Chapter 5
Multicultural Intersection With Disabilities

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ABSTRACT

Why do we care? This chapter covers it all. The intersection of disability, employment, and race is well defined by the co-authors of this chapter and ranges from Black issues to those of immigrant groups to those with special needs in competition. But why is it needed? Even after decades of working on the issues of diversity, equity, and inclusion, we are not yet there. Life in the USA is still one filled with inequity, short on diversity and lacking in inclusion for special groups. Hopefully, reading this chapter will help the reader move introspectively toward a higher personal goal.

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**INITIAL STATEMENT OF THE PURPOSE OF THE CHAPTER**

The purpose of this manuscript, as currently written, is to ascertain the complicated relationship that exists between various factors of intersectionality and disability. We achieve it by looking into the myriad of experiences encountered by persons who must negotiate the many facets of their identities and the many socio-economic structures in today’s world. Considering the reality that disability does not exist in a vacuum, the purpose of this discussion herein is to investigate how elements such as a person’s ethnicity, gender, sexual orientation, and financial class interact with one another and exacerbate the difficulties experienced by people with disabilities. Thus, we believe that by taking an approach that is both humane-centered and academically rigorous, we can shed some light on the importance of understanding these intersections to cultivate settings that are welcoming to all persons and to push for opportunities that are equal across the board, regardless of the varied experiences and histories of those individuals. In addition, we will investigate the implications that intersectionality has for formulating public policy, delivering services, and conducting public discourse. We will emphasize the need for a more holistic approach to meeting the specific requirements of disabled persons who live in varied communities. Ultimately, we want to contribute to the more extensive debate on disability rights and social justice, with the end objective of enabling readers to participate in educated conversations and become allies in the continuing battle for inclusion and equality.

**CHAPTER HIGHLIGHTS**

- The complex relationship between disabilities and diverse factors using a multidimensional approach.
- The intersectionality of multiple forms of oppression that marginalized groups and intersecting identities often face unique challenges and barriers.
- The impact of societal structures, institutional policies, and cultural norms on disabled individuals.
- The need to recognize the intersectionality of power and privilege with disability, influencing access to resources, opportunities, and social inclusion.
- The need for further research and policy interventions to bridge the gap between disability studies and other fields like critical race theory, feminist theory, and queer theory.
- Advocacy and activism promote a more inclusive society, with successful initiatives showcasing collaboration, allyship, and solidarity among social justice movements.

**LEARNING OBJECTIVE**

1. The reader will be informed about the most current trends in a multicultural approach to service delivery.
2. The reader will be able to compare and contrast a variety of approaches to each other.
3. The reader will learn to use a variety of theoretical techniques.
INTRODUCTION

Kimberlé Crenshaw coined the term intersectionality in 1989 (Geist & Calzaretta, 1982) to describe the interconnected nature of social categorizations such as race, gender, and class, which produce overlapping and interdependent systems of discrimination or disadvantage. Applying this concept to disability studies, we can observe how the intersectionality of disabilities with other factors such as ethnicity, gender, socioeconomic status, and geographical location creates a unique and complicated experience for people with disabilities. This chapter seeks to explicate the multifarious implications of these intersections, underscoring the need for a more comprehensive approach to comprehending and addressing the challenges encountered by people with disabilities.

The intersection of disability and race exposes individuals to heightened discrimination as they negotiate the complexities of ableist and racist stereotypes. This combination exacerbates access disparities to education, employment, and healthcare, perpetuating cycles of disadvantage. It is essential to recognize and resolve the overlapping nature of these challenges to develop more effective policies and interventions that consider the unique experiences of individuals positioned at this intersection (Kiuppis, 2018).

The intersection of disability and gender presents individuals with disabilities with unique challenges. Women with disabilities are especially vulnerable because they face discrimination based on both their gender and their disability. This vulnerability is reflected in disabled women’s higher unemployment rates, lower wages, and greater exposure to gender-based violence. In contrast, disabled males may be subject to societal pressure to conform to traditional gender roles, which may further complicate their experiences. It is essential to recognize these gender-specific obstacles when designing interventions to meet the specific requirements of individuals with disabilities (Kiuppis, 2018).

The intersection of disability and socioeconomic status reveals the complex relationship between poverty and disability. Poverty can increase the likelihood of disability, while impairment can exacerbate socioeconomic difficulties. Most likely, individuals with disabilities from disadvantaged socioeconomic circumstances frequently have restricted access to education, employment, and healthcare, resulting in increased social exclusion and marginalization. Recognizing the two-way relationship between disability and socioeconomic status is essential for designing policies and programs to break this disadvantage cycle (Kiuppis, 2018).

Geographical location plays a significant role in determining how individuals with disabilities experience life. Due to limited access to specialized healthcare services, educational resources, and employment opportunities, those residing in rural areas may confront additional difficulties. In addition, inadequate infrastructure and transportation options in rural areas frequently exacerbate these problems. To effectively address the requirements of individuals with disabilities in varying geographic contexts, it is essential to implement localized and context-specific strategies (Chaturvedi, 2019). Ultimately, the intersectionality of disabilities with various factors such as race, gender, socioeconomic status, and geographic location creates a complex web of obstacles for people with disabilities.

Developing more comprehensive and effective policies and interventions that accommodate this diverse population’s unique requirements requires a deeper comprehension of these intersections. By employing an intersectional approach to disability studies, we can create a society that values the contributions and experiences of all individuals, regardless of their disability status or other social categories.
**DISABILITY AND ASIAN AMERICAN AND PACIFIC-ISLANDERS**

One the socio-economic phenomenon that has been repeatedly ignored, deliberately or unintentionally, is the intersectionality between Asian Americans and Pacific Islanders (AAPI) and disability-focused equitable educational access. Despite presently standing at a mere 5.9% of the overall population and approximately 3% of the electorate, AAPI has rapidly become the fastest-growing ethnic/racial group in the United States. However, scanty statistical inquiries exist in deciphering the underlying dynamics of AAPI and vocational rehabilitation (VR). Consequently, the outcomes of the dearth of studies have been adverse: uneven distribution of the state/federal VR resources and the denial of services of certain race-based programs tailored toward traditional “disadvantaged groups” due to misconception and wholesale misclassification of AAPI in terms of eligibility. In many prominent studies, Asian Americans have been underrepresented in research on disability. The “model minority” stereotypes and Asian cultural norms contribute to the lower rate of disability self-identification from within the AAPI communities. The “model minority” myth stereotypes some Asian Americans as consistently high achieving. Nevertheless, if educators, employers, and service providers assume that AAPI communities are less likely to have challenges, their disabilities may go unnoticed. Accordingly, Asian Americans may be less likely to pursue a diagnosis or identify as disabled and thus perpetuate the vicious cycle of self-victimization in terms of seeking assistance (Fong, 2022).

Accordingly, there is an underlying unfavorable relationship between the AAPI population and equitable access to disability rehabilitation services. The prevailing stereotype perpetuates the “model minority” myth with the misguided notion that AAPI families belong to the upper echelon of the socio-economic spectrum. Adding to this misassumption is the excessive media report and investigation about the supposed meteoric material success of AAPI while blatantly disregarding the profound underbelly of extreme poverty and wealth inequality existing in AAPI-dominant communities (Chew, 2019). Unfortunately, many universities and state/federal agencies operating from this preconceived bias have frequently misallocated or failed to deliver needed assistance to AAPI students diagnosed with disabilities. Identity politics has led to universities (e.g., Ivy-league universities) and secondary educational institutions (e.g., the controversial San Francisco School District and North Thurston Public Schools in Olympia/Lacey) reconfiguring AAPI students as “white” or “white-adjacent” to denigrate them as “privileged” and undeserving of special treatments traditionally reserved for disadvantaged groups. This has led to polarized discussions about AAPI students’ status and the need for more inclusive and equitable education (Chew, 2019). As a result, the provision of disability services typically reserved for traditional “disadvantaged people of color” was then not delivered to otherwise qualified recipients despite their proven impoverished family background and their adverse immigrant heritage. In other cases, the outdated binary method (between African American and Caucasian-American, and increasingly Hispanic Americans) of delivery of services at the educational institution has not succeeded in meeting a whole demographic spectrum of other less-known racial minority groups such as AAPI. In conjunction with the preconceived notion regarding AAPI being comfortably situated in the upper socio-economic echelon, the funds geared toward otherwise fully qualified AAPI pupils were then redirected toward other racial/ethnic groups thus generating adverse results for AAPI students of disability (Tawa et al., 2015). Consequently, this unequal allocation of resources further aggravates the already simmering tension and resentment between AAPI communities and other ethnic minority groups.

Compounding this problem is the habitually acrimonious internal division between a substantial segment of upper-middle-class AAPI (nicknamed “boba liberals”) and working-to-lower-class AAPI...
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communities regarding the necessity of VR resource allocation. Frequently, the wealthy AAPI segment harbors a similar myopic view to those of their well-to-do counterparts in other ethnic groups: that VR resources are not needed owing to their inherent affluence while disregarding those of the segments in their communities due to their quixotic and misguided ideology aligning with those of upper-middle-class white, educated individuals (Aich & Constable, 2022). One recent study has sought to demystify this disparity of perception by following and documenting multiple AAPI families with “high-ability children of disabilities” (Park et al., 2018). The researchers from that study have testified to the resiliency of AAPI parental style and family cohesion regardless of hostile environmental factors. The findings, therefore, pointed toward the assiduousness of the students’ families as opposed to some mythical inborn privileged phenomenon. Hence, stronger advocacy for AAPI students with exceptional disabilities is highly needed (Park et al., 2018).

Another study dispelled the myth of model minority unencumbered by any type of disability further concerning the supposed elevated social status of AAPI families by analyzing the pervasive existence of racial discrimination leading to the proliferation of disabilities among AAPI students in the domains of cognition, self-care, mobility, social interaction, and time out of role (Waldman et al., 2022). To exasperate the issue is the latent stigmatizing of disabilities, especially intellectual disabilities, as students also regularly prevented the students from receiving the needed assistance owing to the detrimental effect of native cultural practices. The parents of the said students associated with deficiencies were far less likely to accommodate their children via treatment as opposed to dismissing those needs as “failures” and abnormalities in addition to impractical academic and occupational expectations (Xu, 2021). Thus, given the already marginalized and isolated tendencies of many AAPI communities, parents’ reticence has rendered the students even less likely to obtain the benefits. Within the AAPI enclave, Vietnamese Americans have the highest prevalence of limitations and disabilities compared to other Asian groups.

Consequently, the existing overgeneralization of AAPI communities as one monolithic bloc continues to disregard the diverse approaches that each AAPI ethnic group takes toward dealing with disability problems – which further corroborates the intentional or inadvertent negligence of AAPI disability and hinders the progress toward tailoring treatment and resource option to specific AAPI sub-communities with varying cultural experiences and norms.

Given the absence of institutional support for the intersection of AAPI and disability, AAPI advocates, unfortunately, regularly must take matters into their own hands to empower AAPI children and their family members. One such initiative is the organization called Asian Americans with Disabilities Initiative (AADI) to advance the interests of the AAPI disability population. Its stated goal encompasses the amplification of the AAPI voice and exploration of the concerns specifically unique to the AAPI population with the hopes of combating ableism both from within and outside of the community as well as any inherent structural anti-Asian prejudice embedded within the allocation of government funding and resources (Feng, 2019). Furthermore, AAPI hoped to use a larger platform to magnify the widespread abject poverty prevalent in many AAPI communities, thus further exasperating the already urgent problem of many AAPI disability populations and their family members (The Asian Americans with Disabilities Initiative, 2022).
THE INTERSECTIONALITY OF DISABILITY AND INTERNATIONAL HERITAGE: DISABLED PERSON OF INDIAN DESCENT

For centuries there has been a multicultural and caste-based bias in India. Furthermore, these differences affect people with disabilities as well. Dalits are considered lower caste people who were denied inclusion in society and were also denied access to basic facilities such as education, hospitals, jobs, etc. Because of this, most of the Dalits live in a poorer environment. People in India are discriminated against in many ways, such as religion, caste, and disability. When all these factors intersect, the person will significantly impact their social inclusion.

Disability is a significant public health issue worldwide, particularly in emerging nations like India. Most of the disabled population in India live in rural areas, which makes it crucial to consider the problems like affordability, accessibility, and usage of rehabilitation programs, as well as their expense. People with disabilities are criticized and disrespected based on their disability. Being disabled is portrayed unfavorably in most Hindu scriptures; it is connected to a very deterministic negative value and absoluteness in one’s life. However, not all impaired people must value this comprehension. People typically view disabilities as misfits in society because seeing disabled people may be unsettling. A wealth of evidence demonstrates that the exclusion of disabled people in India is tied to karmic causality (Chaturvedi, 2019). According to evidence provided by (Singh, 2014), the exclusion of disabled individuals from Indian society is due to the belief in Karma, which causes the disabled to be viewed as useless.

One such instance is that the parents of their disabled kid are ashamed, cannot see a promising future for the child, and are afraid of social isolation; people with disabilities are ostracized, abused, or abandoned at birth in some villages. This can result from religious convictions that view impairments as retribution for previous actions. As a result, if feasible, infirmities are concealed from the public. Additionally, there are so many environmental obstacles in cities (e.g., lack of sidewalks, pedestrian traffic signals, curb cuts, or ramps) that the majority of persons with disabilities are unable to venture out in public (Singh, 2014).

Gender discrimination is seen in this area where women and girls with disabilities are disrespected more than their fellow men. In India, disabled women and girls are compelled to enter mental hospitals and institutions. They must deal with unhygienic surroundings, risk physical and sexual abuse, and endure forced medical procedures like electroconvulsive therapy. They are “treated worse than animals,” as one woman put it. Because the government is unable to offer adequate support and services, women and girls with disabilities are being abandoned in institutions by their families or the police, according to Kriti Sharma, a researcher at Human Rights Watch (Singh, 2014). Moreover, their lives are frequently marked by loneliness, cruelty, and dread, with little chance of escape after imprisonment.

Women and girls with psychosocial or intellectual disabilities experience many forms of discrimination in a nation where gender-based prejudice is ubiquitous. As a result, they are among the most disadvantaged and at risk of abuse and violence. They are frequently shunned by families unable to care for them; many will be institutionalized against their will. In India, institutionalizing males and women follow the same procedure. However, women and girls with disabilities confront specific difficulties that males do not, such as sexual assault and being denied access to contraception.

Women and girls with psychosocial or intellectual problems may be admitted to institutions without agreement by families, legal guardians, and child welfare committees. The police may also apprehend them if they are seen wandering the streets and given court orders to be admitted to these facilities. In 2007, India ratified the CRPD, or Convention on the Rights of Persons with Disabilities. Governments
are required under the treaty to uphold the legal competence of individuals with disabilities and their right to live in the community on an equal footing.

Disabled individuals are considered the victims, and destiny is the perpetrator. Because of the widespread prejudice towards disabled individuals in most societies, many families are hesitant to report impairment. There are roughly 90 million persons with disabilities living in India because there has not been a comprehensive census of the country’s impaired population. The rural portion of this population makes up about 787,337. According to Awasthi, people’s perceptions that disabled people cannot function well provide a challenge. “People gradually realize that anyone can become powerful given the correct circumstances.” However, persons with intellectual or learning challenges fight even more to be recognized. In conclusion, the soon-to-be number-one populated country in the world also has a rapid increase in the disability population. Even though there are many instances where people with disabilities are discriminated against in India, there has also been a surge in developing and spreading awareness about the needs and rights of the disabled.

The disability rights movement is advancing the inclusivity agenda to alleviate the problem. The focus of the inquiry should now shift from inclusion in society to equal partnerships with the physically abled. Understanding their differences and demands will remain as hazy as it is today in the public domain until more individuals with disabilities enter the government, public areas, universities, and workplaces. The mindset must be drastically changed to equal partners in development and decision-making to achieve the goal of inclusivity.

Despite the long history of the disability rights movement in India, debates about rare diseases and a sophisticated understanding of disability in public discourse have only recently gained ground. One of these is the urgent necessity to reexamine the country’s disability lens in light of rare disorders. The movement is facing a difficult battle, but they are not the only ones who must lead. More significantly, we need to consider whether we are working to improve the lives of people with disabilities or whether this is merely a deal for the benefit of the non-disabled.

A DETAILED INVESTIGATION ON THE INTERSECTIONALITY BETWEEN DISABILITIES AND THE EMPLOYMENT SOCIETAL BARRIERS

The AAPI population is also confronted with similar barriers to employment barriers as other ethnic communities. Thus, it is important to do in-depth research on this topic since the junction of disability and work is a multi-dimensional and complex problem. This research aims to provide light on the numerous facets of this junction, such as the challenges associated with finding work, the safeguards provided by the law, the types of accommodations that are considered acceptable, and the advantages of having a diverse workforce. In light of greater knowledge of these factors, one will better comprehend the importance of cultivating a diverse and inclusive workplace that recognizes and appreciates the contributions made by those with disabilities.

People who have impairments often must contend with a wide variety of challenges to obtain and retain successful work. These obstacles may be placed into one of three primary buckets: social, organizational, or personal (Abidi & Sharma, 2014). The cultural and social attitudes that limit the full integration of people with disabilities into employment are referred to as societal obstacles. Such attitudes might manifest as negative stereotypes, prejudice, and a lack of understanding about the capabilities and potential of persons with disabilities (Lustic & Strauser, 2004; Geist & Calzaretta, 1982). Organizational
barriers are defined as the company’s rules, procedures, and structures that unintentionally make it difficult for people with disabilities to use the company’s products and services. Some examples of this might include inflexible/strict work schedules, facilities that are not easily accessible, or a lack of policies that encourage the inclusion of workers who have disabilities (Emerson & Hatton, 2013; Gaventa et al., 2021; Lehmann, 2006). Individual barriers are the problems that persons with disabilities confront in their daily lives that prevent them from getting and keeping work. Some examples include a lack of educational opportunities, poor skills training, and inadequate access to assistive technology.

Several legislative provisions have been implemented to remove these obstacles and ensure that people with disabilities have equal access to work opportunities. The Americans with Disabilities Act (ADA) is a landmark piece of law in the United States that forbids discrimination against people with disabilities in a variety of facets of life, including work. This legislation was passed in 1990. The Americans with Disabilities Act (ADA) mandates that companies must offer eligible workers with disabilities with reasonable accommodations unless doing so would result in an undue burden.

Modifications or changes made in the working environment or in the manner in which duties are carried out may be referred to as reasonable accommodations. These modifications or adjustments allow qualified persons with disabilities to carry out their fundamental employment activities. Modifying work schedules, providing assistive technology, or making changes to workplace regulations are all examples of reasonable accommodations (Lustic & Struaser, 2004; Moon & Shin, 2006).

It has been proven to generate several advantages to having an inclusive workforce that embraces diversity as well as the distinctive viewpoints and skills that persons with disabilities bring to the table. Among them are increases in creativity, improvements in staff morale, and enhancements to the organization’s reputation. In addition, research reveals that businesses that place a priority on the inclusion of people with disabilities tend to see greater levels of employee retention, as well as higher levels of productivity and overall financial success (Geist & Calzaretta, 1982). In conclusion, the confluence of disability and employment is a complicated topic that involves several aspects. These dimensions include impediments to employment, legal safeguards, reasonable accommodations, and the advantages of an inclusive workforce. Employers, governments, and society collectively may work together to create a more inclusive and equitable work environment that recognizes the contributions of all persons, regardless of their handicap status, if they recognize and address these elements.

ATHLETES AND DISABILITIES: KEY INSIGHTS

Over the past 30 years, individuals with disabilities have gained increased attention in relation to sports and athletes (Kohe & Peters, 2016). Assessing athletes’ needs prior to participation limits the likelihood of adverse experiences and helps build confidence. Increased empathy is one of the most important aspects of working with individuals with disabilities. Attempting to see the world from the standpoint of the athletes helps improve the overall quality of relationships, develops more effective means of communication, and reduces anxiety for everyone involved. The intersectionality of disabilities can be based on many factors, but the social environment is critical. Environments set up for low arousal levels help improve athlete attention and skill development. An environment with numerous distractions limits individuals’ ability to attend to content, process information, and remember techniques or rules. These abilities and worldviews are important because they directly impact potential successful employment outcomes for individuals with disabilities.
The awareness surrounding sports opportunities for disabled people has grown in large partly because of research showing that people with disabilities are more likely to live sedentary lifestyles and less likely to participate in physical activity than the general population (McGuire et al., 2007). The lack of physical exercise can exacerbate health problems among this population, which already has higher risk factors than the general population. There are various physical benefits to participating in a sport, including flexibility, muscular strength, improved immune response, cardiovascular fitness, and reduced risk of illness (Janssen & Leblanc, 2010).

Additionally, sports participation has several important social and psychological benefits, such as promoting relationships with others, creating a sense of belonging, providing autonomy and independence, increasing self-esteem and self-worth, and improving social communication skills. Despite the obvious benefits, there are numerous practical, policy, and educational barriers to sports participation that exist for individuals with disabilities (Janssen, 2010). Individuals with disabilities have much to gain from sports participation, and as a society, we should work to improve access for this population. Those in positions of power (e.g., coaches, volunteers, organizers) and the public are responsible for improving their ability to work and communicate with this population.

Decades of research indicate that coaches lack the knowledge, competence, and confidence to work effectively with disabled athletes (Townsend et al., 2022). One major contribution to these deficits is the lack of available literature focused on coaching individuals with disabilities. Currently, most research is centered on coaches of the generic athlete population. There have, however, been increased efforts to increase the interactions and training for coaches with this population. The International Paralympic Committee (ICP) outlined a strategic focus on prioritizing the change of cultural perceptions of disabilities and promoting social inclusion through sport (Committee, 2019). It is well-documented that coaches play a crucial role in the lives of the athletes they coach. For the typical youth athlete involved in organized sports, coaches are often viewed as the most influential adult in life apart from the parent (Petitpas et al., 2005).

Despite the important role coaching interactions have on athletes’ growth and development, many coaches are unprepared and untrained when it comes to working with disabled athletes. Recent findings suggest that coaches learn how to work effectively with disabled athletes best through direct experience and learning from mentors who have direct experience working with disabled athletes (MacDonald et al., 2016). A study conducted by Hammond and colleagues showed that coaches that constantly communicated with intellectually disabled swimmers had more positive attitudes, beliefs, and understanding of abilities with the population than coaches with no interactions (Hammond et al., 2014). Other findings suggest that improved non-verbal communication skills among coaches may help significantly improve the overall experience and satisfaction of disabled athletes (Mohammed, 2018). Increased awareness of the specific needs of these athletes and continued development of training courses on how to communicate with this population can contribute to improved quality of life for disabled individuals and their families.

Athlete inclusion has two models, The STEP (an acronym for Space, Task, Equipment, and People) and the TREE models; they are helpful ways for coaches and parents to structure sports activities to increase participation for athletes with disabilities (Kiuppis, 2018). The framework of STEP promotes athletic engagement for individuals with varying ability levels. Incorporating more ‘Space’ into the playing area, and sometimes decreasing the playing area, allows for athletes with different mobility and ability levels to have a greater opportunity to participate. Creating an environment with clear ‘Tasks’ that can be broken down into smaller parts can accommodate athletes of differing skill levels and help in skill acquisition. Providing several options for ‘Equipment’ (e.g., increasing or decreasing the size
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of a ball, using gutters in bowling, using bells or raddles for noise) can help include athletes who were previously unable to participate. Lastly, matching ‘People’ of similar ability levels and balancing team numbers according to the overall ability of the group can help facilitate a better environment. The TREE model stands for ‘Teaching or coaching style,’ ‘Rules and regulations,’ ‘Equipment,’ and ‘Environment.’ Although similar to the STEP model, the TREE model emphasizes the attention given to the ‘Teacher’ or ‘Coach’ in promoting inclusion.

Strategies to improve communication Involvement in sports for individuals with disabilities continues to increase, and it is important for parents, coaches, and teachers to better be able to understand and respond to the needs of this population. The SPELL framework, initially developed for working with individuals diagnosed with Autism Spectrum Disorder, highlights five basic principles that can help improve the overall experience of everyone involved (Beadle-Brown et al., 2009). The acronym SPELL stands for ‘Structure’, ‘Positive approaches and expectations’, ‘Empathy’, ‘Low arousal’, and ‘Links’. Structure in athletic settings provides participants with a more predictable, safe, and friendly environment to help reduce athlete anxiety. By helping to establish a more structured environment, coaches indirectly promote individual autonomy by decreasing the need for constant direction. Positive approaches and expectations help build on athlete strengths, as opposed to highlighting their limitations.

In such environments, it can be helpful for coaches to use and teach relaxation techniques or arousal reduction techniques to help athletes self-regulate. Lastly, it is crucial for coaches and parents to be linked with the community. Sharing information reduces the risk of confusion, misunderstandings, and fear. Although the SPELL framework is not comprehensive, it is an easy way to increase comfort and competence in working with this population.

Sports participation can result in both physical and cognitive strain for participants. Among individuals that have difficulties learning or acquiring new skills, sports can be extremely challenging. Parents and coaches need to have simple strategies to deal with common issues related to learning new skills (Turgeon et al., 2023). Common issues include longer processing times, difficulty learning fine motor movements, shorter attention spans, limited use and comprehension of language, anxiety, impulse control issues, poor self-regulation, and emotional disturbance, which can all limit learning. In response to these common issues, coaches and parents may benefit from repeating instructions and drills that are important to increase muscle memory (Parry & O’Rourke, 2023). Additionally, since attention is limited, keeping explanations and directions short and clear, with the use of demonstrations, can improve retention and limit confusion (Kohe & Peters, 2016). One often overlooked factor that is critically important involves staying patient with the athletes and allowing enough time for them to process the information. A common mistake coaches make is to assume that the athletes understand what is being asked. Regular, one-on-one check-ins to clarify and answer questions are critically important, especially since athletes may feel uncomfortable in the early stages. Modeling new skills and appropriate interpersonal behaviors can help reinforce important areas of development without overloading the athletes with too many instructions. When communicating, it is essential to use an individual’s name prior to giving instructions to limit role confusion. Lastly, it is crucial to treat all athletes with the respect and dignity they deserve.

It can be a challenge working in environments with individuals that require special needs and considerations, but it can also be rewarding. Coaches that can communicate, interact, and respond to the needs of athletes with disabilities can provide a better experience for the individual to take advantage of all the benefits physical activity offers.
INTERSECTIONALITY OF DISABILITY AND THE LAW

Arguably, the most significant occurrences of the legal world intersecting with disability happen in the form of statutes. The Americans with Disabilities Act (ADA), The Individuals with Disabilities Education Act (IDEA), and the Rehabilitation Act (the Rehab Act). The ADA aimed to regulate society’s measures of inclusion by mandating compliance with the standards in the Act (“Americans with Disabilities Act,” 2016). The core of the Act created a new standard in American society that entitled people with disabilities to access and accommodation in public spaces and businesses, employment rights, and expectations of non-discrimination. The codified standard set by the ADA essentially set the stage for how people and entities now view people who have disabilities.

The concept of disability in the legal world is most often viewed as a medical “problem” that an individual experiences for which a legal remedy or accommodation can be made (Emens, 2012). The idea of a special benefit being created through a statute is a mitigation approach often centered on making a person more whole or placing them in a more advantageous spot than they originally found themselves in. Disability laws exist to create necessary accommodations for the use of everyday spaces, equalize chances of employment for people with disabilities, and generally foster inclusive attitudes so that people with disabilities can exist in a society where they are integrated and seen as “typical” (Emens, 2012). However, whether laws effectively accomplish these goals is an evolving and normative inquiry.

In practice and outside of the legislative branch, the ADA appeared to be the general public’s attempt at normalizing disability and preventing discrimination. The provisions of the ADA touched many things, most notably general discrimination, discrimination from public entities, transportation entities, and public accommodations and services offered by private entities. The Act touched enough day-to-day services, businesses, and anything pertaining to the operation and participation in the commercial world. The legal profession, however, is not known for its inclusivity and consideration of practitioners with disabilities. It was not until the ADA passed that the legal profession was required to even render services to clients who have disabilities as part of the nondiscrimination it mandated (“Section 504, Rehabilitation Act of 1973”, n.d.).

The Individuals with Disabilities Education Act (IDEA, 1975) established a standard for educational practices for children with disabilities. The “Free Appropriate Public Education” or “FAPE” standard came from this statute and is commonly employed to determine educational accommodations and Individualized Education Program measures for students using special education services. The IDEA is a financially blind and uniformly applied statute to any student enrolled in special education, entitling students to reasonable accommodations, particularized classroom plans and goals, and annual meetings to determine the success of their schooling to adjust their programs to best fit their educational progress and current needs. IDEA aims to ensure that all students with disabilities are entitled to a FAPE to meet their specific needs and equip them for opportunities beyond their classroom days, according to 20 U.S.C. § 1401(9). IDEA sets the standard of FAPE. Students, parents, and advocates can look to this standard in instances where they feel educational needs have gone unmet and have adversely affected the progress of a student.

The IDEA took an inclusive stance and essentially imposed a no-rejection policy for schools to follow towards any student, no matter the type of disability. FAPE entitlement guarantees every student in the special education system an opportunity to have their needs met in a classroom setting in such a way that they can reap the benefits of that education. The IDEA originally was interpreted to demand “more than de minimis” progress for students, but later evolved to require more- demanding that educational...
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programming is reasonably calculated so that children progress appropriately considering their circumstances. The law of IDEA unambiguously states a child’s entitlement to FAPE. While somewhat vague, the notion that every student should obtain some educational benefit from their time in school at no cost to their parents is set under the FAPE provision of Part B of IDEA (Kiuppis, 2018).

In 1973, preceding the ADA and IDEA, the Vocational Rehabilitation ("The Rehab Act") was codified, with Section 504 specifically stating, "No otherwise qualified individual with a disability shall, solely, because of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance." ("Section 504, Rehabilitation Act of 1973", n.d.). While the ADA substantially grew the protections that people with disabilities had, the Rehab Act set the stage in many ways, although it took some time to warm up. Implementation of Section 504 did not occur until 1978, and the first lawsuit arising out of the Rehab Act was not seen until 1979.

The language of Section 504, being much less comprehensive than many statutes we see today, as well as the timing of the Rehab Act in an age with less publicity and technological access to news, created a somewhat delayed understanding of the rights it entitled people to. ("Section 504, Rehabilitation Act of 1973", n.d.). Inaccessibility and lack of understanding of the law and its entitlements have not entirely gone away today, but it has certainly grown easier for citizens, disabled or not, to understand rules and be aware of their rights. The professionalism and understanding of those in the legal profession regarding disability are of the utmost importance. Clients come from varying backgrounds, nations, races, ethnicities, sexual orientations, gender identities, and ability levels. A legal professional’s open-mindedness to learning about disability and willingness to take corrections is important to the mission of inclusion that many laws are rooted in.

Competencies of legal professionals can be pursued through workforce inclusion training and in law school programming and course offerings. Hopefully, the American Bar Association was encouraging disability law-related coursework and continued legal education (CLE) opportunities related to allowing the disability community to be at the forefront of this work and encouraging profession-wide basic competency for lawyers to have for the sake of inclusivity to clientele base. Further, law schools have many strides to make in creating more inclusive programs. Admission rates for applicants who are identified as having some type of disability are admitted at a very percentage rate. The law school community can do more to admit students with needs related to their disability and create a space for them in the classroom if the applicant can earn admission with their GPA and LSAT score.

DISABILITY AND AFRICAN AMERICAN COMMUNITY

According to one American Community Survey data survey, 14 percent of Black Americans have a disability compared with 14 percent of the overall population. Furthermore, thirty-six percent of Black Americans in the general population live in poverty, compared with 26 percent of all Americans with a disability ("Inheritance: Black life and American history," n.d.). This is alarming considering the social justice issues and race in general, and the double whammy of living with a disability. Many people are navigating systems that have posed significant obstacles. For example, Black Americans with disabilities have a difficult time getting the correct diagnoses and services. This is especially true when it comes to “invisible disabilities,” i.e., autism. Black children diagnosed with autism are more likely to be viewed by white educators as having behavioral issues (Gupta, 2021).
A former Penn State student named Angel said, “Sometimes you have to scream out” (Gupta, 2021). As a Black woman with spina bifida, a condition that affects the spinal development of the utero, who used crutches while attending college in 1998, she states at times, it was challenging to navigate a predominantly white college and that being black and disabled in a constant struggle (Gupta, 2021). Growing up, she attended schools that had accommodations that supported her growth and development but going away to college was different. She shares an experience in which she was waiting on her bus to go to class, and the bus driver said, “I don’t want you on my bus,” and drove off (Gupta, 2021).

She further states that she pushed for the needed services and graduated from college. Because of her experiences, she became a social justice activist advocate and a policy analyst focusing on intersectionality and critical disability theory approaches (Critical Disability Theory, 2019). Unfortunately, Angel’s story is emblematic of a system that often does not see Black Americans with disabilities.

Leroy F. Moore Jr., a Black activist with cerebral palsy, shared that being Black and disabled is isolating. He feels misunderstood by his own community and his mostly white co-workers that he worked with for most of his career in the non-profit profession. He further stated, “I was caught in between two worlds,” and according to Moore, these experiences motivated him to find the disability-justice movement in the 2000s. He states that while disability activism made its mark, considering race, identity, gender, class, and sexual orientation impacts an individual with a disability experience and how ableism intertwines with other systems of oppression. Moreover, Moore states that understanding this is crucial because race plays an enormous and still underappreciated role in the life of an individual with a disability who is a member of the global majority group (Gupta, 2021).

Did you know that Black Americans are 2.5 times more likely to be killed by a police officer as compared to white people? For example, if a person is deaf and they keep walking when a police officer is trying to get them to stop, that can be perceived as ignoring a command, and the situation can escalate quickly. When this occurs, the person with a disability can be perceived as a threat rather than having a disability (Morris, 2022).

Last year marked 31 years for the Americans with Disabilities Act, a historic civil rights law that has yielded tremendous progress for individuals with disabilities. However, there are still issues around above-average poverty rates, incarceration, disenfranchisement, and social segregation, yet there is hope. We have witnessed an intersectional approach’s effectiveness on race and environmental justice and the revitalization of leaders from various sectors, including government, business, and philanthropy.

US Representatives Ayanna Pressley and Rebecca Cokley wrote that individuals with disabilities live at the intersection of all systems of oppression and social justice issues and that the most effective way to address disability justice and achieve diversity and equity is to make it a part of the continuing struggle for Civil Rights. US Representative shares her own story of a diagnosis with alopecia and says the disability community welcomed her, and she understands some of the challenges individuals with disabilities are confronted with. She embraces the opportunity to bring forth legislation that will enhance the lives of individuals with disabilities. Moreover, she states that “while we are still in the civil rights movement, racial justice and disability are still woven together. Rosa Parks sat, Dr. Martin L. King spoke, and John Lewis crossed the bridge; We don’t stop there, our struggles continue, and our destinies are bound together” (Pressley, 2021).
**Multicultural Intersection With Disabilities**

**DISABILITY AND ABleness**

Ableism and Whiteness are intertwined as negative approaches to understanding individuals with different abilities. Dr. Groch defines ableism “as the belief in the natural physical and mental superiority of nondisabled people and the prejudice and discriminatory behavior that arise from this belief” (Groch, 1998). Both theories undermine an individual’s ability to advocate and assert that “people without disabilities are ‘normal’ and those with disabilities are somehow not equal” (Smith, 2004). The following will examine the relationship and injustices facing individuals with different abilities expressed through ideologies, culture, and politics.

Whiteness theory maintains a status quo of social hierarchies, ensuring that Whites continue to accumulate wealth quite literally on the backs of people of color (Wray, 1997). It ensures that a set of unearned but actual financial and social privileges are maintained for Whites at the expense of others in spheres that include housing, banking, property ownership, access to capital, and employment (Kincheloe, 1999). Society sees individuals with different abilities as outside standard social norms, to the point of having to justify their disabilities to appease individuals without disabilities and those with privilege. Whiteness theory is a category that maintains its own power (Smith, 2004). Privilege reinforces privilege and denies access to marginalized populations who are striving for a better quality of life.

Critical Race Theory is an academic concept that arose in the legal area, particularly in the United States, in the 1970s and 1980s. It was originally conceptualized by Kimberlé Crenshaw, a prominent scholar who has made significant contributions to critical race theory and intersectionality. She is well-known for her work on the concept of intersectionality, which explores how different social identities intersect and interact to shape individuals’ experiences and oppressions. It seeks to investigate and criticize how race and racism are incorporated into legal systems, institutions, and societal structures.

Critical Race Theory’s fundamental ideas are as follows (Cho, 2013):

- **Racial Inequality:** According to Critical Race Theory, racism is not just a question of individual prejudice but is profoundly rooted in social structures and policies. It aims to investigate how racism promotes socioeconomic disparities and disadvantages certain ethnic groups.
- **Intersectionality:** Critical race theory stresses the necessity of analyzing how race intersects with other social identities such as gender, class, and sexuality. It highlights that individuals face numerous types of oppression simultaneously and that these experiences cannot be comprehended just through the lens of race.
- **Counter-Narratives and Personal Experiences:** Critical Race Theory promotes the sharing and amplifying of counter-narratives and personal experiences that challenge prevailing racial ideologies. These tales attempt to give a more thorough knowledge of disadvantaged persons’ and communities’ real experiences.
- **Social-Justice:** Critical Race Theory is based on a commitment to social justice and seeks to alter repressive structures. It promotes activity and advocacy in order to confront and eliminate racial disparities in all parts of society.

The definition of disability under global white supremacy is rooted in ableism, normal, and whiteness theories. Both ableism and Whiteness are defined based on proximity to an approximation of whiteness as an idea (Hustlefish, 2021). Both ableism and whiteness theories are an expression of white supremacy. Both theories undermine people with different abilities by justifying injustices and from a position of
power to looking down on others from pity to fear. Based on discrimination and oppression are only the devaluation of disabilities (Smith, 2004).

Whiteness centers around social, political, racial, economic, and cultural identities. Whiteness is an oppressive power (Smith, 2004). One that Whites typically do not recognize exists. Wrapped in an offshoot of Critical Race Theory, Whiteness Theory sees race as a social construct, creating blindness to a set of privileges associated with white identity or white privilege. Like racism, ableism is also essentially ideological, rising from the same, mostly unexamined, assumption of biological inferiority (Smith, 2004). The challenge lies in America’s unwillingness and inability to appreciate that it has continually failed to adhere to its social contracts with individuals of color and marginalized populations. At both the individual and societal levels, white people need to recognize that the social contract with Black Americans has long been broken and understand their culpability resulting from white privilege and engrained white supremacist ideology (Rocco et al., 2020). The more we expose white supremacist ideology and how it is enmeshed and interlaced with ableism, the more solidarity we build with those joining a movement for change. Ableism, as with all privilege, must be confronted to be corrected, but it is not without challenges to ideology and many social challenges.

Whiteness offers a much different reality for individuals with different abilities. Culturally, the Whiteness Theory attitude is all about the white race, white culture, and the systems of privilege and certain advantages afforded to white people. The idea is that the white person, by its privileged existence, forces other cultural expressions into the background, hazy visions of its clear form. The construction of people with disabilities as freaks is steeped in racism, imperialism, and handicapism (Bogdan & Biklen, 1981). In the late 1970s, Bogdan coined the phrase handicaps, a term used to describe a set of assumptions and practices promoting the differential and unequal treatment of individuals with apparent or assumed physical, mental, or behavioral differences. Demonstrates how handicapism manifests itself in personal interactions, the organizational structure of the larger society, and human service policy and practices (Borgdan & Biklen, 1981). Ableism is equivalent to the earlier term handicapism, a cultural artifact compared to racism and sexism (Bogdan & Biklen, 1981). By its definition, Ableism says that society responds to anomalous cultural categories like disability in one of five ways: dichotomization, elimination, segregation, labeling it dangerous, and incorporating the category into a ritual (Smith, 2004). Attitudes are influenced by the culture of the social group, including actions and feelings, which ultimately influence the social group.

Ableism may be conscious or unconscious. It may be embedded in institutions, systems, or the broader culture of a society or define themselves as able-bodied, as a norm. The attitude of ableism is based on social prejudice and discrimination and encompasses social misconceptions that individuals with different abilities are inferior to non-disabled individuals. They have culturally created stereotypes of action, thought, and meaning forced on the bodies of racialized others, suppressing culture. This metaphor of racism has become an essential, if invisible and unexplored, condition of Western and American culture (Kincheloe, 1999). In ways similar to those in which marginalized racial groupings have been forced to live outside the boundaries of normalized white landscapes, segregation into literal and virtual disability ghettos has been the norm in modernist Western culture (Groch, 1998). Ultimately, group behavior influences an organization’s culture. Individuals’ habits and behaviors form the process. Marginalizing populations are reduced to unacceptable levels of social prejudices, and treatment in a modern world seems difficult to grasp.

What that means is that to be defined as fully nondisabled requires being white – white disabled people’s disabilities detract from their whiteness, and disabled people of color’s disabilities accentuate
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our supposed inferiority and inhumanity due to race. Even people of color who are not disabled will be harmed by ableism because it is a value system about people’s bodily worth. At the same time, the Whiteness Theory is a function of capitalism (Duncan, 2019). Historically, disability rights activism owes something to the civil rights movements of Blacks in this and other countries. Still, we know relatively little about how whiteness and racism are played out in concrete terms on the bodies of people with disabilities as they struggle to move from the margins to the center.

There is a stigma surrounding individuals with different abilities. The term refers to the disapproval of individuals who appear to be different or a basic fear of the non-disabled individual. The concept of rights is central to disability studies: it reflects the most apparent recognition of persons with disabilities as subjects under the law who are empowered to demand, on an equal basis with others, what they are entitled to as an integral part of humanity. This understanding marks a stark shift and a crucial historical and cultural development of the conceptualization of persons with disabilities having been excluded from rights talk and lacking reason and ability to make decisions. Hence, they cannot be bearers of rights (Sabatello & Schulze, 2015). The socio-political understanding of disability seems to be based on recognizing that all aspects of the environment are fundamentally shaped by public policy, and public policy reflects social attitudes. Politically the issue boils down to a tension between racial justice and disability rights activism. Disability activism and the historiography of disability politics tend to focus on the achievements and views of white individuals.

What can able-bodied individuals do to help combat social discrimination against individuals with different abilities? Through education and experience, these two strategies would raise the social consciousness of individuals in their thinking about individuals with disabilities. Individuals can learn and investigate social justice issues by focusing on this marginalized population’s problems through education. Through shared experiences, such as community engagement or workplace surroundings, non-disabled individuals can understand the challenges of the disability community. These strategies would provide the knowledge and necessary tools to understand the impact of isolation and exclusion on individuals with different abilities from fully participating in society.

Case Study

In the Spring of 2020, at the height of the pandemic crisis, Angelita Patel was going to her job as a Pharmacist in Northwest Indiana. She was hit from the rear by a Long-haul UPS truck. She was 55 years old and received her BS degree in Pharmacy when one only had to get a BS to be a pharmacist. Since 2006, one must get a Pharm D. (a doctoral level) degree, but Angelita received her degree in 1995 when she was 27. Before that, she had raised a son and daughter as a single mom but eventually married a man (not the father of her children) who “let her” go to college.

Angelita is from a multiracial background. Her parents were Black and Latinx, but she was adopted at the age of 2 by a family (first generation) from Pakistan but of Hindu religious beliefs. She does not identify with any religion. Angelita had a very serious Learning Disability and struggled through school but eventually finished her degree. She has worked at CVS pharmacies since she was an intern and for her whole work life in retail Pharmacy. She loves sports and was the coach for both her son’s and daughter’s soccer and baseball teams. Her life was her kids, her coaching, and her work at CVS. She loves her cherished career, even though she started it a bit later in her life.

Angelita has severe residual medical issues from her accident, which was not her fault! She has had multiple surgeries and years of physical therapy but is still in pain. On a pain scale of 0-10, with 0 being
no pain and 10 meaning “take me to the emergency room,” she is always at least a 6-8- depending on how much work and standing she does each day. She has a major problem at L-4/5 and has had a spinal fusion. Because she was such a good employee, CVS found her an accommodated job, working 2 days a week in one of their “little clinics.” She returned to that accommodated job instead of the $90,000 + job that she had in retail Pharmacy and now makes $16,000 to $30,000 annually if she can handle the limited, 2-day/week, sit-stand job, which CVS found for her. She is off a lot, and now, they are thinking of firing her for too many absences. She is suing UPS, but the case is dragging on because of Covid delays in the courts.

Comment: To the reader, here are some ways to approach answering these following questions. Look at this case from a Systems Approach. What are the strengths and challenges of this situation? What is the best the client can bring to her case? What are her challenges? Identify the resources available to help both understand the case and help with a multicultural understanding of the issues. Would you use a person-centered or more directive approach? Think about all of these issues before you answer the thoughtful questions.

1) How would you handle this case?

Suggested Answer: the counselor could offer her alternative social assistance resources. Or one can advise Angelita to continue pursuing her case litigiously against UPS to seek fair compensation for the accident and its impact on her health and career or via punitive damages. Legal representation can be crucial in ensuring her rights are protected and she receives appropriate compensation for her injuries, which means the counselor may choose to refer her to reputable attorneys specializing in that area.

2) What effect might the multiracial issues have on her decision to keep working?

Suggested Answer: Understanding Angelita’s multicultural heritage is critical for delivering culturally appropriate care. One would provide a secure and welcoming workplace in which she could freely communicate any worries about her identity and how it would affect her work environment or decision-making process.

3) What other factors will fit into that decision?

Suggested Answer: Given Angelita’s medical condition and limits, it’s critical that she look into other employment paths that match her credentials and interests while also supporting her physical demands. This may entail investigating non-traditional occupations in pharmacy or adjacent businesses that demand less physical strain.

4) How will you gather the data that you and she need to help make a decision?

Suggested Answer: To make educated judgments, counseling professionals must collect relevant data. This contains medical information to completely comprehend Angelita’s current health state, such as doctor assessments, pain levels, and limits. Furthermore, gathering information about her prior job performance, accommodations made, and absence records will be critical in determining her capacity to stay in her present position or find another employment.
5) What counseling strategies would you use in working with her?

Suggested Answer: The counselor may employ the following counseling techniques while dealing with Angelita:

Empathy and Active Listening: It is critical to provide a supportive and empathic setting in which she feels heard and understood.

Goal Setting: Identifying short-term and long-term objectives together, taking into consideration her interests and physical constraints.

Conducting evaluations to investigate prospective job possibilities that are compatible with her interests and talents.

Skill Development: Identifying areas for skill development and providing tools to help her qualify for other professions.

Stress and Pain Management: Providing coping methods and tools for stress and chronic pain management.

Advocacy: Helping her navigate professional problems and lobbying for appropriate adjustments at her present job or in obtaining a new one.

Encouragement to Form a Support Network: By encouraging her to form a support network, both emotionally and professionally, to assist her in coping with the challenges she experiences.

Finally, the counseling procedure should be adapted to Angelita’s specific requirements, taking into account her past, medical condition, and personal goals. Given her health and well-being, it is critical to enable her to make educated decisions that lead to a happy and sustainable professional path.

6) What did you learn in this Chapter that would guide you in giving help and direction?

Suggested Answer: In this case study, several factors and challenges impact Angelita Patel’s situation. Drawing from the person-centered and system-approached knowledge in this chapter, the following points can guide in giving help and direction:

Understanding Multiracial and Multicultural Backgrounds: Angelita’s multiracial and multicultural background may influence her experiences, perceptions, and interactions in the workplace and society. Being aware of this can help in providing culturally sensitive, relevant, and more meaningful support and counseling.

Recognition of Learning Disability: Knowing about Angelita’s learning disability helps in understanding the additional challenges she may have faced in her educational journey and work life. Providing appropriate accommodations and support for her disability is essential. Appropriate legal statutes pertaining to her disability can then be cited in her litigation.

Physical and Emotional Impact of the Accident: Angelita’s accident and subsequent medical issues have had a significant impact on her physical and emotional well-being. Understanding the extent of her injuries and pain levels (on a Likert or Borgh scale) can guide her in offering appropriate pain management strategies and support. Additionally, medical attention can then be offered.

Career Transition and Accommodations: Recognizing that Angelita transitioned to an accommodated job due to her medical condition helps in understanding her current work limitations. Career Skills Inventory and occupational interests assessments can be performed. This crucial information can guide her in exploring other suitable career options that align with her qualifications and physical abilities as opposed to only UPS alone.
Legal Implications: Knowing that Angelita is involved in a legal case against UPS due to the accident highlights potential legal and financial aspects that may affect her future decisions and financial stability. Finding her the appropriate legal representation.

Workplace Challenges: Understanding that Angelita is facing potential termination due to her absences from work can guide her in providing strategies for maintaining employment or exploring alternative work arrangements.

Emotional Support and Coping Strategies: Given the challenges Angelita faces, providing emotional support and counseling strategies to cope with chronic pain, career changes, and legal proceedings can be vital.

Goal-Setting and Career Planning: Helping Angelita set realistic short-term and long-term goals, considering her medical condition, skills, and interests, can guide her in charting a fulfilling and sustainable career path.

Holistic Approach: Recognizing that Angelita’s life is not solely centered around work but also involves her family, coaching, and passions, emphasizes the importance of taking a holistic approach to support her overall well-being and work-life balance.

By considering these points, any help and direction provided to Angelita should be tailored to her unique needs, taking into account her background, challenges, and aspirations. An empathetic and supportive approach is crucial in helping her navigate through the complexities she faces in her personal and professional life.

SUMMARY

What is the value added to the knowledge base of practice by this Chapter? Well, for one, it is a neat summary of the literature surrounding multicultural issues. It is, however, a non-traditional view of difference and similarity. It looks at topics not always covered in such chapters and the needs of special populations- typical and atypical. Why do we limit ourselves to just a few views of uniqueness in our American value system? Is not any group that has special needs worthy of a special look at how they are viewed and treated in our society? This chapter does just that. It is unique in many ways. Please appreciate it for what it is and how it is a special addition to the whole book.

CHAPTER QUESTIONS

1. What are five unique challenges that face individuals with disabilities as it relates to intersectionality?

Suggested Answer: Multiple Forms of Discrimination, Limited Representation and Advocacy, Health Disparities, Stereotyping and Double Stigma, Limited Access to Resources

2. As a “whole” person, how might you incorporate a discussion about barriers that focus on the individual’s disability rather than the totality of who the person is (i.e., spiritually, emotionally, physically, and mentally)?
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Suggested Answer: Incorporating a discussion about barriers that focus solely on an individual’s disability can be limiting and fail to address the totality of who the person is. To foster a more holistic approach, it’s essential to consider the person as a whole, encompassing their spiritual, emotional, physical, and mental dimensions. These elements include cultural competence, advocacy and empowerment, counseling and support accessible and inclusive language, goal setting, wellness, intersectionality, person-centered approach, and identity.

3. Black people with disabilities tend to experience a myriad of problems navigating the world, i.e., the intersectionality of race and disability- if you have a consumer with this background, how would you prepare for counseling sessions?

Suggested Answer: Preparing for counseling sessions with a Black individual with disabilities requires a culturally competent and sensitive approach that acknowledges the unique challenges arising from the intersectionality of race and disability.

The steps that can be taken include:

Education: Take the time to educate oneself about the historical and systemic issues that Black people with disabilities face. Understanding the impact of racism, ableism, and intersectionality is crucial to providing effective support.

Recognize Diverse Experiences: Recognize that the experiences of Black individuals with disabilities are diverse and can vary based on factors such as age, gender, socioeconomic status, and geographic location. Avoid making assumptions and be open to learning about their unique experiences.

Create a Safe and Inclusive Space: Establish a counseling environment that is safe, non-judgmental, and inclusive. Be mindful of the language usage and ensure that it respects their identity and experiences.

Build Trust: Focus on building a trusting and respectful therapeutic relationship. Black individuals with disabilities may have experienced discrimination and skepticism in various settings, so trust-building is essential for effective counseling.

Listen Actively: Engage in active listening to understand the client’s lived experiences, challenges, and aspirations. Give them the space to express themselves without interruption or judgment.

Acknowledge Intersectionality: Be mindful of the intersectionality of race and disability in their life. Address how these factors may affect their access to resources, support systems, and opportunities.

Explore Coping Mechanisms: Inquire about the coping mechanisms they have developed to navigate the challenges they face. Discuss strategies that can help them manage stress, discrimination, and ableism.

Empowerment and Advocacy: Encourage empowerment and self-advocacy. Support their efforts to assert their needs and rights in various settings, including the workplace, education, and social environments.

Cultural Sensitivity: Show cultural sensitivity by understanding and respecting their cultural background, traditions, and values. Recognize the impact of cultural resilience and strengths.

Collaborative Goal-Setting: Collaborate with the African-American client to set realistic and meaningful goals that consider their intersectional identity and encompass different aspects of their life.

Address Microaggressions: Be vigilant about addressing any microaggressions that may occur during counseling sessions. Provide validation and support when discussing experiences of discrimination or bias.

Referrals: Be ready to provide appropriate referrals to community resources, support groups, or organizations that specifically cater to the needs of Black individuals with disabilities.
4. How does the intersectionality of disability and socioeconomics impact the potential of individuals with disabilities?

Suggested Answer: Addressing the intersectionality of disability and socioeconomics requires a multi-faceted approach that includes policy changes, increased access to education and healthcare, targeted support services, and efforts to reduce stigmatization. Recognizing the unique challenges faced by individuals at this intersection and providing targeted resources can help break down barriers and unlock the full potential of individuals with disabilities, regardless of their socio-economic status.

Here are some ways in which this intersectionality can influence their opportunities and experiences:

**Limited Access to Resources and Services:** Individuals with disabilities from lower socio-economic backgrounds may face challenges in accessing essential resources, such as healthcare, assistive devices, and educational support. Financial constraints can hinder their ability to access specialized services that could maximize their potential.

**Education Disparities:** Socioeconomic status can affect access to quality education and specialized support for students with disabilities. Individuals from low-income backgrounds may encounter underfunded schools with limited resources for accommodating their specific learning needs, resulting in reduced educational opportunities.

**Employment Opportunities:** Socioeconomic factors can influence the types of job opportunities available to individuals with disabilities. Those from disadvantaged backgrounds may have limited access to vocational training or employment support, which can impact their career prospects and earning potential.

**Healthcare Disparities:** Socioeconomic status often correlates with disparities in healthcare access and quality. This can impact the ability of individuals with disabilities to receive timely and appropriate medical care, rehabilitation services, and mental health support.

**Social Isolation and Stigmatization:** The intersection of disability and low socio-economic status can lead to increased social isolation and stigmatization. Economic hardship can affect an individual’s access to social activities and community engagement, leading to feelings of exclusion and marginalization.

**Lack of Accessibility:** Individuals with disabilities from lower socio-economic backgrounds may encounter environmental barriers due to limited accessibility in public spaces, transportation, and housing. This lack of accessibility can restrict their participation in social and economic activities.

**Cumulative Disadvantage:** The intersectionality of disability and poverty can result in a cumulative disadvantage, where barriers in one area (e.g., education or healthcare) can exacerbate challenges in other aspects of life, creating a cycle of limited opportunities.

**Economic Dependency:** The lack of economic resources can lead to increased dependency on social welfare programs, which may not always adequately address the specific needs of individuals with disabilities.

5. Discuss some of the barriers to employment that society poses to individuals with disabilities.

Suggested Answer: Legal and policy barriers; Lack of role models and representation; Stigma and social exclusion; Limited access to education and training; Unsupportive workplace culture; Implicit bias and stereotyping; Unsupportive workplace culture; Limited training and support: Lack of accessibility disability discrimination.
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