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Making the transition: disabled students in Higher Education

A Teaching Quality Enhancement Fund project undertaken by the school of Human and Health Sciences, University of Huddersfield 2006 - 2009

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The project was supported by a steering group involving the disability coordinators for the School of Human and Health Science, and the University Disability Support Services.

Summary:
The Special Educational Needs and Disability Act, (Department for Education and Skills (DES) 2001) gave education providers in the UK legal responsibility to ensure disabled students are not disadvantaged in or excluded from education. The more recent Disability Discrimination Act (Department of Work and Pensions (DWP) 2005) stipulates that public bodies, including universities, need to eliminate discrimination and harassment whilst ensuring that their policies meet the needs of disabled people, promoting equal opportunities. In addition universities are now mandated to embed these regulations in all aspects of their work. Inclusive practice should be anticipatory and should be evident in every aspect of academic life for students (Equality and Human Rights Commission 2009a). Against this backdrop a three year project was undertaken through the Teaching Quality Enhancement Fund (TQEF) at the University of Huddersfield.

The project aims were to evaluate perceived satisfaction with the level of support received by disabled students and to improve provision through staff development and dissemination of best practice. This entailed a review of the literature; the design and administration of a self completion questionnaire and

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face to face interviews with disabled students; a staff survey of knowledge, skills and attitudes in relation to disability; the development of staff development activities and resources and a national conference ‘Degrees of Independence’ which was jointly hosted with the University of Huddersfield Student Union. Full details of the project can be found at http://www.hud.ac.uk/tqef/1d.html. This report offers a discussion of the analysis of data from student questionnaires and interviews.

Difficulties conducting research with this particular student group emerged whilst attempting to reach a sample of disabled students. Disabled students may choose not to declare their disability to the university and students may have a disability that is unknown to them. We therefore concluded that it was not possible to identify with any certainty the full population of disabled students in the School. Despite these and other challenges three themes emerged as worthy of note and further development:

1. The gap between identification of a disability and the provision of support
2. The unintentional discrimination that may occur where university staff are unaware of the disabled students’ need
3. Preparation for professional practice.

Reflection on this project leads to a philosophical re-examination of ‘disability’ in Higher Education.

2 Making the transition http://www.hud.ac.uk/tqef/1d.html
**Background:**
Disability legislation relating to Higher Education has evolved since the introduction of the Special Educational Needs and Disability Act (SENDA) (DES 2001) and detailed guidance has been published for example the Quality Assurance Agency code of practice (QAA 1999). More recently The Disability Discrimination Act (DDA) (DWP 2005) has shifted the focus from providing ‘reasonable adjustments’ for individual students to ‘anticipatory’ behaviour and culture change aimed at embedding inclusive practices across the whole of an institution. The Disability Rights Commission (DCR) updated its code of practice for post 16 education (DRC 2007a) in order to reflect this change.

Following the legislation a great deal of effort has been made to raise awareness of the obstacles that disabled students face in Higher Education, despite this studies indicate that support remains reactive and ad hoc (Holloway 2001; Shevlin et al 2004; Tinklin et al 2004). The DCR points out that by embedding disability equality into everything they do, education providers are likely to improve their overall performance (DRC 2007a).

Numerous resources are available on how to make learning inclusive. This guidance includes information on how to produce accessible learning materials (The University of Strathclyde 2002; Doyle and Robson 2002; The University of Loughborough 2006), how to establish inclusive assessment methods (The Open University 2006; The University of Plymouth 2007) and on work placements (Sapey et al 2004; Fell and Wray 2006).

Seale (2006) however notes that some electronic communication can also be an obstacle, for example PDF documents created using early versions of Adobe Acrobat can be unreadable by screen reading software. Pearson and Koppi (2006) also point out that students with physical disabilities can experience difficulties navigating the computer or using a mouse.

3 Making the transition [http://www.hud.ac.uk/ tqef/1d.html](http://www.hud.ac.uk/tqef/1d.html)
One of the many implications of disability legislation is that public authorities should include disabled people and listen to their views:

‘Of key importance are the obligations the duty gives to key public authorities to involve disabled people in developing their disability equality scheme. This will allow public authorities to really understand what the issues are for disabled people and help them tackle these issues at their root causes’.

Disability Rights Commission (2006,p 7)

The DRC (2007b) conducted an extensive review of fitness standards for teaching, nursing and social work and concluded that health standards can be discriminatory and can deter disabled students from applying for these courses. Other authors (Sapey et al 2004; French 2004; Sin and Fong 2008) suggest that due to physical, attitudinal and regulatory barriers disabled students continue to face difficulties in becoming healthcare professionals.

Quality assurance processes indicated that our disabled students were generally well supported; however no systematic evaluation of their experience had been undertaken. The project looked at the experiences of first year disabled students in the School. The aims were:

1. To evaluate the experiences of first year disabled students in the School using qualitative and quantitative research methods.
2. To use student feedback as a basis to develop skills training for teaching staff.
3. To embed inclusive practices into learning, teaching and assessment.
4. To disseminate good practice throughout the School.

This report focuses on the first aim.

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Methods:
The focus of this project was one School in a Higher Education Institution with a range of subjects including behavioural sciences, health and social care. A particular factor Professional, Statutory and Regulatory Bodies (PSRBs) such as the General Social Care Council, Health Professions Council and Nursing & Midwifery Council require additional safeguards regarding disability and provide guidance on ensuring that both fitness to practice requirements and the requirements of UK disability legislation are met.

Data was gathered using two methods: following ethical approval a Likert scale self completion questionnaire was designed and piloted to evaluate feelings and attitudes (Bell 2005) about pre course arrangements, the assessment of needs, support during studies, teaching and learning, assessment and practice based learning. Likert scales are used to build in a degree of sensitivity and differentiation of response, whilst still generating quantitative data (Cohen, Manion and Morrison 2007). In addition, students were asked to indicate if they were willing to discuss their experience in more depth though semi structured interviews.

Starting with a population of all disabled students within the School who were in contact with the University Disability Service, the sample attempted to identify all first year students. This exercise revealed interesting methodological difficulties:

To maintain confidentiality direct contact was only made by the University’s Disability Support team. The sample they contacted comprised all first year students who had been in touch with them about support, including those who had written to turn the offer of support down.

This list derived from two sources: The first was responses received to a standard letter sent to students who mention a disability on their application form, the second was students who contacted the team during their first year –

5 Making the transition http://www.hud.ac.uk/tgef/1d.html
perhaps through referral by a course tutor for disability assessment. These sources also include disabled students in contact with Disability Support who were not new to the university but who were starting a new programme of study.

In the 2007 survey we were puzzled that the list of students did not tally with other data within the university systems, so for the 2008 survey we also interrogated the student information system located at school level. It was apparent that the two sets of records were (necessarily) different. Students’ confidentiality required that separate records are kept by Disability Support, so information is only shared with the School once permission has been given by the student concerned. Thus two separate records are kept by the university for some students. Further errors creep into the system when, for example, a change of address is only logged on one record.

When examining the two lists, several questions arose. Trying to identify students by year was in itself problematic, since part-time students could be in their first year of study in the second year of their (part-time) programme. While it was to be expected that some students accessing Disability Support would not be listed in the School as disabled students, due to their desire for confidentiality, more surprising was the large amount of students listed in the School as disabled students who had no contact with Disability Support. These might include students with asthma or diabetes who do not feel they needed any educational support. However, there were a range of students who were listed with impairments for which Disability Support can and do provide assistance, who were clearly not accessing this. It is therefore possible that some students may not be in contact with Disability Support, but instead may be arranging their own support, or may be receiving no support at all.

It was therefore concluded that several distinct groups of disabled students existed:

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1. Disabled students listed as disabled and receiving support from Disability Support. This is the most visible and ‘reachable’ group
2. Disabled students not listed as disabled on the School’s records but receiving support. This group may include students who wish to avoid being treated differently by other students and/or staff. These students may not be identifiable as disabled by teaching and administrative staff in the School, and thus forfeit the right to any reasonable adjustments.
3. Disabled students listed as disabled but not receiving additional support from Disability Support; and
4. Disabled students not identified on any system, who may or may not be aware that they are disabled.

These discoveries were one of the most interesting findings of the project and influenced the emergent themes and discussion below.

**Self completion questionnaire:**
Potential participants were contacted between March and May in 2007 and 2008 thus capturing data from two separate cohorts. This time was chosen in anticipation that students would have had the full range of university experience and any needs assessment would have been completed. Of 54 students contacted in 2007, 24 responded and of 95 students in 2008, 26 responded. The greater number in the second year is perhaps a result of our more detailed efforts in contacting students, rather than a significant increase in disabled students.

**Semi structured interviews:**
The 2007 cohort were asked if they would be willing to be interviewed in depth. Of the 15 positive responses 8 were contactable and following piloting of an interview schedule two of these were available to be interviewed. Both students were studying for a health profession and were dyslexic. The interviews were face-to-face and were tape recorded. The transcripts were then transcribed verbatim.

7 *Making the transition* [http://www.hud.ac.uk/tqef/1d.html](http://www.hud.ac.uk/tqef/1d.html)
Findings and emergent themes:
Data analysis of the questionnaires was conducted using SPSS. As only a relatively small number of participants responded to the questionnaire, the results only provided a limited insight into the views of disabled students in the School. The questionnaire data generally illustrated that students were mostly happy with the support that they received from their school. In some cases there were mixed views on the statements. For example, a similar number of students disagreed as those who agreed to the statements ‘Adjustments were in place in good time to help me’ and ‘I am uncomfortable with disclosing my disability in university based settings’. This mixed response could indicate that this area should be investigated further in interviews with students. In addition, the majority of students disagreed with the statement ‘I have the choice to have my work assessed in alternative ways’. This suggests that students may not feel that they are provided with a full range of assessment opportunities, which would lead to more inclusive assessment practices. It was also found that of the students who completed a questionnaire a similar percentages were in agreement and disagreement to the statement ‘I am comfortable disclosing my disability in practice/ work based settings’. This could indicate that disabled students have varying experiences of disclosing a disability in practice settings and that this area could be further explored in student interviews.

There were a number of statements on the student evaluation which received some negative responses from disabled students. This may indicate that students face difficulties in these areas; however none of the differences between responses were statistically significant. Also, as the sample size was small it is difficult to say whether the patterns indicated by the data show genuine barriers faced by students. The data was also analysed to investigate whether there were differences in the responses between male and female participants; a basic analysis of top scores and means showed no indication of this. The frequencies of responses for people with dyslexia in comparison to people who had declared other disabilities were also looked at and it indicated that there
were no clear patterns of differences between the responses to questions for the two groups.

A factor analysis was also carried out on the questions and this showed that for each group of questions on the evaluation, there was not a statistically significant correlation for questions within the group. This suggests that the questions within each group were not measuring the same theme as each other. One reason for this may be that the questions were not measuring what they were intended to measure or that participants were interpreting them in a different way than the researchers intended.

One possible reason why the questions were not interpreted in the way that was intended is that the language used in the questions was not clear to students. Examples of this include the use of ‘professional’ terms such as ‘assistive software’ and ‘barriers faced by disabled students’ and ‘accessible adjustments’. Another possible reason why the questions within groups seem to measure different things is that students may have interpreted them in very different ways depending on their own experiences. A diverse range of students study with the School and they may each have very different experiences, this may result in very varied responses to the statements in the questionnaire. It could be that the experiences of disabled students could be more effectively measured by gathering qualitative data, using questionnaires with open questions or semi-structured interviews.

For the interviews template analysis (from King et al 2002) was used: this approach to coding was chosen as it enables exploration of experiences from a phenomenological perspective. Phenomenology being concerned with “the lived experiences of humans” (Polit et al 2001, 212). The emphasis on the lived experiences was particularly useful to this analysis because it related to how students dealt with their identified disability. Initial themes from the interviews included:

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• Prior knowledge of disability
• Stigma
• Disclosure and Adaptation
• Support and the needs assessment process
• Assessment Strategies
• Perception of Self

Allowing for the caution regarding the sample size and profile, the combined analysis led to three emergent themes that merit discussion: the ‘gap’ between identification of a disability and support arriving; the impact of ‘unintentional discrimination’ and the complications of professional practice.

**Emergent Themes:**

1. **Bridging the gap:**

Disabled students entering Higher Education in England are encouraged to declare their disability and seek support. In order to do this they must first discuss their disability with an appropriate person and be assessed on the nature of their disability and the additional support, adjustment, equipment etc that they will need. Having done this, they may be able to seek extra financial support. (Department for Innovation, Universities & Skills, section 6, 2009). At best this takes several weeks.

Whilst all students are entitled to ‘reasonable adjustments’, financial help for assessment and equipment depends on domiciliary status and the amount of study being taken during the year. Thus whilst all disabled students can be assessed and advised on the support they may need not all will be entitled to funding to support this. In addition, students whose disability is identified after they start studying at university face longer delays.

These known difficulties are mirrored in the survey results. Although the personal support students received was good and for most part the recommendations of the assessment were helpful, where the wait had been longer than expected it

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had been a source of frustration and anxiety to all survey respondents. The interviews offer greater insight into the experience of students at this transitional time, in particular the battle of understanding and completing the paperwork:

“- - - but it was quite funny the fact that I was someone with severe dyslexia and yet they were sending paperwork that I wasn’t understanding the directions what they wanted because you’ve got different operations and departments sending you conflicting information, it was never explained properly and it was quite humorous to the point that they’re sending this out to someone that’s got a learning difficulty and people must really really struggle and give up with it”

Interview participant

Regardless of disability, Yorke and Longden (2008) identify that the first year at university is a difficult transition for many students. For disabled students the stress of knowing that they are at a disadvantage plus delays in provision of support exacerbates these difficulties.

2. Unintentional discrimination:

The survey results indicate that most students most of the time did not experience difficulties with learning, teaching and assessment practice within the School. However in each question some students did feel disadvantaged indicating a mixed response and suggesting there is room for improvement. Bearing in mind the ‘gap’ between declaration of a disability and the arrival of support and the difficulties of identifying all students who might benefit from disability support this is particularly important, as the students in any given cohort who may be struggling because of a disability cannot be assumed to be known. Unintentional discrimination is taken here to mean the sort of day to day practice which, whilst it is not deliberately or even obviously discriminatory, adds to the difficulty faced by disabled students.
The survey questions necessarily do not allow for in-depth interrogation to understand what may be happening, but the interviews help in uncovering at least some of the issues. They indicate such discrimination may include inflexibility, poorly designed assessment tasks and unclear information. One quote from the interviews illustrates a further area with regard to classroom tests:

“we’ve had this a few times just recently and it’s absolutely driven me potty over it em that the questions are put on an overhead projector em on powerpoint and they’re flicking them over before I’ve finished reading and there’s a couple of times when I have been writing question 4 and I’ve looked up and question 8 is up.”

Interview participant

This student happened to be identified as dyslexic. Dyslexia poses many problems for learners including difficulties with “phonological processing, rapid naming, working memory, processing speed, and the automatic development of skills that may not match up to an individual’s other cognitive abilities” (British Dyslexia Association, 2009). In order to overcome these areas students need to learn and be assessed in an environment which takes into account their additional learning needs. However many students may have encountered difficulty with copying notes at speed include partially sighted students and those for example with hand injury as well as students who have no disability at all.

Professional Practice:

The final emergent theme related to professional practice. Survey results show positive evaluation of preparation prior to practice, in particular skills laboratory training session for health care students, but less positive responses for preparation and support once in practice settings. This may indicate a lack of awareness of the responsibility of placement providers or just that the

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participants had limited experience to draw upon, but the frequency with which this is raised merits further exploration.

Coincidentally both students who were interviewed were studying for a professional qualification and experienced periods of practice as part of their course. This allowed for some limited interrogation of the potential issues underlying the survey data. These related to disclosure and to the potential for fitness to practice to be challenged: One student summed this up:

“... placements ... your not quite sure who people are or what might be said to other people or afterwards when your applying for jobs you don’t want people sort of you know saying this persons dyslexic but again that’s fear, you know, I think in an academic institution they have got to understand but when you work in a workplace you know, you might not be good for your career...”

Interview participant

Other studies, for example Crouch (2008) found similar anxieties. These include concerns that disclosure will meet with stereotypical views associated with a learning disability such as dyslexia, for example the person being made to feel they lacked intelligence, or being treated differently. For Crouch the findings raised implications for students on clinical placements, in particular issues related to safety for themselves and the public, echoing the concerns expressed by Professional Regulators.
Discussion: What does it mean to be disabled in a HEI context?

The disparate answers to the survey questions and the experience of trying to pinpoint who we should be surveying, led to a significant reconsideration of the target student population for whom we were trying to improve the quality of learning experience.

Within the school under scrutiny, the survey data suggests that dyslexia is the most frequently declared disability, but this itself is an umbrella term for a wide range of disabling factors which may vary considerably between each student (BrainHE 2009). Within the disability studies literature dyslexia plays a very small part. Indeed, in their major text Albrecht et al (2001) make no reference to it at all. Thus mainstream disability theory may have limited use as a guide to understanding the needs of these disabled students in Higher Education.

It is to be expected that widening participation to Higher Education and disability legislation will increase the number of disabled students. In many cases students’ needs are not financial, but are about changing the way we structure learning, teach and assess. Thus greater understanding of how to deliver an inclusive curriculum is essential.

We have established that disabled students within Higher Education are likely not to be clearly identified and thus cannot easily be singled out for extra support or adjustment and that a single approach to supporting disability is unlikely to be satisfactory for all. A culture change to one of inclusivity for all, rather than adjustments for individuals, advocated by the DDA (DWP 2005) not only supports known and ‘hidden’ disabled students but can be a catalyst improved practice across the board.
Conclusion

At the commencement of this project the team aimed to identify good practice and areas for improvement for disability support in one School in a Higher Education Institution. We hoped that in doing so a refined survey instrument might be developed that could be administered year on year to generate the trend data that would be valued within the current ethos of quantitative measurement for improvement.

The project identified three areas where practice can be improved; a heightened awareness of student need as they await assessment and formal support; better day to day learning, teaching and assessment practice to limit unintentional discrimination and the development of support in practice placements.

Further work in this final area is essential as the tension between fitness to practice, discrimination legislation and professional requirements for public protection make disclosure, the identification of reasonable adjustments and the assessment of professional competency difficult to negotiate. Funding from the Yorkshire and the Humber National Health Service Strategic Health Authority has been secured to progress these issues.

The methodological conundrum of identifying and reaching disabled students also served to convince the project team that longitudinal survey and trend data were likely to be strategically unhelpful in bringing about improvement. Rather, the findings support a more radical, sustained and gradual culture change which, in may be argued, could have the unintended but positive effect of improving the experience of all students.
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