

Positive Disability Identity Predicts Sense of Belonging in Emerging Adults With a Disability

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ABSTRACT. Given the importance of identity development and belonging for emerging adults, it is critical to examine how positive disability identity, one's affirmative sense of identity as a person with a disability, relates to sense of belonging and need to belong in young adults with disabilities. Data were collected from a multi-institution collaboration across 32 sites. Participants with a disability ($N = 502$) completed online, self-report measures of need to belong, sense of belonging, social support, and positive disability identity. As expected, those who perceived greater social support were more likely to report a sense of belonging (r ranged from .36 to .55, $p < .05$) and positive disability identity (r ranged from .18 to .41, $p < .05$). Positive disability identity was more strongly related to sense of belonging in those who self-identify with a disability ($z = 4.16$, $p < .001$, Cohen's $q = .40$). Also as hypothesized, positive disability identity predicted sense of belonging, even after controlling for the effects of social support and need to belong, in both those who identified with a disability ($R^2\Delta = .12$, Cohens $f^2 = .14$) and those who did not self-identify ($R^2\Delta = .02$, Cohens $f^2 = .02$). These findings suggest that, although social support and a low need to belong were associated with a strong sense of belonging, developing a positive disability identity is also important in predicting a sense of belonging in emerging adults with disabilities.



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According to the World Health Organization (2011), about 15% of people worldwide experience some form of disability including impairments, activity limitations, and participation restrictions. Psychological models of disability have historically focused on disability as a deficit to be overcome (see Schulz, 2009, for a review). However, psychologists have called for a shift toward a social model of disability, which emphasizes the role of society and the environment in defining and perpetuating disability (American Psychological Association, 2012; Olkin & Pledger, 2003). According to the social model of disability,

the stigma experienced by those with a disability render them a socially marginalized group (Olkin & Pledger, 2003). Emerging adults' experience of the social meaning of their disability is likely impacted by whether they claim disability status as part of their identity (Shakespeare, 1996). Research on young adults with disabilities has suggested that many do not self-identify as a person with a disability. Despite using recruitment materials mentioning disability, Nario-Redmond, Noel, and Fern (2013) found that 7 to 18% of their samples identified as "nondisabled or able-bodied." Researchers using recruitment methods with no mention of disability found that

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73% of emerging adults with a disability did not self-identify as “disabled” (Chalk, 2016). These data suggest that a substantial portion of emerging adults with a disability do not self-identify as a person with a disability, and therefore, are often excluded from disability research. The social meaning of disability is also likely related to participants’ level of positive disability identity, which refers to maintaining a positive view of oneself as a person with a disability (Bolton & Brookings, 1998). To assess positive disability identity in all emerging adults with a disability regardless of self-identification, we assessed disability variables in a sample of emerging adults recruited without priming the concept of disability.

Emerging adulthood is defined as the period between ages 18 and 25 when individuals do not fully identify as adults but feel as though they have reached some markers of adulthood (Arnett, 2000). This time frame is considered to be an influential individual growth period. However, social factors may influence some of this expression (Arnett, 2000). As Erikson (1968) outlined, establishing a sense of belonging is central for the psychosocial development of young adults. Although many definitions exist, a sense of belonging has been defined as a feeling that one is an integral part of a system or “experiencing a fit between one’s self and others around him/her” (p.173; Hagerty, Lynch-Sauer, Patusky, Bouwsema, & Collier, 1992). Baumeister & Leary (1995) referred to belonging as having lasting, positive, and significant interpersonal relationships. Despite the importance of belonging for young adults, research has suggested that young adults with a disability experience barriers to feelings of belonging. Studies of emerging adults with a disability have suggested that most young adults with disabilities experienced rejection by peers during school (Chen & Shu, 2012; Salmon, 2013). Young adults with disabilities reported more feelings of social rejection and a lower sense of belonging than peers without a disability (Bramston, Bruggerman, & Pretty, 2002; Hall, 2004). Most psychology trainees with disabilities also reported experiencing disability-related discrimination during their professional training (Lund, Andrews, & Holt, 2013).

A low sense of belonging in emerging adults with a disability is concerning, because among emerging adults with no disability, one’s sense of belonging has been linked with positive psychological and physical outcomes (Begen & Turner-Cobb, 2015). In college undergraduates, a strong sense of

belonging has been linked to academic motivation, self-efficacy, and improved mental health (Freeman, Anderman, & Jansen, 2007; Stebleton, Soria, & Huesman, 2014). Researchers have also identified potential negative effects of not belonging because social isolation predicted lower subjective well-being in emerging adults with a disability (Yurkevitch, Berslav, & Araten-Bergman, 2015). Given the positive outcomes associated with sense of belonging, it is important to investigate the variables that predict a sense of belonging in emerging adults with a disability.

Vaccaro, Daly-Cano, and Newman (2015) proposed a model of belonging for emerging adults with disabilities, which suggests that social relationships are important in developing a sense of belonging. Based on this model, it was expected that emerging adults with more social support would experience a greater sense of belonging. Some young adults with disabilities reported experiencing a sense of belonging with peers with disabilities, based on their shared experience of stigma (Salmon, 2013). However, social support from those outside the disability community seems to predict a sense of belonging as well. Secondary school students with disabilities who had more social support from teachers, coaches, and counselors reported a greater sense of belonging compared to peers (McMahon, Parnes, Keys, & Viola, 2008). In college students, participation in extracurricular activities such as campus sports, clubs/organizations, as well as faculty relationships significantly contributed to a sense of campus belonging for students with a disability (Doubt & McColl, 2003; Jones, Brown, Keys, & Salzer, 2015). College students identified having support from staff and fellow students as the primary resources for their success (Graham-Smith & Lafatette, 2004; O’Keeffe, 2013). In emerging adult women with disabilities, peer support groups have been effective for fostering a positive sense of belonging (Mejias, Gill, & Shpigelman, 2014). These findings all suggest that social support is positively related to a sense of belonging for emerging adults with disabilities.

Distinctive from the concept of sense of belonging, the need to belong refers to one’s need to form and maintain lasting, positive interpersonal relationships (Baumeister & Leary, 1995). No research has addressed the need to belong in emerging adults with disabilities specifically. However, some research on emerging adults suggests that the need to belong is associated with increased loneliness

and poor health outcomes (Hartung & Renner, 2014). A strong need to belong in emerging adults has also been associated with low life satisfaction and a weaker sense of belonging (Pillow, Malone, & Hale, 2015). Similar patterns emerge in adults; a high need to belong has been linked to loneliness and poor relationship satisfaction (Mellor, Stokes, Firth, Hayashi, & Cummins, 2008). However, other studies with adults have found that one's need to belong does not predict the frequency or severity of health outcomes (Knack, Iyer, & Jensen-Campbell, 2012). The inverse relationship between sense of belonging and need to belong in the literature suggests that the need to belong in emerging adults with disabilities will likely be related to a lower sense of belonging.

Although few studies exist in this area, patterns in the literature suggest that sense of belonging may be related to positive disability identity, or one's positive sense of identity as a person with a disability (Bolton & Brookings, 1998). In a sample of women with varied disabilities including mobility, visual, intellectual, and speech impairments, those who reported more positive disability identity also experienced a greater sense of belonging (Meijas et al., 2014). A study of disability narratives suggested that having positive disability identity promotes a strong connection to the disability community (Dunn & Burcaw, 2013). These findings suggest that positive disability identity may be related to a stronger sense of belonging. However, the qualitative nature of the study precluded generalizing to all emerging adults with a disability. Conversely, one study found that sense of belonging could be associated with less positive disability identity because emerging adults with disabilities in this study derived their sense of belonging from shared disability-related difficulties (Ville, Crost, & Ravaud, 2003). Despite this discrepant finding, the majority of the literature, as well as theories of disability identity, suggest that positive disability identity should be related to an increased sense of belonging in emerging adults with disabilities.

The empirical literature examining the need to belong, the need to form lasting positive interpersonal relationships, is also limited. Baumeister and Leary (1995) proposed that those who have a high need to belong are more likely to emphasize the social aspects of their identities. This suggests that disability identity may be salient for emerging adults with disabilities who have a high need to belong. Unfortunately, the empirical research examining the need to belong in relation to positive

disability identity is limited. However, because the need to belong is inversely related to one's sense of belonging, it was anticipated that the two variables would have inverse relationships with positive disability identity.

The present study examined the link between sense of belonging, need to belong, social support, and positive disability identity in a sample of emerging adults with disabilities. Based on the link between social support and belonging in empirical investigations, we expected emerging adults who have high perceived social support to report a strong sense of belonging, regardless of whether or not they self-identified as a person with a disability (e.g., McMahon et al., 2008; Meijas et al., 2014). Consistent with social models of disability and Vacarro's (2015) model of belonging for emerging adults with a disability, we anticipated that emerging adults who reported more positive disability identity would report a stronger sense of belonging and a lower need to belong. We expected that these relationships would differ for those who did not initially self-identify as a person with a disability because positive disability identity would likely be less salient for them. Because little research exists examining positive disability identity and sense of belonging and need to belong in emerging adults with a disability, we based our hypotheses on narrative studies suggesting that positive disability identity would predict a strong sense of belonging (e.g., Dunn & Burcaw, 2013; Meijas et al., 2014). We anticipated that this relationship would exist, even after accounting for the effects of perceived social support and need to belong. Furthermore, we expected this prediction to be stronger for those who self-identified as a person with a disability because positive disability identity is likely to be more salient for that group. The present study extended the existing literature by empirically examining whether positive disability identity would predict sense of belonging and need to belong in an emerging adult sample, recruited without priming for disability.

Method

Data were collected through a multicampus collaborative project examining emerging adulthood, *Emerging Adulthood Measures at Multiple Institutions 2* (EAMMI2, <https://osf.io/te54b/>).

Participants

Researchers at 32 colleges and universities recruited participants including 29 in the United States

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and one each in England, Greece, and Grenada. Each recruitment site received approval from the appropriate institutional review board, and all data collection followed APA ethical standards. Each of the 32 site investigators recruited a convenience sample via various methods including university classes, university participant pools, honor society

chapters, e-mail, and social media. Emerging adults ages 18 to 25 were recruited to participate. Because some participants did not complete all items, listwise deletion was used to exclude any participant with missing data for an analysis.

The full EAMMI2 sample included over 3,200 respondents. However, only participants with a disability and self-reported age from 18 to 25 ($N = 502$) were included in this study. The average age of respondents was 19.99 ($SD = 1.78$). Most participants identified as women ($n = 382$, 76.1%), with 103 (20.5%) identifying as men, and 17 (3.4%) identifying as "other." Most participants ($n = 325$, 64.7%) identified as White/European American, with the remainder identifying as biracial ($n = 62$, 12.4%), Black/African American ($n = 33$, 6.6%), Hispanic/Latino ($n = 31$, 6.2%), Asian/Pacific Islander ($n = 31$, 6.2%), Native American/American Indian ($n = 1$, 0.2%), or other ($n = 19$, 3.8%). Most participants were currently in college ($n = 450$, 89.6%), with others having completed no college ($n = 4$, 0.8%), some college ($n = 5$, 1%), an associate's degree ($n = 18$, 3.6%), a bachelor's degree ($n = 3$, 0.6%), some graduate education ($n = 16$, 3.2%), or a graduate degree ($n = 6$, 1.2%).

Measures

Participants completed the following self-report measures online. Means, standard deviations, and Cronbach's α for each scale are presented in Table 1 and Table 2. Participants also responded to questions about demographics.

Disability status. Two items were used to assess disability status. Participants completed one dichotomous item indicating whether or not they identify as a person with a disability. In a separate item, participants indicated whether or not they experience a disabling impairment in each of six categories (e.g., physical, sensory, learning, psychiatric, chronic health, or other). Participants responded "yes" or "no" to each category of disability, and therefore, they could indicate the presence of a disability in multiple areas. Similar items have been used by Bogart and colleagues (2017) because previous researchers have demonstrated that a portion of emerging adults with disabilities (ranging from 7 to 73%) do not self-identify as having a disability, and are therefore eliminated from most disability research (Chalk, 2016; Nario-Redmond et al., 2013).

Of participants, 156 (31.1%) self-identified as a person with a disability, and 346 did not self-identify as having a disability (68.9%). Participants indicated

TABLE 1

Correlations in Participants Who Initially Self-Identify as Having a Disability

	<i>M</i>	<i>SD</i>	α	2	3	4	5	6
1. Need to Belong	34.43	7.55	.82	-.20*	-.01	.03	.08	-.17*
2. Positive Disability Identity	29.74	8.41	.85	--	.39**	.43**	.20*	.64**
3. Social Support: Family	5.16	1.72	.92		--	.42**	.20*	.38**
4. Social Support: Friends	5.23	1.43	.92			--	.36**	.54**
5. Social Support: Special Person	5.45	1.76	.96				--	.38**
6. Sense of Belonging	3.08	1.20	--					--

Note. * $p < .05$. ** $p < .01$. α represents Cronbachs alpha for each scale. $n = 156$.

TABLE 2

Correlations in Participants Who Did Not Initially Self-Identify as Having a Disability

	<i>M</i>	<i>SD</i>	α	2	3	4	5	6
1. Need to Belong	33.61	7.76	.79	-.18**	.08	.08	.02	-.02
2. Positive Disability Identity	34.58	7.82	.82	--	.24**	.27**	.13*	.34**
3. Social Support: Family	5.23	1.55	.92		--	.34**	.28**	.36**
4. Social Support: Friends	5.45	1.32	.92			--	.48**	.55**
5. Social Support: Special Person	5.51	1.72	.96				--	.35**
6. Sense of Belonging	3.43	1.02	--					--

Note. * $p < .05$. ** $p < .01$. α represents Cronbachs alpha for each scale. $n = 346$.

that they experience disabling impairments in several categories including psychiatric ($n = 284$, 56.5%), learning ($n = 136$, 27.1%), chronic health ($n = 89$, 17.7%), physical ($n = 76$, 15.1%), sensory ($n = 76$, 15.1%), or other ($n = 14$, 2.8%). Some participants ($n = 123$, 24.5%) indicated having a disability in multiple areas. A few ($n = 8$, 1.6%) indicated that they identify as a person with a disability but did not specify their type of disability. If participants indicated identifying as someone with a disability or endorsed a disability in a specific area, they were included in the sample.

Need to belong. The Need to Belong Scale (Leary, Kelly, Cottrell, & Schreindorfer, 2013) was used to assess participants' need to belong to a group. Respondents used a 5-point Likert scale from 1 (*strongly disagree*) to 5 (*strongly agree*) to indicate their agreement with 10 items such as "I want other people to accept me" and "I have a strong need to belong." Higher scores indicate a stronger need to belong. The Need to Belong Scale has demonstrated acceptable reliability in previous studies ($\alpha = .78$ to $.84$ (Carvalho & Pelham, 2006; Mellor et al., 2008). Leary and colleagues (2013) conducted nine studies to demonstrate the construct validity of the scale.

Sense of belonging. Participant's current sense of belonging was assessed with one item, based on the Belonging subscale of the Basic Social Needs Scale (Zadro, Williams, & Richardson, 2004).¹ Participants used a 5-point Likert-type scale from 1 (*not at all*) to 5 (*very much*) to rate the item, "I feel like I belong."

Social support. The Multidimensional Scale of Perceived Social Support (MSPSS; Zimet, Dahlem, Zimet, & Farley, 1988) consists of three subscales with four items each. The three subscales assess participants' perception of the social support they receive from family, friends, and a special person. Each subscale demonstrated acceptable reliability (see Tables 1 and 2). Participants used a 7-point Likert-type scale from 1 (*very strongly disagree*) to 7 (*very strongly agree*) to rate statements such as "My friends really try to help me" and "I can talk about my problems with my family." Higher scores indicate more perceived social support. The MSPSS

¹Although internal consistency cannot be calculated for a single-item measure, Spörkle & Beck (2014) demonstrated consistency-based reliability for many single-item measures of personality traits. Furthermore, they found that longer instruments do not have stronger predictive value (Spörkle & Bekk, 2014). Several researchers agree that simple, undisguised self-ratings can be as valid as long questionnaires aimed to measure the same construct (e.g., Burisch, 1984a; Burisch, 1984b).

has demonstrated acceptable reliability in previous studies ($\alpha = .84$ to $.91$; Çivitci, 2015; Dahlem et al., 1991). The convergent validity of the MSPSS is demonstrated by positive correlations with measures of family and peer relations ($r = .48$ for family and $.42$ for peers; Osman, Lamis, Freedenthal, Gutierrez, & McNaughton-Cassill, 2014).

Positive disability identity. Positive disability identity, one's positive sense of self as a person with a disability, was assessed using the Positive Identity subscale of the Personal Opinions Questionnaire (Bolton & Brookings, 1998). Participants used a 5-point Likert scale from 1 (*strongly disagree*) to 5 (*strongly agree*) to indicate their agreement with 11 statements addressing the degree to which they believe their disability enhances or harms their life. Although Bolton and Brookings (1998) used a dichotomous (yes/no) response format, the present study asked participants to rate their agreement with each statement on a 5-point Likert scale in order to capture increased variability in responses and attitudes toward disability. Higher scores indicate a more positive sense of oneself as a person with a disability. The Personal Opinions Questionnaire has demonstrated acceptable reliability ($\alpha = .85$) and validity in adult samples (Bolton, 2001; Brookings & Bolton, 2000).

Because the data were collected across 32 sites, including small liberal arts colleges, large universities, and international institutions of higher education, differences likely exist across sites with respect to variables, which may influence sense of belonging and disability identity (e.g., cultural perception of disability, access to disability resources). To account for those differences, we created dummy variables to designate the site from which each participant was recruited. These dummy variables were used in regression analyses to account for the effects of the 32 different samples.

Results

Bivariate correlation coefficients were calculated to examine relationships between social support, sense of belonging, need to belong, and positive disability identity. The same pattern of correlations emerged in participants who self-identified as having a disability (see Table 1) and who did not self-identify but reported having a disabling impairment (see Table 2). As expected, those who perceived greater social support from family, friends, or a special person were more likely to report a strong sense of belonging. As anticipated, participants who reported a positive disability identity also reported

TABLE 3**Significant Differences in Correlations With Positive Disability Identity Based on Disability Self-Identification**

	Self-identify with a disability	Do not self-identify but have a disabling impairment	<i>z</i>	Cohen's <i>q</i>
Sense of Belonging	<i>r</i> = .64	<i>r</i> = .34	4.16*	0.40
Need to Belong	<i>r</i> = -.18	<i>r</i> = -.20	0.21	0.02

Note. * $p < .001$. *r* represents the correlation coefficient with positive disability identity in each group.

TABLE 4**Hierarchical Regression Predicting Sense of Belonging for Participants Who Initially Self-Identify as Having a Disability**

Predictor	β	R^2	ΔR^2	<i>F</i>
Step 1		.13	.13	0.72
Sample	--			
Step 2		.45	.32**	3.51**
Social Support: Family	.07			
Social Support: Friend	.28**			
Social Support: Special Person	.22**			
Step 3		.48	.03**	3.81**
Need to Belong	-.11			
Step 4		.61	.12**	6.01**
Positive Disability Identity	.44**			

Note. ** $p < .01$. Step 1 included 31 dummy coded variables to account for differences across the 32 data collection sites.

TABLE 5**Hierarchical Regression Predicting Sense of Belonging for Participants Who Did Not Initially Self-Identify as Having a Disability**

Predictor	β	R^2	ΔR^2	<i>F</i>
Step 1		.07	.07	0.80
Sample	--			
Step 2		.37	.30**	5.76**
Social Support: Family	.17**			
Social Support: Friend	.39**			
Social Support: Special Person	.10			
Step 3		.38	.01	5.76**
Need to Belong	-.04			
Step 4		.40	.02**	6.06**
Positive Disability Identity	.18**			

Note. ** $p < .01$. Step 1 included 31 dummy coded variables to account for differences across the 32 data collection sites.

a stronger sense of belonging (i.e., feeling that they belong). Fisher r -to- z transformation revealed that the correlation between sense of belonging and positive disability identity was significantly greater for those who self-identified as having a disability, compared to those who did not self-identify but reported a disabling impairment (see Table 3).

To test the hypothesis that positive disability identity predicts sense of belonging, over and above the effects of well-established predictors (i.e., social support and need to belong), we utilized a hierarchical regression. Because the data were collected across 32 sites, we controlled for the effects of sample. Dummy coded variables representing sample were entered in the first step to account for the differences across the 32 recruitment sites. Social support from family, friends, and a special person were entered in the second step. Need to belong was entered in the third step. Positive disability identity was entered in the fourth step. Analyses were conducted separately for those who self-identified as having a disability (see Table 4) and those who did not self-identify but reported having a disabling impairment in a specific area (see Table 5). For both groups, after controlling for the effects of social support and need to belong, positive disability identity significantly predicted sense of belonging. However, the effect sizes indicate that this prediction may be more practically meaningful for those who self-identify as having a disability ($R^2\Delta = .12$, $p < .001$, Cohen's $f^2 = .14$, see Table 4) than those who did not self-identify with their disability ($R^2\Delta = .02$, $p = .002$, Cohen's $f^2 = .02$, see Table 5).

Discussion

Emerging adults with greater perceived support from family, friends, or a special person experienced a stronger sense of belonging. This finding is consistent with previous investigations that social support relates to one's sense of belonging (e.g., McMahon et al., 2008; Salmon, 2013). This relationship was consistent for those who did or did not initially self-identify as someone with a disability. For those in college, this may be a result of increased social support from campus organizations, sports teams, or faculty and staff (Graham-Smith & Lafatette, 2004; Jones et al., 2015; O'Keeffe, 2013).

After accounting for the effects of social support and need to belong, positive disability identity significantly predicted sense of belonging in emerging adults with a disability, particularly for those who self-identified as having a disability.

This finding is consistent with qualitative findings that positive disability identity is related to a strong sense of belonging or connection to one's community (e.g., Dunn & Murcaw, 2013; Mejias et al., 2014). Our findings extend the literature by demonstrating that developing a positive disability identity, a favorable view of oneself as a person with a disability, is related to one's sense of belonging in emerging adults with disabilities. It is possible that identifying with the disability community in a positive way might contribute to a sense of connection to others in that community. Having a positive disability identity may assist one in finding a place in the disability community, which could be related to an increased sense of belonging (Erikson, 1968; Longmore, 1995). Additionally, it may be that maintaining a positive disability identity combats the negative implications that society imposes on those with disabilities (Shakespeare, 1996).

Also consistent with hypotheses, emerging adults with a positive disability identity reported a lower need to belong, only if they self-identified as someone with a disability. Because those with a positive disability identity reported a stronger sense of belonging, they might have their interpersonal needs met by current relationships, which might lead them to report a lower need to belong.

Despite these important findings, the present study has several limitations. The most notable limitation is the use of a single item to assess sense of belonging. The constraints of the EAMMi2 collaboration limited the number of items that each researcher could add to the survey, preventing the inclusion of a more extensive belonging scale. Future research should use a validated scale such as the Belonging subscale of the Basic Social Needs Scale (Zadro et al., 2004). Despite the low variability in the single-item measure, our findings regarding belonging supported the hypotheses, suggesting that they warrant consideration. These findings should be considered as preliminary, within the context of additional research.

Additionally, given that the sample primarily consisted of college students, these findings likely represent the experience of emerging adults with more educational opportunity and may not generalize to other young adults. Given the advancement of disability services on college campuses, future studies should include an assessment of whether students are accessing and utilizing disability services because this may be associated with their sense of belonging and disability identity. Furthermore, most of the sample identified as White or European

American, suggesting that these findings may not apply to people of color. This study should be replicated with emerging adults with more varied educational and racial backgrounds. Although the study included participants with a variety of disabilities, analyses were conducted on the entire sample to capture the disability experience across emerging adults with disabling impairments. This study may be replicated in samples with diverse disabilities to detect differences between groups. Furthermore, the present study did not distinguish between visible and invisible disabilities. Given that the visibility of one's disability may be related to one's sense of belonging, subsequent research should include items assessing disability visibility. Despite these limitations, this study presents an important empirical demonstration of the association of positive disability identity with increased sense of belonging and lower need to belong in emerging adults with a disability. The study replicates the direct relationship between social support and sense of belonging in this group.

Given that emerging adults with greater perceived support have a stronger sense of belonging, health practitioners should consider family sessions and support groups to foster social support. For those with a strong need to belong, positive disability identity and sense of belonging are low. Therefore, peer support groups may be particularly beneficial for this group. Health practitioners could consider forming support groups for young adults with similar disabilities to enhance their feelings of normalization and foster a sense of positive disability identity and belonging. One such program aims to create a safe place for female emerging adults with disabilities to share their experiences and discuss disability-related topics (Mejias et al., 2014). Emerging adult women who participate in this group reported more comfort discussing disability and an increased sense of belonging (Mejias et al., 2014). Because those who maintain a positive disability identity report a stronger sense of belonging, mental health practitioners should consider assessing clients' disability identity and engaging in interventions to foster positive disability identity because some treatment protocols have demonstrated links with increased confidence and sense of belonging (Elderton, Clarke, Jones, & Stacey, 2014; Mejias, Gill, & Shpigelman, 2014).

Across disability type, emerging adults with greater perceived support and a more positive disability identity have a stronger sense of belonging and lower need to belong. Although no causal

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conclusions can be drawn from this data, the positive association suggests that positive disability identity is a relevant variable to consider when attempting to foster a sense of belonging in emerging adults with a disability.

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