



# **The University of Auckland Review**

**Creating an inclusive teaching and learning  
environment for students with impairments**

**November 2009**

**Student and Staff interview results**

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## Section 2: Student and staff interview results

The first two stages of the review project involved interviewing a range of students with impairments and the staff they identified as having supported their learning at the University. To enable participants to talk freely about their experience while retaining a focus on the phenomenon of interest, semi-structured interview techniques were used. The interview guides (Appendix 1 and 2) were developed in conjunction with the Review Working Committee and provided a list of interview prompts.

All participants were provided with a participant information sheet and signed a consent form. Interviews took place in a venue that was mutually agreeable and the average duration was an hour for students and half an hour for staff. Transcripts of the interviews were sent back to participants who had two weeks to make amendments as required and approve for use. No participant chose the option of withdrawing from the project.

The Faculty of Medicine and Health Sciences Equity Committee provided significant support to this component of the review project through their representative on the Review Working Committee.

### Student interviews (stage one)

Names of potential students were obtained through the following avenues:

- Disability Services (who had obtained permission from students on their database to be contacted by the reviewer).
- Self-referral in response to an advertisement in Craccum.
- Snowball technique – where students who were known to the researchers were asked to contact others who met the criteria and invite them to contact the researcher.

Students were selected to represent as diverse a group as possible and, of those, a total of eleven were able to attend interviews within the designated timeframe.

### Profiles

The profiles of the 11 interviewed students have been summarised to protect anonymity:

- Faculties: Faculty of Medical Health and Sciences, Science, Arts, Education, Law, Engineering. Many of the students had studied or were currently studying in more than one faculty in their undergraduate degrees and all in more than one department.
- Level: undergraduate (6), postgraduate or doctoral (5).
- Gender: Female (9), Male (2).
- Ethnicity: included Māori (1) and Pacific (1).
- Impairments: medical/health, mental health, vision, hearing, physical mobility and learning. Many of the students identified having more than one impairment despite disclosing fewer to either Disability Services or others within the University.
- Age: under 25 (6) over 25 (5).

Three of the students mentioned studying at another tertiary institution before coming to The University of Auckland.

### **Staff interviews (stage two)**

Students were asked in their interviews to identify up to three staff at the University who had supported their learning. Some of those nominated staff were identified by more than one student but interviewed only once. In most cases the staff member did not know which student had identified them.

Of a total of 25 nominated staff, 15 were able to participate in an interview within the designated timeframe.

### **Profiles**

Staff profiles include the following:

- Faculties: Faculty of Medical Health and Sciences, Arts, Education, Law, Engineering.
- Service divisions: Library, Disability Services, Centre for Academic Development.
- General Staff: (4) Roles include Librarian, Student Advisor, Disability co-ordinator.
- Academic Staff: (11) Roles/levels include Associate Dean, Deputy Head, Head of Programme, Course co-ordinator, Professor, Associate Professor, Senior Lecturer, Lecturer, Senior Tutor, and Undergraduate.
- Gender: Female (8), Male (7).

A high proportion of the staff interviewed had experience of disability issues themselves. Typically this was personal experience (friends, family members or self) and/or work experience (e.g. participating on equity committees). Four staff members have specific responsibilities to support students with disabilities, one in a faculty and three in service divisions.

Each interview was transcribed as soon as possible. A copy was sent back to the respondent who was invited to make any amendments. The data was analysed case-by-case and then across cases to identify common themes.

# Findings

Students who participated in the interviews were asked to identify:

- How their learning at The University of Auckland was being supported.
- What had been the greatest challenges to their learning.
- Ways in which the University could better support their sense of inclusion and learning.

Staff (academic and general) who participated in interviews were identified by the student participants as having supported their learning. The staff participants were asked to identify what they did to support inclusive teaching and learning practices, any challenges they had experienced, and whether the University had assisted them to engage in inclusive teaching practices.

The findings in this report represent the responses given within the interviews. Absence of specific issues or topics should not be construed as negative; it is simply that they were not raised.

Where possible the findings have been reported using topic headings which correspond to 'Best Practice Standards for Creating a Fully Inclusive Environment' outlined in Kia Ōrite Achieving Equity: New Zealand Code of Practice for an Inclusive Tertiary Education Environment for Students with Impairments (2004).

## 1 Access to buildings, facilities and equipment

*Students with impairments will have equitable access to the physical environment within the tertiary institution in which they will study, learn, live and take part. (Kia Ōrite, 2004)*

### 1.1 The physical environment

Many of the staff and student participants mentioned concerns about physical access.

*You couldn't come up onto this floor unassisted in a wheelchair, or the bathroom downstairs. You have to get through a door to access the mobility toilets and unless you have someone with you, you can't actually get in. There are some issues with that. (Academic)*

*Some of my lecturers are in that building and you have to get up the stairs, there's no lift in that building, don't ask me why. So, sometimes you have to go through that building, go up the lift, go up to the third floor and then walk ... and for me that's usually quite a bit of a hike. (Student, physical and visual impairments)*

The size and location of the physical environment, particularly on the City Campus, create particular challenges.

*The fact that we are on the side of a hill in the middle of the city and they keep digging up the footpaths and we are in an environment where property is expensive and so we have to make the most of the space that we have got. (General staff)*

*Physical access is really important. We have some quite large students and I think that is a major issue as well, because they have to hike all over the campus. (Academic)*

*Even though you've got a scooter there, a scooter can only do so much. Like when there were road works around. (Student, physical and visual impairments)*

*It's just the environment stuff around ... with the numbers in the class, sometimes the classes are quite cramped ... I hate being in a room where I feel closed in ... and if a room doesn't seem well ventilated then I tend to feel quite tired, soporific. (Student, mental health impairment)*

In some cases concerns related to access in relatively new or modified buildings. The General Library, the new Business School, and the School of Population Health were all mentioned by staff and students.

*[The lift in the General Library] is used by various people, the students with a disability but also parents and so on. There have for a long time been complaints about how that doesn't work very well. It's to do with the closing, there is an automatic closing door that doesn't really close properly and the library's position has pretty well been that it does work properly, you just have to make sure that the door closes. There is no buzzer where somebody can say come and help me, this isn't working. You are out of the library and so you are not going to be able to get in... And if you take away over bridges it's just not acceptable that you have worse access. (General staff)*

*The general library lift has been unacceptable since it was put in to be honest and I am sure you have had a number of students outline why that is unacceptable. (General staff)*

*Sometimes the library lift doesn't even work and I have just recovered from a broken foot from tumbling down the stairs ... Because the lift wasn't working. So that means my access to the library is curtailed and I got bad feedback from one of my assignments and they said there is too much internet-based. The lecturer was quite patronising. He said do you know where the library is? I said, do you know how to climb up the steps when you can't? A really patronising lecturer. (Student, medical and mobility impairments)*

*Access is always a challenge. Progress is being made but in previous years they have come to consult after things have already been underway. For example the Business School; the recommendation from Disability Services was to put hearing loops in the lecture theatres and they didn't think about it until after they had built the concrete seating and that meant you couldn't put the loops in. And even at Tamaki we have got those new buildings but the Code of Compliance is not necessarily good enough. For example at Tamaki the toilet buttons: I have full hand function and I find them hard to press, so someone with limited hand function is going to find it hard. (General staff)*

*The bathroom downstairs you have to get through a door to access the mobility toilets and unless you have someone with you, you can't actually get in. There are some issues with that. (School of Population Health, Tamaki)*

Access can be exacerbated for some students (and staff) with mobility-related impairments who are studying on more than one campus.

*If we are going to continue to schedule split courses across two campuses, then realistically there should be some accessible means of moving students. ... Well also to be honest, there aren't very many accessible buses in Auckland. Properly accessible buses and if you are talking about moving a car chair, you are almost never going to get a power chair on any bus, so there needs to be some kind of thinking outside the square. (General staff)*

*The only disadvantage is that they have a free bus, but that is not mobility access, they are the old kind of buses. (Student, medical and mobility impairments)*

## **Parking**

For one student the provision of disability parking was an important consideration in choosing The University of Auckland.

*It's brilliant. I investigated going to Victoria University, but their parking is on a time by time basis, that's how bad it is in Wellington. So I couldn't go there. (Student, medical and mobility impairments)*

The same student mentioned that at times there were still problems with access when other cars are parked in her designated space.

*But sometimes I miss some of my lecture because I have to get in touch with security and give them the keys ... it's just another burden, another barrier. But security has been brilliant. I am really glad and when they come and see my vehicle is entitled to be there and they apologise and I thank them. (Student, medical and mobility impairments)*

## **1.2 Facilities and equipment**

A wide range of facilities and equipment are recommended in Kia Ōrite and many of these were discussed by interview participants.

### **Disability spaces**

The provision of disability spaces was considered to be a valuable resource by many of the students and staff.

*I mean the thing about having that little disability space is if I'm having a really, really bad day I'm only in there with someone else who's disabled or I'm on my own whereas if I'm in the big student learning places and something won't go right or I can't remember how to work something I feel like a dipstick myself and I have to like turn around and say to some student excuse me could you..., so it is nicer to have that space because then if you've got a problem you can slow down or stop whereas if you're in a space where there's someone sort of standing in a queue waiting for your computer it's a bit different. I've got a computer at home but I would prefer to work here because at home there are*

*too many other things. It's like going to work here and forget about what's at home. (Student, medical impairment)*

*The primary thing [about disability rooms] is the collegiality and study space. (General staff)*

However, these spaces are not always easily accessible to students who would like to use them.

*Medical and Health Science doesn't have, for example, a Disability Room so I can't see any of the computers at Grafton.... The disability spaces on the city campus definitely [supports my study] because I am able to pull the computer as close as I want. They have software on it that helps in case there are things I can't see like zoom text and things like that. (Student, visual impairment)*

*The Todd Centre has wonderful facilities, is just too far away for some of the students with disabilities to get to and to be able to make use of and I think that in those cases we should have in the outlying Faculties a similar facility but again that would be a huge resource. (General staff)*

*I would like to use the room where students go and lie down sometimes because I get tired. But it is such a rigmarole so it's easier to drive home and lie down... It's nothing to do with disabilities failing; it's just that it's another thing to have to sort out. I have to sort out my parking, I have to sort out note takers, I have to sort out lecture ... extra tutorial or extra test time and going and getting a room to sleep in is just another thing to do... Library disability spaces are another rigmarole. You have to go to the library people; they tell you have got to have some note from Disabilities. I can't be bothered. (Student, medical and mobility impairments)*

One student who studies on the Grafton Campus described having to travel to the City Campus to use a disability space.

*It's probably because they haven't had the need to have that sort of equipment before because usually students with [a visual] impairment would probably not either choose that course on purpose or for example usually if you have an impairment there is a lot of Lab work involved and it is quite hard so you would probably opt not to do it. So that is probably maybe why they don't have the facilities, but in spite of not having that, they have been so good personally that I really don't mind coming to the city and studying here. I have the photocopier here as well so it worked out well for me. (Student, visual impairment)*

There were also different opinions as to how disability spaces should be equipped.

*There's a problem with the computers [in the library disability space] they're a bit old ... (Student, medical impairment)*

*[Our faculty] provides the disability room and we provide the upkeep, but the equipment is owned by Disability Services and they are supposed to upkeep and upgrade it. This has fallen by the wayside in the last couple of years... I think it is resource constraints. (General staff)*



*I think [disability] spaces are very important. It's whether the rapidly obsolete technology that we have got in those rooms is the real reason for those rooms to be there and traditionally that has been the idea that we set up [spaces] like the Todd Centre where four of the computers in there have access to Jaws. While most students with visual impairments now realistically will have access to, or should have access to their own copies of Jaws. ... and because of the requirements that we have to actually let people access that space. It is the only space with a disabled accessible toilet tucked away with a rest room, with height adjustable desks. We have to be quite selective who gets in that. I do think there is real value in those spaces, but I do begin to query whether there is more value in the collegiality of the study space aspect than there is in the adaptive tech. Now should they have access to what everyone else has when they study? Absolutely and so the provision of reasonably quality computers ... and of course some adaptive technology that we have got anyway, but whether it's worth us customising an entire suite or entire computer setup for a student who will then leave or whether it is better that we actually assist them through external funding to have it customised for themselves in a way that they can use it at home. One of the discussions I keep having with Work Bridge, is yes we have computers on campus and for one student in particular, we had to say to Work Bridge that it is not appropriate for this 18 year old lady having to be on campus until 11 pm on Friday nights, just so she can access her work materials. (General staff)*

*If [equipment for students with disability is in] an open sort of area it can be disruptive to other students, then you get that thing where the disabled student might not use it because they feel their privacy is invaded and they feel that other students are being disrupted and they have to moderate how they study. Whereas if it's in a closed room, then that has advantages but also disadvantages in that it tends to become a piece of equipment that may not be upgraded with everything else because it may not be in high use and maybe because it has its own special software and there is that extra thing if you have to make sure that if you upgrade it, you make sure everything works together. (General staff)*

### **Lecture notes on the institutional intranet and in accessible formats**

One of the most important requirements mentioned by the student participants was access to notes in advance of lectures. Visual, physical and learning impairments can all impact significantly on the students' ability to take notes and/or to follow a lecture.

*Lecturers being organised, having the PowerPoint's for the lecture, the readings, all that up there way before ahead of time, so you can familiarise yourself with the information and have that already there in your thoughts and then the lecturer comes You can start connecting the dots. (Student, learning impairment)*

*One of my coordinators has been really good. For one course there are really only three people I have to contact every week because the co-ordinator has just told all of the Lecturers involved in that course who I am and they just come in with a set of notes. (Student, visual impairment)*

Most of the lecturers interviewed were supporting this practice and those who had course coordination responsibilities were also strongly advocating the practice to others.

*I coordinate [and ensure] that all the PowerPoint lectures were put on Cecil so that means that they have got the material there that is accessible ... interestingly you do see students with these recorders there and that might be because English is not their first language or something like that. I think we have a very comprehensive course book, so without saying that we are doing this for students with disabilities, the fact that what we cater for that group of students in that course. (Academic)*

*I encourage staff to have notes early, if I am coordinating because I like, for example, to make notes available to writers in the group or to the Disabilities Coordinator. I do put the notes up on Cecil now, but I did talk about that with the students and I say that some people like to have the notes so they can sit and listen and some people like to be able to write and that's a free choice. But I like to make available the choices to students. I don't like them to think that they are not smart enough to write their notes. (Academic)*

*A lot of people [provide notes on-line, in advance] now. Practices have changed in our faculty over the last few years for the better. Teachers are far more conscientious than they were 10 years ago. So that is happening much more often. (Academic)*

*I have really tried very hard to encourage as many staff as possible to get their course books available on-line because that makes it much easier for the visually impaired, but [while] some staff have responded ... some people work much more easily in electronic format than others. (General staff)*

A few participants mentioned that, while some staff did not generally provide notes in advance, they were prepared to accommodate students who made specific requests.

*He actually doesn't use any PowerPoint's. He writes on the board which is much harder. He writes with chalk so it's really, really hard in a class but his notes are very thorough and whatever he draws on the board he draws on his notes. What he does is make sure that I have those notes at least a couple of days before the lecture. He has been emailing me the notes, so that in class I can just follow what he is saying by looking at the diagrams so I don't feel impaired at all. (Student, visual impairment)*

*[The provision of notes in advance] depends on the course, but with this particular Masters course it is not normally done, because the lecturer turns up with his or her notes on the day of the lecture, so that represents a slight concession to the needs of this particular student. (Academic)*

For some lecturers, providing the lecture notes prior to class required a level of compromise with their teaching philosophy.

*I will be honest, initially I did have mixed feelings about [providing notes in advance], but part of what I have tried to do is ensure that the notes that they get are not always complete, so in order for a student to have a complete set of*

*lecture notes they really do need to show up to lecture. Frankly, I am not that concerned about them showing up for lectures ... they are adults - if they show up, they show up, but my issue is that sometimes if you give them everything then it's harder for them to be actively involved with what is going on in the lecture and so the reason I have gone to not giving them all the bits and pieces, a complete set of lecture notes, is because that gets them to be partially note taking as part of the process and more actively involved instead of just sitting there and looking at the lecture notes. ... And in lectures of which I am aware that I have really sort of left out a reasonable number of lecture notes. I do indicate to students that if they do want access to the lecture notes that were not part of the original set, that they can contact me. (Academic)*

Despite improved practice, some student participants described still having difficulties in gaining access to notes in advance and the additional burden this created for them. Reasons cited by students and staff for lecture notes not being available included:

The practice being against departmental policy:

*[The School] would say that it's against policy for us to put up notes before the lecture because then students wouldn't come to lecturers and we want that, but I felt like I was being penalised for something that wasn't ... it was kind of unfair because I was coming to the lectures yet I wasn't getting the full ... sort of teaching quality that everybody else was getting although I was probably paying the same amount for the lectures... I went up to the Course Co-ordinators or the first year Co-ordinators, the second year Co-ordinators [about this] but I just assumed they were giving me right information. No one really suggested that I go higher than that, say [talk] to the Dean or something like that... It's basically having a double day because you have lectures from 9 to 5 and then you go home and you have to listen to all four lectures again, which is another four hours plus the study time and we have three-hour labs in-between too so that lab reports take up time. (Student, visual impairment)*

*As far as my understanding goes, every faculty and department has its own policy ... it would be great to have a universal Policy. And to lead by good practice, some Faculties are really stepping up to the challenge in doing that. (Academic)*

Copyright issues:

*I had one lecturer and it was my second semester of my first year, and it was basically not so much of my disability but more of him being protective over his routine rules and what I was going to do with [his notes] and all that copyright stuff but when I actually sat down and explained to him he finally came around but you know he was just very stand-offish ... and very, not negative because he was willing to help in every other sense of the word but when it came to his own personal materials, his class notes, what he was saying in class, all the overheads, he was very, very conscious of that..., it was just a copyright issue that he had. (Student, physical and visual impairments)*

Two of the staff who have specific responsibilities for supporting students with impairments described instances where staff were not organised enough to make their notes available in advance.

*The other thing which I still struggle with is that in some lectures they can't provide the PowerPoint in advance, because they don't have it - because they haven't done the lecture yet. I actually think that if you are paid to do this job and your job is to teach effectively, you need to be a little bit organised so that you have something that you can put online for those students. (Academic)*

*There is also, to be honest, a cultural disorganisation amongst academia ... I have had discussions with academics where they have said to me, I would love to be able to make my notes available early, unfortunately I don't write them until I am on my way and my PowerPoints are finished in the car on the way there. I think there is also concern about ... their own sort of intellectual copyright. (General staff)*

Two students also described benefiting from lecture materials being available in more accessible formats.

*I think this particular paper [Stats] was known for being quite good. They in fact had on-line, even the lecture recordings and not from video but where the Lecturer pointed, they would have a screen but it was recorded during that lecture so not only could you listen to the lecture once you went on-line and listen again but also see where the pointer was going and where the Lecturer was pointing so for a visually impaired student that was really great because you can actually be in that lecture. (Student, visual impairment)*

*I think voice recording is easier. Just because of my particular cultural background and also my learning style is oral. If you grow up on a Marae and you learn everything verbally, then that's it. It makes your whole learning focus in that direction. I'm not saying it's impossible but I'm just saying that it's also my learning style regardless of the Marae. (Student, medical and mobility impairments)*

### **Design, comfort and layout of seating in lecture theatres, computer and other laboratories**

Access issues had initially caused one student with a mobility issue to withdraw from the University when she first became impaired through a medical condition. When she returned she continued to experience some difficulties particularly in her first year.

*One paper I did, the lecture theatres were the old style ones so they were not required to comply with the Building Code, so that meant I had to sit up the back and had difficulty hearing and especially stage one papers where it is filled with students, hundreds of students. I like to sit at the front so I can hear everything. As you move up in the years though, in say stage 2 and 3, the lecture rooms are more accessible because there are fewer students. (Student, medical and mobility impairments)*

Another mentioned furniture.

*I'm overweight as well, I sometimes tend to find the ergonomics of some of the chairs and what-have-you are sometimes not always that great. (Student, mental health impairment)*

### **Lighting design**

One academic staff member discussed a concern relating to a student who has a medical condition exacerbated by bright lights.

*The course is taught in HSB1 and I keep the lights on. There is not really a dimming function in that room, so either you have to have all the lights on or you turn them all off. I do want to accommodate the student, but in past courses when I have reduced the lighting, I have gotten negative comments from students saying it is too dark. So I am aware of trying to balance other students' needs and wants with individual students. I would be perfectly happy to dim the lights but I think shutting them all off is not where I want to go. (Academic)*

### **The installation, maintenance and notification of amplification and assistive listening systems**

When asked to identify what the University could be doing better, one student with a hearing impairment had experienced difficulty in a lecture theatre in a relatively new building.

*The PA system is brand new, top of the range. But it's too echoey. And I thought initially it was just me, just the way I am processing the sounds. But then talking to other students they are saying yeah, the acoustics are terrible. I think it's just set up wrong. It took forever for someone to do something about it. I went to my Audiologist because initially I thought it was just the setting on my device and he had several theories about the speakers [in the lecture theatre], but we got nowhere in getting the technician to look into them. And health professionals were saying [to the technicians] you need to do something about this, we have got three deaf people in this room and they can't hear anything. Never mind the non-deaf students who can't hear either. (Student, hearing impairment)*

## **2 Examinations and assessments**

Assessment and examination policies, procedures and practices provide students with impairment with the same opportunity as their peers to succeed. (Kia Ōrite, 2004, p. 37)

### **2.1 Additional rooms and supervisors for test and exam conditions**

Five of the student participants had experienced problems gaining access to appropriate spaces for their tests and exams during their time at the University.

*I had a test which required power point slides to be shown, so you have to be in a room where a computer can play this and everybody else that does the test does it in a lecture theatre. Well [the lecturer] set up this space in a room [which as used by a number of people] and put a hand written sign on the doorway that said do not enter test in progress. You know what happened,*

*about six different lecturers came in and one of them got quite stroppy when my writer said they should leave as this was a test... Anyway I got a very poor mark because I lost my train of thought. I'm not writing it, I'm telling someone the details and my writer said are you sure you've finished, and I said I can't think any more, these people kept coming in and out so I, when I got the mark back I got quite a low mark. (Student, medical impairment)*

*I have had some negative experiences there, in that I have come early for my tests, because I have been given 20 minutes extra and then the rowdy lot comes in 20 minutes later and I am interrupted... I think I have said before about the education needed by the Faculties and I think the responsibility for that is with the University, so that lecturers, well meaning, kind hearted, good spirited as they are, don't plonk us in a room and then have other students turning up 20 minutes later or however long later, to disrupt us or leaving and this has happened last year, last semester I might add, I had to stay longer in the room and the students left and chatted and cluttered and made a big noise. (Student, medical and mobility impairments)*

*One time I think in my second year I think there was a location problem. They hadn't found a room but they ended up putting us in the Recreation Centre room which was quite noisy but that got sorted eventually. (Student, visual impairment)*

*This is my fault admittedly. I think I told Disabilities or the department late and instead of getting a room organised with a computer, they put me in the Pacific Islands Student Association's rooms which were downstairs. If you've ever been [there] you'll know that goes downstairs in these little doorways and it was very difficult for me to get in there and the computer was very difficult to book, it was a pretty old one. But more [of an issue] than that there were the students, because it was a student's association room they were coming in and out and that was the best that the department could do. (Student, physical and visual impairments)*

## **2.2 Reader/writers**

The provision of reader/writers (amanuenses) was considered to be an important service to many of the students with impairments. However, being able to use the service effectively was often challenging. In addition a number of students expressed concerns about the variable quality of those fulfilling the role.

*The biggest challenge was learning to use a reader/writer because you have to learn not only the stuff but you've got to learn how to put it all together like blah-blah-blah comma, blah-blah-blah question mark. It's really difficult and I think the first time I did one of those exams I met the others afterwards, we start earlier because you get extra time, you get 10 minutes for every half hour extra so we start earlier but you finish at the same time and I told some of my friends I'll meet you afterwards and so it was kind of quite a few students first time and we turned up and one of them said, oh gee my hands are so sore, I bet your hands aren't sore are they? and I said of course they're not and this person said have you lost your voice and I said well yes I've just spent the last two hours and I did - I lost my voice so that was kind of a challenge to do that. (Student, medical impairment)*

*I've got better at [using a writer]. I still have difficulty. I always have difficulty starting. You know the writer will say right oh we'll start now and I'll sit there not really knowing what to say or how to say it and then sometimes I dictate a whole spiel of things and I go inside my head I go, mm that's not quite right so I say excuse me could you cross that all out. Then I feel guilty but you know one of the lecturers told me last year, it doesn't matter because heaps of people cross stuff out. But I always feel like I've done all this work and this person beside me has written the whole thing and then I've got to tell them to cross it out. ... The big challenge with the reader/writer for the exams is that every writer has a different style and sometimes that style is not going to work, sometimes I can't actually read their writing. I can have them read it back to me ... You have like about an hour and a half with your writer and then she goes for a tea break and someone else comes in and there's this real sort of disjointed feeling. You have this person for maybe half an hour and then the next one comes back when you've just got used to the first one, you've got her all sussed out and how she writes and then this one sits down for 20 minutes and you know you've only got them for 20 to half an hour but you've got to sort of relearn how they are. (Student, medical impairment)*

*Sometimes I've had some terrible [writers]; I had to make a complaint about one of them once. Terrible! Never listened to what I said. Wrote the wrong things down and that's the other thing some of them don't listen. Some of them decide that they'll start the paragraph here when you actually want a paragraph started there. There is those sort of problems and I did make a complaint last year about one of them that I had. (Student, medical impairment)*

The attitude of the reader/writer is important. One mature student with an impairment had experienced some difficulties when her writer was a student.

*I feel like the student is looking down their nose at me as if, you know, this silly old lady hasn't really got a problem, they only find out when they get me to write my name on things and they're not supposed to do that, they're supposed to do everything for me but they sit there and think well there can't be anything wrong with her, she doesn't look disabled. (Student, medical impairment)*

A staff member with responsibilities for supporting students with impairments explained difficulties regarding the recruiting of reader/writers.

*Sometimes it's a matter of staff shortage. It's a matter of the fact that, particularly for students who require reader / writer support, ... that set of skills and finding someone who is willing to work and sit with a student in an impartial way and write what the student says for what can be two-and-a-half hours. The departments sometimes struggle with that and I have been charitable in saying that they do their best efforts to find that.... There has been an increasing understanding amongst the departments and more and more departments are being more and more proactive about developing a pool of senior students, about knowing that they have to keep rooms aside while they are doing tests. So the actual test thing is improving but it is still an enormous exercise. There are still some big barriers to that but a lot of them are on the fact that you can ask students as many times as you like, to make sure that they give you the details of the test and their contact details and our systems*

*are quite robust in collecting that data, but it's a matter of if they don't give us the data in the first place ... there is still an assumption, particularly for some first year students we automatically know the papers they are enrolled in and automatically know when their tests are going to be. We have to work quite hard on beating that assumption down. (General staff)*

Some of those interviewed thought it would reduce barriers for them if computers could be used in tests and exams.

*But it's a rule of the council that the default option is that students where possible use amanuenses ... and more and more students are coming through NCEA who are having access to computers in examination. The problem is that there hasn't really been sufficient work done on perceived advantage when it comes to computer use because of the amount of information that many people are able to put out when they type, versus when they handwrite. There is a perceptual battle that needs to be fought, but there is also some practical needs to be figured out. Eventually I believe everyone will move on to using computers, because handwriting is becoming an obsolete art, but we still have an annual debate. There is a mechanism in place to get students assessed to use computers, which is by default done through the Student Learning Centre. (General staff)*

*The reader/writers - if I could get rid of them I would like to. I would also almost say I would like to be able to type my own stuff. Okay my typing ability is not too good but I can touch type because I learnt to touch type when I was a teenager so I can mostly get most of the words right and it's really easy to correct them but of course they don't have that here. (Student, medical impairment)*

One student had, however, been allowed to use a computer.

*They allowed me to use my computer because my computer has got voice activated technology, so I could answer the questions. I let them check my computer to see that there was no way I could get information to cheat and they were happy with that. I just backed everything up to an external disk and they saw that the computer was clean and no opportunity to cheat. (Student, medical and mobility impairments)*

### **Additional time**

Additional time allowances and the provision of rest breaks are available to students who meet the necessary criteria and for many this is crucial.

*It is really good having [disability support] there because for one I can read much better if the print is larger, ... and with the tests as well having that extra time, I have 10 minutes extra per hour, because one eye is worse than the other so I basically mainly use my left eye, so that helps during the test to have that extra time since I read slower. (Student, visual impairment)*

However, one student mentioned that the criteria approved for her were not what she considered to be the most appropriate for her impairments.



*I get extra time in exams and we changed it last year ... I get rest breaks in exams and then I apply for extra time in exams and that was approved. Then the University re-evaluated everyone last year but didn't actually notify the students so when I came to sit my exams I was getting rest breaks instead of extra time and I got a little bit panicked but they re-evaluated it... they're trying to limit how many people get extra time in exams. They based my exams, I've got a heart condition as well which is quite mild, and they based part of it on that but it was just quite interesting seeing that they think rest breaks are more beneficial for me with chronic fatigue. ... While you're not mentally working your brain during that break, you still think about the exam but for me it can make me more tired. (Student, medical impairment)*

A couple of participants also mentioned organisational issues in making arrangements for additional time in tests.

*We've had instances where we've emailed a lecturer about a test and they've got back to us within a day which has been fantastic and generally Disabilities will say we're organising it through them or the lecturer actually wants you to go talk to them and they'll organise it through you which has happened a lot this semester. I think the worst instance was last year we couldn't actually get hold of a lecturer through phone or email. It got to a point where I was going up to his office every couple of hours to see if he was up there. (Student, medical impairment)*

### **3 Access to general and specialist services**

Students with impairments have equal educational opportunity through access to appropriate support and services. (Kia Ōrite, 2004, p. 21).

#### **3.1 Specialist services**

Many of the University's support services were mentioned as being important by students and staff members. In some cases there was a perception that more resources were required to enhance the service provided.

##### **Disability Services**

This service was considered to be of great importance to most of the student participants and many of the staff who were interviewed.

*The University doesn't make it easy. If it wasn't for Disability Services, I would have left here and gone. (Student, medical and mobility impairments)*

*My writing is terrible but sometimes I can't use the computer [because of my impairment] so [ a staff member from Disability Services] has to help me get enrolled and then a couple of weeks ago I had a whole heap of trouble with one of the things the university has which is the turnitin.com - it's where you put your essay in electronically so it can check to see how much you've copied and I couldn't get it to work on the computer at the library where I've got my disability space because those computers are a bit funny. [She goes on to say how a staff member at Disability Services was able to help her]. (Student, medical impairment)*

*So all in all it's been really good ... working with the Disability Co-ordinator, just telling them in time, like two or three months prior to semester starts usually*

*gives them a lot of time and usually gives me peace of mind to know that when I come into school everything will be ready or everyone learns what I need and what I'm anticipating and my expectations as well as managing their expectations. (Student, physical and visual impairments)*

*I think I pointed out maybe in the beginning that I feel that with the Disability Services that often the intentions are good but funding is an issue I think and often what is available to you is either not convenient or not right for you as an individual and so on. I often feel that there needs to be a bit of communication between the Disability Services at the University and the students themselves. (Student, learning impairment)*

*I feel competent to deal with any situation, but I welcome the support of Disability Services and I could only operate with the help of Disability Services. (General staff)*

### **Student Learning Centre (SLC)**

If students have a learning impairment they have to be assessed by the SLC if they require particular support such as a reader/writer, note taker or additional time for tests and exams.

Two of the student participants had used services provided by SLC. One was a mature student who was less confident with her study skills and the other had a specific learning impairment. Both found the service to be very useful but experienced some difficulties in accessing them when required.

*I mean we have also got the Student Learning Centre, which I used a lot more last year and that was really helpful. [Name of staff member] in the City Campus is very knowledgeable about dyslexia, so that helped. In this campus we don't really have that but they are still very helpful. (Student, learning impairment)*

*I actually can't get an appointment [with SLC] till mid-May. (Student, medical impairment, 27 April)*

### **Student health and counselling**

Most students with impairments need to access Student Health and Counselling if they wish to apply for special conditions. However, this service was only specifically mentioned by one student who said she 'found two people there to be spectacular' and one staff member who said she had received 'huge support' from them. Other staff and students said they had recommended the service to others.

*If they are a student that is having difficult ... say a depressive illness or something then I will be in touch with Counselling, who are just wonderful. (General staff)*

### **New Start**

New Start was mentioned by three of the students as providing particular support, easing their transition into the University and putting them in touch with other support services such as Disability Services and SLC.

*I came through New Start. It was learning with those groups of people and working in a small environment to start off which really built my confidence but from the offset because I actually applied first before I got into New Start I applied for the Wellesley Programme which I think is a Foundation Programme and they referred me to Disability Services which referred me to New Start ... having a small support group to start off with usually builds your confidence a lot and especially like a lot of other disability people that I've spoken to they've been very shy, very stand-offish because they're kind of a bit scared of what other people would think of them because of the disability which I can totally relate to that. (Student, physical and visual impairments)*

### **3.2 Other support services**

Some students are also receiving support from other equity services provided by faculties. One student explained how she appreciated the support she received as a Pacific woman and as a student with impairments.

*You can't put anything into a box either race-based or disability ...I think it's important for me to use all of the resources I have because when I get out there in the workplace or in the real world you have to use all of those resources and you have to be accepting and open to other suggestions, to other ways of doing things from what you're usually used to. (Student, physical and visual impairments)*

#### **Note takers**

The provision of note takers was considered to be an essential service to many of the students with impairments. However, the quality of the service was reported by students as being highly variable.

*I get some really good note takers and some that just can't be bothered or don't appreciate that they need to take proper notes. So it's more pot luck. If I understand it in the lecture then I am fine, but obviously with more complex [topics] then quite a lot of the time you can come out of a lecture and think cripes, I have no idea what that is about and you have to go study it. That is where the notes come in useful. (Student, hearing impairment)*

*For me, I would say [the services are definitely valuable but] the down side is the note taking. It's not just having the available person to be there for all of your lectures but it's also to have a person who is kind of qualified and has experience, not just a student. I appreciate everything that I am given by any student [who would be my note taker] I am really, really happy they would do that for me, but sometimes the quality is not ... it's not their fault, they are a student and they are here to do their study. (Student, learning impairment)*

*Yeah, I didn't like to say anything [about the quality of the notes] because I don't want to offend anyone and also the sort of time constraints that are already placed on my disabilities, I didn't want to burden anymore, so I was like you should get on with it ... I have had note takers in [subject] but I haven't really used [their notes], I guess I used them but only for reference points. (Student, physical and visual impairments)*

A staff member with responsibilities for supporting students with impairments gave some explanation for the complexity around sourcing note takers.

*Some universities hire external people to come in as note takers whereas we default, due to matters of scale primarily, to hiring students with experience in that subject or some students that are in the paper. Now generally for first-year papers, we wouldn't hire first-year to be first-year note takers because ... we really need somebody with a bit more background. From second [year] onwards, usually we would look for somebody within the paper and by third [year] I am very comfortable with hiring somebody within the paper of stage three. I rely on the students to come back to me with the quality of the notes that they are receiving. .... The reality is at the moment that note taking service is [one person] and so there are things that, once we get back into a fully staffed situation, we can review it. There needs to be a balance between ensuring students are properly supported and ensuring that we are actually able to recruit note takers. (General staff)*

### **Transcription service**

Two student participants with visual impairments explained how important the transcription service is for them and raised concern about the length of time required getting materials back. This point was also raised by two staff, one academic and one general.

*The Disabilities Office has got a thing called the Alternative Print Service so if I have anything that needs reading such as literature, research articles, books, even sometimes course materials such as handouts given to me by lecturers during classes, that got sent away to the Alternative Print Service and it got narrated onto first of all cassette tapes and now it's being done digitally. I'm getting CDs. That's always been a fairly good service ... [What] I would like to be improved is the transcribing of materials from paper to computer. The lady does an awesome job but I think there's so many of us she can't get round to all of us all at the same time ... If those books were [transcribed] on time or if there were more people to help out with that I could get those books, read the material, go to class, know what I'm talking about and be able to participate in class discussions and tutorial discussion, get more out of it, learn more. (Student, physical and visual impairments)*

*A challenge on an ongoing basis right through my courses has been using the library, accessing literature and then having to send it away to my narrator to be narrated. The whole process is very long and time consuming. It's a huge rigmarole and once it goes to the narrator sometimes I have to wait a long time to get it back and in the meantime I need it and need it quickly, and it's not coming to me quickly. That whole process has been a huge challenge for me. (Student, visual impairment)*

*I do a lot of work with a postgraduate student who is visually impaired and I know the resources are really stretched ... at the moment my husband is reading some of her readings onto a tape because she has to wait a long time sometimes. (Academic)*

*I think there will be some students as well who will be more anxious that they are going to have to wait till the last minute to get their readings and they*

*shouldn't have to do that, because every other student gets a book of readings at the start of the semester. There has been some admin staff on this campus who have been really supportive and they do get things sent through straight away ... they know to go straight to the Alternative Print Service. ...And I guess also now it's also a University policy having the access to print, so if you send them the information as soon as you know that student is enrolled in that paper. (General staff)*

### **3.3 Information about services**

Comments from students included the importance of finding out what support they are entitled to. Those who knew about the existence of support services such as Disability Services were likely to have had long-term impairments and been able to access similar support services within the school system.

*When I was at high school one of my teachers recommended me to the department at our school which I didn't know it existed, so when I started to get the services there, I thought they might have something at the University too. (Student, visual impairment)*

However, many of the students interviewed did not initially realise the extent of these services or who they applied to.

*I always presumed it was to do with wheelchairs or dyslexia or needing a reader or needing a writer for an exam or something like that – not the kind of work I was doing because so much of it was in my head. (Student, mental health impairment)*

*You know when you start university you have no idea about what's going on. My dad was the one that said you have to go to Disabilities and I'm like but I don't come under a disability, and he said I think you should talk to them. (Student, medical impairment)*

*I think whether someone has problems with mental health issues or whether they've got some kind of ergonomic problem, physical problem or whatever it is, it would be useful maybe if the University is more explicit in spelling out how people with different problems may be helped or aided and also what the expectations are from those persons - what do you want to know from them so if there are problems and issues, what can you then provide. I mean it's sort of there but could be made more explicit maybe. (Student, mental health impairment)*

*[I would recommend] talking to the lecturers because they don't know anything unless you tell them and also talking to Disabilities because I thought I wouldn't come under Disabilities as all mine are health related. It's not classed as a general disability but they're extremely accommodating. (Student, medical impairment)*

*I think the important thing for staff again is to just be aware of the assistance that [is available] within the University and to let students know of that. I don't know if my colleagues do that. There is some fantastic learning support out*

*there... I remember as a student using various services along the way, incredibly helpful. (Academic)*

An academic course co-ordinator also mentioned that while information about services was available, it may not be in the most accessible format.

*So a student with an impairment sitting out there would have to read into [the information and decide], do my issues fit at the Medical Centre or the Student Counselling because that is really not what I'm ... it's more of maybe a teaching and learning kind of thing. (Academic)*

### **3.4 Location of support services**

Comments were made by some students about not having support services as readily available on other campuses as they are on the City Campus. Refer to 3.1.

The location of the Disability Services Office on the Epsom Campus is not easily accessible to students with mobility impairments. Alternative venues have been considered but have other drawbacks.

*Students in wheelchairs or [with] physical impairments would have to come through M block, down the lifts and then across... you can see both sides of the coin because that space down there is perfect for privacy. It was suggested a wee while ago that perhaps we could go into the Students' Association area but you are in the middle of a common room and every person that is sitting there is going to see a student coming in and for someone with a mental illness they might not want to ... so it's a tricky one finding that perfect spot. (General staff)*

### **3.5 Liaison people in faculties**

Having a key liaison/support person in each faculty for students with impairments was seen as advantageous to staff and students. Smaller faculties such as Law and Engineering have this in place and it is highly valued.

*I suppose the system works and we have good support. Certainly [name] who is our Student Advisor is very skilled at dealing with these things and so we do have a special person in place. (Academic)*

One student described her differing experiences between starting her studies within a large faculty without a key liaison person and then moving into a smaller faculty with specific support structures for students with impairments.

*[The second faculty] were a bit more proactive in supporting me and aiding me. The Undergraduate Dean organised for me to have access to the first aid room key so I could go have a nap while I'm at uni. So, if I'm quite exhausted, which generally happens around lunchtime I can take the break and go have a sleep.... And they keep an eye on me plus the lecturers are a lot more [supportive]. I just think [the initial faculty] is so broad and for me it feels very spread out over the university and there's not really a contact between you and say an Undergraduate Dean, like I wouldn't know who the Undergraduate Dean was [in that Faculty] but [where I am now] you have to go see these people. If there's someone within each department in [the larger faculty] who could oversee*

*maybe looking after students with disabilities, that would be fantastic because then you can just go talk to them and then they can lead you off in the right direction. [Since I changed faculties] I've gone from, failing two papers and that was because I had very, very, bad fatigue and I didn't talk to anyone so therefore I couldn't apply for compassionate consideration. I've gone from a C average to an A- average. The support has helped a lot and knowing that I can achieve because I know I have the capacity for it, I'm just impaired and take a little bit longer sometimes. (Student, medical impairment)*

*A staff member with responsibilities for supporting students with impairments within one of the smaller faculties explained that, in addition to meeting specific requirements of these students, she was also constantly liaising with all students to check if there was anyone who required support.*

*Well I am emailing all the time before every test, any students with special needs - please come and talk to me. It goes out on Cecil, in an email, they know they can come and talk to me confidentially and I think we are very lucky in this faculty to have a position like mine that solely focuses on student needs, student problem solving....I mean every faculty is different and there are different people responsible for things, but in some students' cases I have really gone to extra lengths because I think there has been an injustice or they haven't been given the recognition or the help they should have .... I think if some of the bigger faculties had even part of a role to support students with disabilities, it would be helpful. Somebody who students could go to with problems. (General staff)*

General staff in departments are often the ones who are providing support.

*And also talking to the general staff because I think there are a lot of people who under-estimate the impact and influence of those fantastic people out there who are always really kind to students, who are happy to repeat it, and are happy to give them the appointment card twice or three times if they lose it. (Academic)*

*There are also the student presentations; we have an hour of lecture and an hour of student presentations. So we have two or three students presenting, I go in early and I ask the secretary of the department to print me out the student PowerPoint presentations as well and she is quite good about it now. You don't have to tell her every week she sees me coming by and she has them ready. (Student, visual impairment)*

## **4 Teaching and learning**

All academic programmes are accessible to students with impairments, and staff design and implement appropriate teaching and learning strategies. (Kia Ōrite, 2004, p.33).

### **4.1 Encouraging students to ask for support**

All the staff acknowledged the importance of conveying to students that they were approachable and willing to do what they could to support specific learning requirements.

*Certainly in my course outline I make all students aware of learning support which includes students with disabilities. Many of the students with disabilities make themselves known to me personally and so I tend to give them more time. (Academic)*

*I generally do everything I can. I think students are reluctant to come in and explain these things ... I try and be as sympathetic as possible and make them feel comfortable and try and figure out a way to help them. (Academic)*

*Just to be aware that you are not aware of who is sitting out in front of you, just to be aware of that, because it's so easy to forget and just assume... I think the initial assumption is what I do works, unless I am told otherwise or unless somebody says they remember. Out of 300 students out there, there are going to be different learning needs, well different needs full stop ... I think in the first instance, it's just about saying in that first lecture that you are open ... if you need something in particular please just let me know. Having one of those statements that just says I don't know how to meet your needs unless you let me know and of course that's easier in a smaller class than in a bigger class, but just making yourself open for those kinds of conversations I guess to be had. (Academic Staff member)*

Some participants recommend ensuring orientation processes encourage students to ask for support.

*I think with any student that's starting a new course or programme it's really important that they feel welcomed, feel that the University is a place that they belong. There needs to be some engagement at the level that we are interested in you, we are interested that you do well, we want to know how to support you doing well and we acknowledge that you have an impairment that your identified and we will work with you to support your learning and to make learning a good experience. I think that initial kind of conversation about learning is really important. (Academic)*

*I think that it's important that in orientation ... [issues related to mental health are] addressed. I think it's important that the University doesn't stigmatise mental illness in any way - that it's seen to be open and accommodating. ... It's permeating through our society - in general there's awareness programmes like 'Like Minds, Like Mine' you know John Kirwan talking on TV and [other] people talking about mental health and exposing it. And I think that the University similarly needs to be creating this environment of awareness, of recognition. That whole momentum to use the website (CALM) as a means of prevention probably is an indicator that the University is taking that seriously. And then the University has to be able to give the students information about what's available if certain circumstances arise. (Academic)*

*On the first day they have all these announcements but they don't really say in the first year that if you do have a disability come and tell us and we can provide you with extra time, enlarged sheets, a Lab Assistant if you need one... My friend had a Lab Assistant and she found it quite useful because if you are by yourself in the lab it's quite important with safety because you are working with all these chemicals ... like I wasn't able to read the posters and stuff*



*because they were tiny and they were far away. Sometimes it is quite useful to have somebody there with you. (Student, visual impairment)*

### **The importance of disclosure**

The importance of students notifying staff about their specific requirements was reiterated by most of the participants. Some staff were concerned that not knowing about a student's impairments could prevent them from supporting their learning needs.

*You come across the students with some disability or impairment, sometimes hearing about it after the class has started, so you might be talking to them in a lab and they might say, just in the normal course of conversation, 'I am dyslexic' or something like that and then there are the other students, they will come to you before the course starts and actually disclose that they have something that will impair their learning, which is incredibly helpful. (Academic)*

*... to discover a [student's] profound hearing loss was something I was frustrated about not having picked up earlier – this was almost two-thirds of a year-long programme ... in this situation it was an absolute advantage to the student that I did pick it up because she was unaware that she was doing badly or had missed some of the clinical questions. It was useful that I had understood, that we had the conversation and she got to redo some of her assessment. (Academic)*

*I guess my concern with any student is that if you don't disclose what you do need to do, I may not provide the right kind of help. I don't want people to not do well, because in our class most of our students are competing to get into medicine so it is very cut-throat and so there is probably little motivation for students to help one another. So that is why it's all the more important to tell me what is going on if they need extra time and I try and get that message across because I do have a number of students who for whatever reason need, or will express to me quite early that they need extra time to do this. (Academic staff member)*

*Not many [students] come to me other than the two I have this year. They are fairly rare. The sample size is fairly small. I don't know how well I do with students who don't come to me and I have also felt a bit nervous because I do need to check up on some of the things I need to do with some of these students. (Academic)*

*There are potentially dangerous things that you are dealing with in the labs and the last thing you want is not knowing that a student has some disability in handling something and an accident happens, whereas it's potentially preventable, well it is preventable if you know that. (Academic)*

*... you can't survey the class and say hands up those with disabilities, you can't do that at all, so for a successful relationship in a class it's almost like if the students are at this point of learning or life, for them to go to their teacher and act proactively and say look ... They don't have to go into any details and disclose what is wrong even, but to say 'look I have got this disability, could I have your PowerPoints after each lecture?' or this or that. (Academic)*

*I guess in a class that is so big, it's trying to find out who I have got and who they are in terms of ... not just in terms of disability, just in terms of what their needs are. It's very difficult to gauge that. One way is through some of the student support programmes - I sort of have a contact person for the needs of some groups of my students in the class and I know that somebody is looking out for them and is asking me about how they are doing or how they are performing in assignments and things like that. So that is one very clear example of how I can find out about the needs of certain groups of students within the class ... it's about balancing that, what the student wants or needs in terms of whether they need me to know about things or not know about things. (Academic staff member)*

*I encourage students to disclose because then they can say what works for them best and it's kind of helping them to have a bit of independence whereas at school they might have had a teacher or an OT or a social worker or someone doing it for them, usually the parent because the parent usually spends 18 years fighting for their child to get access to the services and equal rights at school and all that sort of stuff. And so when they come to University I prefer them to get a bit of independence and speak for themselves, because they are going to have to do it when they enter the working world. (General staff)*

*I think if something isn't working it's really that this is their institution and they should never assume that practices or physical things are going to stay as they are. We are a responsive institution and quite often things don't get fixed because nobody has said this just doesn't work for me. (General staff)*

Students were asked in the interview what advice they had for other students and the responses were primarily around the importance of asking for the support they need.

*I think the most important part for students is not to be ashamed or scared to ask for help and often people I have spoken to that I know that have a learning difficulty - they think it's a weakness to ask for help and I see it totally differently. I think it demonstrates that you are aware of your limitations and that you take your study really seriously and that you want to do the best that you can. When you think you need the support, when you need some more time and things like that not to be afraid to ask for it. (Student, learning impairment)*

*It's just a matter of just going up to [lecturers]. I don't say this just for Pacific people, a lot of disability people as well, find it very scary going up to a lecturer and saying 'hey my name is so and so and I have this and that [impairment] and I'm just wondering if we can talk about a way that I can get more out of your class'... I don't think I've ever come across a situation where lecturers haven't been understanding, haven't been open to what you're saying because I think 90% of the time they want you to get the most out of it and they want to help you and it's just all about being there and just communicating ... the main thing that all of the people with different impairments will tell you is that as long as they communicate or as long as they know where disabilities [services] are they'll be fine. (Student, physical and visual impairments)*

*I think from my experience that if you are more willing to be the front person [for yourself] ... if you are an advocate then you get more response than if you go through services like the Disability Centre, because although the Disability Centre does it well, they sort of do the work for you, whereas if you go to the Lecturer and say, I have a problem and you either come up with a solution, or try and find a solution together, they tend to empathise more, rather than just being hassled by other people about what you need. (Student, hearing impairment)*

*Well I'd sort of say don't hide [your disability] because it is really important to get help. I know that everyone presents the best side of themselves that they can to get into these courses in the first place which is understandable but there's no point in struggling on if you're not coping with the workload. It's a really good idea to go and tell someone what's going on and to get some support... I think you need to do that because otherwise you might be receiving criticism for things that aren't really actually your fault. And people can have quite a false perception you know, they might think you are being lazy or something like that. (Student, medical impairment)*

*Don't be afraid to ask if you need that help. Don't settle for anything, just because somebody tells you. If you think you are being treated unfairly tell the Disabilities Department about it. Usually the Heads of Department are a lot more concerned when it comes to this kind of stuff. (Student, visual impairment)*

### **Reasons for non-disclosure**

While there was a high level of agreement about the advantages for students to disclose impairments, it was also clear from the student participants and some staff, particularly those who specialise in supporting students with impairments, that there are many reasons for not disclosing. These reasons include fear, not wanting to make additional work for others, the additional effort required to disclose, not wanting to stand out, and not knowing the correct person to approach.

Examples of comments from staff:

*There are two schools of thought. One is that [students with impairments] fit really kind of closely under the 'wouldn't want to be a burden' and they are motivated individuals who are independent. Students ... who have lived with an impairment and have kind of made a success for themselves to that point, are often at a point where they are fiercely independent to a fault, and it really is to a fault for some people, and for some people it is not, I mean some people are just coping and that is fine. The other is this idea that university is a point of rebirth and [re-imaging] and they are able to redefine themselves. Many of them have been a disabled person at school and that's the same for students with hidden disabilities as well. We get a lot of dyslexic students as well, saying I thought I would be able to handle it but I just can't. And students who just think they don't want to be the focus of attention... Unfortunately I have a suspicion that some of those students fall out of the system before they are able to access services and it's not because the services are not there and they are not publicised, it's because they have chosen in the first instance to opt out and they find it almost impossible at that point to get back into the services.*

*Physically it is very easy - you just wander in, but mentally and emotionally it is very challenging. (General staff)*

*I suppose there are questions for students around their health status and some people may chose to declare mental health status. I know sometimes because of the stigma around mental health in general society that sometimes people won't. And if you say you have a stigma around mental health in the general society, we're just a part of general society so you'd expect that the same sort of stigma occurred here. And so there may be some barriers but until the situation arises and you have to have to try to address that, you can't really project what might or might not be there. And in situations where I've had to advise people to access other support I haven't perceived the barriers to be there to be quite honest. (Academic)*

Examples of comments from students:

*Generally they don't find out about my disability until Disabilities have notified them about my tests but I will follow up after I know that Disabilities have notified them about special conditions for my tests, I'll go introduce myself again so they know who I am...it's quite hard to explain [what is required], I don't want to be singled out, I like to be treated as normal as possible. (Student, medical impairment)*

*When I first started doing the paper I was feeling reasonably good and you know I wanted to do study under my own merits as it were, I really [didn't] want to be given special treatment per se. (Student, mental health impairment)*

*Sometimes I don't like to [disclose] because it almost singles me out straight away. I have a friend who is doing her postgraduate in [x] and she is ADHD, and only recently she has [disclosed] simply because she didn't want to be labelled and marginalised by a label like that. So even though I am obviously impaired, anyone with half a brain can see that my hands are swollen, but some people are really quite incompetent I guess. They can't see but that is enough for me, I don't want to be singled out as much as possible ... I don't want to feel like I am getting special privileges. (Student, medical and mobility impairments)*

*I do remember not wanting to be associated with the Disability Services Centre. Because the immediate year after coming from school, the Disability Centre at school was considered a sub par ... I didn't realise it was any different at Uni, whereas ... according to the University you're obviously intelligent, you just need a bit of support. School tends to be - this guy has got a disability, wherever he goes in life it will be good for him because he is disabled, which is why I distanced myself from school and from the Disability Centre and I kind of carried that over and I didn't need to. (Student, hearing impairment)*

One student explained that she would prefer to have information about her impairment go directly from her enrolment form to the faculty so she did not have to keep disclosing her impairment herself in person over and over again.

*As we are asked on our enrolment what our ethnic backgrounds are, why can we not add on our enrolment, there is a space to say if you have an*

*impairment, why can that not be conveyed to the faculties, but [name] did remind me about the difficulties with the Privacy Act... Because then it's a less of a thing to have to go and ask for. Because maybe I don't want to, because it's an effort and [you] don't want to feel like you are being a bludger, but also it's another thing you have to contend with and there is already enough on our plates. (Student, medical and mobility impairments)*

In some cases students choose to disclose some but not all their impairments to Disability Services and others may not register with Disability Services at all.

*There is also an assumption that once a student makes contact with us that we know everything about what that student's needs will be and when their requirements will be, and so we get a lot of angry messages back from lecturers saying well why wasn't I informed of this. I had a phone call from a lecturer asking why they weren't told that a student was in a wheelchair when it was time for a test and they were booked in the upstairs room. I had to carefully explain to them, that it was because the student had not registered with us and we didn't know that student was in a wheelchair and had no way of telling them that. We don't have access to all the information and we don't necessarily want access to all the information and so it's a growing situation between us and the faculties and departments. (General staff)*

A few staff and students expressed concern that it may not be a safe environment for some students to disclose their impairment.

*A number of the students that have been Māori or Pacific have also had hearing and other disabilities which are health problems and that's double jeopardy. People are very careful about not disclosing some of those things; I think this is not a safe environment in which to disclose your vulnerability. So yes, I've experienced challenges in working with colleagues when I have wanted people to stand alongside me to support other students in a way that enables them to continue studying or that supports them to have a pause or time out before they come back in, and at times I have been unsure about the reason for so little support – I think some of the issue is racism. You know some students get so much more help than others, I think there are some biases.... I don't believe we are inclusive. (Academic)*

*And also I am still intimidated by academic staff. So if you are 18 and you are trying to be independent and say 'well here is my [form from Disability Services], I have to sit my test in a room of my own' and they come back and say 'why?' ... (General staff)*

*I often think that for people to discuss [depression] in the first place you have to be perceived to be, or by the students to be, trustworthy and somebody they feel like they can talk to. But you've got to be really clear about your own boundaries and what you can offer people and what you can't offer people and who are the appropriate people to do that. And in the University we have counselling services and GPs and support systems that can better work for students and you should be hooking people into that, if that's appropriate. (Academic)*

*I suppose there are questions for students around their health status and some people may chose to declare mental health status. I know sometimes because of the stigma around mental health in general society that sometimes people won't. And if you say you have a stigma around mental health in the general society, we're just a part of general society so you'd expect that the same sort of stigma occurred here. (Academic)*

Balancing respect for student's privacy with a desire to provide appropriate support for the student was another issue raised by a number of staff.

*There is an area of sensitivity because clearly one must not say more about a student than is appropriate. Therefore I have not asked the student questions about their disability because I am a little scared it may impinge on their private space, so I left them to make the own initiative, so I don't know whether that is right or wrong. This is where guidelines would be useful. (Academic)*

*If the students say they don't want the information shared then that's that. If I personally thought it was unwise to not share it because of some risk of them being disadvantaged in some way, then I would have an extended conversation about why I was concerned, but at the end of the day I would respect an individual's choice. (Academic)*

*I think that is my role as a liaison between the staff and the students. Where the students don't mind my talking to the staff about their particular needs or they need the extra help I will, but if it's their request to remain private I honour their request for privacy. It has to be the way I operate in my job and I just facilitate what I can for them, as do Disability Services I think, where they can. (General staff)*

*Sometimes you might perceive that there's something going on, but if it doesn't cloud the intent or your primary purpose of relating to that student which is in a learning capacity, you've got to be careful you're not treading on boundaries that are not really your concern. So probably if I perceive maybe there was something wrong, I wouldn't go launching in unless it was impinging on the person's learning .... If a person confided in me and, I perceived that they needed help, I would recommend and refer them on. But if the risk was serious (and there's some well publicised cases in the States where risk has resulted in serious outcome for others)... And if I felt that, and I felt that I needed to talk to somebody, I wouldn't hesitate to tell the person that what they've told me is of a serious nature and if they don't act on it themselves then you feel you have a moral obligation to talk to the people you are accountable to about what has been divulged. (Academic)*

*It's this privacy thing of course, because these students ... I suspect many of them don't want to disclose yet - they may well have things that are affecting them that will inhibit their learning ... I mean I don't have an answer. (Academic)*

*You need to establish confidence with those students [with learning impairments], so that if they are going to disclose to you, it is not going to work against them in the future. (Academic)*

For some students the impairment was not known at the time of enrolment and it may take some time for a diagnosis to be made.

*It took me a wee while to realise that I had a disability because it sort of crept up on me a bit ... it was my eyes when I had to do the computer labs ...I just found that I was getting blind spots when I was looking from the screen and down to the paper and I couldn't keep up with the rest of the class. So that freaked me out a bit. So there was a period when I didn't quite know what was going on and [lecturers] didn't quite know what was going on. And some rather harsh things were said and, with hindsight, I realise that my disability was impacting on the situation. Once people realised what was going on, they did kind of make allowances and for instance they always print out my lecture notes in a larger font, it's just two slides per page and little things like that can make a big difference. And just having extra time if you need it to complete assignments and also being allowed to go part-time rather than having to be full-time, and that makes a big difference. (Student, medical impairment)*

*It's going to be a trust issue for some people about just how comfortable they are as to whether they come out [with disclosing a mental health issue] or not, and it would be useful for those students who have problems, that are halfway through a paper and they become unwell and they need time out, if maybe the university has some way of looking at that and saying ok we will credit you the first part and we will maybe allow you next semester to come back in, finish the paper off - there's some leeway ... and the student in turn would need to present some medical certificate or something to [verify that]. (Student, mental health impairment)*

### **Not making assumptions about a student's requirements**

A number of staff stressed the importance of checking what students need, avoiding stereotypes, and then looking for suitable ways of providing support.

*What I do is sit down with the student and we try to work out what they think their needs are going to be and I give them advice about what they need to do and what I need to do. (Academic)*

*Just being thoughtful and not assuming everyone does things the same way... ask the student because by the time they reach university, they will know what they need. (Academic)*

*Just avoid those stereotypes. I think the critical thing is what people need to remember, especially with an invisible disability, is that those students can be A+ students and they can be C- students, so they fit at any point on the continuum ... I have got a very bright Masters student who is getting all A+'s, and people are saying she hasn't got a disability, she is too bright. But if you sat with her and looked at how she learns, you would realise there are a lot of other things going on. (Academic)*

When asked how their learning could be better supported, several students gave examples where they felt staff had made assumptions about what they were or were not able to do.

*I just think some departments could be a little more willing to take my word for it when I say I can't do something. I have had some experience where you say you can't do something and they say 'well why not?' And you say 'well it's like I can't hear', and you have to put it very simply and they still don't get it. And they are like, 'but I am talking to you now and you can hear me, so why can't you hear when I am talking in the lecture'. I say, 'well the room is bigger, the acoustics are different, not one-on-one', I could go on forever, but it takes a lot of time to explain that. ... Ignorant questions... they don't put one and two together to [realise] oh yeah obviously [these issues] are linked. This is my interpretation of what I think they're thinking, they think I'm complaining about them and saying 'you are doing all this wrong and you need to do it different because of my disability'. [However, what] I am saying is 'I have a disability, I am having problems with the way you do this'. I would find it very useful if I just say 'I can't do this' and let's just jump to the end and see what we can do about this instead of explaining ... and that is what I mean by just taking my word for it. (Student, hearing impairment)*

*When [a potential research supervisor] found out that I had this impairment, she sort of questioned whether I would be okay doing the project and she didn't ... you could see she was on the fence as to whether she wanted to take me on when she found out. That actually got me quite upset because basically she started to suggest other career options for me and I didn't like that because I said to her I have proven myself in undergrad. (Student, visual impairment)*

*One of the really difficult things about having any kind of mental illness or vulnerability to mental illness, is as soon as you talk about it or try and get help for it, it becomes so serious and intense and concerning and you end up being a patient when actually being a patient isn't what you are after - you are just after a little bit of help. So it's quite difficult I think for the university to have that kind of light touch across issues of mental illness that says we're here and if you come in here you don't automatically need to see a psychologist (who are frankly not always the best people to see when you're depressed because they can make you so much worse). And it's not the university's place in fact for a lot of times to be offering psychological therapies that would delve into, you know, my relationship with my mother or my father or things that are actually not relevant at all. If the university had offered a brief therapeutic intervention like [cognitive behavioural therapy], I would have gone - to someone I know that was not going to try and psycho-therapise me because I don't need psychotherapy, but that would have helped me translate some of my less helpful behaviours into more helpful behaviours, or recognise some of the thinking that was leading to the less helpful behaviours. And that's what I mean by the light touch - it's output focused, it says if you need more than this we can help to refer you to somebody else but in the meantime if the behaviour that you want to encourage is being able to sit and write and the behaviour that you want to discourage is staying up half the night and not writing then we can help you with that because there are some really good therapists out there that can do that work. (Student, mental health impairment)*

A few of the students also explained that their impairments can fluctuate – particularly those with medical conditions.



*I am sometimes in a wheelchair and I sometimes cannot care for myself. I cannot comb my own hair or brush my own teeth or toilet myself. I cannot even write. ... That is one of the markers of [my medical condition] - the unpredictability. (Student, medical impairment)*

### **Making adaptations to delivery and offering appropriate and effective academic support and guidance**

Many students with impairments gave examples of what they had done to ensure that, as much as possible, they receive the support they require. For some however, the responsiveness is not as timely or responsive as it might be.

*I email the lecturer at the end of the first week and tell them that I'm a disabled student and that most of my needs are handled by a disability blah-blah-blah. Now if I've had that lecturer before, I still send out the same one but at the beginning I say this is a reminder. I usually get a response. I didn't get one from the [subject area] guy but I found out why now so that's alright. He doesn't like computers but I've been to see him. I say 'I'll come and see you within the next week' just as a face-to-face contact and then I do, I make an effort. If I can't go [in] their office hours I email them for another appointment and I come up against them and they usually say at that time 'anything you need that I can help you with I will help you with'. (Student, medical impairment)*

*I have occasionally asked [lecturers] if they cannot walk around so much but that is hard if that is the way they lecture. I sit right at the front and usually in the middle. If you have got a pacer who goes up and down, and they do that for an hour, you get a really sore neck, so I have asked a couple of times, but you only get some people that do change that. I think they find it hard to get out of the habit. (Student, hearing impairment)*

There were however, many positive examples from both staff and students about how learning had been supported.

*There is no way [the student] can read something that is in normal print and in fact [the student] will sit in the front row, a metre-and-a-half from the screen and it's a floor-to-ceiling screen and won't be able to read the PowerPoint, which is quite large at a distance. So, for [this student's] lecture notes, what I have done is I take each slide, blow it up 140% and put it on to A3, so he will get like a big A3, but as it turns out 140% is perfect for fitting onto an A3. It's just a perfect size.*

*I help them with whatever is needed. Whether it is blowing up their tests into a larger size or arranging for Brailled versions or arranging for soft seats, or arranging for rooms that are darkened, without noise, all sorts of things. (General staff)*

*I think really all her tutor gave her was empathy and that was all she needed to get back on line. (Academic, supporting a student with mental health impairment)*

*I would try to accommodate some flexibility in the structure that may be enabled for the disability that the person was experiencing at that particular*

*time... I'd try and look at the structure and bend the structure to accommodate the needs of the student, within what I'm able to legitimately do. (Academic)*

*[My supervisor] knew that I was having problems. I'd stopped sleeping, I was having nightmares, I was doing all the things I do when I begin to get really depressed, and she knew that and assumed that I would deal with it, and she assumed I would be able to keep going and kept talking about the end point and what I was going to do next to get me to the end. So I don't know that she did that in a way that was deliberately helpful, but her assumption that I would just continue was actually really helpful... She made it possible for me to say what I need in a really blunt way and then accepted that that's what I needed and that I would continue to deliver even at a different level. She definitely was interested in me and she checked quite often that I was getting support and that I was taking care of myself and things like that, but what she didn't do was engage in any of my personal processes. She kept her eye on the goal ... But she didn't force me and there was a period there of probably three months when I just couldn't produce anything. I didn't respond to her e-mails terribly successfully and I just couldn't do anything. I was just pretty much stuck really at home. And I just kept getting encouraging e-mails saying 'let me know when you can pick it up' ... 'let me know what you want to do next' and 'have you thought about ...' and try and get me re-engaged in the process. (Student, mental health impairment)*

*I think I've become a lot more proactive in talking to my lecturers but with Disabilities, notifying them of my disability and them giving me ... I get extra time in tests and my lecturers tend to reach out and be like: 'do you need any other support?' And they are always there on hand to help me. (Student, medical impairment)*

The level of encouragement had in some cases made a critical difference to the student continuing with their studies.

*[The lecturers] had faith in me and it's that faith that has been very encouraging, or quite frankly I would have just left. (Student, medical and mobility impairments)*

*[In the first faculty] I didn't have the support to keep me on track and I'd go home and literally just sleep all afternoon and I wasn't actually putting the effort in and I didn't really know what was expected of me and I think I just let my illness kind of take control whereas in [this second faculty] I've been pushed quite a bit but I have to stay on top and I get monitored quite regularly as well. (Student, medical impairment)*

At times it would appear that University policies and processes are impacting on the ability of staff to provide support.

*It's often difficult to be flexible in individual situations. The University processes are quite rigid and there's an awful lot of bureaucracy around getting extensions. The University has very good processes for the groups of people who come through, so on a population level it's been excellent, but at an individual level it's often very difficult to advocate for someone and the form-filling in the process is quite lengthy. (Academic)*

*It's taken me an awful lot of time and effort to make sense of regulations and how best students can be understood and who to see about an issue. (Academic)*

Staff need to be cautious about what is within their jurisdiction and expertise when supporting students. For example, a graduate student with a mental health impairment explained that when she was starting to feel 'destabilised' and was considering going back onto medication to clear her head, one of her supervisors said 'don't do that, it's not good for you' which was not considered to be a helpful intervention.

#### **4.2 Inclusive teaching and learning strategies**

A range of inclusive teaching and learning strategies were described by staff and student participants. These include:

##### **Using a variety of teaching methods**

The most common inclusive teaching strategy mentioned by academic staff participants was incorporating a variety of teaching methods to accommodate different learning styles.

*I have a teaching philosophy around students as adult learners and [consider] that adult learning principles really tend to guide my teaching - that you believe that people have something to offer the learning situation...I believe that people have multiple styles, multiple ways of learning and that somehow we have to accommodate the multiple perspectives in terms of how people learn and to the types of teaching environments we create with people. So, some people as you know are visual, some people use their auditory component to learn a lot, some people are more tactile and like to get involved and I try to incorporate both adult learning [principles] and those multiple styles of learning. ... I believe even though we are very busy and we're often having to juggle multiple roles, we're here for students, so you give time and energy to student learning and prioritise that. (Academic)*

*I teach everybody. Probably part of that process is to try and use a variety of teaching methods that will reach different students who have their own different methods of learning I suppose... There are so few impairments that I am aware of, that it is hard to sort of consciously target any of those. So it's kind of a broad brush. Sort of hit them with everything and hope that you get most of them receiving the message and learning and responding. (Academic)*

*Out of 300 students there are going to be different learning needs, well, different needs full stop. (Academic staff member)*

*[Teaching for a variety of learning styles] is critical. 80% of our lecturers are probably visual verbal learners, so they are linear, bullet point people who can manage a lot of text and who don't tend to not think simple visuals or kinaesthetically. ... So basically I am saying that this isn't just about thinking for about what may work for you, it's also considering the way you teach. The way you teach for maximum learning for everybody - for inclusion of everybody. (Academic)*

*I understand that students have different learning needs, expectations and styles, so I try and cater for that. Not least by making students aware that they may learn differently and may have differences. For other students they have the responsibility for working out how they learn best and I think I teach to my learning style but it's not good for everyone. I have learnt that in different ways in the classroom and always by student responses. If you are open and approachable they are towards you as well - so students tell me what they like and don't like. ... I am not a mind-mapper for example, but my students turn out to be. And so I was answering a question one day in class and trying to verbalise it and I was thinking it through but the students were lost, so I drew a flow chart on the board laying everything out and so many came up to me and said 'oh that was great - that really worked', so I do a lot of that now. I don't learn or think that way, but they do.... So I accommodate their different styles. It doesn't mean giving them everything they want. I try and be thoughtful about what I do. (Academic)*

The same academic staff member also gave another example:

*I do a lot of buzz work with the students and my blind student finds that very difficult because she never knows when to step into the conversation because she can't read the visual cues when someone has finished or who is ready to speak and I have made sure I had a word to individual students that tend to be in her group about that, just to be aware of that and to make extra effort to include or to give her verbal signals rather than relying on visual ones - and that has worked quite well I think. (Academic)*

A student with a mental health related impairment explained how the more traditional teaching approach impacted negatively on her ability to learn.

*As a student you sort of have an expectation that you come ready prepared to learn and to, you know, and actually be actively involved and all that. The reality is that for someone like myself [with a mental health related impairment] I will have times when I haven't slept well, I'm struggling to stay awake, [and] I'm struggling to focus on what's been said. If the room is feeling closed in and it's sort of hot and close and there's not much variation in how something is being delivered then I just tune out, I just lose concentration. (Student, mental health impairment)*

In addition to teaching for learning styles, several academics mentioned that they made an effort to ensure that students had the key learning skills required. In some cases this related to specialised skills related to a particular subject area in addition to generic learning skills.

*Well, I find that the assumption is made that students come already knowing how to learn and they don't. Learning itself is an object of learning, and so as I say to my students I can't make you learn, it's a choice you have to make. I can facilitate and support, so I have been doing that for a number of years now and I find it works very well. With a small group of students it really makes a difference. (Academic)*

## **Being clear about requirements**

A number of the students described the importance of knowing the specific requirements for the course they were engaging in.

*With my learning difficulty, stress is a huge factor because the second I am stressed I have mind blocks and I can't do anything and that is like a waste of an hour or a day and maybe it can be more than that and it is quite frustrating. And for lecturers to be clear with assignments and with exam prep, I think they really try to be as clear as they think they are, but sometimes it's like sometimes ... I could spend a week trying to work out what the essay question actually is ... for me it isn't clear and often what they will do is: they will have the question itself or the essay and then they have 10 different explanations which just confuses you even more, so it kind of makes you think "well if you had just written the question properly, you wouldn't have to explain it so many times". (Student, learning impairment)*

Some staff also referred to the importance of this.

*My course outline has very detailed descriptions of what is expected and required. It is very particularised. Also in relation to assessment tasks I actually have separate sheets about what is expected and what is required. (Academic)*

*I sort of view my job as ... my job is to facilitate and help all the students in the class [to] get the most they can from what is going on in that class, so what I try to do is to reduce any possible obstacles to that - hopefully doing the best job of being clear and focused and making things accessible. (Academic)*

*A lot of my work is with first-year students and a lot of my work is with students who are coming back to University for the first time. I think this is a particular group, so I guess all the way through, especially with first years, I am quite careful in my delivery I suppose. I explain things properly and go through things carefully, because I think if people miss something then they are not going to be comfortable about asking. I like to have conversations rather than lectures. (Academic)*

*The other issue we have is ... clear timelines at the beginning of the course. I have had students whose course timeline kept shifting e.g. [one paper] must have so many thousand students in it and the course outline had that the tests were to be handed in before they were actually given out. That was actually in the timetable ... so I mean those sorts of things should be checked before they start issuing them to students. I rang and they said "well that is later on in the semester", but this student is planning now. Those students need to have their diary (because they process slowly) sorted right at the beginning of semester. (Academic)*

## **Speaking clearly and pacing**

Two of the academic staff members mentioned the importance of speaking clearly and at an appropriate pace.

*I am aware and I have learnt through students making themselves known and what their needs are, such as speaking too fast, people let me know. I have*

*had two blind students in my career to date as I find they have specific demands because they can't take cues and things like that. If they can't read the signals, that can cause problems. (Academic)*

*I do try to pace myself so that I am not running to the end of a lecture and I don't know if that has any sort of impact in terms of anyone that might have a disability. (Academic)*

### **Challenges for staff**

Staff identified a number of challenges they experienced in implementing appropriate teaching and learning strategies.

1. Increased expectations of students.

Some of the staff participants perceived there to be greater expectations from students with impairments, particularly those who had longer term impairments and had come to university straight from school.

*Yes and I think that more students are coming out from the secondary system with an awareness of the help that is available and this is just a flow-on to the universities and we are having to be aware of it and provide the resources. (General staff)*

2. Large classes.

*Occasionally when dealing with very large classes, it is difficult to accommodate various sorts of exceptions to the normal behaviour or normal rules. In smaller classes it's a lot easier to manage.... It's just that our classes have got much larger in the last few years, so we are feeling pressure from that new environment really. We are teaching 250 instead of 50, that sort of thing, or teaching up to 600. (Academic)*

3. Making accommodations without compromising the integrity of their teaching philosophy.

*I know there are limitations of what I can do as well, that the system doesn't already provide,...with my blind student in particular, there are limitations to what I can do because the way that I want to run [my classes] and need to run the course with other students, she can't be accommodated to some levels because ... she will never have the same advantage of some of the others to read the cues like the others have. (Academic)*

*My view is to try to be as supportive as I can within the context, but not to necessarily disadvantage other students because there is always [a] sort of weighing up ... that is actually sort of the crux of the issue like this particular issue with the student with the lights. (Academic)*

*The counter argument for the general student populations is that by providing all this material and the really comprehensive course books and lecture notes and everything, what we are actually doing is to some extent dampening their ability of learning and so it does have a counter thing and we have to balance this up, so if we are serving all this stuff up on [a] silver plate, that is a*

wonderful idea for disabled students but for most of the students, their quest to go and explore and find new knowledge, that dampens that drive to do that, which is probably a big debate in the University at the moment. (Academic)

## 5 Staff development

Staff development initiatives include disability issues and ensure that staff have the knowledge and skills to work effectively with people with impairments and create a fully inclusive environment. (Kia Ōrite, 2004, p39).

Several staff referred to how the Centre for Academic Development (CAD) had supported them to incorporate inclusive teaching strategies.

*The people at CAD have been helpful for years and I have never felt I couldn't approach people there. I did courses earlier on in my career, less so now. I read a bit, educational theory and practice. (Academic)*

*When we are talking about inclusive learning environments, we are also talking about teaching practice and we are academics, we study our fields, we are not trained teachers, we don't have a BA in Education so that is also part of working with the Centre for Academic Development ... learning how to become good teachers and that is something that I do and I bring them [in] to run workshops ... (Academic Staff member)*

The Student Learning Centre (SLC) has an initiative of highlighting inclusive teaching practices to support students with learning impairments in the CAD magazine aCADemix.

*It's like a slow progression, starting with aCADemix but we have been invited by a few Faculties to come in and present a seminar, which is great, so we have just recently done Theology. Last year we did psychology and I think we have done one other faculty and my goal would be in the next aCADemix, given we have worked on this PowerPoint in this little half hour presentation, to actually go in. We are going to do a blurb and ask 'do you want us to come in and discuss it?' (Academic)*

A few of the staff interviewed believed they already had a good knowledge of resources available and how to find information that might be required.

*I'm well aware of what resources the University does have and I think that's part of being in the structure. I'm in the structure, I was in the structure as a student as well as being here as an employer/employee. So that awareness grew. I can't really tell you if it was told to me in orientation but you know I'm certainly aware of a lot of support that exists around, both within our school and the wider faculty and the University that can assist people. And if I didn't know that and saw a need there and believed it was need around education I would consult with senior people in the school who maybe have a coordinating role for the programme and I would say 'I've got this concern with a student and I believe it's impinging on their learning needs- what's available in the University?' If I didn't know I'd ask. (Academic)*

Others referred to a lack of knowledge about how best to support students with impairments.

*Because people are unaware of disability and disability-related issues, I think there is discomfort about it... I don't know, what are their needs, is that huge, am I going to have to walk somebody to the bathroom? I mean if you talk to people who are blind or vision-impaired and they are, like, give me a week and I will sort it out ... I just need one person to show me around and then I am good to go. I think the staff would really benefit from just some awareness, to make people feel more comfortable that in many cases it's making small changes in what you do that makes a great difference, that makes what you do and how you do it much more inclusive. (Academic staff member)*

*No papers, nothing in print, nothing on the web. I think it is about having facilitators come in and talk. I think it's about giving people the language to talk and getting it out there so that people feel confident to be inclusive. Working with disabled people to come in and actually run those [sessions] and certainly with the experience of disability would be a great way to do that. I think it would get a turnout because I know everyone ... [would] appreciate even just learning a bit about the language and what words mean. (Academic staff member)*

For some their level of confidence depends on the type of impairment the student may have.

*I don't feel competent in things like behavioural or mental sorts of problems... such as panic attacks or depression and things like that... I think I have enough confidence and experience maybe to take a chance and try and do something immediately, if possible. (Academic)*

## **6 Policy**

The main imperative, identified by staff and students, for provision and awareness of policies and guidelines to support an inclusive teaching and learning environment was to reduce barriers for students with impairments.

*I would encourage other staff to be open and welcoming with students and to know what services are available at the University, like disability services, to be familiar with Equity policies, to understand their responsibility to support students with disabilities and impairments. (Academic)*

*Even if there is something circulated on the email, something from the Vice-Chancellor's office perhaps. This is something which needs to be highlighted then it will be in your face a little and not buried on the net. (Academic)*

*I think it is important for all staff to be aware that there are policies and to have regular, kind of refresher dates because I think it is an extra burden for students with disability, if when they approach any University service or whatever, that there is almost a sort of disability panic... sometimes, well meaning staff can kind of raise the tension about whatever needs to be done and if you are aware of policies and you are aware of how things actually work in practice, it is much easier to be quite direct. (General staff)*



*What would be really helpful would be a guideline for the future ... because the last thing you would want is a student coming up where there is a crisis and you are half way through the course because then it's a lot more work for everyone to try and repair that situation. So, you [need to] be absolutely proactive, have things in place, know what the students wants or needs. (Academic)*

*I didn't know it was possible to do limited full-time so my HOD told me about that and made me aware that if I had that (disability) status I would still be eligible for funding. She was really supportive. (Student, medical impairment)*

Reference was also made to the need for consistent policies to support the learning of student's with impairments such as the provision of lecture notes in advance.

*Talk to the [student] before the actual course starts to see what they need. Find out maybe what their impairment is . . . find a way to help them and not just dismiss it because it's department policy not to provide certain things. (Student, visual impairment)*

Some also mentioned that being aware of statutory requirements is an important consideration. One staff member had this brought to her attention when attending an Australasian conference:

*The grim reality was: students taking personal grievance cases were actually the thing that achieved the most change. I am fearful that this could actually happen here because [there are] a few very articulate students who, for various reasons, feel as though they haven't been dealt with fairly. A brilliant example is special conditions entry requirements [which say] students must have a physical disability, well a student saying 'look, dyslexia has been proven from this very university that it has a physical origin in a particular part of the brain,' what shall we do about it? Eventually that student sort of cooled down, but all it will take is that shift to change it. (Academic)*

One student also alluded to growing awareness of her rights and statutory requirements saying:

*Actually when you are an undergrad or you have just come out of high school and it's your first year at uni you don't know what you are entitled to and you are pretty submissive to authority. So when the [course] co-ordinator said no it's against policy I just took it as that, whereas if I was to go back now, I would probably not take it and [I would say] 'look I am paying the same as everybody else so why shouldn't I be able to see the same slides as everybody else'. (Student, visual impairment)*

Staff participants from the Faculty of Education also discussed the growing awareness in the faculty of the need for policy and guidelines to address statutory obligations around the eligibility for professional registration of students with impairments.

*I mean it is a very hard philosophical issue; do you want someone with dyslexia as a primary teacher, who is teaching basic literacy, who can't identify your child's spelling mistakes? There needs to be a lot of education and research out*

*there to prove that those students have a place, but I am inclined to argue that those students need extra support because that is effective teaching practice again. We need to teach the teachers... Our students need realistic ideas about what is achievable based on their ability and the ability of the University to provide it. (Academic)*

*Probably the biggest challenges that I have had is the fact that all the students are training for a professional programme, they are going to be teachers and social workers and they need to be registered. Whereas someone doing a BA probably didn't really think beyond graduation and now I have to think so much further forward because the faculty at the University is responsible for what we are saying to the New Zealand Registration Board: 'this person is fit to teach'... I think it's really unfair for a student to be accepted onto a programme and then three years down the track [to be told] well you are not actually going to be able to teach.... I know that there are a couple of other staff members on campus that have said time and time again that they could develop a programme where they are doing all of the education papers and you can go off into research and work for the Ministry of Education but you are not actually able to practice as a teacher. The Faculty of Medical and Health Science wrote a policy which the Faculty of Education have borrowed, and the Equity Committee is working on [developing] a policy. I don't think for any 18- year-old that comes here you know whether they are going to be able to teach, and I don't think it's definitely my place or anybody else's place to decide how a disability is going to impact on them in three or four years' time. So that all needs to be nussed out and there needs to be transparency. (General staff)*

## **7 Additional challenges to learning for students**

Many of the student participants identified additional challenges they experience. These include illness, tiredness, and family and/or cultural responsibilities.

*It's been really hard again with this paper, it's um, been complicated by the fact that my mental state hasn't been that great - certainly in the last couple of months - and my wife has also gotten depressed and had probably 4-5 weeks off work. So that's been hard going, and probably complicated by some health issues that I've had as well. I've been sick with sinuses and stuff like that and [not] sleeping and what-have-you. Yeah it sort of all mounts up a bit and sometimes it's hard to see the wood for the trees as it were. (Student, mental health impairment)*

*Besides the fact that I'm a disabled student I'm actually a mature student - which does start to sometimes [cause] just as many problems as being disabled, particularly when you come to an institution where it's geared towards a much younger person. (Student, medical impairment)*

*Well my overall health ... plus I have got, as you get older, more people in your family get sick and die and they don't die quickly, so when you have got dying family left right and centre it does make attending difficult. On top of the health and disability issues it is just another thing to have to contend with as far as trying to study and succeed - to study successfully... [I failed two papers], because of failure to make satisfactory academic progress due to illness and family deaths. I think healthy and able-bodied people would take the family*

*deaths in their stride because they are like the three-legged stool, but I am already the two-legged stool and then the family dying in the same year, that means I am a one-legged stool. Something is going to totter over. I am already disadvantaged by the physical and health impairments, so I think able-bodied people find it difficult enough. (Student, medical and mobility impairments)*

*.. even though those things help, but they are just yet another thing that I have to do. It's just more work - before I even get to study. Like I said, it would be fine if I could just study, but it's all this other stuff I have to spend my energy on. It's just too much. I must say [X] at Disability Services is a great advocate. She is very much a bolshie person when she has to be. I could probably enlist her but sometimes ... to me it's just another thing to have to ask for. Another time, another effort. (Student, medical and mobility impairments)*

*It's the pace of the learning and the volume of the learning. I have to slow it down and sort of break it into little bits so that I can do it. This year we have three-hour lectures which are shortened versions; formerly they were always four-hour lectures, which is a long time even with a break. You know we'd sort of have a couple of coffee breaks usually but that's a long time for anyone to sit, with or without a disability. I'd often just find myself nodding off towards the end of those, unfortunately. So they have shortened those for everybody which is good. I found when I first came back last semester after I'd had the stroke I could only manage mornings. (Student, visual impairment)*