a bit of trouble at the mines; I was on night shift and wasn't doing well with shift work. I also had a factory job. I couldn't keep up with those occupations ... I changed from Education to a Bachelor of Science (Ecology) because it was a better direction for me to go.

Thomas's experience points to a number of problems in his workplace; the disclosure of his disability was forced upon him because of its impact on his work. There was little understanding or flexibility available to him; he felt that his only option was to attain a qualification which would give him the career and job quality that he wanted and better allow for his disability.

Thomas: I was forced to resign to seek medical attention. This decision was based on my understanding I would not gain promotion within the firm unless I acquired a higher education qualification as younger, junior, employees managed to 'climb the corporate ladder' instead of me. My employer noticed my stagnation in my work production and became aware I had an illness. Consequently, I was not regarded to be of value for promotion.

The requirement that Thomas resign to seek medical attention is an acknowledgement that the problems experienced at work by individuals with disability are not always as straightforward as a misunderstanding of a disability; sometimes it is a lack of understanding of the legal requirements surrounding disability and is therefore discriminatory.

John found that flexibility and understanding were not available in his previous workplace and he felt that he needed to resign because of the reactions of others to his illness. He is studying to improve his employment prospects.

John: As for work, I have not worked for several months. I had to resign my job or be fired, so I quit. I was too ill to work.

John also found that his employer had no patience or understanding to deal with his illness.

Curiously, while citing that he was too ill to work, he is continuing with his studies and is managing well in a more supportive environment. University study is often considered to be a difficult and rigorous environment, one where the value of students is measured by their assessment results. It is thus ironic that workplaces can place a less objective value on an individual with disability and find them unable to measure up to expectations. Suzanne was self-employed for many years, and despite the fact that she did not have to negotiate with an employer for flexibility, when she could not physically meet the demands of running the business on her own she had to close the business.

Suzanne: If I hadn't been diagnosed [with this ongoing illness], I would have continued running my shop. I was forced to quit working.

Problems in the workforce can be just as significant for a self-employed person as they are for an employee.

Emily has not worked previously, but this has not stopped her from making decisions about her choice of a university course which should help her to manage her disability, as well as provide her with a satisfying job.

Emily: I believe these skills learnt throughout my degree will give me the opportunity to get decent work throughout my life and give me a sense of achievement.

Emily reports that she does not talk about her disability because of the stigma attributed to it and this has contributed to her choice of course. The sense of achievement that she refers to is also important for others who chose to study at university. Sandra is not studying specifically because of her disability, but she does enjoy being able to 'go at her own pace' and her future career will allow for this.

Sandra: I found a 'window of opportunity' in my life and grabbed it! I have been wanting to do something I was really interested in for a long time, but have spent most of my life caring for others. Intermittent health problems just got in the way!

Sandra felt that the satisfaction associated with being able to choose to do something for herself was a positive way to redirect her working life to cope with the circumstances of her disability. The personal characteristics of these students show their dedication to finding work to suit their disability. Their life circumstances have resulted in the determination and perseverance needed to succeed in their studies and also in their subsequent careers. The data shown here also hint at the difficulties these students suffered in previous work roles and the influence that had on their decision to study.

Decision to Study

This research has revealed some useful information about the learning journey of these students and it has highlighted the importance of changing career pathways for those with disability and the hurdles they face in doing so. These are people who are dealing with difficulties associated with their disability, managing the prospects of their future careers, and attempting to enhance their abilities to assist themselves in the labour market once they have completed their course. Students reported various circumstances which prompted them to consider tertiary study. Leanne's decision to change her career was based on the problems of working in her previous job with the physical difficulties caused by her illness.

Leanne: Because this chronic illness affects me physically I turned to study as a career change, thinking that a job involving writing is much more manageable than any added physical discomfort.

Embarking on postgraduate study was a positive outcome, one which Patricia related to the disability which stopped her from continuing with her teaching career.

Patricia: I cannot teach on a full-time basis anymore as I have a permanent injury which prevents me from teaching. I had not expected to do further study but I had the opportunity to do a PhD and I decided to follow it through.

These students entered university without necessarily being confident in their academic abilities. The research found that most of the students surveyed had good grade-point averages, but these students often took longer to complete their course. Three-year degrees were more likely to take these students longer to complete. Some of these students reported the difficulty they had with sustaining a normal enrolment structure.

Melissa: I dropped one subject last semester. I was enrolled in three subjects and it was too much. It has been a major struggle. I have two mates who have completed the subjects and they've been a great help. Without them, I wouldn't have got this far.

Melissa also refers here to some of the social capital she has been able to access to assist her at university, which she points out has been important to her. Patricia, Leanne, and the students who cited problems in their employment each had incentives to improve their outcomes at work through undertaking tertiary study. For some, the decision is about gaining higher levels of employment because that is associated with greater perceptions of control

over one's role in the workplace. Other students were interested in finding ways to work and still manage their actual disability or the stigma associated with it.

Poor expectations of labour market prospects for those with disability may result in employees exiting the labour market in order to undertake study. Previous workplace difficulties such as lack of flexibility or understanding seem to increase the motivation these students have to complete their studies. These students represent a fortunate few who are able to marshal the resources required to attend university. The participation rate of those with disability who are able to work is 75 per cent, while the participation rate of those with no disability is 83 per cent (Australian Network on Disability 2011, p. 11). This shows that the difficulties faced in the workplace by those with disability will unnecessarily preclude 8 per cent of potential workforce participants from employment. These difficulties include a lack of flexibility, low levels of labour market power, stigma, and peer and management support. Studying provides increased labour market power and perceptions of improved control in working situations, which may help to mitigate the difficulties and stigma associated with disability. Tertiary study, specifically, assists with the growth of human and social capital of individuals with disability.

Human Capital

Education forms an important component of the human capital value attributed to employees. It is easily measured in terms of grades and confers on the employee a level of professional ability (Brown and Jones 2004) which will assist with entry to the labour market. Lily talks about her attempt to work in a position which proved to be difficult because of the physical aspects of the job. She then returned to study and completed an honours degree.

Lily: I believe that the opportunity to study honours has given me confidence but also provided reassurance to my employer that I can participate as a team player. I think that my results suggest that I can think in a useful, applicable way.

Building professional credibility through study is obviously important to Lily, as well as the opportunity to enhance her human capital through excellent results, and social capital through the interactions she had with lecturers and students while undertaking her course. Emily is aware of the stigma that may be associated with her disability. She indicates that she hopes that the human capital she gains from her study is sufficient to offset any reduction in value she might experience due to her disability.

Emily: I have always wanted to be a nurse and have had to keep my disability quiet to avoid the stigma.

Emily went on to say that she believed that the skills from her course would be able provide her with the job quality she desired, as well as give her the personal satisfaction from the completion of her degree.

Improving his human capital is a key factor in John's decision to study. His aim is to work in a position which will not compromise his health but he feels that, as a professional, he will have the human capital required to increase his labour market power to achieve the flexibilities at work that he needs to accommodate his illness.

John: Professionals in the workplace have more leeway with supervisors for chronic illness problems than non-professionals.

Creating human capital through study is also an option for individuals who have been out of the workforce for a time and would like to make a start in a different occupation. Thomas found that after his employer discovered he had been diagnosed with a chronic illness his value to the employer was reduced to the point where he was no longer considered for promotion. He resigned in order to undertake study so that he could change careers.

Thomas: I decided to seek higher education to enable me to seek employment of my choice and to gain an insight into the alternative employment opportunities available to a graduate from my choice of tertiary majors.

Improving their human capital is clearly the goal of these students, with the ultimate aim of improving their labour market outcomes. This is a very clear theme from the data; most of these responses were to the question: 'Why did you decide to study?' These data provide a valuable link between the research outcomes that we see from those who are employed which explain disadvantage and their possible exit from the labour market (Vickers 2011). Few studies, if any, have used student data to explain the use of tertiary study to enhance future labour market outcomes. It is clear that those with higher levels of labour market power have better outcomes at their workplace.

Social Capital

Studying at university provides students with the opportunity to improve their social capital through liaising with academic staff, Disability Services, and through friendships. Knowledge is gained through the inclusion of teamwork and networking skills in the curriculum. These will be beneficial as they embark on the career of their choice after graduation. Suzanne has found other ways to build her social capital, achieve desired employment, and work towards a career which will give her the flexibility to work part time when necessary.

Suzanne: If I hadn't been diagnosed with [a chronic illness], I would have continued working. I had always been involved in community [activities] and decided to study full time and perhaps work in a community/cultural development capacity. I thought that working in a community-based organisation, I would be able to take into account that I may not always be able to work full time.

Studying gives students the opportunity to work in an environment of their choice; disclosure in such an environment may assist them in their quest to access support. Study also gives them experience with building social networks which assist them in the circumstances of their disability. Sandra felt supported by the academic staff in her area.

Sandra: The faculty staff members were extremely supportive and considerate of my illness and were willing to make allowances in terms of timeliness of expected work. Luckily I managed to keep up, as my health improved.

Social capital for an individual with disability can also involve developing strategies for advocating for themselves in situations where they need to request accommodations. This is generally an easier prospect while at university where there is support. The safe environment provided by the Disability Services (part of Student Services) section allows for easier disclosure, counselling, and advocacy, which assists with approaching lecturers with requests for accommodations.

Thomas: I take full advantage of the services offered at Student Services which act as a reminder of my goals and are very supportive. I have taken advantage of the approachability, excellent kindness, and understanding of my lecturers when I'm not feeling well.

Disclosure, which can be difficult in any environment, can be positive and might lead to additional support and understanding.

Suzanne: I found it very difficult this semester to complete four subjects successfully. I was forced to drop a subject as it was difficult to submit all the necessary assessments in time. I was unhappy with myself over this but at no time did lecturers make me feel bad about it.

Studying is a strategy which has been shown to be successful thus far with the students who are participants in this research project. They express the explicit belief that they will benefit, in terms of the support received to facilitate their study, the completion of their study, and the workforce outcomes which will come from their degree. The skills they develop throughout their courses of study will have a positive impact on the value of their human and social capital.

Expected Labour Market Outcomes

Undertaking university study is a significant decision; it involves the motivation to succeed and commitment to their planned courses. Students with disability are among the most resource-poor student groups in the university environment. They have the usual pressures associated with tertiary study: if they are of mature age they may have family or caring responsibilities; studying full time is associated with limited financial means; additionally, they have specific difficulties related to their disability. For these students, the success of completion must be particularly satisfying (see Lily's comment below). Add to this their increased confidence, improved labour market power, and the hope of access to a fulfilling career, better job quality, and the ability to access flexibility in their workplace. And they have the potential to improve their outcomes at work. Thomas reported that he is studying a specific course because he believes that it will lead to a profession in which he will be able to manage with his disability. John hopes to be happier, healthier, and gaining satisfaction from the career of his choice.

Cheryl comments that while she is studying she struggles with symptoms of her illness. Even working or studying in a supportive environment does not make individuals immune from circumstances associated with their illness or disability. But ideally, understanding and flexibility should be available for unpredictable events.

Cheryl: I experience an inability to concentrate, a lack of energy and motivation, anxiety, and overwhelming feelings.

Cheryl found the university to be a supportive study environment where her lecturers were considerate of her difficulties. With this support she graduated with a Bachelor of Education.

Lily was asked if her disability was a significant factor in her decision to choose to study at university rather than work. She responded:

Lily: Yes, at university it's so wonderful. At work there is limited accessibility, but I would prefer to work.

Lily is happy with achieving so much at university and then being offered the job she wanted, despite having a significant disability.

Lily: I have meaningful employment in a paid job. I worked for a long time as a volunteer in [a health-related position] and now I am employed [with the same organisation]. I am so happy. I believe that the opportunity to study at postgraduate level has given me confidence, but also provided reassurance to my employer that I can participate as a team player. I think that my results suggest that I can think in a useful, applicable way.

Lily shows that choosing to study was a strategic decision also related to expanding her social capital.

Lily: I thought that further education might expose me to a wider network of people, and more up-to-date methods of managing paid work and my disability.

Leanne has also chosen her course because of the specific and debilitating type of disability which she has. She decided on a career as a writer because it gives her satisfaction. Balancing work and disability is important, but Jake also reports that personal outcomes formed part of his decision to study.

Jake: I enjoy a challenge and I was determined to go to uni as I have heard it leads to a greater salary and gives you more career choices.

Philip is looking for improved employment outcomes from his choice of career.

Philip: Why am I studying? Because I thought it was a good idea. I thought it was a good way to get back into the workforce.

Each of these students is looking for positive outcomes from their study. Their list of reasons for undertaking study includes: a desire to study in a particular field; undertake a particular career; work in a position which allows flexibility to cope better with their disability; and finding a higher-quality job. All are conscious of the limitations that organisations, supervisors, and colleagues may place on them because of their disability.

5. Conclusions

The process of working towards a new career through tertiary study has the potential for skill development that these students would otherwise not achieve. Completing a degree is considered by most to be a significant achievement; it provides those with a disability with evidence that they are indeed capable, despite their difficulties, thus enhancing their human capital. Social expectations of those who have a disability can require that those individuals take time away from work to recover before returning to their workplace, which is not possible or practical. When an employer is not satisfied with the health outcomes for an individual, that individual may feel that it is necessary to resign, as there may not appear to be any other option available to them. It is at this point that individuals choose to study to improve their chances of a better and more flexible career which allows for their disability-related circumstances.

Human and social capital are important for the students who wish to find employment and to build social networks in a new workplace after graduation. Development of improved labour market power may allow them to increase the flexibility they have and this will make the disclosure decision-process less difficult. Collective support should also be highlighted here as key reason for the success of students through self-advocacy and the advocacy of Disability Services on their behalf. Union support is also available for these workers on their return to the workplace.

Disability in the workplace often carries with it an undertone of incompatibility with good business; those working who have a disability may feel isolated and unsupported, resulting in a situation of increased vulnerability. Problems in the workplace experienced by the individuals in this study reflect the vulnerability they feel, particularly after the disclosure at their workplace of information about their disability. Tertiary study improves professional knowledge and abilities while also developing personal skills, such as confidence, which provide graduates with the ability to access increased labour market power. Human and social capital are critical aspects of the university experience which result in the achievement of more positive labour market outcomes.

References

Australian Bureau of Statistics (2009), *Disability, Ageing and Carers, Australia: Summary of Findings*, cat. 4430.0.

Australian Human Rights Commission (2004), *Information for Employers: Disability Discrimination and Harassment*, viewed 19 September 2011, http://hreoc.gov.au/info_for_employers/fact/disability.html

Australian Network on Disability (2011), *The Economic Benefits of Increasing Employment for People with Disability*, Deloitte Access Economics, Sydney.

Barnes, C. (2000), 'A Working Social Model? Disability, Work and Disability Politics in the 21st Century', *Critical Social Policy*, vol. 20, pp. 441-57.

Bedard, K. (2001), 'Human capital versus signalling models: university access and high school dropouts', *Journal of Political Economy*, vol. 109, no. 4, pp. 749-75.

Brown, C. and Jones, L. (2004), 'The Gender Structure of the Nursing Hierarchy: The Role of Human Capital', *Gender, Work and Organisation*, vol. 11, pp. 1-25.

Burgess, J., Henderson, L. and Strachan, G. (2006), 'I Just Juggle: Work and Family Balance in Australian Organisations', *Our Work, Our Lives, National Conference on Women and Industrial Relations*, Brisbane, Department of Industrial Relations, Griffith University.

Council of Australian Governments (2011), *National Disability Strategy* 2010–2020, Commonwealth of Australia, Canberra.

Fleetwood, S. (2007), 'Why Work-life Balance Now?', *The International Journal of Human Resource Management*, vol. 18, pp. 387-400.

Garavan, T. N., Morley, M., Gunnigle, P. and Collins, E. (2001), 'Human capital accumulation: the role of human resource development', *Journal of European Industrial Training*, vol. 25, pp. 48-68.

Gilead, T. (2009), 'Human capital, education and the promotion of social cooperation: a philosophical critique', *Studies in the Philosophy of Education*, vol. 28, pp. 555-67.

Goffman, E. (1976), Stigma: Notes on the Management of Spoiled Identity, Penguin, Harmondsworth.

Hammer, S., Werth, S. and Dunn, P. (2009), 'Tertiary Students with a Disability or Chronic Illness: Stigma and Study', *Enabling Pathways: Third National Conference of Enabling Educators*, Toowoomba, 25-27 November.

Hammer, S., Werth, S., Dunn, P., Lawson, K. and d'Abadie, D. (2011), 'Expectations of Ability and Disability at University: The Fine Art of Managing Lives, Perceptions and Curricula', in Midgley, W. (ed.), *Beyond Binaries*, Toowoomba, pp 211-220.

McElroy, M. W. (2002), 'Social innovation capital', *Journal of Intellectual Capital*, vol. 3, pp. 30-9.

McElroy, M. W., Jorna, R. J. and van Engelen, J. (2006), 'Rethinking social capital theory: a knowledge management perspective', *Journal of Knowledge Management*, vol. 10, pp. 124-36.

Millen, N. and Walker., C. (2001), 'Overcoming the Stigma of Chronic Illness: Strategies for Normalisation of a Spoiled Identity', *Health Sociology Review*, vol. 10, pp. 89-97.

Myers, K. R. (2004), 'Coming Out: Considering the Closet of Illness', *Journal of Medical Humanities*, vol. 25, pp. 255-270.

Nelms, L. and Tsingas, C. (2010), 'Literature Review on Social Inclusion and its Relationship to Minimum Wages and Workforce Participation', Research Report, vol. 2, Fair Work Australia.

Peetz, D. (2005), 'Retrenchment and Labour Market Disadvantage: Role of Age, Job Tenure and Casual Employment', *Journal of Industrial Relations*, vol. 47, pp. 294-309.

Productivity Commission (2004), *Review of the Disability Discrimination Act*, Australian Government, Canberra.

Roessler, R. T., Turner, R. C., Robertson, J. L. and Rumrill, P. D. (2005), 'Gender and Perceived Illness Severity: Differential Indicators of Employment Concerns For Adults with Multiple Sclerosis?', *Rehabilitation Counselling Bulletin*, vol. 48, pp. 66-74.

Smith, A. (1952), An inquiry into the nature and causes of the wealth of nations W. Benton, Chicago.

Timberlake, S. (2005), 'Social Capital and Gender in the Workplace', *Journal of Management Development*, vol. 24, pp. 34-44.

Vickers, M. (1997), Life at Work with 'Invisible' Chronic Illness (ICI): The 'Unseen', Unspoken, Unrecognised Dilemma of Disclosure', *Journal of Workplace Learning*, vol. 9, pp. 240-252.

Vickers, M. (1998), 'Life and Work with "Invisible" Chronic Illness: Shattered Lives, Fractured Voices—The Useful Vantage Point(s) of Critical Postmodernism', *National Conference of the Public Administration Theory Network Conference*, Colorado Springs.

Vickers, M. (2001), 'Unseen Chronic Illness and Work: Authentic Stories from "Women inbetween", *Women in Management Review*, vol. 16, pp. 62-74.

Vickers, M. (2003), 'Expectations of Consistency in Organizational Life: Stories of Inconsistency from People with Unseen Chronic Illness', *Employee Responsibilities and Rights Journal*, vol. 15, pp. 85-98.

Vickers, M. (2010), 'Exploring Illness Disclosure for Workers with Multiple Sclerosis', 24th Conference of the Association of Industrial Relations Academics in Australia and New Zealand, Sydney, 3-5 February, pp. 1-11.

Vickers, M. (2012), 'For the Crime of Being Different...: Multiple Sclerosis, Teams and Stigmatisation at Work—Lessons from a Case Study', *Employee Responsibilities and Rights Journal*, vol. 24, pp. 177-195.

Werth, S. (2007), 'Image Management for Women with Invisible Chronic Illness in the Various Aspects of Life', *International Women's Conference*, Toowoomba, USQ Women's Network.

Werth, S. (2010a), 'Chronic Illness, Women and Work: A Model of Disclosure', *The Australian Sociological Association Conference 2010, Sydney*, pp. 1-12.

Werth, S. (2010b), 'Women, Work and Chronic Illness', 24th Conference of the Association of Industrial Relations Academics in Australia and New Zealand, Sydney, 3-5 February, pp. 1-9.

World Health Organisation, (2002), *Towards a Common Language for Functioning, Disability and Health: ICF*, Geneva.

World Health Organisation, (2011), World Report on Disability, Geneva.