EXPERIENCES OF STUDENTS WITH DISABILITIES AT ONTARIO’S UNIVERSITIES

STUDENTS WITH DISABILITIES SURVEY REPORT

OUSA
Ontario Undergraduate Student Alliance
ACKNOWLEDGEMENT

It is crucial that the voices of marginalized populations drive discussion on issues affecting their communities. Thank you to all of the students who took the time to participate in this project. Without their participation, it would not be possible for OUSA to create evidence-based, student driven policy. Student engagement is central to OUSA’s operations and we cannot express our gratitude enough.

ABOUT OUSA

OUSA represents the interests of over 140,000 professional and undergraduate, full-time and part-time university students at eight institutions across Ontario. Our vision is for an accessible, affordable, accountable, and high quality post-secondary education in Ontario. To achieve this vision we’ve come together to develop solutions to challenges facing higher education, build broad consensus for our policy options, and lobby government to implement them.
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INTRODUCTION

All willing and qualified students in Ontario must be able to access and excel within Ontario's post-secondary education system. This is a foundational principle of OUSA’s policy and advocacy work. We believe universities are currently underserving students with disabilities and that this needs to change.

In support of this change, we conducted an exploratory primary research study during September and November 2015. We intended to learn about the lived experiences of attending university in Ontario for students who identify as having one or more disabilities. Specifically, we wanted to investigate the challenges associated with persistence and graduation. This report will start by presenting the external research on which this project is based, move on to describe the methodology, and end by presenting and discussing the findings.

This research illustrates the nature of the barriers students with disabilities experience in their university environments. At the same time, it elevates the voices of students with disabilities, enabling them to more directly participate in OUSA’s policy development and advocacy. While this research is not representative of all of Ontario’s students with disabilities, these results can be used to identify issues that might be worth more formal study.
FOUNDATIONAL RESEARCH

Although it is difficult to specify the number of students with disabilities attending university accurately, researchers have found multiple sources that show that those with disabilities continue to access and complete university at lower rates than those without. Unfortunately for these students, they are also likely to experience more exclusion, marginalization, and difficulty than students without disabilities. Of course, these experiences differ further according to other demographic characteristics like gender, sexual orientation, age, education level, nationality, race, socio-economic status, and even disability type.

Ontarians with physical disabilities are more likely to attain post-secondary credentials than those with other types of disabilities. Using data from Statistics Canada, the Higher Education Quality Council of Ontario found that 63 percent of individuals aged 25 to 44 with physical disabilities reported university or college as their highest level of education, compared to 45 percent of those in the same age group with other types of disabilities. This distinction is important because they also found learning disabilities, psychiatric disabilities, and chronic illnesses to be the three most common disabilities types among university students. These findings suggest that the majority of students with disabilities at Ontario universities are not completing their degrees.

Considering that academic accommodations are a common “means of preventing and removing barriers that impede students with disabilities from participating fully in the educational environment,” it is crucial that students have easy access to them. Students with disabilities are likely to experience greater difficulty moving from secondary to post-secondary school; transition programming is an important tool in improving the quality of this change. Transition programs are known to improve students’ orientation to campus, orientation to services, disability awareness, and willingness to self-advocate. Positive associations have also been found between the use of enhanced services and transition program attendance.

Some studies show that students experience difficulty accessing the support services and accommodations they need. High costs, a lack of information, and ineligibility for bursaries have been found among the top reasons why students with disabilities do not access support services. One scholar has argued that students with learning disabilities receive only partial accommodations – either through deliberate dismissal and discrimination or through the feelings of guilt that develop from engaging with prejudiced systems and individuals. These situations may arise because instructors are receiving inconsistent messages on how to manage students with disabilities. When students do not have access to the support they need their academic performance will suffer. In fact low marks are the third most common reason those with disabilities leave post-secondary school.

Different frameworks for managing disability operate at the same time within our education system, but are at odds with each other. The medical model of disability locates disability in the biology of individuals. As such, the responsibility for managing and accommodating disability belongs to those same individuals. This model is out of step with goals of inclusive education because it takes away communities’ and administrative systems’ responsibilities to accommodate those with disabilities.

Social models of disability recognize that disability is subjectively constructed depending on what is valued in certain social and political circumstances. The social model recognizes that society can do a lot to limit disabling barriers, instead of putting the onus on individuals to overcome barriers alone. While social models of disability give universities a foundation upon which to build an inclusive community, barriers to participation have been attributed to the persistence of medical models coupled with some social models’ inability to gain traction in educational systems.
DATA COLLECTION

This study used mixed methods to explore the experiences of individuals who identified as having one or more disabilities and were enrolled at an Ontario university. One-on-one interviews were used to gain first hand accounts of the challenges some students with disabilities face on campus. Surveys were used to ask students specific questions about their experiences.

Participants were invited to participate through OUSA’s Steering Committee members or through various social media networks. The privacy of our participants is of utmost importance and where possible data were collected anonymously. For this reason, participants were asked not to identify themselves (or others) in their interview or in open-ended survey responses.

Where possible, all data are reported in aggregate. All raw data are password protected and stored on an external hard drive in the OUSA Office; only OUSA’s Research & Policy Analysts have access to this information.

Interviews
One-on-one, in-depth interviews were initially conceptualized as overt nonparticipant observations. The researcher intended for students to take them on a tour of their campus to demonstrate how they navigate the built environment. These tours were supposed to allow students to demonstrate what challenges “looked like” for them, while giving the researcher the opportunity to gain a direct, eye-witness understanding of how some students experience and overcome challenges in the spaces they occur. The researcher hoped that this method would put students at ease and illuminate novel topics for future research and policy direction.

Very few students volunteered for this research and during the three interviews that were conducted, conversations were sometimes about topics unrelated to the physical spaces they occurred in. Ultimately, the original method’s privileging of visible barriers in physical spaces—and perhaps the intimacy of the approach—proved to be inappropriate for this population.

All interviews were completely unstructured such that interviewees were not asked specific questions, and instead were guided through discussion topics. This allowed students to lead the discussions themselves while the researcher took a less directive role.

Online Survey
Students were invited to participate in an online survey developed using pre-set tools and settings provided by SurveyGizmo. The online survey was made accessible by using a high-contrast theme, being compatible with assistive technology, and being entirely keyboard navigable. The survey consisted of closed- and open-ended questions, which were informed by secondary research as well as the 2012 OUSA Students with Disabilities policy paper. The survey was available in English only, had 34 questions, and can be found in the appendix.

Respondents were recruited using convenience sampling where only those students who were easiest to access were invited to participate. The online survey allowed students to participate from the comfort and safety of a location of their choice and without identifying themselves. The survey link was shared on various social networks, mainly Facebook and Twitter. This allowed OUSA to share the link with students in its own network, who in turn shared it with their networks. In this way, the sample was made using a snowball recruitment method.
DATA ANALYSIS

Qualitative Data
The qualitative data consist of two of the interview transcripts and responses to the open-ended question, number 29, from the online survey found in the appendix. A summative content analysis was conducted; this began with counting and organizing the words and themes present in the raw data and was followed by additional coding (reading, counting, and organizing) to reveal latent meanings and concepts in the text.

The data were organized using a process of open coding, using a grounded theoretical approach and deductive reasoning. That is, categories (codes) were chosen directly from the raw data and further refinement was grounded in the words, themes, and concepts present in the text. This type of organization ensures that findings are grounded in students’ own voices.

Quantitative Data
This report presents only the descriptive statistics from the closed-ended survey questions. Potential relationships between variables are highlighted.

It was important to the researcher that respondents were required to definitively state their opinions so that the resultant data could be used to create actionable policy. Accordingly, the survey was designed using scales without a midpoint. This provided more information as both a rating question and a follow-up question measuring intensity were asked to each respondent.

LIMITATIONS

There are several limitations that need to be considered when interpreting the results of this research, beginning with the data collection methods: the original research design for the interviews privileged the participation of students with physical disabilities. While this did not result in the homogeneity of interviewees, only three students were interviewed and—due to technical difficulties—only two interview transcripts are included in the content analysis.

Another limitation, which could have contributed to the small sample size, is the intrusiveness of the methodology. Interviewees were required to meet with the researcher in person, on their university campuses, to discuss potentially sensitive information. As a result, their anonymity and privacy could not be guaranteed during data collection.

As there is really no way to isolate the population of students with disabilities from the student population at large, there was no way to draw a representative, probability-based sample of students. Instead the survey sample was created based on convenience using a non-random snowball sampling method where students in OUSA’s social networks were encouraged to invite others in their networks to participate. The resultant quantitative data are not suitable for inferential analysis. That is, the results cannot be used to represent or predict the attitudes and behaviours of individuals who did not participate in the survey.

Similar to the interviews, the online survey received relatively few responses. In addition to a low response rate (few were interested in participating) there was also a low completion rate (few finished the survey). Most individuals who did not complete the survey dropped out after the consent and eligibility page. This suggests potential respondents started the survey and stopped after realizing they were ineligible.
These small sample sizes mean that the results are subject to considerable sampling error (referring to the natural differences between a sample of a population and the actual population). The sampling methods also limit the ability to eliminate bias in the data. The data are susceptible to nonresponse bias and coverage bias—two types of bias that inadvertently exclude some segment of the population and limit the breadth of responses.

The data analysis procedures have few limitations, however there are weaknesses to content analysis that should be acknowledged. Content analysis does not test causal relationships between variables (nor do any of the data analysis methods used in this research). This method is used because it is the most effective way to identify and present the information present in the raw qualitative data and can indicate the proportional weight to place upon the themes and concepts that are revealed.

The results of this research are not generalizable to the entire population of students with disabilities in Ontario. However the results are useful for confirming secondary research findings and revealing topics for future research. We believe it is important to include under-represented perspectives in all aspects of our policymaking. As such, the results are also useful for including the student voice in our organizational policy and advocacy activities.
RESULTS

Fifty-six students participated in the online survey, however after cleaning the raw data and removing incomplete records, only 31 responses were included in the analysis. Disability types, ages, level, and location of study varied considerably.

Respondents were given the option to select more than one disability type; as shown in figure 1, the majority of respondents indicated having psychiatric (19 respondents), intellectual or learning (8 respondents), and/or physical disabilities (8 respondents). Thirteen respondents indicated more than one disability type suggesting they experience more than one condition at the same time. Most respondents (28 individuals) indicated they would describe their disability as invisible, while very few would describe them as visible (2 respondents) or both (1 respondent).

About one third of respondents, as shown in table 1, reported they were over the age of 21; the remaining two thirds were between the ages of 19 and 21. Table 2 shows respondents were at varying years and levels of study.

<table>
<thead>
<tr>
<th>Age</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>9</td>
</tr>
<tr>
<td>20</td>
<td>7</td>
</tr>
<tr>
<td>21</td>
<td>2</td>
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<td>2</td>
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<td>23</td>
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<td>25</td>
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<tr>
<td>28</td>
<td>1</td>
</tr>
<tr>
<td>29</td>
<td>1</td>
</tr>
<tr>
<td>44</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>28</strong></td>
</tr>
</tbody>
</table>

FIGURE 1: PREVALENCE OF DISABILITY TYPES AMONG ONLINE SURVEY RESPONDENTS

**TABLE 1: AGE OF SURVEY RESPONDENTS**
Most respondents were studying full-time opposed to part-time: 23 full-time respondents. Lastly, while respondents studied at different institutions not all of OUSA’s member institutions are represented in the sample (table 3).

Three students were interviewed and two transcripts are used in this analysis. Thirty-one individuals are included in the presentation of descriptive statistics and 23 individuals’ responses are included in the content analysis: two tour participants and 21 survey respondents.
QUALITATIVE DATA

Tour participants were asked to take an OUSA Research & Policy Analyst on a tour of their campus to show them and discuss some of the challenges and barriers they experience. Potential solutions were solicited as was appropriate to the conversation. Survey respondents were asked to name the single biggest disability-related barrier, disadvantage, or issue they face at university. Any solutions originating in these data were brought up by respondents on their own.

Eleven themes related to students’ experiences on their university campuses were revealed. These themes, used as codes during the content analysis process, are listed in Table 4. The disclosure of one’s disability and/or health condition, others’ resistance to accommodations, and others’ ignorance were referenced by the most individuals, however the accessibility of physical space, disclosure, and note takers and note taking received the most coded references (a coded reference refers to each instance or mention of a particular theme within the data). The count of coded references is inflated due to the difference in the volume of data provided by the interview transcripts and open-ended survey responses, such that the interviews produced much more qualitative data than the survey. For this reason, the number of individuals who referred to a specific theme is considered more indicative of importance than the number of coded references.

The following describes how each theme was used to code the data and what the theme says about the experience of attending university for some students with disabilities.

**TABLE 4: INDIVIDUALS WHO MADE REFERENCE TO CODING CATEGORIES (THEMES) AFTER CONTENT ANALYSIS, BY SOURCE TYPE**

<table>
<thead>
<tr>
<th>Category</th>
<th>Interview</th>
<th>Survey</th>
<th>Total Individuals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disclosure</td>
<td>1</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>Resistance to Accommodation</td>
<td>1</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>Ignorance</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Finances</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Physical Space</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Self-doubt or Self-stigma</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Communication</td>
<td>1</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Process</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Participation</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Note Takers &amp; Note Taking</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Advocates</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

**Disclosure**

This code was used for responses that referred to the disclosure of an individual’s diagnosis, disability, or health condition and confidentiality. Disclosure was particularly a concern for those with self-identified invisible disabilities. Participants and respondents felt uncomfortable having to disclose in order to receive accommodations from professors or to have their accommodations taken seriously by other students. One survey respondent describes:

“I think the hardest part is just asking for help. It is especially problematic when you have an invisible disability and you have to [explain] to each new person you come in contact with what your problem is.”

– Survey ID 17
Resistance to Accommodation
This was one of three codes related to accommodation more broadly. This code contains all references to reluctance, resistance, or other negative reactions to students’ attempts to gain accommodation or have others engage with their accommodations. Students experienced resistance from professors who did not want to implement their accommodations and from students who did not want to use an accommodation or complained about it. One student described the difficulty they experience in saying:

“Student accessibility services/profs are good at providing accommodations if you fit within a certain box (e.g. extra time on tests) but aside from that, they simply are not providing sufficient accessibility for students with chronic medical conditions.”
— Survey ID 5

In some cases, students chose to go without their accommodations saying that being accommodated can be upsetting (“triggering”) or that the accommodations they needed were not always provided. As another student said:

“My experience with disability services was also very disappointing. I didn’t feel that I was treated like an individual case and the “supports” they provided me were not helpful. I didn’t see a point in going back after my first semester.”
— Survey ID 18

Ignorance
This code was one of three codes related to attitudes and cultures. The theme of ignorance was used to group together references to others’ lack of awareness and/or understanding of disability issues. This ignorance was demonstrated through a lack of awareness of what could cause or contribute to a disability—including what could create barriers—as well as through bad attitudes, the use of inappropriate language, and inappropriate comments. One survey respondent explained their most significant barrier quite plainly:

“Attitude and culture, oftentimes things are over looked, or people aren’t conscious of the language they’re using.”
— Survey ID 10

Finances
All financial concerns were coded under this theme. These concerns had to do with not having enough money to complete school or purchase required accommodations. OSAP (the main provider of student financial assistance in Ontario) was brought up three times in reference to three different issues: requirements for OSAP eligibility to access other grant money, OSAP’s inefficiency and bureaucracy, and OSAP’s academic progress requirements.

Physical Space
References to the accessibility of campus spaces were coded here; most comments concentrated
on classroom space. Interestingly, feeling as if physical space was inaccessible was not limited to students with physical disabilities. Two students’ comments illustrate this clearly:

“… even though I technically don’t have a physical disability, I definitely have limitations in terms of the physical environment…”  
– Interviewee #3

“I think that large lecture halls make it extremely difficult being a student with anxiety and panic disorders as well as IBS.”  
– Survey ID 12

Collaborative learning and discussion-based activities can present challenges to inclusion, in the context of inaccessible classrooms. In some students’ views, it is this basic inaccessibility that creates the need for individual accommodations. One participant describes this issue:

“While accommodations exist, they are necessitated by inaccessible campus and learning environments.”  
– Survey ID 6

Self-doubt or Self-stigma  
Another one of three codes related to attitudes and cultures overall, this code contains students’ references to doubting their own condition or feeling bad for seeking accommodation and help. As a result of these feelings, some students neglected to seek accommodation, putting their academic success at risk. One student describes:

“When I did demand a doctor’s note, I felt shamed for it. I even debated whether I was making this up, working too hard, or I was simply too self-conscious to ask for help.”  
– Survey ID 4

Although the only student to discuss self-stigma in these terms, one of the interviewees discussed feeling like a burden to others. For example, they said:

“Now these two tables up at the front here, they can move. The problem is if somebody’s already sitting there, or I’ve come late for a disability related reason what have you, I have to get them to move. They get annoyed, and then it’s socially difficult to be included. Because the thing is whenever you have an accessibility issue, often too there’s a social issue associated with it.”  
– Interviewee #2

Communication  
This code includes any mentions of the need for more communication, information sharing, or awareness building. Surveyed students describe the limited communication between students, administration, faculty, and offices for students with disabilities as a barrier. One student provides clarification saying:

“Not enough communication with regard as to what is available to people with disabilities as far as grants, help etc. I didn’t feel like they told me what was fully available and I felt like I had to search and ask others...what to ask for in order to get help.”  
– Survey ID 14

Participation  
As discussed in relation to the theme Physical Space, poorly designed classrooms impede students’ interaction with their peers and engagement with the lesson. Respondents also expressed that a lack of understanding towards their disability made participation difficult, particularly when accommodations are not provided as a result of this misunderstanding. This theme articulates the consequences of participation becoming a barrier: students’ academic records and progress suffer. As two students describe:
“I have PTSD and I know there’s a lot of controversy about “trigger warnings” but there have been many times when I have been forced to leave a classroom because there was no heads up on the syllabus or at the start of the lecture that the class would be discussing triggering topics.”
— Survey ID 18

“My academic record suffered heavily with my condition. This record is carried with me and I cannot correct it now that the cause is understood and being treated. Any future academic pursuits seem inaccessible given my current GPA.”
— Survey ID 4

One survey respondent also discussed the intersection of their worsening condition and the high cost of postsecondary education, ultimately culminating in their concern that they may not be able to continue or complete their education.

Process
This is the second of three codes related to accommodation. This code was used to categorize references to the “series of steps” (in the words of Interviewee #2) required to get accommodated in the university setting. As already mentioned, students describe the process of getting accommodations as triggering, but also time-consuming, effortful, imperfect, and bureaucratic. Students complain that it takes too long to receive their accommodations, specifically that they are not available before classes begin. One of the survey respondents touches on several issues saying:

“... resources are not available before school starts and as a result there is a back log in paper work when school starts that the administration has to go through. In the meantime students can go months without the assistive devices they need and struggle to keep up without them.”
— Survey ID 9

Note Takers & Note Taking
The last of three codes referring to accommodation at large, this code was reserved for explicit references to note takers and note taking. Students discussed the inadequacy of volunteer note takers, in that volunteers’ notes are unreliable in both content and timely delivery. One interviewee specified that volunteer note taker services are inadequate substitutes for paid note takers.

Advocates
This is the last of three codes referring to attitudes and cultures and was only found in one interviewee’s transcript. Interviewee #3 mentioned that it was tremendously helpful to have an “instructor on my side.” This interviewee gave examples of one instructor sharing their personal notes when accommodations were not provided on time and another instructor going out of their way to enforce accommodations requiring the participation of other students.
**QUANTITATIVE DATA**

The online survey asked students about the accessibility of their campus and classrooms, academic accommodations, financial assistance, and transition support. The sample was split almost evenly between those who rated the physical accessibility of their campus excellent or good (four respondents said excellent, 12 said good), and poor or fair (four said poor, 11 said fair). When asked to rate the culture of acceptance of disability issues on campus, the distribution reveals similar results with a slightly larger portion rating the culture excellent or good (three said excellent, 14 said good) and a slightly smaller portion rating the culture poor or fair (two said poor and 12 said fair).

Respondents appeared largely comfortable notifying their university’s office for students with disabilities about their conditions, indicated by a relatively even distribution of comfort ratings (see figure 2) and the vast majority of respondents (23 individuals) affirming that they have notified the office of their disabilities. When asked to rate the accommodations they received, most respondents said they were excellent (6 individuals) or good (9 individuals). Only one respondent said their accommodations were fair but seven respondents said their accommodations were poor.

Lectures, styles of assessment, and types of assignments are offered as examples of course components in this survey. When asked to rate the accessibility of these components, over half of the respondents (20 individuals) said they were poor or fair, in stark contrast to the sufficient accessibility of the campus. To this point, as is shown in figure 2, 23 respondents reported they were very uncomfortable or somewhat uncomfortable talking with their professors about their disabilities. However, this discomfort did not seem to stop students from doing so. Over half of the respondents (21 individuals) reported that they had spoken with their professors about their disability and half of those students said the accommodation they received was excellent or good.

Respondents reported using a variety of academic accommodations in the school term when they completed the survey; 19 respondents reported
using more than one type of accommodation, and 11 respondents reported using more than two. As shown in table 5, modified assignments, modified tests and/or exams, and support services in class were the most commonly used academic accommodations among this group. Other academic accommodations specified by respondents included “flexible schedules” and “extended time for everything,” and “excused absences and spaced out exams.”

Of the 24 respondents who reported using academic accommodations, more of them reported some dissatisfaction with the process of getting accommodations than those reporting satisfaction: three respondents rated the process excellent, eight rated it good, six rated it fair, and seven rated it poor. Even though a large portion of this sample seemed to be familiar with their university’s accessibility and/or disability related services office at the time of taking the survey (10 respondents were very familiar, 17 were somewhat familiar, and 3 were not that familiar), the data illuminate informational barriers. As figure 3 demonstrates, the majority (20 respondents) reported receiving no information about the office and its services prior to arriving at university. After arriving at university, another 20 respondents reported receiving only a little information about the office and its services. Further, a larger majority (25 respondents) were not made aware of the documentation they needed to provide in order to receive academic accommodations before attending.

Informational barriers may extend to students’ knowledge of financial assistance. When asked about their familiarity with the financial assistance available to students with disabilities, responses clustered around those who were somewhat familiar and not at all familiar. Four respondents said they were very familiar with financial assistance available to them, 10 said they were somewhat familiar, four said they were not that familiar, and 13 said they were not at all familiar. This could, in part, be due to

### TABLE 5: TYPES OF ACADEMIC ACCOMMODATION USED BY ONLINE SURVEY RESPONDENTS

<table>
<thead>
<tr>
<th>Type of Academic Accommodation</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modified assignments (for example more time for completion)</td>
<td>16</td>
</tr>
<tr>
<td>Modified tests and/or exams (for example more time, reduced distractions, or a different room)</td>
<td>14</td>
</tr>
<tr>
<td>Support services in class (for example an interpreter or a note taker)</td>
<td>10</td>
</tr>
<tr>
<td>Support services outside of class (for example, a learning strategist, a personal support worker, or mentorship)</td>
<td>8</td>
</tr>
<tr>
<td>Adaptive Technology</td>
<td>4</td>
</tr>
<tr>
<td>Alternative formats for materials (for example, Braille, large print, digitized text, or assisted hearing devices)</td>
<td>4</td>
</tr>
<tr>
<td>Modified curriculum</td>
<td>2</td>
</tr>
<tr>
<td>Modified physical space (for example building entrances or classroom layouts)</td>
<td>2</td>
</tr>
<tr>
<td>Transportation to and from school</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
</tr>
<tr>
<td>None</td>
<td>6</td>
</tr>
</tbody>
</table>

*Response options adapted from the list of forms of accommodation in the Ontario Human Rights Commission’s Guidelines on Accessible Education, 21.*
lack of experience with this type of assistance: when asked if they had ever used the financial assistance available to students with disabilities, 24 said no and only seven said yes. Following-up on this question, 24 respondents affirmed that they could attend university without financial assistance while seven said they could not. Twelve respondents said they were required to have psychoeducational assessments, at an average cost of $1,375 per assessment.

The vast majority of this sample, 27 respondents, reported not attending a transition program for students with disabilities. Among the four respondents who did attend a transition program, one said it prepared them very well for university and the rest said it prepared them somewhat well. When all respondents were asked if they would participate in a transitional program if one existed or if they knew about it, 17 respondents said yes and 10 said no. As follow-up, when asked how useful they thought transition programs specifically for students with disabilities were, four said very useful, most respondents (21 individuals) said somewhat useful, five said not that useful, and one respondent said not at all useful.
On the highest level these data draw attention to the experiences of those with invisible disabilities, psychiatric disabilities, and learning or intellectual disabilities. This is significant given external research that shows Ontarians with physical disabilities are most likely to gain post-secondary credentials among those with disabilities. These data point to specific environmental barriers that may be contributing to lower completion rates for those with disabilities that are not considered physical.

Both the qualitative and quantitative data demonstrate distinct informational barriers. Results suggest that students did not receive enough—perhaps any—information about disability or accessibility services prior to attending university. Once they began their university studies, these students did not receive much more information about these services; the consequence being that students did not use the services available to them. Ultimately, this negatively impacted students’ academic performance.

Transition programs offer an effective means of overcoming this type of barrier and yet much of this sample had not participated in any such programming. These students recognized the value of transition programming; while it may not answer all of their questions—in that they presumed transition programs would prepare them only somewhat well for university—it seems they thought it would be worthwhile to attend. The effectiveness, role, and current student experience of transition programming for students with disabilities are certainly worth investigating further.

Both the physical space of and the teaching that occurs within classrooms put up barriers. Results suggested that these students found some course components inaccessible and further analysis showed that this inaccessibility was not limited to learning materials. Without inclusively designed classrooms, participation became a barrier for some of the students in this study. For these students, the inaccessibility of the physical space made certain teaching methods (namely, collaborative learning) inaccessible as well.

On top of poor and fair accessibility ratings, responses showed the need for multiple accommodations per individual student. Yet, even with this reliance, resistance to accommodations was the second most commonly referenced theme in the content analysis. Again, the ultimate consequence in the face of inaccessible classrooms is a negative impact on students’ grades and performance.

Another significant barrier for these students was the disclosure of their disabilities. The quantitative results suggested a distinct discomfort with talking about disability issues with professors. Disclosure was referenced by the most individuals in the qualitative data; considering that disclosing a disability may involve divulging potentially sensitive information about one’s health, medications, and other diagnoses, we can intuitively say this is difficult and intrusive for some students. However, more research should
be conducted to look at the impacts of disclosure on students’ experiences of stigmatization and discrimination, and on students’ success.

Overcoming barriers to communication could go a long way in improving the university experience of students with disabilities. Finding ways to communicate with students, beyond transition programs, should be a key aspect of these efforts. Students need to know about the accommodations available to them as well as the additional services that disability or accessibility service offices have to offer.

Universities could benefit from community-wide conversations about disability issues. Intentions should be focused on lessening stigma-based discrimination. Students need more acceptance of their disabilities and the accommodations they require to thrive. Addressing these factors would help make them feel included on university campuses.
CONCLUSION

This study investigated the challenges associated with attending and graduating from university in Ontario for students with disabilities. One-on-one interviews were used to gain first hand accounts of the challenges some students with disabilities face. Online surveys were used to ask students specific questions about their experiences.

While not representative of the province as a whole, these data reveal the environmental barriers that inhibit students’ academic success. Most influential are the informational barriers that limit students’ access to support services. Students also reported experiencing attitudinal barriers—perhaps as extensions of informational barriers—that manifest in resistance to their accommodations, requirements to disclose their disability inappropriately, and general ignorance of disability issues. These barriers impede students’ participation in their classes and overall engagement with their education.

It’s been suggested that educational barriers experienced by students with disabilities are due to the persistence of medical models of understanding disability and social models’ inability to gain strong support. The barriers described by the students who participated in this study are largely rooted in their environments—not in themselves; this should give direction to future researchers looking to apply social models of disability to university environments. Here, we have identified the roots of the barriers these students described. Students experienced challenges when they interacted with their campus communities and overcoming these challenges requires campus-wide participation.

Social models of disability provide a stronger foundation for universities to build inclusive communities upon. Building inclusive and accessible communities requires the guidance of students with lived experience as well as a community willing to take responsibility for supporting all of its members.
3. Ibid.
4. McCloy and DeClou, Disability in Ontario, 7.
5. Ibid, 14.
8. Ibid.
10. McCloy and DeClou, Disability in Ontario.
13. McCloy and DeClou, Disability in Ontario.
15. Gable, “Disability theorising.”
18. Ibid.
20. Respondents who indicated ‘other’ when asked to identify their disability type specified a sleep disorder and chronic illness.