Impairing the Vote: The Effect of State Election Policy on Disabled Voter Turnout

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Abstract

Prior disability research has failed to capture the nuanced nature of election turnout for individuals with disabilities. The current project investigates the impact of state electoral policies on the voting behavior of disabled individuals. Our findings suggest that individual electoral policies on their own do not significantly impact turnout.

Keywords: disability, voter turnout, state and local politics

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The study of disability community has been the focus of political scientists for some time, and yet the field has several areas that require further inquiry. With the most recent national election cycle taking place within the context of the global COVID-19 pandemic, we saw those with and without disabilities overlap in their desires more clearly than ever before; the massive public health concerns born of the pandemic led to many states issuing far more convenience voting measures for their citizens than previously allowed (Tang, et al., 2021, pp. 1001-1007), which begs the question: if these voting measures are possible on such a large scale, why are they not more widely available in times without global public health crises? And, which of these measures can be expected to yield higher voter participation?

One area in which these questions might be answered concerns the state-level policies that impact voter turnout. The majority of prior research has been conducted using national election data to find patterns in behavior among disabled individuals, notably with regard to political engagement and efficacy. These studies have provided insight into the awareness and viability of the disabled community, but the scope of these studies addresses patterns of the past and has offered less insight into how to further enfranchise the constituency of people with disabilities.

Avenues of Engagement

There are several forums within which citizens learn about and discuss political topics, which creates a social aspect of political engagement. People with disabilities are predisposed towards smaller social circles and a general exclusivity stemming from their individual impairments. People with disabilities often lack the social infrastructure to discuss

politics openly, and therefore have less incentive to stay informed on current political discourse; furthermore, lack of social contact has been linked to the depression of the disability voter turnout (Trevisan, 2020, p. 2). That said, Powell and Johnson (2019, p. 402) found that the depression of engagement and awareness among disabled voters is largely bounded by the traditional modes of political engagement—ergo, voting in elections. Beyond being disenfranchised by various barriers from the voting process, the engagement of eligible voter with disabilities tends to stay on pace—and even outpace on occasion—that of those without disabilities. The alternative forms of engagement utilized by those with disabilities to stay informed and heard reflect freedom of time and space; that is, there are fewer constraints on time of completion or location of participation that tend to be the barriers faced by disabled voters.

As noted by Schur et al. (2017, pp. 1380-86) as well as much prior research, the voter turnout among those with disabilities is significantly lower than voter registration or other forms of political engagement. These other forms of engagement span traditional methods of participation as well as technological adaptations such as online forums and message boards. Trevisan (2020) found that online political participation—on social media and in various interest groups—serves as a blessing and a curse for those reporting disabilities. On the one hand, platforms like YouTube allow for the disability community to produce informative content based on shared community interest in specific policy areas; on the other hand, the polarization of online information about current politics can result in significant mental and emotional distress (Trevisan, 2020, pp. 2-5). However, it appears that ease of access and the enhanced connectivity of internet-based engagement is preferable to those with disabilities.

Johnson and Powell (2019, p. 264) suggest that this preference might drive a renewed interest on the part of politicians in courting those with disabilities.

Partisanship

The Americans with Disabilities Act (ADA) resulted from bipartisan support in Congress; today, many of the protections therein have been eroded individually rather than repealed wholesale (Rothstein, 2019, p. 272). As this erosion takes place, citizens with disabilities are left out of the discussion because they do not form a cohesive constituency. According to recent reports by the Pew Research Center, a factor that further compounds this cycle is the intersectionality that comes with the disability demographic. Prior studies tend to agree that disability is not a unifying political force and that people with disabilities operate in ways that would be predicted by their other demographic information. That is to say, people with disabilities trend in ways similar to those of the United States population as a whole (Igielnik, 2016). Per recent data from the U.S. Census Bureau, 12.7% of people living in the United States identify as living with some form of disability (2021). This means that one in every eight people in the United States is a member of this particular disenfranchised group. With such a substantial portion of the population being an identified member of this group, politicians from both major parties are starting to take notice.

When conceptualized in a vacuum, the expectation is often that disabled voters skew Democrat because of that party's support for social support programs, such as universal mailin voting, that would benefit a constituency of people with disabilities. Online engagement targeted at disabled populations has been embraced by many candidates, particularly Democrats, in an attempt to mobilize that untapped voter market (Trevisan, 2019, p. 1593). Online outreach of this kind, however, has been largely ineffective. Most of these attempts and the literature that recounts them focuses on supply—i.e., what the policy makers are willing to give rather than on the demand of the disabled, which would be what they actually seek from lawmakers. It is in this misperception of disability and the resultant needs that

many measures to address lower voter turnout have failed.

Advocacy & Understanding

Popular support has been on the rise for many measures that would enfranchise the electorate. Support for reform has been strong and rising from 2008 through 2016, with a growing majority of respondents to the Survey on the Performance of American Elections (SPAE) seeking convenience reforms (Bowler & Donovan, 2018, pp. 976-977). As Trevisan (2019, p. 1596) states, "people with disabilities are a group that is relevant to candidates from any party. Despite a widespread belief that people with disabilities vote Democrat, political ideology, and party identification trends among Americans with disabilities are similar to those for nondisabled Americans." Partisanship among people with disabilities is something that has been lagging in research, possibly due to the popular assumption that disability communities lean Democrat (Gastil, 2000, p. 589). This is in line with research suggesting individuals with disabilities are notably hard to pin to one party ideology (Powell and Johnson, 2019, p. 403). While disability is a factor that impacts daily life for those living with it, the diverse set of causes and effects for disabilities overall make it hard to unify disabled voters as a single voting bloc. Spagnuolo and Shanouda (2017) mention this diversity of disability by calling attention to the "major divisions within disability communities and organizations...[to] include people with chronic illnesses, disabled immigrants and refugees, people labeled with an intellectual disability, disabled people with invisible impairments, Mad people, racialized disabled people, and institutionalized people, among others." While disability has been shown to lack a unified identity and political goal, some advocacy movements still argue for the administration of unilateral fixes to disability issues (Spagnuolo & Shanouda, 2017); this singular approach then poses yet another problem for disabled voices: it paints a diverse group as homogenous. In the face of this, self-advocacy among

those with disabilities is on the rise. This comes hand-in-hand with new conceptualizations of disability community dynamics and culture.

Models for social understanding, i.e., widely accepted beliefs about capability or incapability, underpin nearly every aspect of daily life for those with and without disabilities. However, the former tend to be the subject of generalization more often than not. The current model often conflates disability with inability. In reference to these conflations, Spagnuolo and Shanouda (2017, p. 705) state "[current policies] make issues of access an individual rather than social problem; inaccessibility comes to signify an individual's inability to participate, rather than the effects of faulty social arrangements." According to Morgan (2021), the current models of understanding disabled persons view them in the individual context while models proposed to improve the status quo view them in a sociopolitical context. The difference is that the former takes a disabled person to be operating at a disadvantage in a non-biased system of denotations whereas the latter insists that a disabled person operates in a functionally different manner within a system of connotations (pp. 1406-8). In the current system of understanding disability, issues are arising from all the traditional barriers to access, and yet the options for addressing these inconveniences for disabled voters are widespread. Absentee voters who are overseas or are serving in the military are offered significant time concessions to allow for their ballots to be cast and counted. Online tools and requests are allowed for multiple options, but in most states disability is not an accepted reason for those concessions (Belt, 2016, pp. 1506-9).

Remedies

Efforts for reforming the election process in the United States may be rising due to popular demand, but the support for that movement is heavily influenced by partisanship.

Voter ID laws are a prime example, with partisanship heavily influencing how the status quo

is perceived. In this case, it can be seen that convenience is supported by Democrats and resisted by Republicans. However, disabled voters tend to find ways to vote that are not impacted by voter ID in the same way (Bowler & Donovan, 2018, p. 973). Much of this support or lack thereof comes from voters and political actors on behalf of disabled people rather than from amongst that community. This, too, becomes an issue of whose voice is being heard on the issues facing individuals with disabilities. Bagenstos (2020, p. 1341) says it is integral to the enhanced understanding of disability among the populace that voters with disability participate in state and local elections because it is through cooperation toward shared goals that the alienating stigma and policies can begin to break down.

This then leads to the question of how to address the barriers that create the disability voting gap. In some prior studies, convenience voting reforms intent upon reducing the costs for disabled voters to participate are found to have low to no positive effects on turnout.

Thus, consideration of supply and demand for disabled voters is raised once more (Miller & Powell, 2015, pp. 47-48). The issue that arises from these middling positive effects again comes back to where these "fixes" came from. However, the literature leans more towards soft support for such convenience reforms. According to Tang et al., voting by mail is a viable path for people with disabilities to increase rates of democratic participation (2021, pp. 1005-7). Absentee voting is available in all 50 states, though restrictions and guidelines governing that practice vary widely throughout these jurisdictions (National Conference of State Legislatures, 2020). In an election year that found the United States in the grips of a global pandemic, absentee voting became increasingly considered a necessity. According to Miller and Powell, mail-in ballots make up a sizable portion of disabled voting across physical impairments and pan-disability types (deaf, blind, mental impairment, etc.) and the results show that the likelihood of voting decreases with disability, and likelihood of voting

by mail increases with disability (2015, p. 42).

The extension of absentee and mail-in ballot options to a larger portion of the population, particularly those who find physical barriers to voting access in standard polling places, is a recommended course of action, per a joint report from the American Civil Liberties Union and the National Disability Rights Network (2020, pp. 4-5). These methods of voting were extended in several states during the 2020 election because of public health concerns about the COVID-19. In those states, there was a marked increase in disability voter turnout (Tang et al., 2021, pp.1001-7; Schur & Kruse, 2021, pp. 9-11). This closing of the disability gap, albeit achieved in a time of crisis, is further proof for many that the disability gap is not a function of individual disinterest but rather of institutional obstacles. People with disabilities are not an untapped minority group that could only be engaged by one political party. It is a diverse group of voters numbering in the millions who could be incorporated into the democratic process (Schur & Adya, 2012, p. 836).

Compounding Factors

The disability turnout gap is a function of many interlaced factors. Beyond state-level policies in voting administration, disparities in education are among these indicators of turnout by people with disabilities. While education has improved for those with disabilities over the last two decades, research shows the inordinate influence of education on the disability turnout gap—nearly 40%—at the national level (Schur & Adya, 2012, pp. 836-7). Of further concern are the current allowances for mental health aides for those who fall into the mental disability category. Many instances of voting assistance, which would otherwise be election fraud, have been cited by critics as arguments against further expansion of election accessibility (Hoerner, 2015, pp. 117-8). However, Schur and Kruse point out that significantly fewer voters with disabilities reported needing or using allowed assistance in

their chosen method of voting for the 2020 elections (2021b, p. 9). This decrease in election assistance use does not mean that those with disabilities has been fully incorporated. As Ward et al. (2009, p. 81) illustrate, people with disabilities are not a monolith, and some portions of this broad demographic are further incorporated and engaged than others. Schur and Adya (2012, p. 837) concluded that the political inequality of those with disabilities does not arise from disability but rather from the inequalities baked into economic and social structures that pose barriers to people with disabilities. That is to say, institutional obstacles create conditions for lack of engagement.

Hoerner references the Elections Assistance Commission in discussion of voter education, relaying the emphasis that commission places on informing the mentally disabled about elections in ways that are accessible to them (2015, p. 124). This approach is echoed in the research done on the pathic and social models for disability by Reynolds and Kiuppis (2018, pp. 564-5), who found that the differing language and concepts used in referring to those with disabilities ought to be evaluated on their effectiveness for the subdivision they were meant to address rather than by application to the broad and diverse category of disability on the whole. There is in this finding a call for more depth and diverse consideration among researchers of disability, perhaps even specializations in specific subcategories that could be better expected to have a unified vision of desired assistance. Trevisan (2019, p. 1602) agrees with this in his discussion of online engagement, stating that the differing degrees and functions of disability require different measures to address their specific barriers to entry. The diversity of disability is so vast in scope and externalization that taking this group as a whole for considerations of amelioration may be the flaw holding back full incorporation of voters with disabilities. It should also be noted, as Powell and Johnson point out (2019, p. 406), that surveys of disabled individuals often do not penetrate

institutions in which those with the most socially stigmatized disability characteristics are housed. Furthermore, it must be taken into consideration that the gravity of elections and the potential obstacles to participation have a real effect on psychological state (Johnson & Powell, 2020, p. 266). Excessively negative experiences with the voting process run the risk of deepening the divide in voter turnout. However, in the 2020 election, voters with disabilities were more likely than those without disabilities to report a positive experience with election officials (Schur & Kruse, 2021b, p. 11).

Current Project

Across the wide array of prior research, several key similarities have arisen.

Bagenstos (2020, p. 1340) outlines the increase in perceived efficacy among disabled voters as the scale of elections moves from national to state levels. Following from this increased efficacy is the assumption of greater participation. Using policy data from The National Conference of State Legislatures (NCSL), we seek to take state-level election policies into consideration with hopes of finding out which measures help and which hinder political incorporation of disabled individuals. The level of healthcare coverage in individual states is another marker of institutionalization that should be considered in the context of disability turnout. Using healthcare data from the Centers for Disease Control (CDC), we analyze the possible relationship between state-level healthcare coverage and voter turnout. Finally, education has been used as a predictor for voter turnout among the broader population, as well as those with disabilities. For this reason, we examine the connection between education levels and voter turnout in individual states, using data from concomitant data from the CDC. These variables are investigated as predictors of 2020 turnout data for voters with and without disabilities compiled by Schur and Kruse (2021a, pp. 9-10).

Hypotheses

This project considered how a variety of state-level policies affected voter turnout. Specifically, we investigated the relationships between turnout, both among those with and without disabilities, and election regulations related to same-day registration, early voting, mail-in/absentee voting, and voter identification policies.

H1: The accessibility of mail-in and absentee ballots has a significant impact on participatory behavior for all types of individuals. Here, we expected to observe a positive relationship between convenience voting measures and turnout among those with disabilities. In contrast, we expected more restrictive voter identification laws should result in depressed turnout for disabled individuals.

H2: Because voting in person sometimes presents significant difficulties for people with disabilities, same-day registration and early voting policies were expected to have a muted—or even non-significant—effect on disabled turnout. In addition to these convenience measures, we also considered the impact of two other state-level factors—education and healthcare coverage—to ascertain how those play into the voter turnout.

H3: A healthy democratic system requires an electorate healthy enough to participate in it. Therefore, we expected that states with greater healthcare coverage would also see increased levels of voter turnout, both with regard to those with and without disabilities.

H4: Although educational attainment is commonly used as a predictor of voter participation, research shows typically lower levels of education among those with disabilities. As such, we expected to observe that lower state-level education rates correlated with lower turnout among those with and without disabilities.

Data and Methodology

Our analyses used data from the National Conference of State Legislatures (NCSL) and the Centers for Disease Control (CDC). Independent variables included those state-level election policies previously discussed (e.g., same-day registration, early voting, mail-in/absentee voting, and the restrictiveness of voter identification policies). See Appendix B for details on how each variable was coded. Dependent variables in this analysis included voter turnout among disabled and non-disabled populations in 2020. These numbers represented the raw percent of voters either reporting or not reporting a disability (Appendix A). State demographics, such as percent of the population aged 65+, percent with a high school diploma, percent with healthcare coverage, percent White, and partisanship of the governor (1= Democrat, 0= Republican), served as control variables within our multivariate analyses. To investigate Hypotheses 3 and 4, our later models treat healthcare coverage and educational attainment as predictor variables rather than controls.

Results

In a recent analysis, Schur and Kruse (2021a) outline the changes to the gap in voter turnout rates between the disabled and non-disabled populations for the national elections in 2016 and 2020. According to their data (Appendix A), the overall voter gap between those with and without disabilities did decrease by about 0.8% across that term. The key for the data representation shows a range of gap change between -12.5% and +11.5%; therefore, significant decreases and increases to the gaps exist across the various states. Due to the vast differences across states, the national average hovers at nearly zero. This represents the current problem with studying disability as a variable in the election process: national data tend to wash out or negate actual changes. Using state-level data will allow for greater depth of analysis, which should help determine which factors offer the greatest potential for closing

the gap even further. From these data at the state level, comparisons and correlations will be made for several state-level election policies as well as the aforementioned factors such as healthcare and education. Furthermore, when considering voter turnout rates for those with disabilities, it becomes necessary to compare those rates with the voter turnout among those without disabilities. Historically, this comparison does present a noticeable gap in participation with disabled voters showing up at lower rates.

Mail-in Ballots and Voter Identification

In 2020, the bulk of states allowed for no excuse absentee ballot access (Figure 1), whereas only five states automatically mailed voters absentee ballots. As noted in H1, the expectation was that accessibility of mail-in and absentee voting would result in higher turnout, while more restrictive voter identification laws were expected to result in depressed turnout for the individuals reporting a disability. The results offer several observations about how these convenience measures affect voter participation. Critically, states with automatic ballots—as opposed to those requiring excuses and request— are more likely to see greater disabled turnout (p= 0.023). The same is true for non-disabled individuals (p = 0.078) but with marginally significant effects. Putting this into context, several states send out absentee/mail-in ballots to every registered voter, regardless of whether they are requested; this circumnavigates the physical obstructions of polling places and the cognitive obstructions of finding out mail-in voting regulations (which are often hard to locate and harder to understand). Both physical and cognitive obstructions are regularly cited by persons with disabilities as reasons for not participating in elections.

Additionally, we observed that voter ID laws have no effect on turnout among those without disabilities (p=0.107) but do affect turnout among those with disabilities (p=0.055). Therefore, more lenient voter identification laws directly relate to greater disabled turnout.

This result follows the same tendency as the one mentioned: fewer administrative hoops to jump through is directly related to higher participation among individuals with disabilities.

This tends to make sense for voter engagement in general, but worthy of note here is the fact that such gains in turnout were not felt by those not reporting a disability to any significant degree.

Table 1: Effect of Mail-in Access and Voter ID Leniency on Voter Turnout

	Bivari	ate Models	Multivariate Models			
Predictors	Disability	No Disability	Disability	No Disability		
Mail-in/Absentee Access	0.023*	0.078	0.107	0.308		
Voter ID Leniency	0.055	0.107	0.996	0.543		

Note: Analyses reflect unstandardized beta coefficients from four separate regression models. The dependent variable in each model is 2020 voter turnout percentages by individuals with and without disabilities. Full models control for the following state-level demographics: % aged 65+, % high school graduate, % healthcare coverage, % white, and governor's partisan affiliation. *p < 0.05, **p < 0.01

However, consideration of a group that blurs traditional lines like the disability community requires controls for demographic factors such as race, education, partisanship of state governments, age, and healthcare coverage. When these factors were considered, there was no significant relationship found between either mail-in/absentee voting access (p= 0.107) or voter identification laws (p= 0.996) with the participation of disabled voters in the 2020 elections. Similarly, those without a disability showed no significant connection between turnout and mail-in/absentee voting (p= 0.308) or voter identification laws (p= 0.543). The null hypothesis cannot be rejected in this case; thus, we do not find meaningful support for either tenet of Hypothesis 1 in our analysis of the current data. The voter gap between individual with and without disabilities is therefore not explained by either of these state-level factors.

Same Day Registration and Early Voting

As noted in H2, we expected same-day registration and early voting to have less—if any—correlation to increased voter turnout due to the continued presence of physical and cognitive obstacles for people with varied disability externalities. To begin with analysis of early voting, the data would indicate no differential effect on turnout between the populations with and without disabilities (p= 0.740 and p= 0.600, respectively). As predicted then, early voting shows a significantly smaller degree of influence over voter turnout. Considering same day registration allowances, this option boosts turnout among those without a disability (p= 0.032) but has only marginal (p= 0.082) effects for disabled voters. Thus, same day registration shows itself as a minimal factor in determining the participation of disabled voters. In context, this follows the same inclination as the factors considered in H1: the continuity of barriers to entry from traditional to convenience voting options tends to prevent uptake of voting by those means. Essentially, same day registration still requires that disabled voters deal with the long lines and other accessibility issues of polling places, while early voting only differs from traditional voting in its time of access. Neither of these measures enables disabled voters to meaningfully surpass the traditional barriers they face.

Table 2: Effect of Same day Registration and Early Voting on Voter Turnout

	Bivari	ate Models	Full Models		
Predictors	Disability	No Disability	Disability	No Disability	
Same Day Registration	0.082	0.032*	0.497	0.131	
Early Voting	0.600	0.740	0.634	0.105	

Note: Analyses reflect unstandardized beta coefficients from four separate regression models. The dependent variable in each model is 2020 voter turnout percentages by individuals with and without disabilities. Full models control for the following state-level demographics: % aged 65+, % high school graduate, % healthcare coverage, % white, and governor's partisan affiliation. *p < 0.05, **p < 0.01

When adjusted for the same demographic factors, the current project found that early

voting remains without support as a factor for predicting turnout for either population—disability (p= 0.634) and no disability (p= 0.105). As for same day registration, a similar pattern came up in the analyses. Same day registration showed no connection to turnout among those with (p= 0.497) or without a disability (p= 0.131), when models took demographics into account. As assumed by H2, neither factor carries significant weight in predicting the engagement of disabled individuals. Furthermore, neither factor seems to impact the turnout of those without disabilities either. Thus, neither consideration offers a determination for the source of the voter turnout gap in 2020.

Education and Healthcare Coverage

As noted in H3 and H4, the expectation of the current project was that an increased level of access to different forms of disability inclusion—like education and healthcare—within individual states would result in higher turnout rates among those with disabilities. Initial models do display a positive connection between state-level healthcare coverage and disabled voter turnout (p= 0.013). The indicators for higher education are less robust, showing that education on its own does not predict for higher disability turnout (p= 0.097). Thus, healthcare appears to be a much more valuable indicator of disability inclusion than education. Where education and healthcare are concerned, both were taken to be indicators for the inclusivity of a state toward its disabled population; considering the direct connection between disability as a recognized status and medical diagnoses, it makes greater sense that healthcare would be the stronger signifier of disability inclusion than education (a field in which addresses for disabilities are still being developed at the earliest stages).

Table 3: Effect of Healthcare Coverage and Educational Attainment on Turnout

	Bivariate	Models	Full Models		
Predictors	Disability	No Disability	Disability	No Disability 0.173	
Healthcare	0.097	0.362*	0.142		
Education	0.013*	-0.343	0.151	0.064	

Note: Analyses reflect unstandardized beta coefficients from four separate regression models. The dependent variable in each model is 2020 voter turnout percentages by individuals with and without disabilities. Full models control for the following state-level demographics: % aged 65+, % high school graduate (only for healthcare model), % healthcare coverage (only for education model), % white, and governor's partisan affiliation. *p < 0.05, **p < 0.01

However, full models adjusted for demographics and state controls paint a less deterministic picture. Where disabled individuals are concerned, there does not appear to be any significant relationship between turnout and either hypothetical inclusion metric, healthcare coverage (p=0.142) or education level (p=0.151). For those without a disability, there is one notable difference: education level (p=0.064) appears to possess at least marginal connection to turnout, whereas healthcare coverage (p=0.173) appears to have no significant bearing on turnout. States with greater turnout among disabled individuals also tend to have a greater proportion of the population with high school education levels (Figure 2). Notable outliers within this sample are Washington, D.C., with 80% disabled turnout and only 50% high school education rates, as well as Arkansas, with only 48% disabled turnout despite 70% high school education rates. In context, this makes some sense as we often take education to be a signifier of voting likelihood. Yet, disabled individuals appear to miss out on this guarantee of greater engagement. The notable throughline for the full models was the significant effect on turnout for both populations by membership to the 65+ age bracket: disabled (p= 0.005) and no disability (p= 0.004) turnout were both inversely related to the portion of the electorate comprised of that age demographic. This appears contrary to the

conventional political wisdom that elderly people vote at higher rates than do younger people.

Conclusion

Taken as a whole, our results seem to offer more questions than answers in reference to state-level policy effects on voter turnout. The hypotheses presented at the origin of the current project appear to fail in their attempts to discern causes for the discussed voter participation gap. The variables studied in all hypotheses—mail-in access, voter ID laws, same-day registration, early voting, healthcare coverage, and educational attainment—did not present significant results in regression models. The null hypotheses, therefore, cannot be rejected in any of the considered cases; thus, we do not find meaningful support for any hypothesis in our analysis of the current data. The voter gap between those with and without disabilities is therefore not explained by these state-level factors alone.

Future research in this regard should consider the potential coexistence of historically influential factors such as income brackets, perceived political efficacy, non-voting forms of political engagement, and partisanship of voters. The leading sources of this type of data would include American National Election Study (ANES) and Cooperative Congressional Election Study (CCES) surveys; the current limitations of those sources are scopes of questions asked, which do not tend to focus heavily on disability as a voter demographic category. Similarly, the limitations of the current project result from the areas of focus and the level of analyses. Considering the impacts of state-level policies and factors resulted in the necessary exclusion of individual level factors like those mentioned. There is exciting potential for future marriage of these two levels of disability study, pending the expansion of disability-focused data collection on a national scale.

The current study did account for the partisan alignment of state governments leveraged against the causality of each independent variable; however, this version of

partisan consideration is limited to too broad a category. As mentioned, consideration of individual partisanship alongside the state-level factors considered here might provide a better picture of how those factors relate to individual political behavior. Furthermore, consideration must be made for the unique nature of the 2020 election amidst a global pandemic that shut down much of the country during the election; decreased mobility of the public during enforced quarantines coupled with significant accommodations being made in the mail-in/absentee voting space across many states stand to impact the operant validity of those data. Future consideration of convenience voting measures such as those taken by the current project might be more successful in focusing on a specific policy and analyzing historic connection between that policy and election participation.

Overall, the current project presents the community of disability studies—and the larger political science community—with direction for future scholarship. State-level considerations are a category that has gone underrepresented in political science scholarship, likely because individual-level data is much more accessible on the national scale.

Extrapolation of state-level factors from available datasets creates the opportunity for further study of how institutions and their realms of sovereignty impact individual behavior. The value added by the results of the current project is the recognition that those institutional factors are not sole causes for heretofore unexplained phenomena. No single state-level policy meaningfully determines disabled turnout, just as prior scholarship has found that no single individual-level factor determines such engagement. Yet as the population of voters with disabilities continues to grow, we believe scholarly research will likewise expand its scope to more fully understand the dynamics of this valuable portion of the electorate.

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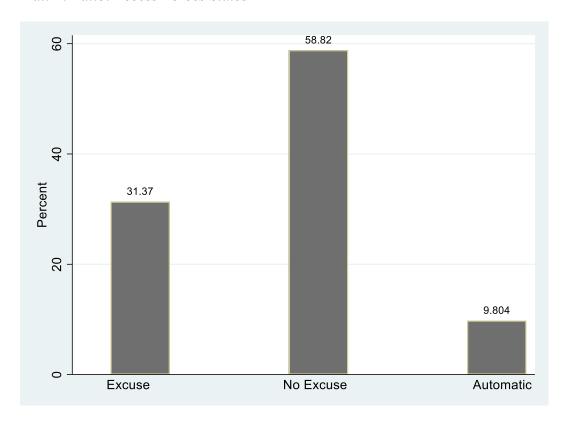
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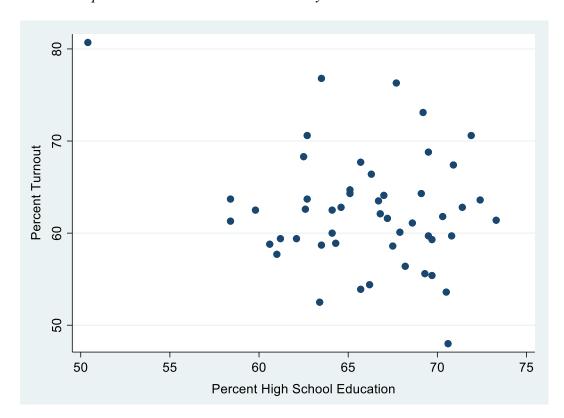
Figure 1

Mail In Ballot Access Across States



Note: In 2020 the bulk of states allowed for no excuse absentee ballot access, whereas only five states automatically mailed voters absentee ballots.

Figure 2Relationship Between Education and Disability Turnout in 2020



Note: States with greater turnout among disabled individuals also tend to have a greater proportion of the population with high school education levels.

Appendix A

Full Data Set for Voter Turnout and Participation Changes

Voter Turnout by State, Disability Status, and Year

State	DT2016	DT2020	DT Change	WT2016	WT2020	WT Change	2016 Gap	2020 Gap	Gap Change
Alabama	47.4	52.5	5.1	59.4	61.8	2.4	12.0	9.3	-2.7
Alaska	60.1	55.6	-4.5	61.5	64.9	3.4	1.4	9.3	7.9
Arizona	66.2	76.8	10.6	59.6	71.3	11.7	-6.6	-5.5	1.1
Arkansas	51.2	48.0	-3.2	60.1	55.1	-5.0	8.9	7.1	-1.8
California	52.3	58.8	6.5	58.6	65.9	7.3	6.3	7.1	0.8
Colorado	69.0	66.4	-2.6	69.5	67.7	-1.8	0.5	1.3	0.8
Connecticut	65.0	63.7	-1.3	63.8	67.0	3.2	-1.2	3.3	4.5
Delaware	53.0	58.6	5.6	63.5	68.9	5.4	10.5	10.3	-0.2
Florida	58.9	61.6	2.7	59.5	62.2	2.7	0.6	0.6	0.0
Georgia	57.8	62.8	5.0	60.6	66.4	5.8	2.8	3.6	0.8
Hawaii	54.1	61.1	7.0	46.3	64.8	18.5	-7.8	3.7	11.5
Idaho	65.1	59.7	-5.4	61.6	65.8	4.2	-3.5	6.1	9.6
Illinois	65.8	64.3	-1.5	63.5	68.9	5.4	-2.3	4.6	6.9
Indiana	49.4	59.3	9.9	59.7	61.2	1.5	10.3	1.9	-8.4
lowa	56.1	67.4	11.3	64.7	70.9	6.2	8.6	3.5	-5.1
Kansas	53.0	58.7	5.7	62.9	66.8	3.9	9.9	8.1	-1.8
Kentucky	42.5	64.1	21.6	60.2	69.5	9.3	17.7	5.4	-12.3
Louisiana	48.2	57.7	9.5	64.0	62.6	-1.4	15.8	4.9	-10.9
Maine	68.2	68.8	0.6	73.5	71.9	-1.6	5.3	3.1	-2.2
Maryland	60.4	59.4	-1.0	66.4	75.1	8.7	6.0	15.7	9.7
Massachusetts	59.6	63.7	4.1	67.6	66.7	-0.9	8.0	3.0	-5.0
Michigan	63.7	60.1	-3.6	64.4	68.0	3.6	0.7	7.9	7.2
Minnesota	58.7	76.3	17.6	69.9	78.0	8.1	11.2	1.7	-9.5
Mississippi	63.2	62.6	-0.6	68.6	71.8	3.2	5.4	9.2	3.8
Missouri	55.9	62.1	6.2	66.2	67.7	1.5	10.3	5.6	-4.7
Montana	67.0	70.6	3.6	65.7	73.9	8.2	-1.3	3.3	4.6
Nebraska	70.4	62.8	-7.6	66.2	65.5	-0.7	-4.2	2.7	6.9

Texas	51.5	59.4	7.9	55.9	64.5	8.6	4.4	5.1	0.7
Utah	63.3	56.4	-6.9	62.6	64.4	1.8	-0.7	8.0	8.7
Vermont	57.6	67.7	10.1	63.2	68.5	5.3	5.6	0.8	-4.8
Virginia	57.4	68.3	10.9	69.5	71.9	2.4	12.1	3.6	-8.5
Washington	62.5	63.5	1.0	66.8	72.9	6.1	4.3	9.4	5.1
Washington, D.C.	60.0	80.7	20.7	76.1	84.3	8.2	16.1	3.6	-12.5
West Virginia	45.9	53.6	7.7	52.0	56.6	4.6	6.1	3.0	-3.1
Wisconsin	63.9	63.6	-0.3	71.6	75.0	3.4	7.7	11.4	3.7
Wyoming	54.5	61.4	6.9	66.1	66.2	0.1	11.6	4.8	-6.8
National Average	57.3	62.6	5.3	63.3	67.8	4.5	6.0	5.2	-0.8

Source: Schur & Kruse, 2021a; **DT—Disability Turnout, WT—Without Disability Turnout

Appendix B

Coding of Independent Variables

Mail In Access

Coding: 1=excuse required, 2=no excuse required, 3=automatic mailed ballots to all voters

Same Day Registration

Coding: 1=no same day registration, 2= same day registration only during early voting, 3= same day registration even on Election Day

Early Voting

Coding: 1=no early voting, 2=in-person absentee*, 3=Early voting allowed, 4=in-person or mail-in early voting

*Considered more restrictive because it requires extra steps for access, both in-person absentee voting and early voting take place at physical polling place

Voter ID Laws

Coding: 1=strict photo ID; 2=strict non-photo ID*; 3=photo ID requested; 4=ID requested, photo not required; 5=No document required to vote

*proof of address and/or residency required, but not specific to photo ID

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