

The Lived Experiences with Accessibility of Undergraduate Students with Disabilities

by

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Abstract

People with disabilities is the largest minority group in the United States, and it is a group any individual can join at any point in their life, so issues related to disability are relevant as they can impact anyone. There is a need for college educators and college counselors to increase their understanding of the experiences of college students with disabilities. More research related to accessibility on college campuses for students with disabilities will aid in fulfilling the needs of students with disabilities in areas of their overall lived experiences, sense of belonging, and disability identity development. The purpose of this study is to build on the body research about college students with disabilities and their sense of belonging and disability identity in relation to their experience with accessibility on campus. The current research study aimed to explore the lived experiences with accessibility of students with disabilities at a large public southeastern university to identify if there is an impact on their sense of belonging and how they develop their disability identity. The findings will be used to provide educators and administrators with resources to better support students with disabilities on college campuses and in the classroom.

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List of Abbreviations

CRC Certified Rehabilitation Counselor

POTS Postural orthostatic tachycardia syndrome

ADHD Attention-deficit/hyperactivity disorder

Chapter 1: Introduction & Literature Review

Any individual can join the group of those with a disability at any point in life as disability does not discriminate based on race, age, gender, socio-economic status (SES), etc. Disability can happen to anyone at any time, so it is relevant to everyone. There is a need for educators to have an increased understanding of the experiences of college students with disabilities (Gibson, 2012). Children who received accommodations in United States public schools are now in college, and some institutions of higher learning are not prepared (Lee, 2014). Educators can use this understanding to inform others, advocate, and effectively facilitate inclusive teaching styles. More research related to accessibility on college campuses for students with disabilities can aid in fulfilling the needs of students with disabilities in areas of their overall lived experiences, sense of belonging, and disability identity.

There is an increasing number of students with disabilities who are attending college (Getzel, 2008). However, individuals with disabilities remain less likely than individuals without a disability to pursue higher education degrees, and completion of higher education for individuals with disabilities decreased from 30% to 26% between 1986 to 2001 (Getzel, 2008). This decrease may be a result of new challenges for those students with disabilities in managing their academics through requesting services and supports, interacting with faculty about their supports, and or lack of understanding about accessing services on campus. Understanding the lived experiences of college students with disabilities is vital to expanding the research and addressing the barriers these students face, especially to give this population more of a voice. It is fundamental to have more individual voices tell their story because it sheds light on experiences, which allows for better understanding and accessibility.

Higher education does not provide adequate access that is needed to accommodate the growing number of students with disabilities (Adams et al., 2018a). In society and higher education, there is frequently a need for structural change, but institutions wait until the demand is high before making modifications. Physical structures that do that include, but are not limited to, building ramps, restroom modifications, available assistive devices, electronic formats, and adaptive technology. There are calls for more inclusive research, such as applying universal design principles in the inequitable experiences of students with disabilities in higher education (Adams et al., 2018a). This research study will aid in filling in the literature by analyzing the lived experiences of students with disabilities on a college campus to review the impact it has on their sense of belonging and disability identity.

The transition experience that occurs for students with disabilities from high school to postsecondary education is a critical issue, but there is a limitation in the evidence-based research on programs for supporting positive outcomes for students with disabilities (Frieden, 2004). Students face new environments and interactions when entering postsecondary education, which can create challenges for those with a disability. There is little research on the practice of providing accommodations for students with disabilities in postsecondary institutions (National Center for the Study of Postsecondary Educational Supports, [NCSPEs], 2000). Students with disabilities can lack self-advocacy and how their disability impacts their education, along with navigating services in the college setting. These challenges are on top of the challenges they already face with being in a new environment of the college campus and undergoing new experiences. There is a need for more research on universal design and students with disabilities experiences because universal design is a starting point for colleges to provide students with disabilities access to a more inclusive college experience (Fleet & Kondrashov, 2019).

There are some clear disadvantages for students with disabilities when it comes to postsecondary education (Fleming et al., 2017). Research has shown that for a student with a disability, developing a sense of belonging aids in their self-advocacy, role as a student, and relationships while in college (Vaccaro et al., 2015). By exploring the lived experiences of students with disabilities and accessibility on college campuses, specifically the impact on their sense of belonging and disability identity, there can be an increased understanding of how to best support these individuals.

This chapter reviews the literature about the main considerations in the current research study. This includes individuals with disabilities and the importance of hearing and gaining greater understanding of their lived experiences, accessibility, disability identity, and sense of belonging. While there is research on these topics in isolation, there is little research on the impact of accessibility on college campuses for students with disabilities in their disability identity development and sense of belonging in higher education.

Lifespan

Some argue that the period of adolescence is the most profound stage of change in an individual's lifespan (Wood et al., 2018). Individuals contribute to their developmental changes after moving through earlier developmental stages. Arnett (2000) proposed a new conception of development, which is from the late teens into the twenties. The focus is on the ages 18-25. There is an increase in independence moving into emerging adulthood, while many also are seeking higher education (Wood et al., 2018). This stage is an opportunity for exploration in relationships, love, work, life, coping, views on the world, and more (Wood et al., 2018). There are tremendous changes in personal, social, emotional, and developmental levels. These changes

can occur in living situations, relationships, education, vocation, and navigating new roles (Wood et al., 2018).

The concept of emerging adulthood is distinct from adolescence and young adulthood (Arnett, 2000). Within this stage, there is variability in demographics and characteristics (Arnett, 2000). Living situation is an area that is diverse for this stage, along with reliance on parents or guardians, and education or employment status. This can be a time for tremendous change, and particularly college students are exploring areas, such as their major, world views, and relationships (Arnett, 2000). The present research study examined the stage of life that is congruent with emerging adulthood.

Emerging adults may experience mental health problems during this stage of life and can experience additional struggles when coming from vulnerable populations, such as having a disability (Arnett, 2007). There are additional challenges in the transition from adolescence into adulthood for this population (Osgood et al., 2019). In adolescence, there may be programs and policies in place, but this available support typically ends around the ages of 18-21 (Osgood et al., 2019). Individuals with physical disabilities or with a chronic illness, but without a learning disability, may not have their needs noted in an educational statement, thus having unmet needs (McDonagh, 2006). The current research study aimed to hear the voices of individuals in this stage of life and their experiences on campus and in the classroom.

Individuals with Disabilities

The Americans with Disabilities Act defines disability as “a physical or mental impairment that substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment” (U.S. Department of Justice, 2009). In 2010, there were about 56.7 million individuals with disabilities in the United States

(Brault, 2012). This number increased since 2005 by 2.2 million. In 2010, 10.2% of individuals between 15 and 24 had a disability. According to Brault (2012), an individual with a communicative disability is blind or has difficulty seeing, is deaf or has difficulty hearing, and/or has difficulty having their speech understood. An individual with a cognitive disability has a learning disability, intellectual disability, developmental disability, Alzheimer's disease, senility, dementia, and/or another mental or emotional condition that interferes with everyday activities. An individual with a physical disability uses a wheelchair, cane, crutches, walker, has difficulty walking a quarter of a mile, climbing a flight of stairs, lifting something that is up to 10 pounds, grasping objects, getting in or out of bed, arthritis, rheumatism, back or spine problem, broken or fractured bone, cancer, cerebral palsy, diabetes, epilepsy, head or spinal injury, heart trouble, atherosclerosis, hernia, high blood pressure, kidney problems, lung or respiratory problem, missing limb, paralysis, stiffness in limb, deformity of limb, stomach or digestive issue, stroke, thyroid problem, tumor, cyst, and/or growth that limits activity (Brault, 2012). These definitions of disability were used in this research study.

Accessibility

According to the U.S. Departments of Education, Office for Civil Rights Resolution Agreement with the South Carolina Technical College System, accessible is defined as the opportunity for a person with a disability to receive access to the same information and services and the opportunity to engage in the same interactions as a person without a disability in an equal manner. Accessibility refers to equal and independent access for everyone (Adams et al., 2018b). The laws relating to accessibility in higher education are Section 504 of the Rehabilitation Act of 1973, Section 508 of the Rehabilitation Act of 1973, amended in 1998, Title II of the Americans with Disabilities Act of 1990, and Title III of the Americans with Disabilities Act of 1990. These

laws prohibit discrimination against individuals with disabilities, each one addressing differing types of organizations. Section 504 applies to colleges and universities that receive federal funding, while Section 508 applies to electronic and information technology acquired from federal agencies, and it is used as a standard by the U.S. Department of Education for universities. Title II addresses programs and services in public universities, and Title III addresses those programs and services at private universities.

Mobility is having the ability to move from one location to another independently (Karimi et al., 2014). When students are unfamiliar with places on campus or have difficulty with independent mobility, online services, such as navigation, can assist them. Accessibility is connected to independent mobility and vital for the quality of life for individuals with disabilities (Karimi et al., 2014). When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent. Personalized accessibility map, PAM, is a service that plans trips for students with disabilities, and other individuals, with the main components with a database, routing, and user interface module. Database modules include navigation services, such as car navigation, but studies have shown that road database car navigation is not adequate for helping individuals with disabilities, specifically in wheelchairs, or with visual impairments (Karimi et al., 2014). Routing modules show the parameters that effect the route for individuals with a wheelchair. Researchers introduced a prototype of PAM, called PAM-Pitt, for the University of Pittsburgh's main campus (Karimi et al., 2014). PAM-Pitt included a desktop and mobile version with a Web map that had interactive controls. The routing used optimal routes that included pedestrian paths, sidewalks, crosswalks, trails, bridges, and tunnels, which could be personalized and offer turn-by-turn directions. PAM-Pitt also included information on accessible entrances to buildings, with descriptions, and information about the

campus buildings, an individual using PAM-Pitt can view accessible locations, entrances, routes, and features along the route. Karimi et al. (2014) suggested the need for the development of technologies and tools to automatically validate the quality of accessible data in PAM. Future versions of the prototype will have more data layers and more support for individuals with visual impairments. This shows an available accessible service for students, which connects to the current research study which will explore what students with disabilities have access to on campus and their lived experiences.

Institutions of higher learning with services for students with disabilities are growing in numbers worldwide, but not all these students are receiving equal level of support (Kouroupetroglou et al., 2011). Kouroupetroglou et al. (2011) discussed an Accessibility Services Model for students with disabilities in higher education. The authors presented an organization of management for their university with an accessibility committee, accessibility unit, and faculty departments (Kouroupetroglou et al., 2011). They recorded the needs of the students with disabilities, their abilities, accessibility of the environment, accessible textbooks, and training of staff. In evaluating these areas, a college or university could determine the areas that are lacking on campus to best support students with disabilities. This model has a student-oriented approach and is based on requirements' analysis of students with disabilities (Kouroupetroglou et al., 2011). There is an emphasis and priority on the needs of the students in the services that are in place. The Accessibility Unit is the main pillar of the model and provides supportive services, accessibility services addressed to the student, along with to their environment, and accessibility promoting services. The Accessibility Unit contacts a student with a disability through the Students' Needs Recording Service, which has a systematic and detailed registration of students with disabilities and their needs and obstacles that may come up

during their college experience. Trained staff in the Accessibility Unit meet with a student after reviewing the Needs Recording Service to discuss accommodations. Within this model, there are services that aim at assessing assistive technologies, transportation services, counseling services, use of interpreters and services, volunteers offering daily support, adjustments in the academic environment, buildings' accessibility, and libraries and labs services (Kouroupetroglou et al., 2011). The Accessibility Unit was founded in 2006 and aims to actively work towards access to equal academic studies for students with disabilities and varying needs, which is done through environmental modifications, assistive technology, and accessibility services. This aids in the research as a resource for a more accessible campus.

It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the community (Adams et al., 2018a). Universal design in housing was theorized by Ronald L. Mace as designing products and environments to be useable by everyone to the greatest extent (Mace, 1998). Universal design has seven principles, which are equitable use, flexibility in use, simple and intuitive use, perceptible information, tolerance for error, low physical effort, and size and space for approach and use (Adams et al., 2018a). Audible street crossing is an example of universal design. Universal design can also be used in higher education, which is referred to as universal design of instruction. The principles of this universal design are creating respectful welcoming environments, determining the essential components of a course or program, communicating class/program expectations, providing constructive feedback, exploring the use of natural supports for learning, designing teaching/instructional methods that consider diverse learning styles, creating multiple ways to demonstrate knowledge, and promoting interaction between faculty and students (Adams et al., 2018a). An example of universal design of instruction is creating multiple modes of teaching,

such as lectures, discussion, and videos. The present research study examined the lived experiences of students with disabilities and how accessibility impacts their lives.

Lived Experiences

Hearing the voices of students with disabilities is something that is rarely heard but vital for understanding their needs and advocating their views (Vickerman & Blundell, 2010).

Vickerman and Blundell (2010) interviewed students with disabilities at a higher education institute to hear their voices about their views and experiences. Researchers indicated that 5.6% of the 504 students that were questioned indicated they had a disability and 25% of students who expressed they had a disability did not disclose it on their application for university because of fear they would not be offered a place on the course that they wanted. This influences the current research study as it signifies a connection between the identity of having a disability and the accessible resources on campus. The current research study will further explore the lived experiences of accessibility on disability identity and sense of belonging on campus. The students with disabilities with good experiences mainly depended on the experiences and attitudes of certain staff members, instead of policies in the institution (Vickerman & Blundell, 2010).

Researchers examined the experiences of students with disabilities and their needs transitioning into higher education compared to students without disabilities (Dangoisse et al., 2020). The authors drew attention to the differences in the research related to students with and without disabilities in higher education. For instance, students with visual impairments can have difficulties in class when there are heavy reading assignments, along with students with hearing impairments can have difficulties participating in class lectures, group assignments, and using the phone, which students without disabilities do not always face the same challenges (Dangoisse

et al., 2020). Dangoisse et al. (2020) aimed to examine the hurdles that establish vital challenges for transitioning into higher education and to further explore diversity in the backgrounds of students and their experiences with the transition. This meant that they essentially aimed to investigate the transition into higher education for students with and without disabilities. Dangoisse et al. (2020) utilized a qualitative phenomenological approach using a focus group design, and the data was collected through semi-structured group interviews. After the interviews and collecting data, researchers examined themes from participants. One theme identified was that the transition into higher education was like a roller coaster, with ups and downs. Another theme was that during the transition into higher education was about discovering a new freedom and becoming autonomous, and for students with disabilities, this meant that they had to acknowledge their disability to ask for help if needed, but this also came with fear of being stigmatized or feeling like a burden. A third theme was that the students discovered themselves, along with another theme of overcoming obstacles (Dangoisse et al., 2020). Another theme was the students' perception of the environment of the university, whether that was supportive or threatening. For students with disabilities, having a support service on campus helped them feel supported by their university. Dangoisse et al. (2020) found that a difficulty for students with disabilities in disclosing their disability was fear of rejection, pity, or misjudgment. Many students with disabilities in the study felt that their high school was not structured and adapted to their needs, and this helped them notice how their university better recognized their disability (Dangoisse et al., 2020). Also, some students with disabilities mentioned that in high school they felt as though they had to work harder because of their disability, which made them more aware of their strengths and challenges that they face, thus developing a more successful working method, which continued in college for many of them. Dangoisse et al. (2020) expressed that to

understand and increase the inclusion of students with disabilities and their needs, it is helpful to consider how the students with disabilities experienced guidance in high school. This study will aid in the current study by exploring college students with disabilities and their experiences on campus, specifically with accessibility. The present research aimed to look at the lived experiences of students with disabilities and identify how that relates to their sense of belonging and disability identity.

Sense of Belonging

A sense of belonging is the subjective feeling of connections, socially, physically, and in experiences (Allen et al., 2021). Allen et al. (2021) explained that belonging is a need that individuals are driven to fulfill. Developing a sense of belonging is vital to academic success, but there is little research on students with disabilities and how they transition into higher education (Vaccaro et al., 2015). Researchers indicate that a sense of belonging is challenging for students from marginalized social identity groups (Vaccaro et al., 2015). The current research study looked at the experiences of dealing with accessibility on campus for students with disabilities and whether this has an impact on the sense of belonging for students with disabilities. Research has suggested that students with disabilities are less likely to pursue higher education compared to students without disabilities and can feel a lack of support in higher education when they require certain services (Getzel, 2008). This could be due to the new set of challenges when it comes to managing their academics and needing to request services for their needs. This study examined if accessible services aid in the college experience for students with disabilities and if this makes them feel that they belong.

Developing a sense of belonging can be associated with academic success and persistence, but this can be challenging for students in marginalized social identity groups, which

includes students with disabilities (Vaccaro et al., 2015). Students' sense of belonging, when having a disability, results from physically accessible spaces with psychological features that create a sense of security (Vaccaro et al., 2015). Vaccaro et al. (2015) looked at students with a documented disability and their sense of belonging. Their study examined students with specifically invisible disabilities, so it was not readily evident to those around them. The students in the study were part of a larger grounded theory study, which focused on students from marginalized social identity groups and how they develop a sense of belonging on campus. Vaccaro et al. (2015) reviewed narratives from the students and found three themes that influenced their sense of belonging. Vaccaro et al. (2015) examined the self-reports of the sense of belonging from students with disabilities and found three themes that had a role in the sense of belonging for students with disabilities in college. The first was their ability to advocate for themselves, next was their role as a student, and the final theme was supportive social relationships (Vaccaro et al., 2015). Self-advocacy was connected to their awareness of their disability and their needs. Participants felt a sense of belonging when they were familiar with the accessibility on campus, such as the bathrooms they were comfortable with using. Feeling like a student and doing well in their class was also related to the sense of belonging for the students with disabilities. When the participants felt support in their social relationships, they were able to develop a stronger sense of belonging. The intention of the current study was to examine if accessibility helps individuals with disabilities to feel support in their relationships.

Disability Identity

Disability identity has been defined as having a positive sense of self and feeling connected to the disability community (Dunn & Burcaw, 2013). Johnstone (2004) defined disability identity development as a personal construction, which includes making meaning of

self in the world. Disability identity can help individuals adapt to the disability and navigate daily stress and social challenges (Forber-Pratt & Zape, 2017). The present research aimed to review the lived experiences of students with disabilities for accessibility and if that has shaped their disability identity development.

Forber-Pratt and Aragon (2013) developed a working model of social and psychosocial disability identity development. Forber-Pratt and Zape (2017) expanded this model with more participants after examining the phenomenon of disability identity development and seeing a need for more models of this phenomenon. Their model of psychosocial identity development for individuals with disabilities has four developmental statuses, which include acceptance, relationship, adoption, and engagement. The model can aid in understanding the process that individuals with disabilities go through on a psychological level. Forber-Pratt and Zape (2017) sought out a research question asking how individuals recognize disability identity, along with how those individuals describe it. Another research question they had asked was how those individuals describe their disability identity development. Researchers interviewed college students with disabilities and observed them in settings on campus. Forber-Pratt and Zape (2017) recorded field notes from interviews they conducted and from the observations. Researchers included themes in the results into statuses in the model. The first one was acceptance, and this was seen whether they acquired their disability, or they were born with it. In this status, family and close friends can also go through accepting the disability (Forber-Pratt & Zape, 2017). The next is relationship status and includes building connections with others with disabilities. After that status is adoption status, which is when the individual adopts values that are shared within the group of disability culture. This can be when the individual chooses how much they embrace their disability and integrate it into their identity. The fourth status is engagement status, and the

individual can be a role model for others and help individuals that are developing through the statuses. Individuals in this status can also advocate and give back to the community (Forber-Pratt & Zape, 2017). This current research study utilized this model in conceptualizing disability identity and disability identity development.

Disability identity developed as a significant topic in disability research because of students who acknowledged negative personal experiences related to assumptions that others had around their functional limitations and how others perceived their identity and the impact it had on their identity of themselves (Cunnah, 2015). The individual with a disability may distance themselves from the identity of having a disability if their experiences with others are negative about them having a disability. When an individual receives a new diagnosis of a disability and is faced with differences, they may develop role confusion and need for introspection (Forber-Pratt & Zape, 2017). This can be especially true when in a new environment, such as college. Cunnah (2015) found that students with disabilities are influenced by their experiences of identity in their past and present, and the social model of disability has contributed to the inclusion of individuals with disabilities. Research suggests that students with disabilities do not come to university with positive self-identities after experiencing negativity with stigma and labeling about their disability (Cunnah, 2015). This connects to the current study by looking at themes with individuals having a disability and the way their lived experiences impact how they identify with having a disability.

Researchers indicated that traditional higher education practices, aligned with the medical model of disability, are seen as problematic because of the impact it has on students with disabilities and their feelings about disability and the construction of their identity (Kohli & Atencio, 2021). Research around disability stresses the negative consequences on identity from

discrimination and stigma in society. Kohli and Atencio (2021) described that university campuses provide accessible furniture to students with disabilities in some classrooms, which usually has a reserved sign. This could feel isolating for students, making them want to distance themselves from the label of having a disability. Kohli and Atencio (2021) recounted that participants were reluctant to identify as having a disability because they felt singled out. Another participant expressed feelings of aggravation when hearing their disability needed to be 'cured' instead of just being accepted. This participant felt pride in identifying as having autism and did not feel as though he needed to change it or be cured. The current research study will look at the experiences of students with a disability and how their experiences of accessibility negatively or positively impact how they identify with their disability. A positive impact could result in feeling pride when identifying with their disability. Kohli and Atencio (2021) also described the importance of discussing disability with students as a construct. This means that they can see disabilities as a difference, but not one that needs to be evaluated. Students can then see disability as a difference, and not different from being normal, this view can aid in the students developing positive self-identity (Kohli & Atencio, 2021).

Significance of the Study

Lack of knowledge surrounding disabilities and inclusive teaching styles can influence the perceptions of faculty, which can lead to stereotyping (Cunnah, 2015; Wynants & Dennis, 2017). Lack of knowledge of disabilities can lead to more negative attitudes towards students with disabilities. Increased knowledge about disabilities and the impact of accessibility on students can lead to an increase in inclusive and accessible teaching strategies. Wynants and Dennis (2017) found that faculty participants reported feeling less discomfort when interacting with students with disabilities after completing a disability awareness program compared to

before completing the program. Disability identity developed as a significant topic in disability research because of students who acknowledged negative personal experiences related to assumptions that others had around their functional limitations and how others perceived their identity and the impact it had on their identity of themselves (Cunnah, 2015). The individual with a disability may distance themselves from the identity of having a disability if their experiences with others are negative about them having a disability. When an individual receives a new diagnosis of a disability and is faced with differences, they may develop role confusion and need for introspection (Forber-Pratt & Zape, 2017).

A deeper understanding of the lived experiences and an understanding of students with disabilities and their experience with accessibility can aid in creating more inclusive classrooms and campuses, resulting in more positive experiences for students with disabilities. The present study addressed critical factors for students with disabilities, such as identifying changes for improvement in accessibility, practice and policy for higher education institutions, faculty, and administration from the voices of the students.

Purpose of the Study

The intention of this study is to build on the research about college students with disabilities and their sense of belonging and disability identity in relation to their experience with accessibility on campus (Cunnah, 2015; Forber-Pratt & Zape, 2017; Wynants & Dennis, 2017). Disability identity development is a fundamental social process and can be formed by recognition through available resources, which is why it is crucial for professionals, such as those on college campuses, to become aware of how to best support individuals with disabilities (Forber-Pratt et al., 2017). The findings will be used to provide educators and administrators

with resources to better support students with disabilities on college campuses and in the classroom.

Research Questions

Q1: What are the experiences of students with disabilities with accessibility in the college setting?

Q2: How does accessibility on college campuses shape students' sense of belonging on campus and with peers in the classroom?

Q3: How does accessibility on college campuses impact how a student with a disability identifies with their disability?

List of Terms

For the purposes of this study the following terms are used and are listed in the order in which they appear:

Transition. The transition for students with disabilities from high school to postsecondary education is a critical issue, but there is a limitation in the evidence-based research on programs for supporting positive outcomes for students with disabilities (Frieden, 2004). Students face new environments and interactions when entering postsecondary education, which can create challenges for those with a disability. The concept of emerging adulthood is distinct from adolescence and young adulthood (Arnett, 2000).

Disability. The Americans with Disabilities Act defines disability as “a physical or mental impairment that substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment” (US Department of Justice, 2009).

Communicative disability. An individual with a communicative disability is blind or has difficulty seeing, is deaf or has difficulty hearing, and/or has difficulty having their speech understood (Brault, 2012).

Cognitive disability. An individual with a cognitive disability has a learning disability, intellectual disability, developmental disability, Alzheimer's disease, senility, dementia, and/or another mental or emotional condition that interferes with everyday activities (Brault, 2012).

Emotional disability. An individual experiencing an inability to learn, which is not explained by intellectual, sensory, or health factors, an inability to make satisfactory interpersonal relationships with peers and/or teachers, behavior that is inappropriate in normal circumstances, general feelings of unhappiness/depressions, and/or a tendency to have physical symptoms of fears with personal problems (Individuals with Disabilities Education Act, 2004).

Physical disability. An individual with a physical disability uses a wheelchair, cane, crutches, walker, has difficulty walking a quarter of a mile, climbing a flight of stairs, lifting something that is up to 10 pounds, grasping objects, getting in or out of bed, arthritis, rheumatism, back or spine problem, broken or fractured bone, cancer, cerebral palsy, diabetes, epilepsy, head or spinal injury, heart trouble, atherosclerosis, hernia, high blood pressure, kidney problems, lung or respiratory problem, missing limb, paralysis, stiffness in limb, deformity of limb, stomach or digestive issue, stroke, thyroid problem, tumor, cyst, and/or growth that limits activity (Brault, 2012).

Accessible. According to the U.S. Departments of Education, Office for Civil Rights Resolution Agreement with the South Carolina Technical College System, accessible is defined as the opportunity for a person with a disability to receive access to the same information and services and opportunity to engage in the same interactions as a person without a disability in an

equal manner. Accessibility refers to equal and independent access for everyone (Adams et al., 2018b).

Mobility. Mobility is having the ability to move from one location to another independently (Karimi et al., 2014).

Universal design. Universal design in housing was theorized by Ronald L. Mace as designing products and environments to be useable by everyone to the greatest extent (Mace, 1998).

Sense of belonging. A sense of belonging is the subjective feeling of connections, socially, physically, and in experiences (Allen et al., 2021).

Disability identity. Disability identity has been defined as having a positive sense of self and feeling connected to the disability community (Dunn & Burcaw, 2013).

Disability identity development. Disability identity development is a personal construction, which includes making meaning of self in the world (Johnstone, 2004).

Summary

The current chapter has identified trends in research and the need for the current research study. The following chapter discusses the description and justification for the design of the current research study. The target population and recruitment will be addressed in the next chapter to discuss the research questions and study procedures.

Chapter 2: Methodology

The purpose of this chapter is to provide the design and procedure of this current research study. This chapter will address research design and questions, participants, procedures, and data analysis, along with a discussion and exploration of limitations.

Research Design

This study utilized a qualitative research design, specifically transcendental phenomenology. The study examined the lived experiences of undergraduate college students with disabilities to gain an understanding of their personal familiarities and experiences with accessibility on campus and how it has impacted their sense of belonging and disability identity development.

The researcher used semi-structured interviews as the main mode of data collection for gathering experiences and how accessibility has impacted students with disabilities. Descriptions of experiences can be seen as representations of the interviewee's world, so it is not judged as fact, instead, it is a point of view (Muylaert et al., 2014). The point of view of the students will aid in the research study by providing personal experiences from the students with disabilities to get real lived stories from students while on campus. Muylaert et al. (2014) provided a structured way of obtaining narrative interviews. This includes phases of preparation, initialization, main narration, questioning phase, and small talk. The first two phases consist of exploring the field and formulating research questions, and then formulating initial topics for narration. There will be no interruptions from the interviewer in the main narration and questioning phase, followed by immanent questions. After the interviews, the text can be condensed for meaning. As opposed to a structured interview, the researcher utilized a semi-structured interview approach to formulate the topic and research questions to prepare the interview protocol by having

predetermined questions but allowing space in the interview for more opportunities for participants to express themselves in open dialogue about their experiences. The researcher identified themes and analyzed the results to answer the research questions in the present study.

Theoretical Framework

For this research study, the researcher used a transcendental phenomenological approach to collect the data. Transcendental phenomenology focuses on the meaning of individuals' experiences (Phillips-Pula et al., 2011). The purpose of phenomenological research is to look at the lived experiences of the participants and describe their experiences (Simon & Goes, 2018). The researcher will be a learner in the phenomenological perspective. Individual differences are acknowledged and embraced in this approach (Simon & Goes, 2018). The focus of this type of research is the individuals' experiences and how they interpret those experiences. Every individual and participant is different, so each experience will offer unique answers to the interview. The four aspects of phenomenological research are lived space, body, human relationships, and time (Simon & Goes, 2018). These aspects of the research will be considered when reviewing the different experiences of each unique participant, by addressing each in the interviews. Phenomenological research asks about the meaning of the participants' lived experiences. The first step in this research study is identifying research questions, then identifying the participants. Data was collected through the semi-structured interviews with open-ended questions.

Research Questions

Q1: What are the experiences of students with disabilities with accessibility in the college setting?

Q2: How does accessibility on college campuses shape students' sense of belonging on campus and with peers?

Q3: How does accessibility on college campuses impact how a student with a disability identifies with their disability?

Procedure

Participant Sampling and Recruitment Techniques

The researcher used purposeful sampling to select participants who identified as being an individual with a disability and a student at a large public southeast university. The use of purposeful sampling will help the researcher select participants to understand the research questions (Creswell & Creswell, 2017). The researcher utilized listservs through the university to get a diverse pool of individuals with disabilities. An email was sent out to individuals with an information letter about the research and Institutional Review Board (IRB) approval. The researcher's contact information was available for individuals who were interested in participating. Fliers around the campus of the university were also posted with information on the research and a QR code to a link with the information letter and eligibility screener to identify qualified participants. Participants were selected based on their status of being an individual with a disability, being between the ages of 19-25, and being an undergraduate student at a large public southeast university. Once the participants were selected and consented to participation, then they could schedule an interview with the researcher. Participants were selected based on the goal of gaining a set of eight to 12 undergraduate college students with disabilities. This number is based on knowledge and research in this type of qualitative research of phenomenology, the number of participants is typically small, but enough to provide rich data

(Chamberlain, 2009). The size of samples depends on the qualitative design. According to Creswell and Creswell (2017), phenomenology typically includes a range of 3–10 participants.

Instrumentation

The researcher utilized a semi-structured interview for the instrumentation for this research. The interview consisted of open-ended questions with three opening questions. The opening questions consisted of gaining information about the participants' age, their expected graduation year, and where they are from. These questions were used to ease into the interview questions. The researcher opened the interview by asking the participant to describe their disability identity, which corresponds with the third research question, "how does accessibility on college campuses impact how a student with a disability identifies with their disability?" The next questions asked about their experience adjusting to college, along with their experience with accessibility in various situations. These correspond with the first research question, "what are the experiences of students with disabilities with accessibility in the college setting?" The final questions asked participants about how their disability comes into play when making friends on campus, and how it makes them feel in various situations. These correspond with the second research question, "how does accessibility on college campuses shape students' sense of belonging on campus and with peers?" Within the interview there were opportunities for follow-up questions. This interview protocol was created for the purpose of this current study. This interview protocol has been reviewed by an expert in the field of qualitative research.

Institutional Review Board Process

The researcher was responsible for ethical practices for conducting research and protecting participants, which included informed consent, reducing any risk to participants by ensuring confidentiality, and removing identifying information. The researcher also utilized

phenomenology research design that considered the research questions and the relevant procedures. The Institutional Review Board (IRB) reviewed all aspects of the research study prior to start of the research to ensure ethical practice of the current research. Participants were provided the information letter, which included the purpose of the study, inclusion criteria, their rights, and any possible risks. The researcher began collecting data when approval was given by IRB.

Recruitment and Data Collection

The researcher recruited and interviewed participants. Participants were all current undergraduate students, 19-25 years old, who identified as having a disability at the time of being an undergraduate college student at a southeastern large university. The researcher sent recruitment emails utilizing listservs and fliers around campus, along with undergraduate recruitment, SONA, a web-based system to manage, recruit, schedule, and assign extra credit hours for participation in research opportunities. Interested individuals followed a link to an informed consent form and a Qualtrics survey, which served as a screener for eligibility in the study. The screener defined disability, based on the Americans with Disabilities Act, with categories and examples, and exclusion criteria, such as general health conditions that are not aligned with the definition of disability. The screener also included eligibility criteria, such as the individual's age, if they identify as having a physical, cognitive, or communicative disability, and their current level of education at a large public southeast university. The researcher used these questions to ensure the individuals were qualified for participation in the present study. From the eligible pool of individuals, participants were selected for participation. Emails were collected from the screener to schedule interviews but were not used in data collection. Email addresses were permanently deleted after analyses and results were completed. The researcher

recorded the virtual interviews on Zoom and transcribed the data by listening back after the interview to have a written copy of the interview. Qualitative software, such as NVivo, was purchased to transcribe the interviews. To ensure confidentiality, numbers were assigned to participants, and names were not included when notetaking or recording the interview. Data was stored in a password protected folder on Box.

Semi-Structured Interviews

The researcher met with each participant for semi-structured interviews, which included open-ended questions. Utilizing a semi-structured interview allows participants to provide more information about what has happened in the past (Creswell & Creswell, 2017). Semi-structured interviews are useful for the researcher to control the questioning by being prepared with the questions prior to the interview. The interviews were about half an hour to an hour and completed virtually via Zoom based on the availability of participants and their accessibility. The interview protocol was developed to address the research questions and hear about the experiences of students with disabilities.

Data Analysis

According to Creswell and Creswell (2017), there are steps in the qualitative data analysis. Step one was to organize and prepare the data that was going to be analyzed. The researcher transcribed interviews then went into the next step of examining the data. Next, coding was to be conducted by organizing data through categories (Creswell & Creswell, 2017). The researcher completed this by grouping together commonalities in responses. The researcher then generated themes and integrated and analyzed the meaning of the themes. The themes were utilized to find similarities in the lived experiences of the students with disabilities based on answers generated from the research questions. Through textural language, which is a narrative

that explains how the participants perceive the phenomenon, the researcher identified core themes (Yüksel & Yıldırım, 2015). Moustakas (1994) describes the participants as co-researchers because of their experiences in the data, without the subjectivity of the researcher. The textual description that the researcher constructed is a narrative of the co-researchers' experiences (Yüksel & Yıldırım, 2015). The researcher wrote the descriptions into the experiences to help understand the co-researchers', or participants', experiences.

Saturation

Saturation comes from grounded theory (Creswell & Creswell, 2017). The researcher stopped collecting data when themes were saturated. This means that gathering new data does not create new understandings or perceptions (Charmaz, 2006). This would conclude that the sample is acceptable, and saturation has been reached (Creswell & Creswell, 2017). In the current research, the researcher abided by the concept of saturation. When there were no longer new insights from participants thus concluding that there was saturation.

Bracketing

Bracketing in transcendental phenomenological research is a crucial principle. In transcendental phenomenology, there is less focus on the interpretations of the researcher, and instead more emphasis on describing the experiences of the participants, so the researcher can utilize bracketing their own experience in the research (Moustakas, 1994). Bracketing is utilized to alleviate potential harmful effects of biases that could impact the research that is conducted (Tufford & Newman, 2012). In qualitative research, the researcher is the instrument for analysis. Bracketing is the process of the researcher drawing awareness to assumptions or preconceptions regarding the research topic. Preconceptions can influence the way that the data are gathered, analyzed, and presented in the research. When there is a close relationship between the

researcher and the topic then bracketing can also protect the researcher, such as when the research topic is emotionally challenging, which can impact the interpretations of results (Tufford & Newman, 2012). The researcher should be honest about their thoughts and biases. Through self-reflection, such as journaling, the researcher will reflect on thoughts and feelings that come up throughout the current research study (Tufford & Newman, 2012). Reflexive journaling includes reflecting on the reasons for the research, personal assumptions, the researcher's place in the research, potential conflicts, and feelings that arise throughout the research (Tufford & Newman, 2012). Reflexive journaling was used throughout the present research study, as the researcher kept notes before and after each interview to reflect on thoughts in the research. Additionally, member checking was conducted by reviewing the participants' answers with them post interview to ensure accuracy in responses. This was done directly after the interview with the participant.

Positionality

For the purpose of this section, the researcher offers the following statement on positionality (Tracy, 2020). As the researcher, I am an able-bodied, white, heterosexual, cisgender woman. I have my master's in rehabilitation counseling and am a certified rehabilitation counselor, CRC. I have provided mental health counseling to children, adolescents, and adults, and provided vocational counseling for individuals with disabilities. I have also taught undergraduate courses in the rehabilitation field for students entering professions where they will work with individuals with disabilities. I have also taught and supervised master's students in rehabilitation counseling. My passion and purpose in life is rooted in advocacy. I believe it is my duty to be an advocate for myself, my clients in counseling, and individuals with disabilities, along with helping them advocate for themselves as they gain independence. I also

teach others how to be an advocate for themselves and those they work with. Disability is often left out of conversations on multiculturalism and social justice. I aim to conduct research that will shine a light on the individuals with disabilities to show the importance of their experiences. I want to use my power and position as a CRC to advocate for individuals with disabilities to provide them with a platform to share their experience.

Auditing

The researcher utilized an auditor for the purpose of this study, who was an external reviewer with experience in qualitative course work and the current research study design. The auditor reviewed the data and analysis of the researcher. The use of auditing will be to ensure reliability and validity of the present research study (Creswell & Miller, 2000).

Research Design Limitations

There are limitations to the present research study design when it comes to using interviews to collect data. The information that is provided is filtered through the lens of the participants (Creswell & Creswell, 2017). The information that is provided is not observed, which can be a limitation because it is not in a natural setting, so the researcher cannot see what the participant is describing or experience it firsthand. There may be biases when the participants answer in the presence of the researcher and not all of the participants will be equally perceptive (Creswell & Creswell, 2017). Also, with virtual interviews, there are anticipated limitations by not being in the same room with the individual. These limitations can be internet connectivity and technical issues, along with reduced personal interactions. Moreover, students from one institution may be a limitation of findings that are not relevant to other institutions of higher education.

Summary

This chapter has reviewed the methodology of the present research. The present research study utilized a phenomenological qualitative approach to review the lived experiences of students with disabilities through semi-structured interviews and the impact it has on their sense of belonging and disability identity.

Chapter 3: Findings

There is a need for educators to have an increased understanding of the experiences of college students with disabilities (Gibson, 2012). The purpose of this study was to hear from the lived experiences of undergraduate college students and how accessibility played a role in their disability identity and sense of belonging in the classroom and on campus. The following research questions helped to explore their experiences: What are the experiences of students with disabilities with accessibility in the college setting? How does accessibility on college campuses shape students' sense of belonging on campus and with peers? How does accessibility on college campuses impact how a student with a disability identifies with their disability? This chapter identifies the findings obtained from the study participants in semi-structured interviews.

In the present research study, there were a total of nine participants, all of whom had at least one disability and were currently enrolled as an undergraduate student at a southeastern university. Each participant took part in a semi-structured Zoom interview with the researcher to share their lived experiences as a student with a disability. Eight out of the nine participants were female, all ranging from 19 to 23 years old. Table 1 (Participant Demographics) displays an analysis of the participants' demographics.

Table 1

Participant Demographics

Participant Code	Age	Disability
1F	20	ADHD; Autism; Depression; Anxiety
2F	19	Psychogenic seizures
3F	23	Postural orthostatic tachycardia syndrome (POTS)
6M	19	Dyslexia

7F	19	Dyslexia; Celiac
9F	20	Dysautonomia; POTS
10F	21	Chronic back pain; hypermobility disorder
11F	21	Dyslexia; Dyscalculia
12F	21	Thyroid cancer

Themes

According to Creswell and Creswell (2017), there are steps in the qualitative data analysis. The researcher acted along with these steps in starting by organizing and preparing the data that was going to be analyzed. The researcher transcribed interviews then examined the data. Next, predetermined codes aided the researcher in grouping together commonalities in responses. The researcher then generated themes and analyzed the meaning to find similarities in the lived experiences of the students with disabilities based on answers in the interviews.

The semi-structured Zoom interviews with undergraduate students with disabilities captured the experiences that can be overlooked by faculty and students without disabilities. The data was transcribed with NVivo, which aided in the review of data to identify the value of the experiences throughout the participants. After transcribing, the second step was categorizing the data into codes (Stuckey, 2015). Coding can be done with predetermined or emergent codes. Predetermined codes can be used based on key concepts identified. For the purpose of the current research, the predetermined codes identified were, accessibility, sense of belonging, disability identity, and lived experience, with three subcodes of adjusting, peers, and faculty. Using a deductive approach with predetermined codes, it helped identify themes that emerged from the interviews and data collected in answering the research questions. Thematic analysis allows the

researcher to identify and analyze data to describe themes (Lochmiller, 2021). As codes appear in the data, the researcher could classify that code as the foundation of a theme. The themes found within the predetermined codes were that accessibility is great when it is there, but it was not always there for everyone. There was a general sense of belonging as a student, but not as a student with a disability, and disability identities were still developing. Lived experiences were overwhelmingly positive, but rough adjustments to college because of the disability, awkward experiences with peers, and helpful experiences with faculty, until it was not, which was when there were experiences of frustration and a lack of understanding by some faculty.

Accessibility – When It’s There, It’s Great

The first predetermined code was “accessibility.” Within this, there were themes that emerged from the descriptions of the participants. Accessibility and accommodations worked well for those participants that were receiving them and had the availability of what they needed, thus the theme identified was “when it’s there, it’s great.” However, for those that did not have accommodations or experienced needs that were not met, they reported having more difficulty on campus and in the classroom. This theme aided in discovering the research question about the experiences of students with disabilities with accessibility in the college setting.

1F expressed their thoughts and experiences in relation to not receiving accommodations:

I haven't completed the accommodations paperwork yet, and honestly, I'm not sure what the accommodations could offer me that would help necessarily because mostly what the accommodations seem like is for mobility, and if you're blind, deaf, or something, I don't feel like it's really based towards ADHD or any of those kinds of things. I feel like it's more physical disabilities.

1F was not familiar with what accommodations could provide in the classroom or as a student with ADHD, anxiety, depression, and autism, that they were not already receiving. They also shared some difficulty in the accessibility of finding how to get accommodations:

If you know where to look, it's easy, but if you just, drop me on the University home page I feel like it'd take a little bit of Googling to find everything, so I'd say fair to middle on the difficulty...I do wish that there was more information about everything...I just wish that there was more information, more easily accessible information about therapists and I wish more people knew about the therapy options.

A couple of the participants shared about accessibility and the jAUnt golf cart service that is available for students, faculty, and staff with a disability or medical condition. This service is offered if the individual has difficulty traveling within campus. Medical documentation is required for using this service, and it is not an accommodation.

3F discussed their involvements with accessibility and the jAUnt golf cart service:

I mostly only use the jaunt system to get around classes and stuff...Our school activities are at night, but the golf cart system closes at five, so anything after that you can't get to as much.

2F had positive experiences with the Office of Accessibility when their disability was causing a strain on their academics:

I think I've had a really positive experience with the Office of Accessibility, and they've been very helpful to me because I almost had to drop out last semester. I almost got a medical withdrawal, so if it wasn't for the accommodations that they allowed me to have, I wouldn't have been able to do class. They were very understanding at the time because I didn't know what I had. And I told them I don't know what I have, but this is what

happens. And they're like, okay, this is what we're going to do. You will be able to leave class early, you can make up an exam if you can't do it that day, so that took a lot of stress off of me and greatly helped me a lot, so it's been it's been very good.

6M shared similar thoughts and experiences about the Office of Accessibility and the Biggio Center when it came to their disability:

I've used the Office of Accessibility and the Biggio Center for testing. I request time and a half for each test, it's been pretty seamless.

7F had a comparable positive experience with accommodations and the Office of Accessibility:

Actually, the Office of Accessibility has been really, really good. They've been really on top of things.

10F mentioned that they were set up for success with their accommodations:

The accessibility team here is fantastic. I've met with them so many times about different things and they've really set me up for success...They upgraded my parking so that I wouldn't have to walk as far to make sure, like I didn't actually dislocate something on the way to class...And then they've also given me exam rescheduling and attendance consideration to make sure that the professors know ahead of time.

9F described difficulty with physical accessibility, specifically feeling frustrated by buildings that were not fully accessible with elevators, particularly the College of Agriculture building related to their major:

I've used the golf carts to get around before...And then both freshman and sophomore year, I had problems where I fell and one time, I broke my ankle. The other time I cut my leg so deep I couldn't walk on it. I had problems with not even being able to get like getting around campus. That was like the biggest thing was I realized how inaccessible

some of the buildings are...Some of the buildings don't have elevators because they're like historic buildings. That always kind of makes me mad because I was like, well, I get that it's a historic building, but like, everyone deserves a chance to go to class...kids are like in wheelchairs and just can't be in agriculture (major) because they just can't go to class...it makes me really mad because I like want to like advocate for agriculture, but then I'm like, well, they are not accessible to a lot of people.

11F had some recommendations for how things could be better for students in the classroom, which was sprung by being an organized student, but understanding that this will not be the case for everyone:

I've thought about ways it could be better, but I'm just not sure it can because you have to go take your test and you just kind of have to figure out in your schedule when you have time. I will say, thankfully, I'm a really organized person, so I've never felt like really struggling to figure out and get up and take my test. A lot of it falls on the student because if you don't go into the portal and schedule your test yourself, you're kind of out of luck. For someone with a more serious disability, that could be an issue.

12F also had accommodations and positive experiences to share about the Office of Accessibility:

I do have accommodations set up with the college, so it made it as easy as it could have possibly been. I have attendance accommodation. The Office of Accessibility was super kind and super encouraging to me. I think that definitely helped the process of getting into college a lot easier than it could have been... I think they've done a great job of making it as seamless as possible, and just the people at the Office of Accessibility were always so kind, never had a problem. I cannot say enough good things about that.

Sense of Belonging – Belonging as a Student, not as a Student with a Disability

This study examined if accessible services aid in the college experience for students with disabilities and if this makes them feel as though they belong. The theme across sense of belonging was that the participants felt a sense of belonging as an individual, a student, and a student at the university, but when it came to disability, they did not feel as though they always belonged as a student with a disability. This theme aligned with the research question that asked how accessibility on college campuses shapes students' sense of belonging on campus.

1F expressed that they had a “rough” sense of belonging, but felt they were welcomed into their major with helpful events:

Through therapy, I started joining some clubs and I even joined one that's just getting started, and I was elected one of the officers, so that really makes me feel connected...

With the College of Agriculture there's a lot of events, like the welcome back picnic, and then in Comer Hall, there's the student advisors, and they have like a free snack bar thing where you can go every day and get like a drink and a snack, so I like going in there.

2F had an overall positive sense of belonging, but shared that they did not experience their disability regularly, and it was a recent diagnosis:

I felt like I belong on campus. I haven't felt a sense of I don't belong, I mean I've had a really positive experience on and off campus. That's probably partly because I don't experience my disability all the time. I think that if I had it like for freshman year when I might've felt more isolated because I was in my room all the time, I couldn't go to the basketball game because I had to lay down. Like even yesterday I couldn't go to the meeting I had to go to, and then all my friends went out after. I feel like overall, I have a

good sense of belonging, but, when it does happen, I do feel left out. Maybe not like I don't belong, but I feel left out.

2F felt left out in social situations, and shared some frustrations when they experienced their disability and they had to go on as though everything was normal, but a lot happens behinds closed doors for those with disabilities that others do not see:

I mostly feel like I belong in the classroom. I started having seizures in the middle of the chemistry final. I was like, I feel like this isn't fair. I'm not going to do as well as these other kids in this classroom because of what's going on. But like, what am I going to do? I have to take this, so sometimes I'm frustrated because I feel like people don't know that I just had a bunch of seizures last night and I'm still here. You know, but people don't know what happens at home, and then I come, and yesterday I had a lot of seizures, and when they're really bad, they can be in my leg, so I had to go to a networking event yesterday only a few hours after and I wasn't really that put together and I was kind of out of it as all that happened and everybody was all put together and I was kind of not as good at talking to people or on my game with these alumni, but I was kind of not doing my best and I was like, they don't know that in that morning I was on my couch just convulsing, so I feel like sometimes it makes me look bad because of what's going on, but I'm not going to tell everybody my personal information... I can be embarrassed sometimes. I'll sit in the back of the classroom, if I know that I'm going to have some. It just looks weird to be convulsing in class and people aren't used to seeing it. I don't want to scare people, you know, and I don't want people to ask me what's wrong... I think that overall, I feel like I belong in the university and like I don't feel like I don't belong, but

sometimes I feel left out because I can't do stuff that other kids do, but I still have had a great support system and been really welcomed by everybody.

3F was able to get around campus using the jAUnt golf carts, but since they stopped running at a certain point in the day, they were unable to attend some social events on campus, thus making them feel less connected to others:

I guess I can't get as connected with all the other activities or things because I can't get there as much, but most of the time, it's all right.

7F expressed their disability was not visible, so they shared their thoughts on how to fit in and feel a sense of belonging:

As an individual, it's been good. It's hard to decide what clubs to be in. I've kind of just like stepped back and watched a little bit this semester, but no one's made me feel left out or anything like that. And then with a disability, it's more of like an underlying disability. I guess people can't like physically tell, but people can definitely tell if I'm like talking to them about tests or stuff like that. I don't get all A's or stuff like that, and everyone's been really encouraging. It's been good so far... I get frustrated sometimes because I'll have a hard time concentrating or I'll get anxious sometimes that I'm not taking the right notes.

9F felt a sense of belonging as an individual and as a student, but as a student with a disability, they felt it was isolating, especially in the classroom when they felt as an outsider with their accommodation when it singled them out:

Well, as a whole, I definitely feel like I belong here, but like from a disability standpoint, no, because we don't really have any clubs or anything, or organizations. I guess the only one is EAGLES, but that's different. But there's not one for everyone, like a club... I've met tons of girls on campus that have POTS, so there's definitely people around and I'm

sure there's tons of others... I think it's a little bit isolating because the accommodations like one of mine is that I have to sit in a special seat...like an outsider...they should just provide one for everyone.

10F shared their experience with belonging and clubs:

I joined advocates of disabilities, which is now dissolved this past year. They were really good about having workshops and speakers come talk to us about a variety of different things and then also being advocates for those disabilities.

12F explored their thoughts on finding a sense of belonging with others that have experience with what they have gone through in their disability:

I think finding girls who had gone through or who were going through the same thing was just really comforting to me. It gave me a good sense of belonging because it's just it's very specific things you go through, and the vast majority of my friends have not gone through that. And so sometimes it can feel like it takes away from your sense of belonging because I'm going through all of these things frequently, and sometimes it's hard when you get a bad note from your doctor, but your friends don't understand. It's been really great finding girls who do understand and girls that I can talk to about it, so that's been awesome...I think it's been great finding people with the same situation as me, which that's definitely contributed to my sense of belonging, I would say, because it's finding someone that you didn't think that you could relate to on that level, then you find someone who knows exactly what you've gone through. I am very, very appreciative that I found people like that at the university. I've never felt put in a weird position.

11F found some sense of belonging:

I mean I've never really struggled to find my sense of belonging. I've never felt like my learning has held me back by any means.

6M reiterated the theme of feeling a sense of belonging as a student, but not as a student with a disability:

The school spirit is great, so that helps a lot, but the sense of belonging has been good. I take a lot of classes with my friends, and I can go to study sessions with them. It's really, really positive.

Disability Identity – Developing

A theme that surfaced within disability identity is that it was still in development for the participants. Many of the participants did not feel strongly connected to the disability community or as an individual with a disability. Some of them acquired their disability in college, so it was a new experience for them, and they were developing their identity. This theme helped in exploring the research question that asked how accessibility on college campuses impacted how a student with a disability identifies with their disability.

1F was still exploring their diagnoses:

I just recently got diagnosed with ADHD, and I am still waiting for my autism diagnosis, so I don't really feel connected with those diagnoses as much. I've been living with my depression and anxiety for years, so I feel a little more connected to those...I feel like I accept those diagnoses more. With the ADHD it doesn't really feel like I have it, I've just been living with it for so long, but I haven't had the words to describe it.

2F explained their feelings and how their disability is something that happens to them, instead of being who they are:

Most of the time I don't (identify with having a disability) since I don't experience symptoms that often. I don't have that like idea that I have a disability in my head.

Disability feels like a weird word to me to identify with because it only is a circumstantial thing, but it's one of the things that happens to me more than like a part of who I am. I kind of feel out of place if I'm like within the disability community because I feel like it's not the same as other disabilities, but it still is a disability because it does affect my life in a really major way.

7F was confident and had a positive sense of disability identity:

I would say I'm pretty confident about it. I'm never embarrassed. I talk about it. If people ask or I'll make a joke every now and then. I would say I'm pretty comfortable with it.

But my mom has also, like probably helped with that because ever since I was young, she always made me feel very well-rounded.

12F was still building and developing their identity:

It's kind of still building...it is something that affects me every single day, so it's something that I do think about frequently. I don't see myself as a disabled person, but it is something that I have to deal with physically every day.

11F did not view their identity connected to having a disability:

You know, honestly, it's an interesting story because I didn't find out I was dyslexic until I was a junior in high school. I didn't get it officially tested till then. I always knew I was a slow reader and a slow test taker. I always knew there was maybe like a little something off. It started when I started to take the SATs. I was taking these huge tests, and I just I kept doing worse and worse and worse. I was like, okay, I'm not stupid, something else is up. I approached my parents, and I was like, I really think I need to have testing done.

The results come back, and they were like, we don't know how no one ever caught this. We don't know how you've been kind of functioning at a normal level. I was always a straight-A student, still am. Like it never held me back. I guess my identity is I don't know. It's just like it's just how I live my life. Like it's just always been a part of me. I just didn't even know it until recently. I guess it's just something I live with day to day. It doesn't occur to me that I have the disability when I'm just like going about a day-to-day tasks.

3F shared similar thoughts:

I guess I'm not that connected with it right now.

Lived Experiences – Positive

When asking the participants questions about their experiences, some subthemes emerged from the experiences. This included their time adjusting to college, instances with peers, and interactions with faculty, which were all relevant under the umbrella of their lived experiences. The theme with lived experiences were overall positive among participants.

1F shared experiences in finding therapy and a food bank on campus that had an impact on their overall experience as a student on campus:

I feel like the therapy and the psychiatrist from the Med Clinic has been really helpful to me and then also with the med clinic, I can just go downstairs and get my medicine. I don't have to make plans to go to Walgreens or CVS or whatever. I really like that. And then I'm also trying to get set up with some of the University Cares. I recently got access to the food bank, the campus food library, and so that has been a lot of stress off of my shoulders because, you know, I come from a poor family, so I'm not getting a lot of help, and, you know, working full time and being a student is really difficult. So being able to

go to the food library and get food has been really helpful... Last year was really hard because with my ADHD I'm not good at processing auditory cues when there's a lot of background noise. It makes it really hard for me to concentrate on a teacher if the classroom is really loud. So I did experience a little bit of that my first year, so that was rough. And then, you know, I'm just I'm not able to focus on stuff easily because of my ADHD, so that made doing, like, homework and stuff really difficult, so that was definitely an experience that I had.

2F explained their stressful experiences with their seizures and how they continue to show up in their life, even after having seizures:

There was a time last year where I just had to leave abruptly from the classroom, and it was really stressful to me because I was in a lecture hall full of like 100 kids and I had to walk out in front of all of them and just like walk out having seizures, so it's kind of stressful walking around, like I block it out. The idea that people are looking at me or like that people might be looking at me, it doesn't bother me as much anymore, like convulsing in front of people because I do it so much. I used to do it so much that it's shocking to other people. And, like, I'm kind of used to it. So, like, literally yesterday I talked to my teacher because I have been having seizures, and I said I did not have time to properly study for the exam. And she was like, so you're in class, does that mean you're okay? And I was like, well, I've actually had seizures in the class today and I think I'd be a distraction to other students and I would not be able to complete the exam, and then I had a seizure in front of her while talking to her and she was like, okay, yeah, so you don't have to take the exam today, I see that you are obviously unwell and it was kind of funny to me because I was and am kind of like numb to it now because I feel like I

experienced it all the time, but she had never seen it and she was like, oh, okay. Because sometimes I can underplay because I'm like, this is something that I should just be able to do, you know, I need to be able to. I shouldn't have to miss this. I'm just going to try and do it anyway, which is something I have to get better about because most people would be like, you know, no, I'm not going to do an exam today. I kind of downplay it... Sometimes it's nice to be reminded that I that I can just stop and rest, like you have permission to not be here right now.

7F had additional thoughts to share with the researcher about an additional diagnosis:

I have celiac, and the gluten free section in the dining hall still makes me sick. I don't know if it's just my body like not used to that food, or if it's cross contaminating still.

10F expressed their experience and recommendations for others:

Everyone is very welcoming. Like I dislocated my shoulder one time freshman year, and I dropped all my stuff, and I had like three people run up to me and help me pick everything up, which was really nice... Really just having more empathy or being more educated on other physical disabilities that maybe you can't exactly see until they're happening, that would be my recommendation.

11F shared that their experiences were positive:

I get the double time which I've been so grateful for... I will say the school does a really good job about providing other like tutors that the school will pay for... even if I need external help, I feel like the university has done a really good job of providing that.

12F had strong experiences with peers:

I got to meet maybe two or three more girls who had either just had their thyroid out from cancer or were about to have their thyroid out for cancer. It has deepened into my college

experience because I've gotten to use my experience to comfort other people that I've met in that situation.

Adjusting – Rough

Many of the participants recounted “rough” or “really hard” experiences adjusting to college at the start or when their disability flared up.

1F had a “rough” first year:

My first year here was very rough, I come from a large family...for the first year I didn't have a roommate, so that was rough and living three hours from anyone I knew. The summer after my first year I found out about the therapy offered, so I got set up with that, and she got me set up with the med-clinic and a psychiatrist.

2F had a similar hard time, particularly because their disability started recently, so it has been new to navigate:

It was really hard last year because I was away from my family, and I never had any of these symptoms before, so it was hard, but I was lucky enough to have a good support system, so I had friends who would help me. It was a little isolating, though, because I couldn't go out while I was having them, like I would be in my bed because I needed to rest. I didn't know what was happening for a long time. Like the doctors couldn't figure out what was going on.

7F shared their thoughts and experience of coming to college:

It definitely has not been the easiest, but better than I expected. I didn't really go in with any expectations, but getting back into harder schoolwork has definitely been an adjustment. Just with it causing anxiety.

3F explained needing a break:

I had to take a break for the medical problem. Then I came back. Getting used to things, I guess, was a little more difficult than it probably was the first time just going into college. 9F shared a comparable experience, and also a unique and difficult experience with their sorority:

It was hard. In my freshman year, I got really sick, and I almost had to medically withdrawal... My sorority, the one big thing they like, kind of kicked me out for having a heart problem, which was kind of crazy... There is this whole thing, I passed out and broke my ankle and then they just left me on the floor and didn't do anything. It was during recruitment. And then they didn't call an ambulance or anything. When I woke up, I called my roommate on my Apple Watch and I was like, I'm like on the ground, I can't stand up, and she came to get me taken to the E.R. And they got mad and tried to fine me for missing... it was so draining, and they told me I was lying, and I was faking it, and they tried to tell me that it didn't actually happen. I was like, well, my foot's in a boot, so I think it did happen. And they were like, no, we didn't see.

Peers – Awkward

The theme that came about when asking about experiences with peers was that they were overall helpful, but at times it was awkward to explain their disability or when they were experiencing symptoms of their disability. It seemed as though peers were confused and did not know what to do, or tried to help, which left the participant in awkward situations at times. This was also related to their sense of belonging and how they felt they had to explain their disability to friends and peers that did not understand.

1F had trouble with peers:

My first year here was really rough. You know, I didn't feel really connected because I have a lot of social anxiety, so you know you'll never see me, like on Friday at a frat house partying, so that did make it hard for me to, like, get out and, like, connect with people...my anxiety makes it hard for me to go up to people because it's social anxiety, and then I guess my ADHD makes it hard for me to remember to text people back and stuff...and then with my autism, social cues sometimes just go over my head...I don't really talk with peers in the classroom. When I'm in a classroom, I'm mostly just focusing on the teacher, so it's kind of hard for me to get like a sense of connection in the classroom because when I'm in there, I'm there to learn, so that does make it difficult to make connections.

2F said that some of their friends did not know:

Part of the stress is when I will be in social situations where I have them (seizures) just like in front of my friends and they just kind of know what's going on, and nobody says anything, they just kind of ignore it which I kind of appreciate because then it's like I'm just normal, but it was hard to do work because like part of the stress was the work, so if I had to get work done sometimes I couldn't do it because I can't type on my computer right now, my hand, it's like violently convulsing, you know, like, I just can't do that. And like, I don't want to be in an exam room and be convulsing in front of another kid because it's going to be distracting to them, so it was really hard...some of my friends don't even know I have it, I will avoid telling them because I don't want it to affect the way they see me...I don't want people to associate me with it, like I'm separate from it.

3F shared similar experiences as other participants:

Fine in the classroom, but then, if we're going to hang out outside of class in a specific location, like studying or something, you can't really change the golf cart rides and stuff. I know they can't be more flexible because you can't change things in like hours, you can't just plan things for that day, you have to plan ahead of time. It makes it a bit difficult...I don't really talk to my people inside the classroom too much...my personality is more introverted, so I don't talk to as many people...I guess most people wouldn't know of my disability, you can't really see it.

9F said that some peers do not understand, or they do not share with other people that they have a disability:

I don't talk about it. Usually if we've been friends for a while, I'll bring it up, but I just don't really talk about it to people unless something happens...people are usually accepting.

6M conveyed their experience of also not telling peers about their disability:

It's not a physical disability, so not a whole lot of people know, but people that are close to me support me on it and be patient where when they need to be, but on campus, it's been perfect, very seamless and positive...Sometimes when my friends are like, oh yeah, we're all walking to go take this exam, and I'm like, oh yeah, I'm taking it tomorrow...so I have to like, explain to them.

7F shared that they mention their disability to peers:

With just peers, I mention it because I'm comfortable with it, but no one's made fun of me or anything, so it's been it's been good.

10F similarly explored:

I don't really talk about it when I'm making new friends. It's more like when I'm closer to them. I might talk to them about it, but it hasn't impacted any of my friendships.

11F explained difficulties with friends:

I've had a very normal experience. I joined a sorority, I made friends. I've been able to be an officer in several organizations.

12F was able to deepen relationships by meeting people with similar experiences and situations related to their disability:

I think it's only deepened my relationship with one girl that I was friends with, but probably just one girl... It's not something a lot of people understand, the cancer that I had, most of the time, it's not life threatening, so sometimes it can be a little tough with friends because they think that they can joke about it because I wasn't about to die, but for me it's not funny because it affects me every single day and it's something that will affect me for the rest of my life, so sometimes with friendships it can put a strain on and this has only happened a few times where people joked about it, but I think it has a strain on a couple friendships just because sometimes people think it's funny to joke about it, but most of the time people are really supportive. I think a lot of times when there are uncomfortable topics such as cancer or something, friends don't really want to talk about it because they don't know how you feel about it, so they don't even want to ask you how you're doing because they just sort of pretend like it doesn't exist, so I kind of go along with that. I don't really bring it up too much unless it's something that's like really affecting me that I want to talk about...I would probably say that I wish my friends were not afraid to talk about it with me because I feel like whenever I bring up, they're

uncomfortable. Being able to talk about it with me, but not thinking it's okay to just joke about it all the time.

Faculty – Good Until It's Not

Overall, participants felt as though faculty were accommodating and relayed “good” experiences, but there were times that they felt faculty needed more understanding and empathy about disabilities. This was especially true for those with disabilities that may not be as common or well known.

1F had differing experiences:

With my therapist and my psychiatrist, I love both of them, and then as far as like teachers and professors go, I don't really talk about it (the disability) to them. Again, it's mostly just class material and stuff. I don't want to bother the teachers because they're there to teach and I'm there to learn.

2F was in the theme of “until it's not” and had some recommendations:

Honestly just being understanding, I've been really lucky that I've had very understanding professors. I would say like believing and believing me that I am having seizures, like I haven't had anybody say they don't believe me, but that's something I'm always scared of, is somebody being like, you're just trying to get out of taking this exam. I've had professors be like okay make sure you're only using your accommodations for the proper reasons, and I know they have to say that, and like I do, I haven't missed any classes this year...but because part of, especially with psychogenic nonepileptic seizures, they're psychogenic. Most people will think that they might be making it up or people might think that I'm crazy because I don't actually have brain waves messing up in my head, it's just the stress is overloading my brain, so something I've heard, like from some family

members will be like, you're just faking it, but we're not faking it. I can't control myself when it's happening, there's just less of an awareness about psychogenic non-epileptic seizures because it's more rare. I wish that more people knew about it because it'd be easier for me instead of having to explain myself because it's kind of personal, because usually when you have a disability, you don't have to tell them your disability, but I feel the need to tell them...I got all really good experiences when it first started happening last year...they're all super understanding...my math teacher last year, she was like, don't worry about taking this exam right now, you need to worry about getting better. And I was like, thank you, that was really nice, and that's what I wanted to hear, you need to take care of yourself right now, school isn't what's important right now. It's for your health... I wish for maybe more teachers had to know more about disabilities, you know, like what they are. I wish that I didn't have to explain it to everybody.

3F had positive things to say about professors:

I think most professors are pretty good about allowing us to use excuses for appointments and stuff, and if we need extra time on the test...I think most of the faculty, like professors and stuff, are pretty good at helping out, like attendance accommodations or extra time on tests or record the class.

6M conveyed their experience with faculty and making connections:

They've been very accommodating. I get like, one on one time with the professor. I can really establish that connection with them through emails, resumes, going to visit them in office hours to talk about my accommodations, so it's pretty helpful.

7F had similar experiences with professors:

They've all been really easy going. They're just willing to help.

11F said some professors have been willing to help:

I mean, everyone's been unbelievably nice. Like I said, all the professors are very willing to help and do whatever they can. The one thing is, and I know this makes sense, but you go and you submit your accommodations on your portal, but then specifically for them to take effect, you have to go and speak to your professor...it's helpful because then they get to know your face and how they can help you and whatnot, but like I said, if you're kind of an unorganized person and the first week of class is kind of crazy, it really falls all on the student to approach the professor or email and set up a time. I feel like for some people that could be a lot.

12F had positive experiences:

All my professors are always very understanding and so unbelievably nice about it...every professor that I've met with they've been so supportive, so I would just say keep doing what you're doing. I think they do a great job of listening. They just ask you what's going on and what you need and being very understanding. The main thing is listening and being understanding, and they've done a great job of that.

10F had experiences that were normally good, but had to do a lot of explaining and felt frustrated at times:

With Hypermobility disorder you can dislocate things at any point. I've had professors get angry that I've actually dislocated something in class and had to leave...But I feel like I have to explain what it is a lot. It's not super well known. And there has been like some pushback on like my accommodations. They're like, if you miss class, you just can't make up what's in class...I've just emailed them afterwards, like if there was any sort of pushback about me leaving because we have the meeting beforehand where I warned that

like, hey, I might have to get up and leave suddenly... It's kind of frustrating. I'm not going to lie.

Summary

The purpose of this chapter was to describe the research findings. The nine participants shared their experiences as students with disabilities with accessibility in the college setting. The researcher explored how accessibility on college campuses shape their sense of belonging on campus and in the classroom, along with identifying how accessibility plays a role in how a student with a disability identifies with their disability. The participants' responses provided an opportunity to explore the experiences of students with disabilities. This can often go overlooked, especially when the disability is not presently affecting the individual, visible, or observable by others.

Chapter 4: Discussion

In this chapter the researcher discusses the findings and themes that emerged from investigating the lived experiences of students with disabilities with accessibility on their college campus and in the classroom. The researcher also discusses the limitations of the current study and implications for educators and administrators to better support students with disabilities on the college campus and in the classroom. Lastly, a presentation for recommendations for future research is provided.

Discussion of Findings

The intention of the current research study was to build upon the literature on university/college students with disabilities in relation to their sense of belonging and disability identity with their experience with accessibility. The findings of the study will be used to suggest and provide educators and administrators with resources that can better support students with disabilities on college campuses and in the classroom.

Accessibility – When It’s There, It’s Great

Accessibility signifies equal and independent access for everyone (Adams et al., 2018b). When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent (Karimi et al., 2014). This can aid in their ability to feel as though they can move through college life on their own if they have the same opportunities as students without disabilities. Since the theme of “when it’s there, it’s great” implies that the university has accessible options for students with disabilities, and it is great when the student has it available, but there is area for growth.

Participant 1F shared feelings about accommodations and explained that information on accessibility is easy if the individual knows where to look. This participant found it difficult to

navigate the university websites to lead to information needed for accommodations without a guide to help. This led to the participant mentioning that there is a need for more easily accessible information. This participant described their disability as ADHD, Autism, Depression, and Anxiety. However, the participants were not receiving accommodations in their classes because the participants had the preconceived notion that accommodations were only for physical disabilities. Participant 1F shared that they were not receiving accommodations in their classes because they believed that it would only benefit someone with a physical disability, instead of someone with a diagnosis similar to theirs, which was ADHD, Autism, Depression, and Anxiety. Participant 10F explained that they received upgraded parking, scheduling exams, and attendance. These are examples of accommodations that can be provided for students with disabilities when they know where to look and how to access their needs for their disability in the education.

Participant 9F shared that their experience with accessibility included having classes in a building with only stairs, and no elevator. This participant explained their disability was Dysautonomia and POTS, which makes it difficult for them to walk up the stairs at some times. A notable statement by this participant was, “everyone would benefit just from adding an elevator.” Universal design is a starting point for colleges to provide students with disabilities access to a more inclusive college experience (Fleet & Kondrashov, 2019). It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the classroom (Adams et al., 2018a). The participants expressed feelings of “discouragement” when the accessibility of the building impacted their ability to attend one of their major classes. It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the community (Adams et al., 2018a).

Sense of Belonging – Belonging as a Student, not as a Student with a Disability

Sense of belonging is the personal feeling of connectedness, socially, physically, and in experiences (Allen et al., 2021). Belonging is a need that individuals are driven to fulfill (Allen et al., 2021). There is little research on students with disabilities and how they transition into higher education (Vaccaro et al., 2015). A sense of belonging is challenging for students from marginalized social identity groups (Vaccaro et al., 2015). Vaccaro et al. (2017) found that feeling like a student and doing well in their class was also related to the sense of belonging for the students with disabilities. Additionally, when the participants felt support in their social relationships, they were able to develop a stronger sense of belonging (Vaccaro et al., 2015). The current research study explored the experiences of dealing with accessibility on campus for students with disabilities and whether this has an impact on the sense of belonging as a student with a disability.

Participant 1F did not feel connected to others because of social anxiety. They joined clubs after going to therapy, but in class they are not focused on peers, so it was hard for them to make connections. They shared that events are for friends, not the classroom. In the classroom they were focused on learning and did not make connections with others, which they could attribute to their disability.

Participant 2F recognized their positive sense of belonging to not experiencing their disability all the time. This participant experienced psychogenic seizures with their disability, so this was brought on with stress or lack of sleep. At times they shared that they did feel left out because they might not be able to go to an event, such as a basketball game, because they had to lay down after having seizures. However, they expressed that they do feel as though they still belong. A prominent quote of this participant was, “I just had a bunch of seizures, but I’m here.”

This shows how there are a lot of symptoms and elements of disabilities that go unseen. This participant felt embarrassed at times when they had seizures on campus or in class. They reiterated that they would feel as though they were left out if they had to sit away from friends in class in case a seizure occurred, but they still felt as though they belonged. Thus, in answering the research question, accessibility and their disability impacted their feeling of being left out, but not necessarily the overall feeling of belonging.

A couple of the participants shared about accessibility and the jAUnt golf cart campus transportation service that is available for students, faculty, and staff with a disability or medical condition. This service is offered if the individual has difficulty traveling within campus. Medical documentation is required for using this service, and it is not an accommodation. Participant 3F mentioned that the carts stop running at 5pm, which can make it difficult to go to campus events later in the day. They also described that they were not able to make scheduling changes past a certain point. For instance, if they wanted to go to the library after class with a friend, instead of going home, they were not always able to make those late changes. Further, this also helped in answering the research question that accessibility did have an impact on their ability to connect with others in certain campus events, but it did aid in their ability to belong in the classroom, as long as they scheduled ahead of time based on their class schedule. Additionally, participant 6M expressed that “the school spirit is great.” However, their experience with accessibility and accommodations of taking exams on a different day, without classmates, takes away from a sense of belonging as a student with a disability.

Participant 9F had a “special seat” in a lab, and they expressed feeling “isolated” because of this. There was a commonality of feeling left out or singled out with a couple other participants as well. An example of universal design of instruction is creating multiple modes of

teaching, such as lectures, discussion, and videos (Adams et al., 2018a). This could also be having the same seats for everyone in the class, no matter their ability. Participants expressed feeling like an outsider with something that made them feel different or singled out based on their experience with accessibility and receiving accommodations. This included, taking exams on a different day or in the back of the class, or having a seat in lab when no one else did. This participant said, “as a whole I feel like I belong, but from a disability standpoint, no.” Something they believed would be helpful in feeling a sense of belonging as an individual with a disability was if there were clubs on campus for similar individuals. This goes into the conversation with participant 10F, and how they described that they were once a member of a club for advocates of disabilities, but it has been dissolved. This was a club for individuals with disabilities was a way for them to feel connected and gain knowledge on disabilities and advocacy. Participant 12F explained that finding others who have gone through the same experience with their disability was comforting. It took away from a sense of belonging for them with their friends who had not gone through it, which was thyroid cancer.

Similarly, participant 11F was able to have a sense of belonging through organizations despite having a disability and not feeling as though it held them back. The organizations they were a part of were not specific to disabilities, but it allowed them to connect with others and find community.

Disability Identity – Developing

Disability identity development is a crucial social process and can be formed by recognition through available resources, which is why it is critical for professionals, such as those on college campuses, to become aware of how to best support individuals with disabilities (Forber-Pratt et al., 2017). The model of psychosocial identity development for individuals with

disabilities has four developmental statuses, which include acceptance, relationship, adoption, and engagement (Forber-Pratt & Zape, 2017). This current research study utilized this model in conceptualizing disability identity and disability identity development. With the theme being that the participants were still developing their disability identity, it seemed as though many of them were in the relationship or adoption development statuses.

When an individual receives a new diagnosis of a disability and is faced with differences, they may develop role confusion and need for introspection (Forber-Pratt & Zape, 2017).

Participant 2F felt out of place in the disability community because they do not always experience the symptoms of their disability. Participant 3F said they did not feel that connected to their disability identity. Participant 11F explained they did not feel as connected because it was “just how I live my life.” Participant 12F shared that they were also still building their identity, but disability was not necessarily part of their identity, even though it affects them every day. Half of the participants felt as though they were still developing their identity with their disability, or they felt as though their disability was just a part of who they are and what they experience, which was normal, and did not impact their overall identity. An individual with a disability may distance themselves from the identity of having a disability if their experiences with others are negative about them having a disability (Cunnah, 2015). Cunnah (2015) found that students with disabilities are influenced by their experiences of identity in their past and present.

Lived Experiences – Positive

Dangoisse et al. (2020) found a theme that the transition into higher education was like a roller coaster, with ups and downs. For students with disabilities, having a support service on campus helped them feel supported by their university. Overall, the participants in the current

research study shared positive experiences in college as a student with a disability. These were general experiences that they went through and were compelled to share in the interviews.

Participant 2F had psychogenic seizures and shared their experiences of having seizures in class. These were stressful experiences for the participant. They explored their positive experiences with the Office of Accessibility. Participant 6M also had positive experiences with the Office of Accessibility, along with having a “seamless” experience with the Biggio Center at the university.

The Office of Accessibility at the university explains that they align with the viewpoint that students with disabilities are students with abilities who encounter social and environmental barriers. They explain that disability is a crucial component of diversity, and they value the experiences of students with disabilities. In their mission of working with students, faculty, staff, and community to limit barriers for a more accessible campus and learning environment, they use reasonable accommodations in the academic setting, assistive technology, support services, and student, faculty, and staff training. The Biggio Center's vision is described as a desire to develop a culture on campus that honors student-centered learning, evidence-based teaching, diversity, and educational technology. Accessibility is connected to independent mobility and vital for the quality of life for individuals with disabilities (Karimi et al., 2014). When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent and have more positive experiences.

Further, more experiences provided included participant 11F describing that they are able to have double time to take their tests. However, they explained that it can be difficult to schedule because that time has to come out of something else. The responsibility and scheduling falls on the student, which can be difficult, especially when they have a disability that can be

challenging to stay organized. The participant also hired outside help for some of their classes to aid in their work in courses to be able to follow along. Participant 10F shared their experience has been “great” and one instance when they dislocated their shoulder on campus and dropped everything, people ran up to help them. This participant said just because they had a disability, they were no less of a student than anyone else. Participant 12F conveyed that their experiences were strengthened after meeting peers with the same disability, or experience with thyroid cancer. They articulated the importance of finding people with similar experiences and understanding.

When asked if there was anything else they wanted to share, participant 7F shared that they also had Celiac disease. They expressed that even when eating the gluten free food on campus, it would make them sick at times. This caused them to think that there was cross contamination of the gluten free food with the other food.

Adjusting – Rough

A subtheme within their experiences was that the time was a rough adjustment to college, mainly due to their disability. There are tremendous changes in personal, social, emotional, and developmental levels. These changes can occur in living situations, relationships, education, vocation, and navigating new roles (Wood et al., 2018). Participant 2F had a “really hard time adjusting” because they started college when they first started to experience new symptoms of seizures and convulsing related to their disability. Participant 7F said it was “not the easiest” to adjust to school because of anxiety. Participant 3F took a break from school because their disability was impacting their schooling. Participant 9F also took a break from school and medically withdrew one semester. The participants felt as though their disability did impact their adjustment to college and the changes of each semester.

Peers – Awkward

Another subtheme of the experiences of the participants was their experiences with peers. “Awkward” seemed to be the most reoccurring word to describe the varying instances shared in the interviews. Many of the participants expressed that their friends either did not know about their disability or they did not talk about it with their peers and friends. Also, it would get awkward for them when their peers tried to help at times. Participants felt as though they did not know how to talk about their disability with peers or it was exhausting having to explain or describe it to others. If a student with a disability has difficulty adapting to new environments or with social skills, they may also struggle with friendships (Plotner & May, 2019). Thus, there could be potential challenges when interacting with peers or self-disclosing their disability, making it “awkward” which was seen in the current research study.

Participant 1F had diagnosed anxiety and autism, so they shared that they experienced social anxiety with peers and had trouble with social cues. Participant 3F was also introverted and had some anxiety with peers. Participant 9F explained that they felt “awkward” in class, especially when they have a “special chair” to sit in during their lab. Participant 7F said their experiences were “good” and that peers were helpful. This was aligned with participant 10F, who said their disability did not impact friendships. Participant 11F had Dyslexia, and expressed that texting their friends could be difficult, but they did not feel “held back” from making friends.

Participant 6M shared that they have to explain their disability to peers at times. Similarly, participant 12F discussed that with peers who had the same disability or experiences, those relationships were strong. They described that not a lot of people understood their experience with cancer, and often others made jokes. They confirmed that jokes were usually not funny. On the other hand, some peers were afraid to talk about it, thus avoided conversations

about the disability and the impacts it had on the participant. This was why this participant found it important to have connections with others who shared their experiences and could empathize with each other.

Faculty – Good Until It’s Not

The final subtheme of lived experiences was about faculty. The participants shared that for the most part, their interactions with faculty were “positive” and “good,” but there were some experiences that were noted as being frustrating. This was when faculty lacked empathy or understanding. Participant 1F had “good” experiences with their therapist and psychiatrist. However, they do not talk about disabilities with professors because they understood that professors are there to teach and the participant is there to learn. Vickerman and Blundell, (2010) found that students with disabilities with good experiences mainly depended on the experiences and attitudes of certain staff members, instead of policies in the institution.

Participant 3F had good and accommodating experiences with their professors. Participant 6M shared the importance of establishing a relationship with their professors. This aided in being able to keep them informed in their accommodations, needs, and other information for each class. Additionally, participant 7F found it significant to keep their professors up to date, and they have found faculty to be welcoming and willing to help. Similarly, participant 9F felt they needed to explain at times, but professors were usually then accepting. Participant 11F had experiences with supportive and understanding professors. They shared it can be difficult when the responsibility falls on the student to get accommodations in certain courses. However, since they felt they were an organized individual it was not a substantial problem for them, but they could see how it could greatly impact someone with a more limiting disability.

Some participants also had experiences that were not as positive. Participant 2F shared that some faculty need more understanding and awareness for disabilities. They felt they always needed to explain their disability. This participant explained that it would be beneficial for faculty to acquire more knowledge, especially about types of lesser-known disabilities. There were times for participant 10F that professors were not as accommodating, or they even got angry. They shared their frustration in saying that they had to explain “a lot” to professors. This participant stressed the need for more “empathy” and “understanding.” Lack of knowledge of disabilities can lead to more negative attitudes towards students with disabilities (Cunnah, 2015; Wynants & Dennis, 2017).

Limitations

This study explored the lived experiences of undergraduate students with disabilities on campus and in the classroom. Only focusing on students from only one institution was a limitation of this study. The researcher sought to gain knowledge of the experiences of these students across a similar platform, which was one institution. However, this could be viewed as a limitation because there are differences that could be explored in other universities, states, and cities. The researcher also sought to gain an understanding of varying disabilities, but it could be seen as a limitation that there was lack of focus on one type of disability to gain a more thorough and deep understanding.

An additional limitation of this study is that out of the nine participants, eight were females and only one male. Females and males might have differed perception of their experiences or thoughts when it comes to their identity and sense of belonging. Richness of perspective among transcendental phenomenology studies can be achieved when there are a variety of voices included in the study.

Implications

The current research study has investigated the lived experiences of nine undergraduate college students at one university. The information that they provided and the themes that emerged from these data can be groundwork for faculty training to provide greater understanding about accessibility experiences and sense of belonging for college students with disabilities. Based on the findings, it is important for counselor educators to know about the experiences of students with disabilities to be able to support them on an individual level. The findings of participants feeling it is “good until it’s not” with faculty can be useful for educators to apply the following implications to continuing education in their field.

There were overall positive experiences shared by the participants, but there was a theme of “good until it is not” when it came to faculty. This meant that for those participants that did not always have a positive experience, they felt as though the faculty lacked understanding or empathy when it came to knowledge on their disability. More education, training or knowledge about certain disabilities and the unseen impact it has on students could strengthen the empathetic understanding that faculty provide in coursework. Wynants and Dennis (2017) found that faculty participants reported feeling less discomfort when interacting with students with disabilities after completing a disability awareness program compared to before completing the program.

There is an implication for a program along with training for new faculty to complete as they enter the university. This could be part of the orientation process for faculty and can be adjusted as continuing education for other faculty. The curriculum in the program would include information on working with students with disabilities, knowledge about lesser known

disabilities, and how to handle various situations. This can aid in more understanding and empathy with faculty for interactions with students with disabilities.

Additionally, most participants had a “rough” time adjusting to college because of their disability and had “awkward” experiences with peers. Many of them were still developing their identity when it came to their disability. One premise that emerged in identifying this was to find individuals with similar experiences, such as having clubs or groups on campus for more advocacy within the Disability community. Having this presence on campus could allow the students to feel as though they belong as a student with a disability. This could also strengthen their knowledge on the accessibility on campus and in the classroom, while advocating for change when necessary. When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent. Accessibility is connected to independent mobility and vital for the quality of life for individuals with disabilities (Karimi et al., 2014). These notions can be a step in the right direction to further the advocating, awareness, and knowledge for those students with disabilities. Additionally, implications for students with disabilities and their peers are the importance of connection and belonging. The themes emerged from the current research study showcased that the students felt a sense of belonging, but not from a disability standpoint. This can begin to be improved with more opportunities for peer connection through groups and events that are accessible and known on campus. Thus, their sense of belonging and disability identity can progress and flourish.

Recommendations for Future Research

Based on the present study, recommendations for further research includes a focus on specific disabilities, such as conducting a study with only cognitive disabilities or only physical disabilities, for example. Next, broadening the participant pool to other institutions of higher

learning could aid in learning and exploring more of the lived experiences of those students based on what is accessible on various campuses and classrooms. Further, exploring post-graduates or graduate students could further the exploration of the experiences of individuals with disabilities and their sense of belonging and disability identity.

Conclusion

The current research study addressed critical factors for students with disabilities, such as identifying changes for improvement in accessibility, practice and policy for higher education institutions, faculty, and administration from the voices of the students. Next steps of this research study can be tremendous in working toward positive changes for students with disabilities, specifically in improving their sense of belonging as a student with a disability and their interactions with faculty. Lack of knowledge of disabilities can lead to more negative attitudes towards students with disabilities. Increased knowledge about disabilities and the impact of accessibility on students can lead to an increase in inclusive and accessible teaching strategies (Wynants & Dennis, 2017). Strategies that can be put in place for an increase in knowledge for faculty are programs to help them gain knowledge and insight into the student experience. This could be continuing education offered to faculty. Another strategy is a short course for new faculty as a credential as they enter the role. Existing faculty can be encouraged to engage in the course as well. This can enhance and influence faculty awareness of students, especially students with a disability. Disability identity development is a fundamental social process and can be formed by recognition through available resources, which is why it is crucial for professionals, such as those on college campuses, to become aware of how to best support individuals with disabilities (Forber-Pratt et al., 2017). This research study can initiate the

process of providing educators and administrators with resources to better support students with disabilities on college campuses and in the classroom.

Summary

This chapter has reviewed the findings and themes of the semi-structured interviews with undergraduate college students with disabilities. This chapter also examined the limitations of the study, implications for educators and administrators, and recommendations for future research.

Chapter 5: Manuscript

Introduction

Any individual can join the group of those with a disability at any point in life as disability does not discriminate based on race, age, gender, socio-economic status (SES), etc. Disability can happen to anyone at any time, so it is relevant to everyone. There is a need for educators to have an increased understanding of the experiences of college students with disabilities (Gibson, 2012). Educators can use this understanding to inform others, advocate, and effectively facilitate inclusive teaching styles. Understanding the lived experiences of college students with disabilities is vital to expanding the research and addressing the barriers these students face, especially to give this population more of a voice. It is fundamental to have more individual voices tell their story because it sheds light on experiences, which allows for better understanding and accessibility.

Higher education does not provide adequate access that is needed to accommodate the growing number of students with disabilities (Adams et al., 2018a). In society and higher education, there is frequently a need for structural change, but institutions wait until the demand is high before making modifications. Physical structures that do that include, but are not limited to, building ramps, restroom modifications, available assistive devices, electronic formats, and adaptive technology. The transition experience that occurs for students with disabilities from high school to postsecondary education is a critical issue, but there is a limitation in the evidence-based research on programs for supporting positive outcomes for students with disabilities (Frieden, 2004). Students face new environments and interactions when entering postsecondary education, which can create challenges for those with a disability. Research has shown that for a student with a disability, developing a sense of belonging aids in their self-

advocacy, role as a student, and relationships while in college (Vaccaro et al., 2015). By exploring the lived experiences of students with disabilities and accessibility on college campuses, specifically the impact on their sense of belonging and disability identity, there can be an increased understanding of how to best support these individuals.

Literature Review

Lifespan

Some argue that the period of adolescence is the most profound stage of change in an individual's lifespan (Wood et al., 2018). Individuals contribute to their developmental changes after moving through earlier developmental stages. Arnett (2000) proposed a new conception of development, which is from the late teens into the twenties. The focus is on the ages 18-25. There is an increase in independence moving into emerging adulthood, while many also are seeking higher education (Wood et al., 2018). This stage is an opportunity for exploration in relationships, love, work, life, coping, views on the world, and more (Wood et al., 2018).

The concept of emerging adulthood is distinct from adolescence and young adulthood (Arnett, 2000). Within this stage, there is variability in demographics and characteristics (Arnett, 2000). Living situation is an area that is diverse for this stage, along with reliance on parents or guardians, and education or employment status. This can be a time for tremendous change, and particularly college students are exploring areas, such as their major, world views, and relationships (Arnett, 2000). Emerging adults may experience mental health problems during this stage of life and can experience additional struggles when coming from vulnerable populations, such as having a disability (Arnett, 2007). There are additional challenges in the transition from adolescence into adulthood for this population (Osgood et al., 2019). In adolescence, there may be programs and policies in place, but this available support typically ends around the ages of

18-21 (Osgood et al., 2019). Individuals with physical disabilities or with a chronic illness, but without a learning disability, may not have their needs noted in an educational statement, thus having unmet needs (McDonagh, 2006). The current research study aimed to hear the voices of individuals in this stage of life and their experiences on campus and in the classroom.

Individuals with Disabilities

The Americans with Disabilities Act defines disability as “a physical or mental impairment that substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment” (U.S. Department of Justice, 2009). In 2010, there were about 56.7 million individuals with disabilities in the United States (Brault, 2012). This number increased since 2005 by 2.2 million. In 2010, 10.2% of individuals between 15 and 24 had a disability. According to Brault (2012), an individual with a communicative disability is blind or has difficulty seeing, is deaf or has difficulty hearing, and/or has difficulty having their speech understood. An individual with a cognitive disability has a learning disability, intellectual disability, developmental disability, Alzheimer’s disease, senility, dementia, and/or another mental or emotional condition that interferes with everyday activities. An individual with a physical disability uses a wheelchair, cane, crutches, walker, has difficulty walking a quarter of a mile, climbing a flight of stairs, lifting something that is up to 10 pounds, grasping objects, getting in or out of bed, arthritis, rheumatism, back or spine problem, broken or fractured bone, cancer, cerebral palsy, diabetes, epilepsy, head or spinal injury, heart trouble, atherosclerosis, hernia, high blood pressure, kidney problems, lung or respiratory problem, missing limb, paralysis, stiffness in limb, deformity of limb, stomach or digestive issue, stroke, thyroid problem, tumor, cyst, and/or growth that limits activity (Brault, 2012). These definitions of disability were used in this research study.

Accessibility

According to the U.S. Departments of Education, Office for Civil Rights Resolution Agreement with the South Carolina Technical College System, accessible is defined as the opportunity for a person with a disability to receive access to the same information and services and the opportunity to engage in the same interactions as a person without a disability in an equal manner. Accessibility refers to equal and independent access for everyone (Adams et al., 2018b). The laws relating to accessibility in higher education are Section 504 of the Rehabilitation Act of 1973, Section 508 of the Rehabilitation Act of 1973, amended in 1998, Title II of the Americans with Disabilities Act of 1990, and Title III of the Americans with Disabilities Act of 1990. These laws prohibit discrimination against individuals with disabilities, each one addressing differing types of organizations. Section 504 applies to colleges and universities that receive federal funding, while Section 508 applies to electronic and information technology acquired from federal agencies, and it is used as a standard by the U.S. Department of Education for universities. Title II addresses programs and services in public universities, and Title III addresses those programs and services at private universities.

Mobility is having the ability to move from one location to another independently (Karimi et al., 2014). When students are unfamiliar with places on campus or have difficulty with independent mobility, online services, such as navigation, can assist them. Accessibility is connected to independent mobility and vital for the quality of life for individuals with disabilities (Karimi et al., 2014). When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent.

Institutions of higher learning with services for students with disabilities are growing in numbers worldwide, but not all these students are receiving equal level of support

(Kouroupetroglou et al., 2011). It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the community (Adams et al., 2018a). Universal design in housing was theorized by Ronald L. Mace as designing products and environments to be useable by everyone to the greatest extent (Mace, 1998). Universal design has seven principles, which are equitable use, flexibility in use, simple and intuitive use, perceptible information, tolerance for error, low physical effort, and size and space for approach and use (Adams et al., 2018a). Audible street crossing is an example of universal design. Universal design can also be used in higher education, which is referred to as universal design of instruction. The principles of this universal design are creating respectful welcoming environments, determining the essential components of a course or program, communicating class/program expectations, providing constructive feedback, exploring the use of natural supports for learning, designing teaching/instructional methods that consider diverse learning styles, creating multiple ways to demonstrate knowledge, and promoting interaction between faculty and students (Adams et al., 2018a). An example of universal design of instruction is creating multiple modes of teaching, such as lectures, discussion, and videos.

Lived Experiences

Hearing the voices of students with disabilities is something that is rarely heard but vital for understanding their needs and advocating their views (Vickerman & Blundell, 2010). Vickerman and Blundell (2010) interviewed students with disabilities at a higher education institute to hear their voices about their views and experiences. Researchers indicated that 5.6% of the 504 students that were questioned indicated they had a disability and 25% of students who expressed they had a disability did not disclose it on their application for university because of fear they would not be offered a place on the course that they wanted.

Researchers examined the experiences of students with disabilities and their needs transitioning into higher education compared to students without disabilities (Dangoisse et al., 2020). The authors drew attention to the differences in the research related to students with and without disabilities in higher education. For instance, students with visual impairments can have difficulties in class when there are heavy reading assignments, along with students with hearing impairments can have difficulties participating in class lectures, group assignments, and using the phone, which students without disabilities do not always face the same challenges (Dangoisse et al., 2020). Dangoisse et al. (2020) aimed to examine the hurdles that establish vital challenges for transitioning into higher education and to further explore diversity in the backgrounds of students and their experiences with the transition. This meant that they essentially aimed to investigate the transition into higher education for students with and without disabilities. Dangoisse et al. (2020) utilized a qualitative phenomenological approach using a focus group design, and the data was collected through semi-structured group interviews. After the interviews and collecting data, researchers examined themes from participants. One theme identified was that the transition into higher education was like a roller coaster, with ups and downs. Another theme was that during the transition into higher education was about discovering a new freedom and becoming autonomous, and for students with disabilities, this meant that they had to acknowledge their disability to ask for help if needed, but this also came with fear of being stigmatized or feeling like a burden. A third theme was that the students discovered themselves, along with another theme of overcoming obstacles (Dangoisse et al., 2020). Another theme was the students' perception of the environment of the university, whether that was supportive or threatening. For students with disabilities, having a support service on campus helped them feel supported by their university. Dangoisse et al. (2020) found that a difficulty for students with

disabilities in disclosing their disability was fear of rejection, pity, or misjudgment. Many students with disabilities in the study felt that their high school was not structured and adapted to their needs, and this helped them notice how their university better recognized their disability (Dangoisse et al., 2020). Also, some students with disabilities mentioned that in high school they felt as though they had to work harder because of their disability, which made them more aware of their strengths and challenges that they face, thus developing a more successful working method, which continued in college for many of them. Dangoisse et al. (2020) expressed that to understand and increase the inclusion of students with disabilities and their needs, it is helpful to consider how the students with disabilities experienced guidance in high school. This study will aid in the current study by exploring college students with disabilities and their experiences on campus, specifically with accessibility. The present research aimed to look at the lived experiences of students with disabilities and identify how that relates to their sense of belonging and disability identity.

Sense of Belonging

A sense of belonging is the subjective feeling of connections, socially, physically, and in experiences (Allen et al., 2021). Allen et al. (2021) explained that belonging is a need that individuals are driven to fulfill. Developing a sense of belonging is vital to academic success, but there is little research on students with disabilities and how they transition into higher education (Vaccaro et al., 2015). Researchers indicate that a sense of belonging is challenging for students from marginalized social identity groups (Vaccaro et al., 2015). The current research study looked at the experiences of dealing with accessibility on campus for students with disabilities and whether this has an impact on the sense of belonging for students with disabilities. Research has suggested that students with disabilities are less likely to pursue higher education compared

to students without disabilities and can feel a lack of support in higher education when they require certain services (Getzel, 2008). This could be due to the new set of challenges when it comes to managing their academics and needing to request services for their needs. This study examined if accessible services aid in the college experience for students with disabilities and if this makes them feel that they belong.

Developing a sense of belonging can be associated with academic success and persistence, but this can be challenging for students in marginalized social identity groups, which includes students with disabilities (Vaccaro et al., 2015). Students' sense of belonging, when having a disability, results from physically accessible spaces with psychological features that create a sense of security (Vaccaro et al., 2015). Vaccaro et al. (2015) looked at students with a documented disability and their sense of belonging. Their study examined students with specifically invisible disabilities, so it was not readily evident to those around them. The students in the study were part of a larger grounded theory study, which focused on students from marginalized social identity groups and how they develop a sense of belonging on campus. Vaccaro et al. (2015) reviewed narratives from the students and found three themes that influenced their sense of belonging. Vaccaro et al. (2015) examined the self-reports of the sense of belonging from students with disabilities and found three themes that had a role in the sense of belonging for students with disabilities in college. The first was their ability to advocate for themselves, next was their role as a student, and the final theme was supportive social relationships (Vaccaro et al., 2015). Self-advocacy was connected to their awareness of their disability and their needs. Participants felt a sense of belonging when they were familiar with the accessibility on campus, such as the bathrooms they were comfortable with using. Feeling like a student and doing well in their class was also related to the sense of belonging for the students

with disabilities. When the participants felt support in their social relationships, they were able to develop a stronger sense of belonging. The intention of the current study was to examine if accessibility helps individuals with disabilities to feel support in their relationships.

Disability Identity

Disability identity has been defined as having a positive sense of self and feeling connected to the disability community (Dunn & Burcaw, 2013). Johnstone (2004) defined disability identity development as a personal construction, which includes making meaning of self in the world. Disability identity can help individuals adapt to the disability and navigate daily stress and social challenges (Forber-Pratt & Zape, 2017). The present research aimed to review the lived experiences of students with disabilities for accessibility and if that has shaped their disability identity development.

Forber-Pratt and Aragon (2013) developed a working model of social and psychosocial disability identity development. Forber-Pratt and Zape (2017) expanded this model with more participants after examining the phenomenon of disability identity development and seeing a need for more models of this phenomenon. Their model of psychosocial identity development for individuals with disabilities has four developmental statuses, which include acceptance, relationship, adoption, and engagement. The model can aid in understanding the process that individuals with disabilities go through on a psychological level. Forber-Pratt and Zape (2017) sought out a research question asking how individuals recognize disability identity, along with how those individuals describe it. Another research question they had asked was how those individuals describe their disability identity development. Researchers interviewed college students with disabilities and observed them in settings on campus. Forber-Pratt and Zape (2017) recorded field notes from interviews they conducted and from the observations. Researchers

included themes in the results into statuses in the model. The first one was acceptance, and this was seen whether they acquired their disability, or they were born with it. In this status, family and close friends can also go through accepting the disability (Forber-Pratt & Zape, 2017). The next is relationship status and includes building connections with others with disabilities. After that status is adoption status, which is when the individual adopts values that are shared within the group of disability culture. This can be when the individual chooses how much they embrace their disability and integrate it into their identity. The fourth status is engagement status, and the individual can be a role model for others and help individuals that are developing through the statuses. Individuals in this status can also advocate and give back to the community (Forber-Pratt & Zape, 2017). This current research study utilized this model in conceptualizing disability identity and disability identity development.

Disability identity developed as a significant topic in disability research because of students who acknowledged negative personal experiences related to assumptions that others had around their functional limitations and how others perceived their identity and the impact it had on their identity of themselves (Cunnah, 2015). The individual with a disability may distance themselves from the identity of having a disability if their experiences with others are negative about them having a disability. When an individual receives a new diagnosis of a disability and is faced with differences, they may develop role confusion and need for introspection (Forber-Pratt & Zape, 2017). This can be especially true when in a new environment, such as college. Cunnah (2015) found that students with disabilities are influenced by their experiences of identity in their past and present, and the social model of disability has contributed to the inclusion of individuals with disabilities. Research suggests that students with disabilities do not

come to university with positive self-identities after experiencing negativity with stigma and labeling about their disability (Cunnah, 2015).

Methodology

This study utilized a qualitative research design, specifically transcendental phenomenology. The study examined the lived experiences of undergraduate college students with disabilities to gain an understanding of their personal familiarities and experiences with accessibility on campus and how it has impacted their sense of belonging and disability identity development.

The researcher used semi-structured interviews as the main mode of data collection for gathering experiences and how accessibility has impacted students with disabilities. Descriptions of experiences can be seen as representations of the interviewee's world, so it is not judged as fact, instead, it is a point of view (Muylaert et al., 2014). The point of view of the students will aid in the research study by providing personal experiences from the students with disabilities to get real lived stories from students while on campus. Muylaert et al. (2014) provided a structured way of obtaining narrative interviews. This includes phases of preparation, initialization, main narration, questioning phase, and small talk. The first two phases consist of exploring the field and formulating research questions, and then formulating initial topics for narration. There will be no interruptions from the interviewer in the main narration and questioning phase, followed by immanent questions. After the interviews, the text can be condensed for meaning. As opposed to a structured interview, the researcher utilized a semi-structured interview approach to formulate the topic and research questions to prepare the interview protocol by having predetermined questions but allowing space in the interview for more opportunities for

participants to express themselves in open dialogue about their experiences. The researcher identified themes and analyzed the results to answer the research questions in the present study.

Research Questions

Q1: What are the experiences of students with disabilities with accessibility in the college setting?

Q2: How does accessibility on college campuses shape students' sense of belonging on campus and with peers?

Q3: How does accessibility on college campuses impact how a student with a disability identifies with their disability?

Procedure

Recruitment and Data Collection

The researcher recruited and interviewed participants. Participants were all current undergraduate students, 19-25 years old, who identified as having a disability at the time of being an undergraduate college student at a southeastern large university. The researcher sent recruitment emails utilizing listservs and fliers around campus, along with undergraduate recruitment, SONA, a web-based system to manage, recruit, schedule, and assign extra credit hours for participation in research opportunities. Interested individuals followed a link to an informed consent form and a Qualtrics survey, which served as a screener for eligibility in the study. The screener defined disability, based on the Americans with Disabilities Act, with categories and examples, and exclusion criteria, such as general health conditions that are not aligned with the definition of disability. The screener also included eligibility criteria, such as the individual's age, if they identify as having a physical, cognitive, or communicative disability, and their current level of education at a large public southeast university. The researcher used

these questions to ensure the individuals were qualified for participation in the present study. From the eligible pool of individuals, participants were selected for participation. Emails were collected from the screener to schedule interviews but were not used in data collection. Email addresses were permanently deleted after analyses and results were completed. The researcher recorded the virtual interviews on Zoom and transcribed the data by listening back after the interview to have a written copy of the interview. Qualitative software, such as NVivo, was purchased to transcribe the interviews. To ensure confidentiality, numbers were assigned to participants, and names were not included when notetaking or recording the interview. Data was stored in a password protected folder on Box.

Data Analysis

According to Creswell and Creswell (2017), there are steps in the qualitative data analysis. Step one was to organize and prepare the data that was going to be analyzed. The researcher transcribed interviews then went into the next step of examining the data. Next, coding was to be conducted by organizing data through categories (Creswell & Creswell, 2017). The researcher completed this by grouping together commonalities in responses. The researcher then generated themes and integrated and analyzed the meaning of the themes. The themes were utilized to find similarities in the lived experiences of the students with disabilities based on answers generated from the research questions. Through textural language, which is a narrative that explains how the participants perceive the phenomenon, the researcher identified core themes (Yüksel & Yıldırım, 2015). Moustakas (1994) describes the participants as co-researchers because of their experiences in the data, without the subjectivity of the researcher. The textural description that the researcher constructed is a narrative of the co-researchers'

experiences (Yüksel & Yıldırım, 2015). The researcher wrote the descriptions into the experiences to help understand the co-researchers', or participants', experiences.

Saturation

Saturation comes from grounded theory (Creswell & Creswell, 2017). The researcher stopped collecting data when themes were saturated. This means that gathering new data does not create new understandings or perceptions (Charmaz, 2006). This would conclude that the sample is acceptable, and saturation has been reached (Creswell & Creswell, 2017). In the current research, the researcher abided by the concept of saturation. When there were no longer new insights from participants thus concluding that there was saturation.

Bracketing

Bracketing in transcendental phenomenological research is a crucial principle. In transcendental phenomenology, there is less focus on the interpretations of the researcher, and instead more emphasis on describing the experiences of the participants, so the researcher can utilize bracketing their own experience in the research (Moustakas, 1994). Bracketing is utilized to alleviate potential harmful effects of biases that could impact the research that is conducted (Tufford & Newman, 2012). In qualitative research, the researcher is the instrument for analysis. Bracketing is the process of the researcher drawing awareness to assumptions or preconceptions regarding the research topic. Preconceptions can influence the way that the data are gathered, analyzed, and presented in the research. When there is a close relationship between the researcher and the topic then bracketing can also protect the researcher, such as when the research topic is emotionally challenging, which can impact the interpretations of results (Tufford & Newman, 2012). The researcher should be honest about their thoughts and biases. Through self-reflection, such as journaling, the researcher will reflect on thoughts and feelings

that come up throughout the current research study (Tufford & Newman, 2012). Reflexive journaling includes reflecting on the reasons for the research, personal assumptions, the researcher's place in the research, potential conflicts, and feelings that arise throughout the research (Tufford & Newman, 2012). Reflexive journaling was used throughout the present research study, as the research kept notes before and after each interview to reflect on thoughts in the research. Additionally, member checking was conducted by reviewing the participants' answers with them post interview to ensure accuracy in responses. This was done directly after the interview with the participant.

Positionality

For the purpose of this section, the researcher offers the following statement on positionality (Tracy, 2020). As the researcher, I am an able-bodied, white, heterosexual, cisgender woman. I have my master's in rehabilitation counseling and am a certified rehabilitation counselor, CRC. I have provided mental health counseling to children, adolescents, and adults, and provided vocational counseling for individuals with disabilities. I have also taught undergraduate courses in the rehabilitation field for students entering professions where they will work with individuals with disabilities. I have also taught and supervised master's students in rehabilitation counseling. My passion and purpose in life is rooted in advocacy. I believe it is my duty to be an advocate for myself, my clients in counseling, and individuals with disabilities, along with helping them advocate for themselves as they gain independence. I also teach others how to be an advocate for themselves and those they work with. Disability is often left out of conversations on multiculturalism and social justice. I aim to conduct research that will shine a light on the individuals with disabilities to show the importance of their experiences.

I want to use my power and position as a CRC to advocate for individuals with disabilities to provide them with a platform to share their experience.

Findings

There is a need for educators to have an increased understanding of the experiences of college students with disabilities (Gibson, 2012). The purpose of this study was to hear from the lived experiences of undergraduate college students and how accessibility played a role in their disability identity and sense of belonging in the classroom and on campus. The following research questions helped to explore their experiences: What are the experiences of students with disabilities with accessibility in the college setting? How does accessibility on college campuses shape students' sense of belonging on campus and with peers? How does accessibility on college campuses impact how a student with a disability identifies with their disability? This chapter identifies the findings obtained from the study participants in semi-structured interviews.

In the present research study, there were a total of nine participants, all of whom had at least one disability and were currently enrolled as an undergraduate student at a southeastern university. Each participant took part in a semi-structured Zoom interview with the researcher to share their lived experiences as a student with a disability. Eight out of the nine participants were female, all ranging from 19 to 23 years old. Table 1 (Participant Demographics) displays an analysis of the participants' demographics.

Manuscript Table 1

Participant Demographics

Participant Code	Age	Disability
1F	20	ADHD; Autism; Depression; Anxiety
2F	19	Psychogenic seizures

3F	23	Postural orthostatic tachycardia syndrome (POTS)
6M	19	Dyslexia
7F	19	Dyslexia; Celiac
9F	20	Dysautonomia; POTS
10F	21	Chronic back pain; hypermobility disorder
11F	21	Dyslexia; Dyscalculia
12F	21	Thyroid cancer

Accessibility – When It’s There, It’s Great

The first predetermined code was “accessibility.” Within this, there were themes that emerged from the descriptions of the participants. Accessibility and accommodations worked well for those participants that were receiving them and had the availability of what they needed, thus the theme identified was “when it’s there, it’s great.” However, for those that did not have accommodations or experienced needs that were not met, they reported having more difficulty on campus and in the classroom. This theme aided in discovering the research question about the experiences of students with disabilities with accessibility in the college setting.

1F expressed their thoughts and experiences in relation to not receiving accommodations:

I haven't completed the accommodations paperwork yet, and honestly, I'm not sure what the accommodations could offer me that would help necessarily because mostly what the accommodations seem like is for mobility, and if you're blind, deaf, or something, I don't feel like it's really based towards ADHD or any of those kinds of things. I feel like it's more physical disabilities.

1F was not familiar with what accommodations could provide in the classroom or as a student with ADHD, anxiety, depression, and autism, that they were not already receiving. They also shared some difficulty in the accessibility of finding how to get accommodations:

If you know where to look, it's easy, but if you just, drop me on the university home page I feel like it'd take a little bit of Googling to find everything, so I'd say fair to middle on the difficulty...I just wish that there was more information, more easily accessible information about therapists and I wish more people knew about the therapy options.

A couple of the participants shared about accessibility and the jAUnt golf cart service that is available for students, faculty, and staff with a disability or medical condition. This service is offered if the individual has difficulty traveling within campus. Medical documentation is required for using this service, and it is not an accommodation.

3F discussed their involvements with accessibility and the jAUnt golf cart service:

I mostly only use the jaunt system to get around classes and stuff...Our school activities are at night, but the golf cart system closes at five, so anything after that you can't get to as much.

2F had positive experiences with the Office of Accessibility when their disability was causing a strain on their academics:

I think I've had a really positive experience with the Office of Accessibility, and they've been very helpful to me because I almost had to drop out last semester. I almost got a medical withdrawal, so if it wasn't for the accommodations that they allowed me to have, I wouldn't have been able to do class. They were very understanding at the time because I didn't know what I had. And I told them I don't know what I have, but this is what happens. And they're like, okay, this is what we're going to do. You will be able to leave

class early, you can make up an exam if you can't do it that day, so that took a lot of stress off of me and greatly helped me a lot, so it's been it's been very good.

6M shared similar thoughts and experiences about the Office of Accessibility and the Biggio Center when it came to their disability:

I've used the Office of Accessibility and the Biggio Center for testing. I request time and a half for each test, it's been pretty seamless.

7F had a comparable positive experience with accommodations and the Office of Accessibility:

Actually, the Office of Accessibility has been really, really good. They've been really on top of things.

10F mentioned that they were set up for success with their accommodations:

The accessibility team here is fantastic...They upgraded my parking so that I wouldn't have to walk as far to make sure, like I didn't actually dislocate something on the way to class...And then they've also given me exam rescheduling and attendance consideration to make sure that the professors know ahead of time.

9F described difficulty with physical accessibility, specifically feeling frustrated by buildings that were not fully accessible with elevators, particularly the College of Agriculture building related to their major:

I've used the golf carts to get around before...Some of the buildings don't have elevators because they're like historic buildings. That always kind of makes me mad because I was like, well, I get that it's a historic building, but like, everyone deserves a chance to go to class...kids are like in wheelchairs and just can't be in agriculture (major) because they just can't go to class...it makes me really mad because I like want to like advocate for agriculture, but then I'm like, well, they are not accessible to a lot of people.

11F had some recommendations for how things could be better for students in the classroom, which was sprung by being an organized student, but understanding that this will not be the case for everyone:

I've thought about ways it could be better, but I'm just not sure it can because you have to go take your test and you just kind of have to figure out in your schedule when you have time. I will say, thankfully, I'm a really organized person, so I've never felt like really struggling to figure out and get up and take my test. A lot of it falls on the student because if you don't go into the portal and schedule your test yourself, you're kind of out of luck. For someone with a more serious disability, that could be an issue.

12F also had accommodations and positive experiences to share about the Office of Accessibility:

I do have accommodations set up with the college, so it made it as easy as it could have possibly been. I have attendance accommodation. The Office of Accessibility was super kind and super encouraging to me. I think that definitely helped the process of getting into college a lot easier than it could have been... I think they've done a great job of making it as seamless as possible, and just the people at the Office of Accessibility were always so kind, never had a problem. I cannot say enough good things about that.

Sense of Belonging – Belonging as a Student, not as a Student with a Disability

This study examined if accessible services aid in the college experience for students with disabilities and if this makes them feel as though they belong. The theme across sense of belonging was that the participants felt a sense of belonging as an individual, a student, and a student at the university, but when it came to disability, they did not feel as though they always

belonged as a student with a disability. This theme aligned with the research question that asked how accessibility on college campuses shapes students' sense of belonging on campus.

1F expressed that they had a “rough” sense of belonging, but felt they were welcomed into their major with helpful events:

Through therapy, I started joining some clubs and I even joined one that's just getting started, and I was elected one of the officers, so that really makes me feel connected...

With the College of Agriculture there's a lot of events, like the welcome back picnic, and then in Comer Hall, there's the student advisors, and they have like a free snack bar thing where you can go every day and get like a drink and a snack, so I like going in there.

2F had an overall positive sense of belonging, but shared that they did not experience their disability regularly, and it was a recent diagnosis:

I felt like I belong on campus. I haven't felt a sense of I don't belong, I mean I've had a really positive experience on and off campus. That's probably partly because I don't experience my disability all the time. I think that if I had it like for freshman year when I might've felt more isolated because I was in my room all the time, I couldn't go to the basketball game because I had to lay down. Like even yesterday I couldn't go to the meeting I had to go to, and then all my friends went out after. I feel like overall, I have a good sense of belonging, but, when it does happen, I do feel left out. Maybe not like I don't belong, but I feel left out.

2F felt left out in social situations, and shared some frustrations when they experienced their disability and they had to go on as though everything was normal, but a lot happens behinds closed doors for those with disabilities that others do not see:

I mostly feel like I belong in the classroom. I started having seizures in the middle of the chemistry final. I was like, I feel like this isn't fair. I'm not going to do as well as these other kids in this classroom because of what's going on. But like, what am I going to do? I have to take this, so sometimes I'm frustrated because I feel like people don't know that I just had a bunch of seizures last night and I'm still here. You know, but people don't know what happens at home, and then I come, and yesterday I had a lot of seizures, and when they're really bad, they can be in my leg, so I had to go to a networking event yesterday only a few hours after and I wasn't really that put together and I was kind of out of it as all that happened and everybody was all put together and I was kind of not as good at talking to people or on my game with these alumni, but I was kind of not doing my best and I was like, they don't know that in that morning I was on my couch just convulsing, so I feel like sometimes it makes me look bad because of what's going on, but I'm not going to tell everybody my personal information... I can be embarrassed sometimes. I'll sit in the back of the classroom, if I know that I'm going to have some. It just looks weird to be convulsing in class and people aren't used to seeing it. I don't want to scare people, you know, and I don't want people to ask me what's wrong... I think that overall, I feel like I belong in the university and like I don't feel like I don't belong, but sometimes I feel left out because I can't do stuff that other kids do, but I still have had a great support system and been really welcomed by everybody.

3F was able to get around campus using the jAUnt golf carts, but since they stopped running at a certain point in the day, they were unable to attend some social events on campus, thus making them feel less connected to others. 7F expressed their disability was not visible, so they shared their thoughts on how to fit in and feel a sense of belonging:

As an individual, it's been good. It's hard to decide what clubs to be in. I've kind of just like stepped back and watched a little bit this semester, but no one's made me feel left out or anything like that. And then with a disability, it's more of like an underlying disability. I guess people can't like physically tell, but people can definitely tell if I'm like talking to them about tests or stuff like that. I don't get all A's or stuff like that, and everyone's been really encouraging. It's been good so far... I get frustrated sometimes because I'll have a hard time concentrating or I'll get anxious sometimes that I'm not taking the right notes.

9F felt a sense of belonging as an individual and as a student, but as a student with a disability, they felt it was isolating, especially in the classroom when they felt as an outsider with their accommodation when it singled them out:

Well, as a whole, I definitely feel like I belong here, but like from a disability standpoint, no, because we don't really have any clubs or anything, or organizations. I guess the only one is EAGLES, but that's different. But there's not one for everyone, like a club... I've met tons of girls on campus that have POTS, so there's definitely people around and I'm sure there's tons of others... I think it's a little bit isolating because the accommodations like one of mine is that I have to sit in a special seat...like an outsider...they should just provide one for everyone.

10F shared their experience with belonging and clubs, such as the “advocates of disabilities,” but that club dissolved last year. 12F explored their thoughts on finding a sense of belonging with others that have experience with what they have gone through in their disability:

I think finding girls who had gone through or who were going through the same thing was just really comforting to me. It gave me a good sense of belonging because it's just it's very specific things you go through, and the vast majority of my friends have not gone

through that. And so sometimes it can feel like it takes away from your sense of belonging because I'm going through all of these things frequently, and sometimes it's hard when you get a bad note from your doctor, but your friends don't understand. It's been really great finding girls who do understand and girls that I can talk to about it, so that's been awesome.

6M reiterated the theme of feeling a sense of belonging as a student, but not as a student with a disability:

The school spirit is great, so that helps a lot, but the sense of belonging has been good. I take a lot of classes with my friends, and I can go to study sessions with them. It's really, really positive.

Disability Identity – Developing

A theme that surfaced within disability identity is that it was still in development for the participants. Many of the participants did not feel strongly connected to the disability community or as an individual with a disability. Some of them acquired their disability in college, so it was a new experience for them, and they were developing their identity. This theme helped in exploring the research question that asked how accessibility on college campuses impacted how a student with a disability identifies with their disability.

1F was still exploring their diagnoses:

I just recently got diagnosed with ADHD, and I am still waiting for my autism diagnosis, so I don't really feel connected with those diagnoses as much. I've been living with my depression and anxiety for years, so I feel a little more connected to those...I feel like I accept those diagnoses more. With the ADHD it doesn't really feel like I have it, I've just been living with it for so long, but I haven't had the words to describe it.

2F explained their feelings and how their disability is something that happens to them, instead of being who they are:

Most of the time I don't (identify with having a disability) since I don't experience symptoms that often. I don't have that like idea that I have a disability in my head.

Disability feels like a weird word to me to identify with because it only is a circumstantial thing, but it's one of the things that happens to me more than like a part of who I am. I kind of feel out of place if I'm like within the disability community because I feel like it's not the same as other disabilities, but it still is a disability because it does affect my life in a really major way.

7F was confident and had a positive sense of disability identity. 12F was still building and developing their identity. 11F did not view their identity connected to having a disability:

You know, honestly, it's an interesting story because I didn't find out I was dyslexic until I was a junior in high school. I didn't get it officially tested till then. I always knew I was a slow reader and a slow test taker. I always knew there was maybe like a little something off. It started when I started to take the SATs. I was taking these huge tests, and I just I kept doing worse and worse and worse. I was like, okay, I'm not stupid, something else is up. I approached my parents, and I was like, I really think I need to have testing done. The results come back, and they were like, we don't know how no one ever caught this. We don't know how you've been kind of functioning at a normal level. I was always a straight-A student, still am. Like it never held me back. I guess my identity is I don't know. It's just like it's just how I live my life. Like it's just always been a part of me. I just didn't even know it until recently. I guess it's just something I live with day to day. It

doesn't occur to me that I have the disability when I'm just like going about a day-to-day tasks.

Lived Experiences – Positive

When asking the participants questions about their experiences, some subthemes emerged from the experiences. This included their time adjusting to college, instances with peers, and interactions with faculty, which were all relevant under the umbrella of their lived experiences. The theme with lived experiences were overall positive among participants.

1F shared experiences in finding therapy and a food bank on campus that had an impact on their overall experience as a student on campus:

I feel like the therapy and the psychiatrist from the Med Clinic has been really helpful to me and then also with the med clinic, I can just go downstairs and get my medicine. I don't have to make plans to go to Walgreens or CVS or whatever. I really like that. And then I'm also trying to get set up with some of the University Cares... Last year was really hard because with my ADHD I'm not good at processing auditory cues when there's a lot of background noise. It makes it really hard for me to concentrate on a teacher if the classroom is really loud. So I did experience a little bit of that my first year, so that was rough. And then, you know, I'm just I'm not able to focus on stuff easily because of my ADHD, so that made doing, like, homework and stuff really difficult, so that was definitely an experience that I had.

2F explained their stressful experiences with their seizures and how they continue to show up in their life, even after having seizures:

There was a time last year where I just had to leave abruptly from the classroom, and it was really stressful to me because I was in a lecture hall full of like 100 kids and I had to

walk out in front of all of them and just like walk out having seizures, so it's kind of stressful walking around, like I block it out...So, like, literally yesterday I talked to my teacher because I have been having seizures, and I said I did not have time to properly study for the exam. And she was like, so you're in class, does that mean you're okay? And I was like, well, I've actually had seizures in the class today and I think I'd be a distraction to other students and I would not be able to complete the exam, and then I had a seizure in front of her while talking to her and she was like, okay, yeah, so you don't have to take the exam today, I see that you are obviously unwell and it was kind of funny to me because I was and am kind of like numb to it now because I feel like I experienced it all the time, but she had never seen it and she was like, oh, okay. Because sometimes I can underplay because I'm like, this is something that I should just be able to do, you know, I need to be able to. I shouldn't have to miss this. I'm just going to try and do it anyway, which is something I have to get better about because most people would be like, you know, no, I'm not going to do an exam today. I kind of downplay it...Sometimes it's nice to be reminded that I that I can just stop and rest, like you have permission to not be here right now.

7F had additional thoughts to share with the researcher about an additional diagnosis:

I have celiac, and the gluten free section in the dining hall still makes me sick. I don't know if it's just my body like not used to that food, or if it's cross contaminating still.

10F expressed their experience and recommendations for others:

Everyone is very welcoming. Like I dislocated my shoulder one time freshman year, and I dropped all my stuff, and I had like three people run up to me and help me pick everything up, which was really nice...Really just having more empathy or being more

educated on other physical disabilities that maybe you can't exactly see until they're happening, that would be my recommendation.

11F shared that their experiences were positive:

I get the double time which I've been so grateful for... I will say the university does a really good job about providing other like tutors that the school will pay for...even if I need external help, I feel like this university has done a really good job of providing that.

12F had strong experiences with peers:

I got to meet maybe two or three more girls who had either just had their thyroid out from cancer or were about to have their thyroid out for cancer. It has deepened into my college experience because I've gotten to use my experience to comfort other people that I've met in that situation.

Adjusting – Rough

Many of the participants recounted “rough” or “really hard” experiences adjusting to college at the start or when their disability flared up.

1F had a “rough” first year being away from their family. They then they found out about therapy offered on campus and was set up with the med-clinic and a psychiatrist.

2F had a similar hard time, particularly because their disability started recently, so it has been new to navigate:

It was really hard last year because I was away from my family, and I never had any of these symptoms before, so it was hard, but I was lucky enough to have a good support system, so I had friends who would help me. It was a little isolating, though, because I couldn't go out while I was having them, like I would be in my bed because I needed to

rest. I didn't know what was happening for a long time. Like the doctors couldn't figure out what was going on.

7F shared their thoughts and experience of coming to college:

It definitely has not been the easiest, but better than I expected. I didn't really go in with any expectations, but getting back into harder schoolwork has definitely been an adjustment. Just with it causing anxiety.

3F explained needing a break for their medical problem and are still getting used to things being back this time. They shared that this time coming back was more difficult than when they first came to college. 9F shared a comparable experience where they almost had to medically withdraw their freshman year. They had a unique and difficult experience with their sorority:

My sorority, the one big thing they like, kind of kicked me out for having a heart problem...I passed out and broke my ankle and then they just left me on the floor and didn't do anything. It was during recruitment. And then they didn't call an ambulance or anything. When I woke up, I called my roommate on my Apple Watch and I was like, I'm like on the ground, I can't stand up, and she came to get me taken to the E.R. And they got mad and tried to fine me for missing...it was so draining, and they told me I was lying, and I was faking it, and they tried to tell me that it didn't actually happen.

Peers – Awkward

The theme that came about when asking about experiences with peers was that they were overall helpful, but at times it was awkward to explain their disability or when they were experiencing symptoms of their disability. It seemed as though peers were confused and did not know what to do, or tried to help, which left the participant in awkward situations at times. This

was also related to their sense of belonging and how they felt they had to explain their disability to friends and peers that did not understand.

1F had trouble with peers:

My first year here was really rough. You know, I didn't feel really connected because I have a lot of social anxiety, so you know you'll never see me, like on Friday at a frat house partying, so that did make it hard for me to, like, get out and, like, connect with people...my anxiety makes it hard for me to go up to people because it's social anxiety, and then I guess my ADHD makes it hard for me to remember to text people back and stuff...and then with my autism, social cues sometimes just go over my head...I don't really talk with peers in the classroom. When I'm in a classroom, I'm mostly just focusing on the teacher, so it's kind of hard for me to get like a sense of connection in the classroom because when I'm in there, I'm there to learn, so that does make it difficult to make connections.

2F said that some of their friends did not know:

Part of the stress is when I will be in social situations where I have them (seizures) just like in front of my friends and they just kind of know what's going on, and nobody says anything, they just kind of ignore it which I kind of appreciate because then it's like I'm just normal, but it was hard to do work because like part of the stress was the work, so if I had to get work done sometimes I couldn't do it because I can't type on my computer right now, my hand, it's like violently convulsing, you know, like, I just can't do that. And like, I don't want to be in an exam room and be convulsing in front of another kid because it's going to be distracting to them, so it was really hard...some of my friends don't even

know I have it, I will avoid telling them because I don't want it to affect the way they see me...I don't want people to associate me with it, like I'm separate from it.

3F shared similar experiences as other participants:

Fine in the classroom, but then, if we're going to hang out outside of class in a specific location, like studying or something, you can't really change the golf cart rides and stuff. I know they can't be more flexible because you can't change things in like hours, you can't just plan things for that day, you have to plan ahead of time. It makes it a bit difficult...I don't really talk to my people inside the classroom too much...my personality is more introverted, so I don't talk to as many people...I guess most people wouldn't know of my disability, you can't really see it.

9F said that some peers do not understand, or they do not share with other people that they have a disability. 6M conveyed their experience of also not telling peers about their disability:

It's not a physical disability, so not a whole lot of people know, but people that are close to me support me on it and be patient where when they need to be, but on campus, it's been perfect, very seamless and positive...Sometimes when my friends are like, oh yeah, we're all walking to go take this exam, and I'm like, oh yeah, I'm taking it tomorrow...so I have to like, explain to them.

7F shared that they mention their disability to peers because they are comfortable with it and no one has "made fun" of them. 10F similarly explored that they do not talk about their disability when making friends, but they share it when they are closer to the peer. They explained that it has not impacted their friendships. 11F explained having a "normal experience" with friends, such as joining a sorority and being an officer in various organizations.

12F was able to deepen relationships by meeting people with similar experiences and situations related to their disability:

I think it's only deepened my relationship with one girl that I was friends with, but probably just one girl... It's not something a lot of people understand, the cancer that I had, most of the time, it's not life threatening, so sometimes it can be a little tough with friends because they think that they can joke about it because I wasn't about to die, but for me it's not funny because it affects me every single day and it's something that will affect me for the rest of my life, so sometimes with friendships it can put a strain on and this has only happened a few times where people joked about it, but I think it has a strain on a couple friendships just because sometimes people think it's funny to joke about it, but most of the time people are really supportive. I think a lot of times when there are uncomfortable topics such as cancer or something, friends don't really want to talk about it because they don't know how you feel about it, so they don't even want to ask you how you're doing because they just sort of pretend like it doesn't exist, so I kind of go along with that. I don't really bring it up too much unless it's something that's like really affecting me that I want to talk about...I would probably say that I wish my friends were not afraid to talk about it with me because I feel like whenever I bring up, they're uncomfortable. Being able to talk about it with me, but not thinking it's okay to just joke about it all the time.

Faculty – Good Until It's Not

Overall, participants felt as though faculty were accommodating and relayed “good” experiences, but there were times that they felt faculty needed more understanding and empathy

about disabilities. This was especially true for those with disabilities that may not be as common or well known.

1F had differing experiences:

With my therapist and my psychiatrist, I love both of them, and then as far as like teachers and professors go, I don't really talk about it (the disability) to them. Again, it's mostly just class material and stuff. I don't want to bother the teachers because they're there to teach and I'm there to learn.

2F was in the theme of “until it’s not” and had some recommendations:

Honestly just being understanding, I've been really lucky that I've had very understanding professors. I would say like believing and believing me that I am having seizures, like I haven't had anybody say they don't believe me, but that's something I'm always scared of, is somebody being like, you're just trying to get out of taking this exam. I've had professors be like okay make sure you're only using your accommodations for the proper reasons, and I know they have to say that, and like I do, I haven't missed any classes this year...but because part of, especially with psychogenic nonepileptic seizures, they're psychogenic. Most people will think that they might be making it up or people might think that I'm crazy because I don't actually have brain waves messing up in my head, it's just the stress is overloading my brain, so something I've heard, like from some family members will be like, you're just faking it, but we're not faking it. I can't control myself when it's happening, there's just less of an awareness about psychogenic non-epileptic seizures because it's more rare. I wish that more people knew about it because it'd be easier for me instead of having to explain myself because it's kind of personal, because usually when you have a disability, you don't have to tell them your disability, but I feel

the need to tell them...I got all really good experiences when it first started happening last year...they're all super understanding...my math teacher last year, she was like, don't worry about taking this exam right now, you need to worry about getting better. And I was like, thank you, that was really nice, and that's what I wanted to hear, you need to take care of yourself right now, school isn't what's important right now. It's for your health... I wish for maybe more teachers had to know more about disabilities, you know, like what they are. I wish that I didn't have to explain it to everybody.

3F had positive things to say about professors that they have been “pretty good at helping out” with accommodations. 6M conveyed their experience with faculty and making connections. They shared that faculty have been accommodating and the importance of establishing a connection with them. 7F had similar experiences with professors that have been willing to help. 12F had positive experiences of professors being understanding and supportive by listening and being available.

11F said some professors have been willing to help:

I mean, everyone's been unbelievably nice. Like I said, all the professors are very willing to help and do whatever they can. The one thing is, and I know this makes sense, but you go and you submit your accommodations on your portal, but then specifically for them to take effect, you have to go and speak to your professor...it's helpful because then they get to know your face and how they can help you and whatnot, but like I said, if you're kind of an unorganized person and the first week of class is kind of crazy, it really falls all on the student to approach the professor or email and set up a time. I feel like for some people that could be a lot.

10F had experiences that were normally good, but had to do a lot of explaining and felt frustrated at times:

With Hypermobility disorder you can dislocate things at any point. I've had professors get angry that I've actually dislocated something in class and had to leave...But I feel like I have to explain what it is a lot. It's not super well known. And there has been like some pushback on like my accommodations. They're like, if you miss class, you just can't make up what's in class...I've just emailed them afterwards, like if there was any sort of pushback about me leaving because we have the meeting beforehand where I warned that like, hey, I might have to get up and leave suddenly... It's kind of frustrating. I'm not going to lie.

Discussion of Findings

The intention of the current research study was to build upon the literature on university/college students with disabilities in relation to their sense of belonging and disability identity with their experience with accessibility. The findings of the study will be used to suggest and provide educators and administrators with resources that can better support students with disabilities on college campuses and in the classroom.

Accessibility signifies equal and independent access for everyone (Adams et al., 2018b). When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent (Karimi et al., 2014). This can aid in their ability to feel as though they can move through college life on their own if they have the same opportunities as students without disabilities. Since the theme of “when it’s there, it’s great” implies that the university has accessible options for students with disabilities, and it is great when the student has it available, but there is area for growth.

Participant 1F shared feelings about accommodations and explained that information on accessibility is easy if the individual knows where to look. This participant found it difficult to navigate the university websites to lead to information needed for accommodations without a guide to help. This led to the participant mentioning that there is a need for more easily accessible information. This participant described their disability as ADHD, Autism, Depression, and Anxiety. However, the participants were not receiving accommodations in their classes because the participants had the preconceived notion that accommodations were only for physical disabilities. Participant 1F shared that they were not receiving accommodations in their classes because they believed that it would only benefit someone with a physical disability, instead of someone with a diagnosis similar to theirs, which was ADHD, Autism, Depression, and Anxiety. Participant 10F explained that they received upgraded parking, scheduling exams, and attendance. These are examples of accommodations that can be provided for students with disabilities when they know where to look and how to access their needs for their disability in the education.

Participant 9F shared that their experience with accessibility included having classes in a building with only stairs, and no elevator. This participant explained their disability was Dysautonomia and POTS, which makes it difficult for them to walk up the stairs at some times. A notable statement by this participant was, “everyone would benefit just from adding an elevator.” Universal design is a starting point for colleges to provide students with disabilities access to a more inclusive college experience (Fleet & Kondrashov, 2019). It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the classroom (Adams et al., 2018a). The participants expressed feelings of “discouragement” when the accessibility of the building impacted their ability to attend one of

their major classes. It is fundamental for institutions of higher learning to design environments that are accessible on college campuses and in the community (Adams et al., 2018a).

Sense of belonging is the personal feeling of connectedness, socially, physically, and in experiences (Allen et al., 2021). Belonging is a need that individuals are driven to fulfill (Allen et al., 2021). There is little research on students with disabilities and how they transition into higher education (Vaccaro et al., 2015). A sense of belonging is challenging for students from marginalized social identity groups (Vaccaro et al., 2015). Vaccaro et al. (2017) found that feeling like a student and doing well in their class was also related to the sense of belonging for the students with disabilities. Additionally, when the participants felt support in their social relationships, they were able to develop a stronger sense of belonging (Vaccaro et al., 2015). The current research study explored the experiences of dealing with accessibility on campus for students with disabilities and whether this has an impact on the sense of belonging as a student with a disability.

Participant 1F did not feel connected to others because of social anxiety. They joined clubs after going to therapy, but in class they are not focused on peers, so it was hard for them to make connections. They shared that events are for friends, not the classroom. In the classroom they were focused on learning and did not make connections with others, which they could attribute to their disability.

Participant 2F recognized their positive sense of belonging to not experiencing their disability all the time. This participant experienced psychogenic seizures with their disability, so this was brought on with stress or lack of sleep. At times they shared that they did feel left out because they might not be able to go to an event, such as a basketball game, because they had to lay down after having seizures. However, they expressed that they do feel as though they still

belong. A prominent quote of this participant was, “I just had a bunch of seizures, but I’m here.” This shows how there are a lot of symptoms and elements of disabilities that go unseen. This participant felt embarrassed at times when they had seizures on campus or in class. They reiterated that they would feel as though they were left out if they had to sit away from friends in class in case a seizure occurred, but they still felt as though they belonged. Thus, in answering the research question, accessibility and their disability impacted their feeling of being left out, but not necessarily the overall feeling of belonging.

A couple of the participants shared about accessibility and the jAUnt golf cart campus transportation service that is available for students, faculty, and staff with a disability or medical condition. This service is offered if the individual has difficulty traveling within campus. Medical documentation is required for using this service, and it is not an accommodation. Participant 3F mentioned that the carts stop running at 5pm, which can make it difficult to go to campus events later in the day. They also described that they were not able to make scheduling changes past a certain point. For instance, if they wanted to go to the library after class with a friend, instead of going home, they were not always able to make those late changes. Further, this also helped in answering the research question that accessibility did have an impact on their ability to connect with others in certain campus events, but it did aid in their ability to belong in the classroom, as long as they scheduled ahead of time based on their class schedule.

Participant 9F had a “special seat” in a lab, and they expressed feeling “isolated” because of this. There was a commonality of feeling left out or singled out with a couple other participants as well. An example of universal design of instruction is creating multiple modes of teaching, such as lectures, discussion, and videos (Adams et al., 2018a). This could also be having the same seats for everyone in the class, no matter their ability. Participants expressed

feeling like an outsider with something that made them feel different or singled out based on their experience with accessibility and receiving accommodations. This included, taking exams on a different day or in the back of the class, or having a seat in lab when no one else did. This participant said, “as a whole I feel like I belong, but from a disability standpoint, no.” Something they believed would be helpful in feeling a sense of belonging as an individual with a disability was if there were clubs on campus for similar individuals. This goes into the conversation with participant 10F, and how they described that they were once a member of a club for advocates of disabilities, but it has been dissolved. This was a club for individuals with disabilities was a way for them to feel connected and gain knowledge on disabilities and advocacy.

Disability identity development is a crucial social process and can be formed by recognition through available resources, which is why it is critical for professionals, such as those on college campuses, to become aware of how to best support individuals with disabilities (Forber-Pratt et al., 2017). The model of psychosocial identity development for individuals with disabilities has four developmental statuses, which include acceptance, relationship, adoption, and engagement (Forber-Pratt & Zape, 2017). When an individual receives a new diagnosis of a disability and is faced with differences, they may develop role confusion and need for introspection (Forber-Pratt & Zape, 2017). Participant 2F felt out of place in the disability community because they do not always experience the symptoms of their disability. Participant 3F said they did not feel that connected to their disability identity. Participant 11F explained they did not feel as connected because it was “just how I live my life.” Participant 12F shared that they were also still building their identity, but disability was not necessarily part of their identity, even though it affects them every day. Half of the participants felt as though they were still developing their identity with their disability, or they felt as though their disability was just a part

of who they are and what they experience, which was normal, and did not impact their overall identity. An individual with a disability may distance themselves from the identity of having a disability if their experiences with others are negative about them having a disability (Cunnah, 2015). Cunnah (2015) found that students with disabilities are influenced by their experiences of identity in their past and present.

Overall, the participants in the current research study shared positive experiences in college as a student with a disability. These were general experiences that they went through and were compelled to share in the interviews. Participant 2F had psychogenic seizures and shared their experiences of having seizures in class. These were stressful experiences for the participant. They explored their positive experiences with the Office of Accessibility. Participant 6M also had positive experiences with the Office of Accessibility, along with having a “seamless” experience with the Biggio Center at the university.

The Office of Accessibility at the university explains that they align with the viewpoint that students with disabilities are students with abilities who encounter social and environmental barriers. They explain that disability is a crucial component of diversity, and they value the experiences of students with disabilities. In their mission of working with students, faculty, staff, and community to limit barriers for a more accessible campus and learning environment, they use reasonable accommodations in the academic setting, assistive technology, support services, and student, faculty, and staff training. The Biggio Center's vision is described as a desire to develop a culture on campus that honors student-centered learning, evidence-based teaching, diversity, and educational technology.

Further, more experiences provided included participant 11F describing that they are able to have double time to take their tests. However, they explained that it can be difficult to

schedule because that time has to come out of something else. The responsibility and scheduling falls on the student, which can be difficult, especially when they have a disability that can be challenging to stay organized. The participant also hired outside help for some of their classes to aid in their work in courses to be able to follow along. Participant 10F shared their experience has been “great” and one instance when they dislocated their shoulder on campus and dropped everything, people ran up to help them. This participant said just because they had a disability, they were no less of a student than anyone else. Participant 12F conveyed that their experiences were strengthened after meeting peers with the same disability, or experience with thyroid cancer. They articulated the importance of finding people with similar experiences.

A subtheme within their experiences was that the time was a rough adjustment to college, mainly due to their disability. There are tremendous changes in personal, social, emotional, and developmental levels. These changes can occur in living situations, relationships, education, vocation, and navigating new roles (Wood et al., 2018). Participants 2F and 7F had difficult times adjusting because of the symptoms of their disabilities at the start of college. Participants 3F and 9F each took a break from school because their disability was impacting their schooling.

Another subtheme of the experiences of the participants was their experiences with peers. “Awkward” seemed to be the most reoccurring word to describe the varying instances shared in the interviews. Many of the participants expressed that their friends either did not know about their disability or they did not talk about it with their peers and friends. Also, it would get awkward for them when their peers tried to help at times. Participants felt as though they did not know how to talk about their disability with peers or it was exhausting having to explain or describe it to others. If a student with a disability has difficulty adapting to new environments or with social skills, they may also struggle with friendships (Plotner & May, 2019). Thus, there

could be potential challenges when interacting with peers or self-disclosing their disability, making it “awkward” which was seen in the current research study.

The final subtheme of lived experiences was about faculty. The participants shared that for the most part, their interactions with faculty were “positive” and “good,” but there were some experiences that were noted as being frustrating. This was when faculty lacked empathy or understanding. Participant 1F had “good” experiences with their therapist and psychiatrist. However, they do not talk about disabilities with professors because they understood that professors are there to teach and the participant is there to learn. Participants 3F, 6M, 7F, and 9F had good and accommodating experiences with their professors. Participant 11F had experiences with supportive and understanding professors. They shared it can be difficult when the responsibility falls on the student to get accommodations in certain courses. However, since they felt they were an organized individual it was not a substantial problem for them, but they could see how it could greatly impact someone with a more limiting disability.

Some participants also had experiences that were not as positive. Participant 2F shared that some faculty need more understanding and awareness for disabilities. They felt they always needed to explain their disability. This participant explained that it would be beneficial for faculty to acquire more knowledge, especially about types of lesser-known disabilities. There were times for participant 10F that professors were not as accommodating, or they even got angry. They shared their frustration in saying that they had to explain “a lot” to professors. This participant stressed the need for more “empathy” and “understanding.”

Limitations

This study explored the lived experiences of undergraduate students with disabilities on campus and in the classroom. Only focusing on students from only one institution was a

limitation of this study. The researcher sought to gain knowledge of the experiences of these students across a similar platform, which was one institution. However, this could be viewed as a limitation because there are differences that could be explored in other universities, states, and cities. The researcher also sought to gain an understanding of varying disabilities, but it could be seen as a limitation that there was lack of focus on one type of disability to gain a more thorough and deep understanding.

An additional limitation of this study is that out of the nine participants, eight were females and only one male. Females and males might have differed perception of their experiences or thoughts when it comes to their identity and sense of belonging. Richness of perspective among transcendental phenomenology studies can be achieved when there are a variety of voices included in the study.

Implications

The current research study has investigated the lived experiences of nine undergraduate college students at one university. The information that they provided and the themes that emerged from these data can be groundwork for faculty training to provide greater understanding about accessibility experiences and sense of belonging for college students with disabilities. Based on the findings, it is important for counselor educators to know about the experiences of students with disabilities to be able to support them on an individual level. The findings of participants feeling it is “good until it’s not” with faculty can be useful for educators to apply the following implications to continuing education in their field.

There were overall positive experiences shared by the participants, but there was a theme of “good until it is not” when it came to faculty. This meant that for those participants that did not always have a positive experience, they felt as though the faculty lacked understanding or

empathy when it came to knowledge on their disability. More education, training or knowledge about certain disabilities and the unseen impact it has on students could strengthen the empathetic understanding that faculty provide in coursework. Wynants and Dennis (2017) found that faculty participants reported feeling less discomfort when interacting with students with disabilities after completing a disability awareness program compared to before completing the program.

There is an implication for a program along with training for new faculty to complete as they enter the university. This could be part of the orientation process for faculty and can be adjusted as continuing education for other faculty. The curriculum in the program would include information on working with students with disabilities, knowledge about lesser known disabilities, and how to handle various situations. This can aid in more understanding and empathy with faculty for interactions with students with disabilities.

Additionally, most participants had a “rough” time adjusting to college because of their disability and had “awkward” experiences with peers. Many of them were still developing their identity when it came to their disability. One premise that emerged in identifying this was to find individuals with similar experiences, such as having clubs or groups on campus for more advocacy within the Disability community. Having this presence on campus could allow the students to feel as though they belong as a student with a disability. This could also strengthen their knowledge on the accessibility on campus and in the classroom, while advocating for change when necessary. When services are accessible to all students, no matter their ability, on campus, students with disabilities can feel independent. Accessibility is connected to independent mobility and vital for the quality of life for individuals with disabilities (Karimi et al., 2014). These notions can be a step in the right direction to further the advocating, awareness,

and knowledge for those students with disabilities. Additionally, implications for students with disabilities and their peers are the importance of connection and belonging. The themes emerged from the current research study showcased that the students felt a sense of belonging, but not from a disability standpoint. This can begin to be improved with more opportunities for peer connection through groups and events that are accessible and known on campus. Thus, their sense of belonging and disability identity can progress and flourish.

Recommendations for Future Research

Based on the present study, recommendations for further research includes a focus on specific disabilities, such as conducting a study with only cognitive disabilities or only physical disabilities, for example. Next, broadening the participant pool to other institutions of higher learning could aid in learning and exploring more of the lived experiences of those students based on what is accessible on various campuses and classrooms. Further, exploring post-graduates or graduate students could further the exploration of the experiences of individuals with disabilities and their sense of belonging and disability identity.

Conclusion

The current research study addressed critical factors for students with disabilities, such as identifying changes for improvement in accessibility, practice and policy for higher education institutions, faculty, and administration from the voices of the students. Next steps of this research study can be tremendous in working toward positive changes for students with disabilities, specifically in improving their sense of belonging as a student with a disability and their interactions with faculty. Strategies that can be put in place for an increase in knowledge for faculty are programs to help them gain knowledge and insight into the student experience. This could be continuing education offered to faculty. Another strategy is a short course for new

faculty as a credential as they enter the role. Existing faculty can be encouraged to engage in the course as well. This can enhance and influence faculty awareness of students, especially students with a disability. Disability identity development is a fundamental social process and can be formed by recognition through available resources, which is why it is crucial for professionals, such as those on college campuses, to become aware of how to best support individuals with disabilities (Forber-Pratt et al., 2017). This research study can initiate the process of providing educators and administrators with resources to better support students with disabilities on college campuses and in the classroom.

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Appendices

Appendix A

Recruitment Email

Hello,

You are invited to participate in a research study to build on the research about college students with disabilities and their sense of belonging and identity in relation to their experience with accessibility on campus. The current research will aim to review the lived experiences with accessibility of students with disabilities of Auburn University to identify if there is an impact on their sense of belonging and how they identify as having a disability. The findings will be used to provide educators and administrators with resources to better support students with disabilities on the college campuses and in the classroom. The study is being conducted by Denise Bozek, M.A.Ed.&H, CRC, under the direction of Dr. Chippewa Thomas, Ph.D. in the Auburn University Department of Special Education, Rehabilitation, and Counseling. You are invited to participate because you are an individual who identifies as having a disability and an undergraduate student at Auburn University and are age 19-25.

If you are interested in participating, please complete the following brief form linked to an informed consent form and a Qualtrics survey, which will be a screener for eligibility in the study. The screener will define disability, exclusion criteria, and eligibility criteria, such as the individual's age, if they identify as having a physical, mental, cognitive, or emotional disability, and their status of being a student at Auburn University.

LINK to informed consent & screener

From the eligible pool of individuals, participants will be randomly selected. Participation is voluntary, and if you decide to participate in this research study, you will be asked to schedule a one-time Zoom interview session with the researcher, Denise Bozek. Total time commitment will be approximately 1-2 hours. Participants can choose to drop out of the study at any point.

What you share in this survey and in the interview will remain confidential. What we share from our findings will be what we learn in aggregate. No personally identifiable information will be shared.

Please let me know if you have any questions or concerns. Thanks in advance for your consideration.

Kind regards,


Denise Bozek

Attach information letter & IRB


Appendix B

Flyer

HEY THERE!



Be part of an important study for students with disabilities!



THE IMPACT OF ACCESSIBILITY ON STUDENTS WITH DISABILITIES ON COLLEGE CAMPUSES

* The purpose of this research study is to understand the lived experiences of accessibility for undergraduate students with disabilities and the impact on their sense of belonging and disability identity development. This study is being conducted by Denise Bozek, doctoral candidate in the Department of Special Education, Rehabilitation, and Counseling at Auburn University. This study has been approved by the Institutional Review Board at Auburn University (Protocol # 23-503 EX 2310).

If you are over 18 and identify as an undergraduate Auburn student with a disability, you may be eligible to participate. Participants will be asked to participate in a one-time 1-2 hour interview. Participants will receive a \$10 Amazon gift card.

Click Here:



For More Info:
dcb0065@auburn.edu
Denise Bozek, M.A.Ed.&H, CRC

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Protocol # 23-503 EX 2310

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Appendix C

Social Media Advertisement

Auburn University

Attention Students!

Currently recruiting undergraduate students with disabilities to be interviewed for our study. The purpose of this study is to hear the lived experiences of college students with disabilities with accessibility on campus and the impact on sense of belonging and disability identity development.

If you are over 18 and identify as an undergraduate Auburn student with a disability, you may be eligible to participate. Participants will be asked to participate in a one-time 1-2 hour interview

Our aim is to give you a voice

If interested, please use the QR code to complete a one minute screening survey

Thank you in advance for your participation!



For more information or questions/concerns contact Denise Bozek
Email: dcb0065@auburn.edu

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Appendix D

Participant Screener

Having read the provided informed consent, please decide whether or not you wish to participate in this research study. Selecting “yes, I am between 19-25 years old and consent to participate” below indicates your willingness to participate and you will be invited to continue the survey questions via this Qualtrics form.

- a. Yes, I am over between 19-25 years old and consent to participate.
- b. No, I do not wish to participate.

Screener:

The Americans with Disabilities Act defines disability as “a physical or mental impairment that substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment” (US Department of Justice, 2009).

Communicative disability – blind or has difficulty seeing, is deaf or has difficulty hearing, and/or has difficulty having their speech understood (Brault, 2012).

Cognitive disability – learning disability, intellectual disability, developmental disability, Alzheimer’s disease, senility, dementia, and/or another mental or emotional condition that interferes with everyday activities (Brault, 2012).

Emotional disability – an inability to learn, which is not explained by intellectual, sensory, or health factors, an inability to make satisfactory interpersonal relationships with peers and/or teachers, behavior that is inappropriate in normal circumstances, general feelings of unhappiness/depressions, and/or a tendency to have physical symptoms of fears with personal problems (Individuals with Disabilities Education Act, 2004).

Physical disability – uses a wheelchair, cane, crutches, walker, has difficulty walking a quarter of a mile, climbing a flight of stairs, lifting something that is up to 10 pounds, grasping objects, getting in or out of bed, arthritis, rheumatism, back or spine problem, broken or fractured bone, cancer, cerebral palsy, diabetes, epilepsy, head or spinal injury, heart trouble, atherosclerosis, hernia, high blood pressure, kidney problems, lung or respiratory problem, missing limb, paralysis, stiffness in limb, deformity of limb, stomach or digestive issue, stroke, thyroid problem, tumor, cyst, and/or growth that limits activity (Brault, 2012).

How many full semesters have you been an undergraduate student at Auburn University?

- a. 1
- b. 2
- c. 3
- d. 4+

Do you identify as an individual with a disability? (select all that apply)

- a. Physical
- b. Communicative
- c. Cognitive
- d. Emotional
- e. Other: _____

Have you been diagnosed with any disability or impairment? (select all that apply)

- a. Physical
- b. Communicative
- c. Cognitive
- d. Emotional
- e. Other: _____

Appendix E

Informed Consent

INFORMED CONSENT for a Research Study entitled *“Accessibility and Students with Disabilities”*

You are invited to participate in a research study to build on the research about college students with disabilities and their sense of belonging and identity in relation to their experience with accessibility on campus. The current research will aim to review the lived experiences with accessibility of students with disabilities of Auburn University to identify if there is an impact on their sense of belonging and how they identify as having a disability. The findings will be used to provide educators and administrators with resources to better support students with disabilities on the college campuses and in the classroom. The study is being conducted by Denise Bozek, M.A.Ed.&H, CRC, under the direction of Dr. Chippewa Thomas, Ph.D. in the Auburn University Department of Special Education, Rehabilitation, and Counseling. You are invited to participate because you are an individual who identifies as having a disability and an undergraduate student at Auburn University and are age 19-25.

What will be involved if you participate? Interested individuals will fill follow a link to an informed consent form and a Qualtrics survey, which will be a screener for eligibility in the study. The screener will define disability, exclusion criteria, and eligibility criteria, such as the individual’s age, if they identify as having a physical, mental, cognitive, or emotional disability, and their status of being a student at Auburn University. The researcher will use these questions to ensure the individuals are qualified for participation in the current study. From the eligible pool of individuals, participants will be randomly selected. Participation is voluntary, and if you decide to participate in this research study, you will be asked to schedule a one-time Zoom interview session with the researcher, Denise Bozek. Total time commitment will be approximately 1-2 hours. Participants can choose to drop out of the study at any point.

Are there any risks or discomforts? The possible risk associated with participating in the current study would be loss of confidentiality. To minimize the risk, I, as the researcher, will not include any identifying information, and there will not be any identifying information that is included in the interview. Numbers will be assigned to participants, and names will not be included when notetaking or recording the interview. Emails will be collected to schedule interviews but will not be used in data collection. Email addresses will be permanently deleted after the interview is conducted.

Are there any benefits to yourself or others? There will not be direct benefits of participating in this study. However, your participation in the current research could

help obtain data that is useful for providing educators, counselors, and administrators information about how to best support individuals with disabilities related to accessibility. I cannot promise you that you will receive any or all of the benefits described.

Will you receive compensation for participating? To thank you for your time you will be offered participants will receive a \$10 Amazon gift card. Gift cards will be sent via email address that you provide. This email address will not be collected as part of the research data and it will be deleted after analyses and results are completed.

Are there any costs? If you decide to participate, you will there will not be any monetary costs. Auburn University has not provided for any payment if you are harmed as a result of participating in this study.

If you change your mind about participating, you can withdraw at any time during the study. Your participation is completely voluntary. If you choose to withdraw, your data can be withdrawn if it is identifiable. Your decision about whether to participate or to stop participating will not jeopardize your future relations with Auburn University, the Department of Special Education, Rehabilitation, and Counseling.

Any data obtained in connection with this study will remain anonymous. We will protect your privacy and the data you provide by not including any identifying information in the interview or documentation. Information collected through your participation may be used to help educators and administrators in higher education with resources to better support students with disabilities related to accessibility, their sense of belonging on campus, and their identity. Information collected through your participation may be used published in a professional journal and presented at a professional meeting.

If you have questions about this study, *please ask them now* or contact Denise Bozek at dcb0065@auburn.edu or Dr. Chippewa Thomas at thoma07@auburn.edu.

If you have questions about your rights as a research participant, you may contact the Auburn University Office of Research Compliance or the Institutional Review Board by phone (334)-844-5966 or e-mail at IRBAdmin@auburn.edu or IRBChair@auburn.edu.

HAVING READ THE INFORMATION PROVIDED, YOU MUST DECIDE IF YOU WANT TO PARTICIPATE IN THIS RESEARCH PROJECT. IF YOU DECIDE TO PARTICIPATE, THE DATA YOU PROVIDE WILL SERVE AS YOUR AGREEMENT TO DO SO. THIS LETTER IS YOURS TO KEEP.

Participant's signature Date

Investigator obtaining consent Date

Printed Name

Printed Name

Version Date (date document created): _____

*(allow space for IRB
approval stamp)*

Appendix F
Interview Protocol

Interviewer: _____

Participant #: _____

Date & Time: _____

Brief Overview & Basic Information:

Thank you for your participation in this research. My name is Denise Bozek, and I am a PhD student in the Counselor Education Doctoral program at Auburn University. I have my Master's in Rehabilitation Counseling and am a Certified Rehabilitation Counselor. The purpose of this study is to build on the research about college students with disabilities and their sense of belonging and identity in relation to their experience with accessibility on campus. The current research will aim to review the lived experiences with accessibility of students with disabilities of Auburn University to identify if there is an impact on their sense of belonging and how they identify as having a disability. The findings will be used to provide educators and administrators with resources to better support students with disabilities on the college campuses and in the classroom.

Introduction:

The structure of the interview will be casual, and I will start with some definitions then opening questions about you and then get into the interview questions. This will take roughly an hour but could be slightly longer or shorter. The interview will be audio recorded to transcribe for analysis of interviews, but I will also be taking brief notes during the interview. All identifying information will be kept confidential. I have provided the informed consent and IRB approval, but you may ask questions at any point in the interview.

Definitions:

1. *Disability*: The Americans with Disabilities Act defines disability as “a physical or mental impairment that substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment” (US Department of Justice, 2009).
2. *Accessibility*: According to the U.S. Departments of Education, Office for Civil Rights Resolution Agreement with the South Carolina Technical College System, accessible is defined as the opportunity for a person with a disability to receive access to the same information and services and opportunity to engage in the same interactions as a person without a disability in an equal manner.
3. *Sense of belonging*: A sense of belonging is the subjective feeling of connections, socially, physically, and in experiences (Allen et al., 2021).

4. *Disability identity*: Disability identity has been defined as having a positive sense of self and feeling connected to the disability community (Dunn & Burcaw, 2013). Johnstone (2004) defined disability identity development as a personal construction, which includes making meaning of self in the world. Disability identity can help individuals adapt to the disability and navigate daily stress and social challenges (Forber-Pratt & Zape, 2017).

Opening Questions:

1. How old are you?
2. What is your graduation year from Auburn University (or expected)?
3. Where are you from?
4. Describe your disability.

Interview Questions:

1. How would you describe your disability identity?
2. What has been your experience adjusting to college?
3. What has been your experience as a student with a disability at Auburn University?
 - a. Follow-up: in the classroom and/or on campus?
 - i. Follow-up: recommendations?
4. What has been your experience with sense of belonging on campus at Auburn University?
 - a. Follow-up: How does your disability come into play when making new friends on campus at Auburn University?
5. What has been your experience with sense of belonging in the classroom at Auburn University?
 - a. Follow-up: How does your disability make you feel while in the classroom?
 - b. Follow-up: Tell me about your experience with faculty when it comes to your disability.
 - c. Follow-up: Tell me about your experience with peers when it comes to your disability.
6. What additional comments do you have? Or things you want to share with me that we did not discuss.

Post Interview Information:

Thank you for your time and responding to the interview questions. Your participation in this research is greatly appreciated. All identifying information will be kept confidential when presenting the data. When the data is analyzed, and the research is complete the researcher can send you a copy of the final study if you are interested.