

# Research

Support for the Americans with Disabilities Act  
Among Nondisabled People



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## **Support for the Americans with Disabilities Act Among Nondisabled People**

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### **Abstract**

The Americans with Disabilities Act (ADA) opened the doors to access and enhanced the civil rights of people with disabilities. However, a lack of accessibility to all segments of society continues throughout the United States and is frequently described by people with disabilities as a leading cause for limited participation. Beliefs and attitudes regarding disability can impact critical decisions regarding inclusion and people with disabilities' civil rights. Therefore, the purpose of this study was to explore support and opposition to the ADA among nondisabled people. We had the following research questions: (1.) What is the relationship between disability prejudice and support for the ADA?; and, (2.) When controlling for disability prejudice, what other factors lead people to support the ADA? To do so, we examined secondary data from approximately 13,000 participants from all 50 states and the District of Columbia. Findings from this study revealed that people who oppose the ADA are significantly more prejudiced towards people with disabilities than people who support the ADA. Understanding and becoming aware of attitudes and prejudice towards persons with disabilities can be a first step toward dispelling such beliefs and possibly a priori step to achieving the intent and spirit of the ADA.

**Keywords:** The Americans with Disabilities Act; Discrimination; People with Disabilities; Civil Rights; Ableism

### **Support for the Americans with Disabilities Act Among Nondisabled People**

President George H.W. Bush signed the Americans with Disabilities Act (ADA) of 1990 (Pub. Law No. 101-336) more than 25 years ago, but people with disabilities, one of the largest minority groups in the United States, continue to experience socially constructed barriers to participating in every aspect of life. The ADA was drafted as a civil rights law for the elimination of discrimination against people with disabilities; the ADA was described by leaders from both the Senate and House as the “emancipation proclamation” for people with disabilities that would create a national mandate offering consistent and enforceable standards for addressing disability discrimination (Emens, 2013; Feldblum, 2008). The intent of the ADA was to protect people with disabilities against acts of discrimination in order to promote equality, justice, and inclusion of people with disabilities (De Campos Velho Martel, 2011). This protection was necessary as a result of a long and well documented history of human and civil rights being denied to people with disabilities, as well as inequitable access to the duties and freedoms of citizenship (Garland-Thomson, 2017) with little legal recourse to confront these injustices. However, a survey which explored the impact of the ADA found few to no changes for people with disabilities since the ADA passed in the following areas: employment; income; education; healthcare; transportation; socialization; going to restaurants; attending religious services; political participation; technology use; access to mental health services; overall financial status; and, life satisfaction (Kessler Foundation/National Organizational Organization on Disability, 2010; von Schrader & Erickson, 2017).

As a legal document, this civil rights legislation was a declaration to protect individuals against discrimination or unequal treatment on the basis of personal characteristics covered by the categories of the Kessler Foundation survey mentioned above. Unlike the Civil Rights Act of

1964 that prohibits discrimination of people on the basis of race, religion, sex, national origin or color, the passage of the ADA required society to reconceptualize the causes of disability.

Although not realized, this shift was away from perceiving disability as being located within the person, in need of medical intervention or cure, to instead see disability as a result of socially created barriers to participation (Harris, 2019; Johnson, 2007). The authors and supporters of the law understood this reconceptualization would be difficult for many to understand and purposely avoided drawing public attention to the philosophical underpinnings of the law when it was introduced to the United States Congress (Johnson, 2003). The lack of public exposure and education to this Act created substantive gaps in knowledge of its intent as well as the underlying ideologies that support it. As a result, people with disabilities were often faced with making legal claims of discrimination against individuals who had little to no understanding that their beliefs and, more significantly, their behaviors were in fact acts of discrimination. When people with disabilities began to assert their newly won rights against employers, educators, and government policies, public backlash began likely due to failures of the public to comprehend the deeply rooted beliefs that are the premises of the ADA, as well as the biases and prejudices that necessitated its legislation (Switzer, 2003).

Today, the underlying conceptualization of disability and public views of its causes continue to firmly locate disability individually - within the person - as only a medical problem rather than socially constructed (Centers for Disease Control Prevention, 2009). In the mind-set of many, people with disabilities do deserve help, but in the form of charity to assist them in their efforts to overcome their personal challenges, or when they lack the capacity to overcome, to provide care and services, reinforcing negative beliefs toward and about people with disabilities (Fineman, 2010; Johnson, 2003). In fact, it is these beliefs and this historical backdrop that lay

the foundation for negative disability prejudices, and negative opinions of the ADA. While overt forms of disability prejudice may be disappearing from the dialogue of the public, elusive and subtle forms of implicit bias, negative stereotyping and prejudice remain (Deal, 2007; Friedman, 2019). These subtle barriers are the inherent basis for why full acceptance of people with disabilities by those without disability may not occur (Antonak & Livneh, 2000).

As a result of the lack of understanding, implementing the ADA has been significantly more challenging and has required less straightforward changes to public policy and practices than the Civil Rights Act (Brault et al., 2019; Diller, 2000). The ADA's requirement of reasonable accommodations can often result in financial as well as attitudinal commitments to ensure the inclusion of people with disabilities (Head & Baker, 2005). The introduction of the ADA as a law preceded a public analysis of its intent and as such, initiated a surge of private businesses to embark on media campaigns to raise public opinion against the ADA and the rights of people with disabilities (Johnson, 2007). The common discourse of the negative campaigns included questions of entitlement, and deservedness; they also challenged what was meant by the law's requirement of reasonable accommodation. Moreover, since the passage of the ADA the public has been repeatedly exposed to the challenges and arguments against it (Johnson, 2003; Parker Harris et al., 2019). Although its passage may have planted a seed in the mindset of the public that challenged predominant stereotypes of disability, the public debates - battles and highly dramatizes law suits voicing opposition to the ADA - may have created a resistance to embracing its intent whole-heartedly by the general public and, more importantly, those in positions of power (Haller et al., 2006).

### **Attitudes About Disability and The Americans with Disabilities Act**

By learning about how attitudes operate, we are better able to understand social interactions, socialization, and prejudice formation (Antonak & Livneh, 2000). Attitudes operate on two levels: explicit and implicit (Amodio & Mendoza, 2011; Antonak & Livneh, 2000). Explicit attitudes are conscious attitudes which often result in deliberate and calculating behaviors (Nosek et al., 2007; Phelan et al., 2015). While explicit attitudes have traditionally been measured via self-report (e.g., surveys, etc.), there are concerns that they do not capture all attitudes because people may feel pressure to conceal their biases, and/or people may be unaware they hold biased attitudes (Amodio & Mendoza, 2011; Antonak & Livneh, 2000). This social desirability pressure may be especially pertinent for topics where it is not socially desirable to have negative attitudes towards certain groups, such as people with disabilities. As a result, recently, much attention has been drawn towards examining implicit attitudes. Implicit attitudes are unconscious attitudes; they typically operate unbeknownst to the prejudiced person and are manifested in behaviors they rationalize as not prejudiced (Amodio & Mendoza, 2011; Greenwald et al., 1998); “‘implicit’ refers to [lack of] awareness of how a bias influences a response, rather than to the experience of bias or to the response itself” (Amodio & Mendoza, 2011, p. 359). Implicit attitudes often reflect associations between attitudes and concepts, and can be the result of cognitive processes, including those related to social norms (Gaertner & Dovidio, 1986).

As explicit and implicit attitudes operate and manifest differently, people’s explicit and implicit attitudes do not necessarily align. Rather, combinations of explicit and implicit attitudes can fall into four categories: symbolic (high explicit, high implicit), principled conservative (high explicit, low implicit), aversive (low explicit, high implicit), and truly low prejudiced (low explicit, low implicit) (Friedman, 2016; Son Hing et al., 2008). While symbolic ableists

recognize people with disabilities do face discrimination, and they do have some empathy towards them, they favor individualism and believe people with disabilities produce excessive demands on social systems, while also demanding too much special treatment (Friedman, 2019; Friedman & Awsumb, 2019). Principled conservatives are those people who truly value abstract conservative ideas; doing so causes them to dislike policies that stray from tradition (Son Hing et al., 2008). As a result, principle conservatives often discriminate against groups equally (Friedman, 2019; Son Hing et al., 2008). Aversive ableists are those who are more progressive and well-meaning – indicated by their low explicit prejudice – however, still participate in biased actions or thought, especially in situations where their prejudice is less overtly evident or they can rationalize it as not prejudiced (Friedman, 2018, 2019). Finally, truly low prejudiced people are low in prejudice.

Most people are aversive ableists (Friedman, 2019). The implicit nature of this bias makes it more difficult to not only measure, but also recognize – the extent to which people's attitudes influence their behaviors may be underestimated. For most people, including policy makers, judicial leaders, and business owners, attitudes towards people with disabilities influence their actions (Campbell, 2009; Schwartz & Armony-Sivan, 2001). Yet, if, and how, attitudes about disability may impact attitudes towards the ADA and ADA decisions is unknown. Stereotypes that people with disabilities are less than capable of participating in all parts of society can shape decisions on how to embrace the ADA. Many individuals in positions of power to implement and enforce the ADA are not people with disabilities; moreover, their beliefs and attitudes regarding disability can impact critical decisions regarding inclusion and people with disabilities' civil rights. Thus, furthering an understanding of the relationship between disability prejudice and support for the ADA can inform businesses, governments, and public institutions,



as well as the disability community. Exploring the attitudes and beliefs of community members can expose how structural barriers are not only created but also reinforced.

Therefore, the purpose of this study was to explore support and opposition to the ADA among nondisabled people. We had the following research questions:

1. What is the relationship between disability prejudice and support for the ADA?
2. When controlling for disability prejudice, what other factors lead people to support the ADA?

To do so, we examined secondary data from approximately 13,000 participants from all 50 states and the District of Columbia.

## Methods

### Data

Data about nondisabled people's disability prejudice and attitudes towards the ADA were obtained from Project Implicit (Xu et al., 2014), a website where anyone from the general public can test their implicit prejudices, including against people with disabilities. Between 2004 and 2017, approximately 380,000 nondisabled people participated in the disability attitudes test. 75.9% of the sample ( $n = 288,597$ ) provided information about their support for the ADA. The remaining participants ( $n = 91,717$ ) were removed from the sample. Of those participants that answered the ADA question, 48.9% ( $n = 141,048$ ) reported not being familiar enough the ADA to say if they supported it and were removed from the sample as a result.

The remaining sample ( $n = 147,549$ ) was not remotely evenly distributed across support (most participants supported the ADA). Therefore, because we aimed for a relatively even breakdown of participants who did and did not support the ADA, we conducted a random sample of the remaining participants who supported the ADA using SPSS 23 (5% of applicable

respondents) to approximate the  $n$  of people who did not support the ADA. Doing so also helped reduce the response bias. As a result, the final sample size was 12,472 participants. In total, 57.8% of the sample ( $n = 7,205$ ) supported the ADA, while 42.2% of participants ( $n = 5,267$ ) reported not supporting the ADA.

The majority of participants were women (67.4%) and White (66.3%; Table 1). The mean age of participants was 29.33 years old ( $SD = 12.63$ ). In terms of highest level of education, 10.9% did not complete high school, 6.5% completed high school, 36.1% had an associate degree or some college, 16.2% had a bachelor's degree, 11.7% completed some graduate school, and 17.9% had a graduate degree. The majority of participants did not have a family member with a disability (63.2%) or a friend or close acquaintance with disabilities (58.2%). In terms of religiosity, the majority of participants identified as slightly religious (31.7%) or moderately religious (36.0%). Slightly more than half of participants identified as liberal (56.4%), with fewer (43.6%) identifying as conservative. The mean year of participation was 2011 ( $SD = 3.35$ ).

### **Variables**

As part of data collection participants were asked if they supported the ADA. The question had three potential answer options: (1.) I do not know enough about the ADA to comment; (2.) I know about the ADA and do not support it; and, (3.) I know about the ADA and do support it. Those participants who did not know enough about the ADA to comment were excluded from the sample. As a result, support for the ADA became a binary variable (do not support (0); support it (1)).

The Disability Attitudes Implicit Association Test (DA-IAT) is one of the most common methods to measure implicit disability prejudice. The DA-IAT presents participants with 'disabled persons' and 'abled persons' categories, and 'good' and 'bad' attitudes, and asks them

to sort word and symbol stimuli accordingly. The DA-IAT examines people's associations and attitudes by measuring reaction time when items are sorted in stereotype congruent and incongruent ways; the quicker the reaction time, the stronger the association between groups and traits (Karpinski & Hilton, 2001). Scores of 0.15 to 0.34 reveal a slight preference for nondisabled people, 0.35 to 0.64 a moderate preference, and 0.65 and greater a strong preference (all three are negative attitudes) (Aaberg, 2012; Greenwald et al., 2003). Negative values of the same values above reveal preferences for people with disabilities (positive attitudes), and scores from -0.14 to 0.14 reveal no prejudice (Aaberg, 2012; Greenwald et al., 2003). Several studies have shown the DA-IAT's construct validity (Aaberg, 2012; Pruett, 2004; Pruett & Chan, 2006), discriminant validity (White, Jackson, & Gordon, 2006), and reliability (Pruett, 2004; Pruett & Chan, 2006; Thomas, 2004).

The explicit prejudice measure asked participants to rate their preference for people with or without disabilities on a seven-point Likert scale ranging from strongly prefer people with disabilities (1) to strongly prefer nondisabled people (7).

### **Analysis**

This study's first research question was: What is the relationship between disability prejudice and support for the ADA? To explore this research question, we used independent samples *t*-tests. Participants support for the ADA was used as the independent variable (IV) in both models. Participants' explicit prejudice was used as the dependent variable (DV) in the first model, and participants' implicit prejudice as the DV in the second model.

This study's second research question was: when controlling for disability prejudice, what other factors lead people to support the ADA? To examine this exploratory research question, we ran a binary logistic regression with the DV 'support for the ADA' (no (0), yes (1)),

with the demographic variables in the dataset (IVs): age; education; sex; race; political orientation; religiosity; family members with disabilities; friends/close acquaintances with disabilities; and, year of participation. The year of participation was used as a proxy measure for the length of time since the implementation of the ADA (in 1990). It also allowed us to account for potential changes in attitudes towards people with disabilities over time. Univariate statistics were run with significant variables.

### Results

Participants' explicit prejudice ranged from 1 (strong preference for people with disabilities) to 7 (strong preference for nondisabled people), with a mean score of 4.67 ( $SD = 1.12$ ), which is a slight preference for nondisabled people (Figure 1). Participants' implicit prejudice ranged from -1.78 (strong preference for people with disabilities) to 1.74 (strong preference for nondisabled people), with a mean score of 0.50 ( $SD = 0.45$ ), which equates to a moderate preference for nondisabled people (Figure 2).

#### Disability Prejudice and Attitudes Towards the ADA

To examine the first research question, we ran an independent samples  $t$ -test to compare the explicit disability prejudice of people support and oppose the ADA (equal variances not assumed,  $p < 0.001$ ). The model was significant,  $t(7,425) = 28.90, p < .001$ . The findings revealed there was a significant difference in explicit attitudes between people who supported the ADA ( $M = 4.43, SD = 0.88$ ) and those who did not ( $M = 5.02, SD = 1.31$ ). These results suggest that people who oppose the ADA have more explicit disability prejudice.

We also utilized an independent samples  $t$ -test to compare the implicit disability prejudice of people who did and did not support the ADA. The model was significant,  $t(10,910) = 6.14, p < .001$ . The findings revealed there was a significant difference in implicit attitudes

between people who supported the ADA ( $M = 0.48$ ,  $SD = 0.44$ ) and those who did not ( $M = 0.54$ ,  $SD = 0.46$ ). These results suggest that people who oppose the ADA have more implicit disability prejudice.

### **Other Factors that Impact ADA Attitudes**

To explore our second research question, we ran a binary logistic regression model with the following IVs: age; education; sex; race; political orientation; religiosity; family members with disabilities; friends/close acquaintances with disabilities; and, year of participation. The DV was participants' support of the ADA (no (0), yes (1)). We also controlled for explicit and implicit disability prejudice. The model was significant,  $\chi^2(28) = 776.11$ ,  $-2LL = 4418.54$ ,  $p < 0.001$ . The model correctly classified 72.5% of cases and predicted 24.2% of variance.

Univariate statistics revealed significant differences in support for the ADA across the following variables: age; education; political orientation; sex; race; people with friends/close acquaintances with disabilities; and year of participation (see Table 2 for odds ratios). Controlling for all other variables, women more 1.81 times likely to support ADA than men.

According to our findings, the older participants were, the less likely they were to support the ADA. For example, controlling for all other variables, a 25-year-old is 1.08 times less likely to support the ADA than an 18-year-old, a 40-year-old 1.29 times less likely, and a 70-year-old 1.82 times less likely.

When controlling for all other variables, some people of color were less likely to support the ADA. Compared to White people, Native American people were 2.41 times less likely to support the ADA, Black people were 2.07 times less likely, South Asian people were 1.97 times less likely, Native Hawaiian people were 4.55 times less likely, people from more than one race were 2.15 times less likely, and people from 'other' races were 3.00 times less likely.

People with friends or close acquaintances with disabilities were 1.28 times more likely to support the ADA than people without friends or close acquaintances with disabilities. However, there was not a significant difference for people with family members with disabilities.

The more education participants had the more likely they were to support the ADA. For example, compared to people who did not complete high school, people with a high school degree were 1.69 times more likely to support the ADA, associate degree or some college 2.75 times more likely, bachelor's degree 3.67 times more likely, some graduate school 4.64 times more likely, and graduate degree 4.40 times more likely.

The more liberal people were, the more likely they were to support the ADA; the reverse was true of conservatives. For example, according to the model, compared to strongly conservatives, moderately conservatives were 1.88 times more likely to support the ADA, slightly conservatives 2.49 times more likely, slightly liberals 3.37 times more likely, moderately liberals 5.02 times more likely, and strongly liberal 5.30 times more likely.

The later the year of participation, the more likely people were to support the ADA. For example, controlling for all other variables, compared to people who participated in 2004, people who participated in 2005 are 1.08 times more likely to support the ADA, people in 2010 1.56 times more likely, and 2015 2.25 times more likely.

### **Discussion**

Preventing discriminatory practices that exclude and marginalize people, and create inequalities and social injustices requires ending discriminatory attitudes that accompany them (Gould et al., 2015). In order to uphold the principles and regulations put forth by the ADA, beliefs and attitudes of negative prejudice against people with disabilities must be renounced (Diller, 2000). In fact, negative attitudes and prejudicial behaviors are consistently reported by

people with disabilities as one of the leading causes of a lack of accommodations and barriers to participation in the area of employment (Gold et al., 2012; Harpur, 2014), education (Malhotra & Rowe, 2013), transportation (Bezyak et al., 2017; Daruwalla & Darcy, 2005), and healthcare (Drainoni et al., 2006; Lagu et al., 2014).

Findings from this study revealed that people who oppose the ADA are significantly more prejudiced towards people with disabilities than people who support the ADA. Those opposed to the ADA not only had significantly higher implicit unconscious prejudice, they also self-reported (explicitly) having prejudice more often. These findings may be of critical importance, particularly in a political climate that threatens to shift the ADA from its original anti-discrimination intent. Efforts to lessen the enforceability of accommodations provided by the ADA have been part of recent legislative decision-making (American Civil Liberties Union, 2018; Duckworth, 2018; Langevin, 2018; Nović, 2018) and The American Civil Liberties Union (2018) cautions the public that these efforts, if successful, would undermine the civil rights of people with disabilities gained by the ADA/Americans with Disabilities Amendment Act (ADAAA).

Those that oppose the ADA tend to justify their beliefs by citing the costs associated with businesses accommodating people with disabilities especially to small business owners, as well as claims that people will file lawsuits to profit (Gold et al., 2012; Johnson, 2003). Not only has research found that typically there are few costs or no costs associated with ADA accommodations (Baker et al., 2018; Berkeley Planning Associates, 1982; Hendricks et al., 2005; Scharzt et al., 2006), it has also been disproven that people with disabilities frivolously file ADA lawsuits (Nović, 2018). As neither of these claims prove true, it maybe that the origin of

these beliefs are grounded in concepts of ableism, as our findings revealed a significant link between the two.

In fact, people opposed to the ADA were more likely to be symbolic ableists, as opposed to have other prejudice styles. Symbolic ableism is a subtle modern form of prejudice which is expressed through symbols, such as opposition to affirmative action or opposition to ‘identity politics,’ and justified and rationalized. Symbolic ableists have high explicit prejudice and implicit prejudice. Although they have recognize there is still discrimination against people with disabilities and have some empathy toward people with disabilities, symbolic ableists score high in individualism, including the idea that if people with disabilities try hard enough they can succeed (Friedman & Awsumb, 2019). They also are more likely to believe people with disabilities produce excessive demands on the system and demand special favor (Friedman & Awsumb, 2019; Henry & Sears, 2002). According to symbolic racism research, this belief that social minorities are demanding special favors,

Seem[s] to reflect a consistent internal logic: if the civil rights era had ended discrimination, Blacks’ continuing disadvantage had to be due to shortcomings among Blacks themselves; and if that were true, both their demands for special attention and any special gains were illegitimate. Each falls under the umbrella of the ‘blend’ of negative affect against Blacks and conservative values, reflecting the idea that Blacks violate key cherished American values. (Henry & Sears, 2002, p. 256)

Indeed, anti-social welfare attitudes are often justified based on “the appeals to the values of individualism” in the United States (Feldman & Zaller, 1992, p. 272). Symbolic forms of prejudice are rooted in abstract beliefs about socialized values, which people supposedly violate (Henry & Sears, 2002, 2008; Sears et al., 2000); however, despite the tie to conservative values,



symbolic prejudice is related to antipathy and bias. In fact, the link between disability prejudice and opposition to the ADA in this study was significant even when political orientation is controlled. Although a small proportion of people who opposed the ADA were not implicitly prejudiced, and may truly oppose it because of abstract values, opposition to the largest civil rights legislation for people with disabilities in the nation is problematic as it threatens to hinder the fundamental rights of people with disabilities.

In terms of differences in support across groups, older adults were less likely to support the ADA than younger people. This may be due to the fact that younger people grew up with the ADA and were more likely to have more people with disabilities integrated into their classrooms. It is also important to note that older adults' opposition to the ADA goes against their own self-interest as they are more likely to acquire disabilities as they age (Ory et al., 2003; Smeeding et al., 2000). However, ageism may make older adults want to disassociate from people with disabilities and lead to less support as a result. In fact, older participants had more prejudice than younger participants. These findings may also be related to interactions in play as the differences dissipated when the other controls were removed. There may also be differences in this sample compared to the general population. For example, although research indicates people become more conservative as they age (Tilley & Evans, 2014), older adults in our study were more likely to identify as liberal rather than conservative.

Women were more likely to support the ADA than men in this study. This aligns with previous research that has found women tend to feel more favorably toward people with disabilities than men, and have more empathy for people with disabilities (Friedman & Awsumb, 2019; Hirschberger et al., 2005). It may be that as a social minority that has had to fight for many civil rights, women are more inclined to support civil rights legislation for other populations.

However, it is important to remember that not all women are necessarily in favor of legislation or policies that would benefit other social minorities or themselves, even when it may go against their own self-interests. For example, White women overwhelmingly voted for Donald Trump in the 2016 presidential election (CNN, 2018) despite his history of sexism (Boyer, 2017; Cohen, 2017); the majority of which were motivated by racism and sexism rather than economic difficulties (Schaffner et al., 2018). As a result of these potentially conflicting motivations, more research is needed to explore why women were more likely to support the ADA than men in our study.

Black, South Asian, Native Hawaiian or other Pacific Islander, and interracial participants were less likely to support the ADA than White participants. This finding was surprising given people of color are more likely to have disabilities because of environmental conditions and social disparities (Mendes de Leon et al., 2005; Thorpe et al., 2014); moreover, one might hypothesize that

minority groups that are the object of prejudice and discrimination should be attracted to each other. Because both groups have a history of political, social, and economic discrimination, and because both groups share a relatively recent entry into state legislatures, each group may be sympathetic to issues salient to the other. (Bratton & Haynie, 1999, p. 661)

For example, research has found that Black legislators are more likely to not only introduce bills that support women's interests than White legislators, but also are more likely to introduce bills about welfare, education, and similar government appropriations (Bratton & Haynie, 1999; Brookman, 2013).

Another theory about social minority group relations is they “might adopt the dominant attitudes of majority groups, including stereotypes of and discrimination against other minorities” (Bratton & Haynie, 1999, p. 661). Yet, participants of color in this study were not significantly more prejudiced against people with disabilities than White participants, so the motivation for opposition to the ADA is likely not internalization of ableism alone. As such, these findings may be related to interactions as participants of color were overall more religious, slightly more conservative, and had less education than White participants in the sample. As people of color in the general population tend to be more liberal than White people (CNN, 2018), which runs counter to this sample, the findings may also be sample specific.

Findings also revealed change over time in terms of support for the ADA. The more recently the person participated in the study, the more likely they were to support the ADA. It may be that the longer the ADA exists, the more favorable views of it and its impacts become. This may be especially true as more and more people grow up and know nothing except for the existence of the ADA, and have more people with disabilities in their schools, communities, and places of employment. However, it should be noted that approximately half of the original sample (48.9%; 141,048 out of 288,597 people) reported that they did not even know enough about the ADA to speak to if they supported it or not. While it may be unsettling to acknowledge that one of the major pieces of civil rights legislation for people with disabilities is little understood, this parallels with the fact that despite being one of the largest minority groups in the United States, people with disability are typically not recognized as a minority group (Drum et al., 2011; Krahn et al., 2015). These findings suggest more education is still needed about the ADA and how it benefits people with disabilities, including by dispelling the common myths.

Moreover, despite the differences in explicit and implicit prejudice across people who supported and opposed the ADA, it should be noted that both groups of people had implicit prejudice scores that fell within the moderate prejudice range. Although problematic, this finding is not uncommon. In fact, Nosek et al.'s (2007) study of 2.5 million people (2000-2006) found that across a wide range of social groups, explicit and implicit prejudice was strongest against disability. Unfortunately, although the ADA aims to reduce disability discrimination, one of its weaknesses is that it does not address systemic barriers, such as implicit prejudice (Batavia & Schriener, 2001; McMahon et al., 2008).

Explaining the basis of civil rights claims of people with disabilities and their allies requires an ideological shift that asks the public to reconceptualize the causes of disability from impairment or abnormality to purposeful exclusion, intentional ignorance, or acts of discrimination. Society has little understanding of the social causes of disability and is staunchly grounded in medical, impairment and individualized models. As a result, negative attitudes against the ADA point to more individualized, case by case need for change versus social, institutional, or cultural. Recognizing negative prejudices of disability and that discrimination against people with disabilities is deeply woven into the fabric of our institutions, media, and day to day practices is a step toward reflecting on personal beliefs and how our own actions may in fact be discriminatory.

### **Limitations**

When interpreting these findings, it should be noted that people volunteered to participate in the DA-IAT and, therefore, there is a chance of selection bias. This was an analysis of secondary data; as such we could not add additional variables or ask participants additional questions. For example, the explicit measure was only one question. It should also be noted that

we did not explore interactions. Finally, it is important to note that since we were particularly interested in exploring the balance between supporting the ADA and not supporting it, we created a sample that represented both opinions approximately equally; however, in the larger sample from which our sample was drawn, the overwhelming majority of people who were familiar with the ADA supported it.

### **Conclusion**

The ADA opened the doors to access and enhanced the civil rights of people with disabilities. However, a lack of accessibility to all segments of society continues throughout the United States and is frequently described by people with disabilities as a leading cause for limited participation (Iezzoni & O'Day, 2006; Jette & Field, 2007; Rimmer & Marques, 2012; Sabella & Bezyak, 2019). Both the ADA and the ADAAA (2008) provide a foundation for reducing inaccessibility to physical and attitudinal environments, social programming, and public institutions. The ADA requires societal and attitudinal embrace from the public and private sectors to achieve the transformative effect of equality, social justice, and inclusion of people with disabilities in all aspects of everyday participation. Understanding and becoming aware of attitudes and prejudice towards persons with disabilities can be a first step toward dispelling such beliefs and possibly a priori step to achieving the intent and spirit of the ADA.

### References

- Aaberg, V. A. (2012). A path to greater inclusivity through understanding implicit attitudes toward disability. *The Journal of nursing education, 51*(9), 505-510.  
<https://doi.org/10.3928/01484834-20120706-02>
- ADA, Pub. L. No. 101-336, § 302[a] (1990).
- ADA Amendments Act of 2008, Pub. L. No. 110-325, (2008).
- American Civil Liberties Union. (2018). *HR 620: Myths and truths about the ADA education and reform act*. <https://www.aclu.org/other/hr-620-myths-and-truths-about-ada-education-and-reform-act>
- Amodio, D. M., & Mendoza, S. A. (2011). Implicit intergroup bias: cognitive, affective, and motivational underpinnings. In B. Gawronski & B. K. Payne (Eds.), *Handbook of implicit social cognition: Measurement, theory, and applications* (pp. 353-374). Guilford Press.
- Antonak, R., & Livneh, H. (2000). Measurement of attitudes towards persons with disabilities. *Disability and Rehabilitation, 22*(5), 211-224. <https://doi.org/10.1080/096382800296782>
- Baker, P. M., Linden, M. A., LaForce, S. S., Rutledge, J., & Goughnour, K. P. (2018). Barriers to employment participation of individuals with disabilities: Addressing the impact of employer (mis) perception and policy. *American Behavioral Scientist, 62*(5), 657-675.  
<https://doi.org/10.1177/0002764218768868>
- Batavia, A. I., & Schriener, K. (2001). The Americans With Disabilities Act as engine of social change: Models of disability and the potential of a civil rights approach [Article]. *Policy Studies Journal, 29*(4), 690-702. <https://doi.org/10.1111/j.1541-0072.2001.tb02122.x>

- Berkeley Planning Associates. (1982). *A study of accommodations provided to handicapped employees by federal contractors* (Vol. 1). US Department of Labor, Employment Standards Administration.
- Bezyak, J. L., Sabella, S. A., & Gattis, R. H. (2017). Public transportation: An investigation of barriers for people with disabilities. *Journal of Disability Policy Studies, 28*(1), 52-60.  
<https://doi.org/10.1177/1044207317702070>
- Boyer, D. (2017, December 12). Democratic women raise voices for Trump sex misconduct investigation after tweet about Gillibrand. *The Washington Post*.  
<https://www.washingtontimes.com/news/2017/dec/12/white-house-rejects-criticism-trump-sexism/>
- Bratton, K. A., & Haynie, K. L. (1999). Agenda setting and legislative success in state legislatures: The effects of gender and race. *The Journal of Politics, 61*(3), 658-679.  
<https://doi.org/10.2307/2647822>
- Brault, M., Harrison, O., Gips, K., Angel, J., & Blakeslee, K. (2019). *Results from the identifying challenges to implementing the ADA survey for cities and towns in New England*.  
<https://ne-ada.s3.amazonaws.com/Results+from+Identifying+Challenges+to+Implementing+the+ADA+Survey+for+Municipalities+in+New+England.pdf>
- Brookman, D. E. (2013). Black politicians are more intrinsically motivated to advance Blacks' interests. *American Journal of Political Science, 57*(3), 521-536.  
<https://doi.org/10.1111/ajps.12018>
- Campbell, F. K. (2009). *Contours of ableism: The production of disability and abledness*. Palgrave MacMillan. <https://doi.org/10.1057/9780230245181>

- Centers for Disease Control Prevention. (2009). Prevalence and most common causes of disability among adults--United States, 2005. *MMWR: Morbidity and Mortality weekly report*, 58(16), 421-426.
- CNN. (2018). *Exit polls*. <https://www.cnn.com/election/2016/results/exit-polls/national/president>
- Cohen, C. (2017, July 14). *Donald Trump sexism tracker: Every offensive comment in one place*. <https://www.telegraph.co.uk/women/politics/donald-trump-sexism-tracker-every-offensive-comment-in-one-place/>
- Daruwalla, P., & Darcy, S. (2005). Personal and societal attitudes to disability. *Annals of Tourism Research*, 32(3), 549-570. <https://doi.org/10.1016/j.annals.2004.10.008>
- De Campos Velho Martel, L. (2011). Reasonable accommodation: The new concept from an inclusive constitutional perspective. *SUR: International Journal on Human Rights*, 8(14), 85-111.
- Deal, M. (2007). Aversive disablism: subtle prejudice toward disabled people. *Disability & Society*, 22(1), 93-107. <https://doi.org/10.1080/09687590601056667>
- Diller, M. (2000). Judicial backlash, the ADA, and the civil rights model. *Berkeley J. Emp. & Lab. L.*, 21, 19.
- Drainoni, M.-L., Lee-Hood, E., Tobias, C., Bachman, S. S., Andrew, J., & Maisels, L. (2006). Cross-disability experiences of barriers to health-care access: consumer perspectives. *Journal of Disability Policy Studies*, 17(2), 101-115. <https://doi.org/https://doi.org/10.1177/10442073060170020101>
- Drum, C., McClain, M., Horner-Johnson, W., & Taitano, G. (2011). Health disparities chart book on disability and racial and ethnic status in the United States. *Concord, NH: University of New Hampshire, Institute on Disability*.



Duckworth, T. (2018). *Duckworth & senate democrats vow to defeat house gop-led effort to curtail civil rights of Americans with disabilities*

<https://www.duckworth.senate.gov/news/press-releases/duckworth-and-senate-democrats-vow-to-defeat-house-gop-led-effort-to-curtail-civil-rights-of-americans-with-disabilities>

Emens, E. F. (2013). Disabling attitudes: U.S. disability law and the ADA Amendments. In L. J. Davis (Ed.), *The disability studies reader* (4 ed., pp. 42-57). Routledge.

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Feldman, S., & Zaller, J. (1992). The political culture of ambivalence: Ideological responses to the welfare state. *American Journal of Political Science*, 36(1), 268-307.

Fineman, M. A. (2010). The vulnerable subject and the responsive state. *Emory Law Journal*, 60, 1-42.

Friedman, C. (2016). *Aversive ableism: Subtle prejudice and discrimination towards disabled people (Doctoral dissertation)* University of Illinois at Chicago]. Chicago.

<http://hdl.handle.net/10027/20940>

Friedman, C. (2018). Aversive ableism: Modern prejudice towards disabled people. *Review of Disability Studies: An International Journal*, 14(4).

Friedman, C. (2019). Mapping ableism: A two-dimensional model of explicit and implicit disability attitudes. *Canadian Journal of Disability Studies*, 8(3), 95-120.

<https://doi.org/10.15353/cjds.v8i3>

Friedman, C., & Awsumb, J. (2019). The symbolic ableism scale. *The Review of Disability Studies: An International Journal*, 15(1).

- Gaertner, S. L., & Dovidio, J. F. (1986). The aversive form of racism. In S. L. Gaertner & J. F. Dovidio (Eds.), *Prejudice, discrimination, and racism: Theory and research* (pp. 61-89). Academic Press.
- Garland-Thomson, R. (2017). Disability Bioethics: From Theory to Practice. *Kennedy Institute of Ethics Journal*, 27(2), 323-339.
- Gold, P. B., Oire, S. N., Fabian, E. S., & Wewiorski, N. J. (2012). Negotiating reasonable workplace accommodations: Perspectives of employers, employees with disabilities, and rehabilitation service providers. *Journal of Vocational Rehabilitation*, 37(1), 25-37.  
<https://doi.org/10.3233/JVR-2012-0597>
- Gould, R., Harris, S. P., Caldwell, K., Fujiura, G., Jones, R., Ojok, P., & Enriquez, K. P. (2015). Beyond the law: A review of knowledge, attitudes and perceptions in ADA employment research. *Disability Studies Quarterly*, 35(3). <https://doi.org/10.18061/dsq.v35i3.4935>
- Greenwald, A., McGhee, D., & Schwartz, J. (1998). Measuring individual differences in implicit cognition: the implicit association test. *Journal of Personality and Social Psychology*, 74(6), 1464-1480. <https://doi.org/http://dx.doi.org/10.1037//0022-3514.74.6.1464>.
- Greenwald, A. G., Nosek, B. A., & Banaji, M. R. (2003). Understanding and using the implicit association test: I. an improved scoring algorithm. *Journal of Personality and Social Psychology*, 85(12), 197-216. <https://doi.org/10.1037/0022-3514.85.2.197>
- Haller, B., Dorries, B., & Rahn, J. (2006). Media labeling versus the US disability community identity: A study of shifting cultural language. *Disability & Society*, 21(1), 61-75.  
<https://doi.org/10.1080/09687590500375416>

- Harpur, P. (2014). Naming, blaming and claiming ableism: the lived experiences of lawyers and advocates with disabilities. *Disability & Society*, 29(8), 1234-1247.  
<https://doi.org/https://doi.org/10.1080/09687599.2014.923749>
- Harris, J. (2019). The aesthetics of disability. *Columbia Law Review*, 119(4), 895-971.
- Head, L., & Baker, P. (2005). Workplace accommodations and ADA Title I: Policy and the metrics of “reasonable.”. Technology and Persons with Disabilities Conference, Northridge, CA.
- Hendricks, D., Batiste, L. C., Hirsh, A., Schartz, H., & Blanck, P. (2005). Cost and effectiveness of accommodations in the workplace: Preliminary results of a nationwide study. *Disability Studies Quarterly*, 25(4).
- Henry, P. J., & Sears, D. O. (2002). The Symbolic Racism 2000 Scale. *Political Psychology*, 23(2), 253-283. <https://doi.org/10.1111/0162-895x.00281>
- Henry, P. J., & Sears, D. O. (2008). Symbolic and modern racism. In J. H. Moore (Ed.), *Encyclopedia of race and racism* (pp. 111-117). Macmillan Reference.
- Hirschberger, G., Florian, V., & Mikulincer, M. (2005). Fear and compassion: A terror management analysis of emotional reactions to physical disability. *Rehabilitation Psychology*, 50(3), 246-257. <https://doi.org/10.1037/0090-5550.50.3.246>
- Iezzoni, L. I., & O'Day, B. (2006). *More than ramps: A guide to improving health care quality and access for people with disabilities*. Oxford University Press, USA.
- Jette, A. M., & Field, M. J. (2007). *The future of disability in America*. National Academies Press.
- Johnson, M. (2003). *Make them go away: Clint Eastwood, Christopher Reeve and the case against disability rights*. Advocado Press.

- Johnson, M. (2007). Before its time: Public perception of disability rights, the Americans with Disabilities Act, and the future of access and accommodation. *Washington University Journal of Law & Policy*, 23, 121-150.
- Karpinski, A., & Hilton, J. L. (2001). Attitudes and the Implicit Association Test. *Journal of Personality and Social Psychology*, 81(5), 774-788. <https://doi.org/10.1037/0022-3514.81.5.774>
- Kessler Foundation/National Organizational Organization on Disability. (2010). The 2010 Survey of Americans with Disabilities. NY: Harris Interactive. <http://www.2010DisabilitySurveys.org>.
- Krahn, G. L., Walker, D. K., & Correa-De-Araujo, R. (2015). Persons with disabilities as an unrecognized health disparity population. *American Journal of Public Health*, 105(S2), S198-S206. <https://doi.org/10.2105/AJPH.2014.302182>
- Lagu, T., Iezzoni, L. I., & Lindenauer, P. K. (2014). The axes of access—improving care for patients with disabilities. *N Engl J Med*, 370(19), 1847-1851.
- Langevin, J. (2018). *Langevin opposes bill to fundamentally undermine the Americans with Disabilities Act* <https://langevin.house.gov/press-release/langevin-opposes-bill-fundamentally-undermine-americans-disabilities-act>
- Malhotra, R., & Rowe, M. (2013). *Exploring disability identity and disability rights through narratives: Finding a voice of their own*. Routledge.
- McMahon, B. T., Roessler, R., Rumrill, P. D., Hurley, J. E., West, S. L., Chan, F., & Carlson, L. (2008). Hiring discrimination against people with disabilities under the ADA: Characteristics of charging parties. *Journal of occupational rehabilitation*, 18(2), 122. <https://doi.org/10.1007/s10926-008-9133-4>

- Mendes de Leon, C. F., Barnes, L. L., Bienias, J. L., Skarupski, K. A., & Evans, D. A. (2005). Racial disparities in disability: recent evidence from self-reported and performance-based disability measures in a population-based study of older adults. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 60(5), S263-S271. <https://doi.org/10.1093/geronb/60.5.S263>
- Nosek, B. A., Smyth, F. L., Hansen, J. J., Devos, T., Lindner, N. M., Ranganath, K. A., Tucker Smith, C., Olsen, K. R., Chugh, D., Greenwald, A. G., & Banaji, M. R. (2007). Pervasiveness and correlates of implicit attitudes and stereotypes. *European Review of Social Psychology*, 1(1), 1-53. <https://doi.org/10.1080/10463280701489053>
- Nović, S. (2018). *The GOP's H.R. 620 will gut the Americans With Disabilities Act, pushing disability rights back to 1989*. <https://www.nbcnews.com/think/opinion/gop-s-h-r-620-will-gut-americans-disabilities-act-ncna850261>
- Ory, M., Hoffman, M. K., Hawkins, M., Sanner, B., & Mockenhaupt, R. (2003). Challenging aging stereotypes: Strategies for creating a more active society. *American Journal of Preventive Medicine*, 25(3), 164-171. [https://doi.org/10.1016/S0749-3797\(03\)00181-8](https://doi.org/10.1016/S0749-3797(03)00181-8)
- Parker Harris, S., Gould, R., & Mullin, C. (2019). *ADA research brief: Experiences of discrimination and the ADA*. [https://adata.org/sites/adata.org/files/files/ADA%20Research%20Brief\\_Discrimination%20and%20the%20ADA\\_FINAL.pdf](https://adata.org/sites/adata.org/files/files/ADA%20Research%20Brief_Discrimination%20and%20the%20ADA_FINAL.pdf)
- Phelan, S. M., Puhl, R. M., Burke, S. E., Hardeman, R., Dovidio, J. F., Nelson, D., Burgess, D., Perry, S., Yeazel, M., & van Ryn, M. (2015). The mixed impact of medical school on medical students' implicit and explicit weight bias. *Medical Education*, 49(10), 983-992. <https://doi.org/10.1111/medu.12770>

- Rimmer, J. H., & Marques, A. C. (2012). Physical activity for people with disabilities. *The Lancet*, 380(9838), 193-195. [https://doi.org/10.1016/S0140-6736\(12\)61028-9](https://doi.org/10.1016/S0140-6736(12)61028-9)
- Sabella, S. A., & Bezyak, J. L. (2019). Barriers to public transportation and employment: A national survey of individuals with disabilities. *Journal of Applied Rehabilitation Counseling*, 50(3), 174-185. <https://doi.org/10.1891/0047-2220.50.3.174>
- Schaffner, B. F., MacWilliams, M., & Nteta, T. (2018). Understanding white polarization in the 2016 vote for president: The sobering role of racism and sexism. *Political Science Quarterly*, 133(1), 9-34. <https://doi.org/10.1002/polq.12737>
- Schartz, H. A., Hendricks, D., & Blanck, P. (2006). Workplace accommodations: Evidence based outcomes. *Work*, 27(4), 345-354.
- Schwartz, C., & Armony-Sivan, R. (2001). Students' attitudes to the inclusion of people with disabilities in the community. *Disability & Society*, 16(3), 403-413. <https://doi.org/10.1080/09687590120045978>
- Sears, D. O., Henry, P. J., & Kosterman, R. (2000). Egalitarian values and the origins of contemporary American racism. In D. O. Sears, J. Sidanius, & L. Bobo (Eds.), *Racialized politics: The debate about racism in America* (pp. 75-117). University of Chicago Press.
- Smeeding, T., Butler, R., & Schaber, G. (2000). The consequences of population aging for society. Workshop report. New York: International Longevity Center,
- Son Hing, L., Chung-Yan, G., Hamilton, L., & Zanna, M. (2008). A two-dimensional model that employs explicit and implicit attitudes to characterize prejudice. *Journal of Personality and Social Psychology*, 94(6), 971-987. <https://doi.org/10.1037/0022-3514.94.6.971>
- Switzer, J. (2003). *Disabled rights: American disability policy and the fight for equality*. Georgetown University Press.

- Thorpe, R. J., McCleary, R., Smolen, J. R., Whitfield, K. E., Simonsick, E. M., & LaVeist, T. (2014). Racial disparities in disability among older adults: finding from the exploring health disparities in integrated communities study. *Journal of Aging and Health, 26*(8), 1261-1279. <https://doi.org/10.1177/0898264314534892>
- Tilley, J., & Evans, G. (2014). Ageing and generational effects on vote choice: Combining cross-sectional and panel data to estimate APC effects. *Electoral Studies, 33*, 19-27. <https://doi.org/10.1016/j.electstud.2013.06.007>
- von Schrader, S., & Erickson, W. (2017). *Employment discrimination charges filed under the Americans with Disabilities Act (ADA)*. Cornell University Yang Tan Institute (YTI). <http://www.disabilitystatistics.org/eec/>
- Xu, K., Nosek, B., & Greenwald, A. (2014). Psychology data from the race implicit association test on the project implicit demo website. *Journal of Open Psychology Data, 2*(1), e1-e3. <https://doi.org/10.5334/jopd.ac>

Table 1  
*Demographics (n = 12,472)*

Characteristic	<i>n</i>	%
Sex ( <i>n</i> = 11,420)		
Female	7,698	67.4
Male	3,722	29.8
Education level ( <i>n</i> = 11,059)		
Less than high school	1,206	10.9
High school	720	6.5
Associate's degree or some college	3,990	36.1
Bachelor's degree	1,791	16.2
Some graduate school	1,291	11.7
Graduate degree	1,985	17.9
Race ( <i>n</i> = 10,237)		
White	6,786	66.3
Black	912	8.9
Latinx	389	3.8
East Asian	289	2.8
South Asian	204	2.0
American Indian/Alaska Native	111	1.1
Native Hawaiian or other Pacific Islander	97	0.9
More than one race	484	4.7
Other	381	3.7
Political orientation ( <i>n</i> = 7,734)		
Strongly conservative	739	9.6
Moderately conservative	1,411	18.2
Slightly conservative	1,222	15.8
Slightly liberal	1,239	16.0
Moderately liberal	2,021	26.1
Strongly liberal	1,102	14.2
Family member/s with disabilities ( <i>n</i> = 11,396)		
No	7,200	63.2
Yes	4,196	36.8
Friends or close acquaintances with disabilities ( <i>n</i> = 11,354)		
No	6,610	58.2
Yes	4,744	41.8
Religiosity ( <i>n</i> = 7,942)		
Not at all religious	1,090	13.7
Slightly religious	2,521	31.7
Moderately religious	2,857	36.0
Strongly religious	1,474	18.6



Table 2

*Binary Logistic Regression: Odds to Support the Americans with Disabilities Act*

Variable	O.R.	95% C.I.	
(Constant)	0.57		
Age (years)***	0.99	0.98	0.99
Education level (ref: less than high school)			
High school**	1.69	1.11	2.56
Associate's degree or some college***	2.75	2.03	3.72
Bachelor's degree***	3.67	2.63	5.11
Some graduate school***	4.64	3.28	6.57
Graduate degree***	4.40	3.14	6.18
Sex: female (ref: male)***	1.81	1.55	2.12
Race (ref: White)			
American Indian/Alaska Native**	0.42	0.21	0.83
Black***	0.48	0.37	0.62
East Asian	0.68	0.43	1.07
South Asian**	0.51	0.30	0.85
Native Hawaiian or other Pacific Islander***	0.22	0.10	0.51
Latinx	0.71	0.49	1.04
More than one race***	0.47	0.32	0.67
Other***	0.33	0.21	0.52
Political orientation (ref: Strongly conservative)			
Moderately conservative***	1.88	1.45	2.44
Slightly conservative***	2.49	1.87	3.31
Slightly liberal***	3.37	2.49	4.56
Moderately liberal***	5.02	3.76	6.71
Strongly liberal***	5.30	3.71	7.58
Religiosity (ref: not at all religious)			
Slightly religious	1.10	0.86	1.41
Moderately religious	1.25	0.97	1.60
Strongly religious	1.22	0.92	1.62
Family member/s with disabilities	0.97	0.83	1.13
Friends or close acquaintances with disabilities***	1.28	1.10	1.49
Year of participation***	1.08	1.05	1.10

*Note.* \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ . Model controls for explicit and implicit disability prejudice (not shown).

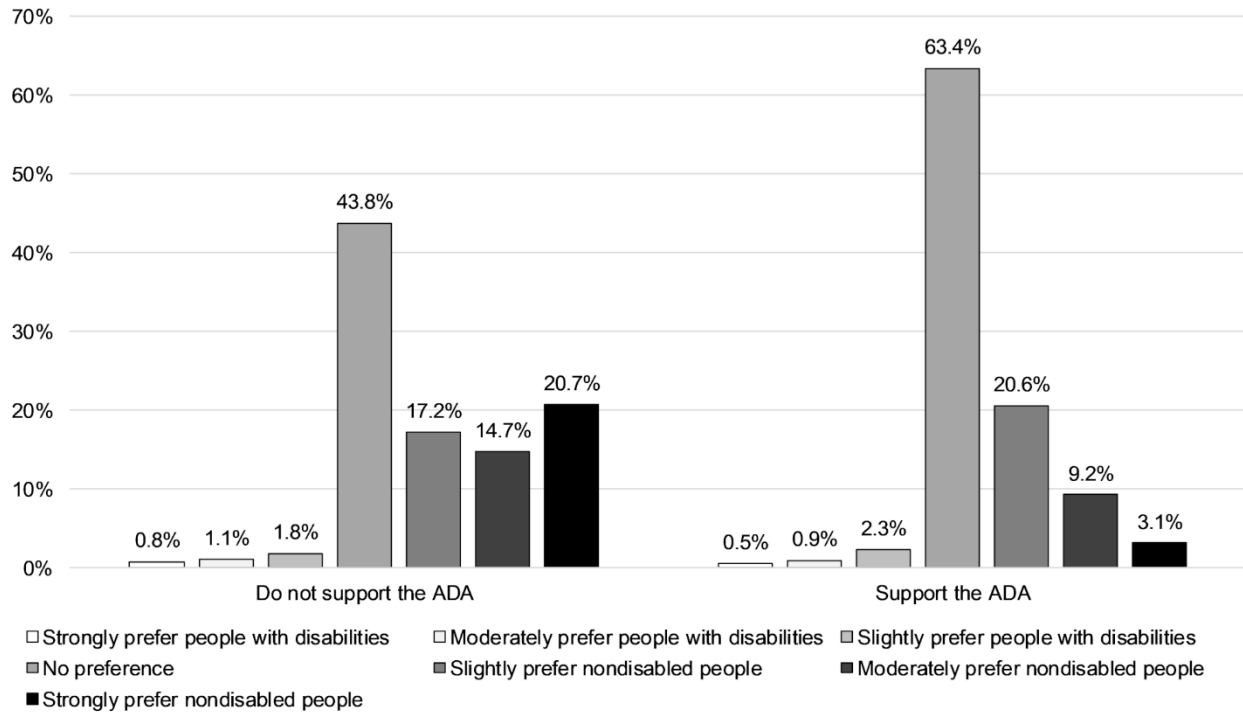


Figure 1. Explicit disability prejudice by Americans with Disabilities Act support.

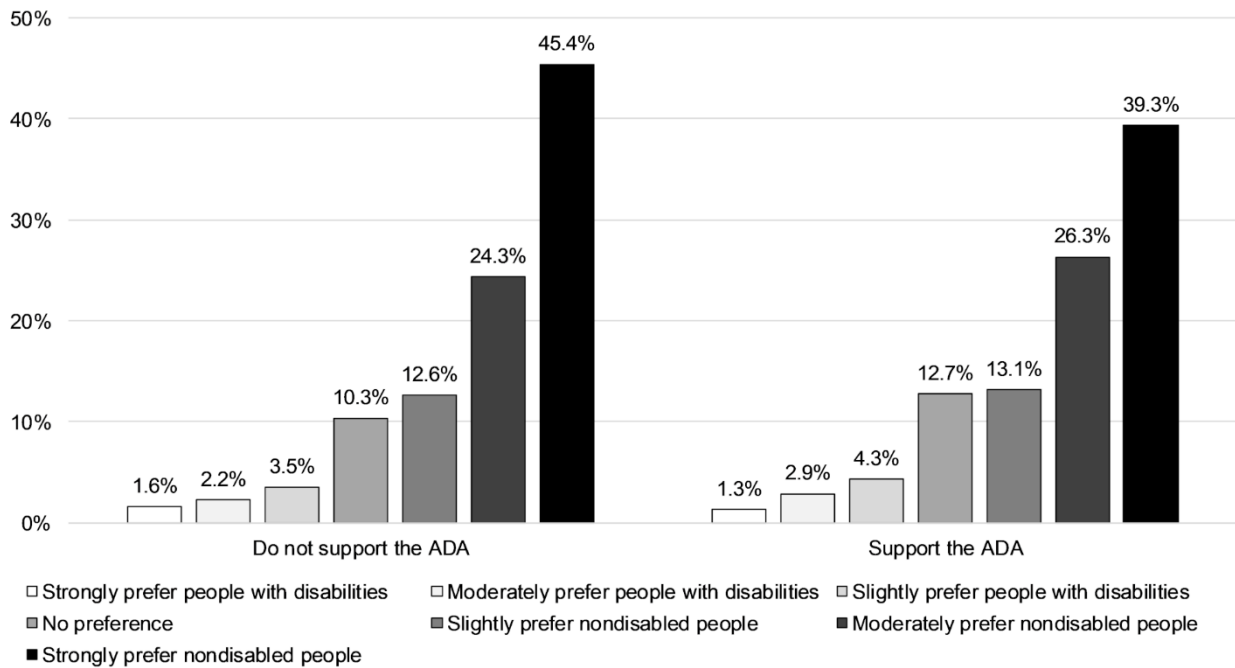


Figure 2. Implicit disability prejudice by Americans with Disabilities Act support.