

Sidelined or Mainstreamed? Political Participation and Attitudes of People with Disabilities in the United States*

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Objective. We examine whether people with disabilities are part of the political mainstream, or remain outsiders in important respects, by studying political participation and the underexplored topic of how disability relates to attitudes toward politics. *Method.* We analyze new disability measures on the 2008 and 2010 Current Population Surveys voting supplements, and two other nationally representative surveys for 2006 and 2007. *Results.* Citizens with disabilities remain less likely than nondisabled citizens to vote. While there are few differences in political preferences and party affiliations, people with disabilities tend to favor a greater government role in employment and healthcare, and give lower ratings on government responsiveness and trustworthiness. *Conclusion.* People with disabilities continue to be sidelined in important ways. Fully closing the disability gap would have led to 3.0 million more voters in 2008 and 3.2 million more voters in 2010, potentially affecting many races and subsequent public policies.

Between 36 and 54 million people with disabilities live in the United States, making them one of the largest minority groups.¹ While people with disabilities have made tremendous political gains over the past few decades, most notably with the passage of the Americans with Disabilities Act (ADA) in 1990, evidence indicates that they are not yet equal participants in the

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¹The lower number is based on six disability questions used by the Census Bureau in the 2010 American Community Survey (StatsRRTC 2011). The higher number is based on a more expansive set of disability questions in the 2005 Survey of Income and Program Participation (Brault, 2008).

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American political system, raising concerns that they remain marginalized and their interests are often neglected by politicians and elected officials.

This article examines whether people with disabilities continue to have lower levels of political participation, and whether their political views and attitudes tend to differ from those of citizens without disabilities. We base our analysis on four nationally representative surveys: the 2008 and 2010 Current Population Surveys (CPSs), the 2006 General Social Survey (GSS), and the 2007 Maxwell Poll on Citizenship and Inequality (Maxwell poll). Each survey uses six or seven questions to measure disability based on hearing, vision, mobility and mental/cognitive impairments, and major activity limitations. In addition to shedding light on the political participation and views of this historically disadvantaged group, studying the constraints faced by many people with disabilities can also provide insights into factors that influence political views and participation more generally.

Theory and Prior Literature

Political Participation. The factors affecting political participation can be divided into three categories: resources (“Are you able to participate?”), psychology (“Do you want to participate?”), and recruitment (“Did anyone ask you to participate?”) (Verba, Schlozman, and Brady, 1995). Resources include time, money, and civic skills; psychological factors include political interest, civic values, feelings of efficacy, group consciousness, and commitment to specific policies; and political recruitment occurs through formal and informal networks. Research on the general population demonstrates that factors in each of these categories strongly influence the likelihood of voting (Rosenstone and Hansen, 1993; Verba, Schlozman, and Brady, 1995; Conway, 2000).

Disability may affect voter turnout in a number of ways. Limited resources, including reduced physical stamina and mobility, can depress voter turnout. People with disabilities have lower average income and education levels than people without disabilities, and their financial resources are often further constrained by higher expenses for medical care and special equipment (Kruse, 1998).

Political recruitment among people with disabilities is limited by their relative isolation. They are more likely than nondisabled people to live alone and face transportation problems, and are less likely to be involved in community and social activities (Harris, 2010). Recent empirical research demonstrates the importance of community and social involvement in influencing political participation (Anderson, 2009). Physical and social isolation can be exacerbated by states’ disenfranchisement of some individuals with disabilities, frequent neglect by candidates and parties, and negative messages about disability conveyed through public policy, the media, and inaccessible polling places.

Regarding psychological factors, the stigma and discrimination associated with disability (U.S. Commission on Civil Rights, 1983; Yuker, 1988) may combine with isolation and diminished resources to decrease feelings of personal efficacy and control, and lead some people to withdraw from society and reduce their political participation (Anspach, 1979). Stigma and discrimination may, however, motivate other individuals to become politically active, as shown by the growth of the disability rights movement (Anspach, 1979; Hahn, 1985; Scotch, 1988).²

Resources, recruitment, and psychological factors all appear to contribute to lower voter turnout among people with disabilities (Schur et al., 2002). Ten studies over the 1992–2004 elections all indicate lower voter turnout among people with disabilities:³

	Election Year	Disability Sample	Disability Turnout	Nondisability Turnout	Gap
(1)	1992	People w/SCI's	56%	71%	15%
(2)	1992	Broad disability sample	45%	56%	11%
(3)	1994	Nonemployed	33%	54%	21%
(4)	1992–96	Nonemployed	57%	71%	14%
(5)	1996	Nonemployed	44%	65%	21%
(6)	1996	Broad disability sample	33%	50%	17%
(7)	1998	Broad disability sample	54%	60%	6%
(8)	2000	Broad disability sample	70%	82%	12%
(9)	2000	Broad disability sample	41%	52%	11%
(10)	2004	Broad disability sample	52%	56%	4%

In addition to lower voter turnout, people with disabilities have also been less likely to participate in other forms of political activity, such as contacting elected officials, contributing money to campaigns or political groups, and attending political meetings (Schur, 2003). Along with these U.S. studies, a British study found people with disabilities were significantly less likely than nondisabled citizens to vote in the 2005 national elections (Clarke et al., 2006).

²For example, in one study of mental health consumers' experiences of stigma, individuals reported feeling hurt, angry, discouraged, and having lower self-esteem, but almost half of them also noted getting constructively engaged in advocacy (Wahl, 1999). Another study of published narratives by persons with mental illness found that reactions of individuals who are stigmatized fall into three groups: (1) those who react to stigma with a loss of self-esteem, (2) those who ignore others' prejudice, and (3) those who are energized and become "righteously angry" (Corrigan and Watson, 2002).

³These 10 data sources use very different samples: the first is based on a survey of New Jersey residents with spinal cord injuries (SCI) (Schur and Kruse 2000); numbers 2, 6, 8, and 10 are based on surveys by Louis Harris and Associates (Harris, 2004, 2010); numbers 3, 4, and 5 are based on nonemployed respondents to national surveys who answered an employment question by saying they have a disability (Shields, Schriener, and Schriener, 1998a; LoBianca, 1998); and numbers 7 and 9 are based on broader samples of people with disabilities (identified by questions based on the 2000 Census) (Schur et al., 2002, 2005).

Mobility problems in particular appear to contribute to the low turnout of people with disabilities. Turnout in 1998 was lowest among people who reported difficulty going outside their homes alone (Schur et al., 2002). Also, studies 1 and 7 found 30 percent of people with disabilities were not able to drive, and voter turnout was 15–20 percentage points lower among this group. Absentee voting can be an attractive alternative for people with mobility impairments or other transportation difficulties, and is about twice as high among voters with disabilities (Schur et al., 2002). Even with the option of absentee voting, however, turnout is lower among people with mobility problems, suggesting that greater mobility may have important social and psychological effects through increased social interactions, feelings of efficacy, and identification with mainstream society.

Turnout of people with disabilities may also be discouraged by barriers getting to or using polling places. The Government Accountability Office (GAO) (2009) found that only 27 percent of polling places in 2008 had no potential impediments to access by people with disabilities. In the 2000 election survey, 6 percent of people with disabilities who had voted in the past 10 years reported encountering problems in voting at a polling place, while one-third (33 percent) of all others with disabilities said they would expect problems, compared to only 2 percent of people without disabilities (Kruse et al., 2001).⁴

The Internet can help ameliorate transportation and accessibility difficulties by providing an easy way to share information and mobilize for political action. However, people with disabilities are less likely than nondisabled people to have access to computers and the Internet (Kaye, 2000), which limits their opportunities to become involved in web-based political activity.

The above factors and evidence lead to our first hypothesis:

H₁: People with disabilities have lower levels of political participation than people without disabilities.

Political Preferences and Affiliations. In comparison to studies on voter turnout, very few studies have examined political views and attitudes among people with disabilities. While the disability population is heterogeneous, some patterns might be expected. As noted, disability is associated with lower levels of income and education, and with higher age (Kruse, 1998). Age and education are generally associated with greater perceived responsiveness of government (Conway, 2000), so the net effect of higher age and lower education of people with disabilities is unclear. People with higher education and income levels are more likely to follow politics (Conway, 2000), so lower levels of education and income among people with disabilities are likely to lead to less political interest.

⁴The Department of Justice's Project Civic Access is examining civic access in communities around the United States (<http://www.ada.gov/civicfac.htm>), including common problems such as inaccessible voting places (<http://www.ada.gov/civiccommonprobs.htm>).

As members of an historically disadvantaged group, it might be expected that people with disabilities would tend to favor Democrats since the Democratic party has traditionally been associated with the expansion of civil rights and social programs. As noted by Gastil (2000:590): “Disability activists’ contemporary emphases on civil rights, the ADA, and health-care reform . . . have been more resonant with Democratic Party themes and progressive intellectual ideas than with those of the Republicans.” The disability rights movement, however, worked with both parties in passing the 1990 ADA and 2008 ADA Amendments Act, which was sponsored by both Democrats and Republicans and signed by Republican presidents (Bush Sr. and Jr.). A 1996 survey of New Mexico residents nonetheless found that people with disabilities were disproportionately likely to identify themselves as Democrats (Gastil, 2000). In terms of top-down drives for affiliations, the Democratic Party’s website does have a page devoted to “Democrats with Disabilities” and a Facebook page of the same name; this was not found for the Republicans.⁵ This leads to our second hypothesis:

H₂: People with disabilities are more likely than people without disabilities to identify themselves as Democrats.

Many people with disabilities experience ongoing health problems and high medical expenses, and they are twice as likely as those without disabilities to say they did not get needed medical care within the past year (Harris, 2010:109). It is also likely that employment will be a major concern, given their low employment rates and expressed desire for employment among a majority of nonemployed people with disabilities (Erickson et al., 2009; Harris, 2004). When asked what they considered to be the biggest problem facing their state, New Mexico residents with disabilities were twice as likely as nondisabled people to identify public healthcare (Gastil, 2000). They nonetheless were more likely to identify jobs and the economy as the biggest problem. Among those who said that disability affected their political views, 48 percent said they had become more concerned about disability issues and many cited their fear of losing benefits (Gastil, 2000:599). In analyses of the American National Election Survey (ANES) data for 1976, 1992, and 2004, Lau and Heldman (2009) found that identification as “permanently disabled” predicted support for government health insurance in all three years, but disability status predicted support for guaranteed jobs and incomes only in 1976. Our third hypothesis is:

H₃: People with disabilities tend to favor a greater role for government in healthcare and employment.

Disability experiences may also affect broader political values. Albrecht (1976) and Gastil (2000) suggest that a person with a disability may find

⁵<http://my.democrats.org/page/group/Democratswithdisabilities> and <http://www.facebook.com/group.php?gid=46277949794>, retrieved November 10, 2011.

it harder to be “a model of rugged individualism and economic success,” leading to greater identification with “liberal” values of equality, compassion, and tolerance of social deviance. The experience of stigma may also lead people to have a more negative view of government. Gastil’s survey of New Mexico residents found people with disabilities expressed more egalitarian values, although did not differ from those without disabilities on a liberal–conservative scale. When asked if disability had affected their political views, 45 percent of respondents with disabilities said yes, and 8 percent of these said it had made them more inclined to vote Democratic or embrace liberal values. Among the 45 percent who said that disability had affected their political views, 15 percent said that it had made them more cynical and antigovernment (Gastil, 2000). Some prior evidence supports the idea that people with disabilities have lower levels of external political efficacy, the belief that government officials are responsive to their needs (Schur et al., 2003). This leads to our final hypothesis:

H₄: People with disabilities are less likely than people without disabilities to view government as responsive and trustworthy.

Data Sets and Method

We use four sources of data: the 2008 and 2010 CPSs, the 2006 GSS, and the 2007 Maxwell poll. The CPS is a monthly representative survey of the U.S. population designed primarily to obtain employment information. In November of each even-numbered year, it includes a Voting Supplement with several questions about voter turnout in the election that just occurred. In November 2008, there was also a Civic Engagement supplement that measured several kinds of political participation apart from voting. The Bureau of Labor Statistics added six questions to identify disability status starting in June 2008.⁶ The supplements included 92,360 people of voting age in 2008, and 94,208 people of voting age in 2010. There were 12,027 people in 2008 and 12,064 people in 2010 who answered yes to at least one of the six disability questions. After applying CPS sampling weights, the estimated disability rates are 12.45 percent in 2008 and 12.21 percent in 2010.⁷ The questions allow identification of four major categories of impairment: visual, hearing, mobility, and mental.

The GSS is a long-standing nationally representative survey of Americans age 18 or older, conducted every year or two since 1972 by the National

⁶The questions are presented by the Bureau of Labor Statistics at http://www.bls.gov/cps/cpsdisability_faq.htm#Identified.

⁷The difference in estimated prevalence between 2008 and 2010 is not statistically significant. The weights are provided by the Census Bureau to account for survey sampling design and ensure the sample conforms to the known population distribution of demographic factors (age, sex, race, and ethnicity). Disability is not used in developing the weights.

Opinion Research Center at the University of Chicago.⁸ The Maxwell poll is also a nationally representative survey of Americans age 18 or older, conducted every year by the Campbell Public Affairs Institute at Syracuse University from 2004 to 2007.⁹ The 2006 GSS and 2007 Maxwell poll had seven questions added to identify people with disabilities. The seven questions used in both surveys were drawn from the 2001–02 National Comorbidity Survey (NCS) after an intensive analysis to determine the most efficient set of questions for identifying people with disabilities (McMenamin et al., 2006). The 2006 GSS has a total of 2,777 respondents with disability information, of whom 590 were identified with a disability, with a weighted disability rate of 19.2 percent. The 2007 Maxwell poll has a total of 568 respondents, of whom 135 are identified with a disability and the weighted disability rate is also 19.2 percent.¹⁰ These disability rates are very close to the rate of 17.6 percent using the same disability identifiers in the 2001–02 NCS, and only slightly higher than the 17.7 percent rate using a different set of identifiers for those age 21 or older in the 2006 American Community Survey conducted by the U.S. Census Bureau.¹¹ The seven questions identifying disability are presented in McMenamin et al. (2006) and available from the authors. As with the CPS, the questions allow identification of the four major categories of impairments.

An advantage of the CPS voting supplement is the much larger sample size than used in any prior study, providing strong power in testing prior results that found disability associated with lower voter turnout. A disadvantage is that the CPS does not have measures of political recruitment or efficacy, so it cannot be used to fully disentangle the reasons for any lower turnout. Therefore, we use the CPS simply to see if past patterns continued to hold in the 2008 and 2010 elections, and put our focus on how disability is related to political preferences and attitudes, which has received very little attention in prior literature.

The analysis is broken into three broad topics: political participation (Tables 1 to 4), political preferences and affiliations (Table 5), and views of government and politics (Tables 6 and 7). We use probit regressions for binary variables and ordered probits where the dependent variable can take several values in a natural ordering.¹²

⁸<http://gss.norc.org/>

⁹<http://www.maxwell.syr.edu/campbell/programs/maxwellpoll.htm>

¹⁰As with the CPS, the GSS and Maxwell weights are provided by the survey firms to account for survey sampling design and to help ensure the sample conforms to the known population distribution of demographic factors (age, sex, race, and ethnicity). Disability is not used in developing the weights.

¹¹Calculated from RRTC (2007) using estimates for the 20–64, 65–74, and 75 or older age categories.

¹²All question wordings are available at <http://gss.norc.org/> or <http://www.maxwell.syr.edu/campbell/programs/maxwellpoll.htm>, or from the authors.

TABLE 1
Political Participation

	People with Disabilities									
	People without Disabilities	Overall	Visual	Hearing	Mobility	Mental/Emotional	Difficulty Dressing/Bathing	Difficulty Going Outside Alone		
Voting										
Voted in 2008 (CPS)	64.5%	57.3%*	56.8%*	63.1%	56.8%*	46.1%*	46.4%*	45.7%*		
Disability gap		-7.2%*	-7.7%*	-1.4%	-7.7%*	-18.4%*	-18.1%*	-18.8%*		
If voted, did so by mail	15.2%	25.8%*	28.7%*	24.9%*	28.0%*	25.3%*	38.4%*	34.8%*		
<i>n</i>	80,333	12,027	1,798	3,377	7,234	3,501	1,923	3,946		
Voted in 2010 (CPS)	45.9%	42.8%*	39.5%*	50.0%*	43.5%*	29.5%*	32.4%*	32.9%*		
Disability gap		-3.1%*	-6.4%*	4.1%*	-2.4%*	-16.4%*	-13.5%*	-13.0%*		
If voted, did so by mail	16.9%	27.5%*	28.0%*	27.8%*	29.4%*	25.9%*	38.6%*	35.4%*		
<i>n</i>	82,144	12,064	1,692	3,516	7,177	3,475	1,890	3,947		
Other political participation in past year										
2008 (CPS)										
Contacted a public official	10.8%	11.0%	10.0%	12.4%*	10.7%	9.1%*	9.4%	7.5%*		
Attended meeting where political issues discussed	11.1%	8.9%*	7.4%	9.7%*	8.2%*	7.4%*	7.2%*	6.2%*		
Attended march, rally, protest, or demonstration	3.4%	2.0%*	2.5%	1.8%*	1.6%*	2.5%*	1.6%*	1.4%*		
Gave active support to political candidate	15.5%	13.9%*	13.8%	15.6%	13.0%*	11.6%*	11.9%*	9.9%*		
Sum of above four activities (mean)	0.406	0.356*	0.336*	0.390	0.335*	0.306*	0.300*	0.250*		
(SD)	(0.83)	(0.76)	(0.73)	(0.79)	(0.73)	(0.71)	(0.70)	(0.63)		
<i>n</i>	60,993	8,964	1,384	2,540	5,363	2,525	1,357	2,770		

TABLE 1—Continued

	People without Disabilities	People with Disabilities						
		Overall	Visual	Hearing	Mobility	Mental/Emotional	Difficulty Dressing/Bathing	Difficulty Going Outside Alone
2006 (Maxwell)								
Contacted a public official	44.5%	34.3%*	35.6%	32.4%	35.6%	33.3%		
Attended political rally or meeting	17.8%	5.2%*	6.7%*	7.9%	1.4%*	2.2%*		
Contributed money to campaign	27.5%	17.8%*	10.0%*	21.1%	15.1%*	13.3%*		
Worked on campaign	8.5%	5.9%	5.0%	13.2%	6.8%	2.2%		
Joined Internet political group	4.4%	2.2%	0.0%	2.6%	1.4%	2.2%		
Sum of above five activities (mean)	1.032	0.659*	0.586*	0.784	0.603*	0.533*		
(SD)	(1.19)	(0.92)	(0.77)	(1.13)	(0.79)	(0.76)		
n	429	132	58	37	73	45		

*Significantly different from people without disabilities at $p < 0.05$.

TABLE 2
Predicting Voter Turnout in 2008

Independent Variables	Means		Full Sample		Full Sample		Full Sample		Full Sample		
	No disab.	Disab.	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Coefficients Represent Marginal Effects on Probabilities Based on Probit Regressions. Dependent Variable = voted											
Disability											
Any disability	0.000	1.000	-0.117 (19.57)*	-0.070 (11.51)*	0.017 (1.57)						(omitted)
Hearing impairment	0.000	0.267			-0.010 (0.73)						-0.014 (0.91)
Visual impairment	0.000	0.151			-0.060 (5.33)*						-0.073 (5.64)*
Mental/emotional impairment	0.000	0.294			-0.012 (1.39)						-0.020 (1.65)
Mobility impairment	0.000	0.607			-0.054 (3.42)*						-0.052 (3.22)*
Difficulty w/self-care	0.000	0.165			-0.121 (9.58)*						-0.122 (9.40)*
Difficulty going outside alone	0.000	0.339									
Other demographics											
Female	0.517*	0.545	0.049 (13.01)*	0.042 (11.00)*	0.044 (11.47)*	0.046 (11.32)*	0.026 (2.30)*				
Black	0.120*	0.129	0.023 (3.65)*	0.063 (10.13)*	0.064 (10.25)*	0.056 (8.31)*	0.124 (7.16)*				
Hispanic	0.097*	0.077	-0.130 (19.25)*	-0.067 (9.84)*	-0.066 (9.70)*	-0.069 (9.70)*	-0.025 (1.17)				
Other race/ethnicity	0.058*	0.046	-0.140 (16.81)*	-0.157 (18.36)*	-0.156 (18.21)*	-0.168 (18.63)*	-0.056 (2.05)*				

TABLE 2—Continued

Independent Variables	Means		Full Sample (1)	Full Sample (2)	Full Sample (3)	No Disability (4)	Disability (5)
	No disab.	Disab.					
	Coefficients Represent Marginal Effects on Probabilities Based on Probit Regressions. Dependent Variable = voted						
Age	44.7*	60.6	0.011 (16.52)*	0.007 (9.73)*	0.006 (9.39)*	0.006 (7.60)*	0.005 (2.52)*
Age squared	2,276.5*	3,988.9	-0.00007 (10.38)*	-0.00002 (2.73)*	-0.00002 (2.40)*	-0.00001 (1.22)	-0.00001 (0.55)
Married	0.568*	0.429	(11.62)*	0.058 (10.30)*	0.055 (9.78)*	0.052 (8.77)*	0.092 (5.12)*
Separated or divorced	0.120*	0.180	-0.059 (8.14)*	-0.047 (6.43)*	-0.048 (6.53)*	-0.051 (6.52)*	-0.014 (0.72)
Widowed	0.045*	0.212	-0.071 (7.30)*	-0.048 (4.88)*	-0.045 (4.55)*	-0.035 (2.97)*	-0.034 (1.52)
Education							
High school diploma	0.311*	0.363		0.136 (22.02)*	0.134 (21.65)*	0.135 (19.22)*	0.146 (10.63)*
Some college, no degree	0.209*	0.176		0.254 (41.16)*	0.252 (40.61)*	0.251 (36.54)*	0.267 (16.98)*
Associate's degree	0.093*	0.075		0.251 (36.22)*	0.250 (35.99)*	0.248 (32.98)*	0.271 (13.68)*
Bachelor's degree	0.198*	0.091		0.309 (50.12)*	0.308 (49.77)*	0.309 (45.64)*	0.303 (16.12)*
Graduate degree	0.096*	0.052		0.314 (46.76)*	0.313 (46.43)*	0.313 (43.65)*	0.294 (12.83)*
Pseudo- R^2	80,333	12,027	0.041	0.090	0.092	0.090	0.099
n			92,360	92,360	92,360	80,333	12,027

*Difference is significant at $p < 0.05$ (Z -statistic in parentheses).

TABLE 3
Predicting Voter Turnout in 2010

Independent Variables	Means		Full Sample (1)	Full Sample (2)	Full Sample (3)	No Disability (4)	Disability (5)
	No disab.	Disab.					
Disability							
Any disability	0.000	1.000	-0.125 (-21.04)*	-0.084 (-13.55)*			
Hearing impairment	0.000	0.267			0.004 (0.355)		-0.034 (-2.178)*
Visual impairment	0.000	0.145			-0.036 (-2.350)**		-0.083 (-0.084)
Mental/emotional impairment	0.000	0.293			-0.084 (-7.063)*		(-6.495)*
Mobility impairment	0.000	0.597			-0.018 (-1.969)**		-0.011 (-0.899)
Difficulty w/self-care	0.000	0.161			-0.063 (-3.608)*		-0.066 (-3.885)*
Difficulty going outside alone	0.000	0.337			-0.101 (-7.776)*		-0.098 (-7.429)*
Other demographics							
Female	0.517*	0.540	0.016 (4.150)*	0.008 (1.965)**	0.009 (2.262)*	0.011 (2.579)*	-0.010 (-0.874)
Black	0.122*	0.122	0.007 (1.042)	0.043 (6.551)*	0.044 (6.775)*	0.039 (5.589)*	0.083 (4.648)*
Hispanic	0.104*	0.081	-0.120 (-17.49)*	-0.066 (-9.270)*	-0.066 (-9.159)*	-0.073 (-9.657)*	0.001 (0.0237)
Other race/ethnicity	0.061*	0.054	-0.119 (-14.07)*	-0.128 (-14.89)*	-0.127 (-14.72)*	-0.136 (-14.94)*	-0.047 (-1.844)**

Coefficients Represent Marginal Effects on Probabilities Based on Probit Regressions. Dependent Variable = voted

TABLE 3—Continued

Independent Variables	Means		Full Sample (1)	Full Sample (2)	Full Sample (3)	No Disability (4)	Disability (5)
	No disab.	Disab.					
	Coefficients Represent Marginal Effects on Probabilities Based on Probit Regressions. Dependent Variables = voted						
Age	44.9*	60.9	0.018 (26.32)*	0.015 (20.41)*	0.014 (19.96)*	0.014 (16.85)*	0.016 (7.279)*
Age squared	2.303.0*	4.024.6	-0.0001 (-14.84)*	-0.0001 (-8.263)*	-0.0001 (-7.887)*	0.0000 (-5.821)*	-0.0001 (-3.961)*
Married	0.554*	0.423	0.074 (13.04)*	0.064 (11.11)*	0.062 (10.66)*	0.064 (10.45)*	0.049 (2.738)*
Separated or divorced	0.123*	0.190	-0.057 (-7.882)*	-0.051 (-6.898)*	-0.052 (-7.028)*	-0.053 (-6.628)*	-0.044 (-2.251)*
Widowed	0.045*	0.207	-0.078 (-8.069)*	-0.057 (-5.795)*	-0.055 (-5.555)*	-0.049 (-4.143)*	-0.064 (-2.956)*
Education							
High school diploma	0.304*	0.377		0.148 (19.89)*	0.146 (19.53)*	0.149 (17.19)*	0.146 (9.841)*
Some college, no degree	0.209*	0.167		0.271 (34.46)*	0.268 (33.98)*	0.274 (30.47)*	0.245 (13.67)*
Associate's degree	0.096*	0.076		0.284 (31.84)*	0.282 (31.54)*	0.286 (28.65)*	0.272 (12.01)*
Bachelor's degree	0.199*	0.092		0.353 (44.98)*	0.351 (44.67)*	0.355 (40.00)*	0.349 (16.98)*
Graduate degree	0.102*	0.057		0.387 (44.89)*	0.385 (44.63)*	0.39 (40.88)*	0.355 (14.15)*
Pseudo- R^2							
n	82,144	12,064	94,208	94,208	94,208	82,144	12,064

*Difference is significant at $p < 0.05$ (Z-statistic parentheses).

TABLE 4
Predicting Other Forms of Political Participation

Independent Variables	Means		(1)	(2)	(3)	(4)
	No Disability	Disability				
Dependent Variable = CPS Political Participation Index. Based on OLS Regressions						
Any disability			-0.076 (6.94)*	-0.008 (0.77)		
Hearing impairment	0.000	0.274			0.005 (0.27)	0.024 (1.27)
Visual impairment	0.000	0.157			-0.015 (0.64)	-0.011 (0.45)
Mental/emotional impairment	0.000	0.280			-0.027 (1.43)	0.023 (1.24)
Mobility impairment	0.000	0.610			-0.059 (3.88)*	-0.007 (0.45)
Difficulty dressing/bathing	0.000	0.155			0.028 (1.05)	-0.001 (0.05)
Difficulty going outside alone	0.000	0.320			-0.119 (5.75)*	-0.091 (4.53)*
Demographics						
Age	45.0	61.2	0.022 (18.27)*	0.014 (12.22)*	0.022 (18.06)*	0.014 (12.03)*
Age squared	2,296.4	4,041.0	-0.00019 (15.83)*	-0.00011 (9.39)*	-0.00019 (15.54)*	-0.00011 (9.10)*
Female	0.520	0.556	0.001 (0.14)	-0.005 (0.69)	0.003 (0.46)	-0.003 (0.47)
Black	0.106	0.120	-0.051 (4.05)*	0.014 (1.14)	-0.050 (3.96)*	0.015 (1.21)

TABLE 4—Continued

Independent Variables	Means		(1)	(2)	(3)	(4)
	No Disability	Disability				
Hispanic	0.132	0.084	-0.245 (27.94)*	-0.115 (12.63)*	-0.243 (27.80)*	-0.115 (12.66)*
Other race/ethnicity	0.066	0.049	-0.134 (9.90)*	-0.166 (12.00)*	-0.133 (9.79)*	-0.165 (11.94)*
Married	0.586	0.431	-0.027 (2.50)*	-0.035 (3.34)*	-0.028 (2.64)*	-0.036 (3.47)*
Separated or divorced	0.123	0.189	-0.074 (5.30)*	-0.047 (3.45)*	-0.074 (5.29)*	-0.046 (3.43)*
Widowed	0.047	0.220	-0.131 (7.26)*	-0.090 (5.22)*	-0.126 (6.96)*	-0.086 (4.98)*
No high school diploma (omitted)						
High school	0.298	0.344		0.070 (8.96)*		0.067 (8.60)*
Some college	0.198	0.182		0.291 (27.56)*		0.287 (27.28)*
Associate's degree	0.093	0.077		0.279 (20.34)*		0.276 (20.12)*
Bachelor's degree	0.197	0.093		0.450 (37.42)*		0.447 (37.22)*
Graduate work	0.102	0.054		0.702 (40.39)*		0.699 (40.24)*
Constant			-0.073 (2.85)*	-0.194 (7.42)*	-0.073 (2.80)*	-0.189 (7.20)*
R ²			0.023	0.084	0.024	0.08
n			64,808	64,808	64,808	64,808

*Difference is significant at $p < 0.05$ (t -statistics in parentheses)
See descriptive statistics of dependent variable in Table 1.

TABLE 5
Political Preferences and Affiliations

	People without Disabilities	People with Disabilities					Mental/Emotional
		Overall	Visual	Hearing	Mobility		
Voting preference in 2004 (GSS)							
If voted, voted for							
Kerry	45.4%	50.6%*	46.7%	50.4%	49.2%	50.2%	
Bush	53.2%	47.8%*	52.8%	47.6%	48.8%	48.8%	
Other	1.4%	1.6%	0.5%	2.1%	1.9%	1.0%	
<i>n</i>	1,526	378	103	115	226	155	
If did not vote, would have voted for							
Kerry	43.2%	49.6%	45.7%	54.4%	47.3%	50.8%	
Bush	38.8%	33.9%	34.0%	29.5%	39.0%	33.7%	
Other	18.0%	16.4%	20.4%	16.1%	13.7%	15.5%	
<i>n</i>	454	148	53	39	88	82	
Political affiliation (Maxwell)							
Democrat	43.5%	36.1%	38.4%	37.4%	40.2%	37.4%	
Republican	25.1%	23.6%	30.1%	20.4%	21.0%	17.1%	
Independent	24.0%	20.8%	19.4%	18.4%	21.5%	20.9%	
Other	7.4%	19.5%*	12.1%	23.8%	17.3%	24.7%*	
<i>n</i>	408	125	56	36	67	41	
Views of parties (Maxwell)							
Democratic: favorable	37.4%	28.7%	22.4%*	32.5%	35.7%	35.1%	
Democratic: unfavorable	40.0%	43.3%	45.4%	30.6%	43.1%	38.3%	
Republican: favorable	25.4%	24.3%	30.7%	24.0%	20.7%	25.7%	
Republican: unfavorable	50.4%	47.4%	47.9%	42.0%	53.8%	50.1%	
<i>n</i>	432	133	58	37	73	45	
Political ideology (GSS)							
Mean of 1–7 scale (7=very liberal)	3.85	3.87	3.65	3.68	3.81	3.84	
(SD)	(1.39)	(1.47)	(1.51)	(1.50)	(1.46)	(1.51)	
Liberal (5, 6, or 7)	26.3%	26.2%	22.8%	24.0%	24.9%	26.1%	
Moderate (4)	38.4%	40.0%	38.3%	38.5%	40.9%	36.4%	
Conservative (1, 2, or 3)	35.3%	33.8%	38.9%	37.5%	34.2%	37.5%	
<i>n</i>	2,124	556	160	160	336	251	

Significantly different from people without disabilities at * $p < 0.10$, ** $p < 0.05$.

TABLE 6

Views of What Government Should Be Doing

Each Row Represents Results from a Separate Ordered Probit, with
Dependent Variable At Left^a

Row	Dependent Variable	Disability Coefficient	(Z-stat.)	<i>n</i>	Pseudo <i>R</i> ²
Should be government responsibility to					
1	Provide job for everyone who wants one	0.182	(2.19)*	1,391	0.065
2	Keep prices under control	0.155	(1.64)*	1,391	0.081
3	Provide healthcare for the sick	0.323	(3.45)*	1,392	0.062
4	Provide decent standard of living for the old	-0.003	(0.03)	1,398	0.07
5	Provide industry with help to grow	0.151	(1.74)*	1,372	0.034
6	Provide decent standard of living for the unemployed	0.106	(1.25)	1,372	0.047
7	Reduce income differences between rich and poor	0.101	(1.23)	1,366	0.035
8	Give help to university students from low-income families	0.175	(1.88)*	1,398	0.07
9	Provide decent housing for those who cannot afford it	0.207	(2.27)*	1,381	0.056
10	Impose strict laws on industry to protect environment	0.111	(1.27)	1,384	0.016
Favor government policies to					
11	Cut government spending	-0.059	(0.65)	1,376	0.028
12	Finance projects to create jobs	0.037	(0.42)	1,398	0.02
13	Have less government regulation of business	-0.167	(2.16)*	1,371	0.011
14	Support new products and industry	0.038	(0.41)	1,392	0.005
15	Support declining industries to save jobs	-0.047	(0.55)	1,389	0.037
16	Reduce workweek to create jobs	0.007	(0.08)	1,387	-0.012
Should be more government spending on					
17	Environment	0.065	(0.77)	1,373	0.013
18	Health	0.162	(1.95)*	1,392	0.03
19	Police and law enforcement	-0.013	(0.15)	1,390	0.007
20	Education	0.084	(1.01)	1,398	0.035
21	Military and defense	-0.113	(1.39)	1,388	0.017
22	Retirement benefits	0.040	(0.45)	1,378	0.049
23	Unemployment benefits	0.073	(0.80)	1,380	0.058
24	Culture and the arts	0.044	(0.51)	1,375	0.022

TABLE 6—Continued

Each Row Represents Results from a Separate Ordered Probit, with Dependent Variable At Left^a

Row	Dependent Variable	Disability Coefficient	(Z-stat.)	<i>n</i>	Pseudo <i>R</i> ²
Protection of civil liberties					
18	Okay to allow revolutionaries to hold public meetings	0.232	(2.61)*	1,390	0.016
19	Okay to allow revolutionaries to publish books	0.248	(2.66)*	1,393	0.032
To protect against terrorist act, authorities should be able to					
20	Detain people without trial	-0.320	(3.98)*	1,382	0.022
21	Tap telephone conversations	-0.236	(2.86)*	1,387	0.018
22	Stop and search people at random	-0.212	(2.55)*	1,394	0.015

^aControl variables include female, black, Hispanic, other race, age, married, separated/divorced, widowed, years of education, and family income.

*Significant at $p < 0.05$, ** $p < 0.10$.

Disability and Political Participation

Citizens with disabilities were less likely than nondisabled citizens to report voting in the 2008 and 2010 elections, consistent with H_1 . As shown in Table 1, their overall voting rate was 7.2 percentage points lower than that of people without disabilities in 2008, and 3.1 percent percentage points lower in 2010, using the CPS measure of disability.¹³ The narrowing of the overall voting gap between 2008 and 2010 primarily represents a change in the age composition of the electorate, as will be discussed shortly. There were especially large voting gaps for people with mental/emotional impairments (18.4 and 16.4 points in 2008 and 2010, respectively) and difficulty in going outside alone (18.8 and 13.0 points), despite the availability of absentee ballots. The latter result strongly suggests the importance of social or psychological factors associated with mobility outside the home. Among those who voted, the CPS data show voters with disabilities were more likely to vote by mail (25.8 percent compared to 15.2 percent in 2008, and 27.5 percent compared to 16.9 percent in 2010), with an especially high rate among those who have difficulty with self-care (38.4 percent in 2008 and 38.6 percent in 2010). Table 1 also shows people with disabilities were less likely to have attended a political meeting or given

¹³Surveys on voter turnout are subject to overreporting, but there is no reason to think that any under- or overreporting differs by disability status, as discussed in Schur et al. (2002). The 2006 GSS has a measure of voter turnout in 2004, and the 2007 Maxwell poll has a measure of general voting likelihood. We analyzed these data as well (results available on request), but here focus on the more recent CPS data with a much greater sample size.

TABLE 7

Government Effectiveness and Political Interest

Each Row Represents Results from a Separate Ordered Probit, with
Dependent Variable at Left^a

Row	Dependent Variable	Disability Coefficient	(Z-stat.)	<i>n</i>	Pseudo <i>R</i> ²
How well government is doing (GSS)					
1	Providing healthcare for the sick	0.039	(0.50)	1,379	0.01
2	Providing decent standard of living for the old	-0.013	(0.16)	1,383	0.013
3	Dealing with threats to America's security	-0.083	(0.13)	1,385	0.016
4	Controlling crime	-0.127	(1.59)	1,390	0.023
5	Fighting unemployment	-0.192	(2.29)*	1,364	0.027
6	Protecting the environment	-0.106	(1.22)	1,383	0.015
Perceptions of government responsiveness (GSS)					
7	External efficacy (index of six items below)	-0.178	(2.34)*	1,404	0.014
8	How often public officials deal fairly with people like you	-0.140	(1.71)*	1,367	0.044
9	Treatment from public officials depends on who you know ^b	0.006	(0.07)	1,384	0.015
10	People like me do not have say about gov't ^b	-0.103	(1.23)	1,393	0.024
11	Average citizen has influence on politics	-0.104	(1.26)	1,393	0.013
12	Congressional representatives try to keep promises	-0.133	(1.63)	1,389	0.012
13	Most government officials can be trusted to do what is best	-0.231	(2.86)*	1,385	0.011
Political interest					
14	Follow public affairs on regular basis (Maxwell)	-0.323	(1.72)*	534	0.108
15	How interested in politics (GSS)	-0.109	(1.33)	1,402	0.04
16	How often discuss politics (CPS)	-0.155	(9.63)*	67,716	0.025
Effect of Internet on politics (Maxwell)					
17	Affected ability of average citizens to influence politics	-0.041	(0.27)	439	0.079
18	Affected your own level of political activity	-0.281	(1.77)*	485	0.103

TABLE 7—Continued

Each Row Represents Results from a Separate Ordered Probit, with
Dependent Variable at Left^a

Row	Dependent Variable	Disability Coefficient	(Z-stat.)	<i>n</i>	Pseudo <i>R</i> ²
Perceptions of personal competence in politics (GSS)					
19	Internal efficacy (index of two items below)	-0.116	(1.39)	1,403	0.046
20	Have good understanding of political issues	-0.084	(0.95)	1,397	0.038
21	Most people better informed about politics than me ^b	-0.104	(1.26)	1,395	0.051

^aControl variables include female, black, Hispanic, other race, age, married, separated/divorced, widowed for all data, with four education dummies for CPS data and years of education plus family income for GSS and Maxwell data.

^bReverse scored so that more positive value indicates more government responsiveness or political knowledge.

*Significant at $p < 0.05$.

support to a political campaign in both 2006 (using Maxwell data) and 2008 (using CPS data), and less likely to have contacted a public official in 2006 but not in 2008. Interestingly, people with hearing impairments were more likely than nondisabled people to have contacted a public official in 2008, which we discuss further below. Despite differences in how political participation was measured, people with disabilities have a significantly lower mean number of political activities in both the 2006 Maxwell and 2008 CPS surveys.

Do these gaps remain after controlling for other factors? Table 2 first compares people with and without disabilities on the means of variables affecting voter turnout, and then presents regressions predicting voter turnout in the general elections in 2008. People with disabilities are about 10 years older than nondisabled people on average, which should increase their participation since age is generally associated with higher participation, although there is a curvilinear relationship with a drop off in later years that may reflect an increased incidence of disability (Rosenstone and Hansen, 1993; Miller and Shanks, 1996). People with disabilities are also less likely to be married and have lower levels of education—only 14.3 percent have a college or graduate degree compared to 29.4 percent of people without disabilities—which could help account for lower participation since education is strongly linked to political participation.

We first control only for demographic factors apart from education, so that the estimated disability gap partly reflects the lower average education of people with disabilities. This indicates the long-term potential for increased turnout as educational levels rise among people with disabilities (Jolls, 2004). Regression 1 shows that people with disabilities were 11.7 percentage points less likely than otherwise similar people without disabilities to vote in 2008

(regression 1). When further controlling for education in regression 2, the gap reduces to 7.0 percentage points, indicating that education accounted for about 40 percent of the 11.7 point gap. When separated by disability measure in regression 3, the turnout gap is greatest for people with disabilities who have difficulty going outside alone (12.1 points), but is also large and significant for those with mental/emotional impairments (6.0 points) and those who report difficulty with self-care (5.4 points). In regressions done separately for each sample, the predictors of voting tend to be similar between the disability and nondisability samples (regressions 4 and 5).

Table 3 presents the same specifications using CPS data for the midterm elections in 2010. The results are remarkably similar, showing that people with disabilities were 12.5 points less likely than otherwise similar people to vote in 2010 (regression 1), which is close to the 11.7 point gap in 2008. The similarity of these two gaps, despite the narrowing of the simple overall gap noted in Table 1, reflects a change in the age composition of voters as turnout dropped from the general to the midterm elections. Overall turnout dropped more for people without disabilities than for people with disabilities, largely reflecting the disproportionate drop in turnout among young people, who are less likely than older people to have disabilities.¹⁴ While this disproportionate drop in turnout among young people caused the simple overall turnout gap between people with and without disabilities to narrow (without adjusting for age and other covariates), the regressions show that the disability gap remains stable between 2008 and 2010 when comparing people who have the same age and other demographic characteristics.

What explains the differences by type of disability? As noted, the lowest turnout was among people who reported difficulty going outside alone. This could be a proxy for more severe disabilities that create greater difficulties in getting to and using polling places and even applying for and using absentee ballots (Tokaji and Colker, 2007). People who have difficulty leaving their homes are also more likely to be out of the workforce and socially isolated, making it less likely that they will receive political information or be recruited for political activities. Furthermore, caregivers and family members may be reluctant to help people who need significant assistance in registering or voting. A similar dynamic may contribute to the relatively low turnout among people with mental and cognitive disabilities. Tokaji and Colker discuss “informal gatekeeping decisions” by relatives and caregivers not to assist people with cognitive impairments who need help to register or vote, based on the belief

¹⁴Calculations from the CPS show a disability prevalence of 4 percent among those age 18–34, and 32 percent among those age 65 or older. Voter turnout among all those age 18–34 dropped 26 percentage points between 2008 and 2010, while the turnout of those age 65 or older dropped only 10 points. These combined figures indicate that the greatest turnout drop occurred in the age category with the lowest disability prevalence, leading to a narrowing of the overall disability turnout gap when not controlling for age. Within age category, however, the disability turnout gap was fairly stable from 2008 to 2010, going from –12 to –11 points among those age 18–34, and –12 to –14 points among those age 65 or older.

that the person lacks the capacity to vote (Tokaji and Colker, 2007:38). In addition, confusing written instructions and ballots, and lack of assistance from poll workers may impede participation among people with limited literacy skills (Karlawish and Bonnie, 2007). It is also important to note that people with cognitive and mental impairments have been subject to some of the most extreme stigma that can depress turnout (see Baldwin and Marcus, 2007, on stigma and discrimination associated with people with mental impairments, and Schriener et al., 1997, regarding laws in the United States that explicitly disenfranchised “idiots” and “the insane”).

In contrast, people who are deaf or have hearing impairments are the only disability group that did not have lower voter turnout relative to people without disabilities in either 2008 or 2010. While it is impossible to provide a definitive explanation, several factors probably contribute to the high turnout among this group. First, people with auditory disabilities may face fewer barriers to participation than members of other groups. For example, a lot of political information is provided in written or other visual formats and may be more accessible to those with hearing impairments. In addition, people with hearing impairments may not face as much social discomfort, stigma, and marginalization as people with other types of disabilities (Yuker, 1988). For example, hearing loss is often considered a “normal” part of aging. Finally, as discussed by Shapiro (1993) and others, over the last few decades, there has been the rise of “Deaf culture” and political mobilization around Deaf identity (e.g., the 1996 protests by students at Gallaudet University to ensure the new university president would be a member of the deaf community¹⁵). Many deaf individuals consider themselves to be members of a cultural minority rather than people with disabilities. This positive identity and “Deaf pride” contribute to political awareness and engagement, and may help explain why, as found in Table 1, people with hearing impairments were more likely than nondisabled people to contact public officials in 2008.

How many more voters might there be if the disability gap were closed? The 11.7 and 12.5 point gaps in column 1 of Tables 2 and 3 imply that there would have been 3.0 million more voters in 2008, and 3.2 million more voters in 2010 if people with disabilities voted at the same rate as nondisabled people of similar age, gender, race/ethnicity, and marital status.¹⁶ Their lower levels of education play a substantial role in this gap. Holding education constant, the coefficients in column 2 of these tables imply 1.8 million more voters in 2008 and 2.2 million more voters in 2010, if people with disabilities voted at the same rate as nondisabled peers with similar education levels. It should be noted that the relationship between disability and education is not a simple one: congenital or childhood disabilities may change the nature and amount of

¹⁵http://en.wikipedia.org/wiki/Gallaudet_University

¹⁶This is based on combining the coefficients in Tables 2 and 3 with the .125 and .122 disability prevalence rates in 2008 and 2010, and the 206.1 million and 210.8 million people eligible to vote in 2008 and 2010 (CPS weighted estimates).

education one receives, while education also affects the likelihood of disability by shaping job opportunities (in particular, most jobs involving manual labor do not require college degrees, and these jobs often lead to work injuries that result in disabilities). The statistics presented here provide a magnitude for the overall gap associated with the lower average education of people with disabilities, but closing the gap may not be straightforward.

Nonvoting forms of political participation are examined in Table 4 with regressions using the CPS civic engagement data that control for education and demographic variables. Before controlling for education, people with disabilities report an average 0.076 fewer political activities in the past year (column 1). This difference appears to largely reflect their lower average education, since it becomes small and no longer significant when controlling for education (column 2). This is in contrast to results from 1998 and 2000 when people with disabilities reported fewer activities even controlling for education (Schur, 2003), which may represent a substantive change in the past decade but could also reflect differences in the survey measures of disability and political participation. When broken out by disability type in 2008, there are significantly fewer activities by those who have mobility impairments and who report a condition that creates difficulty in going outside alone (column 3), and the latter result is maintained when controlling for education (column 4). The lower political participation of people who have difficulty going outside alone is consistent with their especially low voter turnout (Tables 2 and 3), probably reflecting a combination of physical limitations (e.g., in going to a political meeting or rally) and social isolation (decreasing opportunities for political recruitment). Overall, the results generally support H_1 on the lower political participation of people with disabilities, with the exception that people with hearing impairments do not have lower voter turnout, and only people who have difficulty going outside alone have a lower likelihood of participating in political activities apart from voting.

Political Preferences and Affiliations

Do people with disabilities vote differently than people without disabilities? Table 5 shows that they were more likely to favor Kerry in the 2004 election, giving him a three-point edge (51 to 48 percent) as opposed to the eight-point edge for Bush (53 to 45 percent) among voters without disabilities. When voter choice is predicted using probit regressions that control for education, income, and demographic factors (not shown but available), disability is not a significant predictor of voter choice, primarily due to controlling for age, race, and income (since being older, black, and having lower incomes are associated with disability and are predictors of voting for Kerry). Table 5 also presents data on who nonvoters say they would have voted for, showing that nonvoters generally expressed a preference for Kerry over Bush, with a noteworthy 18 percent of people with disabilities and 16 percent of people

without disabilities saying they would have voted for some “other” candidate. This latter result probably reflects greater suspicion of the political system, including both established parties, among nonvoters. There are, however, no significant differences by disability status among nonvoters in their expressed preferences for candidates (but statistical power is limited by the small sample sizes of nonvoters).

Despite the slight preference for Kerry, Table 5 also shows that there were no significant differences in the likelihood that people with disabilities are Democrats or Republicans (in contrast to the findings of Gastil, 2000), or in their views of the Democratic and Republican Parties. They were, however, more likely to give “other” as their party affiliation (20 percent compared to 7 percent for nondisabled people). Consistent with the data on party membership and views, people with and without disabilities are also very similar in their distributions along a conservative–liberal scale. When these comparisons are probed with regressions, there are no significant differences between people with and without disabilities on any of these variables, which does not support H_2 . The bipartisan support for civil rights legislation and expanded employment opportunities for people with disabilities may have dissipated any historical advantage the Democratic Party has had as a champion of disadvantaged groups.

Views of Government and Politics

Do people with disabilities have different views of what government should be doing? Table 6 shows that people with disabilities prefer a greater role for government in general. In line with their low employment rates and the higher salience of healthcare for people with disabilities, they are more likely than people without disabilities to say it is the responsibility of government to provide a job for everyone who wants one, and provide healthcare for the sick, supporting H_3 . They also, however, are more likely to say that government has the responsibility to keep prices under control, provide industry with help to grow, give help to university students from low-income families, and provide decent housing for those who cannot afford it. When asked about government policies and spending, however, there are only two policies on which people with disabilities differ from nondisabled respondents: they are less likely to favor decreased government regulation of business (perhaps reflecting the perceived importance of the ADA and anti-discrimination legislation), and more likely to favor increased spending on healthcare (lines 13 and 18, Table 6). It is not clear why they are more likely to favor government responsibility in several areas, but not increased government spending. This may reflect a belief that government can often exercise responsibility without spending more money, such as by setting and enforcing rights and standards, or that the investment in such programs will result in efficiencies that do not increase spending overall. This may also reflect a lack of connection in respondents’

minds between a desire for increased government action and the revenue needed to implement these programs or policies.

There is a striking difference in views of civil liberties. People with disabilities are more likely to say revolutionaries should be allowed to hold public meetings and publish books, and less likely to say government should be allowed to detain people without trial, tap telephone conversations, or stop and search people at random to protect against a terrorist act. The higher priority given to civil liberties among people with disabilities may reflect their perspective as part of a marginalized group who have benefited from civil rights legislation.

Therefore, while people with disabilities do not identify as more liberal or supportive of Democrats, they are more willing to support civil liberties and government action in several areas. This may show some effect of self-interest, but it is not expressed as endorsement of any one party or ideology. Research has consistently found that predictions of self-interest guiding support for various political measures do not empirically bear out and instead that more abstract symbolic attitudes often guide individuals' political beliefs (Lau and Heldman, 2009). In their analyses of ANES data from 1972 to 2004, the exceptions to this theory were for people identifying as "permanently disabled," who were more willing to support public programs in alignment with their self-interest.

Perhaps surprisingly, Table 7 shows that people with disabilities are no different than those without disabilities in evaluations of the government's success in providing healthcare for the sick—this may reflect the widespread availability of Medicare and Medicaid among people with disabilities. They do, however, rate the government lower on fighting unemployment (line 5), which is consistent with the high unemployment levels of people with disabilities.¹⁷ Perceptions of overall government responsiveness (external efficacy) are lower among people with disabilities (line 7), with an especially large disability gap in agreeing that "most government officials can be trusted to do what is best." This is consistent with H₄ and past research (Schur et al., 2003), where it was suggested that pejorative messages received from public officials—especially among nonemployed people with disabilities—may discourage feelings of external efficacy (Schneider and Ingram, 1993).

Finally, we explore political interest, the effect of the Internet on politics, and perceived competence to participate in politics in Table 7, for which we do not have specific hypotheses. While the Maxwell poll indicates that people with disabilities are somewhat less likely to follow politics and public affairs, and the CPS data indicate they discuss politics less frequently, the GSS data do not show a significant difference in interest in politics (though the estimated sign is negative and may be significant in a larger sample). The Maxwell data show that people with disabilities are less likely to say that the

¹⁷ See <http://www.bls.gov/news.release/pdf/disabl.pdf>, accessed 11/7/11.

Internet has affected their own level of political activity (line 7).¹⁸ There are no significant differences in perceived competence to participate in politics, consistent with earlier findings that lower internal efficacy of people with disabilities is primarily due to their lower average level of education, and the disability gap disappears when controlling for education (Schur et al., 2003).

Conclusion

People with disabilities are less likely than those without disabilities to vote and engage in other forms of political activity. Analysis of the CPS samples for 2008 and 2010 confirms there is a substantial disability voting gap, indicating increased turnout of people with disabilities could make an important difference in elections. If the disability gap were fully closed, there would be an additional 3.0–3.2 million voters with disabilities.

How can the participation gap be closed? As noted, despite improvements over the last decade, many polling places are still not fully accessible. Such lack of accessibility directly hinders voting and also sends a negative message that people with disabilities are not expected to participate. Continued efforts to enforce the Help America Vote Act (HAVA) and require precincts to provide accessible voting machines should help improve voter turnout. In addition, as discussed by Tokaji and Colker (2007), barriers for people with disabilities exist in the absentee voting process, such as complicated ballots that are difficult for people with visual or cognitive impairments to read and understand, ballots that are difficult for people with fine motor impairments to fill out, and requirements to request an absentee ballot for each election. Efforts to simplify ballots, allow people to obtain permanent absentee voter status, and cast a secure ballot on-line may be especially useful for people with disabilities.

Improvements in education, employment, and social inclusion will also increase political participation. Much of the gap (about 40 percent) comes from the lower average education levels of people with disabilities. One encouraging trend is that the education gap has narrowed in the past 20 years as people with disabilities have increasingly been completing high school and attending college (Harris, 2010; Jolls, 2004).

Employment can increase political participation by increasing resources, opportunities for political recruitment, and feelings of efficacy and engagement, and it appears to have a particularly strong effect among people with disabilities (Schur et al., 2002; Schur and Kruse, 2000). Initiatives to increase employment among people with disabilities, such as the 2008 ADA Amend-

¹⁸It is of course possible that the differences found in following public affairs on a regular basis, and the effect of the Internet on one's political activity, are only randomly "significant" and not true differences (particularly when the 90 percent confidence level is used). The former result is, however, consistent with the very strongly significant difference in political discussions found in the CPS data (line 16), and the latter result is consistent with the digital divide found in Kaye (2000), supporting the idea that these represent true differences.

ments Act and other public and private policies discussed by the National Council on Disability (2007), may have the added benefit of increasing voter turnout and other forms of political participation.

Finally, continued efforts to increase social inclusion of people with disabilities in their communities, such as through more accessible public transportation and support for independent living, will expand their social networks and increase their information and recruitment for political activities.

While we did not find differences in general political attitudes or affiliations, people with disabilities tend to support a greater role for government in several areas, including healthcare and the economy. They also have more negative views of government performance in fighting unemployment (consistent with their low employment levels) and give lower ratings to government on responsiveness and trustworthiness, which may reflect negative messages and neglect from public officials (Schneider and Ingram, 1993). They are less likely than people without disabilities to say the Internet has affected their own political activity, perhaps reflecting a digital divide (Kaye, 2000).

While the conclusions are strengthened by the use of several data sets with broadly similar results, one limitation is that none of these data sets has a full set of the standard variables to measure resources, recruitment, and psychological variables. Prior research using data for 1998 and 2000 showed that these variables explained only part of the disability gap in voter turnout and political participation (Schur et al., 2002, Schur, 2003). The finding that voter turnout gaps remain as large in 2008 and 2010 as they were a decade earlier strongly suggests that disability continues to exert an independent effect, possibly due to the combined and interactive effects of polling place inaccessibility, social isolation, fewer economic resources, and perceptions that the political system is unresponsive.

While people with disabilities have made progress over the past several decades, their lower voter turnout and more negative views of government effectiveness and responsiveness lead us to conclude that they remain largely sidelined in American politics. It appears that much of this political inequality is not due to disability per se, but to economic and social inequalities associated with disability. Addressing the persistent barriers people with disabilities face and increasing their participation could make a difference in electoral outcomes and public policies, and help create a more vibrant and inclusive democracy.

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